Maximizing Vaccine Uptake in Your Practice

Susan Sirota, MD
CME Accreditation Statement

The Illinois Chapter, American Academy of Pediatrics is accredited by the Illinois State Medical Society (ISMS) to provide continuing medical education for physicians.

The Illinois Chapter, American Academy of Pediatrics designates each live webinar activity for a maximum of 1 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Nurses and Nurse Practitioners can submit Certificates of Attendance to their accrediting board for credit for participation in the live webinars.
<table>
<thead>
<tr>
<th>Name and Credentials</th>
<th>Role in Activity</th>
<th>Was there a relevant Financial Disclosure</th>
<th>List of Mitigated Disclosures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Megan Kane Towle, MMS, PA-C</td>
<td>Planning Committee Member</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Craig Batterman, MD</td>
<td>Planning Committee Member</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Caroline Werenskjold, MPH</td>
<td>Staff</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Laura Buthod, MD</td>
<td>Planning Committee Member</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Magale Avitia MPH, CHES</td>
<td>Staff</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Joseph Hageman, MD</td>
<td>CME Reviewer</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Susan Sirotta, MD</td>
<td>Faculty/Presenter</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Sarah Parvinian, MD</td>
<td>CME Reviewer</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Sharon Hovey, MD</td>
<td>Planning Committee Member</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Kathleen Sanabria</td>
<td>Planning Committee Member</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Stephanie Atella</td>
<td>Staff</td>
<td>No</td>
<td>N/A</td>
</tr>
<tr>
<td>Erin Moore</td>
<td>Staff</td>
<td>No</td>
<td>N/A</td>
</tr>
</tbody>
</table>
Susan Sirota, MD

Primary Care Pediatrician, PediaTrust Pediatric Partners in Highland Park and Vernon Hills, IL

Board Chairperson and CMO, PediaTrust

Assistant Professor, Clinical Pediatrics, Northwestern Feinberg School of Medicine

Mother of three vaccinated children
“It is always better to prevent a disease than to treat it after it occurs”

-CDC
Objectives

- Review current challenges and the impact on vaccine uptake
- Develop an approach to conversations around hesitancy
- Understand strategies to identify under vaccinated patients
- Become familiar with implementing outreach strategies in your practice
- With patient barriers in mind, utilize a creative team approach
Current Challenges

Vaccine Hesitancy and Refusal
COVID-19 Pandemic Impact
Vaccine Hesitancy and Refusal Impact: Where are We Now?

- CDC Child VaxView
- AAP Child Vaccinations Across America Map
≥1 Dose MMR Vaccination Coverage by Age 24 Months among Children Born in 2018,
National Immunization Survey-Child

Select a Vaccine
- ≥1 Dose MMR
- ≥1 Dose Varicella
- Combined 7 Series
- Influenza
- Rotavirus
- DTaP
- Hep A

Select Geographies
- Select All
- HHS Regions/National
- States/Local Areas
- Alabama
- Alaska

Select a Birth Year/Cohort
- 2018
- 2017-2018
- 2017
- 2016
- 2015-2016
- 2015
- 2014
- 2013
- 2012
- 2011

Select on Age
- 13 Months
- 19 Months
- 24 Months
- 36 Months

Legend - Coverage (%)
- 69.8 - 90.1
- 90.2 - 92.0
- 92.1 - 93.0
- 93.1 - 95.0
- 96.0 - 99.0
- Not Available
Vaccine Refusal

- What we learned in 1954
- Health Belief Model
- What we learned in 2021
- AAP Vaccine Refusal Policy
- AAP Countering Vaccine Hesitancy Clinical Report
- AAP Vaccine Refusal Form
AAP Refusal to Vaccinate Form


Refusal to Vaccinate

Child’s Name ____________________________
Child’s ID ____________________________

Parent/Guardian’s Name ____________________________

My child’s doctor/healthcare provider has advised me that my child (named above) should receive the following vaccines:

Recommended
□ Hepatitis B vaccine
□ Diphtheria, tetanus, acellular pertussis (DTaP) or (Tdap) vaccine
□ Tetanus toxoid (Td) or (Td) vaccine
□ Measles, mumps, and rubella (MMR) vaccine
□ Pneumococcal conjugate vaccine
□ Inactivated poliovirus vaccine (IPV)
□ Varicella (chickenpox) vaccine
□ Flu vaccine
□ Meningoconjugate vaccine or poliovaccine
□ Hepatitis A vaccine
□ Rotavirus vaccine
□ Human papillomavirus (HPV) vaccine
□ Other ____________________________

I have been provided with and have the opportunity to read each Vaccine Information Statement from the Centers for Disease Control and Prevention explaining the vaccine(s) and the diseases it prevents for each of the vaccine(s) checked as recommended and which I have declined, as indicated above. I have had the opportunity to discuss the recommendation and my refusal with my child’s doctor or nurse, who has answered all of my questions about the recommended vaccine(s). A list of reasons for vaccinating, possible health consequences of non-vaccination, and possible side effects of each vaccine is available at www.cdc.gov/vaccines/html/schedule.pdf.

Understand the following:

□ The purpose of the need for the recommended vaccine(s).

□ The risks and benefits of the recommended vaccine(s).

□ That some vaccine-preventable diseases are common in other countries and that my unvaccinated child could easily get one of these diseases while traveling or from a traveler.

□ If my child does not receive the vaccine(s) according to the medically accepted schedule, the consequences may include:

- Contracting the illness the vaccine is designed to prevent
- The outcomes of these illnesses may include one or more of the following: serious harm or death from a vaccine-preventable disease
- Transmitting the disease to others (including those too young to be vaccinated or those with immune problems), possibly requiring my child to stay out of school or day care and requiring someone to miss work to stay home with my child during their health care needs.

□ My child’s doctor and the American Academy of Pediatrics, the American Academy of Family Physicians, and the Centers for Disease Control and Prevention all strongly recommend that the vaccine(s) be given according to recommendations. Nevertheless, I have decided at this time to decline or defer the vaccine(s) recommended for my child, as indicated above, by signing the appropriate box under the column titled “Declined.” I understand that following these recommendations for vaccination may endanger the health or life of my child and others with whom my child might come into contact. Therefore, I agree to tell all health care professionals in all settings what vaccines my child has not received because he or she may need to be isolated or may require immediate medical evaluation and tests that might not be necessary if my child had been vaccinated.

I know that I may reallocate this issue with my child’s doctor or nurse at any time and can rescind this form and accept vaccination for my child at any time in the future.

I acknowledge that I have read this document in its entirety and fully understand.

Participant’s Authorization to Receive Information: This document contains a wealth of information to help pediatricians develop a productive dialogue with vaccine-hesitant parents and answer questions about vaccine risks and benefits.

Waltz B, AAP. Childhood Immunization Information Program (CIP) website: www.aap.org/immunization
1. Immunization Information Program (IIP). The IIP website offers immunization rates by state and county for selected vaccine-preventable diseases. The IIP is supported by the Agency for Healthcare Research and Quality (AHRQ), a unit of the Department of Health and Human Services (DHHS), and the CDC, which is part of the U.S. Department of Health and Human Services (HHS).

2. Centers for Disease Control and Prevention (CDC) National Immunization Program
4. Immunization Information Program (IIP) website: www.aapimmunization.org
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.immunize.org
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization

Books
2. Centers for Disease Control and Prevention. Immunization Information for Parents: The Immunization Information Program (IIP).
3. Immunization Information Program (IIP) website: www.aap.org/immunization
4. Immunization Information Program (IIP) website: www.aap.org/immunization
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.aap.org/immunization
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization

Downloadable Resources
1. AAP Refusal to Vaccinate Form
2. AAP Childhood Immunization Information Program
3. Immunization Information Program (IIP) website: www.aap.org/immunization
4. Immunization Information Program (IIP) website: www.aap.org/immunization
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.aap.org/immunization
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization

Additional Resources
1. AAP Refusal to Vaccinate Form
2. AAP Childhood Immunization Information Program
3. Immunization Information Program (IIP) website: www.aap.org/immunization
4. Immunization Information Program (IIP) website: www.aap.org/immunization
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.aap.org/immunization
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization

Related Immunization Resources for Parents
1. AAP Childhood Immunization Information Program
2. Immunization Information Program (IIP) website: www.aap.org/immunization
3. Immunization Information Program (IIP) website: www.aap.org/immunization
4. Immunization Information Program (IIP) website: www.aap.org/immunization
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.aap.org/immunization
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization

Vaccines Take Effect
This form is to be used for a record of vaccine administration and to be kept for as long as the vaccine is effective. It is used to record the number of vaccines and the diseases they prevent, including information on adverse events and the recommendations of the immunization schedule.

Books
2. Centers for Disease Control and Prevention. Immunization Information for Parents: The Immunization Information Program (IIP).
3. Immunization Information Program (IIP) website: www.aap.org/immunization
4. Immunization Information Program (IIP) website: www.aap.org/immunization
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.aap.org/immunization
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization

Downloadable Resources
1. AAP Refusal to Vaccinate Form
2. AAP Childhood Immunization Information Program
3. Immunization Information Program (IIP) website: www.aap.org/immunization
4. Immunization Information Program (IIP) website: www.aap.org/immunization
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.aap.org/immunization
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization

Additional Resources
1. AAP Refusal to Vaccinate Form
2. AAP Childhood Immunization Information Program
3. Immunization Information Program (IIP) website: www.aap.org/immunization
4. Immunization Information Program (IIP) website: www.aap.org/immunization
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.aap.org/immunization
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization

Related Immunization Resources for Parents
1. AAP Refusal to Vaccinate Form
2. AAP Childhood Immunization Information Program
3. Immunization Information Program (IIP) website: www.aap.org/immunization
4. Immunization Information Program (IIP) website: www.aap.org/immunization
5. Immunization Information Program (IIP) website: www.aap.org/immunization
6. Immunization Information Program (IIP) website: www.aap.org/immunization
7. Immunization Information Program (IIP) website: www.aap.org/immunization
8. Immunization Information Program (IIP) website: www.aap.org/immunization
9. Immunization Information Program (IIP) website: www.aap.org/immunization
10. Immunization Information Program (IIP) website: www.aap.org/immunization
Impact of COVID-19 Pandemic

• Sheltering in place
• Remote learning and easing of vaccine requirements
• Reduction in Well Child visits
  • Some offices not seeing patients
  • Parents fearful to come to office
  • Some practices closing/physicians retiring
  • Job loss and loss of insurance coverage
• Fewer appointments with challenges of separating well and sick visits
Impact of COVID-19 Pandemic

- In IL vaccine rates for children < 2yrs dropped 25-30% in March 2020
- Well child visits dropped 50-70% in 2020
- A year later there had been limited recovery in the 2-18 yr age group
- **There is risk for vaccine preventable outbreaks as more children remain unvaccinated**
FIGURE. Weekly changes in Vaccines for Children Program (VFC) provider orders* and Vaccine Safety Datalink (VSD) doses administered† for routine pediatric vaccines — United States, January 6–April 19, 2020

MMWR: Kindergarten Vaccine Coverage 2020-21
Included coverage rates by state
Included data on medical and nonmedical exemption
IL among states that didn’t report
## Morbidity and Mortality Weekly Report

### TABLE. Estimated vaccination coverage for measles, mumps, and rubella vaccine, diphtheria, tetanus, and acellular pertussis vaccine, and varicella vaccine, grace period or provisional enrollment, and any exemption among kindergartners, by immunization program — United States, 2020–21 school year

<table>
<thead>
<tr>
<th>Immunization program</th>
<th>Kindergarten population</th>
<th>% Surveyed</th>
<th>2 of MMR***</th>
<th>5 of DTaP††</th>
<th>2 of varicella§§</th>
<th>% Grace period or provisional enrollment</th>
<th>% Any exemption</th>
<th>Percentage point change in any exemption from 2019–20 school year</th>
<th>% No documentation§§</th>
<th>% Out of compliance***</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>National estimate††††</strong></td>
<td>3,520,205</td>
<td>90.8</td>
<td>93.9</td>
<td>93.6</td>
<td>93.6</td>
<td>2.0</td>
<td>2.2</td>
<td>-0.3</td>
<td>1.0</td>
<td>3.4</td>
</tr>
<tr>
<td><strong>Median††††</strong></td>
<td>NA</td>
<td>NA</td>
<td>93.7</td>
<td>93.4</td>
<td>93.7</td>
<td>2.1</td>
<td>2.5</td>
<td>-0.2</td>
<td>0.7</td>
<td>2.8</td>
</tr>
<tr>
<td><strong>Alabama§§§§</strong></td>
<td>56,974</td>
<td>100.0</td>
<td>≥94.7</td>
<td>≥94.7</td>
<td>≥94.7</td>
<td>NP</td>
<td>1.3</td>
<td>0.1</td>
<td>NR</td>
<td>3.7</td>
</tr>
<tr>
<td><strong>Alaska</strong>********</td>
<td>9,461</td>
<td>92.5</td>
<td>NR</td>
<td>NR</td>
<td>NR</td>
<td>NR</td>
<td>4.0</td>
<td>-1.9</td>
<td>NR</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Arizona</strong>********</td>
<td>76,382</td>
<td>93.4</td>
<td>91.9</td>
<td>92.0</td>
<td>95.5</td>
<td>NR</td>
<td>5.5</td>
<td>0.0</td>
<td>NR</td>
<td>0.6</td>
</tr>
<tr>
<td><strong>Arkansas§§§§</strong></td>
<td>37,540</td>
<td>95.6</td>
<td>93.2</td>
<td>92.3</td>
<td>92.8</td>
<td>10.0</td>
<td>2.0</td>
<td>0.1</td>
<td>NR</td>
<td>1.2</td>
</tr>
<tr>
<td><strong>California</strong>********</td>
<td>498,214</td>
<td>97.5</td>
<td>95.1</td>
<td>94.7</td>
<td>94.8</td>
<td>0.7</td>
<td>0.5</td>
<td>-0.3</td>
<td>NR</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Colorado</strong>****</td>
<td>63,619</td>
<td>97.3</td>
<td>90.5</td>
<td>90.1</td>
<td>89.4</td>
<td>0.5</td>
<td>≥4.2</td>
<td>-0.7</td>
<td>NR</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Connecticut§§§§</strong></td>
<td>34,396</td>
<td>100.0</td>
<td>95.3</td>
<td>95.3</td>
<td>95.1</td>
<td>NP</td>
<td>2.6</td>
<td>0.1</td>
<td>NR</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Delaware</strong>********</td>
<td>10,587</td>
<td>9.2</td>
<td>95.7</td>
<td>94.9</td>
<td>95.3</td>
<td>NR</td>
<td>2.4</td>
<td>NA</td>
<td>0.5</td>
<td>6.1</td>
</tr>
<tr>
<td><strong>DC§§§§</strong></td>
<td>8,262</td>
<td>100.0</td>
<td>78.9</td>
<td>78.5</td>
<td>78.0</td>
<td>NR</td>
<td>0.3</td>
<td>NA</td>
<td>4.8</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Florida§§§§</strong></td>
<td>207,026</td>
<td>100.0</td>
<td>≥93.3</td>
<td>≥93.3</td>
<td>≥93.3</td>
<td>3.4</td>
<td>3.1</td>
<td>-0.3</td>
<td>NR</td>
<td>0.2</td>
</tr>
<tr>
<td><strong>Georgia§§§§</strong></td>
<td>83,191</td>
<td>100.0</td>
<td>≥88.5</td>
<td>≥88.5</td>
<td>≥88.5</td>
<td>0.6</td>
<td>2.9</td>
<td>-0.1</td>
<td>1.0</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Hawaii</strong>*****</td>
<td>13,074</td>
<td>93.0</td>
<td>90.7</td>
<td>91.3</td>
<td>87.2</td>
<td>0.1</td>
<td>3.7</td>
<td>-2.4</td>
<td>0.9</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Idaho</strong>****</td>
<td>22,677</td>
<td>98.3</td>
<td>86.5</td>
<td>86.4</td>
<td>86.2</td>
<td>1.5</td>
<td>8.2</td>
<td>0.6</td>
<td>1.2</td>
<td>7.2</td>
</tr>
<tr>
<td><strong>Illinois</strong>********</td>
<td>78,694</td>
<td>71.4</td>
<td>93.1</td>
<td>83.9</td>
<td>92.8</td>
<td>NR</td>
<td>1.9</td>
<td>-0.3</td>
<td>0.7</td>
<td>16.6</td>
</tr>
<tr>
<td><strong>Iowa§§§§</strong></td>
<td>39,141</td>
<td>100.0</td>
<td>≥93.4</td>
<td>≥93.4</td>
<td>≥93.4</td>
<td>3.1</td>
<td>2.2</td>
<td>-0.3</td>
<td>NR</td>
<td>1.3</td>
</tr>
<tr>
<td><strong>Kansas</strong>************</td>
<td>34,687</td>
<td>32.7</td>
<td>92.6</td>
<td>90.8</td>
<td>91.8</td>
<td>NR</td>
<td>2.0</td>
<td>-0.1</td>
<td>1.3</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Kentucky§§§§</strong></td>
<td>59,233</td>
<td>86.4</td>
<td>88.9</td>
<td>89.4</td>
<td>88.3</td>
<td>NR</td>
<td>1.0</td>
<td>-0.8</td>
<td>5.9</td>
<td>NR</td>
</tr>
<tr>
<td><strong>Louisiana§§§§</strong></td>
<td>61,912</td>
<td>100.0</td>
<td>96.2</td>
<td>96.9</td>
<td>93.2</td>
<td>NP</td>
<td>1.1</td>
<td>-0.4</td>
<td>0.3</td>
<td>NR</td>
</tr>
</tbody>
</table>
Most recent update

In the 2020-2021 school year, vaccination coverage nationally declined:

- 93.9% for 2 doses of MMR (range 78.9% to 98.9%)
- 93.6% for the state-required number of doses of DTaP
- 93.6% for the state-required doses of varicella vaccine.
- Compared with the 2019–20 school year, vaccination coverage decreased by approximately one percentage point for all vaccines.
- MMR coverage and exemptions for ≥1 vaccines decreased in approximately 75% of states
Vaccine Exemptions

• Although 2.2% of kindergartners had an exemption from at least one vaccine, an additional 3.9% who did not have a vaccine exemption were not UTD for MMR.

• 2.2% of kindergartners had an exemption for ≥1 required vaccines (not limited to MMR, DTaP, and varicella vaccines) in 2020–21 (range = 0.1% [Mississippi and New York] to 8.2% [Idaho]).

• 2.5% had an exemption reported during the 2019–20 school year.

• Nationally, 0.2% of kindergartners had a medical exemption and 1.9% had a nonmedical exemption.
Pandemic Impact

- Reduced access to well visit appointments
- Expanded grace periods
- Easing of vaccine requirements for remote learners
- Reduced submission of vaccine documentation
- Competing demands on school RN time:
  - Follow up on missing documentation
  - Limited time to conduct assessment and reporting
  - Vaccination requirements became a lower priority for schools
COVID-19 Vaccine Uptake

Addressing vaccine hesitancy matters
Status of COVID-19 Vaccinations for US Children

Proportion of US Children Ages 5-11 Who Received the Initial Dose of the COVID-19 Vaccine, by State of Residence

Received Initial Dose

- as of 7.6.2022

16% 68%


Status of COVID-19 Vaccinations for US Children

Cumulative Number of US COVID-19 Vaccine Recipients Ages 5-11

11.3.21 to 7.6.2022

Source: AAP analysis of data series titled “COVID-19 Vaccinations in the United States, Jurisdiction”, CDC COVID-19 Data Tracker (URL: https://data.cdc.gov/Vaccinations/COVID-19-Vaccinations-in-the-United-States-Jurisdiction). Check state website for additional or more recent information. Check state website for additional or more recent information. Notes: Age information was provided with Idaho data since 1.25.2022. Inclusion of this information added 31K initial-dose recipients to the 5-11 age group nationally as of 2.2.2022.
Status of COVID-19 Vaccinations for US Children

Cumulative Number of US COVID-19 Vaccine Recipients Ages 12-17

5.19.21 to 7.13.2022

Status of COVID-19 Vaccinations for US Children

Proportion of US Children Ages 5-11 Vaccinated Against COVID-19 by State of Residence

as of 7.6.2022


Under 5 Age Groups

One In Five Parents Of Children Under 5 Want To Vaccinate Their Child For COVID-19 Right Away When Authorized, But Four In Ten Want To Wait And See

Thinking about your child between the ages of...have they received at least one dose of a COVID-19 vaccine, or not? If not, do you think you will get them vaccinated...?

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Child is vaccinated</th>
<th>Right away</th>
<th>Wait and see</th>
<th>Only if required</th>
<th>Definitely not</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 12-17</td>
<td>56%</td>
<td>4%</td>
<td>4%</td>
<td>31%</td>
<td></td>
</tr>
<tr>
<td>Ages 5-11</td>
<td>39%</td>
<td>13%</td>
<td>12%</td>
<td>32%</td>
<td></td>
</tr>
<tr>
<td>Under 5</td>
<td>18%</td>
<td>38%</td>
<td>11%</td>
<td>27%</td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Asked of parents or guardians of children under 18. For parents of children under 5, question was worded “Thinking about your child under the age of 5, once there is a COVID-19 vaccine authorized and available for your child’s age group, do you think you will...?” See topline for full question wording.


Under 5 Age Groups

Number and Proportion of US Infants and Children Ages 6 Months - 4 Years Receiving Initial Dose of COVID-19 Vaccine

Cumulative

Weekly

* Includes clinical trial participants under age 5 through 6/22/2022.

6/22.22 to 7/13.22
Under 5 Age Groups

Proportion of US Children Ages 6 Months - 4 Years Who Received the Initial Dose of the COVID-19 Vaccine, by State of Residence

Received Initial Dose as of 7.13.2022

Note: Infants 6 months and older are estimated as half of infant population based on AAP analysis of report published by US Bureau of Census on June 17, 2021, titled "State Population by Characteristics: 2010-2020. Single Year of Age and Sex for the Civilian Population."

Confirmed COVID-19 Past-week Pediatric Hospital Admissions by Pediatric Age Group, 50 States and District of Columbia, by Week

2.8.2022* - 6.28.2022

Ages 0-4

Ages 5-11

Ages 12-17

* Age data was required of state reports as of 2.2.2022, but continued to be missing sporadically from reported pediatric admissions. Source: AAP analysis of COVID-19 pediatric admissions based on the "COVID-19 Reported Patient Impact and Hospital Capacity by State Timeseries" published by the U.S. Department of Health & Human Services.
Conversations: Vaccine Hesitancy

What Works?
What You Can Do

- Be sure to make a firm recommendation for vaccination
- Show empathy and understand the reasons for hesitancy
- Discuss shared desires to protect their child
- Share your experience—you’re the most trusted source of information
- Address known risks and counter misinformation
- Address unknown risks
- Provide reliable sources of information
- Partner respectfully with hesitant communities
What You Can Do

- Introduce all vaccines the same way/Announcement style
- Confidently recommend the vaccine
- Effectively answer questions about efficacy and safety
- Open-ended questions
- Shared decision making
- Reflect concerns, show empathy
- Share information respectfully

- **Same Day Same Way App**
  - Role play simulation
Motivational Interviewing

• Steps in Motivational Interviewing: “OARS”
  
  • Open-ended questions,
  • offer Affirmations
  • Use Reflective listening
  • Summarize the visit
Effective COVID-19 Vaccine Conversations

• Five-module PediaLink Course

• Free for members

• https://shop.aap.org/effective-covid-19-vaccine-conversations/
Identifying Unvaccinated Patients

EHR
I-CARE
Structured Chart Review

Image source: cdc.gov
Avoiding Missed Opportunities

COVID-19:

• Ask about vaccine status and plans for vaccine at every touchpoint

• Do not miss an opportunity to vaccinate every eligible person when they are ready to get vaccinated

• Hospital providers: vaccinate before discharge!

• Remember, it is better to puncture a new vial and waste doses than not vaccinate someone who is ready
Identify Due/Overdue Patients

1. Decide on an age range to focus on.
2. Run an I-CARE query for all patients in your selected age range who are 30+ days behind on vaccination.
3. Run the same query in the EHR.
4. Pull the records for everyone who came up on the lists.
5. Reconcile the lists and update the EHR or I-CARE with missing information.
6. Remove any patients who have moved or gone elsewhere from the list.

Let Them Know They are Due/Overdue

• Consider communication preferences of patients and families in your practice

What percent of patients actively utilize the patient portal?

Do patients respond to mailed reminders, or are patients/families more responsive to individual phone calls?

Do families find text messages more convenient?

Implementing Outreach Strategies

Recall, Recall, Recall
# Reminder or Recall Strategies

## Phone calls
- Placed by office staff tend to be more effective than auto-dialer calls, but often cost more in staff time.

## Auto-dialers
- Automatically dial phone numbers and either play a recorded message or connect the call to a live person; can also be used for appointment reminders.

## Mail reminder cards or letters (“snail mail”)
- May be printed and provided to you by I-CARE or you can pull a list from your EHR.
- Another approach: have the family fill out the reminder card for the next visit (e.g., dose 2 or 3 of vaccine) when in your office.

## Text messages
- Can be sent to remind parents or adolescents about vaccinations; however, they will need to “opt in”. Obtaining this permission might be easiest during a visit.

## Patient Portals
- Common feature in most EHR systems.
- Practices can use this common feature to send e-mails to patients or parents prompting them to check their patient portal, which will remind them of vaccinations that are due.

Sample Text Messages

<table>
<thead>
<tr>
<th>Needing catch-up vaccine</th>
<th>Routine, on-time vaccinations</th>
</tr>
</thead>
<tbody>
<tr>
<td>[PRACTICE NAME] is contacting you as our records indicate that your child is overdue for a vaccine. Please call [PRACTICE PHONE NUMBER] today to schedule your child’s vaccination. Our office has implemented new protocols to keep your child safe during their visit.</td>
<td>“Hi! [Practice Name] is offering a friendly reminder that your child’s wellness visit and/or vaccinations are due. It is very important to stay on track with these appointments. Please call our office at [PRACTICE PHONE NUMBER] to schedule your child’s appointment. We have implemented additional safety measures to provide a safe environment. See you soon!”</td>
</tr>
</tbody>
</table>

Recall, Recall, Recall

- Develop automated dashboards/reports
- Automated texts
- Portal messages
- Phone calls if needed
- Check out process
- Covid-19 vaccine timing

Can you believe it has already been a year? We miss you, Emily! Dr. Trust looks forward to seeing you for your check up. Please call us at 847-555-6677 or login to your patient portal to make your appointment.
What if they are in the office?

- Turn all visits into vaccinating visits
- Adopt the approach of finding a way to get to “yes”
- Consider having an expert nurse educator to do the initial counseling and answer questions
- Learn how to code for this work
- Be prepared to have translation services in some way to provide the most effective counseling
- Have a robust checkout process so that you can unburden your recall process
Team Approach: Be Creative

Create a Vaccinating Culture
Think: Right Place Right Time
What We Do and Say Matters

▸ Vaccines are safe and effective
▸ Vaccines protect your child, your family and your community and keep us all healthy
▸ Many of the diseases that vaccines prevent have not gone away
▸ Vaccines do not cause the disease they are designed to prevent
▸ Share a personal anecdote or experience
Build A Vaccinating Culture

Value Well Care
Set high expectations for care at all age
Create a valuable experience

Every Visit
Never miss a vaccinating opportunity
Standing orders/Future orders
Review charts in advance
Participate in I-Care

Education
Make vaccination education a priority
Share trustworthy sources
Take time to counsel and respond to concerns

Team
This is a group project
Educate at every level of the patient experience
Recall, Recall, Recall

Rapport
Nonjudgmental approach
LISTEN and answer questions
Find common ground

Convenience
Flexible hours to increase access.
Vaccine only appointments
Mass vaccination events
Vaccine Champions

Identify trusted leaders from various areas of the facility and invite them to share their personal reasons for getting vaccinated/the importance of vaccination using:

- Testimonials
- Short videos
- Email blasts
- Social media or blogs

Make the Vaccinations Visible & Celebrate at Your Facility

Provide “I got my COVID-19 vaccine!” pins, lanyards, masks, bracelets, etc.

Post a photo gallery in common or break areas as part of a media campaign showing cheerful staff who were just vaccinated.

Offer a small, sincere token of gratitude.

Record testimonials on why healthcare personnel in your facility decided to get vaccinated and share!
Creative Ideas

• Standing order policy for certain vaccines or open access scheduling for vaccines, self scheduling in portal
• Ensure your hold message has a vaccine message
• Create vaccination clinics outside of your offices
• Partner with other places in your community where children spend time
• Consider the hours most convenient to your patient; might be outside your office hours
• Partner with community organizations to gain community support
• Focus on the barriers and work to overcome them (consider SDOH)
PDSA

**PLAN**
What barrier are you trying to overcome?

**DO**
What will you do to overcome it?

**ACT**
How will you modify this approach and what’s next?

**STUDY**
How will you measure success or not?
We Have Our Work Cut Out for Us

But...

WE CAN DO IT!

THANK YOU

ssirota@pediatrust.com
Upcoming Webinars

- **July 28th, 12pm**: COVID-19 Vaccine Clinical Trial Summary with representatives from Moderna and Pfizer
- **August 5th, 12pm**: Your Local Epidemiologist Explains Pediatric COVID-19 Vaccine Trials & Data presented by epidemiologist expert Dr. Katelyn Jetelina
- **August 16th, 12pm**: Back to School with Dr. Marielle Fricchione, Free CME available

illinoisaap.com/events
THANKS!