

MEETING NOTES

STATE COALITIONS AND ROUNDTABLES TASK GROUP, JANUARY 2018 MEETING VIA ADOBE WEBINAR

Q1: HOW EFFECTIVE WERE WE IN ACHIEVING THE VISION WE SHARED IN NOV. 2016?

Greg Parkington: It would appear as though we've made a great start. But have more work to do. I love the HPV Roundtable -Coalitions page/platform utilization that we've got started - so much more potential for it.

Trisha Schulz: I was pleasantly surprised at how well and fast the guide idea developed and was executed. I thought that was well done and nice to see included on the new website.

Melinda Wharton: the current activities seem to me to be well aligned with the initial plans.

Jane Pezua: I think that the development and launching of the state coalition guide webpage shows that a lot of work has been done to address many of the identified "opportunities." This is great headway. Of course, there is always more work to be done. I,

Claire Hannan: We have been able to increase the focus of state/territorial/local immunization programs on HPV. The resources and connections from the Roundtable have been instrumental in spurring activity on the state level. Agree that there is more to be done

Nikki Hayes 2: I really appreciate the efforts since the Nov 2016 meeting to address the needs that were presented there. I believe they will be very pleased with the resources that have been/will be developed. What is the dissemination plan? How do we ensure that people, even beyond the Nov mtg participants have access to them?

Kimberly N Scott: The roundtable did an excellent job in achieving its 2016 vision. As a new member, the vision was very clear and all participating members were encouraged to provide their thoughts and input. Excellent start, great guide product, and looking forward to seeing more in the guidance on evaluation of efforts.

Allison McGuire: I believe we have made great progress. I was impressed with how quickly the guide was developed and shared, and several opportunities have been provided for networking. The website is very useful. I have already used it several times.

Maria Fernandez: I think there has been much progress. More needs to be done to better enable state and local partners to implement effective programs.

Shauntay Davis: I came in late to the group, but I feel that the work done thus far is an indication that we're headed in the right direction.

sarah shafir: Re; Opportunities: I think a lot has been accomplished! Well done everyone! The first three bullets have certainly been achieved. I am not sure about the 4th - but that's not to say it hasn't been done. The fifth is definite. Maybe more on 6

The screenshot displays the Adobe Connect meeting interface for the "HPV Vaccination Roundtable State Coalitions & Roundtables Task Group (Q1)". The interface is divided into several panels:

- Meeting Content:** Displays a Q1 question: "How effective were we in achieving the vision we shared in Nov. 2016?" with responses from Greg Parkington, Trisha Schulz, Melinda Wharton, and Jane Pezua. Below this are three slides: "Our Charge" (inform and support state-level coalitions), "Opportunities" (develop and share coalition building tools, provide networking opportunities, etc.), and "Our Project" (develop, implement and evaluate a team project between now and Feb. 2018).
- Attendees (1):** Shows a list of participants, including "HPV VACS" with 0 presenters and 0 participants.
- Chat (Everyone):** Displays a conversation where Trisha Schulz asks if participants are registered account holders, and Greg Parkington thanks the group.
- Call NOTES--STAFF ONLY:** Contains notes about the CCNP HPV Workgroup, ACS coop agreement, and upcoming workshops.
- Meeting Engagement:** A gauge shows 80% engagement with an average of 47%. A "Stand-by Mode" notification indicates up to 10 participants can join.
- Right Sidebar:** Includes a "Dallas Overview" button and a list of meeting segments (Q1, Q2, Q3 & Q4, Closing).

The Windows taskbar at the bottom shows various open applications like Word, Skype, Outlook, and a system clock indicating 1:16 PM.

Q2: HOW DID OUR PROJECT GO BEYOND WHAT YOUR ORGANIZATION COULD ACHIEVE ALONE?

HPV VACs: PROJECT=Iowa Multistate Listening Session & Creation of Online State Coalitions Guide

Maria Fernandez: Primarily networking as well as gaining access to resources we would not have known about or had access to. Additionally lessons learned as other coalitions began to work together and local initiatives gives good ideas and allow new groups to move more rapidly toward desired goals.

Claire Hannan: We don't have all the cancer connections, so having ACS on our webinars and sharing the coalition guide and having states share their experience helped other states make connections with cancer prevention groups that can help. We have the immunization connections, but the relationships with cancer groups on the state level were needed.

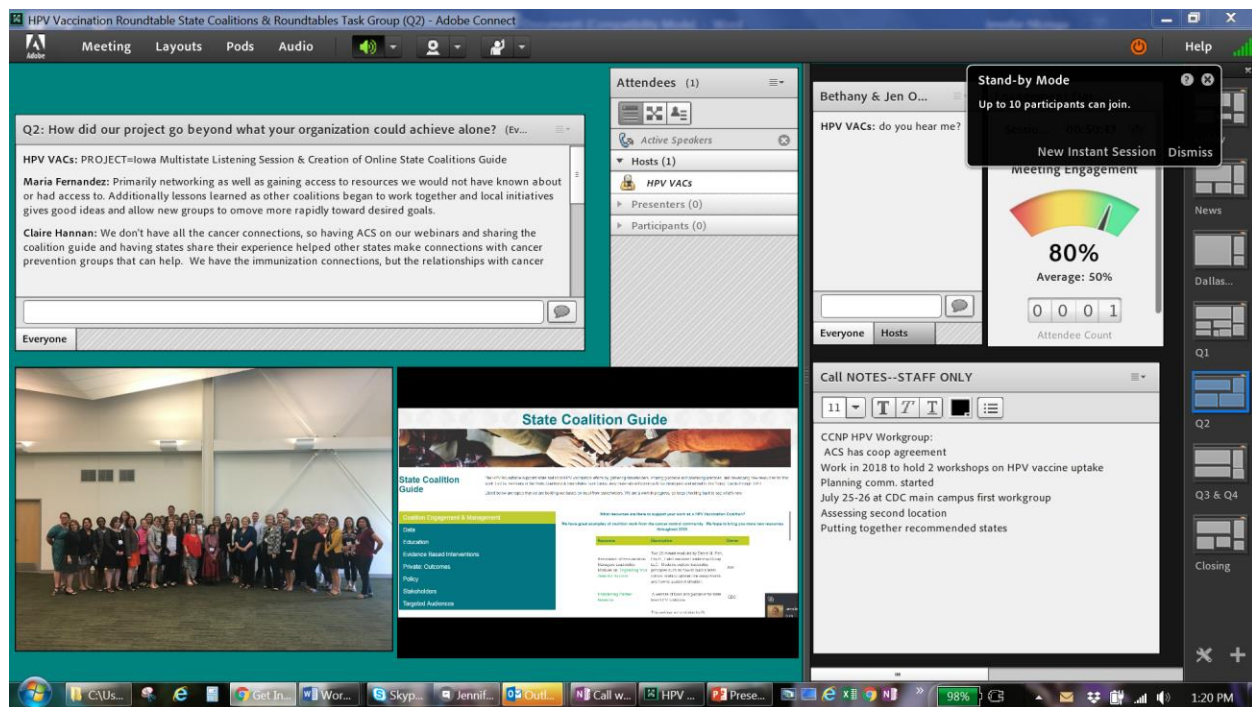
Greg Parkington: Broader footprint for crowdsourcing the tools/resources that have been collected. Individual orgs like my own could potentially achieve these outcomes, but at a slower pace.

Trisha Schulz: Just the organization and support is tremendous!Alone, we wouldn't have been able to reach so many partners

sarah shafir: The great minds of everyone in the group helped to make it possible. It was more comprehensive and got done faster!

Jane Pezua: Much greater visibility, input from so many SMEs/partners, networking, and funding.

Kimberly N Scott: The Roundtable has really drawn attention to the need to increase HPV vax awareness and rates at the local level. We have gained access to tools and resources, and formed new partnerships with coalitions



Q3: HOW WILL YOU ENCOURAGE YOUR ORG TO USE/PROMOTE THE STATE GUIDE OR REPORT?

Trisha Schulz: Will promote the guide and the new website/resources to all of our state AHECs working on the project. They in turn will pass it on to their partners/coalitions they work with. Is it officially OK to share it now?

Kimberly N Scott: The State Guide will be included in our LHD Guide to HPV Resources, and we will post in the resources section of our online HPV Learning Community to which LHD members have access.

Jane Pezua: Our steering committee in CA is meeting next week. I'm sure we'll be referencing the State Guide as we get our state coalition off the ground.

Greg Parkington: Promote the guide through colleagues and across coalition membership, electronically and at upcoming meetings.

Claire Hannan: We will share it with state/local/territorial immunization programs. Continue to encourage them to engage with and form coalitions. New resources help to inject energy and

momentum to coalition efforts. We will also show the State Guide on our webinars and in our newsletters.

Nikki Hayes 2: We can certainly encourage our NCCCP program awardees and state-based coalitions to use the guide as they are working to identify, plan and implement collaborative strategies to increase HPV vax to decrease incidence of HPV-related cancers in their communities.

Allison McGuire: We can promote the guide through coalition members and partners and be shared with other states and immunization programs. The guide is a great resource and will be valuable when approaching regional tasks.

Maria Fernandez: link it to websites and include in newsletters. Share with CPRIT as they are funding organizations to implement HPV interventions.

sarah shafir: Promote to CCCNP.

Q4: HOW WOULD YOU DESCRIBE YOUR EXPERIENCE PARTICIPATING ON THIS PROJECT/TG?

Greg Parkington: Rewarding. Welcome the opportunity to share a state-specific perspective to the project and needs of the working group.

Shauntay Davis: Participating in the group has been valuable as CA begins the development of our roundtable.

Trisha Schulz: Beneficial. The contacts we've made working with ACS has extended our reach and broadened our impact to promote HPV vax

Allison McGuire: Worthwhile and productive

Kimberly N Scott: Excellent. The networking opportunities and access to resources and tools have been valuable in our efforts to increase HPV vax rates.

Maria Fernandez: Very valuable- important networking opportunities. Generated ideas about what is missing - both in terms of filling knowledge gaps as well as developing strategies to increase implementation of effective practices.

Jane Pezua: I've only attended one meeting, but great so far! Looking forward to more work in the future. (And so sad that I won't be able to make Atlanta - What is it with all of us and leg injuries? Non-weight bearing for 3 months here. Ugh!)

sarah shafir: Appreciate meeting everyone - great to be in person in Dallas. Great minds and lots of learning.

The screenshot shows an Adobe Connect meeting window. The title bar reads "HPV Vaccination Roundtable State Coalitions & Roundtables Task Group (Q3 & Q4) - Adobe Connect". The interface includes a top menu bar with "Meeting", "Layouts", "Pods", "Audio", and "Help".

Meeting Content:

- Q3: How will you encourage your org to use/promote the State Guide or Report? (Ever...)**
to engage with and form coalitions. New resources help to inject energy and momentum to coalition efforts. We will also show the State Guide on our webinars and in our newsletters.
Nikki Hayes 2: We can certainly encourage our NCCCP program awardees and state-based coalitions to use the guide as they are working to identify, plan and implement collaborative strategies to increase HPV vax to decrease incidence of HPV-related cancers in their communities.
Allison McGuire: We can promote the guide through coalition members and partners and be shared with other states and immunization programs. The guide is a great resource and will be valuable when approaching regional tasks.
Maria Fernandez: link it to websites and include in newsletters. Share with CPRIT as they are funding organizations to implement HPV interventions.
sarah shafir: Promote to CCNP.
- Q4: How would you describe your experience participating on this project/TG? (Ever...)**
Greg Parkington: Rewarding. Welcome the opportunity to share a state-specific perspective to the project and needs of the working group.
Shauntay Davis: Participating in the group has been valuable as CA begins the development of our roundtable.
Trisha Schulz: Beneficial. The contacts we've made working with ACS has extended our reach and broadened our impact to promote HPV vax.
Allison McGuire: Worthwhile and productive.

Attendees (1):

- Active Speakers
- Hosts (1)
- HPV VACs
- Presenters (0)
- Participants (0)

Chat (Everyone):

- Trisha Schulz:** I think you need to promote us all to presenters if you want us to be on camera
- Trisha Schulz:** It's all good! I'm not camera-ready today!
- Greg Parkington:** thank you guys!

Call NOTES--STAFF ONLY

- CCNP HPV Workgroup:
ACS has coop agreement
Work in 2018 to hold 2 workshops on HPV vaccine uptake
Planning comm. started
July 25-26 at CDC main campus first workgroup
Assessing second location
Putting together recommended states

Meeting Engagement:

- Stand-by Mode: Up to 10 participants can join.
- New Instant Session
- Dismiss
- Meeting Engagement: 80% (Average: 51%)
- Attendee Count: 0 0 0 1

The bottom of the screen shows a Windows taskbar with various open applications including "C:\Users...", "Get In...", "Wor...", "Skyp...", "Jennif...", "Out...", "Call w...", "HPV...", "Prese...", and system icons for network, volume, and battery. The time is 1:22 PM.