

# PROMISING BEST PRACTICES

**AN ILLUSTRATED GUIDE**



**This booklet is dedicated to the tireless efforts of industry experts, leading the charge in eliminating HPV Cancers, starting with Cervical Cancer.**

This collaboration represents an illustrated guide to the **10 Promising Best Practices**. The visuals communicate the concept of each practice and its important components. This guide serves as an inspiration and as a toolkit for the roundtable's work in addressing the urgent need to tackle HPV cancers. It emphasizes the significance of these best practices by not only increasing vaccination rates, enhancing cancer screening, and improving follow-up processes.

Ultimately, this initiative aims to build trust in the relationship between patients and medical providers, leading us closer towards the elimination of cancer.





A special thanks to K@alyst Creative

I am so grateful for the opportunity to be part of this first inaugural HPV and Cervical Cancer Roundtable on behalf of the American Cancer Society. This focused effort is one that is near and dear to my heart. I trust in the power of creativity and visualization in order to solve problems and look at challenges in a fresh new way, which is a powerful component in the development of this Promising Best Practices Guide.

My passion is to serve as a creative AGENT to accelerate thinking and map pathways to possibilities, utilizing graphic recording/live visuals to create outcomes in real time. I believe together, we have the power transform lives and create a world that is cancer free.

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# BEST PRACTICE

## PRIORITIZE PREVENTION: INITIATE HPV VACCINATION AT AGE 9 FOR A HEALTHY FUTURE

### IT'S ABOUT 9!



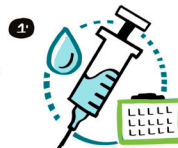
### SPEED UP THE OPPORTUNITY FOR DISEASE ELIMINATION

★ ALLOWS FOR MORE ROBUST PROTECTION  
AGAINST HPV-RELATED CANCERS

★ ACHIEVE COMPLETION BEFORE  
POTENTIAL EXPOSURE TO HPV

### CHANGE MINDSET

#### THIS BEST PRACTICE IS FOR:



#### IMMUNIZATION PROGRAMS

NEED TO MAKE CHANGES,  
CAREFUL ABOUT STRATEGIES



#### VACCINATORS

RECOMMEND VACCINATION  
AT AGE 9, A SHIFT FROM  
AGE 11-12

#### NEEDS:

### RAISE AWARENESS

OF DATA: VACCINE EFFICACY  
TO GET PROVIDERS ON BOARD

### CHANGE ELECTRONIC HEALTH RECORDS, IMMUNIZATION FORECASTING

### 9 AGE

CHANGING  
PRACTICES

ADVOCACY



**BEST PRACTICE**

# STATE ROUNDTABLES & COALITIONS

TOGETHER WE CAN CHANGE THE STORY ABOUT HPV CANCER PREVENTION



## COALESCING COALITIONS

■ IMPROVING HPV VACCINATION UPTAKE



■ VACCINATION COVERAGE



DEVELOPMENT OF TOOLS  
INNOVATIVE APPROACHES  
NEW RESOURCES



■ STATE LEVEL IMMUNIZATION AND CANCER ORGANIZATIONS

TECHNICAL ASSISTANCE/TRAINING TO STATES THAT SUPPORT HPV VACCINATION ACTIVITIES



■ COVID-19 PANDEMIC IMPACTED VACCINATION RATES IN SOUTHEAST



■ VACCINATION RATES BACKSLIDE AND DECLINE

HPV VACCINATION ROUNDTABLE OF THE SOUTHEAST



FOCUS ON SOUTHEAST REGION + PUERTO RICO

## COLLABORATION



EXPANDS ABILITY

1. ASSESS CONDITIONS ON HPV VACCINATION AND CANCER PREVENTION
2. IDENTIFY AND REPLICATE HPV VACCINATION SUCCESS STORIES
3. OVERCOME HPV CHALLENGES
4. CREATE OPPORTUNITIES TO IMPROVE VACCINATION COVERAGE

### THIS BEST PRACTICE IS FOR :



POLICY MAKERS



STATE COALITIONS AND ROUNDTABLES



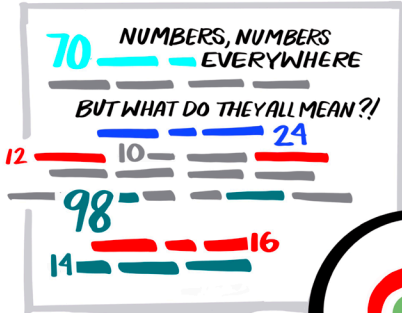
PARTNERS



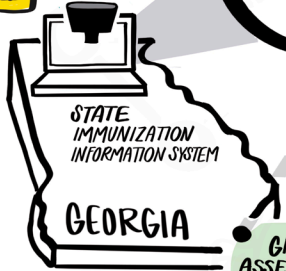


# BEST PRACTICE DATA

GET A MORE GRANULAR LOOK AT HPV VACCINE UPTAKE



1



GRANULAR ASSESMENT AT THE SUB-STATE LEVEL

3

DATA FROM THE GEORGIA REGISTRY OF IMMUNIZATION TRANSACTIONS AND SERVICES HELPS INFORM

2

VACCINE UPTAKE DATA HELPS US UNDERSTAND FOCUSED OR GENERAL VACCINE HESITENCY

ASSESSMENT OF HPV VACCINE UPTAKE RELATIVE TO OTHER VACCINES

4

FUTURE OUTREACH AND INTERVENTION

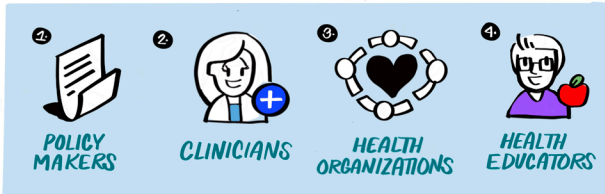
SPECIFIC OUTREACH

PRIORITY POPULATIONS  
SPECIFIC MARKETS



ABILITY TO TRACK AND OBSERVE PATTERNS IN VACCINE RECEIPT

THIS BEST PRACTICE IS FOR :





# BEST PRACTICE

# CLINICIAN EDUCATION

## SCREEN AT EVERY OPPORTUNITY



### KNOWLEDGE IS POWER

### GOT A CERVIX, SCREEN YOUR CERVIX

### STAY READY SO YOU DON'T HAVE TO GET READY

## CLINICIAN EDUCATION

## PRACTICE PREPARATION

### FOUNDATIONAL KNOWLEDGE



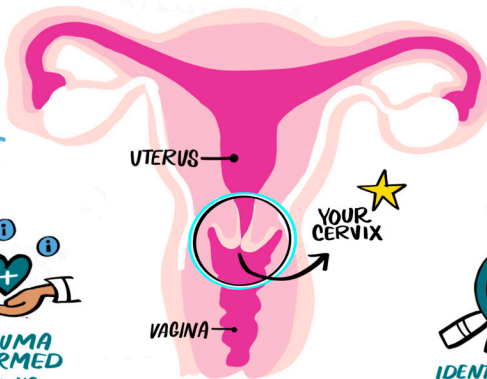
TOOLKIT & GUIDELINES



PRIMARY HPV  
VS. CYTOLOGY



TRAUMA INFORMED  
PELVIC CARE



### ANTICIPATORY GUIDANCE AND PRACTICE READINESS



IDENTIFY THE  
UN[DER] SCREENED



POINT OF CARE  
SCREENING



OFFICE STAFF  
READY

THIS BEST PRACTICE IS FOR :



CLINICIANS



HEALTH  
SYSTEMS





# BEST PRACTICE



# STIGMA, STILL A SILENT PROBLEM OVERCOMING CERVICAL CANCER STIGMA



## STIGMA

IS TRAUMA AND HARM  
THAT CREATES: 1. FEAR  
2. SHAME  
3. GUILT



DON'T MAKE  
ASSUMPTIONS  
ABOUT SOMEONE'S JOURNEY

- RAPE
- SEXUAL ASSAULT
- INFIDELITY

A MARK OF  
**DISGRACE**  
ASSOCIATED WITH A  
PARTICULAR CIRCUMSTANCE



**STIGMA**  
CREATES BARRIERS  
TO HEALTH

## ★ GOAL:

- ★ CULTIVATE RESILIENCE
- ★ CREATE COMMUNITIES OF COMPASSION
- ★ NORMALIZE HPV
- ★ RAISE AWARENESS

FEAR OF JUDGMENT AND  
HAVING TO RELIVE PAST TRAUMA

- 1. KEEPS PEOPLE FROM GETTING VACCINATED
- 2. KEEPS PEOPLE FROM GETTING SCREENED
- 3. KEEPS PEOPLE FROM MAKING FOLLOW-UP APPOINTMENTS



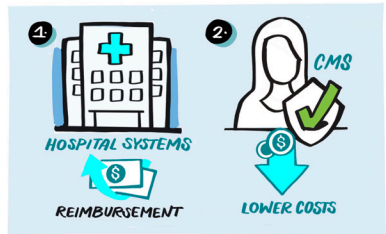


# BEST PRACTICE PATIENT NAVIGATION

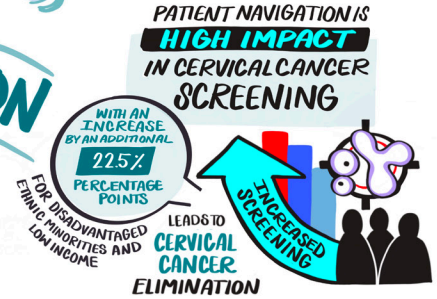
ACROSS THE CARE CONTINUUM



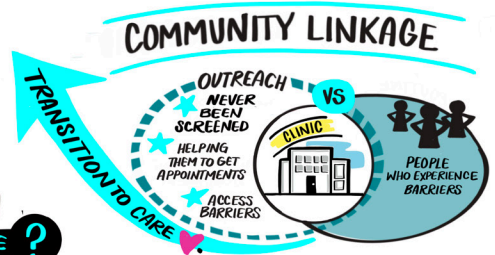
THIS BEST PRACTICE IS FOR:



## PATIENT NAVIGATION THE RIGHT PATH



★ RESPONSIBLE FOR PROVIDING RESOURCES FOR IMPLEMENTATION



**PATIENT NAVIGATION EVIDENCE BASED CANCER CARE REIMBURSABLE**





# PROMISING PRACTICE

# COMMUNITY ENGAGEMENT

IN SOLUTIONS DEVELOPMENT AND IMPLEMENTATION



LEARNING FROM THE COMMUNITY  
SO THE WORK REFLECTS THE COMMUNITY

EDUCATES COMMUNITY  
MEET THEM WHERE THEY ARE.  
PEOPLE ARE THIRSTY FOR KNOWLEDGE

ASKING FOR CONVERSATIONS  
ON HPV & HEALTH TOPICS

BUILDING TRUST  
CONTINUE EDUCATION

COLLECTIVE ACTION  
DEVELOPING & SOLUTIONS  
AT LOCAL LEVELS

COMMUNITY BASED WORK  
THAT BUILDS TRUST BETWEEN  
PATIENTS AND PROVIDERS

BUILDING RELATIONSHIPS  
HEALTH GUIDANCE

COMMUNITY PARTNERS

EXISTING PARTNERS

TAPS INTO EXISTING NETWORKS

CORPORATIONS

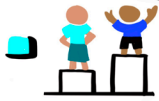


EMPOWERING PATIENTS

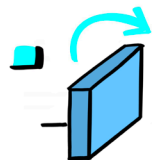
LONG-TERM STRATEGY WITH PROVEN RESULTS



BUILDING INFORMED LEADERS/ AMBASSADORS



FOCUSED ON HEALTH EQUITY  
RESULTING IN PROGRAMS  
THAT BETTER HEALTH EQUITY



HELPING OVERCOME BARRIERS TO HEALTH

THIS BEST PRACTICE IS FOR :



CONSUMER



HEALTH DEPARTMENTS



FUNDERS



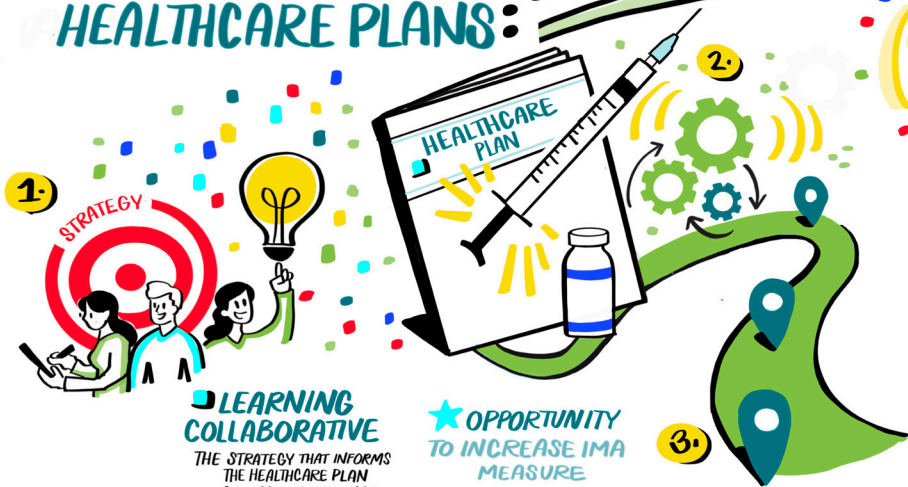


**BEST PRACTICE**

**HEALTHCARE PLANS**  
INCREASING HPV IMMUNIZATION



# HPV VACCINATION & HEALTHCARE PLANS: **INJECTING BEST PRACTICES**



**IMPACT, PREVENTION**  
OF HPV RELATED CANCERS



**HEALTHCARE PLAN MEMBERS**

1.

**STRATEGY**



**LEARNING COLLABORATIVE**

THE STRATEGY THAT INFORMS THE HEALTHCARE PLAN AND ACTION ROADMAP

★ PROVIDER EDUCATION

★ OPPORTUNITY TO INCREASE IMA MEASURE

3.

**COLLABORATIVE ACTION GUIDE RECOMMENDATIONS**

4.

THIS BEST PRACTICE IS FOR :



**PAYORS**



**PROVIDERS**



**STATE COALITIONS**





# BEST PRACTICE

# PROVIDER SYSTEMS PERSPECTIVE

AN ANNOUNCEMENT APPROACH TO IMPROVING VACCINATION RATES



## WORKFLOW REDESIGN, VACCINATE AT AGE 9!

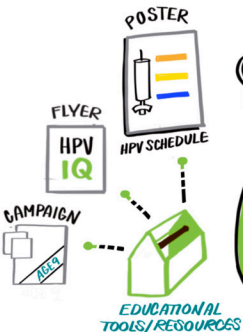
QUALITY IMPROVEMENT

### 1. ANNOUNCEMENT APPROACH

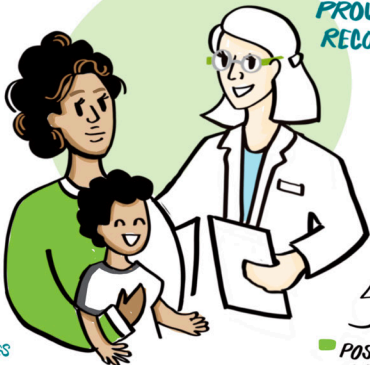
START AT 9  
LEAVE NO CHILD BEHIND

### 3. STANDARD ORDER

STANDARDIZING RESOURCES



STRONG PROVIDER RECOMMENDATION



### 2. REMINDER RECALL



YOU DON'T NEED A DOCTOR TO WRITE AN ORDER  
A WAY TO INCREASE IMMUNIZATION RATE

THIS BEST PRACTICE IS FOR :



CLINICIANS



HEALTH SYSTEMS





PROMISING PRACTICE

# HPV SELF-SAMPLING

EMPOWERING PATIENTS FOR BETTER OUTCOMES



## Self EMPOWERMENT



SELF-SAMPLING

THIS PROMISING PRACTICE IS FOR:

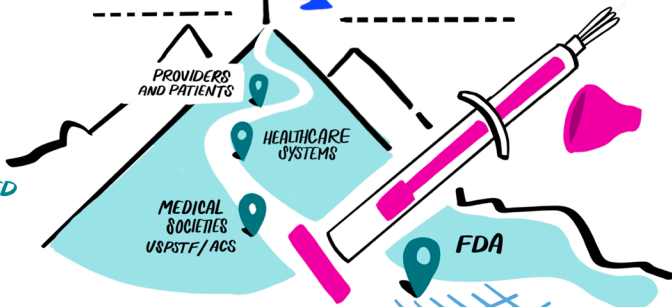
1. UNSCREENED AND UNDERSCREENED
2. ANYONE WITH A CERVIX



PATIENTS ARE DOING IT FOR THEMSELVES

NEEDING APPROVALS

\* FDA \* CLINICAL \* SOCIETY



SAFETY NET: FOLLOW-UPS

SELF-SAMPLING WILL INCREASE ACCESS TO SCREENING

WHY IS THIS IMPORTANT?

ADDRESSES BARRIERS

- CLINIC HOURS
- WORK SCHEDULE
- MENTAL HEALTH
- TIME
- OBESITY
- PHYSICAL DISABILITIES
- PLACE PRIVACY AND CONVENIENCE
- EMBARRASSMENT
- HISTORY OF SEXUAL ABUSE/TRAUMA
- TRANSPORTATION
- NEGATIVE PAST EXPERIENCE

THIS BEST PRACTICE IS FOR:





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