



### **Kristin Oliver, MD, MHS**

Associate Professor, Icahn School of Medicine, Mount Sinai American Academy of Pediatrics (AAP)

## Welcome: HPV Vaccination Collaborations & Partnerships



## **HPV Vaccination Collaborations & Partnerships**

#### Thursday, October 10: HPV Vaccination Collaborations & Partnerships

12:00 PM ET	<ul> <li>Welcome to the Celebration</li> <li>Kristin Oliver, MD, MHS, Icahn School of Medicine, American Academy of Pediatrics (AAP)</li> </ul>
12:05 PM ET	<ul> <li>10-Year Celebrate &amp; Innovate Interview</li> <li>Kristin Oliver, MD, MHS, Icahn School of Medicine, American Academy of Pediatrics (AAP)</li> <li>Margot Savoy, MD, MPH, FAAFP, FABC, FAAPL, CPE, CMQ, American Academy of Family Physicians (AAFP)</li> </ul>
12:15 PM ET	<ul> <li>Taking Action on HPV Vaccination in New York State</li> <li>Michael Seserman, MPH, American Cancer Society</li> <li>Manika Suryadevara, MD, MPH, SUNY Upstate Medical University</li> <li>Annalea Trask, Stony Brook Cancer Center</li> </ul>
12:30 PM ET	Panel Q&A <ul> <li>Moderator: Lisa Robertson, MPH, Indiana Immunization Coalition</li> </ul>
12:50 PM ET	National Rural HPV Vaccination Collaboration <ul> <li>Heather Brandt, PhD, St. Jude Children's Research Hospital</li> <li>Ashley Lach, MHA, CPHQ, American Cancer Society</li> <li>Sara Lolley, MPH, American Academy of Pediatrics</li> </ul>
1:05 PM ET	<ul> <li>Panel Q&amp;A</li> <li>Moderator: Lisa Robertson, MPH, Indiana Immunization Coalition</li> </ul>
1:25 PM ET	Celebration Wrap-Up & After Party <ul> <li>Christina Turpin, American Cancer Society</li> </ul>

Funding for this meeting was made possible (in part) by IP21-2105 from the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.







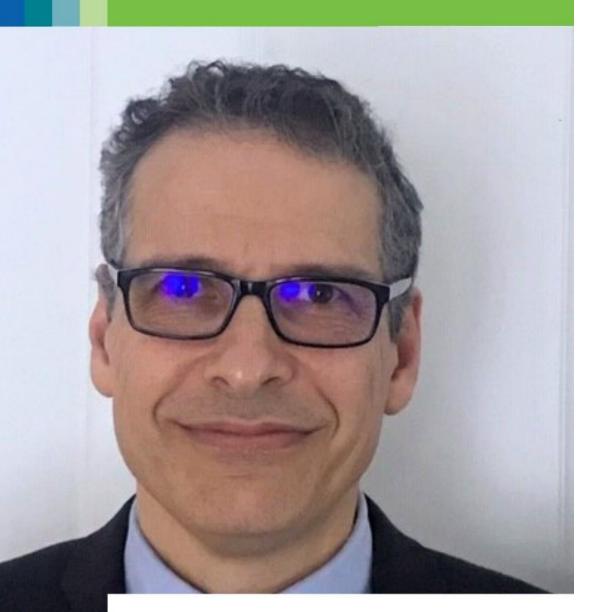
## **10 Year Celebrate & Innovate Interview**





# **CELEBRATE** *4 NNOLAS* 10 YEARS





# Taking Action on HPV Vaccination in New York State

**Michael Seserman, MPH** Associate Director, State Partnerships, NY and NJ, American Cancer Society (ACS)









### Taking Action on HPV Vaccination in New York State

October 10, 2024

Michael Seserman, MPH

Coalition Co-Chair, Associate Director, State Partnerships, American Cancer Society

#### Partners

- Manika Suryadevara, MD, MPH, Professor of Pediatrics, SUNY Upstate Medical University
- Annalea Trask, Program Coordinator, Cancer Prevention In Action, Stony Brook Cancer Center

# **NYS HPV Coalition**

- Created in 2017 as an action team of the New York State Cancer Consortium.
- Mission: To increase HPV vaccination rates and decrease HPVrelated cancers in New York State through education, coordination, advocacy, and leadership.





# **Steering Committee**

- Academic Pediatric Association
- American Cancer Society/ACS Cancer Action Network
- American College of Obstetricians and Gynecologists, District II
- American Academy of Pediatrics, NYS
- Community Health Care Association of NYS
- Medical Society of the State of New York
- Memorial Sloan Kettering Cancer Center
- Columbia University Irving Medical Center
- Montefiore Medical Center

- New York State Academy of Family
   Physicians
- New York State Association of County Health Officials
- New York State Cancer Consortium
- New York State Department of Health
- New York State Health Plan Association
- New York State Public Health Association
- New York City Department of Health and Mental Hygiene
- Nurse Practitioner Association of New York
   State
- Roswell Park Comprehensive Cancer Center







## Goals

- 1. To increase HPV vaccine series completion rates to **45% among 13-year-old** adolescents in NYS by 2026.
  - Baseline: HPV vaccine completion rates among 13-year-olds are <u>39.8</u>% (NYSIIS and CIR, 2020).
- 2. To increase the HPV vaccine series completion rates to **80% among NYS** adolescents ages 13-17 years by 2026.
  - Baseline: HPV vaccine completion rates are <u>66.4</u>% per the 2021 NIS-Teen data. This
    objective is aligned with the National HPV Vaccination Roundtable goal.





## 2018 Plan Priorities and Activities

### Year 1 Priorities:

- Assessment
- Team and Coalition building
- Planning
- Identify and apply for funding

- State HPV Vax Environmental Scan
- SWOT Analysis
- Created logos and launched website
- Recruited general members
- Applied for funding
- Developed 5 Year Action Plan

# **Early NYS HPV Coalition Structure**

Steering Committee

**Provider Education** 

NYS HPV Health Plan Workgroup





**Public Education** 

# Sign up as a member: www.nyshpv.org



### New York State HPV Coalition

The New York State HPV Coalition is a group of organizations and individuals dedicated to increasing HPV vaccination and the prevention of HPV-related cancers and other diseases caused by HPV.







### 2019 - 2020 Plan Priorities and Activities

#### Years 2 and 3 Priorities:

- Funding
- Intensify provider and parent education
- Promote large system changes (e.g., health plans, NYS Office of Health Insurance Programs)
- Promotion and implementation of evidence-based initiatives

- Received NY Health Foundation funding
- Conducted QI trainings and TA with providers over 2 years
- Worked with health plan QI staff and implemented monthly HPV Health Plan Workgroup
- Educated school-based health centers on implementation of evidence-based interventions
- Developed an HPV Vaccination Provider Report Card
- Webinars, disseminated resources and coordinated messaging



### **HPV Vaccination QI Trainings**





## Provider Education/QI Results

- Providers, and staff from 52 pediatric and family medicine practices participated in our QI training project.
- Among practices that completed the data entry, review, and discussion, there were increases in aggregate vaccine series completion rates of 10% and reductions in aggregate missed opportunities to vaccination of 9%.
- Systems changes implemented included: standing orders, review of immunization records at each visit, earlier discussion, and a stronger recommendation for HPV vaccine, recommending HPV vaccine for cancer prevention, educating providers and practice staff regarding the importance of HPV vaccination for their adolescent patients.
- In June 2020, more than 150 vaccinating providers participated in a CME webinar sponsored by the NYSHPV Coalition focused on increasing HPV vaccination by making changes to clinical practice.



National HPV Roundtable added this guide to its Resource Library



NYS HPV VACCINATION **GUIDE FOR SCHOOL-BASED HEALTH CENTERS** 





NEW YORK

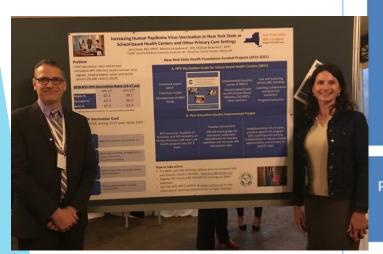
CHOOL-BASED ALTH ALLIANCE

www.NYSBHA.org

Children, Healthy Teen

Tabled and presented at three statewide conferences

100 M 20





Preventing cancer in the future by increasing the adoption of strategies today to vaccinate all adolescents against HPV.



NYS HPV Health Plan Workgroup

- Health plans working together to prevent HPV cancers
- Evolved into a learning collaborative
- Now focused on Medicaid's HPV Performance Improvement Project

### HPV Vaccination and Cancer In New York State







### 🚩 EmblemHealth













August 1, 2019

#### Dear New York Medical Provider:

*[Health Plan]* has partnered with the American Cancer Society (ACS), the New York State and City Departments of Health, and leaders of New York's health care community to reduce the burden of cancer in New York. This collaborative, facilitated by the New York State HPV Coalition, is focused on increasing the human papillomavirus (HPV) vaccination rate among adolescents 11 and 12 years of age.

HPV infection affects about 80 percent of the population and can lead to cancer – including cervical, vaginal, penile, anal, and oral cancers, as well as genital warts – in both males and females. The HPV vaccine is safe and extremely effective in preventing vaccine-type HPV infection, genital warts, precancers, and cancers. However, HPV vaccination rates continue to fall far below the rates of other routinely recommended vaccines for adolescents across New York State.

#### That is why we need your help.

As a health care provider, you can aid cancer prevention efforts by talking to parents or guardians about the importance of the vaccine and reducing the risk of HPV-related cancers. Indeed, provider recommendation is the most persuasive reason parents choose to vaccinate their children. Please visit the link below for materials that can help you and your practice deliver strong and effective recommendations for the HPV vaccination series.

Research shows that simply changing the wording used to introduce the HPV vaccine makes a tremendous difference in outcomes. Offering a presumptive, bundled recommendation during the visit can be effective; for example, "Your child needs three vaccines today: Tdap, HPV, and meningococcal to prevent dangerous infections and cancer." With your help, we can reduce the burden of cancer in New York.

Thank you for your time and attention to this important initiative! http://hpvroundtable.org/wp-content/uploads/2018/04/PROVIDERS-Action-Guide-WEB.pdf

[Health Plan], American Cancer Society, New York State and City Department of Health and members of New York's health care community



Three rounds

72 awards to date

New York State HPV Coalition Working to Prevent HPV Cancers

### NEW YORK STATE HPV VACCINATION HONOR ROLL

### **HPV Honoree: Most Improved**

### **Capital Region**

Achieved an HPV vaccination completion rate of <80 among adolescent patients at or before their 13th birthday.

Practice Name Goes Here

Date

Authorized Signature

The New York State HPV Coalition is a group of organizations and individuals dedicated to increasing HPV vaccination and the prevention of HPV-related cancers and other diseases caused by HPV.

HPV Vaccine is Cancer Prevention

### Digital HPV Vaccination Advertising Campaign – November 2020





New York State HPV Coalition ...

The mission of the NYS HPV Coalition is to increase human papilloma virus (HPV) vaccination rates and decrease HPV-related cancers in New York through education, coordination, advocacy, and leadership. Disclaimer: Ad paid for by the American Cancer Society.

Prevencancer. Vaccinate your kids.

IEBRATE NNOVATE IO YEARS



### HPV Vaccination Roundtable

### **DENTAL SETTING**

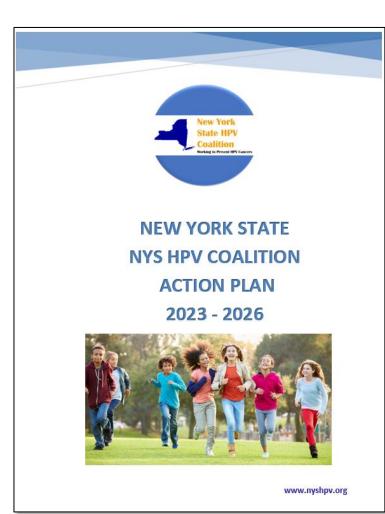
- Trained 38 dental Hygienists
- NYS Dental Association CE Webinar recorded for Dental professionals
- HPV Dental pilot completed with 4 FQHCs data included in a paper

Cancer Prevention Through HPV Vaccination: An Action Guide for Dental Health Care Providers



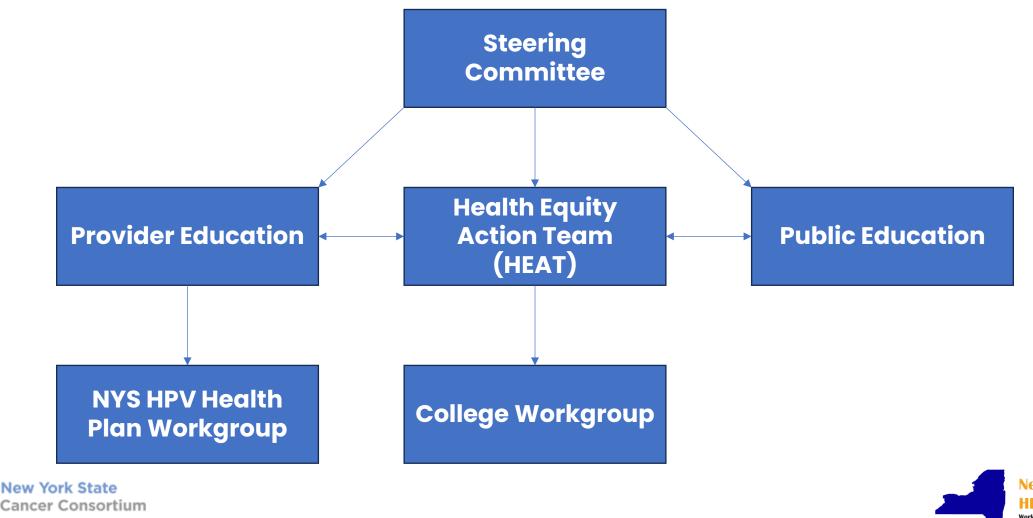


## Now implementing second action plan



- Improve communications
- Data collection in low vax Counties
- Start at age 9 Campaign
- NYS HPV Vaccination Summit
- Policy efforts
- Create Health Equity Action Team

## **NYS HPV Coalition Structure**



New York State HPV Coalition Vorking to Prevent HPV Cancers

## NYS Start at 9 HPV Vaccination Campaign



#### New York State "Start at 9" Campaign to Prevent HPV Cancers

#### NYS organizations that have endorsed starting the HPV vaccine series at age 9

- American Academy of Pediatrics, NY
- Academy of Family Physicians, NY
- The Nurse Practitioner Association NYS
- New York State Department of Health
   American Cancer Society
- Community Healthcare Assoc. of NYS
- County Health Officials of New York State
- New York School Based Health Alliance
- New York State Public Health Association
- New York State Cancer Consortium
- NYS Association for Rural Health
- NYS School-Based Health Alliance
- Cancer Ctr., Columbia U. Irving Med. Ctr.
   Empire Blue Cross Blue Shield HealthPlus
- Independent Health
- Capital District Physicians' Health Plan
- New York City Health and Hospitals
- Northwell Health Cancer Institute
- UR Medicine/Golisano Children's Hosp.
   North Country Family Health Center
- North Country Family Health Center
   Upstate Golisano Children's Hospital
- Erie County Medical Center
- Great Lakes Cancer Care Collaborative
- Catholic Health Cancer Institute
- St Lawrence County Health Initiative
- Stony Brook Medicine
   Ovarian Cancer Project
- Ovarian Cancer Project
   Suffally County Depart of Us
- Suffolk County Depart. of Health Services
   Hispanic Health Network
- UR Accountable Health Partners
- HPV Cancers Alliance
- Bassett Healthcare Network
- Genesee and Orleans County DOH
- Erie County Department of Health
   Orange County Department of Health
- Orange County Department of
   Westchester Medical Center
- Putnam County Department of Health
- Jefferson County Department of Health
- Family Health Centers and NYU Langone
- Westchester Department of Health
- Fulton County Department of Health
- Anthony L. Jordan Health Corporation
- St. Lawrence County DOH
   Greene County Department of Health
- NYC Dept. of Health & Mental Hygiene

#### Dear Medical Provider:

HPV infection affects about 85 percent of the population and can cause 6 types of cancer, including cervical, vaginal, vulvar, penile, anal, and oropharyngeal cancer, as well as genital warts.<sup>1</sup> Approximately twenty-eight hundred New Yorkers are diagnosed with an HPV-related cancer each year.<sup>2</sup>

September 2023

The HPV vaccine, which is recommended to adolescents between ages 9 and 12, is safe and extremely effective in preventing HPV infections and cancers. However, HPV vaccination rates continue to be much lower than the rates of other routinely recommended vaccines for adolescents in New York State (NYS). In fact, only 40.2% of 13-year-old adolescents in NYS have completed the HPV vaccine series leaving most of that age group unprotected from future HPV cancers.<sup>3</sup>

#### That is why we need your help.

As a health care provider, you can aid cancer prevention efforts by talking to parents or guardians about the importance of the vaccine to reduce the risk of HPV-related cancer. Indeed, evidence suggests that a provider recommendation is among the most persuasive reasons parents choose to vaccinate their children.

The latest research also suggests that starting the HPV vaccination series at age 9 can increase the percentage of your patients that are up to date by age 13.<sup>4</sup> The American Academy of Pediatrics, the American Cancer Society, and the National HPV Vaccination Roundtable recommend starting the series at age 9. This strategy is consistent with the ACIP recommendation stating the HPV series can start at age 9.<sup>4</sup>

Other reasons cited for starting the HPV vaccine series at age 9 include:

- Provides more time for completion of the series.
- Decreases questions about sexual activity.
- Decreases requests for only the "school-required vaccines."
- Increases the likelihood of full vaccination before first HPV exposure
- Is highly acceptable to systems, providers, and parents.

And you will not be alone in making this change to your clinical practice. Nationally, one in five vaccinating providers are already administering the HPV vaccine at ages 9 to 10 and half are willing to recommend it at age 9.<sup>6</sup> Learn more about starting at age 9 at <u>https://hpvroundtable.org/start-hpv-vaccination-at-age-9</u>

#### Recommend starting HPV vaccination at age 9 today!

<sup>1</sup> U.S. Centers for Disease Control and Prevention. <u>https://www.cdc.gov/std/hpv/stdfact-hpv.htm</u> Accessed 1/27/23. <sup>2</sup> New York State Department of Health. <u>NYS Prevention Agenda Dashboard</u>. <sup>3</sup> New York State Department of Health. <u>NYS Prevention Agenda Dashboard</u>. <sup>4</sup> National HPV Vaccination Roundtable. <u>Evidence Summary, HPV Vaccination at 9-12 Years of Age</u>. <sup>5</sup> O'Clary S, <u>Nyouls A, Win Ada Precommends initiating HPV vaccination as early as possible</u>.

<sup>6</sup> Kong WY, Huang Q, Thompson P, Grabert BK, Brewer NT, Gilkey MB. Recommending HPV vaccination at age 9: A national survey of primary care professionals. Academic Pediatrics. 2022. 59 health organizations have now endorsed SA9 in NYS including:

- New York State Department of Health
- Community Healthcare Association
- NYS American Academy of Pediatricians
- NYS Academy of Family Physicians
- Nurse Practitioners Association of NYS
- 3 health plans
- NYSACHO and 11 Local health Departments incl. NYC
- 2 Children's Hospitals
- 5 large IDS incl. NYC Health and Hospitals
- 4 Cancer Centers incl. Northwell Cancer Institute and Roswell Park Comp Cancer Center
- NYSDOH makes SA9 IQIP's recommended policy change
- Discussing changes to state and city immunization registries to reflect SA9 endorsement



### New York State HPV Vaccination Summit: Solving the Puzzle of Boosting HPV Vaccination Rates

Thursday, April 4<sup>th</sup>, 2024, 9 am to 12:45 am

Via Zoom







## Program Agenda

9:00 AM – 9:15 AM, Welcome and Opening Remarks

9:15 AM - 10:15 AM, Identifying the Pieces: HPV Prevalence, Burden, and Prevention

10:30 AM - 11:30 AM, Concurrent Breakout Sessions

- Session 1: Assembling the Pieces to Maximize HPV Vaccination in the Clinical Setting (providers)
- Session 2: Fitting Together Community Assets to Reach the Unvaccinated (CBOs)

11:45 AM - 12:45 PM, Understanding the HPV Vaccination Policy Puzzle

Register <u>here</u> or scan the QR code to register





Or go to <u>www.nyshpv.org</u>

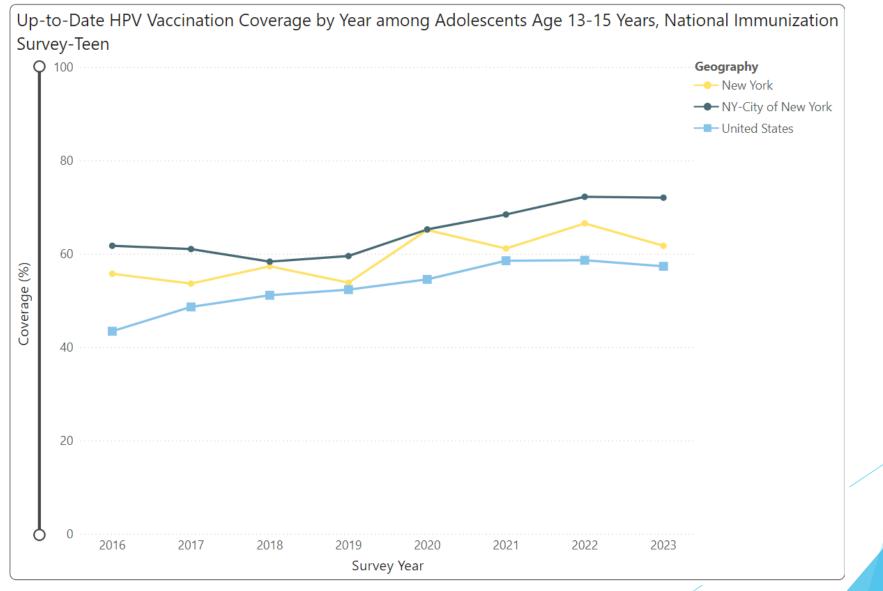




### New activities and plans underway

- HPV vaccination college survey and toolkit
- Maintenance of Certification projects for pediatric and family docs
- Practice Outreach Project Peer to Peer promotion of best practices in low vax areas
- Faith Community Workgroup Ultra Orthodox Jewish and Christian sects

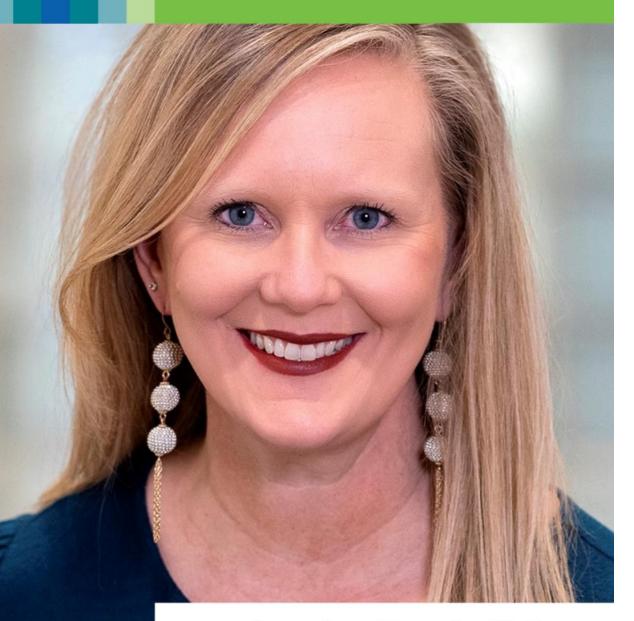






### Panel: Taking Action on HPV Vaccination in New York





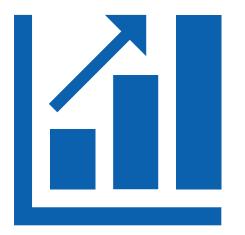
# National Rural HPV Vaccination Collaborations

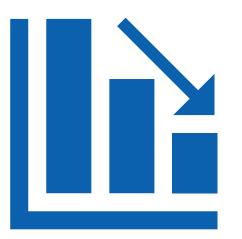


### **Heather Brandt, PhD**

Director, HPV Cancer Prevention Program St. Jude Children's Research Center

### Why focus on rural HPV vaccination?



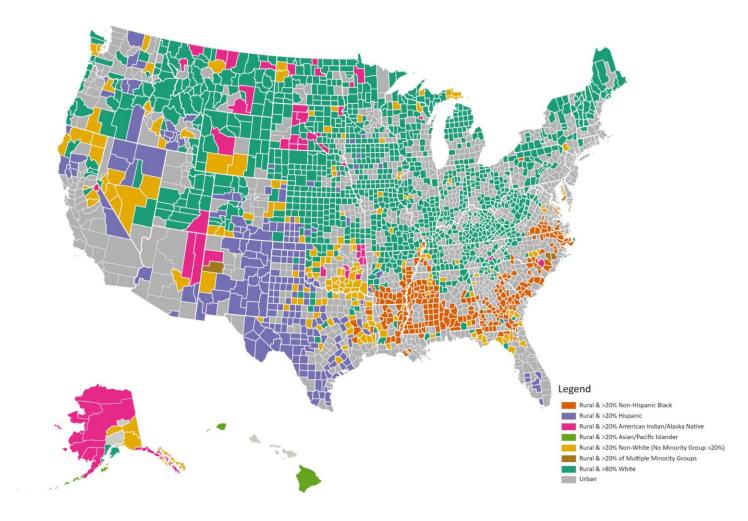




Higher HPV cancers among rural populations Lower HPV vaccination among rural populations Rural doesn't mean "one size fits all"



### Who and where is rural?



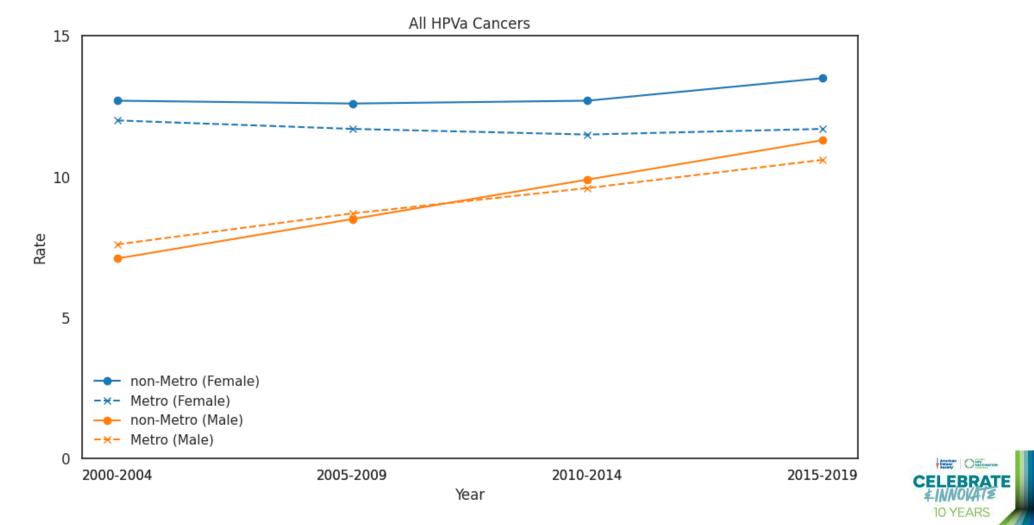


Zahnd WE et al. The Intersection of Rural Residence and Minority Race/Ethnicity in Cancer Disparities in the United States. Int J Environ Res Public Health. 2021 Feb 3;18(4):1384. doi: 10.3390/ijerph18041384. PMID: 33546168; PMCID: PMC7913122.

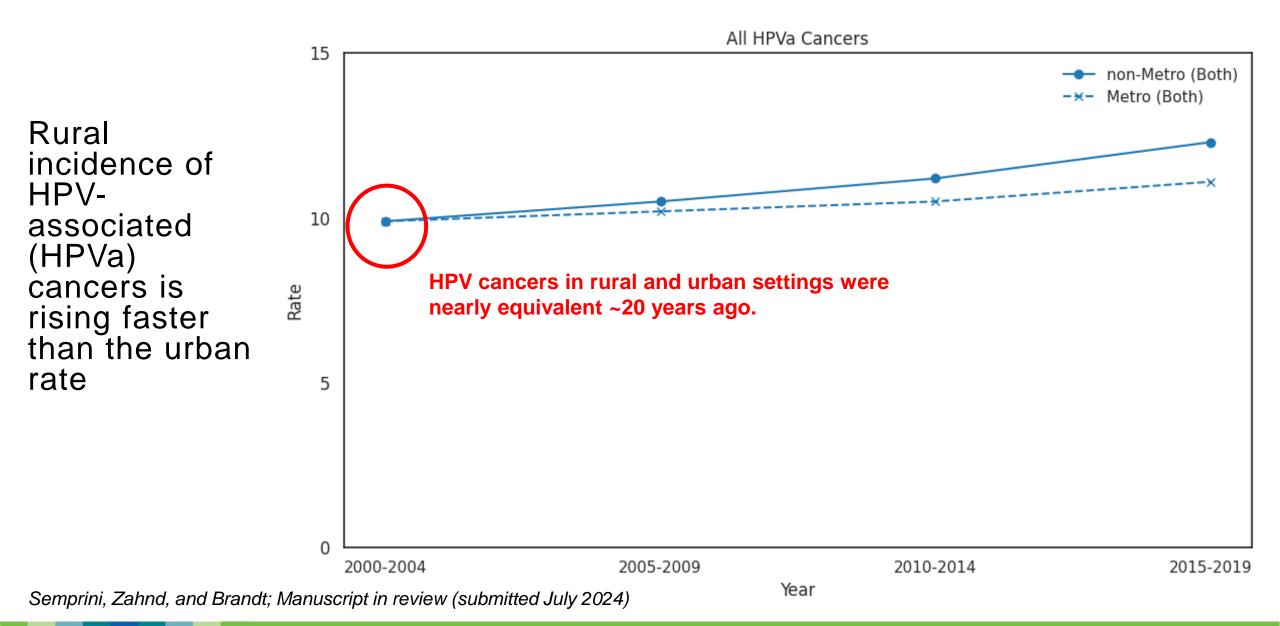
HPV Cancer and HPV Vaccination Data Updates

**Rural U.S. Communities** 

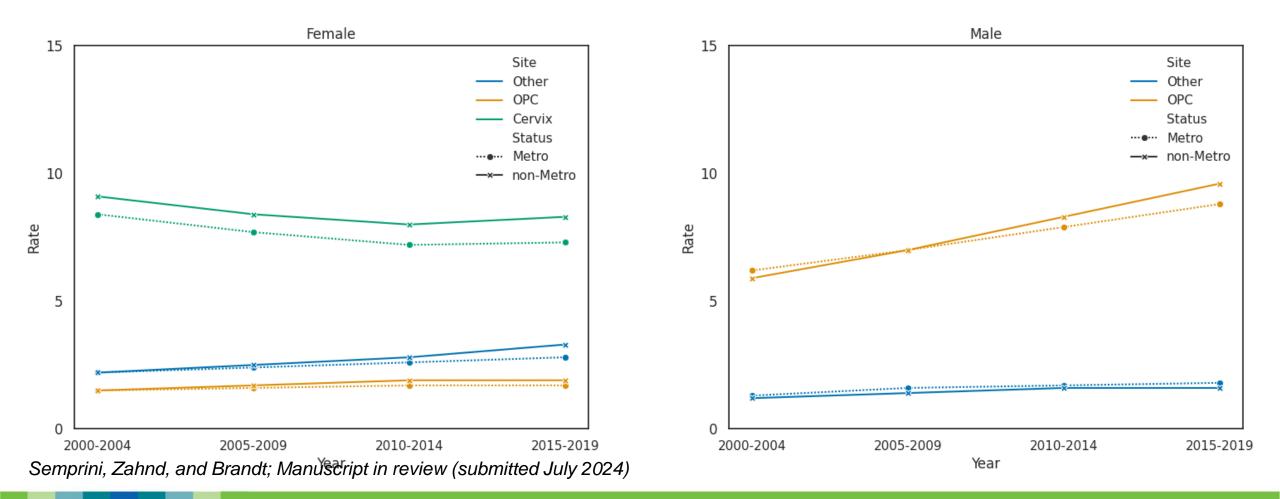
### **Widening Rural-urban Disparity Over Time**

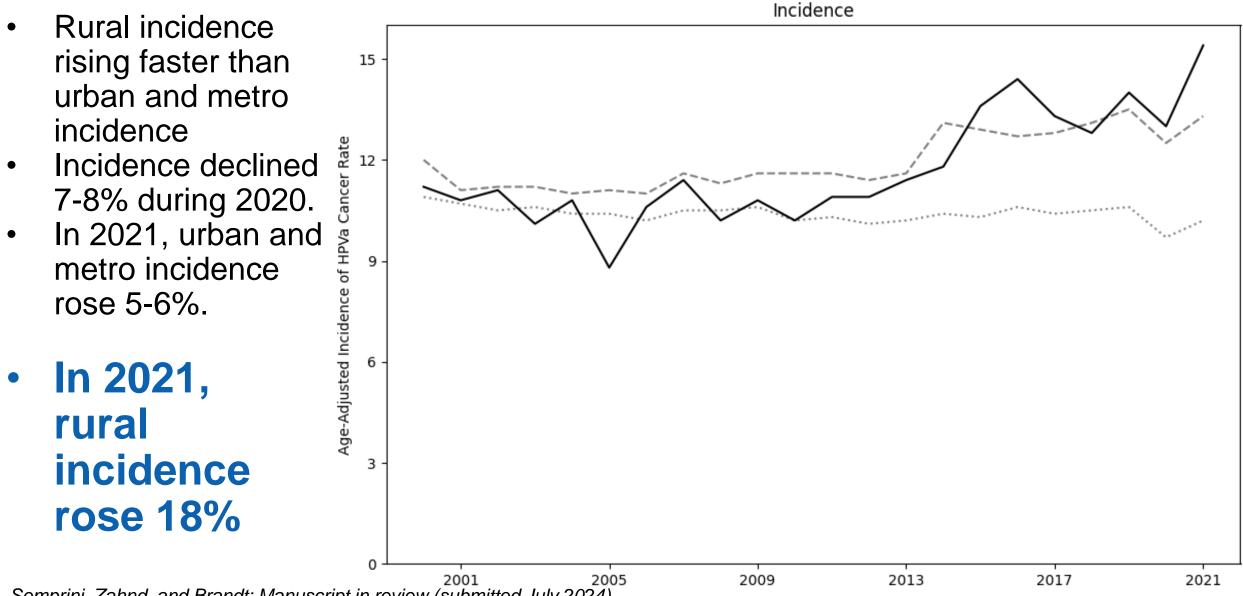


Slide provided by Dr. Jason Semprini, consultant; Data source: NAACCR (2000-2019)



# Rural-urban Gap is Widening for Females (cervix) and Males (OPC)





Semprini, Zahnd, and Brandt; Manuscript in review (submitted July 2024)

Metro . . . . . . 15 Urban Rural HPVa Cancer lacksquare12 mortality rates continue to 9 climb... Rural 6 mortality is highest 3 · 0 2001 2005 2009 2013 2017 2021

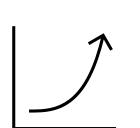
Mortality

Semprini, Zahnd, and Brandt; Manuscript in review (submitted July 2024)

## **Key Points**

- HPV-associated cancers are elevated in nonmetropolitan areas
- Improvements are slower for cervical cancer incidence in non-metropolitan areas



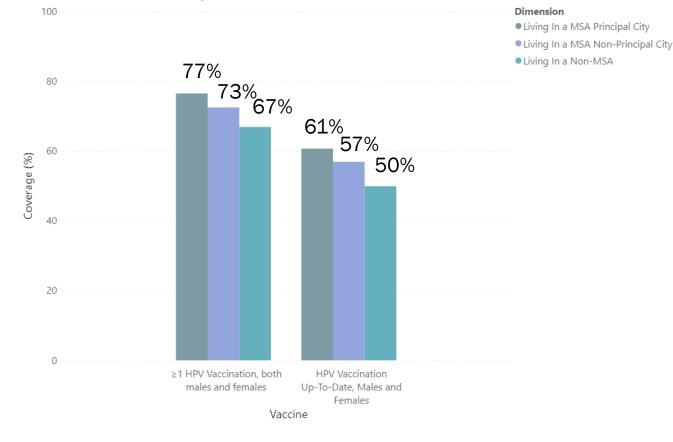


 Accelerations in oropharyngeal cancer incidence are faster in non-metropolitan areas



# HPV Vaccination Coverage in Rural Areas is Consistently Lower, NIS-Teen 2018-2022

Vaccination Coverage among Adolescents Age 13-17 Years, Survey Years 2018-2022, United States, National Immunization Survey-Teen



Children living in rural areas have lower HPV vaccination coverage than children living in urban areas – 10% lower for ≥1 doses and 11% lower for HPV UTD.



Acting to Improve Rural HPV Vaccination Coverage

Collaboration between National Partners and Formation of the National Roundtable Rural Advisory Committee

## **ACS National HPV Vaccination Roundtable:** Evidence Summary



### Rural Disparities in HPV Vaccination Coverage

#### What's Known

Human Papillomavirus (HPV) vaccination is routinely recommended for male and female adolescents and young adults in the United States to prevent HPV-related diseases, including cancer.<sup>1</sup> However, adolescents in rural communities are less likely to be vaccinated against HPV than adolescents in urban areas, which may exacerbate disparities in cancer outcomes experienced by rural residents.<sup>2</sup> Data from the Centers for Disease Control and Prevention (CDC) confirms that 2019 up-to-date HPV vaccination coverage among adolescents in rural areas was 10 percentage points lower in comparison to urban communities (47% vs. 57% respectively).<sup>3</sup> Additional data suggests rural young adults aged 18-26 years are less likely to initiate the HPV vaccine compared to their urban counterparts.<sup>4</sup> This low HPV vaccination coverage may be due to numerous barriers faced by rural residents at multiple levels – patient, provider, clinic, and community.<sup>2</sup> Barriers include, but are not limited to:

- Individual, interpersonal, organizational, and community-level barriers to accessing preventive healthcare services, including HPV vaccination, in rural communities.<sup>5</sup>
- Rural residents' lack of knowledge of HPV's link to cancer and limited awareness regarding the HPV vaccine.<sup>67</sup>
- · Cultural views unsupportive of HPV vaccination.
- Limited collaborative communication between parents and healthcare providers about HPV vaccination in rural areas.<sup>8</sup>
- Systems-level challenges with vaccine distribution and access, vaccination tracking in electronic health
  records, missed opportunities for vaccination, provider shortages, and clinical constraints such as long
  appointment wait-times.
- · Few widely available evidence-based HPV vaccination interventions focused on rural communities.<sup>9</sup>

https://hpvroundtable.org/wp-content/uploads/2021/05/HPV-Roundtable\_Rural-Disparities-d01.pdf

- HPV vaccination coverage has lagged in rural areas for several years
- National Roundtable produced an evidence summary to describe what's known, what's new, and what's next
- Evidence summary is currently being updated by the Rural Advisory Committee



## ACS 2023-2024 HPV Vaccination Impact Report: Rural HPV Vaccination Learning Community

#### **RURAL HPV VACCINATION LEARNING COMMUNITY**

ACS and the National HPV Vaccination Roundtable (HPVRT) are partnering with rural health care partners to expand knowledge and increase on-time HPV vaccination. The 10-part series runs March through December 2024.

#### **Program Topics**

- Setting the Stage: Networking & Orientation
- A Deep Dive into HPV Vaccination Data
- HPV Vaccination Starting at Age 9
- The ABCs of Quality Improvement: AIM Statements & Building a Team
- The ABCs of Quality Improvement: Process Mapping & Gap Analysis
- Finding the Best Fit: Evidence-Based Interventions & HPV Vaccination
- The ABCs of Quality Improvement: PDSA Cycles

Cancer

- Highlighting HPV Vaccination Best Practices
- Celebrating & Sustaining Success



- Rural Health Systems: ACS launched a new rural HPV learning collaborative in March 2024 for rural health organizations, focused on quality improvement.
- To date, over 200 organizations in 42 states have joined the series, reporting a reach of >180,000 active 9- to 13-yearold patients.



https://hpvroundtable.org/wp-content/uploads/2024/07/2023-24-HPV-Vaccination-Impact-Report-2.pdf

second Exemption

## ACS 2023-2024 HPV Vaccination Impact Report: Mountain West HPV Project

#### Mountain West HPV Project

More than 50 million individuals live in rural communities in the United States. Like many special populations, individuals living in rural areas have access barriers to overcome and they have documented poorer health outcomes. This holds true for HPV vaccination, which has low uptake and can result in higher rates of HPVrelated cancers.

The American Cancer Society (ACS) received three years of funding for a project titled **"Mountain West HPV Project to Reduce Geographic Disparities in HPV Vaccination Rates for Adolescents Living in Rural States.**" The states included in this project included Idaho, Montana, Nevada, Utah, and Wyoming. The project sought to address geographic and gender gaps in HPV vaccination rates and increase on-time initiation. ACS applied a health equity lens to implement disparity-reducing interventions through a three-pronged strategy.

Key elements and best practices from the Mountain West HPV Vaccination Project have been scaled up into

ACS's national HPV program through state-based initiatives and geographic disparities work.

100+ organizations represented

8

3

virtual regionwide meetings

REGIONAL

CONSORTIUM

235



#### **Regional Consortium**

For widespread state-level impact, the project required strong partnerships and stakeholder buy-in. ACS convened like-minded organizations and community partners to increase HPV vaccination by providing information, sharing knowledge, and identifying areas of need and future opportunities.



P Cancer Free

#### Quality Improvement

ACS engaged health systems in a learning collaborative with a focus on quality improvement (QI). This strategy catalyzes care systems and providers as the key drivers of vaccination uptake. ACS provided technical assistance on QI tools and evidence-based interventions (EBIs) to health system partners to increase on-time HPV vaccinations in 9-13 year-old adolescents.

#### **Professional Education**

A provider's recommendation is the most important factor in whether a child receives a vaccine. ACS provided HPV vaccination education through various methods including Project ECHO, learning series, and individual education sessions to inform traditional and non-traditional vaccinators.

2,173 Unique participants

engaged from 2021-2023

https://hpvroundtable.org/wp-content/uploads/2024/07/2023-24-HPV-Vaccination-Impact-Report-2.pdf

- Mountain West HPV Project focused on addressing barriers faced by people living in rural areas of this region
- Regional consortium formed
- Quality improvement learning collaborative
- Professional education for healthcare providers



## Introductory St. Jude Rural HPV Vaccination Meeting, January 2023



St. Jude Introductory Rural HPV Vaccination Meeting • January 23, 2023

#### PURPOSE

Rural life is a choice made by 1 in 5 people, but they don't choose to be at higher risk of cancers, including HPV cancers. HPV vaccination is cancer prevention. We must do more to make sure those living in rural America are protected too. The purpose of this introductory meeting was to bring together thought leaders to share information and identify ways to act.

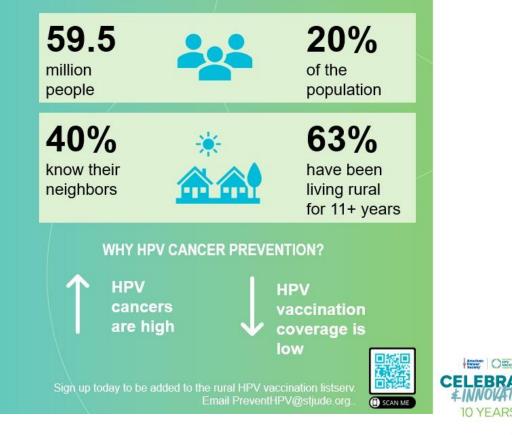
#### **PRE-MEETING SURVEY RESULTS**

Prior to the meeting, attendees completed a brief survey to explore rural HPV cancer prevention challenges and opportunities. Of the 132 pre-registered participants, 88 (66%) completed the survey.

Strengths	Primary Challenges	Most Pressing Issue
<ul> <li>Collaboration</li> <li>Resilience</li> <li>Tight-Knit</li> <li>Trust</li> </ul>	<ul><li>Access to care</li><li>Lack of specialists</li><li>Transportation</li></ul>	<ul> <li>Access to care</li> <li>Funding</li> <li>Lack of education</li> <li>Lack of resources</li> </ul>

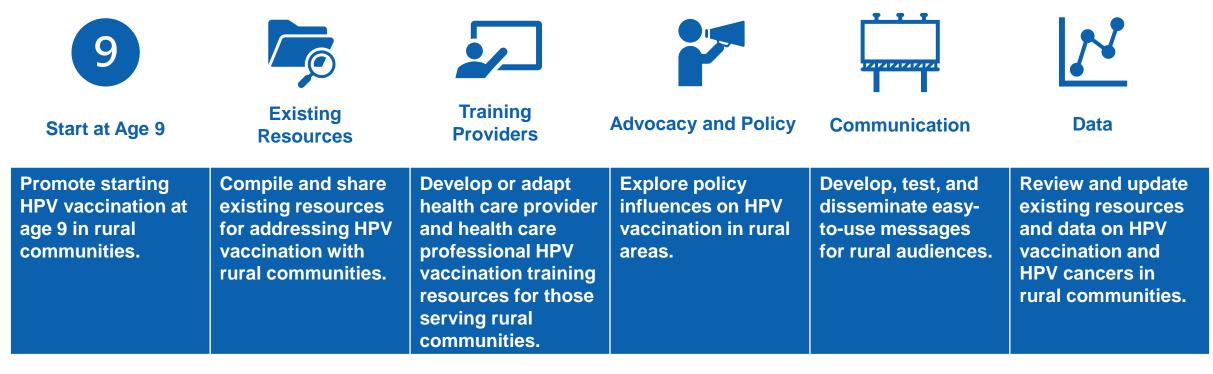


WHO LIVES IN RURAL COMMUNITIES?



## **Rural HPV Vaccination Priorities**





Informed by the St. Jude Rural HPV Vaccination Think Tank • Learn more at stjude.org/hpvrural

Next quarterly updates meeting is on National Rural Health Day on November 21.

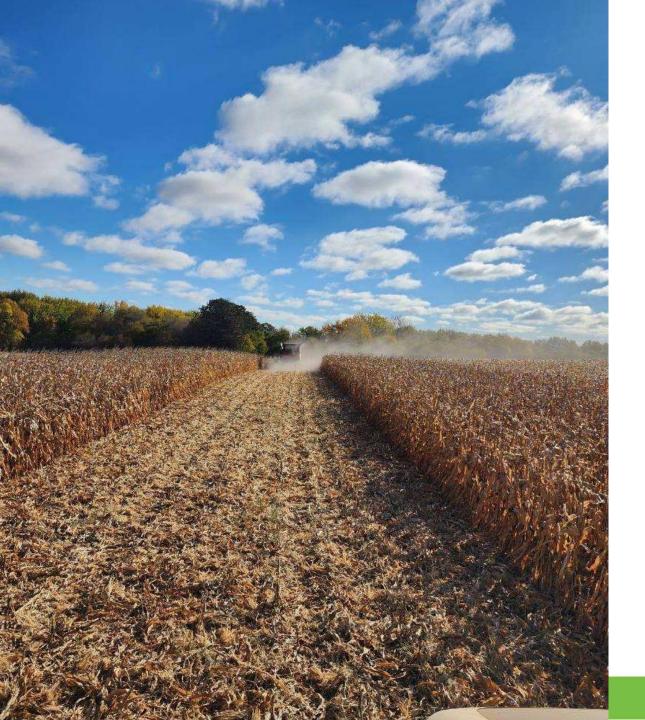


## **Joining Forces**

- American Cancer Society
- ACS National HPV Vaccination Roundtable
- American Academy of Pediatrics
- St. Jude HPV Cancer Prevention Program
- And more!

## **ACS National HPV Vaccination Roundtable Rural Advisory Committee**





## Realizing the Power of Collaboration to Build on the Strengths of Rural Communities to Improve HPV Vaccination Coverage



# Thank you!

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## National Partnerships with Rural HPV Vaccination





## Wrap Up & After Party

CELEBRATE #INNOVATE TO YEARS

**Christina Turpin** Director, National HPV Vaccination Roundtable American Cancer Society

## Join the Party: **Rural HPV Vaccination Learning Community**



Partner with us in 2024 to Address HPV Vaccination **Geographic Disparities** 

Protecting our children today for a healthier tomorrow

The American Cancer Society (ACS) and The National HPV Vaccination Roundtable (HPVRT) are seeking rural healthcare partners to join a learning community focused on improving HPV vaccination among 9-12-year-olds.

Through a series of virtual sessions and peer-based learning, the rural disparities HPV vaccination learning community will use quality improvement (QI) and evidence-based interventions to increase vaccine rates. This no-cost, practical how-to learning community will serve as a forum for health partners to gain knowledge, exchange promising practices, and talk through challenges to increasing HPV vaccinations in rural settings.

Pandemic impact:

have been missed, leaving

many children unprotected

from future cancers. The

impact on publicly insured

children has been

significant.

organization:

experts.

#### Why Prioritize HPV?



Most patients will be exposed to HPV: HPV is extremely common. The HPV vaccine provides protection from these infections and six types of cancer.

**Population health** Nationally 8.4 million doses

management: Rural communities lag 10% behind the national average for HPV vaccination, HPV underperforms compared to other ACIP recommended vaccines, including Tdap

#### Why partner with ACS?



**History of success:** Since 2014, ACS has partnered on ACS is a leader in the HPV 300+ HPV OI projects. Partners vaccination space. have rate improvements of 3-Participation includes access 5%. Review our 2022-2023 HPV to thought leaders and Impact Report to learn more.

#### **Trusted global**

**Mission HPV Cancer Free:** ACS set a goal to increase HPV vaccination rates and seeks to eliminate vaccine preventable HPV cancers, as a public health problem starting with

cervical cancer.

and MenACWY.



1.30.2024

Attendees will learn and apply QI tools and best practices to increase vaccine delivery.

#### **Participation Benefits:**

cancer.org | 1.800.227.2345

 Access to ACS & HPVRT resources and materials Co-branding opportunities Data utilization best practices Networking with peer organizations Practical implementation tips

 Opportunity to showcase success • QI coaching & support · Learning from subject matter experts · Social media toolkit (patient-facing) Preventing HPV-related cancers and pre-cancers



**Cancer prevention** in action:



#### Questions? Please reach out to Ashley Lach, HPV Program Manager Email: Ashley.Lach@cancer.org

This resource is supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government



Learning Outcomes

**Learning Session Details** 

Topics

Dates

March 20, 2024

April 10, 2024

May 22, 2024

June 19, 2024

July 17, 2024

August 14, 2024

October 16, 2024

December 4, 2024

Increase on-time HPV vaccination rates

Expand knowledge around HPV infection, related-cancers, and vaccination rates

Discuss best practices and challenges increasing HPV vaccinations in rural settings

The ABCs of Quality Improvement: AIM Statements & Building a Team

The ABCs of Quality Improvement: Process Mapping & Gap Analysis

Finding the Best Fit: Evidence-Based Interventions & HPV Vaccination

• Explore evidence-based interventions to increase HPV vaccinations in your community

Build awareness around the importance of HPV vaccination data

Setting the Stage: Networking & Orientation

Highlighting HPV Vaccination Best Practices

A Deep Dive into HPV Vaccination Data

HPV Vaccination Starting at Age 9

September 18, 2024 The ABC's of Quality Improvement: PDSA Cycle

November 13, 2024 Highlighting HPV Vaccination Best Practices Celebrating & Sustaining Success

#### **Registration Details Registration is rolling and** participants can join at any time

throughout the year. Register using the following link: or scan the QR code.

Once registration has been completed, Zoom calendar invites will be sent for the monthly calls.



Time:

Cost:

2-3pm EST

Location:

Free to attend

Virtual format via

Zoom meeting

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## Join the Party: Cancer Prevention Through HPV Vaccination Action Guides





Cancer Prevention Through HPV Vaccination: An Action Guide for Health Plans



#### Cancer Prevention Through HPV Vaccination: An Action Guide for Large Health Systems



## Cancer Prevention Through HPV Vaccination:

American

**Cancer** 

Society

An Action Guide for Nurses and Medical Assistants

HPV VACCINATION



## Join the Party: HPV Vaccination Best Practice Sessions





## The After Party: 2025 National HPV Conference





## Thank you to our ACS HPVRT Steering Committee!



Heather Brandt, PhD, St. Jude Children's Research Hospital



Noel Brewer, PhD, University of North Carolina, Gillings School of Public Health

Ryan Lester, MPH,

American Academy

of Family Physicians



Rebecca Coyle, MSEd, American Immunization Registry Association



**ACS HPVRT Steering Committee** 

Jane Grey, MPH, California Department of Public Health



Brigid Groves, PharmD, MS, American Pharmacists Association



Nikki Hayes, MPH, Division of Cancer Prevention and Control, *Centers for Disease Control and Prevention* 







Michelle Fiscus, MD, FAAP, Association of Immunization Managers



Judy Klein, Unity Consortium



Jill Moses, MD, MPH, Immunization Services Division (ISD), Centers for Disease Control and Prevention



Kristin Oliver, MD. MHS, American Academy of Pediatrics

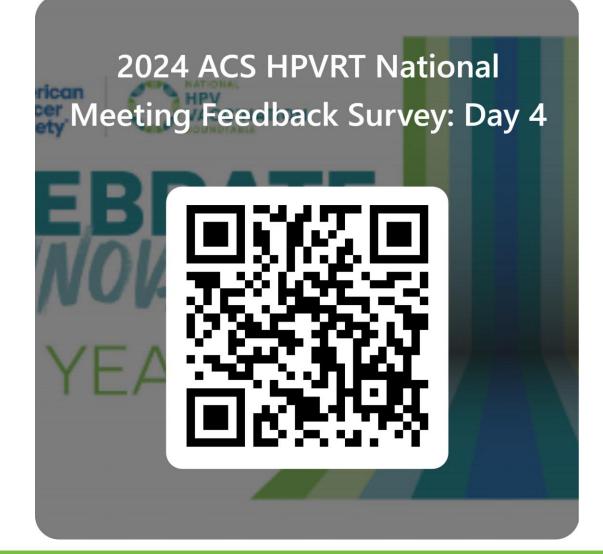
Sharon Perlman, DDS, MPH, American Association of Public Health Dentistry

Rebecca Perkins, MD, MSc, American College of Obstetricians and Gynecologists

Tamika Felder, *Cervivor* 

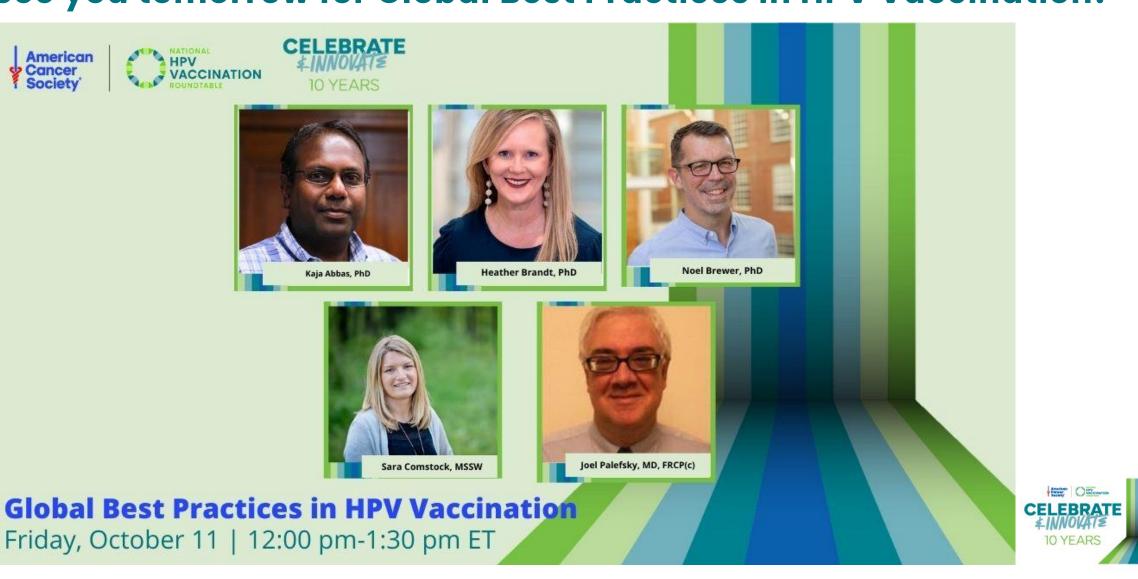


## The After Party: Take the Session Evaluation Survey





## Let the Celebration Continue: See you tomorrow for Global Best Practices in HPV Vaccination!



# HPV VACCINATION + YOUR CHILD

# PREVENTION!

# Thank you!



American Cancer Society



National Cancer Prevention Month