

# HPV Champions: Initiate and Vaccinate at 9 years

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## INTRODUCTION

**Topic: Clinical staff presentation of HPV vaccine influences opportunities for HPV vaccination and completion.**

### Problem

- HPV vaccination rates range from 60-80% vs 95% or above for other adolescent vaccines
- Clinical staff influence parental decision making along with provider recommendation
- HPV vaccine has higher efficacy if initiated at 9 years old vs later adolescent years
- Initiation at 9 years of age leads to higher rates of on-time completion vs. starting at 11 years of age

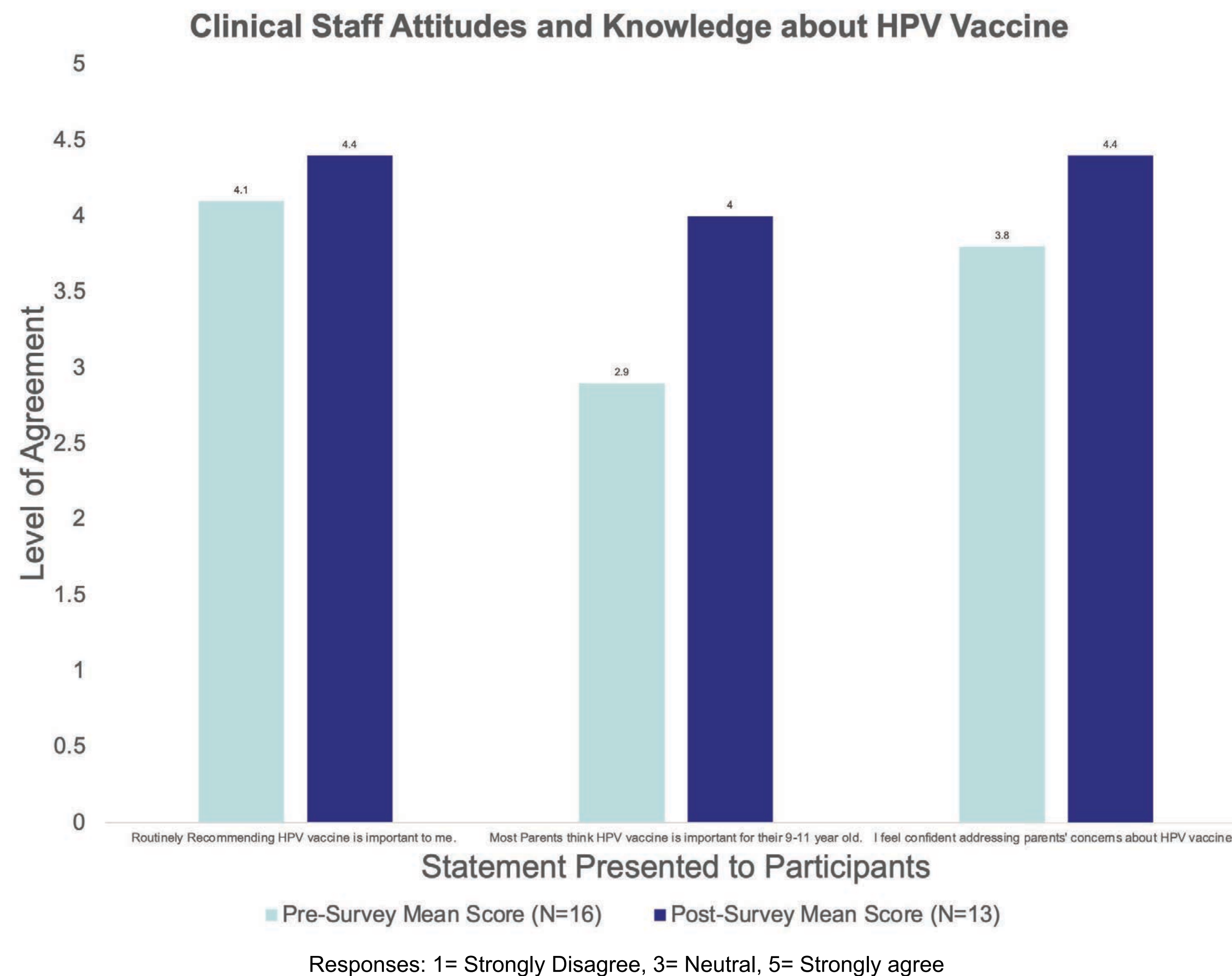
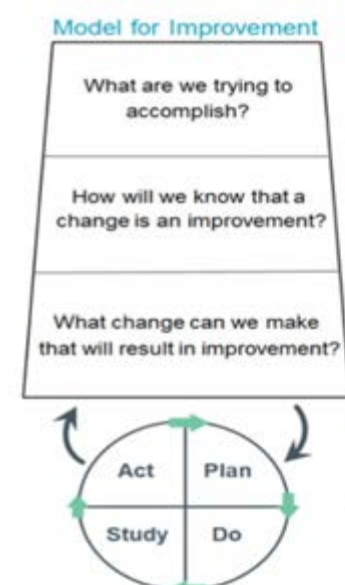
### Team Members

- HPV Champion/Local Advocate
- Nursing Supervisor
- Medical Director, Advent Health Pediatrics
- Executive sponsor: Rebecca Archer, APRN

**Aim:** The quality improvement (QI) project aimed to increase HPV vaccination knowledge in clinical nursing staff over a 1-month period, from 10/15/22-11/15/2022.

## METHODS

- Plan, Do, Study, Act (PDSA Cycle)
- Review available education tools based on validity and feasibility
- Refine pre and post-intervention assessment tool to assess knowledge and attitudes toward the HPV vaccine
- Obtain approval of intervention and project with the project team
- Implement QI initiative with clinical staff and nurses
- Suggest changes to implementation based on the PDSA model of improvement and present findings to organizational leaders (adopt change)



**Clinical staff routinely recommend the HPV vaccine to patients 9 years and older & feel comfortable answering questions about the vaccine.**

## RESULTS

- Increase in knowledge about the HPV in post-survey questions
- Clinic staff showed agreement/strong agreement to presentation of HPV at 9 years of age – pre & post intervention
- Change in staff parental attitudes pre and post intervention
  - Increase in thinking parents value HPV vaccine
- **100% of participants committed to the announcement method plan.**
  - I will try the announcement approach to recommend the HPV vaccine with five 9-11-year-old patients. If I do not meet this goal in the next two weeks, I will use the strategy with the next five eligible patients.

## IMPLICATIONS FOR PRACTICE

- Clinical staff integral to HPV vaccination success
- Need larger quality improvement projects, including non-clinical staff in educational training about HPV vaccination
- Reporting of HPV initiation rates vs. completion rates as a means of continual motivation for improvement
- Integration of standing orders, templating for 9-year-old HPV vaccination and documentation

## REFERENCES

