IKC Progress and Planning: Member Roles, Accomplishments, and Looking Ahead

Laura Connolly
Chair, Immunize Kansas Coalition

February 2nd, 2018
Introduction to IKC

• History: Immunize Kansas Kids (IKK)
  – Started in 2005
  – Mission: Protect every Kansas child from vaccine preventable diseases

• Now: Immunize Kansas Coalition (IKC)
  – Transitioned from IKK to IKC in 2015
  – Mission: Protect all Kansans from vaccine-preventable diseases
Growth of IKC

- 15 Founding Member Organizations
- Now 43 Member Organizations, over 100 on member distribution list
- Continued growth and interest
- Both organizational and individual members
- Types of members include
  - Clinicians
  - Health Departments
  - Researchers
  - Health Educators
  - School Nurses
  - Pharmacists
  - Provider Associations
  - Managed Care Organizations
  - Cancer organizations
  - Vaccine Producers
  - And many more!
Funding, Support, and Organizational Details

- Currently supported by a grant from Kansas Department of Health and Environment
- Kansas Medical Society is the fiscal agent
- Fiscal year is July 1 – June 30
- In the process of pursuing a 501(c)(3) non-profit status
- Contracted staffing currently provided by EnVisage Consulting, Inc.
- Coalition achievements and progress toward mission made possible through engagement and ongoing efforts of coalition members
Types of Membership

• **Institutional Member**
  – One vote (one designated voting member) per institution
  – Other institutional representatives are non-voting
  – Most of the current members represent an institution

• **Individual Member**
  – One vote

• **Liaison Member**
  – Goal of this category is to avoid perceived financial gain from the mission; specific to pharmaceutical companies/vaccine-producers
  – Non-voting member, i.e., may not vote or serve on Board, but may participate in other ways (attend meetings, discussions, serve on teams and committees)
Active Membership and Voting

- **Active Member**: Member in good standing, attend at least one coalition or committee/team meeting per year. (Members without active participation may be moved to inactive status by Board.)
- **Vote**: One vote per active institutional/individual member
- **Elections**:
  - List of active, voting members updated early in calendar year
  - Nominating Committee prepares list of qualified nominees
  - Elections completed no later than August 1st
  - Board/Officers installed at 1st Quarter meeting of Fiscal Year
Current Board

• Chair: Laura Connolly
• Chair Elect: Dr. Gretchen Homan
• Immediate Past Chair: Hope Krebill
• Fiduciary Representative (Secretary/Treasurer): Denise Lantz
• Education & Awareness Team Lead: Dan Leong
• Policy Team Lead: Charlie Hunt
• Grants & Funding Team Lead: Carlie Houchen
• Improved System Performance: Sarah Good
Board Terms

• Chair term: 3 years
  – 1 year as Chair Elect
  – 1 year as Chair
  – 1 year as Immediate Past Chair

• Strategic Team Chair term: 2 years

• Secretary/Treasurer (can be combined or separate position in new bylaws; currently fiduciary agent):
  – Secretary: term at discretion of the Board
  – Treasurer: term of 3 years
Current Goals

“The current focus of the Immunize Kansas Coalition is on improving access to and rates of adolescent immunizations, paying special attention to HPV and meningococcal vaccination rates.”

- By 2020, the goal is to have an increased HPV Up-To-Date vaccination rate from 36% to 43% (for both boys and girls).
- By 2020, the goal is to have an increased quadrivalent meningococcal conjugate vaccination rate from 69.7% to 80%.
Strategic Teams

- Education & Awareness
- Improved Systems Performance
- Policy
- Funding & Grant Development

- Meet during 1st hour of coalition quarterly meetings
- Members and guests may join the team meeting of their choice
- Some teams have conference calls or meetings at other times
- Where much of the “real work” is completed
Education & Awareness Team

• Promotion of Goals/Messages & Toolkits through activities such as...
  – Identifying effective messages and sharing proven resources helpful for increasing vaccination rates
  – Legislative Educational Event
  – Sharing message at workshop and conferences such as:
    • Kansas Immunization Conference
    • Kansas Academy of Family Physicians Conference
    • Kansas School Nurse Conference
    • KAAP Annual Fall Meeting
    • KAMU Annual Conference
  – Development and maintenance of IKC Website and Facebook Page
• Meets 1st Tuesday of every month, 1-2 p.m.
This past year, many members of IKC have volunteered to run the IKC Booth at different conferences across the state of Kansas.
Facebook Page: https://www.facebook.com/ImmunizeKansasCoalition/

and share!

Links to latest infographics, articles, and resources
Improved Systems Performance Team

• Creates toolkits for easy access to information about specific vaccines, including HPV, meningococcal, and Tdap

• Explores other ways to promote coordinated or system-wide improvements in Kansas vaccine rates
Current Toolkits

1. HPV Vaccine Toolkit
2. Meningococcal Vaccine Toolkit
3. HPV Community Education Events ("Someone You Love") Toolkit
4. Tdap Toolkit (now live)
HPV Vaccine Toolkit

• The HPV vaccine toolkit is full of resources for health care providers and for people in the community

• Some of the helpful links include:
  – Strategies to Improve Vaccination Rates
  – CDC Links/Websites
  – Clinician Resources and Talking Points
  – Quiz to test your HPV Vaccine knowledge
  – And loads of other great resources!
HPV Vaccine Toolkit: Key Documents

Key documents include:
- The Provider Call to Change
- The Community Call to Change
- HPV Vaccine Talking Tips
- HPV Vaccine Quiz
- Dr. Eplee’s Intro Letter

Test Your HPV Vaccine Knowledge

1. The HPV vaccine protects against cancer and is recommended for both girls and boys.
   a. True
   b. False
2. What percentage of people are exposed to HPV during their lifetime?
   a. More than 30%
   b. More than 50%
   c. More than 80%
   d. More than 90%
3. HPV causes more deaths from cancer than any other sexually transmitted disease.
   a. True
   b. False
4. The estimated U.S. annual burden of HPV disease prevention and treatment without HPV vaccine:
   a. $3 billion
   b. $80 million
   c. $500 million
   d. $1 billion
5. Which of the following statements about HPV vaccination rates is true?
   a. At the time of the survey, the vaccination rate is at the highest level ever recorded.
   b. HPV vaccination rates are not high for any race or ethnicity.
   c. There are significant differences in vaccination rates by race.
   d. There are no differences in vaccination rates by race.
6. Men also at risk for HPV-associated cancer.
   a. True
   b. False

Tips for Talking with Parents about HPV Vaccine

Situation or Context

Effective First Discussion
Use “bundled” language. HPV is feared as important and as different than other adolescent vaccines.

Don’t say, “This is just another vaccine.”

Try saying...

“Your child is due for vaccinations today to protect against meningitis, HPV cancers, and pertussis. We’ll give those shots at the end of the visit.”

Ineffective First Discussion
HPV is portrayed as different, optional, unimportant.

Try saying...

“I use your child to be healthy...it should definitely be discussed.”

Addressing Catch-Up Population
Promote of vaccine uptake, convey message of importance.

Don’t say, “You can’t catch HPV from the flu shot.”

Try saying...

“HPV vaccination is 99.9% effective.”

A Call to Change

What is HPV?

Human papillomavirus (HPV) is a common virus that affects both men and women. In fact, HPV is so common that more than 1 out of 2 people are infected with it. HPV-related cancers can be prevented through vaccination, but also occurs very rarely. Both boys and girls aged 11 to 18 years old should be vaccinated. HPV vaccine is important and as different than other adolescent vaccines.

Most common HPV-related cancers

- Cervical cancer
- Oral/pharyngeal cancer
- Anogenital cancer

Dana & Kurt’s Story

“I promised him that I would be his voice, for him.”

— Dana Montgomery
The community HPV Education event toolkit has tools to help engage the community and increase awareness on HPV related diseases using the powerful film, “Someone You Love”

- The hope is to increase vaccination rates by raising awareness about the HPV vaccine through the stories of individuals with HPV-related cancers
- Tools include videos, postcards, radio commercials, assessment tools, flyers, and more!
Meningococcal Vaccine Toolkit

- Kansas has one of the lowest meningococcal vaccination rates in the country
- The Meningococcal toolkit is full of great resources that help increase awareness for the meningococcal vaccine
Meningococcal Toolkit: Key Documents

Key documents include:

- The Provider Call to Change
- The Community Call to Change
- Toolkit User Guide
- Meningococcal Quiz
Policy Team

- Reviews/considers impacts of policy issues in Kansas and in other states (e.g., Kansas House Bill No. 2646 – Authorizing pharmacist vaccination), drafts model policies, and assesses adoption/use of policies.

- Model school exclusion policy
  - “…Outlines specific administrative procedural steps that will strengthen the protection of your students against vaccine-preventable diseases.”
  - Survey of school nurses regarding school exclusion policy planned and will be conducted soon.

- College and University Model Vaccine Policy (Meningitis Policy)
  - “The goal of the recommendation is to encourage practices and procedures that set the default state for students as receiving the vaccination, establishing widespread disease protection of Kansas College/University students.”

- IKC does not participate in lobbying or advocacy activities.
Funding & Grant Development Team

• Award Program
  – The first round of awards (2015-2016) was the Recognition Grant, which focused on increasing rates of the HPV and Meningococcal vaccines
  – The first round was a success; all applicants demonstrated some measurable improvement.
  – The second round of awards (2017-2018) is the Innovation Grant, which focuses on increasing all adolescent vaccination rates (HPV, meningococcal, and Tdap vaccinations)

• Another goal is sustainability for IKC to continue growing to the level of the robust coalitions in place in many other states
Recognition Award Program

Summary Statistics from 1st Round

14 groups total
- 3 Health Departments
- 4 Residencies
- 7 Providers/Clinics

Participants used 1 of 3 Immunization Rate Assessments
- 2 HPV, one-dose
- 9 HPV, three-dose series
- 3 Meningococcal, one-dose

4 Winners were:
- Turner House Children’s Clinic
- Community Health Center of Southeast Kansas
- Shawnee County Health Department
- Wesley Family Medicine Residency Program
Award Program Round 2: 
IKC Adolescent Immunization Innovation Grant

• The goal is successfully increasing age-appropriate adolescent immunization rates (HPV, meningococcal, and Tdap) in a clinical practice setting

• 4 awards, $5,000 for the winner in each category:
  – Local public health department
  – Residency program in family medicine or pediatrics
  – Safety net clinics
  – Providers and clinics directly involved in the delivery of immunization services for adolescents in Kansas

• Winners will be announced by January 2019
Ways to Become Involved

1. Attend Coalition Meetings
2. Attend Strategic Team Meetings; Become Engaged with a Team
3. Volunteer to Work a Conference Exhibit (Instructions and materials are provided)
4. Consider Serving on the Board (institutional and individual members)
5. Special Committee Opportunities (e.g., Nominating Committee, 501(c)(3) Committee)
6. Sponsor an IKC Meeting Lunch
7. Share and Promote IKC Resources (e.g., share toolkit resources, share model school exclusion policy with your local school nurse)
8. Host a Community HPV Education Event (show “Someone You Love” movie or other video + coordinated activities)
9. “Like” the IKC Facebook page; engage with posts
10. Help us stay up-to-date: review IKC website resources, recommend updates or improvements to resources, website, or Facebook postings
11. Email latest immunization-related articles, updates or success stories to Connie; suggest sharing with Board or Coalition
12. Read IKC email updates
IKC Strategic Priorities: Advancing Mission in 2018 and Beyond

Laura Connolly
Chair

Dr. Gretchen Homan
Chair Elect

February 2nd, 2018
IKC Strategic Priorities & Milestones

- **Mission:** Protect all Kansans from vaccine-preventable diseases
- **January 2015**
  - IKC Approved Charter
  - Identified Strategic Priorities
  - Targeting areas of low immunization rates
  - Adolescent immunizations, focus on HPV vaccination
- **2016**
  - Website
  - Facebook Page
  - HPV Vaccine Toolkit
  - Adolescent Immunization Awards (2016-2017)
- **2017**
  - Meningococcal Vaccine Toolkit
  - Community HPV Education Event Toolkit
- **2018**
  - Tdap Toolkit
  - Adolescent Immunization Innovation Awards
Evolving Priorities, Current Issues

- HPV Vaccine
- Meningococcal Vaccine
- Tdap
- Bundling, Announcement Training
- Influenza Vaccine

- Other topics
  - Immunization of Health Workers
  - Immunization of Child Care Providers
  - WebIZ Utilization
  - Adult Immunizations
  - Engaging Pharmacists as vaccine providers
Discussion Questions

• **Accomplishments:** What IKC accomplishments are you most proud of? What IKC work to-date has been most effective?

• **Priorities:** Looking ahead to FY19 and beyond, what should our top *priorities* be in order to further the IKC mission of protecting all Kansans against vaccine-preventable diseases? What should be continued? What should change?

• **Activities/Methods:** Looking ahead to FY19 and beyond, what should our key *activities* be? What *methods* should we use to further our mission?

• **Partners/Stakeholders:** Who is missing from the table? What organizations or stakeholders do we need to further engage?