

**National Adult Vaccine Summit
May 15-16, 2012
ACOG Experiences in Provider
Support: Lessons Learned**

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Background

- Current data demonstrate that a **strong** HCP vaccine **recommendation** is a major contributor to a successful adult vaccine program
- Numerous surveys indicate that Ob/Gyn's depend on ACOG for practice guidance, education and resource support
- The information to follow reviews recent ACOG adult/adolescent vaccine activities

Overview

- Expert Working Group
- District II Well-Woman Educational Initiative
- Immunization for Women Website
- District V Demonstration Project
- Direct Fellow Mailings
- Coding Monograph
- Immunization Smartphone Application
- Legislative “on-the-hill” Activities
- ACM Vaccine Course

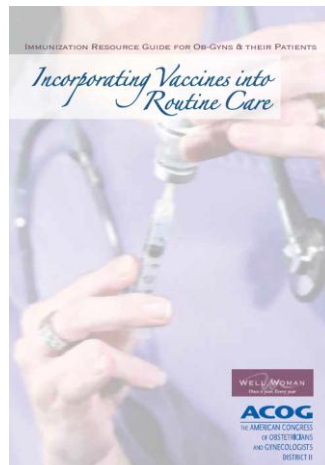
ACOG-sponsored Website



Website Content and Activities

- Includes CDC vaccine schedule, office start-up instructions, patient communication advice, coding, finances, ordering, liability, links to other sites, and specific vaccine topics that focus on the pregnant patient.
- Metrics (3/30/11 to 2/29/12) show 10,353 visits, 2.75 pages/visit, 2 minutes/visit, 18% return visitors, 32% “direct” traffic vs. 16% “searched” traffic
- Most frequently visited pages: Home > Preg/breastfeeding > VPD > Flu > CDC schedule

District II Immunization Guide



District II Well-Woman

- CDC funded multi-year project
- 1st year initiative “Incorporating vaccines into routine care: Immunization resource guide for Ob-Gyn’s and their patients”
- Hard copy mailed to 4,200 NY Ob-Gyn’s
- www.nywell-woman.org
- Guidelines include
 - Introducing vaccine discussion
 - Laws and regulations
 - Office readiness
 - Tracking and support systems
 - FAQ and resource list
- Patient vaccine questionnaire

ACOG Vaccine Direct Mailings CDC and ASTHO supported

Seasonal Influenza (Flu) 2011-2012 Included:

- Flu Vaccine FAQ tear pad for patients
- Physician Script with Coding information
- ACOG Committee Opinion 468 “Influenza Vaccination During Pregnancy”
- Vaccine Information Statement



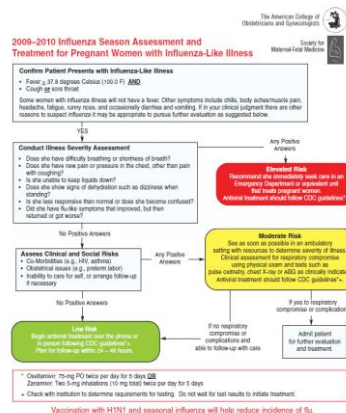
Seasonal Influenza (Flu)
2012-2013 Mailing in
development now!

Mailings (con't)

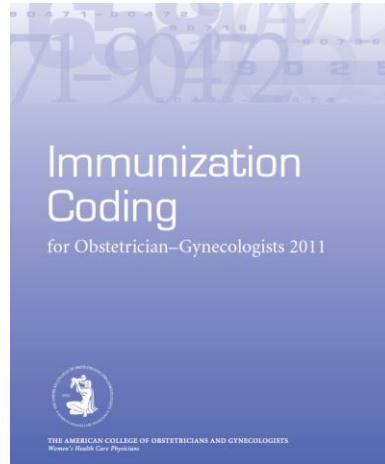
Tdap, May 2012, Will Include:

- Tdap tear pad for patients
- Vaccine Safety
- Physician Script
- Coding Information
- Vaccine Information Statement
- Committee Opinion No. 521 "Update on Immunization and Pregnancy: Tetanus, Diphtheria, and Pertussis Vaccination"

2009-2010 Influenza Pregnancy Assessment and Treatment



Immunization Coding Information



Building Partnerships Between Ob-Gyns and State Health Department Immunization Programs

- **Project Goals:**
 - CDC funded one year demonstration project
 - To create and expand ob-gyn office-based immunization programs in ACOG District V (MI, OH, IN, KY)
 - To increase the types and doses of immunizations given in ob-gyn practices
 - To build sustainable partnerships with each respective state health department (SHD) immunization program
- **Project Methodology:**
 - Recruit total of 60 ob-gyn practices, 15 selected from each state (MI, OH, IN, KY)
 - One hour on-site training, given by the SHD and College program staff
 - Set of core immunization materials jointly developed by SHD and ACOG staff
 - Contact information for SHD Immunization Program staff as an expert resource for future immunization questions and concerns
 - Pre-test was given to the 60 practices ; 3 months post-test after intervention. 58 practice completed the post-test

Pre-test Outcomes

- 95% offered any vaccine
 - HPV > Flu > Tdap
- 54% identified “vaccine coordinator”
 - Office manager or nurse
- 48% had contact with local health dept re: vaccine issue
- 56% familiar with VFC (30% enrolled)
- 64% (MI, OH, IN) aware of State registry
- 63% aware ACOG supports office-based vaccinations

Post-test Outcomes

- 1/3 of sites added at least one vaccine
- 19% giving more vaccine doses
- 86% identified “vaccine coordinator”
- 48% participate in State registry
- 83% have SHD contact person
- 41% actively working on office vaccine program
- Resource utilization
 - 35% ACOG website
 - 49% CDC website
 - 44% vaccine schedule
- Other practice changes
 - 39% integrate vaccine discussion during visits
 - 19% added vaccine info to chart
 - 14% added recall system for multi-dose call backs

Other Lessons Learned

- Practitioners and staff recognize the importance of office-based vaccination programs, and are appreciative of efforts to encourage this practice
- Address all office staff during training; this helps maintain consistent, positive messaging
- Each office must commit to a “vaccine coordinator”
- Provide office with SHD contact information; face to face is always preferred
- Make clear ACOG’s commitment to this process
- Provide State-specific and patient-specific data; make it relevant to the practice
- Provide practical examples and solutions
- Recognize that establishing a viable and sustainable vaccine program requires a paradigm shift that includes a culture change

Working Group Perceived “Needs” List

- **Pregnancy-specific vaccine research**
 - FDA approval for established vaccines
 - New vaccines (GBS, CMV, HSV, etc)
- **Reimbursement**
 - Broader adult vaccine financing
 - Pregnancy-specific (bundled fees)
- **Vaccinee status**
 - Lack of adult-based reliable registries
 - Poor understanding of transitioning care
- **Nontraditional vaccination venues**
 - Medical homes
 - Pharmacies, etc.
 - Significant others
- **Pregnancy-related liability**
- **Quality indicators**