

Goal 4: Prevent, reduce and ultimately eliminate the infectious disease burden in Connecticut.

Area of Concentration: Vaccine-Preventable Diseases

SHIP Objective ID-1:

Increase by 5% the vaccination coverage levels for Advisory Committee on Immunization Practices (ACIP) recommended vaccines among children and adults.

Dashboard Indicator:

- Vaccine coverage levels for ACIP recommended vaccines among children 19 35 months of age.
- Varicella vaccine coverage levels for ACIP recommended vaccines among adolescents 13 to 17 years of age.
- <u>Tdap vaccine coverage levels for ACIP recommended vaccines among adolescents 13 17 years of age.</u>
- Meningococcal conjugate vaccine coverage levels for ACIP recommended vaccines among adolescents (13 17 years of age).

Strategies	Actions and Timeframes	Partners Responsible	Progress
ID-1.1	a. Identify materials to share with variety of		
Educate parents/consumers about the	networks		
importance of ACIP recommended	b. Identify networks that reach parents or		
vaccines for children (Human	potential parents. (including worksites, schools,		
Papillomavirus (HPV), hepatitis A,	universities/ higher education, faith based		
rotavirus, influenza)	communities, and local nonprofits)		
	c. Develop sample framing language for various		
	audiences.		
	d. Distribute materials		
	Due: December 2018		
ID-1.2	a. Outline process for use of the new		
Enhance Connecticut Immunization	Immunization Information Systems to utilize bi-		
Information System (IIS) to process bi-	directional reporting of childhood		
directional electronic reporting; then	immunizations.		
increase utilization by providers and	Due: December 2018		
the general public.	b. Increase use of IIS by vaccine providers		
	c. Increase use of IIS by parents		
	d. Due: December 2019		

Resources Required (human, partnerships, financial, infrastructure or other)

Monitoring/Evaluation Approaches



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SHIP Objective ID-5: Increase by 5% the percentage of adults who are vaccinated annually against seasonal influenza.

- Dashboard Indicator:
 - Percent of youth in Connecticut under 18 years of age who are vaccinated annually against seasonal influenza.
 - Percent of adults in Connecticut (18 years of age and older) who are vaccinated annually against seasonal influenza.
 - Percent of adults (65 years of age and older) in Connecticut who are vaccinated annually against seasonal influenza.

Strategies	Actions and Timeframes	Partners Responsible	Progress
ID-5.1 Develop new and diverse venues for influenza vaccine administration and culturally appropriate outreach to ensure access to all population groups.	 a. Survey local health departments on venue options they plan to utilize b. Engage local business associations and/or Chambers of Commerce to collaboratively arrange for on-site, or near-site clinics. (DPH has "how to" materials related to this item) c. Share lessons learned via local partner webinar on implementing alternative venues for flu vaccinations Due: December 2018 	DPH Office of Local Health Administration? CADH/LHDs	

Resources Required (human, partnerships, financial, infrastructure or other)

Monitoring/Evaluation Approaches



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SHIP Objective ID-7: Increase by 20% HPV vaccination rates for male and female adolescents 13 to 17 years of age to meet CDC guidelines.

Dashboard Indicator:

- Rate of HPV vaccinations for female adolescents 13 to 17 years of age meeting CDC guidelines.
- Rate of HPV vaccinations for male adolescents 13 to 17 years of age meeting CDC guidelines.

Strategies	Actions and Timeframes	Partners Responsible	Progress
ID-7.1 Educate providers about vaccine availability, delivery, cost and practice guidelines.	 a. Launch public communication campaign. Due: September 2018 Engage vulnerable populations in the development and dissemination of Social media messages. Dissemination could include reaching existing networks: local libraries, school districts, local health departments, community health centers, faith based communities, DPH website, Twitter, Facebook, etc. Disseminate social media message from DPH and partners. Action team members will monitor and share/re-tweet messaging. Members will share quarterly how many HPV prevention messages they shared via social media. b. Partner with Capitol Community College and Hartford Public Schools on a pilot to promote HPV vaccination. Due: December 2018 	HUSKY, DPH, SDE, local health department, IAPs, SBHC Assn, Communications staff from state agencies, etc.	
ID-7.2 Educate parents and providers about the cancer prevention benefits of the HPV vaccine.	a. Identify networks for information dissemination b. Identify information to be shared Due: December 2018 partnerships, financial, infrastructure or other)	AAP, CVAC, DPH, CADH, CT Cancer Partnership, SBHC Assn, CPHA; HPV Alliance	

Resources Required (human, partnerships, financial, infrastructure or other)

Monitoring/Evaluation Approaches



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Area of Concentration: HIV

SHIP Objective ID-12: Reduce by 5% the number of diagnosed cases of HIV overall, among men who have sex with men (MSM) and among black females.

Dashboard Indicator:

- Number of newly diagnosed cases of HIV in Connecticut overall.
- Number of newly diagnosed cases of HIV in Connecticut among men who have sex with men (MSM).
- Number of newly diagnosed cases of HIV in Connecticut among black females.

Strategies	Actions and Timeframes	Partners Responsible	Progress
ID-12.1 Expand routine screening programs to increase early detection of HIV.	 a. Action Team members identify providers within their jurisdictions for DPH DIS staff person to reach out to offer train the trainer on PrEP and PEP b. DPH DIS staff will coordinate provider training and track #'s trained in 2018. Due: December 2018 	Dulce (DPH) HIV new hires (DIS) Cathy L CHC-ACT	
ID-12.2 Establish partner referral services throughout the state at healthcare facilities.	a. Develop educational materials for patients and providers.b. Develop provider detailing initiative to work with ED staff and clinicians.		
ID-12.3 Develop coordinated HIV surveillance, prevention and care data systems to monitor Connecticut trends in the HIV continuum and effectively target resources/ interventions.	 a. New vendor to coordinate data collection, b. Define data needs c. Evaluate approaches for identifying people who are unaware of their status and link them to care. Due: December 2018 		
ID-12.4 Expand use of pre-exposure prophylaxis (PrEP) as preventive measure for persons engaging in high-risk behaviors.	 a. Action Team members will identify providers within their jurisdiction b. Identify contractor to provide PrEP navigator training and distribute PrEP starter packets c. Conduct evaluation of the use of PrEP navigators in CT Due: December 2018 	CT DPH, Luis June Josh Carol CIRA, Elaine	



Focus Area 1: Infectious Disease F	Prevention and Control		
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Area of Concentration: HIV			
SHIP Objective ID-12: Re	educe by 5% the number of diagnosed cases of HIV overall, among m	en who have sex with men	(MSM) and among black females.
ID-12.5	a. Increase capacity of hospital emergency departments and	CT DPH,	
Increase use of post-exposure prophylaxis (PEP) as preventive measure for persons with suspected exposure to HIV.	urgent care clinics to provide PEP as HIV prevention tool competently and in timely manner. • Work with hospitals and clinics to make sure PEP starter packs are on hand and system for linkage to follow-up	ACT	
	care is in place. Follow up care should include PrEP assessment. Due: December 2018		
Resources Required (human, p	partnerships, financial, infrastructure or other)		
Monitoring/Evaluation Approaches			