

## NAIIS SUMMARY

### National Adult and Influenza Immunization Summit summary

#### # Executive Summary

Sponsored by the US Centers for Disease Control and Prevention (CDC), National Vaccine Program Office, and Immunization Action Coalition, the National Adult and Influenza Immunization Summit convened in Atlanta, GA, on 13-15 May 2014. The annual Summit meeting allows representatives from the healthcare industry, public health and private medical sectors, vaccine manufacturers and distributors, consumers, and others interested in improving coverage for influenza vaccine for all ages and vaccines recommended for adults by the Advisory Committee on Immunization Practices (ACIP) to discuss actions Summit members can take to improve immunizations uptake during the coming year.

While immunization has long been a routine part of children's healthcare, adults also need immunizations. Low awareness of the importance of adult vaccines by patients, limited incorporation of routine vaccine needs assessment by providers, complexities in healthcare coverage for immunizations given by different providers, and financial and access barriers continue to hamstring efforts to immunize adults. Summit participants focused the meeting on identifying specific barriers to adult vaccination and, most importantly, mitigation strategies to improve adult vaccine uptake and influenza vaccination for people of all ages. The first two days of the meeting covered adult immunization, while the third day focused on influenza vaccination. The highly interactive working meeting featured presentations from the Summit's working groups as well as talks about new research and past projects, interspersed with extensive question-and-answer periods, surveys, and audience polling for additional input.

#### \*\*Day 1\*\*

The Summit began with a keynote presentation by Assistant Secretary for Health Dr. Howard Koh, who discussed the importance of adult immunization and the major hurdles to wider coverage. While children commonly see a single pediatrician who ensures they're up to date on vaccines, adults tend to receive their healthcare piecemeal, making immunization tracking much harder. Other presentations in the first session explained the wide variation in vaccine coverage rates for different populations, and the best strategies for increasing awareness about vaccines among adults.

Some of the biggest barriers to adult immunization are related to vaccine and vaccination financing. While the Affordable Care Act has extended health insurance to more people, states vary widely in their implementation of the legislation, especially Medicaid expansion. Meanwhile, many physicians have to see large numbers of patients very quickly in order to keep their practices afloat, and tracking each patient's immunization status takes time and is often not a priority. Standing orders for vaccines and electronic health record systems that prompt users about vaccination can help boost rates.

Other problems may be mitigated through technological “fixes”. In a session on new technologies, Summit attendees heard about “smart” refrigeration units that automatically maintain proper storage conditions for vaccines and simultaneously track supplies. Vaccine makers also presented data from recent clinical trials providing new evidence of effectiveness. Looking further into the future, researchers are trying to develop immunizations against several sexually transmitted diseases and other high impact diseases.

After lunch, the Summit's working groups held break out meetings to discuss their specific topics. The five working groups focus on healthcare providers, quality measures, access and collaborations, patient education, and reaching decision-makers. Throughout the year, these groups collaborate through conference calls and online discussions to help advance their members' work. The Summit allows them to meet face-to-face, report on work from the prior year, and discuss their agendas for the coming year.

The final session of the first day focused on health plans and health systems, with presentations from several large healthcare networks and insurers who collectively cover millions of patients. A wide reach doesn't guarantee easy vaccination coverage, though. Among other problems, these plans have faced the difficulties of reaching patients in far-flung communities, overcoming language barriers with immigrant populations, and identifying the best ways to reach diverse groups of adult patients.

At the end of the day's main sessions, Summit co-chair L.J Tan delivered a presentation about the Summit's history. Attendees then watched a preview of the new documentary film “Invisible Threat,” a movie created by high school students who investigated immunization and the anti-vaccine movement.

## \*\*Day 2\*\*

On the meeting's second day, attendees heard reports from the working groups. The Provider Education working group tries to boost interest in vaccines among doctors, nurses, pharmacists, and other clinicians. Organizational changes, such as establishing standing orders for vaccines and holding separate vaccination clinics, have been especially effective. Working group members have advocated such changes through professional organizations and direct outreach.

The Patient Education working group focuses on the other side of the immunization transaction. Over the past year, group members developed a tutorial explaining how to create a public relations campaign for vaccination. Organizers of National Immunization Awareness Month, which occurs each August, have already put the tutorial to use to design their month-long public relations effort. Meanwhile, the CDC and professional organizations continue to update their own immunization-related materials, many of which are available for other groups to incorporate into their own campaigns.

Based on input from last year's Summit, the Quality Measures working group focused on consolidating some of the numerous quality measures already used for vaccination, and developing simpler composite measures. Group members are also trying to standardize the recordkeeping codes for vaccines. In addition, they developed a dashboard on Healthy People 2020 immunization measures and reported on pilot studies by Veterans Affairs and Indian Health Service to look at possible composite measures for adult immunizations.

The Summit's annual Immunization Excellence Awards luncheon recognized organizations that ran exceptional vaccination campaigns last year. Mitch Rothholz of the American Pharmacists Association also received a special award for his extraordinary support of the Summit over the years.

After lunch, the Access and Collaboration working group discussed its efforts, which centered on the National Vaccine Advisory Committee's new Adult Immunization Practice Standards. The standards outline what immunizers should aim to accomplish in adult vaccination. Much of the session focused on implementing and improving immunization information systems, or vaccine registries, for tracking patients' vaccination status.

The State of the States session reviewed the public health programs in specific states, and also the challenge of running these programs in the face of decreasing funding. State vaccination clinics rely heavily on a CDC budget item called Section 317 to fund adult immunization, but cuts to that fund for vaccine purchases have left the programs with challenges in providing vaccine services for adults. Representatives from the Washington State and Chicago health departments described some successful efforts in their jurisdictions.

In the day's final session, the Decision Makers working group talked about what information was needed to educate policymakers, insurers, and government administrators about the importance of immunization. The group compiled state-level data about adult immunization, met with members of Congress to promote new adult immunization legislation, and established a repository of policy documents over the past year. Presenters also talked about ways to improve insurance coverage for vaccines.

**\*\*Day 3\*\***

The third day of the meeting was the Influenza Vaccine Summit, which began with a summary of the 2013-14 flu season. The CDC's influenza surveillance systems showed that the 2009 H1N1 virus predominated for most of the season, with a late-season rise in influenza B. Vaccine makers delivered over 130 million doses, and overall immunization rates appeared similar to the previous year. Though it was a moderate season by historical standards, infants and young adults seemed to have somewhat higher rates of hospitalizations and deaths than usual.

Public health experts recommend that everyone over the age of 6 months get a flu vaccine, but some populations are particularly vulnerable to severe illness. A panel discussed the importance of vaccinating residents and staff in long-term care facilities, the potential importance of flu vaccination for patients with heart disease, the use of faith-based organizations to reach more people, and the need to increase vaccination rates among children.

CDC Director Tom Frieden delivered the flu meeting's keynote address. Frieden emphasized that while much of the public considers influenza a routine annoyance, public health officials understand that the virus retains the potential to cause a global pandemic. Summit attendees next heard a summary of the problems facing influenza vaccination in Europe from Dr. Arnold Monto who described difficulties regarding widespread public mistrust that has hamstrung many immunization programs.

Additional presenters discussed pandemic influenza preparedness for the U.S. While US officials faced some criticism during the 2009 H1N1 pandemic, overall public perceptions and ongoing government efforts have put the nation in a much better position to handle a flu pandemic. Spurred by new government incentives, manufacturers have stepped up production of traditional egg-based vaccines and developed new, more efficient manufacturing methods as well. Stockpiles of vaccines against the strains deemed most likely to cause pandemics provide an additional level of insurance.

Getting patients to take advantage of the seasonal influenza vaccine requires convincing them that it can protect them from a very real threat. In a session on flu vaccine communications, Summit attendees heard about several strategies for improving public relations campaigns, ranging from social media efforts to door-to-door campaigns.

The final session of the meeting featured presentations from the manufacturers and distributors of influenza vaccines. For the 2014-15 season, the industry is on track to deliver approximately the same number of doses to the US as last year. Manufacturers are also continuing to improve and diversify their products. Though vaccination rates remain well short of public health workers' goals, Summit attendees left with updated information and a large selection of tools, ready to spend another year combating vaccine-preventable diseases.