



Website: www.izsummitpartners.org/naicp/

Welcome – Courtney Londo (MI)

Courtney called the group to order at 2:00 p.m.

Welcome New Executive Committee Members - Courtney

Courtney welcome the new Executive Committee (EC) members: Columba Fernandez from Washington and Ben Sloat from Georgia.

Welcome to New Executive Committee Officers 2015 - Courtney

Courtney introduced the new EC officers for 2015:

- Co-Chairs- Courtney Londo and Lisa Randall
- Co-Recorder: Lana Hudanick and Columba Fernandez

A big thank you to past EC Officers – Courtney

Courtney recognized Sandy and Karen serving as co-chairs. Big thank you!

Panel Adult Immunization Coordinators: “What Works” – Susan Farrall (CDC)

Provider workgroup update from Susan – she encouraged everyone to be on the lookout for success stories for raising and improving adult immunizations. Nominations will open up in a few weeks. Information on awards criteria is available at: www.izsummitpartners.org/immunization-excellence-awards/. You can nominate your own agency or some other example from your state.

“What Works” posters for the Summit – The NAIIS has put out a call for stories and activities that are happening in other states to be able to share, as posters for the Summit meeting and as post-able vignettes after the Summit meeting on the Summit website (see 2014 examples available at: www.izsummitpartners.org/naiis-workgroups/provider-outreach/what-works/). For further information or to suggest ideas for 2015 posters contact Susan Farrall at sfarrall@cdc.gov.

Adult Immunization Efforts – Susan introduced each of the four panel speakers for this part of the meeting in a round robin style: Carlie Shurtliff (Utah), Stephanie Borchardt (Wisconsin), Lana Hudanick (Missouri), and Annie Fedorowicz (Minnesota).

Adult Immunization Efforts in Utah (Carlie Shurtliff)

Long term care (LTC) Site Visit Project to improve employee and residents vaccination rates (flu, pneumococcal, and hepatitis B): this project was possible thanks to PPHF funding. In past years, Utah has been able to track flu vaccination for employees and residents for different types of facilities (i.e. Assisting Leaving, Nursing Home Care, etc.), which allowed them to compare data. For this project they decided to visit 100+ LTCs across a 2 year period (those with lowest employee flu vaccination coverage rates and 50+ residents) to improve immunization knowledge,



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increase rates, and encourage USIIS participation. Few adjustments were made to incorporate info data from previous year.

Components of the project design: site visit using questionnaire & AFIX follow-up (facilities received an assessment report that allowed them to compare their immunization rates to county and state facilities); immunization education & record-keeping tools were provided to all the sites; 'Flu Myth Buster' and 'Storage & Handling' presentations were given; USIIS enrollment was encouraged and training was provided as well.

Results: Project started Feb 2013. Not all sites were visited by the time the report was done (only about half were visited). Next report should be able to show a more accurate picture of the results. Between 2012 and 2013, Utah had a 5 percentage point increase on their LTC employee's flu vaccination rate. No significant increase was seen for the employee's Hep B series vaccination rate. Their LTC residents' flu vaccination rate increase was also not very significant, and they experienced a small decrease in their LTC residents' pneumococcal vaccination rates.

Lessons learned: employee turnover is the biggest problem; record keeping practices in LTCs aren't good, particularly for pneumococcal tracking; drop-in visit gave a better snap shot than scheduled visits; questionnaire needs amending after being used because they are going to continue the program (fewer direct questions, more observational check boxes); one to two months follow-up visit or call are needed; system changes needed with management buy-in in larger facilities.

Future plans: continue site visits using 317 funding; revise questionnaire and follow-up timing; finish development of LTC Immunization Guidebook; Develop LTC webpage; Offer group training sessions for LTC HCWs; Collaborate with Oregon State Health Department on lessons learned, guidebook and improvements to site visit protocols.

If anyone has questions for Carlie with regards to this project, please email her at: cshurtli@utah.gov.

Adult Immunization Efforts in Wisconsin (Stephanie Borchardt)

In the past, Wisconsin Immunization Program has done a summary of adolescent immunizations rates by county and posted them on their website. The county immunization coordinators and providers found this useful and like it. Wisconsin Immunization Program wants to do something similar with their adult immunization rates [Tdap (19-64 years), HPV (19-26 years), Zoster (≥ 60 years), PPSV (≥ 65 years), Flu (≥ 19 years), and PCV (≥ 65 years)]. They anticipate using their immunization registry, which is fairly mature and covers the lifespan. About 95% of their providers use the immunization registry, even though is not required. Their registry is able to provide individual rates by provider.



Adult Immunization Efforts in Missouri (Lana Hudanick)

Lana mentioned that providers in Missouri have issues keeping up-to-date with the latest adult immunization information and recommendations. In an effort to educate patients and providers about important immunizations during pregnancy, Missouri worked with ACOG to develop a flu and Tdap poster for pregnant women. The poster is going to be distributed to providers across the state in partnership with ACOG and the March of Dimes. Along with the poster they are developing a fact sheet for flu and Tdap vaccination during pregnancy. They are also trying to do outreach to rural communities (working with primary care offices to distribute information to providers and the Bureau of Immunization).

Adult Immunization Efforts in Minnesota (Annie Fedorowicz)

Annie talked about the immunizations and pregnancy work that the Minnesota Immunization Practice Advisory Committee (MIPAC) Immunization & Pregnancy Subgroup is doing.

- MIPAC background info: the purpose of MIPAC is to advise the Minnesota Department of Health (MDH) on reducing and eliminating vaccine preventable diseases across the lifespan. Members are appointed for 3 years and the group has a good geographic representation (Metro area and greater Minnesota). Each year their Immunization Program identifies pragmatic areas to tackle.
- Immunization & Pregnancy Subgroup: the subgroup advises the MDH on developing strategies for expanding the adoption of existing immunization recommendation for pregnant women (goal 1) and utilizing prenatal care encounters to promote infant immunization (goal 2). The MDH Immunization Program identified pregnant women as a priority population. The subgroup convened 7 meetings from Aug 2013 to Jul 2014. A total of 19 members represented a variety of organizations that deliver prenatal care to pregnant women. MDH staff and subgroup members developed a list of feasible and useful strategies which will guide future Immunization Program activities. The project focused on Tdap recommendation and how they were implemented. Participating providers discussed most common vaccine concerns they hear from pregnant women and infant immunization during primary care visits (some providers were already doing this). They came out with a lot of creative ways to convey info to pregnant women. Prior to meeting 5 (focused on goal 1) and 6 (focused on goal 2), the subgroup members were asked questions to assess the feasibility of the strategies. They assigned strategies low, moderate, or high feasibility ratings. They decided not to pursue the low feasibility strategies. Members prioritized the strategies and assessed the utility of these strategies. They used webinar polling, discussed polling results and took feasibility ratings into account. The high priority strategies were divided into three categories: provider education and resources, patient education and resources, and systems focus/QI project. Final report short-term recommendations: continue to pursue National Infant Immunization Week (NIIW) activities and beyond the campaign; Crosslink all immunization and pregnancy related resources to one MDH Web page for easier access



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and promotion. Final report long-term recommendations: continue to pursue developing relationships with staff in clinics, health systems and health plans; pursue opportunities to partner with a variety of prenatal care settings to deliver trainings; Assess feasibility of an immunization educational texting pilot study with a MN prenatal care provider group.

Before moving to the next agenda item, Susan asked if the group had any questions for the presenters and quickly reminded everyone that success stories shared this year could be nominated for awards at the summit meeting in May.

Questions for speakers

A listener wanted to know if any of the Tdap education and outreach crossed over into other family members. Annie and Lisa mentioned that previous to this effort, the idea of cocooning was well received in Minnesota by providers. This time around providers wanted to focus on moms because most babies get pertussis from close family members and Tdap immunization during the last trimester of pregnancy offers the best protection to moms and babies. She also mentioned that since Moms are key health care decision makers regarding immunization, they can have a positive influence in their own vaccination coverage and that of their babies. Courtney mentioned a study in Michigan that showed Tdap immunization information is not readily available on birthing hospital websites; those hospitals that do have information on Tdap vaccine typically have it buried and hard to navigate to (<https://record.umich.edu/articles/few-hospital-websites-educate-pregnant-women-whooping-cough-prevention>).

CDC Update – Dr. David Kim

Dr. Kim provided the group with an update on the 2015 adult immunization schedule and the NAIS Summit: <http://www.izsummitpartners.org/summit/2015-nais/>.

- 2015 Adult Immunization Schedule – Dr. David Kim mentioned that the 2015 adult immunization schedule has been finalized and is going through final review before it's posted. The official published date for the schedule is 2/3/15. The Morbidity and Mortality Report (MMWR) will follow shortly after and is expected to be posted by 2/5/15. The cardboard and regular copies of the schedule are schedule for distribution in March.
- 2015 NAIS Summit update – Dr. Kim mentioned that the Summit agenda is coming along thanks to Susan, Carolyn and LaDora. So far the Summit is organized the following way:
 - May 12, 2015: Day one MORNING is heavy on didactics. From 8-10 am the participants will get a chance to attend the adult immunization 101 workshop. Topic areas include the Affordable Care Act, insurance and coverage, quality measures, vaccine storage and handling. The conference starts at 10 am. The plenary and break sections are scheduled for day one as well. The main highlight is the NAI plan role out. There will be a pretty impressive lineout of speakers. The day will culminate with the [meeting for adult immunization coordinators](#) at 5:30 p.m.



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- May 13, 2015: during day 2 of the Summit, participants will be for sharing ideas and networking.
- May 14, 2015: during day 3 of the Summit, participants will get updates on influenza and vaccine coverage and surveillance. On this day, a special session titled 'Game changers' will be offered. This session is on how to promote adult immunizations.

Association of Immunization Managers (AIM) Update - Anu Bhatt

Before providing her updates, Anu wished everyone a happy new year!

- Programmatic committee update: the committee is interested in adult immunization issues. They just got a grant that will help them concentrate their efforts in adult immunization. A meeting is scheduled with CDC staff and some adult immunization coordinator members to see how they can work together. A survey is in the making. Anu is encouraging members to send questions to include in the survey. This would allow them to understand how immunization programs work in the area of adult immunization.
- Vaccine Facts and Policy Website update: the [Vaccine Facts and Policy](#) website which is up and running. Policy Website info will be released early this year. For now, if you look at the left hand corner of the Website, you will see that the information has been updated recently. She will send a list of everting that has been updated in the Website with links to the information for easy access.

Wrap- up - Karen

Courtney concluded the meeting at 2:56 p.m.

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2015 Quarterly Conference Calls Schedule

Tuesday, April 7, 2015, 2 p.m. (EST)

Tuesday, May 12, 2015, 5:30 p.m. (EST), face-to-face meeting during the NAIIS, Atlanta, GA

Tuesday, July 7, 2015, 2 p.m. (EST)

Tuesday, October 6, 2015, 2 p.m. (EST)