



DRIVING Tailored Community-Based Approaches to Increase Shingles Vaccination Uptake at NYC Health + Hospitals Elmhurst



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INTRODUCTION

The National Minority Quality Forum’s (NMQF) Center for Sustainable Health Care Quality and Equity (SHC) developed the DRIVE – *Demonstrating Real Improvement in Value and Equity* – Toolkit to support primary care teams, healthcare systems, and community organizations in improving health outcomes for diverse and underserved populations across the United States.

NYC Health + Hospitals/Elmhurst, located in Queens, NY, implemented a quality improvement initiative focused exclusively on increasing shingles (herpes zoster) vaccination rates. The project applied the DRIVE Toolkit as a structured framework to assess barriers to shingles vaccination, identify community needs, and guide the implementation of targeted, evidence-based interventions. Interventions were deployed across three primary care clinics and emphasized culturally responsive engagement, workflow optimization, and provider education.

DRIVE

- DRIVE comprises six essential steps: 1) Identifying Team Champions; 2) Practice Assessment; 3) Community Health Assessment; 4) Activity Planning; 5) Implementation; 6) Communicate, Celebrate, and Continue

These steps enable the creation of a flexible, collaborative program that adapts to community needs. By integrating insights from the communities it serves, the DRIVE program embodies a sustainable framework for advancing health equity.

OBJECTIVE

To increase awareness and uptake of the shingles (herpes zoster) vaccine among the NYC Health + Hospitals/Elmhurst adult patient population by implementing targeted strategies focused on patient education, improved vaccine accessibility, and enhanced patient engagement within primary care settings.

METHODS

The program focused on adult patients at NYC Health + Hospitals/Elmhurst who were eligible for the shingles (herpes zoster) vaccine—defined as individuals **50 years of age and older**. Quality improvement (QI) activities were structured using SHC’s DRIVE toolkit, which follows a PDSA (Plan-Do-Study-Act) format with a focus on equity.



Learn more about
DRIVE and SHC

RESULTS

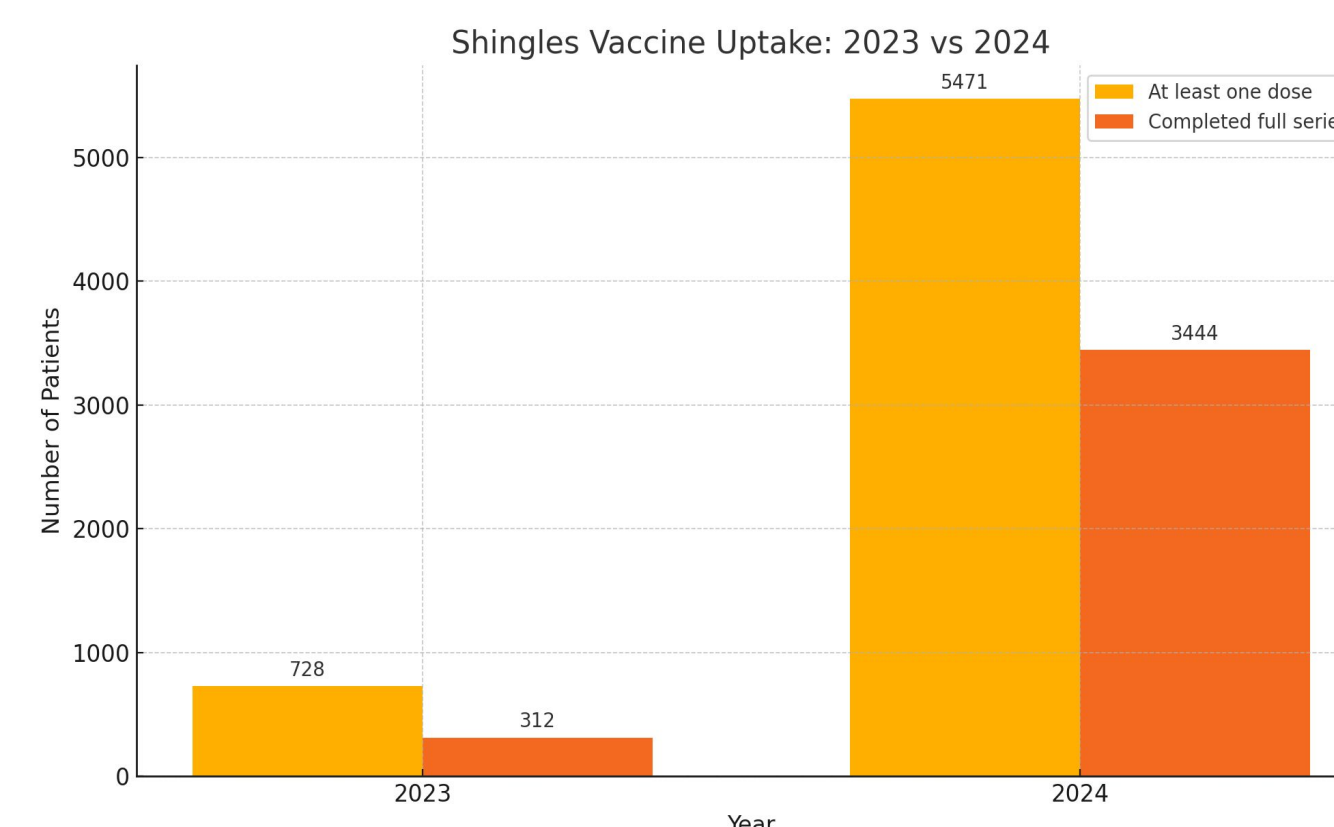
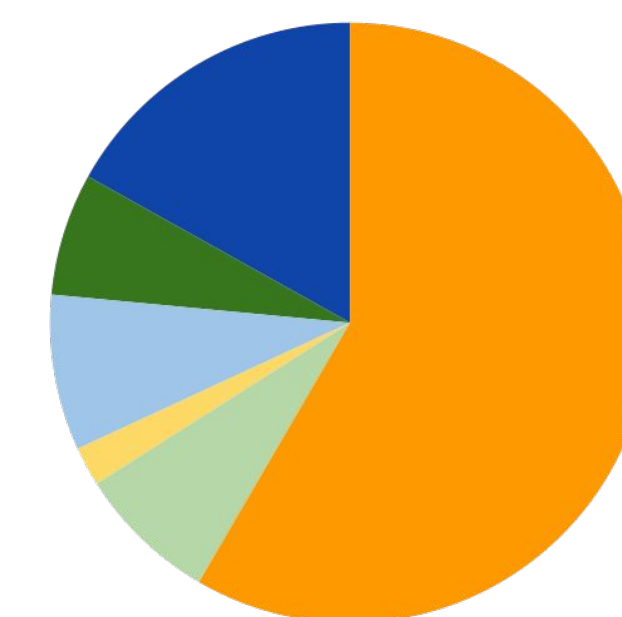
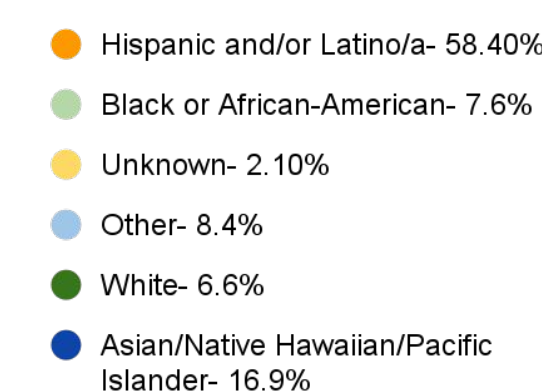
Quality Improvement Activities

- **Shingles vaccine champions identified** in the primary care department to support implementation and encourage peer engagement
- **Formulary access was verified** through coordination with the internal pharmacy team to ensure vaccine availability
- **Clinical staff educated** on vaccine eligibility, benefits, and effective communication strategies for patient engagement
- **Non-patient specific standing order (NPSO) implemented**, allowing clinical staff to administer the shingles vaccine without individual prescriptions
- **Community events, including holiday gatherings, leveraged** as platforms to share educational materials and deliver vaccine reminders to attendees
- **Educational materials developed and distributed** to guide staff in discussing shingles risks, vaccine benefits, and eligibility with patients
- **Multi-touchpoint patient reminders** during clinical visits and community-based events
- **Hospital-wide promotion conducted**, with shingles vaccine messaging displayed in the Elmhurst hospital lobby and patient-accessible areas

Patient Demographics

The patient population of NYC Health + Hospitals/Elmhurst is highly diverse, with the majority identifying as Hispanic and/or Latino/a or Black or African-American. Additionally, 54% of patients report a preferred language other than English.

NYC H+H Elmhurst Overall Patient Race/Ethnicity



Vaccine Uptake

This graph illustrates a significant increase in shingles vaccine uptake between 2023 and 2024. The number of patients who received at least one dose increased from 728 to 5,471, while those who completed the full two-dose series rose from 312 to 3,444.

DISCUSSION & CONCLUSION

- The DRIVE-based shingles vaccination initiative at NYC Health + Hospitals/Elmhurst significantly improved vaccine uptake by leveraging structured quality improvement strategies, enhanced patient education, and increased access to care. The program effectively addressed barriers to adult immunization through community engagement, culturally responsive education, and collaborative provider-patient communication, implemented across three primary care clinics.
- This initiative aimed to improve awareness of the shingles vaccine, support patient-centered communication, and increase uptake among eligible adults. Between 2023 and 2024, the number of patients receiving at least one dose increased by over **650%**, rising from 728 to 5,471. Completion of the full two-dose series rose by more than **1,000%**, from 312 to 3,444. Among the 18,024 eligible patients (those aged 50 and older), **completion rates improved from 43% to 63%**, reflecting significant gains in patient engagement and follow-through.
- These outcomes underscore the effectiveness of integrating equity-driven approaches within routine care. Lessons learned from this initiative are being scaled across the system to support clinics with historically lower vaccination rates, reinforcing the sustainability and adaptability of the DRIVE framework. Ultimately, this program demonstrates a scalable model for advancing immunization equity in urban, underserved adult populations, and offers a promising path toward reducing long-standing disparities in preventive care.

FUNDING DISCLOSURE

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