

Texas Department of State Health Services

**Can Texas Lead the Nation to
Protect our Children from
HPV Cancers?**

2015 Summit on HPV-Related Diseases
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Overview

- DSHS Immunization Branch Goals
- Texas Vaccines for Children Program (TVFC)
- TVFC Eligible Populations
- HPV Immunization Coverage
- Texas Specific HPV Research

Texas DSHS

Immunization Branch

Vision:

- A Texas free of vaccine-preventable diseases

Mission:

- To provide leadership to increase vaccine coverage levels and to reduce the burden of vaccine preventable diseases

Strategic Plan

January 2014 – December 2018

- Goals
 - Raise and sustain vaccine coverage levels for infants and children
 - Improve child and adult vaccine coverage levels
 - Prevent and reduce cases of vaccine-preventable diseases
 - Maintain and improve public health preparedness
 - Promote and practice safe handling of vaccines and ensure the accountability of all program components

Strategies to Increase Immunization Rates



- Promoting the Medical Home
- Developing and implementing systematic provider, public, and parent education
- Increasing access points of TVFC and Adult vaccinations
- Promoting the use of the Statewide Immunization Registry, ImmTrac

Effective Partnerships

- Texas Immunization Stakeholders Working Group (TISWG)
- ImmTrac health plan and provider stakeholder working groups
- Immunization Branch Contractors

Texas VFC Program in 2015



Promote a Medical Home for all Children

- TVFC promotes the medical home
- Texas Immunization Stakeholder Working Group has made promotion of the medical home a priority

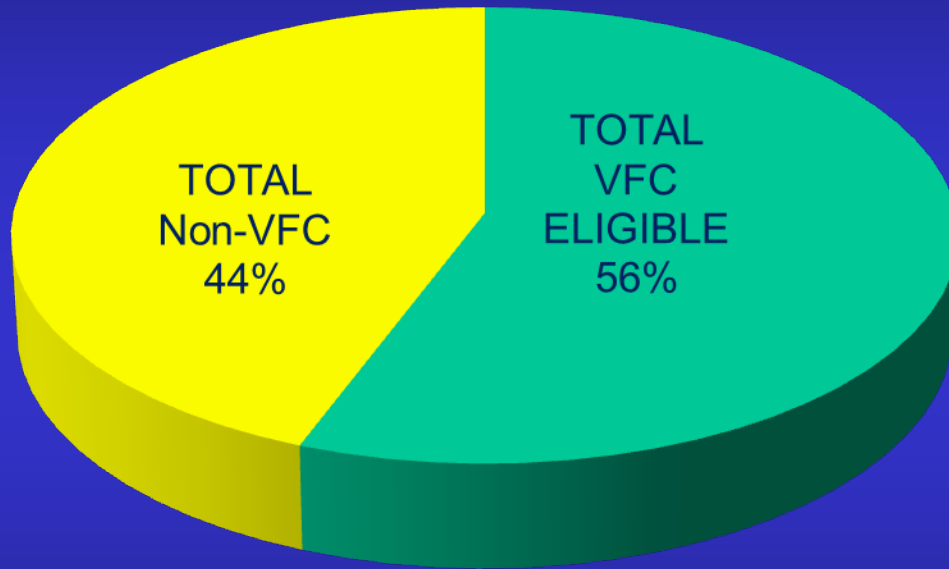
Texas VFC 2015 Goals

- Reach out to our VFC Provider network
 - Recruit additional sites
 - Strengthen customer service
 - Ensure providers have tools (vaccine, resources, trainings, etc.) to be successful
- Launch 'new' Texas VFC Operations and Provider manuals
- Continue emphasis on storage and handling
- Continue emphasis on eligibility screening
- Continue requirement for VFC Providers to complete CDC required trainings

Texas VFC 2015 Goals

- Expand number of VFC unannounced site-visits
- Commit additional resources to vaccine storage and monitoring
 - Data loggers
- Expand Texas QA Site Visits
 - Apply ACIP recommendations to all provider immunization record assessments (CoCASA)
- Explore Additional Vaccine Choice Options
 - Consideration to lift the ability of provider's to only add vaccines on a quarterly basis

Texas Childhood Population – 2015 (Ages 0-18 years)



VFC Eligible:

- Medicaid-eligible
- Uninsured
- American Indian/ Alaska Native
- Underinsured
 - has commercial (private) health insurance but coverage does not include vaccines; insurance covers only selected vaccines (VFC-eligible for non-covered vaccines only), or vaccine coverage is capped at a certain amount (VFC eligible after cap is reached).

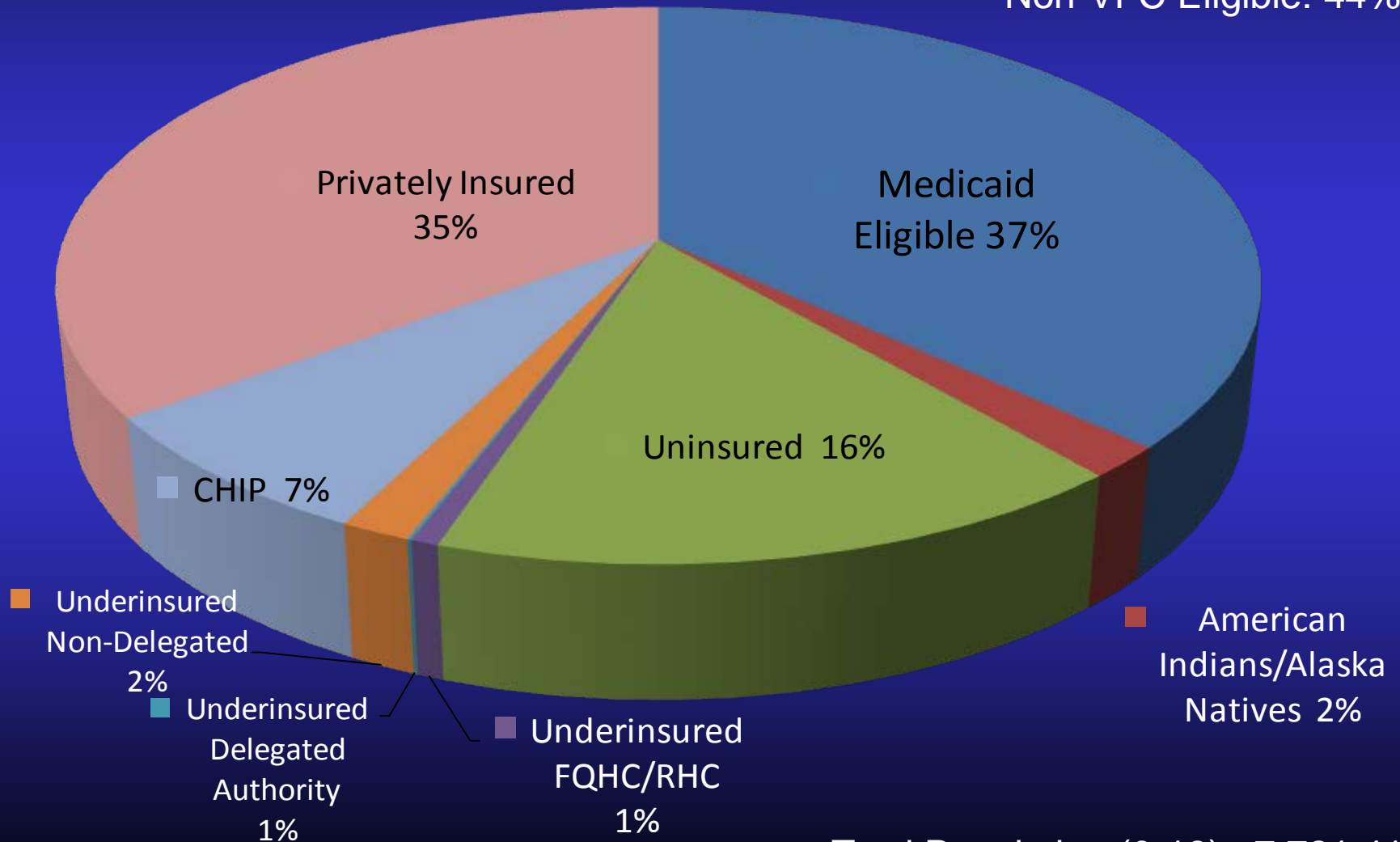
Non-VFC Eligible:

- Insured
- CHIP
- Underinsured in private sites

Total Population (0-18): 7,721,410

Texas 2015 Total Population (0-18) By Eligibility

VFC Eligible: 56%
Non-VFC Eligible: 44%



Total Population (0-18): 7,721,410

Adult Safety Net Program

- The ASN program provides vaccines to prevent the many of the vaccine-preventable diseases among uninsured adults 19 years of age and older.
- Providers include FQHC's, RHC's, FPC's, Community Health Centers, and STD/HIV clinics.
- HPV vaccine is available to all ASN providers

HPV Immunization Coverage in Texas

HPV in the United States

- Most common sexually transmitted infection (STI) in the United States
- Almost every sexually active person will acquire HPV at some point in their lives
- 79 million Americans currently infected with HPV
- 14 million new infections diagnosed each year
- 26,000 new HPV related cancers diagnosed annually

HPV Vaccine Recommendation

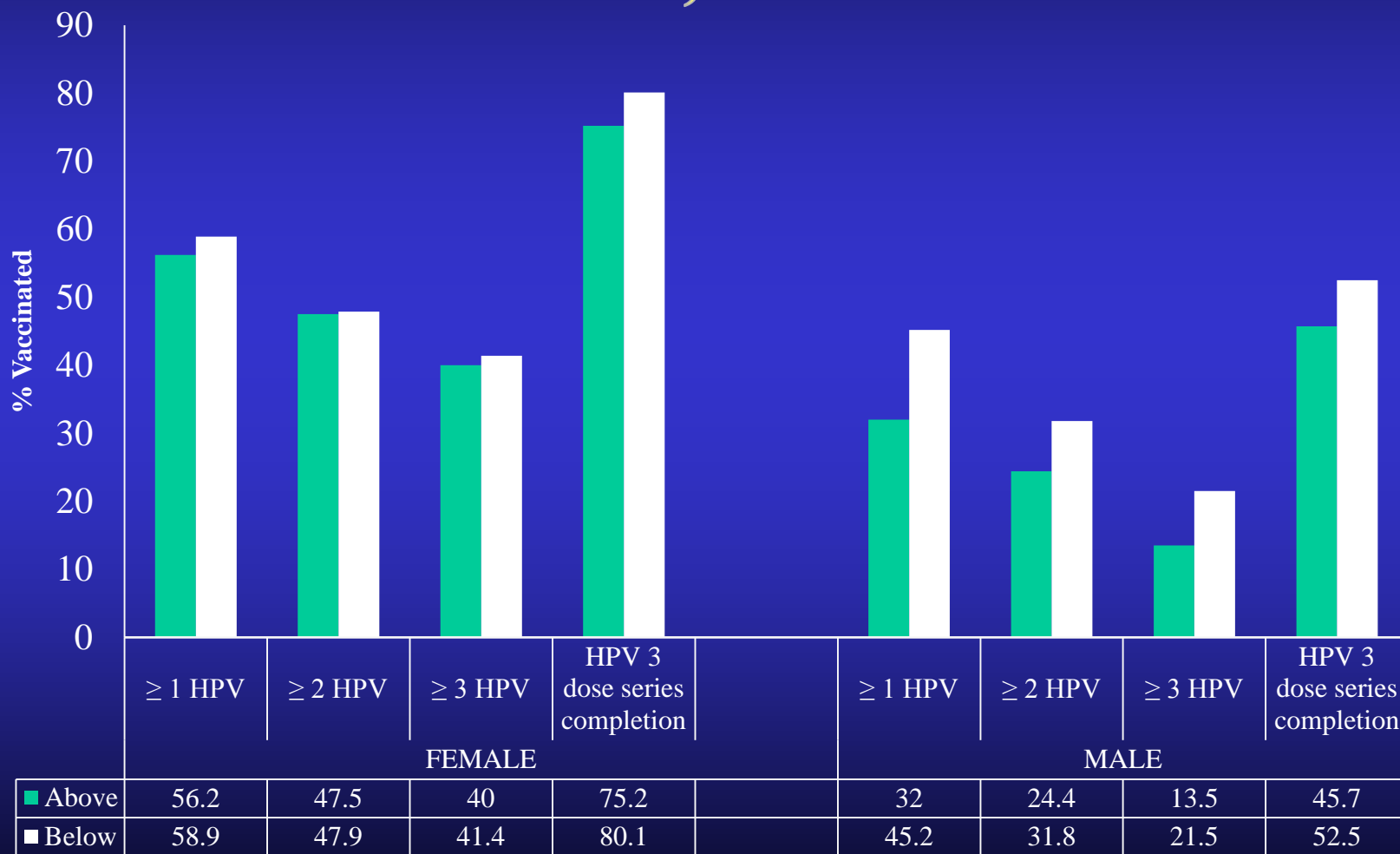
- All kids who are 11 or 12 years old should get the three-dose series of HPV vaccine to protect against HPV
- Three HPV vaccines (Cervarix, Gardasil, and Gardasil 9) are currently licensed
- ACIP Recommended schedule is 0, 1-2*, 6 months

Adolescent Vaccination Rates in Texas

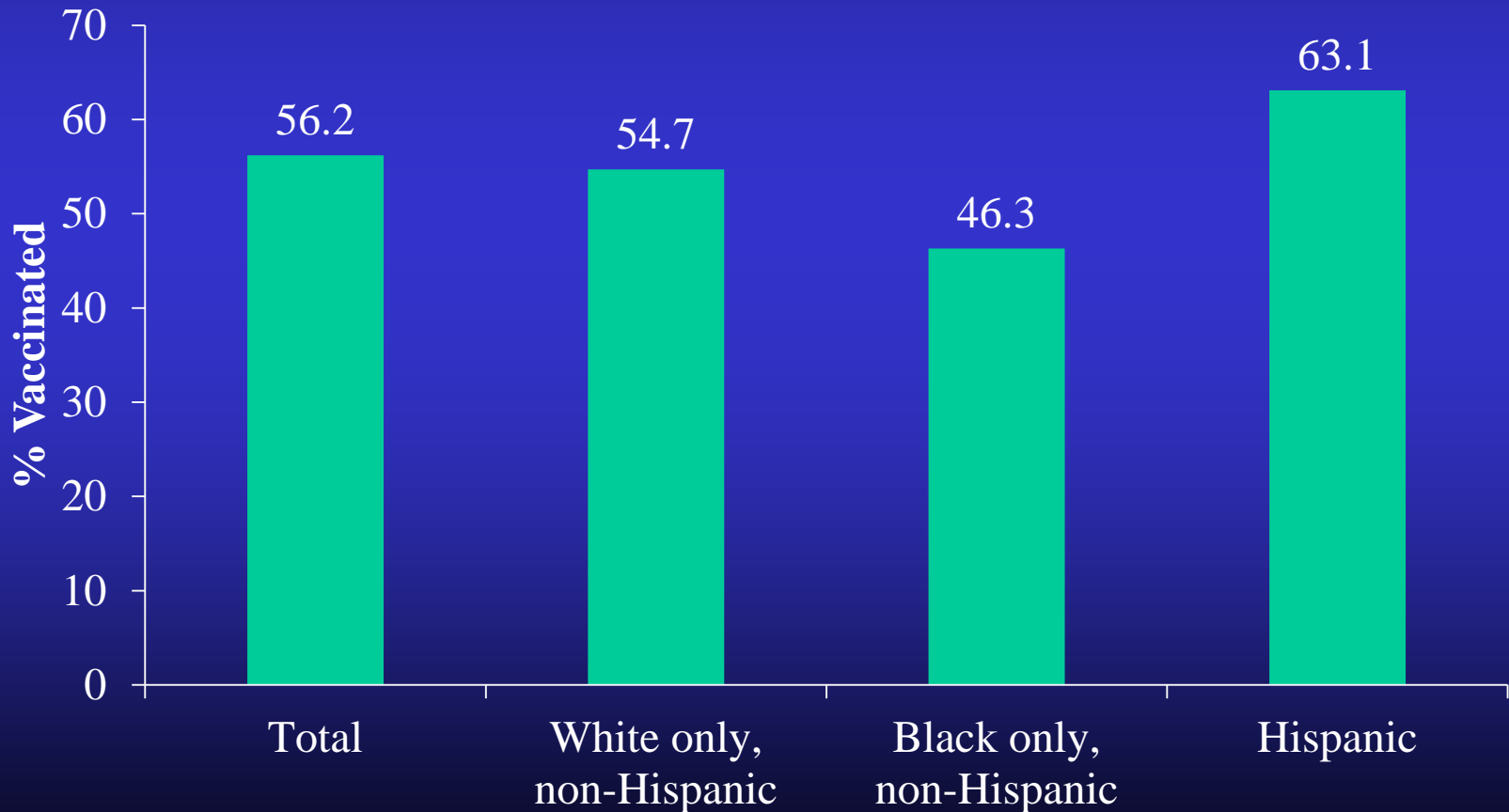
From 2008-2013, NIS-Teen



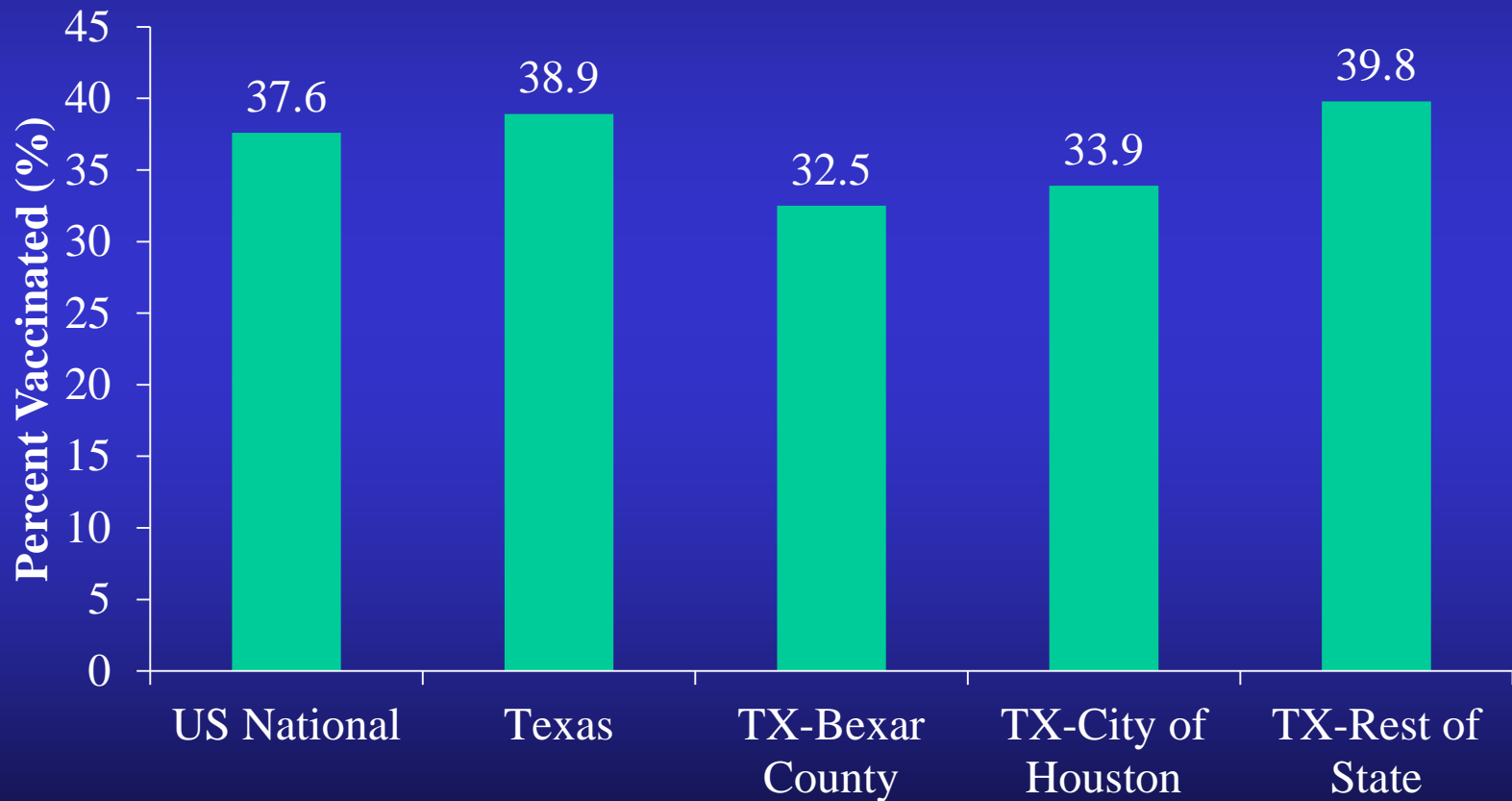
HPV Vaccination Coverage for Teens Above and Below Poverty, NIS Teen, Texas, 2013



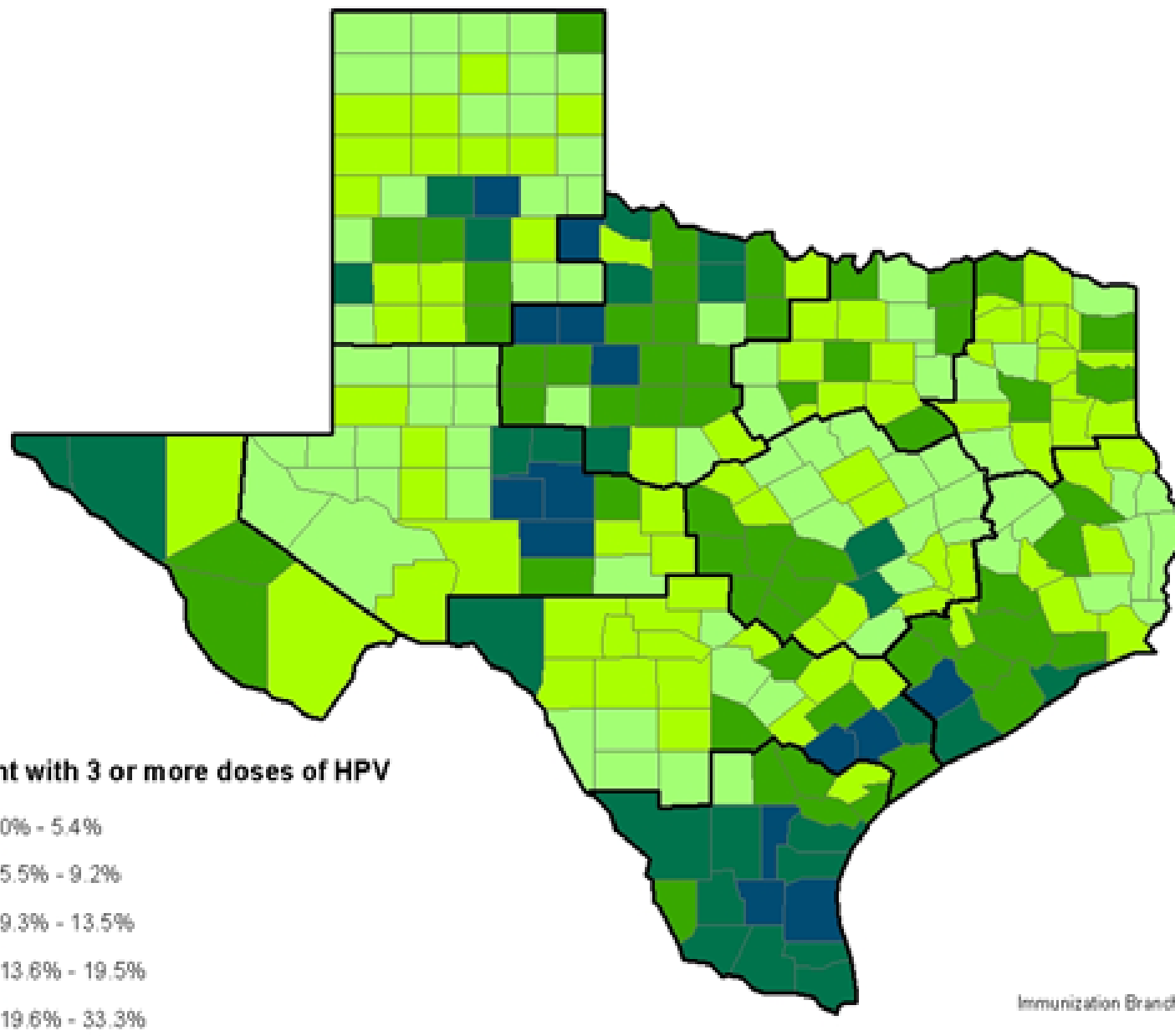
Coverage with One or More Doses of HPV Vaccine by Race/Ethnicity in Females, NIS Teen, Texas, 2013



Three Dose HPV Vaccination Coverage Among Females 13-17 Years of Age, US and Texas, 2013 NIS-Teen



Estimated Coverage with 3 or more doses of HPV Among 13-17 Year Olds, 2014



HPV Vaccine Uptake in Texas

- 2014 vaccine ordering data was analyzed to compare Tdap and HPV vaccine among TVFC providers
- 1.4 doses of HPV vaccine ordered for every dose of Tdap
- Customized adolescent vaccine ordering profiles were sent to over 2,300 providers

HPV Vaccine Orders Among TVFC Providers	
Region	HPV:Tdap Ratio
PHR 01	1.2
PHR 02	1.2
PHR 03	1.4
PHR 04	1.3
PHR 05	0.9
PHR 06	1.4
PHR 07	1.7
PHR 08	1.3
PHR 09	0.9
PHR 10	1.9
PHR 11	1.6
Statewide	1.4

Importance of Provider HPV Recommendation

- Studies consistently show that a strong recommendation from a healthcare provider is the single best predictor of HPV vaccination.
- Less than half of adolescents in Texas have had HPV vaccine recommended to them (2013 NIS-Teen)
- Top three reasons Texas parents did not intend vaccinate their child against HPV include:
 - HPV vaccine was not recommended
 - Vaccine was perceived as not necessary or needed
 - Lack of knowledge

Texas Specific HPV Research

- Series of focus groups conducted in El Paso and Dallas Counties
- Objective to understand HPV attitudes and behaviors of Dallas and El Paso-area parents, healthcare providers, and school nurses
 - Identify best practices and understand the importance and role of healthcare providers and non-vaccinating clinicians

Overall Focus Group Findings: Health Care Providers are Key Motivators



- Approximately 50% of parents in focus groups reported that they only became aware of the need for adolescent immunizations during a routine office visit.
- The way doctors and nurses present information about immunizations impacts parental acceptance.

El Paso Parent Focus Groups Feedback

- Physicians are big influencers in decision making
- Parents say that the physician offices often send reminder letters for immunizations.
- Parent attitudes were influenced by the Texas/Mexico border.
 - Desire to protect children from diseases perceived to be prevalent along the US and Mexico border.
- Hispanic parents expressed increased trust for their physicians.
- Immunize El Paso, a local immunization coalition, actively advertises its services.
- School districts in the area are actively engaged in sending immunization messages home.

Dallas Parent Focus Group Feedback

- Parents stated that if HPV is not a required school vaccine then it may not be necessary.
- Parents perceived the HPV vaccine as “new”.
- Concerns on vaccine safety and efficacy.
- Parents wanted to do their own research on the need for the vaccine citing WebMD, Google and blogs for information.
- Parents expressed desire to delay HPV vaccination until children were older.

Physician Focus Group Feedback

- Most health care providers stated that adolescents do not generally come in for preventive care.
- Most parents believe 11 is too young for HPV vaccination.
- Physicians report that the cancer prevention message is effective.
- Many physicians reported text messages are effective methods to communicate with parents.
- Most of the physicians state that they hear concerns about HPV vaccine safety from parents.
- Physicians report that they often can convince parents about the first dose but then the teens don't return to their office until sick.

Texas HPV Strategies

1. Increase community demand for HPV vaccine
 - Adolescent media campaign
 - Increase HPV awareness through clinic based education
2. Provider and System Interventions
 - Increase knowledge and strengthen health care provider recommendation of HPV vaccine.
 - Support the use of the Texas Immunization Registry (ImmTrac) and reminder recall systems.
3. Establish and strengthen partnerships with State and local organizations
 - Strengthen outreach to providers through professional organizations and local coalitions.

Drama :15

Television – English



Questions?

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