

HPV Vaccine Promotion in Minnesota

Lisa H. Randall, JD, MPH
Policy Specialist
Minnesota Department of Health
June 11, 2014

MDH activities

- **HPV PPHF grant**
 - **Stakeholders**
 - **Reminder/recall**
 - **Public awareness**
 - **Provider education**
 - **Assess. & feedback**
- **Provider videos**
- **Adolescent PPHF grant**
 - **Reminder/recall**
 - **Assess. reports**
- **Athletic physical form**
- **School law co-promotion**
- **Joint letter w/MCA**

Partner activities

- **MN Cancer Alliance**
 - **MN Comm. Measure**
 - **Provider framing**
 - **Cultural materials**
- **MnAAP**
 - **Grant activities**
 - **Other activities**



Minnesota Academy
of Family Physicians



MDH activities

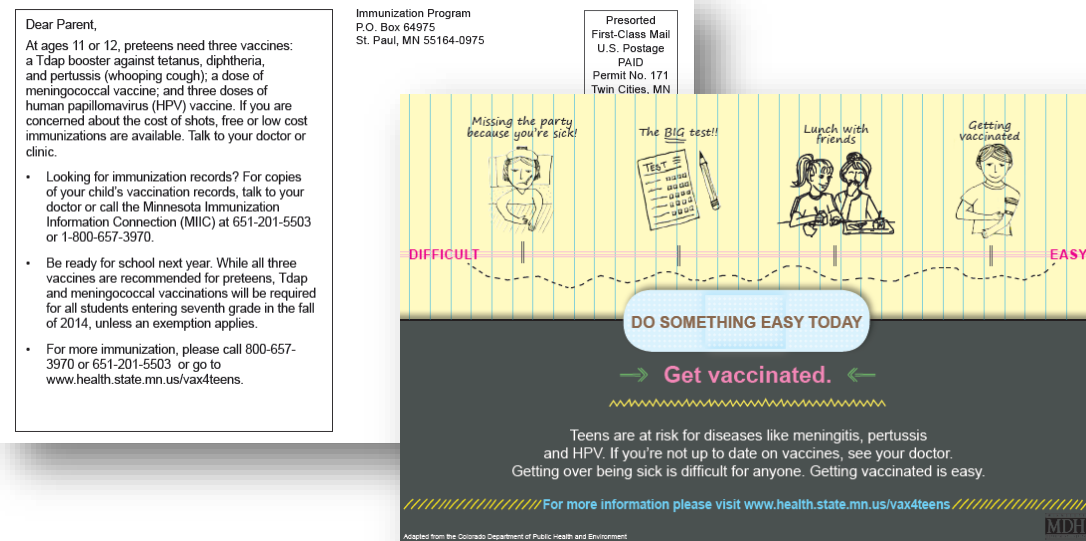
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Statewide reminder postcards

- Parents of 11- and 12-year-olds
- Addresses from IIS with Westlaw updates



Regional reminder letters

- To adolescents due for any dose of HPV
 - 2 more rounds to 11- and 12-year-olds
 - 3 rounds to 13- through 17-year-olds
 - Message is about full adolescent platform
- In 2 out of 7 IIS administration regions
- Addresses from IIS with Westlaw updates

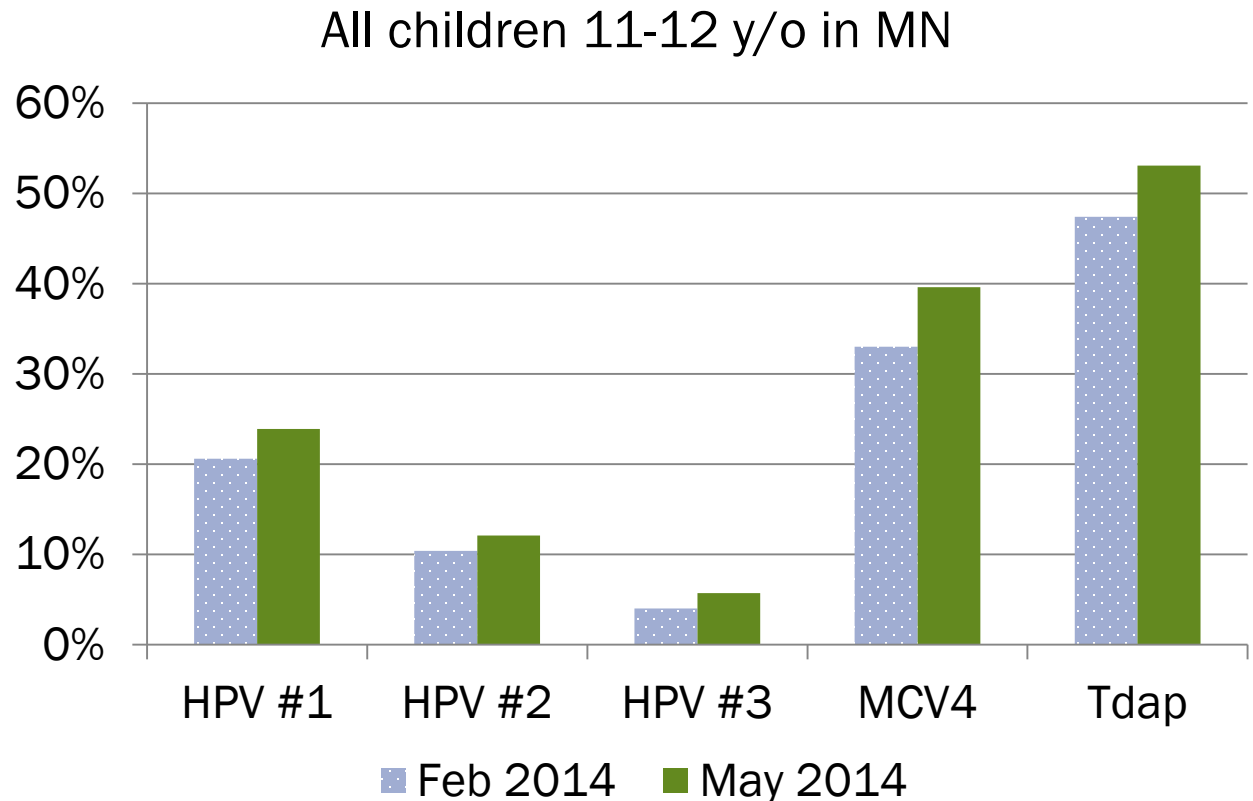
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Statewide mailing results

- 121,717 sent
- 9,833 returned (8%)

Rate changes to date



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School Space Media

- 29 metro-area high schools (high-attendance games)
- Successive digital messages



	Making the team is DIFFICULT!
	Getting vaccinated is EASY!
	Vax4Teens www.health.state.mn.us/vax4teens



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State high school sports tournaments

- Basketball (b/g), hockey (b/g), wrestling, football
- Program print ads, in-arena ads, PA announcements, exhibit tables
- Broadcast affiliate advertising
 - *Close the Door to Cancer* (CDC) PSA
 - Banner ads on station website

MINNESOTA STATE HIGH SCHOOL LEAGUE
Girls' HOCKEY
the TOURNEY '14

MISSING THE PARTY because you're sick!
The BIG test!!
Lunch with friends
Getting vaccinated

DIFFICULT EASY

DO SOMETHING EASY TODAY

→ Get vaccinated. ←

Teens are at risk for diseases like meningitis, pertussis and HPV. If you're not up to date on vaccines, see your doctor. Free or low cost immunizations are available.

Getting over being sick is difficult for anyone. Getting vaccinated is easy.

For more information please visit www.health.state.mn.us/vax4teens

FEBRUARY 19-22
Xcel Energy Center, St. Paul
Ridder Arena, University of Minnesota, Minneapolis

FARGO

MDH
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Program ad

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Hockey
dasherboard ad



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Basketball courtside display

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PREP45.com Brackets/Scores Buy DVDs Hi Sammi! FAQ

Powered by **GRAND STADIUM.TV** MSHSL

HM 2 Burnsville 0 1st Int 45 TV

Missing the party because you're sick? The BIG test! Getting vaccinated!

DIFFICULT EASY

DO SOMETHING EASY TODAY

→ Get vaccinated. ←

Getting over being sick is difficult for anyone.
Getting vaccinated is easy.

[learn more](#)

MINNESOTA DEPARTMENT OF HEALTH

MSHSL 2014 State Quarterfinals Girls Hockey Tournament Day 2
Class AA Quarterfinals of the 2014 Girls Hockey Tournament broadcast live from Xcel Energy Center, St. Paul, MN. These games will be made available for Live and on-demand viewing as well as DVD purchase. Approx. Start Times: 11AM: Burnsville-v-Hill-Murray, 1PM: Andover-v-Eden Prairie, 6PM: Roseau-v-BSM, 8PM: Mounds View-v-Lakeville North.

Playing hockey is DIFFICULT Getting vaccinated is EASY

Do something EASY today, get vaccinated.

→ **vax4teens** ←

Click here to learn more

MINNESOTA DEPARTMENT OF HEALTH

the middle.

WEEKNIGHTS AT 5 & 6PM 45 TV

ksto45.com | Advertise with Us | Support@grandstadium.tv | Contact Us

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TV station web ad

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Social media

- Followup to postcard mailing

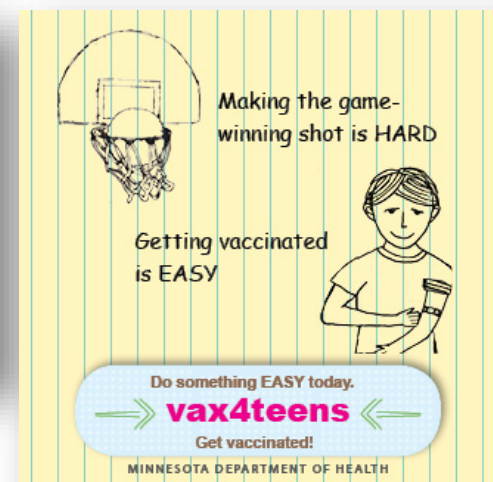
Facebook – *Have you seen our vax4teens postcard? If you're the parent of an 11 or 12 year old, watch your mailbox for this postcard to arrive soon with info on getting your teen vaccinated.* www.health.state.mn.us/vax4teens

Twitter – *Did you get our vax4teens postcard?* www.health.state.mn.us/vax4teens

- Later March – Facebook and Twitter

Making the game-winning shot is hard. Getting vaccinated is easy. Do something easy today—get vaccinated!

www.health.state.mn.us/vax4teens



Images for social media posts

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Diverse media placements

- Radio PSAs in Hmong, Khmer, Vietnamese, Oromo, Somali, Amharic, Spanish, and Tagalog
- Print materials for American Indian, Spanish-speaking, Hmong, African-American, and African-born (Somali, Liberian, Ethiopian) audiences

Talaalka HPV = kahortaga kansarka

Talaalka HPV wuxuu ka ilaaliyaa caruurtaada caabuqa oo sababi kara noocyada qaar ee kansarka.

Gabdhaha iyo wiilasha 11 ilaa 12 sano jirka waa inay helaan talaalka HPV. Dhalinta ka weyn sidoo kale way heli karaan.

Ka hel macluumaad faro badan
www.health.state.mn.us/immunize

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Vacuna contra el HPV = prevención del cáncer

La vacuna contra el HPV protege a sus hijos de una infección que puede producir determinados tipos de cáncer.

Las niñas y los niños de 11 y 12 años de edad deben recibir la vacuna contra el HPV.

Obtenga más información en
www.health.state.mn.us/divs/idepc/dtopics/vpds/hpv/hpvfs.html

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Sample ads

HPV vaccine = cancer prevention

HPV vaccine protects your children from an infection that can cause certain types of cancer.

Girls and boys 11 to 12 years of age should get the HPV vaccine.

Get more information at
www.health.state.mn.us/divs/idepc/dtopics/vpds/hpv/hpvfs.html

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Minnesota State Fair

- Largest state fair (by average daily attendance) in the U.S.
- Dedicated exhibit, participation in Prep Day



Photo from *Minnesota Daily*



MDH activities

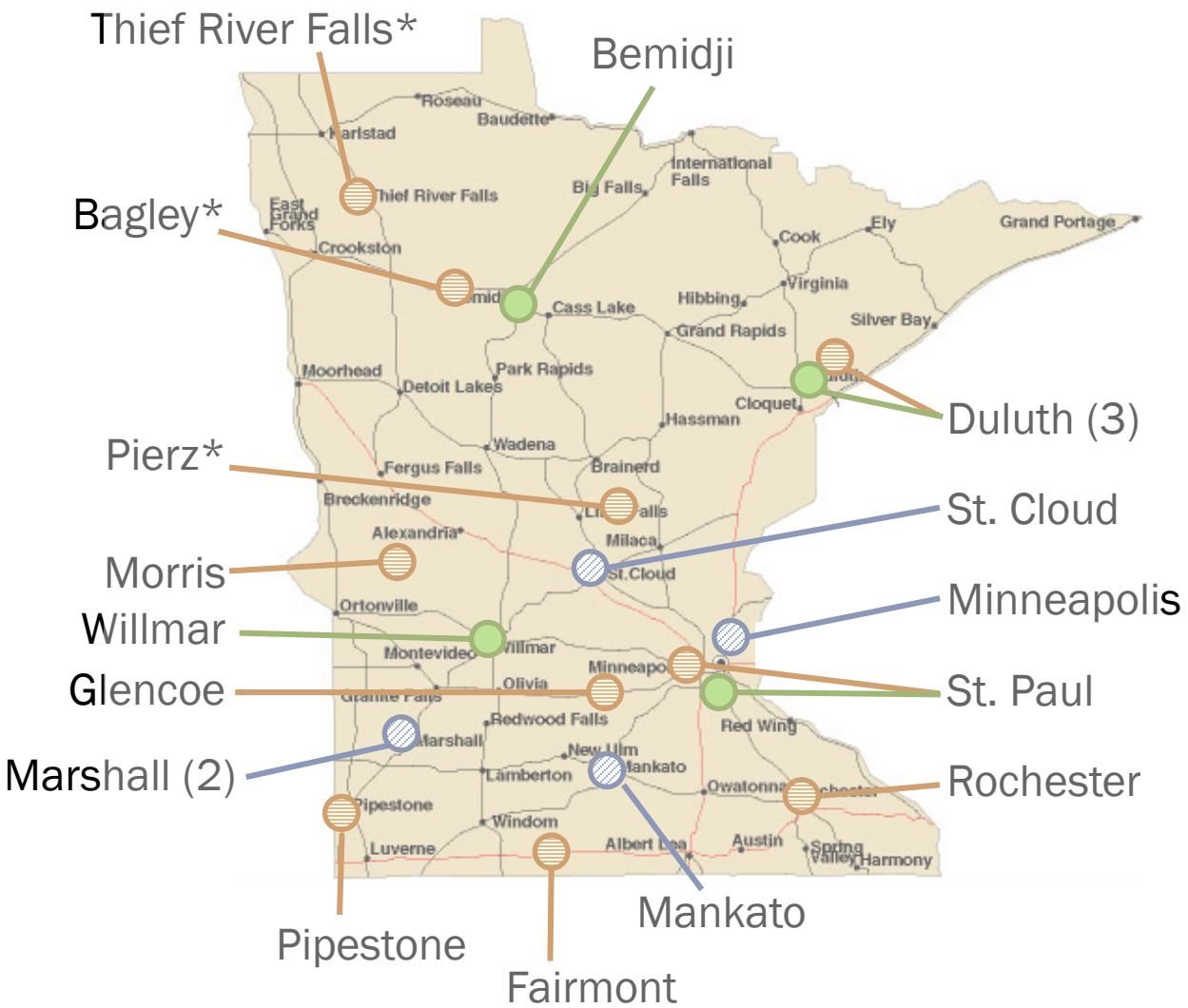
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Provider education locations



● Lecture
 ● Inservice
 ● Extra appearance
 * Booking in the works

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Information for Health Care Professionals about Adolescent Vaccines

The Centers for Disease Control and Prevention (CDC) recommends four vaccines for adolescents to prevent:

- Tetanus, Diphtheria, Pertussis *Note: Recommendations for catch-up dose and booster (referral)*
- Meningococcal disease *Note: A booster shot for teens*
- Human papillomavirus *Note: Added indications for cervical; recommendation for boys*
- Influenza *Note: Universal recommendation for everyone 6 months and older*

These recommendations are supported by the American Academy of Pediatrics, the American Academy of Family Physicians, and the Society for Adolescent Health and Medicine.

What can YOU do to ensure your patients get fully vaccinated?

- Strongly recommend adolescent vaccines to parents of your 11 through 18 year old patients. Parents that report your opinion more than anyone else's when it comes to immunization, studies consistently show that provider recommendation is the strongest predictor of vaccination.
- Use every opportunity to vaccinate your adolescent patients. Ask about vaccination status when they come in for sick visits and sports physicals.
- Institute reminder and recall systems such as automated postcards, phone calls and text messages are effective tools for increasing office visits.
- Educate parents about the diseases that can be prevented by adolescent vaccines. Parents may know very little about pertussis, meningococcal disease, or HPV.
- Implement standing orders/policies so that patients can receive vaccines without a physician examination or individual physician order.

Direct parents who want more information on vaccines and vaccine-preventable diseases to visit the CDC website at <http://www.cdc.gov/vaccines/imz/downloads.htm> or to call 800-CDC-INFO.

More about younger: For all vaccines given during adolescence, syringe has been reported in both boys and girls. To avoid serious injury receive a syringe alcohol, adolescents should always be sitting or lying down to receive injection, remove lid for 15 minutes. Also, be observed during the way.

Overview of Adolescent Vaccination Recommendations

Age -	7-10 YEARS	11-12 YEARS	13-18 YEARS
Vaccine	DTaP	Diphtheria, Tetanus, Pertussis	MM, HPV
MM	MM	MM	MM
HPV	HPV	HPV	HPV
Men	Men	Men	Men
Flu	Flu	Flu	Flu

Tips and Time-savers for Talking with Parents about HPV Vaccine

Recommend the HPV vaccine series the same way you recommend the other adolescent vaccines. For example, you can say "Your child needs these shots today" and name all of the vaccines recommended for the child's age. Parents may be interested in vaccinating, yet still have questions. Taking the time to listen to parents' questions helps you save time and give a more effective response. CDC research shows these straightforward messages work with parents when discussing HPV vaccine—and are easy for you or your staff to deliver.

CDC RESEARCH
TRY SAYING: "The HPV vaccine is a cancer prevention" message resonates strongly with parents. In addition, studies show that a strong recommendation from you is the single best predictor of vaccination.

CDC RESEARCH
TRY SAYING: HPV is very important because it prevents cancer. I want your child to be protected from cancer. That's why I'm recommending that your daughter/son receive the first dose of HPV vaccine today.

CDC RESEARCH
TRY SAYING: Disease prevalence is not understood, and parents are unclear about what the vaccine actually protects against.

CDC RESEARCH
TRY SAYING: HPV can cause cancer of the cervix, vagina, and vulva in women, cancer of the penis in men, and cancer of the anus and the mouth or throat in both women and men. There are about 30,000 of these cancers each year—and most could be prevented with HPV vaccine. There are also many more precancerous conditions requiring treatment that can have lasting effects.

CDC RESEARCH
TRY SAYING: Parents want a concrete reason to understand the recommendation that 11-12 year olds receive HPV vaccine.

CDC RESEARCH
TRY SAYING: We're vaccinating today so your child will have the best protection possible long before the start of any kind of sexual activity. We vaccinate people well before they are exposed to an infection, so in the case with measles and the other recommended childhood vaccines. Similarly, we want to vaccinate children well before they are exposed to HPV.

CDC RESEARCH
TRY SAYING: Parents may be concerned that vaccinating may be prevented by the child's permission to have sex.

CDC RESEARCH
TRY SAYING: Research has shown that getting the HPV vaccine does not make kids more likely to be sexually active or start having sex at a younger age.

CDC RESEARCH
TRY SAYING: Parents might believe their child won't be exposed to HPV because they aren't sexually active or may not be for a long time.

CDC RESEARCH
TRY SAYING: HPV is so common that almost everyone will be infected at some point. It is estimated that 79 million Americans are currently infected with 14 million new HPV infections each year. That's a lot of people infected with HPV. So even if your son/daughter waits until marriage to have sex, or only has one partner in the future, he/she could still be exposed if their partner has been infected.

CDC RESEARCH
TRY SAYING: Emphasizing your personal belief in the importance of HPV vaccine helps parents feel secure in their decision.

CDC RESEARCH
TRY SAYING: I strongly believe in the importance of this cancer-preventing vaccine, and I have given HPV vaccine to my son/daughter/grandchild/microphysician's children. Experts like the American Academy of Pediatrics, cancer doctors, and the CDC also agree that this vaccine is very important for your child.

CDC RESEARCH
TRY SAYING: Understanding that the side effects are minor and emphasizing the extensive research that vaccines must undergo can help parents feel reassured.

CDC RESEARCH
TRY SAYING: HPV vaccine has been carefully studied by medical and scientific experts. HPV vaccine has been shown to be very effective and very safe. In other shots, most side effects are mild, primarily pain and redness in the arm. This should go away quickly, and HPV vaccine has not been associated with any long term side effects. Since 2006, about 17 million doses of HPV vaccine have been distributed in the U.S., and in the years of HPV vaccine safety studies and monitoring, no serious safety concerns have been identified.

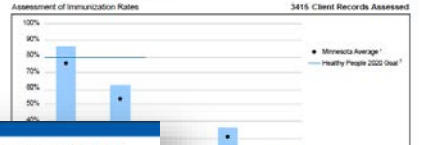
CDC RESEARCH
TRY SAYING: Parents want to know that HPV vaccine is effective.

CDC RESEARCH
TRY SAYING: In clinical trials of boys and girls, the vaccine was shown to be extremely effective. In addition, studies in the U.S. and other countries that have introduced HPV vaccine have shown a significant reduction in risk factors for the HPV types targeted by the vaccine.

CDC RESEARCH
TRY SAYING: Many parents do not know that the full vaccine series requires 3 shots. Two reminders will help them to complete the series.

CDC RESEARCH
TRY SAYING: I want to make sure that your son/daughter receives all 3 shots of HPV vaccine to give them the best possible protection from cancer caused by HPV. Please make sure to make appointments on the way out, and get those appointments on your calendar before you leave the office today!

Adolescent Immunization Summary
 Blue Earth County Community Health
 Clients Residing in Selected Counties: Blue Earth
 Report Type: Adolescent Standard
 Birth Date Range: 03/26/1996 - 03/25/2001
 Report Run Date: 03/25/2014 Assessment Date: 03/25/2014
 Report Generated by: MIC



DEARIES AND THE VACCINES THAT PREVENT THEM | INFORMATION FOR PARENTS

Why does my child need HPV vaccine?
 This vaccine is for protection from most of the cancers caused by human papillomavirus (HPV) infection. HPV is a very common virus that spreads between people when they have sexual contact with another person. About 14 million people, including boys, become infected with HPV each year. HPV infection can cause cervical cancer in women and penile cancer in men. HPV can also cause anal cancer, throat cancer and genital warts in both men and women.

When should my child be vaccinated?
 The HPV vaccine is recommended for preteen boys and girls so they are protected before they even begin to have sex. If your teen hasn't gotten the vaccine yet, it's not too late to get it for them as soon as possible. It's given in 3 shots. The second shot is 2 months after the first shot. The third shot is 4 months after the second shot. Be sure that your child still has protection.

Did I know about HPV vaccine?
 HPV vaccines. Girls and young women. HPV vaccine is prevent cervical cancer. HPV vaccine also protects against genital warts (both females and males). Boys should get HPV vaccine to prevent anal cancer and genital warts. HPV vaccine is prevent cervical cancer, anal warts.

Where can I learn more?
 For more information about HPV vaccines and the other vaccines for preteens and teens, talk to your child's doctor or nurse. Visit www.cdc.gov/vaccines/imz/downloads.htm.

How can I get help paying for these vaccines?
 The Vaccines for Children (VFC) program provides vaccines for children ages 18 years and younger, who are not insured or under insured, Medicaid eligible, American Indian or Alaska Native. You can find out more about the VFC program by going online to www.cdc.gov and typing VFC in the search box.

Where can I learn more?
 For more information about HPV vaccines and the other vaccines for preteens and teens, talk to your child's doctor or nurse. Visit www.cdc.gov/vaccines/imz/downloads.htm.

New Immunization Laws for Schools, Child Care, and Early Childhood Programs Begin September 1, 2014

On Sept. 1, 2014, changes to Minnesota's Immunization Law will take effect. The changes were made to more closely align with the current Advisory Committee on Immunization Practices (ACIP) recommendations. Medical and conscientious exemptions are still allowed under the law.

New Vaccine Requirements

- **Hepatitis B** - For all children over 12 months old enrolled or enrolling in child care or as an early childhood program.
- **Hepatitis A** - For all children over 12 months old enrolled or enrolling in child care or as an early childhood program.
- **Tdap** - For all students entering seventh grade. Students in eighth through 12th grade must show documentation if the school requires it. This replaces the 7d immunization requirement.
- **Measles (mumps/pneumonia)** - For all students entering seventh grade. Students entering eighth through 12th grade must show documentation if the school requires it.

Changes to Previous Vaccine Requirements

- **Variella** - Must have received varicella vaccine by 15 months of age or enroll in child care or as an early childhood program. This applies to children turning 12 months old on Sept. 1, 2014 or after. Additionally, the law clarifies that if a child had varicella disease:
 - o Before 2013, the parent or guardian needs to provide the month/year of the disease and their signature. A provider's signature is not required.
 - o After 2013, a provider's signature is required.
- **Polio and DTaP** - Starting Sept. 1, 2014, children enrolled or enrolling in child care, early childhood programs, and kindergarten through 12th grade and are completing their polio or DTaP series must have had two shots:

- o **Polio dose (usually fourth dose)** on or after their fourth birthday
- o **DTaP dose (usually fifth dose)** vaccine on or after their fourth birthday.

Remember, this change takes effect on Sept. 1, 2014, so incoming kindergarten for the 2014-2015 school year who have completed their polio and DTaP series are exempt. This change will have a bigger impact on incoming kindergarten for the 2015-16 school year. Note: This change does not apply to children in upper grades, in other words, a review of records for children in first through 12th grade is necessary.

• **Kindergarten through 12th grade** - The immunization law now specifies that students in all grades have documentation for all required vaccines. If the school requires immunization records for any student (K-12), parents must comply by providing the immunization dates on a legal exemption. The requirement for schools to report compliance in kindergarten and seventh grade to MDH remains unchanged.

Early Childhood Programs Now Included

New to Minnesota's Immunization Law are early childhood programs which include programs that provide instructional or other services to support children's learning and development and:

- Serve children from birth to kindergarten.
- Meet at least once a week for at least six weeks or more during the year.

Children enrolled or enrolling in these types of programs must provide proof of immunizations or have a legal exemption for:

- DTaP
- Polio
- MCV4
- Hib
- Varicella
- Pneumococcal (2-4 months)
- Hepatitis B

Note: Early Childhood Special Education (ECSE) is previously included in the Immunization Law.

For more information
 Visit www.health.state.mn.us/immunize (click on Immunization Laws in the left column) or call the Immunization Program at 612-201-5393, 1-800-657-3970.

Provider education packet enclosures

MDH activities

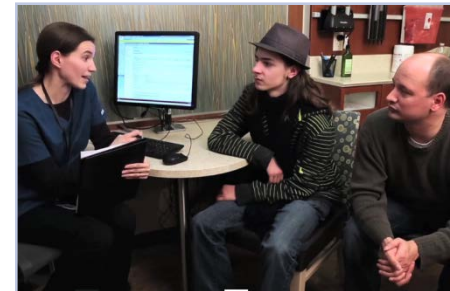
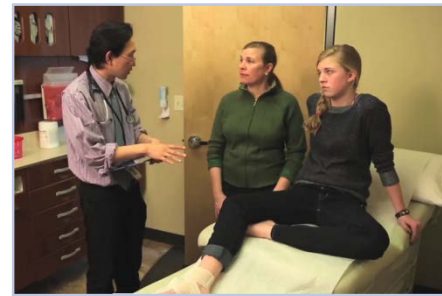
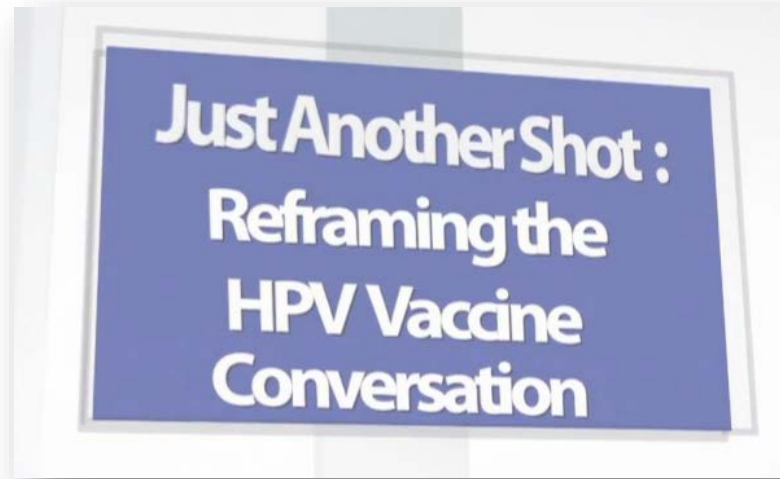
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Partner activities

- **MN Cancer Alliance**
 - MN Comm. Measure
 - Provider framing
 - Cultural materials
- **MnAAP**
 - Grant activities
 - Other activities

Reminder-recall project participants

- Suburban pediatric practice
- Greater Minnesota family practice
- Combined adolescent cohort ~19,000

Status

- One practice has completed 3 rounds
- One practice now embarking on 2nd round
- Challenges
 - Data quality
 - Clinic staff turnover
- Lessons so far
 - Patients respond enthusiastically
 - Clinics are willing to use IIS reminder-recall tools after demonstrations

MDH activities

- HPV PPHF grant
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 - Public awareness
 - Provider education
 - Assess. & feedback

- Provider videos
- Adolescent PPHF grant
 - Reminder/recall
 - Assess. reports

- Athletic physical form
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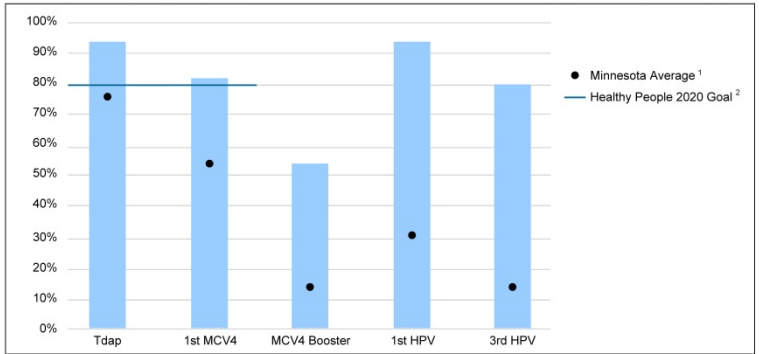
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Adolescent Immunization Summary
 Assessment Test
 Report Type: Adolescent Standard
 Birth Date Range: 02/03/1996 - 02/02/2001
 Report Run Date: 02/02/2014 Assessment Date: 02/02/2014
 Report Generated by: MIIC

Assessment of Immunization Rates 51 Client Records Assessed



¹ Minnesota average is based on MIIC records of adolescents 13 through 17 years as of July 2013.
² Healthy People 2020 is a set of science-based public health goals established by the U.S. Department of Health and Human Services. Not every vaccine has a Healthy People 2020 goal.

Routine vaccination with Tdap and the first doses of MCV4 and HPV are recommended at age 11-12 years.

Tdap	94%	$\frac{48}{51}$	received Tdap after age 7 clients assessed
------	-----	-----------------	--

MCV4 (Meningococcal)	First Dose	82%	$\frac{42}{51}$	received at least 1 dose MCV4 after age 10 through age 18 clients assessed
	Booster ³	53%	$\frac{10}{19}$	received MCV4 booster clients who received MCV4 at ages 10-15 and are now 16+ years old

³ For this report, a booster dose is one that is given between the ages of 16 and 18 to a client who received a prior dose of MCV4 between ages 10 and 15.

HPV	First Dose	94%	$\frac{48}{51}$	received at least 1 dose HPV after age 9 clients assessed
	Third Dose	80%	$\frac{41}{51}$	received all 3 doses HPV clients assessed

HPV Series Completion Rate 85 %
 Among the 48 clients who began the HPV series at least 6 months before the date of this report, 41 have received all three doses.

Adolescent assessment summary report

Missed opportunity measure in development

Tdap, MCV4, and HPV client followup capacity added to IIS

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Old Minnesota State High School League physical assessment form:

IMMUNIZATIONS [Consider Td or Tdap (age 12) ; MMR (2 required); hep B (3 required); varicella (2 required or history of disease); poliomyelitis (IPV); influenza]

Up-to-date (see attached school documentation) Not up-to-date / Specify _____

IMMUNIZATIONS GIVEN TODAY: _____

New language (adds MCV4 and HPV):

IMMUNIZATIONS [Consider Tdap; meningococcal (MCV4); HPV (3 doses); MMR (2 required); hep B (3 required); varicella (2 required or history of disease); poliomyelitis (IPV); influenza]

Up-to-date (see attached school documentation) Not up-to-date / Specify _____

IMMUNIZATIONS GIVEN TODAY: _____

Newer language (no distinction between recommended and required):

IMMUNIZATIONS [Tdap; meningococcal (MCV4, 1-2 doses); HPV (3 doses); MMR (2 doses); hep B (3 doses); varicella (2 doses or history of disease); polio (3-4 doses); influenza (annual)]

Up-to-date (see attached school documentation) Not up-to-date / Specify _____

IMMUNIZATIONS GIVEN TODAY: _____

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Are Your Kids Ready?

Minnesota's Immunization Law

Immunization Requirements The following immunizations are required beginning Sept. 1, 2014. To enter into child care, early childhood programs, and elementary or secondary schools (public or private), children need to have certain immunizations. Use this chart as a quick reference to determine which vaccines are required for enrollment. See below for exemption information.

Birth through 4 years Early childhood programs & Child care	Age: 5 through 6 years ² For Kindergarten	Age: 7 through 11 years For 1st through 6 th grade	Age: 12 years and older For 7 th through 12 th grade
Hepatitis A			
Hepatitis B	Hepatitis B 3 doses	Hepatitis B 3 doses	Hepatitis B ³ 3 doses
DTaP/DT	DTaP 5 doses <small>5th shot not needed if 4th was after age 4 Final dose on or after age 4 years</small>	At least 3 tetanus and diphtheria containing doses	Tdap ⁴ At age 11-12 years
Polio	Polio 4 doses <small>4th polio not needed if 3rd was after age 4 Final dose on or after age 4 years</small>	Polio At least 3 doses	Polio At least 3 doses
MMR	MMR 2 doses	MMR 2 doses	MMR 2 doses
Hib <small>Haemophilus influenzae type b</small>			Meningococcal ⁵ At age 11-12 years
Pneumococcal At age 2-24 months			
Varicella ¹	Varicella ¹ 2 doses	Varicella ¹ 2 doses	Varicella ¹ 2 doses

Immunizations recommended but not required by the Immunization Law:

Influenza
Recommended annually for all children age 6 months and older

Rotavirus
Recommended for infants

Human papillomavirus
Recommended at age 11 years

¹ If the child has already had chickenpox disease, varicella shots are not required. If the disease occurred after 2010, the child's doctor must sign a form.
² First graders who are 6 years old and younger must follow the polio and DTaP/DT schedules for kindergarten.
³ An alternate 2-shot schedule of hepatitis B may also be used for kids from age 11 through 15 years.
⁴ Proof of at least three doses of diphtheria and tetanus vaccination needed. If a child received Tdap at age 7-10 years another dose is not needed at age 11-12 years. However, if it was only a Td, a Tdap dose at age 11-12 years is needed.
⁵ A booster dose is required at age 16 years or three years later if the first dose was given between age 13-15 years.

Exemptions To go to school in Minnesota, students must show they've had these immunizations or file a legal exemption with the school.
 Parents may file a medical exemption signed by a health care provider or a conscientious objection signed by a parent/guardian and notarized.

Looking for Vaccination Records? For copies of your child's vaccination records, talk to your doctor or call the Minnesota Immunization Information Connection (MIIC) at 651-201-5503 or 1-800-657-3970.



For a parent-friendly chart of immunizations needed for kids from birth to age 16 see, "When to Get Vaccines" available to download from www.health.state.mn.us/divs/idepc/immunize/schedules.html
 ICF# 141-0903 (MDH, 10/2013)

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January 29, 2013

Dear Medical Director:

The Minnesota Cancer Alliance and the Minnesota Department of Health's Immunization Program have joined forces to promote human papillomavirus (HPV) vaccine, which is a safe and effective method of preventing cervical and other cancers. Vaccine ordering records from the Minnesota Vaccines for Children (MnVFC) program suggest that your clinic may be using HPV vaccine less frequently than other adolescent vaccines.

HPV vaccine provides a very high level of protection against virus strains 16 and 18, which are responsible for most of the cancer burden of HPV. Thus, HPV-related cancer is largely preventable, especially when the vaccine is given as recommended: to **both** girls and boys at 11 or 12 years of age, before they become sexually active. Yet, compared to other adolescent vaccines, uptake of HPV vaccine is low. Only about a third of adolescent girls in Minnesota have completed the recommended three-dose HPV vaccine series, and few boys have received all three doses.

Annual US Cancer Cases from HPV	Strains 16/18	Other
Females (cervix, vagina, vulva, anus, oropharynx)	14,720	2,890
Males (penis, anus, oropharynx)	7,080	1,000

The Alliance and the Immunization Program would like to ask that your clinic assess its policies and procedures related to HPV vaccination and consider some of these techniques for increasing HPV vaccine uptake:

- **Support and recommend HPV vaccine for your patients.** Provider recommendation is the strongest predictor of a patient's vaccination status. If you're concerned that HPV vaccination will be a sensitive subject, the best approach may be to emphasize that the vaccine works best at preventing cancer later in life if it is given at the recommended age. You could also stress that HPV is very common: at least half of adults will be infected with HPV at some point, and it is impossible to predict which infections will become cancerous. The enclosed patient education materials may be helpful.
- **Include HPV vaccine in your clinical routines**, such as by adding it to routine screening forms or placing an automatic reminder in your electronic health record (EHR) system.
- **Take advantage of every possible visit** to give HPV vaccine. Mild illness is not a contraindication.
- **Remind patients** when they are due for each dose of HPV vaccine. A listing of reminder programs is enclosed.
- **Track your rates.** Your EHR system may be able to calculate the proportion of adolescents in your practice who are up to date on HPV and other vaccines. Also, beginning in summer 2013, you will be able to run the new Minnesota Immunization Information Connection (MIIC) Adolescent Assessment Report to gauge these rates.

Your patients rely on your clinical judgment, just as we are relying on you to carry out this important cancer prevention measure. We thank you in advance for your efforts to prevent HPV-related cancers through vaccination.

Best regards,

Jennifer P. Lundblad, Ph.D., MBA
Steering Committee Chair
Minnesota Cancer Alliance

Kristen R. Ehresmann, RN, MPH
Director, Division of Infectious Disease Epidemiology,
Prevention, and Control
Minnesota Department of Health

Joint letter
from MDH and
Minnesota
Cancer
Alliance

Sent to 253 clinics that ordered disproportionately little HPV vaccine from VFC program

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Report via PQRS

A Foundation of Trust MNCM's 2013 Annual Report	Spotlight on Tobacco Tobacco use is still a problem	Become a Member Your organization will benefit	Report via PQRS Efficient, rewarding
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MDH activities

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About Minnesota Community Measurement

- Mandatory per state law
- Results reported to public
- Measures chosen by committee

Arguments for an HPV measure

- Similar to HEDIS measure but would include males
- Easy to measure via IIS
- Likely an indicator of other best practices

Current status

- Minnesota Cancer Alliance (MCA) advocated for a measure in 2011, but was not selected
- MCA has drafted a letter outlining the measure and is recruiting support from member organizations
- Letter will be submitted to the Division of Health Policy in 2014

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Changing the HPV message

- From STD
- To cancer prevention

Physicians may be recruited to

- Write editorials in provider publications
- Host provider education webinars
- Conduct clinic visits

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Prevent Cancer Foundation grant

- \$10,000 award
- Work began January 2014

Partners

- American Indian Cancer Foundation
- Fond du Lac Comprehensive Cancer Control Program
- MN-WI Intertribal Cancer Council

Purposes

- Develop and test culturally specific educational materials on HPV vaccine for MN American Indian populations
- Distribute via mail, clinics, and AI-serving organizations

MDH activities

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Focus

- Resident and provider education
- Themes: anti-cancer, give early, give to boys, does not promote promiscuity, use reliable resources

Activities

- Videos
 - Model scenarios
 - Recorded with volunteer families
- PowerPoint presentation
 - Reviews HPV disease and vaccine essentials
 - Encourages providers to set aside myths
 - Will be presented to family medicine and pediatrics residents; measurement of attitudes/beliefs afterward
 - Will be presented to Minnesota AAP meeting in June 2014
- Both will be posted on www.mnaap.org

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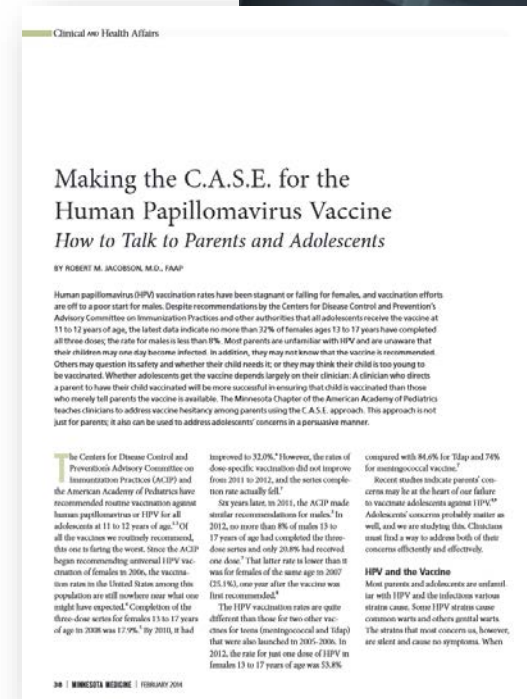
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Journal article

- *Making the C.A.S.E. for the Human Papillomavirus Vaccine: How to Talk to Parents and Adolescents*
- *Minnesota Medicine, February 2014*

MOC2 module

- In development
- Will be delivered via webinar



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www.health.state.mn.us/immunize

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MN Chapter AAP	cairns@mnaap.org (Katherine)