

## 2017 Model Practices

### Applicant Information

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### Model Practice Title

Please provide the name or title of your practice: \*

Providing HPV Vaccine as part of Routine Immunization to Increase HPV Vaccination Rates

### Practice Categories

Model and Promising Practices are stored in an online searchable database. Applications may align with more than one practice category. Please select all the practice areas that apply.: \*

- |   |   |   |  |   |
|---|---|---|--|---|
| <input type="checkbox"/> Access to Care   | <input type="checkbox"/> Advocacy and Policy Making       | <input type="checkbox"/> Animal Control                 | <input type="checkbox"/> Coalitions and Partnerships | <input type="checkbox"/> Communications/Public Relations      |
| <input type="checkbox"/> Community Involvement  | <input type="checkbox"/> Cultural Competence              | <input type="checkbox"/> Emergency Preparedness         | <input type="checkbox"/> Environmental Health        | <input type="checkbox"/> Food Safety                          |
| <input type="checkbox"/> Global Climate Change  | <input type="checkbox"/> Health Equity                    | <input type="checkbox"/> HIV/STI                        | <input type="checkbox"/> Immunization                | <input checked="" type="checkbox"/> Infectious Disease        |
| <input type="checkbox"/> Informatics  | <input type="checkbox"/> Information Technology           | <input type="checkbox"/> Injury and Violence Prevention | <input type="checkbox"/> Marketing and Promotion     | <input type="checkbox"/> Maternal-Child and Adolescent Health |
| <input type="checkbox"/> Organizational Practices   | <input type="checkbox"/> Other Infrastructure and Systems | <input type="checkbox"/> Organizational Practices       | <input type="checkbox"/> Primary Care                | <input type="checkbox"/> Quality Improvement                  |
| <input type="checkbox"/> Research and Evaluation  | <input type="checkbox"/> Tobacco                          | <input type="checkbox"/> Vector Control                 | <input type="checkbox"/> Water Quality               | <input type="checkbox"/> Workforce                            |
| <input type="checkbox"/> Conference Theme: Bridging Clinical Medicine and Population Health |   |   |  |   |

Other::

Is this practice evidence based, if so please explain. :

### Winnable Battles

To keep pace with emerging public health challenges and to address the leading causes of death and disability, CDC initiated an effort called Winnable Battles to achieve measurable impact quickly. Winnable Battles are public health priorities with large-scale impact on health and known effective strategies to address them. Does this practice address any CDC's seven Winnable Battles? If so, please choose from the following:: \*

- |   |  |  |                                  |   |
|---|--|--|----------------------------------|---|
| <input type="checkbox"/> Food Safety            | <input type="checkbox"/> HIV in the U.S. | <input type="checkbox"/> Nutrition, Physical Activity, and Obesity | <input type="checkbox"/> Tobacco | <input type="checkbox"/> Healthcare-associated Infections |
| <input type="checkbox"/> Motor Vehicle Injuries | <input type="checkbox"/> Teen Pregnancy  | <input checked="" type="checkbox"/> None                           |                                  |   |

Overview: Provide a brief summary of the practice in this section (750 Word Maximum)

**Your summary must address all the questions below:**

- Brief description of LHD- location, demographics of population served in your community
- Describe public health issue
- Goals and objectives of the proposed practice
- How was the practice implemented/activities
- Results/Outcomes (list process milestones and intended/actual outcomes and impacts.
  - Were all of the objectives met?
  - What specific factors led to the success of this practice?
- Public Health impact of practice
- Website for your program, or LHD.

**750 Word Maximum**

**LHD Description:** Broward County is located in the southeastern portion of the State of Florida. Broward County is the second most populous county in Florida in 2016, estimated at 1,809,604, and home to 10% of Florida's residents. 31.4% of the residents are foreign-born. Broward County is a minority/majority county demonstrated by its 2016 population by race (Black 28.5%, Asian 3.6%, Hispanic 26.9%, other races 4.1%, more than one race .2%, for a total of 59.5% and White 40.8%). The Florida Department of Health in Broward County (DOH-Broward) is the official Public Health Agency in Broward County since 1936. It is part of the Integrated Florida Department of Health (DOH) and operates in cooperation with the Broward County Commission under Florida Statute 154. DOH-Broward's mission is "to protect, promote and improve the health of all people in Florida through integrated state, county and community efforts". DOH-Broward is the lead agency providing core public health functions and essential services in the county as part of a complex public health system that includes hospitals, clinics, planning agencies, community-based organizations and others. DOH-Broward provides population/community-based services to the county's 1.9 million residents and over 10 million annual visitors, and is responsible for assessing, maintaining and improving health and safety within the county.

**Public Health Issue:** According to a CDC analysis (2006-2010), the State of Florida has high rates of HPV-associated cancers. Florida ranks in the top third of States in HPV-associated cervical cancer (8.04-9.54 per 100,000), anal cancer in males (1.13-2.79 per 100,000) and in females (1.86-2.29 per 100,000), oropharyngeal cancer in males (7.11-8.52 per 100,000) and in females (1.60-1.93 per 100,000). Florida ranks in the mid-third of States in HPV-associated penile cancer (0.71-0.85 per 100,000) and vaginal cancer (0.41-0.47 per 100,000). According to 2013 CDC data, HPV vaccination rates of adolescent girls ages 13-17 in Florida was between 30-37.6%, placing Florida among the lower third in state ranking. The Morbidity and Mortality Weekly Report (MMWR), August 30, 2013/62(34); 685-693, indicates that among females, Florida had the lowest coverage for =1 HPV vaccine dose (39.4%) compared to the rest of the States. Because Broward County represents 9% of the State's population, and is the second most populous county in the State of Florida, it is reasonable to assume that Broward County contributes to Florida's low HPV vaccination rates.

**Goals/Objectives:** The goal is to increase HPV vaccination rates in Broward County and the objectives are: a. Develop and distribute an HPV palm card and information to the community and providers to increase awareness of HPV and the HPV vaccine. b. Train immunization staff to promote HPV vaccine as a part of routine recommended immunizations and as cancer prevention c. Provide HPV vaccine in back-to-school point of dispensing and as part of routine immunization clinical visits

**Practice Implemented:** In 1996, DOH-Broward led the creation of the Broward County Immunization Action Coalition. The mission is to develop, implement, and monitor immunization strategies that further the goals of providing complete protection against, and eventual elimination of, vaccine preventable diseases. DOH-Broward and the Coalition held a community planning meeting on May 11 and 12, 2015 to develop an action plan to increase HPV vaccine rates in Broward County. DOH-Broward representatives presented HPV at the Broward County Pediatric Medical Society's seminar on May 12, 2015. DOH-Broward conducts an annual back-to-school immunization point of dispensing (POD) that provides required vaccines to children. As part of the community action plan, it was agreed to offer HPV vaccine for the first time during back-to-school POD operations in addition to required school immunizations. During the 8/10/15 – 8/25/15 POD, DOH-Broward offered HPV vaccine for the first time during this campaign. HPV vaccine was again offered in the POD during the 8/8/16-8/23/16 back-to-school campaign.

**Results:** During the 2016 POD, 1,640 HPV vaccines were provided as compared to 903 in 2015 which represents an 81.6% increase. Of those, 1,256 were initial doses, 228 were 2nd doses and 156 were 3rd dose. HPV vaccine rates have also significantly increased at DOH-Broward clinics. During 2016, 2,577 doses of HPV were provided as compared to 869 in 2015, which represents a 196.5% increase. Of those, 1,236 were initial doses, 944 were 2nd doses, and 397 were 3rd dose. In addition, over 5,000 palm cards have been distributed to providers and in the community.

**Success Factors:** The success of this practice was due to training immunization nurses on how to talk to parents about HPV and the willingness of the nurses to implement these new methods. By making HPV vaccine a part of routine immunization discussions, parents more readily accepted their child receiving this cancer prevention immunization series.

**Public Health Impact:** HPV causes 70% (<http://www.cancer.gov/about-cancer/causes-prevention/risk/infectious-agents/hpv-fact-sheet>) of cervical cancer in the United States. Making HPV a part of routine immunizations increased vaccine acceptance in doses administered from 2015 (1,772) to 2016 (4,217), representing a 138% increase. Website: <http://broward.floridahealth.gov/>

## Responsiveness and Innovation

A Model Practice must be responsive to a particular local public health problem or concern. An innovative practice must be (1) **new to the field of public health (and not just new to your health department)** OR (2) **a creative use of an existing tool or practice**, including but not limited to use of an Advanced Practice Centers (APC) development tool, The Guide to Community Preventive Services, Healthy People 2020 (HP 2020), Mobilizing for Action through Planning and Partnerships (MAPP), Protocol for Assessing Community Excellence in Environmental Health (PACE EH). Examples of an inventive use of an existing tool or practice are: tailoring to meet the needs of a specific population, adapting from a different discipline, or improving the content.

- Statement of the problem/public health issue
- What target population is affected by problem (please include relevant demographics)
  - What is the target population size?
  - What percentage did you reach?
- What has been done in the past to address the problem?
- Why is the current/proposed practice better?
- Is current practice innovative? How so/explain?
  - Is it new to the field of public health
  - OR**
  - Is it a creative use of existing tool or practice:

- Is the current practice evidence-based? If yes, provide references (Examples of evidence-based guidelines include the Guide to Community Preventive Services, MMWR Recommendations and Reports, National Guideline Clearinghouses, and the USPSTF Recommendations.)

## 2000 Word Maximum

Please state the Responsiveness and Innovation of your practice (2000 Word Maximum) : \*

Public Health Issue: According to population statistics available through the Executive Office of the Governor, Broward County's population includes approximately 113,420 females and 119,753 males aged 15-24. Broward County also hosts an estimated 10 million annual visitors. Broward County cervical cancer screening rates are below the Healthy People 2020 goal of 93%. Data from the CDC Behavioral Risk Factor Surveillance System (BRFSS) indicate that Broward County women aged 18 - 44 who had received a pap test were 61.1% in 2010 and 66.1% in 2013. Sexually active adolescents have higher HPV prevalence and incidence with more than 50-80% infectivity 2-3 years of beginning intercourse. The CDC's 2013 Youth Risk Behavior Survey (YRBS) indicate that 41.4% of high school youth had engaged in sexual intercourse with 30% indicating that they did not use a condom. Broward County consistently ranks in the top 2-3 for newly diagnosed HIV cases in the entire US. Broward County's infections syphilis rates (15.5 in 2015) and number of congenital syphilis cases (3 in 2015) are among the highest in the state. In addition, three year rolling rates for chlamydia and gonorrhea cases in females aged 15-19 in Broward County are also high, at 2,872.5 and 463.8 per 100,000 respectively. An analysis of cancer statistics (2006-2010) conducted by the CDC, indicates that the State of Florida has high rates of HPV-associated cancers. Florida ranks in the top third of States in HPV-associated cervical cancer (8.04-9.54 per 100,000), anal cancer in males (1.13-2.79 per 100,000) and in females (1.86-2.29 per 100,000), oropharyngeal cancer in males (7.11-8.52 per 100,000) and in females (1.60-1.93 per 100,000). Florida ranks in the mid-third of States in HPV-associated penile cancer (0.71-0.85 per 100,000) and vaginal cancer (0.41-0.47 per 100,000). The State of Florida does not have legislative mandates in effect regarding HPV vaccination or education. A bill to institute legislative mandates died in committee in May, 2013 (<http://www.ncsl.org/research/health/hpv-vaccine-state-legislation-and-statutes.aspx#2013-2014> chart) According to the CDC, 2014 national, state, and local area vaccination coverage among adolescents age 13-17 years (2013 data), HPV vaccination rates of adolescent girls ages 13-17 in Florida was between 30-37.6%, placing Florida among the lower third in state ranking. The Morbidity and Mortality Weekly Report (MMWR), August 30, 2013/62(34);685-693, indicates that among females, Florida had the lowest coverage for =1 HPV vaccine dose (39.4%) compared to the rest of the States with Rhode Island have the highest coverage (73.7%). Additionally, the CDC also reported disparities in HPV completion rates, with lower rates of completion among Hispanics and Blacks, compared with Whites. Because Broward County represents 9.4% of the State's population, and is the second most populous county in the State of Florida, it is reasonable to assume that Broward County contributes to Florida's low HPV vaccination rates. Broward County Public Schools (BCPS) is the sixth largest public school system in the United States and the second largest in the state of Florida. BCPS has over 260,000 students and approximately 175,000 adult students in 238 schools, centers and technical colleges, and 102 charter schools. BCPS s student population reflects the diversity of the county. What target population is affected by problem? The target population is boys and girls beginning at age 11 or 12. Indirectly the campaign was able to target all Broward County residents. From August 8-23rd, 2016, the Florida Department of Health in Broward County offered free immunizations to local residents to meet the state of Florida's immunization requirements for students. The event took place at the Lauderhill Mall in central Broward County, a well-known mall that is accessible by public transit. During the 2016 back to school immunization POD campaign, DOH-Broward staff provided 8,069 vaccines. HPV causes 70% (<http://www.cancer.gov/about-cancer/causes-prevention/risk/infectious-agents/hpv-fact-sheet>) of cervical cancer in the United States. By offering HPV education and vaccine during the back to school immunization POD, 1,640 HPV vaccines were provided to adolescents. It is important to note that the high number of vaccines provided were due largely to the training provided to immunization nurses in making HPV discussion a part of the routine immunization discussion and in presenting the vaccine as a cancer preventative and not a response to a sexually transmitted disease transmission. What had been done in the past to address the problem? In the past DOH Broward provided HPV vaccine at its immunization clinics only. HPV was never addressed to the provider community nor was vaccine provided in the POD. HPV vaccine was not recommended as part of routine immunization, but was offered as a supplemental vaccine. Why is current/proposed practice better? This practice utilized the community strategic planning session (May 11-12, 2015) to identify strategies to increase HPV rates. By educating the community and sending the palm cards out prior to the POD, the acceptance rate of HPV vaccine increased. As well, the HPV vaccine was only presented as cancer prevention to parents and parents accepted the vaccine as such. Staff was trained on how to discuss any concerns with the parents. Educating the community and parents, increasing awareness of HPV vaccine and providing the HPV vaccine in the POD and DOH-Broward immunization clinics as part of routine vaccines all helped to increase vaccination acceptance. DOH-Broward administered 1,640 HPV vaccines to adolescents from August 8th-23, 2016 and 4,217 combined with HPV vaccine administered at clinic sites during the year which represents an 81.6% increase from 2015 in the POD, a 196.5% increase at DOH-Broward Immunization clinics, and a 138.0% increase overall. Is current practice innovative? The current practice is both innovative as it was completed in a community wide vaccination POD and given as part of routine vaccinations, and was adopted as a creative use of an existing tool by utilizing a practice in The Guide to Community Preventive Services. The Guide to Community Preventive Services suggests that to increase immunizations a community must increase community demand and increase access to vaccination services. Sending out the HPV palm cards and educating the community on HPV helped to increase demand. Providing HPV during routine vaccinations in the POD, and during clinical visits provided enhanced access to vaccination services.

## LHD and Community Collaboration

The LHD should have a role in the practice's development and/or implementation. Additionally, the practice should demonstrate broad-based involvement and participation of community partners (e.g., government, local residents, business, healthcare, and academia). If the

practice is internal to the LHD, it should demonstrate cooperation and participation within the agency (i.e., other LHD staff) and other outside entities, if relevant. An effective implementation strategy includes outlined, actionable steps that are taken to complete the goals and objectives and put the practice into action within the community.

- Goal(s) and objectives of practice
- What did you do to achieve the goals and objectives?
  - Steps taken to implement the program
- Any criteria for who was selected to receive the practice (if applicable)?
- What was the timeframe for the practice
- Were other stakeholders involved? What was their role in the planning and implementation process?
  - What does the LHD do to foster collaboration with community stakeholders? Describe the relationship(s) and how it furthers the practice goal(s)
- Any start up or in-kind costs and funding services associated with this practice? Please provide actual data, if possible. Otherwise, provide an estimate of start-up costs/ budget breakdown.

#### 5000 words maximum

Enter the LHD and Community Collaboration related to your practice (5000 words maximum): \*

What are the goals and objectives of the practice? The goal is to increase HPV vaccination rates in Broward County and the objectives are: a. Develop and distribute an HPV palm card and information to the community and providers to increase awareness of HPV and the HPV vaccine. b. Train immunization staff to promote HPV vaccine as a part of routine recommended immunizations and as cancer prevention c. Provide HPV vaccine in back-to-school point of dispensing and as part of routine immunization clinical visits What did you do to achieve the goals and objectives? Steps taken to implement the program: Developed and distributed educational palm card on HPV. Held community strategic planning meeting on HPV (May 11-12, 2015). Collaborated with the Broward County Pediatric Society on a meeting with physicians on how to improve HPV communication with Parents (May 12, 2015 in the evening). Trained immunization staff to promote HPV vaccine as part of routine immunizations and as a cancer preventative. Provided HPV vaccines in the DOH Broward immunization Point of Dispensing, August 10th-25th, 2015, and again August 8th -23rd, 2016, including night and weekend hours. Promote HPV vaccine as part of routine immunizations at DOH-Broward Immunization clinics. Any criteria for who was selected to receive the practice (if applicable)? • HPV palm card was distributed to DOH-Broward clinics, pediatricians and general and family practices, libraries and community partners. • The strategic planning meeting (May 11-12, 2015), was held in partnership with the Immunization Action Coalition and had over 34 participants. • The Broward County Pediatric Society held a meeting with pediatric providers (May 12, 2015 in the evening). • Children and parents participating at the back-to-school immunization point of dispensing. • DOH-Broward administered 1,640 HPV vaccines to adolescents from August 8th-23, 2016 and 4,217 combined with HPV vaccine administered at clinic sites during the year which represents an 81.6% increase from 2015 in the POD, a 196.5% increase at DOH-Broward Immunization clinics, and a 138.0% increase overall. What was the timeframe for the practice? November 1 - October 31, 2015 and 2016 was the time frame for the practice. Palm cards were distributed throughout both time periods, the strategic planning session and pediatric society meeting were held in May, 2015 and the immunization POD was held August 10 – August 25, 2015, and August 8 – August 23rd, 2016. Were other stakeholders involved? What was their role in the planning and implementation process? What does the LHD do to foster collaboration with community stakeholders? Describe the relationship(s) and how it furthers the practice goal(s). The practice was first discussed during the strategic planning meeting held May, 2015 with 34 community providers. During the planning session discussion occurred on providing HPV in the Back to School Immunization POD. During the pediatric society meeting, information was obtained on the importance of providing and promoting the vaccine as part of routine vaccinations and informing parents that HPV vaccine was “cancer prevention”. DOH Broward informed the community of the Back to School immunization PODS through the public and private schools, libraries, community based organizations, print media and television. This helped to increase the number of children who received their vaccinations in the POD. DOH-Broward continually fosters collaboration with community stakeholders. Staff participates on community-based committees including Broward County Comprehensive School Health Advisory Committee and Broward County Schools Educational Conferences. DOH-Broward is in routine communication with the Broward County School Board, Broward County Superintendent of Schools, President of the Charter Schools Association, and Childcare Licensing Office. DOH-Broward maintains relationships with the Broward County Administrator and local public health officials. DOH-Broward leads an outreach workgroup that provides ongoing informational materials to community stakeholders. DOH-Broward hosts the monthly meetings of the Broward County Comprehensive School Health Advisory Committee (BCCSHAC). DOH-Broward serves in leadership roles to the committee. The committee membership includes the American Cancer Society, American Lung Association, Broward Health, Broward County Medical Association, Broward County Schools, Children’s Services Council, Florida Introduces Physical Activity and Nutrition to Youth (FLIPANY), Holy Cross Hospital, Leukemia & Lymphoma Society, DOH-Broward, and Medical Staffing Network. Sanofi-Pasteur presented on the meningococcal vaccine in March, 2014 and included information about HPV immunization rates to the group. Any start up or in-kind costs and funding services associated with this practice? Please provide actual data, if possible. Else, provide an estimate of start-up costs/ budget breakdown: The palm cards were produced at a cost of \$150 for 2,500 cards plus \$195 for the graphic design. The strategic planning session was no cost to the program and the Broward County Pediatric Society meeting was provided as part of the Broward County Medical Association meeting. The vaccines were provided for eligible children through the Vaccines For Children (VFC) program.

#### Evaluation

Evaluation assesses the value of the practice and the potential worth it has to other LHDs and the populations they serve. It is also an



effective means to assess the credibility of the practice. Evaluation helps public health practice maintain standards and improve practice. Two types of evaluation are **process** and **outcome**. Process evaluation assesses the effectiveness of the steps taken to achieve the desired practice outcomes. Outcome evaluation summarizes the results of the practice efforts. Results may be long-term, such as an improvement in health status, or short-term, such as an improvement in knowledge/awareness, a policy change, an increase in numbers reached, etc. Results may be quantitative (empirical data such as percentages or numerical counts) and/or qualitative (e.g., focus group results, in-depth interviews, or anecdotal evidence).

- What did you find out? To what extent were your objectives achieved? Please re-state your objectives.
- Did you evaluate your practice?
  - List any primary data sources, who collected the data, and how (if applicable)
  - List any secondary data sources used (if applicable)
  - List performance measures used. Include process and outcome measures as appropriate.
  - Describe how results were analyzed
  - Were any modifications made to the practice as a result of the data findings?

## 2000 Words Maximum

Please enter the evaluation results of your practice (2000 Words Maximum): \*

Objectives: The practice was implemented by conducting a strategic planning meeting in partnership with key stakeholders to develop an action plan to create opportunities to conduct community-wide activities in an effort to increase HPV immunization rates. All objectives were met. The strategic planning meeting consisted of 34 community providers. Over 30 physicians attended the HPV informational meeting. The HPV palm cards were produced and distributed to the community and other Florida local health departments requested and received the template for the cards for distribution in their communities. DOH-Broward administered 1,640 HPV vaccines to adolescents from August 8th-23, 2016 and 4,217 combined with HPV vaccine administered at clinic sites during the year which represents an 81.6% increase from 2015 in the POD, a 196.5% increase at DOH-Broward Immunization clinics, and a 138.0% increase overall.

## Sustainability

Sustainability is determined by the availability of adequate resources. In addition, the practice should be designed so that the stakeholders are invested in its maintenance and to ensure it is sustained after initial development (*NACCHO acknowledges that fiscal challenges may limit the feasibility of a practice's continuation.*)

- Lessons learned in relation to practice
- Lessons learned in relation to partner collaboration (if applicable)
- Did you do a cost/benefit analysis? If so, describe.
- Is there sufficient stakeholder commitment to sustain the practice?
  - Describe sustainability plans

## 1500 Words Maximum

Please enter the sustainability of your practice (2000 Words Maximum): \*

Lessons Learned When HPV becomes a part of routine vaccination and is presented as cancer prevention, parents are more apt to agree to the vaccination for their child. Stakeholder Commitment As there was such success in the delivery and uptake of the vaccination, HPV will continue to be a part of the routine vaccinations provided as part of the DOH-Broward Back to School Vaccination POD. In addition, DOH-Broward will continue to educate the community on HPV as cancer prevention.

## Additional Information

How did you hear about the Model Practices Program?: \*

- |   |   |   |  |   |
|---|---|---|--|---|
| <input checked="" type="checkbox"/> I am a previous Model Practices applicant | <input type="checkbox"/> At a Conference      | <input type="checkbox"/> NACCHO Website | <input type="checkbox"/> Public Health Dispatch                      | <input checked="" type="checkbox"/> Colleague in my LHD |
| <input type="checkbox"/> Model Practices brochure                             | <input type="checkbox"/> NACCHO Exhibit Booth | <input type="checkbox"/> NACCHO Connect | <input type="checkbox"/> Colleague from another public health agency | <input type="checkbox"/> E-Mail from NACCHO             |
| <input type="checkbox"/> NACCHO Exchange                                      |   |   |  |   |