Community, Policy, and Hospital System Strategies





Current Trends



Morbidity and Mortality Weekly Report (MMWR)

Search

Decline in Vaccination Coverage by Age 24 Months and Vaccination Inequities Among Children Born in 2020 and 2021 — National Immunization Survey-Child, United States, 2021–2023

Weekly / September 26, 2024 / 73(38);844-853



Morbidity and Mortality Weekly Report (MMWR)

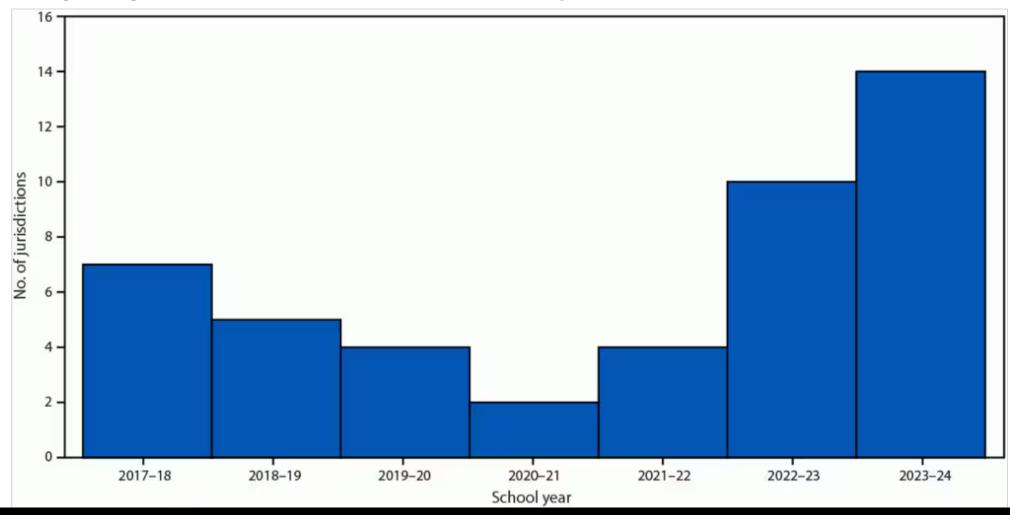
Search

Coverage with Selected Vaccines and Exemption Rates Among Children in Kindergarten — United States, 2023–24 School Year

Weekly / October 17, 2024 / 73(41);925-932

Current Trends

FIGURE 2. Number of jurisdictions that could not potentially achieve ≥95% coverage*,† with measles, mumps, and rubella vaccine among kindergartners — United States, 2017–18 to 2023–24 school years



Integrated Community, Policy, and Health System Strategies

- Access and convenience: Addressing disparities in vaccination rates requires practical steps to facilitate access
- Social networks and trusted community & institutional leaders:
 Parents often consult with their social networks and trusted leaders
- Collaborations and partnerships: Partnerships with communities and their involvement in designing interventions can enhance effectiveness
- Strategic policy initiatives and improved monitoring: Stakeholder sharing information and identifying populations needing focus can improve monitoring



Our History

Vaccines Through the Years

Cincinnati Children's has a long history in the fight against infectious diseases, from encephalitis and polio to the rotavirus and COVID-19.

Learn More about Our History →

BOTH CHERRIES

Physician Resources →

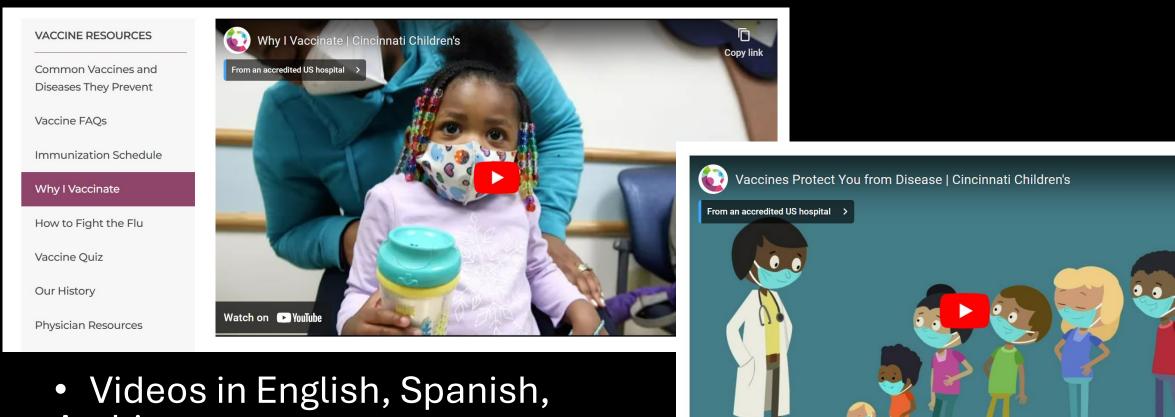


Access and Convenience

- Creating a culture supporting immunization with all members in a practice
- Easy access to vaccines through walk-in visits, vaccine only visits, evening/weekend hours, administer vaccines during other encounters like acute care visits, provider digital reminders
- Robust outreach to children who are not up-to-date on well visits and immunizations
- Immunization at community events, schools, mobile care centers

Social Networks and Trusted Leaders

Media campaigns: TV, social media, webpages, newspaper



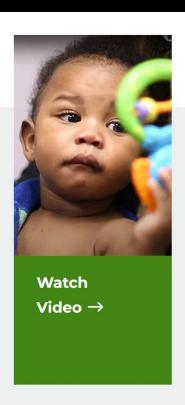
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Collaborations and Partnerships

- Community Advisory Boards for community input
- Community and school events
- Partner with and empower families

Why I
Vaccinate
Cincinnati
Children's
families and
employees
share why
they chose to
vaccinate
their children
and why you
should as
well.





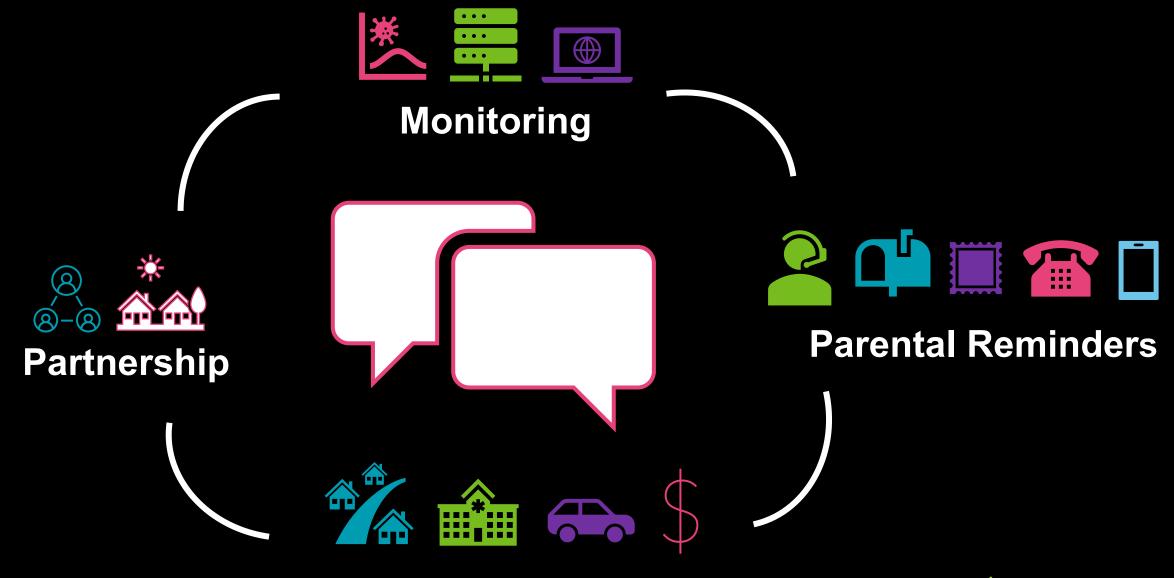




Strategic Policy Initiatives and Monitoring

- State immunization registries
- Practice level close monitoring for patients who are overdue for well care and/or immunizations
- Full time outreach coordinators who monitor receipt of vaccines and outreach through automated phone calls, texts, MyChart messages, personal calls and coordination with community health workers
- Monitoring through our electronic records, state registries and insurance company data
- Advocacy for immunizations
- Innovation to improve





Access and Convenience



Core Messages and Tailored Communication

High Quality Vaccine Recommendations

Presumptive Announcement

Strong Recommendation

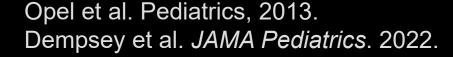
Motivational Interviewing Skills

Open-ended Questions

Reflections

Asking Permission

Affirming/Supporting Statements





Mobile Apps to Support Provider Communication







Real et al. Academic Pediatrics, 2021. Bishop et al. *J Health Commun*. 2022.



Promoting Communication and Trust Building Skills through Virtual Reality









Practice Tailoring Your Communication

Identify why a family may be hesitant:

Use open-ended questions: "Tell me more..."

Allow families to maintain control:

Ask permission: "Is it okay if I tell you..."

Avoid debating/confronting a family:

Reflect and redirect: "It sounds like..."

Emphasize a family's strengths and abilities:

Use affirmative language: "I appreciate..."

What if race comes up?

- Acknowledge
- Validate
- Destigmatize
- Emphasize shared values

What if **politics** comes up?







Variables	% before	% after	Difference (95% CI)	<i>p</i> -value ^a
Intervention group				
All participants	54.3	72.4	18.1 (11.0, 25.8)	<0.001
Licensed physicians	40.4	63.3	22.9 (11.0, 35.4)	<0.001
Resident physicians	59.9	75.2	15.3 (6.0, 24.7)	0.002



Comparison group			•	
All participants	59.5	63.4	3.9 (-11.0, 19.0)	0.609
Licensed physicians	61.2	39.8	-21.4 (-48.0, 5.3)	0.128
Resident physicians	58.9	69.8	10.8 (-7.0, 28.3)	0.228

Real et al. Am J Prev Med. 2022.



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