



HPV@9

QUALITY IMPROVEMENT (QI) PROJECT

AIM 2025 Leadership in Action Conference
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Presenters



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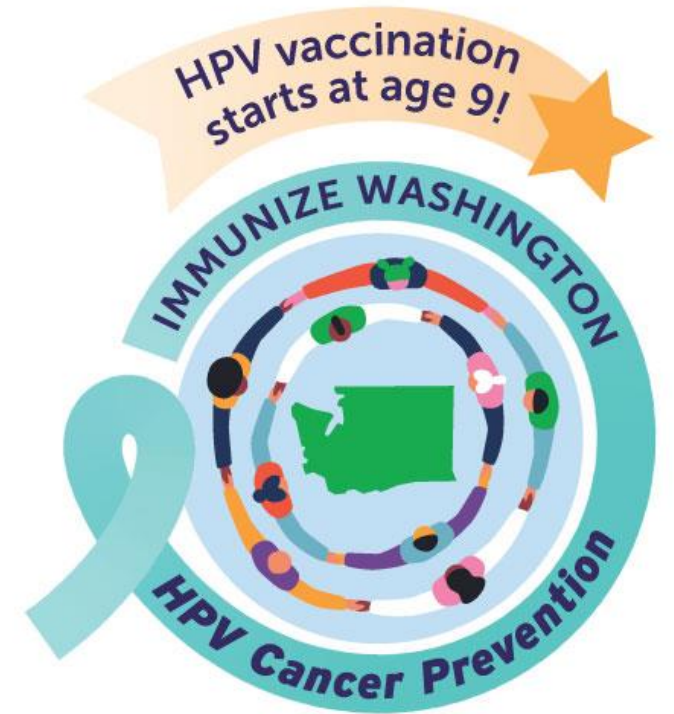
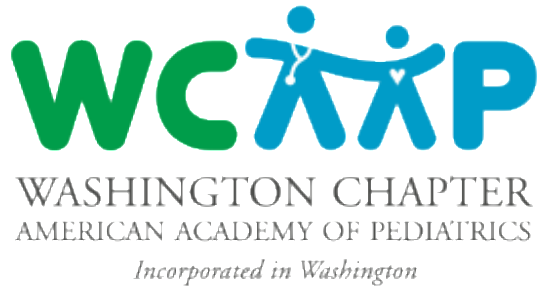
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Strong Partnership



Background

- Timely HPV vaccination can prevent 90% of six HPV-related cancers
- Routine recommendation at age 11–12; early start possible at age 9
- Age 9 initiation is an emerging best practice (AAP, ACS, HPV Roundtable)
- Early start *benefits*:
 - Higher on-time completion
 - Easier conversations with parents
 - Flexibility in spacing adolescent vaccines
 - More opportunities to vaccinate
- Since Jan 2023, Washington State's IIS forecasts HPV starting at age 9

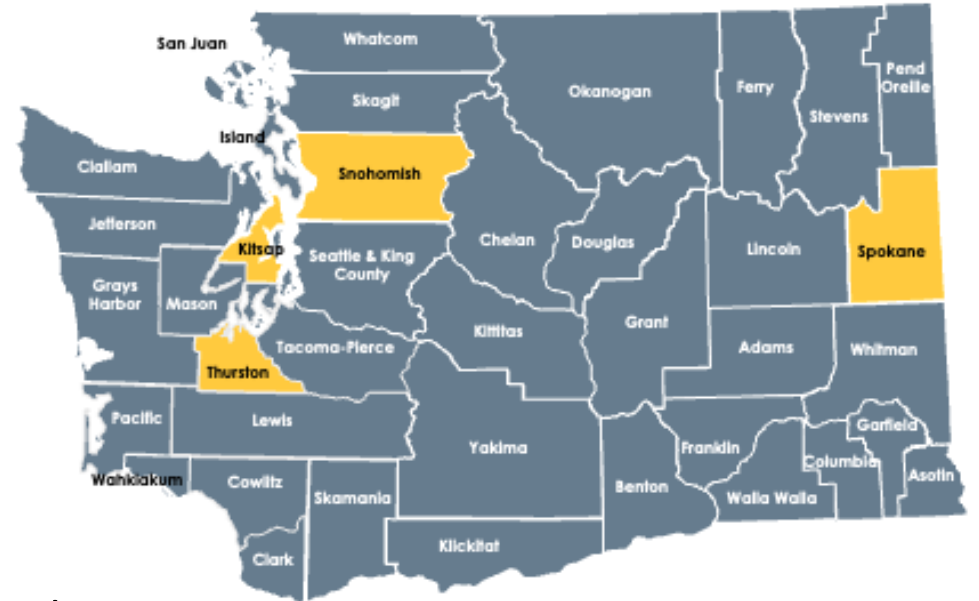
HPV@9 QI – Cohort 4

Goal: Increase HPV vaccination of preteens, ages 9-12

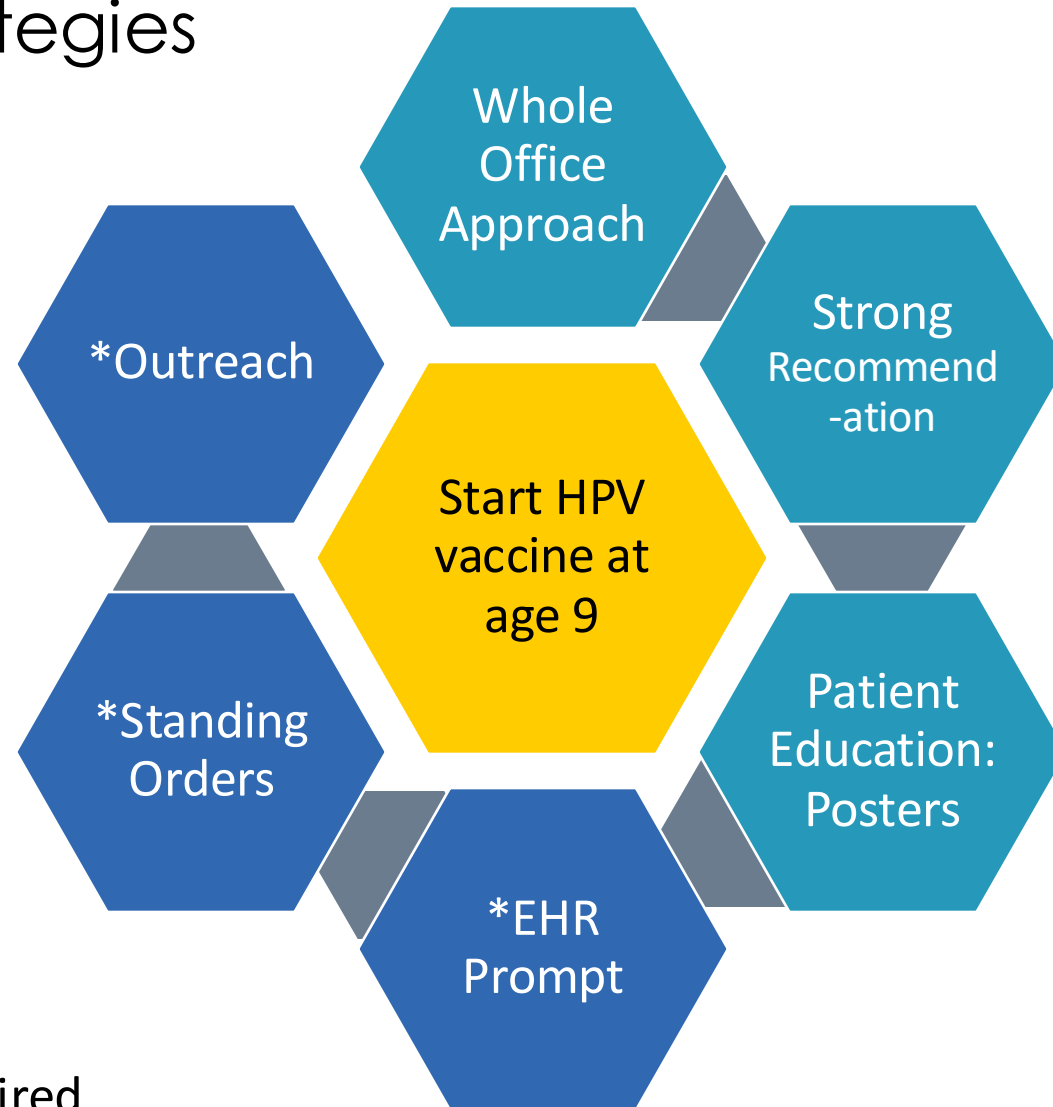
- Who: 9 clinics in Washington State
- When: Feb-July 2025 (6 months)
- How:
 - Virtual sessions
 - Multi-level strategies & tools
- Specific Aims:
 - Increase HPV coverage rates at ages 9-10
 - Improve provider confidence to make effective HPV recommendations at ages 9-10

Clinic Demographics

- 9 clinics across 4 counties
 - 7 pediatric
 - 1 family medicine
 - 1 primary care clinic (Peds + FM)
- Size: small to very large
 - 3 to 15 providers (total 48)
 - 138 to 2,027 9-10-year-olds per clinic (median 446)
- 5,283 total 9-10-year-olds

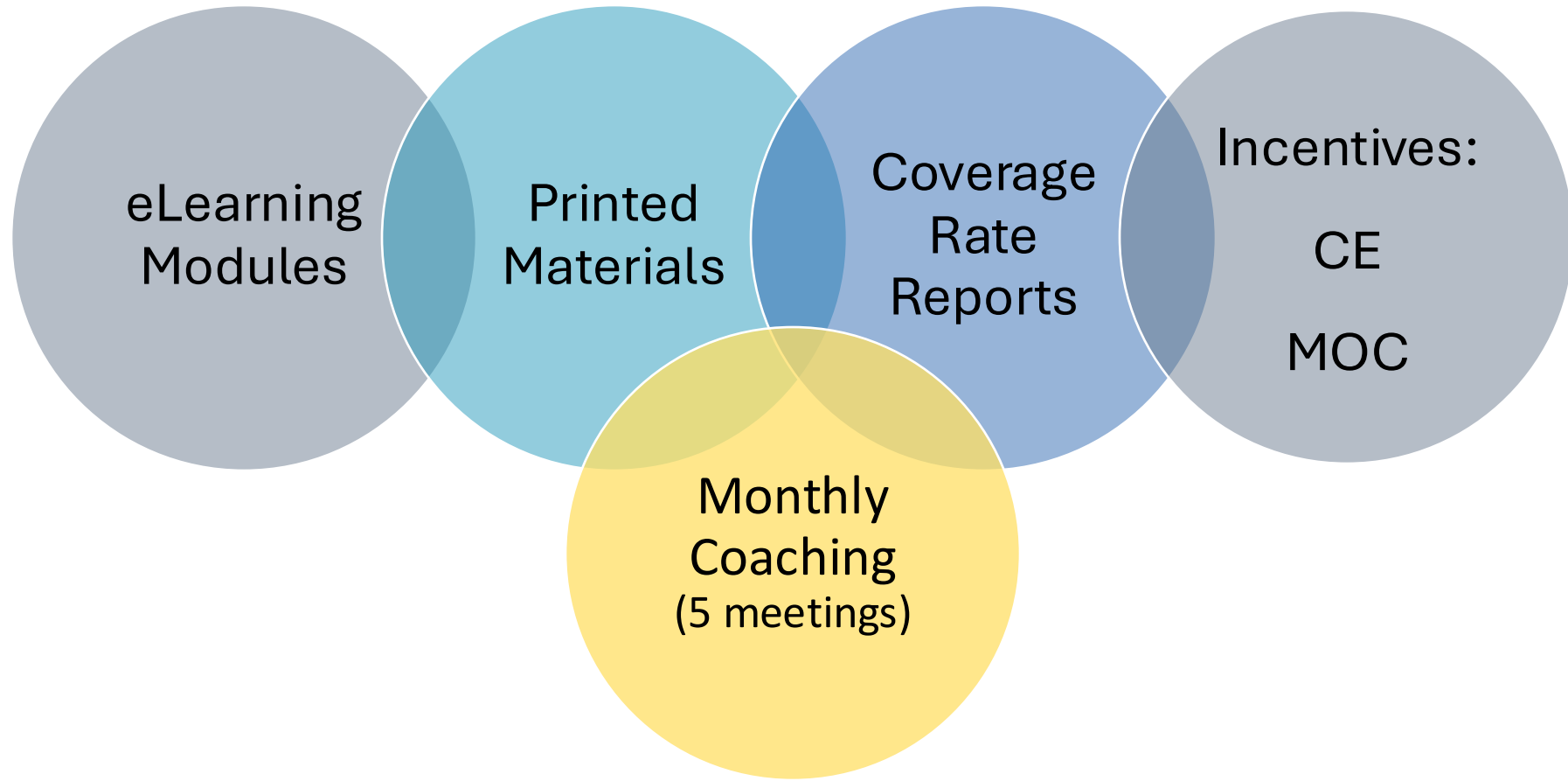


Multi-level Strategies



*suggested, but not required

Key Components



E-Learning Modules

Announcement
Approach

HPV Basics &
Comprehensive
Overview

Implementation of
HPV Quality
Improvement
Strategies

Rural Disparities &
Addressing HPV
Vaccine Hesitancy

- Created by WCAAP for providers in Washington State
- Physicians required to complete all 4 modules
- Others complete 1-4 modules based on interest and clinical role



HPV Vaccine: It's Cancer Prevention

Who? All kids (both boys and girls) should get the vaccine starting at age 9.

What? The human papillomavirus (HPV) vaccine is a cancer prevention vaccine.

Why?

- The HPV vaccine prevents 6 different cancers (mouth/throat, cervix, vulva, vagina, penis and anus).
- The HPV vaccine prevents most genital warts.
- The HPV vaccine is safe and effective, with no long term side effects.
- The HPV vaccine has been given for more than 15 years and provides long lasting protection.

When?

On Time
AGE 9-12
2 Doses
6-12 months apart

Late
AGES 13-14
2 Doses
6-12 months apart

Critical
AGES 15-26
3 Doses
1st dose at visit time
2nd dose 1-2 months later
3rd dose 6 months after 1st dose

Special Acknowledgments to the 16 HPV-free countries for the creation of this resource.

Printed Materials

PROTECT YOUR KIDS FROM CANCER

You can't protect your kids from everything, but you can prevent 6 types of cancer caused by Human Papilloma Virus.

Get your kids the HPV vaccine starting at age 9.

Learn more at cancer.org/hpv

ADOLESCENT IMMUNIZATION SCHEDULE At a Glance

Adolescents (age 9-18) need 4 vaccines to protect against meningococcal disease, some cancers, whooping cough, and other serious diseases, according to national guidelines.

AGE	IMMUNIZATIONS
9-10	<ul style="list-style-type: none"> • HPV dose 1 • HPV dose 2 (6-12 months after dose 1)

[More languages and information](#)

ACWY dose 1 (one dose)

ACWY dose 2 (1-2 months or 6 months after dose 1, depending on brand)

COVID-19 Vaccine (every year, every age, adolescents)

[cdc.gov/vaccines](https://www.cdc.gov/vaccines)

25-0127. Draft for review. For small civil right@doh.wa.gov

DOH 348-739 March 2023

Training Tools

- HPV Cue Card
- Announcement Approach Pathway

The Announcement Approach for Increasing HPV Vaccination

Take these steps to more effectively recommend HPV vaccination. They will save you time and improve patient satisfaction.

- 1. ANNOUNCE**
Start with a presumptive announcement that assumes parents are ready to vaccinate. This is an effective way to recommend adolescent vaccines, including HPV vaccine.
- 2. CONNECT & COUNSEL**
Connect with parents by asking for their main concerns about HPV vaccine. Counsel parents by using a research-based message to address their concerns. Then clearly recommend getting HPV vaccine today.
- 3. TRY AGAIN**
Say you'll bring up HPV vaccine at the next visit. Then make a note in the child's chart. Almost 70% of parents who initially decline later agree to HPV vaccine or plan to soon.

KEY ELEMENTS OF AN ANNOUNCEMENT:

- Note child's age to let that this is part of routine care.
- Say you will vaccinate today.
- Announce children this age get a vaccine that prevents six HPV cancers.

ANNOUNCEMENT EXAMPLE:
"Mason is now 9, so let's get him a vaccine that prevents six HPV cancers."

1. Brown et al., 2017 Pediatrics. 2. Doshi et al., 2018 Pediatrics. 3. Kivimäki et al., 2018 Academic Pediatrics.

HPV10

Immunization Schedule

Ask if your child is up-to-date TODAY

Influenza vaccine is recommended annually starting at 6 months

Children and teens should stay up-to-date with COVID-19 vaccine

Scan here for more information: www.doh.wa.gov/you-and-your-family/immunization

Birth HepB *RSV antibody	12 months MMR Varicella HepA PCV	9-10 years HPV (2 doses) between 9-12 years
2 months DTaP-IPV-Hib-HepB PCV Rotavirus (oral)	15 months DTaP Hib	11-12 years Tdap MenACWY
4 months DTaP-IPV-Hib-HepB PCV Rotavirus (oral)	18-24 months HepA	16 years MenACWY
6 months DTaP-IPV-Hib-HepB PCV (Flu and Covid shots start at 6 months)	4 years MMRV DTaP-IPV	16-18 years MenB (2 doses) Discuss with your provider

Updated July 2024

Vaccine Key:
DTaP: Diphtheria, Tetanus, Pertussis (whooping cough)
HepB: Hepatitis B
HepA: Hepatitis A
Hib: Haemophilus influenzae type b
HPV: Human Papillomavirus
IPV: Inactivated Polio Virus
MenACWY: Meningococcal A, C, W, Y (meningitis)
MenB: Meningococcal B (meningitis)
MMRV: Measles, Mumps and Rubella
PCV: Pneumococcal (pneumonia)
Tdap: Tetanus, Diphtheria, Pertussis (whooping cough)
Varicella: Chickenpox

Combination Vaccines:
MMRV: Includes DTaP-IPV-Hib-HepB
Pediaris: Includes DTaP-HepB-IPV
Pentacel: Includes DTaP-IPV-Hib
ProQuad MMRV: Includes Measles-Mumps-Rubella-Varicella
Quadracel/Kinrix: Includes DTaP-IPV

***RSV antibody (Nirsevimab)** to prevent respiratory syncytial virus:
 1 dose for infants younger than 8 months during the RSV season, depending on mother's RSV vaccine status.
 1 dose for some children 8-19 months depending on health status.

Posters for exam rooms & lobby

- HPV Poster
- Immunization Schedule

By the Numbers

- 150 healthcare professionals trained
 - 48 providers (doctors, nurse practitioners, physician assistants)
 - 102 staff (nurses, medical assistants, front staff, office managers)
- 448 eLearning modules completed
- 31 of 34 participating doctors earned MOC credit
- Optional strategies:
 - 0 clinics: EHR Prompt to age 9
 - 8 clinics: Standing Orders for HPV at 9
 - Several clinics: Outreach via portal message or phone

Results



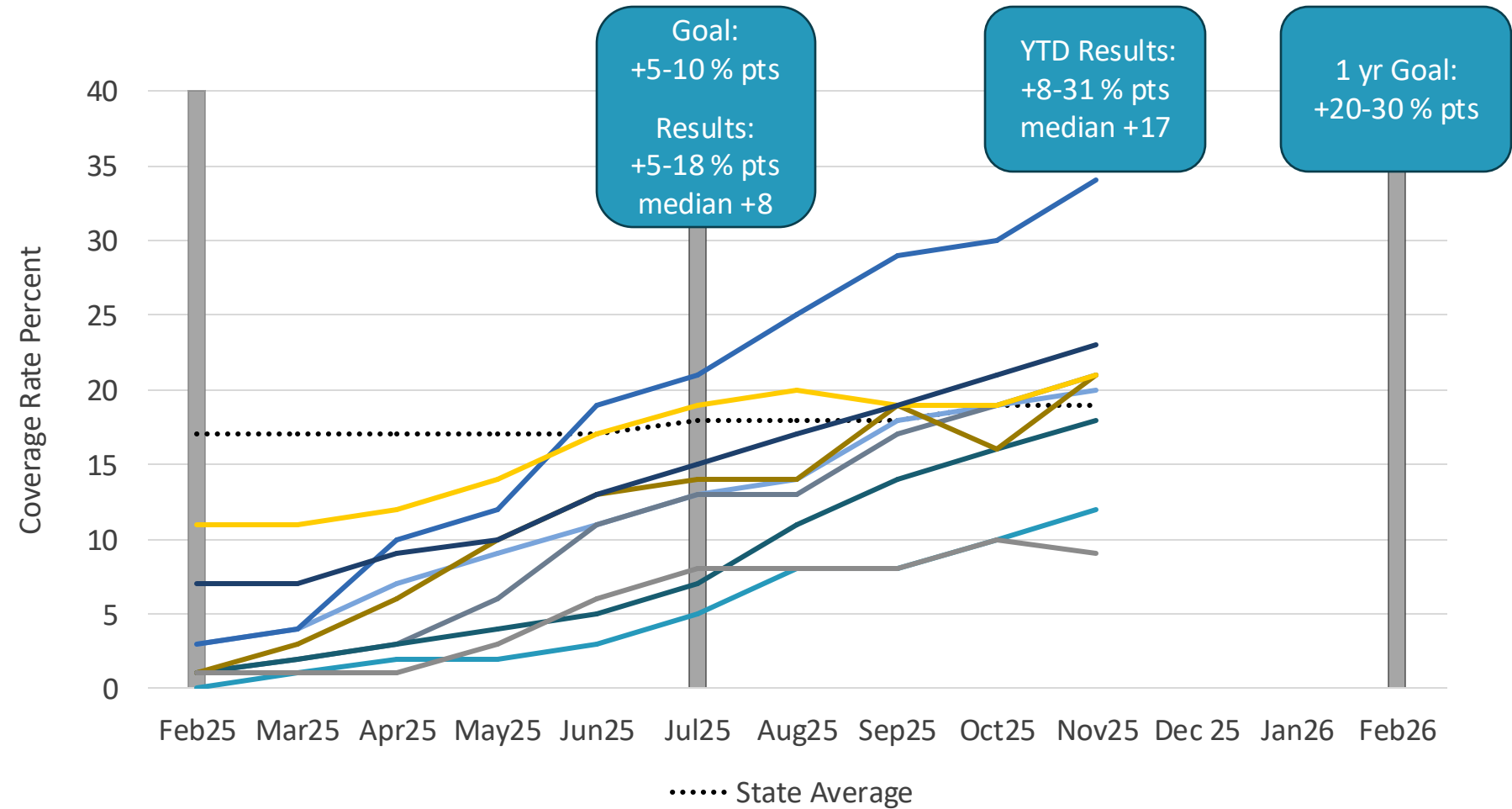
Total HPV doses administered to 9-10-year-olds:

- During Cohort: 715 doses (Feb 1-June 30)
- YTD: 1,387 doses (Feb 1-Oct 31)

Cohort 4	Feb 2025	July 2025	Nov 2025
Coverage Rate, Age 9-10	4%	14%	21%
Total HPV (≥ 1)/ Total patients	n=205/5,283	n=716/5,221	n=1,157/5,428

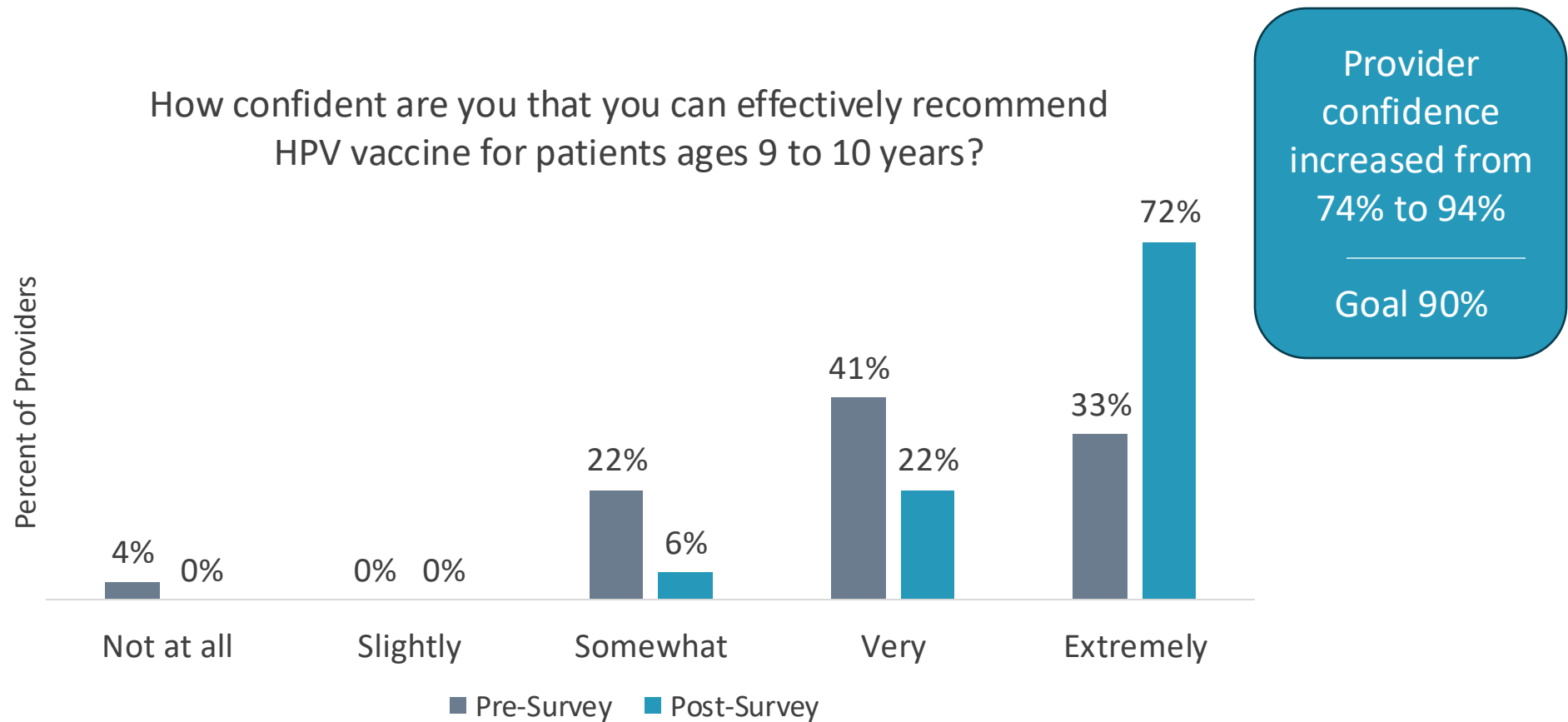
Source: WAIS

Results: HPV Coverage Rates (≥ 1 dose), Age 9-10



Source: WAHIS

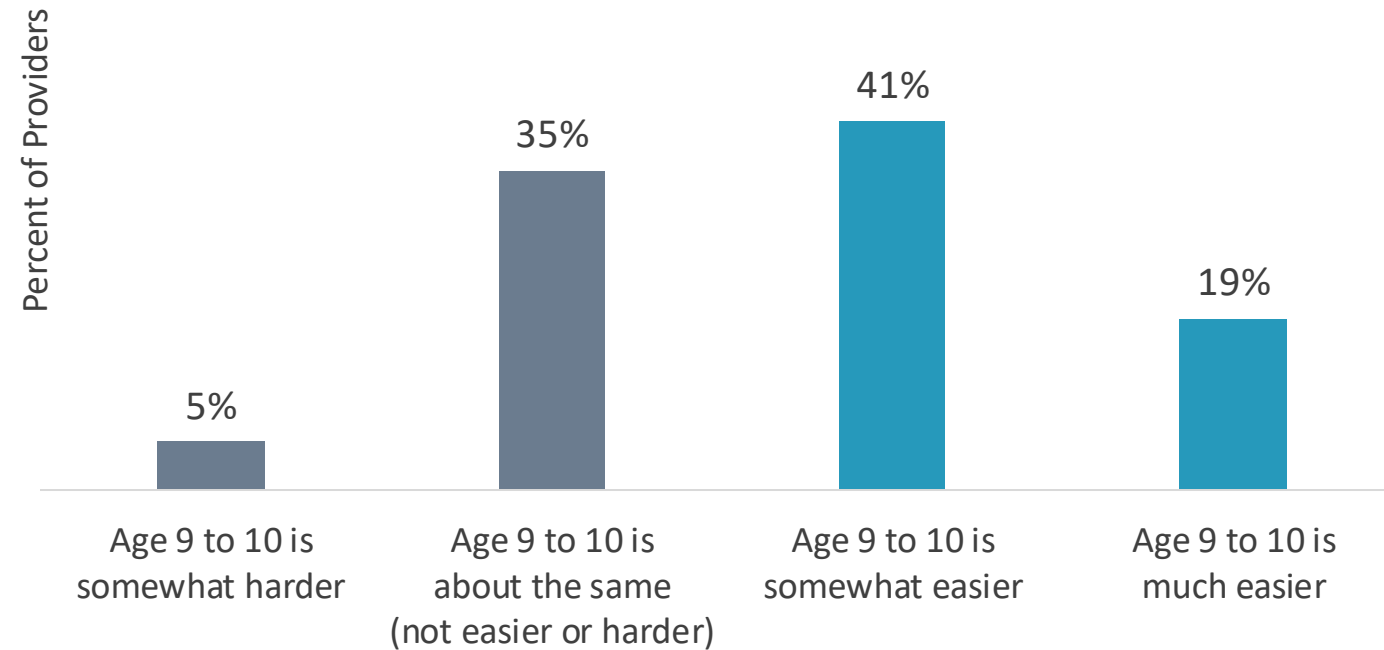
Results: Increased Provider Confidence



Source: QI Project Post-Survey, Cohort 4

Results: Ease of Recommendation

How does recommending HPV vaccine at ages 9 or 10 compare to recommending HPV vaccine at ages 11 or 12?
(n=37 providers)



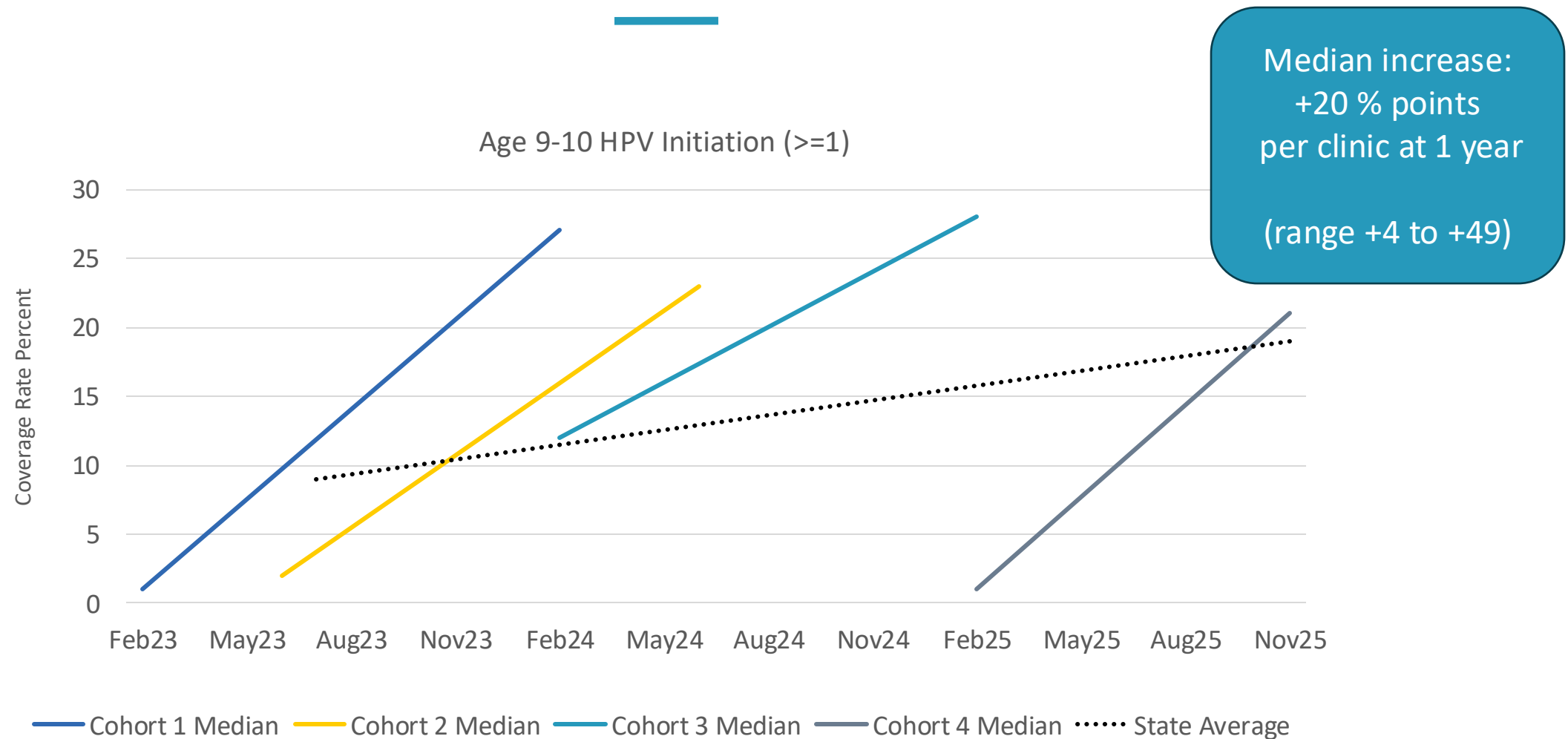
60% of providers said that recommending at age 9-10 was easier

Source: QI Project Post-Survey, Cohort 4

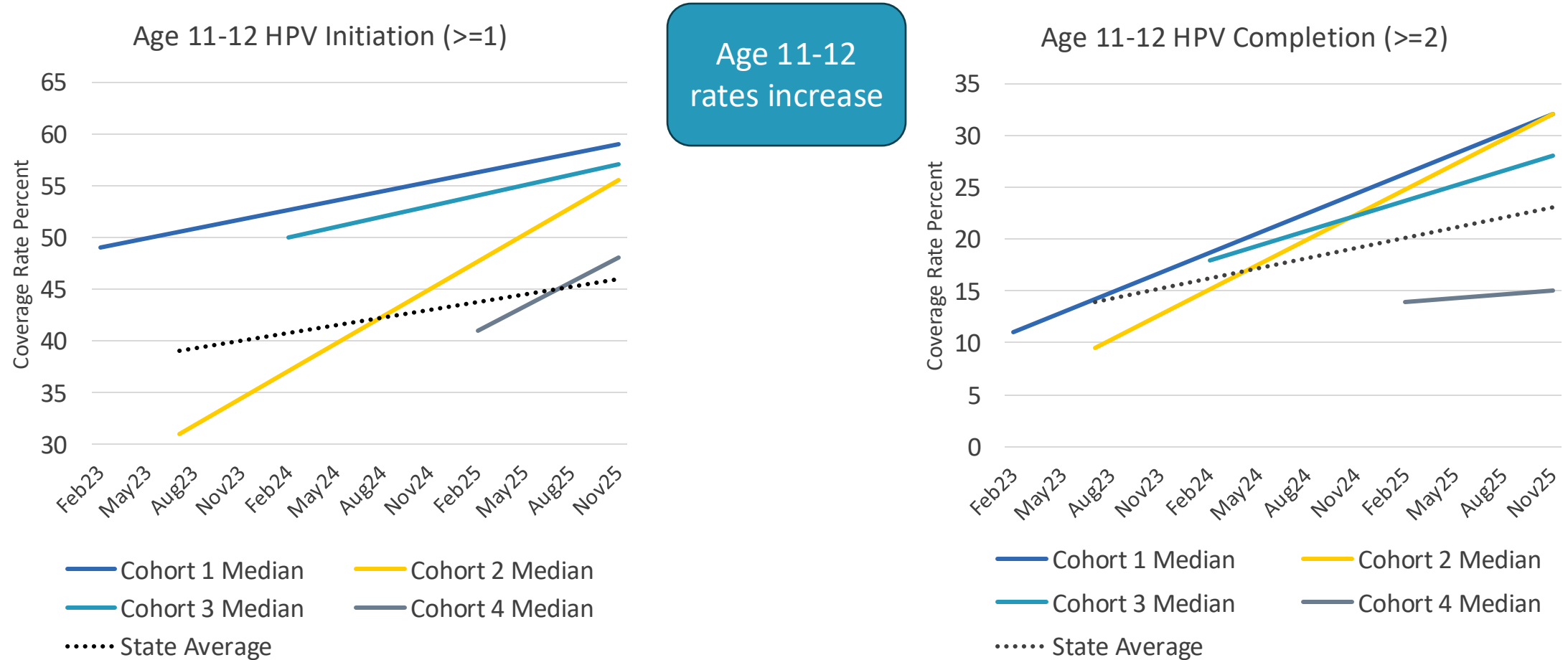
Feedback

- Rating
 - 4.7/5 stars for 'time well spent'
 - 4.7/5 stars for 'ease of implementation'
- Challenges
 - Inability to update EHR prompts due to system-level constraints
 - Mixed feedback on module length & content repetition
- Learnings
 - e-learning modules simplified asynchronous training & tracking of continuing education credits
 - HPV cancer 'Cervivor' story was impactful at final cohort meeting

Results: HPV Coverage Rates by Cohort, Age 9-10

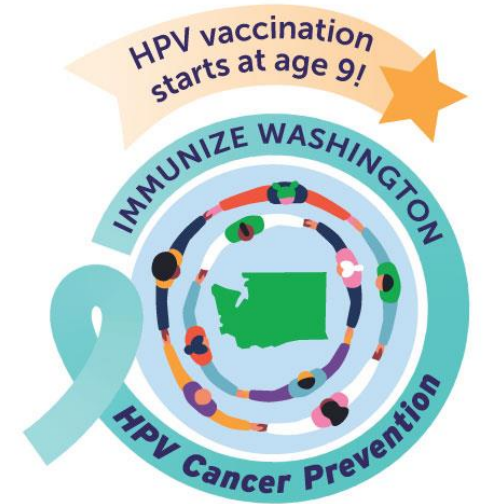


Results: HPV Coverage Rates by Cohort, Age 11-12



Conclusion: HPV@9 QI

- Starting HPV at age 9 is both feasible and impactful.
- Measurable improvements in HPV vaccination rates and provider confidence.
- Structured QI initiatives are valuable in advancing public health goals.



References

1. www.doh.wa.gov/hpv-at-nine
2. Zorn, S., Darville - Sanders, G., Vu, T., Carter, A., Treend, K., Raunio, C., & Vasavada, A. (2023). Multi-level quality improvement strategies to optimize HPV vaccination starting at the 9-year well child visit: Success stories from two private pediatric clinics. *Human Vaccines & Immunotherapeutics*, 19(1). <https://doi.org/10.1080/21645515.2022.2163807>
3. HPV at 9 report: <https://doh.wa.gov/sites/default/files/2024-04/3481032-HPVVaccinationAt9WASate.pdf>
4. Christensen, T., Zorn, S., Bay, K., Treend, K., Averette, C., & Rhodes, N. (2023). Effect of immunization registry-based provider reminder to initiate HPV vaccination at age 9, Washington state. *Human Vaccines & Immunotherapeutics*, 19(3). <https://doi.org/10.1080/21645515.2023.2274723>



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