

Choosing what to measure and what to improve

Quality Improvement in HPV

William E. Cosgrove, MD

- November 19, 2016

Disclaimer

- No conflicted interests.

Quality Improvement: incremental changes to a process

The list of processes involved in immunizing a child includes:

- Scheduling
- Reception
- Intake by Medical assistant
- Checking eligibility (due for shot, insurance coverage, parent permission, etc.)
- Physician conversation
- Immunizing
- Scheduling return visit

Opportunities to improve at each step

- Where do you start?
- First outline the steps that actually occur in your office.
- Ask why do you do it this particular way.
- Brainstorm with your team about what are the awkward steps, or the time-wasting steps.
- Set up a simple PDSA cycle. Run it on a few patients, then huddle with your team. Tweak the plan, and run it again. And again. Make notes.
- When you can't think of another change to try, move to the next process, and tweak that with PDSA.

For HPV the breakdown seems to be communication

- We all do much better at getting our adolescents immunized for meningococcal disease and Tdap.
- Why don't we do as well with HPV?
- Where does it go wrong?

HPV Communication

- Over the last 10 years a lot of research has shown what works is:
- **Consistent and Forceful Messaging**

Consistent messaging

- Do your receptionist and your assistant support HPV?
 - Zealots? Ambivalent? Not their job?
 - Is the message about HPV consistent through the team?
-
- Idea for a simple PDSA cycle is to script messages for each member of your team, and measure compliance to the scripts. Change the scripts. Measure again.

Consistent messaging

- You are trying to **build an expectation** that the adolescent will be getting the HPV vaccine, today.
- PDSA idea: try out scripts for your team that suggest that
 - “Yes, of course”
 - “our usual/standard procedure” ...
 - ”for all of our patients”
- We are trying to **normalize** getting the vaccine

You are a “Salesman”

- We have to convince a family to get their child immunized.

“convince” translates to “with force”???

Sales? Educate? Communicate?

- the first objective is to fully understand your audience.
- You know that drug rep that lurks in your hallway, ready to pounce
- Gives you a rapid-fire stream of high-pressure words.
- Do you get the sense that he is aware of your needs (as a person)?

- Does that lead you to change your decision, alter your beliefs, or buy?

No.

Who is our audience?

- Oversimplification:
 - 3 types of vaccine resistant parents:
 - 1. Lack information.
 - 2. Distracted by FEAR.
 - 3. Conspiracy theorists.

Lack information:

- These parents are neither stupid nor uncaring.
- Just have no experience with these diseases.
- They need respect, simple information, and a way of thinking about this protection as **a gift that they get to give their child**.
- **PDSA idea**: try scripts that include the words “gift”, “protect”, “guard”

Information about vaccines.

- The parent does not understand vaccines.
- They may think that a vaccine is some magic chemical or vitamin;
- or some medicine like an antibiotic that stays in their child to kill germs.
- They may worry that the vaccine will stay in their child, and cause some persisting change in their child.

A vaccine is education:

- In the **natural** course of an infection, the child's immune system learns what the germ's outer coat (the enemy soldier's uniform coat) looks like. If that enemy shows up again in the future, the child's **natural** immune system "remembers" and recognizes that coat and immediately counterattacks.
- The vaccine just shows the immune system what the enemy's uniform coat looks like, and the child **naturally** remembers. And again if that enemy shows up again, the immune system counterattacks quickly.

A vaccine is education:

- Just like the FBI showing wanted posters, so that the defense forces can recognize the villains, if they show up.
- Vaccines are simply “wanted posters” of the microbial villains.
- So, immunizations are simply an educational tool. The vaccine only stays in your child’s body a few days. It is a very **natural** process. More **natural** than medicines or vitamins.

Vaccine as education

- **PDSA idea**: try out some scripts within your team, that quickly deliver simple messages about what vaccines are, how they work, how safe they are.
- Try these messages on a few families, take some data. Tweak the message and try again.
- Try having the medical assistant deliver part of the message.

Distracted by fear:

- Walk in the woods: Feel the heat of the sun on your back. See the colors. Smell the flowers. Hear the birds chirping.
- Thencurved thing on the path.....is it a stick? snake?
- Amygdala hijack. Fight. Flight. Freeze.
- You can no longer see the colors, nor smell the flowers, nor hear anything. Your gaze is locked. No other stimuli can get to your consciousness, until you have resolved the fear response.
- Fear essentially makes us stupid.

Fear.

- Every parent comes to us at least a little afraid.
- They fear that we will find something wrong with their child, or wrong with their parenting.
- They fear the unknown, the pain for their child, the “dangers” of shots, side effects. They also fear that they will embarrass themselves by showing their own fear, or that they won’t be competent enough to comfort and reassure their child.
- **Lost in all those fears, they cannot hear anything you say.**

Fear.

- Ok. Fear is the elephant in the room. Can't ignore it. You have to address it **first**, or the parent cannot hear anything you say, nor will they be able to bring themselves to a decision.
- Recognize the fear. **Celebrate the fear.** "The depth of your fear tells me just how deeply you love your child."
- **Fear is the alarm bell that is attached to our priority list.** We never fear the small stuff, just the things that seem to threaten what we hold the dearest. So fear is a good thing, it reminds you what is important, but it does not make the decision for you. Just alarms to remind you to pay attention.

Fear.

- Just acknowledging their fear, accepting it as an appropriate response, lessens its intensity.
- Then gently slip in a few reassuring words: **natural, safe, usual.**
- Mention that once the child receives the vaccine that this parent will have **one less fear** to deal with.
- And the usual fear-controlling techniques, your body language, sitting, pretending you are not in a hurry, etc.

Fear

- PDSA ideas:
- Try calming yourself first, so your body language exudes confidence in the vaccines. Breathing exercise before entering room? Hesitate and take a breath before you answer?
- Try thanking the parent for being brave enough to share their fear with you.
- Try putting this in the future, beyond today's worries. "In 20 years, she will be healthy, not facing the fear of cancer, and you will look back at this decision proudly"

Conspiracists:

- These folks see everything through the filter of a threat to their beliefs.
- They assume you (and the government) are out to control them, to force decisions on them. Their main knee-jerk response is “you can’t be the boss of me”.
- Everything (including you) is viewed as a new threat to their control.
- They **need** to be in control.

Conspiracists:

- More data, more statistics, more arguments....are seen as just more assaults upon them as parents.
- So, stop talking. Just listen.
- Vincent Felitti (ACEs): “gradually I understood that **listening is doing.**”
- I simply ask “well, how do you want to protect your child?”then I shut up and wait. Silence is a powerful tool. I let the question hang in the air.
- Sure silence is uncomfortable, but we are saving lives here.

Conspiracists

- PDSA ideas:
- Try setting the stage to let the parent be in control.
- Sitting slightly below their eye level?
- Addressing them more formally?
- Words that defer to their being the boss? “As Mary’s protector..”
- You have always made good choices for Mary.....

Final thoughts:

- So much of communication, and building trust, depends on more than our words.
- Be calm. Sit down. Relax. Sit a bit lower than their eye level (power negotiation). Take a deep breath before you answer.
- If you list the Tdap and the Menactra as “of course” what we will do today, and the HPV slightly separated, or hesitant.....well they will follow your emotional message quicker than your words.

Final thoughts:

- You are the expert, but you are also the salesman.
- Your attitude, your belief in the immunizations, your body language shout louder than any of your words.
- What you are selling is life-saving protection.
- Win them over with your conviction, the strength of your belief in the rightness of vaccines. Not your arguments.

Final thoughts

- Motivating a parent, perhaps inspiring them to do what you know is best, is much more art than science.
- The skills you need (theatrics? salesmanship?) can be developed and improved with practice.
- So. Try some new way of delivery. Take data. Tweak it. Try again.
- Lather, Rinse, Repeat.
- It is how we improve.....quality improvement.

Final thoughts:

- If I walk into the exam room ready for a fight, I will get one.
- If I walk in ready to give this child a gift, I am much more likely to accomplish that.

Thanks.