FAMILY MEDICINE IN ACTION:
Wellness, Prevention & Population Health

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Senior Vice President for Health of the Public and Interprofessional Activities
Health of the Public and Science
Top Strategic Priorities

• Accelerate the generation and implementation of new knowledge and research to improve population and community health.

• Take a leadership role in addressing diversity and social determinants of health as they impact individuals, families, and communities across their lifespan and strive for health equity.
What highly successful fellowship has been in place at the AAFP since 2009?

A. Vaccine Science Fellowship
B. Clinical Guidelines Fellowship
C. Global Health Fellowship
What highly successful fellowship has been in place since 2009?

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<tr>
<th>Fellowship</th>
<th>Votes</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>A) Vaccine Science Fellowship</td>
<td>10</td>
<td>67%</td>
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<td>B) Clinical Guidelines Fellowship</td>
<td>4</td>
<td>27%</td>
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<tr>
<td>C) Global Health Fellowship</td>
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<td>7%</td>
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How many family physicians have served as AAFP Immunization Fellows since 2009?

A. 4  
B. 7  
C. 16
How many family physicians have served as AAFP Immunization Fellows since 2009?

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<td>A) 4</td>
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<td>B) 7</td>
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<td>C) 16</td>
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AAFP Vaccine Science Fellowship Program

AAFP Vaccine Science Fellowship

- Established 2009
- 16 family physicians have participated in the Fellowship program to date.
- Program is intended to develop a cadre of family physicians knowledgeable about vaccine issues.
- Program addresses the interface between the family physician and public health communities.
AAFP Vaccine Science Fellowship

• Fellows are selected based on immunization knowledge and experience.

• Selection Criteria: Selection Committee ranks the applications based on eligibility requirements:
  - Institution/employer agrees to 10-percent time commitment
  - Immunization experience outlined in CV and Letter of Interest
  - Prior policy making experience regarding vaccines, teaching about vaccines, research on vaccine or background in clinical policy/guideline development
  - Active AAFP Member
  - U.S. Citizen
  - No conflict of interest
  - Commit 10-percent FTE to the Fellowship
AAFP Vaccine Science Fellowship

• The selected Fellows participate in monthly conference calls with the five mentors and AAFP staff:
  
  • Vaccine topics or concerns presented by Fellows
  • Presentation by Fellow on their project
  • Discussion of the meetings attended by the fellows (ACIP, NVAC, etc.)
  • Expert presenters (Immunization Registries, philosophical and religious exemptions, FDA, etc.)

• The Fellows attend 10 or more meetings during this period (1 year).
AAFP Vaccine Science Fellowship

Fellowship graduates are involved in numerous activities:

– AAFP Liaisons to the ACIP & mentors to current fellows
– Served on national committees, the AAFP’s Commission on Health of the Public and Science, and other representatives to other immunization groups
– Served on working groups to ACIP
– Nominated to national committees
– Reviewed immunization guidelines, policies, and written articles
– Authored accepted manuscript, “Impacting Vaccine Preventable Diseases” in the Journal of Family Practice
– Produced YouTube video on Importance of Tdap – http://youtu.be/vWbXrHfBHIm
Vaccine Fellowship Presents Tremendous Opportunity

February 13, 2013 01:20 pm Jamie Loehr, M.D. – In 2009, I was one of the Academy's first vaccine science fellows. During that year, I spent 10 percent of my time learning about the entire vaccine pipeline – from the basic science to the manufacturing issues to the policy decision-making processes at the state and national level.

That year of experience increased my awareness of immunization resources, enhanced my ability to talk to parents and patients about vaccines, and provided me with an opportunity to interact with vaccine decision makers on a national level. The vaccine science fellowship directly led to my nomination as the AAFP’s liaison to the CDC's Advisory Committee on Immunization Practices (ACIP) in 2011.

The fellowship, now in its fifth year, is designed to develop a cadre of family physician vaccine experts. After training, the fellows are capable of assisting the AAFP as the organization reviews vaccine recommendations from federal and state public health agencies. For example, I was a panelist Feb. 6 during a discussion about human papillomavirus vaccine at the National Vaccine Advisory Committee (NVAC) meeting in Washington.
What program was added to the AAFP’s tobacco-control efforts in 2009?
A. Office Champions
B. Tar Wars
C. Ask & Act
What program was added to the AAFP's tobacco-control efforts in 2009?

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<tr>
<td><strong>A) Office Champions</strong></td>
<td>3</td>
<td>15%</td>
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<td><strong>B) Tar Wars</strong></td>
<td>12</td>
<td>60%</td>
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<tr>
<td><strong>C) Ask &amp; Act</strong></td>
<td>5</td>
<td>25%</td>
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Poll is Locked
Tobacco-Free Champions in the Office and Community

In 2009, the AAFP introduced the Office Champions model.

Goal: Incorporate the tools and information necessary to improve patient engagement in the area of tobacco cessation.

- 350 “tobacco-free” champions in database, representing 47 states
AAFP Tobacco and Nicotine Prevention & Control Efforts

*Family physicians help patients quit tobacco*

**Office Champions Program Can Help Improve Smoking Cessation Interventions**

- Percent of patients that had tobacco use status documented: 86% Pre, 93% Post
- Percent of patients that had cessation assistance documented: 43% Pre, 76% Post

*Approximately 70% of people who use tobacco products see a physician each year.*

*(Photo: Lincoln Community Health Center in NC – the Office Champions team)*
AAFP Tobacco Control Resources

Free Tobacco and Nicotine Toolkit
to support a healthy tobacco-free community

Treating TOBACCO DEPENDENCE PRACTICE MANUAL
a systems-change approach

QUIT NOW
Ask us how
Be tobacco-free

1-800 QUIT-NOW
(1-800-744-6669)
www.smokefree.gov

• True or False:
• Engaging the clinical practice team helps family physicians increase HPV immunization rates in the office setting?
Engaging the clinical practice team helps family physicians increase HPV immunization rates in the office setting?

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<tr>
<td>A) True</td>
<td>18</td>
<td>95%</td>
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<tr>
<td>B) False</td>
<td>1</td>
<td>5%</td>
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AAFP HPV Immunization Project

Geographic Distribution of the Office Champion Practices
The 20 practices were located in 17 different states as indicated by the map below:
AAFP HPV Immunization Project

Multi-Faceted Quality Performance Improvement Activity:


- Project focused on educating family physicians and their practice staff about effective strategies to increase HPV immunization rates.

- Project involved a comprehensive educational approach consisting of five objectives:
  - Recruit 20 family medicine practices and identify a physician and office champion.
  - An educational program used to integrate HPV vaccinates into the office routine and promote the importance of the HPV vaccines.
  - Develop and implement a program evaluation methodology.
  - Dissemination of results at national meetings to facilitate the sharing of best practices.
The comprehensive educational program included the following steps:

- Chart reviews analysis conducted during pre-intervention (Stage A), post-intervention (Stage C) and Sustainability (Stage D).

- Implementation of project plans included the following interventions:
  - Recordkeeping and immunization information
  - Recommendations and reinforcement (strong physician recommendations)
  - Reminder and recall (patient and providers)
  - Reduction of missed opportunities and reduction of barriers to implementation

- Sustainability plan implemented to ensure continued improvement within the practices.
AAFP HPV Immunization Project

RESULTS: The vaccination results for HPV for females and males were of main concern because of myths, concerns, questions, and misconceptions, and physicians not strongly recommending the vaccines. Figures 1 and 2 show the vaccination results for HPV among females and males for adolescents 11-to-12 years of age.

2012-2015 Immunization Results

Figure 1: HPV Vaccinations-Females

- Pre-Intervention (Stage A): 40%
- Post-Intervention (Stage C): 54%
- Sustainability (Stage D): 67%

- HPV ≥ 1 Dose Females: 27%
- HPV ≥ 3 Dose Females: 47%

Figure 2: HPV Vaccinations-Males

- Pre-Intervention (Stage A): 16%
- Post-Intervention (Stage C): 35%
- Sustainability (Stage D): 63%

- HPV ≥ 1 Dose Males: 7%
- HPV ≥ 3 Dose Males: 37%
AAFP HPV Immunization Project

Successes and Lessons Learned from the Project

1. Something the teams learned:
   - Action plan & strategies increase rates
   - Reminder & recall systems to reinforce
   - Talking points on HPV
   - Educating staff

2. Lessons learned by teams about their HPV immunization rates:
   - Surprised at the low HPV rates
   - Staff wanting to be more involved

3. “Best Practices” pearls that were implemented:
   - Talking about vaccines at every visit
   - Equalizing HPV vaccines
Questions?