

Indian Health Service
National Pharmacy and Therapeutics Committee

IHS E3 Vaccine Strategy



Operational Plan

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Chair, IHS National Pharmacy and Therapeutics Committee (NPTC)

Every patient. Every encounter. Every recommended vaccine.

Mission and Goals

- Mission

No unvaccinated AI/AN person will suffer a poor outcome or die from a vaccine preventable illness.

- Goals

1. Increase vaccine rates in Indian Country to the highest level
2. Reduce rates of vaccine-preventable illness in Indian Country
3. Save AI/AN lives in every community & every age group (infants to elders)



Objectives

- Describe the rationale for the IHS National E3 Vaccine Strategy
- Explain the elements of E3
- Detail the E3 Operational Plan





Rationale

What is the E3 Vaccine Strategy?

- Every Patient
- Every Encounter
- Every Recommended Vaccine Offered, when appropriate



Timeline

- Launch: November 17, 2022
- Operationalization: 2023



Target Population

- American Indian and Alaska Native Tribal Communities
- IHS CMO Directive to all IHS federal direct-care facilities
- Encouraged for tribal & Urban Indian Organization facilities



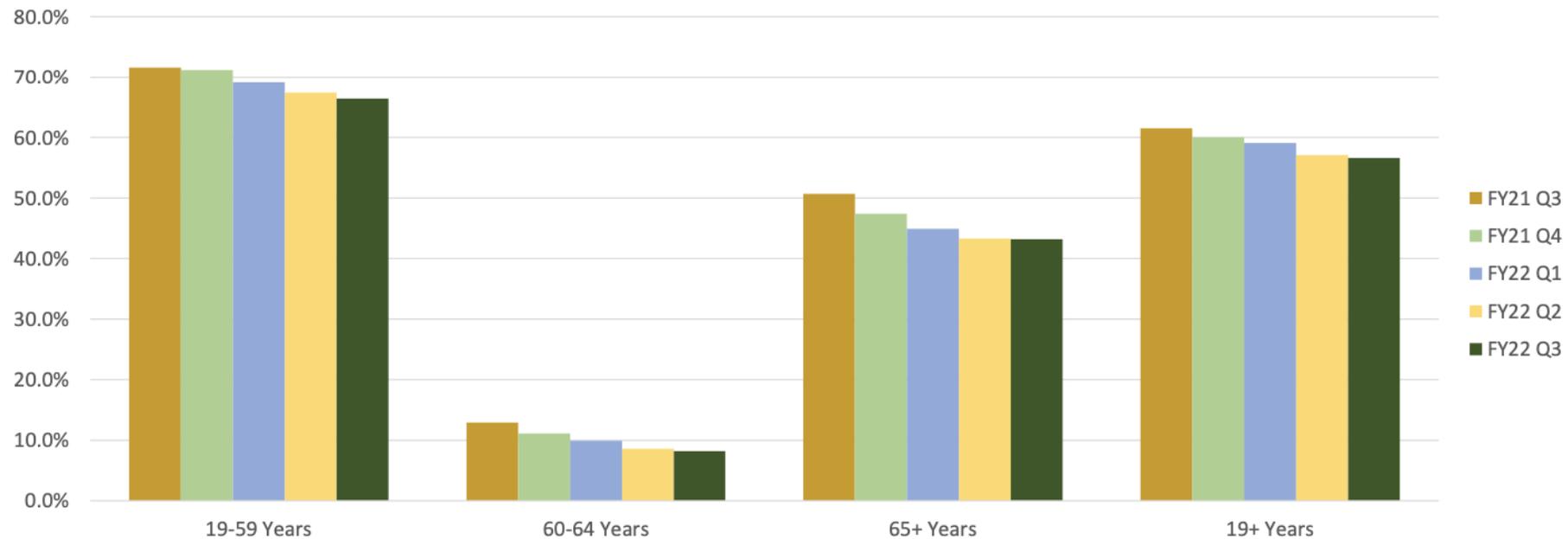
Background

- Impact of the COVID-19 pandemic
- Vaccine misinformation and “fatigue”
- Nationwide declines in vaccine coverage for all age racial, and ethnic groups
- Health disparities among AI/AN for vaccine preventable illness



Vaccine Trends- Adults

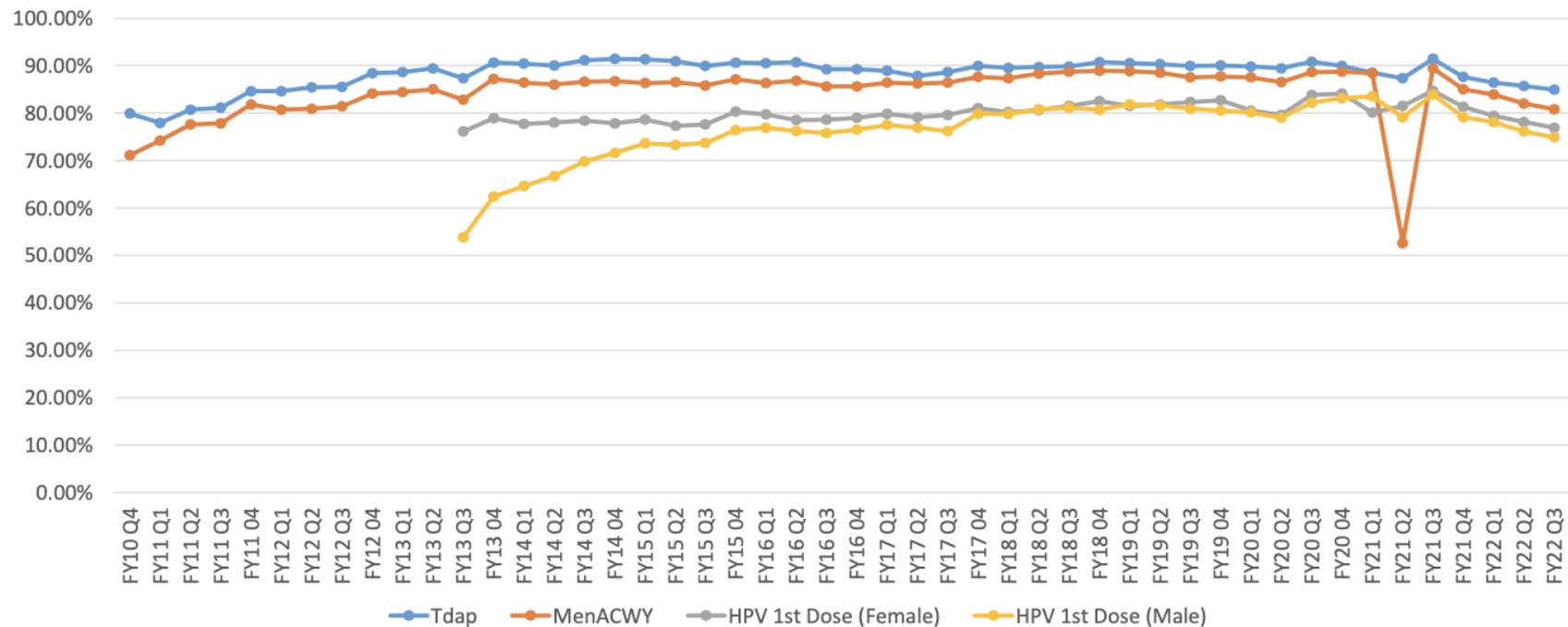
Adult Immunization Composite Measures * Appropriately Vaccinated Per Age Recommendations IHS National



* 19-59 years with Tdap ever and Tdap/Td <10 years; 60-64 years with Tdap ever and Tdap/Td <10 years and Zoster; 65+ years with Tdap ever and Tdap/Td <10 years and Zoster and Pneumo; and 19 years and older with appropriately vaccinated per age recommendation

Vaccine Trends- Adolescents

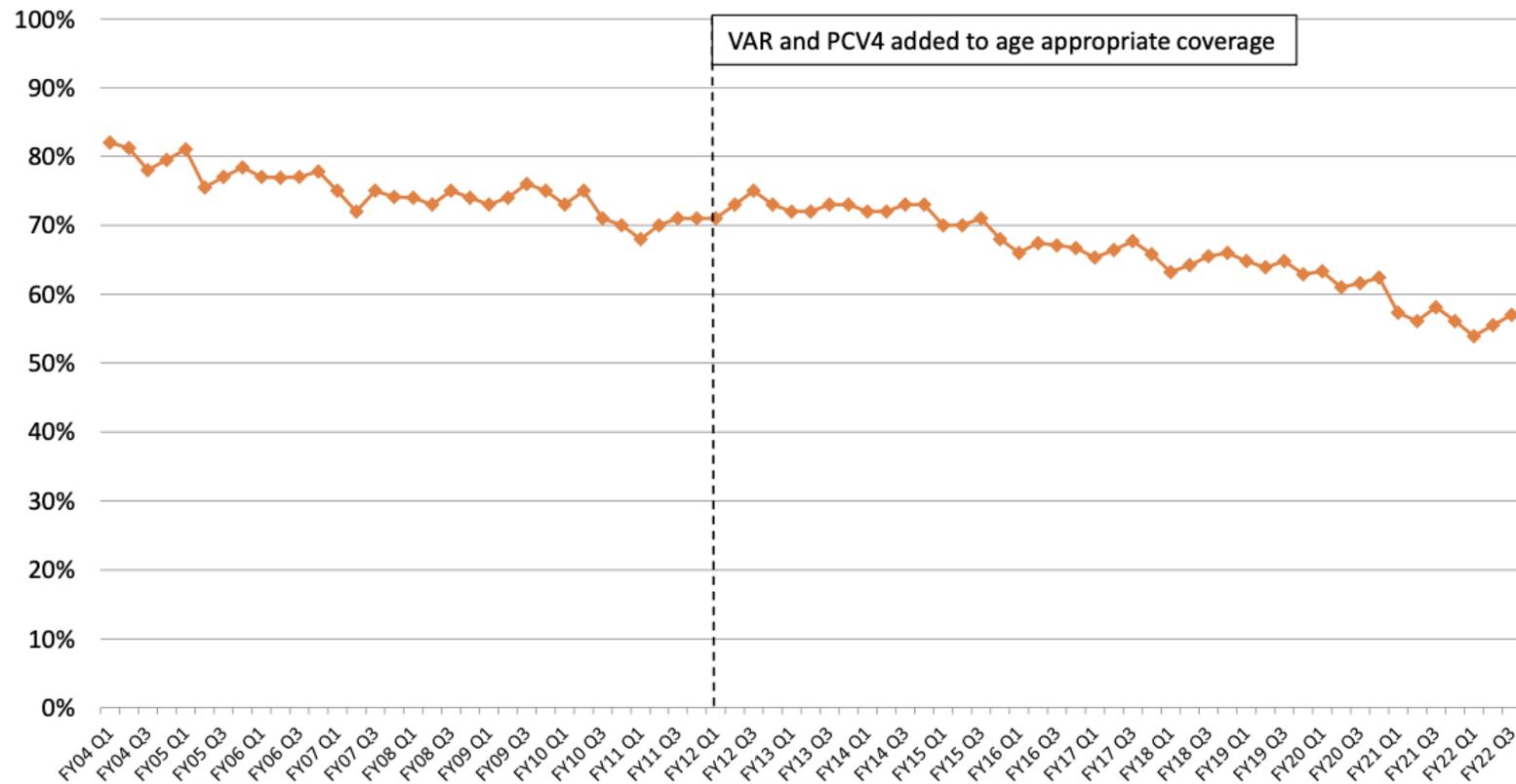
Adolescent Vaccine Coverage 13 Year Olds IHS National



Data source: National Immunization Reporting System (NIRS):
<https://www.ihs.gov/NonMedicalPrograms/ihpes/immunizations/index.cfm?module=immunizations&option=home>

Vaccine Trends- Infants/Children

Age Appropriate Immunization Coverage 3-27 month olds IHS National



Data source: National Immunization Reporting System (NIRS):
<https://www.ihs.gov/NonMedicalPrograms/ihpes/immunizations/index.cfm?module=immunizations&option=home>

A Call to Action

- Comprehensive/Adaptable System of Health Care
- Vaccination is a highly effective prevention effort
- Pro-active approach
- Prioritization of vaccination at every visit
- System-based strategies



E3: Every Patient, Every Encounter, Every Recommended Vaccine

Elements

Every Patient

- Every season
- All age groups
- Regular and transient patients
- Community members and non-community members



Every Encounter

- Preventive, Chronic, Acute
- Ambulatory, ER/Urgent Care, Inpatient
- Medical, Pharmacy, etc.
- Public Health
 - ❖ PHN/MCH Home Visits
 - ❖ Community Events
 - ❖ Head Start/School Events
 - ❖ Mass Vaccinations Events



Every Recommended Vaccine Offered

- All ACIP-recommended vaccines
- No distinction between “routine” vaccines and those recommended in response to public health emergencies
- Patient informed consent and autonomy



When Appropriate

- Clinical indications for the patient, encounter, and vaccine
- Subject to ACIP-recommended precautions and contraindications:
<https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html>
- Safely & Correctly, Every Time
 - Mitigating risk of vaccine administration errors



E3: Every Patient, Every Encounter, Every Recommended Vaccine

Operational Plan

Building on Success- Pandemic Response

- Leadership of Tribal Communities
- Collaboration across I/T/U System of Care
- Vaccine and Medication Campaigns
 - ❖ COVID-19 Vaccines
 - ❖ COVID-19 Medical Countermeasures
 - Antivirals- Remdesivir & IHS Test to Treat Initiative
 - Monoclonal Antibodies



NPTC & the IHS National Core Formulary

- IHS National Pharmacy & Therapeutics Committee
- IHS National Core Formulary (NCF)
- The Four Pillars of IHS Formulary Management
 - Access, Quality, Value, and Equity
- All ACIP-recommended vaccines are on the IHS NCF



Operational Plan

- Bottom Up Approach
- Communications
- Stakeholder Engagement & Collaboration
- Resource Bank
- Cross Pollination
- E3 Champions Challenge
- Data Trends



Bottom Up Approach

Vision

- Grass-roots strategy
- “Reverse” hierarchy (Local -> Regional -> National)
- “Shots in arms”
- No Effort Too Small

Local Team

- Facility
- Unit
- Tribal Community



Communications

- Communication “Saturation”- System-Wide (I/T/U)
- IHS Blog, Week-in-Review
- Tribal and Urban Leaders
- NPTC Website (E3 Vaccine Strategy Tab)
- ICT and IHS All-Call
- NCCMO (January 2023) & Area Directors
- National Combined Councils (Mar 28-30, 2023)
 - Theme: Strengthening Collaboration for Safe, Quality, Healthcare Outcomes
- NPTC Summer 2023 Meeting (August 2023)
- Listservs



Stakeholder Engagement & Collaboration

- Leadership at Every Level (HQ, Area/Region, Facility, Unit)
- Clinical and Public Health Disciplines
 - NIP/AVPOCs, Nursing, Public Health Nursing, Pharmacists, Providers et al.
- Tribal and Urban Indian Organization Partners
- Tribal Communities



Resource Bank

- One-Touch Access
 - ❖ Tools and hyperlinks
 - ❖ IHS NPTC website
 - E3 Vaccine Strategy Tab (<https://www.ihs.gov/nptc/e3-vaccine-strategy/>)
- Clinician and patient/community oriented materials
- Utilize existing expertise (e.g. CDC, ACIP, ACP/AAP, WHO)
- AI/AN-specific resources



Quality Improvement Through Cross Pollination

- Steal shamelessly, share seamlessly
- For the good of the whole
- Integrate I/T/U efforts
- Best practices & lessons learned
 - ❖ Learning from success AND failure
 - ❖ Pro-active outreach
 - Potential I/T/U Pilot Sites
 - NETS Network

NETS Network = NPTC Emerging Treatments Survey Network



E3 Champions Challenge

- A Friendly Competition
- Three Components
 1. Encouraging Innovation
 2. Incentivizing Effort
 3. Recognizing Success
- Federal, Tribal, Urban Programs
- Community, Facility, Unit Level



E3 Champions Challenge- Criteria & Recognition

- **Criteria**

1. 2022 baseline
2. Any Calendar Year Improvement (ACIP-recommended vaccines): 2023-2025
 - 5% in three or more individual and/or combination vaccine measures -OR-;
 - 20% in any one individual or combination vaccine measure

- **Vetted at local level**

- Attestation letter from organization, facility, or unit leader

- **Sharing of best practices and lessons learned**

- **Submission to ihsmedsafety@ihs.gov**

- **Written recognition at national level**

- Signed Certificate of Recognition as “IHS E3 Vaccine Champion”
- Virtual “Wall of Champions”

Data Trends- Embedded Metrics

- Process and Outcome Measures
- Utilize/Maximize Existing Metrics
- National Immunization Reporting System
- All Federal Programs (Areas and Direct-Care Sites)
 - GPRA Immunization Panel
 - I-Care
- Participating Tribal and Urban Indian Organizations
 - Tribal/THO Regional/Local Systems- Vaccination rates



E3: Every Patient, Every Encounter, Every Recommended Vaccine

Conclusions

Agency-Wide Effort

- HQ Senior Leadership & Staff
- IHS National Pharmacy and Therapeutics Committee
- IHS National Immunization Program
- Area Leadership & Staff
- Tribal, Urban Indian Organization, and Federal Partners
- Local Facilities
- Multidisciplinary (Clinical, Public Health)
...most importantly, Tribal Communities!



The Measure of Success

- A marathon, not a sprint
- “Bending the arc” (of vaccine coverage) toward increased rates
- Sustainability requires commitment and a system-based approach
- Making Vaccination Our Preventive Clinical and Public Health Priority
- Staff Engagement
 - Encourage Innovation and Effort
 - Recognize and Share Successes and Lessons Learned



IHS National-Level Leadership

- IHS CMO Blog (November 2022)
- Associated Press (November 2022)
- CDC/ACIP Presentation (November 2022 and February 2023)
- HHS National Vaccine Advisory Committee (February 2023)



Messaging- Internal & External



Indian Health Service
The Federal Health Program for American Indians and Alaska Natives

Search IHS

A to Z Index Emp

The Indian Health Service is working closely with our tribal partners to coordinate a comprehensive public health response to both COVID-19

About IHS Locations for Patients for Providers Community Health Careers@IHS Newsroom

Newsroom / IHS Blog / November 2022 Blogs / IHS Announces Vaccine Strategy: Every Patient Will Be Offered a Vaccine When Appropriate

IHS Blog

- Announcements
- Congressional Testimony
- Fact Sheets
- Director's Speeches
- IHS Blog**
- Press Releases
- Reports to Congress
- Tribal Leader Letters
- Urban Leader Letters

IHS Announces Vaccine Strategy: Every Patient Will Be Offered a Vaccine When Appropriate

by Dr. Loretta Christensen, MBA, MSJ, FACS, IHS Chief Medical Officer November 17, 2022

As a critical public health prevention priority in our vulnerable service population, IHS advocates recommending vaccines to our patients. E3 focuses on 1) Every patient at 2) Every encounter should be offered 3) Every recommended vaccine [when appropriate](#).

In the wake of the COVID-19 pandemic, we continue to see disturbing trends reflecting decreased vaccine coverage for many vaccine-preventable illnesses. Even as we continue to deal with the dual public health emergencies of COVID-19 and monkeypox, it is essential that we amplify our efforts to ensure comprehensive vaccine access and coverage for all age groups both for emerging infectious diseases and routine vaccine preventable diseases.

I have directed all federal direct care sites to respond to this important call to action to increase vaccine coverage and protect against vaccine preventable illnesses in tribal communities. Every patient at every encounter will be offered every recommended vaccine [when appropriate](#).

IHS will exempt encounters in which a vaccine would not be appropriate such as when someone has a moderate or severe acute illness.

Historically, vaccine-preventable illness has taken a disproportionate toll in American Indian and Alaska Native communities. One of the indirect effects of the pandemic has been a decline in routine vaccine coverage rates for children, adolescents, and adults. While we continue to promote broad vaccine access for COVID-19 and American Indian and Alaska Native persons at risk for monkeypox, we must also ensure that we take every opportunity to offer routine vaccination, including seasonal influenza, polio, measles, mumps, rubella, varicella and the full range of bacterial illnesses for which vaccines have been



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Indian Health Service steps up COVID, other vaccine push

November 17, 2022



Awareness- Spread the Word

IHS Signature Block

PROTECTING TRIBAL COMMUNITIES

EVERY PATIENT. EVERY ENCOUNTER. EVERY RECOMMENDED VACCINE.



Mission and Goals

- **Mission**

No unvaccinated AI/AN person will suffer a poor outcome or die from a vaccine preventable illness.

- **Goals**

1. Increase vaccine rates in Indian Country to the highest level
2. Reduce rates of vaccine-preventable illness in Indian Country
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Questions?



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