

Updated 2/6/2011

Extramural School-Located HPV Vaccination Program Interviews

Staff at Cervical Cancer-Free North Carolina (www.ccfnc.org), under the supervision of Noel Brewer, developed these guides for interview with staff from extramural school-located vaccination programs that offer HPV vaccine. Interviews occurred July-August 2010 (n=5). Two surveys appear below that participants completed online followed several days later by a qualitative phone interview.

Pre-Interview Online Survey

Appears at end of document.

Qualitative Telephone Interview

Appears immediately below

Preferred citation:

Hayes, K. A., Entzel, P., Berger, W., Caskey, R. L., Shlay, J. A., Stubbs, B., Smith, J. S. & Brewer, N. T., (2011). early lessons learned from extramural vaccination programs that offer HPV vaccine in US schools.

[...] Brackets indicate unread text including instructions to the programmer, interviewer or respondent

Item Number	Construct	Item
		<p>[Once have correct person on the phone]</p> <p>Thank you for talking with us today. We really appreciate your time and interest. As we mentioned before we're interested in better understanding the program <u>that provides the HPV vaccine to adolescents in schools</u>. On this call, I'll be referring to the voluntary, school-based vaccination program that includes HPV vaccination as 'the program'.</p> <p>How did you come to work on school-based vaccination? <i>What we know about the program so far is that you [KH to have a few bullet points prepped from qualtrics/summary doc].</i></p>
	Planning	
1	Program Initiation	<p><i>I'm going to first ask about how you planned the program.</i></p> <p>Can you tell me a little about how the program got started? Probes:</p> <ul style="list-style-type: none"> ○ Who initiated the effort? ○ Who provided initial funding? ○ What partners were involved in the early stages? How were they engaged? ○ What are the stated goals of the program?

2	Support for HPV vaccine	<p>Let's talk about the time before the program started. How much support or resistance was there for giving the HPV vaccine to adolescent girls in your community?</p> <p>Probe:</p> <ul style="list-style-type: none"> ○ This could be among parents, adolescents, school administration or teachers. ○ This includes providing HPV vaccine in schools or in other settings.
3	Other education	<p>Back then, were any HPV vaccine promotion activities yet taking place in the program schools or in their communities?</p> <p>Probe:</p> <ul style="list-style-type: none"> ○ Can you tell me about them? ○ Was the program involved in these?
4	Building support for program	<p>How did you build support for the program?</p> <p>Probe:</p> <ul style="list-style-type: none"> ○ How did you gain parental support? Provider? Community member? School support?
5	Partnering with schools	<p>How did your program partner with schools to plan the program?</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ What levels of school leadership did you engage? This might include school boards, local administrators, PTA, state-level education leadership, or other groups. ○ How did you select these schools as partners? ○ Did your program approach schools directly, did a partner agency (such as a local health department) approach schools, or did you use a different approach? ○ Were school health centers involved?
6	Planning Successes and Challenges	<p>What were some successes and challenges when planning the program?</p> <p>Probe:</p> <ul style="list-style-type: none"> ○ Are there any other successes and challenges specific to HPV vaccine?
	Implementation	
7	Clinic Configuration	<p><i>Let's change gears and talk about how you implemented the program.</i></p> <p>I have a few specific questions about the HPV vaccination clinic overall.</p> <p>7a. Who is the lead agency on-site?</p> <p>7b. How many school sites are there?</p> <p>7c. Do you roll out the vaccination activities one school at a time or all at once?</p> <p>7d. How many days is the program on-site for giving vaccinations at each school?</p> <ul style="list-style-type: none"> • [Probe to understand context (i.e. for which doses, make-up days, etc.)] <p>7e. What reminder or recall systems does the program use?</p> <p>7f. What do you do if a student misses a dose?</p> <ul style="list-style-type: none"> • [Probe if they're able to do make-up days, what if they miss make-up day, etc.]
8	Clinic Configuration	<p>We're also interested in learning more about the configuration and staffing of the HPV vaccination clinic. Can you walk me through the</p>

		<p>process step by step?</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ Which staff is utilized at each step from greeting the student to delivering the dose? ○ Who administers the vaccines (school nurses, health department staff, etc.)? ○ How and when do you confirm parent consent? ○ About how long does it take for each student to go through the entire process? ○ Is there anything else about how you run the clinic that you'd like to mention?
9	Purchasing & Billing – VFC-eligible students	<p>Does the program provide HPV vaccine through a state-funded program, such as the Vaccines for Children program?</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ Describe how the program pays for HPV vaccine that's obtained through the Vaccine for Children's Program. ○ How does the program verify VFC eligibility? ○ What costs, if any, do VFC eligible students pay to receive each dose of HPV vaccine? ○ Does the program cover administration fees for students? ○ What happens if a VFC-eligible student is unable to pay the necessary fees to get HPV vaccine?
10	Purchasing & Billing – Insured students	<p>Describe how the program pays for HPV vaccine for <u>privately insured</u> students.</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ Do you bill private insurance companies? Can the program bill all private insurances? ○ What costs, if any, do privately insured students pay to receive the HPV vaccine? ○ Does the program help cover co-pays, deductibles, or administration fees for students? How? About how much does this cost a year? ○ What happens if a privately insured student is unable to pay the necessary fees to get HPV vaccine?
11	Purchasing & Billing – Underinsured students	<p>Describe how the program pays for HPV vaccine for underinsured students?</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ What costs, if any, do underinsured students pay to receive the HPV vaccine? ○ Does the program help cover the cost of getting HPV vaccine for these students? How? ○ What happens if a student is unable to pay the necessary fees to get HPV vaccine? ○ Does the program offer sliding scale fees for students?
12	Program publicity	<p>How did the program publicize the availability of HPV vaccine in the clinic?</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ Who did you target? ○ How did you publicize to parents? ○ What messages did you use to promote the HPV vaccination clinic?

13	Implementation Successes and Challenges	<p>What were some successes and challenges when <u>implementing</u> the program?</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ Are there any other successes and challenges specific to HPV vaccine?
	<i>Current Status</i>	
14	Current status of program	<p><i>We're getting close to the end of the interview. Now let's talk about the program as it is now.</i></p> <p>What is the status of the program?</p>
15	Other HPV vaccine promotion	<p>Other than your program, are additional HPV vaccine promotion activities now taking place in the program schools or communities?</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ Was your team involved in planning/implementing these activities?
	<i>Lessons Learned</i>	
16	Advice for others	<p><i>Here's my last question.</i></p> <p>What other advice do you have for people who want to do school-based HPV vaccination programs?</p> <p>Probes:</p> <ul style="list-style-type: none"> ○ What was especially successful? ○ How would you have done things differently?
		<p><i>Thank you for talking with us today about your program. We appreciate your time. I'll be in touch soon about next steps based on how you indicated you'd like to be involved in our project. We may also contact you with brief follow-up questions. Thanks again and have a great day.</i></p>

Extramural School-Located HPV Vaccination Program Interviews

Pre-Interview Online Survey

This survey was available online for program respondents to complete before an in-depth qualitative telephone interview. Surveys were completed by respondents from July-August 2010 (n=5). The survey can be viewed in its original format here:

https://uncodum.qualtrics.com/SE/?SID=SV_3soQKeldBKDV988.

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Item Number	Construct	Item	Response Scale
		<p><i>Please answer the following questions about the program that provides HPV vaccination in schools.</i></p> <p><i>If you're not sure about how to answer a question, skip it and we can discuss it during our call. Skip any question that does not apply to the program.</i></p>	
	Respondent Contact Info	Enter your contact information so we can use your responses during our call.	[blank spaces for Name and Email]
1	Program Status	This survey refers to the voluntary, school-based vaccination program that includes HPV vaccination as 'the program'. Which of the following best describes the program?	[1 = Currently in the planning stage 2 = Was planned but not implemented 3 = Currently in the implementation stage 4 = Has been implemented]
		<i>Please answer the following questions based on the services most recently offered or that you plan to offer.</i>	
2		Please give the start and end dates of the PLANNING phase of your program. If there is no end date please type "ongoing".	[blank spaces for Start Date and End Date]

3		Please give the start and end dates of the IMPLEMENTATION phase of your program. If there is no end date please type “ongoing”.	[blank spaces for Start Date and End Date]
4	Respondent Role	What is your role in the program? Check all that apply.	[1 = Executive Director 2 = Program Coordinator/Manager 3 = Researcher 4 = Healthcare Provider 5 = Community Partner 6 = Other (specify)]
5	Vaccines Offered: Types	Which vaccines does the program offer to students? Check all that apply.	[1 = Human papillomavirus (HPV) 2 = Tetanus-diphtheria-acellular pertussis (Tdap) 3 = Tetanus and diphtheria toxoid (Td) booster 4 = Meningococcal vaccine (MCV4 or MPSV4) 5 = Seasonal influenza shot (TIV vaccine) or the nasal vaccine (LAIV) 6 = H1N1 influenza 7 = Other (specify)]
6	HPV Education Audience	To which of the following audiences does the program provide education about the HPV vaccine? Check all that apply	[1 = Parents 2 = Students 3 = Community members 4 = School administrators 5 = Teachers 6 = Other school staff 7 = Healthcare providers 8 = Other (please describe) 9 = Program does not provide education about HPV vaccine]
7	Vaccine Target Audience: Gender and School	Which groups does the program provide HPV vaccine for? Check all that apply.	[1 = Female students at participating school 2 = Male students at participating school 3 = Students from other schools who meet certain criteria 4 = Adult community members (teachers, parents, families, etc.) 5 = Other (please list)]
8	Vaccine Target Audience: Insurance Status	The program offers the HPV vaccine in schools to students who are... Check all that apply.	[1 = Uninsured 2 = Underinsured 3 = Medicaid-enrolled or eligible 4 = Privately insured 5 = Other (please describe)]
9	Vaccine Offered: Timing	The program administers HPV vaccine... Check all that apply.	[1 = Before school 2 = During school 3 = After school 4 = During academic school year while school is in session 5 = During break from school year while school is not in session (i.e. winter, summer break)]
10	Parental Presence	Are parents required to be present for their child’s vaccinations?	[1 = Always 2 = Sometimes 3 = Never]

			4 = Not sure]
11	Barriers	What barriers affected planning or implementing the program? Check all barriers that apply.	[1 = Low parent knowledge about HPV vaccine 2 = Parent concerns about HPV vaccine safety 3 = Cost to patients or families 4 = Difficulty obtaining consent from parents 5 = Low community support of program 6 = Low support from schools 7 = Billing and logistics for reimbursement from 3 rd party private insurers 8 = Cost of privately purchased HPV vaccines 9 = Difficulty in determining VFC eligibility 10 = Difficulty obtaining immunization records 11 = Other (please list)]
12	Evaluation	What kind of evaluation did your vaccination program conduct? Check all that apply.	[0 = None 1 = Process evaluation (any assessment of who received services, what services were delivered or what resources were used) 2 = Outcome evaluation (any assessment of use or increasing awareness of vaccine)]
13	Planning Documents	Do you have planning documents, evaluation reports or data on the number of HPV vaccine doses delivered that you would be willing to share to help understand the program?	[0 = No 1 = Yes – have them and will be happy to share 2 = Yes – have them but would prefer not to share 4 = Not sure]
14	Initiation	How many students received at least one dose of HPV vaccine during the last school year? If you have data for another time period please indicate it in your response.	[blank space]
15	Completed Series	How many of these students received all 3 doses of HPV vaccine?	[blank space]
16	Target Population	How many students does your program serve?	[blank space]
17	Other Programs	Do you know of any other <u>voluntary</u> school-based HPV vaccination programs that have been planned or implemented in the United States?	[0 = No 1 = Yes. (Please list the location and contact information, if available, for the program(s) you're aware of.)]
		<i>Thank you for completing this survey. Be sure to submit this questionnaire by pressing the arrow button below. We will contact you at the time you discussed with [INTERVIEWER NAME] for your interview. If you have any questions before then please contact</i>	

		<i>[INTERVIEWER FIRST NAME] at [INTERVIEWER EMAIL AND PHONE NUMBER].</i>	
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