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Abstract

Background and Purpose: The human papillomavirus (HPV) is the most common sexually transmitted disease in the United States, and causes thousands of cancers annually. Although vaccination against HPV can prevent these cancers, vaccination rates remain low, particularly among young adults ages 18 to 26 years. The purposes of this project were to (1) increase the rate of HPV vaccination status assessment, and (2) improve HPV vaccine initiation and completion rates among average risk 18 to 26-year-old patients in the family practice setting.

Methods: A quality improvement project implementing the HIYA! (HPV Immunization in Young Adults) Intervention was conducted in a private sports and family practice in central New Jersey. HIYA! implemented ten pre-, during, and post-visit assessment of outcome measures during every family medicine visit with an 18 to 26-year-old patient of average risk for HPV. Data collection involved retrospective chart review of every eligible patient during the 12-week implementation period in 2020 and during the same 12-week control period in 2019.

Results: One hundred sixteen charts from 2019 and 129 charts from 2020 were reviewed for assessment of HPV vaccination status and HPV vaccine initiation and/or completion. Multivariable logistic regression analysis revealed statistically significant ($p<0.05$) increases in HPV vaccine series initiation ($p = 0.01$), completion ($p = 0.04$), and assessment ($p<0.01$) rates during the intervention period compared to the control period.

Conclusions: This QI project found HIYA! to be an effective and feasible strategy to improve HPV vaccination rates among 18 to 26-year-old patients in a family practice setting.

Implications: The positive impact of HIYA! was evident based on its success despite the unique challenges presented during the implementation period due to the COVID-19 pandemic.

Keywords: papillomavirus vaccines, family practice, adolescent, young adult, nursing