

Adult Vaccination Health Care Professional ECHO Program

Technical Report
2022



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Introduction

Populations around the world are rapidly ageing. Governments pledged in 2021 through the United Nations (UN) Decade of Healthy Ageing to leave no one behind and to ensure that every human being can fulfil their potential in dignity and equality and in a healthy environment. Immunization is a key action within this agenda to ensure health promotion and prevention.

Globally, the population aged 65 years and over is growing faster than all other age groups. The share of older persons in the global population is expected to increase from 9.4 percent in 2020 to 16 percent by 2050. ¹ In the context of healthy ageing and a life course approach to immunization older people and those with underlying medical conditions are two rapidly growing populations at-risk for serious complications and death associated with infectious diseases. Parallel to the process of ageing is the increasing vulnerability to infectious diseases for those with noncommunicable diseases (NCDs). NCDs kill 41 million people each year, which is equivalent to 71% of all global deaths. ² Respiratory diseases pose serious risks to the health and well-being, functional ability and survival of people living with these chronic conditions, not to mention the health care professionals (HCPs) who are working on the frontline.

The societal value of immunization is well-known during childhood years. Yet, in recent times governmental investment has been especially lacking when it comes to ensuring that populations and healthcare professionals most at risk of infectious diseases have a sound understanding of the importance of vaccines and the consequence of not being vaccinated. When well-informed and supported with evidence-based knowledge assets, healthcare professionals as members of civil society have the potential to play a critical role in promoting adult vaccination. Learning communities must be established to help build the capacity and capability of individuals and these organizations, and in turn, they become champions for change in this pivotal policy dialogue.

The role of health care professionals in adult immunization

Vaccine-preventable diseases, including influenza, pneumonia and others, pose serious risks to health and well-being, functional ability, autonomy, and survival of older adults, individuals living with chronic conditions, and the HCPs who care for them on the frontline. In the face of emerging and ongoing vaccine hesitancy, HCPs remain the most trusted advisors, advocates, and influencers of vaccination decisions.

Healthcare professionals are responsible for the promotion of vaccines by adhering to evidence-based immunization guidelines. While various vaccine competency training programs are available for those qualified to administer vaccines, there is a significant gap in the continuous education of HCPs resulting in a lack of confidence and ambivalence in promoting immunization. Furthermore, there is often inadequate information and training on the latest trends in adult immunization, including strategies to address the concerns and needs of older adults. Health professional associations have recognized the gap in education on vaccines and vaccination for the most at-risk populations during the COVID-19 pandemic yet remain significantly absent in professional efforts to promote vaccination as one of the most effective public health interventions for those most at risk.

The voice of civil society in adult vaccination

HCPs and civil society organizations (CSOs) view adult immunization as very important, but limited budgets and funding opportunities, combined with a lack of expertise in adult vaccination and the right human resources to coordinate education packages limit their ability to advocate for vaccination. CSOs such as those in the health field (e.g., International Association of Gerontology and Geriatrics (IAGG), World Dental Federation, International Council of Nurses and National Associations of Long-term Care Workers), in ageing (e.g., National Seniors Australia, AARP and Age UK) and patient associations (e.g., International Diabetes Federation and the International Association of Patient Organizations) are often trusted sources of information and help to inform the decisions of their constituents and members.

As part of the broader healthy ageing agenda, the promotion of adult vaccination, while being important to these organizations, is not a natural priority. Unless their core business is immunization, as is the case with Immunization Coalition (United States), Immunisation Coalition (Australia) or Immunize Canada, professional associations pre-pandemic had a ‘light touch’ when it comes to the promotion of vaccination. The International Federation on Ageing (IFA)’s Changing the Conversations on Adult Vaccination (CCAV) found that across all members of civil society in the ten countries that were studied in the CCAV program, there was an absence of both collective learning and shared assets which could benefit across populations, and scale learning. ³

Learning communities in adult vaccination

Promoting the value of adult vaccination requires a multisectoral approach where stakeholders (individuals and organizations) are engaged in active learning, supplemented with knowledge assets specific to their needs.

Learning about vaccination often occurs through one-way mechanisms such as websites. For example, the US government (e.g., US Centers for Disease Control and Prevention (CDC) shares e-information with health professionals, schools and childcare providers, businesses, and employers, as well as travellers. Communication resources such as brochures, social media and podcasts can be downloaded but are not pitched to citizen-led organizations.

The IFA Vaccines4Life (V4L) knowledge portal (which uses both passive and active learning techniques) aims to be a reliable source of information on adult vaccination and healthy ageing, a mechanism to mobilize knowledge through various channels of communication, and the opportunity to influence and help shape policy through capacity building at the national and international level.

Even though there is a myriad of resources in the VacciNet and government websites, both are dependent upon the organizations/health care professionals/care workers “knowing what they don’t know.” Information in and of itself does not tell a story, share experiences and assess lessons to be learned.

There is a clear need to promote the value of adult vaccination and understand what steps could be taken to improve coverage. A new way of learning in the field of adult vaccination must be created to establish a new group of influencers and champions.

Purpose of interactive learning series

Project ECHO: Education model for health care professionals

Collaborative and interactive learning to build capacity is central to an innovative training model that engages learners and educators. The Adult Vaccination Health Care Professionals ECHO (AV-HCP ECHO) aimed to deliver a training program on general vaccination topics to healthcare professionals, including nurses, pharmacists, community support workers, and physicians. The learning program aimed to provide a platform for sharing evidence, tools and good practices needed to empower HCPs to become champions of adult immunization within their communities and respective organizations. The program aims to respond to the gap in the coverage of adult vaccination education available to HCPs worldwide. The following four considerations were used to guide the development of the program.

First, civil society organizations (patient and ageing associations) in the field of ageing and noncommunicable diseases represent an unprecedented number of citizens globally at risk of serious complications from vaccine-preventable diseases. Second, low rates of vaccination and inconsistent up-to-date knowledge among healthcare professionals continues to be a barrier to promoting the value of vaccination to the general public and being a trusted source.

Third, while various competency training programs are available for those qualifying to administer vaccines, there is a significant gap in the continuous education of healthcare professionals resulting in a lack of confidence and ambivalence in promoting immunization.

Fourth, a learning community of health care professionals in the field of adult vaccination incorporating peer-to-peer exchanges, guided practice, and collaborative problem-solving does not exist for HCPs.

Program development and delivery

The AV-HCP ECHO program was considered through the lens of healthy ageing and a life course approach to immunization and was built upon three foundational pillars: prevention, access, and equity. The program was delivered through a virtual 10-session training program open to HCPs worldwide. A preliminary list of session topics and learning objectives were developed based on the three foundational pillars. The program curriculum was reviewed by the AV-HCP ECHO advisory committee, which comprised of a diverse group of experts. Following the ECHO model, didactic lectures were presented by subject matter experts to provide context for each session, followed by a discussion of key recommendations through case presentations to foster a practice-based learning environment. Prior to each session, preparatory material, including a summary of the didactic and case presentation, was sent to registrants. The 10 sessions were organized into 3 core units and occurred every two weeks over the course of 4 months. Each session was one hour long and was hosted in English via zoom teleconference. Every session opened with a didactic lecture, a case presentation from one of the learners, and then a question-and-answer session, followed by a discussion period, where subject matter experts made key recommendations.

Surveys

Prior to program registration, participants were prompted to provide demographic information such as their name, organization and experience and role within adult vaccination. After each session, participants were invited to respond to a voting poll that assessed whether the session met the stated learning objectives. A post-evaluation survey was developed to investigate the impact and success rate of the adult vaccination healthcare professional ECHO program. The survey aimed to garner key areas of strength and effectiveness of the learning series and to understand the diverse professionals among the audience throughout the series. Furthermore, data from the survey helped to evaluate the program's success in delivering effective training sessions on various vaccination topics that met the specific needs of healthcare professionals. The survey was comprised of 15 multiple-choice questions that were collected anonymously.

Recruitment

Leveraging the IFA's diverse network of experts, subject matter experts were invited to present on topics aligned with their wealth of knowledge and experiences. Members were recruited based upon their role in vaccine advocacy and knowledge of adult vaccination. Hub members were also responsible for providing numerous didactic lectures and participated in providing key recommendations during each session.

Participants were recruited via advertisement on IFA social media platforms such as LinkedIn, Facebook, Twitter and through mass emails. Emails were sent to IFA contact lists of experts who previously participated in adult vaccination-related initiatives. Participants were encouraged to share the AV-HCP ECHO program with other HCPs within their organization and networks.

Case presenters were recruited through a call for case presenters via email and social media platforms. At the end of each session, participants were encouraged to come forward and share their experiences as HCPs in the form of a case presentation. Participants who expressed interest in presenting a case were individually invited to share a case presentation based on their expertise and the proposed learning objectives.

Expert recommendations

Recommendations were made at the end of each session by subject matter experts. All proposed recommendations were disseminated to participants in post-session resources. Across all sessions, recommendations were summarized into system/organization level interventions and good practices for HCPs. System and organization level interventions are upstream recommendations that organizations can implement from a procedural and policy level within their institution to improve adult vaccination. In contrast, good practices for HCPs are practical and hands-on recommendations HCPs can integrate into their patient care to enhance their role within the field of adult vaccination. The following key recommendations were identified from across all sessions:

Theme	Expert Recommendations	
	System & Organization Level	Good Practices for HCPs
Patient-Centred Approach	Stakeholders of immunization should use a holistic and human-centred approach to understand the nuances and complexities of people's lives that contribute to current rates of vaccination	HCPs should work with individual patients to understand the lived experiences, and social and cultural constructs that shape vaccine decision making
Tailored Vaccination Education	Leverage trusted HCPs and influential experts to participate in adult vaccination campaigns that share the benefits of being vaccinated	Relay vaccination education through diverse avenues to help boost vaccine literacy among older adults and optimize outreach through targeted vaccine messages
Boosting Vaccine Confidence	Improve vaccine confidence among older adults calls for a life course approach to understanding the specific perspectives and needs of older adults to create effective vaccine interventions	Expand the roles of trusted HCPs within communities to foster a safe and trusted environment to boost vaccine confidence and increase uptake rates
Addressing Adult Vaccination Low-Middle Income Countries	Investments in global preparedness should equitably include LMICs to increase access to vaccines and to allow HCPs to advocate for the vaccination of older adults	HCPs in marginalized communities should coordinate efforts to motivate, educate and improve vaccine uptake for older adults. Utilizing other healthcare service centres as hotspots for adult vaccination programs may help target hard-to-reach communities
Policy Approach to Adult Vaccination	Policymakers should practice gender and rural 'proofing' policies to help policymakers evaluate how specific policy changes will affect specific populations	HCPs should leverage their front-line experience and knowledge to play a role in advocating and influencing vaccine-related policy change

Table 1: Summary of Expert Recommendations

Patient Centred Approach

From a system/organizational level, it is recommended that stakeholders of immunization identify knowledge gaps in adult vaccination through a holistic and person-centred lens. It is imperative that they understand the nuances and complexities of people's lives that contribute to current rates of adult vaccination and the decision to be vaccinated. As good practice, it is recommended that HCPs work with individual patients to understand the lived experiences that shape vaccine decision-making and to work within the social and cultural constructs of communities.

Tailored Vaccination Education

It is recommended that organizations leverage trusted primary HCPs and influential experts to educate on the science that supports the benefits of being vaccinated through adult vaccination campaigns. Ministries of Health should develop collaborative strategies alongside immunization experts to relay scientific evidence in vaccination campaigns. Promoting vaccine data in the absence of social and political biases is fundamental to fostering trust and helping influential leaders and their communities understand the importance and positive impact of adult immunization. Recommended good practices for HCPs, including relaying vaccination education through diverse avenues to help boost vaccine literacy among older adults while also eliminating ageism in tailored vaccine messages. To optimize outreach, HCPs may use a combination of digital messaging, public campaigns, leveraging relationships with trusted HCPs and peer-to-peer learning to relay targeted vaccine messages to older adults.

Boosting Vaccine Confidence

Organizations should implement a life-course approach to immunization across sectors and disciplines to improve vaccine confidence among older adults as part of a human centred-model. A human-centred approach considers the perspectives, needs and emotions of older adults when creating vaccine-related interventions. It is recommended that HCPs and stakeholders of adult immunization leverage a holistic approach to changing the vaccine dialogue and addressing the unique barriers older adults experience in accessing vaccination services. Furthermore, expanding the roles of trusted HCPs within communities can support a biopsychosocial approach to fostering a safe and trusted environment to boost vaccine confidence and increase uptake rates.

Addressing Adult Vaccination in LMIC & Marginalized communities

It is recommended that HCPs in rural communities develop coordinated efforts dedicated to motivating, educating, and improving vaccine uptake for older adults in marginalized communities. This calls for experts dedicated to developing initiatives to motivate older adults to get vaccinated. Furthermore, vaccine campaigns should be centred around the unique needs of older adults. Vaccine campaigns to reach older adults in marginalized communities require coordinated teamwork from all parties to optimize outreach. Furthermore, utilizing other healthcare service centres as hotspots for adult vaccination programs can help target hard-to-reach communities. Integrating health services in a central location where older adults often visit can improve exposure and accessibility to vaccine education and services.

From a systems level, investments in global preparedness should equitably include LMICs to increase access to vaccines and to allow HCPs to advocate for the vaccination of older adults. HCPs in high-income nations can advocate for vaccine equity in LMIC by amplifying the voices of HCPs who campaign for their vulnerable populations. Through global partnerships, HCPs can collectively build rich pools of data and align strategic vaccine priorities to address global vaccine equity.

Policy Approach to Adult Vaccination

From a systems-level perspective, it is recommended that policymakers practice gender and rural 'proofing' policies to help policymakers evaluate how specific policy changes will affect rural areas. Likewise, gender-proofing policies guide policymakers to consider the rippling effects of policy on women and their health. It is recommended that policymakers apply a gender lens and implement gender impact studies to protect women and other marginalized populations from potential policy changes that could negatively influence their access to healthcare services. Furthermore, HCPs can leverage their front-line experience and knowledge to advocate and influence vaccine-related policy change.

Program Impact

The program ran from July to November, with an average of 20-30 participants present each session. Over the course of the program, a total of 224 global learners representing over 39 countries registered for the AV-HCP ECHO program. There was consistent participation during the question and discussion period during each session. The number of questions posed orally, and in the chat function exceeded the allocated time for the discussion period, further indicating the high level of participant engagement. Furthermore, social media campaigns for ECHO were well organized and engaging. The campaign reached over 1,610 people through social media. Unit 3 had the highest user engagement, based on communications data which indicated 489 people impressed by Unit 3 content. The impression metric refers to the number of people who had the post present on their social media feeds based on their interests. This data supports the impact and success of the program's social media strategy in achieving optimal outreach and engagement.

Results from the post-evaluation survey questions were compiled to assess the engagement and learning impact on participants. The condensed results are seen in figure 1 below:

Over 50% of survey participants indicated that they are HCPs and advocates of adult vaccination. It is evident that the majority of participants believe that the program helped promote and educate on adult immunization and provided tangible recommendations and good practices that will be carried forward. A few participants expressed personalized feedback, which indicated overall effective delivery of the program, as they advised that the sessions were informative and well-organized. Participants were impressed with the diversity of experts chosen to present the didactics and recognized the inclusion of presentations and recommendations tailored to LMIC regions. Suggestions for participants indicate a need for session recordings to be made accessible on the IFA website for learners to rewatch. About 27% of participants requested a certificate of program completion to be made available at the end of the program. This consideration may be implemented in future iterations of the ECHO program and can potentially ensure consistent participation in every session.

REPORT FOR AV-HCP ECHO - POST PROGRAM EVALUATION SURVEY

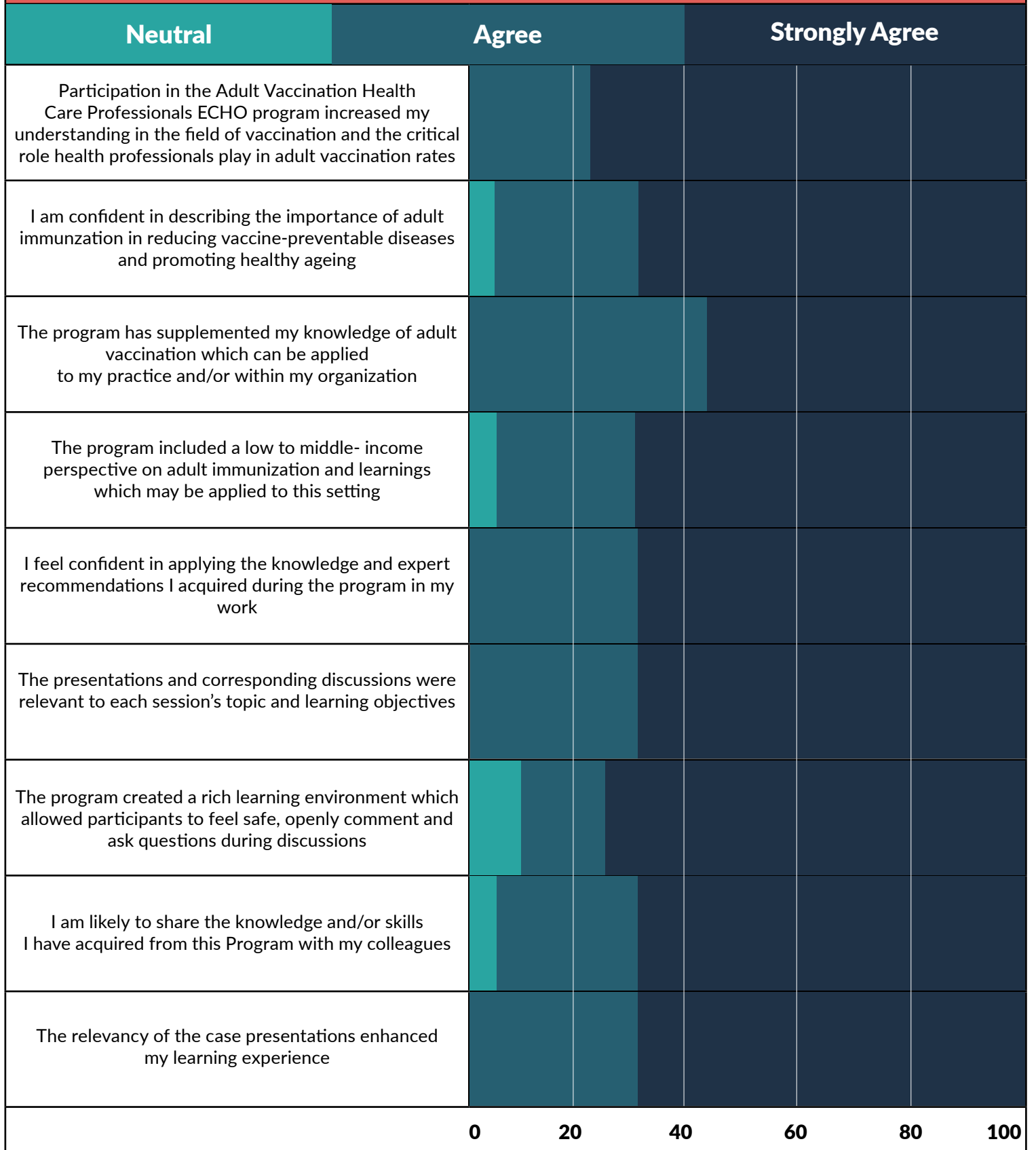


Figure 1: Post-Program Evaluation Survey Results

Lessons Learned

As the adult vaccination healthcare professional ECHO program progressed, numerous lessons were learned in the development and delivery of the program with the hopes of refining future ECHO programs. Firstly, it is important to note that hub members were integral to the program's success by providing appropriate and effective recommendations during each session. For future sessions, it is recommended that a terms of reference document be developed for hub members that clearly outlines their roles and responsibilities to ensure the program's sustainability and success through consistent commitment of hub members.

Case presentations were fundamental to the learning experience of participants and played a major role in developing practical recommendations for HCPs to adopt. The case presentations were an integral component in generating critical discussions and expert recommendations. Therefore, case presenters should be recruited in advance of each unit to ensure that the cases are aligned with learning objectives and session topics. Adequate time should be allocated to a one-on-one discussion with the case presenter to support the effective delivery of a practice-based case.

Lastly, it is recommended that the schedule of future ECHO programs be optimized to ensure maximum participation and engagement throughout the program. The AV -HCP ECHO program was ten sessions long and delivered biweekly. During this time, the number of participants varied throughout the series. Fewer sessions with more narrow and innovative topics may be ideal for creating a sustainable and highly engaging program. Furthermore, it would support the establishment of a committed learning community and create more consistent participation in every session.

Conclusion & Next Steps

The Adult Vaccination Health Care Professional ECHO program is an informative program which enables HCPs to become champions of adult immunization through education and advocacy. The program has demonstrated the value of utilizing an ECHO platform to foster an interactive learning community which facilitates peer-to-peer learning, promotes pivotal policy dialogue and improves adult vaccination rates. The AV-HCP ECHO training program was designed to deepen understanding of adult vaccination through the learnings of experts in the field and civil society organizations. The AV-HCP ECHO program has proven successful in improving the knowledge and skills of HCPs who work within the field of healthy ageing.

To enhance capacity building and knowledge of HCPs, it is proposed that the AV-HCP ECHO program be scaled up to create a refined program with greater outreach. Scaling up the program will enable influential experts from well-established professional associations to collectively propose innovative recommendations and good practices on adult vaccination. The program and the novel recommendations generated will continue to improve the capacity and capabilities of HCPs worldwide and ultimately increase global adult vaccination rates.

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