

Proven Strategies Help Shorten Talks about Vaccines

Use the right approach to improve health outcomes and reduce hospital costs

4 Evidence-based strategies have been used with positive results when talking to patients about vaccines. Once you learn how to use them, it takes four minutes or less of your time.

The table below shows the order of strategies to use based on the level of acceptance or hesitancy.

Accepting parents

1 Presumptive recommendations

2 Blanket recommendations



Hesitant parents

3 Motivational interviewing

4 Debunking myths



1. Start with a presumptive recommendation.

Announce shots are due instead of asking how a member feels about getting shots.

Example:



“Well, it is flu season and we have some shots to do today,” instead of asking, “Have you thought about getting your flu shot today?”

2. Follow with a strong blanket recommendation.

Sound matter-of-fact, confident. Recommend all vaccines the same way.

Example:



“Your child needs four vaccines today: HPV, meningococcal, flu, and Tdap vaccines.”

Be prepared for questions and reply with brief facts about vaccines. Keep it simple.

(continued)

This flyer has been produced by Health Net. It is being shared with organizations as part of a joint flu education campaign.

3. Change tactics to motivational interviewing.

Switch to motivational interviewing (MI) when a member is not sure so you can reconnect with the member. Leverage their basic motivation for a behavior.

Motivational interviewing has four principles: empathy, collaboration, evocation, and support for autonomy. To help manage concerns, these principles include micro skills:

- Ruler
- Elicit, provide, elicit (EPE)
- Reflection
- Open-ended questions
- Affirmation
- Summaries

Example



A boy age 12 comes in for a well visit and to get forms signed. At the end of the visit, you offer a presumptive, strong, blanket recommendation for HPV, Tdap and MSP4 vaccines. Mom agrees to all but the HPV vaccine. You pivot to MI as follows:

Provider asks...

“I see. So, on a scale of one to 10, with one never getting the vaccine and 10 definitely getting it today, where are you at?” **(Ruler)**

“Okay, can you tell me more about why you are a three and not a one?”
(Elicitation, Evocation)

“Would you mind telling me what safety issues you are worried about?”
(Open-ended question)

“When people started rumors about this vaccine on the Internet, the rumors spread. There is no truth to them.”

“This is one of the safest vaccines and has been well studied. It prevents several types of cancer. I think it’s an important vaccine. That’s why I gave it to my own children.”

“That said, this is a decision only you can make. What do you think?” **(Autonomy, EPE)**

Member replies...

“About a three.”

“Well, I definitely don’t want my son to ever get cancer. I’m open to the idea of the vaccine, but I’m just scared it’s not safe.”

“I’ve heard that some children who get the shot can die from it. I know it’s probably not true, but it just makes me worry.”

(continued)

4. Debunk myths with brief facts.

Take the mystery out of it. Always state a myth is false before you talk about it. This removes the myth in a person's mind and creates a gap. It is vital you fill the gap with brief, simple facts.

Example



Your next patient is a girl age one who comes in for a well visit. She has six vaccines due.

Provider asks...

You give your presumptive, blanket recommendation.

Summarize what you heard. Ask permission to make a recommendation.

"So, you seem concerned about potential effects of the ingredients in the vaccines."

(MI – reflection)

"I get that – you want to make sure your daughter only takes things good for her. I've looked into this a great deal. Would it be okay to share what I've learned about this?"

(MI – ask permission)

Briefly share what you learned, then pivot to the importance of the vaccines.

"It's actually all a myth about vaccines containing toxins."

(Preceding explicit warning)

"The ingredients in vaccines are in tiny quantities. They make vaccines to be safe."

(Alternative explanation)

"I feel better knowing my children and my patients get the vaccines they need. The diseases we're talking about are serious."

(Focus on core facts and positives of action)

"That said, this is your decision. What do you think?" **(MI – autonomy)**

Member replies...

"My cousin told me I should stop getting vaccines because there are toxins in them."

"I heard there is mercury in the flu shot."

Vaccine hesitancy training

- American Academy of Pediatrics – HPV Vaccine: Same Way, Same Day app. Available for Android™ and Apple® mobile devices through the Google Play Store and App Store.
- California Department of Public Health Immunization Branch (EZIZ): One-stop training resources at <https://eziz.org/eziz-training/>.
- Children's Hospital Colorado, Univ. of CO, Amanda Dempsey, MD, PhD, MPH, Amanda.dempsey@ucdenver.edu.