

# Implementing a Multifaceted Approach to Improve Shingrix Uptake in a Primary Care

Getnet Tiku, MS, BSN, RN; Lynn Marie Bullock, DNP, RN, NEA-BC  
University of Maryland School of Nursing

## Background

- Shingles, a widespread disease affecting 1 in 3 Americans, leads to serious complications, especially in those 50+.
- **CDC Recommendation:** Two doses of recombinant zoster vaccine (RZV, Shingrix), a highly effective vaccine (91.3%-97.2%) for individuals 50+ to prevent shingles and its Complications
- **Vaccination Rates:** A primary care clinic in Baltimore observed 16% of adults aged 50 and above and 22% of those aged 60 and above had received the recommended two doses of the shingles vaccine.
- **Root Cause Analysis:** Identified barriers to vaccination includes lack of follow-up reminders, and insufficient patient knowledge.
- **Literature Review:** Studies indicates that implementing reminders and enhancing education could increase vaccine uptake in primary care settings.

## Objectives

- The purpose of this QI initiative was to improve RZV uptake in a primary care clinic by distributing educational handouts during in-person visits followed by patient portal reminder.

### Process Goals:

- 100% of patients will receive an educational handout.
- 100% of patients will engage with a portal reminder to get vaccinated.

**Outcome Goal:** To increase RZV vaccination uptake among the target patient population by 20%.

## Methods

**Setting:** A primary care center in Baltimore, Maryland.

**Target Demographic:** Individuals aged 50 and older who are active users of a patient portal and have not yet completed the RZV vaccine series.

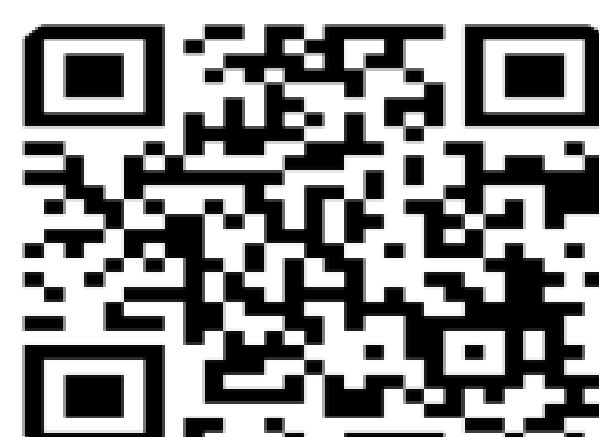
### Intervention:

- Primary care provider and patient portal specialist educated about the project.
- RZV status assessment during in person visit.
- Educational handouts distributed during in person visit.
- Portal reminders sent via patient portal two weeks after the in person visit.

### Outcome measure:

- Patient chart.
- Patient portal report.
- Vaccination status assessed using Maryland vaccine registry website.

Educational Handout



Portal Reminder



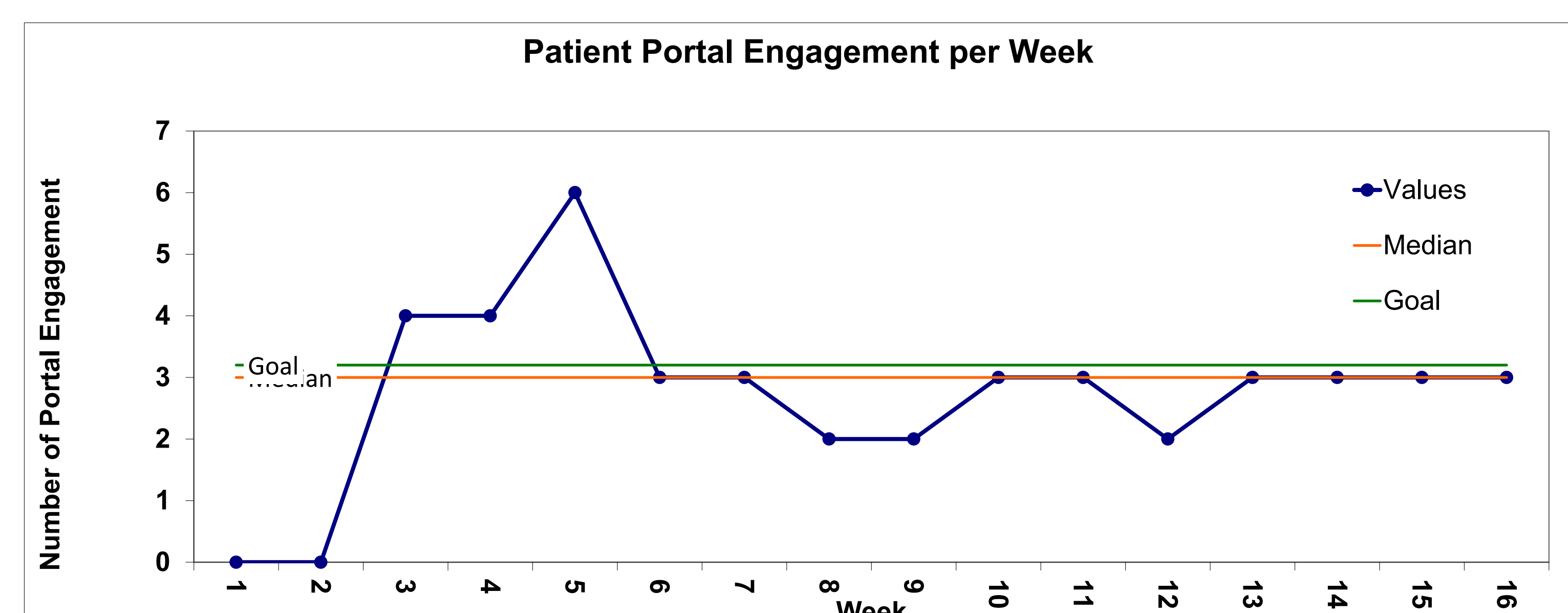
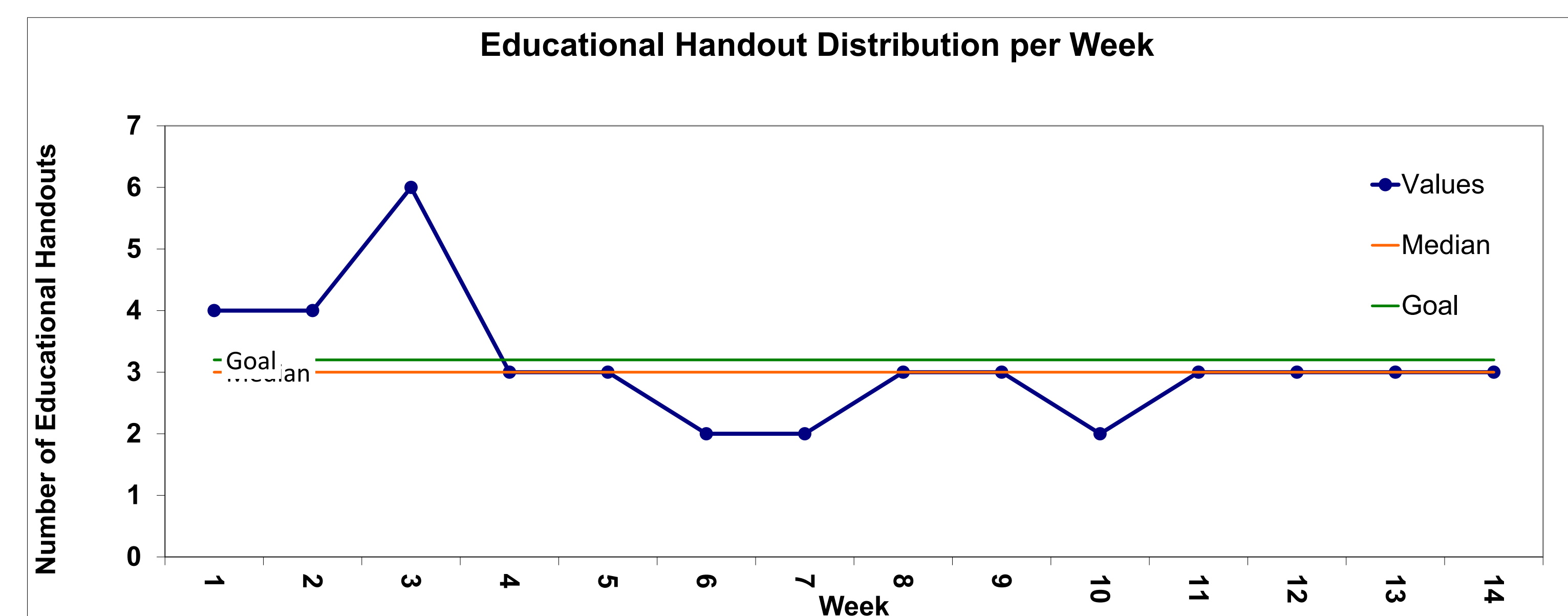
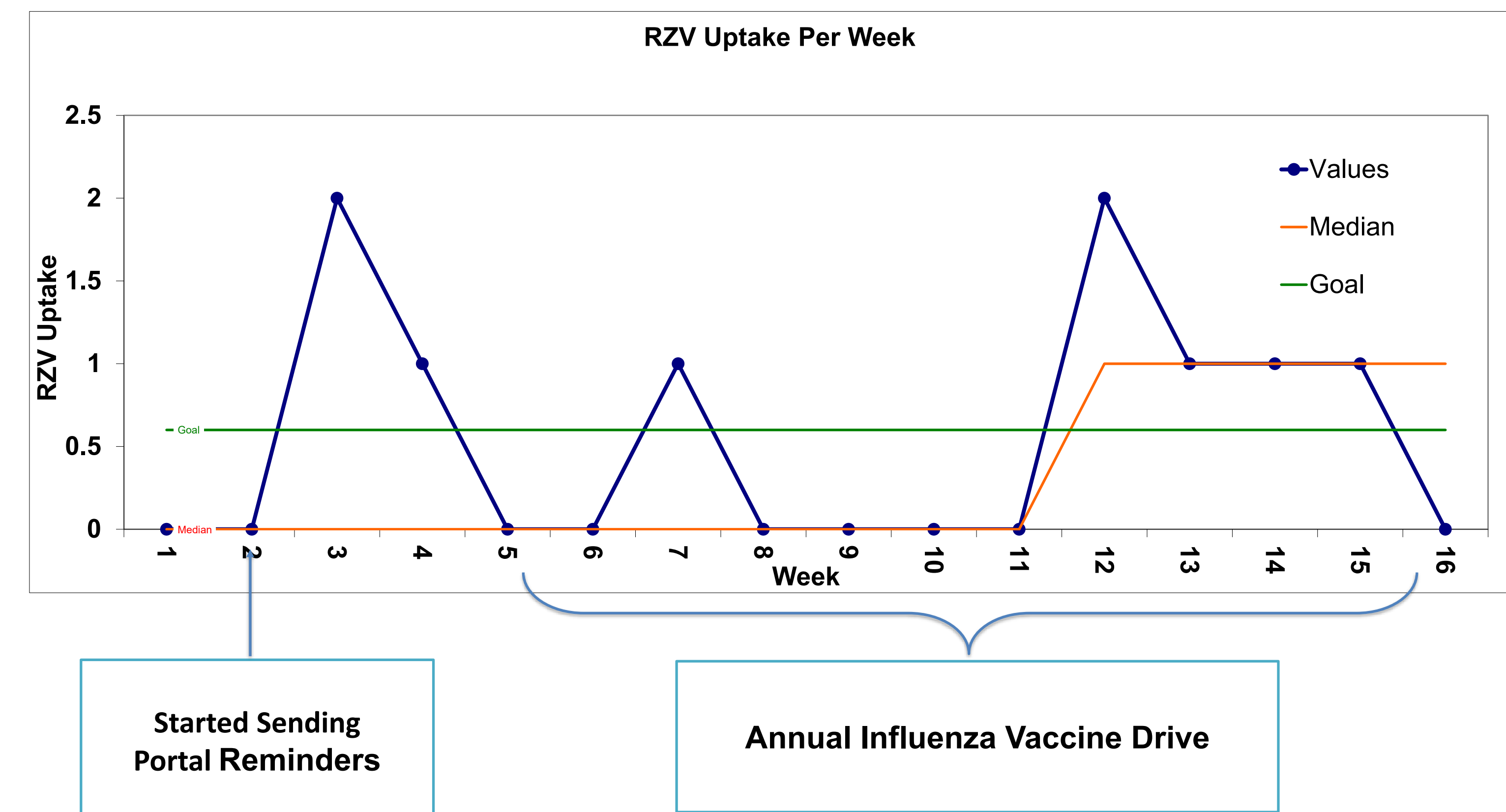
## Results

**Primary Achievement:** A 20.45% (n=9 out of n=44) RZV uptake rate among engaged patients. A 12% (n=5 out of n=41) increase in vaccine uptake compared to 2022 data.

### Secondary achievement:

- **Educational Material Distribution:** Reached 95.6% (n=44) of the target demographic with educational handouts.
- **Patient Portal Engagement:** Recorded a 100% (n=44) opening rate for portal reminders among patients.

## Figures



## Discussion

- The initiative's success is consistent with broader research findings that patient education and timely reminders are crucial for improving vaccine uptake in primary care, despite challenges such as the lack of direct patient feedback and difficulties in tracking vaccinations outside of Maryland.
- Vaccine status was assessed during in-person visits and monitored through a vaccine tracking system interfaced with the Electronic Medical Record (EMR) system.
- The recommended interval of 4 to 6 weeks between the influenza and Shingrix vaccines may have affected the uptake of the Shingrix vaccine from weeks 5 to 11.
- Future directions include incorporating patient feedback, enhancing follow-up procedures, and improving data validation methods.

## Conclusions

### Implications for Practice

- **Feasibility:** Patient portal reminders and educational handouts are practical in a small primary care setting.
- **Vaccine Uptake:** Use of patient portal reminders and educational handout has been shown to enhance vaccination rates in primary care.

### Sustainability and Spread

- **Site Adaptation:** Can easily tailor the approach to different clinical settings.
- **Efficiency:** Integrating chart updates with an electronic intake process can streamline the workflows and improve sustainability.

## Bibliography



## Acknowledgement

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**Contact:** Correspondence concerning this poster should be addressed to Getnet Tiku, Email: gtiku@umaryland.edu.