

Vaccination Outreach Toolkit

Strategies and Tools for
Increasing Vaccination Rates



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This toolkit is a summary of the key strategies and tools used during an initiative called a ‘Vaccine Sprint’ that took place in the fall of 2022 to increase COVID-19 vaccination rates for individuals with serious mental illness (SMI) throughout Texas. While this toolkit is focused on increasing COVID-19 vaccination rates, it can be used within your own community to help increase adoption rates for other vaccines. It is intended to provide data-driven recommendations for increasing vaccination rates for at increased risk/specific populations who may be underserved.

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STEP 1: Make the Case and Build the Will for Change in your Organization

Communicate the need for this work at all levels of your organization. While there is widespread awareness of COVID’s risks for the general population, many individuals with SMI and their families are unaware that they are at an increased risk for serious illness or death. This is attributed to the fact that individuals with serious mental illness are less likely to protect themselves from infection by taking personal protective measures. Additionally,

individuals with SMI tend to have poorer health overall which leads to increased risk¹. Although this information might convince some people, another powerful way to make the case for change is with stories. Share a story of an individual or family member who was unvaccinated and became sick from COVID at a leadership meeting or staff meeting. The combination of data, stories and the tools below will help propel your vaccine change effort forward.

FACT

“The risk of death from COVID-19 went up by 50% for those with a history of mental illness compared to those with no such history...”

“I wanted to reach people to get informed, to get educated and to get the vaccine. Our county was very impacted by COVID...I have family members who died from the virus. ...I just wanted to let them know that they can get protected,...and the vaccine is available.”

– Eagle Pass Participant, Adrianna M

¹ <https://www.npr.org/sections/health-shots/2021/11/22/1057258797/why-people-with-mental-illness-are-at-higher-risk-of-covid>

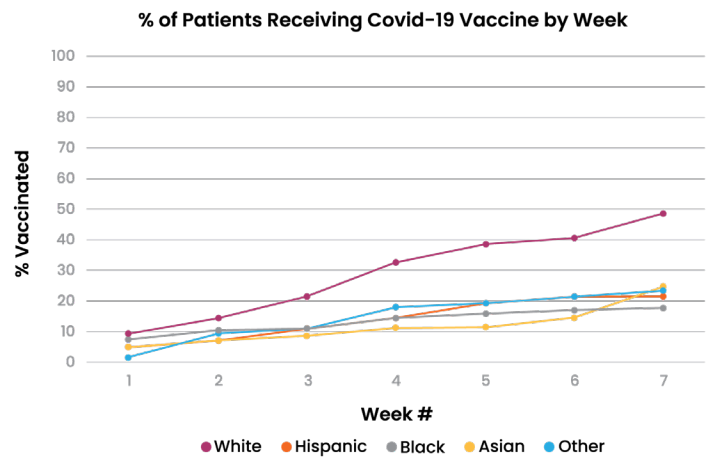
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STEP 2: Select your Target Population

Focusing on a specific population will enable you to tailor your approach to that group. Look at your vaccination data and break it down by race, ethnicity, language, or other factors (see example below). While all groups might have room for improvement in their vaccination rates, focusing on a specific population enables a customized approach. For example, several teams in the Vaccine Sprint focused on their populations without housing and some focused on non-English speakers.



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STEP 3: Recruit your Team

Identify a small group of motivated individuals to work alongside you in this effort. Your team should ideally include someone from your chosen population's community. This might be someone from the faith-based community, a community health worker, or a member of a group with

whom your population tends to affiliate. Other key team members include someone who can help with data collection and measurement and a member of your leadership team who will support you and remove barriers that get in your way.

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STEP 4: Draft your Charter

Create a project charter to serve as a "roadmap" for the team's work. A project "charter" is a document that outlines your project goal, timeline, team members, measures, and project boundaries (i.e., what is included in the scope of the

project – and what is not). A charter helps ensure that your leadership team understands the project and can provide help where needed. A sample charter template can be found [HERE](#).

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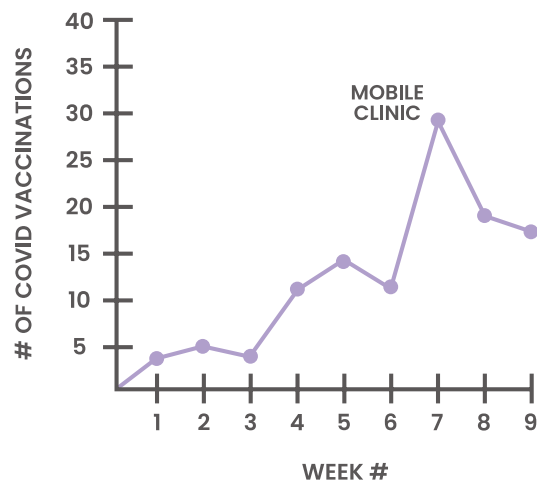
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STEP 5: Use Measurement to Learn and Improve (and Communicate!)

How will you know that any change you test is leading to improvement? This is where measurement – even on a small scale - is very important. You might know how many of your clients have been vaccinated (your outcome measure), but what are the other strategies that will lead to vaccination? How many clients have been able to get vaccinated on days when the mobile vaccination unit is at your organization? How many clients were vaccinated after receiving a free lunch voucher? All of the ideas listed above may or may not result in improvement. Measurement will ensure that you have data to back up your theories of what will work. One idea might be wildly successful, and another might miss the mark. Test for one hour, one shift or one day. This can be all the time that you need to decide whether to adapt, adopt or abandon the idea. Also, measurement doesn't need to be high-tech to be effective. A hand-drawn chart with a marker on flip-chart paper can be an incredibly powerful and low-tech way to capture data and

communicate the work of the project to colleagues. Bottom line: Keep it small, simple and just get started.

of Vaccinations Given/Week



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STEP 6: Identify Trusted Messengers

Mistrust is one of the most widely cited barriers to vaccination, both in the government and in the safety of vaccines². One effective strategy to overcome this attitudinal barrier is to identify the individuals who are most trusted by the target population you want to reach. An example of trusted messengers might include a faith-based leader, a hair stylist or barber, or the local pharmacist. Recruit trusted messengers to help advocate for vaccination, provide

fact-based responses to community concerns, and re-direct individuals to care if needed. Start by looking within your organization for individuals on staff who might be willing to help. Alternatively, consider recruiting one to two individuals from your community or neighborhood. The ideal trusted messenger is respected within the organization and community and is excited about this opportunity to help.

² Khairat, S.; Zou, B.; Adler-Milstein, J. Factors and Reasons Associated with Low COVID-19 Vaccine Uptake among Highly Hesitant Communities in the US. *Am. J. Infect. Control* 2022, 50, 262–267.

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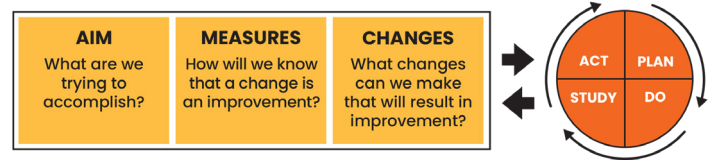


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STEP 7: Use a Quality Improvement Method

Select a quality improvement approach to guide your work. Quality improvement is defined as, "...systematic and continuous actions that lead to measurable improvement in health care services and the health status of targeted patient groups." The Model for Improvement is one of those methods. It is focused on the use of three key guiding questions: (1) What are you trying to accomplish – your AIM, (2) How will you know a change is an improvement – your MEASURES, and (3) What changes will you make that will result in an improvement – your IDEAS TO TEST. Click [HERE](#) for more information about the Model for Improvement.

The Model for Improvement



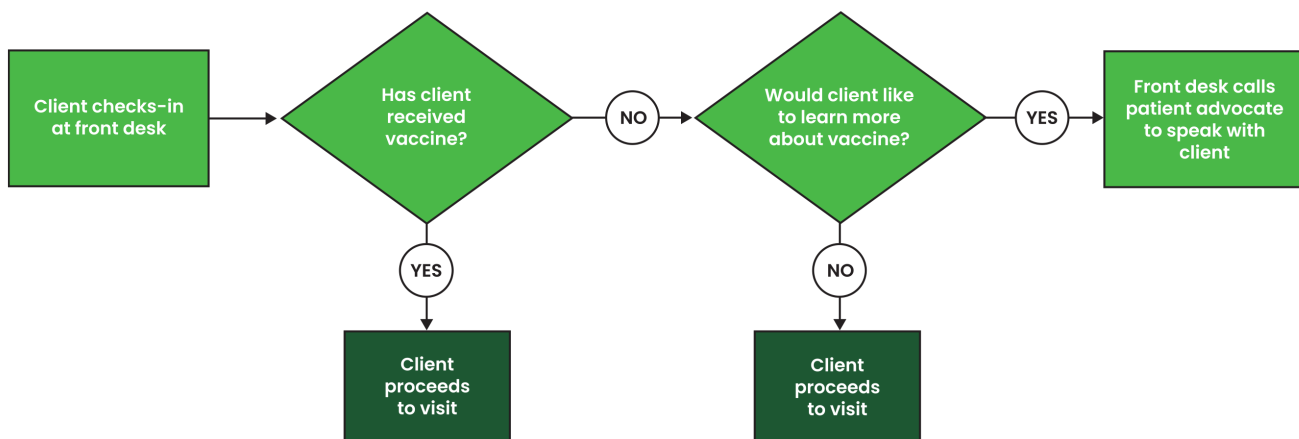
Langley GL, Nolan KM, Nolan TW, Norman CL, Provost LP. [The Improvement Guide: A Practical Approach to Enhancing Organizational Performance](#) (2nd edition). San Francisco: Jossey-Bass Publishers; 2009.

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STEP 8: Use Process Maps to Identify Opportunities for Improvement

The first (often overlooked) step in improvement is to deeply understand your current system. Process maps are an effective way to develop a shared understanding of how work is done (i.e., the process of asking clients whether they have received their COVID vaccination yet, or the process of connecting a client who wants the vaccine with a clinician who can

administer it) and identifying opportunities for improvement. This activity can be done quickly with post-it notes or paper and pencil. One of our Sprint participants developed a process map starting with paper and pencil and used the tool to help her organization to communicate gaps and opportunities to strengthen internal systems.



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STEP 9: Generate and Test Your Ideas

Once you have an idea that you want to test, the Plan-Do-Study-Act (PDSA) cycle, the second part of the Model for Improvement, offers a powerful framework for learning. Often we come up with an idea and rush to implement it without carefully testing it to see if the idea works. By carefully planning a small-scale test, predicting the outcomes, reflecting and adapting as needed results in greater learning that enables us to improve more quickly.

For example, one group working on increasing vaccination

rates partnered with a local radio station on messaging. They tested the message (the 'Do' phase) with a small group of their target audience. By studying the feedback from this small group, they identified some small wording changes that had a great impact. They then adjusted their message and tested it again quickly with another group. A series of these rapid cycle tests, or PDSA cycles, helped them save time later and increased the impact of their efforts.

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STEP 10: Cross the Finish Line

Often so much effort goes into convincing someone to get vaccinated attitudinally, when the reality of the barrier is much more about the logistics of where and when they can receive the shot. Do not overlook the logistical barriers that may exist. Explore strategies to ensure that travel and time

are not barriers to vaccination. Bring the vaccine to your target population to make it easy to get the shot. Park your community's mobile unit next to a food truck. Be creative and make it as easy as possible for individuals to get the COVID vaccine.

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STEP 11: Celebrate Successes

An essential component of any change effort is to celebrate both small and big wins. Improvement work is not easy, and it can often be discouraging. Celebration is also a great way to promote your effort across your organization. Share what you're working on and be open about your successes and your challenges. Invite ideas and suggestions. Celebration can be a small and simple act of gratitude to a colleague

who may have helped with the project. It can also be a way to invite new voices and perspectives, whether through a short client video detailing the impact of the project or the collection of a series of client quotes hung up in a lunchroom. Regardless of how it is done, celebration is a critical way to recognize and encourage the ongoing drive to improve the lives of clients and their families.