College and University Flu Vaccination Challenge 2017-2018
Agenda for Today

• 2016-2017 Flu Vaccination Coverage Data Summary
• 2017-2018 Campaign Specifics and Overview
• Clinical Update
• Moving Forward
• CHEAR: Co-administration Data
• Alana’s Foundation
## 2016-2017 Flu Vaccination Coverage Data

<table>
<thead>
<tr>
<th>Age Group</th>
<th>MI Coverage</th>
<th>Compared to 2015-2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 months-4 years</td>
<td>45.4%</td>
<td>↓ 0.3%</td>
</tr>
<tr>
<td>5-12 years</td>
<td>25.0%</td>
<td>↓ 0.9%</td>
</tr>
<tr>
<td>13-17 years</td>
<td>18.4%</td>
<td>↓ 1.2%</td>
</tr>
<tr>
<td>18-24 years</td>
<td>13.0%</td>
<td>↑ 0.8%</td>
</tr>
<tr>
<td>25-49 years</td>
<td>16.9%</td>
<td>↑ 1.0%</td>
</tr>
<tr>
<td>50-64 years</td>
<td>26.9%</td>
<td>↑ 1.9%</td>
</tr>
<tr>
<td>65 years+</td>
<td>44.8%</td>
<td>↑ 2.4%</td>
</tr>
<tr>
<td><strong>Overall (6 mos+)</strong></td>
<td><strong>26.2%</strong></td>
<td>↑ 1.4%</td>
</tr>
</tbody>
</table>
2016-2017 Flu Vaccination Coverage Data

Influenza Vaccination 1+ Coverage by Age Group
MCIR Data, 2012-2017

- 6 mos-4yrs*
- 5-17yrs*
- 18-24yrs
- 25-49yrs
- 50-64yrs
- 65+yrs
- Overall

* Ages may include/overlap categories.
2016-2017 Flu Vaccination Coverage Data

<table>
<thead>
<tr>
<th>LHD with the Highest Coverage (18-24 year olds)</th>
<th>LHD with the Lowest Coverage (18-24 year olds)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kent</td>
<td>Chippewa</td>
</tr>
<tr>
<td>23.3%</td>
<td>8.3%</td>
</tr>
<tr>
<td>Grand Traverse</td>
<td>Lapeer</td>
</tr>
<tr>
<td>17.0%</td>
<td>8.2%</td>
</tr>
<tr>
<td>Calhoun</td>
<td>W. UP</td>
</tr>
<tr>
<td>16.3%</td>
<td>7.7%</td>
</tr>
<tr>
<td>Allegan</td>
<td>Detroit</td>
</tr>
<tr>
<td>16.2%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Dickinson-Iron</td>
<td>Central MI</td>
</tr>
<tr>
<td>15.9%</td>
<td>5.4%</td>
</tr>
</tbody>
</table>
Us Flu VE Network – Vaccine Effectiveness, 2016-2017 Flu Season

Influenza A/H3N2 Vaccine Effectiveness

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Ages</td>
<td>34%</td>
</tr>
<tr>
<td>6 months - 8 years</td>
<td>51%</td>
</tr>
<tr>
<td>9 – 17 years</td>
<td>31%</td>
</tr>
<tr>
<td>18 – 49 years</td>
<td>12%</td>
</tr>
<tr>
<td>50 - 64 years</td>
<td>34%</td>
</tr>
<tr>
<td>65 years and older</td>
<td>25%</td>
</tr>
</tbody>
</table>

Influenza A/H1N1pdm09 Vaccine Effectiveness

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Ages</td>
<td>54%</td>
</tr>
</tbody>
</table>

Influenza B (all ages) Vaccine Effectiveness

<table>
<thead>
<tr>
<th>Type</th>
<th>Effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza B</td>
<td>56%</td>
</tr>
<tr>
<td>Influenza B/Yamagata</td>
<td>55%</td>
</tr>
<tr>
<td>Influenza B/Victoria</td>
<td>60%</td>
</tr>
</tbody>
</table>

Influenza A and B Vaccine Effectiveness

<table>
<thead>
<tr>
<th>Type</th>
<th>Effectiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza A and B</td>
<td>42%</td>
</tr>
</tbody>
</table>

In practical terms, this means the flu vaccine reduced a person’s overall risk of having to seek medical care at a doctor’s office for flu illness by 42%.

Data from the Advisory Committee on Immunization Practices (ACIP) June 2017 meeting. Slides are published online.
2016-2017 Flu Season

What did we learn from the 2016-2017 season?

• Flu activity can peak at any point during the season
  ◦ Peak flu activity for 2016-17 was February with continued activity through March and April

• Moderate season with H3N2 as the predominant strain

• There was a higher percentage of hospitalizations in comparison to the H3N2-predominant 2012-2013 and 2014-2015 flu seasons

• 104 Influenza-associated pediatric deaths nationally
2016-2017 Flu Challenge Recap

Recapping the 2016-2017 College Flu Challenge:

• **8,274**: Surveys completed between August 1, 2016 and December 9, 2016

• **1,837**: Self-reported Flu Vaccinations at non-college site (22%)

• **49%**: Majority of self-reported flu vaccines were administered in October
Campaign Overview
Campaign Rules and Overview

**Goal:** To increase flu vaccination rates among adults

**Competition:** Schools will compete against other schools (categorized by size)

**Dates:** August 1, 2017 through December 8, 2017

**Awards:**

1. Self Report Survey Coverage Winners (3 Overall Challenge Winners)
2. MCIR Winners
3. Late Season Effort Award
4. Innovative Champion Award
5. Most Improved Award
Changes to the 2017-2018 Flu Challenge

• Expanded Target Audience:
  o Goal: to increase conversations about the importance of flu vaccine, and increase influenza vaccination rates among all Michigan adults
  o Expanded target: undergraduate students, graduate students, faculty, staff, alumni, and fans
  o Anyone can complete the survey on behalf of an enrolled institution if they have received their flu vaccine this season
  o In partnership with the Alana’s Foundation National Flu Challenge pilot
Changes to the 2017-2018 Flu Challenge

• Monthly Mini Challenges: Innovative Effort Award
  o Goal: Increase flu vaccination rates on campuses by rewarding schools for implementing programs and strategies to engage target audiences
  o Four Monthly Mini Challenges:
    ▪ September: Partner with External Groups
    ▪ October: Social Media Posts
    ▪ November: Create an Internal Competition
    ▪ December: Extend the Flu Vaccination Campaign
Monthly Mini Challenge Scoring

• Each month you can earn 8 points by completing the challenge
• You can receive bonus points by going above and beyond the challenge requirements
• MDHHS will determine what each institution scores for each challenge – additional information can be shared, but you will not be able to argue or challenge your score
Monthly Challenge Communication and Reporting

• Two weeks prior to the start of the Monthly Mini Challenge, MDHHS will send out an email with challenge details (September excluded)
  o Challenge description
  o Point opportunities
  o Reporting requirements
  o Subject name of the email for reporting
  o Reporting due dates
September: Partner with External Groups

The Challenge: Partner with external groups that can support your flu vaccination efforts. You must partner with two external groups during the month of September (pharmacies, Alana’s Foundation, Local Health Department, Animal Shelter, etc.)

The Reward: If you complete the challenge you get 8 points.

Extra Rewards: For each additional group you partner with, you will receive an additional two points.

Email Subject Line: September Challenge: Partner with External Groups

Reporting Requirements: In your email, describe the exact group you are coordinating with, including contact name, and describe what the result of the partnership is, and how more people are getting vaccinated based on the partnerships.

Reporting Deadline: The email must be sent to me by Friday, September 29 at 5:00pm
Recommendations for Success

• Create a calendar or add calendar dates to your personal calendar
• Create an email inbox where you save all emails communication from the Monthly Mini Challenges
• Be proactive and innovative when thinking about ways to fulfill the challenge requirements
• Ask MDHHS for input, advice, or ideas on how to complete these challenges
• Refer to the Toolkit!!
2017-2018 Flu Challenge Awards

1. **Self Report Survey Coverage Winners:** Institutions (small, medium, and large) with the most self-report surveys submitted
   - Institutions will still be categorized by size based on undergraduate population, but will not be used to calculate coverage

2. **MCIR Winners:** Largest number of flu vaccine doses administered and documented in MCIR, and the institution with the biggest improvement in the number of doses administered as compared to the 2016-2017 season
   - Even though the Flu Challenge target audience expands beyond undergraduate students, we will still be awarding institutions who are recording flu vaccinations in MCIR

3. **Late Season Effort Award:** Institution with the most doses administered and recorded in MCIR between December 9, 2017 and March 31, 2018.

4. **Innovative Champion Award:** Based on the Monthly Mini Challenge Competition
Campaign Rules and Overview

Using the Self-Report Survey

- Participants must submit their own information
- Participants can be provided with a computer following vaccination at school health center or other on-campus location
- Participants will be trusted on the honor system
- Participants who receive the flu vaccine off campus are encouraged to complete the self-report survey
- Participants can back enter their flu vaccine if they were not aware of the competition at the time of vaccination
Campaign Rules and Overview

**Michigan Care Improvement Registry (MCIR)**

- All enrolled schools must enter all flu vaccine doses administered by the health center into MCIR
  - State law requires health care providers to enter immunizations administered to every child born after December 31, 1993 and less than 20 years of age into MCIR
- You will not be eliminated if you do not enter doses into MCIR, although this is an immunization best practice
- Data obtained from MCIR will be used to determine additional award winners
Strategies for Clinical Updates and Processes

- **Standing Orders:** Use standing orders to create vaccine only visits. This way, the student does not need an individualized physician order for his/her vaccination. Standing orders authorize nurses and pharmacists to administer vaccines to all persons meeting certain criteria. Standing orders include:
  a. Protocol to identify patients
  b. Procedures to provide information on the risks and benefits of vaccine
  c. Process to record referrals or contraindications
  d. Approved vaccine delivery protocol
  e. Quality assurance and documentation procedures

- **Notify Patients:** Send reminder/recall letters to patients through the Michigan Care Improvement Registry (MCIR). Reminder/recall works and is a proven strategy to increasing immunization coverage levels (see case study 2).

- **Use Every Opportunity:** Use all patient encounters as opportunities to vaccinate, including site visits. Mild acute illness with or without fever is not a contraindication to flu vaccination.

- **Track Program:** Tracking your progress can be beneficial in multiple ways. Having data to describe how well efforts work can be useful as you plan for future years. Also, having information on successes and failures can allow you to adopt your strategies and provide feedback to necessary partners.

- **Pharmacists:** Is there a pharmacy that you think students often visit? Make sure to talk to them about the challenge, provide them with materials, and encourage them to enter all flu vaccinations administered in MCR.

Here are resources that you can use for implementing standing orders and sending reminders:

- Template for Standing Orders: [https://www.immunize.org/standing-orders/](https://www.immunize.org/standing-orders/)
- Tips sheets for conducting reminder/recall: [https://www.immunize.org/standing-orders/](https://www.immunize.org/standing-orders/)

ARE YOUR STUDENTS PROTECTED?

The Michigan Department of Health and Human Services (MDHHS) and the Centers for Disease Control and Prevention (CDC) encourage college health centers, medical practices, health departments, pharmacists, and other immunization providers to routinely assess the vaccine needs of their young adult patients and make a strong recommendation for vaccination.

You are in a unique position to help spread the word about recommended vaccines for college-age students, and MDHHS would like your help. This material in this toolkit will assist you in promoting the importance of annual flu vaccination to students.

College/university students are at risk of contracting the flu due to lifestyle factors. Close contact such as dorms, classrooms, public transportation, parties, and sports events make flu especially easy to spread at college. Further, lack of sleep, not eating healthy, and not exercising regularly can weaken the immune system, making these young adults more vulnerable to the flu.
1. Calvin College: Nursing Students as Campus Advocates

Calvin College engaged nursing students to be influencers on campus, and they also used it as a training opportunity. “Nursing students helped provide flu shots at each flu clinic of their clinical skills course.” They also invited friends to the clinics, and were campus advocates for the flu shot.

4. Wayne State University: Posters that Encourage Competition

Wayne State University created their own marketing materials that encouraged the competition between schools who were participating in the challenge. It is a good idea to create posters that are specific to campus activities, which shows that efforts were made to personalize the campaign which will interest more students. In the poster Wayne State University created there was information about completing the student self-report survey. Not all students who receive their flu shot will get them at the college health clinic, so it is a good idea to market the self-report survey on posters and other materials so that all students can complete the survey and have their flu shot count towards the overall competition!
While the toolkit is being finalized, here are some ideas for reaching off-campus populations, and other new target populations:

1. Sporting events: Share information at sporting events. You could hang posters, advertise the Flu Challenge on scoreboards, or even see what it would take to have Flu Challenge information put on the back of game day tickets!

2. Homecoming: Many alumni and fans come to campus during Homecoming weekend. This would be a great weekend to get information out about the Flu Challenge. You could share information during the parade, the game, social events, and through outgoing Homecoming materials.

3. Newspaper/Newsletters: Does your institution send out a newsletter or newspaper to alumni and current students/staff? You could write a short blurb about the Flu Challenge and have it added to the newsletter, this could reach a lot of off-campus adults!
Self Report Survey Link

https://www.surveymonkey.com/r/fluchallenge
Website

College and University Flu Vaccination Challenge Website:

- Schools who are enrolled
- Rules and Regulations
- Campaign Flyer
- Slides/Newsletters
- College and University Flu Vaccination Challenge Toolkit
  - Links to many flu resources
- Weekly Challenge Leaderboard
Sample Social Media

- Flu vaccine is now available! Make your appointment at [your health center’s website] and stop by health services to #GetVaccinated

- The best defense is a good offense. #GetVaccinated to #Fightflu

- College #lifehack: Get your flu vaccine early to provide you with protection the entire season

- Studies show immunity decreases as stress increases...let flu be one less worry during the semester #GetVaccinated

- Even healthy young adults can get sick with a vaccine-preventable disease. Listen to personal stories at: http://shotbyshot.org/tag/young-adult/

- Spread love. Not the flu. #GetVaccinated

- The #flu #vaccine is the best way to prevent the flu. #GetVaccinated

- There is nothing better than beating [rival school]. Help us beat the [rival school’s mascot] by getting your flu vaccine! #GetVaccinated

- Finals are just around the corner, don’t let flu keep you from your finals #GetVaccinated

- Are you competing? Help us beat our rivals by getting the flu shot today! #GetVaccinated
Promotional Tools

The 2017-2018 Campus Flu Vaccination Battle poster will be available on September 8, 2017.
VPD Personal Stories Posters

Why get a flu vaccine? 
Ask Niko Yaksich of Michigan.

Even healthy people can get the flu and it can be very serious. This year and every year, get vaccinated against the flu. It could save a life.

Niko’s story

In 2003, I lost my sister Alana to the flu. She was a perfectly healthy 5-year-old girl, and in the bloom of an eye she was gone. The day that she passed away, she had woken up with a fever and was feeling a little under the weather, but by the end of the day she was feeling much better and was running around with me. It was as though she had never been sick and was back to normal. She was not back to normal though. As I slept that night, my sister was being rushed to the hospital with a fever of 106 degrees. The doctors said that there was nothing they could do and that the flu had caused swelling in her brain. By the following night I had lost my sister and my family’s life would be changed forever.

www.aimtoolkit.org
www.alanasfoundation.org

Why get a flu vaccine? 
Ask the McCormick family of Michigan.

This year and every year, make sure you and your loved ones are vaccinated against the flu. It could save a life.

Ashley’s story

McCormick was a 23-year-old nanny. She came home from work on October 13, with a runny nose, sore throat, and headache. The next day she had a fever and went to urgent care. Her positive flu result came too late for Ashley to feel better, but on Christmas her fever was 103.8 degrees. She went to the emergency room with pneumonia. Ashley had H1N1 flu and became very sick. On December 27, Ashley died from the flu. Ashley’s life may have been saved if she had been vaccinated.

www.aimtoolkit.org
www.alanasfoundation.org

Why get a flu vaccine? 
Ask the Yaksich family of Michigan.

This year and every year, make sure you and your loved ones are vaccinated against the flu. It could save a life.

Alana’s story

On February 2, 2008, 5-year-old Alana Yaksich spent the day with her parents and brothers working chores, eating snacks and playing. Even with a low-grade fever from a recent sore throat, Alana enjoyed the afternoon feeling healthy and carefree with her family. That evening, Alana was rushed to the emergency room where her fever increased to 106-degrees. Within 24 hours of arriving at the local hospital, Alana died of the influenza complications that caused swelling and injury to her brain.

Flu is a serious disease that can be prevented through vaccination. Annually an average of 20,000 young children are hospitalized because of the flu. In a recent mild flu season, 127 children in the United States died of the flu, of which half were previously healthy, just like Alana.

www.aimtoolkit.org
www.alanasfoundation.org

Concept adapted with permission from Texas Children’s Hospital.
VPD Tear Pads

Tear Pads Available at the Clearinghouse!

www.healthymichigan.com
- Enter here to place order
- Immunizations

IM154 – Flu Vaccine Ask Emily – Tear Pad
IM155 – MenB Vaccine Ask Stillman Family – Tear Pad
IM156 – HPV Vaccine Ask Jennifer – Tear Pad
IM157 – Flu Vaccine Ask Yaksich Family – Tear Pad
Flu Posters

To order:
www.healthymichigan.com

- Enter
- Immunizations
- IM136: Seasonal Flu Packet (includes 5 copies of 8 different flyers)

http://www.aimtoolkit.org/health-care/general-public.php
Clinical Update
Flu Recommendations

2017-2018 Flu Season Recommendations:
◦ Everyone aged 6 months and older should receive the flu vaccine
◦ Live Attenuated Influenza Vaccine, FluMist®, is not recommended for use during the 2017-2018 flu season

2017-2018 New Influenza Vaccine Products and Licensure Changes
◦ Afluria® Quadrivalent (IIV4): Approved for persons 18 years of age and older
◦ FluBlok® Quadrivalent (RIV4): Approved for persons 18 years of age and older
◦ FluLaval® Quadrivalent (0.5mL dose) for children aged 6 months and older (previously licensed for 3 years and older)
◦ Afluria® (IIV3) is indicated for persons aged 5 years and older (previously 9 years and older)
Flu Handouts

Flu Handouts are available online:

• Influenza Vaccine Information Statement (VIS)
  ◦ Please note, the VIS did not change this year. The VIS dated 8/7/2015 should be used for the 2017-18 flu season.
• 2017-18 Seasonal Influenza Vaccine Presentation Chart
• A Quick Look at Inactivated Influenza Vaccines (IIV3, IIV3 High-Dose, allV3, IIV4, IIV4-ID)
• Who Needs Two Doses of 2017-18 Seasonal Influenza Vaccine?
• 2017-18 Influenza Screening for Persons who Report Egg Allergy
• Administering Influenza Vaccines (Intramuscular, Intranasal, and Intradermal)
• 2017-18 Influenza Vaccine Types with CVX and CPT Codes
• 2017-18 Vaccines for Children Influenza Vaccine

Off-site vaccination clinic tools

• Tools to Assist Satellite, Temporary, and Off-site Vaccination Clinics
  o Created by the National Adult and Influenza Immunization Summit Influenza Workgroup
  o Tools include: Checklist of Best Practices, Pledge for Organizations Implementing Vaccination Clinics, FAQ’s, and Ten Principles for Holding Safe Vaccination Clinics
  o All resources are available online at the Summit webpage: www.izsummitpartners.org
**Checklist of Best practices**

- Checklist of Best Practices for Vaccination Clinics Held at Satellite, Temporary, or Off-site Locations

### BEFORE THE CLINIC (Please complete each item before the clinic starts.)

**VACCINE SHIPMENT**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>N.A.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Vaccine was shipped directly to the facility/clinic site, where adequate storage is available. (Direct shipment is preferred for cold chain integrity.)

**VACCINE TRANSPORT (if it was not possible to ship vaccines directly to the facility/clinic site)**

<table>
<thead>
<tr>
<th>YES</th>
<th>STOP</th>
<th>NO</th>
<th>N.A.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Vaccines were transported using a portable vaccine refrigerator or qualified container and pack-out designed to transport vaccines within the temperature range recommended by the manufacturers (i.e., between 2-8°Celsius or 36-46°Fahrenheit for ALL refrigerated vaccines). Coolers available at general merchandise stores or coolers used to transport food are NOT ACCEPTABLE. See CDC's Vaccine Storage and Handling Toolkit for information on qualified containers and pack-outs: [http://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf](http://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf).

- The person transporting the vaccines confirmed that manufacturer instructions for packing configuration and proper conditioning of coolants were followed. (Your qualified container and pack-out should include packing instructions. If not, contact the company for instructions on proper packing procedures.)

- The person transporting the vaccines confirmed that all vaccines were transported in the passenger compartment of the vehicle (NOT in the vehicle trunk).

- A digital data logger with a buffered probe and a current and valid Certificate of Calibration Testing was placed directly with the vaccines and used to monitor vaccine temperature during transport.

- The amount of vaccine transported was limited to the amount needed for the workday.
Ten principles summary

- Ten Principles for Holding Safe Vaccination Clinics at Satellite, Temporary, or Off-site Locations
  - Summary of the Best Practices Checklist to hand out to all staff at the clinic

TEN PRINCIPLES FOR HOLDING SAFE VACCINATION CLINICS AT SATELLITE, TEMPORARY, OR OFF-SITE LOCATIONS

DURING ALL STAGES (PRE-CLINIC, DURING THE CLINIC, AND POST-CLINIC)

1. Keep vaccines at the correct temperature at all times using proper procedures for vaccine transport, handling and storage. Document temperature monitoring at appropriate intervals during all stages. For further guidance: http://www.cdc.gov/vaccines/hcp/admin/storage/contents/storage-handling-toolkit.pdf.

PRE-CLINIC:

2. Have vaccine shipped directly to the site. If direct shipment is not possible, transport vaccine using correct storage and handling guidelines.

3. Train staff to perform CPR and treat medical emergencies, including anaphylaxis. Ensure supplies are on site, including an emergency medical kit and infection control supplies, as well as enough Vaccine Information Statements (VIS).

DURING THE CLINIC:

4. Always check for medical contraindications and allergies before vaccinating anyone. Provide VISs for all patients or guardians.

5. Only use vaccines that are not damaged, not expired, at the correct temperature, and prepared using aseptic technique.

6. Follow manufacturers’ instructions for injection dose, site, and route.

7. Follow manufacturers’ instructions and Advisory Committee on Immunization Practices guidelines for correct age and intervals (for vaccines that require more than one dose).

8. Follow safe injection practices, including using a new needle and syringe for every injection. Dispose of all sharps in a sharps container.

9. Document every vaccination and give patients a copy.

POST-CLINIC:

10. Keep patient information secure and private. Record vaccinations in the Immunization Information System (IIS), if available.

For further guidance, refer to the full checklist: https://www.izsummitpartners.org/content/uploads/2017/02/IIS-Vaccination-Clinic-Checklist_v2.pdf

***This document is NOT intended to replace use of the checklist.***
Moving Forward
## School Divisions

**Small Schools**
- Calvin College
- Hope College
- Rochester College
- Southwestern Michigan College

**Medium Schools**
- Central Michigan University
- Eastern Michigan University
- Grand Valley State University
- Oakland University
- Wayne State University
- Western Michigan University

**Large Schools**
- University of Michigan
Calendar Dates

**Important Dates:**
- September 19, 2017: College Flu Challenge Press Release
- October 18, 2017: College Flu Challenge Updates Newsletter
- November 8, 2017: College Flu Challenge Updates Webinar
- December 3-9, 2017: National Influenza Vaccination Week
- December 8, 2017: Self-Report Survey Closes
- December 13, 2017: College Flu Challenge Wrap-up Newsletter – Winners Announced!
- May 17, 2018: Michigan Advisory Committee on Immunizations/Flu Advisory Board Meeting
Calendar Dates

Award Dates:

• Overall Flu Challenge Winners: August 1 through December 8, 2017
• MCIR Winners: August 1 through December 8, 2017
• Most Improved Award: August 1, 2017 through March 31, 2018
• Late Season Award: December 9, 2017 through March 31, 2018
• Innovative Champion Awards: September – December Monthly Mini Challenge
Co-Administration Data

SARAH CLARK - CHEAR
Flu Vaccine as a Facilitator of Adult Vaccination:

The College Flu Challenge

Child Health Evaluation and Research (CHEAR) Center
September 6, 2017
Background

• MDHHS has sponsored the College Flu Challenge for several years
• Target population: young adults who typically may not receive flu vaccine
• KEY QUESTION: Are there secondary benefits to the Flu Challenge?
2016-17 College Flu Challenge

• Analysis of data from 13 college health centers
• Focus on official Challenge timeframe (Aug 1, 2016, to March 31, 2017)
2016-17 College Flu Challenge

• Analysis shows the College Flu Challenge is:
  • Not just for college kids!
## Adults receiving flu vaccine, by age group

<table>
<thead>
<tr>
<th>Institution</th>
<th>N</th>
<th>18-26 yrs</th>
<th>27-59 yrs</th>
<th>60+ yrs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calvin College</td>
<td>1350</td>
<td>81.9%</td>
<td>14.9%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Eastern Michigan</td>
<td>597</td>
<td>39.4%</td>
<td>46.4%</td>
<td>14.2%</td>
</tr>
<tr>
<td>Ferris State</td>
<td>530</td>
<td>24.0%</td>
<td>55.1%</td>
<td>20.9%</td>
</tr>
<tr>
<td>Grand Valley State</td>
<td>200</td>
<td>94.5%</td>
<td>3.5%</td>
<td>2.0%</td>
</tr>
<tr>
<td>Hope College</td>
<td>903</td>
<td>98.9%</td>
<td>0.7%</td>
<td>0.4%</td>
</tr>
<tr>
<td>Kalamazoo College</td>
<td>315</td>
<td>97.8%</td>
<td>1.9%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Lake Superior State</td>
<td>224</td>
<td>50.4%</td>
<td>33.0%</td>
<td>16.5%</td>
</tr>
<tr>
<td>Michigan State</td>
<td>1556</td>
<td>77.1%</td>
<td>22.6%</td>
<td>0.3%</td>
</tr>
<tr>
<td>Northern Michigan</td>
<td>1084</td>
<td>37.3%</td>
<td>37.0%</td>
<td>25.7%</td>
</tr>
<tr>
<td>Oakland</td>
<td>658</td>
<td>79.3%</td>
<td>18.5%</td>
<td>2.1%</td>
</tr>
<tr>
<td>Univ of Michigan</td>
<td>3353</td>
<td>60.4%</td>
<td>29.4%</td>
<td>10.3%</td>
</tr>
<tr>
<td>Wayne State</td>
<td>2326</td>
<td>71.5%</td>
<td>26.5%</td>
<td>2.1%</td>
</tr>
<tr>
<td>Western Michigan</td>
<td>1981</td>
<td>27.3%</td>
<td>37.9%</td>
<td>34.8%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>15077</td>
<td>61.8%</td>
<td>27.1%</td>
<td>11.0%</td>
</tr>
</tbody>
</table>
2016-17 College Flu Challenge

Analysis shows the College Flu Challenge is:

• *Not just for college kids!*

• *Not just flu vaccine!*
### Adults with co-administered vaccine

<table>
<thead>
<tr>
<th>Institution</th>
<th>Flu Vaccine N</th>
<th>Another Vaccine N</th>
<th>on Same Day %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calvin College</td>
<td>1350</td>
<td>268</td>
<td>19.9%</td>
</tr>
<tr>
<td>Eastern Michigan</td>
<td>597</td>
<td>45</td>
<td>7.5%</td>
</tr>
<tr>
<td>Ferris State</td>
<td>530</td>
<td>13</td>
<td>2.5%</td>
</tr>
<tr>
<td>Grand Valley State</td>
<td>200</td>
<td>25</td>
<td>12.5%</td>
</tr>
<tr>
<td>Hope College</td>
<td>903</td>
<td>77</td>
<td>8.5%</td>
</tr>
<tr>
<td>Kalamazoo College</td>
<td>315</td>
<td>25</td>
<td>7.9%</td>
</tr>
<tr>
<td>Lake Superior State</td>
<td>224</td>
<td>2</td>
<td>0.9%</td>
</tr>
<tr>
<td>Michigan State</td>
<td>1556</td>
<td>157</td>
<td>10.1%</td>
</tr>
<tr>
<td>Northern Michigan</td>
<td>1084</td>
<td>86</td>
<td>7.9%</td>
</tr>
<tr>
<td>Oakland</td>
<td>658</td>
<td>22</td>
<td>3.3%</td>
</tr>
<tr>
<td>Univ of Michigan</td>
<td>3353</td>
<td>570</td>
<td>17.0%</td>
</tr>
<tr>
<td>Wayne State</td>
<td>2326</td>
<td>56</td>
<td>2.4%</td>
</tr>
<tr>
<td>Western Michigan</td>
<td>1981</td>
<td>65</td>
<td>3.3%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>15077</strong></td>
<td><strong>1411</strong></td>
<td><strong>9.4%</strong></td>
</tr>
</tbody>
</table>
2016-17 College Flu Challenge

Co-Administered vaccines (N=2052)

• Td/Tdap (516, 25%)
• HPV (390, 19%)
• Travel vax (366, 18%)
• Hepatitis A (276, 13%)
• Hepatitis B (105, 5%)
• Men AWCY (94, 5%)
• Men B (33, 2%)
• MMR (64, 3%)
• PPSV23 (56, 3%)
• PCV13 (50, 2%)
• Varicella (51, 2%)
• Zoster (18, 1%)
2016-17 College Flu Challenge

Analysis shows the College Flu Challenge is:

• *Not just for college kids!*

• *Not just flu vaccine!*

• *Not just the day of flu vaccination!*
## Adults w/another vaccine on a later date

<table>
<thead>
<tr>
<th>Institution</th>
<th>Flu Vaccine N</th>
<th>Another Vaccine N</th>
<th>on Later Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calvin College</td>
<td>1350</td>
<td>215</td>
<td>15.9%</td>
</tr>
<tr>
<td>Eastern Michigan</td>
<td>597</td>
<td>18</td>
<td>3.0%</td>
</tr>
<tr>
<td>Ferris State</td>
<td>530</td>
<td>11</td>
<td>2.1%</td>
</tr>
<tr>
<td>Grand Valley State</td>
<td>200</td>
<td>17</td>
<td>8.5%</td>
</tr>
<tr>
<td>Hope College</td>
<td>903</td>
<td>82</td>
<td>9.1%</td>
</tr>
<tr>
<td>Kalamazoo College</td>
<td>315</td>
<td>31</td>
<td>9.8%</td>
</tr>
<tr>
<td>Lake Superior State</td>
<td>224</td>
<td>2</td>
<td>0.9%</td>
</tr>
<tr>
<td>Michigan State</td>
<td>1556</td>
<td>107</td>
<td>6.9%</td>
</tr>
<tr>
<td>Northern Michigan</td>
<td>1084</td>
<td>81</td>
<td>7.5%</td>
</tr>
<tr>
<td>Oakland</td>
<td>658</td>
<td>19</td>
<td>2.9%</td>
</tr>
<tr>
<td>Univ of Michigan</td>
<td>3353</td>
<td>364</td>
<td>10.9%</td>
</tr>
<tr>
<td>Wayne State</td>
<td>2326</td>
<td>98</td>
<td>4.2%</td>
</tr>
<tr>
<td>Western Michigan</td>
<td>1981</td>
<td>85</td>
<td>4.3%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>15077</strong></td>
<td><strong>1130</strong></td>
<td><strong>7.5%</strong></td>
</tr>
</tbody>
</table>
2016-17 College Flu Challenge

Vaccines administered on date later in season (N=2628):

- HPV (519, 20%)
- Td/Tdap (496, 19%)
- Hepatitis A (312, 12%)
- Hepatitis B (311, 12%)
- Travel vax (293, 11%)
- Men B (122, 5%)
- Men AWCY (46, 2%)
- PCV13 (126, 5%)
- PPSV23 (103, 4%)
- MMR (100, 4%)
- Varicella (81, 3%)
- Zoster (62, 2%)
2016-17 College Flu Challenge

Location of vaccines administered later in season:

- College health center (1732, 66%)
  - Top vaccines: HPV (21%), Td/Tdap (17%), Travel (14%)
- Primary Care (585, 22%)
- Pharmacy (51, 2%)
- LHD (83, 3%)
- Other (177, 7%)
Conclusions

• College Flu Challenge may have broader impact than people realize

• College health centers can maximize their immunization impact by:
  • Including students and staff
  • Co-administering other vaccines on same day as flu shot
  • Scheduling return visits to the health center or encouraging visits to primary care, pharmacies to seek additional vaccines
Conclusions

• College health centers may want to seek technical assistance from MDHHS around
  • Using MCIR to assess what vaccines are due
  • Educational materials about adult vaccination
  • Vaccine storage & handling tips
• Sharing lessons learned across health centers may inspire new strategies to broaden the impact of the Flu Challenge
Project Team at the CHEAR Center:
Sarah Clark
Hannah Jary
Kevin Dombkowski

For more information, contact Sarah Clark
saclark@umich.edu
Alana’s Foundation

JOANNA YAKSICH
2017-2018
NATIONAL College/University
Flu Vaccination Challenge Pilot

MDHHS Kick-Off Webinar
September 6, 2017
12 noon pm - 1 pm EDT
ENROLLED SCHOOLS

7 STATES
- Arizona
- Kentucky
- Michigan
- Nevada
- New York
- Washington
- Wisconsin

16 SCHOOLS

SMALL (< 10,000)
- Adelphi University
- Cornish College of the Arts
- Hope College
- Le Moyne College
- PRATT Institute
- SUNY Fredonia
- SUNY Ulster
- Transylvania University

MEDIUM (10,001 - 25,000)
- City College of New York
- Grand Valley State University
- Northern Arizona University
- University of Nevada, Reno
- Wayne State University
- Western Michigan University

LARGE (25,000+)
- University of Nevada, Las Vegas
- University of Wisconsin

There is still time to participate! Please let Jalyn know if you are interested.
SELF-REPORT SURVEY

DATES OPEN
September 1, 2017 - December 8, 2017

LINK for ALL MICHIGAN Schools
https://www.surveymonkey.com/r/fluchallenge

INFORMATION SHARING
MDHHS will share information for MI schools participating in the NATIONAL Challenge
COMMUNICATION AND KEY DATES

COMPETITION DATES:
- August 1 - December 8, 2017 (coincide with National Influenza Vaccination Week)

BI-WEEKLY E-MAIL UPDATES:
- To communicate summary of participants standing

NEWSLETTERS:
- October 10, 2017
- November 7, 2017

WEBINARS:
- December 12, 2017 - 12 pm - 1 pm EST - WINNERS ANNOUNCED
VACCINE ASSISTANCE GRANTS

USE:
- To purchase vaccine for UNINSURED/UNDERINSURED students only

AWARDS BASED ON:
- Available funds at time of request
- MUST be a participant in the MICHIGAN OR NATIONAL College/University Flu Challenge
VACCINE ASSISTANCE GRANTS

VACCINATION GRANT REQUESTS

If you are a non-profit or are a college/university enrolled in the Michigan Department of Health and Human Services Flu Vaccination Challenge and are in need of assistance in purchasing flu vaccine for use with underserved/underinsured populations, Alanas Foundation accepts grant requests from qualified applicants that meet our requirements.

To be considered for a grant, please submit a letter or brief stating your situation and/or need along with a correct completed application. Grant applications are accepted year round. Please keep in mind however, Alanas Foundation cannot meet every request and grants may be prioritized by need. Click below for link to appropriate grant application.

All grant request applications are kept confidential. Alanas Foundation reserves the right and the applicant hereby grants permission to share all information provided by the applicant to third-parties on an as-needed basis. NOTE: Grants issued must be used in the flu season in which they are applied.

NON-PROFITS APPLICATION

COLLEGE/UNIVERSITY APPLICATION
Alana’s Foundation Website: http://www.alanasfoundation.org/national-challenge
- Rules/Regulations
- Challenge Poster
  (NOTE: The MI version will not be posted on the website. To request a copy, please email info@alanafoundation.org)
- National Toolkit
- “Why get vaccinated” ~ personal stories
PERSONAL STORIES

Why get a flu vaccine?
Ask the Yaksich family of Michigan.

¿Por qué vacunarse contra la gripe?
Pregúntale a Niko Yaksich de Michigan.

Why get a flu vaccine?
Ask the McCormick family of Michigan.

English and Spanish versions available:
http://www.aimtoolkit.org/health-care/general-public.php
~ For more information OR questions ~
www.AlanasFoundation.org
www.FaceBook.com/AlanasFoundation
info@AlanasFoundation.org
Questions?

Jalyn Ingalls, MA
Influenza Outreach Coordinator
IngallsJ@Michigan.gov
517-284-4874