**HEALTHCARE PROVIDERS**

## Healthcare providers = pediatricians, family physicians, nurse practitioners, or physician assistants

1. How familiar do you think *[fill in with type of provider]* are with the current Advisory Committee on Immunization Practices guidelines for administering adolescent vaccines?
   * What about for HPV vaccine?
2. To what extent do you think [fill in] are following these guidelines for adolescent vaccines?
   * Starting age for recommending vaccines, any differences by gender of patient, etc.?
   * What about for HPV vaccine? Any differences?
   * Recommending HPV at the same time as Tdap and meningitis?
   * What about how strongly they recommend each adolescent vaccine?
3. Why do you think some *[fill in]* are **not** following the guidelines for HPV vaccination or giving strong recommendations?
   * Reasons for not routinely recommending HPV vaccine?
   * Reasons for recommending it at older ages? Only for girls?
   * Reasons for not recommending HPV at the same time as Tdap and meningitis?
   * Disagreement with ACIP guidelines?
   * Lack of standing clinic protocols?
   * Time?
   * Discomfort in discussing?
   * Others?
4. What **barriers** to recommending HPV vaccine at ages 11-12 for all patients do *[fill in]* experience?
   * Lack of effective patient education materials?
   * Support from clinic leadership?
   * Organizational or infrastructure barriers?
   * Health information systems?
   * Time pressures?
   * Discomfort in discussing?
   * Others?
5. What types of practice supports do you think would be helpful for *[fill in]* to facilitate recommendation of HPV vaccine and other adolescent vaccines?
   * Integration of EHR with TennIIS (the vaccine registry formerly called TWIS)?
   * Automated prompts to remind nurse/provider to check vaccine status and recommend if due?
   * Reminder systems for patients to get 2nd/3rd doses?
   * Standing orders for nurses to be able to offer vaccine directly?
   * Protocol for every visit to be a potential vaccine visit?
   * Patient education materials - including multimedia materials?
   * Others?
6. What kinds of continuing education for *[fill in]* would you recommend to increase recommendation and uptake of HPV vaccine?
   * Which specific topics/issues to address?
   * Which modes of training would work best (online, in person, etc.)?
   * How could providers be motivated to participate?
7. How much interest do you think there would be among *[fill in]* to take part in research studies or quality improvement projects aimed to increase HPV vaccine uptake in their practices?
8. Is there anything else you would like to share or think we should consider related to increasing HPV vaccine uptake in pediatric care settings?

**PRACTICE ADMINISTRATORS**

1. What are your position and your responsibilities in the practice?
2. How does your role relate to immunizations in the practice?
3. To what extent do you think providers in your practice are following the current Advisory Committee on Immunization Practices guidelines for administering adolescent vaccines?

* What about for HPV vaccine?
* Starting age for recommending vaccines, any differences by gender of patient, etc.?
* What about for HPV vaccine? Any differences?
* Recommending HPV at the same time as Tdap and meningitis?
* What about how strongly they recommend each adolescent vaccine?

1. Why do you think some providers are **not** following the guidelines for HPV vaccination or giving strong recommendations?
2. Has your practice done any quality improvement efforts related to adolescent vaccines, such as reviewing vaccination rates in your practice?

* If yes, what did you do and what were the results?
  + Did your practice do anything in response to the results to improve rates?
* If no, does your practice do anything to document or track vaccine uptake?
* Do you all discuss vaccine recommendations and/or uptake at staff meetings?

1. What **barriers** exist for providers to recommend HPV vaccine at ages 11-12 for all patients?
   * Lack of effective patient education materials?
   * Support from clinic leadership?
   * Organizational or infrastructure barriers?
   * Health information systems?
   * Time pressures?
   * Discomfort in discussing?
   * Others?
2. What types of practice supports do you think would be helpful for providers to facilitate recommendation of HPV vaccine and other adolescent vaccines?
   * Integration of EHR with TennIIS (the vaccine registry formerly called TWIS)?
   * Automated prompts to remind nurse/provider to check vaccine status and recommend if due?
   * Reminder systems for patients to get 2nd/3rd doses?
   * Standing orders for nurses to be able to offer vaccine directly?
   * Protocol for every visit to be a potential vaccine visit?
   * Patient education materials - including multimedia materials?
   * Others?
3. What kinds of continuing education for providers would you recommend to increase recommendation and uptake of HPV vaccine?
   * Which specific topics/issues to address?
   * Which modes of training would work best (online, in person, etc.)?
   * How could providers be motivated to participate?
4. How much interest do you think there would be for your practice and other practices to take part in research studies or quality improvement projects aimed to increase HPV vaccine uptake?
5. Is there anything else you would like to share or think we should consider related to increasing HPV vaccine uptake in pediatric care settings?

**PUBLIC HEALTH DEPARTMENT EMPLOYEES**

1. How familiar do you think providers are with the current Advisory Committee on Immunization Practices guidelines for administering adolescent vaccines?
   * What about for HPV vaccine?
2. To what extent do you think providers in public health clinics and private clinics are following the current Advisory Committee on Immunization Practices guidelines for administering adolescent vaccines?

* What about for HPV vaccine?
* Starting age for recommending vaccines, any differences by gender of patient, etc.?
* What about for HPV vaccine? Any differences?
* Recommending HPV at the same time as Tdap and meningitis?
* What about how strongly they recommend each adolescent vaccine?

1. Has your agency done any quality improvement efforts related to adolescent vaccines, such as reviewing vaccination rates in your clinics?
   * If so, please describe. What were the results?
   * Did your agency do anything in response to the results to improve rates?
   * What types of outreach does your agency do with providers in the community?
2. Why do you think some providers are **not** following the guidelines for HPV vaccination or giving strong recommendations?
3. What **barriers** exist for providers to recommend HPV vaccine at ages 11-12 for all patients?
   * Lack of effective patient education materials?
   * Support from clinic leadership?
   * Organizational or infrastructure barriers?
   * Health information systems?
   * Time pressures?
   * Discomfort in discussing?
   * Others?
4. What types of practice supports do you think would be helpful for providers to facilitate recommendation of HPV vaccine and other adolescent vaccines?
   * Integration of EHR with TennIIS (the vaccine registry formerly called TWIS)?
   * Automated prompts to remind nurse/provider to check vaccine status and recommend if due?
   * Reminder systems for patients to get 2nd/3rd doses?
   * Standing orders for nurses to be able to offer vaccine directly?
   * Protocol for every visit to be a potential vaccine visit?
   * Patient education materials - including multimedia materials?
   * Others?
5. What kinds of continuing education for providers would you recommend to increase recommendation and uptake of HPV vaccine?
   * Which specific topics/issues to address?
   * Which modes of training would work best (online, in person, etc.)?
   * How could providers be motivated to participate?
6. How much interest do you think there would be for your agency to take part in research studies or quality improvement projects aimed to increase HPV vaccine uptake?
7. Is there anything else you would like to share or think we should consider related to increasing HPV vaccine uptake in pediatric care settings?

**PROFESSIONAL ASSOCIATIONS**

1. How familiar do you think *[fill in providers in your profession]* are with the current Advisory Committee on Immunization Practices guidelines for administering adolescent vaccines?
   * What about for HPV vaccine?
2. To what extent do you think *[fill in profession]* are following the current Advisory Committee on Immunization Practices guidelines for administering adolescent vaccines?

* What about for HPV vaccine?
* Starting age for recommending vaccines, any differences by gender of patient, etc.?
* What about for HPV vaccine? Any differences?
* Recommending HPV at the same time as Tdap and meningitis?
* What about how strongly they recommend each adolescent vaccine?

1. Why do you think some *[fill in profession]* are **not** following the guidelines for HPV vaccination or giving strong recommendations?
2. What **barriers** exist for *[fill in profession]* to recommend HPV vaccine at ages 11-12 for all patients?
   * Lack of effective patient education materials?
   * Support from clinic leadership?
   * Organizational or infrastructure barriers?
   * Health information systems?
   * Time pressures?
   * Discomfort in discussing?
   * Others?
3. Has your professional association done any efforts related to adolescent vaccines, such as quality improvement, provider education, sharing resources, community outreach, etc.?
   * If so, please describe.
   * What were the outcomes (of each effort)?
   * Do you plan to do anything in response to these efforts?
4. What types of practice supports do you think would be helpful for *[fill in profession]* to facilitate recommendation of HPV vaccine and other adolescent vaccines?
   * Integration of EHR with TennIIS (the vaccine registry formerly called TWIS)?
   * Automated prompts to remind nurse/provider to check vaccine status and recommend if due?
   * Reminder systems for patients to get 2nd/3rd doses?
   * Standing orders for nurses to be able to offer vaccine directly?
   * Protocol for every visit to be a potential vaccine visit?
   * Patient education materials - including multimedia materials?
   * Others?
5. What kinds of continuing education for *[fill in profession]* would you recommend to increase recommendation and uptake of HPV vaccine?
   * Which specific topics/issues to address?
   * Which modes of training would work best (online, in person, etc.)?
   * How could providers be motivated to participate?
6. How much interest do you think there would be for your association to be involved or partner with research studies or quality improvement projects aimed to increase HPV vaccine uptake?
7. Is there anything else you would like to share or think we should consider related to increasing HPV vaccine uptake in pediatric care settings?

**HEALTHCARE PAYERS (Public and private insurers)**

1. How familiar do you think providers are with the current Advisory Committee on Immunization Practices guidelines for administering adolescent vaccines?

* What about for HPV vaccine

1. To what extent do you think providers in your payer network are following the current Advisory Committee on Immunization Practices guidelines for administering adolescent vaccines?

* What about for HPV vaccine?
* Starting age for recommending vaccines, any differences by gender of patient, etc.?
* What about for HPV vaccine? Any differences?
* Recommending HPV at the same time as Tdap and meningitis?
* What about how strongly they recommend each adolescent vaccine?

1. Has your agency done any quality improvement efforts related to adolescent vaccines, such as reviewing vaccination rates among your providers?
   * If so, please describe. What were the results?
   * Did your organization do anything in response to the results to improve rates?
   * What types of outreach does your organization do with providers in the community?
2. Why do you think some providers in your payer network are **not** following the guidelines for HPV vaccination or giving strong recommendations?
3. What **barriers** exist for providers in your payer network to recommend HPV vaccine at ages 11-12 for all patients?
   * Lack of effective patient education materials?
   * Support from clinic leadership?
   * Organizational or infrastructure barriers?
   * Health information systems?
   * Time pressures?
   * Discomfort in discussing?
   * Others?
4. What types of practice supports do you think would be helpful for providers to facilitate recommendation of HPV vaccine and other adolescent vaccines?
   * Integration of EHR with TennIIS (the vaccine registry formerly called TWIS)?
   * Automated prompts to remind nurse/provider to check vaccine status and recommend if due?
   * Reminder systems for patients to get 2nd/3rd doses?
   * Standing orders for nurses to be able to offer vaccine directly?
   * Protocol for every visit to be a potential vaccine visit?
   * Patient education materials - including multimedia materials?
   * Others?
5. What kinds of continuing education for providers would you recommend to increase recommendation and uptake of HPV vaccine?
   * Which specific topics/issues to address?
   * Which modes of training would work best (online, in person, etc.)?
   * How could providers be motivated to participate?
6. How much interest do you think there would be for your agency to take part in research studies or quality improvement projects aimed to increase HPV vaccine uptake?
7. Is there anything else you would like to share or think we should consider related to increasing HPV vaccine uptake in pediatric care settings?