

Shifting the Preventive Care Paradigm: A QI Initiative to Increase Pneumococcal Vaccination Uptake in an Academic HIV Clinic

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BACKGROUND

People with HIV face disproportionate risk of invasive pneumococcal disease, yet vaccination rates remain low despite strong CDC/ACIP recommendations.

The traditional model is flawed:

- Alert fatigue – clinicians reflexively dismiss EMR best-practice alerts
- Fragmented workflow – calculating eligibility mid-visit is unrealistic
- Passive wait time – an untapped window for patient engagement

This initiative removed disruptive alerts and shifted decision support to pre-visit nursing screening and patient-led education during waiting-room time — a high-yield, low-burnout model.

PURPOSE

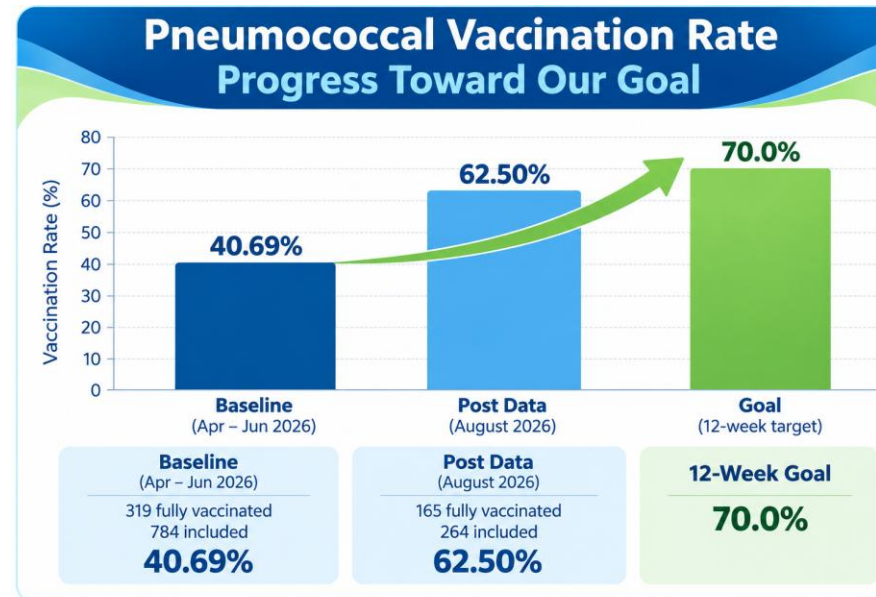
Shift from clinician-focused EMR alerts to a coordinated, team-based workflow pairing patient education with multidisciplinary execution — raising pneumococcal vaccination coverage among eligible HIV patients from a baseline of 40% to a target of 70% within 3 months, without increasing clinician burden

METHODS

PDSA framework, 12 weeks, 3 steps:

1. Pre-visit screening – Nursing uses a validated algorithm to identify vaccine-eligible patients and pre-pends a standing order in the EMR.
2. Patient empowerment – During intake, patients receive an evidence-based FAQ sheet addressing misconceptions and encouraging them to receive the vaccine.
3. Administration – Provider discusses vaccine with patient, signs the pre-pended order; nursing administers the vaccine before discharge.

RESULTS



CONCLUSIONS

By replacing disruptive alerts with an integrated, team-based workflow and leveraging patient literacy to drive clinical empowerment, this initiative strives to elevate pneumococcal vaccination coverage from a baseline of 40.7% to 70% in just 12 weeks.

- Team-based execution – hit targets without added burnout
- Nursing pre-visit screening – orders pre-pended before the visit
- Patient empowerment – wait time becomes active education
- Scalable – adaptable to many preventive care services (other vaccines, cancer screening, PrEP, Doxy-PEP)

FREQUENTLY ASKED QUESTIONS: PNEUMOCOCCAL VACCINE



Q: What is pneumococcal disease, and why is it serious?

A: It is a severe infection caused by a bacteria (*Streptococcus pneumoniae*). While it frequently causes severe **pneumonia** (lung infection), it can also invade other parts of your body leading to serious infections involving the blood and the brain.

Q: Why do people living with HIV need this vaccine more than others?

A: Living with HIV alters how your immune system fights off bacterial infections. Because of this, adults living with HIV face a risk of contracting severe pneumococcal disease that is **20 to 50 times higher** than those without HIV.

REFERENCES

