

Utilizing Preventive Medicine Residents to Optimize Vaccinations in Long Island Veterans

Namita Akolkar MD¹, Danielle Craigg MD¹, Lisa Fisher MD²

¹Stony Brook University Hospital, Stony Brook, USA. ²Northport VA Medical Center, Northport, USA

Abstract

Background: Pneumonia vaccination in high-risk populations and patients >65 years old has increased over the last 20 years, to >60%. In Long Island, NY Northport VA Hospital is the flagship of the region, and pneumonia vaccination data from 2021 showed vaccination rate of 68.55% verses national standard of 83.55% with a goal of 85%. Invasive pneumococcal disease (IPD) and pneumococcal pneumonia can be prevented with pneumonia vaccines. We aim to increase vaccination of high-risk and patients >65 years old within Northport's catchment region within four-months.

Design:

A biweekly preventive medicine clinic with three community locations with the aim to vaccinate as many veterans as possible. Outreach, scheduling, clinic triage, vaccine administration, and referrals for other preventive services performed by preventive medicine residents. Motivational Interviewing techniques were used in outreach calls and clinic visits to encourage behavioral change.

Results:

With an outreach list of >7,000 patients, 506 patients were contacted and counseled on pneumonia vaccination, 130 patients scheduled for clinic visits, 92 refused vaccinations, 73 veterans had received their vaccine outside the VA and 56 pneumonia vaccines were given in our clinic. Many of the 506 patients contacted via outreach were left voicemails or messages with family members of which they chose not to follow up with. Of the patients seen in clinic 56 patients came into clinic in the planning phase and left in the action phase; five patients came into clinic in the precontemplation phase and three left with appointments scheduled for future vaccination and two left in the contemplation stage.

Conclusion:

Outreach and clinical visits implementing motivational interviewing techniques allows for optimized patient vaccinations, enhanced information sharing, increased primary care retention, and increasing the visibility of preventive medicine among patients and colleagues with the VA medical system.