

Respondent



46

Elizabeth Maguire



30:55

Time to complete



1. Please provide your name, position title, and contact information. *

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2. Is this submission an idea for a Promising Practice or existing Promising Practice? *

☐ Idea for a Promising Practice

☒ Existing Promising Practice

3. What is the name of your Promising Practice? *

3-Step Plan for Reaching Vaccine Acceptance

4. What type of Veterans does this practice serve? *

☐ Rural

☐ Urban

☒ Both

5. How does this practice promote vaccine acceptance? *

Drawing on our QUERI Rapid Response Team interviews and survey data with Veterans, and collaborating with the National Center for Health Promotion and Disease Prevention (NCP), we have created a 3-Step Plan that builds on patient-centered communication principles while also being grounded in the lived experiences of Veterans who express vaccine hesitancy. These 3 Steps are: 1) Ask questions, and respond to concerns using the five steps of patient-centered communication; 2) Draw on altruistic reasons for getting the vaccine, emphasizing benefits to family, friends and society. Use Veterans' own words from our interviews to emphasize these points. 3) the VA and VA providers are trusted sources of information—your conversations matter. Taking the time to honor Veterans' concerns and address them will pay off in the long run. Please see resources on Teams: 3 step plan for reaching vaccine acceptance: <https://teams.microsoft.com/l/file/359802A3-1160-4A0C-AC29-1D0C4D1BB114?tenantId=e95f1b23-abaf-45ee-821d-b7ab251ab3bf&fileType=pdf&objectUrl=https%3A%2F%2Fdvagov.sharepoint.com%2Fsites%2FSCALE%2F3a89-4b92-956a-1733701dc3e8> Infographic on Interview findings Bridge QUERI RRT: <https://teams.microsoft.com/l/file/47AB641B-2B64-413F-9A09-7BB9A4898B27?tenantId=e95f1b23-abaf-45ee-821d-b7ab251ab3bf&fileType=pdf&objectUrl=https%3A%2F%2Fdvagov.sharepoint.com%2Fsites%2FSCALE%2F3a89-4b92-956a-1733701dc3e8> and Infographic on Survey findings from Bridge QUERI RRT: <https://teams.microsoft.com/l/file/BA72E456-4985-412A-8EEE-D229D667240B?tenantId=e95f1b23-abaf-45ee-821d-b7ab251ab3bf&fileType=pdf&objectUrl=https%3A%2F%2Fdvagov.sharepoint.com%2Fsites%2FSCALE%2F3a89-4b92-956a-1733701dc3e8>

6. What are the specific steps you took, or would take, to implement your practice and the timeline/timeframe for each? *

We have presented our evidence for this approach, as well as the suggested 3-Step Plan for one-on-one conversations to our Veteran Stakeholder Council, as well as at national, regional and local levels. We have presented the data to the Healthcare Operations Center, to the VISN 1 Communications Briefing to Veteran and Congressional Stakeholders, and to our local facility Chief of Staff and Deputy Nurse Executive, will follow-up meetings with Veterans at facility and state town halls. We have a planned national Chiefs of Staff presentation, both the QUERI RRT and NCP leadership, on May 19. Other VISN presentations are being scheduled. In each presentation and discussion, we encourage the use of the 3-Step Plan.

7. What departments are involved in implementing your practice? *

Each facility needs to decide who is going to have the 1:1 conversations. As Veterans have indicated that they trust their VA providers, we encourage facilities to give time to their providers to have these conversations. These providers may be from primary care, geriatrics, mental health, or another service. We recommend reaching out to Veterans who are known to have fair or poor overall or mental health because these Veterans are most unsure about getting the vaccine (see Infographics from the QUERI RRT project, as well as Step 1: Ask Questions).

8. What are the costs associated with your practice? *

The only cost associated with this practice is a provider's time in having a 1:1 conversation with a Veteran, to learn about their health and their vaccine status, and to learn why they are not willing to accept being vaccinated at this time. Following these questions, providers will be able to use the NCP materials on Moving to Acceptance and Debunking Common Myths of the Vaccines to address specific concerns.

9. What primary metric data is tracked and collected to determine your practice's success? *

The primary metric is an increase in Veterans' vaccination rates at the facility.

10. What are the potential risks or barriers of implementing your practice and the proposed mitigations? *

The only risk to the 3-Step Plan is that Veterans may not want to discuss why they are currently vaccine hesitant. However, we feel that, given that they are talking to a trusted provider, they may still be willing to have a conversation, even if they are not ready to move to acceptance. Moving to acceptance is going to take time, and potentially will involve follow-up conversations. Providers should know that more than one conversation may be needed to help a Veteran move to vaccine acceptance.