

Our Best Shot: The Importance of Vaccines for Older Adults



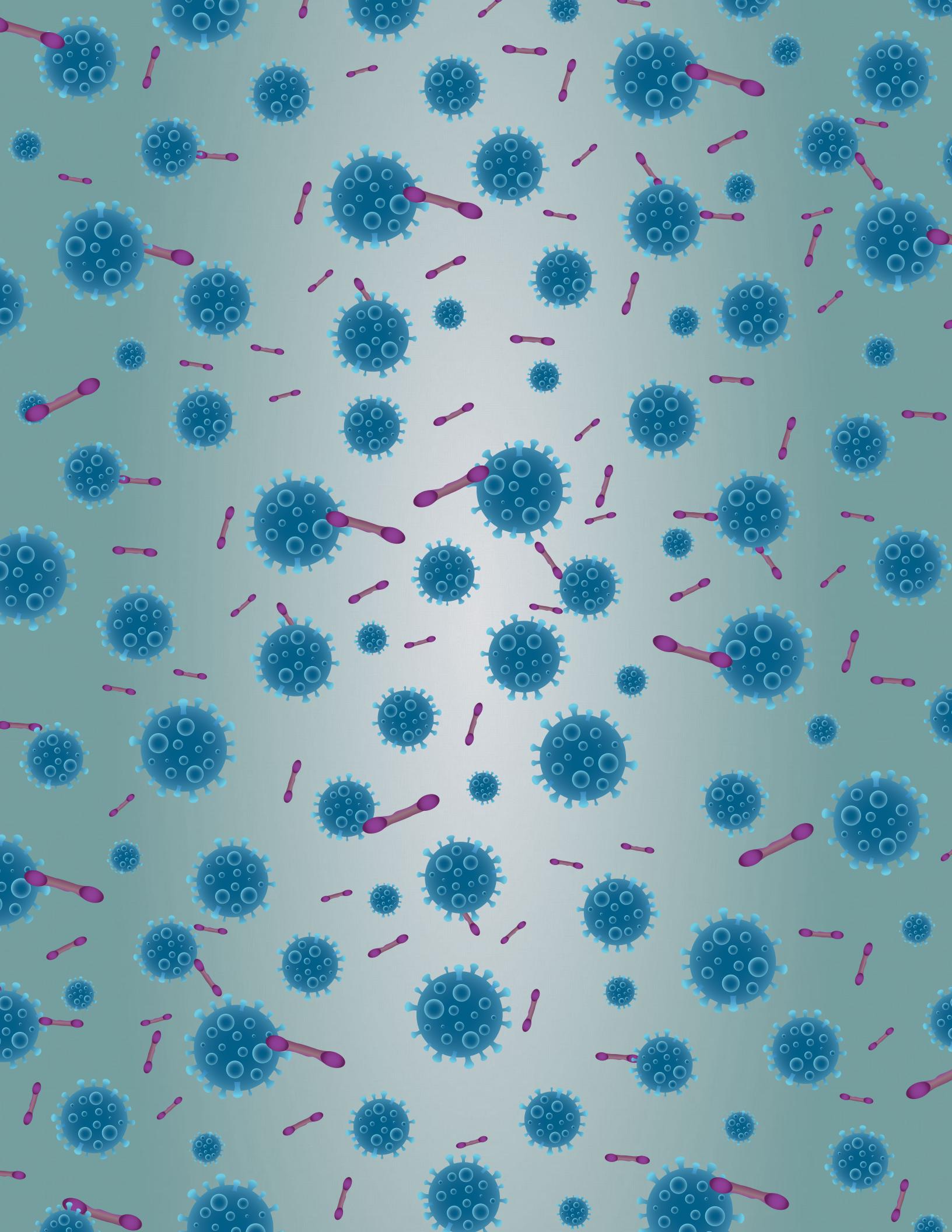
Conducting an Educational Workshop

Featuring everything you need to host an educational event for older adults and their loved ones on the basics of vaccination.



Produced in partnership with





Our Best Shot: The Importance of Vaccines for Older Adults

Conducting an Educational Workshop



Introduction

Purpose

This workshop is designed to provide all of the resources that community leaders like you need to conduct an educational workshop for older adults and their caregivers on the basics of vaccination.

Audience

The primary target audience for this workshop is older adults living in the community. It is also suited for family members, caregivers, and anyone who wants to learn more about the importance of vaccination.

The number of participants in a given workshop will vary by site. Suggestions are made throughout this guide on how to adapt the curriculum for different group sizes.

Workshop Goals

- 1) Offer an interactive and supportive workshop environment where participants can learn about and discuss the importance of vaccination
- 2) Teach participants about how and where to get vaccinated
- 3) Ultimately increase vaccination rates among older adults in your community

Objectives

The major objectives of this workshop are to:

- Provide educational materials that communicate the importance of vaccination
- Explain how vaccines work and debunk common myths and misconceptions
- Help participants understand the recommended vaccine schedule
- Describe vaccine coverage under Medicare and other health insurance plans
- Share information on where vaccines can be administered
- Give tips on keeping track of vaccinations



Leaders' Note: Additional teaching objectives outline what you should focus on during each section.



Preparing for the Workshop

Before you conduct the workshop, you will need to do the following:

- **Choose a date and time.** If possible, coordinate with other events that your audience may attend.



Leaders' Note: If you offer them, consider scheduling before vaccine clinics so attendees can get vaccines right after the workshop.

- **Secure a location.** See page 6 for space requirements.
- **Promote the workshop.** See page 4 for tips on getting the word out.
- **Print out workshop materials.** See page 7 for a full list of recommended materials and make copies once you have a head-count.
- **Download the pocket film and slide presentation.** Either save to a laptop or to a DVD/CD/thumbdrive, depending on your equipment.
- **Obtain all additional equipment and supplies.** See page 7 for a detailed list.
- **Prepare a list of nearby locations that provide vaccinations.** Use the HealthMap Vaccine Finder at www.vaccines.gov to create a list of pharmacies, health clinics, etc. where participants can go for vaccinations. If possible, create and print a handout with this information, or post the resources in the workshop room the day-of.
- **Put together an agenda for the day.** Use the workshop agenda on pages 8 and 9 to create an agenda for participants to follow. Print out copies once you have a head-count.
- **Research any areas where you need more information.** Be prepared to answer questions or refer participants to additional educational materials.
- **If you have access to a healthcare or public health professional, see if he/she can join you for the workshop to answer questions and cover technical information.** You may want to contact your local hospital network or Department of Health for suggestions.
- **Create a sign-in sheet** so that you can follow up with participants in the future.



Leaders' Note: Not all locations will have access to equipment to play the pocket film and slideshow. Skip those instructions in the script if you cannot show them.

Promoting the Workshop



Getting the Word Out

Consider how you will let your intended audience know about the workshop. Use your own experience, or the experience of others in your community, to determine the best ways to promote and draw people to the workshop. Below are some ideas to get you started:

- **Print out copies** of the workshop promotional poster and fill in the date, time, location, and registration details (if requiring RSVPs).
- **Distribute the poster** through organizations that have regular contact with older adults and their caregivers, such as:
 - Senior centers
 - Churches, synagogues, and other faith-based organizations
 - State and/or local agencies for elders and aging
 - Assisted living facilities and adult day care centers
 - Hospitals
 - Medical offices and community health centers
- **Hang up the poster** at the workshop venue as well as on community bulletin boards such as those found at libraries, YMCAs, community centers, recreation centers, schools, supermarkets, coffee shops, and more.

- **Advertise.** Consider your audience when determining the best ways to reach them and use some or all of the below:
 - **Social media platforms** like Facebook and Twitter will allow you to create events, notify friends and followers, and spread the word.
 - Many **newspapers** have a section that lists local support groups and seminars. Check the “contact us” section of your local newspaper and keep in mind that additional rates and fees may apply.
 - Find your **local radio station** and search online for the media contact person who will help you determine rates and write a script for the announcement.
 - **Craigslist** is an online advertisement resource where you can share community events. To get started go to www.craigslist.com to post to classifieds.
 - **Community listservs** can also be great venues for getting the word out. E-mail the workshop details to the listserv moderator or if you are a member, send an e-mail for posting.
- **Tell people.** There is no substitute for personal contact. Whenever possible, call or speak in person about the workshop with those who are most likely to refer participants.

Registering Participants

Decide if you will require registration/RSVPs. Advance registration can help you to better plan for the workshop, but be sure to plan to accommodate individuals who may show up without registering. Make sure you provide a registration contact name, telephone number, and/or email address on your poster, and in all advertisements and outreach.

Workshop Logistics

Timing

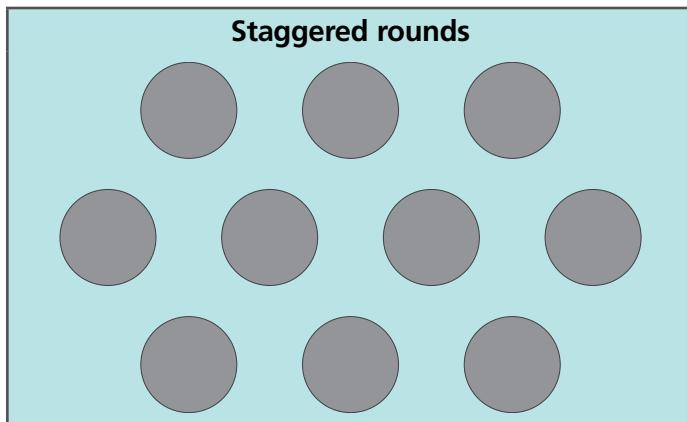
This workshop will last approximately 1 hour and 15 minutes. If you have less time, determine in advance which sections of the agenda you will need to leave out.

Space Requirements and Room Set-Up

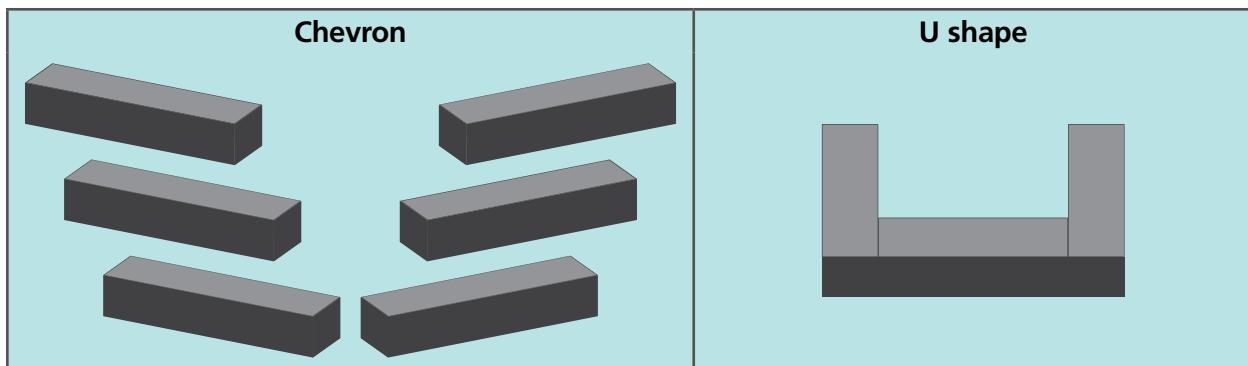
The space you will need depends on your group size. Ideally, each participant will have a seat at a table to best enable them to take notes and participate in the writing components of the workshop. If possible, choose a venue that is handicap accessible.

Here are some suggestions for set-up:

- If round tables are used, place tables so that no table is immediately in front of another.



- If rectangular tables are used, set them up chevron style for a larger group, or in a "U" shape for a group smaller than 15.



- If only chairs are available, set them up in rows or in a "U" shape, and either distribute or have participants bring clipboards, notebooks, or binders for writing activities.

Materials and Equipment List

- Leader's Guide
- Quick Guide to Vaccination
- Participant quizzes and answer sheets
- Participant evaluation forms
- Pocket film downloaded to laptop or burned to a DVD/CD/thumbdrive
- PowerPoint slideshow
- Workshop agendas (if you created one)
- Sign-in sheet (if you are using one)
- Local resource list (if you created one)
- Watch or clock to keep track of time
- Electronics you will use to show the pocket film and slideshow
(don't forget all necessary cords)
- Electrical or duct tape to tape down cords
- Table or podium (for leader)
- Pointer
- Flipcharts and markers, OR blackboard and chalk, OR whiteboard and markers
- Pens or pencils, and paper
- Clipboards, notebooks, or binders (if tables are unavailable)

Remember that the first six items can be downloaded from the Alliance for Aging Research website at www.agingresearch.org/vaccines, and printed in advance of the workshop.

After the Workshop

In addition to distributing the evaluation forms for participants at the end of the workshop, please take a few moments to fill out the leader's evaluation on Survey Monkey at www.surveymonkey.com/r/QWWHCRL. Your feedback will help us to better support you and other workshop leaders in the future and we thank you in advance for taking the time.

To return the participant forms to the Alliance you have a number of options:

- Scan and e-mail the forms to info@agingresearch.org.
- Consolidate the feedback into an e-mail and send to info@agingresearch.org.
- Mail the forms to the Alliance for Aging Research, 1700 K St., NW, Suite 740, Washington, DC 20006.

Workshop Agenda

 Time	 Topic	 Teaching Objectives	 Activities & Notes
:00	Welcome & Introductions (15 minutes)	<ul style="list-style-type: none"> Cover workshop logistics Meet participants Highlight what will be covered during the workshop 	<ul style="list-style-type: none"> Welcome participants and facilitate introductions Go over workshop logistics Ask participants about when they last had a vaccine and for what disease Play the pocket film
:15	History of Vaccines (3 minutes)	<ul style="list-style-type: none"> Give a brief overview of the history of vaccines 	<ul style="list-style-type: none"> Pass out quiz, and have participants take it Pass out answer key
:18	How Vaccines Work (3 minutes)	<ul style="list-style-type: none"> Give an overview of how the immune system works Explain how vaccines leverage the immune system to prevent infection 	
:21	Vaccine-Preventable Diseases (10 minutes)	<ul style="list-style-type: none"> Introduce infectious diseases that can be prevented with the recommended vaccinations Highlight the potential complications of these diseases 	<ul style="list-style-type: none"> Pass out Quick Guide to Vaccination for participants to take home Ask participants about what vaccine-preventable illnesses they, or people they know, have had; and what their experiences were like
:31	Vaccine Safety (5 minutes)	<ul style="list-style-type: none"> Describe the process a vaccine goes through to be approved for use Identify ingredients that could cause an allergic reaction Explain the purpose of adjuvants 	

Workshop Agenda continues on next page >



Time	Topic	Teaching Objectives	Activities & Notes
:36	Vaccine Effectiveness (4 minutes)	<ul style="list-style-type: none">Explain what makes a vaccine effectiveGive examples of disease-specific vaccine effectiveness	
:40	Choosing the Right Vaccines (4 minutes)	<ul style="list-style-type: none">Identify vaccines recommended for people ages 60 to 64, and ages 65+Explain contraindications to vaccination & other considerations	<ul style="list-style-type: none">Review the adult vaccination schedule included on the Quick Guide to Vaccination
:44	Where to Get Vaccinated (4 minutes)	<ul style="list-style-type: none">Cover the many different places that vaccines are available	<ul style="list-style-type: none">Pass out your list of local vaccination sites (if you prepared one)
:48	Paying for Vaccines (5 minutes)	<ul style="list-style-type: none">Give brief overview of insurance plan coverage for vaccinesDirect participants to health insurance resources	
:53	Keeping Track of Your Vaccinations (4 minutes)	<ul style="list-style-type: none">Give tips on how to track vaccinations	<ul style="list-style-type: none">Direct participants to the bottom of the Quick Guide to Vaccination
:57	What Have We Learned? (10 minutes)	<ul style="list-style-type: none">Review what was covered during the workshop	<ul style="list-style-type: none">Review concepts shared
1:07	Wrap-Up & Evaluations (8 minutes)	<ul style="list-style-type: none">Answer any questions	<ul style="list-style-type: none">Refer to additional resources you have preparedPass out evaluations and collect them when finishedContinue any unfinished discussion
1:15	Adjourn		<ul style="list-style-type: none">Dismiss participants

Workshop Script

The following teaching objectives and suggested script are designed to make it easier for you to cover a lot of material in a short amount of time. However, you should read the suggested script a few times, and do some background research in advance, to make sure you're comfortable with the material. Keep in mind that while it's important to script your talking points when discussing medical information, you should also be sure to make the script your own.

If you have recruited a healthcare professional partner, be sure you discuss in advance who will cover what portions of the program. Keep in mind that while this script is full of information, your participants will likely have additional questions. Having a healthcare professional participating will help to answer these questions.

Welcome & Introductions



Teaching Objectives:

- Cover workshop logistics
- Meet participants
- Highlight what will be covered during the workshop

WELCOME participants to the workshop and introduce yourself. If there are fewer than 15 people, you may want to have them introduce themselves to the group. Be mindful of time and limit this to about 7 minutes.



Leaders' Note: Arrive at least 30 minutes before the start time to familiarize yourself with the room and facilities, specifically:

- Lighting and light switches/adjustment
- Temperature controls
- Arrangement of participant chairs and/or tables
- Location of leader table or podium
- Audio-visual equipment
- Location of the fire exits and restrooms

POINT OUT logistical information such as the agenda, location of the restrooms, and fire exits.



ASK how many people have recently received a vaccine, or know what vaccines are recommended for their age group. Keep this number and these people in mind for later discussions. Emphasize that participants don't have to share information and should only share if they're comfortable doing so.

PLAY the pocket film on vaccination to give an overview for participants.



Leaders' Note: Decide if you will be answering questions as they arise, or require that all questions be saved until the end of the workshop. Be sure to let participants know either way.

History of Vaccines



Teaching Objective:

- Give a brief overview of the history of vaccines



SHOW SLIDE #1



SAY: Two hundred years ago, an English scientist discovered how to give people protection for smallpox, beginning the immunization age.

The development of vaccines was fairly slow until the last several decades. Innovative research techniques now enable scientists to explore new ways of preventing disease.

Vaccines are one of the greatest success stories in modern medicine. Through vaccination, smallpox has been eradicated around the world, and we have nearly eliminated polio. The number of people who get preventable infectious diseases like measles and whooping cough is at an all-time low. And every year, vaccines prevent an estimated 2 to 3 million deaths worldwide.¹

PASS OUT the quiz for participants to test their knowledge. Give them around five minutes to complete it and then pass out the answer sheet. Let participants know that you will address the answer to each question during the relevant section of the agenda.

¹ World Health Organization. 2016. *Immunization Coverage: Fact sheet*. www.who.int/mediacentre/factsheets/fs378/en

How Vaccines Work



Teaching Objectives:

- Give an overview of how the immune system works
- Explain how vaccines leverage the immune system to prevent infection



SHOW SLIDE #2



SAY: The immune system is made up of cells that work together to defend the body against intruders. When a bacteria or virus, called a pathogen, enters your body, your immune system jumps into action. It produces antibodies that help destroy and remove the pathogen.

Each time the immune system reacts to a specific pathogen, it builds up a defense, called immunity. So the next time the immune system encounters that pathogen, it can identify the bacteria or virus and remove it more quickly, preventing you from getting sick.

This natural immunity develops each time we get sick, AND when we get vaccinated. Vaccines imitate an infection, and trigger the immune system to produce specific antibodies needed to protect you from a disease — without making you ill.

Vaccines not only protect your health, but the health of your loved ones and those around you. By getting vaccinated, you protect those around you who may not have effectively developed immunity from a vaccine, or who are too young or too sick to get vaccinated. This is called herd or community immunity. The more people who are vaccinated, the fewer opportunities a disease has to spread.



REFER TO QUIZ ANSWER #1. Emphasize that herd immunity works best when everyone is vaccinated and you should not rely on others for protection.

Vaccine-Preventable Diseases



Teaching Objectives:

- Introduce infectious diseases that can be prevented with the recommended vaccinations
- Highlight the potential complications of these diseases



SHOW SLIDE #3

PASS OUT Quick Guide to Vaccination



SAY: All of the recommended vaccines protect against diseases that can be very serious, and even lead to hospitalization and death. The vaccines we discuss here are recommended for most older adults. Additional vaccines may be recommended for you based on your lifestyle, risk factors, occupation, and travel destinations. To learn more about those diseases and their complications visit www.cdc.gov/vaccines and refer to the Quick Guide to Vaccination that you just received.

Influenza, or flu, is a respiratory virus. Most people will recover from the flu in several days to less than two weeks; however, some people can develop serious complications including pneumonia, and bronchitis. And every year an estimated 3,000 – 49,000 people die and around 200,000 are hospitalized because of the flu.^{2 3} People who recover from the flu, especially older adults, may not return to their previous level of health and independence.

Tetanus is a bacterium that produces a powerful toxin and impairs the nervous system. It can cause complications that persist until the toxins clear (sometimes taking several months), including interfering with the ability to breathe. Tetanus cases and complications in the U.S. are very rare, in large part due to widespread use of the vaccine.

Diphtheria is a bacterium that attaches to the lining of the respiratory system and produces toxins. It can destroy healthy tissues and cause build-up of dead tissue that makes it hard to breathe and swallow. This can lead to lung infections, and even infections of the blood, heart, kidney, and nerves. It can also cause paralysis and death. Around 5–10 % of people who get diphtheria will die from it — with higher rates in people younger than 5 and older than 40.⁴

Pertussis is another respiratory bacterium that starts as a mild, occasional cough but after one to two weeks can turn into uncontrollable, violent coughing, which often makes it hard to breathe. After coughing fits, someone with pertussis needs to take deep breaths — resulting in a characteristic “whooping” sound. While anyone can get pertussis, older adults can be contagious without even knowing they have it. It is particularly serious for babies less than a year old — half of all babies under a year who get whooping cough are hospitalized.⁵

Varicella is the chicken pox virus, and while many of us may simply remember it as an itchy inconvenience, it can actually be very serious; especially in babies, adults, and people with weakened immune systems. It can lead to

2 Thompson et al. 2010. Updated Estimates of Mortality Associated with Seasonal Influenza through the 2006-2007 Influenza Season. *MMWR* 59(33): 1057-62

3 Thompson et al. 2004. Influenza-Associated Hospitalizations in the United States. *JAMA* 292(11):1333-40

4 Centers for Disease Control and Prevention. 2016. *Diphtheria—For Clinicians*. www.cdc.gov/diphtheria/clinicians.html

5 Centers for Disease Control and Prevention. 2015. *Pertussis (whooping cough) — Complications*. www.cdc.gov/pertussis/about/complications.html

infections of the skin and soft tissues, pneumonia, brain infection, bleeding problems, sepsis, hospitalization, and death.

Varicella zoster is the chicken pox virus that lies dormant and can be reactivated years later as a shingles infection. The infection can lead to serious complications including postherpetic neuralgia — severe and debilitating pain — loss of vision and blindness, pneumonia, hearing problems, and brain inflammation. While hospitalization and death are less common with shingles, around one out of every five people who develop a shingles infection will get postherpetic neuralgia, which can last for months to years.⁶ During their lifetime, 30% of Americans will develop shingles — around 1 million people each year.⁷

Pneumonia is a bacterium or virus that infects the lungs. It is more common in people who are already sick and can lead to lung infections, sinus and ear infections, infection of the brain and spinal cord lining, heart infections, difficulty breathing, and lung collapse and abscess. Every year, an estimated 53,000 people die and 1.1 million are hospitalized because of pneumonia.^{8 9}



REFER TO QUIZ ANSWER #2. Emphasize that vaccine-preventable diseases can lead to hospitalization or even death. Remind participants of the statistics you just shared.



ASK participants about what illnesses they, or people they know, have had; and what their experiences were like.



REFER TO QUIZ ANSWER #3. Emphasize that natural immunity is not necessarily better than vaccine-induced immunity because of the complications that come with infections.

Vaccine Safety



Teaching Objectives:

- Describe the process a vaccine goes through to be approved for use
- Identify ingredients that could cause an allergic reaction
- Explain the purpose of adjuvants



SHOW SLIDE #4

⁶ Stankus SJ et al. 2000. Management of Herpes Zoster (Shingles) and Postherpetic Neuralgia. *Am Fam Physician*. 61(8):2437-44, 2447-8.

⁷ Centers for Disease Control and Prevention. 2008. Prevention of Herpes Zoster: Recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR* 57(05):1-30.

⁸ Xu JQ, Murphy SL, Kochanek KD, Bastian BA. 2016. Deaths: Final data for 2013. *National vital statistics reports*. 64(2). Hyattsville, MD: National Center for Health Statistics.

⁹ Centers for Disease Control & Prevention. 2013. *National Hospital Discharge Survey: 2010 table, Average length of stay and days of care – Number and rate of discharges by first-listed diagnostic categories*. www.cdc.gov/nchs/data/nhds/2average/2010ave2_firstlist.pdf#

 **SAY:** In recent years, there have been many conversations questioning the safety of vaccination. However, according to the Centers for Disease Control and Prevention (CDC), “vaccines have never been safer than they are today,” and “...the benefits of vaccines far outweigh the risks.”¹⁰

The approval process in the U.S. for all medication is thorough and rigorous, and vaccines are no exception. Before the Food and Drug Administration (FDA) approve vaccines, they are tested extensively to ensure that they are effective AND safe.

Each vaccine is required to undergo three phases of clinical trials in humans before they are approved for use by the public. Even after it's in the public use, it is continuously monitored by both the FDA and CDC.



REFER TO QUIZ ANSWER #4. Emphasize that vaccines are rigorously tested before use in the public, and continue to be monitored while in use.

 **SAY:** Vaccines help the body develop immunity by imitating an infection, but do not cause illness. The imitation infection can cause minor symptoms, such as fever; however, this is normal and can be expected as the body develops immunity.



REFER TO QUIZ ANSWER #5. Emphasize that inactivated vaccines cannot cause an infection, and it is extremely rare that live vaccines cause disease.

 **SAY:** Potential side effects from vaccination are usually mild and go away on their own. The most common side effects from vaccines are soreness, redness, tenderness, or swelling where the shot was given. Low-grade fever, headache, and muscle aches may also occur. Severe side effects from vaccines are rare.

Most vaccines developed today include only a small piece of the bacteria or virus, so can't make you sick. These vaccines also contain adjuvants, which are ingredients that help the body produce a strong enough immune response to protect against future infections. Adjuvants have been used safely in vaccines for many decades.



REFER TO QUIZ ANSWER #6. Emphasize that adjuvants have been used safely for years, and help the body produce a strong immune response.

10 Centers for Disease Control & Prevention. 2015. Vaccine Safety — Ensuring Vaccine Safety. www.cdc.gov/vaccinesafety/ensuringsafety/history/index.html

 **SAY:** Vaccines may contain additional ingredients that keep them from going bad, prevent contamination, and more. In rare cases, certain people may have a severe reaction to a vaccine because of allergies. Vaccine ingredients that can cause allergic reactions include egg, gelatin, yeast, and latex. If you or a loved one is allergic to any of these ingredients, it is very important to tell your healthcare professional so they can choose the appropriate vaccine and safely administer it.

Claims that vaccines are linked to autism, or are unsafe when given following the recommended schedule, have been proven to be false by leading experts at the Institute of Medicine, Centers for Disease Control and Prevention, and the American Academy of Pediatrics.

Vaccine Effectiveness



Teaching Objectives:

- Explain what makes a vaccine effective
- Give examples of disease-specific vaccine effectiveness



SHOW SLIDE #5

 **SAY:** How effective a vaccine is depends on how well it reduces disease in a population. The main things that matter are the characteristics of the person getting the vaccine (their age, health, etc.), and how well matched the vaccine is to the virus that is currently in the community. Because the immune system declines with age, vaccines become less effective with age, so older adults may need high-dose vaccines.

Vaccines that are approved for the public are generally very effective at reducing disease. Some people may still get the disease they were vaccinated for, but they will likely have a less severe case and fewer complications.

For example, research has shown that the shingles vaccine reduces the rate of shingles by around 51% and that people who get the vaccine have less severe cases of the disease than those who don't.¹¹ It is also close to 90% effective in preventing pain, and lessening its severity.¹²



REFER TO QUIZ ANSWERS #7 and #8. Emphasize that even though you may get a disease after being vaccinated, your case will be less severe than had you not been vaccinated. Also, even if you've never had a disease before, it's still important to get vaccinated.

¹¹ Centers for Disease Control & Prevention. 2016. *Vaccines & Immunizations — Shingles Vaccination: What Everyone Should Know.* www.cdc.gov/vaccines/vpd-vac/shingles/vacc-need-know.htm

¹² Lal et al. 2015. Efficacy of an Adjuvant Herpes Zoster Subunit Vaccine in Older Adults. *NEJM* 372:2087-96.



SAY: The flu virus is constantly changing, making effectiveness of the vaccine vary from season to season. Flu vaccines that are a good match to the virus in a specific flu season will prevent more cases. Recent studies have shown that the vaccine reduces the risk of flu by up to 60% during seasons where there is a good match.¹³

During seasons when the vaccine is not well matched to the circulating virus, or when the virus changes mid-flu season, the vaccine will have lower rates of disease prevention — but will still save thousands of lives and make flu cases less severe.

There are many types of pneumococcal bacteria. The PCV13 vaccine protects against 13 types and the PPSV23 vaccine protects against 23 types. Both are recommended for use among adults ages 65 and older, and in people ages 64 and under who are at high risk.

The pneumonia vaccines are 50-80% effective at preventing invasive pneumonia.¹⁴

Choosing the Right Vaccines



Teaching Objectives:

- Identify vaccines recommended for people ages 60 to 64, and ages 65+
- Explain contraindications to vaccination & other considerations



SHOW SLIDE #6



SAY: Vaccination might seem like an issue specific to infants and children, but the truth is people of all ages need vaccinations to protect themselves and their loved ones from serious diseases. Older adults, especially those with chronic conditions, are affected more by certain vaccine-preventable diseases. Seniors are also more likely to develop complications from these diseases, including long-term illness, hospitalization, and even death.



Leaders' Note: The Quick Guide to Vaccination lays out the recommendations for those 60 to 64 and 65+.



SAY: Refer to your Quick Guide to Vaccination for a chart containing the vaccines recommended for people ages 65 and older.

¹³ Centers for Disease Control and Prevention. 2013. Vaccine Effectiveness — How Well Does the Flu Vaccine Work? www.cdc.gov/flu/about/qa/vaccineeffect.htm

¹⁴ Centers for Disease Control & Prevention. 2015. Pneumococcal Vaccination: Who Needs It? www.cdc.gov/vaccines/vpd-vac/pneumo/vacc-in-short.htm

Some vaccines you got when you were younger (like the vaccine for tetanus, diphtheria, and pertussis) can wear off, so you may need a booster. If there are vaccines you never got as a child (like chickenpox), it may be recommended that you get them as an adult. Additionally, as we age our immune system weakens and puts us at higher risk for certain diseases, such as shingles and pneumonia — so after age 60 there are additional vaccines that are recommended. Note that the vaccine you got as a child for measles, mumps, and rubella, is not included in the recommended vaccines for ages 60 and up.

If you are feeling unwell, unless you are dealing with serious illness, getting a vaccine is still safe.



REFER TO QUIZ ANSWER #9. Emphasize that you can get a vaccine and fight minor illnesses at the same time.



SAY: In addition to staying up-to-date with the full vaccine schedule, it's important to get the flu vaccine every single year. As was previously discussed, the virus can change each season and even mutate mid-season. Also, your immunity decreases over the year.

According to the CDC, nasal spray vaccines may not be as effective, so discuss alternatives with your health care professional.



SAY: Many other factors can influence what vaccinations are right for you. Your job, lifestyle, health status, or travel plans may require additional vaccinations like those for meningitis, hepatitis A & B, and haemophilus influenzae. If you are traveling outside of the U.S., ask your healthcare professional about which vaccines you need at least six weeks in advance.

Certain diseases and conditions can make it harder to fight off infection. And with some chronic diseases, the complications of infection can be more severe. People with additional risk factors may also need the meningococcal (meningitis), hepatitis A, hepatitis B, and Hib (haemophilus influenza type b) vaccines.



REFER TO QUIZ ANSWER #10. Emphasize that certain conditions like heart disease or COPD can increase complications if you get the disease.

Where to Get Vaccinated



Teaching Objective:

- Cover the many different places that vaccines are available



SHOW SLIDE #7

PASS OUT your local list of vaccination sites if you prepared one.



SAY: In addition to being able to get most vaccines through your primary care professional, many pharmacies, community health clinics, and health departments offer them. Many workplaces also provide vaccinations — especially flu vaccines at the start of flu season — as do schools, religious centers, and other community locations.

Wherever you get vaccinated, have it documented on an immunization record card such as the one on your Quick Guide to Vaccination, and ask your provider to report it to the immunization registry. Also, if your vaccine is administered outside your primary care provider's office, ask for a record of the vaccination to be sent to their office.

If you aren't sure where to go, you can contact your local state health department or enter your zip code into the HealthMap Vaccine Finder; which is produced by Google in partnership with government agencies. It's available at <http://vaccine.healthmap.org>.

If you are traveling and need vaccines recommended for your destination, the CDC provides a list of travel medicine clinics at wwwnc.cdc.gov/travel/page/find-clinic.

Paying for Vaccines



Teaching Objectives:

- Give brief overview of insurance plan coverage for vaccines
- Direct participants to health insurance resources



SHOW SLIDE #8



SAY: Most private insurance plans cover the recommended vaccines in-network without charging a co-payment, depending upon the provider. Always check with your health care plan before you get vaccinated, to make sure you are going to an in-network provider and to learn your coverage options.

Medicare Part B will pay for the influenza, pneumonia, and hepatitis B vaccines. Medicare Part D plans must include all commercially available vaccines (except those covered by Part B). Medicare Part D or Medicare Advantage Part C plans that offer prescription drug coverage may also cover the zoster, MMR, and Tdap vaccines.

Because vaccines covered under Part D are treated as prescription drugs, it can be a confusing process to figure out your cheapest option. For example, with the shingles vaccine, you may need to get a prescription from your physician and then get the shot at your pharmacy. If your pharmacy doesn't administer vaccines, you may have to pick it up and bring it back to your physician. There may also be co-payments required.

Most Medicaid plans cover some or all of the vaccines but may not offer all of the vaccines. Check with your state agency to learn more.

If you don't have health insurance, visit www.HealthCare.gov to look for affordable coverage options. Also keep an eye out for flu shot vouchers for uninsured and underinsured individuals, which are often made available through pharmacies during cold & flu season.

Keeping Track of Your Vaccinations



Teaching Objective:

- Give tips on how to track vaccinations



SHOW SLIDE #9



SAY: As with medications, you need to keep track of which vaccines you received and when you received them. Vaccination recommendations can be confusing and overwhelming. Many adults see more than one healthcare professional, and receive vaccinations in many different locations.

Because healthcare professionals don't usually share health records, it's up to you to keep track and it's very easy to forget which vaccinations you have received in the past. Using a vaccination tracking tool such as an app for a phone or tablet is one way to help you keep track.



Leaders' Note: The bottom of the Quick Guide to Vaccination is a paper-based vaccine-tracking tool.



SAY: Included in your Quick Guide to Vaccination is a vaccine tracker with space for the vaccine type, date given, date next dose is due, and issuing healthcare professional. You can keep this paper-based tool in your wallet for easy access. Bring this tracker with you to health visits, and ask your vaccine provider to sign and date the form for each vaccine you receive. That way, you can be sure that the immunization information is current and correct, and share it with all of your healthcare professionals.

If your vaccine provider participates in an immunization registry, ask that your vaccines be documented there as well.

If you can't find your personal records or records from the doctor, you may need to get some of the vaccines again. While this is not ideal, it is safe to repeat vaccines. The doctor can also sometimes do blood tests to see if you are immune to certain vaccine-preventable diseases.

What Have We Learned?



Teaching Objective:

- Review what was covered during the workshop

Wrap-Up & Evaluations



Teaching Objective:

- Answer any questions



ASK participants to fill out evaluations and to return them to you once finished.



Leaders' Note: If you have additional time and you feel like there are still questions, stories to be shared, etc. — allow for more conversation and networking.



SAY: You can take charge of protecting your health by getting vaccinated, but can also take charge of your family's health. Talk with your loved ones and make sure they are getting all of their recommended vaccinations.

Adjourn



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