

## Efficacy of Administering Vaccines at a Free Community Health Clinic

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### ABSTRACT

**Background:** Provision of free vaccines to uninsured patients is an important piece in improving community preventive care. We evaluated the successes and challenges during implementation of a free vaccine program for patients of a free clinic.

**Approach:** Tdap, Shingles, and Hepatitis B vaccines were administered at Stanford Pacific Free Clinic using the GSK Patient Assistance Program. These vaccines require 1, 2, and 3 doses, respectively. Vaccines were available 1x/month, with an average of 9 patients per clinic. Vaccine patients were recruited from free clinic patients following general health screening.

**Outcomes:** Over five months, the clinic administered 12 Tdap, 22 Shingles, and 3 Hepatitis B vaccines. 100%, 85%, and 0% of patients who received their first dose completed their series, respectively. Several challenges were identified in the execution of a free vaccine program. Patients were lost to follow-up with multi-dose vaccines. Vaccine reimbursement proved challenging due to stringent documentation requirements, with only 30% of patients successfully enrolled with GSK.

**Conclusions:** Delivery of vaccines at a free clinic serves as a high-yield preventive measure for the community. However, considerations must be made to ensure effective delivery of care, including: (1) maximizing patient retention through accessibility screening, patient education on importance of vaccine series completion, and adjusting follow-up methods for multi-dose vaccines; (2) maximizing vaccine reimbursement success by pre-scheduling patients and proactively requesting required documentation; (3) establishment of a dedicated vaccine team. In conclusion, implementation of a free vaccine program has yielded positive results, but further considerations are necessary to improve program efficacy.

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