THEY “CALL THE SHOTS” BUT YOU PROVIDE THE EVIDENCE: PARTNERING WITH CAREGIVERS TO COUNSEL ON VACCINES AND VACCINE HESITANCY
FRIDAY, MAY 11, 2018
10:00 am - 12:00 pm

SOUTH EAST AREA HEALTH EDUCATION CENTER | 2511 DELANEY AVE | WILMINGTON, NC 28403 | PELICAN ROOM

DESCRIPTION:
What can you do to help increase the number of children who get vaccinated in your community? You can partner with caregivers in advocating for evidence-based practice by dispelling myths and providing caregivers the facts they need to make an informed choice for their child. This workshop will give participants increased knowledge regarding the most recent infant, pediatric and adolescent immunization schedule supported by the CDC, approaches in discussing vaccinations and vaccine hesitancy with caregivers, and various resources available that are centered on pediatric vaccines and approaching vaccine hesitancy.

OBJECTIVES:
By the end of this workshop, participants should be able to:
◊ Understand and implement discussion on the pediatric immunization schedule.
◊ Discuss and implement two approaches to addressing vaccine administrations in the event of caregiver vaccine hesitancy.
◊ Discuss and locate three resources that can be utilized for additional information on pediatric vaccinations and vaccine hesitancy.

TARGET AUDIENCES:
Public Health Nurses & Providers and those who care for children who need vaccines.

CE CREDIT:
2.0 CNE Hours
2.0 Contact Hours
2.0 CHES Credit
2.0 Social Work Contact Hours

COST: $15

FACULTY:
April Bice, PhD, CPNP, RN
Diane Parker, FNP-BC, RN

AGENDA:
9:30 AM Registration
10:00 AM Introduction to Pediatric and Adolescent Immunization Schedule - 2018 Changes
10:15 AM Pediatric and Adolescent Infectious Disease Update
10:30 AM Background on Pediatric and Adolescent Caregiver Vaccine Hesitancy - Causes and Myths
10:45 AM What can you do about vaccine hesitancy? Show them the evidence!
11:00 AM Break out into focus groups for Caregiver and HCP role play
11:20 AM Reconvene for focus group discussion and summary
11:45 AM Resources for your own practice - where can you find them?
12:00 PM Adjourn

CE Credit Jointly Provided By: SEAHEC & UNCW

Supported by:
Center for Healthy Communities
North Carolina Public Health Training Center
UNCW CHHS School of Nursing

REGISTER ONLINE HERE
NHRMC Employees Register Via Instructions in NetLearning
Credit Provided by SEAHEC:
2.0 CNE Credit Hours
2.0 Contact Hours
2.0 CHES Credit

No Partial Credit will be given. Participants must attend the entire program in order to receive credit.

SEAHEC is an approved provider of continuing nursing education by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center’s Commission on Accreditation.

Disclosure Statement:
South East Area Health Education Center (SEAHEC) adheres to ANCC Essential Areas and Policies regarding industry support of continuing medical education. Commercial support for the program, and faculty relationships within the industry, will be disclosed at the activity. Speakers will also state when off-label or experimental use of drugs or devices is incorporated into their presentations. Participation in an accredited activity does not imply endorsement by SEAHEC or NCNA of any commercial products displayed in conjunction with an activity.

Credit Provided by UNCW:  2.0 Social Work Contact Hours

REGISTER ONLINE HERE
NHRMC Employees Register via Instructions in NetLearning

SEAHCE REGISTRATION FORM

Course Name: They “Call the Shots” But You Provide Evidence: Partnering with Caregivers to Counsel on Vaccines & Vaccine Hesitancy

Date: May 11, 2018
Registration Fee: $15

Name: ___________________________ Last Four Digits of SS#: ___________________________

Degree/Cert: ___________________ Title/Occupation: ________________________________

Preferred e-Mail Address: ________________________________________________________

In order to receive all course notifications and materials, please provide a preferred e-mail address. Thank you!

Home Address: _________________________________________________________________

Home City/State/Zip: __________________________ Home Phone: _______________________

Workplace/Dept.: __________________________ Work Phone: _________________________

Work Address: __________________________ Work City/State/Zip: _____________________

Payment method (if applicable): □Cash □Check □VISA □MasterCard

Credit Card Account #: ___________________________ Expiration Date: ________________

Print Name as it Appears on Card: _______________________________________________

Cardholder’s Signature: ________________________________________________________

Cardholder’s Address (if different than above): ____________________________________

In Person or by Mail: 2511 Delaney Ave.
Wilmington, NC 28403

By Fax (credit card only): 866-734-4405
Online (credit card card only): www.seahec.net

Refunds/Cancellations: Notification must be received at least two business days prior to the start date, you may choose one of the following:

- Receive a refund, minus a 30% processing fee;
- Provide us with the name of a substitute who will attend the program in your place;
- Transfer registration to a different SEAHEC program.

If notification is received less than 2 days prior to start date, SEAHEC is unable to process any refund option.

If you have any question concerning accessibility or special needs assistance please call 910-667-9330.

Registration fee: $15 Includes Credit

Payment methods: Full payment must accompany your registration. Payment may be in the form of: cash, check (payable to SEAHEC), Visa or MasterCard.

In Person or by Mail: 2511 Delaney Ave.
Wilmington, NC 28403

By Fax (credit card only): 866-734-4405
Online (credit card card only): www.seahec.net

Payment methods:
Full payment must accompany your registration. Payment may be in the form of: cash, check (payable to SEAHEC), Visa or MasterCard.

In Person or by Mail: 2511 Delaney Ave.
Wilmington, NC 28403

By Fax (credit card only): 866-734-4405
Online (credit card card only): www.seahec.net

Refunds/Cancellations: Notification must be received at least two business days prior to the start date, you may choose one of the following:

- Receive a refund, minus a 30% processing fee;
- Provide us with the name of a substitute who will attend the program in your place;
- Transfer registration to a different SEAHEC program.

If notification is received less than 2 days prior to start date, SEAHEC is unable to process any refund option.

If you have any question concerning accessibility or special needs assistance please call 910-667-9330.