



Preparing for HPV Self-collection Webinar Series:

Implementation

January 15, 2026



Presenters



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Presentation Objectives



By the end of this presentation, attendees will:

1

Understand key considerations for implementing HPV self-collection

2

Understand potential challenges and successes from real-world implementations

3

Feel ready to begin or refine HPV self-collection implementation at your health system



POLL: HPV Self-Collection Implementation Needs

We want to hear from you!

Help us understand your organization's technical support needs.

Overview



Step 1	Convene a team
Step 2	Assess your current workflow
Step 3	Modify your workflow
Step 4	Train clinic staff
Step 5	Implement your new workflow
Step 6	Monitor your progress

Step 0: Readiness



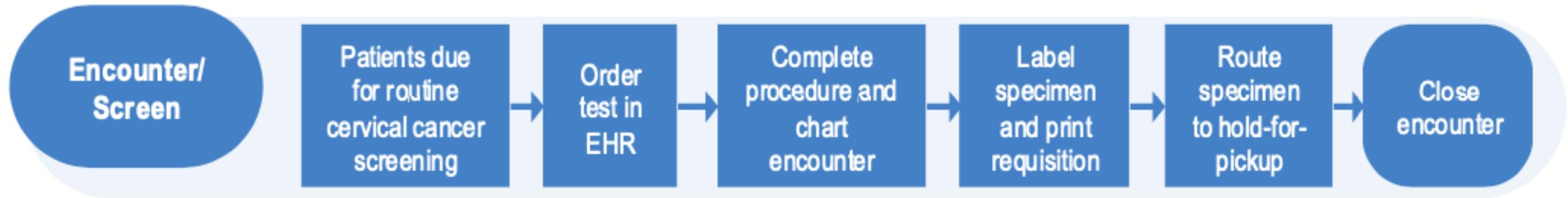
- Necessary readiness:
 - Laboratory capacity
 - Metrics
 - Reimbursement/billing

Step 1: Convene a Team

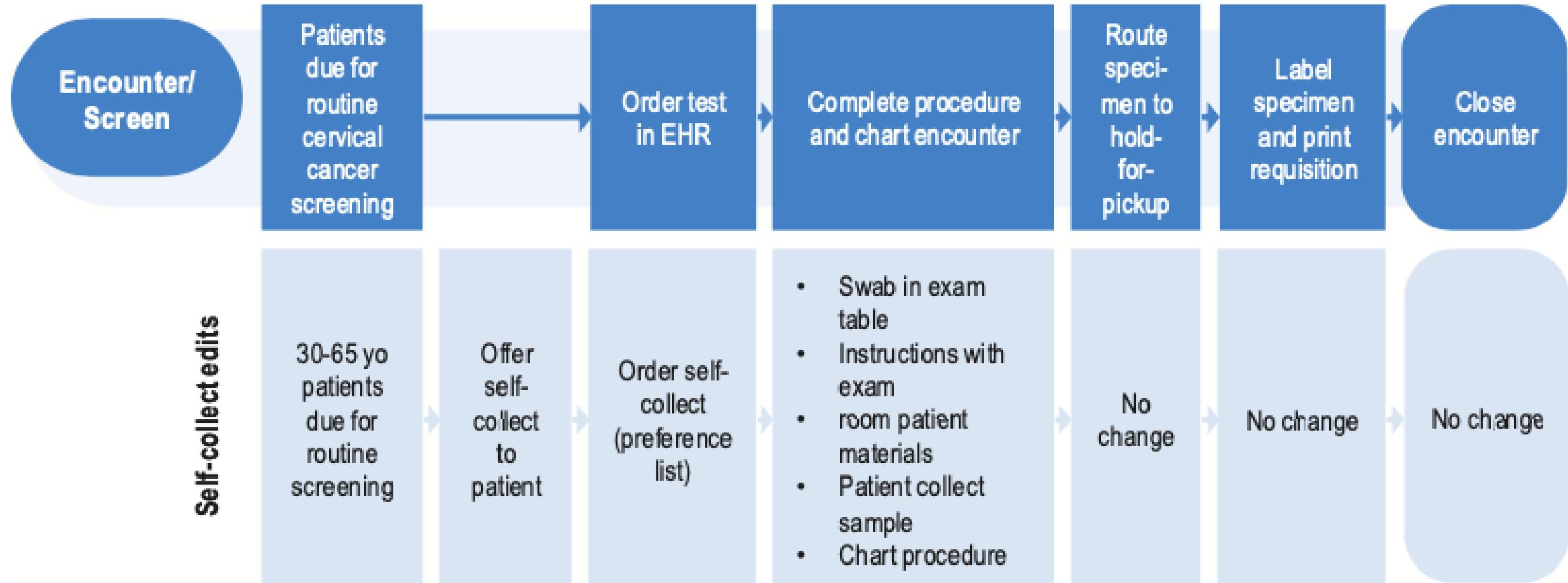


- All stakeholders
- Women's health
- EHR

Step 2: Assess Your Current Workflow



Step 3: Modify Your Workflow



Step 3: Modify Your Workflow



- Meet with your team to review the workflow
- Get your EHR set up
 - Ordering
 - Macros
- Get your billing and ordering team set up
- Modify your results communication and reports
- Identify resources your patients might need.

Step 4: Train Clinic Staff



- Identify tools to promote and educate all clinic staff

Step 5: Implement Your New Workflow



- Perform an end-to-end test of your ENTIRE workflow
- Start offering it!

Step 6: Monitor Your Progress



- Cervical cancer screening participation.
- HPV self-collect results
 - Abnormal rate
 - Other HR-HPV positive
 - Unsatisfactory
 - HPV 16 or 18 positive

HealthPoint CHC (Greater Seattle, WA)

Carolyn Halley, Medical Director



January 15, 2026



HealthPoint HPV Self-Collect Rollout

Carolyn Halley, Medical Director

HealthPoint – Who We Are:

- HealthPoint was founded in 1971
- FQHC – Federally Qualified Health Center
- Community Health Organization that is in King, WA.
- 12 health clinics and 6 school-based across King County



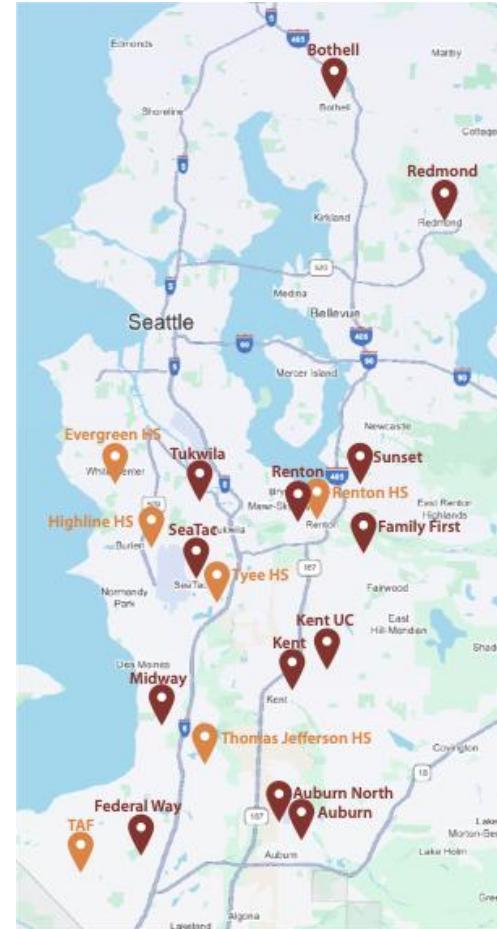
99%
of patients are low income

Care provided in **70+** languages

70%
of patients identify as an ethnic or racial minority

1/3
of patients are children and adolescents

67%
of patients are enrolled in Medicaid



HealthPoint's Mission Statement:

To strengthen communities and improve people's health by delivering quality health care services, breaking down barriers, and providing access to all.

HealthPoint is a community-based, community-supported, and community-governed network of non-profit health centers dedicated to providing expert, high-quality care to all who need it, regardless of circumstances. We serve approximately 70% of newly arrived refugees in King County.

HealthPoint HPV Self-Collect Rollout

STEP-2 Trial

- August-November 2025
- 2 HealthPoint primary care clinics – in clinic self-collect
- 2 healthplans – mailed HPV self-collection kits to patients
- Kits processed at UW Lab rather than Labcorp
- STEP-2 metrics

Full HealthPoint Rollout

- November-December 2025
- 10 additional HealthPoint primary care clinics (5 at a time)
- Tests sent to Labcorp
- HealthPoint designed our own metrics

HealthPoint HPV Self-Collect Rollout



Wins!

Enthusiastic Providers

Ordering made easy using CCS Care Gap

Education modules at each provider and MA site meetings

Including medical assistants in workflow

Cervical cancer screening added to acute or chronic condition visit (similar to FIT and mammogram)

Increased access through opening of visits that would have been scheduled for pap

FAQ

HealthPoint HPV Self-Collect Rollout

Challenges

Switching to primary HPV and vaginal self-collect at the same time

Starting vaginal self-collect at same time as Labcorp

Mixed messages about when to offer vaginal self-collect

Mixed messages about self-collect follow up interval

Labcorp "kits"

No mechanism to track patients returning for colpo or cytology

HealthPoint HPV Self-Collect Metrics

Overall

- CCS screening rate before/after self-collect rollout
- % CCS that were self/vaginal collect vs cervical collect

Vaginal vs cervical-collect

- Refugee rates
- Non-English speaking patient rates
- Gender diverse/F64 rates

Abnormal result follow up

- % Vaginal-collect requiring follow up: cytology and colpo
- Rate of return for cytology (hrHPV non-16/18)
- Rates of return for colposcopy - vaginal vs cervical (hrHPV 16/18)

Get screened for cervical cancer today!

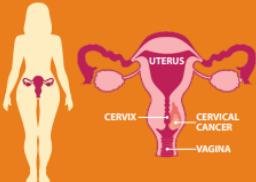
Human Papillomavirus (HPV) is a common virus that can cause cervical cancer. The HPV self-test looks for HPV in cells collected from your vagina. Early treatment can prevent or stop cancer.

What is the HPV self test?

The HPV self-test is for women ages 30-65 years old. You take your own sample from the vagina.

Your medical provider can do a pap test with a speculum, or you can do the HPV self-test.

The HPV self-test works just as well as when a doctor does the test.



Why should I do the HPV self-test?

The test can prevent cervical cancer!

It's fast, easy and doesn't hurt.

No need for a pelvic exam.

It's private. You can do it in the clinic bathroom.

It takes only 20 seconds.

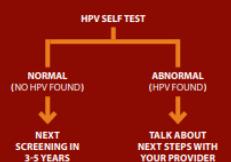


What happens after I do the self-test?

Your test will go to the lab and you will get your results within 1-2 weeks.

An abnormal (positive) test doesn't mean you have cancer, but HPV may be causing harmful changes to the cells of your cervix.

If your test is positive, follow up with your doctor to discuss next steps.

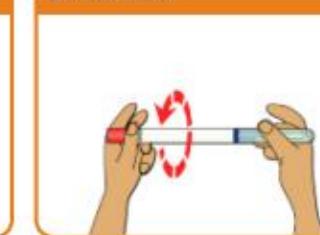


HPV Self-Test Instructions

1. Wash hands



2. Twist and...



... pull out swab



3. Get comfortable



4. Insert swab to RED MARK and rotate



5. Close the swab

6. Put the swab inside the metal door

Community-University Health Care Center (Minneapolis, MN)

Sara Zumbado, EHR Support Analyst

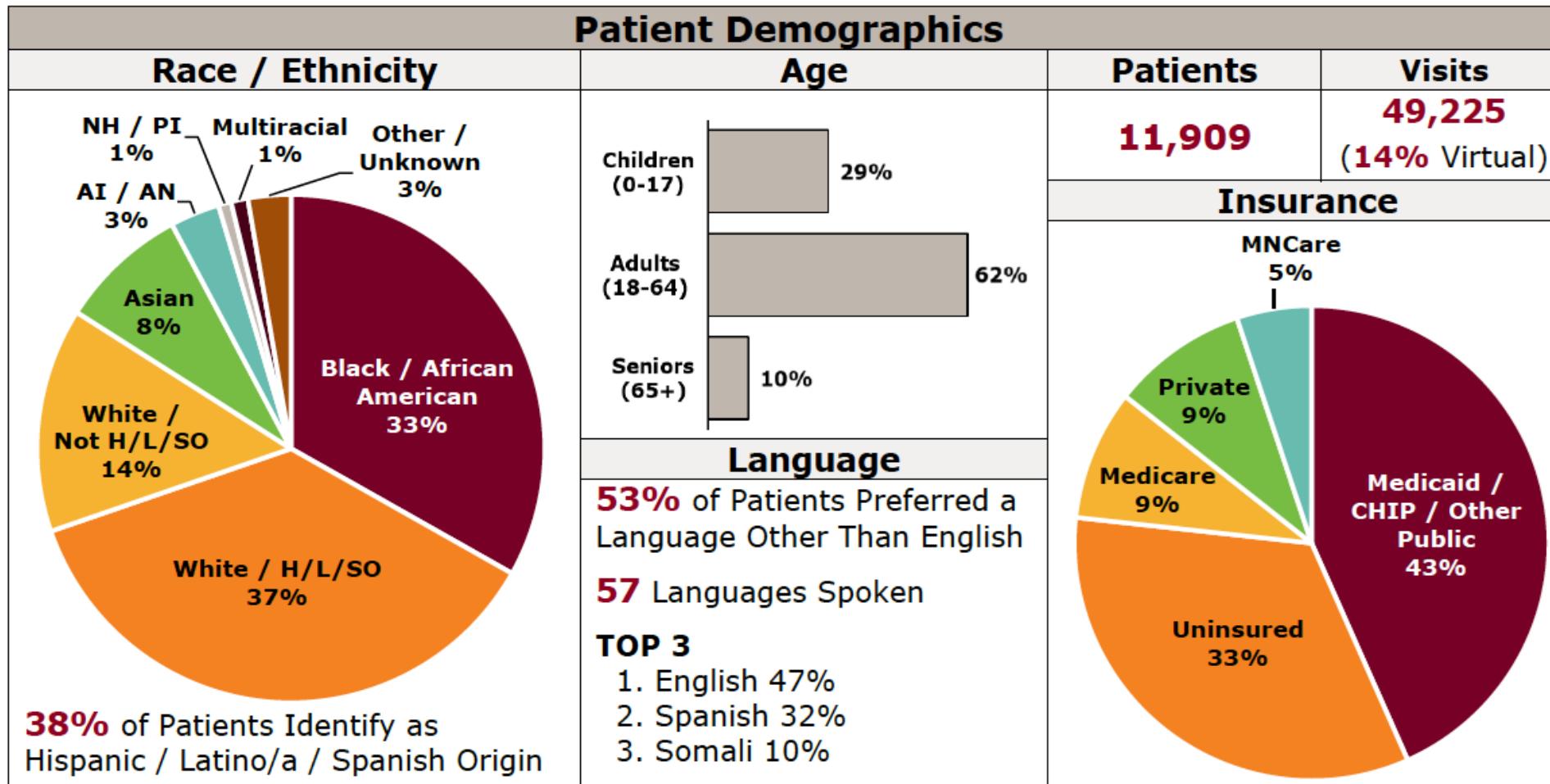
About CUHCC

- ~145 FTE
- ~185 students/learners
- ~49K annual visits
- OCHIN EPIC EHR
- \$25M operating budget



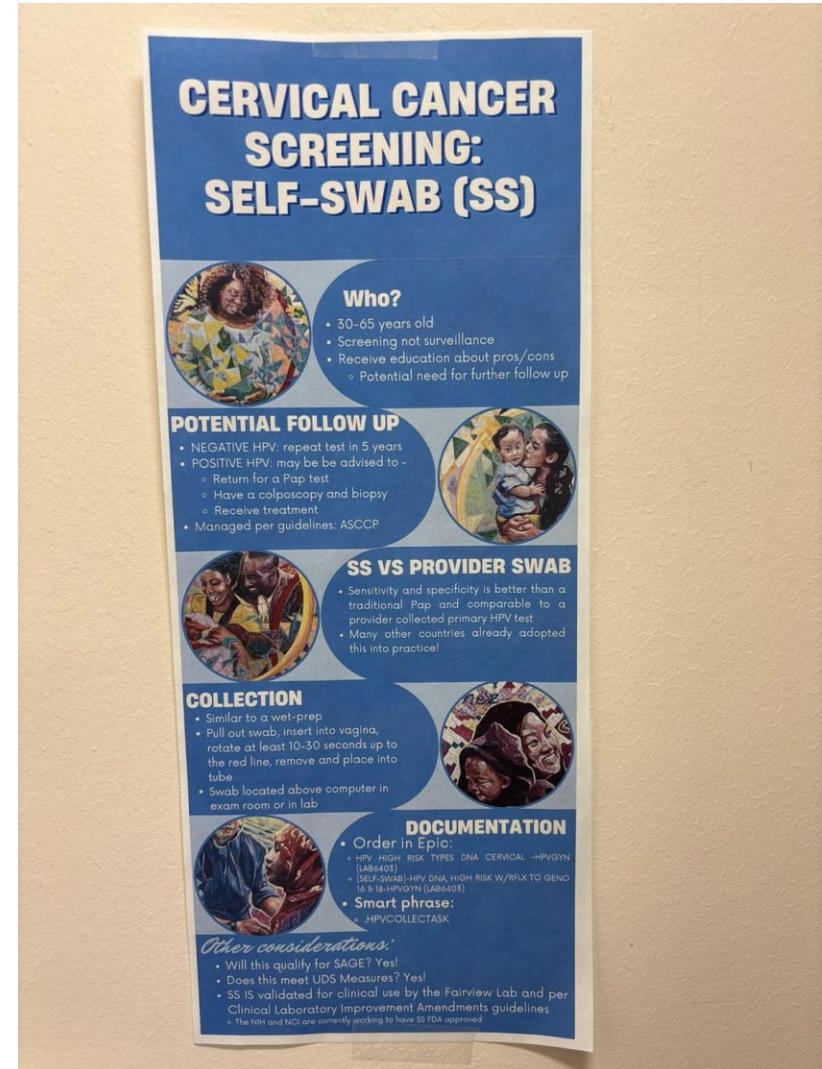
Communities We Serve

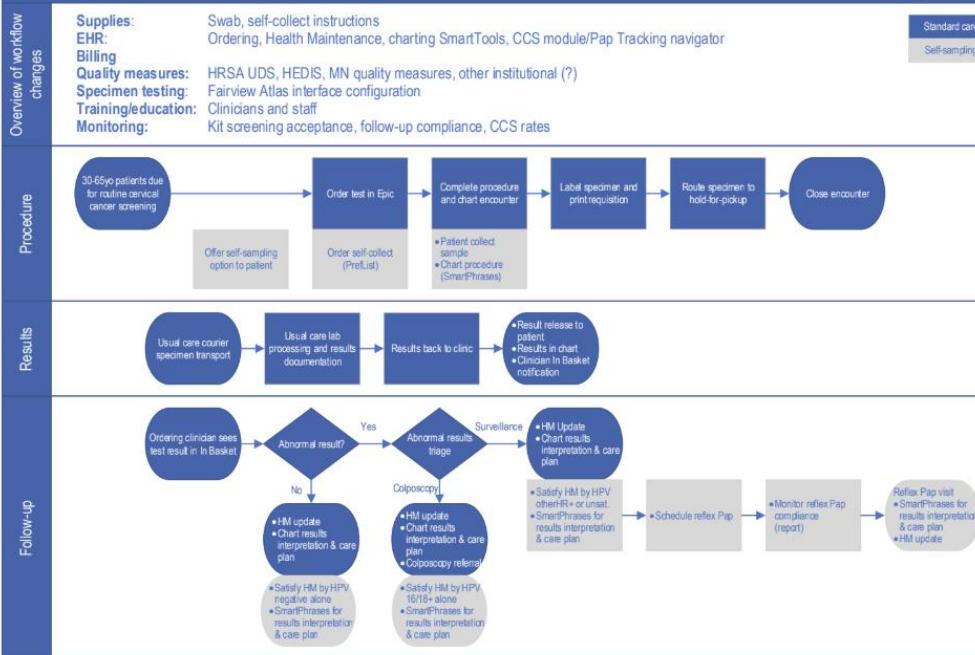
2024 Federal Summary Report



From Plan to Practice

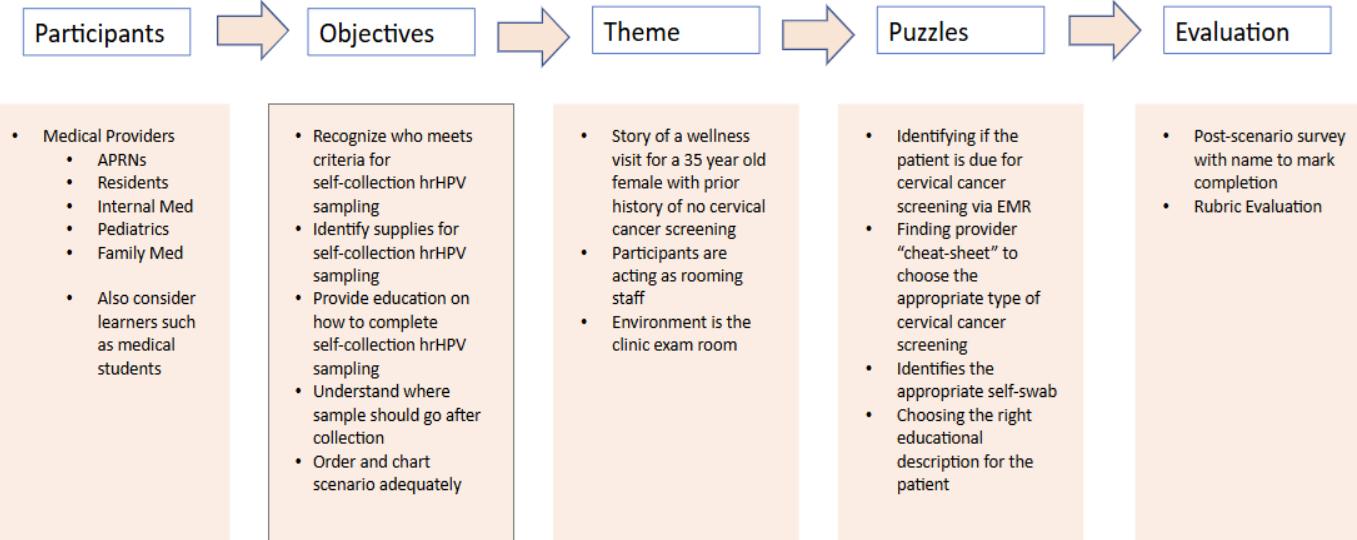
- Learner project/Research Support
 - Focused education for providers & staff
 - Simulations
 - Multilingual patient education tools
 - End of project presentation & recommendations
- Cervical Cancer Screening & Lab protocols and workflows
 - RN managed with Chief Clinical Officer
 - Feedback loops
 - Reporting validation/tracking





UNIVERSITY OF MINNESOTA		Protocol 0008
Community-University Health Care Center (CUHCC)		
Cervical Cancer Screening and Follow up		
Related Policy Name & #:	Clinical Care Policy 0010	
Effective Date:	See power dms	
Responsible:	Nursing Team, Providers, Referral Team	
Accountable (CUHCC Owner):	Chief Clinical Officer	
Consulted:		
Informed:	All Staff	
CUHCC Author:	Nursing Staff Supervisor	
If you have questions about this protocol, please contact your supervisor or CUHCC Compliance Officer.		
Instruction (include: roles/responsibility and refer to any other needed instructions/forms)		
Purpose: All patients where their sex assigned at birth is/was female will be screened for cervical cancer according to evidence-based guidelines.		
Certified Medical Assistant (CMA)/Licensed Practical Nurse (LPN)/Nurse Assistant (NA) role <ul style="list-style-type: none"> Review scheduled patients and assess the need for Pap smear at Well Woman Exam (WWE) by reviewing Health Maintenance and Care Everywhere for previous screening dates. Set up the exam room for the Pap test or other procedure (colposcopy, endometrial biopsy, etc.) as discussed during huddle. 		
Laboratory Staff Role <ul style="list-style-type: none"> Receive and process specimens for transport to reference lab 		

Pillars of Simulation



TALAABADA 1	TALAABADA 2	TALAABADA 3	TALAABADA 4	TALAABADA 5
<ul style="list-style-type: none"> Gamcaahaaga dhqa oo qalaji. Marojo daboolka gaduuka ah oo ka soo saar dheecaa-qadaha. U firi dheecaa-qadaha si feejigan hubina in aad aragtid calaamada guduudan/cas ee badhtanka ku taal iyo cudbiga jilcsan ee codifikatu yaal (sida hoos ku sawirin). Waa inaan xanuu dareemin. 	<ul style="list-style-type: none"> Waxaa dibnaa farjiga-xubintaada taranka ku kala qabataa hal gacan. Qunyar si dabacsan u gali dheecaa-qadaha xubinta- taranka iskuna day in aad galisid lila calaamada guduudan. 	<ul style="list-style-type: none"> Qunyar u roqrog dheecaa-qadaha mudo 10 ilaa 30 il-bidhiqi ah. 	<ul style="list-style-type: none"> Ku rid dheecaa-qadaha tuubada oo xir. Gamcaahaaga dhqa oo qalaji. U-gee tuubada dhakhtarkaaga ama kalkaliyaha caafimaad. 	



Haddii aad qabto wax su'aalo ah, waydiid dhakhtarkaaga ama kaalkaliyaha caafimaad.

Revised 2023 JAN 10



Challenges

- Understanding cervical cancer screening guidelines & navigating changes
- Provider/patient buy-in
- Reference lab test code changes
- EMR documentation tools needing to catch up



Lessons & Successes

- Expanding RN management of results & subject matter experts
- Leveraging new tools & resources
- Initial & ongoing education & communication
- Improving quality data & patient experience





Q&A



Thank You