



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



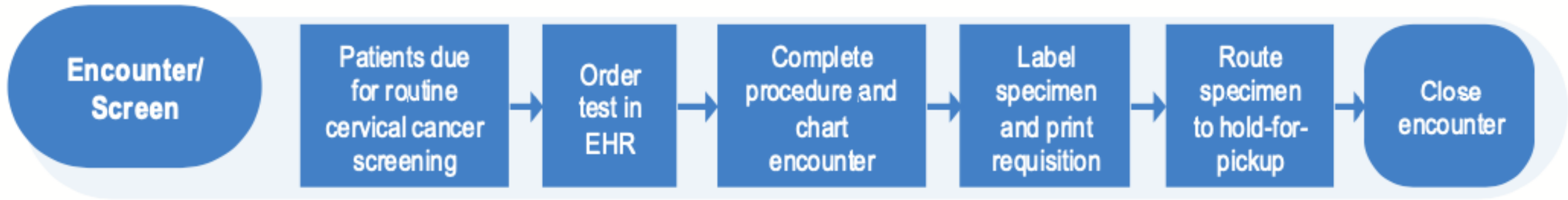
- Necessary readiness:
 - Laboratory capacity
 - Metrics
 - Reimbursement/billing

Step 1: Convene a Team

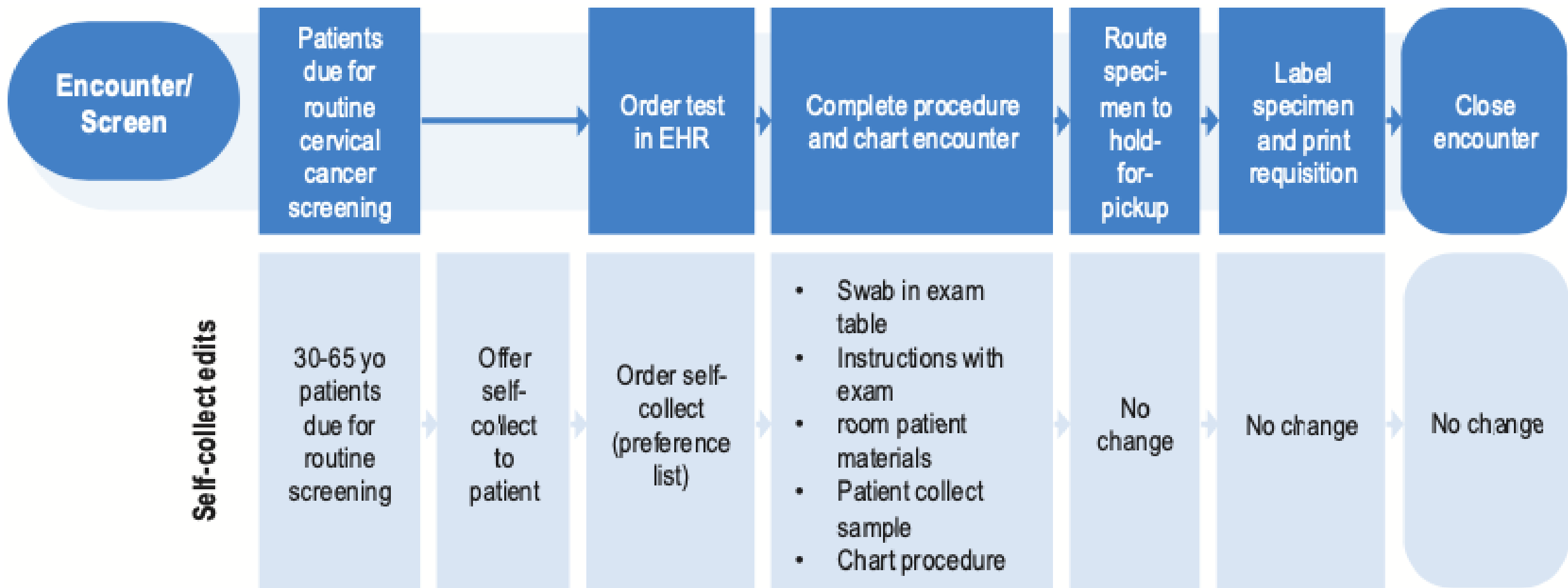


- All stakeholders
- Women's health
- EHR

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

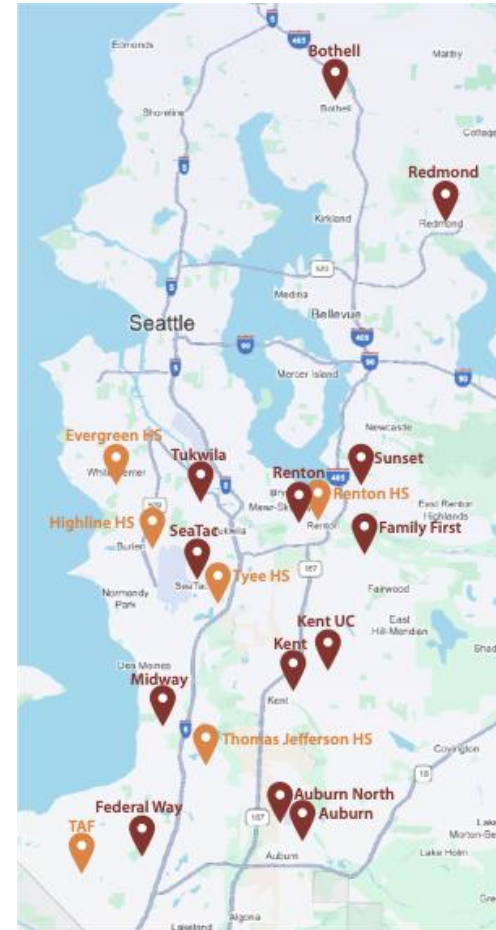
Carolyn Halley, Medical Director

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

WHO WE SERVE

HealthPoint serves over 100,000 patients annually.



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 mammo)

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!

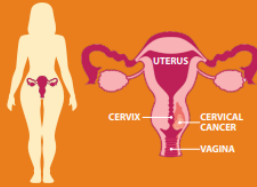
Human Papillomavirus (HPV) is a common virus that can cause cervical cancer. The HPV self-test looks for HPV in cells collected from your vagina. **Early treatment can prevent or stop cancer.**

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.

Your doctor can do a regular pap test if you prefer.

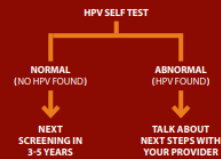


What happens after I do the self-test?

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.

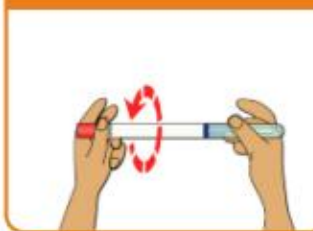


HPV Self-Test Instructions

1. Wash hands



2. Twist and...



... pull out swab



3. Get comfortable



4. Insert swab to RED MARK and rotate

This won't hurt. You don't need to reach your cervix. You'll gently swab the walls of your vagina.



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



OUR MISSION

Transforming care and education to **advance the health** of our patients and the communities we serve.

OUR VISION

We will be a **premiere education site** which leads in team-based care, and centers on person-family-community experience.



Communities We Serve

2024 Federal Summary Report

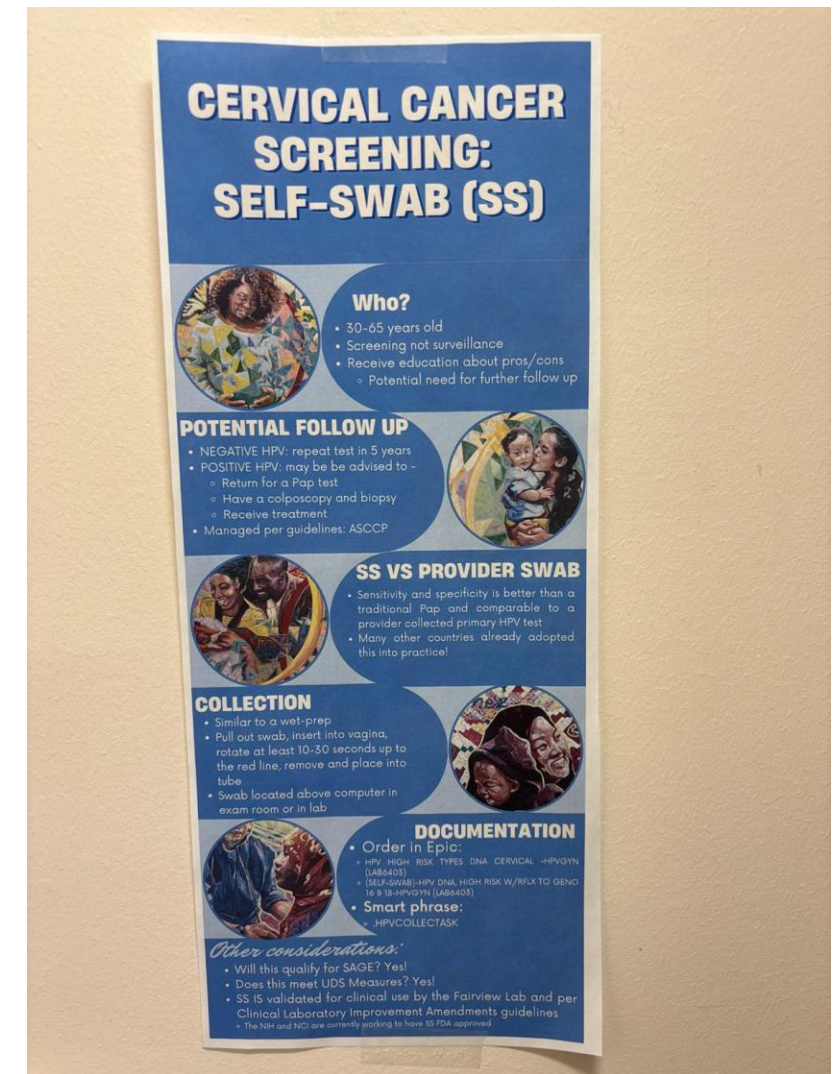


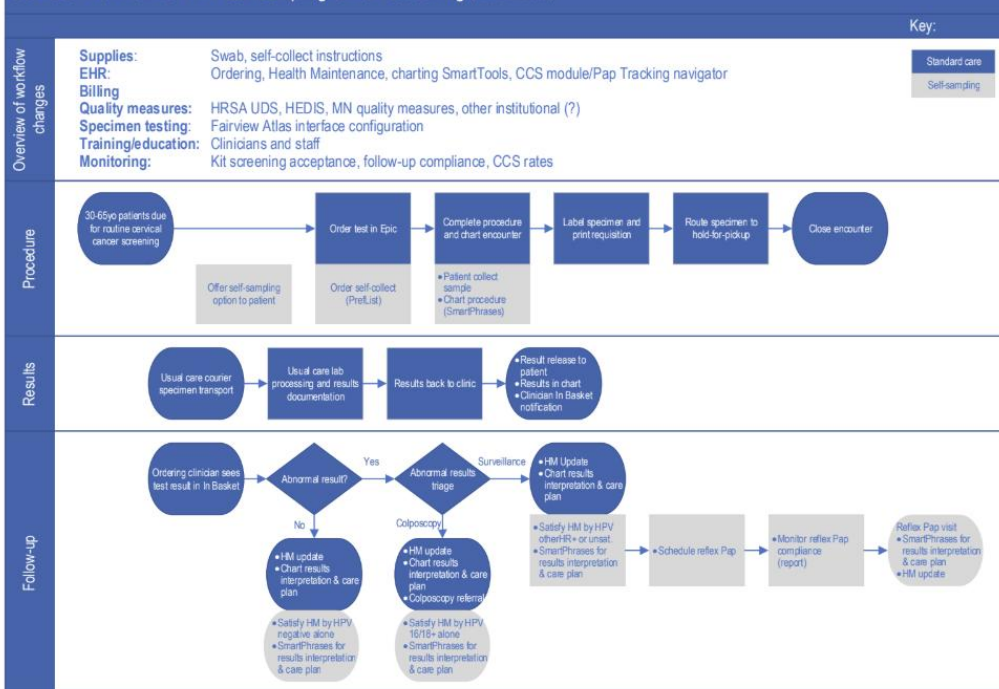
COMMUNITY-UNIVERSITY
HEALTH CARE CENTER
UNIVERSITY OF MINNESOTA
Driven to Discover®

Patient Demographics			
Race / Ethnicity	Age	Patients	Visits
<p>38% of Patients Identify as Hispanic / Latino/a / Spanish Origin</p>		11,909	49,225 (14% Virtual)
	Language	Insurance	
	<p>53% of Patients Preferred a Language Other Than English</p> <p>57 Languages Spoken</p> <p>TOP 3</p> <ol style="list-style-type: none">1. English 47%2. Spanish 32%3. Somali 10%		

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





Pillars of Simulation

Participants

Objectives

Theme

Puzzles

Evaluation

- Medical Providers
 - APRNs
 - Residents
 - Internal Med
 - Pediatrics
 - Family Med
- Also consider learners such as medical students

- Recognize who meets criteria for self-collection hrHPV sampling
- Identify supplies for self-collection hrHPV sampling
- Provide education on how to complete self-collection hrHPV sampling
- Understand where sample should go after collection
- Order and chart scenario adequately

- Story of a wellness visit for a 35 year old female with prior history of no cervical cancer screening
- Participants are acting as rooming staff
- Environment is the clinic exam room

- Identifying if the patient is due for cervical cancer screening via EMR
- Finding provider "cheat-sheet" to choose the appropriate type of cervical cancer screening
- Identifies the appropriate self-swab
- Choosing the right educational description for the patient

- Post-scenario survey with name to mark completion
- Rubric Evaluation

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.

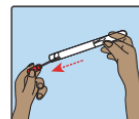
Certified Medical Assistant (CMA)/Licensed Practical Nurse (LPN)/Nurse Assistant (NA) role

- 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

- Receive and process specimens for transport to reference lab

Tilmaamaha isbaarida



TALAABADA 1

- Gamcahaaga dhaq oo qalaji.
- Marooji daboolka gaduudka ah oo ka soo saar dheecaan-qaadaha.
- U fiiri dheecaan-qaadaha si feejigan hubina in aad aragtid calaamada **guduudan/cas** ee badhtanka ku taal iyo cudbiga jilicsan ee cidhiifaku yaal (sida hoos ku sawiran).



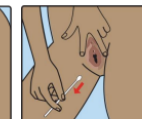
TALAABADA 2

- Waxaad dibnaha farjiga-xubintaada taranka ku kala qabataa hal gacan.
- Qunyar si dabacsan u gali dheecaan-qaadaha xubinta- taranka iskuna day in aad galisid ilaa calaamada **guduudan**.
- Waa in aanaad xanuun dareemin.



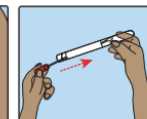
TALAABADA 3

- Qunyar u rogrog dheecaan-qaadaha mudo 10 ilaa 30 il-bidhiqsi ah.



TALAABADA 4

- Ka soo saar cudbiga-dheecaan-qaadaha farjigaaga adiga oo weli sidi gacanti kale ugu kala haya.



TALAABADA 5

- Ku rid dheecaan-qaadaha tuubada oo xir.
- Gamcahaaga dhaq oo qalaji.
- U-gee tuubada dhakhtarkaaga ama kalkaliyaha caafimaad.



Haddii aad qabto wax su'aalo ah, waydii dhakhtarkaaga ama kalkaliyaha 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