

2009 Bull's-Eye Nomination: Minnesota Department of Health Minnesota Health Care Setting Influenza Vaccination Program

Background

Influenza is the sixth leading cause of death among adults in the US killing an average of 36,000 Americans annually. The direct annual cost of influenza infection is approximately \$3 to 5 billion in the US and yet according to the 2006-2007 National Health Interview Survey, only 45% of the healthcare workers in the nation were vaccinated with influenza vaccine during the '06-'07 season. A Scottish study in 2000 compared mortality rates between long-term care hospitals that offered influenza vaccination to HCWs (51% vaccinated) with those that did not (5% vaccinated). It found a 40% reduction in all-cause mortality among the patients cared for by HCWs in the hospitals with higher levels of HCW vaccination (Carman WF et. al, Lancet 2000).

Influenza vaccination of healthcare workers saves money for employees and employers and prevents workplace disruption while protecting patients. Recent standards have been published requiring that health care organizations offer influenza vaccination to personnel including volunteers and licensed independent contractors with close patient contact free of charge. Implementation of policies is recommended to encourage health care personnel vaccination (e.g., obtaining signed statements from personnel who decline influenza vaccination). Influenza vaccination of health care workers is recommended by the Centers for Disease Control and Prevention, the Infectious Disease Society of America, the National Foundation for Infectious Disease, the American College of Physicians, and the Joint Commission.

The Minnesota Health Care Setting Influenza Vaccination Program was established to achieve the following goals: 1) to increase the number of Healthcare organizations with established influenza vaccination programs that offer the recommended program elements; 2) to increase the number of healthcare organizations that evaluate vaccination program and rates; 3) to assess personnel vaccination rates within a healthcare setting; 4) to share findings with stakeholders; 5) monitor seasonal influenza vaccination declination rates and 6) to increase seasonal influenza vaccination rates in healthcare settings. The long-term goal of the Minnesota Health Care

Setting Influenza Vaccination Program is to achieve a 90% coverage rate for influenza vaccine in all Health Care Personnel.

This initiative is lead by Minnesota's Adult and Adolescent Immunization Coordinator, Denise Dunn who is funded through the CDC grant. This initiative is ongoing through the support of not only the Minnesota Department of Health (MDH) but due to the wide interest and involvement from other prominent stakeholders and partners (including but not limited to Dr. Greg Poland, Mayo Clinic and the Minnesota Immunization Practices Advisory Committee). There is no additional budget for this initiative.

Justification

In 2007, MDH established the goal of a 90% influenza vaccination rate for HCP in Minnesota. This recommendation was endorsed by the Minnesota Immunization Practices Advisory Committee (MIPAC) and its Influenza Subgroup. In setting this goal, MDH encourages all employers of HCP to develop programs that provide influenza education, as well as opportunities for vaccination and incentives to be vaccinated. Evaluation of HCP influenza vaccination rates is a critical component of meeting this goal.

This project is especially innovative in the sense that it has a strong collaboration throughout all programmatic components in the development, implementation and evaluation phases by engaging critical partners and stakeholders in the process. MDH used the CDC requirement for programmatic evaluation as a spring board to build a strong evaluation component for this initiative, including a logic model to outline inputs, activities, outputs and outcomes (Appendix 1).

To establish baseline data, it was important to gather baseline data by having facilities fill out an online questionnaire (<http://www.health.state.mn.us/divs/idepc/diseases/flu/survey/survey.html>). This survey can be replicated by other programs. Two hundred and eighty facilities were surveyed. An online survey was made available as well as paper copies (no requests for paper copies). Pre-letters as well as follow-up calls were made with non-responders. The response rate for this survey was 62%. The survey found that the overall employee influenza vaccination rate

was 70.1% with hospitals showing the highest rates of coverage at 78%. The survey also found that: 99% of facilities provided vaccination onsite; 86% provided vaccination during all work shifts; and 99% provided vaccination at no cost which is typically quoted as a barrier to receive vaccine. Vaccination delivery methods, promotional activities, educational activities, barriers to utilizing the Minnesota Immunization Information Connection (MIIC), utilization of declination forms, reasons for declination and program characteristics of facilities with high vaccination rates were all assessed (see data analysis in Appendix 2).

The project struggled on how to ask the questions about vaccination rates, given that some of our facilities use declination forms and some do not. The success of this project is due in part to buy-in from other influential partners and stakeholders. Grantees can replicate this program by utilizing their existing Immunization Information System (IIS), existing adult partners and stakeholders in adult immunization, the CDC evaluation framework and developed MDH tools for this initiative.

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