

Strengthening the frontline against influenza in residential aged care: How targeting employee response to an influenza vaccination program can positively influence vaccination uptake rates

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Acknowledgements: Michael Cross (CEO, Aegis Aged Care), Hilary Slade, June Watkins, Tamara Williamson, Amber Ramus Coid & Lynne Campbell (Care Team, Aegis Aged Care)

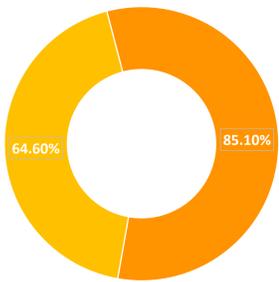
Background

Aegis Aged Care is comprised of:



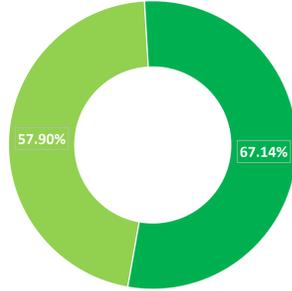
Good uptake of influenza vaccinations by employees contributes to reducing the impact of influenza in residential aged care residents. Benefits include reducing the risk of influenza infections and outbreaks in the residential setting, severity of influenza cases in the older adult, as well as a reduction of complications secondary to influenza infections¹. In its ongoing commitment to the safety and quality care delivery to Aegis Aged Care residents, the organisation reviewed its influenza vaccination program to identify actions to improve vaccination uptake rates through increased employee engagement with the program. Evaluation of Aegis Aged Care's influenza vaccination programs for 2016 and 2017 found of the total workforce:

Consent/Declination Response Rate



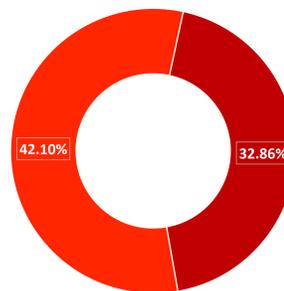
■ 2016 ■ 2017

Vaccination Uptake



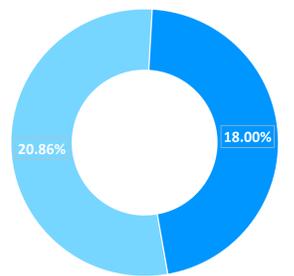
■ 2016 ■ 2017

Not Vaccinated



■ 2016 ■ 2017

Addressable Reasons for Declination



■ 2016 ■ 2017

Consent/Declination Response Rate	2016	2017
Consent response rate	57.90%	67.14%
Declination response rate	6.70%	17.96%
Total response rate	64.60%	85.10%

Influenza Vaccination Uptake Rate	2016	2017
Uptake within Aegis provided clinics	51.23%	59.61%
Uptake within Aegis facility by GP/NP	4.27%	5.85%
Uptake outside of Aegis – evidence provided	2.40%	1.68%

Rate of Non-Vaccination of All Employees	2016	2017
Declination via consent/declination form	5.20%	15.95%
Verbal declination no form	1.50%	2.01%
No response/evidence of vaccination	35.40%	14.90%

Declination Reasons - Addressable % per Total	2016	2017
Lack of knowledge – influenza &/or vaccination	8.93%	6.03%
Difficulty accessing a vaccination clinic	11.15%	8.30%
Workforce perception of organisation commitment	0.78%	3.67%

Actions

Targeted employee response through completion of Consent/Declination form changed from optional response to an employment requirement.

Aim: Achieve 100% response rate of Consent/Declination Form return (2016/2017 – an average 74.85% response of consent or declination achieved, however a 25.25% average 'no response' or no evidence of vaccination rate highlighted key area to target).

Organisational behaviour setting – CEO driven expectation of employee influenza vaccination program, communication how it contributes to the safe and quality care framework.

Aim: To set the organisation's expected behaviour of a safety culture, and acknowledge the employees who contribute to it through having the annual vaccination.

Mandated medical certificate evidence required for all declinations to demonstrate decision was appropriately informed, and medical exemptions evidenced.

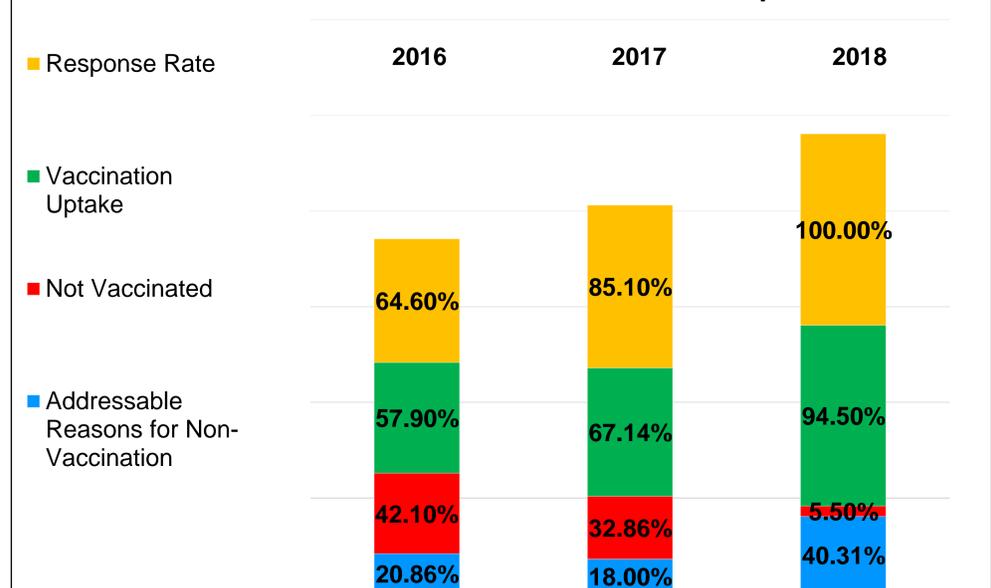
Aim: Ensure that employees declining the annual influenza vaccination are provided with information about the risks of the influenza virus and risk/benefits of the vaccination from an independent, appropriately trained health professional.

Increased number of Aegis employed Registered Nurses trained to administer influenza vaccinations to employees, with training focusing on peer-to-peer education

Aims: Increase the number of employees using in-facility clinics (2016/2017 – 55.42% employees had vaccination at an Aegis provided clinic, feedback noted an average of 9.70% of employees had difficulty accessing a clinic). Improve employee knowledge of the influenza vaccination and virus to dispel misconceptions (2016/2017 noted an average 7.48% of reasons for non-vaccination associated with lack of knowledge).

Results

Outcomes – Annual Comparison



2018 program outcomes:

- 100% return rate of consent/declination forms achieved, with 5.50% ($n = 187$) declining the vaccination
- 40.31% ($n = 75$) of declinations provided addressable reasons for declination: employee-centric reasons "I never get the flu" ($n = 14$, 18.67%), "the vaccine makes me unwell" ($n = 19$, 25.33%) and vaccine-centric reasons "vaccine is unsafe" ($n = 12$, 16.00%), "vaccine is ineffective" ($n = 30$, 40.00%).
- 36.43% ($n = 68$) declinations were "against medical advice" without further explanation. 2.65% ($n = 2$) responses had clear allergy or previous reaction evidence for declination
- 27.6% increased engagement of employees attending in-facility clinics from 55.42% ($n = 1884$) in 2016/2017, to 83.02% ($n = 2823$)
- 94.5% ($n = 3213$) employees reported as having the influenza vaccination for the 2018 Program
 $n =$ number of employees

Conclusion

Engagement through mandating a consent/declination response, and having an organisational culture focused on safety from the executive-level down, can have a positive impact to uptake rates. Applying continuous improvement processes through annual evaluation and change activities demonstrates the importance of responsiveness to workforce needs. Further opportunity for improvement continues to be identified organisationally, such as focusing on addressable declination responses. Responsibility for workforce response to the program is reliant on management commitment to overseeing their employees' uptake and following up declination requirements.

¹Ageing and Aged Care (2019) Mandatory Influenza (flu) vaccination program for residential aged care providers, <<https://agedcare.health.gov.au/mandatory-influenza-flu-vaccination-program-for-residential-aged-care-providers>> last accessed 30 October 2019