Flu Vaccine Chore or Challenge?

Dr Louise Doherty

Immunisation Conference 11th May 2016

Probe as jendent six die in home for le with their grief elderly

Mystery respiratory illness blamed Deaths occurred over past 10 days

Eilish O'Regan and Stephen Maguire

HEALTH chiefs last night began a major investigation into a "cluster" of six deaths at a private nursing home over the past 10 days.

A mystery respiratory illness, possibly a virulent strain of flu, is being blamed for the deaths at Nazareth House in Buncrana, Co Donegal

Emergency measures are being taken amid fears that the irus could spread further.

between March 22 and yesterday, sparking alarm among staff and local GPs. It is understood that some

are now also showing signs of respiratory problems. Last night, experts from the

patient watchdog HIQA travelled to the nursing home to begin a thorough investigation. Five of the six patient deaths at the 33-bedroom home happened in "a cluster" over the

past five days, the Health Service Executive (HSE) said last

ME DEATHS NURSIN educed to silence

Community is in 'deep shock'

u to blame

x patients

for death o

mdent NEWS 11







control of outbreak urged

FIONA GARTLAND

of the remaining 38 patients

night. All the deaths took place

The funeral of Margaret MrGuire

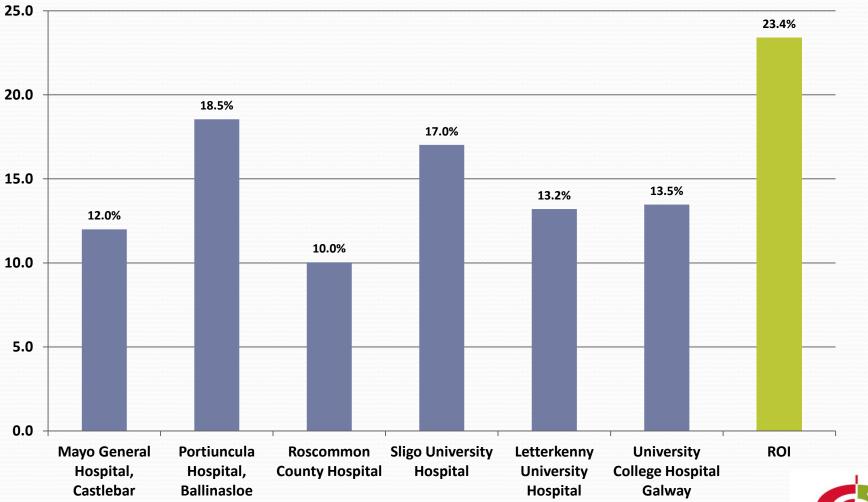
Vaccine in the elderly

- In healthy adults aged less than 65 years the vaccine efficacy of a well matched vaccine is 70%-90%.
- Protective efficacy is lower in the elderly with an effectiveness estimated at 30-40% among the frail elderly
- Vaccine is 50%–60% effective in preventing hospitalisation
- 80% effective in preventing death.

Staff Flu Vaccine Uptake by CHO Hospital

Season	СНО	Number of Participating Hospitals*	Number of Eligible Hospital HCWs	Number of Vaccinated Hospital HCWs	% Vaccinated
2015-2016	1	3	2,848	427	15.0
2015-2016	2	4	5,816	795	13.7
2015-2016	3	6	3,939	637	16.2
2015-2016	4	5	6,640.82	975	14.7
2015-2016	5	6	6,298	802	12.7
2015-2016	6	5	4,367.56	1,567	35.9
2015-2016	7	6	11,143.14	3,540	31.8
2015-2016	8	5	5,158	869	16.8
2015-2016	9	8	11,836	3,990	33.7
2015-2016	Ireland	48	58,046.52	13,602	23.4

Staff Flu Vaccine Uptake in Saolta Hospitals

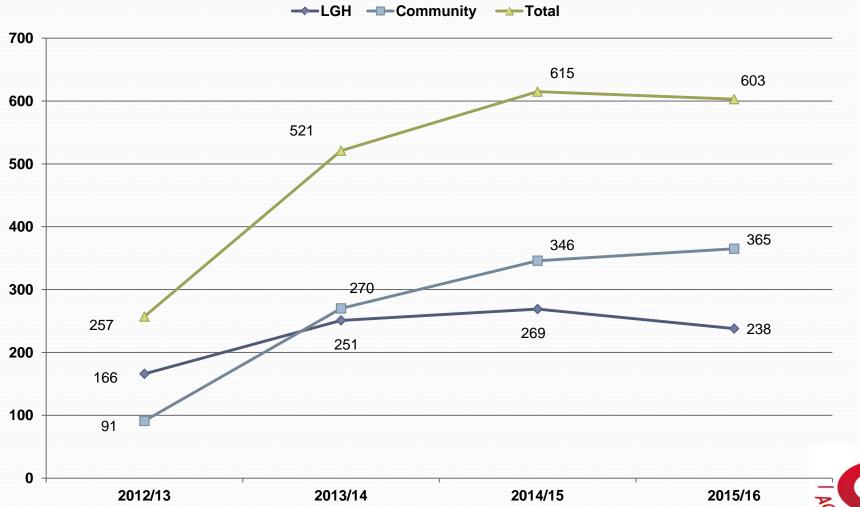




Staff Flu Vaccine Uptake in LTCF by CHO

Season	СНО	Number of Participating LTCFs*	Number of Eligible LTCF HCWs	Number of Vaccinated LTCF HCWs	% Vaccinated
2015-2016	1	16	872	167	19.2
2015-2016	2	10	762	167	21.9
2015-2016	3	2	172	53	30.8
2015-2016	4	21	1,521.64	378	24.8
2015-2016	5	3	496	99	20.0
2015-2016	6	5	741	210	28.3
2015-2016	7	8	1,793	434	24.2
2015-2016	8	12	1062	230	21.7
2015-2016	9	10	1341	513	38.3

HSE – Donegal Staff Flu Vaccine Uptake Seasonal Overview



Boonst the

Nobody tells me what to do"
"It is a basic human right to decide for myself"
"If it is so important why isn't it compulsory?"

The great enemy of the truth is very often not the lie...deliberate, contrived and dishonest, but the myth, persistent, persuasive and unrealistic. Belief in myths allows the comfort of opinion without the discomfort of thought

John F. Kennedy





Actually...

One serosurvey* showed 23% of HCW had serologic evidence of influenza virus infection during a single influenza season

...the majority had mild illness or subclinical infection





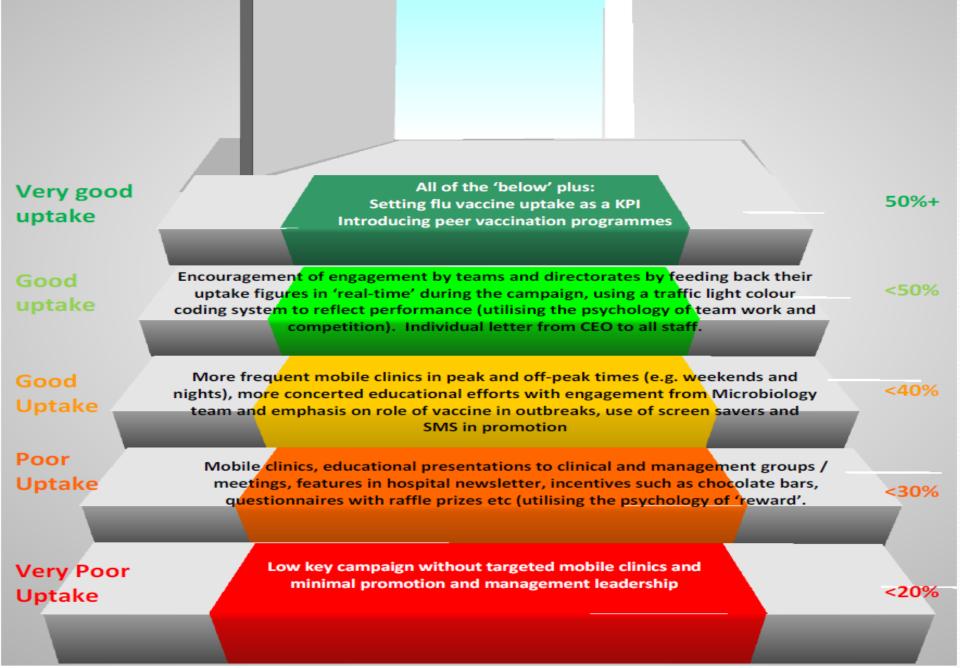
*Elder G, et al. BMJ. 1996;313:1241-2.

Kuster SP et al 2011. PLoS ONE 6(10):e26239. doi:10.1371/journal.pone.0026239



Influenza Vaccination Beliefs & Attitudes

Statement	Ever Vaccinated	Never Vaccinated	P value
I am healthy, I don't need the 'flu vaccine	19%	66%	p<0.000
Getting the 'flu vaccine is a good way to protect against catching 'flu	64%	25%	p<0.000
I have concerns about the side effects of the vaccine	35%	65%	p<0.000
Due to the nature of my work I am at increased risk of getting 'flu	81%	51%	p<0.000
Getting the 'flu vaccination not only protects you but also the elderly you care for	78%	52%	p<0.000
I am at risk of catching the 'flu	86%	66%	p<0.000
The 'flu vaccine causes the 'flu	15%	26%	p<0.000
My doctor does not recommend the 'flu vaccine	6%	12%	p<0.000



Source: Occupational Health Department, Beaumont Hospital



Improve Influenza Immunisation

- Make it attractive
 - Convenient and comfortable (site and time)
 - Incentives and rewards (raffles, spot prizes, chocolates)
 - Inter-departmental/team competition uptake by units published
 - Identify key person on each unit/ward/team
 - responsible for encouraging vaccination, vaccinating
- Make it accessible
 - Multiple opportunities (during day/night, week, month)
 - Continuous programme October-March
 - Avoid "missed opportunities"
 - offer immunisation during any contact
 - Bring vaccine to staff
 - mobile teams, multiple sites, target group gatherings, team meetings
 - Throughout work day (and night)



Rates with Different Interventions

Factor	Vaccination rate in Programmes with	Vaccination rate in Programmmes without
Weekend provision of vaccine	58.8%	43.9%
Train-the-trainer programs	59.5%	46.5%
Report of vaccination rates to administrators	57.2%	48.1%
Letter sent to employees emphasizing the importance of vaccination	59.3%	47%
Any form of visible leadership support	57.9%	36.9%
Required declination	56.9%	55%

Talbot TR. Dellit TH. Hebden J. Sama D. Cuny J. Factors associated with increased healthcare worker influenza vaccination rates:

results from a national survey of university hospitals and medical centers. Infect Control Hosp Epidemiol. 31(5):456-62, 2010 May

Does Vaccinating Health Care Workers (HCWs) Really Help? YES!

Many studies have shown that increasing the vaccination rates of HCWs decreases patient illness and death.

One study showed a 40% reduction o

influenza related deaths in hospitals with higher rates of HCP influenza vaccination.

Carman WF GD, et al. Lancet 2000;355:93

What did we do?

- Convened multidisciplinary group
- Meet all year round and plan campaign well in advance
- Have a graphic designer as part of group
- Engage with senior management and staff
- Recruited flu champions
- Teaser campaign
- Launch-with local footballers



What did we learn?

- Senior management support is vital-small amount of funding makes a difference
- Multidisciplinary team
- Flu champions (60 in community 0 in hospital)
- Leadership is important
- Key opinion leaders have a big role to play
- Bring dissenters on board and involve
- Needs to be someone's job

Did we have any effect?

- Started conversations
- Spread some other key messages about influenza to staff and public
- Support from the public
- Won over local advocates
- Secured managerial commitment in community

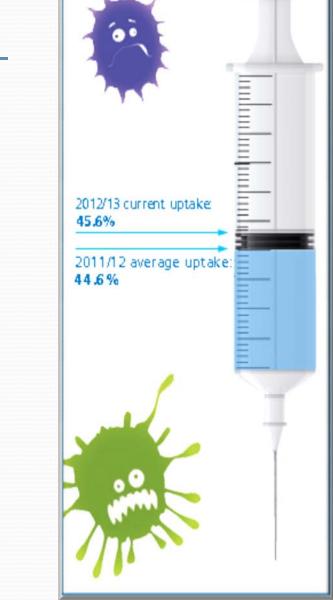
Lessons Learned

The bad

- The power of dissenters
- Liaising with national campaign can be difficult
- Capacity within Occupational Health can be limited
- Difficulty in monitoring
- Flu fatigue
- The good
 - Managerial support essential
 - Multidisciplinary team brings fresh ideas and skills
 - There are flu champions out there use them
 - Long term, year long process needed
 - It's ok to have some fun with it!

What are our plans?

- Peer vaccinator programme
- Improved monitoring
- Feedback
- Better communication plan
- Building on momentum



Jab-o-meter



So whose job is it?

It is the job of all staff to look after ourselves and the vulnerable patients we look after

If you cannot be positive, then at least be quiet. - Joel Osteen-

I wish there was a vaccine that prevented me from hearing your opinion about flu shots.





Thanks Questions?

