

Whitaker Institute Policy Brief Series



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Cluster: The Social Innovation Participation and Processes (SIPPs)

Theme: Public-Sector Innovation and Reform

Further Reading:

Domegan, C., McHugh, P., Harkin, K., McNamara, Á., O'Donovan D., Brychkov, D. and Fitzgerald, C. (2017) "[Healthcare Worker Flu Vaccination Research and Strategy: A Summary Report](#)", Whitaker Institute, NUI Galway, Ireland.

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Read More About:

The Social Innovation Participation and Processes Cluster within the Whitaker Institute for Innovation and Societal Change.

The content and views included in this policy brief are based on independent, peer-reviewed research and do not necessarily reflect the position of the Whitaker Institute

The Ultimate Immune Boost: Healthcare Worker Flu Vaccination

In line with the Immunisation Guidelines for Ireland from the National Immunisation Advisory Committee, the HSE recommend that all healthcare workers (HCW) in health services receive the seasonal influenza vaccination each year. Compared to adults working in non-healthcare settings, HCWs are at significantly higher risk of influenza. Achieving a high uptake of influenza vaccination among HCWs is recognised as a vital infection control intervention and occupational health issue to reduce the risk of influenza transmission between patients and HCWs (EASH, 2016; Kuster et al., 2011). The HSE recommended national uptake target is 40% in Ireland. Despite these recommendations, relatively few health care workers are vaccinated every year and influenza outbreaks in healthcare settings have occurred annually.

Research Findings

This study sought to develop and deliver an improved understanding of the forces and dynamics of flu vaccination from a 'hospital systems' perspective. In essence, a 'hospital system' is a set of elements - e.g. people, structures, organisational procedures, practices and roles - interconnected in such a way that they produce their own pattern of behaviours and choices over time. The project's overarching goal was to conduct formative research with HCW staff in hospitals, using group model building, to identify and tailor a multilevel, evidence-based strategy to increase flu vaccination uptake among healthcare staff - a priority topic identified by HSE, Healthy Ireland and the World Health Organisation (WHO). HCW participants (n=137) identified 368 individual barriers to flu vaccination and from these, 14 underlying forces to flu vaccination in the broader environment. 'Fit & Healthy Beliefs' and 'Past Experiences' were uncovered as the core underlying entrenched forces that undermine and/or block the uptake of the annual flu vaccination. The 'Fit & Healthy Beliefs' and 'Past Experiences' forces drive other overlapping factors such as apathy, lack of communication and fear of vaccination. Seven strategic leverages also emerged for a sustainable systems and iterative flu intervention strategy in a HCW workplace. These evidence-based leverage points directly target the 'Fit & Healthy Beliefs' and 'Past Experiences'; the deep structure of the flu vaccination system. The leverage points identified include peer vaccination; flu champions; a mutual value - not moral value focus; a ward/unit context; flu literacy; hospital communication mechanisms and framing flu vaccination as the "ultimate immune boost" (Ulasevich et al., 2017) against influenza.

Policy Implications

Taking a systems approach to complex behaviours, such as flu vaccination, uncovers not just the detailed complexity of the issue but also untangles the dynamic complexities underlying the patterns of behaviours embedded within institutional policies and infrastructures. To achieve the Healthy Ireland 2020 objective to increase the prevalence of flu vaccination among HCW staff, congruent with HSE strategy and WHO goals, a highly participatory evidence-based systems approach is capable of documenting deeply entrenched dynamics, both positive and negative, in a public sector setting. A sustainable annual flu vaccination strategy requires both individual and systemic factors to increase flu vaccination rates to 40%+ among HCWs. The key is to work with, not against, the detailed dynamics of flu vaccination from a (hospital) system's perspective.