

## Report on the Uptake of the Influenza Vaccine for Health Care Workers (HCWs) and residents in Long-Term/Residential Care Facilities (LTCFs)

## 2021-2022 Season

August/2022

**Report prepared by the HPSC** 

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## Summary Findings

This report presents data available from three different surveys administered to hospitals and long-term care facilities during the 2021-2022 influenza season.

#### HPSC-Survey-Hospital-based HCW Uptake

- Overall uptake among the 47 participating hospitals (three of which were non-HSE/private) was 64.0%, highest in the Dublin Midlands (TCD) hospital group at 71.8% and lowest in the Midwest (UL) hospital group at 47.6%.
- Uptake was highest among medical & dental staff (78.8%) and lowest among other patient and client care staff (50.7%).
- Highest uptake was recorded by Our Lady of Lourdes Hospital, Drogheda (91.6%) and lowest in Kilcreene Orthopaedic Hospital, Kilkenny (37.3%).
- St. James's Hospital, Dublin had the largest number of vaccinated staff at 3,877 out of a total compliment of 5,184 HCWs (74.8% uptake) with the lowest number recorded by Kilcreene Orthopaedic Hospital, Kilkenny (n=31/83; 37.3%).
- Among hospitals with staff complements of <1000, uptake was highest among six Ireland East (UCD) hospitals (68.9%) and lowest in one non-HSE/private hospital at 44.1%; where staff complements were 1000+, uptake was highest among three Dublin East (RCSI) hospitals (73.2%) and lowest among four West/North West (Saolta; NUIG) hospitals at 49.9%.
- Uptake returns from seven HSE hospitals (including the Children's Health Ireland at Crumlin Unit in Tallaght Hospital) were not available for this survey.

#### HPSC-Survey-LTCF-based HCW Uptake

- In total, 293 LTCFs participated in the survey; 214 HSE and 79 non-HSE/privately-run facilities (ratio 1:0.37).
- Uptake among those 214 managed/staff/funded by the HSE was 55.2%; among the 79 non-HSE/privately-run entities uptake was 55.1%. Among HSE facilities, uptake was highest in Community Health Organisation6 (CHO6<sup>1</sup>) (65.6%) and lowest in CHO1 (48.4%); among non-HSE/privately-run facilities, uptake was highest in CHO8 (76.4%) and lowest in CHO3 (30.3%).
- In HSE-funded LTCFs, uptake was highest among management and administration (66.9%) and lowest among medical and dental staff (51.1%); in non-HSE/privately-run LTCFs uptake was highest among medical and dental staff (96.4% and lowest among health and social care professionals (42.5%).
- Among HSE LTCFs with staff complements of <50, uptake was highest in one LTCF in CHO9 (76.6%) and lowest in three LTCFs in CHO7 (40.0%); where staff complements were 50+, uptake was highest among 21 LTCFs in CHO4 (61.0%) and lowest among 14 LTCFs in CHO1 (49.9%).</li>
- Among non-HSE/privately-run LTCFs with staff complements of <50, uptake was highest among four LTCFs in CHO4 (86.3%) and lowest among two LTCFs in CHO1 (63.8%); where staff complements were 50+, uptake was highest among two LTCFs in CHO8 (74.3%) and lowest among seven LTCFs in CHO6 (27.6%).

<sup>&</sup>lt;sup>1</sup> Details of each of the nine HSE Community Health Organisations are listed at the end of this report

#### HPSC-Point Prevalence Survey (PPS) of LTCF-based Residents

- In total, 162 LTCFs participated in the PPS relating to uptake among residents; 85 HSE and 77 non-HSE/privately-run facilities (ratio 1:0.91).
- Overall uptake among the HSE facilities was 95.4% among long-term residents and 78.7% among respite residents; in the non-HSE/privately-run LTCFs, uptake was also generally very high and broadly similar between long-term (91.2%) and respite residents (86.0%).
- Across all nine CHO and among both HSE and non-HSE/privately-run facilities, uptake among long-term residents was very high with the minimum uptake recorded being 69.1% in CHO7 among non-HSE/privately-run facilities.
- Uptake among respite residents varied considerably by CHO with not all reporting returns; in HSE facilities (range 61.5% [CHO7] to 100% [CHO3, CHO4 and CHO8]); in non-HSE/privately-run facilities (range 0.0% [CHO7] to 100% [CHO1, CHO3, CHO6 and CHO9]).
- In comparison to the long-term residents of LTCFs, relatively small numbers of respite residents were vaccinated (n=96-HSE; 135-non-HSE/privately-run).
- Overall uptake among respite residents was a little less in HSE facilities (78.7%) compared to non-HSE/privately-run facilities (86.0%) (Figures 3.1, 3.2).
- For long term residents, uptake by size (0-9, 10-49, 50+) was consistently high in both HSE facilities (83.2% to 97.1%) and in non-HSE/privately-run facilities (86.2% to 97.4%).

 Table A Comparison of Influenza Vaccine Uptake Among HCWs and Residents in hospitals and Long-term/Residential Care Facilities between seasons 2021-2022 and 2020-2021

		20	21-2022 Season			20	)20-2021 S	eason		
Target Group	HSE excl private /All	No. Participating Healthcare Facilities	No. Eligible	No. Vaccinated	% Uptake	No. Participating Healthcare Facilities	No. Eligible	No. Vaccinated	% Uptake	Change in %Uptake Between 2020- 2021 and 2021- 2022 Seasons
	HSE excl private	44	65947	42541	64.5	49	70263	50183	71.4	-6.9
Hospital HCWs	All	47	69157	44295	64.0	52	72805	51715	71.0	-7.0
	HSE excl private	214	14390	7948	55.2	225	13537	8982	66.3	-11.1
LTCF-HCWs	All	293	21665	11954	55.2	422	30418	19262	63.3	-8.1
ITCC Laws Tawa Dasidanta	HSE excl private	84	2105	2008	95.4	93	2652	2481	93.6	1.8
LTCF-Long Term Residents	All	160	5030	4677	93.0	315	8627	8041	93.2	-0.2
ITCE Despite Desidents	HSE excl private	21	122	96	78.7	30	254	143	56.3	22.4
TCF-Respite Residents	All	44	279	231	82.8	58	545	308	56.5	26.3

## Introduction

This HSE-HPSC report on the uptake of the influenza vaccine for the current season 2021-2022 presents results based on a number of data sources, focussing on data obtained from both hospitals and long-term/residential care facilities (LTCFs). These capture uptake in health care workers (HCWs) based in acute hospitals and also among HCWs and residents in LTCFs.

The data presented in this report are for the influenza season 2021-2022. Nationally, the HSE target uptake of 75% remained unchanged from the previous season.

## Methodology

Three surveys were conducted, two were targeted at HCWs in different settings, one for acute hospitals and the other for LTCFs, undertaken on 19<sup>th</sup> November 2021 for provisional results and repeated again on 24<sup>th</sup> February 2022 for final returns. A third survey, a point prevalence survey, was targeted at LTCFs to report on the uptake among their residents (carried out between 13<sup>th</sup> and 17<sup>th</sup> December 2021). All three surveys were conducted using the online <u>qualtrics.com</u> platform.

Links to the surveys were cascaded by email to known healthcare facilities for which HPSC had contact details, and also through flu leads and managers based in hospitals groups, hospitals, community health organisations and long term/residential care facilities. Reminders were also sent where necessary.

### Results

#### HSE-HPSC Qualtrics Surveys

#### Hospital-based HCW Uptake

A total of 47 hospitals participated in the survey to give an overall uptake of 64.0% and 44 out of 51 (86.3%) HSE/public hospitals had an overall uptake of 64.5%. Seven HSE hospitals that could not provide a full set of returns, four were part of the Mid-West (UL) hospital group: University Hospital Limerick, University Maternity Hospital Limerick, St. John's Hospital, Limerick and Croom Orthopaedic Hospital. The hospital group did, however, provide a combined set of returns with an overall uptake of 51.8% (n=2,543/4,910). The Children's Health Ireland hospital group (Children's Health Ireland at Crumlin, Children's Hospital Ireland (Tallaght University Hospital Unit) and Children's University Hospital, Temple Street Dublin) also did not provide returns this season. Three non-HSE/private hospitals also participated in the survey (uptake of 54.6%).

The highest uptake reported by the Dublin Midlands (TCD) hospital group (71.8%) and the lowest by the Midwest (UL) group (47.6%); there was no statistical difference between uptake by group and the national figure (Figure 1). Among staff categories, uptake was highest among medical & dental staff (78.8%) and lowest among other patient and client care staff (50.7%). (Table 1b).

Table 1a Hospital-based Influenza Eligible and Vaccinated HCW Counts by Hospital Group and Staff Category for the 2021-2022 Season, n=47 hospitals, including 3 non-HSE/private

												Eligible Other	Vaccinated		Vaccinat
	No.	Total	Total	Eligible Management &	Vaccinated Management &	Eligible Medical	Vaccinated Medical &	Eligible	Vaccinated	Eligible Health &	Vaccinated Health &	Patient Client	Other Patient	Eligible General	ed General
Hospital Group	Hospitals	Eligible	Vaccinated	Administration	Administration	& Dental	Dental	Nursing	Nursing	Social Care	Social Care	Care	Client Care	Support	Support
Children's Health Ireland**	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dublin Midlands (TCD)	7	12661	9089	1856	1271	1613	1356	4505	3138	1952	1485	1409	895	1326	944
Dublin North East (RCSI)	7	11443	7695	1741	1050	1579	1164	4439	3131	1411	1011	1146	661	1127	678
Ireland East (UCD)	11	15184	10428	2218	1467	2262	1875	5630	3831	1857	1427	1463	689	1754	1139
South/South West (UCC)	10	13335	8329	1858	1104	1776	1396	5550	3306	1734	1346	761	401	1656	776
West/North West (Saolta; NUIG)	6	12082	6283	1777	701	1811	1343	4754	2382	1503	993	1111	344	1126	520
Midwest (UL)***	2	574	273	91	38	36	20	273	116	43	37	65	30	66	32
Other*	1	668	444	91	69	29	19	174	111	207	154	101	49	66	42
Private/Non-HSE	3	3210	1754	470	278	268	182	1086	579	544	313	302	197	540	205
Total	47	69157	44295	10102	5978	9374	7355	26411	16594	9251	6766	6358	3266	7661	4336
Total excluding private	44	65947	42541	9632	5700	9106	7173	25325	16015	8707	6453	6056	3069	7121	4131

\*National Rehabilitation Hospital in Dun Laoghaire, Dublin; \*\* No returns submitted by the Children's Health Ireland hospital group; \*\*\*Returns for four of the hospitals in the UL hospital group were not available, but the group did provide an overall uptake figure of 51.8% (n=2543/4910).

The highest uptake was recorded by Our Lady of Lourdes Hospital, Drogheda (91.6%) and lowest in Kilcreene Orthopaedic Hospital, Kilkenny (37.3%). St. James's Hospital, Dublin had the largest number of vaccinated staff (n=5,184 /3,877) HCWs; 74.8% uptake) with the lowest number recorded by Kilcreene Orthopaedic Hospital, Kilkenny (n=83/31; 37.3%) (Table 1c).

Hospital Group	% Total Uptake	% Uptake Management & Administration	% Uptake Medical & Dental	% Uptake Nursing	% Uptake Health & Social Care	% Uptake Other Patient Client Care	% Uptake General Support
Children's Health Ireland**	-	-	-	-	-	-	-
Dublin Midlands (TCD)	71.8	68.5	84.1	69.7	76.1	63.5	71.2
Dublin North East (RCSI)	67.2	60.3	73.7	70.5	71.7	57.7	60.2
Ireland East (UCD)	68.7	66.1	82.9	68.0	76.8	47.1	64.9
South/South West (UCC)	62.5	59.4	78.6	59.6	77.6	52.7	46.9
West/North West (Saolta; UHG; NUIG)	52.0	39.4	74.2	50.1	66.1	31.0	46.2
Midwest (UL)***	47.6	41.8	55.6	42.5	86.0	46.2	48.5
Other*	66.5	75.8	65.5	63.8	74.4	48.5	63.6
Private/Non-HSE	54.6	59.1	67.9	53.3	57.5	65.2	38.0
Total	64.0	59.2	78.5	62.8	73.1	51.4	56.6
Total excluding private	64.5	59.2	78.8	63.2	74.1	50.7	58.0

Table 1b Hospital-based Influenza HCW Uptake by Hospital Group and Staff Category for the 2021-2022 Season, n=47 Hospitals, including 3 non-HSE/private

\*National Rehabilitation Hospital in Dun Laoghaire, Dublin; \*\* No returns submitted by the Children's Health Ireland hospital group; \*\*\*Returns for four of the hospitals in the UL hospital group were not available, but the group did provide an overall uptake figure of 51.8% (n=2,543/4,910).

## Table 1c Hospital-based Influenza HCW Uptake by Hospital for the 2021-2022 Season, n=47 Hospitals, including 3 non-HSE/private

Hospital Group	Hospital	Total Eligible	Total Vaccinated	% Uptake
Children's Health Ireland**	Children's University Hospital, Temple Street Dublin	-	-	-
	Children's Health Ireland at Crumlin	-	-	-
	Children's Health Ireland at Crumlin Unit in Tallaght Hospital	-	-	-
Children's Health Ireland Total		-	-	
Dublin Midlands (TCD)	Coombe Women & Infants University Hospital, Dublin	950	680	71.6
	Midland Regional Hospital Portlaoise	852	537	63.0
	Midland Regional Hospital Tullamore	1282	789	61.5
	Naas General Hospital	873	605	69.3
	St. James's Hospital, Dublin	5184	3877	74.8
	St. Luke's Hospital, Rathgar, Dublin	580	379	65.3
	Tallaght University Hospital	2940	2222	75.6
Dublin Midlands (TCD) Total		12661	9089	71.8
Dublin North East (RCSI)	Beaumont Hospital	4360	2576	59.1
	Cavan General Hospital	1260	810	64.3
	Connolly Hospital Blanchardstown	1600	913	57.1
	Louth County Hospital, Dundalk	359	179	49.9
	Monaghan General Hospital	155	95	61.3
	Our Lady of Lourdes Hospital, Drogheda	2656	2434	91.6
	Rotunda Hospital Dublin	1053	688	65.3
Dublin North East (RCSI) Total		11443	7695	67.2
Ireland East (UCD)	Cappagh National Orthopaedic Hospital, Dublin	567	342	60.3
	Mater Misericordiae University Hospital, Dublin	4191	3135	74.8
	Midland Regional Hospital Mullingar	1060	696	65.7
	National Maternity Hospital, Holles Street	945	675	71.4
	Our Lady's Hospital, Navan	672	452	67.3
	Royal Victoria Eye & Ear Hospital, Dublin	333	238	71.5
	St. Columcille's Hospital, Loughlinstown	517	363	70.2
	St. Luke's General Hospital, Kilkenny	1180	805	68.2
	St. Michael's Hospital, Dun Laoghaire	421	309	73.4
	St. Vincent's University Hospital	4089	2542	62.2
	Wexford General Hospital	1209	871	72.0
Ireland East (UCD) Total		15184	10428	68.7
Midwest (UL)**	Nenagh Hospital	298	140	47.0
	Ennis Hospital	276	133	48.2
	St. John's Hospital, Limerick	-	-	-
	Croom Orthopaedic Hospital	-	-	-
	University Maternity Hospital Limerick	-	-	-
	University Hospital Limerick	-	-	-
Midwest (UL) Total		574	273	47.6

Table 1c Hospital-based Influenza HCW Uptake by Hospital for the 2021-2022 Season, n=47 Hospitals, including 3 non-HSE/private (continued)

Hospital Group	Hospital	Total Eligible	Total Vaccinated	% Uptake
South/South West (UCC)	Bantry General Hospital	342	194	56.7
	Kilcreene Orthopaedic Hospital, Kilkenny	83	31	37.3
	Mallow General Hospital	298	202	67.8
	Mercy University Hospital, Cork	1492	997	66.8
	South Infirmary - Victoria University Hospital, Cork	1028	581	56.5
	South Tipperary General Hospital, Clonmel	1246	894	71.7
	University Hospital Kerry	1457	758	52.0
	University Hospital Waterford	2188	1467	67.0
	Cork University Hospital (excluding maternity)	4468	2754	61.6
	Cork University Hospital Maternity (CUHM)	733	451	61.5
South/South West (UCC) Total		13335	8329	62.5
West/North West (Saolta; NUIG)	Galway University Hospitals	4750	2584	54.4
	Letterkenny University Hospital	2303	1085	47.1
	Mayo University Hospital	1521	682	44.8
	Portiuncula University Hospital	901	688	76.4
	Roscommon University Hospital	440	236	53.6
	Sligo University Hospital	2167	1008	46.5
West/North West (Saolta; NUIG) Total		12082	6283	52.0
Other*	National Rehabilitation Hospital, Dún Laoghaire, Co. Dublin	668	444	66.5
Other Total		668	444	66.5
Non-HSE/Private	Blackrock Clinic, Co. Dublin	1134	730	64.4
	Bon Secours Hospital, Cork	1448	747	51.6
	Bon Secours Hospital, Tralee	628	277	44.1
Non-HSE/Private Total		3210	1754	54.6
Total excl private		65947	42541	64.5
Total incl private		69157	44295	64.0

\*National Rehabilitation Hospital in Dun Laoghaire, Dublin; \*\* No returns submitted by the Children's Health Ireland hospital group; \*\*\*Returns for four of the hospitals in the UL hospital group were not available, but the group did provide an overall uptake figure of 51.8% (n=2,543/4,910).

See Appendix 1 for a breakdown of hospital-HCW uptake by staff of category (See separate excel file with this report).

Among hospitals with staff complements of <1000, uptake was highest among six Ireland East (UCD) hospitals (68.9%) and lowest in one non-HSE/private hospital (44.1%); where staff complements were 1000+, uptake was highest among three Dublin East (RCSI) hospitals (73.2%) and lowest among four West/North West (Saolta; NUIG) hospitals (49.9%) (Figure 2).



Figure 1.1 Percentage uptake of hospital-based HCWs by hospital group, 2021-2022 Season, n=47 hospitals, including 3 non-HSE/private



Figure 1.2 Percentage uptake of hospital-based HCWs by hospital group and staff category, 2021-2022 Season, n=47 hospitals, including 3 non-HSE/private



Figure 2 Percentage uptake of hospital-based HCWs by hospital group and staff size (<1000, 1000+ HCWs), 2021-2022 Season, n=47 hospitals, including 3 non-HSE/private

#### LTCF-based HCW Uptake

In total, 293 LTCFs participated in the survey; 214 HSE and 79 non-HSE/privately-run facilities (ratio 1:0.37). Among HCWs based in residential facilities, uptake among those 214 managed/staffed/funded by the HSE, was 55.2%, and was slightly more than that among the 79 non-HSE/privately-run entities (55.1%) (Tables 2b and 2d). Among HSE facilities, uptake was highest in CHO6 (65.6%) and lowest in CHO1 (48.4%) (Table 2b); among non-HSE/privately-run facilities, uptake was highest in CHO6 (30.3%) (Table 2d). In HSE-funded LTCFs, uptake was highest among management and administration (66.9%) and in non-HSE/privately-run LTCFs it was medical and dental staff (96.4%). Uptake was lowest among medical and dental staff (51.1%) in HSE-funded LTCFs and among health and social care professionals (42.5%) in non-HSE/privately-run LTCFs.

				Eligible	Vaccinated	Eligible				Eligible		Eligible Other	Vaccinated		
				Management	Management	Medical	Vaccinated			Health &	Vaccinated	Patient	Other	Eligible	Vaccinated
	No.	Total	Total	&	&	&	Medical &	Eligible	Vaccinated	Social	Health &	Client	Patient	General	General
СНО	LTCFs	Eligible	Vaccinated	Administration	Administration	Dental	Dental	Nursing	Nursing	Care	Social Care	Care	<b>Client Care</b>	Support	Support
CHO1	33	1802	873	102	69	76	45	615	293	132	72	402	173	475	221
CHO2	22	1464	810	90	80	14	3	502	252	91	59	557	250	210	166
CHO3	11	896	515	63	42	11	5	329	184	144	77	239	150	110	57
CHO4	43	3569	2199	339	244	199	105	1341	878	346	174	614	381	730	417
CHO5	57	2284	1167	88	54	88	21	971	473	128	47	407	254	602	318
CHO6	9	506	332	40	29	25	17	138	84	45	29	177	115	81	58
CHO7	11	919	486	74	26	7	5	398	216	66	34	220	123	154	82
CHO8	21	1513	812	149	71	83	50	511	278	87	32	316	185	367	196
CHO9	7	1437	754	78	69	18	15	447	313	127	101	565	170	202	86
Total	214	14390	7948	1023	684	521	266	5252	2971	1166	625	3497	1801	2931	1601

Table 2a LTCF-based HCW Influenza Eligible and Vaccinated HCW Counts by CHO and Staff Category (HSE only) for the 2021-2021 Season, n=214 LTCFs

#### Table 2b LTCF-based HCW Influenza Vaccine Uptake (%) by CHO and Staff Category (HSE only) for the 2021-2022 Season, n=214 LTCFs

СНО	% Total	% Uptake Management	% Uptake Medical &	% Uptake	% Uptake Health & Social	% Uptake Other Patient Client	% Uptake General Support
СПО	Uptake	& Administration	Dental	Nursing	Care	Care	% Optake General Support
CHO1	48.4	67.6	59.2	47.6	54.5	43.0	46.5
CHO2	55.3	88.9	21.4	50.2	64.8	44.9	79.0
CHO3	57.5	66.7	45.5	55.9	53.5	62.8	51.8
CHO4	61.6	72.0	52.8	65.5	50.3	62.1	57.1
CHO5	51.1	61.4	23.9	48.7	36.7	62.4	52.8
CHO6	65.6	72.5	68.0	60.9	64.4	65.0	71.6
CHO7	52.9	35.1	71.4	54.3	51.5	55.9	53.2
CHO8	53.7	47.7	60.2	54.4	36.8	58.5	53.4
CHO9	52.5	88.5	83.3	70.0	79.5	30.1	42.6
Total	55.2	66.9	51.1	56.6	53.6	51.5	54.6

# Table 2c LTCF-based HCW Influenza Eligible and Vaccinated HCW Counts by CHO and Staff Category (non-HSE/privately-run only) for the 2021-2022 Season, n=79 LTCFs

СНО	No. LTCFs	Total Eligible	Total Vaccinated	Eligible Management & Administration	Vaccinated Management & Administration	Eligible Medical & Dental	Vaccinated Medical & Dental	Eligible Nursing	Vaccinated Nursing	Eligible Health & Social Care	Vaccinated Health & Social Care	Eligible Other Patient Client Care	Vaccinated Other Patient Client Care	Eligible General Support	Vaccinated General Support
CHO1	4	194	120	15	14	6	6	50	36	29	9	67	40	27	15
CHO2	3	176	104	36	33	0	0	22	10	26	25	63	27	29	9
CHO3	11	941	455	60	45	0	0	195	114	135	79	434	145	117	72
CHO4	12	1474	869	70	57	14	14	358	211	273	147	507	300	252	140
CHO5	17	689	472	47	36	0	0	122	89	187	106	173	117	160	124
CHO6	10	1489	451	215	39	2	2	173	88	807	183	205	107	87	32
CHO7	8	1145	703	110	72	23	21	327	212	108	80	368	235	209	83
CHO8	8	385	294	24	21	3	3	70	54	27	22	111	87	150	107
CHO9	6	782	538	72	44	7	7	186	159	94	66	277	171	146	91
Total	79	7275	4006	649	361	55	53	1503	973	1686	717	2205	1229	1177	673

#### Table 2d LTCF-based HCW Influenza Vaccine Uptake (%) by CHO and Staff Category (non-HSE/privately-run only) for the 2021-2022 Season, n=79 LTCFs

СНО	% Total Uptake	% Uptake Management & Administration	% Uptake Medical & Dental	% Uptake Nursing	% Uptake Health & Social Care	% Uptake Other Patient Client Care	% Uptake General Support
CHO1	61.9	93.3	100.0	72.0	31.0	59.7	55.6
CHO2	59.1	91.7	-	45.5	96.2	42.9	31.0
CHO3	48.4	75.0	-	58.5	58.5	33.4	61.5
CHO4	59.0	81.4	100.0	58.9	53.8	59.2	55.6
CHO5	68.5	76.6	-	73.0	56.7	67.6	77.5
CHO6	30.3	18.1	100.0	50.9	22.7	52.2	36.8
CHO7	61.4	65.5	91.3	64.8	74.1	63.9	39.7
CHO8	76.4	87.5	100.0	77.1	81.5	78.4	71.3
CHO9	68.8	61.1	100.0	85.5	70.2	61.7	62.3
Total	55.1	55.6	96.4	64.7	42.5	55.7	57.2

See Appendix 2 for a breakdown of LTCF-based HCW uptake by staff of category (See separate excel file with this report).



Figure 3.1 LTCF-based HCW Influenza uptake by CHO (HSE only) and number of reporting LTCFs for the 2021-2022 Season, n=214 LTCFs



Figure 3.2 LTCF-based HCW Influenza uptake by CHO (non-HSE/privately-run only) and number of reporting LTCFs for the 2021-2022 Season, n=79 LTCFs



#### Figure 4.1 influenza vaccine uptake (%) of LTCF-based HCWs in HSE run facilities by CHO and staff category, 2021-2022 season, n=214 LTCFs



Figure 4.2 Influenza vaccine uptake (%) of LTCF-based HCWs in non-HSE/privately-run facilities by CHO and staff category, 2021-2022 season, n=79 LTCFs

Among HSE LTCFs with staff complements of <50, uptake was highest in one LTCF in CHO9 (76.6%) and lowest in three LTCFs in CHO7 (40.0%); where staff complements were 50+, uptake was highest among 21 LTCFs in CHO4 (61.0%) and lowest among 14 LTCFs in CHO1 (49.9%) (Figure 5).

Among non-HSE/privately-run LTCFs with staff complements of <50, uptake was highest among four LTCFs in CHO4 (86.3%) and lowest among two LTCFs in CHO1 (63.8%); where staff complements were 50+, uptake was highest among two LTCFs in CHO8 (74.3%) and lowest among seven LTCFs in CHO6 (27.6%) (Figure 5).



Figure 5 Influenza vaccine uptake (%) of LTCF-based HCWs by CHO and staff size (<50, 50+ HCWs), 2021-2022 season, n=293 LTCFs, including 214 HSE and 79 non-HSE/privately-run LTCFs

#### LTCF-based Resident Uptake

In total, 162 LTCFs (85 HSE and 77 non-HSE/privately-run, (ratio 1:0.91) participated in the Point Prevalence Survey (PPS), (Table 4). Overall uptake among the HSE facilities was 95.4% among long -term residents and 78.7% among respite residents; in the non-HSE/privately-run LTCFs, uptake was also generally very high and broadly similar between long-term (91.2%) and respite residents (86.0%) (Tables 3a, 3b).

сно	No. LTCFs	Eligible Long-term Residents	Vaccinated Long-term Residents	% Uptake LT Residents	Eligible Respite Residents	Vaccinated Respite Residents	Uptake Respite Residents
CHO1	15	220	205	93.2	55	41	74.5
CHO2	4	87	85	97.7	0	0	-
CHO3	6	198	194	98.0	3	3	100.0
CHO4	25	541	516	95.4	16	16	100.0
CHO5	5	150	149	99.3	6	4	66.7
CHO6	3	156	154	98.7	0	0	-
CHO7	11	366	352	96.2	26	16	61.5
CHO8	14	217	198	91.2	16	16	100.0
CHO9	2	170	155	91.2	0	0	-
Total	85	2105	2008	95.4	122	96	78.7

Table 3a LTCF-based Residents Influenza Eligible and Vaccinated Counts and % Uptake by CHO (HSE only) for the 2021-2022 Season, n=85 LTCFs

#### Table 3b LTCF-based Residents Influenza Eligible and Vaccinated Counts and % Uptake by CHO (non-HSE/privately-run only) for the 2021-2022 Season, n=77

	No.	Eligible Long-term	Vaccinated Long-term	% Uptake LT	Eligible Respite	Vaccinated Respite	Uptake Respite
СНО	LTCFs	Residents	Residents	Residents	Residents	Residents	Residents
CHO1	2	53	52	98.1	1	1	100.0
CHO2	5	143	135	94.4	8	5	62.5
CHO3	7	146	146	100.0	23	23	100.0
CHO4	17	614	598	97.4	54	45	83.3
CHO5	8	250	238	95.2	54	51	94.4
CHO6	10	358	351	98.0	1	1	100.0
CHO7	6	433	299	69.1	4	0	0.0
CHO8	11	317	306	96.5	8	5	62.5
CHO9	11	611	544	89.0	4	4	100.0
Total	77	2925	2669	91.2	157	135	86.0

Across all nine CHO and among both HSE and non-HSE/privately-run facilities, uptake among long-term residents was very high with the minimum uptake recorded being 69.1% in CHO7 among non-HSE/privately-run facilities. Uptake among respite residents varied considerably by CHO with not all reporting returns; in HSE facilities (range 61.5% [CHO7] to 100% [CHO3, CHO4 and CHO8]); in non-HSE/privately-run facilities (range 0.0% [CHO7] to 100% [CHO1, CHO3, CHO6 and CHO9]) (Tables 3a, 3b).

In comparison to the long-term residents of LTCFs, relatively small numbers of respite residents were vaccinated (n=96-HSE; 135-non-HSE/privately-run). Overall uptake among respite residents was a little less in HSE facilities (78.7%) compared to non-HSE/privately-run facilities (86.0%) (Figures 3.1, 3.2).

See Appendix 3 for a breakdown of LTCF-based resident uptake by staff of category (See separate excel file with this report).

For long term residents, uptake by size (0-9, 10-49, 50+) was consistently high in both HSE facilities (83.2% to 97.1%) and in non-HSE/privately-run facilities (86.2% to 97.4%) (Figure 4).



Figure 3.1 Percentage uptake of LTCF-based residents (long-term and respite) in HSE run facilities by CHO, 2021-2022 Season, n=85 LTCFs



Figure 3.2 Percentage uptake of LTCF-based residents (long-term and respite) in non-HSE/privately-run facilities by CHO, 2021-2022 Season, n=77 LTCFs



Figure 4 Influenza vaccine uptake (%) of LTCF-based residents (long-term and respite) in LTCFs by facility type and resident number size, 2021-2022 season, n=162 LTCFs

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## Discussion

The uptake recorded among HCWs via the HPSC Qualtrics surveys during the 2021-2022 season showed a reduction in both uptake and participation in comparison to the previous season when uptake reached a high-water mark during the peak of the COVID-19 pandemic in 2020.

In 2020-2021, uptake among all hospital-based HCWs was 71.0% (71.4% among HSE hospitals), considerably more than the 64.0% (64.5% among HSE hospitals) recorded during the current season when seven hospitals that would have typically provided returns did not.<sup>2</sup>

Similarly, uptake among all LTCF-based HCWs was 63.3% (66.3% among HSE LTCFs) in 2020-2021 compared to a much lower 55.2% (55.2% among HSE LTCFs) in 2021-2022. This decrease in uptake among HCWs based in HSE and non-HSE/privately run LTCFs during 2021-2022 also coincided with a general reduction in participation in the annual survey, falling from 422 to 293 LTCFs.

Of note, and not included in this report, are details of uptake among HCWs vaccinated by GPs or pharmacies (separate report). As was the case in the previous season, HCWs (both HSE and non-HSE) were entitled in 2021-2022 to obtain free vaccination in the primary care setting if it was more convenient for them to do so. It is possible therefore that some HCWs, who were vaccinated in these settings, may not have reported their status to their work place managers, and, as a result the uptake reported would have been less than what it actually was.

In contrast, a similar level of uptake in LTCFs among long-term residents in the current season was observed compared to the previous season: overall uptake of 93.2% (93.6% in HSE LTCFs) in 2020-2021 being almost the same to the 93.0% (95.4% in HSE LTCFs) recorded in 2021-2022. For respite residents, uptake increased markedly, in 2020-2021 it was 56.5% (56.3% in HSE LTCFs) compared to 82.8% (78.7% in HSE LTCFs) in 2021-2022. This improvement in uptake occurred despite the sharp reduction in the number of participating LTCFs from 320 in 2020-2021 to 162 during the same period.

As monitoring uptake among health care workers is a key performance indicator and allows services to benchmark their performance against other similar services, there is a continued need to improve the monitoring capacity within the HSE health care settings so that services can demonstrate improvements in influenza vaccine uptake across all health sectors with the most important influenza prevention control measure that can be put in place for patients and the workers.

The advent of influenza vaccination reporting by the HSE's COVAX/IIS team for the 2022-2023 season may herald the necessity of a different approach in the collection of uptake data compared to previous season and for peer vaccinators in particular, their role may prove to be critical when providing validated aggregate details to local healthcare managers and flu leads that are based in hospitals and LTCFs so that they in turn can forward their uptake returns to HPSC.

<sup>&</sup>lt;sup>2</sup> The reason why UL hospital group were unable to provide an accurate breakdown of uptake for all of its hospitals was due to unforeseen issues in the way in which data was collected through Central Vaccination Clinics (CVCs). These CVCs were used in an integrated influenza campaign between UL and Community Health Organisation 3. Both community and hospital group employees availed of these locations for the seasonal influenza vaccine, but a large number of HCWs were vaccinated at CVCs with their place of work locations set to UL hospital group instead of their specific work locations.

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#### Community Health Organisation (CHO) Listing:

Area 1: Donegal; Sligo/Leitrim/West Cavan; Cavan/Monaghan; Area 2: Galway; Roscommon; Mayo; Area 3: Clare; Limerick; North Tipperary/East Limerick; Area 4: Kerry; North Cork; North Lee; South Lee; West Cork; Area 5: South Tipperary; Carlow/Kilkenny; Waterford; Wexford; Area 6: Wicklow; Dun Laoghaire; Dublin South East; Area 7: Kildare/West Wicklow; Dublin West; Dublin South City; Dublin South West; Area 8: Laois/Offaly; Longford/Westmeath; Louth/Meath; Area 9: Dublin North; Dublin North Central; Dublin North West