



Monitoring influenza vaccine uptake amongst staff in HSE-funded hospitals and Long Term/Residential Care Facilities (LTCFs)*

Revision History

Version	Date	Originator	Reviewer	Comment
1.0	01/11/2013	HPSC/NIO/National Hospitals Office /Faculty of Occupational Medicine		Based on previously circulated protocols for 2011-2012 and 2012-2013 influenza seasons.
1.1	28/11/2014	As above	HPSC	Update on previously circulated protocols and specifics relating to 2014-2015 season data collection
1.2	24/11/2015	As above	HPSC	Update on previously circulated protocol for the 2015-2016 season
1.3	27/07/2016	As above	HPSC	Update on previously circulated protocol for the 2016-2017 season
1.4	19/10/2017	As above	HPSC	Update on previously circulated protocol for the 2017-2018 season
1.5	01/10/2018	As above	HPSC	Update on previously circulated protocol for the 2018-2019 season, mainly relating to changes in deadlines in the submission of second survey returns
1.6	02/10/2019	As above	HPSC	Update on previously circulated protocol for the 2019-2020 season, mainly relating to changes in deadlines in the submission of second survey returns
1.7	05/10/2020	As Above	HPSC	Update on previously circulated protocol for the 2020-2021 season, mainly relating to changes in deadlines in the submission of second survey returns and the fact that these surveys are being conducted at the same time when a) HIQA are providing anonymised returns for their residential registered sites/facilities/services (disability & older persons) via their HIQA portal, aggregate details of which will be reported to HPSC and b) when both hospitals and LTCFs (although not all) will be using the SwiftQ system to collate their returns to be available via Health Insights to HPSC
2.0	05/11/2021	As above	HPSC	Update on Update on previously circulated protocol for the 2021-2022 season, mainly relating to the transition from the demographix platform to a new online survey platform, Qualtrics

**Private hospitals and long term/residential care facilities are invited to participate. This is voluntary.*

Protocol is available on the HPSC website

<http://www.hpsc.ie/a-z/respiratory/influenza/seasonalinfluenza/influenzaandhealthcareworkers/>

Purpose

This document provides guidelines for HSE funded hospitals and long term/residential care facilities (LTCFs) on the reporting of influenza vaccine uptake among Health Care Workers (HCWs). Non-HSE funded hospitals and facilities, if submitting data to HPSC are requested to follow the guidelines.

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Introduction

In all developed countries (including Ireland) it has now standard practice to recommend influenza vaccination for health care workers (HCWs). This recommendation is designed to protect patients by preventing transmission between employees and patients/risk groups and to decrease illness among staff. Influenza vaccination of HCWs is now regarded internationally as a duty of care (1-3).

HPSC has been monitoring the uptake of health care workers (HCWs) in hospitals and long term/residential care facilities (LTCFs) since the 2011-2012 influenza season (4-6). This has been done twice annually, mid-season (December) and at end of influenza season (April). For the 2021/2022 season the submission date for the return of second, final returns is March 2022 and the target maintained at **75%**.

Substantial improvements in HCW uptake have occurred since reporting first began.

The most recent report on uptake in the health care settings is located here (<http://www.hpsc.ie/a-z/respiratory/influenza/seasonalinfluenza/influenzaandhealthcareworkers/hcwinfluenzavaccineuptakereports/>)

The purpose of this protocol is to ensure that all health care facilities use the similar methodology to count staff eligible for vaccination and the numbers of those vaccinated. These data are then used to compare uptake by facility, Community Health Organisation (HSE facilities only), hospital groups and health care worker category.

Influenza vaccination during the 2021-2022 season – HSE activities

Each year since 2013, the HSE Leadership team review and endorse an action plan to improve national influenza vaccination coverage of HCWs in Ireland.

For the 2021-2022 season:

During the forthcoming influenza season each hospital and LTCF is asked to

- Make influenza vaccination easy to access for all staff (time and sites) to reach a minimum target of **75%** overall
- Provide communication/education sessions regarding need for vaccination (health care indicator/infection control/ staff protection); management and senior staff should lead on this initiative
- Management should know the vaccination status of staff so that in the event of an influenza outbreak, appropriate prevention and control measures can be taken. A register of vaccination status should be implemented in each unit and updated throughout the influenza season
- Identify an influenza lead that will coordinate return of influenza vaccination coverage of staff to the Health Protection Surveillance Centre (HPSC). The name

and contact details of the influenza lead of each hospital/LTCF requested by and communicated to HPSC in advance of the surveys being conducted.

Vaccine distribution, promotional materials

The HSE, through the National Immunisation Office and National Cold Chain, will supply all long term/residential care facilities and hospitals (HSE, voluntary and private) with seasonal influenza vaccine. Printed promotional and educational materials are distributed and also available on the HSE website (<http://www.hse.ie/eng/health/immunisation/pubinfo/fluvaccine/flulandingpg.html>).

Monitoring of influenza HCW vaccine uptake

HPSC will monitor the uptake of influenza vaccination among HCWs in all HSE funded hospitals and long term/residential care facilities (elderly, disability and mental health etc.). Private facilities are encouraged to submit data as well.

Data relating to the number of HCWs working in these sites and the number vaccinated with the influenza vaccine during the 2021-2022 season, by HSE professional grouping (see below), will be monitored during the season. The proportion of HCWs vaccinated will be calculated and the reports made available to all stakeholders and to the public on the HPSC website.

Hospital submissions:

Uptake figures for hospital-based HCWs can be submitted online from **Monday, November 22nd, 2021** at https://hpsc.qualtrics.com/jfe/form/SV_6xvaH3E0qfBi72u, (**SUBMISSION DEADLINE: FRIDAY, 10TH DECEMBER 2021**). A second request for final hospital-based HCW uptake figures for the whole of the flu season **up to the end of February 2022** will be via email made on **Friday, 25th February 2022** (**SUBMISSION DEADLINE: FRIDAY, 11TH MARCH 2022**).

LTCF submissions:

A request for provisional HCW uptake figures for long-term/residential care facilities on uptake will be via email made on **Monday, 22nd November 2021** at https://hpsc.qualtrics.com/jfe/form/SV_5akh8T2w61Y1Tpk (**SUBMISSION DEADLINE: FRIDAY, 10TH DECEMBER 2020**). A second request for final LTCF-based HCW uptake figures for the whole of the flu season **up to the end of February 2020** will be via email made on **Friday, 26th February 2021** (**SUBMISSION DEADLINE: FRIDAY, 12TH MARCH 2021**).

Objectives

The objectives of the programme are to provide information and feedback to all stakeholders in HSE, management, staff of the facilities on their immunisation uptake. The

feedback of data will enable management and staff to monitor the effectiveness of interventions implemented to improve uptake and identify gaps in the programme.

Population under review – 2021-2022 season

HSE Employees

Within the Health Services Executive there are a variety of facilities employing HCWs: tertiary referral hospitals, regional and general hospitals, in addition to long term/residential care facilities for the elderly, individuals with disabilities and mental health units as well as community care services.

Most recent data (September 2021) indicates that 130,533 whole time equivalents (WTEs) are employed in the HSE (69,231 in acute services) (7). All health care workers and HSE staff who have direct contact with patients are recommended vaccination; this includes temporary and agency staff.

Denominator data – reporting to HPSC

- For the purpose of monitoring uptake among staff HPSC require information on number of staff on payroll and not WTE numbers.
- Source of data: In most hospitals/facilities the HR department is the source of HCWs this information.
- Notes: Temporary, agency staff or students who are not on payroll are not counted in the denominator data submissions to the HPSC for the purposes of this survey.

Numerator data (staff vaccinated) – reporting to HPSC

- For the purpose of monitoring uptake among staff, HPSC require information on number of staff on HR payroll who are vaccinated during the influenza season.
- Source of data: In most hospitals/facilities the occupational health departments are the source of this information.
- Note: Vaccines administered to staff not on payroll can be reported in a separate data entry field in the survey if facilities wish to reflect influenza vaccination activity and account for vaccines used.

Private hospitals and LTCFs

There is no requirement for private, non-HSE funded hospitals or LTCFs (including section 38 and 39 agencies) to provide influenza vaccine uptake data to the HSE-HPSC. However, HPSC will collect and report on data provided from these facilities in recognition of the fact that HSE supplies influenza vaccine to all health care facilities upon request and

that vaccination of HCWs is a priority infection control activity in health care settings and an indicator of quality care and standards within the setting.

Methods for 2021-2022 monitoring uptake in HCWs

Step1

A **nominated influenza vaccination coordinator** should be nominated by each hospital/long term care facility to enable reporting to the HPSC. For the 2021-2022 season, HPSC will initially use contact details of those coordinators provided to the HPSC for previous influenza seasons. If the hospital or facility has identified a new coordinator for this role please forward the name, email address and contact telephone number of the new nominated coordinator to HPSC (piaras.olorcain@hse.ie).

Step 2.

Enter data in to a demographic.com/web-based survey tool

- A note will be circulated that a formal request for data will be made by the HPSC about a week before a link to the demographic.com/web-based tool is distributed by email to each nominated influenza coordinator (with a two-week deadline for LTCFs)
- Each unit/hospital's nominated coordinator is required to provide data for their own hospital/facility only.
- Data should be entered online.
- Note: In the event that a coordinator covers a number of hospitals or facilities a separate submission/return for each hospital/facility is requested.
- Data requests from HPSC will be made twice during the season (late November and late February). A link to the specific survey will accompany the relevant email.
- Aggregate data will be collected to monitor the overall uptake over the entire season.

Acute hospitals and LTCFs will be asked to submit their provisional returns at any time from November 19th 2021 with final submission by 10th December 2021.

The second, and final request for data will be made in late February for submission by 11th of March 2022 to include aggregate data for the whole season, September/October 2021-February 2022.

Information to be collected will include;

1. Name, address of each hospital/facility
2. For LTCFs only, the maximum bed capacity and type of facility
3. Reporter and contact email (for any queries that HPSC may have in relation to data)
4. Numbers of staff employed (on payroll) and vaccinated for the according to the six HSE National Grade Codes (see Appendix B):
 - Medical/ Dental
 - Nursing
 - Health & Social Care Professionals
 - Management/ Administration
 - General Support Staff
 - Other Patient and Clinical Care
5. Optional; Numbers of other (not on payroll) staff vaccinated in facility, such as students, agency staff, volunteers
6. Staff vaccination policy in place (Yes/No)

Frequency of reporting

All hospitals and long term/residential care facilities for the elderly should report data twice during the influenza season with the aggregate of all staff on payroll who were vaccinated.

Data analysis

HPSC will estimate the uptake of each hospital and LTCF location based on data received,

e.g. for September/October (early -season)

% HCWs vaccinated in Location X = $\frac{\text{Total no. HCWs (on payroll) vaccinated in Sept-Oct}}{\text{Total number of HCWs working (on payroll) in hospital in September/October}}$

e.g. for September/October-February (full season)

% HCWs vaccinated in Location X = $\frac{\text{Total no. HCWs (on payroll) vaccinated in Sept/Oct- Feb}}{\text{Total number of HCWs working (on payroll) in hospital in September -February}}$

Data analysis will include estimation of uptake by HSE Area, HCW category and other criteria.

Reporting and Feedback

HPSC will monitor the HCW uptake and provide provisional feedback to the areas

Evaluation of both the HCW-based hospital and LTCF surveys and LTCF only based point prevalence resident survey

All uptake activity will be monitored at each stage of implementation with a final evaluation report at the end of the influenza season (final report to be available circa September 2021) and published on the HPSC website at <http://www.hpsc.ie/A-Z/Respiratory/Influenza/SeasonalInfluenza/Vaccination/>. It is also planned that a short summary report will be published in the Epi-Insight monthly report prior to or at the beginning of the 2021-2022 influenza season.

Queries or Comments

Please contact HPSC if you have any queries in relation to monitoring of influenza vaccination monitoring at piaras.olorcain@hse.ie. Additionally, each HSE area has a contact point in the local Department of Public Health.

References and resources (additional references available upon request)

1. CDC. Prevention and Control of Influenza with vaccines. Recommendations of the Advisory Committee on Immunization Practices (2010). 2010 Aug.
2. European Centre for Disease Prevention and Control. Guidance. Priority risk groups for influenza vaccination
http://www.ecdc.europa.eu/en/publications/Publications/0808_GUI_Priority_Risk_Groups_for_Influenza_Vaccination.pdf.
3. Mereckiene J, O'Donnell J, Collins C, Cotter S, Igoe D, O'Flanagan D. Risk groups and uptake of influenza and pneumococcal vaccine in Ireland. Euro Surveill 2007 Dec;12(12):E13-E14.
4. O'Lorcain P, Cotter S. Study determines flu vaccine uptake among staff in HSE funded hospitals and residential units. Epi-Insight 13 (12); December 2012, located [here](#).
5. P O'Lorcain, S Cotter, L Hickey, D O'Flanagan, B Corcoran, M O'Meara. Seasonal Influenza Vaccine Uptake in HSE-Funded Hospitals and Nursing Homes During the 2011/2012 Influenza Season. Ir Med J. 2014 Mar;107(3):74-7.
<http://www.imj.ie/ViewArticleDetails.aspx?ArticleID=12498>
6. Seasonal influenza vaccine uptake among Irish Health Care Workers for previous seasons are available on the HPSC website [here](#).
7. Health Service Employment Report: September 2021:
<https://www.hse.ie/eng/staff/resources/our-workforce/workforce-reporting/health-service-employment-report-september-2021.pdf>

Appendix A - HSE Grade Code Listing by Category

Medical/ Dental	All doctors and dentists
Nursing	All nurses
Health & Social Care Professionals	Scientists; Clinical technicians; Counsellors; Dieticians; Occupational therapists; Phyiotherapists; Pharmacists; Social workers; Speech therapists;
Management/ Administration	Various grades
General Support Staff	Ambulance staff/catering/domestic staff/
Other Patient & Client Care	Incl. Care Assistants, Therapy Aids etc.

For more complete list consult HSE Website

<https://www.hse.ie/eng/staff/resources/our-workforce/workforce-reporting/>