Background

A report was ran to evaluate the influenza vaccination coverage and the status of immunization education provided to residents at a nursing home. A number of residents that refused the influenza vaccine were not provided education on the importance of it. Without education, patients are not equipped to make an informed decision.

Influenza poses a serious threat to older adults. Adults older than 65 are generally more vulnerable to severe flu illness—requiring hospitalizations; experiencing complications from the flu, including death. The CDC estimates that 71 - 85 % of seasonal flu related deaths have occurred in people 65 years and older. Additionally, 50 - 70 % of seasonal flu-related hospitalizations have occurred among people 65 years and older. CDC recommends that everyone greater than 6 months of age get vaccinated against influenza every year. Special emphasis should be placed on vaccinating residents because there is a large percentage of patients that are at risk for serious flu illness.

Objectives

The goal was to have 100% of residents at a nursing home receive influenza immunization education if they refuse the vaccine.

Methods

A report was generated using an EMR, listing influenza immunization status of all the residents. I asked all nonvaccinated patients about why they refused the vaccine and recorded their responses. I addressed residents’ individual beliefs and highlighted any evidence that supported or refuted their beliefs using information found on CDC website regarding misconceptions. Attempts were made to consent for vaccination. Total influenza vaccination coverage was then measured.

Results

Non-Vaccination Reasons

Understand risks and will take chances

- "Not interested in it. Understand risks and will take chances"
- "I had flu really bad and now no longer get it. I just get the pneumonia shot. I understand the virus changes and I am at risk."
- "I am already taking too many medications. I know it will just be a one-time thing."
- "I don’t need it… Why do you need it? He refuses education on it.
- "I feel great. I do not need the flu shot. I am not interested in education on it.”

Hospice Care

- "I never got flu shot before. I have pancreatic cancer, and not getting treatment for it. I don’t think it would make much of a difference. I am not worried about flu."

Avoid getting sick

- "I got it last year. I know the virus changes every year. I avoid sick people and wash my hands. Biochemist friend that used to administer flu shot said it would not be good for me. I got my pneumonia vaccines."
- "Mom never got it, or had me get it. I am careful about not getting sick. I got pneumonia vaccine."

Bad Experience

- "I do not get the flu. Every time I get the flu shot I get very sick."
- "When I got the shot I had the worst case of the flu. I focus on eating healthy instead”
- "My family all started to pass out from it. I haven’t had it for a long time and have been fine.”

Fear of Adverse Reactions

- "Will I get sick from shot? I’ll get it, but I bet I’ll get sick.”

Vaccination Coverage

Before Intervention n = 69

- Refused 29%
- Vaccinated 71%

After Intervention n = 69

- Refused 16%
- Vaccinated 84%

Figure 1. Current vaccination practices resulted in a 71% vaccination coverage (left). Addressing beliefs and providing education using CDC website resulted in a 13% increase in coverage (right).

Discussion

Colorado’s nursing home influenza vaccination coverage is 75.9% for the 2016-2017 season. Before my intervention, 71% residents were vaccinated at the nursing home. A total of 9 patients out of 20 patients were consented and vaccinated due to my intervention. This resulted in an 84% vaccination coverage, which is above the Colorado average. The reasons 11 patients did not consent for immunization are listed to the left. Some residents had poor health literacy and did not understand the importance of the vaccine. Others had strong personal experiences and beliefs that were challenging to dispute. The use of a credible source of information may have contributed to the effectiveness of my discussion.

Conclusion

Asking and recording patients beliefs regarding non-vaccination can help clinical staff understand reasons of refusal and how to address misconceptions with education. This targeted motivational interviewing approach is reasonable to do in a clinic setting as it only required 4 minutes of time to complete!

Next Steps

A reference note will be made for nurses to use when they are asking residents about influenza immunization, so they can be more effective in consenting for the vaccine. It will contain common reasons why patients refuse the vaccine, and information that can be provided to support or refute various conceptions.

REFERENCES: