

Introduction

- ❖ Despite existing recommendations by various public health organisations (WHO, ECDC) and documented benefits for healthcare staff, vaccination coverage levels in Healthcare Workers (HCWs) remain low in the EU
- ❖ HProImmune is a 3-year project co-funded by the DG SANCO Public Health Program 2008 – 2013 aiming to promote immunizations among HCWs in Europe.
- ❖ The project will add to the knowledge on barriers concerning HCW immunizations and develop educational material for health professionals in both the private and the public sector, as well as propose recommendations for policy-makers.

Main Partner: Institute of Preventive Medicine, Environmental and Occupational Health, Prolepsis – Greece

Associated Partners:

- National Institute of Infectious Diseases "Prof Dr Matei Bals" - Romania
- Nofer Institute of Occupational Medicine - Poland
- Mokymų Tyrimų ir Vystymo Centras - Lithuania
- Istituto Superiore Di Sanità - Italy
- Fundatia Romtens - Romania
- Cyprus University of Technology - Cyprus
- Technische Universität Dresden - Germany
- National Hellenic Nurses Association - Greece
- Hellenic Center for Disease Control and Prevention - Greece

Objectives

- ✓ Identify barriers to immunizations in European HCWs in the seven countries comprising the HProImmune consortium – Greece, Cyprus, Poland, Italy, Lithuania, Germany, Romania.
- ✓ Summarize and present the views, needs, barriers (organizational and attitudinal), as well as enablers towards immunization of HCWs identified through qualitative research.

Methodology

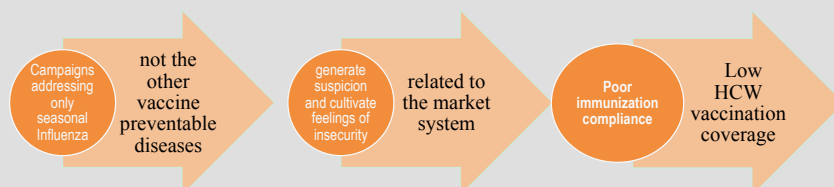
- ❖ **Qualitative research through focus groups.**
- ✓ A convenience sample was used, recruited from hospitals and other relevant health services
- ✓ Focus groups were conducted with:
 1. Nurses
 2. Physicians
 3. Administration & Infection Control personnel
 4. Policy Makers & Public Health Personnel
- ✓ Some face to face interviews were conducted with policy makers and public health personnel
- ✓ A common focus group guide was produced and followed by all partners
- ✓ A screening questionnaire was used to collect socio-demographics characteristics
- ✓ Thematic analysis was conducted for extracting results

Results

- ❖ **Sample comprised 273 HCWs in the 7 countries; 47 focus group sessions**
- ❖ **Dominant attitudinal/behavioral barriers towards HCW immunization**
 - ✓ Lack of knowledge and/or incorrect knowledge and lack of evidence based information about the benefits of the recommended vaccines for HCWs
 - ✓ Mostly observed in young health professionals
 - ✓ Lack of information and knowledge about the recommended immunizations schedule
 - ✓ Did not consider they had a "moral" duty to accept vaccinations
 - ✓ Belief that HCW immunization is not a personal responsibility but rather an issue to be taken up by the health care system or by pediatricians and public health professionals.
- ❖ **Dominant organizational barriers towards HCW immunization**
 - ✓ Busy work schedule
 - ✓ Cost of vaccines
 - ✓ Policy for voluntary vaccination
 - ✓ Lack of a general prevention culture/ organizational prevention strategies
 - ✓ Lack of commitment from hierarchy and national authorities to promote HCWs immunizations
 - ✓ Different immunization schedules among EU countries
 - ✓ No hospital epidemiologist
 - ✓ Anti-vaccination movement, especially after the (H1N1)2009 influenza pandemic
- ❖ **Enablers of HCW immunization -Attitudinal and Organizational**
 - ✓ Perceived benefits of vaccination such as protection of personal health (including immediate family) and protection of health of patients (e.g. influenza)
 - ✓ Personal previous experience of a vaccine preventable disease, in particular if complications were experienced
 - ✓ Existence of a national Campaign for seasonal influenza immunization
 - ✓ Existence of educational programs and information materials
 - ✓ Trusted electronic information sources
 - ✓ Communication activities through the media
 - ✓ Use of personal reminders and vaccination cards
- ❖ **Enablers of HCW immunization –Key persons**
 - ✓ Hospital occupational physician
 - ✓ Infection control personnel implementing personal invitation methods and creating a sense of "caring" for hospital staff

Conclusions

- ❖ **Implications for interventions to increase HCW vaccination coverage**
 - ✓ Provision of vaccines for free, at the work place, during working hours
 - ✓ Strict legal framework concerning HCW immunizations "making them a must"
 - ✓ Making the recommended immunizations for HCWs a pre-requisite for clinical work
 - ✓ Provision of education sessions with specialists
 - ✓ Personalized approaches: e-mails (information, reminders for booster shots)
- ❖ **More up-to-date, evidence based knowledge and information is needed**
 - ✓ HCWs need information on all the recommended vaccines: "not just seasonal influenza"
 - ✓ Clear, focused and specific information
 - ✓ Involve hospital infection control personnel and/or hospital occupational physicians
 - ✓ Create dedicated hospital "vaccination clinics" and dedicated staff teams
 - ✓ Development of a HCW record and/or folder for each employee with relevant personalized information and dose scheduler; provide personal reminders
 - ✓ Create a mandatory reporting system for HCW immunizations, along with mandatory reporting of immunization side effects



Please fill in our on-line questionnaire at: www.hproimmune.eu

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