



Maximising flu vaccination in healthcare staff

Invitation guidance

Background

Employers of healthcare staff are responsible for supporting and providing/facilitating occupational flu vaccinations, as part of a full participation vaccination strategy. This includes the use of personal invitations to encourage flu vaccine uptake (NICE 2018a). A proactive approach to offering vaccinations is a principle that underpins the National Immunisation Framework for Wales (Welsh Government 2022).

The use of personal invitations may be a simple way to help influence and improve flu vaccine uptake in a staff-facing campaign. Evidence supports the use of various invitation methods to help increase flu vaccination uptake.

Evidence

Using a personal, tailored invitation for their vaccine in an appropriate format is recommended for all eligible healthcare staff, along with the active facilitation of easy access (NICE, 2018a).

Evidence suggests that communications messages should be tailored to address the needs of different healthcare worker groups and to address the different perceptions of need, risks and benefits of vaccination between these groups (NICE 2018a). The World Health Organization (WHO 2019) suggests that communications should cover individual, team and organisation-wide levels, to build trust and motivate health workers to accept vaccination. Proactive measures such as this can help maximise uptake and ensure equity, as described in National Immunisation Framework for Wales (Welsh Government 2022).

The evidence base for use of individualised invitations has been largely developed from patient-facing vaccine campaigns and there is no empirical published evidence *specific* to the use of an invitation process or its impact on flu vaccine uptake in health workers. However, the principles of the approach seem appropriate whether the target group is patients or staff.

NICE (2018a) highlighted the importance of using both opportunistic and systematic approaches to increase opportunities to offer flu vaccination. The [evidence](#) shows that tailoring invitations could help to increase vaccination uptake NICE (2018b). There may be many varied reasons why people do not get their flu vaccine, including bad past experiences, not believing it is effective, myths about getting flu from the vaccine and social norms. These can't all be addressed in an invitation but examples of tailoring

invitations includes outlining the specific benefits of vaccination or risks of being unvaccinated for that individual, their profession, age or health condition, for example.

The WHO (2019) suggests that in addition to communication strategies, behavioural science-based efforts should be implemented to encourage healthcare workers to be vaccinated. This can include nudge-based interventions work by creating an environment that can influence behaviour in a predictable way but does not eliminate choice, and have proven effective in a variety of healthcare settings.

Reminders to individuals to get their vaccine can serve as a nudge, notifying individuals when they are due for a vaccine and prompting them to receive their vaccine. These may be in a number of different formats. Paper-based or mobile phone text message-based have been demonstrated to be effective (Yokum et al, 2018). Other communications methods such as inserts in pay slips (whether paper-based or digital format) could also help to increase uptake (Stead et al 2018).

Based on the evidence explored above, developing an individualised invitation process using different methods has the potential to positively impact on flu vaccine uptake in healthcare staff.

Considerations and practical guidance

Some organisations in NHS Wales may already have an invitation process for healthcare workers in place, and others may have a less mature process for inviting their eligible employees to get the annual flu vaccine. All organisations may wish to consider the following to ensure their processes align with a [multi component approach](#):

Planning - how does the invitations process fit with the overall communication strategy and timings of the campaign?

- Make decisions about this early on so that invitations can be issued promptly.
- Consider the timings of initial invitations, reminder invitations and the rest of your communications approach.
- Assess the capacity of your flu team to administer, disseminate and monitor the invitations process.
- Consider using a pilot for specific departments, staff group(s) or locations, to test your approach to invitations and target areas of low uptake.
- Review your evaluation data from previous flu seasons to help determine which staff group(s) you should prioritise for personalised invitations.
- Work with staff groups to develop the invitations.
- Work with trade union colleagues, leadership teams, and staff networks to build your approach, particularly if you plan to target specific staff groups.
- Communicate with staff in the organisation to let them know you will be sending individualised invitations.

Methods - which method(s) can/will you use to issue invitations?

- Consider which methods you have at your disposal, and the processes you need to put in place.
- Consider how different groups of staff might respond to different approaches.
- Determine which formats you will use for invitations and reminders. NICE (2018a) suggests using prompts and reminders in various printed and digital formats.

Examples of methods you could consider include:

- in writing (letter, email or text message)
 - by phone
 - using social media
 - during face-to-face interactions
 - payslips (digital or paper versions)
 - ESR or intranet
- Adopting a combination of the methods above may help reach more individuals in the target groups.
 - Consider using different invitation methods for different staff groups. For example, community-based staff might not have easy access to emails, so using text message or letters might be more effective.
 - Follow-up reminders in a different format to the initial invitation could help to prompt staff that have not yet taken up the offer.
 - The method(s) you choose will depend on how much information and detail is going to be supplied in the invitation.

Invitation content - what content/information will be included in the invitation?

- As a minimum the invitation should include:
 - A personal greeting to the staff member.
 - An explanation of the importance of flu vaccination.
 - Sign posting to more information.
 - Information about on or off-site vaccination locations and times.
- To personalise the invitations further, you could also consider including some or all of the following elements in the invitation:
 - Thanking the individual for having their vaccine last year (if applicable)
 - Highlighting that most 'people like them' get the vaccine
 - An outline of the number of flu cases in the staff members ward/department during the last flu season
 - A brief description of any outbreaks (and the impact of them) in the department/hospital in previous seasons
 - A message from a board member, or senior leader in the organisation, or from someone they trust, respect, or 'someone like them' asking the member of staff to be vaccinated. For example, you ask the Director of Nursing for a message for nurses, the Medical Director for doctors, etc.

Template invitation letters can be found at [Influenza \(flu\) - Information for health professionals delivering the service](#) and [Influenza \(NHS Wales staff only\)](#).

Data, recording and evaluation – what do you need to consider when accessing and recording data?

- Consider how you access staff data (e.g. through ESR) and which elements of this data can be used to inform your invitation process and personalise invitations.
- Ensure GDPR practice is followed and any data used appropriately.
- Determine how staff records will be updated promptly if individuals have been vaccinated/declined, to ensure vaccinated staff don't continue to receive reminders.
- Consider how you will measure and evaluate the effectiveness of your invitation programme.

Conclusion

There is not one definitive approach to using vaccination invitations in a staff-facing vaccination campaign, however evidence supports that using a variety of invitation methods, individualising those invitations and issuing reminders can help to increase vaccination uptake.

Planning the process early and drawing on all [key elements](#) of the campaign is advisable. Note that the above points are purely suggestions and it entirely depends on how your organisation and campaign operates in terms of what is possible and how effective/successful the invitation process will be.

References

NICE (2018a) Flu vaccination: increasing uptake, NICE guideline [NG103]:

<https://www.nice.org.uk/guidance/ng103/chapter/Recommendations>

NICE (2018b) Flu vaccination: increasing uptake, NICE guideline [NG103] The committee's

discussion: <https://www.nice.org.uk/guidance/ng103/chapter/the-committees-discussion#increasing-uptake-among-eligible-groups-in-primary-and-secondary-care-2>

NICE (2020) Flu vaccination: increasing uptake, NICE Quality Standard [QS190]:

<https://www.nice.org.uk/guidance/qs190/chapter/Quality-statement-1-Invitation-for-vaccination>

Stead, M., Critchlow, N., Patel, R., MacKintosh, A. and Sullivan, F. (2019). Improving uptake of seasonal influenza vaccination by healthcare workers: Implementation differences between higher and lower uptake NHS trusts in England. *Infection, Disease & Health*, 24(1),

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World Health Organization (2019) How to implement seasonal influenza vaccination of health workers. Geneva: World Health Organization:

<https://apps.who.int/iris/bitstream/handle/10665/325906/9789241515597-eng.pdf?ua=1>

Yokum D, Lauffenburger JC, Ghazinouri R, Choudhry NK. Letters designed with behavioural science increase influenza vaccination in Medicare beneficiaries. *Nature Human Behaviour*. 2018; 2(10):743–9.



Mae Brechu yn achub bywydau
Vaccination saves lives
