

Interventions to Promote Seasonal Influenza Vaccinations among Healthcare Workers Interventions with Actively Promoted, Off-site Vaccinations

Task Force Finding and Rationale Statement

Intervention Definition

Interventions with actively promoted, off-site influenza vaccinations encourage workers in healthcare worksites to obtain influenza vaccinations in a location other than that in which they normally work using any of a variety of approaches. These include providing vouchers or leave time, conducting health education sessions, and sending reminders about the vaccination. The intervention must be promoted through formal worksite announcements, such as newsletters, e-mails, paycheck inserts, or posters in the worksite and may include additional components.

Task Force Finding (June 2008)

The Task Force finds insufficient evidence to determine the effectiveness of interventions with actively promoted, off-site influenza vaccinations to increase influenza vaccination coverage or productivity among healthcare workers or to reduce illness.

Rationale

Studies evaluating the effectiveness of interventions with actively promoted, off-site influenza vaccinations to increase vaccination coverage among workers in healthcare worksites provided insufficient evidence to support a determination on effectiveness. The evidence included one study with greatest suitability of study design and good quality of execution; however, the finding for that study was small and not significant. This study evaluated the effectiveness of health education approaches to increase off-site influenza vaccinations. No other studies included in this review provided evidence on other morbidity, mortality, or productivity outcomes for these interventions.

The Joint Commission (formerly JCAHO) currently requires accredited hospitals to offer influenza vaccinations with education to all their workers. Therefore, this intervention would not be applicable to those organizations currently accredited by the Joint Commission.

The data presented here are preliminary and are subject to change as the systematic review goes through the scientific peer review process.

Disclaimer

The findings and conclusions on this page are those of the Community Preventive Services Task Force and do not necessarily represent those of CDC. Task Force evidence-based recommendations are not mandates for compliance or spending. Instead, they provide information and options for decision makers and stakeholders to consider when determining which programs, services, and policies best meet the needs, preferences, available resources, and constraints of their constituents.

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