

Table 3. Survey of Influenza Vaccination of Healthcare Personnel in California Hospitals, 2012-2016

Survey Question	2015-16 Percent of Hospitals Responding	2015-16 Number of Hospitals Responding	2014-15 Percent of Hospitals Responding	2014-15 Number of Hospitals Responding	2013-14 Percent of Hospitals Responding	2013-14 Number of Hospitals Responding	2012-13 Percent of Hospitals Responding	2012-13 Number of Hospitals Responding
1. Which personnel groups are included in your facility's annual influenza vaccination campaign?		316		370		390		362
Employees								
Full-time	100	316	100	370	100	390	99.7	361
Part-time	99.7	315	99.5	368	99.0	386	96.4	349
Non-employees								
Physicians	97.0	307	96.0	355	91.1	355	94.7	343
Advanced practice nurses	87.0	275	86.0	318	79.2	308	78.2	283
Physician assistants	87.0	274	84.6	313	80.2	312	82.6	299
Students and trainees	87.0	276	87.0	322	84.0	327	79.3	287
Adult Volunteers	87.0	275	88.6	328	87.3	340	84.0	304
Other personnel groups	8.0	25	9.7	36	41.1	161	33.1	120
2. Are healthcare personnel at your facility required to pay out-of-pocket costs for influenza vaccination received at your facility?		315		369		390		362
Cost of vaccine for full-time, part-time employees, and for non-employee physicians, advanced practice nurses, physician assistants, adult volunteers, students and trainees	0.3	1	0.3	1	0.5	2	1.1	4
3. Which of the following methods is your facility using this influenza season to deliver vaccine to your healthcare personnel?		315		370		390		362
Mobile carts	78.5	248	80.8	299	81.0	314	79.3	287
Occupational/Employee Health	94.5	299	92.2	341	91.6	357	90.6	328
Vaccination in wards, clinics, cafeterias, or common areas	88.3	279	90.5	335	91.1	355	90.9	329
Provide vaccination during nights, weekends, and at any meetings or grand rounds	91.5	289	91.1	337	91.1	355	90.3	327
Provide visible vaccination of any key personnel/leadership	65.2	206	66.8	247	65.2	255	62.7	227
Other method	12.7	40	15.9	59	15.7	61	15.2	55
4. Which of the following strategies does your facility use to promote/enhance healthcare personnel influenza vaccination at your facility?		316		370		390		362
Reminders by mail, e-mail, and/or pager	89.2	282	86.5	320	89.0	346	85.4	309
Coordination of vaccine administration with other annual programs	59.5	188	57.3	212	59.0	230	61.3	222
Required receipt of influenza vaccination for credentialing (if no contraindications)	33.0	105	33.4	123	25.0	98	19.6	71
Require receipt of vaccination as a condition of employment	29.4	93	24.3	90	20.5	80	14.6	53
Campaign including posters, flyers, buttons, education on the benefits and risks of vaccination and/or fact sheets	94.6	299	92.2	341	94.1	367	93.4	338
Track unit-based vaccination rates for some units	66.5	210	62.4	231	69.0	269	64.4	233
Plan to provide feedback of vaccination rates to administration	88.0	278	88.6	328	88.8	346	85.1	308
Provide incentives for vaccination	23.0	72	22.7	84	24.4	95	24.6	89
Track vaccination rates on a regular basis for targeting purposes.	66.1	209	71.3	264	73.6	287	72.9	264
Other strategies	11.4	36	16.0	59	14.4	56	16.0	58
5. Does your facility require healthcare personnel who receive off-site influenza vaccination to provide documentation of their vaccination status?	96.5	305	96.2	356	92.3	360	79.0	286
Receipt or other proof of purchase from pharmacy or other vaccinator	82.0	258	84.6	313	73.1	285	54.1	196
Insurance claim for receipt of influenza vaccination	36.5	114	39.7	147	36.0	140	21.3	77
Note from person or organization that administered the vaccination	67.4	213	70.3	260	62.0	241	46.1	167
Handwritten statement or e-mail from healthcare worker	17.1	54	20.5	76	21.5	84	19.9	72

Table 3. Survey of Influenza Vaccination of Healthcare Personnel in California Hospitals, 2012-2016

Survey Question	2015-16 Percent of Hospitals Responding	2015-16 Number of Hospitals Responding	2014-15 Percent of Hospitals Responding	2014-15 Number of Hospitals Responding	2013-14 Percent of Hospitals Responding	2013-14 Number of Hospitals Responding	2012-13 Percent of Hospitals Responding	2012-13 Number of Hospitals Responding
Signature of healthcare worker on standard facility form attesting to vaccination	40.1	129	44.1	163	49.0	190	44.2	160
Other	3.2	10	6.2	23	8.9	35	5.8	21
Other specify	3.2	10	6.2	23	8.6	34	5.2	19
6. What does your facility require from healthcare personnel who refuse influenza vaccination?		316		370		390		362
Computer form	83.5	264	84.6	313	83.0	325	88.1	319
None	7.3	23	8.9	33	10.5	41	0.3	1
Read form	9.2	29	6.5	24	5.4	21	4.4	16
7. Does your facility require mask/PPE use from healthcare personnel who refuse influenza vaccination?		316						
Yes	95.6	302						
No	4.4	14						

Source: Influenza Vaccination among Healthcare Personnel in California General Acute Care Hospitals for the 2015-2016, 2014-2015, 2013-2014, and 2012-2013 Respiratory Seasons. California Department of Public Health.
<http://www.cdph.ca.gov/programs/hai/Pages/InfluenzaVaccination.aspx>