



Caregiver Flu TOOLKIT

Promoting Flu Vaccination for
Caregivers of Older Adults

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How to Use This Toolkit

This toolkit is a resource to educate caregivers and healthcare providers or personnel (HCP) in long-term care facilities (LTCF) or long-term care settings about seasonal influenza (flu) and the importance of vaccination to protect adults 65 and older.

In 2019, 60.6 million Americans were aged 65 and older. By 2060, this population is estimated to increase to 94.7 million.¹ As this population significantly increases, so will the need for long-term care services.

Use this toolkit to:

- Supplement the existing flu prevention information that you research on your own or your LTCF provides.
- Share credible and accurate information about the flu and vaccination.
- Understand best practices to increase flu vaccination rates among your fellow caregivers and co-workers.

Disease Burden

Seasonal Influenza (Flu)

Influenza, better known as the flu, “is a contagious respiratory illness caused by influenza viruses that infect the nose, throat and sometimes the lungs. It can cause mild to severe illness and sometimes leads to hospitalization or death.”²

According to the CDC, the flu is spread by droplets when people talk, sneeze or cough. If droplets with the flu virus are inhaled into people’s mouths or noses, those people can become sick with the flu too. “Less often, a person might get flu by touching a surface or object that has flu virus on it and then touching their own mouth, nose or possibly their eyes.”³

Flu Facts

- People sick with the flu are more likely to spread the virus within the first three to four days of getting sick.
- Some otherwise healthy adults infect others beginning one day before symptoms develop and up to five to seven days after becoming sick.
- Some people, especially young children, and people with weakened immune systems, might be able to infect others for an even longer time.
- The time from when a person is exposed and infected with the flu to when symptoms begin is about two days but can range from about one to four days.
- Flu complications can include pneumonia, ear infections, sinus infections and worsening of long-term health conditions, such as congestive heart failure, asthma, diabetes or chronic obstructive lung disease (COPD).
- People at **higher risk** of developing **serious flu-related complications** includes **people 65 years and older**, people of any age with long-term health conditions (such as asthma, COPD, diabetes, or heart disease), pregnant people and children younger than five years.⁴



Flu Prevention

According to the CDC and American Lung Association, “the best way to prevent the flu is by getting a flu vaccine each year.”⁵ While no vaccine is 100% effective, the flu vaccine drastically reduces the chance you become seriously sick, end up in the hospital or die.

As in previous seasons, non-clinical personnel and assistants/aides, HCP working in LTCF or home healthcare settings and HCP with less than a college degree had the lowest coverage among all occupations, work settings and education levels, respectively.⁶ However, those HCP surveyed agreed that if they are required by their “employer to be vaccinated for influenza, then the vaccination coverage was nearly 90%.”⁷

In addition to vaccination, the CDC recommends these everyday preventive actions.

- Wash your hands with soap and water for at least 20 seconds.
- Don’t touch your eyes, nose or mouth.
- Cover your cough and sneeze with a tissue or your arm.
- If you think you have the flu, tell your supervisor and stay home from work.⁸

Benefits of Flu Vaccination

The best way to protect you, your loved ones and the people your care for from the flu is to get a flu shot. Let’s discuss some benefits of seasonal flu vaccination:

For Communities at Large/LTCF

- Decrease spread of disease, keeping the HCPs and LTCF staff and families, home (patients’ families) and communities healthy.
- Avoid possible flu complications, such as pneumonia and hospitalization.
- Prevent costly medical appointments and prescriptions due to illness.

For Healthcare Providers

- Get vaccinated at low or no cost through health insurance coverage (if comprehensive insurance coverage is offered).
- Reduce absences due to illness.
- Improve morale.

Caregiver Basics

Definition of Caregiver

The National Cancer Institute (NCI) defines caregiver as

A person who gives care to people who need help taking care of themselves. Examples include children, older adults, or patients who have chronic illnesses or are disabled. Caregivers may be health professionals, family members, friends, social workers, or members of the clergy. They may give care at home or in a hospital or other healthcare setting.⁹

NCI's definition doesn't explain which immeasurable qualities, responsibilities and skills are required for the caregiver profession. Whether a caregiver is a family member, a healthcare professional, or someone that gives indirect care (kitchen workers, housekeeping, etc.), they may be seldomly thanked for their efforts.

A caregiver "must bring the qualities of patience, strength, and creativity to their tasks."¹⁰ In its December 2020 blog, *Easy Living*, a home care and care management agency in Florida, discussed the heroic traits of caregivers.

Caregivers face all kinds of adversity. When they walk into the job each day (which in itself can be an uncertain environment, going into different homes), they never know what the day will bring. Will their client be feeling depressed and anxious because of all the loss they're facing? The caregiver may need to be reassuring and calming. Their client might act out these feelings by refusing to take a bath or cooperate with other tasks. A client might be having a bad day physically or not be able to express that they're feeling pain. Caregivers have to know how to be empathetic in these circumstances, while also cleverly finding proactive ways to turn the situation around.

A doctor can prescribe treatment, but a caregiver helps make sure it is carried out. Caregivers make sure clients take their medications, eat properly, and drink enough water. They help them to the bathroom, assist with bathing, and keep them from falling or getting injured. Without a caregiver, many clients wouldn't be able to get to appointments or manage their daily needs.¹¹

Caregivers are truly the "unsung heroes of the healthcare system." Thank you for your commitment, compassion and skills to care for our elders. We recognize that you may have questions and concerns about the flu vaccination, and we hope this toolkit will help you make an informed healthcare decision.



Direct Care

Clinical or Medical Caregivers

Direct care is a clinical term for caregivers who “treat patients or provide direct patient care of any type.”¹² Healthcare providers who offer direct care include doctors, physician assistants, nurses (e.g., N.P., R.N., B.S.N., L.P.N.), nurse anesthetists, patient care technicians, nursing assistants (e.g., C.N.A.), medical assistants (e.g., M.A) and allied health professionals (e.g., respiratory therapists, physical therapists, occupational therapists, recreational therapists, speech pathologists, social workers or licensed mental/ behavioral health therapists).¹³

Clinical caregivers are most often associated with clinics and hospitals, as well as long-term nursing care and short-term rehabilitation care facilities.

Family and Informal Caregivers

Family and informal caregivers are “unpaid individuals such as family members, partners, friends and neighbors who provide care.”¹⁴ Caregivers provide direct care in someone’s home, including services that are not medical or clinical in nature. Some of these services include personal tasks (e.g., bathing, dressing, eating), as well as everyday tasks (e.g., housework, medication management, money management, shopping).¹⁵ Some caregivers commute to their individual’s home in order to provide services.

Cultural Differences Among Caregiving for Adults 65+

Caregiving differs among adults 65+ when factoring culture and ethnicity. For many groups, it is a cultural norm or “an expected part of life that was passed down from generation to generation.”¹⁶ In fact, caregiving was so embedded in the life experience for some of the groups that the decision to care or not to care was irrelevant; caregiving was just something that was done without question.”¹⁷

Not All Cultures Utilize Long-Term Care Facilities for Adults 65+ at the Same Levels

In addition to cultural norms, finances, food, education and housing are all factors people consider when utilizing a LTCF.¹⁸

For the most part, many 65+ populations that participate in long-term care services are non-Hispanic, white. Because some ethnic minorities may not be able to afford long-term care services and some experience “structural, and individual racism, racial/ethnic minority elders are more likely to receive care from family and friends and less likely to rely on formal care compared with non-Hispanic white adults.”^{19,20} These groups believe that family caregiving is an obligation and provides the best care for their elders.

Indirect Care

Indirect care is defined as “services that are related to patient care but do not require interaction between the healthcare provider and the patient.”²¹ Examples of indirect care include charting and scheduling, laboratory tests and infection control.

Indirect caregivers who work in LTCFs interact with community members outside of the facility or center may unintentionally spread the flu to others.





Aging in Place

The National Institute on Aging defines aging in place as the ability to stay in your home as you get older. Some people who age in place take advantage of long-term care services, such as delivered meals, adult day care and transportation services.²² Adults 65+ may decide that living in their current home may be a little too much work or unsafe for them.

Senior living apartments or retirement communities can be an alternative to living in a traditional house that may need yard work, maintenance, etc. These apartments offer amenities that are designed to meet the needs of an older individual or couple such as companions, entertainment and secure buildings.

Access to Healthcare

An issue for some elders aging in place is access to healthcare. Here are some factors that adults 65+ should consider when deciding to get a flu shot.

- Flu Clinics in Senior Living Housing
 - If an older individual lives in a senior apartment complex, he or she may be able to get a flu shot by a visiting nurses or local clinics.²³
- Transportation
 - Depending on their abilities and preferences, adults 65+ may drive or have access to other transportation services. Other services can include taxi, ride share (e.g., Lyft, Uber), bus system and friends and family.²⁴

Flu Vaccination Coverage Among Caregivers of Older Adults

Healthcare providers in a LFCF have lower flu vaccination coverage among caregivers than hospital-based counterparts. “During the 2018–19 influenza season, influenza vaccination coverage was 68% among HCPs working in long-term care settings, versus 95 among HCPs working in hospitals. This has been the trend for the past eight influenza seasons.”²⁵

To lower the risk that adults 65+ in long-term care settings contract the flu, healthcare personnel and caregivers should get an annual flu shot. “Studies in LTCFs have shown that mass staff vaccination against influenza has been associated with reductions in all-cause mortality among residents, influenza-like illness (ILI) and hospitalizations of individuals with ILI. High rates of vaccination among both staff and residents substantially reduced the rate and impact of influenza outbreaks.”²⁶

Since 2015, Americans 65 and older agree with the CDC and it is demonstrated by the numbers of them who received the flu shot compared to Americans 18 years and older, and healthcare personnel in a LTCF. CDC’s data on health care personnel, indirect and direct caregivers, does not include family-based caregiving. There is no government agency that oversees family caregiving.

The table below has been compiled from the [CDC’s FluVaxView](#) data for each year indicated.²⁷

	2020-2021	2019-2020	2018-2019	2017-2018
65 years and older	75.2%	69.8%	68.1%	59.6%
50-54 years	54.2%	50.6%	47.3%	39.7%
18-49 years	37.7%	38.4%	34.9%	26.9%
HCP in hospitals	91.6%	93.2%	95.2%	82.6%
HCP in LTCF	66%	69.3%	67.9%	58.5%

Barriers to Vaccination Uptake

The primary barrier for vaccination among direct and indirect caregivers in a LTCF is vaccine hesitancy. This is partly resolved by sharing science-based facts.²⁸ Once people receive and review information from a trusted source, they tend to reconsider their healthcare decisions, such as vaccination.

The five A's model below lists barriers to vaccination uptake and some solutions.

- **Access:** The ability of individuals to be reached by, or to reach, recommended vaccines.
 - Employers can provide onsite flu vaccination events.
 - Week-long events in September and October.
- **Affordability:** The ability of individuals to afford vaccination, in terms of both financial and nonfinancial costs.
 - Health insurance that fully covers flu vaccines to caregiver and family members.
- **Awareness:** The degree to which individuals have knowledge of the need for, and availability of, recommended vaccines and their objective benefits and risks.
 - Full campaign and promotion of vaccine events.
- **Acceptance:** The degree to which individuals accept, question, or refuse vaccination.
 - Share credible, timely and science-based information with colleagues, friends and family.
- **Activation:** The degree to which individuals are nudged toward vaccination uptake.²⁹
 - Offer incentives to receive a flu shot if in a LTCF setting.

If access is not readily available, such as vaccine clinics on site, caregivers may be less likely to get a flu shot. Also, if caregivers don't know about the importance of a flu shot for themselves, their family and the people they care for, the less likely they will seek out a flu shot.

The Dual Threat of COVID-19 and the Flu

Adults 65+ who are at higher risk for developing complications from the flu are also vulnerable to severe disease from COVID-19. The flu and COVID-19 are both contagious respiratory illnesses, but they are caused by different viruses.

The symptoms may seem similar between both the flu and COVID-19. However, flu symptoms occur very rapidly, where COVID-19 symptoms take longer to show up. Additionally, the flu is less contagious than COVID-19.

Individuals can be infected with both viruses at the same time. The only way to determine which disease someone has is to visit a healthcare provider and take a diagnostic test.³⁰

The Lung Association recommends getting vaccinated against both the flu and COVID-19 to prevent infection of both diseases.³¹ COVID-19 and flu vaccines can be administered in the same visit if the patient is eligible. If a patient or HCP are due for both vaccines, it's good practice to offer both vaccines in the same visit.³²



Flu Vaccination Coverage Among Caregivers

“Vaccinating healthcare personnel working in long-term care facilities is vital for preventing influenza transmission to residents/patients.”³³

As a caregiver, it is important to explain the importance and benefits of flu vaccination to your patients and remind them to get a flu shot in September or October.

Monitoring Flu Vaccination Coverage

Monitoring flu vaccination data helps LTCFs identify flu vaccination trends.

Benefits of Monitoring Vaccinate Uptake

Analyzing trends helps the LTCF identify unvaccinated caregivers and modify educational and promotional efforts to reach them, so the vaccination numbers increase. Another benefit includes the “use of data for strengthening quality improvement activities.”³⁴

Importance of Protecting Older Adults

Risks and Complications of the Flu

The flu makes people feel sick very quickly. Some people with the flu feel feverish or have chills. They may also have a cough, sore throat, runny or stuffy nose, body aches, headaches, extreme tiredness or experience weakness. Sinus and ear infections are examples of moderate complications from flu, while pneumonia is a more serious flu complication causing infection or inflammation of the lungs which in turn blocks oxygen from reaching the bloodstream.

The [Lung Association's website](#) has a list of the complications that can occur when you come down with the flu.

The impact of influenza on LTC facilities can be particularly devastating since the flu can be a serious health threat, especially for people vulnerable to flu complications, including adults 65+ and people living with certain long-term medical conditions. People older than age 65 are at the highest risk for hospitalization and complications from influenza and account for the majority of influenza hospitalizations and deaths in the United States each year.³⁵

Adults at higher risk of getting seriously sick from the flu include:

- Adults 65+
- People with certain conditions or long-term health conditions such as asthma, COPD, heart disease or diabetes³⁶
- People who live in nursing homes and long-term care facilities
- Certain racial and ethnic minority groups, including African Americans, American Indians or Alaska Natives and Hispanics

Hospitalizations and Deaths from the Flu Increase with Age

For adults 65+, hospitalization and death due to flu complications is very real. “In recent years, for example, it’s estimated (2017-2019) that between 70% and 85% of seasonal flu-related deaths have occurred in people 65 years and older, and between 50% and 70% of seasonal flu-related hospitalizations have occurred among people in this age group.”³⁷

The most important action you can take as a healthcare provider or caregiver is to get an annual flu shot.

Increased Risk of Heart Attack and Stroke When Paired with the Flu

The CDC found that “about half of adults hospitalized with the flu have heart disease. Studies have shown that flu illness is associated with an increase in heart attacks and stroke. A 2018 CDC study found that the risk of having a heart attack was six times higher within a week of a confirmed flu infection. These findings were most pronounced for adults 65+ and those experiencing their first heart attack.”³⁸

Lowered Immune Systems

“The weakened immune system in older adults can also mean that this group doesn’t respond as well to flu vaccination. While no vaccine is 100% effective, immunity tends to be stronger in younger individuals who are vaccinated, making it even more important to have vaccinated individuals caring for adults 65+.

Given the higher risk of severe flu illness and lower protective immune response after vaccination among adults 65+, substantial research and development have led to the production of new flu vaccines, including recombinant vaccines, intended to provide better immunity in this age group.”³⁹



Protecting Older Adults From the Flu

“People 65 years and older should get a flu shot, not a nasal spray vaccine. They can get any flu vaccine approved for use in their age group. There is preferential recommendation.”⁴⁰ There are two vaccines specifically designed for adults 65+ that create a stronger immune response:

- High-dose flu vaccine, brand name Fluzone High-Dose Quadrivalent
- Adjuvanted flu vaccine, brand names FLUAD and FLUAD Quadrivalent

Flu Vaccines Have a Long History of Working

The most well-known flu pandemic occurred over a century ago in 1918-1919. However, it wasn't until the 1930s that the science and medical community determined the flu is a virus that can be prevented with vaccines. The first flu vaccine was funded and developed by the federal government in the 1940's and released in 1945⁴¹ for civilian use.

It became an annual flu shot in the 1960s for people with “chronic debilitating disease, people aged 65 years or older and pregnant women.”⁴² Every year the U.S. Food and Drug Administration (U.S.F.D.A.) and the CDC work together in “ensuring that safe and effective flu vaccines are available every flu season.”⁴³

FAQs About the Flu and Flu Vaccines

Q: Are flu shots safe?

Yes, flu shots are safe. Flu vaccines have a very good safety record. Hundreds of millions of Americans have safely received a flu shot for more than 50 years. Decades of research show getting vaccinated is far safer than getting sick with the flu.

Q: Can a flu shot give you the flu?

No. You cannot get the flu from a flu shot or the nasal flu shot. Flu shots do not use the whole flu virus and cannot cause an infection.

Q: When should adults 65+ receive their flu shots?

Do your best to get your annual flu shot in September and October. However, vaccination is still beneficial after October.⁴⁴

Q: What are the side effects of the flu shot?

Flu shot side effects are usually mild and short-lived. Not everyone experiences side effects after getting a flu shot. However, those that do most likely have mild symptoms for a day or two. Side effects can include soreness, redness or swelling where the shot was given, as well as headache, mild fever or muscle aches. While potentially uncomfortable, they are often a good sign that your body is responding to the vaccine.⁴⁵



Q: Are there people who should not get a flu shot?

Individuals with severe, life-threatening allergies to a flu shot or any ingredients in the vaccine should not get a flu shot. Signs of a severe allergic reaction can include difficulty breathing, hoarseness or wheezing, swelling around the eyes or lips, hives, paleness, weakness, a fast heartbeat or dizziness. Life-threatening allergic reactions to the flu shot are very rare.⁴⁶

Infants younger than six months are ineligible to get a flu shot.⁴⁷

Q: How many types of human flu viruses exist?

Two main types of human flu viruses occur: types A and B. The flu A and B viruses that routinely spread in people are responsible for seasonal flu epidemics each year.⁴⁸

Q: How do flu viruses change?

Influenza (flu) viruses are constantly changing. They can change in two different ways: 1) antigenic drift, which are small mutations or changes in the virus that change its surface proteins. Antigenic drift is a common occurrence. Or 2) antigenic shift, which are major and abrupt changes in the virus' genetic code that result in a new flu subtype. Antigenic shift is rare and results in human having little to no immunity against the new subtype.⁴⁹

Q: Which flu virus type can be transmitted between humans and animals?

Influenza type A can be found in humans and ducks, chickens, pigs, whales, horses, seals and cats. Transmission between humans and animals is rare, but it does occur. Influenza type B viruses circulate widely only among humans.⁵⁰

Q. Can I get a COVID-19 shot and a flu shot during the same visit?

Yes, you can get a COVID-19 shot and a flu shot at the same time.

Even though both vaccines can be given at the same visit, people should follow the recommended schedule for either vaccine: If you haven't gotten your currently recommended doses of COVID-19 vaccine, get a COVID-19 shot as soon as you can, and ideally get a flu shot by the end of October.⁵¹

Q. Is it safe to get a COVID-19 shot and a flu shot at the same time?

Yes. While limited data exist on receiving a COVID-19 vaccine at the same time as other vaccines, the medical community has shown that our bodies develop protection and taking other vaccines at the same time is safe. If you have concerns about getting both vaccines at the same time, speak with a health care provider.

Q. Can I get a flu shot at the same time I get my COVID-19 booster shot?

Yes, you can get a flu shot at the same time you get a COVID-19 shot, including a COVID-19 booster shot.⁵³

Q. Should a flu shot be given to someone with suspected or confirmed COVID-19?

No. Flu vaccination should be deferred for people with suspected or confirmed COVID-19, whether or not they have symptoms, until they have met the criteria to discontinue their isolation. While mild illness is not a contraindication to flu vaccination, vaccination visits should be postponed to avoid exposing healthcare personnel and other patients to COVID-19. When scheduling or confirming appointments for flu vaccination, patients should be instructed to notify the health care professional's office or clinic in advance if they currently have or develop any symptoms of COVID-19.⁵⁴

Q. When can someone who recovered from COVID-19 receive a flu shot?

Flu vaccination should be deferred until a patient is no longer acutely ill. This may be different for patients who are already being cared for in a medical setting than it is for patients who are isolating at home. In a medical setting, the timing for vaccination is a matter of clinical discretion. In general, patients who are isolating at home should wait until they meet criteria for leaving isolation (even if they have no symptoms) to come to a vaccination setting in order to avoid spreading COVID-19 to others. CDC has guidance for when people can be around others after having COVID-19.⁵⁵

Q. What steps can health care personnel take to safely give flu shot during the COVID-19 pandemic?

Applying infection prevention practices to all patient encounters is very important, including physical distancing (at least six feet) when possible, wearing masks, hand hygiene, surface decontamination and source control while in a health care facility. The potential for asymptomatic spread of the virus that causes COVID-19 underscores the importance of these practices. Immunization providers should refer to the guidance developed to prevent the spread of COVID-19 in health care settings, including outpatient and ambulatory care settings.⁵⁶

Planning for Flu Season

Timeline/Checklist for Flu Vaccination Activity and Monthly Goals

Ideally, start planning your flu vaccination promotions and events in June and July. When planning, keep in mind that anyone can receive a flu shot through January.⁵⁷ Coordinate with your facility's administration for some of the activities listed below. The timeline/checklist that follows can be compressed to fit your availability.

Month 1

- Assemble a team to promote flu shots in your facility and identify at least one administrator.
- Set goals to either meet or exceed the coverage rates from previous years.
- Explore the possibility of a mandatory influenza vaccination policy at your long-term care facility. “Compelling evidence indicates that health care organizations the implement influenza vaccination requirements successfully increase vaccination coverage of their health care personnel.”⁵⁸
- Brainstorm activities that will meet your goals and address the three major themes:
 - What can we do to educate others on the importance of flu vaccination and its benefits?
 - What can we do to improve access to flu shots in our facility?
 - What other promotional activities can we do to meet our goals?

Month 2

- Engage community partners who may want to support your activities.
- Finalize goals to include projected results from the activities. For example, as of January 30, our facility aims to have at least 70% flu immunization coverage for all staff and 70% for all residents.
- Determine if your facility will offer incentives for those who get a flu shot.
- Determine if you need volunteers to help manage your promotional events.
- Promote your activities by sending out and posting save-the-dates for activities in well-traveled areas of the facility so everyone, residents and families, can see what's going on.

Month 3

- Secure incentives at least one week before your first promotional event.
- Coordinate with volunteers on their schedule and responsibilities.
- Schedule a kick-off celebration to begin flu vaccination activities.
- Follow your scheduled activities and events.

Best Practices to Increase Flu Vaccination Rates

How to Improve Flu Vaccination Rates Among LTCF Workforce

As a caregiver providing services at a LTCF worksite, and especially those in leadership and management positions, review our workplace toolkit and other education materials by visiting our *Fend Off Flu* webpage. You can also share the flu vaccine finder, [Vaccines.gov](https://www.vaccines.gov), with co-workers and colleagues to help them find out where they can get a flu shot.

Flu Vaccine Programs

How can my facility best promote influenza vaccination?

- Promote a “vaccine day” to disseminate educational resources and provide on-site vaccination.
- Provide incentives to get vaccinated (small gift cards, raffle prizes, lunch, etc.)
- Vaccinate facility administrators and managers in front of staff.
- Consider using the [Lung Association’s Employer Flu Toolkit](#) and [CDC’s Digital Media Toolkit](#) and as a resource to promote influenza vaccination.

The CDC and the American Medical Director’s Association (AMDA) have provided best practices on flu vaccination programs.

[CDC Flu Toolkit](#)

Implementing a workplace vaccination requirement is the most effective strategy to increase influenza vaccination coverage among HCP in post-acute and facilities.⁵⁹

[AMDA Best Practices](#)

AMDA, The Society for Post-Acute and Long-Term Care Medicine has identified resources and best practices to help medical directors, administrators, directors of nursing and other staff increase the flu vaccination rates in their facilities.⁶⁰

[NAIIS Guidance](#)

Follow this guidance to implement an influenza vaccinate requirement policy for healthcare personnel in a LTCF to improve influenza vaccination coverage.⁶¹

Other Educational Materials

You can find education materials for HCPs at the following links:

- American Lung Association's [Fend Off Flu webpage](#), employer toolkit and other flu vaccination materials.
- [Interim Guidance](#) for Influenza Outbreak Management in Long-Term Care and Post-Acute Care Facilities.
- Post-acute and Long-term Care Facility [Toolkit](#): Influenza Vaccination among Healthcare Personnel.
- CDC Information on [Who Needs a Flu Vaccine and When](#).
- [ALA's Flu Employer Toolkit](#) and [CDC Digital Media Toolkit: 2021-22 Flu Season](#).

Case Studies

The case studies that follow explain the importance of flu vaccination for LTCF caregivers and the organization's approach.

Tailoring Immunization Programs for Seasonal Influenza (TIP FLU)

[Full document](#)

Seasonal influenza vaccination (SIV) of health care workers (HCWs) is recommended to protect them and their patients from infection and to reduce the risk of hospital- or health-care-acquired influenza. Although annual vaccination of HCWs against seasonal influenza is recommended in most countries of the World Health Organization (WHO) European Region, vaccination uptake remains low. The WHO Regional Office for Europe tested a new approach, tailoring immunization programs for seasonal influenza (TIP FLU), to design evidence-informed solutions to increase uptake of SIV among HCWs.

This case study documents the application of TIP FLU in Montenegro, focusing on the formative phase. When accompanied by the TIP FLU guide, it can be used to apply the approach to conduct formative research, and design and evaluate SIV programs targeting HCWs in a given context.

Utility of Healthcare System-Based Interventions in Improving the Uptake of Influenza Vaccination in Healthcare Workers at Long-Term Care Facilities: A Systematic Review

[Full document](#)

While flu vaccination coverage is satisfactory among adults 65+, healthcare personnel are less likely to be vaccinated. We performed a systematic review in different databases. Among the 1,177 articles screened by title and abstract, 27 were included in this review. Most studies included multiple interventions that address barriers to vaccination or policy interventions. Mandatory vaccine policies seem to be the most useful intervention. However, our study suggests that LTCFs should combine interventions in different areas.

APPENDIX:
**Communication Resources
to Promote Flu Vaccination
and Disease Prevention**



#FendOffFlu

Use this flyer/poster to explain how the flu impacts lung disease and other long-term health conditions.





Flu-related hospitalizations can be prevented

50-70% of hospitalized patients were 65 and older.

An annual flu shot can keep you from the hospital and save your life. Talk to your doctor today!

Use this flyer/poster in high traffic areas to show the importance of flu vaccination for adults 65+ and caregivers.



**Fend
Off Flu**

#FendOffFlu



You are a hero by meeting the needs of all.

Protect yourself, your co-workers
and residents by getting your flu shot.



You are a hero by meeting the needs of all.

Protect yourself, your co-workers
and residents by getting your flu shot.

Use this flyer/poster to provide simple and clear tips on accessing flu vaccines and explain the benefits of vaccination.





The best way to reduce your risk from seasonal flu and its potentially serious complications is to get vaccinated every year.

Talk to your doctor or local health department today!

To learn more about flu vaccines for older adults, visit [CDC.gov/flu](https://www.cdc.gov/flu).

Distribute this fact sheet that explains how to increase vaccine confidence and what role caregivers play on flu vaccination at the workplace.



**Fend
Off Flu**



Vaccine Confidence

What is vaccine confidence?

[Vaccine confidence](#) is the trust people have in government recommended vaccines and the healthcare providers who administer shots. People may also have questions and concern about the procedures and policies that guide vaccine development, license, or authorize a vaccine, or provide recommendations and mandates.

Vaccine confidence is a spectrum. Low vaccine confidence can decrease vaccination rates. People spread significant misinformation and disinformation during outbreaks, such as measles and COVID-19, creating many barriers to trust and uptake.

Why is vaccine confidence important?

Many people with low vaccine confidence seek additional information before getting vaccinated. Readily available information that is credible and science-based is more likely to increase their vaccine confidence. This leads to increased vaccination rates and fewer illnesses, hospitalizations and death.

What impacts vaccine confidence?

- Social factors
- Cultural factors
- Political factors
- Individual beliefs
- Vaccine-specific factors

Vaccine Confidence Resources:

[CDC HCP Fight Flu Toolkit](#)

[CDC Vaccinate with Confidence](#)

[CDC Building Confidence in COVID Vaccines](#)

[NAIIS How to Guide for Becoming an Adult Flu Vaccination Provider](#)

How can providers increase vaccine confidence?

People rely on healthcare providers to listen to their concerns and questions, and offer accurate and timely information. A strong recommendation by a healthcare provider is one of the most impactful factors that influences whether a patient decides to get vaccinated. The Centers for Disease Control and Prevention (CDC) recommends the [Make a Strong Influenza Vaccine Recommendation](#) (SHARE) approach:

- **SHARE the reasons** why the flu vaccine is recommended for the patient.
- **HIGHLIGHT positive experiences** with flu vaccination to reinforce vaccine benefits.
- **LISTEN to patient questions** and concerns about the influenza vaccine with empathy. Address side effects, safety and vaccine effectiveness in plain and understandable language.
- **REMIND patients that the flu shot protects them and their loved ones** from serious influenza illness and related complications.
- **EXPLAIN the potential costs of getting the flu**, including serious health effects, time lost (such as missing work or family obligations) and financial costs.

How can you help build vaccine confidence?

- Lead by example by getting vaccinated.
- Make your decision to get vaccinated visible by posting to social media, wearing a badge while at your workplace and discussing your personal decision with patients.
- Encourage leaders in your practice, family and community to be vaccine ambassadors and prepare them with fact and science-based talking points.
- Discuss vaccination with your patients, staff, friends and family, and address any questions and concerns.
- Help educate people about vaccine development, safety and approval processes.
- Send a letter, email, automated voice message or text message to your patients that encourages vaccine uptake.

Use this flyer/poster to promote flu vaccination among adults 65+.



**Fend
Off Flu**

#FendOffFlu



**We care about
your health.**

**Talk to us about how to get
your flu shot today.**



We care about your health.

Talk to us about how to get
your flu shot today.

Use this flyer/poster to promote flu vaccination among adults 65+ who live in multi-generational housing.





Protect yourself and your loved ones.

Get your flu shot today.

Use this content for your facility's emails.



Email Content

Email #1

Timeline: Customize this email to reflect your facility's policy and send out every year during flu season.

Subject: Ways to Protect Yourself and Our Community from Flu

Body: Every year, millions of Americans get sick with the flu. This virus causes people to miss work because they are sick or at home taking care of sick loved ones. This year, when COVID-19 has already caused people to miss work because they are sick or quarantining, getting the flu would add an additional burden.

We're asking all our staff to keep our workplace and community healthy. Our goal is to help contain the flu virus and alleviate our overburdened healthcare system. The flu can be prevented by taking the following actions:

1. Wash your hands often with soap and water. If soap and water is unavailable, use an alcohol-based hand sanitizer and rub vigorously.
2. Don't touch your eyes, nose or mouth. If you must touch your eyes, nose or mouth, wash your hands before to keep from spreading germs to yourself. Also wash your hands after to keep from spreading any germs you may have to surfaces or other people.
3. Cover your cough and sneeze with a tissue or your elbow if a tissue isn't available.
4. Stay home if you are sick. If you think you have the flu, tell your supervisor, stay home from work and take care for yourself.
5. Most importantly, do your best to get a flu shot this fall before the end of October. However, it is still beneficial to get a flu shot after October. The best protection against the flu is vaccination.

Learn more about the flu and additional resources:

- [Lung.org/flu](https://www.lung.org/flu)
- [CDC.gov/flu](https://www.cdc.gov/flu)

If you have questions or concerns, please contact: (insert your organization point of contact)

Email #2

Timeline: Customize this email to reflect your facility's policy and environment and send out every year during flu season.

Subject: Prevent the Flu by Getting a Flu Shot

Body: We encourage all staff, residents, family and loved ones to get a flu shot. The CDC and many other health organizations recommend a flu shot each year for everyone over six months of age.

Flu shots prevent millions of illnesses and doctor's visits each year and reduce deaths and hospitalizations from the flu. It is especially important for anyone with a chronic health condition to be vaccinated as people with long-term health conditions are at higher risk of serious flu-related complications. Flu illness can make certain conditions more difficult to manage.

Flu shots have a very good safety record. Hundreds of millions of Americans have safely received flu shots for more than 50 years, and decades of research show getting vaccinated is far safer than getting sick with the flu.

We will send out information soon about where you can get vaccinated.

Learn more about the flu and additional resources:

- [Lung.org/flu](https://www.cdc.gov/flu)
- [CDC.gov/flu](https://www.cdc.gov/flu)

If you have questions or concerns, please contact: (insert your organization point of contact)

Email #3

Timeline: Customize this email to reflect your organization's policy and environment and send out every year in late November and December before the holidays.

Subject: It's Not Too Late to Get a Flu Shot

Body: We understand that life is busy, and you may have forgotten to get a flu shot. Or some of you may have questions or concerns about flu and the vaccine. Be assured that it's still not too late to get a flu shot and receive all benefits of protection.

Please review our staff health policy on flu vaccination coverage, including cost and paid time off.

Learn more about the flu and additional resources:

- [Lung.org/flu](https://www.cdc.gov/flu)
- [CDC.gov/flu](https://www.cdc.gov/flu)

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*Promoting Flu Vaccination for
Caregivers of Older Adults*

Caregiver FLU TOOLKIT

All information in this document is accurate and science based as of its publishing in October 2021.

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