## Minnesota Health Care Setting Influenza Vaccination Program Evaluation

### LOGIC MODEL

<table>
<thead>
<tr>
<th>Inputs</th>
<th>Activities</th>
<th>Outputs</th>
<th>Outcomes</th>
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</table>
| • Funding  
  • ITIH leadership support  
  • ITIH program staff  
  • HCP influenza vaccination recommendations (CDC, IDSA, NFID, ACP, Joint Commission)  
  • MIPAC  
  • MIPAC Influenza Subgroup  
  • Partner organizations (MCAI, MN-APIC, others)  
  • MIIC | • Developed formal recommendation from MDH & MIPAC to HC facilities (2007). Recommended influenza vaccination program elements include:  
  1) Vaccination of staff and licensed practitioners  
  2) Influenza vaccination on site, preferably at no cost to employee  
  3) Staff education  
  4) Assessment of vaccination rates annually and identifications of non-participation in the organization’s vaccination program  
  5) Annual enhancements to the program to increase participation  
  • Letters to HC organizations detailing above recommendations (July 2007)  
  • Informed declination program materials developed and promoted  
  • MN’s yearly Flu Vaccination Plans describe/promote recommendations  
  • Display/present initial recommendations and program materials at various conferences across state  
  • Assess various employee influenza vaccination program activities used by organizations  
  • Assess perceived barriers to vaccination  
  • Assess usefulness/utilization of registry for tracking workers’ vaccinations in health care settings  
  • Assess baseline HC setting vaccination/declination rates for 2008-09 season and then annually | • # of HC organizations with established influenza vaccination programs that offer the recommended program elements  
  • # of HC organizations that evaluate influenza vaccination programs & rates  
  • # of HC organizations using MIIC to track workers’ vaccinations  
  • MN-specific HC personnel vaccination rates | • Grant reports  
  • Summary document of survey findings  
  • Evaluation report  
  • Communication plan for dissemination  
  • Press release  
  • Revised program materials  
  • Updates to HCP influenza page of MDH influenza web site  
  | • Increased # of HC organizations with established influenza vaccination programs that offer the recommended program elements.  
  • Increased number of HC organizations that evaluate influenza vaccination programs & rates  
  • MN-specific HC personnel vaccination rates assessed  
  • Increased HC personnel knowledge  
  • Program materials developed/amended as needed  
  • Survey findings shared with stakeholders  
  • Survey findings shared at NIC and/or National Influenza Vaccine Summit and other regional/local conferences  
  • Annual increases in HC setting influenza vaccination and vaccination/declination rates in MN (2009 – 2010 and beyond). |}

### Moderators:

- Very engaged stakeholder groups (MIPAC, the MIPAC Influenza Subgroup, MCAI, MN-APIC) who are very eager to have Minnesota-specific data regarding HCP influenza vaccination rates to serve as a benchmark to mark progress.
- This initiative is prioritized highly by leadership within the immunization section at MDH as well our stakeholder groups.

### Long-term outcome:

- 90% HCP vaccination rate in MN