

## **A Decision Aid about the Prevention of Influenza for Front-Line Healthcare Workers in Long-Term Care Homes**

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SCO Health Service, a health care centre that includes two long-term care homes, offers the influenza vaccine to all healthcare workers through mobile clinics every fall. It has been observed that healthcare workers have had difficulty making an informed decision about getting vaccinated. In order to address this issue and increase influenza vaccine uptake, a multi-disciplinary working group was formed that included occupational health, infection prevention and control and public health nurses, as well as hospital administrators and researchers.

In order to help healthcare workers make an informed decision, the team developed a tool called the Ottawa Influenza Decision Aid. Decision aids provide information and help individuals consider the personal value they place on benefits and harms of the options. They are intended to help individuals feel supported during the decision-making process, as well as to improve the quality of and satisfaction with their decision.

The feasibility of implementing the decision aid in the workplace was assessed at the beginning of the 2006-07 influenza season. The decision aid was reviewed by approximately 60 healthcare workers and 10 staff advocates (administrators, managers and union representatives) at SCO Health Service's two long-term care homes. They also completed a questionnaire on the acceptability of the decision aid and the feasibility of implementing it in the workplace. The majority thought that the decision aid had about the right amount of information; was neutral and balanced; and would be somewhat or very helpful for healthcare workers making this decision. Results indicated that they would recommend other healthcare workers use this decision aid when making their decision regarding influenza prevention. This tool was also evaluated using International Decision Aid Standards and was found to improve the decision process and to lead to improved quality of decisions. This feasibility project demonstrated that this decision aid can be implemented in the workplace.

The next phase, Fall 2007, will be to measure influenza vaccination rates in a small number of long-term care homes that use the decision aid. Homes across Ontario, Nova Scotia and Saskatchewan have expressed interest in participating in this evaluation.

Following the evaluation, the Ottawa Influenza Decision Aid will be made available to long-term care homes and other organizations wishing to use this tool to enhance decision-making surrounding influenza prevention and, hopefully, to increase influenza vaccination among healthcare workers.