

Facility Considerations to Address Vaccine Hesitancy

Element	Implement	Consider in Future	Not Viable
Expand NHSN access to additional individuals for data entry.			
Ensure there is a process to add new hires and remove terminated individuals from the data collection records.			
Ensure there is a process to add new admissions and remove terminated individuals from the data collection records.			
On the declination form, include common reasons for declination (e.g., contraindication, previously vaccinated, fear of needles, etc.) to determine when/if the vaccine will be offered in the future, educational opportunities, and trends that may be addressed.			
Engage with and listen to your residents and HCPs to identify and analyze perceptions, content gaps, information voids, and misinformation.			
Add posters on the benefits of vaccination in common areas.			
Add posters to identify who to contact if vaccination is desired.			
Post materials at the resident eye level, in languages understood by residents, and consistent with the residents' health literacy level and cognitive function.			
Validate the plan to access vaccination is operational.			
Validate contracted staff vaccination status is addressed.			
Actively track the vaccination program outcomes, including when and how education was provided. The decision is documented (e.g., declination form, which indicates why it was declined, the benefits of vaccination, and how to access it if they change their mind).			
Schedule and hold vaccination clinics regularly, not just once a year.			
Ensure there is a process to validate whether residents or HCPs have been vaccinated elsewhere (e.g., state database, other employer records, PMH).			
Establish a vaccination goal and offer a reward if it is reached (e.g., a pizza party or a drawing for a gift card).			
At the time of or after an outbreak, share how vaccination can reduce illness, signs and symptoms, length of illness, and decrease the chance of long COVID.			

Element	Implement	Consider in Future	Not Viable
Utilize the medical director to advocate for individuals to be vaccinated.			
Determine the best individual the staff trusts to provide one-on-one sessions to answer unvaccinated staff questions and concerns.			
Assign a knowledgeable person to speak with family members or ensure the individual assigned to this task has current information, including how to address misinformation.			
Ensure that a trained individual educates all residents and HCPs regarding vaccinations before they are offered the vaccination.			
Determine what additional measures the HCW must take if they choose to remain unvaccinated or not up to date (e.g., wearing a mask while in the building during influenza season).			
Arrange for a trusted individual to present at the resident council meeting and at an all-staff meeting about benefits of vaccinations, vaccination plans and answer questions.			
Address common misinformation with posters in a visible location(s).			
Ensure HCPs are aware of the vaccine adverse event reporting system (VAERS), in which anyone can report concerns about any vaccination post-problems, not just COVID-19.			
Encourage staff to remember the COVID-19 vaccination using the 'broken record' technique and provide information at huddles or staff meetings.			
They are educating well-respected informal leaders in various departments to act as vaccine champions among HCPs, including education to address the most frequently heard concerns.			
Continuously educate staff about boosters, which can be multiple short spurts of information rather than longer in-services.			
Position values such as liberty (e.g., personal control of your life, free to live a healthy lifestyle) and purity (e.g., boosts the body's natural defenses, free from infection) as reasons for getting vaccinated, rather than reasons for not getting vaccinated.			
Tap into emotional triggers by focusing on your audience's "why," or motivations for getting vaccinated.			
Shift the HCW message to "heart" or empathy for resident safety. Inform them that they provide direct patient care, assistance in meals and ADLs, and could potentially expose a vulnerable resident to the devastating effects of COVID-19.			

Element	Implement	Consider in Future	Not Viable
Encourage unvaccinated individuals to “talk to your doctor” instead of telling them to get vaccinated. This non-threatening approach will help your audience learn more about COVID-19 vaccination from someone they know and trust.			
If the facility has had an active and effective influenza vaccination program, replicate the process and apply it to other vaccination programs.			



This material was prepared by Health Quality Innovators (HQI), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 12SOW/HQI/QIN-QIO-0886-10/07/24