Flu vaccine best practice alert
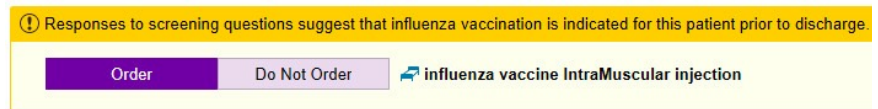## (BPA) daily firings reduced significantly

PROBLEM:

An inpatient influenza alert notifies nurses if a patient has not received the vaccine. The alert has one of the highest alert cancellation rates (90%). Overly frequent firings can disrupt flow of care and increase alert fatigue. This project aimed to optimize the influenza alert to increase the vaccination rate, reduce alert fatigue, and simplify the workflow.
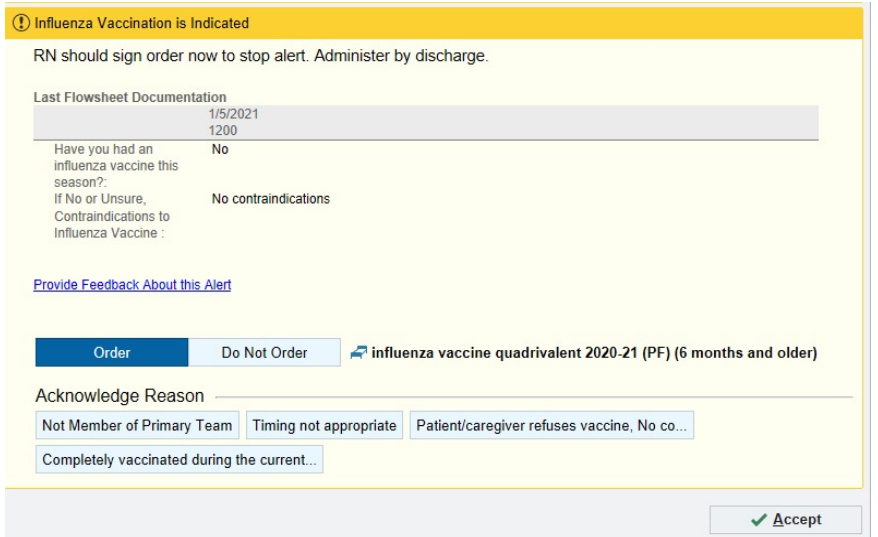
INTERVENTIONS:

We iteratively tested five versions of the influenza vaccine alert. (1) had a clearer title and empowered nurses to order the vaccine. (2) eliminated the ability to dismiss the alert without ordering the vaccine or selecting a reason why it was not indicated. (3) allowed nurses to select why the vaccine was not indicated and delayed its next firing accordingly. (4) and (5) added more options to explain alert dismissal.

Original alert

Final alert (version 5)

RESULTS:

Alert firings have been reduced significantly from 23.0 per patient per day in the 2017-18 flu season to 3.2 per patient per day in the 2020-21 season. Vaccine ordering has decreased from 90.8% to 79.4%. This decrease may be due to effects of the COVID-19 pandemic – there was no change in vaccination rate through trials conducted prior to the pandemic.

Rapid, iterative testing of best practice alerts can reduce alert fatigue and improve provider experience. Subsequent rounds of this project will tie alert firing to admission and discharge to further reduce firing rate.