



## **Position Statement: Influenza Immunization of Healthcare Personnel December 2014**

Influenza is a serious disease associated with high rates of morbidity and mortality. Influenza infections result in approximately 226,000 hospital admissions and 36,000 deaths annually.<sup>1</sup> The most efficient method of preventing these outbreaks and the associated morbidity and mortality is through pre-exposure vaccination.<sup>2</sup>

To ensure patient safety and reduce patient exposure to complications of influenza, the healthcare industry has increased emphasis on annual influenza vaccinations for its workers.

**It is the position of the Tennessee Hospital Association that all hospital and health systems should require all healthcare workers, including employees, licensed independent practitioners, students and volunteers, to receive annual vaccinations for seasonal flu.**

**Individuals who do not receive the vaccine should be required to sign a declination statement, which also requires wearing of an appropriate facemask during patient interaction in order to reduce the risk of infection or transmission to others.**

THA recommends hospitals include these additional measures as part of a comprehensive strategy inclusive of the recommendations for influenza vaccination of healthcare personnel from the Healthcare Infection Control Practices Advisory Committee (HICPAC) and Advisory Committee on Immunization Practices (ACIP).<sup>3</sup>

### **Rationale**

- Healthcare personnel are at high risk for acquiring influenza infection due to interaction with ill patients, as well as their exposure in the community. Because persons who are at greatest risk of developing complications of influenza are exposed to healthcare personnel in a variety of inpatient and outpatient settings, an important strategy to decrease exposure to these high risk individuals is to immunize healthcare workers.<sup>4</sup>
- The Centers for Disease Control and Prevention (CDC) has recommended annual influenza vaccinations for healthcare personnel since 1981.
- The U.S. Department of Health and Human Services' Healthy People 2020 goal is healthcare worker vaccination rates of 90 percent by the year 2020. The 2015 interim goal is 75 percent among all categories of healthcare workers. National survey data for the 2013-2014 flu season shows 75.2 percent of hospital workers report receiving a flu vaccination. This reflects a slight increase from the 2012-2013 flu season when 72 percent of workers were vaccinated. As with any patient safety effort, 100 percent participation is the goal.<sup>5</sup>
- Healthcare worker vaccination rates became a state and federal reporting requirement in 2013 using the CDC National Healthcare Safety Network (NHSN) reporting module. The Tennessee Department of Health has begun tracking influenza vaccination of healthcare workers in the state and released the first public report in September 2014. Tennessee acute care hospital data for the 2013-2014 flu season shows the healthcare worker vaccination mean rate of 79.8 percent. Vaccination rates were highest for employees with a mean rate of 83.9 percent and lowest for physicians and licensed independent practitioners at 61.9 percent.

- Tennessee hospitals that require vaccination as a condition of employment were three times as likely to meet the target goal of a 90 percent vaccination rate compared to facilities that do not have this requirement.
- The virus can transmit to patients from both symptomatic and asymptomatic healthcare personnel. Multiple studies show 70 percent or more of healthcare personnel continue to work despite being ill with influenza, thus exposing patients to the virus.<sup>6</sup>
- Influenza immunization of healthcare personnel has been demonstrated to decrease illness in healthcare personnel, work absences and mortality in the patients for which they care.<sup>7</sup>
- Influenza vaccine is safe. The most common side effects of the injectable (inactivated) influenza vaccine include soreness, redness or swelling at the site of the injection.<sup>8</sup>
- Immunization requirements are effective in increasing vaccination rates. Vaccination requirements for measles, mumps, rubella and TB screening have been successful in achieving near universal compliance. Requiring influenza vaccine similarly should be highly effective.<sup>9</sup>

## Conclusion

Required vaccination of healthcare personnel offers an important method for preventing transmission of influenza to high-risk patients. Evidence supports the fact that influenza vaccine is effective, cost-efficient and successful in reducing morbidity and mortality. Evidence also demonstrates policies for voluntary vaccination are less effective in achieving acceptable vaccination rates.

Requiring influenza vaccination of healthcare personnel is important to patient safety and quality of care. By increasing vaccination rates for healthcare personnel, providers can play a vital role in protecting the health and well-being of patients, families and the community at large.

<sup>1</sup> Fiore AE, Shay DK, Haber P, et al. Prevention and Control of Influenza. Recommendations of the Advisory Committee on Immunization Practices (ACIP), *MMWR* 2008; 57(RR-7):1-59.

<sup>2</sup> Polan, GA, Tosh P, Jacobson RM. Requiring influenza vaccination for healthcare workers: seven truths we must accept. *Vaccine* 2005; 23:2251-2255.

<sup>3</sup> Pearson ML, Bridges CB, Harper, SA. Influenza vaccination of healthcare personnel, recommendations of the Healthcare Infection Control Practices Advisory Committee (HICPAC) and the Advisory Committee on Immunization Practices (ACIP). *MMWR* 2006; 55(RR02):1-16.

<sup>4</sup> Ibid.

<sup>5</sup> Centers for Disease Control, Influenza Vaccination Information for Health Care Workers, <http://www.cdc.gov/flu/healthcareworkers.htm>. Accessed November 21,

<sup>6</sup> Sartor C, Tissot-Dupont H, Zandotti C, et al. Use of a mobile cart influenza program for vaccination of hospital employees. *Infection Control Hosp Epidemiol* 2004; 25:918-22.

<sup>7</sup> Bridges CB, Thompson WW, Meltzer MI, et al. Effectiveness of cost-benefit of influenza vaccination of healthy working adults: a randomized controlled trial. *JAMA* 2000; 284:1655-1663.

<sup>8</sup> Belshe RB, Nichol KL, Black SB, et al. Safety, Efficacy, and Effectiveness of Live, Attenuated, Cold-Adapted Influenza Vaccine in an Indicated Population Aged 5-49 Years. *Clin Infec Dis* 2004; 39:920-927.

<sup>9</sup> Poland, GA, Tosh, P, Jacobson RM. Requiring influenza vaccination for healthcare workers: seven truths we must accept. *Vaccine* 2005; 23:2251-2255.

Written September 2009

Revised December 2014