Influenza Vaccination of the Health Care Workforce

GWU, Department of Health Policy
Brown Bag Lunch Research Seminar

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DISCLOSURES

• This project was funded by:
  – The Increasing Influenza Vaccination Coverage Among Healthcare Workers Working Group, co-chaired by the Centers for Disease Control and Prevention and the National Vaccine Program Office

• Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Department of Health and Human Services
PHYSICIAN CODE OF ETHICS

Hippocratic Oath (Classic)
I will apply dietetic measures for the benefit of the sick according to my ability and judgment; I will keep them from harm and injustice.

Hippocratic Oath (Modern)
I will apply, for the benefit of the sick, all measures [that] are required, avoiding those twin traps of overtreatment and therapeutic nihilism.

I will prevent disease whenever I can, for prevention is preferable to cure.

“A physician must recognize responsibility to patients first and foremost.”

“A physician shall recognize a responsibility to participate in activities contributing to the improvement of the community and the betterment of public health.

“To preserve the quality of their performance, physicians have a responsibility to maintain their health and wellness... When health or wellness is compromised, so may the safety and effectiveness of the medical care provided.”

AMERICAN NURSES ASSOCIATION CODE OF ETHICS

• “The nurse’s primary commitment is to the patient, whether an individual, family, group or community.”

• “The nurse promotes, advocates for, and strives to protect the health, safety, and rights of the patient.”

What steps do you think health care workers should take in order to protect their patients?
### INFLUENZA in the U.S.

#### Burden of Influenza in the United States

<table>
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<th>5-20% of the population is infected in a typical year</th>
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<tr>
<td>Annual Burden</td>
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<tr>
<td>Annual Mortality</td>
<td>23,600</td>
</tr>
<tr>
<td>Life Years Lost</td>
<td>141,783 to 610,660 (2003)</td>
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<tr>
<td>Hospitalized Days</td>
<td>1.2 to 3.1 million (2003)</td>
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<tr>
<td>Outpatient Visits</td>
<td>31.4 million (2003)</td>
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<tr>
<td>Direct Medical Costs</td>
<td>$10.4 billion (2003)</td>
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THE HEALTH CARE WORKFORCE

The health care industry supports 14.3 million jobs

Paid or unpaid, whose occupational activities involve direct or indirect contact with patients or contaminated material:

• Employee
• Staff
• Contractors
• Clinicians
• Volunteers
• Students
• Trainees
• Clergy
• Home health care providers
• Dietary staff
• Housekeeping staff

There are ~ 595,800 health care establishments

- Hospitals
- Adult day programs or facilities
- Ambulatory surgical facilities
- Home health care agencies
- Hospices
- Intermediate care facilities
- Long-term care facilities
- Nursing homes
- Outpatient clinics
- Physicians’ offices
- Rehabilitation centers
- Residential health care facilities
- Skilled nursing facilities
- Urgent care centers

NOSOCOMIAL INFLUENZA

• Over the past 30 years, nosocomial influenza outbreaks have been documented across the U.S.

• During an average flu season, 23% of HCWs are infected with the virus, show mild symptoms, and continue to work despite being infectious.

• Nosocomial outbreaks of influenza can result in a median mortality range from 16% in a general ward setting to 33 to 60% in a transplant setting.

Influenza vaccination of HCWs can:

- Reduce patient morbidity and mortality
- Reduce HCW absenteeism
- Protect HCWs and their families from disease
- Reduce associated health care costs of influenza outbreaks
HCW INFLUENZA VACCINATION RECOMMENDATIONS

• CDC Recommendation: since 1981, all HCWs

• Healthy People 2020: 90% influenza vaccination coverage for HCWs

• Supported by professional organizations:
  • American Medical Association
  • American Academy of Pediatrics
  • American College of Physicians
  • Association for Professionals in Infection Control and Epidemiology
  • National Foundation for Infectious Disease
  • Infectious Disease Society of America
Seasonal Influenza Vaccination of HCWs in the U.S., 2004-2009

Percentage Vaccinated

<table>
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<tr>
<th>Year</th>
<th>Percentage Vaccinated</th>
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<tbody>
<tr>
<td>2004</td>
<td>45.0%</td>
</tr>
<tr>
<td>2005</td>
<td>35.7%</td>
</tr>
<tr>
<td>2006</td>
<td>43.2%</td>
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<tr>
<td>2007</td>
<td>46.0%</td>
</tr>
<tr>
<td>2008</td>
<td>49.0%</td>
</tr>
<tr>
<td>2009 (H1N1)</td>
<td>61.9%</td>
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</table>

You are a hospital administrator at Florida Lake University Hospital and the Department of Public Health has attributed an outbreak of influenza to your workforce.

What would you do to prepare for the next influenza season?
STRATEGIES TO IMPROVE HCW VACCINATION

Educational and promotional campaigns: Intended to increase HCW knowledge about the vaccination and respond to concerns

Increased immunization access: Offer of the vaccination free of charge in the workplace at convenient times and locations

Declination statements: Form signed to indicate receipt/refusal of vaccination, informs HCWs of the rationale for vaccination

Combination programs: Hybrid approach

Reporting and tracking of HCW vaccination rates: Record facility HCW vaccination rates and publically report rates
You are the HCW union representative at FLU Hospital, what do you expect hospital administration to do?
Barriers to influenza vaccination:

- Concerns regarding safety, fear of adverse side effects
- Belief that the vaccine can cause influenza
- Belief that they are not at risk for contracting influenza
- Belief that influenza is not a serious disease
- Time and location of the vaccine is unsuitable
- Concerns related to vaccine effectiveness
- Fear or dislike of needles
- Employer apathy
- Viewed as a personal choice issue

HCW INFLUENZA VACCINATION

Why HCWs choose to be vaccinated:

- Desire for self-protection
- Desire to protect patients
- Desire to protect family
- Previous receipt of vaccine
- Perceived effectiveness
- Desire to avoid missing work
- Peer recommendation
- Physician recommendation

- Strong worksite recommendation
- Previously contracted influenza
- Belief that receiving the vaccine is a professional responsibility
- Access to vaccination/coverage
- Vaccinations provided free of charge
- Belief that the benefits of vaccination outweigh the risk of side effects

MANDATORY PROGRAMS

- 2004: Virginia Mason Hospital, Seattle, WA = 1\textsuperscript{st} facility to implement HCW influenza vaccination as a condition of employment

- Over 100 facilities across the U.S. have implemented similar policies

- These facilities have achieved levels of HCW influenza vaccination up to 99.9%

EMPLOYEE VACCINATION MANDATES-
REACTIONS

CHOP healthcare workers allege unfair firings

Nine employees at the Children's Hospital of Philadelphia were fired Dec. 4 allegedly for refusing to be vaccinated against influenza.

CHOP officials issued a statement the day the workers were fired, citing high rates of influenza among hospitalized children and children's weaker immune systems as the reason for CHOP's strict standards, which prompted the firings.

"Of 3,400 healthcare workers in patient buildings at CHOP, nine healthcare workers made the choice to not be vaccinated," CHOP officials wrote. "We are saddened they came to the decision to leave CHOP. We offered opportunity to apply for medical and religious exemptions but did not offer exemptions based on personally held beliefs."

In previous years, CHOP had made seasonal influenza vaccinations available but not a condition of employment. According to the statement, last year 500-600 employees refused seasonal influenza vaccination.

You are the FLU Hospital union representative, how do you advise your members?
STATE LAWS ADDRESSING HCW INFLUENZA VACCINATION

Alabama, Arkansas, California, D.C., Illinois, Kentucky, Maine, Maryland, Massachusetts, N. Hampshire, N. York, N. Carolina, Oklahoma, Pennsylvania, Rhode Island, S. Carolina, Tennessee, Texas, Utah, Virginia

SOURCE: GWU/SPHHS,
Developing a Model State Law
Summer 2011
Supreme Court has addressed:

- Deprivation of personal rights without appropriate legal process

- Limiting freedom of religion

- Rights of a competent adult to refuse medical treatment

- Freedom to enter into private employment contracts

1. It is impossible to predict with absolute certainty how a court will decide any case.

2. However, courts must rely on previous relevant decisions.

3. Health care workers have the same rights as other individuals.

4. In the final analysis, courts will prioritize the rights of the community as a whole when considering the case of mandatory health worker vaccination.
You are a patient who is deciding whether or not to have a procedure at FLU Hospital during the influenza season, what are your expectations?