Universal Flu Immunization Programs for Health Care Personnel
# Table of Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>1</td>
</tr>
<tr>
<td>Overview of Materials Included in the Guidebook</td>
<td>2</td>
</tr>
<tr>
<td>National Policy Direction</td>
<td>5</td>
</tr>
<tr>
<td>Commitment Form</td>
<td>8</td>
</tr>
<tr>
<td>Model Policy and Forms</td>
<td>14</td>
</tr>
<tr>
<td>Implementation Timeline &amp; Tips</td>
<td>24</td>
</tr>
<tr>
<td>Employee Education and Communication</td>
<td>35</td>
</tr>
<tr>
<td>Promising Practices from Pennsylvania Hospitals</td>
<td>39</td>
</tr>
<tr>
<td>Additional Resources</td>
<td>77</td>
</tr>
<tr>
<td>Acknowledgements</td>
<td>78</td>
</tr>
</tbody>
</table>
Introduction

Pennsylvania hospitals and health systems have demonstrated consistent leadership in preventing health care-associated infections. Through the implementation of evidence-based best practices and participation in a variety of national, state, and regional improvement initiatives, Pennsylvania hospitals and health systems have dramatically reduced the occurrence of health care-associated infections and greatly enhanced the provision of safe quality care to patients. Each year, influenza results in an estimated 226,000 hospital admissions and 36,000 deaths. Evidence has emerged over the past few years that clearly indicate that health care personnel can unintentionally expose patients to seasonal influenza when health care personnel are not immunized. Exposure to persons infected with the influenza virus can be dangerous to vulnerable patients. Reducing influenza transmission from health care personnel to patients has become a top priority both nationally and in Pennsylvania.

Despite longstanding recommendations by a number of national organizations, the response to voluntary immunization programs has not increased health care personnel influenza immunization rates to acceptable levels. Institutions that have implemented a mandatory health care personnel influenza vaccination policy have radically improved health care personnel influenza immunization rates at or near 100 percent.

Therefore, to protect the lives and welfare of hospital patients and employees, improve quality, and reduce health care costs, The Hospital & Healthsystem Association of Pennsylvania (HAP) encourages all members to implement an evidence-based universal vaccination initiative, working toward vaccination becoming a condition of employment by 2013, as a part of their comprehensive approach to prevent all health care-associated infections.

Hospitals should complete the online commitment form stating that they will implement such an initiative or acknowledge that they have such an initiative already in place.

HAP recognizes that Pennsylvania hospitals and health systems are committed to patient safety. By increasing health care personnel vaccination rates at hospitals across the state, Pennsylvania’s hospital community will play a vital role in protecting the health and well-being of our patients, families, and communities we serve.

Vaccination of health care personnel against influenza not only protects patients and their families, but also protects hospitals’ valuable workforce against illness. HAP encourages all hospitals to work toward influenza vaccination becoming a condition of employment by 2013.
Payment System (IPPS) rules will be expected to report health care personnel influenza vaccination rates beginning in January 2013 as part of the federal government’s hospital inpatient quality reporting program, and it is likely that shortly thereafter, this measure would be incorporated into the Centers for Medicare & Medicaid Services (CMS) value-based purchasing incentive program for IPPS hospitals. Pennsylvania hospitals and health systems have demonstrated consistent leadership in preventing health care-associated infections. The implementation of a universal influenza health care personnel vaccination program should be considered an essential element in a comprehensive approach to prevent all health care-associated infections.

Commitment Form

Despite well-documented evidence of the importance and benefits of influenza immunization of health care workers, seasonal influenza vaccination rates among this group remains below 60 percent, far below the Healthy People 2020 target of 90 percent.

The Hospital & Healthsystem Association of Pennsylvania, Pennsylvania Department of Health, Pennsylvania Immunization Coalition, Center for Vaccine Ethics and Policy at the University of Pennsylvania, and the Pennsylvania Patient Safety Authority have joined together to encourage influenza vaccination among health care personnel, specifically asking health care organizations to commit to implementing an evidence-based universal vaccination initiative, working toward vaccination becoming a condition of employment by 2013.

Make the commitment and join the campaign by completing the online commitment form. A copy of the form is included in this section for your information.

Model Policies and Other Forms

This section of the guidebook includes the following:

- **Policy & Position Statements**—This section provides links to other organizations’ policies and position statements on the issue of health care personnel influenza immunization.

- **Model Policy**—The model policy was created using several sample policies as well as actual policies developed by several hospitals and health systems in
Pennsylvania. Hospitals will need to modify the policy to fit their unique circumstances.

- **Model Influenza Vaccination Acknowledgement and Exemption Form Request**—The model exemption form included in this guidebook contains three parts. The first part contains information about the health care organization’s universal influenza immunization policy, the requirements for exemption requests, and what the expectations might be of the employee if the exemption is granted as a reasonable accommodation. The second part provides important facts about influenza and influenza vaccination. The third part requires the employee to ask for the exemption after reading the facts and to sign the acknowledgement and exemption request form.

- **Religious Exemption from Influenza Vaccination Form**—This is a form that can be completed by clergy and returned to the health care organization for review of documented religious exemption requests. Organizations are not required to use this form or may elect to modify the form and its content.

- **Medical Exemption from Influenza Vaccination Form**—This is a form that can be completed by a qualified medical practitioner and returned to the health care organization. Organizations are not required to use this form or may elect to modify the form and its content.

- **Declination Form**—Some organizations may need to work with unionized employees and unions to develop and implement a universal influenza health care personnel vaccination policy as a condition of employment. Hospitals that cannot immediately implement universal influenza health care personnel vaccination policy due to contractual issues may elect to use a declination form as a means of having persons affirmatively decline vaccination.

### Implementation Timeline and Tips

This section of the guidebook presents a timeline that health care organizations can use to guide the development and implementation of a universal health care personnel vaccination policy in ample time for the 2012–2013 influenza season. Organizations that have not made a commitment to adopt a universal health care personnel vaccination policy are strongly encouraged to take that step for the 2012–2013 flu season and to exhaust all voluntary efforts in the 2011–2012 flu season.

### Employee Education and Communication

This section of the guidebook includes a number of tools that are recommended for use in educating and communicating important information to employees about influenza vaccination, including communication related to the implementation of a universal health care personnel vaccination policy.

- Employee Education Slide Deck
- Health Care Personnel Letter
- Newsletter Article
- Press Release
- Print Materials

### Promising Practices from Pennsylvania Hospitals

A number of hospitals in Pennsylvania already have implemented mandatory immunization programs. Several of those hospitals have agreed to share their most promising practices—their experiences, best practices, and sample forms—to help the entire Pennsylvania hospital community move toward mandatory influenza immunization for health care personnel.

This section contains information on common organizational elements, key strategies, contact information, and sample forms.

### Additional Resources

This section contains links to additional resources from other organizations.
National Policy Direction

The Centers for Disease Control and Prevention (CDC) and numerous other professional societies and public health agencies have outlined strategies to improve health care personnel influenza vaccination rates. These have included educational programs that emphasize the importance of health care personnel vaccination for staff and patients, organized campaigns that promote and make vaccine readily available, and vaccination of senior medical staff or opinion leaders as role models. Despite the use of these and other enhanced methods to increase vaccination rates, little progress has been made in improving health care personnel influenza immunization rates. Surveys conducted between 1989 and 2002 demonstrated that influenza vaccination rates among health care personnel only improved from 10 percent in 1989 to 38 percent in 2002, without any significant change between 1997 and 2002. Despite long-standing recommendations by Association for Professionals in Infection Control and Epidemiology, Inc. (APIC), CDC, and other national health care organizations, the response to voluntary vaccination has not risen significantly over the past decade. Even among health care organizations with aggressive voluntary campaigns, 30-50 percent of health care personnel remain unvaccinated.

The CDC also has recommended that institutions give consideration to the use of signed declination statements for those refusing vaccines. Signed declination policies have been utilized in multiple settings with variable levels of success. A survey that reported responses from 45 organizations with declination policies showed that use of declination policies was associated with only a mean 11.6 percent increase in health care personnel influenza vaccination rates. APIC recommends that the use of declination information should be utilized by facilities to develop improvement strategies for subsequent influenza vaccination seasons.

In 2006, The Joint Commission announced a new infection control standard requiring accredited hospitals, critical access hospitals, and long-term care facilities to offer influenza vaccinations to health care workers, including licensed independent practitioners. The Joint Commission developed the standard in response to recommendations from the CDC which made the reduction of influenza transmission from health care professionals to patients a top priority in the United States.

The standard requires The Joint Commission-accredited health care facilities to implement the following:

- Establish an annual influenza vaccination program that includes, at a minimum, staff and licensed independent practitioners.
- Provide access to influenza vaccinations on site.
- Educate staff and licensed independent practitioners about influenza vaccination, non-vaccine control measures (such as hand hygiene, sneeze and cough etiquette, and use of surgical masks), and the diagnosis, transmission, and potential impact of influenza.
- Annually monitor vaccination rates and reasons for nonparticipation in the organization’s immunization program.
- Implement enhancements to the program to increase participation.
Most recently, The Joint Commission has proposed revisions and additions to its standards pertaining to influenza vaccination for staff and licensed independent practitioners to include the following:

- The hospital establishes an annual influenza vaccination program that is offered to licensed independent practitioners and staff.
- The hospital educates licensed independent practitioners and staff about, at a minimum, the influenza vaccine; non-vaccine control and prevention measures; and the diagnosis, transmission, and impact of influenza.
- The hospital provides influenza vaccination at sites accessible to licensed independent practitioners and staff.
- The hospital includes in its infection control plan the goal of improving influenza vaccination rates.
- The hospital sets incremental influenza vaccination goals, consistent with achieving the 90 percent rate for 2002 (See HHS Action Plan to Prevent Healthcare-Associated Infections).
- The hospital develops a written description of the methodology used to determine influenza vaccination rates. All hospital staff and licensed independent practitioners are to be included in the methodology for determining the influenza vaccination rates.
- The hospital evaluates the reasons given by staff and licensed independent practitioners for declining the influenza vaccination at regular intervals as defined by the hospital, but at least annually.
- The hospital improves its vaccination rates according to its established goals and at regular intervals as defined by the hospital, but at least annually.

Professional societies, including APIC, Society for Healthcare Epidemiology of America (SHEA), the Infectious Diseases Society of America, and the American College of Physicians have recommended that health care personnel influenza vaccination be made mandatory. They point out that even with interventions that promote and provide free and accessible vaccine, health care organizations regularly only achieve 40-60 percent vaccination rates. The American Hospital Association’s Board of Trustees recently approved a policy supporting mandatory patient safety policies that require either influenza vaccination or wearing a mask in the presence of patients across all health care settings during flu season. The Centers for Medicare & Medicaid Services also will require hospitals to report health care personnel vaccination rates as part of the inpatient quality reporting program beginning in January 2013, and as soon as possible thereafter, the measure may be included as one of the value-based purchasing program measures.

Other institutions have taken a lead in patient safety by implementing mandatory health care personnel influenza vaccination policies and achieved near 100 percent immunization rates. Virginia Mason Medical Center in Seattle, Washington, instituted a mandatory influenza vaccination program for all of its approximate 5,000 employees in 2005. Those that refused vaccination due to medical or religious reasons were required to wear a mask for the duration of the flu season while working. In the year of implementation, a 98 percent immunization rate was achieved, up from 29.5 percent from the year before. In 2006 and 2007, the rates were 98.5 and 99 percent respectively. In a recent study released by the CDC, an estimated 71 percent of hospital workers reported being vaccinated against the flu in the 2010–2011 flu season. The average influenza immunization rate was 63.5 percent across all health care settings with the highest rates of immunization reported by physicians and hospital workers 60 years of age and older. However, self-reported vaccination coverage among persons in health care organizations that required influenza vaccination was 98.1 percent compared to 58.3 percent among those not subject to such a requirement. Pennsylvania health care organizations that have implemented universal health care personnel influenza immunization programs have seen similar results reaching near 100 percent immunization rates.

It has been proposed that a public health intervention should be made mandatory when it fulfills three criteria: (1) there is clear medical value of the intervention to the individual; (2) the public health benefit of the intervention has been made clear; and (3) when a mandate is the only way to consistently obtain benefit. Using these criteria, mandated influenza vaccination for health care personnel appears warranted.

Even opponents of mandatory vaccination agree that mandatory immunization is justifiable if comprehensive voluntary immunizations are unsuccessful, which appears
to be the case with voluntary health care personnel immunization programs. Furthermore, health care personnel are already subject to other immunization mandates, including measles, mumps, rubella, varicella, hepatitis B, and tuberculosis testing. For these reasons, there have been significant increases in regulatory and legislative activity across the country to require health care personnel influenza vaccination as a condition of employment.

Vaccination remains the single most effective prevention measure available against influenza, and can prevent many illnesses, deaths, and losses in productivity. Since most health care personnel provide care to, or are in frequent contact with, patients at high risk for complications of influenza, health care personnel are a high priority for expanding vaccine use. Achieving and sustaining high vaccination coverage among health care personnel will protect staff and their patients and reduce disease burden and health care costs.

Pennsylvania hospitals and health systems are strongly encouraged to take the necessary steps to implement a universal influenza health care personnel vaccination program for the 2012–2013 flu season if such a program has not already been implemented or plans for such a program for this upcoming flu season are not already underway. Pennsylvania hospitals and health systems have demonstrated consistent leadership in preventing health care-associated infections. The implementation of a universal influenza health care personnel vaccination program should be considered an essential element in a comprehensive approach to prevent all health care-associated infections.
Commitment Form

Despite well-documented evidence of the importance and benefits of influenza immunization of health care workers, seasonal influenza vaccination rates among this group remains below 60 percent, far below the Healthy People 2020 target of 90 percent.

The Hospital & Healthsystem Association of Pennsylvania, Pennsylvania Department of Health, Pennsylvania Immunization Coalition, Center for Vaccine Ethics and Policy at the University of Pennsylvania, and the Pennsylvania Patient Safety Authority have joined together to encourage influenza vaccination among health care personnel, specifically asking health care organizations to commit to implementing an evidence-based universal vaccination initiative, working toward vaccination becoming a condition of employment by 2013.

Make the commitment and join the campaign by completing the online commitment form. A copy of the form is included in this section for your information.

For additional information on the initiative, contact HAP’s Mary Marshall or Sharon Muscatell. For questions about this survey, contact HAP’s Jennifer Collins.
Despite well-documented evidence of the importance and benefits of influenza immunization of health care workers, seasonal influenza vaccination rates among this group remains below 60 percent, far below the Healthy People 2020 target of 90 percent.

The Hospital & Healthsystem Association of Pennsylvania, Pennsylvania Department of Health, Pennsylvania Immunization Coalition, Center for Vaccine Ethics and Policy at the University of Pennsylvania, and the Pennsylvania Patient Safety Authority have joined together to encourage influenza vaccination among health care personnel, specifically asking health care organizations to commit to implementing an evidence-based universal vaccination initiative, working toward vaccination becoming a condition of employment by 2013.

Make the commitment and join the campaign by completing this document.

For additional information on the initiative, contact HAP’s Mary Marshall (mmarshall@haponline.org) or Sharon Muscatell (smuscatell@haponline.org). For questions about this survey, contact HAP’s Jennifer Collins (jcollins@haponline.org).
Pennsylvania Health Care Personnel Influenza Immunization Commitment Form

Contact Information

*1. Contact Information*

Your First Name: 
Your Last Name: 
Your Job Title: 
Your Phone Number: 
Your Email Address: 
Please Confirm Email Address:

*2. Organization Name (that is making this commitment):*


*3. Organization Address*

Street 1
Street 2
City
State
Zip Code

*4. Organization Type*

☐ Acute Care Hospital (general or specialty)
☐ Long-Term Care Hospital
☐ Skilled Nursing Facility
☐ Rehabilitation Hospital
☐ Physician Office
☐ Urgent Care Center
☐ Federally-Qualified Health Center
☐ Home Health Care Agency
☐ Hospice
☐ Emergency Medical Services

Other (please specify):


Pennsylvania Health Care Personnel Influenza Immunization Commitment Form

Commitment Form

For the purposes of this campaign, the term health care personnel is broadly defined to include employed and non-employed persons in health care organizations. These include persons that have direct contact with patients; others that do not have direct contact with patients but who have jobs that put them in close contact with patients or the patient environment; and those that have no contact with patients or the environment in which patients are cared for but who have contact with health care personnel that do. Generally, this would include employees, residents, students, employed and private physicians and other advanced practice professionals, volunteers, and contracted personnel working in a full range of health care organization settings, including acute care hospitals (general or specialty), long-term care hospitals, skilled nursing facilities, rehabilitation hospitals, physician offices, urgent care centers, federally qualified health centers, home health care agencies, hospice, and emergency medical services.

By clicking “YES” in question #5, you are committing the organization listed to implement an evidence-based universal health care personnel influenza vaccination program that would be a condition of employment by 2013 or are acknowledging that you already have such a program in place.

You also are allowing The Hospital & Healthsystem Association of Pennsylvania, the Pennsylvania Department of Health, the Pennsylvania Immunization Coalition, the Center for Vaccine Ethics and Policy at the University of Pennsylvania, and the Pennsylvania Patient Safety Authority to name the organization listed as participating in this initiative in its print and electronic information.

PLEASE NOTE: Your commitment will NOT be complete unless you answer question #5.

**5. We pledge to provide a safer environment for health care personnel and patients by implementing an evidence-based universal health care personnel influenza vaccination program. Annual influenza vaccination would be required as a condition to practice and work in our organization effective with the 2012-2013 influenza season.**

- Yes. We commit to implement a universal health care personnel influenza vaccination program.
- Yes. We have already implemented a universal health care personnel influenza vaccination program.
6. If you have already implemented a universal health care personnel influenza vaccination program, please list the date of implementation.

7. Please provide baseline health care personnel influenza immunization rates from the 2010-2011 flu season. All responses will remain confidential. Facility-specific information will not be shared. Only aggregate information will be shared.

Enter the number of health care personnel that received influenza vaccination during the 2010-2011 flu season:

Enter the total number of health care personnel eligible for the influenza vaccination during the 2010-2011 flu season:

Percent vaccination rate:
Pennsylvania Health Care Personnel Influenza Immunization Commitment Form

Additional Information

Organizations that achieve 90 percent or greater health care personnel influenza vaccination rate will be recognized by the Pennsylvania Department of Health, will receive a certificate of excellence, and be inducted into the Pennsylvania health care personnel influenza vaccination honor roll.

If your organization achieved a 90 percent or greater vaccination rate during the 2010-2011 influenza season, OR if at the end of the 2011-2012 flu season, your organization achieves a 90 percent or greater health care personnel influenza vaccination rate, contact Owen Simwale at the Pennsylvania Department of Health at owsimwale@state.pa.us.

NOTE: The Pennsylvania Department of Health has not published a strict formula to calculate organizations' health care worker influenza immunization rates. The Pennsylvania Department of Health expects organizations with 90 percent or greater influenza vaccination rates to demonstrate that they have captured a broad representation of eligible individuals in their vaccination program. As information only, the formula that the Department of Health recently included in their regional training program brochure was:

Percent Vaccine Coverage =

Number of employees with verifiable flu vaccination (numerator)

__________________________________________________________________________

Total number of paid, unpaid, and part-time employees (denominator)

Thank you for making the commitment!

When you click "DONE," you will be redirected to the campaign website at http://pahcwfluvax.org/.
Model Policies and Other Forms

This section of the guidebook includes the following:

- **Policy & Position Statements**—The following are links to policy documents from organizations supporting universal influenza health care personnel vaccination programs:
  - American Hospital Association
  - Association of Professionals in Infection Control
  - American Academy of Pediatrics
  - Infectious Disease Society of America
  - National Patient Safety Foundation
  - Society for Healthcare Epidemiology of America

- **Model Policy**—The model policy was created using several sample policies as well as actual policies developed by several hospitals and health systems in Pennsylvania. Hospitals will need to modify the policy to fit their unique circumstances. Some hospitals may elect to have a separate administrative policy or may elect to incorporate the policy into an existing fitness for duty or infection prevention and control policy. Depending on the decisions made by the organization, other health care organization policies may need to be revised. The model policy captures some considerations that health care organizations need to make when crafting their own policy.

- **Model Influenza Vaccination Acknowledgement and Exemption Form Request**—The model exemption form included in this guidebook contains three parts. The first part contains information about the health care organization’s universal influenza immunization policy, the requirements for exemption requests, and what the expectations might be of the employee if the exemption is granted as a reasonable accommodation. The second part provides important facts about influenza and influenza vaccination. The third part requires the employee to ask for the exemption after reading the facts and to sign the acknowledgement and exemption request form. This form should be completed by the employee and turned in with the required exemption documentation required by the health care facility.

Organizations may opt to use the entire form, use pieces of the form, and/or incorporate an exemption request with one of the other two forms below:

- **Religious Exemption from Influenza Vaccination Form**—This is a form that can be completed by clergy and returned to the health care organization for review of documented religious exemption requests. Organizations are not required to use this form or may elect to modify the form and its content. Alternatively, organizations may require a signed letter from clergy rather than using this form. This form was adapted from other forms developed by Pennsylvania hospitals and health systems.

- **Medical Exemption from Influenza Vaccination Form**—This is a form that can be completed by a qualified medical practitioner and returned to the health care organization. Organizations are not required to use this form or may elect to modify the form and its content. Alternatively, organizations may require some other documentation other than this form from medical practitioners. This form was adapted from other forms developed by Pennsylvania hospitals and health systems.
hospitals and health systems.

- **Declination Form**—Some organizations may need to work with unionized employees and unions to develop and implement a universal influenza health care personnel vaccination policy as a condition of employment. Hospitals that cannot immediately implement a universal influenza health care personnel vaccination policy due to contractual issues may elect to use a declination form as a means of having persons affirmatively decline vaccination. The form can be used to track who declined vaccination and the reasons that the vaccine was declined. This information can be used to develop strategies to counter reasons why employees indicate that they do not wish to be vaccinated.
Model Health Care Organization Policy

Health Care Organization Policy on Influenza Vaccination for Health Care Personnel

Policy Statement:
It is the policy of the [NAME OF ORGANIZATION] that all individuals working in the [NAME OF ORGANIZATION] are immunized against influenza on an annual basis. Influenza vaccination is a requirement of working at [NAME OF ORGANIZATION]. Individuals working at [NAME OF ORGANIZATION] include employees, residents, students, members of the medical staff, volunteers, and contracted personnel. [HEALTH CARE ORGANIZATIONS WILL WANT TO PRECISELY DEFINE WHO IS AFFECTED BY THIS POLICY. CONSIDERATION NEEDS TO BE GIVEN TO PERSONS WHO HAVE DIRECT CONTACT WITH PATIENTS; OTHERS THAT DO NOT HAVE DIRECT CONTACT WITH PATIENTS BUT WHO HAVE JOBS THAT PUT THEM IN CLOSE CONTACT WITH PATIENTS OR THE PATIENT ENVIRONMENT; AND THOSE THAT HAVE NO CONTACT WITH PATIENTS OR THE ENVIRONMENT IN WHICH PATIENTS ARE CARED FOR, BUT WHO HAVE CONTACT WITH HEALTH CARE PERSONNEL THAT DO]

Purpose:
The purpose of this policy is to protect the health and safety of patients, employees, patient and employee family members, and the community as a whole from influenza infection through annual influenza vaccination.

Procedure:

Annual Influenza Immunization

➤ All health care personnel identified in this policy are required to be immunized against influenza each year unless a specific exemption is requested and approved by [NAME OF ORGANIZATION]. [NAME OF ORGANIZATION] will provide influenza vaccinations free of charge to all [NAME OF ORGANIZATION] employees, students, volunteers, members of the medical staff, members of the specified health professional staff, and contracted clinical personnel. [HEALTH CARE ORGANIZATIONS WILL WANT TO DETERMINE WHICH HEALTH CARE PERSONNEL THEY WILL VACCINATE FOR FREE OR CONVERSELY WILL REQUIRE PROOF OF VACCINATION IN ORDER TO WORK AT THE FACILITY]

➤ If health care personnel obtain influenza vaccination from their physician, another health care facility, or other vaccination service available in the community, they must provide proof of immunization to [NAME OF ORGANIZATION] on an annual basis. [HEALTH CARE ORGANIZATIONS WILL WANT TO DETERMINE WHAT IS ACCEPTABLE AS PROOF OF INFLUENZA VACCINATION AND ALSO DETERMINE WHERE THE PROOF OF IMMUNIZATION NEEDS TO BE DELIVERED. IN SOME CASES, IT MAY BE EMPLOYEE HEALTH SERVICES OR IT MAY BE OTHER DESIGNATED PERSONS FOR SPECIFIC TYPES OF HEALTH CARE PERSONNEL, SUCH AS A RESIDENCY DIRECTOR OR THE DIRECTOR OF VOLUNTEER SERVICES]

Exemptions:

➤ [NAME OF ORGANIZATION] will grant exemption to annual influenza vaccination for medical reasons or religious beliefs.

Medical Exemption

➤ An individual requesting medical exemption because of medical contraindications must complete an Influenza Vaccination Acknowledgement and Exemption Form Request and attach documentation from his/her private physician who attests to the medical contraindication. [HEALTH CARE ORGANIZATIONS WILL WANT TO INCLUDE THE PROCESS THEY WILL USE FOR EVALUATING REQUESTS FOR MEDICAL EXEMPTIONS. SOME ORGANIZATIONS PROCESS THESE THROUGH THEIR EMPLOYEE HEALTH SERVICES; OTHERS USE A MEDICAL EVALUATION COMMITTEE. ORGANIZATIONS MAY ELECT TO USE A STANDARDIZED FORM THAT EMPLOYEES NEED TO HAVE THEIR PHYSICIAN COMPLETE OR MAY ELECT TO IDENTIFY WHAT DOCUMENTATION WOULD BE ACCEPTABLE.]
Standard criteria for medical exemption will be established based on recommendations from the Centers for Disease Control and Prevention (CDC).

The individual requesting the medical exemption will be notified in writing as to whether his/her request for medical exemption has been granted. If a medical exemption request is denied, the individual will be required to be immunized pursuant to this policy.

If a medical exemption is granted for a temporary medical condition, the individual must resubmit a request for exemption annually.

If the exemption is granted permanently, the individual does not need to submit a request for medical exemption annually unless vaccine technology changes and eliminates issues related to allergies.

**Religious Exemption**

An individual requesting exemption because of religious reasons must complete an Influenza Vaccination Acknowledgement and Exemption Form Request and attach documentation from his/her clergy on letterhead stationary that supports the exemption. [HEALTH CARE ORGANIZATIONS WILL WANT TO IDENTIFY THE PROCESS THEY WILL USE FOR EVALUATING REQUESTS FOR RELIGIOUS EXEMPTIONS. SOME ORGANIZATIONS PROCESS THESE THROUGH HUMAN RESOURCES OR MAY MAKE USE OF OTHER DIVERSITY OR ETHICS COMMITTEES. ORGANIZATIONS MAY ELECT TO USE A STANDARDIZED FORM THAT EMPLOYEES SHOULD HAVE THEIR CLERGY COMPLETE OR MAY ELECT TO IDENTIFY WHAT DOCUMENTATION WOULD BE ACCEPTABLE.]

The individual requesting the religious exemption will be notified in writing as to whether his/her request for religious exemption has been granted. If a religious exemption request is denied, the individual will be required to be immunized pursuant to this policy.

[HEALTH CARE ORGANIZATIONS WILL WANT TO IDENTIFY WHAT DUE PROCESS MAY BE PROVIDED TO INDIVIDUALS WHOSE REQUESTS FOR EXEMPTION ARE DENIED, INCLUDING THE USE OF A THIRD PARTY THAT WAS NOT INVOLVED IN THE ORIGINAL DECISION.]

**Record Keeping:**

[HEALTH CARE ORGANIZATIONS WILL WANT TO IDENTIFY RECORD KEEPING PROCEDURES FOR PROOF OF VACCINATION AS WELL AS FOR EXEMPTIONS. THIS INFORMATION WILL BE IMPORTANT FOR HEALTH CARE ORGANIZATIONS WHEN THEY DETERMINE THEIR INFLUENZA VACCINATION RATES AS WELL AS IF CONFLICTS ARISE WHEN THE HOSPITAL DENIES EXEMPTION REQUESTS.]

**Corrective Action Procedures:**

All health care personnel identified in this policy are required to receive the influenza vaccine. Vaccinations will begin in [IDENTIFY WHEN VACCINATIONS WILL BEGIN IN THE HEALTH CARE ORGANIZATION]. All individuals subject to this policy must be vaccinated or granted an exemption by [IDENTIFY WHEN THIS NEEDS TO OCCUR].

Non-compliance with these requirements will result in corrective action up to and including suspension and termination.

[HEALTH CARE ORGANIZATIONS WILL NEED TO IDENTIFY WHAT CORRECTIVE ACTION STEPS IT WILL TAKE IF AN INDIVIDUAL SUBJECT TO THE POLICY DOES NOT MEET THE ESTABLISHED DEADLINES. SOME ORGANIZATIONS WILL GIVE EMPLOYEES WRITTEN WARNINGS AND ESTABLISH A TIME FRAME UNDER WHICH THE EMPLOYEE MUST BE VACCINATED OR OBTAIN AN EXEMPTION BEFORE FURTHER DISCIPLINARY ACTION, INCLUDING TERMINATION OF EMPLOYMENT. OTHER ORGANIZATIONS HAVE OPTED TO PLACE THE EMPLOYEE ON IMMEDIATE LEAVE FOR A CERTAIN AMOUNT OF TIME. IN MOST CASES, HEALTH CARE ORGANIZATIONS PROVIDE A TWO-WEEK TIME PERIOD FOR EMPLOYEES TO COMPLY WITH THE POLICY BEFORE FURTHER DISCIPLINARY ACTION OR TERMINATION OCCURS. ORGANIZATIONS ALSO NEED TO CONSIDER WHAT ACTIONS THEY WILL PUT IN PLACE FOR OTHER PERSONS THAT ARE SUBJECT TO THE HEALTH CARE ORGANIZATION POLICY BUT ARE NOT EMPLOYEES OF THE HEALTH CARE ORGANIZATION.
ORGANIZATIONS THAT HAVE LABOR AGREEMENTS COVERING SOME OR ALL OF THEIR EMPLOYEES SHOULD CONSIDER WORKING WITH THOSE UNION(S) IN DEVELOPING A UNIVERSAL HEALTH CARE PERSONNEL VACCINATION POLICY AND THE CONSEQUENCES ASSOCIATED WITH BARGAINING UNIT EMPLOYEES’ FAILURE TO COMPLY WITH THE HEALTH CARE ORGANIZATION POLICY.

**Infection Control Procedures:**
- All employees are responsible for monitoring their health status and reporting to work only when they are not in a status that would put others at risk of contracting an infection, whether viral or bacterial.
- All employees are responsible for performing appropriate infection control standards to prevent risk to others and themselves. This includes, but is not limited to, frequent hand washing, masking, covering coughs and sneezing, disinfecting equipment and work stations, and not reporting to work when ill.
- Health care personnel shall [WEAR A SURGICAL MASK OR TAKE ALTERNATIVE STEPS AS DETERMINED BY THE HOSPITAL’S INFECTION CONTROL PROGRAM] when working [HEALTH CARE ORGANIZATION NEED TO DETERMINE THE SCOPE OF THIS POLICY] while unvaccinated for influenza and the influenza virus is active in the community.

[HEALTH CARE ORGANIZATIONS WILL WANT TO IDENTIFY WHAT THEIR POLICIES ARE FOR THOSE THAT ARE GRANTED EXEMPTIONS, INCLUDING THE POSSIBILITY OF REASSIGNMENT IF WORKING IN IDENTIFIED HIGH RISK AREAS. THE POLICY ALSO SHOULD IDENTIFY WHAT EXPECTATIONS MAY EXIST FOR THOSE THAT ARE NOT VACCINATED YET WHEN THE INFLUENZA VIRUS IS ACTIVE IN THE COMMUNITY.]

**Vaccine Shortages:**
- In the event of an influenza vaccine shortage, the situation will be evaluated by [NAME OF ORGANIZATION] relying on the expertise of employee health services, infection prevention and control, human resources, pharmacy, hospital management, and medical leadership. Influenza vaccination will be offered to health care personnel based on job function and risk of exposure to influenza. Priority will be given to health care personnel who provide direct hands-on patient care with prolonged face-to-face contact with patients, care for patients at high risk for complications from influenza and/or have the highest risk of exposure to patients with influenza, as well as to personnel who are at high risk for complications from influenza.

[HEALTH CARE ORGANIZATIONS WILL WANT TO IDENTIFY WHAT PROCESS THEY WILL USE WHEN THERE IS A SHORTAGE OF VACCINE AVAILABLE. ORGANIZATIONS MAY HAVE ALREADY FACED THIS IN PREVIOUS FLU SEASONS OR DURING THE H1N1 EPIDEMIC AND WILL WANT TO REVIEW THE PROCEDURES THAT THEY USED DURING THOSE SITUATIONS.]
Influenza Vaccination Acknowledgement and Exemption Form Request

Part I: Restatement of the Hospital Policy and Procedure

It is the policy of the [NAME OF ORGANIZATION] that all individuals working in the [NAME OF ORGANIZATION] are immunized against influenza on an annual basis. Influenza vaccination is a requirement for working in [NAME OF ORGANIZATION]. Individuals working at [NAME OF ORGANIZATION] include employees, residents, students, members of the medical staff, volunteers, and contracted personnel. [HEALTH CARE ORGANIZATIONS WILL WANT TO PRECISELY DEFINE WHO IS AFFECTED BY THIS POLICY. CONSIDERATION NEEDS TO BE GIVEN TO PERSONS WHO HAVE DIRECT CONTACT WITH PATIENTS; OTHERS THAT DO NOT HAVE DIRECT CONTACT WITH PATIENTS BUT WHO HAVE JOBS THAT PUT THEM IN CLOSE CONTACT WITH PATIENTS OR THE PATIENT ENVIRONMENT; AND THOSE THAT HAVE NO CONTACT WITH PATIENTS OR THE ENVIRONMENT IN WHICH PATIENTS ARE CARED FOR BUT WHO HAVE CONTACT WITH HEALTH CARE PERSONNEL THAT DO]

To consider your request for exemption, [NAME OF ORGANIZATION] asks that you complete and submit the Acknowledgement and Exemption Form Request along with the required documentation no later than [INCLUDE DATE].

Medical Exemption—An individual requesting medical exemption because of medical contraindications must complete the Acknowledgement and Exemption Form Request and attach documentation from his/her private physician that attests to the medical contraindication.

Religious Exemption—An individual requesting exemption because of religious reasons must complete the Acknowledgement and Exemption Form Request and attach documentation from his/her clergy on letterhead stationary that supports the exemption.

Reasonable Accommodation—The reasonable accommodation that [NAME OF ORGANIZATION] is making for health care personnel subject to this policy is that [NAME OF ORGANIZATION] will [REQUIRE MASKS OR DESCRIBE ALTERNATIVE INFECTION PREVENTION MEASURES] for all persons who are not vaccinated for influenza.

Part II: Acknowledgement

I understand that it is the policy of [NAME OF ORGANIZATION] that all individuals working in the [NAME OF ORGANIZATION] are immunized against influenza on an annual basis. Influenza vaccination is a requirement for working in [NAME OF ORGANIZATION]. Individuals working at [NAME OF ORGANIZATION] include employees, residents, students, members of the medical staff, volunteers, and contracted personnel.

I acknowledge that I have read and understand the following facts:

- Influenza is a serious respiratory disease that kills an average of 36,000 persons and hospitalizes more than 200,000 persons in the United States each year.
- Influenza vaccination is recommended for me and all other health care personnel to protect our patients from influenza disease, its complications, and death.
- I am likely to be exposed to the influenza virus through the community, and bring the illness into the hospital setting.
- If I contract influenza, I will shed the virus for 24-48 hours before influenza symptoms appear. My shedding the virus can spread the influenza disease to patients in this facility, to my colleagues, and family.
- If I become infected with influenza, even when my symptoms are mild or non-existent, I can spread severe illness to others.
- I understand that the strains of virus that cause influenza infection change almost every year, which is why a different influenza vaccine is recommended each year.
- I understand that I cannot get influenza from the influenza vaccine.
The consequences of my not being vaccinated could have life-threatening consequences to my health and the health of those with whom I have contact, including any patients, my coworkers, my family, and my community.

I understand that the reasonable accommodation for not being vaccinated is to wear respiratory protection [OR INSERT ALTERNATIVE INFECTION CONTROL GUIDELINES] at all times during the flu season.

**Part III: Exemption Request**

Despite these facts, I am requesting an exemption to the annual influenza immunization. I request an exemption to the influenza immunization requirement based on the following:

- Medical Contraindication to the Influenza Vaccine
  - Indicate Reason: 
  - Temporary Medical Condition
  - Permanent Medical Condition
- Religious Belief or Creed
  - Indicate Reason: 

I understand that my failure to submit acceptable medical documentation or provide a statement that supports my request for exemption for religious reasons may result in my request for an exemption being denied.

I understand that my request for an exemption will be reviewed, and I will be contacted with a decision regarding my exemption request, and that there will be a process for review that I may request if my request for exemption is initially denied.

I understand that in order to maintain a safe work environment for patients and staff, my manager and/or supervisor will be notified of my exemption and that I may be required to wear a surgical mask, may be reassigned if working in a high risk area, or may need to conform with other alternative infection prevention and control measures while at work during the time frame identified by my employer based on influenza activity in our state.

I consent to the release of this request and including any supporting documentation to all such representatives of this hospital, on a need-to-know basis, in order for the representatives to carry out their duties and to act on my request for an exemption. Finally, I understand that my requested exemption may not be granted if it would pose a direct threat or if it would otherwise create an undue hardship on this hospital, its patients, or the public.

Signature ___________________________ Date ___________________

Name (Print) ___________________________

Department ___________________________ Position ___________________________

Shift ___________________________ Manager ___________________________
Request For Religious Exemption From Influenza Vaccination

As a patient safety and health care personnel safety initiative, [NAME OF ORGANIZATION] is requiring annual influenza vaccination for health care personnel. This is similar to other vaccinations that the health care organization requires as a condition of employment. For decades, influenza vaccination has been recommended for health care personnel and has been shown to be effective in protecting patients from influenza illness and complications related to influenza. Increasingly, national professional, health care, and infection prevention organizations are strongly recommending that health care organizations require annual influenza vaccination to protect the health and safety of patients, employees, patient and employee family members, and the community as a whole from influenza infection.

NAME OF INDIVIDUAL REQUESTING RELIGIOUS EXEMPTION: ______________________________________________________

[NAME OF ORGANIZATION] will recognize exemptions to annual influenza vaccination for religious reasons. The individual identified above is requesting to be exempt from influenza vaccination for religious reasons. Please confirm that the employee follows religious beliefs that would qualify for an exemption by completing the information below. If you have any questions, please contact [INCLUDE NAME, TITLE, EMAIL, AND PHONE NUMBER].

Name of Religion: ______________________________________________________________

Name and Address of Religious Organization: ______________________________________________________________

Description of Religious Doctrine or Practice that is Contrary to Influenza Vaccination: ______________________________

I certify that the above individual practices a religion where influenza vaccination is contraindicated according to doctrine or accepted religious practices. I understand that I could be contacted for additional clarification.

Name of Clergy: ______________________________________________________________

Signature of Clergy: ______________________________________________________________

Signature stamps are not acceptable

FOR OFFICE USE ONLY

Received by Human Resources on the following date: ______________________

Reviewed by Human Resources on the following date: ______________________

Disposition:

Approved by: ______________________________________________________________

Disapproved by: ______________________________________________________________

Person requesting the exemption notified on the following date: ______________________
Request For Medical Exemption From Influenza Vaccination

As a patient safety and health care personnel safety initiative, [NAME OF ORGANIZATION] is requiring annual influenza vaccination for health care personnel. This is similar to other vaccinations that the health care organization requires as a condition of employment. For decades, influenza vaccination has been recommended for health care personnel and has been shown to be effective in protecting patients from influenza illness and complications related to influenza. Increasingly, national professional, health care, and infection prevention organizations are strongly recommending that health care organizations require annual influenza vaccination to protect the health and safety of patients, employees, patient and employee family members, and the community as a whole from influenza infection.

Medical exemption from influenza vaccination is allowed for recognized contraindications. Please complete the form below to request medical exemption for your patient. If you have any questions, please contact [INCLUDE NAME, TITLE, EMAIL, AND PHONE NUMBER].

NAME OF PATIENT

My patient should not be vaccinated against influenza for the following reason(s):

☐ Severe allergic reactions to eggs (defined as developing hives, swelling of the lips or tongue or difficulty breathing; does not include gastro-intestinal symptoms) Note: The amount of egg protein in influenza vaccines is extremely small. People who can tolerate eating food prepared with eggs, such as baked goods, can generally tolerate the influenza vaccine.

☐ History of previous severe allergic reaction to the influenza vaccine or component of the vaccine (defined as developing hives, swelling of the lips or tongue, or difficulty breathing; does not include sore arm, local reaction, or subsequent upper respiratory tract infection).

☐ History of Guillan-Barre syndrome within six weeks of receiving a previous vaccine.

☐ Other (please describe in the space below).

☐ Temporary Medical Condition

☐ Permanent Medical Condition

I certify that my patient has the above contraindications and request medical exemption from the influenza vaccine. I understand that I could be contacted for additional clarification.

Name of Medical Practitioner (MD, DO, NP, PA): ________________________________

Signature: ________________________________

Signature stamps are not acceptable

FOR OFFICE USE ONLY

Received by Employee Health Services on the following date: ________________________

Reviewed by Employee Health Services on the following date: ________________________

Disposition:

Approved by: ________________________________

Disapproved by: ________________________________

Person requesting the exemption notified on the following date: ________________________
Declination Of Seasonal Influenza Vaccination Form

My employer, [NAME OF HEALTH CARE ORGANIZATION], has recommended that I receive influenza vaccination to protect myself, my family, other health care personnel, and patients that I care for.

I acknowledge that I have read and understand the following facts:

› Influenza is a serious respiratory disease that kills an average of 36,000 persons and hospitalizes more than 200,000 persons in the United States each year.
› Influenza vaccination is recommended for me and all other health care personnel to protect our patients from influenza disease, its complications, and death.
› I am likely to be exposed to the influenza virus through the community, and bring the illness into the hospital setting.
› If I contract influenza, I will shed the virus for 24-48 hours before influenza symptoms appear. My shedding the virus can spread the influenza disease to patients in this facility, to my colleagues, and family.
› If I become infected with influenza, even when my symptoms are mild or non-existent, I can spread severe illness to others.
› I understand that the strains of virus that cause influenza infection change almost every year, which is why a different influenza vaccine is recommended each year.
› I understand that I cannot get influenza from the influenza vaccine.
› The consequences of my not being vaccinated could have life-threatening consequences to my health and the health of those with whom I have contact, including any patients, my coworkers, my family, and my community.
› I understand that the reasonable accommodation for not being vaccinated is to wear respiratory protection [OR INSERT ALTERNATIVE INFECTION CONTROL GUIDELINES] at all times during the flu season.

Despite these facts, I am choosing to decline influenza vaccination right now for the following reason(s):

________________________________________________________________________________________

________________________________________________________________________________________

________________________________________________________________________________________

I understand that I can change my mind at any time and accept influenza vaccine if vaccine is available. I have read and fully understand the information on this declination form.

Signature: ________________________________

Date: ________________________________

Name (print): ________________________________

Department: ________________________________

Implementation Timeline & Tips

This section of the guidebook presents a timeline for health care organizations to use to achieve consensus on a universal health care personnel vaccination policy that can be implemented in ample time for the 2012-2013 influenza season. There are a number of organizations that have implemented such a policy or plan on implementing such a policy for the upcoming flu season. Organizations that have not made a commitment to adopt a universal health care personnel vaccination policy are strongly encouraged to take that step for the 2012–2013 flu season and to exhaust all voluntary efforts in the 2011–2012 flu season to achieve 90 percent or greater vaccination rates among health care personnel.

The goal of a health care personnel immunization campaign is to administer the influenza vaccine to as many health care personnel as possible, preferably before influenza activity in the community begins. In Pennsylvania, seasonal influenza typically ranges from November to as late as May, most commonly peaking in late February or March. The optimal time to vaccinate health care personnel is October and November, but vaccinations should be made available as long the vaccine is available. Some organizations benefit from a second “wave” of vaccine promotion in December and January, when patients begin to present with the flu, influencing health care personnel who were not yet vaccinated.

January–March

- Identify and convene a multi-disciplinary team to assess last year’s health care personnel influenza immunization rates (including why staff chose not to be immunized), establish goals, and identify barriers and strategies for improving immunization rates. The composition of the team will vary depending on your unique facility; however, some examples of individuals to consider may include: chief executive officer, chief medical officer, chief nursing officer/director of nursing, chief quality officer/quality director, infection prevention department (chief infectious disease physician, infection preventionist), human resources/employee health, compliance, and legal council. Also identify staff champions throughout the organization to lead the campaign, implement strategies to overcome barriers to immunization, and exert peer pressure where needed. The unwavering support from the chief executive officer and board of directors are critical to success.
- Develop or update your formal policy on vaccination of health care personnel and receive appropriate approval.

April–May

- Determine your budget, action plan, and campaign dates. Have pharmacists plan for the appropriate expected volume of vaccine that would be necessary for an expected increase in administration.

Developing a strong team is worth the effort.

While it may take more time in the beginning, establishing a strong multi-disciplinary team can provide broad insights into reaching employees, especially regarding some of the myths surrounding immunizations.
Meet with senior leadership group to review issues and approve implementation. Ask them to take an active role in the encouragement of staff influenza immunization by receiving the vaccine first and encouraging their employees to do the same.

**June–July**

- Develop your theme (involve employees if possible).
- Develop your campaign, including an employee education component. Studies have shown that much of employee resistance to such efforts is due to misinformation.
- Order promotional balloons, buttons, posters, and stickers.

**Include a staff education component.**

Many employees still do not understand that if they do not get a flu vaccination, they are not only putting their health and their family’s health at risk, but they are putting the health of their patients at risk. Common staff misconceptions include:

- I never get the flu, so why should I get immunized?
- I’ll just stay home if I’m sick.
- The vaccine isn’t that effective.
- Why can’t we just make sure all of the patients are immunized?
- I always get a bad reaction to the shot.
- I’m allergic to the vaccine.

**August**

- Finalize logistics of event.
- Finalize staffing plans for campaign. Arrange volunteer and “per diem” nursing and administrative staff for the campaign week, if needed. Review with staff appropriate vaccine administration risk assessment and techniques.
- Consider beginning the employee education portion of the campaign this month, before kicking off vaccination portion of the campaign.
- Include any new orientees in this process early in the influenza season.
- Consider having an employee family vaccination day.

**Ensuring convenient access is a key to success.**

- Consider using rolling influenza vaccine carts that can be taken to all departments during all shifts, including the cafeteria, grand rounds, medical records, etc.
- Offer peer vaccination on patient care units, if possible.
- Hold flu shot clinics at several different dates and times. Consider having a clinic day for family members.
- Coordinate flu shot clinics with other activities like benefit fairs and meetings to make it easy for workers to attend.

**September–October**

- Kick off campaign. Distribute updated policy and campaign communication materials, such as letters, newsletters, posters, flyers, etc.
- Arrange for the CEO and other members of the leadership including the Board to be among the first immunized. Encourage them to wear their “I received my flu shot” stickers (or other identifying item you may consider) to build public support for the campaign. Take a photo of them being immunized and publish it in employee communications.
- Administer vaccinations to employees, monitor daily operations, and pinpoint ways to improve efficiency.
- Report any early influenza activity in community to staff to encourage immunization.
- Plan an event during National Influenza Vaccination Week, December 4–10, 2011. Additional information and resources are available at the CDC’s campaign website.
Make the campaign fun.
- Offer incentives or prize drawings for those who are immunized (e.g. paid vacation days, cafeteria coupons, gift certificates, free parking spaces for a year, etc.) Consider rewarding groups/areas with the highest vaccination rate.
- Consider special incentives for staff who typically resist immunization or for those who are getting the influenza vaccine for the first time.
- Encourage department managers to take a sense of ownership for their rates and create a sense of friendly competition.

Listen to staff early and often, especially during the first year, which is critical.

November
- Monitor vaccination rates, troubleshoot problems, and brainstorm ways to reach the employees who have not been immunized.
- Continue administering influenza immunizations at convenient locations on- and off-site as needed.
- Maintain campaign communication and emphasize the need to continue vaccinating throughout the entire flu season.

Establish a solid tracking system with the ability to produce internal reports weekly for manager action/follow-up, as well as overall campaign tracking.

December
- Maintain campaign communication and educate staff that it’s not too late to receive the influenza vaccine.
- Hold an event during National Influenza Vaccination Week, December 4–10, 2011. Additional information and resources are available at the CDC’s campaign website.
- Continue administering influenza immunizations as long as vaccine supply is available; if necessary, have pharmacy reevaluate the need for additional vaccine as it remains available.
- Closely monitor, track and analyze immunization rates.
- Identify ways to improve participation both during the active influenza season and for the next year’s influenza timeframe.

January/February/March
- Continue campaign communication and educate staff that it’s not too late to receive the influenza vaccine.
- Develop preliminary estimates of vaccine order quantities for the next flu season.
- Order additional vaccine.

April/May/June
- Evaluate your efforts, including:
  - How many employees were immunized?
  - How does that compare with previous years?
  - Was the vaccine supply appropriate for the demand?
  - Try to learn why employees chose not to be immunized.
  - Ask for volunteers for the next influenza season by considering unit challenges.
- If your hospital achieved >90% verifiable flu vaccination of all health care personnel (staff, volunteers, students, volunteers, and vendors with patient contact), contact the Pennsylvania Department of Health to be inducted into the Pennsylvania campaign “Honor Roll.”
- Celebrate your success! Report back to employees about how the campaign went and thank them for their support. Consider having a celebration of success.
- Make recommendation for changes, including updating policy for vaccination to be a condition of employment for 2013.
- Develop a campaign budget for the upcoming flu season.
Employee Education and Communication

This section of the guidebook includes a number of sample tools that are recommended for use in educating and communicating important information to employees about influenza vaccination, including communication related to the implementation of a universal health care personnel vaccination policy.

These tools are samples only and may be modified to best meet your hospital’s needs.

- **Employee Education Slide Deck**—Some hospitals require employees to receive education about influenza and have found that voluntary immunization rates increase with proper education. Some hospitals require education for all employees, while others only require it for those that decline influenza vaccination. This 15-slide presentation was created in Microsoft PowerPoint and provides influenza facts as well as the information about the implementation of a universal health care personnel vaccination policy. Sample slides are included here. You may download the complete PowerPoint file online.

- **Health Care Personnel Letter**—It is important to develop a communication strategy that informs health care personnel about the universal health care personnel vaccination policy. The sample letter, signed by the President/CEO and Chief Medical Officer (or other appropriate leaders) was created in Microsoft Word and announces a hospital’s implementation of a universal health care personnel vaccination policy for employees. The letter should be accompanied by a copy of the updated policy, details about when and where vaccinations will be available, and any other relevant information.

- **Newsletter Article**—Staff education is very important. Many employees still do not understand that if they do not get a flu vaccination, they are not only putting their health and their family’s health at risk, but they are putting the health of their patients at risk. Your employee newsletter is a great vehicle for addressing common misconceptions. This sample newsletter article was created in Microsoft Word and supports organizational efforts by providing information to employees.

- **Press Release**—You may want to make the community aware of your influenza immunizations efforts. This sample press release provides basic information on the effort, positions your hospital as a leader in promoting health and safety, and references that the effort is part of a comprehensive approach to prevent all health care-associated infections.

- **Print Materials**—Organizations may elect to develop their own brochures, fact sheets, articles, stickers, and posters, but there are others that are available from several websites. Samples can be obtained online.
Universal Flu Immunization Programs for Health Care Personnel

This presentation is available online at http://www.haponline.org/downloads/hap/Health_Care_Personnel_Influenza_Vaccination_Presentation_Template_2011_2012.ppt

Health Care Personnel Influenza Vaccination

[Hospital Name]

[Hospital Logo]

Each year, influenza results in an estimated 226,000 hospital admissions and 36,000 deaths.
The Facts:

- The flu is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness, and at times can lead to hospitalizations and death.
- The main way that influenza viruses spread is from person to person in respiratory droplets of coughs and sneezes. It also may be spread when a person touches the droplets on another person or an object and then touches their own mouth or nose (or someone else’s mouth or nose) before washing their hands.

More Facts:

- Most healthy adults can infect others beginning one day before symptoms develop and up to 5-7 days after becoming sick. Children may pass the virus for more than seven days.
- Some people, such as older adults, pregnant women, and very young children, as well as people with certain long-term medical conditions, are at high risk of serious complications from the flu.
More Facts:

- Influenza vaccination is the most effective way to prevent influenza infection among our patients and staff.
- The CDC recommends that all health care personnel receive the vaccine.

What Can I Do?

- Health care personnel have a special role in the fight against influenza.
  - By getting vaccinated, health care personnel can protect their health, their families’ health, and the health of their patients.
  - High rates of vaccination have been linked to improved patient outcomes and reduced absenteeism and influenza among staff.
Influenza Vaccination:

- [Hospital Name] is committed to protecting you, your family, and our patients. It is about our commitment to safety.
- [Hospital Name] recognizes that influenza vaccination is the most effective way to prevent influenza infection among our patients and staff.
- [Hospital Name] will require health care personnel to receive annual influenza immunizations as a condition of employment.

[HOSPITAL NAME] Policy:

- It is the policy of the [HOSPITAL NAME] that all individuals working in the [HOSPITAL NAME] are immunized against influenza on an annual basis. Influenza vaccination is a requirement of working in [HOSPITAL NAME]. Individuals include employees, residents, students, members of the medical staff, volunteers, and contracted personnel. [PRECISELY DEFINE WHO IS AFFECTED BY THIS POLICY].
Exemptions:

- Exemptions may be requested for medical reasons or religious beliefs.
- If an exemption is granted, the individual may be required to wear a surgical mask, may be reassigned if working in a high-risk area, or may need to conform with other alternative infection prevention and control measures while at work during the time frame identified by [HOSPITAL NAME] based on influenza activity in Pennsylvania.

Will I Get Sick from the Vaccine?

- Flu vaccines cannot cause the flu. The viruses in flu vaccines are either killed (the flu shot) or weakened (the nasal spray vaccine). The flu vaccines work by priming your body’s defenses in case you are exposed to an actual flu virus.
- Flu vaccines are safe. Serious problems from the flu vaccine are very rare. The most common side effect that a person is likely to experience is soreness where the injection was given. This is generally mild and usually goes away after a day or two.
Vaccine Options:

- **Flu shot**: A vaccine with killed virus given by needle injection. It is approved for use in people older than six months, including healthy people and people with chronic medical conditions.
- **Nasal spray vaccine**: A vaccine with weakened live viruses. It is approved for use in healthy people 2 to 49 years of age.
- *Please discuss your concerns and questions with our employee health department.*

Who Should *Not* Get a Vaccine?

- People who have documented severe allergy to chicken eggs.
- People who developed Guillain-Barre Syndrome within six weeks of getting influenza vaccine in the past.
- Children less than six months of age.
- People who have moderate to severe illness with a fever (they should wait until they recover to get vaccinated).
- *Please discuss your concerns and questions with our employee health department.*
Other Things You Can Do:

- Influenza vaccination is part of [Hospital Name]’s comprehensive approach to prevent health care-associated infections. Once being vaccinated, remember these basic practices to help protect patients and yourself:
  - Wash your hands.
  - Cover your cough.
  - Stay home if you have influenza-like symptoms (fever or feeling feverish/chills, cough, sore throat, runny or stuffy nose, muscle or body aches, headaches, and fatigue/tiredness).

Standard Precautions:

- It is important to practice strict standard precautions when caring for all patients:
  - Wash or gel hands before and after every patient contact.
  - Wear gloves for all procedures and contact with mucous membranes or bodily secretions.
  - Wear gown when exposure to bodily fluids is likely.
  - Wear a mask whenever performing cough-inducing or aerosol-generating procedures.
Next Steps:

- A memo will be issued [Date] to all employees with a copy of our new policy and additional information about when and where you can receive your vaccine.
- If you have further questions, please contact our employee health department at [Phone Number] or [Email Address].
- Thank you for your support!
Sample Health Care Personnel Letter

[DATE]

Dear [HEALTH CARE PERSONNEL],

Every day you work to help our patients get better. To accomplish this goal, it is critical to keep both patients and our health care personnel safe from health care-acquired infections, including influenza. To that end, we are implementing a new flu immunization policy. Beginning [DATE], all health care personnel at [HOSPITAL NAME] will either be immunized for influenza or will [DESCRIBE ALTERNATIVE MEASURES] when on [HOSPITAL NAME] properties while the virus is active in the community.

In the last few years, many of you have participated in the voluntary vaccination program, but there also were a number who chose not to be immunized. Nationally, 36 percent of health care personnel participate in voluntary immunization programs. This is significantly lower than the national goal of 90 percent. [CONSIDER INCLUDING YOUR OWN VACCINATION RATES AND EFFORTS] Unless a high percent of our health care personnel is vaccinated, we can expect many more cases of influenza among patients and health care workers.

Consider the following:

▶ Each year, influenza results in an estimated 226,000 hospital admissions and 36,000 deaths.
▶ Influenza vaccination is the most effective way to prevent influenza infection.
▶ The CDC recommends that all health care personnel receive the vaccine.
▶ By getting vaccinated, health care personnel can protect their health, their families’ health, and the health of their patients.
▶ As health care providers, it is our responsibility and obligation to protect our patients, visitors, and colleagues—as well as ourselves and our family members—by being immunized against the seasonal influenza virus.
▶ Participation is required. By [DATE], all health care personnel will be required to do one of the following:
  ▶ Receive an influenza vaccination through [DEPARTMENT NAME].
  ▶ Provide proof of immunization if you received a vaccination from your physician, another health care facility, or other vaccination service available in the community.

Exemptions may be requested for medical reasons or religious beliefs. If an exemption is granted, you may be required to wear a surgical mask, be reassigned if working in a high-risk area, or may need to conform to other alternative infection prevention and control measures.

Enclosed is additional information on where and when you can get your vaccination, as well as whom to contact for additional information or questions. Thank you for your attention to this important and pressing issue and your dedication to the safety of our patients.

Sincerely,

[NAME & TITLE OF PRESIDENT/CEO] [NAME & TITLE OF CHIEF MEDICAL OFFICER]
Sample Newsletter Article

[HOSPITAL NAME] Keeps Personnel, Patients Safe From the Flu with Immunization Policy

In order to protect patients and staff, [HOSPITAL NAME] wants all employees to be vaccinated against influenza this year. We are committed to keeping all our employees and patients safe.

Getting the vaccine is the most effective way to protect patients, yourself, and your family from the flu. The vaccine is safe, effective, and does not cause the flu.

Because we are committed to ensuring a safe environment for staff and patients, [HOSPITAL] has adopted a new policy that requires all health care personnel to be immunized for influenza or take other steps to protect patients if they choose not to be vaccinated.

To make getting vaccinated easy, we are [LIST DETAILS ABOUT EVENT(S) HERE].

Flu vaccine is critically important for health care personnel. We know:

- You are being exposed to a very contagious influenza virus every day, both in the hospital and in the community.
- The flu is dangerous. In the United States each year, 36,000 people die of seasonal influenza.
- If you are vaccinated, you and your family will likely be healthier this flu season. Many studies show that immunized health care workers stay well and have decreased work absences. They also are less likely to transmit the virus to their children and families.
- If you are vaccinated, you will help stop the spread of flu. Multiple studies show that many health care providers and health care personnel continue to work despite being ill with influenza, thereby exposing patients. Even if you are only mildly ill, you can still transmit the flu to vulnerable patients with devastating effects.
- If you are vaccinated, you will keep your patients safe. Unvaccinated caregivers put patients in danger. Fewer patients die when cared for by immunized health care workers. The flu is hardest on our most vulnerable patients—infants and children, the elderly, and those with compromised immune systems.

If you are not vaccinated during the time influenza is active in our community, you will be required to [WEAR A MASK OR DESCRIBE OTHER INFECTION CONTROL GUIDELINES HOSPITAL WILL REQUIRE STAFF TO TAKE] in order to protect patients from getting the flu.

[ADD LOGISTICAL INFORMATION SUCH AS “IF YOU HAVE QUESTIONS,” “HERE IS WHEN AND WHERE YOU CAN GET A FLU SHOT,” ETC. ALSO MAY WANT TO INCLUDE FAQS.]
Sample News Release

DATE:

CONTACT:

[HOSPITAL NAME] **Keeps Personnel, Patients Safe From the Flu with Immunization Policy**

Every day [HOSPITAL NAME] employees work to help patients get better. To accomplish this goal, it is critical to keep patients and health care personnel safe from health care-acquired infections, including influenza. To that end, [HOSPITAL NAME] has implemented a new flu immunization policy. Beginning [DATE], all health care personnel at [HOSPITAL NAME] will either be immunized for influenza or will [DESCRIBE ALTERNATIVE MEASURES] when on [HOSPITAL NAME] properties while the virus is active in the community.

[HOSPITAL NAME] has encouraged its employees to receive influenza vaccinations and have provided them at no cost. Even though many employees participated in the initiative, a number chose not to be immunized. Consider the following:

- Each year, influenza results in an estimated 226,000 hospital admissions and 36,000 deaths.
- Influenza vaccination is the most effective way to prevent influenza infection.
- The CDC recommends that all health care personnel receive the vaccine.
- By getting vaccinated, health care personnel can protect their health, their families’ health, and the health of their patients.

“As health care providers, it is our responsibility and obligation to protect our patients, visitors, and colleagues—as well as ourselves and our family members—by being immunized against the seasonal influenza virus,” said [HOSPITAL LEADER’S NAME AND TITLE].

[HOSPITAL NAME] is demonstrating its commitment to keep health care personnel and patients safe from infections with a new influenza vaccination policy.

[HOSPITAL NAME] recently adopted a new policy as part of its comprehensive approach to prevent all health care-associated infections that requires all health care workers to be immunized for influenza or take other steps to protect patients if they choose not to be vaccinated.

To help employees get their vaccinations, [HOSPITAL NAME] is [LIST EVENTS].

To help members of the community receive vaccinations, [HOSPITAL NAME] is [LIST EVENTS].
All Pennsylvania hospitals encourage their health care personnel to receive influenza vaccinations; however, the movement to require vaccination is growing. A number of hospitals in Pennsylvania have already implemented mandatory immunization programs. Several of those hospitals have agreed to share their most promising practices, including their experiences, best practices, and sample forms, to help the entire Pennsylvania hospital community move toward mandatory influenza immunization for health care personnel.

All of the hospitals positioned their programs as patient and employee safety imperatives. In each of the programs, support from senior leadership, physician leaders, and boards of trustees was critical to their success. Many professional champions played key roles; however, chief medical and chief nursing officers, infection control and occupational health specialists, human resource directors, as well as marketing and legal staff, are recognized as integral to all aspects of implementation.

The following are additional themes common among all organizations outlined here, followed by a brief overview of their effort, along with copies of their forms. Additional information is also available on the statewide campaign website.

**Common organizational elements:**
- Establish seasonal flu vaccination as a condition of employment.
- Establish a universal flu immunization program that impacts all employees, volunteers, students, and vendors.
- Establish declinations that integrate medical and religious exemptions by designated, authorized individuals or committees. In one hospital, medical declinations are limited to egg allergy with a referral to an allergist, and personal and religious exemptions are unchallenged, but invoke masking. The exemption process in all hospitals has a very low incidence rate.

**Key strategies:**
- Define and announce target population early.
- Create a robust tracking system, with the ability to generate interim reports for local manager follow-up.
- Develop a plan for interruptions to the vaccine supply.
- Develop a detailed exemption review process.
- Develop policies around verifying external employee vaccination administration.
**Children’s Hospital of Philadelphia (CHOP)**
After averaging seasonal vaccine uptake among its targeted clinician group of about 90 percent with very active campaigns, CHOP decided to expand its target populations beyond clinicians, and instituted a mandated program for the 2009–2010 flu season for all persons who work in buildings where clinical care is delivered, achieving 100 percent uptake across its 9,500 person community.

**Program Contacts:**
Susan Coffin, MD, MPH
Hospital Epidemiologist and Medical Director, Infection & Prevention Control
(215) 590-4492

Mary Cooney, RN
Nurse Manager, Occupational Health
(215) 590-1938
Leadership Communication Update
Week of 9/7/10

2010 Flu Program

Patients and families come through our doors hoping for great outcomes and expecting to be safe. Employees come through our doors hoping to deliver great outcomes and expecting to be safe. It is the role of the leader to ensure both. The 2010 influenza season is upon us, and like last year, we are making vaccination a condition of service for all health care workers and strongly encouraging all other employees to get the vaccine.

2009 was the first year that vaccine was classified as mandatory for health care workers. Employees were overwhelmingly supportive of the decision to protect patients and staff by getting vaccination. In 2010, we will follow the same guidelines as last year:

- This year seasonal flu vaccine will be mandatory for all CHOP employees who work in a patient building or provide care for patients (those employees who are required to have annual PPD testing).

- Beginning Sept. 23, 2010, employees will have eight weeks to obtain the seasonal flu vaccine.

- Employees who obtain flu vaccination outside of CHOP will need to provide verification of such by Nov. 15th.

- Healthcare workers may request an exemption from the vaccination requirement for medical or religious reasons only, and all exemption requests are subject to approval of a team from Occupational Health, Infection Control and Human Resources.

Given the importance of creating the safest environment for patients and staff, I expect that employees will not come to work with flu symptoms that may include fever, cough, body aches, sore throat, and/or diarrhea, despite having received vaccination. Every employee should be free of fever for at least 24 hours before returning to work.

Our role as leaders is maintain the safest environment possible. Please encourage ALL employees to get vaccinated – because EVERYONE has a role in contributing to a safe environment.
Seasonal flu vaccine is once again mandatory for all CHOP employees who work in a patient building, who provide patient care, or whose job requires them to routinely be in a building where patient care is provided.

**Patient Safety is the Driver**
Young children and children with compromised immune systems are at highest risk of serious complications from flu. Those under 6 months cannot be vaccinated, and the mode of protection for them is to vaccinate the people around them. To best protect our patients, proven immunity to many diseases, including measles, mumps, chicken pox, is a required condition of employment. Annual influenza vaccination is in the best interest of our patients and our employees.

**Who is required to get vaccinated?**
All employees who regularly work in a patient care building or who provide patient care. These are the same employees who are required to get annual TB testing (PPDs). ALL employees, in every job function, are strongly encouraged to receive vaccine, and will be offered free vaccine at CHOP – because EVERYONE has a role in contributing to a safe environment.

**How will the program work?**
Beginning Sept. 23, 2010, employees will have 7 weeks to obtain the seasonal flu vaccine. Vaccine will be available at all CHOP locations and on many clinical areas during scheduled flu clinics. All Health Care Workers must show proof of vaccination for seasonal flu if received offsite. A flu administration record or official documentation from physician are acceptable forms of proof and should be submitted to the Occupational Health Department.

**Medical or religious exemptions**
There are very few contraindications to receiving flu vaccine. However, an employee may apply for an exemption if he or she believes a vaccine would cause serious harm (i.e. a serious egg allergy or a documented history of a serious reaction to a previous flu vaccine). Employees will need to take the CHOP Medical Exemption form to their physician for completion. Employees whose religion prohibits vaccinations must have a note from their religious leader and will be asked to provide the tenet within the religion that speaks to the prohibition of obtaining the vaccine and proof that this prohibition is a deeply held religious belief for the individual. All requests will be evaluated by a team from Occupational Health, Infection Prevention and Control and HR.

**Is the H1N1 Vaccine Available?**
This year, the H1N1 strain of the virus is integrated with the seasonal flu vaccine. There is only 1 vaccine.

**What happens if an employee doesn’t get vaccinated and doesn’t have an exemption?**
We encourage you to emphasize the patient safety and employee wellness aspects of the flu campaign as the first approach in leading your staff’s vaccine efforts. However, HCWs who do not receive the vaccine will, at a minimum, be precluded from providing patient care or having access to patients.
To: All CHOP Staff

From: Rob Croner, SVP, Human Resources

RE: 2010 Mandatory Flu Vaccine Program

September 16, 2010

At CHOP, patient safety is our top priority, and the primary driver in maintaining a mandatory flu vaccine program for Health Care Workers. Children under 6 months of age cannot be vaccinated, and the mode of protection for them is to vaccinate the people around them. Young children and children with compromised immune systems are at highest risk of serious complications from the flu. Annual influenza vaccination is in the best interest of our patients and our employees.

Like last year, annual vaccination for influenza is a requirement for all Health Care Workers (“HCW”) at CHOP (HCW are employees who regularly work in a patient care building or who provide patient care and all volunteers, clinical students, rotating residents and physicians). Flu clinics will begin on Thurs, Sept. 23, and are scheduled at most CHOP locations (and listed on the Occupational Health page of the Employee Intranet).

HCWs who do not receive the vaccine by Nov. 18 and who do not have an approved exemption will be removed from work and, if employed, will be placed on a two-week unpaid leave through Dec. 2 (employees may use PPL during this period). During this time, the HCW will have access to additional educational information regarding flu vaccine, and will have the opportunity to be vaccinated at any point during the leave.

HCW employees who do not obtain the flu vaccine by Dec. 2 will be terminated.

Physicians who do not receive the flu vaccine by Nov. 18 will be precluded from providing patient care and will be suspended pursuant to the terms of the Medical Staff Bylaws. A separate communication will be distributed to the physician community providing additional details.

**Medical Exemptions** (deadline November 18, 2010)

There are very few contraindications to receiving the flu vaccine. However, an HCW may apply for a medical exemption if he or she believes a vaccine would cause serious harm (e.g., if he or she has a serious egg allergy or a documented history of a serious reaction to a previous flu vaccine). The HCW must have his or her physician complete the CHOP Medical Exemption form (located on the Occupational Health page of the employee intranet) and the HCW is responsible for returning the completed form to Occupational Health. An HCW who received a medical exemption to the flu vaccine...
**Children’s Hospital of Philadelphia (CHOP)**

requirement last year need not request a new exemption unless he or she was told that the exemption was only for one year.

**Requests for medical exemptions must be submitted to Occupational Health as soon as possible so that Occupational Health can evaluate the request, but no later than the November 18, 2010 flu vaccine deadline.**

**Requests for Religious Exemptions** (deadline October 23, 2010)

An HCW whose religion prohibits vaccinations may also apply for an exemption. This year requests for religious exemptions from the flu vaccine requirement will be reviewed by Timothy Lewis, former Judge for the United States Court of Appeals for the Third Circuit and the United States District Court for the Western District of Pennsylvania, who will make recommendations to CHOP. Judge Lewis will review supporting documentation submitted by the HCW, provide the HCW with an opportunity to discuss the exemption request with him in person or on the phone and perform other appropriate fact finding that he believes is necessary to reach a fair and just result.

An HCW seeking a religious exemption must complete the Flu Screening Form (located on the Occupational Health page of the employee intranet), check # 6 and submit the completed form, along with any supporting documentation, to Occupational Health. In order to provide Judge Lewis with sufficient time to meet with HCWs and evaluate their requests, **religious exemption requests must be received by Occupational Health, along with any supporting documentation, no later than October 23, 2010. Requests for religious exemptions received after October 23, 2010 will not be considered.** Supporting documentation is any documentation that supports the HCW’s belief that religion prohibits him or her from obtaining flu vaccine. Examples of supporting documentation could be a letter from a religious leader or a quote from a religious text along with a letter from the HCW explaining the relevance of the text. Appointments with Judge Lewis will be scheduled after Occupational Health receives the request for exemption.

Questions about medical exemptions should be directed to Mary Cooney, RN, Nurse Manager, Occupational Health (215-590-1938) and questions about religious exemptions should be directed to Alex Jorgensen, Human Resources Director (215-590-5970).

General questions about the flu program can be answered by your manager or by visiting [http://intranet.chop.edu/flu](http://intranet.chop.edu/flu).
At The Children’s Hospital of Philadelphia, our first priority is our patients’ health and safety. Each year, influenza (flu) causes thousands of hospitalizations and deaths throughout the world. At CHOP, we care for some of the most vulnerable children there are. We have an opportunity — and a responsibility — to protect our patients, employees and visitors from this deadly illness.

This year, the Occupational Health Department will once again be giving flu vaccine (the nasal spray or the shot) to our employees, volunteers and physicians. This universal vaccine will allow more employees to stay healthy and working, and it will prevent care providers from passing the flu to their patients. For more information on the flu, visit http://intranet.chop.edu/flu. Check back often — we update the site frequently.

THE FLU

What is the flu?
The flu is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness, and sometimes it can lead to death.

Every year in the United States, on average:
- some 5 percent to 20 percent of the population gets the flu
- more than 200,000 people are hospitalized because of the flu
- about 36,000 people die from the flu

Young children (especially infants and kids with weak immune systems), older adults and people with certain health conditions are at high risk for serious flu complications. But even previously healthy children and adults can die from the flu.

How does the flu spread?
Flu viruses spread when people cough and sneeze. They usually spread from person to person, though sometimes a person becomes infected by touching something with flu virus on it and then touching the nose or mouth.

When is someone with the flu contagious?
Most healthy adults may be able to infect others beginning one day before symptoms develop and as long as five days after becoming ill. That means you can pass the flu on to your patients before you know you are sick, as well as while you are sick.

THE FLU VACCINE

The single best way to prevent the flu is to get a flu vaccination each fall.

What is the flu vaccine?
There are two types of flu vaccines:
- The nasal-spray vaccine (FluMist®) is a vaccine made with live, weakened viruses that do not cause the flu. FluMist is approved for most healthy people 5 years to 49 years of age who are not pregnant. At CHOP, you can elect to receive FluMist up to age 64.
- The flu shot is an inactivated vaccine (containing killed viruses) that is given by injection. The flu shot is approved for use in people older than 6 months.

Scientists update the influenza vaccine to include current viruses every year.

Why is the flu vaccine important at CHOP?
Patient safety is the core driver of our commitment to providing excellent care, and we can’t do that without a healthy workforce. People who contract the flu are able to spread it the day before they are ill — so even if you stay home once you are sick, you may already have infected patients, co-workers and families. Vaccination is the best way to prevent influenza.

continued on other side
**Children’s Hospital of Philadelphia (CHOP)**

We care for young patients who often cannot get vaccinated themselves, so we need to be vaccinated to protect them. To ensure that our patients and staff stay as healthy as possible, it is important to get the flu vaccine.

**Will I need to get two vaccines this year?**

No. Last year the H1N1 virus started affecting people after the seasonal flu vaccine was already in production. So it could not be “added” to the seasonal flu vaccine for 2009. This year, H1N1 is one of the three viruses in the seasonal flu vaccine. If you got H1N1 vaccine last year, you already have some protection against that strain. The 2010 vaccine will boost your immunity to H1N1.

**Could I still get the flu even if I get the flu vaccine?**

Yes, but it’s far less likely. When the “match” between the vaccine and flu strains circulating in the community is close, the vaccine prevents the flu in about 70 percent to 90 percent of healthy people younger than 65 years old. It is vitally important that we achieve high vaccination compliance for our workforce to avoid an outbreak of influenza.

**Is the vaccine safe? What are the risks?**

The viruses in the flu shot are killed (inactivated), so you cannot get the flu from a flu shot. The nasal-spray flu vaccine contains a live, weakened virus. This virus has been weakened so that it cannot replicate (make copies of itself) efficiently and cannot cause disease. The risk of a flu vaccine causing serious harm is extremely small, and almost all people who get the vaccine have no major problems from it. Still, a vaccine, like any medicine, may rarely cause serious problems, such as severe allergic reactions. Mild side effects may include soreness at the site of the shot, low-grade fever or muscle aches. If these occur, they last one to two days.

**Who should not get a flu vaccine?**

Flu vaccines are not recommended if you:

- have ever had a severe allergic reaction to eggs
- have ever had a severe allergic reaction to a flu vaccine
- have a history of Guillain-Barre syndrome (GBS)
- are ill with a fever or moderate to severe illness (In this case, wait to get the vaccine.)

**Why do I have to get the flu vaccine every year?**

Flu viruses change from year to year, so a vaccine made against flu viruses circulating last year may not protect against the newer viruses. That is why scientists update the flu vaccine to include current viruses every year. Also, a vaccine’s ability to protect you declines over time and may be too low to prevent flu after one year.

**Is it safe for pregnant women to get the vaccine?**

Yes. In fact, the flu shot is recommended for pregnant women, because they are at higher risk for serious medical complications from the flu.

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**Did you know?**

- The flu is a major public health threat. Each year, it kills thousands of people and makes countless others seriously ill.
- A healthcare worker infected with the flu can give the deadly virus to vulnerable patients, even if the care provider doesn’t yet have symptoms.
- Previously healthy children and adults can die from the flu.
- The Centers for Disease Control and Prevention recommends vaccinating healthcare workers for the flu.
- Mandatory immunizations increase vaccination rates.
- CHOP, like all healthcare institutions, has an ethical and moral duty to protect vulnerable patients from transmissible diseases.

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The best way to prevent the flu is by getting a flu vaccine each fall.

**Prevent the flu — get vaccinated.**
Carrots and Sticks:

Influenza Vaccination of Healthcare Workers

Susan Coffin
Children’s Hospital of Philadelphia
June, 2010

This presentation is available online at
**Hospital of the University of Pennsylvania (HUP)**

After robust seasonal vaccine campaigns for its health care personnel over several years, HUP adopted a mandated program after extensive consultation across medical, nursing, and administrative leadership. Prior to the mandate, seasonal vaccine uptake among its targeted clinician staff (60%) averaged 54 percent. Post mandate, the uptake increased to 99.3 percent.

**Unique Program Details**

- HUP’s universal flu immunization program also covers University of Pennsylvania faculty, physicians, and clinical staff.
- Stickers are used to verify vaccination status and engender pride in the program.

**Program Contact:**

Amy Behrman, MD  
Director, Occupational Medicine  
(215) 662-3192
Hospital of the University of Pennsylvania (HUP)

University of Pennsylvania Health System

Policy Manual

Subject: PENN MEDICINE INFLUENZA IMMUNIZATION POLICY

Number: 3-19
Page 1 of 3
Effective 9/7/10

POLICY

Requires influenza immunization on an annual basis for all personnel working/volunteering within a Penn Medicine facility.

PURPOSE

The purpose of this policy is to protect patients, employees, family members and the community from influenza infection through annual immunization of all Penn Medicine faculty, staff, students/trainees in clinical setting, clinical research personnel, contracted personnel who work in patient care areas, volunteers and persons with professional staff privileges or credentials.

SCOPE

This policy applies to all Penn Medicine faculty, staff, students/trainees in clinical setting, clinical research personnel, contracted personnel who work in patient care areas, volunteers and persons with professional staff privileges or credentials.

IMPLEMENTATION

HRIS assumes responsibility for distributing periodic compliance reports to update managers on the immunization rates and exemptions for staff who work in their respective areas. Penn Medicine managers and supervisors are responsible for the enforcement of this policy requiring influenza immunization on an annual basis unless exemption has been granted as described below.

PROCEDURES

A. Annual Influenza Immunization:

1. All faculty and staff working in a Penn Medicine facility must be immunized against influenza each year. This includes all personnel as defined under the scope of the policy.

2. Influenza vaccine is available free of charge to all Penn Medicine employees. The vaccination program is coordinated through Occupational Medicine. Dates of the influenza vaccination program will be determined by Occupational Medicine and Healthcare Epidemiology, Infection Prevention and Control on an annual basis.

3. If faculty and staff and personnel covered by this policy are vaccinated through services other than Penn Medicine and Occupational Medicine (i.e. private physician office, public clinics) they must provide proof of immunization to Occupational Medicine. Proof of immunization may include a physician’s note, a receipt, or copy of consent.
B. Infection Control Procedures

1. All personnel will be required to strictly adhere to respiratory hygiene and hand hygiene practices, as well as isolation precautions.

2. Influenza season typically occurs sometime between November and March. Individuals granted an exemption cannot work in high risk areas and will be reassigned to alternate sites. High risk areas include the neonatal intensive care unit, all areas where bone marrow, stem cell and solid organ transplant recipients are located, and other areas as determined by the Director of Healthcare Epidemiology, Infection Prevention and Control. Exact dates for reassignment will be determined annually when influenza is identified in the community where the hospital or organization is located. This will be determined by the Director if the Department of Healthcare Epidemiology, Infection Prevention and Control.

C. Occupational Medicine will maintain a record of influenza immunizations and exemptions via Lawson (HRIS).

D. All faculty and staff and personnel covered by this policy must adhere to the Penn Medicine Influenza Immunization Policy as a condition of employment or access to Penn Medicine facilities. They must be vaccinated or granted an exemption within two months of the start of the influenza vaccination program each year.

E. All faculty and staff and personnel covered by this policy who have not been vaccinated or granted an exemption will not be permitted to work if urgent situation is declared. An urgent situation may be declared by the Chief Medical Officer in consultation with Occupational Medicine, Healthcare Epidemiology, Infection Prevention and Control and Human Resources. Determination of an urgent situation may be based upon one or more of the following conditions:

1. Influx in patient admissions attributable to influenza;
2. Advisories by local or state Department of Health officials or the Centers for Disease Control and Prevention;
3. Marked increase in employee absenteeism.

F. Failure to comply with the immunization policy will result in a written warning. If an individual is not vaccinated or granted an exemption within 2 weeks of the warning, they will be subject to further disciplinary action up to termination of employment.

G. If an unvaccinated individual fails to comply with reassignment following a written warning, they are subject to further disciplinary action up to termination of employment.

H. In the event of an influenza vaccine shortage, the situation will be evaluated by the Chief Medical Officer at the corporate level in collaboration with Occupational Medicine, Infection Control, Human Resources, Pharmacy and Administration. Influenza vaccine will be offered to faculty and staff and personnel covered by this policy based on job function and risk of exposure to influenza. Priority will be given to those who provide direct hands-on patient care with prolonged face-to-face contact with patients, care for patients at high risk for complications from influenza and/or have highest risk of exposure.
University of Pennsylvania Health System

Policy Manual

Subject: PENN MEDICINE INFLUENZA IMMUNIZATION POLICY

Number: 3-10
Page 3 of 3
Effective 9/7/10

To patients with influenza, as well as to personnel who are at high risk for complications from influenza.

1. Exemptions

   1. Exemption to immunization may be granted for medical contraindications or religious beliefs.

   2. Individuals requesting exemption due to medical contraindications must have their physician complete the "Request for Medical Exemption from Influenza Vaccination" form and submit the form to Occupational Medicine. Medical contraindications include:

      i. Severe allergic reaction to eggs
      ii. History of previous severe allergic reaction to influenza vaccine or a component of the vaccine
      iii. History of Guillain-Barre's syndrome within 6 weeks of receiving a previous dose of influenza vaccine

   3. Individuals requesting a religious accommodation must have their clergy complete a "Request for Religious Exemption from Influenza Vaccination" form and submit the form to Human Resources. The request must be consistent with prior vaccination history.

   4. Standard criteria for medical exemption will be established based upon recommendations from the Centers for Disease Control and Prevention. The standard criteria will be utilized at each hospital and service organization.

   5. Each request for medical exemption, regardless of the reason, will be evaluated individually by occupational medicine at the hospital or service organization level, with consultation with Healthcare Epidemiology, Infection Prevention and Control.

   6. If medical exemption is granted, the individual will be notified in writing within five (5) business days after presenting a request for exemption in person to occupational medicine.

   7. If exemption is granted for a temporary condition, the individual must resubmit a request for exemption each year. If exemption is granted for a permanent condition (e.g., allergy or history of Guillain-Barre's after a previous influenza vaccine) the exemption does not need to be requested each year unless vaccine technology would charge to eliminate issues regarding allergies.

SUPERSEDES: 01-01-01

ISSUED BY:
Judy Schueler
Vice President
Organizational Development and
Chief Human Resources Officer
Penn Medicine Request for Religious Exemption from Influenza Vaccination

Please print information below:

Employee Name___________________________ Employee phone #:____________________________

Employee Email________________________________________________________________________

Clergy Name __________________________ Clergy phone #:__________________________________

Clergy Email________________________________________________________________________

Influenza Vaccination Requirement
In 2009, as a patient safety initiative, the University of Pennsylvania Health System began requiring influenza vaccination, similar to other required vaccinations such as MMR and varicella. For decades, influenza vaccination has been recommended for healthcare workers, and has been shown in study settings to be effective in protecting patients and staff. Influenza vaccination is also recommended in pregnancy by the Centers for Disease Control and Prevention and the American College of Obstetricians and Gynecologists to protect pregnant woman who are at increased risk of severe disease and to protect the baby after it is born. The Center for Disease Control also strongly endorses mandatory influenza immunization for all healthcare workers.

Request for Influenza Immunization Exemption for Religious Reasons

The employee indicated above is requesting to be exempt from influenza vaccination for religious reasons. Please confirm that the employee follows religious beliefs that would qualify for an exemption by completing the information below: Name of Religion: Name and Address of Religious Organization: Note: Please attach a signed statement to document your request if this language does not represent your practice.

Clergy Signature_________________________________ Date__________________________

Note: Signature stamps not acceptable Requests for Religious exemptions should be filed with the Office of Human Resources.
Request for Medical Exemption from Influenza Vaccination

Employee Name___________________________ Employee phone #:

Physician Name __________________________ Physician phone #__________________________

Dear Physician:

In 2009, as a patient safety initiative, the University of Pennsylvania Health System began requiring influenza vaccination, similar to other required vaccinations such as MMR and varicella. For decades, influenza vaccination has been recommended for healthcare workers, and has been shown in study settings to be effective in protecting patients. Influenza vaccination is also recommended in pregnancy by the Centers for Disease Control and Prevention and the American College of Obstetricians and Gynecologists to protect pregnant woman (who are at increased risk of severe disease) and to protect the baby after it is born. Your patient is requesting to be exempt from this vaccination. Medical exemption from influenza vaccination is allowed for recognized contraindications (CDC MMWR Early Release 2010; Vol. 59. Available online: http://www.cdc.gov/mmwr/pdf/rr/rr59e0729.pdf). Please complete the form below to request medical exemption for your patient. Should you have any questions, please call ________________________

Thank you,

____________________________________________________________________________

My patient should not be vaccinated against influenza for the following reason:

☐ Recognized contraindication to influenza vaccination (please mark which one):
  ☐ Severe allergic reaction to eggs
  ☐ Defined as developing hives, swelling of the lips or tongue, difficulty breathing
  ☐ Does not generally include gastro-intestinal symptoms
  ☐ The amount of egg protein in influenza vaccines is extremely small. People who can tolerate eating foods prepared with eggs, such as baked goods, can generally tolerate the influenza vaccine.
  ☐ History of previous severe allergic reaction to the influenza vaccine or component of the vaccine
  ☐ Defined as developing hives, swelling of the lips or tongue, difficulty breathing
  ☐ Does not include sore arm, local reaction, or subsequent upper respiratory tract infection.
  ☐ History of Guillan-Barre syndrome within 6 weeks of receiving a previous vaccine
  ☐ People with this history can choose to receive the vaccine.
  ☐ Other - Please describe in space below.

“Other” requests will be reviewed on a case by case basis by __________________________.

Clarification from the requesting employee and their physician may be requested.
Hospital of the University of Pennsylvania (HUP)

I certify that my patient has the above contraindication, and request medical exemption from influenza vaccination.

Physician Signature__________________________________________
Date__________________________
(Signature stamps not acceptable)
Physician Medical License
Number____________________________________________________
MANDATORY INFLUENZA VACCINE FOR HEALTHCARE WORKERS - Experience from a Large Urban Teaching Hospital

Amy J. Behrman, MD
Division of Occupational Medicine
Department of Emergency Medicine
University of Pennsylvania

This presentation is available online at
Main Line Health
After averaging seasonal vaccine uptake among its health care personnel of about 60 percent for several years, despite active annual campaigns, Main Line Health adopted a mandated program for the 2010–11 flu season, achieving a 99.99 percent uptake.

Unique Program Details

- The patient safety initiative involves the entire Main Line Health community, including physicians, employed physicians, vendors with patient contact (consent form), and impacts non-employee credentialed professional staff through privilege suspension.
- Engaged community health nurses to “deliver” immunizations in the mandate context.
- Used employee intranet to post key program content and help assure continuity of messaging across stakeholder groups.
- Posted a set of Frequently Asked Questions. Employees can post new questions and get a direct response.
- Moved from paper-based form to badge reader for tracking.

Program Contacts:
Constance Cutler, RN, MS, CIC, FSHEA
Director, Infection Prevention and Control
(484) 476-3906

Patty McBride, RN, MSN, CIC
Infection Preventionist
(484) 337-3470
CEO and CMO: Patient safety priority leads to mandatory flu vaccination policy

Dear Colleagues:

As you know, patient safety is our top priority at Main Line Health. Therefore, we have recently adopted a new policy that we believe will make our patients safer and our employees healthier in upcoming flu seasons.

Beginning this year, MLH will require all employees, physicians, students, and volunteers to be vaccinated against influenza as a condition of employment or use of MLH facilities. Contracted clinical personnel who come into direct contact with patients or their environment must also be vaccinated. There will be exemptions for medical and religious reasons, of course.

Working in a healthcare environment makes infection prevention extremely important, both to protect our patients and to avoid bringing infection home to our families. If we are not vaccinated, we can spread flu to patients, co-workers, families and visitors up to 48 hours before symptoms appear.

No one can predict what the flu season will be like this year or in the future. What is certain is that we must be prepared to protect our patients, who are typically more vulnerable to infection and potentially life-threatening complications.

Last year, as the novel H1N1 flu reached pandemic proportions, Main Line Health launched a concerted effort at influenza prevention in our hospitals. This included vaccinations, hand hygiene reminders, visitor restrictions and masks. Despite these efforts, only two-thirds of our staff opted to receive the voluntary vaccination.
Although the H1N1 pandemic took the spotlight last year, more than 36,000 Americans die from seasonal flu in a typical year.

We have a responsibility to our patients and the community to do everything we can to keep them well. One thing we must do is get vaccinated. Everyone covered by the policy must be vaccinated or have an approved exemption by January 10, 2011. Free flu vaccination will be provided throughout MLH facilities, beginning in October.

More information about the flu vaccination program will be communicated during the coming months through meetings, newsletters, our intranet, and other messages. If you have a question, please feel free to send it to us at fluinformation@mlhs.org.

Thank you for all that you do to help keep our patients safe.

Jack Lynch Don Arthur, MD
President & Chief Medical Officer
Chief Executive Officer

Main Line Health
Main Line Health

Main Line Health, Inc. and Main Line Health, Inc. Subsidiaries

Working Together to Serve the Community

This policy applicable to: ☑ All Subsidiaries ☐ All Hospitals ☐ BMRH ☐ All Acute Care Hospitals ☐ Mirmont Treatment Center

ADMINISTRATIVE POLICY AND PROCEDURE MANUAL

Subject: Influenza Vaccination, Non-patient I.3

Policy Purpose:

To protect patients, employees, students, volunteers, members of the Medical Staff, members of the Specified Health Professional Staff, and contracted clinical personnel* from influenza through annual vaccination of all Main Line Health System employees, students, volunteers, members of the Medical Staff, members of the Specified Health Professional Staff, and contracted clinical personnel.*

Policy Statement:

All MLHS employees, students, volunteers, members of the Medical Staff, members of the Specified Health Professional Staff, and contracted clinical personnel* will be vaccinated against influenza every year. Employees include those with and without direct patient care or contact.

*Contracted clinical personnel are those who have direct contact with patients or their environment.

Performed by: Physicians, Occupational Health Services, Registered Nurses, LPNs, Physicians Assistants, and Medical Assistants under a physician’s direction.

1. The vaccination program is coordinated through Occupational Health Services and will officially begin in October. Vaccinations will be available through March 31st for new personnel. Influenza vaccine is available free of charge to all MLHS employees, students, volunteers, members of the Medical Staff, members of the Specified Health Professional Staff, and contracted clinical personnel*.

2. Employees, students, volunteers, members of the Medical Staff, members of the Specified Health Professional Staff, and contracted clinical personnel* who are vaccinated through services other than MLHS Occupational Health Services (e.g., private physician office, public clinics) must provide proof of vaccination to Occupational Health Services. Proof of vaccination may include a physician’s note, a receipt listing influenza vaccination, or a copy of a signed consent form.

3. Exemption
   a. Exemption to vaccination may be granted for medical contraindications or religious beliefs.
   b. A person requesting an exemption due to a medical contraindication must provide proof such as a letter from his/her physician. Requests for a medical contraindication exemption will be evaluated by Occupational Health Services. If the exemption is granted, the requesting person will be notified in writing by Occupational Health Services within 2 weeks. If the exemption is requested for a temporary condition, the requesting person must resubmit a request for exemption each year. If the request is granted for a permanent condition (e.g., allergy or history of Guillain-
barré syndrome), the exemption does not need to be requested each year unless vaccine technology changes to eliminate issues regarding the medical contraindication.
c. Requests for a religious exemption will be evaluated by the Human Resources Department. The requesting person will be notified in writing by Human Resources within 2 weeks if the religious exemption has been granted or denied. If the requesting person is not satisfied with the decision, he/she may, within 5 days from the receipt of the decision, present the appeal in writing. This appeal will be reviewed by a 3rd party and the 3rd party will notify both Human Resources and the employee of the final decision.

4. Record Keeping:
   a. Occupational Health Services will maintain records of influenza vaccinations for employees.
   b. The area responsible for students will maintain records of influenza vaccinations for students.
   c. Volunteer Services will maintain records of influenza vaccinations for volunteers.
   d. The Medical Staff Office will maintain records of influenza vaccination for members of the Medical Staff and members of the Specified Health Professional Staff.
   e. The area responsible for the contracted clinical personnel* will maintain records of influenza vaccinations for the contracted clinical personnel*.

5. Vaccinations will begin in October. All employees must be vaccinated or granted an exemption by the second Monday after January 1st (January 10, 2011; January 9, 2012; January 14, 2013, January 13, 2014, etc.) or are not eligible to continue employment with Main Line Health System. Employees will be placed on a leave status for the remainder of the month of January. If compliance is not achieved during this leave, termination of employment will be implemented on the first Monday in February.

6. In the event of an influenza vaccination shortage, the situation will be evaluated at the MLHS level for the entire organization. Occupational Health, Infection Prevention, Human Resources, Pharmacy and Administration will conduct the evaluation with other departments as needed when vaccine shortages occur. Influenza vaccine will be offered to healthcare workers based on job function and risk of exposure to influenza. Priority will be given to those who provide direct hands-on patient care with prolonged face-to-face contact with patients and/or have the highest risk of exposure to patients with influenza.

Equipment: Influenza vaccine and supplies for administration

Replaces the following Policies/Procedures: None


Origination Date: March 2010
Previous Revision Date: None
Review Date: October 2010
Revision Date: October 2010
Key Contact: Director, Infection Prevention and Control
Approved: MLHS Infection Prevention and Control Committee, July 2010
INFLUENZA VACCINATION MEDICAL EXEMPTION FORM

I am requesting a medical exemption from receiving the influenza vaccination.

Name______________________________________________Employee ID # or last 4 of SSN________________
(Clearly print first and last name)             Date of birth (mm/dd/yyyy) _____/_____/_______

<table>
<thead>
<tr>
<th>MLH Entity</th>
<th>MLH Medical Staff</th>
<th>RH Medical Staff</th>
<th>Both</th>
<th>MLH SHP Staff</th>
<th>RH AHP/HPA Staff</th>
<th>Both</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Bryn Mawr Hospital</td>
<td>□ Main Line Services</td>
<td>□ Riddle Health Care Services</td>
<td></td>
<td></td>
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<tr>
<td>□ Bryn Mawr Rehab Hospital</td>
<td>□ Lankenau Institute Med Research</td>
<td>□ RMH Physician Services</td>
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<tr>
<td>□ The Lankenau Hospital</td>
<td>□ Main Line (Rehab) Affiliates</td>
<td>□ Riddle System Services</td>
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<tr>
<td>□ Paoli Hospital</td>
<td>□ The Home Care Network</td>
<td>□ Riddle Enterprises Inc</td>
<td></td>
<td></td>
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<tr>
<td>□ Riddle Hospital</td>
<td>□ LIMR Development Inc</td>
<td>□ Other ________________</td>
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<tr>
<td>□ Main Line HealthCare</td>
<td>□ LIMR Chemical Genomics Ctr Inc</td>
<td></td>
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<tr>
<td>□ Main Line HealthCare Laboratories</td>
<td>□ Mirmont Treatment Center</td>
<td></td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

MLH Employee Department_______________________   □ Volunteer   □ Other ________________

The following are approved reasons to request a medical exemption from receiving the influenza vaccination.

☐ I have a severe (anaphylactic) allergy to chicken eggs or egg products.

☐ I had a severe reaction after receiving a previous influenza vaccination (specify). _____________________________
______________________________________________________________________________________________

☐ I have had Guillain-Barré Syndrome.

My Signature:_________________________________________________

Date: _____/_____/_______

Healthcare Provider Instructions: Please print, sign, and date that this person qualifies for a medical exemption.

Healthcare Provider Name (printed): ________________________________

Healthcare Provider Signature: ______________________________________

Date: _____/_____/_______

Please fax this completed form to Occupational Health at (610) 296-5437 or scan and e-mail it to gilbertr@mlhs.org
You may also use interoffice mail or regular mail to send it to: Occupational Health at Paoli Hospital
11 Industrial Blvd, Suite 103
Paoli, PA 19301

Office Use Only

Received by Occupational Health on the following date: _____/_____/_______

Reviewed by Occupational Health on the following date: _____/_____/_______

Disposition: □ Approved □ Disapproved       by: ________________________________

Person requesting the exemption notified on the following date: _____/_____/_______
Frequently Asked Questions on Mandatory Flu Vaccination

Click on the categories below to see answers to questions received to date.

- **About the policy**
- **Infection Control**
- **Exemption information**
- **Vaccine Information**

**About the policy**

What will happen to employees, physicians and volunteers who don’t get the flu vaccine by January 10, 2011?
Employees will not be able to work at MLH. Physicians will have their privileges temporarily suspended. Volunteers will be unable to volunteer.

Why can’t MLH rely on the traditional voluntary vaccination program to immunize our staff?
Last year, our voluntary influenza vaccinations were given to 60% (seasonal vaccine) and 42% (H1N1 vaccine) of employees. This year, there is only one influenza vaccine, which protects against H1N1 and two other strains. Other prominent local and national healthcare systems have successfully achieved greater than 99% influenza vaccination rates.

Will the deadlines change if H1N1 spreads in October, like it did last year?
There may be some modification to the deadlines but vaccine doesn’t usually arrive until September at the earliest, so distribution of vaccine depends on availability.

I usually get my flu shot from my Doctor. What information should I bring in to prove that I received the shot?
All you need to do is send proof of receiving influenza vaccine to Occ Health. Proof could be receipt of detailed bill listing flu vaccine or note from your physician stating the date you were vaccinated.

**Infection Control**

What should we do after January 10, 2011, if we know someone in contact with a patient has not been vaccinated?
A patient with influenza will be isolated and those entering the patient room will need to comply with posted precautions.
What will be done if someone who has been working with patients catches the flu before January 10?
Those with the flu should not come to work. The vaccine protects against 3 different strains of influenza, so the vaccine is still required even if someone has documentation of having had one strain of flu.

Will those who have exemptions be required to wear masks?
No.

**Exemption information**

Is there a form for religious exemptions?
No. A letter from your clergy on appropriate letterhead should be sent to Occupational Health at
- Fax at 610-296-5437
- Interoffice mail
- Regular mail: Occupational Health at Paoli Hospital
  11 Industrial Blvd, Suite 103
  Paoli, PA 19031

Remember, exemption requests must be submitted by October 1.

Why do exemption requests need to be submitted three months before the vaccination deadline?
Exemption requests are for medical or religious reasons, so those will not change. The three month time period allows time to process and respond to those who request exemptions.

Is the influenza vaccine safe?
It is cultivated in eggs, just like the measles, mumps, and rubella (MMR) vaccine and the vaccines for yellow fever and typhoid fever. Anyone with an anaphylactic egg allergy will be exempted. If you have ever had the MMR vaccine (required for school attendance), then you may safely receive the influenza vaccine. Documented religious exemptions will also be available.

I am very concerned about MLH forcing employees to get the Flu vaccine or lose their job. In healthcare, it is common practice to educate patients about best treatments but ultimately leave the decision up to them. There are religious and allergy based exemptions to this policy, why not an informed decision exemption as well?
Main Line Health staff influenza immunization is a critical step in preventing serious and potentially life-threatening illness in our vulnerable patients and our valued staff. Influenza kills approximately 36,000 people each year. The most vulnerable are hospitalized patients whose immune systems are challenged by illness and injury. Studies have shown that the most effective way to prevent infection of hospitalized patients is to immunize hospital staff.

As always, our highest priority is our employee's safety and the safety of our patients. We have made great strides in preventing hospital-associated infections. Immunizing our staff protects our patients from infection by our staff who become infected with the virus. At the same time, we want to ensure that your families are protected from any exposure you might have while working. For you, your families and our patients, we have the opportunity - in fact, a moral obligation - to use all measures available to us to prevent patient harm. and to protect our workforce.

There are already many immunizations which are 'conditions of employment' at Main Line and throughout the health care industry. Requiring the flu vaccine is consistent with these requirements.
What type of plan can be developed for employees who have reviewed the safety and efficacy data on the flu shot and may decide not to participate, especially if the employee does not work in the actual hospital?

Whether to immunize all MLH staff or only those with patient contact was an important and well-thought-out policy decision. An MLH team including infection preventionists, patient safety experts, and senior MLH physicians specializing in infectious disease and occupational health reviewed CDC recommendations and the vaccine data. Taking into consideration, as well, the data on benefits of staff immunization for patient safety, the team, which also included senior Human Resources representatives, concluded that system-wide vaccination was the best approach.

Many non-clinical staff may encounter patients or their families in hospital cafeterias and elevators. Besides, MLH’s concern for safety and flu prevention extends to all staff and their families, too. As stewards of the health of our communities, we’re aiming to reduce spread of the flu everywhere. The policy is intended to enhance the safety of patients as well as all staff and their families. It applies to all employees, physicians, students, and volunteers as well as contracted clinical personnel (“contracted clinical personnel” is defined as those with contact with patients or their environment).

The vaccination schedule, along with additional information, is posted under Flu Season 2010-2011 on the Connections Online intranet. Exemption for medical or religious reasons must be requested by October 1.

**Vaccine Information**

I would like to know if there are any pork products in the flu shot.

No. The vaccine is cultivated in chicken eggs.

According to the CDC, the single-dose pre-filled syringes do not contain any mercury. Will this be an option for us?

Thimerosal is a mercury-containing preservative used in multi-dose vials but not the single dose syringes. MLH is providing influenza vaccine in single dose syringes at the posted influenza vaccination sites. The single dose syringes do contain latex, so that formulation is not the one for anyone with latex allergy. The multi-dose vials, available by appointment in the Employee Health Offices throughout the system, do not contain latex.

One of my staff members received her flu shot elsewhere and has provided me with a copy of the MLH Consent Form. Where shall I submit this to ensure her file is updated to reflect this information?

Please send the completed form to Occupational Health either by:
- Fax at 610-296-5437
- Interoffice mail
- Regular mail: Occupational Health at Paoli Hospital
  11 Industrial Blvd, Suite 103
  Paoli, PA 19031

Is the influenza vaccine safe?

It is cultivated in eggs, just like the measles, mumps, and rubella (MMR) vaccine and the vaccines for yellow fever and typhoid fever. Anyone with an anaphylactic egg allergy will be exempted. If you have ever had the MMR vaccine (required for school attendance), then you may safely receive the influenza vaccine. Documented religious exemptions will also be available.
Will we be required to have regular flu shot only? Or are we also required to have H1N1 vaccine?

Unlike 2009, this year there will only be one influenza vaccine. Every year the seasonal vaccine contains protection against three different strains of influenza and this year one of those three strains is the 2009 H1N1 strain that caused the majority of influenza in 2009. Here is the complete list for the 2010 influenza vaccine:

- A/California/7/2009-like (2009 H1N1),
- A/Perth/16/2009-like (H3N2), and
- B/Brisbane/60/2008-like (B/Victoria lineage)
Main Line Health

Stop the Flu!

Stay Well Ahead in Patient Safety.

Main Line Health is committed to safeguarding the health of our patients, visitors and staff.

That means we do what’s necessary (and follow Centers for Disease Control and Prevention guidelines) to protect our patients and our staff from common but potentially deadly diseases such as the flu.

To help prevent the spread of flu virus, all Main Line Health physicians, licensed practitioners, employees and volunteers are now required to receive the flu vaccine each year as part of our extensive patient safety and infection prevention efforts.

Questions? E-mail FluInformation@mlhs.org or visit the intranet homepage.
**Abington Memorial Hospital**

After averaging seasonal vaccine uptake among its health care personnel and care community of about 50 percent for several years, despite active annual campaigns, Abington adopted a mandated program for the 2010–11 flu season, achieving a 99.34 percent uptake.

**Unique Program Details**

- Emphasizes collaborative engagement of Abington leadership across functions and disciplines.
- Universal requirements also impact trustees and non-employee professional staff (privilege suspension).

**Program Contacts:**

Debra Miller, RN, BS, CIC  
Director Infection Control  
(215) 481-6412

Bonnie Grassey, RN, CIC  
Infection Control Nurse  
(215) 481-3113

Robin Piccinini, RN-BC, COHN  
Administrative Manager Employee Health & Occupational Health Services  
(215) 481-4936
Abington Memorial Hospital

Implementing Universal Influenza Vaccination Programs for Health Care Personnel

Abington Memorial Hospital Policy

To assure that all individuals working in an Abington Health affiliated facility are immunized against influenza, on an annual basis. Influenza vaccination is a requirement of working in an Abington Health affiliated facility. Individuals working at Abington Health affiliated facilities include employees, residents, students, members of the medical staff, volunteers and contracted personnel of Abington Health affiliated facilities.

Purpose:

The purpose of this policy is to protect all individuals working in an Abington Health affiliated facility including patients, employees, medical staff and co-workers from influenza infection through annual immunization.

Procedure:

1. Unless exempted pursuant to paragraph 4 below, all individuals working in an Abington Health affiliated facility will be immunized against influenza each year.

2. If employees are vaccinated through other services other than an Abington Health affiliated facility such as their private physician or another facility, they must provide proof of immunization to Employee Health Services on an annual basis. Proof of immunization may include a physician’s note or copy of immunization records.

3. Individuals working in an Abington Health affiliated facility including residents, students, non-employed members of the medical staff and contracted personnel must provide proof of immunization to their designee. Proof of immunization may include a physician’s note or copy of immunization records.

4. Exemptions:

Exemption to immunization may be granted for medical contraindications or religious beliefs.

Medical exemptions include:

a. Documented hypersensitivity to egg proteins
b. Documented past history Guillain-Barre Syndrome or demyelinating illness

Individuals requesting medical exemption due to medical contraindications must provide proof of medical contraindications from their private physician. The note must include the physician’s name and contact information such as on a prescription note. A physician to physician verbal verification will occur.

Each request for medical exemption will be reviewed by a medical review committee. Standard criteria for medical exemptions will be established based upon CDC recommendations.
Abington Memorial Hospital

Implementing Universal Influenza Vaccination Programs for Health Care Personnel

Abington Memorial Hospital Policy, continued

Religious exemptions

Individuals requesting a religious exemption must provide a letter from their clergy on letterhead stationary supporting the exemption. Request must be consistent with prior vaccination history.

Each request for religious exemption will be reviewed by the Office of Diversity committee.

Exemption granted

If exemption is granted, the employee will be notified in writing.

If exemption is granted for a temporary medical condition, the individual must resubmit a request for exemption annually. If exemption is granted permanently, the employee does not need to submit a request annually, unless the vaccine components change eliminating issue related to allergies of eggs or components of vaccine.

Influenza season will be determined annually based upon influenza being identified in the community. The exact dates will be determined by the Medical Director, Employee Health and Epidemiology.

Exemption denied

If an exemption request is denied, the employee will be required to be immunized pursuant to this Policy.

Failure to comply with the influenza immunization policy

Failure to be immunized or granted an exemption by the date determined by the organization will result in immediate and automatic suspension.

Suspended employees will be given two weeks to comply with the immunization requirement or will face termination.

Salaried physicians of Abington Health will fall under this policy, for all other members of the medical staff issues arising from influenza immunization will be adjudicated by the medical staff rules and regulations.
Abington Memorial Hospital

2011 INFLUENZA VACCINATION PROGRAM

REQUEST FOR RELIGIOUS EXEMPTION

Please print:
Name: ____________________________________________
Home Address: _____________________________________
Phone number: _____________________________________
Department: ________________________________________
Location of employment: (circle one) Abington Hospital or Lansdale

I am requesting an exemption to receiving the annual influenza vaccine due to:

☐ Religious beliefs. I understand that my current request must be consistent with prior vaccination history.

☐ Letter from clergy on letterhead stationary attached
   Clergy Name: _______________________________________
   Phone Number: ______-_________-___________

Each request for religious exemption will be reviewed by the Office of Diversity committee.

I understand that failure to be immunized or granted an exemption by the date determined by the organization will result in suspension. Suspended employees will be given two weeks to comply or will face termination.

_________________________________________        __________________
Employee Signature                                                          Date
Abington Memorial Hospital

COMMITTEE REVIEW

Exemption has been:
☐ Granted - annual exemption verification is required
☐ Declined

Failure to be immunized by ___/___/___ 4pm will result in suspension.

Failure to be immunized by ___/___/___ 4pm will result in termination of employment with AMH.

________________________________________
Signature of Committee

Certified letter sent to employee on: _______________
Abington Memorial Hospital

2011 INFLUENZA VACCINATION PROGRAM

REQUEST FOR MEDICAL EXEMPTION

Please print:
Name:_____________________________________________
Home Address: ______________________________________
Phone number: ______________________________________
Department:________________________________________
Location of employment: (circle one) Abington Hospital or Lansdale

I am requesting an exemption to receiving the annual influenza vaccine due to:

□ Documented allergy to egg (documentation of allergy testing required)
□ Documented history of Guillain-Barre Syndrome

□ Medical documentation is attached
Physician Name:________________________________________
Phone Number:_____-__________-___________

Each request for medical exemption will be reviewed by a medical review committee. Standard criteria for medical exemptions will be established based upon CDC recommendations. A physician to physician verbal verification will occur.

I understand that failure to be immunized or granted an exemption by the date determined by the organization will result in suspension. Suspended employees will be given two weeks to comply or will face termination.

_________________________________________        __________________
Employee Signature                                                          Date
Abington Memorial Hospital

COMMITTEE REVIEW

Exemption has been:
☐ Granted  ☐ Permanent  ☐ Temporary –annual exemption verification is required
☐ Declined

Failure to be immunized by __/__/__ 4pm will result in suspension.

Failure to be immunized by __/__/__4pm will result in termination of employment with AMH.

Comments:____________________________________________________________________
____________________________________________________________________________
____________________________________________________________ ________________
Signature of Committee

Certified letter sent to employee on:_______________
Geisinger Health System
Geisinger implemented a hybrid solution over two seasons that combines a strong flu team model to drive uptake with a mandatory six-month masking policy for health care personnel who decline or cannot (medically) be vaccinated. The masking strategy proceeds in part from a view that annual mandatory vaccination required a different strategy than other health care personnel vaccination requirements. Geisinger stresses that it is not against mandated vaccination in principle, as it has implemented a mandatory pertussis vaccination policy parallel with the masking strategy. Before the mandate, the vaccination rate was 60 percent. After the mandate, the rate jumped to 96 percent.

Unique Program Details
- Engages 150 flu team captains across system with training and kit to build organization-wide enthusiasm.
- Employs annual campaign-themed stickers for employee ID badges.
- Mandates masking from November 1 through March 31 for employees who received medical or personal exemptions.
- Program applies to non-employee professional staff and system leadership.
- Initiates strong oversight of masking; must be masked within five feet of any human; stickers on ID badge; warning letters in stages then suspension/separation.
- Emphasizes that policing of masking requirement is critical—suspension action.

Program Contacts:
Lisa M. Esolen, MD
Systems Director, Infection Control
(570) 214-5060

Kimberly Kilheeney
(570) 214-9424
### Influenza Immunization Policy

**PURPOSE:**

This Influenza Immunization Policy establishes guidelines to increase the influenza immunization rate of defined personnel, resulting in potential reductions in the incidence of nosocomial influenza cases, reducing absenteeism, and increasing cost savings, effectiveness, and safety.

**PERSONS AFFECTED:**

Employees, students of the Health System education programs (Radiology, Cardiac Catheterization Technicians, and Pastoral Care), and Volunteers.

**POLICY:**

The Influenza Immunization Policy is to ensure, influenza vaccine will be offered annually to all employees, Volunteers, and students of a Geisinger education program (“defined personnel”) free of charge, in accordance with the Center for Disease Control and Prevention (CDC) most recent recommendations. Administration is subject to market availability.

**DEFINITIONS:**

Defined personnel – employees, students of education programs (Radiology, Cardiac Catheterization Technicians, and Pastoral Care), and Volunteers.

**RESPONSIBILITIES:**

The Director of Occupational Health oversees the process with collaboration of the Health Services policy work group. Health Services staff are responsible for scheduling influenza clinics and individual appointments. Clinical Staff are responsible for administration, which includes informed consent and documentation.

**EQUIPMENT/SUPPLIES:**

- Influenza vaccine
- Syringes and other supplies for administration

**PROCEDURE:**

1. Health System strongly recommends that, absent medical contraindication, defined personnel should receive an annual influenza vaccine, as the vaccine is the primary means of reducing transmission and preventing influenza infection in defined personnel, their families and patients.

   **Contraindications:**
   - Allergy to Thimersol, chicken eggs or egg products, or Latex
   - History of Guillain-Barre Syndrome
   - History of Allergic reaction to an injection or medication
   - Current respiratory illness or fever

2. Defined personnel will be required to complete an educational course and test questions on influenza immunization annually through the GOALS system.

3. Managers will be responsible to track compliance through the GOALS system for all defined personnel: (i) to ensure completion of the course through the GOALS system by all defined personnel who report to them, and (ii) to ensure that all such defined personnel complete the Influenza Vaccination Information Sheet on line through the GOALS system.

4. Influenza immunizations will be provided to defined personnel free of charge, subject to its availability in the market.

5. Influenza immunization clinics will be scheduled at times and in locations convenient for defined personnel,
addition to appointment availability in Health Services. Dates, times and locations available on Health Services website for those clinics held in the Health Services Department.

5. The most current CDC Influenza Vaccination Information Sheet will be given to defined personnel for review prior to administration of the vaccine.

6. The Health System will follow the administration recommendations of the CDC.

7. Any adverse reaction to an influenza vaccination provided to defined personnel by Health Services must be immediately reported by such defined personnel to Health Services for documentation and follow up.

REFERENCES:

CDC Guidelines
MMWR Recommendations and Reports, Influenza Vaccination of Health-Care Personnel, February 24, 2006/55(RR02); 1-16
# Seasonal Influenza Mask Policy

<table>
<thead>
<tr>
<th>PURPOSE:</th>
<th>The purpose of this policy is to reduce the risk of transmission of seasonal influenza to patients from unvaccinated staff. This policy applies to any staff member who works on either a clinical or non-clinical unit and has declined the influenza vaccination.</th>
</tr>
</thead>
<tbody>
<tr>
<td>PERSONS AFFECTED:</td>
<td>All Health System staff.</td>
</tr>
<tr>
<td>POLICY:</td>
<td>It is the goal of the Health System to afford maximum protection against the spread of influenza. All employees are offered the influenza vaccination free of charge. Though medically able, some employees decline the influenza vaccination. Also, rarely there are employees who can not be vaccinated for medical reasons, such as egg allergies.</td>
</tr>
<tr>
<td>RESPONSIBILITIES:</td>
<td>Management and supervisory personnel are responsible for enforcing this policy. For specific guidelines regarding progressive discipline, management and supervisory personnel are to contact Human Resources Department.</td>
</tr>
<tr>
<td>EQUIPMENT/SUPPLIES:</td>
<td>Surgical Masks</td>
</tr>
<tr>
<td>PROCEDE:</td>
<td>1. All staff are required to complete the Health System Influenza Awareness Training GOALS course annually.  2. All staff are required to sign the Health System Influenza Vaccination Acknowledgement form at the end of the GOALS course.  3. All staff who decline vaccination will be required to wear a surgical mask for any contact that requires the staff member to be within six feet of another person (i.e. patient, visitor, co-worker). (See # 5 below for dates of implementation.)  4. The mask must be replaced when it becomes moist or mechanically compromised (torn).  5. The mandatory masking requirement will extend from the beginning of the influenza season (to be determined by the Infection Prevention and Control Department) through March 31st, or until 2 consecutive weeks have passed without a case of Influenza A, whichever is longer.</td>
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Additional Resources

- American Hospital Association’s Information and Resources Supporting Mandatory Influenza Vaccination Policies
- American Nurses Association’s Seasonal Influenza Toolkit (pdf)
- American Society of Health-System Pharmacists’ Stop the Flu—It Starts with You!
- Association for Professionals in Infection Control and Epidemiology (APIC)’s “Protect Your Patients. Protect Yourself”
- Colorado Hospital Association’s Influenza Vaccination Toolkit
- Immunization Action Coalition Washington’s Influenza Immunization Toolkit
- Immunize Action Coalition’s Resources for Health Professionals
- Iowa Healthcare Collaborative’s Immunization Toolkit & Resources
- Joint Commission’s Providing a Safer Environment for Health Care Personnel and Patients through Influenza Vaccination
- Maryland Health Care Workers Influenza Initiative’s Campaign to Increase Influenza Vaccinations Among Health Care Workers (pdf)
- Massachusetts Medical Society’s Employee Flu Immunization Campaign Kit
- Michigan Department of Community Health’s Flu Fighter Action Kit
- National Foundation for Infectious Diseases’ Immunizing Healthcare Personnel Against Influenza Toolkit
- New York State Department of Health’s Immunization Toolkits
- Pennsylvania Department of Health & Pennsylvania Health Care Worker Vaccination Taskforce campaign website
- Project Immunize Virginia’s Healthy Health Care Workers Toolkit
- Quality Partners of Rhode Island Immunizations Toolkit (pdf)
- U.S. Department of Health and Human Services’ Healthcare Personnel Influenza Vaccination Initiative
- Washington State Hospital Association Flu Immunization Policy Implementation Toolkit (pdf)
Acknowledgements

The Hospital & Healthsystem Association of Pennsylvania (HAP) would like to thank the following organizations and groups:

- **HAP’s Committee on Quality & Care Management** for recommending HAP’s action and leadership in developing a voluntary statewide campaign to encourage Pennsylvania hospitals to develop a universal influenza vaccination program for health care personnel.
- **HAP’s Board of Directors** for approving the Committee’s recommendation and charging the association with developing such a campaign.
- **Other hospitals and health care organizations** for generously providing support to this project by sharing best practices that can be shared by all.
  - Abington Memorial Hospital
  - The Children’s Hospital of Philadelphia
  - Geisinger Health System
  - Hospital of the University of Pennsylvania
  - Lehigh Valley Health Network
  - Lehigh Valley Infectious Diseases Specialists
  - Main Line Health
  - University of Pennsylvania Health System
  - University of Pittsburgh Medical Center
  - Valley View Nursing Center
- **Members of the Pennsylvania Health Care Worker Vaccination Taskforce** for supporting the statewide campaign.
  - Pennsylvania Department of Health
  - Pennsylvania Patient Safety Authority
  - Pennsylvania Immunization Coalition
  - Center for Vaccine Ethics and Policy
  - The Hospital & Healthsystem Association of Pennsylvania
- **Washington State Hospital Association** for generously sharing its experiences and resources.

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**The Hospital & Healthsystem Association of Pennsylvania**

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