

Influenza Vaccination of the Health Care Workforce

GWU, Department of Health Policy
Brown Bag Lunch Research Seminar

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DISCLOSURES

- This project was funded by:
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- Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Department of Health and Human Services

PHYSICIAN CODE OF ETHICS

Hippocratic Oath (Classic)

I will apply dietetic measures for the benefit of the sick according to my ability and judgment; **I will keep them from harm and injustice.**

Hippocratic Oath (Modern)

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

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

Source: Tyson P. The Hippocratic Oath Today. Available at: <http://www.pbs.org/wgbh/nova/body/hippocratic-oath-today.html#modern>.

AMERICAN MEDICAL ASSOCIATION CODE OF ETHICS

- “A physician must recognize responsibility to patients first and foremost.”
- “A physician shall recognize a responsibility to participate in activities contributing to the improvement of the community and the betterment of public health.
- “To preserve the quality of their performance, **physicians have a responsibility to maintain their health and wellness... When health or wellness is compromised, so may the safety and effectiveness of the medical care provided.**”

Source: Schwartz JL. Vaccine Ethics and Mandatory Vaccination Policies. May 2011.

AMERICAN NURSES ASSOCIATION CODE OF ETHICS

- “The nurse’s primary commitment is to the patient, whether an individual, family, group or community.”
- “The nurse promotes, advocates for, and **strives to protect the health, safety, and rights of the patient.**”

Source: Schwartz JL. Vaccine Ethics and Mandatory Vaccination Policies. May 2011.

What steps do you think health care workers should take in order to protect their patients?

INFLUENZA in the U.S.

Burden of Influenza in the United States

| | |
|-----------------------------|---|
| Annual Burden | 5-20% of the population is infected in a typical year |
| Annual Mortality | 23,600 |
| Life Years Lost | 141,783 to 610,660 (2003) |
| Hospitalized Days | 1.2 to 3.1 million (2003) |
| Outpatient Visits | 31.4 million (2003) |
| Direct Medical Costs | \$10.4 billion (2003) |

Source: Flu.gov. About the Flu. Available at: <http://www.flu.gov/individualfamily/about/index.html>; Molinari NA, et al. The Annual Impact of Influenza in the US: measuring disease burden and costs, 2007.

THE HEALTH CARE WORKFORCE

The health care industry supports 14.3 million jobs

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

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

Source: Bureau of Labor Statistics. Career Guide to Industries, 2010-2011: Healthcare.; Stewart AM, et al. Influenza Vaccination of the Health Care Workforce: Developing A Model State Law, Summer 2011.

THE HEALTH CARE FACILITY

There are ~ 595,800 health care establishments

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

Source: Bureau of Labor Statistics. Career Guide to Industries, 2010-2011: Healthcare.; Stewart AM, et al. Influenza Vaccination of the Health Care Workforce: Developing A Model State Law, Summer 2011.

NOSOCOMIAL INFLUENZA

- Over the past 30 years, nosocomial influenza outbreaks have been documented across the U.S.
- During an average flu season, 23% of HCWs are infected with the virus, show mild symptoms, and continue to work despite being infectious
- Nosocomial outbreaks of influenza can result in a median mortality range from 16% in a general ward setting to 33 to 60% in a transplant setting

Source: Tilburt JC, et al. Facing the challenges of influenza in healthcare settings: The ethical rationale for mandatory seasonal influenza vaccination and its implications for future pandemics, 2008.

NOSOCOMIAL INFLUENZA

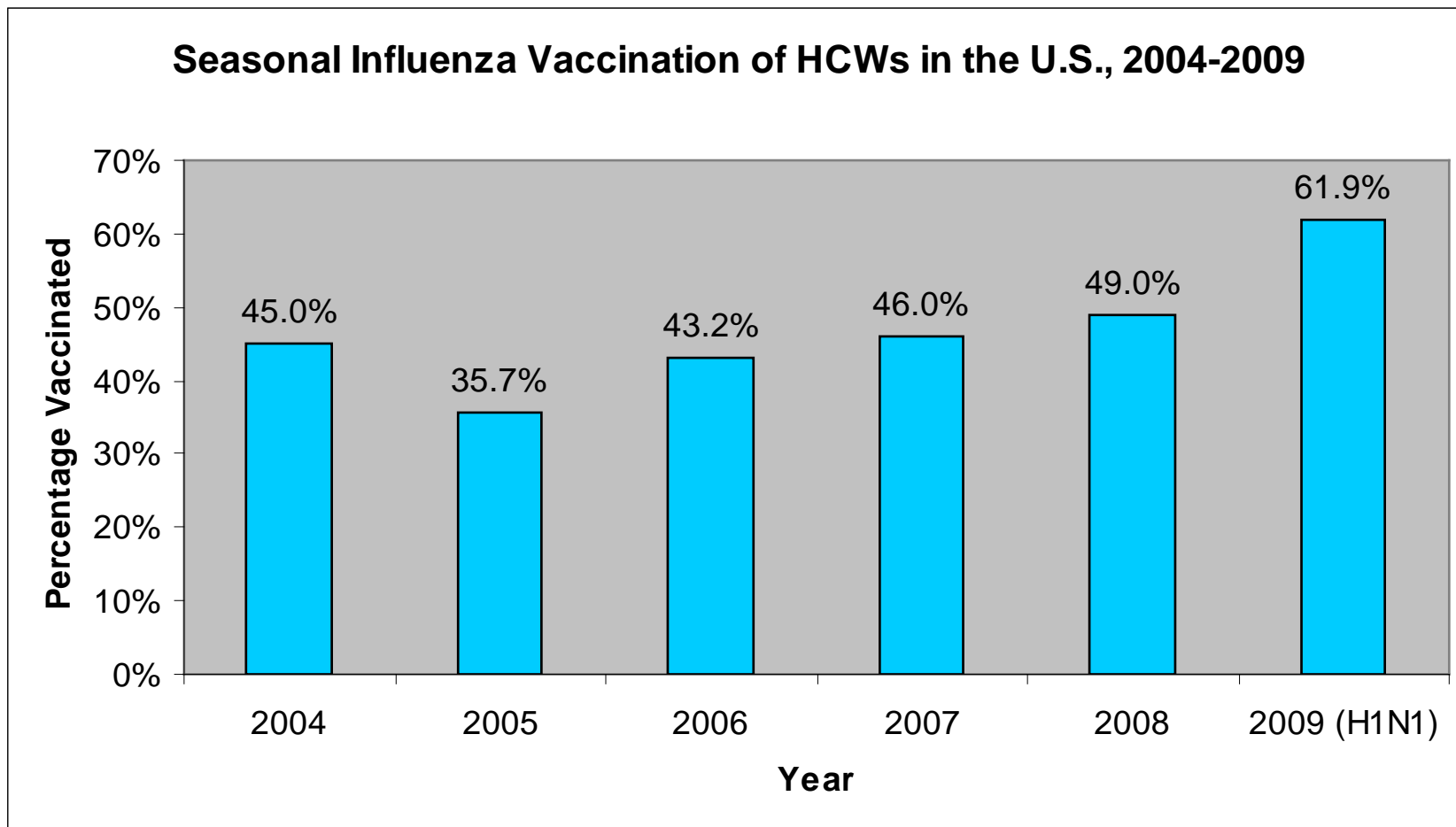
Influenza vaccination of HCWs can:

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

HCW INFLUENZA VACCINATION RECOMMENDATIONS

- **CDC Recommendation: since 1981, all HCWs**
- **Healthy People 2020: 90% influenza vaccination coverage for HCWs**
- **Supported by professional organizations:**
 - American Medical Association
 - American Academy of Pediatrics
 - American College of Physicians
 - Association for Professionals in Infection Control and Epidemiology
 - National Foundation for Infectious Disease
 - Infectious Disease Society of America

HCW INFLUENZA VACCINATION COVERAGE LEVELS



Source: Centers for Disease Control and Prevention. Influenza MMWR. 2004-2009.

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

What would you do to prepare for the next influenza season?

STRATEGIES TO IMPROVE HCW VACCINATION

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

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

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

Combination programs: Hybrid approach

Reporting and tracking of HCW vaccination rates: Record facility HCW vaccination rates and publically report rates

**You are the HCW union representative at
FLU Hospital, what do you expect
hospital administration to do?**

HCW INFLUENZA VACCINATION

Barriers to influenza vaccination:

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

Source: Hofmann F, et al. Influenza Vaccination of Healthcare Workers: a Literature Review of Attitudes and Beliefs, 2006.; HHS Action Plan to Prevent Healthcare-Associated Infections: Influenza Vaccination of Healthcare Personnel, 2011.

HCW INFLUENZA VACCINATION

Why HCWs choose to be vaccinated:

- Desire for self-protection
- Desire to protect patients
- Desire to protect family
- Previous receipt of vaccine
- Perceived effectiveness
- Desire to avoid missing work
- Peer recommendation
- Physician recommendation
- Strong worksite recommendation
- Previously contracted influenza
- Belief that receiving the vaccine is a professional responsibility
- Access to vaccination/coverage
- Vaccinations provided free of charge
- Belief that the benefits of vaccination outweigh the risk of side effects

Source: HHS Action Plan to Prevent Healthcare-Associated Infections: Influenza Vaccination of Healthcare Personnel, 2011.

MANDATORY PROGRAMS

- 2004: Virginia Mason Hospital, Seattle, WA = 1st facility to implement HCW influenza vaccination as a condition of employment
- Over 100 facilities across the U.S. have implemented similar policies
- These facilities have achieved levels of HCW influenza vaccination up to 99.9%

Source: Immunization Action Coalition. Honor Roll for Patient Safety. Available at: <http://www.immunize.org/honor-roll/>.



Source: Health care workers rally in Albany against flu shots. Available at: <http://www.cbs6albany.com/articles/health-1266922-care-workers.html>.

EMPLOYEE VACCINATION MANDATES- REACTIONS

Posted on Fri, Dec. 4, 2009

Elmer Smith: At CHOP, no flu shot, no job. No sense?



By Elmer Smith
Philadelphia Daily News
Daily News Opinion Columnist

RODNEY BOND never expected a gold watch or a plaque commemorating his 31 years of service to Children's Hospital of Philadelphia.

He expected what he always got, a day's pay for a day's work.

"This job served me well," Bond said. "I got married young, three years out of high school. I needed a job. Some may say I was complacent.

"But I've been able to raise my family. I've always been happy for what this job has done for me.

"I'm disappointed about what's happening to me. But I'm not a disgruntled employee."

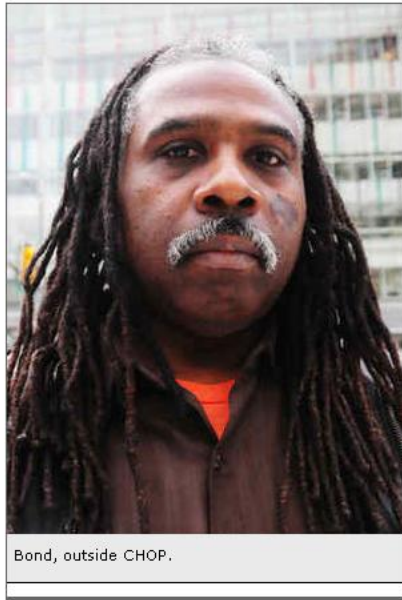
As of tomorrow, he won't be an employee at all. Bond, 51, who works in environmental services keeping the hospital clean, and at least eight others are being fired for refusing to take a seasonal flu shot.

Children's Hospital, in a laudable attempt to protect its patients, has required all its employees to be inoculated for seasonal flu this year for the first time in its history.

Hospitals around the city, indeed all over the country, are adopting similar measures. But the requirement at CHOP exceeds the guidelines offered by the Centers for Disease Control and is far more harsh than policies at other area hospitals.

Typically, hospitals have required their workers to either get a flu shot or wear surgical masks when they are near patients. At CHOP, they have rejected the masks as a possible alternative.

Even hospitals with similar policies have not fired employees for failure to comply. CHOP is also distinct in its uneven application of the policy.



Bond, outside CHOP.

CHOP healthcare workers allege unfair firings

by Meg Bevilacqua | Sunday, December 13, 2009 at 7:55 pm

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

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

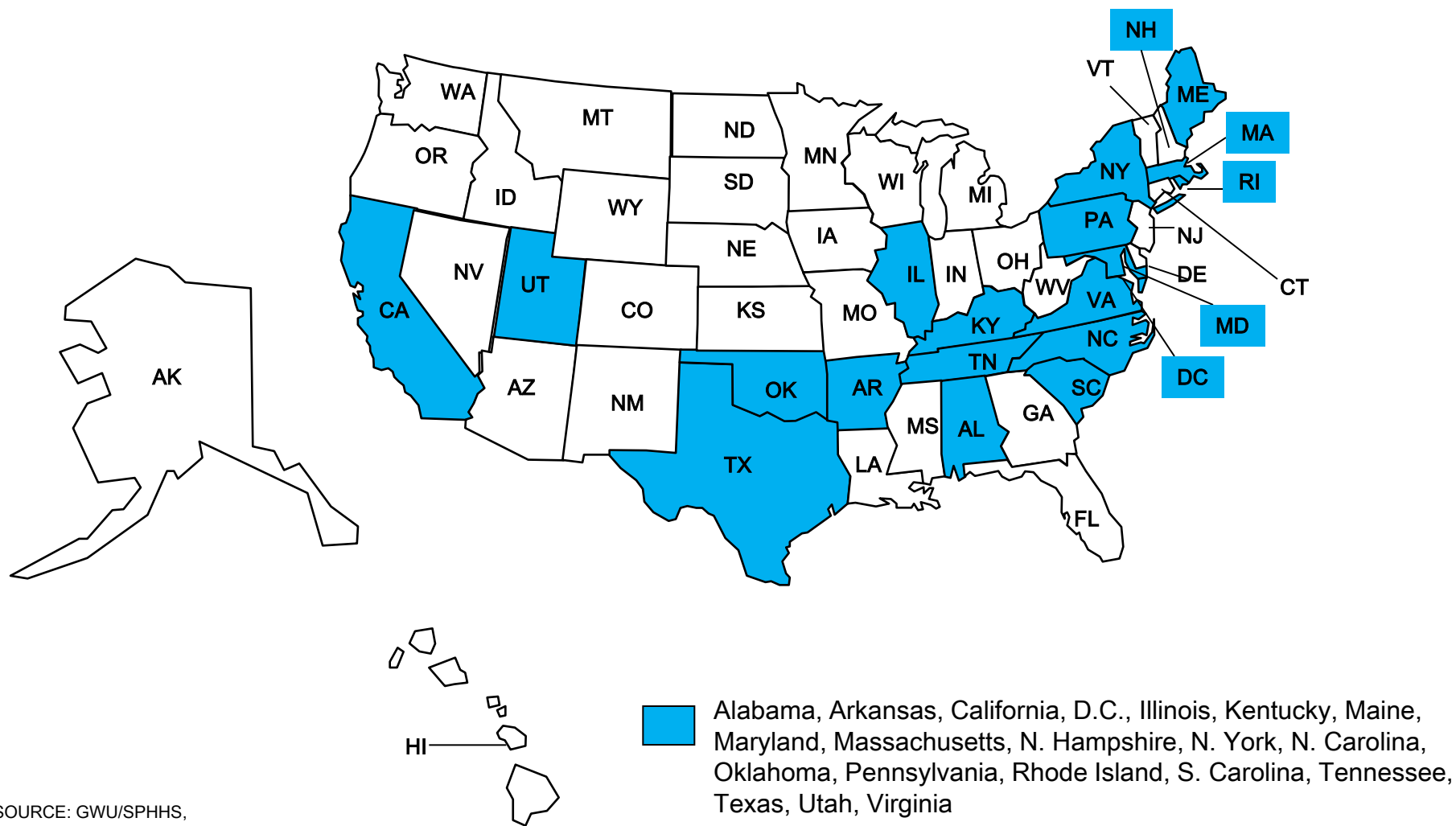
"Of 9,400 healthcare workers in patient buildings at CHOP, nine healthcare workers made the choice to not be vaccinated," CHOP officials wrote. "We are saddened they came to the decision to leave CHOP. We offered opportunity to apply for medical and religious exemptions but did not offer exemptions based on personally held beliefs."

In previous years, CHOP had made seasonal influenza vaccinations available but not a condition of employment. According to the statement, last year 500-800 employees refused seasonal influenza vaccination.

Source: Schwartz JL. Vaccine Ethics and Mandatory Vaccination Policies. May 2011.

You are the FLU Hospital union representative, how do you advise your members?

STATE LAWS ADDRESSING HCW INFLUENZA VACCINATION



SOURCE: GWU/SPHHS,
Developing a Model State Law
Summer 2011

LEGAL ARGUMENTS RELATED TO MANDATORY VACCINATION OF HCWs

Supreme Court has addressed:

- Deprivation of personal rights without appropriate legal process
- Limiting freedom of religion
- Rights of a competent adult to refuse medical treatment
- Freedom to enter into private employment contracts

Source: Jacobson v. Massachusetts, 197 U.S. 11(1905); *Zucht v. King*, 260 U.S. 174 (1922); *Prince v. Massachusetts*, 321 U.S. 158 (1944). ; *Cruzan v. Director, Missouri Department of Health*, 497 U.S. 261 (1990).; *Williamson v. Lee Optical Co.*, 348 U.S. 483 (1955); *West Coast Hotel, Co. v. Parrish*, 300 U.S. 379 (1937); *Muller v. Oregon*, 208 U.S. 412 (1908).

CONCLUSION

1. It is impossible to predict with absolute certainty how a court will decide any case.
2. However, courts must rely on previous relevant decisions.
3. Health care workers have the same rights as other individuals.
4. In the final analysis, courts will prioritize the rights of the community as a whole when considering the case of mandatory health worker vaccination.

You are a patient who is deciding whether or not to have a procedure at FLU Hospital during the influenza season, what are your expectations?