

Influenza Vaccination for Health Care Personnel – For Your Patients’ Sake

The single best way to reduce influenza transmission in health care settings is to increase rates of flu vaccination for health care personnel (HCP). Achieving high-rates of influenza vaccination for HCP reduces morbidity and mortality among patients, providers, ancillary staff and the community. Vaccination rates among HCP have remained low for many years, despite clear recommendations and its importance as a necessary health and safety initiative. The Vermont Behavioral Risk Factor Surveillance Survey (BRFSS) shows that in 2009, 61% of HCP received an influenza vaccine. However, studies have shown that 80% coverage is needed to achieve herd immunity and prevent influenza transmission in health care settings.

Influenza is highly contagious, causing high morbidity and mortality among the most vulnerable, especially the very young, the elderly and people who are immunocompromised. Research has demonstrated that when the vaccine and circulating viruses are considered to be antigenically similar, influenza vaccination prevents laboratory confirmed influenza illness among 70-90% of healthy adults younger than 65 years of age.¹ The influenza A (H1N1) 2009 monovalent vaccines were highly effective; more than 90% of adults developed anti-influenza antibody levels that were considered to be protective.

The spectrum of signs and symptoms of influenza varies widely, ranging from asymptomatic infections to severe illness and death. Individuals are generally infectious from about one day before to five days after symptom onset. Approximately 30-50% of infected persons may remain asymptomatic, but they can still transmit the virus to others. Influenza transmission has been documented among patients in a variety of clinical settings, and infections have been linked to unvaccinated HCP. Rates of influenza in patients fall in direct proportion to vaccination rates of HCP in settings such as hospitals and nursing homes.

Research has shown that HCP are susceptible to flu vaccine myths, including the concern that they will get the flu from the vaccine and a lack of awareness of their ability to transmit flu. It is essential that HCP receive accurate information through multiple sources, because research has shown that an individual’s attitude toward vaccination is a key determinant for being vaccinated. HCP have a duty to protect their patients. With strong support from the leadership in health care settings, annual influenza vaccination will become a norm leading to improved patient safety.

Recommendations for health care settings:

- ➔ Educate HCP regarding the benefits of influenza vaccination.
- ➔ Offer influenza vaccine annually to all eligible HCP.
- ➔ Provide influenza vaccination at the work site at no cost.
- ➔ Obtain a signed declination from HCP who decline vaccination.
- ➔ Provide feedback to subgroups with low rates.
- ➔ Make vaccination an infection control requirement.

The *Infectious Disease Bulletin* can be viewed at: <http://healthvermont.gov/pubs/IDB/index.aspx>
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¹ CDC. Prevention and Control of Influenza with Vaccines: Recommendations of the ACIP. MMWR. 201059(ER)1-62.

