



ANA BACKGROUNDER: Seasonal Influenza 2011-2012

Introduction

Influenza is a contagious respiratory illness that is caused by influenza viruses infecting the nose, throat and lungs. Influenza illness can range from a mild illness to death. ANA continues to strongly urge nurses and other health care personnel (HCP) receive the seasonal influenza vaccine in efforts to prevent influenza transmission to themselves, as well as their patients, coworkers, families and communities.

Background

Influenza outbreaks in hospitals and long-term care facilities have been associated with low vaccination rates among registered nurses and other HCP. Concurrently, higher vaccination levels among HCP have been associated with a lower incidence of nosocomial influenza cases. Vaccination of HCP has also been associated with reduced work absenteeism. Considering that the influenza vaccination is the most effective method for preventing influenza virus infection and its potentially severe complications, it is vital that direct caregivers receive the vaccine. The Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC) has recommended that health-care facilities consider the level of vaccination coverage among HCP to be one measure of a patient safety quality program and implement policies to encourage vaccination, including mandatory declination forms.

Since the length of the influenza season varies, with the peak in the influenza season not occurring in certain communities until April or May, vaccination efforts should continue throughout the season, past the December cut off vaccination that generally has happened. Successful HCP vaccination programs are multifaceted, combining education and communication to combat fears, myths, and misconceptions about influenza and influenza vaccines, use of reminder call systems, efforts to remove administrative and financial barriers, role modeling, and monitoring and feedback on vaccination coverage.

Healthy People 2020 have set a goal of 90% vaccination rates for HCP. The baseline used in this program was 45% of HCP in 2008.

Upcoming Influenza Vaccination Season

Everyone 6 months and older should get an influenza vaccine each year. This recommendation has been in place since [February 24, 2010 when CDC's Advisory Committee on Immunization Practices \(ACIP\)](#) voted for “universal” influenza vaccination in the U.S. to expand protection against the influenza to more people. While everyone should get an influenza vaccine each influenza season, it's especially important that certain people get vaccinated either because they are at high risk of having serious influenza-related complications or because they live with or care for people at high risk for developing influenza-related complications.

Influenza Vaccination Composition for 2011-2012

The World Health Organization recommends viruses for use in influenza vaccines twice yearly one vaccine each for the northern and southern hemisphere influenza seasons. For the northern hemisphere 2011-2012 influenza season, the WHO recommended composition included the following three viruses:

- an A/California/7/2009 (H1N1)-like virus,
- an A/Perth/16/2009(H3N2)-like virus, and
- a B/Brisbane/60/2008-like virus..

The selection of viruses for inclusion in the upcoming influenza season are based on the predicted influenza strain projected to be the main circulating viruses based on those of the previous season. The WHO recommendations provide guidance to national public health authorities as well as to manufacturers of vaccines for the composition of influenza vaccines for the next season. Viruses in influenza vaccines are updated frequently, unlike other vaccines, because influenza viruses that circulate continue to evolve.

The strains recommended in the 2011-2012 influenza season are the same components contained in the 2010-2011 influenza season vaccine in the northern and southern hemispheres. Key point is that even though the vaccine contains the same viruses, it is important to get the seasonal influenza vaccination again in 2011-2012 because the immunity attained through the vaccine is not long lasting so protection is short lived at this time.

ANA Position on Getting Vaccinated

Because the influenza vaccine directly affects nurses and their patients, ANA has been proactive in shaping policy and legislation that relates to it. ANA strongly recommends that nurses and all other HCP who have direct patient contact be vaccinated against the influenza virus. ANA is especially adamant about nurses receiving an annual influenza vaccination. ANA further maintains that nurses involved in direct patient care – and particularly nurses working with persons who have HIV/AIDS, are immuno-compromised or in other high-risk groups – get vaccinated against the influenza in order to prevent any outbreaks of the virus.

Seasonal influenza vaccination coverage rates of HCP consistently remains below 50%.

ANA believes this is an alarmingly low percentage, especially given health care professionals' categorization as an influenza high-risk group, their access to the vaccine and their daily contact with patients, many of whom also are in influenza high-risk categories. According to the Center for Disease Control and Prevention, between 1976 and 2006, estimates of influenza-associated deaths in the United States range from a low of about 3,000 to a high of about 49,000 people.

Because influenza annually leads to 200,000 hospitalizations, nurses who are vaccinated against the virus not only safeguard themselves, but they also help protect their patients, coworkers, visitors, families and communities.

ANA Past Actions

2005- ANA launched its "Everybody Deserves a Shot at Fighting Flu" Campaign. As part of this initiative a survey was conducted that revealed 86% of nurses polled are extremely or very concerned about their patients becoming infected with influenza. Also, 95% of nurses agree that all health care workers should get vaccinated against influenza each year; however only 5% of the nurses polled believed all of their co-workers received an influenza vaccination in 2004 (ANA, 2005). These startling results have been used to leverage increased awareness in nurses of the importance of influenza vaccination through press releases, dedicated web pages, and articles in ANA sponsored publications.

2006 - the ANA House of Delegates passed the Resolution *Pandemic and Seasonal Influenza*, which resolved that ANA strongly urges all RNs involved in direct patient care to receive the seasonal influenza vaccine annually. In December 2006, the ANA Board of Directors approved the Consent Action Report entitled "Seasonal Influenza Vaccination for Registered Nurses", which resolved that ANA support comprehensive influenza vaccination programs for RNs that also provides an "opt out" with the completion of an informed declination form.

2006-07 and **2007-08** – ANA launched the "Best Practice in Seasonal Influenza Vaccination Campaigns". This recognition campaign elicited responses from health care organizations with effective seasonal influenza vaccination programs that resulted in increased seasonal influenza vaccination of registered nurses and other healthcare personnel. Effective strategies from the awarded programs were compiled into a brochure and multiple articles to assist other organizations interested in increasing vaccination coverage rates. Occupational health and infection control nurses in various healthcare organizations can utilize the brochure and other materials developed based on the findings in planning and implementing their respective programs.

2010- ANA Board of Directors reaffirmed that all registered nurses should be vaccinated for the seasonal influenza season and during a pandemic influenza event in order to prevent the spread

of disease; protect the health and welfare of patients; and promote the development of societal immunity against the circulating influenza strain.

Influenza General Facts

- Influenza claims many lives each year.
- Seasonal influenza and its related complications account for over 200,000 hospitalizations annually according to a 2004 study conducted by the CDC.
- Rates of serious illness and death are highest among persons over age 64, children less than age 2, and persons of any age who have medical conditions that place them at increased risk for complications from influenza.
- More than 90 percent of influenza-related deaths occur in people age 65 and older.
- 10 percent to 20 percent of the general population gets influenza each year.
- In the United States, annual epidemics of influenza typically occur during the fall or winter months, but the peak of influenza activity can occur as late as April or May
- October and November are the best months in which to get vaccinated against seasonal influenza, but getting vaccinated through March can still help in preventing the spread of the influenza because the influenza season does not peak until March in some years.
- Scientists make a different vaccine every year because the strains of virus causing influenza change from year to year and immunity is short lived.
- Because the strands of influenza viruses used in the trivalent influenza vaccine are “killed” following vaccination, they *cannot* cause infection.
- Antibodies take about two weeks to develop after getting vaccinated.
- Influenza viruses spread in respiratory droplets caused by coughing and sneezing. They usually spread from person to person but also can be spread from touching something with the influenza virus on it and then touching the mouth, eyes or nose.
- Healthy adults may be able to infect others beginning **one day before symptoms** develop and up to **five days** after becoming sick.
- Healthy persons who are clinically or **asymptotically** infected can transmit influenza virus to persons at higher risk for complications from influenza.
- **If you get influenza, stay home from work or school for at least 24 hours after the fever has ended.** If you are sick, don't go near other people to avoid infecting them.
- Spread of the influenza virus may be prevented by using good hand-washing hygiene and respiratory etiquette (using a tissue or a handkerchief or coughing into one's elbow, for example).
- Influenza virus can cause disease among persons in any age group, but rates of infection are highest among children.
- The influenza-related hospitalization rates are highest among children aged zero to one year.

- Children are two to three times more likely than adults to get sick with influenza and frequently spread the virus to others, according to the National Institute of Allergy and Infectious Diseases. In 2004, the first year all children 6-23 months were recommended for influenza vaccination, the vaccination rate among children aged 6-23 months was up sharply from 7.7 percent in 2002 to 57.3 percent, according to the CDC.

ANA Advocacy Activities

- ANA participates in meetings of federal advisory committees on immunization including the National Vaccine Advisory Committee (NVAC) and the Advisory Committee on Immunization Practices (ACIP).
- ANA signed on to the Adult Immunization Call to Action of National Foundation for Infectious Diseases (NFID).
- ANA attended and was a participant on panels at the **National Influenza Vaccine Summit** in 2008, 2009 and 2010.
- **ANA Best Practices in Influenza Immunization Campaign**—ANA’s recognition campaign that was designed to identify organizations that have the best success stories for getting their staff vaccinated. These success stories have been compiled to represent the best practices in immunization programs that result in increased immunization acceptance and accessibility among HCP.
- In May 2008, ANA signed on to support an **open letter to Congress** requesting that policy-makers support vaccination, particularly of children, to reduce the spread of vaccine-preventable diseases.
- ANA participated in multiple work groups hosted by the National Foundation for Infectious Diseases, resulting in the publications *Call to Action: Influenza Immunization Among Health Care Workers* (2003), *Call to Action: Influenza Immunization Among Health Care Personnel* (2008), *Call to Action: Improving Influenza Vaccination Rates in Adults and Children with Diabetes* (2006), and *Immunizing Healthcare Personnel Against Influenza: A Best Practices Report* (2008).

Communications Outreach and Education

Media Outreach and Response – ANA regularly responds to media inquiries regarding vaccination preparedness from major media outlets.

Member Education/Publications – Members have been updated on the influenza issue through:

- NursingWorld Influenza webpage:
<http://nursingworld.org/MainMenuCategories/OccupationalandEnvironmental/occupationalhealth/Influenza.aspx>
- NursingWorld 2009 H1N1 – Information for Nurses webpage:
<http://www.nursingworld.org/H1N1>
- Pandemic Flu Toolkit:
<http://www.nursingworld.org/MainMenuCategories/HealthcareandPolicyIssues/DPR/KnowYourDisaster/PandemicFluToolkit.aspx>
- *Best Practices in Seasonal Influenza Immunization Programs for Health Care Personnel*, ANA Occupational Health & Safety Series Brochure, 2007.
- *American Nurse Today*, Seasonal influenza: A nurse-and-patient relationship, September/October, 2010.
- *American Nurse Today*, The Challenges of Influenza Season 2009-10, September/October 2009.
- *American Nurse Today*, Seasonal Influenza Vaccination and the Nurse, September 2008.
- *American Nurse Today*, Best Practices in Seasonal Influenza Immunization, September 2007.
- *The American Nurse* (“CDC gives health care workers priority influenza immunization status” p. 13 September/October 2005 issue) and monthly during influenza season through the *CMA Insider*.
- *American Journal of Nursing*, Increasing Influenza Vaccination of Health Care Workers, Dec 2005, 105(12), 96.

CDC Influenza Reports

- Prevention and control of influenza with Vaccines: recommendations of the Advisory Committee on Immunization Practices (ACIP), 2010. *MMWR* 2010 July 29, 2010 / 59(Early Release);1-62.
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr59e0729a1.htm>
- Novel H1N1 Flu CDC website:
<http://www.cdc.gov/h1n1flu/>
- Influenza Vaccination of Health-Care Personnel: recommendations of the Healthcare Infection Control Practices Advisory Committee (HICPAC) and the Advisory Committee on Immunization Practices (ACIP). *MMWR* 2006, 55, 1-16.
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr55e209a1.htm>
- Respiratory hygiene/cough etiquette in health-care settings. Atlanta, GA: US Department of Health and Human Services, CDC; 2003.

<http://www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm>

- Prevention Strategies for Seasonal Influenza in Healthcare Settings.
<http://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm>

Influenza Resources for Professionals

- CDC Prevention and Control of Influenza with Vaccines
Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2010
<http://www.cdc.gov/mmwr/pdf/rr/rr59e0729.pdf>
- CDC Background Influenza Information –
<http://www.cdc.gov/flu/professionals/patiented.htm>
- CDC Recommendations for Influenza Vaccination of Health-Care Workers
<http://www.cdc.gov/flu/professionals/vaccination/hcw.htm>
- CDC Vaccine Selection for the 2011-2012 Influenza Season
<http://www.cdc.gov/flu/about/qa/vaccine-selection.htm>
- OSHA Fact Sheet—Seasonal Influenza Vaccination – Important Protection for
Healthcare Workers
<http://www.osha.gov/Publications/seasonal-flu-factsheet.pdf>
- CDC Vaccine Information Statements
<http://www.cdc.gov/vaccines/pubs/vis/default.htm#flu>

Live, Intranasal Influenza Vaccine (7/26/2011)
<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flulive.pdf>

Inactivated Influenza Vaccine (7/26/2011)
<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flu.pdf>
- CDC Cover Your Cough for Health Care Settings
Flyer: http://www.cdc.gov/flu/protect/pdf/covercough_hcp8-5x11.pdf
Poster: http://www.cdc.gov/flu/protect/pdf/covercough_hcp11x17.pdf
- CDC MMWR report—Influenza Vaccination of Health-Care Personnel
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5502a1.htm>
- CDC Flu Vaccination resources for Health Care Providers

<http://www.cdc.gov/flu/professionals/>

- Antiviral Guidance
<http://www.cdc.gov/flu/antivirals/>
- CDC Preventing the Flu: Good Health Habits Can Help Stop Germs
<http://www.cdc.gov/flu/protect/habits.htm>
- Free CDC Flu Materials
<http://www.cdc.gov/flu/professionals/flugallery/>
- National Foundation for Infectious Diseases—Influenza Immunization Among Health-Care Personnel: **Call to Action**
<http://www.nfid.org/pdf/publications/fluhealthcarecta08.pdf>

Influenza Resources for Consumers

- CDC General Influenza Information – <http://www.cdc.gov/flu/>
- CDC hotline: 1-800-CDCINFO