

# Environment, health, and safety

## Best practices for seasonal influenza immunization

By Kristen Welker-Hood, ScD, RN, and Nancy L. Hughes, MS, RN

Seasonal influenza and influenza-related complications are the most frequent causes of death from a vaccine preventable disease in the United States. In 2006, the February 24 *Morbidity and Mortality Weekly Report* stated that approximately 36,000 deaths occurred each year between 1990 and 1999 due to complications of influenza infection.

The transmission of influenza from healthcare personnel (HCP) to patients can create serious healthcare problems, especially among those who are at high risk for complications related to influenza. Multiple effective measures are available that can reduce the risk of health care-associated influenza; however, the most successful measure for preventing transmission is vaccinating healthcare personnel who come in contact with patients.

Since 1981, the Centers for Disease Control and Prevention (CDC) has recommended annual influenza vaccinations for all HCP who provide direct patient care. The CDC has identified HCP as a high-priority group for receiving the influenza vaccination. However, despite ongoing recommendations, vaccination rates, as measured by the CDC, remain low. Influenza among healthcare personnel, especially during an epidemic, can increase transmission of the virus to patients and may compromise the ability of an organization to provide care. According to a 2003 report from the National Foundation for Infectious Diseases, only 40% of HCP receive their annual vaccination; the national health objective is to reach a 60% vaccination rate by 2010.

Compounding the problem of low immunization rates of HCP is the high degree of subclinical disease prevalent among HCP during an influenza outbreak. Several studies have investigated the serologic evidence of influenza infection in HCP. One of these studies reported that 23% of HCP had serologic evidence of influenza infection after a mild influenza season. Of those HCP who tested positive, 59% could not recall having influenza and 28% could not recall having any respiratory infection. This finding suggests that there is a high proportion of asymptomatic illness among healthcare personnel.

HCP can not only acquire influenza from patients but can also transmit influenza to patients. Low vaccination rates among HCP and silent transmission of subclinical disease put vulnerable individuals (nurses, co-workers, pa-

tients, and family members) at risk for contracting influenza and suffering from influenza-related complications.

### ANA response

The low rate of vaccination among HCP is of great concern to the American Nurses Association (ANA). ANA is committed to advocating for the health of registered nurses and the patients to whom they provide care. In 2005, ANA launched the Everyone Deserves a Shot at Fighting Flu Campaign to urge all nurses and healthcare workers to be vaccinated for seasonal influenza. To further advance this effort, ANA launched the Best Practices in Seasonal Influenza Immunization Campaign in February 2007. This campaign was designed to increase the willingness of HCP to receive their seasonal influenza vaccine as well as to improve the effectiveness of influenza vaccination programs in healthcare organizations (HCOs) nationwide.

ANA's Best Practices in Seasonal Influenza Immunization Campaign served as a recognition program to identify HCOs that had the most successful programs for getting their staff vaccinated. One goal of the campaign was to assist other HCOs in emulating the most successful programs.

During the spring of 2007, HCOs across the country submitted their vaccination programs' success stories to ANA for consideration. These programs were evaluated on both qualitative and quantitative evidence of the individual program's effectiveness, including the strategies implemented to achieve high immunization rates.

Five organizations were identified as having best practices programs: Baylor Health Care System, Central Maine Medical Center, Seattle's Children's Hospital & Regional Medical Center, Emory HealthCare, and the Ohio State University Medical Center. Components of the best programs will be compiled into a *Best Practices in Seasonal Influenza Immunization* brochure along with other material to help guide other organizations to successfully increase HCP vaccination rates among their staffs. The materials will soon be available on ANA's website, [www.nursingworld.org](http://www.nursingworld.org).

ANA is continuing to strongly encourage all nurses and other HCP to protect themselves, their families, and their patients from seasonal influenza and the preventable death and hospitalizations that occur annually from this vaccine-preventable disease. ★

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