

ANA BACKGROUNDEERS: Influenza Season 2007-2008

Upcoming Flu Vaccinations

As the 2007-2008 Influenza season approaches, the Centers for Disease Control (CDC) Advisory Committee on Immunization Practices (ACIP) has released their updated recommendations on the prevention and control of influenza. Despite an increase in vaccination coverage in recent years, estimated vaccinated coverage remains unacceptably low among health care personnel (HCPs) at less than 50%. On January 1, 2007, The Joint Commission's infection control standard went into effect, requiring accredited organizations to offer influenza vaccination to staff, including volunteers and licensed independent practitioners with close patient contact. The ACIP encourages the use of strategies to increase vaccination coverage rates, including reminder/recall systems, standing order programs, scheduled immunizations **throughout** the influenza season, and the use of declination forms.

Influenza outbreaks in hospitals and long-term care facilities have been associated with low vaccination rates among HCP. Concurrently, higher vaccination levels among staff have been associated with a lower incidence of nosocomial influenza cases. Vaccination of HCP has also been associated with reduced work absenteeism, as well as fewer deaths among nursing home patients and elderly hospitalized patients. Considering that the influenza vaccination is the most effective method for preventing influenza virus infection and its potentially severe complications, it is vital that health care providers receive the vaccine. The ACIP is now recommending 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 influenza season varies, and influenza might not appear in certain communities until February or March, vaccination efforts should continue throughout the season. Successful HCP vaccination programs are multifaceted, combining publicity and education to combat fears 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. Standing orders programs ensures that vaccination is offered, and should be supervised by a licensed practitioner according to a physician-approved facility or agency policy. Standing order programs should be conducted by HCP trained to screen patient for contraindications to the vaccination, administer the vaccine, and monitor for adverse events.

Background

Because the influenza vaccine directly affects registered nurses and their patients, ANA is involved with this issue, and has been active in shaping policy and legislation that relates to it. A member of the National Nursing Immunization Network, ANA representatives regularly participate in meetings with the Department of Health and Human Services (HHS), the Centers for Disease Control and Prevention (CDC) and other governmental bodies that oversee and regulate the issue. In addition, ANA is

collaborating on and advocating for strategies that will negate future shortages, such as the one seen in the 2004-2005 flu season, with its other partners in the policy arena.

ANA Position on Getting Vaccinated

ANA strongly recommends that registered nurses and all other HCP who have direct patient contact be vaccinated against the influenza virus. Because the influenza virus has the potential to greatly affect nurses and their patients, 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 immunocompromised or in other high-risk groups – get vaccinated against the flu in order to prevent any outbreaks of the virus.

ANA is encouraging nurses to get vaccinated in part because, according to the CDC, **only 42% of health care professionals received immunizations against the flu virus last year.** ANA believes this is an alarmingly low percentage and one that is totally unacceptable, especially given health care professionals' categorization as an influenza high-risk group, their access to the vaccine and their daily contact with vulnerable patients, many of whom also are in high-risk influenza categories. Because influenza annually leads to 200,000 hospitalizations, resulting from complications, and 36,000 deaths each year, nurses who are vaccinated against the virus not only safeguard themselves, but they also help protect their patients, their families and their communities.

ANA's Best Practices in Seasonal Influenza Immunization Campaign 2006-2007

The low rate of vaccination in health care workers, particularly among registered nurses, is very concerning to the American Nurses Association (ANA) as we are committed to advocating for the health of nurses and the patients that they serve. This commitment to worker health and patient safety was the impetus for ANA's 2006-07 *Best Practices in Influenza Immunization Campaign*. This recognition campaign was targeted at increasing the acceptance and effectiveness of influenza vaccination programs nationwide. The top five best practices in seasonal influenza immunization programs were recognized.. Success stories have been compiled to represent the best practices in immunization programs that resulted in increased immunization acceptance and accessibility among HCP. Strategies for improving vaccination rates and elements of an effective immunization program used by the participants of the Best Practices in Seasonal Influenza Immunization Campaign will be compiled in a brochure (currently under development) as well as an article in *American Nurse Today* to assist others to implement the components of the best programs and increase the seasonal influenza immunization rates at their facilities.

Influenza General Facts

- Approximately 36,000 people die each year as a result of the influenza.
- More than 200,000 people are hospitalized each year due to influenza or influenza related complications.

- 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.
- Less than 50% of health care professionals were vaccinated against the flu during the 2006-2007 influenza season. ANA hopes to counteract this alarming and unacceptably high percentage through greater education and awareness among nurses.
- 10 percent to 20 percent of the general population gets influenza each year.
- Influenza season typically runs from November to March but can begin as early as October.
- October and November are the best months in which to get a flu shot, but getting vaccinated in December or later will still help in preventing the spread of the flu.
- Scientists make a different vaccine every year because the strains of virus causing influenza change from year to year.
- Because the strands of flu 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.
- Flu 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.
- 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).
- The 2007-2008 recommendations for the influenza season, Advisory Committee on Immunization Practices (ACIP) has reemphasized its recommendation to include **annual influenza vaccinations for all children aged 6--59 months** (and their household contacts and out-of-home caregivers).
- Influenza virus can cause disease among persons in any age group, but rates of infection are highest among children.
- Among children aged zero to four years, hospitalization rates ranged from approximately five per thousand for children with low-risk medical conditions to one per thousand for children with our high-risk medical conditions. The 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 the flu 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 flu 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

- **CDC** – ANA regularly participates in conference calls held by the CDC to update the health provider community regarding the flu vaccine shortage.

Communications Outreach and Education

Media Outreach and Response – ANA regularly responds to media inquiries regarding flu vaccination preparedness from major media outlets. Please check this site for media updates as the 2007-2008 flu season progresses.

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

- *American Nurse Today*, Best Practices in Seasonal Influenza Immunization, September 2007.
- *The American Nurse* (“CDC gives health care workers priority flu immunization status” p. 13 September/October 2005 issue) and monthly during flu season through the *CMA Insider*.
- *American Journal of Nursing*, Increasing Influenza Vaccination of Health Care Workers, Dec 2005, 105(12), 96.

Updated CDC Influenza Reports

- 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>
- Prevention and control of influenza: recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR 2007; 56:1-54. <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr56e629a1.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>
- Childhood Influenza Vaccination Coverage--United States, 2004—2005 Influenza Season. *MMWR: Weekly*, October 6, 2006, 55(39), 1062-1065. <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5539a1.htm>
- Guidelines and Recommendations: Infection Control Guidance for the Prevention and Control of Influenza in Acute-Care Facilities <http://www.cdc.gov/flu/professionals/infectioncontrol/healthcarefacilities.htm>

Influenza Resources for Professionals

- 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 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 guidelines for Prevention and Control of Influenza (2007 recommendations of the Advisory Committee on Immunization Practices):
<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr56e629a1.htm>
- 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/mmwr/preview/mmwrhtml/rr5502a1.htm>
- Antiviral medications for Influenza (Last Updated November, 2006):
<http://www.cdc.gov/flu/professionals/treatment/>
- CDC’s Flu Gallery (2007-2008 campaign materials to be released September 2007)
<http://www.cdc.gov/flu/professionals/flugallery/>
- CDC Influenza Vaccine Bulletins
<http://www.cdc.gov/flu/professionals/flubulletin.htm>
- National Institute of Allergy and Infectious Diseases “Focus on Flu” section –
<http://www3.niaid.nih.gov/news/focuson/flu/default.htm>
- National Foundation for Infectious Diseases—Influenza Immunization Among Health-Care Workers: **Call to Action**
<http://www.nfid.org/pdf/publications/calltoaction.pdf>

Influenza Resources for Consumers

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

Vaccine Information Statements

- Inactivated Influenza Vaccine --
<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flu.pdf>
- Live, Intranasal Vaccine --
<http://www.cdc.gov/vaccines/pubs/vis/downloads/vis-flulive.pdf>