Universal Influenza Prevention: Safeguarding Our Patients and Our Co-Workers

1. Hartford HealthCare instituted universal influenza protection in 2012 – requiring all staff to receive the influenza vaccine or to apply for an exemption. We are now obliged to receive the influenza vaccine or have an approved exemption every fall. What are the benefits of this program?

Safety is one of our core values and the well being of our patients/clients is our first concern. In recent decades, the annual deaths associated with influenza have ranged from 3,000 to 49,000 in the United States. More than 200,000 individuals are hospitalized with flu-related complications each year. Flu is most serious for the young, the elderly and those who are sick, frail and immune-compromised. Most of our patients fall into these categories. Over the years, Hartford HealthCare member organizations offered free and convenient flu shots, but the results of voluntary vaccination were disappointing. Only about half of us rolled up our sleeves. Since the start of our universal flu prevention program at HHC, nearly 100 percent of employees have been vaccinated each flu season – and non-vaccinated employees wore masks. There are a number of key studies that support the link between a high employee flu vaccination rate and patient safety.

2. What is new this year?

   a. Applications for exemption applications must be submitted by Oct. 1. The vaccination deadline is Nov. 11 at 5 p.m. (New staff whose association with HHC begins Nov. 12 through the end of flu season will be vaccinated upon hire or prior to assignment.)

3. Does everyone with an exemption from previous years need to reapply?

   If you have an exemption, you do not need to reapply. Medical and religious exemptions will carry over into the 2019-2020 flu season.

4. Can you define “staff?”

   Staff includes the following individuals: all employees, licensed independent practitioners who come on the premises (with any type of staff privilege), volunteers, students and vendors/contractors of HHC who perform work at any
HHC facility and such work occurs on one or more working days between October 1 and the end of the flu season (as determined by the HHC chief medical officer), regardless of clinical responsibility or patient/client contact.

5. **What counts as an “HHC facility?”**

This is any campus or location controlled by Hartford HealthCare or at which Hartford HealthCare patients are located, inclusive of patient homes.

6. **What is the deadline for getting a flu shot?**

All HHC staff must receive influenza vaccination – or provide evidence of having been vaccinated elsewhere during the current flu season – by Nov. 11 at 5 p.m. Only those who have applied for – and have been granted – a medical or religious exemption are excluded from this requirement. Those seeking an exemption must apply by Oct. 1 (see “exemptions” below).

7. **How will this policy be enforced?**

Universal flu prevention is a condition of employment and continued association with HHC. If you do not have an approved exemption (see below) and you do not get a flu shot by Nov. 11 at 5 p.m., you will be suspended without pay until proof of vaccination or a request for exemption has been received by the organization and approved. The suspension period will be a maximum of two weeks at which point the staff member will be terminated. Staff members who submit a request for exemption from influenza vaccination after Oct. 1 of any year will be placed on a written warning for not following the prescribed timeline. Staff on leave of absence at the time of the deadline will be provided thirty days upon their return to complete the requirement. Non-compliance will result in the sanctions above.

8. **How will this policy be enforced for non-employed staff members?**

Non-compliant, non-employed independent licensed practitioners will be referred to the appropriate medical staff organization. Students’ programs will be contacted and they will need to arrange another training site. Volunteers will be denied access to the facility. For vendors, the company will be contacted and informed to send another qualified person who has been vaccinated or termination of the business relationship will be evaluated.

9. **What infection-control measures will be required of exempt individuals?**

All those who receive an exemption will be required to wear a mask for the duration of the flu season whenever they may be within six feet of an area where patients/clients may be encountered – regardless of the location of the patient, the extent of interaction with the patient or whether a patient is currently present. Such areas include clinical units, hallways, lobbies and public dining areas. (The mask may be removed when eating.)
10. How will employees who have received the vaccine be identified to co-workers, patients/clients and the public?

Those receiving the vaccine will wear a color-coded tag on their ID badges. The colors will signify “vaccinated” or “exemption.” This tag must be worn whenever the ID badge is worn. Individuals will receive tags when they get their flu shots or are granted an exemption. The information on the badge is not a HIPAA violation. HIPAA specifically exempts such health information related to employment.

11. Not all employers require flu shots. Why does HHC require all staff members to be vaccinated?

Health care workers are a special group. No matter what our job, our primary customers are our patients/clients, and their safety always comes first. We require staff members to be tested for tuberculosis and illegal drug use as a condition of employment. This is one further step to keep our patients safe. Ultimately, it’s not about us; it’s about the people in our care.

12. Who is eligible for a medical exemption?

a. Persons who have a severe allergy to influenza vaccine or components of the vaccine as defined by federal health officials.

b. Persons who have been diagnosed with Guillain-Barre Syndrome within six weeks of a prior influenza vaccination.

13. How do I apply for a medical exemption?

Submit a Request for Medical Exemption from Universal Influenza Vaccination form to Hartford Hospital Occupational Health Service (HHOHS) by Oct. 1. The form is available on the HHC (internal) intranet at http://hhconnect.org/flu, and on the HHC (external) Internet at http://www.hartfordhealthcare.org/flu

1. The Medical Review Committee will review all completed requests. Names and other identifying information will be removed from the forms before the committee reviews them.

2. Hartford Hospital Occupational Health Services will contact each individual requesting an exemption as to the outcome of his or her request. This decision is final.

14. Who is eligible for a religious exemption?

Staff members may request an exemption (by Oct. 1) on the basis of a sincerely held religious belief or practice that prohibits them from receiving the influenza vaccine. The form is available at the addresses given above.
15. How do I apply for a religious exemption?

Staff may submit a Request for Religious Exemption from Universal Influenza Vaccination form to Hartford Hospital Occupational Health Service (HHOHS) by Oct. 1. A system-wide Religious Exemption Review Committee has been established to review these requests. The committee will review all completed requests. Names and other identifying information will be removed from the forms before the committee reviews requests. Occupational Health Services will contact each individual requesting an exemption as to the outcome of his or her request. This decision is final. The form is available on the HHC (internal) intranet at http://hhcconnect.org/flu, and on the HHC (external) Internet at http://www.hartfordhealthcare.org/flu

16. If I am approved for a medical or religious exemption, do I have to wear a mask at work?

That depends on where you are situated at any given time. All persons who are approved for an exemption must wear a mask for the duration of the flu season when within six feet of an area where they are likely to encounter patients. (See question #11 above).

17. Can I choose to decline the vaccination and just wear a mask during flu season?

No, personal exemptions will not be allowed. The only acceptable exemptions are for medical and religious reasons. Influenza vaccination will be a condition of employment for continued association with Hartford HealthCare member organizations regardless of clinical responsibility or patient contact.

18. How will the mask requirement be enforced?

Wearing a mask is a way to show our patients and families that you care about their safety. Employees subject to the requirement who do not have “vaccinated” badge tags will be told to put on a mask by their managers. Compliance is expected. Failure to do so will result in initiation of the standard disciplinary process of the organization.

19. What will the public think about staff wearing masks?

Planning and Marketing, Nursing Education, Occupational Health and Infectious Disease personnel will continually educate staff and stakeholders, including our patients/clients and visitors. Various means of traditional and social media will be utilized; this will include appropriate signage throughout each system location.
20. **If a staff member who is granted one of the two exemptions refuses to wear the mask as directed, what are the consequences?**

   Failure to follow the policy will result in the initiation of the standard disciplinary process of the organization.

21. **How do we enforce the requirement related to licensed independent practitioners and employed physician and advanced practitioners?**

   This will occur in conjunction with local medical staff organizations.

22. **Do I have to receive my vaccination here or can I get vaccinated at my doctor’s office or pharmacy?**

   Vaccinations from other facilities/providers are accepted as long as documentation is submitted including the staff member’s name, employee ID (if applicable), employee’s date of birth and date of vaccination. All documentation must be submitted before Nov. 11 at 5 p.m.

23. **If the vaccine is not available to inoculate all staff within the stated timeframe, what is the next step?**

   The timeframe would be adjusted until supplies are available. All policy requirements would remain in effect on this new schedule.

**Influenza and Influenza Vaccine**

24. **What type of flu vaccine do Hartford HealthCare member institutions provide?**

   Most of us will receive the standard, seasonal flu shot, which is an inactivated vaccine given by needle. The vaccine provided by HHC is “quadrivalent,” which means it contains four strains, which makes it more protective than the traditional “trivalent” vaccine, which includes three strains. Receiving a trivalent vaccine provides good protection and those receiving such a vaccine elsewhere (at a physician’s office or pharmacy, for example) will have fulfilled their flu-vaccine requirement at HHC. The single-dose vaccine product we use is considered thimerosal- and latex-free. Those with identified egg allergy will receive the egg-free, cell-based vaccine.

25. **I understand that the nasal-spray vaccine (FluMist) is an acceptable form of flu vaccination this year. What are the restrictions for the use of this vaccine?**

   According to the CDC, the nasal spray is approved for use in non-pregnant individuals, 2 years through 49 years of age. People with some medical conditions...
should not receive the nasal spray flu vaccine. Individuals with those conditions include:

- Children younger than 2 years
- Adults 50 years and older
- Pregnant women
- People with a history of severe allergic reaction to any component of the vaccine or to a previous dose of any influenza vaccine
- Children 2 years through 17 years of age who are receiving aspirin- or salicylate-containing medications.
- People with weakened immune systems (immunosuppression)
- Children 2 years through 4 years who have asthma or who have had a history of wheezing in the past 12 months.
- People who have taken influenza antiviral drugs within the previous 48 hours.
- People who care for severely immunocompromised persons who require a protected environment (or otherwise avoid contact with those persons for 7 days after getting the nasal spray vaccine).

In addition, the following conditions are precautions to the use of the nasal spray influenza vaccine:

- Asthma in people aged 5 years and older.
- Other underlying medical conditions that can put people at higher risk of serious flu complications. These include conditions such as lung disease, heart disease (except isolated hypertension), kidney disease (like diabetes), kidney or liver disorders, neurologic/neuromuscular, or metabolic disorders. See “People at High Risk of Developing Flu–Related Complications” at https://www.cdc.gov/flu/about/disease/high_risk.htm
- Moderate or severe acute illness with or without fever.
- Guillain-Barré Syndrome within 6 weeks following a previous dose of influenza vaccine.

26. How does the flu vaccine work?

The vaccine causes antibodies to develop in the body. These antibodies provide protection against seasonal influenza virus infection. Each year, officials of the federal Centers for Disease Control and Prevention (CDC) review surveillance data from flu season in the southern hemisphere (where the flu season occurs during our summer) and design the vaccine to be effective against three or four strains of influenza likely to be circulating during our flu season.

27. Who should get a flu shot?

The CDC recommends routine influenza vaccination for all persons aged 6 months and older. It’s especially important for those who are at high risk of having serious flu-related complications or care for people at high risk. For that reason,
the CDC recommends that all health care workers be inoculated against flu.

28. Who should not get a seasonal flu shot?

Some people should not be vaccinated without first consulting a physician. They include:

1. People who have had a severe reaction to an influenza vaccination in the past;
2. People who developed Guillain-Barre syndrome (GBS) within 6 weeks of getting a flu vaccine previously;
3. Children younger than 6 months of age (seasonal influenza vaccine is not approved for use in this age group); and
4. People who have a moderate or severe illness with a fever should wait to get vaccinated until their symptoms lessen.

29. When should I get a flu shot?

Based on emerging information, it’s probably best for healthcare workers to get their flu shots in October and for the general population to get vaccinated between late October and early November. The duration of the vaccine’s effectiveness is about six months – with protection declining over time.

30. Can I get re-vaccinated later in the year?

A second dose later in the year actually is of little benefit and not recommended. Additionally, supplies of vaccine are often scarce as the season progresses and should be used for unvaccinated patients or their families.

31. Does flu vaccine work right away?

No. It takes about two weeks after vaccination for antibodies to develop in the body and provide protection against seasonal influenza virus infection. In the meantime, you are still at risk for getting the seasonal flu.

32. Why do I need to get vaccinated against the flu every year?

Flu viruses change from year to year. The immunity that is built up from having the flu caused from one virus strain doesn’t always provide protection when a new strain is circulating. A vaccine made against flu viruses circulating last year may not protect against the newer viruses. That is why the vaccine is updated to include current viruses every year.
33. Why do we see flu cases in September?

Flu season usually takes off after Thanksgiving, peaks at the end of January to Mid-February and lasts 12-20 weeks. But we always see sporadic cases in September, October and early November – usually associated with travel to Europe and the Middle East or visits to casinos in our East Region, which attract people from around the world.

34. Can I get the flu even though I got the flu vaccine this year?

Yes. The ability of flu vaccine to protect a person depends on two things:
1. The age and health status of the person getting vaccinated; and
2. The similarity or “match” between the virus strains in the vaccine and those circulating in the community. If the viruses and vaccine are closely matched, vaccine effectiveness is higher. If they are not closely matched, vaccine effectiveness can be reduced. However, it is important to remember that even when the viruses are not closely matched, the vaccine can still protect many people, reduce the severity of illness and prevent flu-related complications.

35. Is the flu vaccine safe?

Yes. Millions of doses of influenza vaccine have been distributed worldwide since the vaccine first became widely available in the 1950s. (It was first given to American soldiers in World War II.) Complications and side effects are extremely rare.

36. What are the side effects that could occur from the flu shot?

1. Soreness, redness, or swelling where the shot was given
2. Fever (low grade)
3. Aches. If these problems occur, they begin soon after the shot and usually last one to two days.
4. In rare instances, some people can have a serious allergic reaction. These reactions are more likely to occur among persons with a severe allergy to eggs, because the viruses used in the traditional seasonal influenza vaccine are grown in chicken eggs. (See information above regarding availability of cell-based vaccines without the use of hens’ eggs.)

37. Can the flu shot give me the flu?

No. The three or four influenza viruses contained in the seasonal flu vaccine are each inactivated (killed), which means they cannot cause infection. Flu vaccine manufacturers kill the viruses used in the vaccine when making vaccine, and batches of flu vaccine are tested to make sure they are safe.
38. I’m pregnant. It is safe for me to get a flu shot?

Yes. In fact, it is recommended. Pregnant women are more prone to serious flu-related illness than women who are not pregnant. Pregnant women ill with the flu also have a greater chance for serious problems for their unborn baby, including premature labor and delivery. Flu shots protect pregnant women, their unborn babies and even protect the baby after birth. (As with any other vaccine or medication, consult with your obstetrical provider about any questions or concerns you may have).

39. Why do some people not feel well after getting the flu shot?

The most common side effect of the seasonal flu vaccine in adults is soreness at the spot where the shot was given, which usually lasts less than two days. The soreness is often caused by a person’s immune system making protective antibodies to the killed viruses in the vaccine. These antibodies are what allow the body to fight against seasonal flu. The needle stick may also cause some soreness at the injection site. According to the CDC, rare symptoms include fever, muscle pain, and feelings of discomfort or weakness. If these problems occur, they are very uncommon and usually begin soon after the shot and last 1-2 days.

40. What about people who get a flu vaccine and still get sick with flu-like symptoms?

There are several reasons why someone might get flu-like symptoms even after they have been vaccinated against the seasonal flu:

1. People may be exposed to an influenza virus shortly before getting vaccinated or during the two-week period that it takes the body to gain protection after getting vaccinated. This exposure may result in a person becoming ill with seasonal flu before the vaccine begins to protect them.
2. People may become ill from other (non-flu) viruses (such as rhinovirus) that circulate during the flu season, which can also cause flu-like symptoms.
3. A person may be exposed to an influenza virus that is not included in the vaccine. Unfortunately, some people can remain unprotected from seasonal flu despite getting the vaccine. This is more likely to occur among people that have weakened immune systems. However, even among people with weakened immune systems, the seasonal flu vaccine can still help prevent influenza complications.

41. I never get sick and I never had the flu so why should I get the shot?

If you’ve never gotten sick with influenza in the past, consider yourself lucky. Each year, new flu viruses circulate and your chance for getting sick with flu is the same whether or not you have gotten flu in the past. In addition, you can transmit influenza to your patients and co-workers for up to 48 hours before getting symptoms.
42. Does the flu vaccine have latex and thimerosal (preservative) in it?

The single-dose vaccine product that we use is considered latex- and thimerosal-free.

43. I am worried about getting Guillain-Barre Syndrome from the flu shot.

In the United States, an estimated 3,000 to 6,000 people develop Guillain-Barre Syndrome (GBS) each year on average, whether or not they received a vaccination. Studies indicate that you are more likely to develop this rare condition from having a viral illness than from getting the flu shot. One of the most commonly implicated sources is a bacterium (*Campylobacter jejuni*), which can be found in contaminated lunchmeat.

GBS is a rare disorder (with an annual occurrence of about 1 in 100,000 people) in which a person’s own immune system responds to an infection or other event, causing damage to their nerve cells. This results in muscle weakness and sometimes paralysis. GBS can cause symptoms that last for a few weeks. Most people recover fully from GBS, although some people have permanent nerve damage. It is important to remember that you have a greater risk of getting Guillain-Barre from a viral infection than from getting a flu shot.

44. What should I do if I feel sick?

Whether or not you received the flu vaccine, if you have a fever, a fever with rash, vomiting or diarrhea, you should stay home. If you have cold symptoms such as a cough, sneezing or sore throat, take care of yourself and return to work when you are feeling better. Sometimes symptoms can linger for days and weeks after returning to work. You should consider wearing a mask if you are still symptomatic once you return to work.

45. I understand that Hartford HealthCare uses the “normal-dose” flu vaccine. Why don’t we use the high-dose vaccine for those 65 and older, since they are at higher risk for flu-related complications?

The normal-dose vaccine provides adequate protection. We follow the recommendations of the CDC’s Advisory Committee for Immunization Practices (ACIP) – the federal body that establishes annual guidelines for influenza vaccination. Here is a link to the ACIP recommendations for 2019-20

https://www.cdc.gov/mmwr/volumes/68/rr/rr6803a1.htm?s_cid=rr6803a1_w

HHC selected two versions of the Quadrivalent vaccine (Afluria and Flucelvax) as these protect against one more strain of flu than the trivalent and are an appropriate match for our population.
However, if an individual’s healthcare provider has made a different vaccine-dose recommendation and administered that vaccine, that will be supported at HHC. Standard documentation for an off-campus flu shot is required.

**46. Where can I go for information not covered in these FAQs?**

For further information – and for answers to questions not answered here – email FluGuru: fluguru@hhchealth.org. If you don’t have access to email, call Hartford Hospital Occupational Health at 860-972-2175.