

Universal Influenza Prevention Frequently Asked Questions (FAQs)

2020-2021 KEY DATES:

- Deadline for exemption applications: Oct. 1
- Flu shot availability: Oct. 15 – Nov. 15
- Flu shot deadline: Nov. 16 at 5 p.m.

1. **Q: What are the benefits of universal influenza (flu) prevention)?**

A: 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 people are hospitalized with flu-related complications each year. Flu is most serious for the young, the elderly and those who are sick, frail or have conditions that weaken their immune systems. Most of our patients fall into these categories. A number of studies support the link between a high employee flu vaccination rate and patient safety.

2. **Q: The flu does not seem so bad, compared with COVID-19. Do I really need a shot?**

A: For 2020, flu vaccination is more important than ever! The U.S. Centers for Disease Control and Prevention has warned that our country could experience the worst public health crisis in modern history if a severe flu season coincides with the continued COVID-19 pandemic.

3. **Q: What's new this year?**

A: Flu shots will be available at free HHC clinics from Oct. 15 through Nov. 15. This is a bit later than in the past. To improve coverage and prepare for a longer-than-average flu season, HHC recommends waiting until at least Oct. 15 to get your shot.

4. **Q: What is the deadline for applying for an exemption?**

A: Applications for exemption must be submitted by Oct. 1.

5. Q: Does everyone with an exemption from previous years need to reapply?

A: If you have an exemption, you do not need to reapply. Medical and religious exemptions will carry over into the 2020-2021 flu season.

5. **Q: Who is required to get a flu shot?**

A: Anyone employed by Hartford HealthCare, 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 location one or more days between October 1 and March 31

6. Q: What counts as an HHC location?

A: Any campus or location controlled by Hartford HealthCare or at which Hartford HealthCare patients are located, inclusive of patient homes.

7. Q: How will the universal flu shot requirement enforced?

A: 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. 16 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 one week at which point the colleague will be terminated. Colleagues who submit a request for exemption from influenza vaccination after Oct. 1 of any year will receive a written warning for not following the prescribed timeline. Colleagues on leave of absence at the time of the deadline will be provided 30 days upon their return to complete the requirement. Non-compliance will result in the sanctions above.

8. Q: How will this policy be enforced for non-employed colleagues?

A: 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.

10. Q: How will colleagues who have received the vaccine be identified to coworkers, patients/clients and the public?

A: 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. Tags will be distributed at the time of the flu shot or when the exemption is granted. The information on the badge is not a HIPAA violation. HIPAA specifically exempts such health information related to employment.

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

13. Q: How do I apply for a medical exemption?

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

14. Q: How will requests for a medical exemption be reviewed?

A:

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 HealthCare Occupational Health Services will contact each person requesting an exemption as to the outcome of his or her request. This decision is final.

14. Q: Who is eligible for a religious exemption?

A: 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 on the HHC (internal) intranet at <http://hhconnect.org/flu>, and on the HHC (external) website at <http://www.hartfordhealthcare.org/flu>

15. Q: How will requests for a religious exemption be reviewed?

A: Staff may submit a Request for Religious Exemption from Universal Influenza Vaccination form to Hartford HealthCare Occupational Health Services 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 the applicant requesting an exemption as to the outcome of his or her request. This decision is final.

16. Q: How do we enforce the requirement related to licensed independent practitioners and employed physicians and advanced practitioners?

A: This will occur in conjunction with local medical staff organizations.

17. Q: Do I have to receive my vaccination at HHC, or can I get vaccinated at my doctor's office or pharmacy?

A: 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. 16 at 5 p.m.

18. Q: What type of flu vaccine can I expect to receive at Hartford HealthCare?

A: 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.

19. Q: 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?

A: Flumist may be appropriate for people aged 2-49. The CDC recommends the following people have additional discussion with their providers prior to receiving Flumist:

- 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).
- 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 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

19. **Q: How does the flu vaccine work?**

A: 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.

20. **Q: Who should get a flu shot?**

A: 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.

21. Q: Who should not get a seasonal flu shot?

A: 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)
4. People who have a moderate or severe illness with a fever should wait to get vaccinated until their symptoms lessen

22. Q: When should I get a flu shot?

A: Based on emerging information, it's probably best for healthcare workers to get their flu shots between late October and mid November. The duration of the vaccine's effectiveness is about six months – with protection declining over time, so we want to make sure your protection lasts into the spring in case this is a long flu season.

23. Q: Can I get re-vaccinated later in the year?

A: 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.

24. Q: Does flu vaccine work right away?

A: 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.

25. Q: Why do I need to get vaccinated against the flu every year?

A: 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.

26. Q: Can I get the flu even though I got the flu vaccine this year?

A: 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
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.

27. Q: Is the flu vaccine safe?

A: 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.

28. Q: What are the side effects that could occur from the flu shot?

A:

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. Anyone who develops a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, fast heartbeat, dizziness or weakness) should seek emergency care by dialing 9-1-1.

29. Q: Can the flu shot give me the flu?

A: 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.

30. Q: I'm pregnant. It is safe for me to get a flu shot?

A: 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).

31. Q: Why do some people not feel well after getting the flu shot?

A: 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.

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

A: 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.

33. Q: How can I tell the difference between seasonal flu and COVID-19?

A: According to the CDC, some of the symptoms of flu and COVID-19 are similar, so it may be hard to tell the difference between them based on symptoms alone. Testing may be needed to help confirm a diagnosis.

34. Q: What if I have flu-like symptoms such as fever, body aches and cough and report it on HHC SafePass?

A: You should remain home while you are ill and contact your healthcare provider for any concerns about your condition. You may be directed to have testing to determine the diagnosis. If you are directed to have testing, you should not return to work until the testing is complete. Return to work guidance will be provided based on your diagnosis.

35. Q: What should I do if I feel sick?

A: 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.

35. Q: I never get sick and I never had the flu so why should I get the shot?

A: 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.

36. Q: I am worried about getting Guillain-Barre Syndrome from the flu shot.

A: 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 lunch meat. 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.