

TITLE: Influenza Vaccination Policy
SECTION: Infection Prevention (IP)

PURPOSE

To limit the risk to healthcare personnel of occupationally acquired influenza, and to also limit the transmission of influenza from healthcare personnel to patients, other healthcare personnel, healthcare personnel's family members, and the community. Annual influenza vaccination is recommended for all healthcare personnel and persons in training for healthcare professions by the Advisory Committee on Immunization Practices (ACIP). The Centers for Disease Control (CDC) recommends an annual flu vaccine as the first and best way to protect against influenza.

POLICY

Saint Luke's Health System strives to provide a safe environment for all patients, visitors and employees.

As a condition of employment and/or affiliation, Saint Luke's Health System requires annual influenza vaccination for individuals that have job duties and/or physical presence inside any Saint Luke's Health System owned and/or leased facilities or properties. Saint Luke's Health System will offer influenza vaccination free of charge to these individuals.

PROCEDURE

1. The influenza vaccination program will be administered by Employee Health Services each year when the vaccine becomes available.
2. All SLHS employees, licensed independent providers (LIPs), contracted personnel, student affiliates and volunteers must be immunized against influenza each year. This includes, but is not limited to, those with and without direct patient care/contact.
3. The Due Date for individuals to have received the vaccine each year will be December 15th. If the requirement is not met by December 15th, the employee will be terminated as soon as is feasible thereafter.
4. An authorization/consent form is signed prior to the administration of the vaccine. Managers will be notified intermittently of the percentage rate of flu vaccine recipients within their departments.
5. Individuals who are vaccinated through services other than through the vaccination program administered by SLHS Employee Health Services will be required to submit proof of vaccination to Employee Health Services by the Due Date. Proof of vaccination may include a physician's note, a receipt, or a copy of the consent for vaccination.
6. Exemption to influenza vaccination may be granted due to medical contraindications or religious beliefs.
7. Employees who do not comply with this policy by the Due Date will be terminated (See [SLHS Requirements and Accountability Policy](#)). Non-employees who do not comply with this policy will be separated from affiliation with SLHS, or the non-compliance will be referred to the appropriate Administration team for review. Volunteers who do not wish to be vaccinated, and who do not have an approved exemption, may choose to transition to an inactive status during influenza season.

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8. Facility vaccination rates will be calculated and reported, as required, using the National Quality Forum (NQF) #0431: Influenza Vaccination Coverage Among Healthcare Personnel.
9. In the event of an influenza vaccine shortage, SLHS System Administration, Employee Health Services, Infection Prevention, Human Resources, Safety/Emergency Preparedness, and Pharmacy will conduct an evaluation of the situation (with other departments included as needed), to prioritize vaccine supplies.
10. During influenza season (as determined by the System Medical Director of Employee Health, the Medical Director of Infection Prevention and the local health departments), employees with Influenza Like Illness (ILI) should not work until they are symptom free, unless they have had a Polymerase Chain Reaction (PCR) test to prove they do not have influenza.

Employees and affiliates who are exempted, pursuing exemption or who intend to be vaccinated but have not yet completed their vaccination at the commencement of influenza season (as determined by the System Medical Director of Employee Health, the Medical Director of Infection Prevention and the local health departments), will need to mask at all times while inside any of the clinical SLHS owned and/or leased facilities or properties. For the non-clinical SLHS entities, individuals who are unvaccinated may be asked to wear a mask. Employees and affiliates who are vaccinated after the commencement of flu season will need to continue to mask for two weeks following vaccination to allow the vaccine to become effective.

New Employees

Individuals new to Saint Luke's Health System will be notified of the policy. New hires during influenza season will be expected to comply with the vaccination requirement immediately as part of their post-offer, pre-hire requirements. New hires coming into the System after March 31st of each year will be notified of the policy, and will be expected to comply with the vaccination requirement the next influenza season.

Medical Exemption

1. Individuals may request a medical exemption from the influenza vaccination requirement if they have a medical contraindication to receiving the vaccine that is a) listed in the vaccine manufacturer's prescribing information; or b) listed by the Centers for Disease Control and Prevention (CDC).
2. Individuals requesting a medical exemption must complete a [Request for Influenza Vaccine Medical Exemption form](#), signed by the individual's personal, treating physician or Advanced Practice Provider (APP). Request for Influenza Vaccine Medical Exemption forms signed by an emergency medicine physician or a hospitalist will not be accepted unless documentation proves treatment by that physician.
3. The Request for Influenza Vaccine Medical Exemption form must be fully completed, with a specific medical contraindication identified, or will be automatically rejected prior to review.
4. Request for Influenza Vaccine Medical Exemption forms signed by a chiropractor or a Registered Nurse who is not an APP will not be accepted for review.
5. Request for Influenza Vaccine Medical Exemption forms must be completed and turned in to Employee Health Services a minimum of 14 calendar days prior to the Due Date of **December 15th(i.e. must have reached Employee Health Services by end of day on December 1st)**.

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6. If additional information regarding a medical exemption request is needed, the individual will be notified by Employee Health Services, and will have 7 calendar days from the time of the notification to submit the additional information. An individual may be required to sign a release of information authorization form to allow Employee Health Services to request medical records to validate the medical exemption request or to request the individual's physician to contact Employee Health Services to discuss the request.
7. All Request for Influenza Vaccine Medical Exemption forms will be reviewed, and approved or denied by the System Medical Director for Employee Health Services, or his designated alternate.
8. Exemption requests that are denied by the System Medical Director for Employee Health Services, or his designated alternate, will be expected to complete influenza vaccination prior to the Due Date, or face termination (see [SLHS Requirements and Accountability Policy](#)).
9. Request for Influenza Vaccine Medical Exemption forms not received by Employee Health Services at least 14 calendar days prior to the Due Date will not be accepted, and the individual will be expected to complete the vaccination prior to the Due Date or face termination (see [SLHS Requirements and Accountability Policy](#)).
10. Individuals approved for vaccination exemption will be required to wear a mask for the duration of influenza season (as determined by the System Medical Director for Employee Health, the Medical Director of Infection Prevention and the local health departments) at all times while inside any of the clinical SLHS owned and/or leased facilities or properties. For the non-clinical SLHS entities, individuals approved for vaccination exemption may be asked to wear a mask. Masking requirement modification for those who would have difficulty masking due to health issues or would have difficulty masking during performance of the essential functions of their job will be evaluated on a case-by-case basis.
11. Individuals approved for vaccination exemption will be given a badge hang tag by Employee Health Services that will signify the mask requirement applies to that individual. The mask requirement is also mandatory, and will be enforced by the department manager. The badge hang tag will not distinguish between a medical or religious exemption.
12. Requests for exemption will need to be resubmitted each year for an updated review by Employee Health Services, unless a permanent exemption is granted by the System Medical Director for Employee Health. Employees may turn in a Request for Influenza Vaccine Medical Exemption form indicating their request is for the same reason as the previous year. Updated documentation will be requested, as needed, after review.

Religious Exemption

1. Individuals may request a religious exemption from the influenza vaccination requirement if they have a genuine and sincerely held bona fide religious belief that does not permit the individual to receive influenza vaccine. Requests for religious exemption will not be granted based upon secular philosophical, political, scientific or sociological objections to the influenza vaccine.

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2. Individuals requesting a religious exemption from influenza vaccination must complete a Request for Influenza Vaccine Religious Exemption form, and must submit documentation that addresses the individual's religious objection to the influenza vaccine. Submitting documentation from the individual's religious leader or from others aware of the individual's religious practice or belief may be helpful, but is not required.
3. Saint Luke's Health System recognizes that religious exemptions are not limited to traditional organized religions, but may also apply to other genuine and sincerely held religious, ethical, or moral beliefs.
4. Request for Influenza Vaccine Religious Exemption forms must be completed and turned in to Employee Health Services a minimum of 14 calendar days prior to the Due Date of December 15th (i.e. must have reached Employee Health Services by end of day on December 1st).
5. If additional information regarding a religious exemption from influenza vaccination request is needed, the individual will be notified by Employee Health Services, and will have 7 calendar days from the time of the notification to submit the additional information. Individuals may be required to discuss the request for exemption with the System Director of Spiritual Wellness or an alternate designee from the SLHS Spiritual Wellness Department. If a request is made to discuss the exemption and the individual does not discuss the matter with the System Director of Spiritual Wellness or alternate Spiritual Wellness designee prior to the Due Date, the request for exemption will be denied.
6. All [Request for Influenza Vaccine Religious Exemption](#) forms will be reviewed by the System Director of Spiritual Wellness or his designated alternate from the SLHS Spiritual Wellness department. If the System Director of Spiritual Wellness or his designated alternate determine that reasonable evidence suggests that the exemption is not based on a genuine and sincerely held religious belief, the System Director will consult with SLHS Human Resources Department.
7. If it is jointly determined by SLHS Human Resources Department and SLHS Spiritual Wellness that the exemption is not based on a genuine and sincerely held religious belief, the individual will be expected to complete influenza vaccination prior to the Due Date, or face termination (see [SLHS Requirements and Accountability Policy](#)).
8. Request for Influenza Vaccine Religious Exemption forms not received by Employee Health Services at least 14 calendar days prior to the Due Date will not be accepted, and the individual will be expected to complete the vaccination prior to the Due Date or face termination (see [SLHS Requirements and Accountability Policy](#)).
9. Individuals approved for vaccination exemption will be required to wear a mask for the duration of influenza season (as determined by the System Medical Director of Employee Health Services, the Medical Director of Infection Prevention and the local health departments) at all times while inside any of the clinical SLHS owned and/or leased facilities or properties. For the non clinical SLHS entities, individuals approved for vaccination exemption may be asked to wear a mask. Masking requirement modification for those who would have difficulty masking due to health issues or would have difficulty masking during performance of the essential functions of their job will be evaluated on a case by case basis.

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10. Individuals approved for vaccination exemption will be given a badge hang tag by Employee Health Services Department that will signify the mask requirement applies to that individual. The mask requirement is also mandatory, and will be enforced by the department manager. The badge hang tag will not distinguish between a medical or religious exemption.
11. Requests for exemption will need to be resubmitted each year for an updated review by Employee Health Services, unless a permanent exemption is granted by the System Director of Spiritual Wellness. Employees may turn in a Request for Influenza Vaccine Religious Exemption form indicating their request is for the same reason as the previous year. Updated documentation will be requested, if needed.

IN COLLABORATION WITH

SLHS Chief Nursing Executive, System Director Employee Health and Wellness, System Director Safety, Security and Emergency Preparedness, System Director Quality and Patient Safety, System Director Spiritual Wellness, SLHS Employee Health Committee, SLHS Infection Prevention Committee, SLHS Safety and Emergency Preparedness Coordinators, SLHS Legal Department, SLHS Employee Health Medical Director, System Infection Prevention & Control and SLH Infection Prevention Medical Director.

REFERENCES

MMWR, Immunization of Health-Care Personnel – Recommendations of the Advisory Committee on Immunization Practices (ACIP), November 25, 2011, Vol. 60, No.7.

Association of Professionals in Infection Control and Epidemiology (APIC) Position Paper: Influenza Immunization of Healthcare Personnel, 2008.

CDC, Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices – United States, 2013-2014

Association of Professionals in Infection Control and Epidemiology (APIC) Position Paper: Influenza Vaccination Should Be a Condition of Employment for Healthcare Personnel Unless Medically Contraindicated, 2011.

U.S. Equal Employment Opportunity Commission: Compliance Manual on Religious Discrimination (2008)

SEE ALSO




[Request for Influenza Vaccine Medical Exemption \(SYS-575\)](#)
[Request for Influenza Vaccine Religious Exemption \(SYS-576\)](#)
[SLHS Requirements and Accountability \(HR-029\)](#)

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SLHS Entities Covered by this Policy: This policy applies to all SLHS entities including all hospitals:

- Anderson County Hospital (d/b/a for Saint Luke's Hospital of Garnett, Inc.)
- Crittenton
- Hedrick Medical Center (d/b/a for Saint Luke's Hospital of Chillicothe)
- Saint Luke's Cushing Hospital
- Saint Luke's East Hospital
- Saint Luke's Hospital of Kansas City
- Saint Luke's North Hospital (d/b/a for Saint Luke's Northland Hospital Corporation)
- Saint Luke's South Hospital, Inc.
- Wright Memorial Hospital (d/b/a for Saint Luke's Hospital of Trenton, Inc.)

APPROVALS	
 Katherine Howell, Sr. VP, Chief Nurse Executive	_____ 09/19/2016 Date
 Leonardo Lozada, MD, Senior VP/Chief Physician Executive	_____ 09/21/2016 Date
 Dawn Murphy, Senior VP, Human Resources	_____ 09/14/2016 Date

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SECTION: Infection Prevention & Control (IPC)

PURPOSE

To provide information on identification and management of influenza.

POLICY

These guidelines are adapted from the recommendations from the Centers for Disease Control and Prevention (CDC). The CDC website at www.cdc.gov should be consulted for the most recent information.

SCOPE

All hospital departments, patients, and Health Care Workers involved in patient care.

I. Identification

There are three types of influenza viruses A, B, and C that cause yearly outbreaks of disease, primarily during the months of October through March, that are responsible for approximately 34,000 deaths and 226,000 influenza related hospitalizations per year in the United States. Annual influenza vaccination is the most effective way to reduce the impact of influenza. The use of antiviral medications at the onset of symptoms can lessen the severity of influenza

II. Cold versus Flu

Symptoms	Cold	Flu
Fever	Rare in Adults	Usually 102 degrees F to 104 degrees F, usually lasts 3 to 4 days
Headache	Rare	Sudden onset and can be Severe
Muscle Aches	Mild	Usual and often Severe
Extreme Exhaustion	Never	Sudden and Severe
Runny nose, Sneezing, sore throat	Often	Sometimes
Cough (non-productive)	Mild hacking cough	Usual; can be severe

Incubation Period:

Usually one to four days

Period of Communicability:

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From 24 hour before the onset of symptoms until five days after the onset of symptoms. Up to ten days for those with weakened immune systems. Severely immunocompromised persons can shed virus for weeks or months.

Exposure Criteria:

Close proximity (six feet to an infectious person).

Laboratory Criteria:

- Positive rapid test for influenza A or B
- Positive Viral culture
- Respiratory Panel PCR

Patient Management:

- Mask all patients with respiratory symptoms as listed above.
- Assess masked patient
- Immediately isolate patient in droplet precautions including masks. Negative Pressure Room is not necessary. A private room is required.
- Obtain order for rapid flu testing.
- Obtain specimen for rapid flu testing
- Notify Infection Prevention professional at ext 48084 or cacrum@saint-lukes.org for confirmed cases.

Patients who present with acute respiratory symptoms should be screened for influenza. Initial diagnostic testing should include a nasal swab for polyvalent testing to rule out other viral illnesses and may also include chest radiograph, pulse oximetry, blood cultures, and sputum Gram's stain and culture.

V. Admission Procedure for Patient with Suspect or Confirmed INFLUENZA

1. Admit patient to private room, Droplet Isolation.
 - Streamline admission procedure to limit the number of patient encounters from healthcare personnel.
 - Infection control measures for inpatients shall include:
 - Standard precautions (e.g., hand hygiene).
 - Droplet precautions (e.g., a private room and use of a disposable mask for persons entering the room). Health Care personnel shall wear a surgical mask when entering patient room.
2. Alternatively, negative pressure rooms can be used and are as follows:

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- 101, 102 (Medical/Surgical Unit)
 - Surgery
 - ER (Exam rooms #4)
3. Order masks from central supply.
- Observe strict adherence to and proper use of standard infection prevention measures, especially hand hygiene and isolation.

VI. Infection Prevention Considerations

Transport:

1. Patients shall be confined to a private room unless a procedure is necessary that *must* be performed at another location. If transport is necessary, the patient shall wear a surgical mask.
2. Notify receiving department/unit of precautions *prior* to transport.

Daily and Terminal Cleaning (In-Patient Setting:)

1. Environmental service personnel shall be trained in cleaning and disinfection methods and in wearing a mask.
2. Patient rooms shall be cleaned and disinfected daily with the hospital-approved disinfectant.
3. Storage of extra supplies and linen in the patient room shall be kept at a minimum.
4. One hour must elapse before admission of a patient to a room previously occupied by an Influenza patient. Cleaning of the room is permitted during this time provided the associates have donned masks and usual PPE.
5. Solutions prepared in a bucket may be disposed of in the usual manner in the sanitary sewer system in the soiled utility rooms.

Emergency Room Guidance for Screening:

1. All HCWs shall wear masks while taking care of patients with suspected influenza. The mask must be changed when it becomes moist or soiled.
2. Precautions shall be used when evaluating or transporting patients. During transport, patients shall wear a surgical mask. Patients shall only be transported if absolutely necessary.
3. Patients shall be instructed to cover their mouths and nose with a tissue before sneezing or coughing. Coughing patients shall wear a surgical mask.
4. To facilitate early identification of patients who may have influenza in the Emergency Department or ambulatory setting, targeted screening questions concerning fever, respiratory symptoms, shall be included at triage or as soon as possible after patient arrival.

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5. If possible, potential influenza patients, on arrival to the Emergency Department or ambulatory setting should be evaluated in a separate assessment area to determine if they meet the case definition for suspected influenza and require isolation.
6. Consider standing orders for rapid influenza testing for patients with symptoms of influenza.

VII. Universal Respiratory Strategy

1. Provide surgical masks to all patients with symptoms of a respiratory illness and instruct on the proper use and disposal of the masks.
2. Provide tissues and instructions on when to use them for patients who cannot wear a surgical mask (i.e., when coughing, sneezing, or controlling nasal secretions), how and where to dispose of them and the importance of hand hygiene after handling this material.
3. Encourage patients with respiratory symptoms to perform hand hygiene.
4. Place patients with respiratory symptoms in a private room or cubicle as soon as possible for further evaluation.
5. Use masks as needed (registration and triage staff).
6. Use droplet precautions to manage patients with respiratory symptoms until it is determined that the cause of symptoms is not an infectious agent that requires precautions beyond standard precautions.

VIII. Employees

For persons without symptoms:

If you believe you have had contact with an individual with symptoms suggestive of influenza, it is safe to be in the workplace. Good hand hygiene is encouraged. Vaccination may be available to direct patient caregivers.

For persons with symptoms:

If you have fever (>100.4 F/38 C), respiratory symptoms OR had close contact within 5 days of onset of symptoms with a person with a respiratory illness or a person known to have influenza, you should not come into work.

Report immediately the onset of influenza to Employee Health Services at ext 48085 or Infection Prevention at ext 48084 or cacrum@saint-lukes.org

Return to work:

Personnel who have been off work with a diagnosis of influenza are required to remain off work until resolution of the symptoms and must be cleared by their personal care provider. Personnel must present return work statement to Employee Health prior to returning to work.

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Guidelines for HCWS Exposed to Patients with Influenza:

Transmission to healthcare workers appears to have occurred after close contact with symptomatic individuals (e.g., persons with fever or respiratory symptoms) before recommended infection prevention precautions for influenza were implemented (i.e., unprotected exposures).

The following recommendations should be used for the management of exposures to influenza:

1. Exclusion from duty is recommended for a healthcare worker if fever or respiratory symptoms develop during the 5 days following an unprotected exposure to a patient with influenza or after contact with any individual with respiratory symptoms. Exclusion from duty is not recommended for an exposed healthcare worker if they do not have either fever or respiratory symptoms.
2. Consider anti viral treatment if symptoms have not been present for more than 48 hours.

IN COLLABORATION WITH

Infection Prevention, Program Manager Quality and Risk

REFERENCES

Morbidity and Mortality Weekly Report, September 26, 2014, Prevention and Control of Influenza.

HHS Pandemic Influenza Plan, 2008 <http://www.hhs.gov/pandemicflu/plan/5up4.html>, Last accessed September 21, 2015

CDC, Infection Control Guidance for the Prevention and Control of Influenza in Acute-Care Facilities, November 15, 2007.

SLHS Entity Covered by this Policy: This policy applies to:

Anderson County Hospital (d/b/a for Saint Luke's of Garnett, Inc.)

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