

# **Health Care Personnel Influenza Vaccination Subgroup (HCPIVS)**

National Vaccine Advisory Committee

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HCPIVS Co-Chairs

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# Estimated Influenza Vaccination Coverage Among U.S. HCP, 2006-2010

- 2006-2007: 44.4%<sup>1</sup>
- 2007-2008: 49.0%<sup>1</sup>
- 2008-2009: 52.9%<sup>2</sup>
- 2009-2010: 65.0% (Seasonal)<sup>1</sup>  
47.1% (H1N1)<sup>1</sup>

<sup>1</sup>Centers for Disease Control and Prevention. Prevention and Control of Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices (ACIP), 2010. MMWR 2010;59(No. RR-8).

<sup>2</sup>Centers for Disease Control and Prevention. National Health Interview Survey 2009 Adult Coverage Tables. Table 3. Estimated proportion of Health Care Personnel (HCP) age ≥18 years who received selected vaccinations by race/ethnicity, National Health Interview Survey (NHIS), United States, 2009. 2009. <http://www.cdc.gov/Vaccines/stats-surv/nhis/downloads/2009-nhis-tables.xls> (accessed 1 Jun 2011).

# Estimated Influenza Vaccination Coverage Among U.S. HCP, 2010-11

- Internet panel survey, November 2010<sup>1</sup>
  - 55.5% [+/-3.4] received the vaccination
  - 62.0% [+/-3.4] received or definitely intended to receive the vaccination
- National Flu Survey, Nov 2010 to March 2011<sup>2</sup>
  - 64.6% [+/-10.3]\*

<sup>1</sup> Centers for Disease Control and Prevention. Influenza vaccination coverage estimates and selected related results from a national internet panel survey of health care personnel, United States, November 2010. <http://www.cdc.gov/flu/pdf/vaccination/BlackNovemberHCPsurveyResults.pdf> (accessed 3 Jun 2011).

<sup>2</sup> Centers for Disease Control and Prevention. Results from the March 2011 National Flu Survey—United States, 2010-11 Influenza Season. <http://www.cdc.gov/flu/pdf/vaccination/fluvacsurvey.pdf> (accessed 3 Jun 2011).

\*Estimate does not meet reliability criteria, 95% confidence interval is too wide

# Charge

## **Develop recommendations on strategies to achieve the Healthy People 2020 annual goal of 90% influenza vaccine coverage for health care personnel**

Health care personnel (HCP) are defined<sup>1</sup> as all paid and unpaid persons working in healthcare settings who have the potential for exposure to infectious materials. The settings for HCP include acute care hospitals, long-term care facilities, skilled nursing facilities, rehabilitation centers, physician's offices, urgent care centers, outpatient clinics, home health, and emergency medical services. Thus HCP includes a range of those directly, indirectly, and not involved in patient care who have the potential for transmitting influenza to patients, other HCP, and others.

<sup>1</sup>Source: HHS Action Plan to Prevent Healthcare-Associated Infections: Influenza Vaccination of Healthcare Personnel ([http://www.hhs.gov/ash/initiatives/hai/tier2\\_flu.html](http://www.hhs.gov/ash/initiatives/hai/tier2_flu.html)).

# Members

## NVAC Members

Guthrie Birkhead<sup>a</sup>

Clement Lewin

Julie Morita<sup>b</sup>

Christine Nevin-Woods<sup>b</sup>

Litjen Tan

## HHS Staff

Will Bleser

Mark Grabowsky

Anna Jacobs

<sup>a</sup>Chair of the NVAC

<sup>b</sup>Co-Chairs of the HCPIVS

## Ex-Officio Members

Benedict Diniega (DoD)

Amy Groom (IHS)

Frank Hearl (NIOSH)

Richard Martinello (VA)

John Piacentino (NIOSH)

Rosemary Sokas (OSHA)

Melinda Wharton (CDC)

Ted Yee (OSHA)

## Assistant to NVAC Chair

Robert Bednarczyk

# Members (cont'd)

Jon Almquist	<i>American Academy of Pediatrics</i>
Hilary Babcock	<i>Society for Healthcare Epidemiology of America</i>
Richard Beigi	<i>American Congress of Obstetricians and Gynecologists</i>
Nancy Berlinger	<i>The Hastings Center</i>
William Borwegen	<i>Service Employees International Union</i>
Katherine Brewer	<i>American Nurses Association</i>
Jeffrey Duchin	<i>Advisory Committee on Immunization Practices</i>
Jennifer Hillard	<i>LeadingAge</i>
Nancy Hughes	<i>American Nurses Association</i>
Charlene Ludlow	<i>American Hospital Association</i>
Gregory Poland	<i>American College of Physicians</i>
Mitchel Rothholz	<i>American Pharmacists Association</i>
Alexandra Stewart	<i>GWU School of Public Health and Health Policy</i>
Melanie Swift	<i>American College of Occupational and Environmental Medicine</i>
Janice Zalen	<i>American Health Care Association</i>

# Previous Activities

- Formed in November 2010
- One to two conference calls per month
- One in-person meeting
- Reviewed background materials
  - Review articles
  - Primary research
  - Position statements of stakeholder organizations
  - Commentaries, ethics, and news articles
  - Monographs

# Relevant Presentations - 1

## Epidemiology of influenza in healthcare settings

Hilary Babcock (SHEA; IDSA; Washington University School of Medicine)

- Other less coercive efforts have inconsistent effects on HCP influenza vaccination rates
- There is increasing utilization of mandatory programs

## Ethics of strategies to improve HCP influenza vaccination

Nancy Berlinger (The Hastings Center)

- Vaccination is unlike other medical procedures in that it is *also* a public health measure
- An individual's right to refuse medical treatment should not be confused with an HCP's refusal to participate in the safe and effective delivery of healthcare and/or the protection of public health

## Legal issues and a model law for HCP influenza vaccination

Alexandra Stewart (GWU School of Public Health and Health Policy)

- It is impossible to predict with absolute certainty how a court will decide any case; however, courts must rely on previous relevant decisions.
- Health care workers have the same rights as other individuals.
- Therefore, courts will prioritize the rights of the community as a whole when considering the case of mandatory health worker vaccination

# Relevant Presentations - 2

## Reporting influenza vaccination coverage

Megan Lindley (CDC/OID/NCIRD)

- Significant variation exists in the measurement of influenza vaccination among HCP
- CDC sponsored piloting a National Quality Forum standardized measurement
- Final results will be presented in July 2011

## HCP influenza vaccination: New York State experience

Guthrie Birkhead (New York State Department of Health)

- Despite numerous efforts by NY, HCP vaccination rates remained low
- 2008, legally mandated for HCP in hospitals and select other settings (free of charge)
- 2009, suspended *only* because of insufficient vaccine supply

## Management of occupational vaccine programs

Melanie Swift (ACOEM; Vanderbilt Occupational Health Clinic)

- Include occupational medicine and nursing organizations in these
- Support investment in healthcare worker surveillance information systems
- Adopt policies and regulations that allow for unique organizational structure
- Standard definition of terms and metrics (e.g. NQF metric)

# Relevant Presentations - 3

## St. Jude Children's Hospital – HCP Influenza Vaccination

Jon McCullers (St. Jude's Children's Hospital)

- Achieved 70% HCP vaccination rates via an intensive voluntary program, focusing on benefits to HCP, high availability, follow-up/feedback, and championship
- Acknowledged unique circumstances – smaller pediatric oncology facility

## Update on ACIP's In-Clearance HCP Immunization Report

Paul Cieslak (ACIP)

- Updated report from 1997; compiled existing HCP recommendations in single report
- The report's Working Group decided not to address mandatory vaccination policy

## HCP Influenza Vaccination: The Dept. of VA Experience

Richard Martinello (VA)

- 2005, incorporated HCP influenza vaccination as a performance measure (free to HCP)
- FY2010 uptake was 77.6%, but only included paid HCP
- Inconsistent results, some facilities report <45% uptake, some report >95%

# Relevant Presentations - 4

## Vaccine Ethics and Mandatory Vaccine Policies

Jason Schwartz (UPenn Center for Bioethics; Vaccine Ethics Institute)

- Important role of HCP in public attitudes and decision-making about vaccines
- Mandatory policy is one tool (among many) to promote high HCP vaccination rates
- Mandatory policy can be ethically-evaluated using the *Childress et al* model (2002)

## Healthcare-Associated Influenza (HAI)

Tom Talbot (SHEA; Vanderbilt Medical Center)

- HAI causes substantial morbidity, but prospective surveillance not routinely performed
- Data support impact of HCP influenza vaccination on influenza-related patient outcomes
- The “ideal” study to note if a threshold effect is present may not be feasible, so decisions will be made using other types of study design/data

## New Influenza Vaccine Technologies

Jackie Katz (CDC/OID/NCIRD)

- There are several new influenza vaccine technologies currently in R&D

# Future Presentations

- Final results from the CDC-sponsored NQF measure on reporting HCP influenza vaccination

# Proposed Timeline

- September 2011 NVAC – present draft report v1.0
- Stakeholder engagement
- November 2011 NVAC – present draft report v2.0
- Public comment with Federal Register Notice
- February 2012 NVAC – final report for vote

# Discussion