

**California Department of Public Health
Influenza Vaccination among Health Care Personnel in California Hospitals
For the 2014-15 Influenza Season**

Key Findings and Public Health Actions

Influenza is the eighth leading cause of death in the United States, with the majority of influenza-related illnesses and deaths occurring among vulnerable members of the population [1-2]. Health care personnel (HCP) are a source of transmission of influenza to coworkers and patients in hospitals [1-4]. Influenza vaccination is a simple, safe, and cost effective way to prevent transmission of influenza from HCP to patients [4]. Vaccination of HCP has been shown to reduce worker's illness, absenteeism, staff shortages, and healthcare costs [3].

Since 2008, California acute care hospitals must offer the influenza vaccine free of charge to HCP and require HCP to receive the vaccine or sign a declination form if they choose not to be vaccinated (Health and Safety Code section 1288.7). Hospitals must report HCP vaccination rates to the California Department of Public Health (CDPH), including the percentage of HCP (employees and non-employee personnel) vaccinated. CDPH is required to make this information public on an annual basis (Health and Safety Code section 1288.8). Hospitals collect and report data for all HCP physically working in the acute care hospitals for at least one working day during influenza season, regardless of clinical responsibility or patient contact. CDPH reports data separately for employees, non-employee licensed independent practitioners, and adult students/trainees and volunteers.

This report presents data for the 2014-2015 influenza season, specifically October 1, 2014, through March 31, 2015. This is CDPH's seventh published report on HCP influenza vaccination in California hospitals and the third using data submitted by hospitals to the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN). This is the first year CDPH presents hospital influenza vaccination rates by county, stratifying by those counties with local health department orders that require mandatory masking for HCP who refuse vaccination and those counties that do not have such a health order. We also present data from the NHSN online annual survey of influenza vaccination policies and practices, which was completed by 94% of California hospitals and revealed that most hospitals continue to use a variety of strategies recommended by CDC to promote influenza vaccination among HCP.

Local public health policy may be influencing vaccination coverage in California hospitals. For the 2014-2015 influenza season, 31 counties required hospitals to implement and enforce policies requiring HCP who decline vaccination to wear surgical masks during influenza season, eight more counties than in 2013-2014. This report includes the vaccination percentage for HCP by county with or without policies to require unvaccinated HCP to wear a surgical mask (Table 1). The statewide hospital HCP vaccination rate was 82% for the 31 counties that require a mask and 78% for 24 counties that do not require a mask.

Three counties are excluded from this report. Alpine County has a mask policy but no acute care hospital and, therefore, is not subject to these reporting requirements. Sierra County has no mask policy and no acute care hospital. Yuba County has no mask policy and its one acute

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care hospital (Fremont Medical Center) shares HCP and reports influenza vaccination data combined with a hospital in Sutter County (Rideout Memorial Hospital).

CDPH calculated vaccination rates for each personnel category by hospital (Table 2). This year's report presents a new summary of activities used by California hospitals to promote influenza vaccination compared with the same activities reported last year (Table 3). We also calculated overall HCP vaccination percentages that combine the vaccination percentages of employee HCP and non-employee HCP, and found the proportion of hospitals with an overall HCP vaccination percentage of 90% or more increased from 18% in 2013-14 to 23% in 2014-2015, helping California to advance toward achieving the Healthy People 2020 goal of 90% influenza vaccination coverage (Table 4). We present overall 2014-2015 hospital-specific vaccination rates with side-by-side comparisons to vaccination rates reported in 2013-2014, 2012-2013 and 2011-2012 (Table 5).

Overall, influenza vaccination coverage among HCP in California hospitals is incrementally improving. Vaccination coverage for employee HCP was 85% in 2014-2015 compared with 81% in 2013-2014 and 74% in 2012-2013. Vaccination coverage for non-employee HCP was 66% in 2014-2015 compared with 63% in 2013-2014 and 59% in 2012-2013 (Table 6).

Key Findings

- The influenza vaccination reporting compliance by hospitals for this 2014-2015 influenza season was 99%. Three hospitals did not report data and have been cited for deficiency by the CDPH Licensing & Certification Program (Table 7).
- Hospital-specific vaccination rates have increased by 21% for employee HCP and 11% for non-employee HCP since 2010-2011 (Table 6).
- A total of 357 (92%) of California hospitals achieved the 2010 Healthy People goal of 60% vaccination of HCP, compared with 332 (85%) reported last year, a 7% increase. Eighty-eight (23%) hospitals reached the Healthy People 2020 target of 90% for influenza vaccination of HCP, compared with 72 (18%) reported last year, a 5% increase (Table 4).
- More hospitals achieved the Healthy People 2020 target of 90% vaccination for employee HCP (n=156, 40%) than for non-employee HCP (n=109, 28%).

Three hundred seventy hospitals (94%) participated in a comprehensive online survey of influenza vaccination policies and practices for 2014-2015. Results are as follows (Table 3):

- 356 (96%) of hospitals in 2014-2015 required HCP to provide documentation if they received their influenza vaccination at another site other than the reporting hospital, compared with 360 (92%) hospitals in 2013-2014.

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- Over 85% of respondent hospitals required HCP who received off-site influenza vaccination to provide a receipt and 44% required the signature of HCP on a standard facility form attesting to vaccination status, compared with 73% and 49%, respectively, for 2013-2014.
- 100% of respondent hospitals included full-time employees in the annual influenza vaccination campaign. Only 10% of respondent hospitals included other personnel groups in the annual influenza vaccination campaign.
- 91% of respondent hospitals offered influenza vaccination during all work shifts, including nights and weekends.
- 90% of hospitals offered vaccination in conferences, meetings, cafeteria, and 81% via mobile carts.
- 92% of hospitals provided education on the benefits and risks of vaccination.
- 86% of respondent hospitals used mail, email, and or paper reminders to promote/enhance healthcare personnel influenza vaccination.
- 85% of respondent hospitals required a signed computer form from healthcare personnel who refused influenza vaccination compared to 15% of hospitals that used other or none.

Public Health Actions

In follow-up to this report, CDPH will:

- Continue tracking and reporting annual compliance with HCP influenza vaccination, including data collection of vaccination coverage and the methods and systems hospitals use to promote vaccination and document vaccination status.
- Collaborate with local public health departments to ensure accuracy of and details related to local policy regarding HCP influenza vaccination and mandatory masking.

CDPH recommends all hospitals should:

- Review the vaccination coverage data reported by the hospital for 2014-2015, evaluate the current influenza vaccination program and policies, and develop an action plan to improve influenza vaccination coverage of HCP to achieve the Healthy People 2020 target of 90% vaccination.
- Ensure that all contracts with physician groups, registry organizations, fellowships, and student training programs include influenza vaccination requirements consistent with

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hospital policy and/or local public health mandates.

- Implement robust data collection and management systems to document the vaccination status of all HCP.
- Monitor and investigate all cases of suspected healthcare-associated influenza.
- Promote educational programs on influenza prevention and the importance of influenza vaccination for HCP, volunteers, friends and families, and patients.

The public should:

- Discuss the risk of influenza for themselves and their families with their HCP. Ask about the prevention strategies used by the HCP or healthcare facility to keep patients safe from influenza (e.g., hand hygiene, vaccination programs, staff education). Such discussions can reinforce the patient safety aspect of vaccination and can emphasize professional responsibility to protect patients through vaccination.

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