



# The Importance of Promoting Hospital Worker Influenza Vaccination



Commissioner John Auerbach  
November 30, 2011



## Context for Improving Influenza Vaccine Hospital Worker Coverage



- Hospital employee influenza vaccination is a critical patient safety standard of care.
- Prevention through vaccination is simple, safe and cost effective.
- Reducing the unintended transmission of influenza is a top national and Massachusetts priority.
- Current efforts to immunize hospital employees have been insufficient



## Regulatory Background

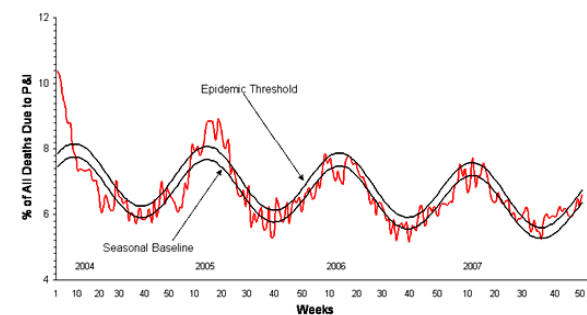
- **2008** - Hospital licensure regulations amended to require 1) reporting to DPH/public of influenza vaccination rates of healthcare personnel and 2) requiring hospitals offer flu vaccines to all employees with documentation of those who accept and those who decline
- **2009-2010** - First hospital specific report on seasonal influenza vaccination in Massachusetts acute care hospitals.
- **2010-2011** – Second hospital specific report on seasonal influenza vaccination in Massachusetts acute care hospitals



## Seasonal Influenza Represents a Serious Health Problem

- Annual average of 24,000 influenza-related deaths in US (480 in Mass.)
  - ~90% among 65 and older
  - ~2,400 deaths annually among 19-64 year olds (48 in Mass.)
- Annual average of 220,000 hospitalizations (4,400 hospitalizations in Mass.)
  - ~50% in 65 and older
- 70 million missed work days
- 38 million missed school days
- \$3-15 billion in direct and indirect costs

Pneumonia and Influenza Mortality  
for 122 U.S. Cities  
Week Ending 12/22/2007





## **There are Multiple Benefits of Influenza Vaccination for Healthcare Personnel**

1. Prevents illness
2. Keeps them and colleagues at work
3. Keeps your patients healthier
4. Keeps their families healthier
5. Saves costs for you and the health care system
6. Provides a good example



## There are Minimal Side Effects Associated with Inactivated Flu Vaccine



Nichol, et al. Arch Intern Med 1996; 156: 1546 (n=849)

	Vaccine	Placebo
Systemic complaint	34.1%	35.2%
Arm soreness	63.8%	24.1%



## Massachusetts Healthcare Employee Influenza Vaccination Results Are Uneven and Too Low

	No. Licensed	No. Reporting (%)	% Total Vaccinated	Range (%)
Acute Care Hospital	74	73 (98.6%)	70.8	37.5-96.1
Ambulatory Surgery	65	52 (80%)	68.8	0-100
Clinics	264	146 (55.3%)	58.2	0-114*
Dialysis Centers	73	72 (98.6%)	60.6	15-100
Long-Term Care	436	394 (90.4%)	58.9	12.5-109*
Non-Acute Hospital	52	46 (88.5%)	42.9	31.3-89.7

\*Fluctuations in staff may artificially increase or decrease the number of employees counted on a specific day resulting in rates higher than 100%.



## Acute Care Hospital 2010 - 2011 HealthCare Employee Influenza Vaccination Results

	Mean (%)	Range (%) Minimum - Maximum
Vaccinated	70.8	37.5 – 96.1
Declination Rate	20.1	3.4- 36.4
<u>Location Vaccinated:</u>		
At Hospital of Employment	60.6	36.9 – 85.2
Outside Hospital of Employment	10.2	0.5 – 25.2



## 2010- 2011 HealthCare Employee Influenza Vaccination Results Acute Care Hospitals by *Teaching Status* and *Bed Size*

<b>Hospital Teaching Status*</b>	<b>Mean (%)</b>	<b>Range (%) Minimum - Maximum</b>
Major Teaching Hospital	73.1	37.5 - 96.1
Non-Teaching Hospital	70.1	46.2 -88.4
<b>Hospital Bed Size</b>		
<=100	71.1	60.5 - 88.4
101- 300	69.8	46.2 - 83
>300	75.3	37.5 - 96.1

\*Teaching status was determined by hospital's most recent National Healthcare Safety Network annual hospital survey. Major teaching status is defined as a hospital that is an important part of a medical school teaching program in which the majority of medical students rotate through multiple clinical services. 9



## 2010- 2011 HealthCare Employee Influenza Vaccination Results Acute Care Hospitals by Region

<b>Region</b>	<b>n</b>	<b>Mean (%)</b>	<b>Range (%) Minimum- Maximum</b>
Western	12	70.5	48.9 - 88.4
Central	11	70.3	46.2 - 83.9
Northeast	10	71.6	67.7 - 78.2
Metro	13	76.4	60.5 - 96.1
Boston	13	72.6	58.2 - 91.3
Southeast	13	63.3	37.5 - 83.4



## DPH and Public Health Council Proposals

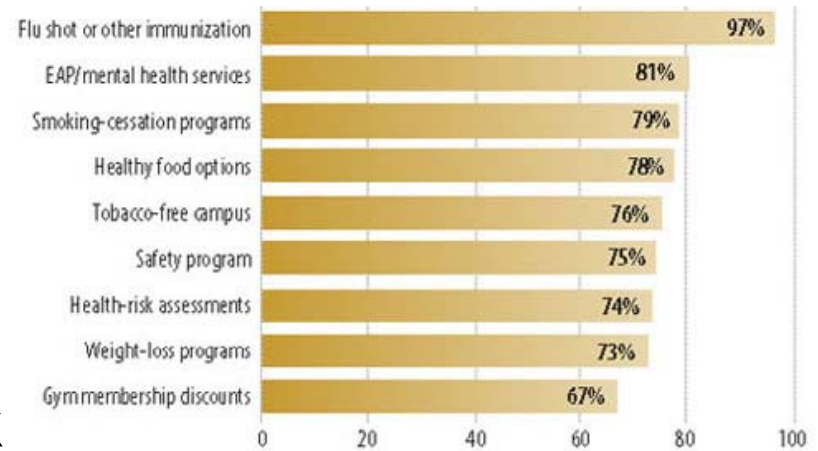


- For 2011-2012, DPH set a goal of 90% hospital employee vaccination rates overall with no facility less than 73% (2% pts above latest average).
- At its October meeting the Public Health Council voted support for the adoption of more aggressive policies by hospitals
- Council members agreed to consideration of regulatory change if rates did not rise to the new goal



## There are Evidence-Based Approaches to Maximize Personnel Influenza Vaccination Rates

- Education and Campaigns
- Improved Access
- Measurement and Feedback
- Legislation and Regulation
- Leadership Commitment





## Recommended Action Steps by Hospital Leadership

- Clearly communicate to all employees the importance of the vaccination effort
- Establish performance goals for each unit
- Offer training, distribute tools and provide resources needed to meet goals
- Reduce or eliminate barriers
- Conduct ongoing review of performance data



# **Maximizing Influenza Vaccination of Healthcare Workers**

**Robert A. Duncan, MD, MPH**  
**Hospital Epidemiologist, Lahey Clinic**

**DPH/Masspro Webinar**  
**November 30, 2011**

# Agenda

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- ◆ Rationale, risks, and value of flu vaccine, including common myths
- ◆ Strategies to maximize vaccination levels
- ◆ Role of senior leadership
- ◆ Implementing a vaccine vs mask policy

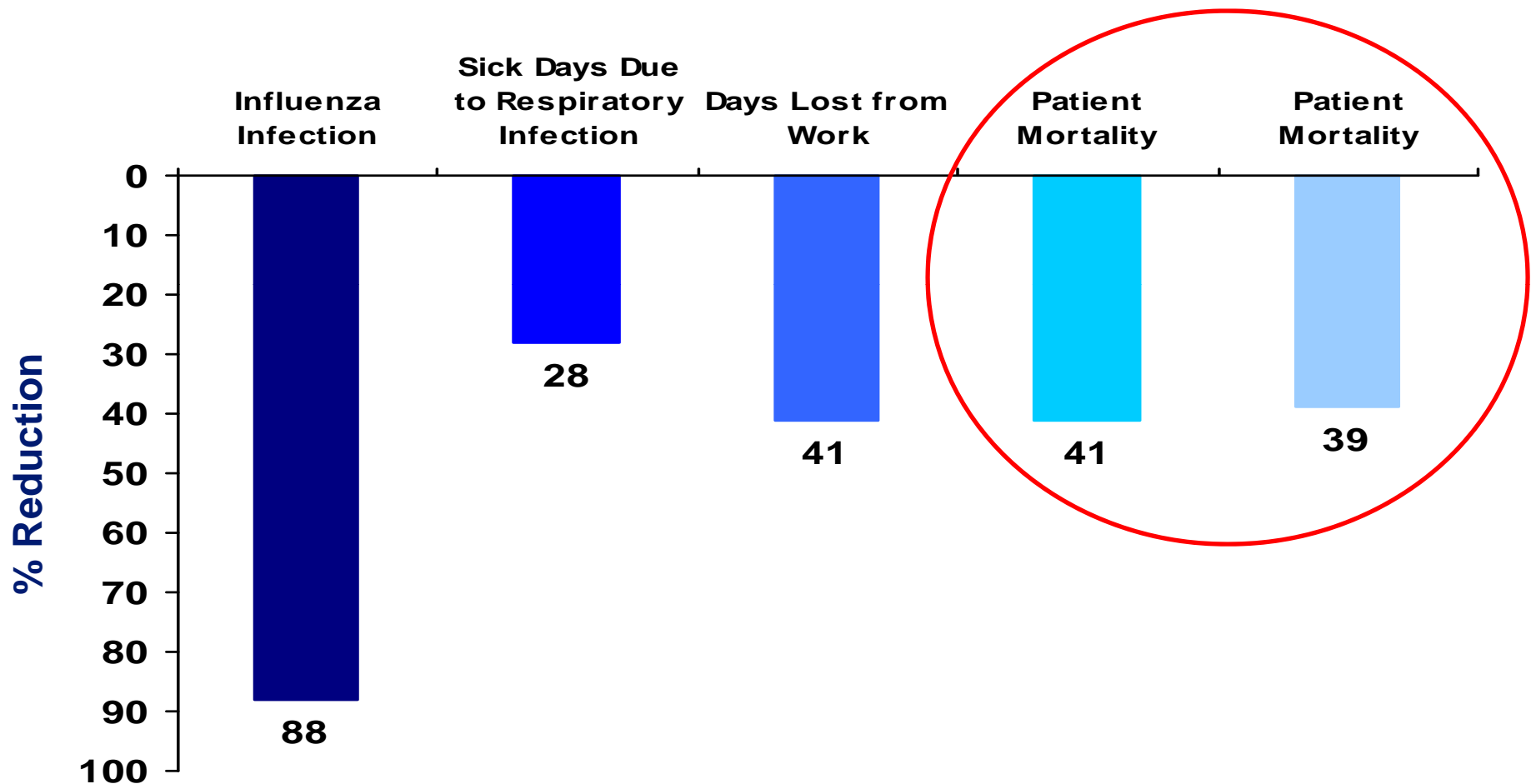
*No disclosures*

# **Epidemic Influenza is a Common, Miserable, and Often Serious Illness**

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- ◆ Affects 5% to 20% of population yearly
  - Higher in children
- ◆ Serious case fatality: 0.5 to 1 per 1000
  - Higher in elderly
- ◆ #1 cause of vaccine-preventable death in USA

# Impact of HCW Influenza Vaccination



Average annual savings of **\$13.66\*** - **\$46.85\*** per person vaccinated

**If you could halve  
the mortality rate,  
would you do it?**

*-G Poland, Clin Infect Dis 2002; 35:378*

# Side Effects of Flu Vaccine

Symptom	Placebo	Vaccine	P Value
Fever	6%	6%	NS
Tiredness	19%	19%	NS
Myalgias	6%	6%	NS
Headaches	14%	11%	0.14
Arm Soreness	24%	64%	<0.001

--KL Nichol, NEJM 1995; 333: 889

# Flu Myths

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- 👎 The vaccine gave me Flu
- 👎 I never get Flu
- 👎 I'll stay home if I get sick
- 👎 Pregnant women shouldn't get vaccinated

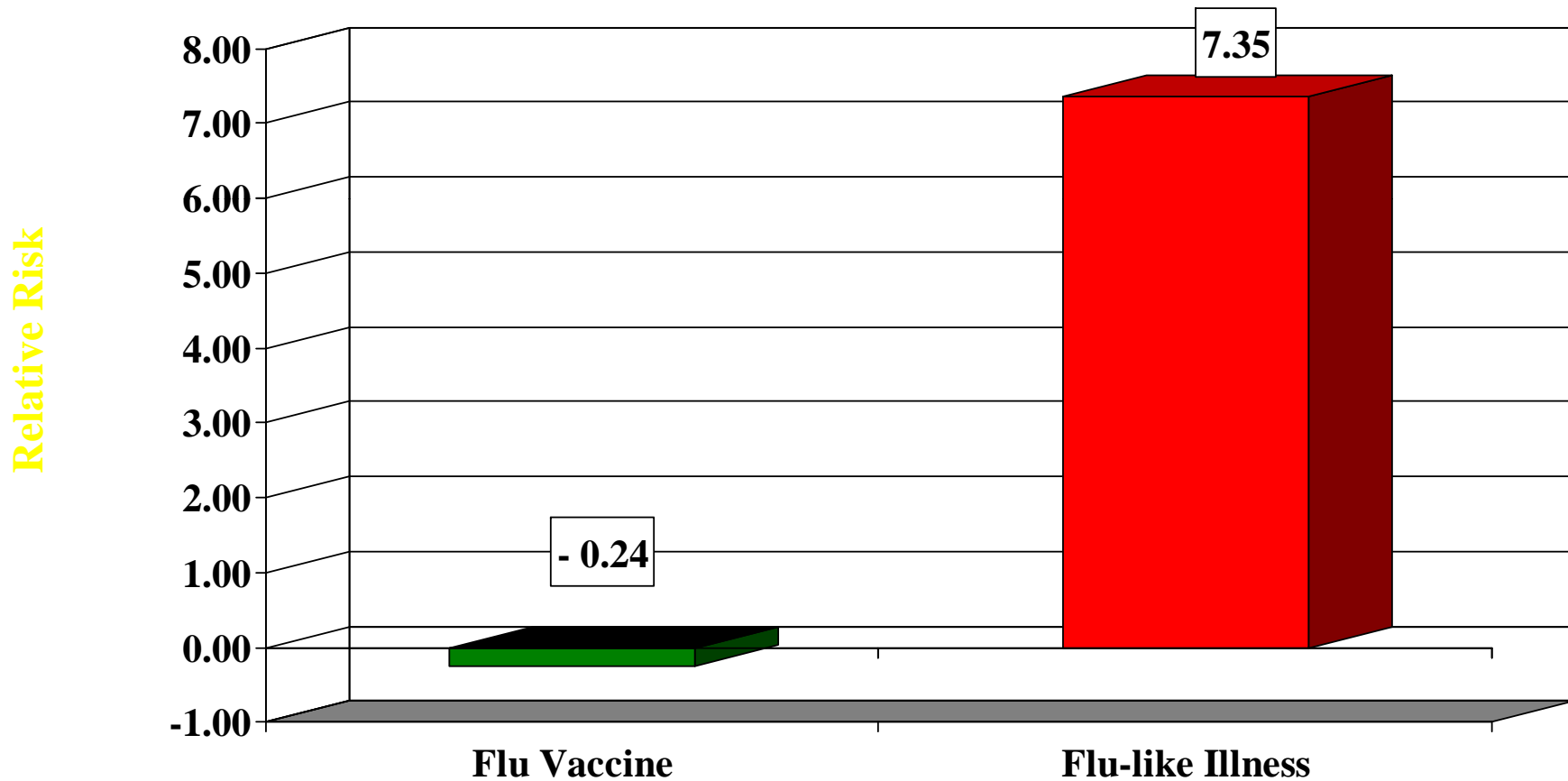
# Flu Vaccine Protects Mothers & Infants

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Inactivated influenza vaccine vs  
Pneumovax<sup>23</sup> as placebo in 340 mothers

- ↓ Respiratory illness w/fever in mothers (-36%)
- ↓ Respiratory illness w/fever in infants (-29%)
- ↓ Confirmed influenza in infants (-63%)
- ⊕ Protective up to 6 months of age

# Relative Risk of Guillain-Barré Syndrome after influenza vaccination or influenza-like illness United Kingdom, 1990-2005



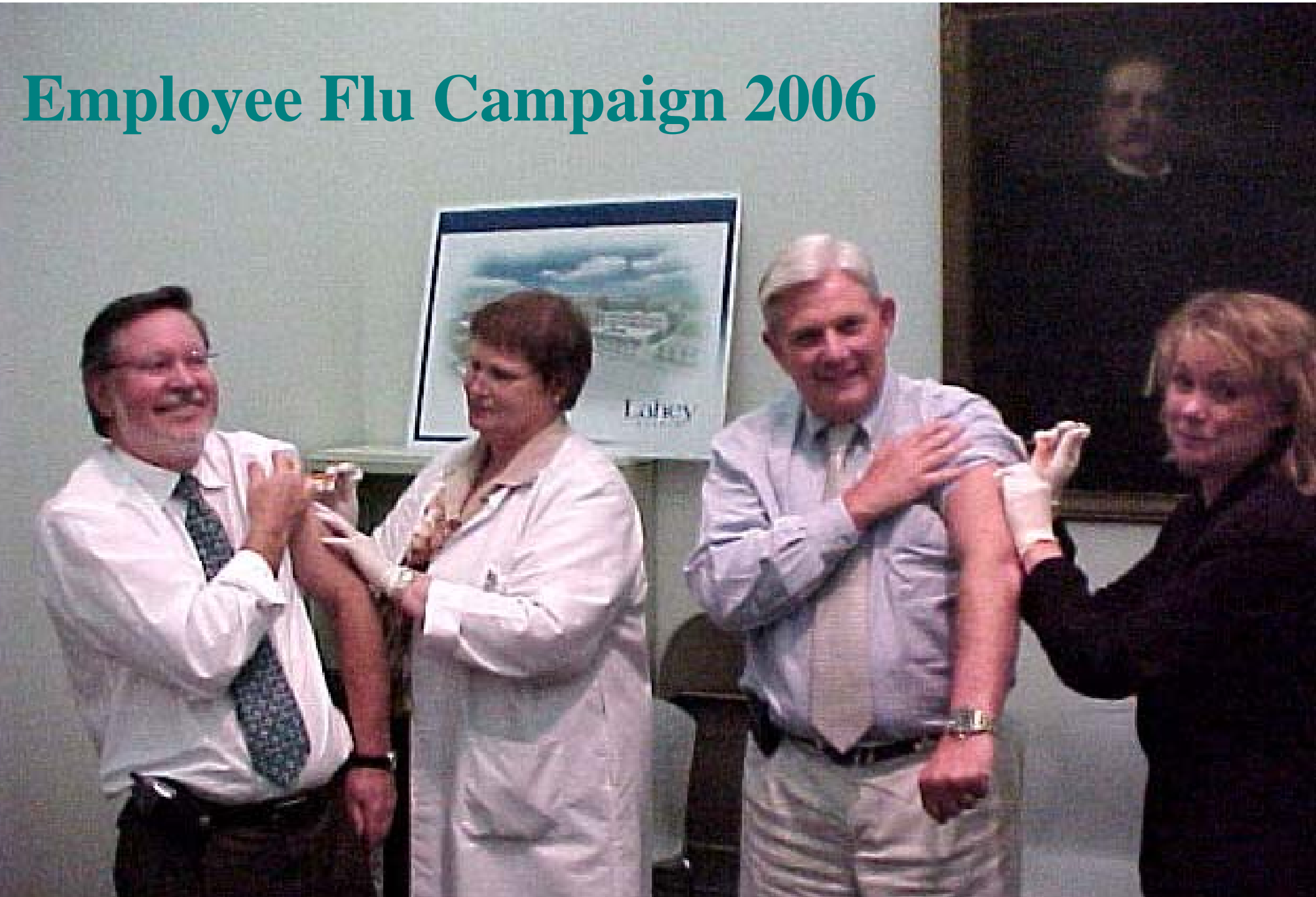
--Stowe, *Am J Epidemiol* 2009;169:382-8.

# Factors Increasing HCW Vaccination Rates

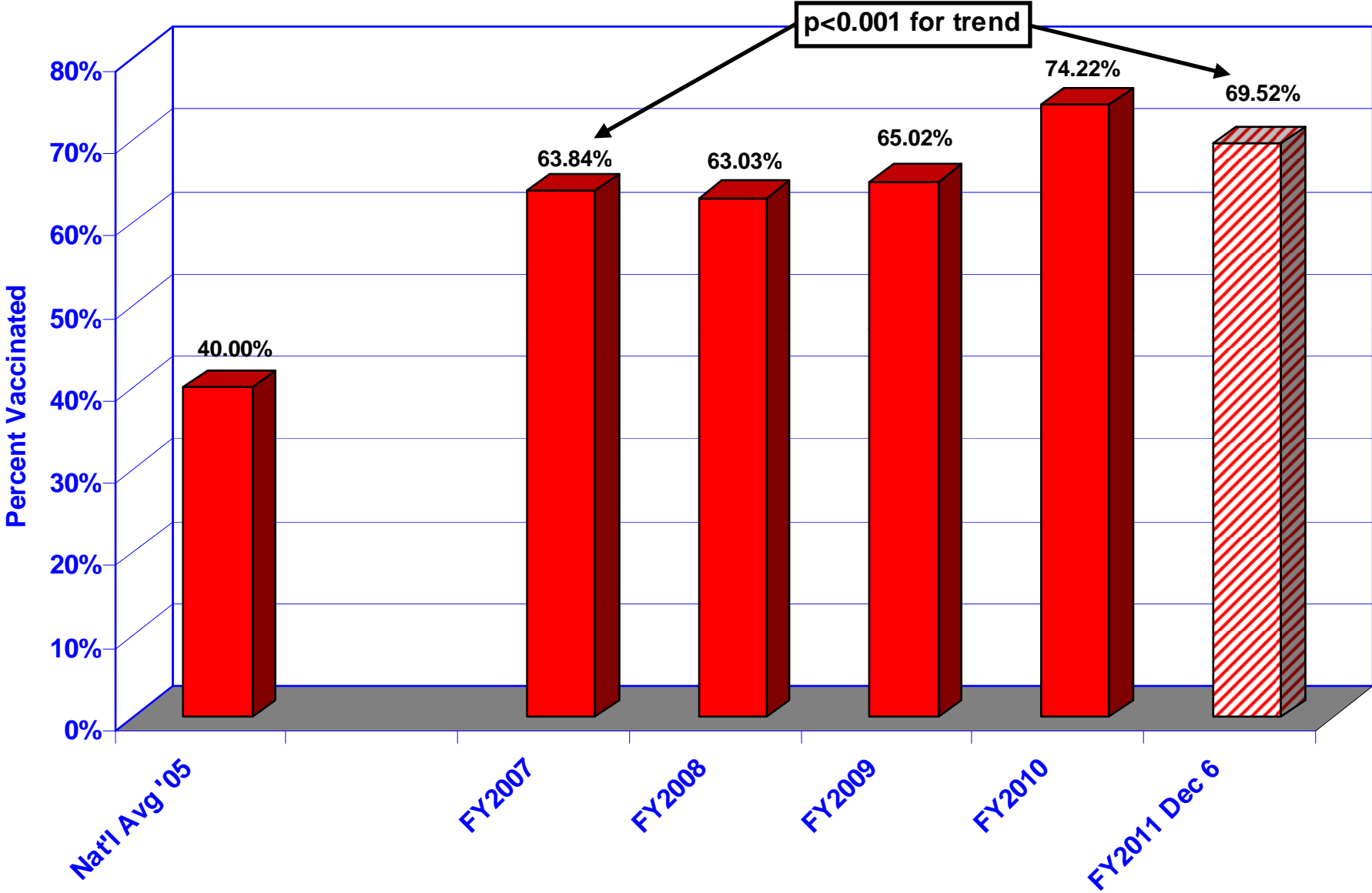
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- ✓ Provision of vaccine on weekends
- ✓ Train-the-trainer programs
- ✓ Feedback of vaccination rates to administration
- ✓ Feedback of vaccination rates to BOT
- ✓ Visible leadership support
- ? Require signed declination

# Employee Flu Campaign 2006

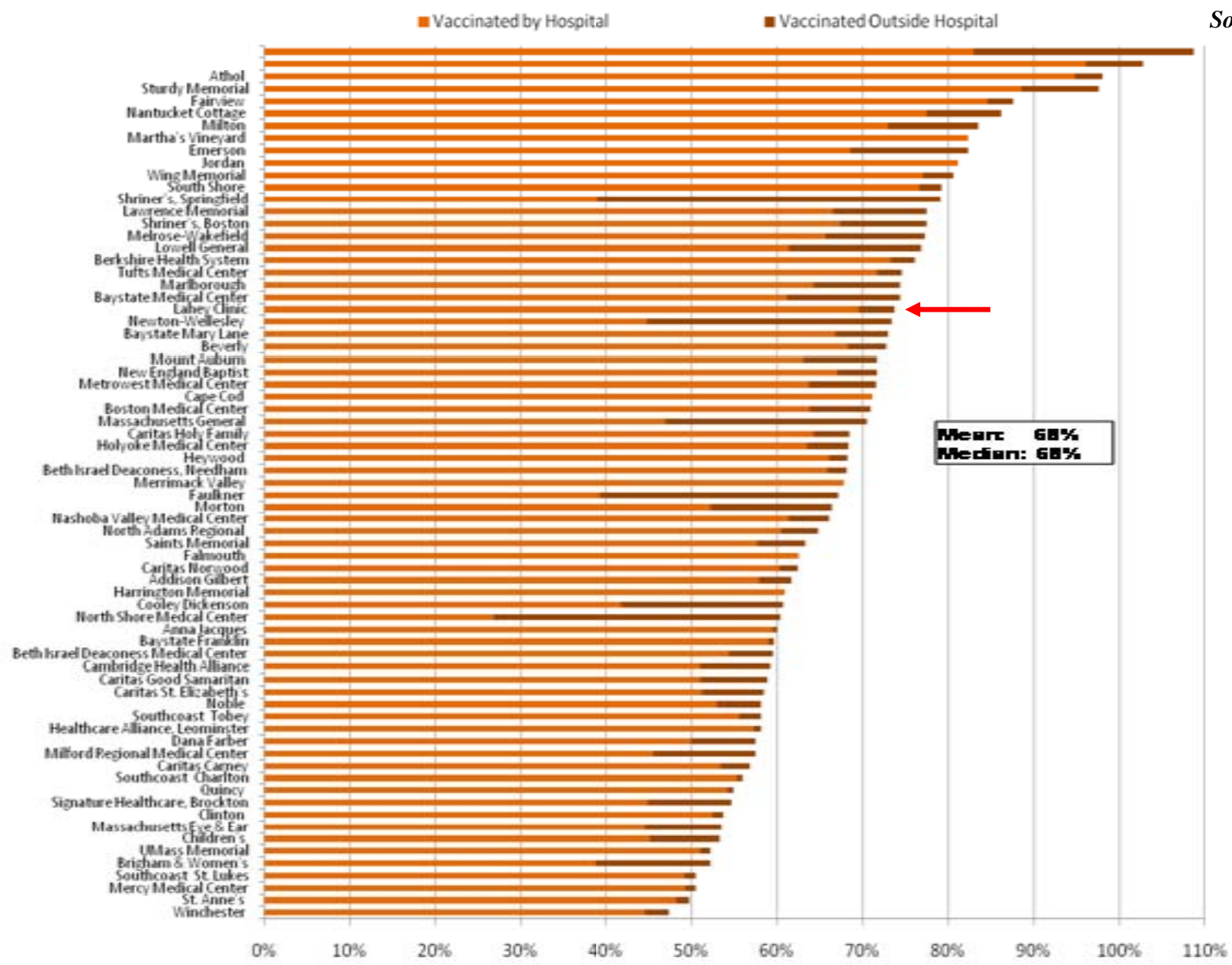


# Voluntary HCW Influenza Vaccination Rates, Lahey Clinic, FY2007-Dec 6, 2011



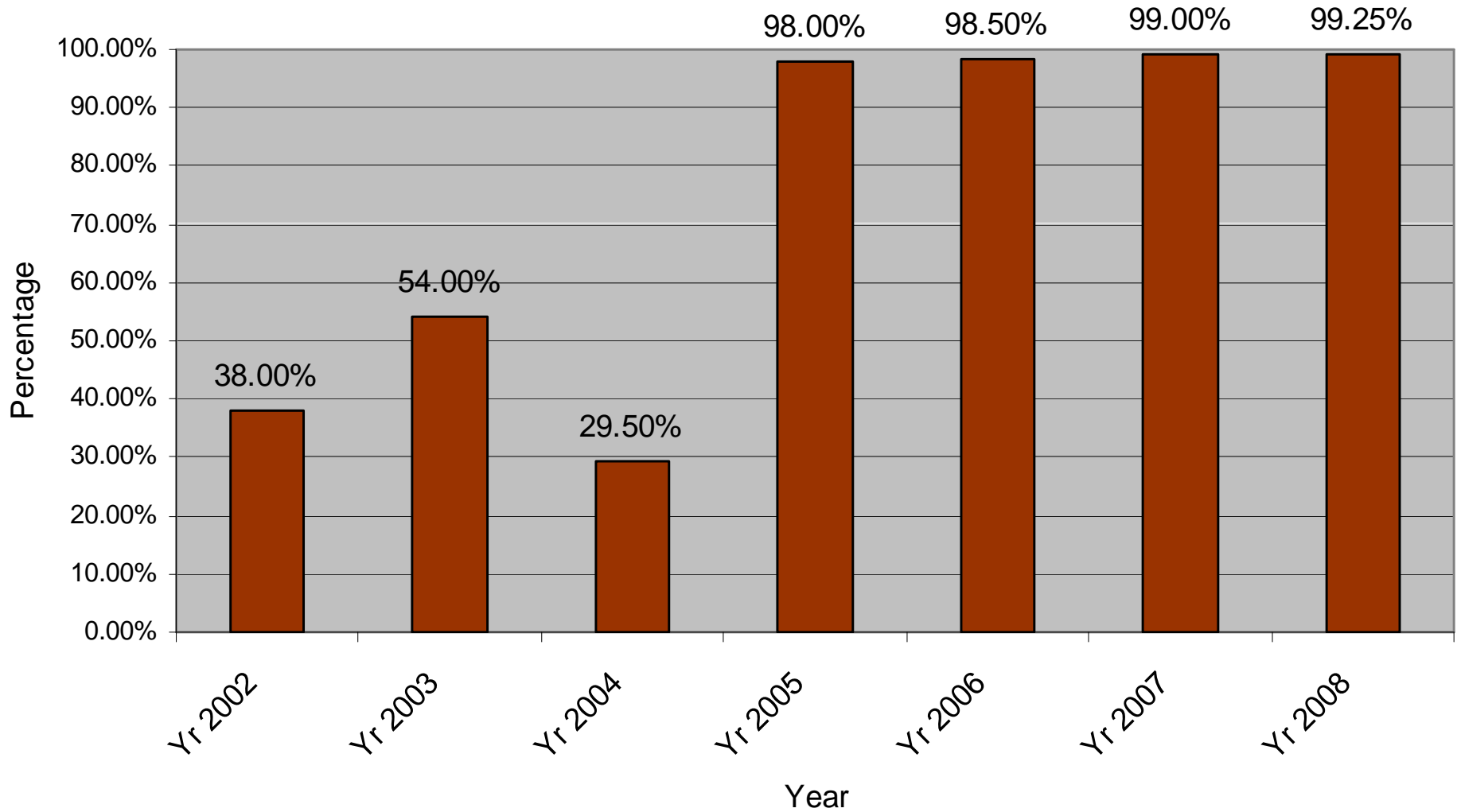
# Influenza Vaccination Rates in Massachusetts Acute Care Hospitals 2009-2010, Administered by Hospital and Documented Administered Elsewhere

Source: Mass DPH



# Influenza Vaccination Rates

## Virginia Mason Medical Center, Seattle



*--Courtesy of Dr. Joyce Lammert, 2009*

## **Plan for Vaccination or Mask—Adopted Dec 6, 2010**

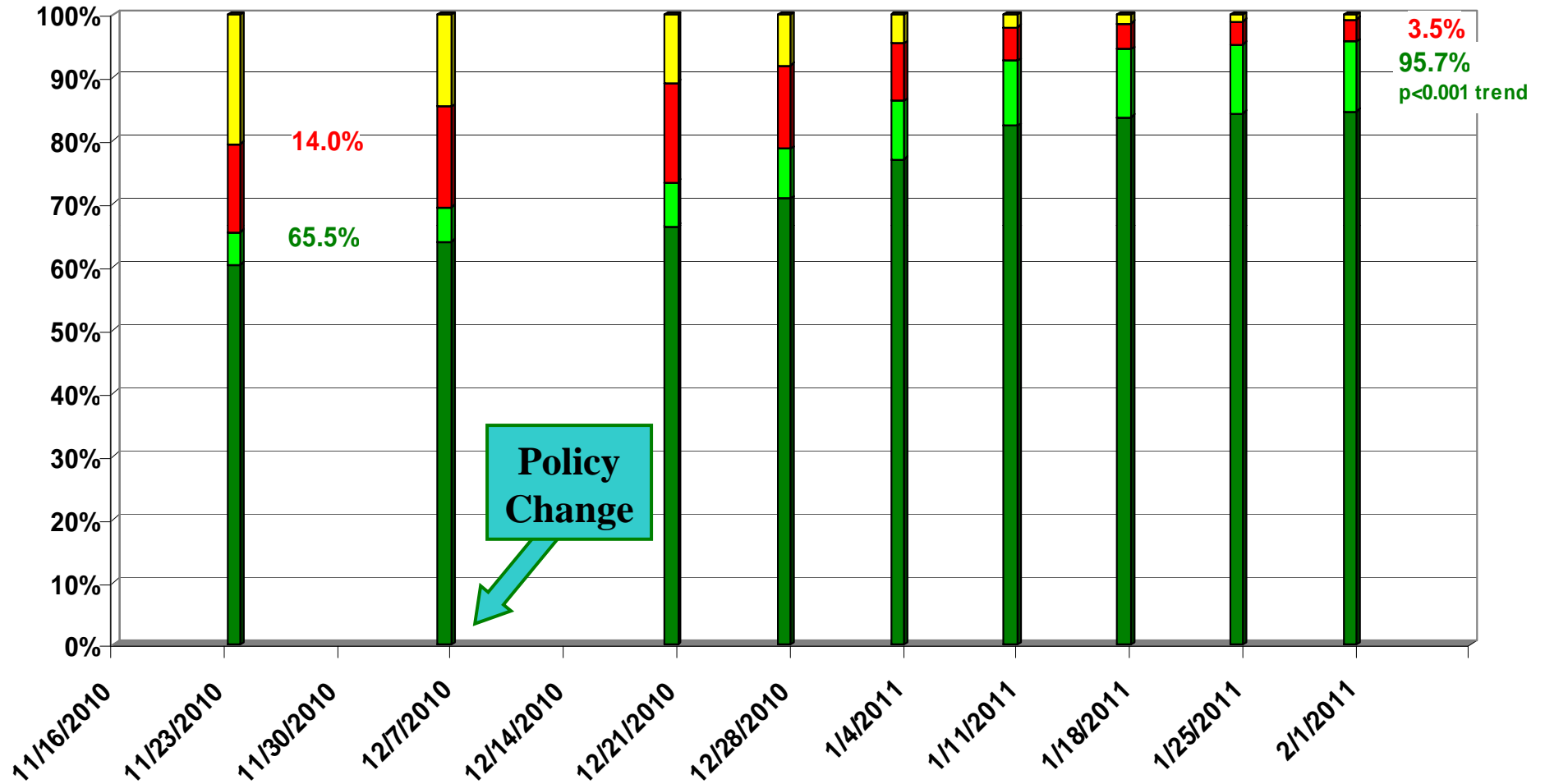
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- ◆ Vaccinate every employee and volunteer
- ◆ Require unvaccinated employees to wear a surgical mask whenever within 6 ft of another person during flu season
- ◆ Provide Allergy & Neurology consults prn
- ◆ Monitor unit-based compliance electronically & provide feedback weekly

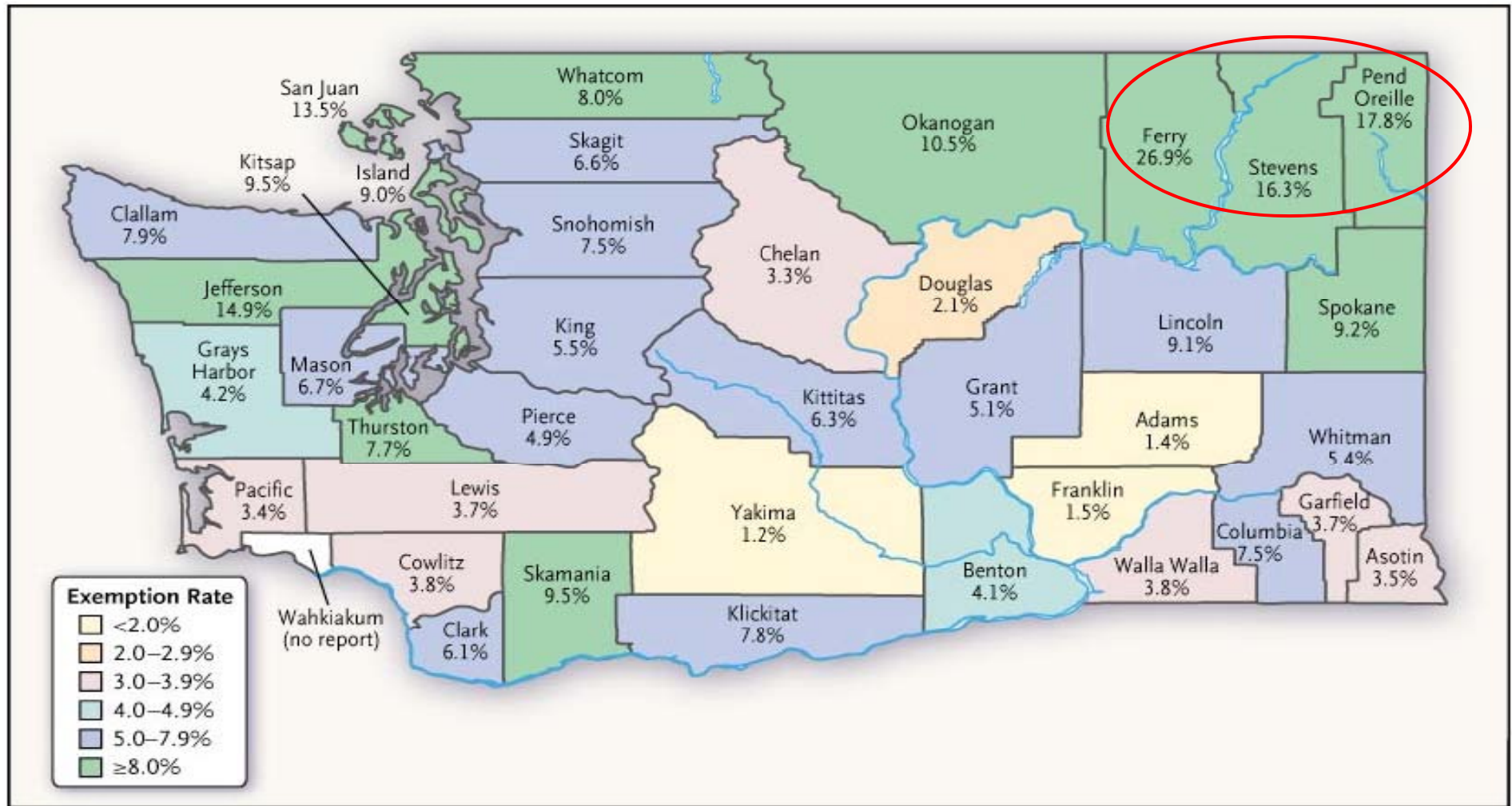
**100% of clinical & administrative leaders  
were vaccinated**

## Colleague Flu Vaccination Rates, Lahey Clinic, FY2011

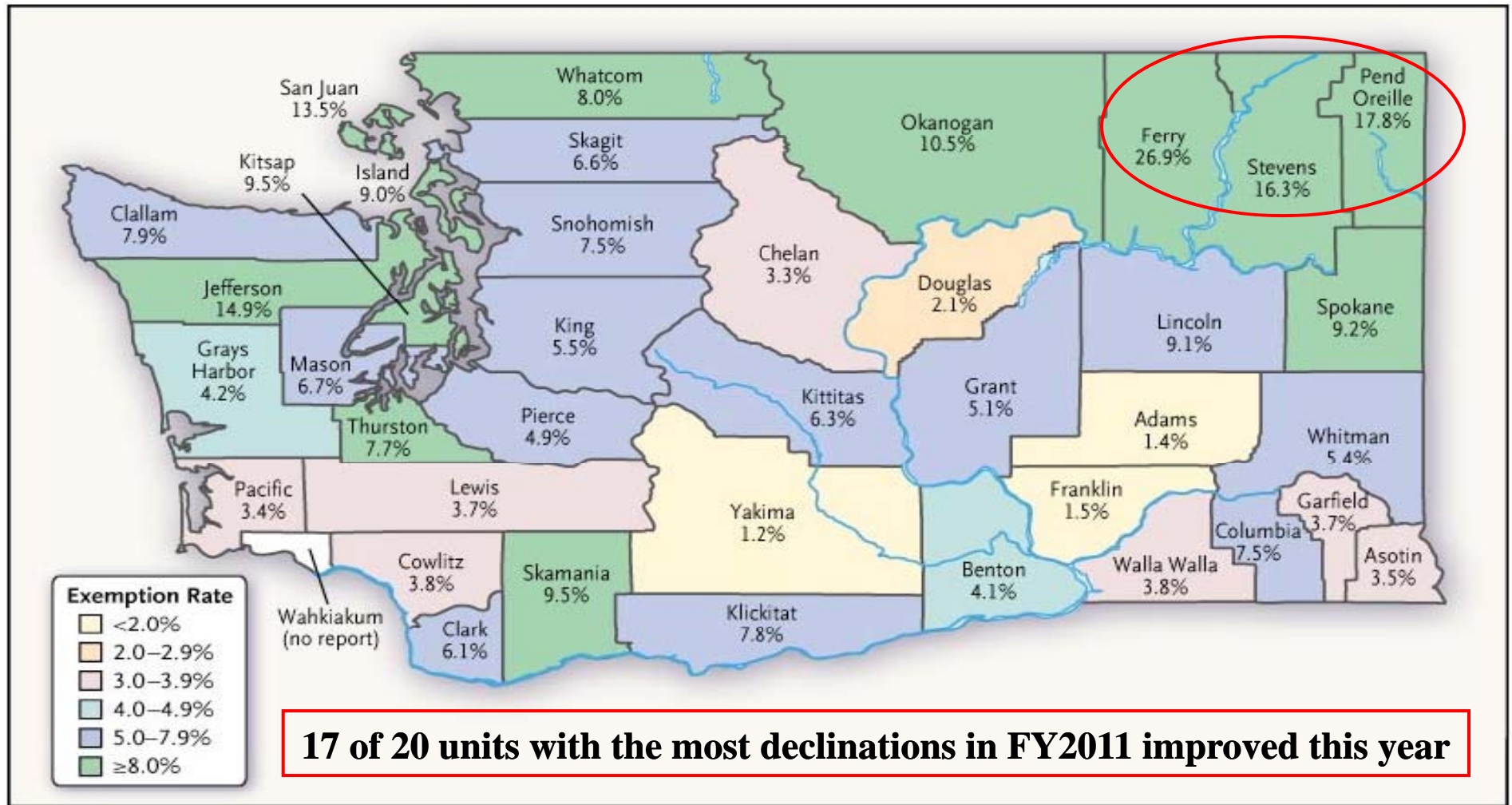
■ % Vax at Lahey   
 ■ % Vax Elsewhere   
 ■ % Declined   
 ■ % No Data



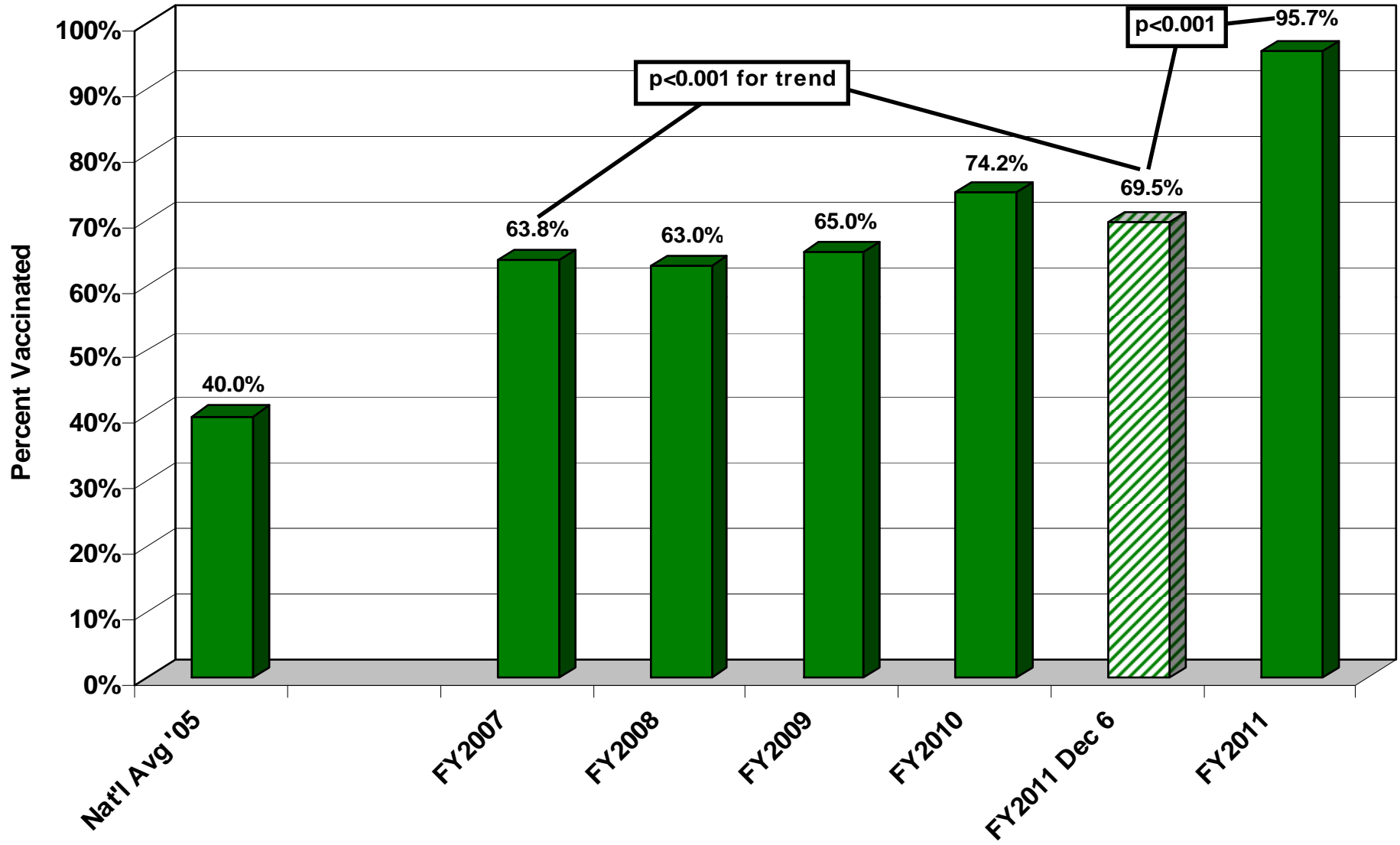
# Rates of Exemption from School Vaccination for Nonmedical Reasons in Washington Counties, 2006–2007



# Rates of Exemption from School Vaccination for Nonmedical Reasons in Washington Counties, 2006–2007

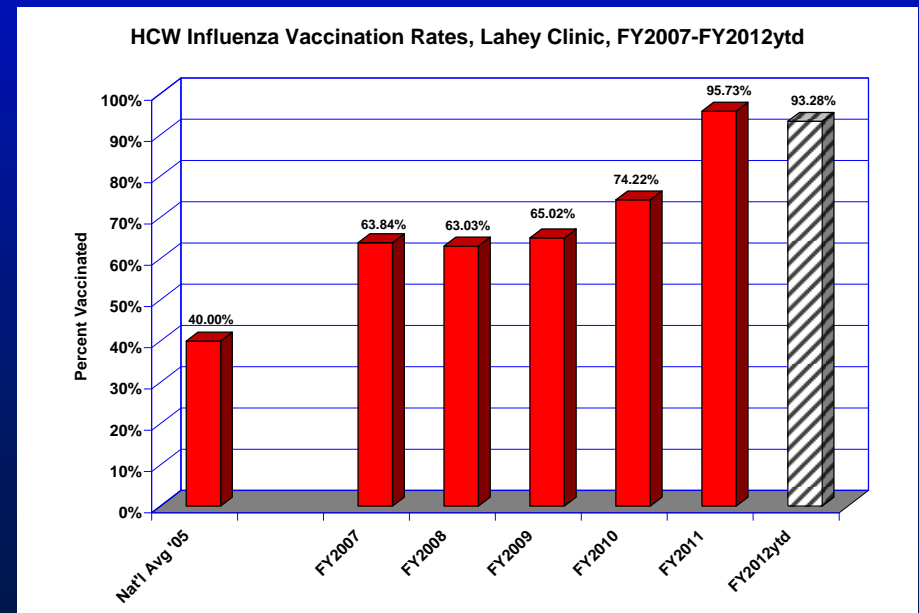


# Colleague Influenza Vaccination Rate, Lahey Clinic, FY2007-FY2011



# Benefits of Flu Vaccination at Lahey, FY2007-12

- ◆ Vaccination rates ↑ from 63.8% to 95.7%
- ◆ Saved avg \$85,813 to \$294,352 per year
- ◆ Saved 1-3 HCW lives in 6 years



# Conclusions

\*Flu vaccination is smart:  
safe, effective, & cost-saving

# Conclusions

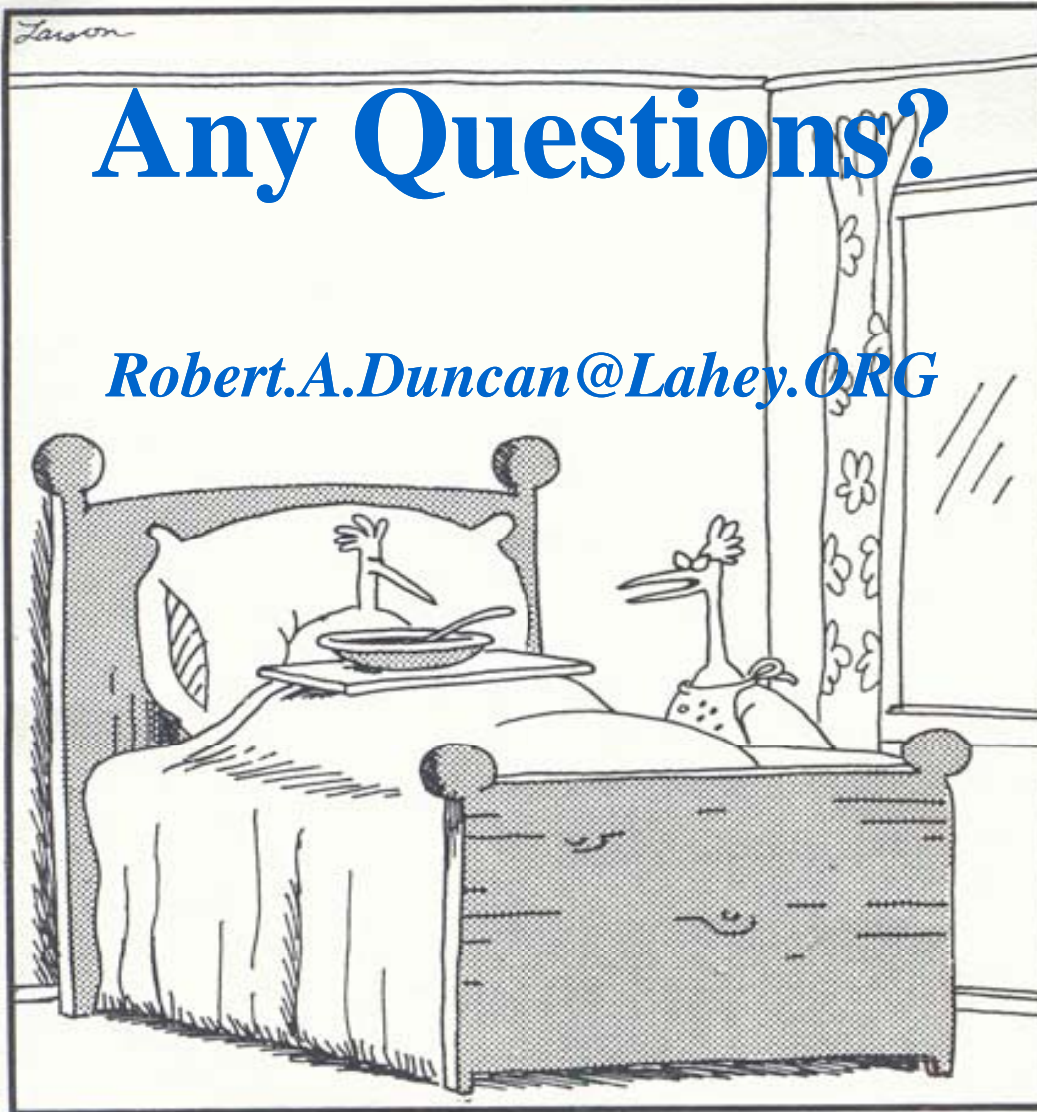
- Voluntary HCW flu vaccination +/- signed declination increases rates significantly but with limited success<sup>1,4</sup>
- Mandatory vaccination as a condition of employment achieves rates approaching 100%<sup>2</sup>
- Mandatory vaccine vs mask policies can rapidly increase vaccination rates to high levels<sup>3,4</sup>
- ⊕ Masks provide an alternative to vaccination & a compromise between philosophical camps of professional duty and personal liberty

# Conclusions

- Real-time monitoring pinpoints clusters of colleagues with concerns about vaccines & focuses intervention
- Personal communication with reluctant colleagues is essential, but requires major dedication of time & energy
- Allergy and Neurology consults minimize exemptions
- Support from senior leadership and Human Resources is vital

# Any Questions?

*Robert.A.Duncan@Lahey.ORG*



“Quit complaining and eat it! ...  
Number one, chicken soup is good for the flu—  
and number two, it’s nobody we know.”



Beth Israel Deaconess  
Medical Center



A teaching hospital of  
Harvard Medical School

THE SILVERMAN INSTITUTE  
*For Healthcare Quality and Safety*

# Promoting Maximal Healthcare Worker Influenza Immunization: Coordinating Administrative and Clinical Leadership

Kenneth Sands MD, MPH  
Sr. Vice President, Health Care Quality  
Beth Israel Deaconess Medical Center  
Boston, MA

November 30, 2011

**FLU** fighters  protect patients

# Leaders Need....

- To be convinced of the importance and achievability of the goal
- Clear Direction and expectations
- Actionable Information
- Assistance in delivering the message
- Access to the information that allows them to hold individuals accountable.
- Flexibility and Support from a “Flu Team.”



## Reasons for mandatory vaccination of HCWs

- Best approach for patient safety
- Strongly recommended by multiple national and local organizations (SHEA, APIC, IDSA, AAP, ACP, AMDA, APA, NPSF, EMHI)
- Other US healthcare institutions have done so successfully

# Sample hospitals with successful mandatory flu vaccination programs

Abington Memorial Hospital (PA), Altru Health (ND), AnMed Health (SC), Atlantic Health Hospitals (NJ), Aurora Health Care (WI), Baptist Health System (TX), Battle Creek Health System (MI), BJC HealthCare (MO), Boulder Community Hospital (CO), Bronson Methodist Hospital (MI), Capital Region Medical Center (MO), Charleston Area Medical Center (WV), Cottage Grove Community Hospital (OR), The Children's Hospital (CO), Children's Hospital of Orange County (CA), Children's Hospital of Philadelphia, Children's Hospital of The King's Daughters Health System (VA), Cincinnati Children's Hospital Medical Center (OH), Community Hospital of Long Beach (CA), Creighton University Health Care (NE), Davidson HealthCare (NC), Emory Healthcare (GA), Geisinger Health System (PA), Genesis HealthCare System (OH), Georgetown Hospital System (SC), Grady Health System (GA), Hackettstown Regional Medical Center (NJ), HCA-Fort Walton Beach Medical Center (FL), High Point Regional Health System (NC), Hoag Hospital (CA), Hospital Auxilio Mutuo (PR), Hospital of the University of Pennsylvania (PA), Hospital of Saint Raphael (CT), Iowa Health-Des Moines (IA), Kewanee Hospital (IL), Kindred Hospital (CA), Loyola University Health System (IL), Main Line Health System (PA), MCG Health (GA), MedStar Health (MD), Michigan State University/Kalamazoo Center for Medical Studies (MI), Moses Cone Health System (NC), Northern Michigan Regional Health System (MI), Pacific Medical Centers (WA), Saddleback Memorial Medical Center (CA), St. Francis Medical Center (NJ), St. Joseph Mercy Health System (MI), Seven Hills Pediatric Center (MA), Spectrum Health Hospitals (MI), University Hospital (OH), Virginia Mason Medical Center (WA), Waverly Health (IA), Wellmont Health System (TN), The Women's Hospital (IN)

*Immunization Action Coalition;*  
[www.immunize.org](http://www.immunize.org)

**Beth Israel Deaconess Medical Center  
Employee Occupational Health Service Manual**

**Title: PRE-PLACEMENT SCREENING OF EMPLOYEES, VOLUNTEERS, AND CONTRACT PERSONNEL**

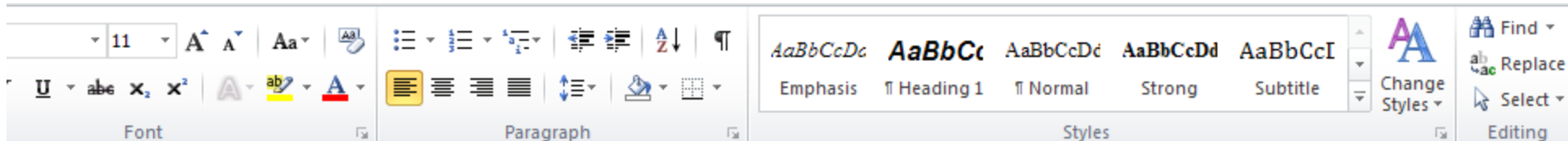
**Policy #: PM-19**

**Purpose:** To provide guidelines for pre-placement and infection control screening required for each Medical Center employee, student, volunteer, and other non-Beth Israel Deaconess employed health care worker/practitioner upon employment or practice at Beth Israel Deaconess Medical Center.

The health care environment presents health risks to employees and patients. In order to control and minimize these risks BIDMC requires all employees to be medically screened and to comply with the standards set forth in this document. These requirements follow national and state guidelines and regulations including but not limited to the Centers for Disease Control and Prevention (CDC), the Massachusetts Department of Public Health (MDPH) and The Joint Commission.

**Policy Statement:**

- A. Each new employee/volunteer or practitioner at Beth Israel Deaconess Medical Center shall be subject to the completion of pre-placement health screening including initial infection control requirements for new employees established by the Employee Health and Infection Control Working Group and approved by the Environment of Care Committee. Failure to meet these requirements may result in corrective action up to and including termination from employment.
- B. The pre-placement health screen also includes brief review of health and



If an employee is made aware of a change in practice (DH, BIDMC, ODH, etc) that affects his/her compliance with immunization standards, there will be a 30 day period to complete the request. If the personnel member does not adhere to request within 30 days, administrative leave of absence may be enacted by EOHS and Human Resources.

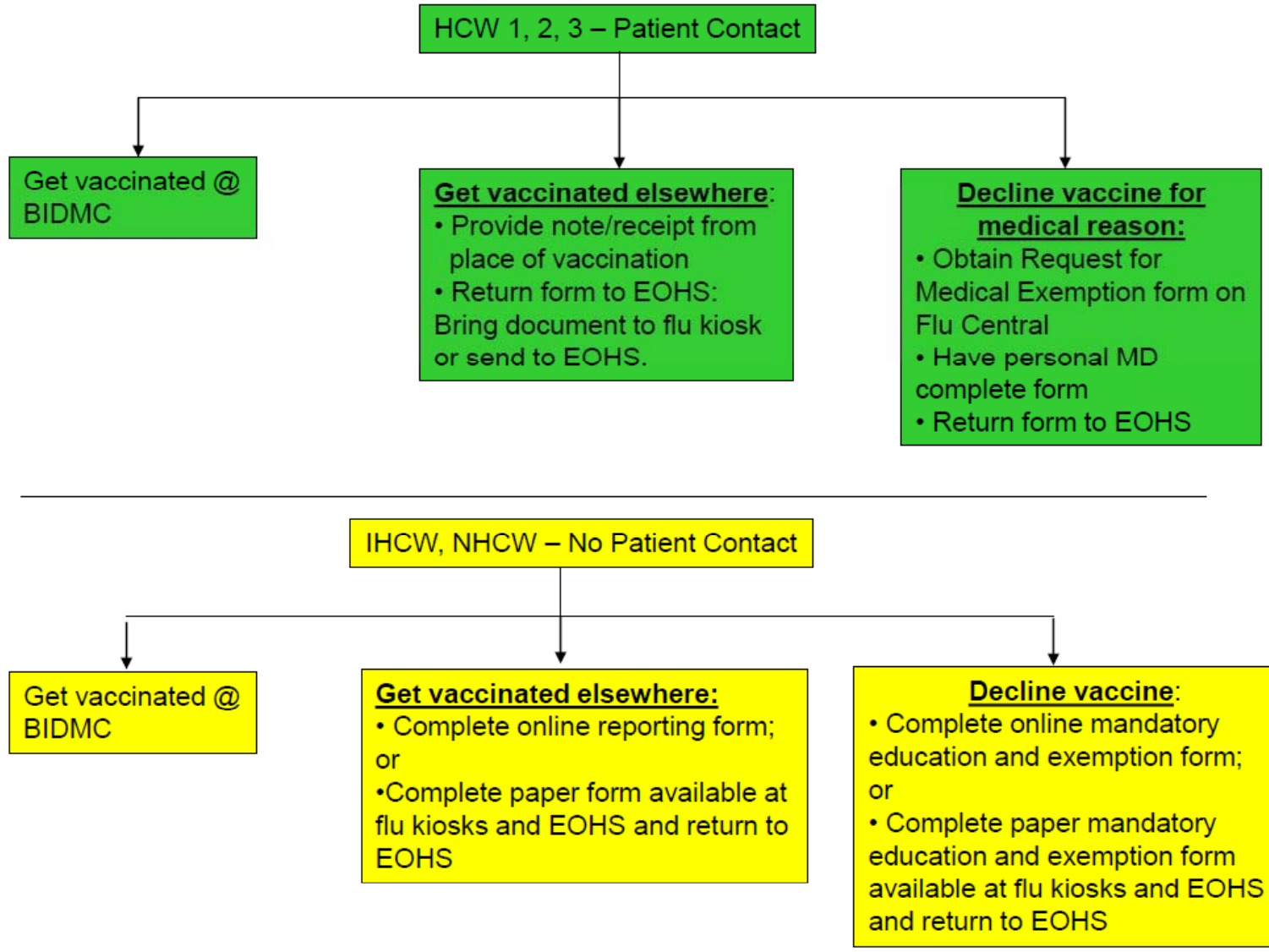
- I. Influenza vaccination: BIDMC requires staff who have patient contact to be vaccinated annually for influenza as a condition of employment. Employees who do not have patient contact are required to receive a flu vaccination or formally decline vaccination as a condition of employment. This policy is consistent with the facts that:
  - a. Flu vaccination is the most effective way to prevent influenza infection and its complications.
  - b. Flu vaccination of healthcare workers is also a Patient Safety standard of the Joint Commission
  - c. Mandatory flu vaccination is recommended by several national and local public health agencies and healthcare organizations.

Implementation of influenza vaccination process is outlined later in this policy.

- J. Appendix A outlines TB screening and immunization requirements for employees, contractors, volunteers, visiting clinicians and researchers, and students based on length of employment or assignment and degree of patient contact.
  - a. Contractors, visiting clinicians and researchers, and students are required to provide their immunization documents to EOHS as the time of pre-placement health screening. If immunization records do not meet the requirements below the individual will be referred to their home institution, PCP, or the BIDMC travel clinic to have the appropriate lab work or immunizations completed at their own cost.

**Guideline(s) for Implementation:**

## BIDMC Flu Vaccination Program 2011-2012 – Vaccination or Response due by December 1, 2011



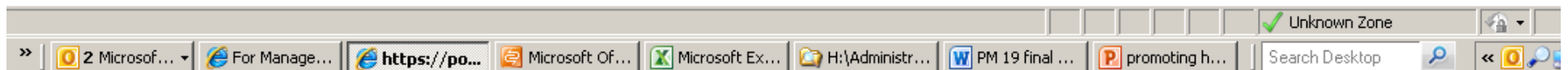
## Talking Points and FAQs for Managers and Department Administrators

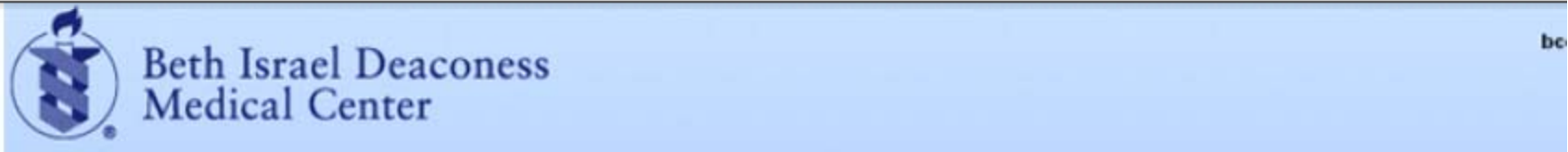
### Mandatory Flu Vaccination by Dec. 1, 2011

- BIDMC is requiring flu vaccination for all BIDMC staff and physicians who work in patient care areas by Dec. 1, 2011. This includes all staff and physicians who are categorized as Health Care Worker (HCW) 1, 2 or 3 by Employee and Occupational Health Services (EOHS).
- BIDMC staff who do not work in patient care areas – categorized as IHCW and NHCW – will be required to respond by Dec. 1 by either being vaccinated at BIDMC, informing EOHS of vaccination elsewhere or declining after viewing mandatory education.
- There will be an update coming soon regarding the HCW status of individual physicians. The guiding premise is that physicians who come to the hospital to see patients will be required to be vaccinated.

### Questions you May Receive from Staff/Physicians

- **How do I find out if flu vaccination is mandatory for me?** If you work in a patient care area, flu vaccination is mandatory. This includes staff who are in the HCW 1, 2 and 3 categories. Your designation should be on your mytime timesheet or you can check with your manager who will have a report on all who are required to be vaccinated later in the summer. Physicians can check in with their department administrators to determine their classification; most physicians will be HCW 1 or 2. Here is a general description of HCW status:





Time Entry <<

mytime From Sunday 06/26/2011 7am thru Sunday 07/03/2011 7am - Not Submitted

July 2011

S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
						31

Flu,Freddy - 0201 - Clinical Nurse II - HCW 1

Timesheet Status:	Not Submitted	Status:	Regular / Special Exempt / Active
Review Date:	01/01/2012	Benefit FTE / Hours:	0.9 / 36
Employee # / Rec #:	02011 / 0	Schedule Designation:	R - Rotating
Home Department:	01086570B - Emergency	Job Title:	N1001 - Clinical Nurse II

▶ Benefit FTE/Hours: 0.9/36 Paid: Nothing to Pay

- View My Timesheet
- Time Entry
- Search
- Alerts

Day	Description	Shift Start Time	Shift End Time
Sunday - 26	Worked Hours		
Monday - 27	Worked Hours		
Tuesday - 28	Worked Hours		
Wednesday - 29	Worked Hours		
Thursday - 30	Worked Hours		

Welcome ksands | Logout

Portal Help | Text Size A A A

Email

# BIDMC PORTAL

A Web Site for Our BIDMC Family

You will be timed out in 19:32  
[Report Problems/Feedback](#)

Phone/Directory

Pager

mytime

Emergency Numbers

PPGD (Policies & More)

BIDMC Today

Events Calendar

APPLICATIONS CLINICAL RESEARCH EDUCATION INTRANETS EMPLOYEE CENTRAL

### MY APPLICATIONS

- Capacity Dashboard
- Discharge Planning
- Discharge Summary
- Emergency Department Dashboard
- Online Medical Records
- Personalized Team Census
- Provider Order Entry
- UpToDate
- Compliance Certification Listing
- mytime
- PatientSite for Patients
- Performance Manager
- Remote Access
- Secure File Transfer
- Staffing Connection

Manage My Apps

### MY LINKS

Clinical Applications

Manage My Links

### Last 10 Pages Visited:

- Flu Central 2011-2012  
For Managers and Medical Leadership



## Cancer Patients Express Themselves in Native Language

Ana Marin, Cancer Patient Navigator, was recently approached by a patient with an idea for a unique support group.



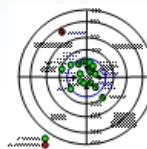
[BIDMC TODAY MORE NEWS >>](#)

## How Are We Doing?

Key Measures of BIDMC's Progress and Performance

- Quality and Safety
- Patient Experience & Satisfaction
- Environment of Care
- Environmental Sustainability
- Hiring & Retaining a Talented Workforce

Performance Initiatives <sup>Updated</sup>  
[Learn More...](#)



[More >](#)

# 62

Days since we learned of a Serious Reportable Event (SRE) at BIDMC

[View More Info >](#)



### Thanksgiving Holiday Schedule >

Click above for the Thanksgiving and Friday, Nov. 25 holiday schedule. The holiday impacts payroll and other services.



[Got Your Shot? Count Down to Dec. 1 Mandatory Flu Shot Program Deadline >](#)

### FEATURED EVENTS

Events This Week:

[Nominations Sought for Black Achievers Award](#)

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# BIDMC | PORTAL

A Web Site for Our BIDMC Family

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mytime

Emergency Numbers

PPGD (Policies & More)

BIDMC Today

Events Calendar

- APPLICATIONS ▾
- CLINICAL
- RESEARCH
- EDUCATION
- INTRANETS
- EMPLOYEE CENTRAL

Home > Intranets > Clinical > Flu Central 2011-2012 > For Managers and Medical Leadership

## >> FLU CENTRAL 2011-2012

For All Staff

### >> For Managers and Medical Leadership

> Responding to the Flu for Managers and Medical Leadership

For Clinicians Treating Patients

Flu Information to Share with Patients

Flu Team

## FOR MANAGERS AND MEDICAL LEADERSHIP

### Vaccination Information for Managers and Medical Leadership

Have your staff members responded? To monitor your staff's response to the flu vaccination program, click on [Performance Manager](#) to see flu as part of annual compliance training.

[Vaccination Presentation](#), Sharon B. Wright, MD, MPH, Director, Infection Control/Hospital Epidemiology, June 2011 Leadership Meeting

[Flu Vaccination Grid](#)

[Talking Points and FAQs \(7/7/11\)](#)

#### SEARCH:

KEYWORD SEARCH

ENTIRE SITE

SEARCH

#### MY LINKS

Manage My Links

+ ADD THIS PAGE TO MY LINKS

(14 more links can be added)

#### Tag This Page:

SUBMIT

What is a Tag? My

Last edited by cwhitcom on 10/20/2011

Performance Manager - Windows Internet Explorer

https://pm.caregroup.org/emp\_review.asp

File Edit View Favorites Tools Help

Google Search More >>

Microsoft Office Live Meetin... Performance Manager

Home Feeds (3) Read Mail Print

# Performance Manager

## BIDMC Staff Annual Compliance

- If any of the data in the yellow columns are not up to date, please send an email to **Employee Health**: [hcwinfo@bidmc.harvard.edu](mailto:hcwinfo@bidmc.harvard.edu) specifying the changes required.

- If any of the data in the blue columns are not up to date, please send an email to **PeopleSoft**: [HRIC@caregroup.org](mailto:HRIC@caregroup.org) specifying the changes required.

Peoplesoft change requests should appear in Performance Manager the following week.

### Data for Kenneth Sands

Manager	#Emps	Annual Review Compliance	Employee Health Compliance						
			Fit Test			TB		Flu Resp	Flu Season
			Req	Cleared	Fit Test	Req	TB		
<b>DIRECT REPORTS</b>	12	89%	0	N/A	N/A	1	100%	92%	2011-2012
A								86%	2011-2012
B								100%	2011-2012
F								91%	2011-2012
L								100%	2011-2012
K								100%	2011-2012
M								100%	2011-2012
M								100%	2011-2012
F								100%	2011-2012
F								86%	2011-2012
S								100%	2011-2012
<b>OVERALL TOTAL:</b>	<b>200</b>	<b>89%</b>	<b>10</b>	<b>80%</b>	<b>10%</b>	<b>207</b>	<b>88%</b>	<b>92%</b>	



# Leaders Need....

- To be convinced of the importance and achievability of the goal
- Clear Direction
- Actionable Information
- Assistance in delivering the message
- Access to the information that allows them to hold individuals accountable.
- Flexibility and Support from a “Flu Team.”





The leading voice of hospitals since 1936.

75<sup>th</sup>  
Anniversary

## **Promoting Healthcare Worker Influenza Immunization: The Role of Leadership**

Patricia M. Noga  
November 30, 2011

# The Role of Leadership

- MHA strongly supports the goals of having a healthy workforce, which includes providing the necessary immunizations to ensure that our staff and our patients are protected
- MHA strongly supports mandatory flu vaccination for all hospital employees.
- Hospital employees are the front-line stewards of public health and we believe that our commitment to safe patient care should carry the day in convincing staff to obtain the flu shot.
- MHA commends Commissioner Auerbach and the Department staff for continuing to advance this important goal – to reach a goal of immunizing at least 90% of a healthcare facility’s workforce against influenza

# The Role of Leadership

- It is important that hospitals continue to learn from others, to find common solutions and best practices that can work in other healthcare facilities.
- We encourage providers to review the following to promote vaccination of their healthcare workers:
  - EOHHS DPH *Hospital Personnel Seasonal Influenza Vaccination Report 2009-2010*
  - Goals of Eastern Massachusetts Healthcare Initiative

# Leadership Strategies to Work Toward 90% HCW Flu Immunization

- **Support from CEO and Board of Trustees are critical to success.**
- **Develop a strong multi-disciplinary team.**
  - CEO
  - CMO
  - CNO / Director of Nursing
  - Chief Quality Officer / Quality Director
  - Pharmacist
  - Infection Prevention (Chief Infectious Disease Physician / Infection Preventionist)
  - Human Resources / Employee Health
  - Compliance Officer
  - Legal Counsel
  - Staff Champions throughout the organization
- **Engagement of senior leadership to endorse immunization plan and take an active role in campaign**
  - Be one of the first to receive vaccine
  - Be photographed receiving vaccine and post in the organization

Pennsylvania's Universal Vaccination Campaign  
<http://www.haponline.org/quality/resources/flu-campaign/>

# Leadership Strategies to Work Toward 90% HCW Flu Immunization

- **Develop or update organization policy on flu vaccination for health care workers**
- **Develop a theme; campaign, including employee education & communication**
  - Materials include flu immunization presentations, healthcare personnel letters, newsletters, posters, flyers, email reminders
  - Posters, buttons, stickers, balloons
  - Consider holding employee family vaccination day
- **Ensure convenient access to the flu vaccine**
  - Peer vaccination on patient care units
  - Rolling flu vaccine carts that can be deployed to all departments during all shifts
  - Flu shot clinics at different dates and times, and locations
  - Flu shot kiosks / clinics coordinated with other activities and meetings for HCW convenience
  - Report on flu activity in the community to staff to encourage vaccination

# Leadership Strategies to Work Toward 90% HCW Flu Immunization

- **Make the flu immunization campaign fun and engaging**
  - Utilize the flu champions
  - Encourage department managers to take ownership for their rates and create a sense of friendly competition
  - Offer incentives or rewards to those who are immunized
  - Consider rewarding groups, units, or departments with highest vaccination rate.
  - Keep up campaign communication throughout entire flu season
  - Consider holding an event during National Influenza Vaccination Week, December 4-10, 2011.
- **Develop tracking system to monitor immunization progress**
  - Regularly monitor, track and analyze immunization rates
  - Listen to staff feedback throughout entire flu season
  - Triage problems and find ways to reach out to employees who have not been immunized.

Pennsylvania's Universal Vaccination Campaign  
<http://www.haponline.org/quality/resources/flu-campaign/>

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**STATEWIDE STAFFING PLANS & REPORTS**  
 Voluntary unit-by-unit reports on caregiver staffing levels updated on an annual basis for over 700 hospital units including emergency departments.

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- 2007
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Welcome to PatientCareLink, the next generation of PatientsFirst, the nation's groundbreaking healthcare resource dedicated to voluntarily providing patients, families and caregivers with the most transparent information available on the care provided at Massachusetts hospitals.

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**Success Stories**

**Co-winners of the Betsy Lehman Patient Safety Award - A Focus on Infection Prevention**

The hospitals within the UMass Memorial Health Care system each received the 2009 Betsy Lehman Patient Safety Recognition Award from the Betsy Lehman Center for Patient Safety and Medical Error Reduction for their work to reduce infections. UMass Memorial Medical Center and Marlborough Hospital were this year's co-winners. [Read more about the Lehman Award-winners](#)

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**For Patients & Families**

PatientCareLink is more than data; it's about providing useful information to patients and their families. We hope that you will use this information to understand your hospital care and your care team, to learn more about what your hospital is doing to improve care, and how you can participate in making your care safer.

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**IN TRIBUTE**

PatientCareLink is dedicated to the memory of Senator Edward H. Kennedy for his lifelong commitment and tireless work in the pursuit of quality, affordable healthcare for all.



# Next Steps

Beyond this webinar, if providers feel that there are other ways in which MHA and DPH can assist, please contact Pat Noga with your recommendations at [pnoga@mhalink.org](mailto:pnoga@mhalink.org).



# Executive Leadership's Role in Promoting Maximal Healthcare Worker Influenza Vaccination Coverage

Bureau of Health Care Safety and Quality

Madeleine Biondolillo, MD

Bureau Director

November 30, 2011



# Key Points: Influenza Regulations

## Apply to All Personnel

- Educate Health Care Personnel (HCP) on the risks and benefits of flu vaccination
- Offer influenza current season's vaccine annually, at no cost to all HCP
- Maintain a system to track the influenza vaccination status of all personnel including declinations
- Obtain a signed declination from HCP who decline vaccination



## Influenza Reporting Requirements 2011- 2012

**No later than April 15, 2012, health facilities are required to report the following to the Department:**

- The number of **employees**:
  - immunized for seasonal influenza by the health facility from August 1, 2011 through March 31, 2012;
  - immunized for seasonal influenza outside the health facility from August 1, 2011 through March 31, 2012;
  - The number of **employees** declining seasonal influenza immunization from August 1, 2011 through March 31, 2012 and;
- The total number of health facility **employees** as of December 31, 2011.



## **Definition: Employee**

Individuals, both full-time and part-time, who are on the healthcare facility payroll as of December 31, 2011, whether or not they provide direct patient care.



## Calculation of Percent of Healthcare Employees Vaccinated

# employees immunized with flu vaccine from August 1,  
2011 thru March 31, 2012\*

X 100

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# employees on the payroll as of December 31, 2011

*\*includes vaccination administered both inside and outside the health facility.*



## 2011-2012 MDPH Hospital Performance Goal

The overall goal is for acute care hospital healthcare employee vaccination rates to be greater than 90% and no facility will report a rate less than 73%.



## Reporting

- Healthcare facility specific information will be publicly reported prior to the 2012-2013 influenza season.
- Data will be used to inform public health policy.
- Annual vaccination for all healthcare personnel is a matter of patient safety and is necessary to significantly reduce healthcare associated influenza infections.