

Johns Hopkins Medicine Mandatory Flu Vaccination Policy



Frequently Asked Questions

OVERVIEW

Why do we mandate the flu vaccine?

Each year, approximately 36,000 people die and 226,000 are hospitalized due to the flu. These are preventable deaths. Requiring an annual flu vaccine demonstrates our commitment to protect the safety and health of our patients, many of whom already have weakened immune systems, as well as visitors, co-workers and our families. Vaccination for Health Care Personnel (HCP) has been recommended for years, yet vaccination rates remain at 45 percent nationally. At Johns Hopkins Medicine member organizations, rates increased over the years, but they did not achieve 100 percent despite significant efforts. Overall, voluntary programs have not been effective at markedly increasing vaccination rates. As of the 2012-2013 flu season, Johns Hopkins Medicine mandated influenza vaccination. Making the flu vaccine mandatory is a step that has also been taken by many of the health care systems in Maryland and in many hospitals throughout the nation. In Maryland alone, 36 hospitals have already adopted a mandatory influenza vaccination policy with four more planning to implement this season.

Who adopted the mandatory flu vaccination policy?

All Johns Hopkins Medicine entities have adopted a mandatory vaccination policy. This includes Howard County General Hospital, Johns Hopkins Bayview Medical Center, Johns Hopkins Community Physicians, Johns Hopkins HealthCare, The Johns Hopkins Health System Corporation, Johns Hopkins Home Care Group, The Johns Hopkins Hospital, Potomac Home Health Care, Potomac Home Support, Sibley Memorial Hospital, Suburban Hospital and All Children's Hospital.

Who does this apply to?

The mandatory influenza vaccination program applies to all individuals, employees, faculty, staff, residents and fellows, temporary workers, trainees, volunteers, students, vendors and voluntary medical staff, regardless of employer, who provide services to patients or work in patient care or clinical care areas, including acute and chronic care hospitals, outpatient facilities and clinics. Each JHM entity defines specific covered personnel in their policy depending on entity operations.

What is considered patient care or clinical areas?

These are defined by the physical or recognized borders of acute and chronic care hospitals, clinics or other sites where clinical operations occur. These include but are not limited to: inpatient and outpatient areas where patients may be seen, evaluated, treated or wait to be seen; and areas where patients are transported or visiting. This may include patient homes. Refer to your respective entity policy for complete definitions.

How effective are flu vaccines, especially since virus strains keep changing?

The flu vaccine is the most effect method to prevent influenza. The effectiveness of the vaccine depends on a number of factors, including the accuracy of the match between vaccine strains and circulating strains and the age and health of the recipient. Influenza vaccine does not protect against other respiratory viral infections that occur during winter months. Public health officials have a good track record of predicting the three main flu strains that will cause the most illness during each flu season. These strains usually change each year, which is why the vaccine is given annually. Even if you get the flu from a strain of the virus that wasn't included in the vaccine, having the vaccine can make your illness milder.

Why can't Johns Hopkins stick with what has always worked, namely wearing masks and doing a better job of hand hygiene to prevent transmission of flu?

Health care personnel have frequent contacts with high-risk patients in many settings, including the elevators and cafeteria. Personnel can serve as a vehicle to transmit influenza even when they don't have symptoms. Up to 25 percent of health care personnel with the flu may have minimal or no symptoms yet can still transmit infection. Studies have found that health care personnel with influenza-like symptoms work an average of 2.5 days while ill and those infected with influenza can transmit the virus to others even before their symptoms begin.

Additionally, their absenteeism can stress a health care facility or system. Research shows that influenza vaccination of health care personnel decreases patient mortality by 40 to 50 percent, risk of nosocomial infection by 43 percent and absenteeism by 20 to 30 percent, while limiting the risk of bringing illness acquired at work home to family members.

Why can't vaccination be voluntary?

Our highest priority must be to protect our patients, many of whom are exceptionally vulnerable to adverse outcomes from the flu. The research clearly shows that flu vaccinations vastly increase mass immunity and protect immune-suppressed patients. Joshua Sharfstein, M.D., secretary of Maryland's Department of Health and Mental Hygiene, says that the years that there have been flu outbreaks in Baltimore City are correlated directly to low vaccination rates (as low as 30 percent) in health care workers.

Is it legal to mandate flu vaccination?

Yes. Fifteen states have legislation requiring that health care workers be immunized in certain circumstances. Maryland law currently requires proof of immunity for other communicable diseases such as measles, mumps and rubella for acute health care workers. In fact, other health care systems in our area have already mandated flu vaccination. These policies have not been challenged in Maryland courts, but other states have upheld them when challenged.

IMPORTANCE OF BEING VACCINATED

I'm not involved in direct patient care. Why should I be vaccinated?

The Centers for Disease Control and Prevention (CDC) recommends the vaccine for all persons over the age of 6 months, especially health care workers. Everyone, including laboratory, clerical, dietary and housekeeping employees as well as laundry, security, facilities, maintenance and administrative personnel might be exposed to the flu virus even though they are not directly involved in patient care, and could transmit the virus to others.

I'm very healthy and never get the flu. Why should I get the flu vaccine?

Working in a health care environment increases your risk of exposure. You may become infected and experience only mild symptoms but still pass the virus to patients, co-workers and members of your family.

I'm very familiar with the symptoms of the flu, and I stay home when I am sick. So, there is very little chance that I would infect my co-workers or patients. Why should I get the vaccine?

The signs and symptoms of the flu may not appear for a day or two after you contract influenza, during which time you could unknowingly infect patients and co-workers.

Can't I just take antiviral drugs if I get the flu?

It is best to take precautions to prevent the flu with annual immunization. You can always seek treatment for the flu, but in the meantime, you may have already passed on the virus to patients and co-workers since viral shedding may occur up to two to three days prior to the appearance of symptoms. Also, resistance to antiviral drugs can develop in circulating virus strains, therefore compromising the effectiveness of the drugs for people who need them the most—those at high risk for severe complications.

ABOUT THE VACCINE

When should I be vaccinated?

When the flu season is about to begin, you should get the vaccine as soon as possible. It takes about two weeks to develop protection after receiving the vaccine. Check with your local Occupational Health office for information about flu vaccination, including locations and times.

If I get the seasonal flu vaccine in the fall, will I still be protected if the flu season continues into March or April?

Yes. Protection from the particular strains included in the vaccine will last for the duration of the flu season.

Is it true that you can get the flu from the flu vaccine?

No, you cannot get the flu from the flu vaccine. The viruses in the vaccine are either killed (as is the case with the shot) or weakened (as is the case with the nasal spray) so that they cannot cause the flu. Some people mistakenly confuse flu symptoms with the vaccine side effects, such as a minor fever.

What is the live attenuated vaccine and are there individuals who should not receive it?

The live attenuated vaccine is the flu vaccine that is administered as a nasal spray. This is a highly effective vaccine that is licensed for people up to the age of 49. We do allow health care workers over this age to receive the vaccine if they sign a consent form. This vaccine is not recommended for immune-suppressed patients; patients with chronic cardiovascular, pulmonary (e.g., asthma) or metabolic diseases (e.g., diabetes or renal insufficiency); and pregnant women. This vaccine is also not recommended for household members in close contact with severely immunocompromised persons (e.g., acute leukemia patients).

Will the flu vaccine make me feel ill?

Almost all people who receive the influenza vaccine have no serious problems. Some people may experience minor side effects. If these problems occur, they begin soon after the shot is given and usually last no more than one to two days. The most common side effects are:

- Soreness, redness or swelling where the shot was given
- Low-grade fever and aches
- Runny nose, sore throat, cough and headache (nasal mist only)

Any employee who believes that they are experiencing adverse effects related to the vaccination should contact Occupational Health.

I am pregnant. Should I get the flu vaccine?

Yes. Pregnant women should receive the flu shot. It is especially important for pregnant women to get the flu shot as you are more likely to have serious complications to yourself and your pregnancy if you

get the flu. Once you get the flu shot, your body will start producing antibodies that will help protect you against the flu, and this protection can be passed to your unborn baby. According to the CDC, you can receive the flu shot at any time, during any trimester, while you are pregnant.

Pregnant women should receive the injectable vaccine. The nasal spray is only for use in healthy people 2 to 49 years of age who are not pregnant.

What if I get vaccinated on my own through my doctor's office or another location other than a Johns Hopkins medical facility?

That is acceptable. If you receive the vaccine elsewhere, please provide documentation to Occupational Health Services by Dec. 3.

EXCEPTIONS

What about an individual who has medical or religious reasons for declining vaccination?

An exception to the vaccination policy may be requested for certain medical reasons, including documentation of severe allergy to the vaccine or components as defined by the most current recommendations of the CDC's Advisory Committee on Immunization Practices (ACIP) (http://www.cdc.gov/mmwr/preview/mmwrhtml/mm60e0818a1.htm?s_cid=mm60e0818a1_e&source=govdelivery) or a history of Guillain-Barré syndrome within six weeks of an influenza vaccine. If receiving the vaccination conflicts with sincerely held beliefs, a request for religious accommodation may be made.

What documentation do I need to provide to request a medical exception?

Personnel requesting a medical exception must submit proof of medical contraindication and a request for medical exception form to Occupational Health Services by Nov. 5, 2013, which is approximately 20 business days prior to the December deadline for compliance. Occupational Health Services will evaluate the documentation and let you know if you will be granted a medical exception.

I received an exception last year. Do I have to submit the paperwork again this year?

Yes. All personnel who have a medical or religious exception must submit a new request. Because the composition and availability of flu vaccines changes from year to year, certain allergies or concerns may no longer be relevant. All personnel who have an allergy or medical contraindication should fill out the appropriate paperwork and submit it to Occupational Health Services (medical) or Human Resources/Institutional Equity (religious) for review.

My religion requires me to decline vaccination. What should I do?

If you decline the vaccine for religious reasons, you must fill out a request for religious accommodation. You must give this documentation to Human Resources (JHHS entities) or the Office of Institutional Equity (JHU) by Nov. 5, 2013, which is approximately 20 business days prior to the December deadline

for compliance. Human Resources or Institutional Equity will evaluate the documentation and let you know if you will be granted a religious accommodation from the vaccine requirement.

If my declination for medical or religious reasons is approved, will I still be able to work?

Yes. Those who cannot receive the flu vaccine, whether for religious or medical reasons, will be required to properly wear a protective surgical mask over their mouth and nose when within 6 feet of any patient and when entering a patient room during the influenza season. The effective dates of the flu season will be identified by JHHS Epidemiology and Infection Prevention. This important step to prevent flu transmission is supported by national patient safety and infectious disease prevention organizations.

COMPLIANCE

What happens if I don't want to get the vaccine?

All employees who fail to comply and who have not received a medical exception or religious accommodation will be placed on an unpaid administrative leave of one week or less. If, at the end of the administrative leave, the employee has not met the vaccination requirement, the employee will be considered to have voluntarily resigned.

Medical staff at all entities who do not comply will be placed on administrative suspension of privileges for the duration of the flu season. Such actions will not be reportable to the Maryland Board of Physicians or the National Physician Database (NPDB). They will also be denied access to patient and clinical care areas.

Trainees, students, residents or fellows, campus research personnel, volunteers, vendors, voluntary staff or temporary workers who fail to comply with vaccination requirements will not be permitted to enter patient care or clinical care areas for the duration of the flu season.

Anyone granted a medical exception or religious accommodation but who fails to wear a surgical mask within 6 feet of a patient during the influenza season will be subject to disciplinary action, up to and including termination.

SUPPORT FOR MANDATORY VACCINATION

What other institutions/health systems have mandated influenza vaccination among health care personnel?

- State of Rhode Island
- MedStar (Baltimore and elsewhere)
- 38 of the 46 hospitals in the state of Maryland (with four more adopting policies for 2013-2014)
- Virginia Mason, Seattle, Wash.
- University of Pennsylvania, Philadelphia, Pa.

- Barnes-Jewish Hospital/Washington University, St. Louis, Mo.
- Baptist Hospital/Wake Forest University, Winston Salem, N.C.
- Emory University, Atlanta, Ga.
- Creighton University, Omaha, Neb.
- University of Iowa Hospital and Clinics (Iowa City)
- Loyola University Hospital (Chicago, Ill.)
- Multiple HCA hospitals
- Most hospitals in the state of Michigan including University of Michigan and Michigan State

What professional associations support mandated influenza vaccination among health care personnel?

- American Academy of Family Physicians
- American Academy of Pediatrics
- American College of Physicians
- American Hospital Association
- American Medical Directors Association
- American Pharmacists Association
- American Public Health Association
- Association for Professionals in Infection Control and Epidemiology
- Infectious Diseases Society of America
- National Foundation for Infectious Diseases
- National Patient Safety Foundation
- Society for Healthcare Epidemiology of America

MORE INFORMATION

Where can I get more information about the flu vaccine?

You can find more information on the flu vaccine at www.cdc.gov/flu.