

This guidance has been prepared by the Office of the President to assist you in issuing your local policy. It applies to both medical centers and campuses – **all UC locations.**



**University of California Guidance for Epidemiology & Infection Prevention  
Influenza: Seasonal Plan for Healthcare Personnel Vaccination**

Date Written: 08/09

Date Reviewed/Revised: \_\_\_\_\_

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I. PURPOSE

This document has been developed to provide guidance to supervisors and managers in the prevention and management of influenza concerning all University of California Health Care Personnel who have any duties or presence in patient contact areas at UC Owned or UC Affiliated Health Care Facilities. These guidelines apply to all UC employees working at any UC Owned or UC Affiliated Health Care Facilities, as well as students, researchers, independent contractors, volunteers, and vendors at those facilities. This policy encompasses all influenza vaccines recommended by the Centers for Disease Control and Prevention. Be advised that your local Health Authority may dictate different guidelines to which you must respond.

II. DEFINITIONS

1. Health Care Personnel. Health Care Personnel includes, but is not limited to:

- A. Staff – all employees, volunteers, or licensed health care professionals, regardless of employer. This includes campus Occupational Health and Student Health Center employees, School of Medicine employees, hospital medical staff members, residents, fellows and other health care profession trainees, observers and volunteers.
  - B. Students – medical students, nursing students, nurse practitioner/physician assistant students, pharmacy students, respiratory therapy students, radiation technology students, and all other students receiving training at a UC health care facility.
  - C. Vendors – Representatives or distributors of a manufacturer or company who visit for the purpose of soliciting, marketing, or distributing products or information regarding the use of medications, products, equipment and/or services.
2. UC Owned or UC Affiliated Health Care Facilities: Any location in which the University of California is responsible for the care of and provides services to patients, including , but not limited to hospitals, outpatient clinics, home health, student and employee health centers, dental clinics, and pharmacies.

### III. BACKGROUND AND RATIONALE

Several vaccines (or documentation of prior immunity) are required of health care workers to protect both themselves and the patients they encounter. These include hepatitis B, mumps, measles, rubella, chicken pox, and others (see California Code of Regulations Title 8 § 5199, Appendix E for the list). The imminent threat of an influenza pandemic confirms the importance of ensuring the protection of all UC students, faculty, patients, employees and visitors against this medically important and potentially deadly virus.

There is an imminent threat of a more virulent influenza strain with pandemic potential. In nearly all prior pandemics, mild disease was followed by a dormant period of several months, which was then followed by the emergence of a more virulent virus that produced widespread disease and death.

The lack of influenza vaccination produces substantial issues within medical facilities:

- 1) Increased influenza transmission due to higher vulnerability compared to vaccinated groups;
- 2) Increased fear that co-workers are a source of infection;
- 3) Increased need to furlough for illness or influenza exposure; increased risk of inadequate staffing during high risk periods or pandemic events;
- 4) Increased work from Epidemiology and Infection Prevention and all affected areas when exposure work-ups occur.
- 5) Increased work for Occupational Health Services for contact tracing, chemoprophylaxis, treatment, and return to work assessments.

Influenza transmission and outbreaks in hospitals and nursing homes are well documented. Health care providers can acquire influenza from patients or transmit influenza to patients and other staff. Despite the documented benefits of health care provider influenza vaccination on patient outcomes and health care provider absenteeism and on reducing influenza infection among staff, vaccination coverage among health care providers remains low (less than 50%).

The Advisory Committee on Immunization Practices (ACIP) in its recommendations for Prevention and Control of Influenza (2007) reiterates that all healthcare personnel should be vaccinated in order to reduce the risk of becoming ill with influenza or of transmitting influenza to others.

California Health & Safety Code § 1288.7 (effective January 1, 2007) states the following requirements:

By July 1, 2007, the department shall require that each general acute care hospital, in accordance with the Centers for Disease Control guidelines, take all of the following actions:

- (a) Annually offer onsite influenza vaccinations, if available, to all hospital employees at no cost to the employee. Each general acute care hospital shall

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require its employees to be vaccinated, or, if the employee elects not to be vaccinated, to declare in writing that he or she has declined the vaccination.

(b) Institute respiratory hygiene and cough etiquette protocols, develop and implement procedures for the isolation of patients with influenza, and adopt a seasonal influenza plan.

(c) Revise an existing, or develop a new, disaster plan that includes a pandemic influenza component. The plan shall also document any actual or recommended collaboration with local, regional, and state public health agencies or officials in the event of an influenza pandemic.

Read the related press release from The Joint Commission on Accreditation of Healthcare Organizations: [http://www.dhs.ca.gov/ps/dcdc/izgroup/shared/hospital\\_influenza\\_press\\_release.htm](http://www.dhs.ca.gov/ps/dcdc/izgroup/shared/hospital_influenza_press_release.htm)

#### IV. GUIDELINES

All UC Owned or UC Affiliated Health Care Facilities should develop, implement, and evaluate a program that requires the following:

1. Mandatory annual influenza vaccination of all UC Health Care Personnel who have any duties or presence in patient contact areas at any UC Owned or UC Affiliated Health Care Facility.
2. Free annual influenza vaccines through Occupational Health Services (or Student Health Services on campuses without an occupational service) to all Health Care Personnel.
3. All Health Care Personnel to either: a) receive the vaccine offered by UC Occupational Health (or Student Health Services on campuses without an occupational service), b) provide current written documentation of the influenza vaccination, or c) if for documented medical or religious reasons, refuses to be vaccinated, execute a declination.

Declination forms may be executed by individuals who have one or more of the following conditions:

- a. Persons with moderate (generalized rash) or severe (life-threatening) allergies to eggs, vaccine components, or prior vaccines. Documentation from personal physician is required.
- b. Persons with a history of Guillain-Barre Syndrome. Documentation from personal physician is required.

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- c. Written documentation of other medical contraindication from a medical provider. These conditions require annual documentation.
- d. Written documentation of declination based on religious grounds. Documentation should be received from a religious organization and will be required annually.

Pregnancy is a high-risk condition for influenza illness and does not in itself constitute an exception.

- 4. Annual notification to Health Care Personnel, prior to the start of the flu season, of the availability and requirement of all influenza vaccines – at no cost to them – and the need to be vaccinated. The exact timing of such notification and vaccination will be based upon CDC recommendations and the availability of the vaccine from suppliers.
- 5. Those that do not receive the vaccine must complete a written declination form, in accordance with state law, and also wear a surgical mask for the duration of the influenza season in all patient contact areas.

Each person with exceptions to vaccination shall be required to provide signed written documentation that he/she will wear a surgical mask at all times when in patient contact areas during the entire influenza season. Names of persons required to wear masks will be provided to the worker's managers and supervisors, including Division and Department leadership.

The EIP committee will set the relevant dates of the influenza season each year. In general, influenza season extends from October to March, but can extend longer in certain years.

- 6. Require compliance with annual mandatory influenza vaccination no later than December 1 of each year, unless an alternative date is authorized by the Epidemiology and Infection Prevention Committee
- 7. Education of all Health Care Personnel on the following:
  - a. The benefits of influenza vaccination;
  - b. The potential health consequences of influenza illness for themselves and patients;
  - c. The epidemiology and modes of transmission, diagnosis, and non-vaccine infection control strategies (such as the use of appropriate precautions & respiratory hygiene /cough etiquette), in accordance with their level of responsibility in preventing health-care-associated influenza; and

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d. The safety profile of the influenza vaccine.

This education may occur either at the time of the annual vaccination activity, or at the time of hire or as part of ongoing training and education, or any combination thereof.

8. On an annual basis, evaluate vaccination rates of personnel as well as the number and reason for exceptions.

If a health care provider has a contraindication but still desires to get the influenza vaccine, they should discuss it with their primary physician and have it administered by the primary physician.

All UC Owned or UC Affiliated Health Care Facilities should continue to use strategies for convenient vaccine access, including vaccination clinics, mobile carts, vaccination access during all work shifts, and modeling and support by institutional leaders.

Locations should be advised that these guidelines, after proper consultation and appropriate comment period, will be recommend for Presidential policy, subject to Higher Education Employer-Employee Relations Act (HEERA) obligations.

Related policies:

University of California Pandemic Influenza Plan

Epidemiology & Infection Prevention Policy: Respiratory Hygiene

Title 8 California Code of Regulations § 5199 Appendix E: Aerosol Transmissible Disease Vaccination  
Recommendations for Susceptible Health Care Workers (Mandatory)