To: All Licensed Acute Care Hospitals within Santa Barbara County

From: Charity Dean, MD, MPH
Santa Barbara County Public Health Officer
Takashi Wada, MD, MPH
Santa Barbara County Public Health Director

Date: September 19, 2016

Re: Order for Licensed Acute Care Hospitals to Implement Influenza Vaccination Programs for Health Care Workers

Background Information

Influenza vaccination of health care workers (HCW) protects medically fragile patients and reduces employee absenteeism during influenza season.\(^1\) State law requires that hospitals and certain employers offer influenza vaccinations to employees or have the employee sign a declination statement if they choose not to be vaccinated. (Health & Saf. Code § 1288.7.) Mandatory vaccination with masking policies have been shown to increase HCW vaccination rates to above 90%.\(^2\) Mandatory influenza vaccination for all health care personnel is endorsed by the Infectious Diseases Society of America.

In order to increase the rate of influenza vaccination of HCWs and to protect Santa Barbara County residents from influenza infection, we are issuing the following Health Officer Order.

Order

We, as Public Health Officers of Santa Barbara County, do hereby order all licensed acute care hospitals in Santa Barbara County to develop and implement a mandatory influenza vaccination program for the 2016-2017 influenza season. The influenza vaccination program shall require a health care worker to provide evidence of vaccination with an influenza vaccine. If the health care worker is unable to provide such evidence, that worker shall wear a surgical mask while working in patient care areas during the influenza season.
Definitions

For the purposes of this order, "health care worker" shall be defined as any employed or non-employed individual who provides direct patient care or who works in a patient care area. This shall include physicians, ancillary staff, support staff, and volunteers.

Under this order, a facility may elect to expand the definition of HCW to include all persons working on facility properties and such an expanded definition is supported by the Health Officers.

For the purposes of this order, "influenza vaccine" shall be defined as a vaccine approved by the U.S. Food and Drug Administration and recommended by the Advisory Committee on Immunization Practices for the 2016-2017 influenza season.

For the purposes of this order, "influenza season" is defined as November 1, 2016 to May 20, 2017. If influenza surveillance data suggests that the influenza season may end before or extend beyond May 20, 2017, then this order may be amended to shorten or extend the influenza season definition.

For the purposes of this order, "patient care area" shall be defined and determined by the facility. This may include all hospital properties if so determined by the facility.

For the purposes of this order, "licensed acute care hospitals" shall include the following facilities:

- Santa Barbara Cottage Hospital
- Goleta Valley Cottage Hospital
- Santa Ynez Valley Cottage Hospital
- Marian Regional Medical Center
- Lompoc Valley Medical Center

Resources

Santa Barbara County is committed to assisting facilities that are subject to this order. Please contact the Immunization Program at (805) 681-5280 if we may assist you.
Signed:

Charity Dean, MD, MPH
Health Officer, Santa Barbara County Public Health Department

Date: 9-19-16

Takashi Wada, MD, MPH
Director, Santa Barbara County Public Health Department

Date: 9-19-16

1 National Vaccine Advisory Committee. Recommendations on strategies to achieve the Healthy People 2020 annual influenza vaccine coverage goal for health care personnel [updated 2012 February 8].
Why is the influenza vaccination and masking order needed?

Influenza is a disease with serious impact. The most effective method of preventing influenza infection is vaccination. Health Care Workers (HCWs) often care for patients at highest risk of severe disease and are at increased risk of exposure to influenza from ill patients. Infected HCWs can transmit influenza before they are symptomatic to patients and coworkers. Research shows that mandatory vaccination with a masking policy is a proven strategy that increases HCW vaccination rates to greater than 90%.¹

For the purposes of this order, what is the definition of “Health Care Worker”? Who is included in this definition?

For the purposes of this order, and unless a facility elects to adopt an expanded definition, “health care worker” shall be defined as any employed or non-employed individual who provides direct patient care of who works in a patient care area. This shall include physicians, ancillary staff, support staff, and volunteers.

Which takes precedence, the Health Officer Order or state laws regarding influenza vaccine and HCWs?

This Health Officer Order is in addition to state laws regarding influenza vaccine and HCWs. California Health and Safety Code section 120175 authorizes the Health Officer to control contagious, infectious, or communicable disease. Health Officers may “take measures as may be necessary” to prevent and control the spread of disease within their jurisdiction.²

Facilities must comply with the Health Officer order as well as the applicable state laws regarding influenza vaccine and HCWs. For instance, under state law, licensed facilities will still be required to report their HCW influenza vaccination rates to the California...
Department of Public Health, and they will also be required to implement this order (California Health and Safety Code section 1288.7).

**How is this order different from an influenza vaccination declination policy?**

State law currently requires that certain health care facilities offer influenza vaccination to employees (Cal. Health and Safety Code section 1288.7, sub d. (a); 8 Cal. Code Regs. Section 5199, subd. (c)(6)(D) and (h)(10)). Employees that decline vaccination are only required to sign a declination statement under state law. The Health Officer Order requires those who decline to wear a mask in patient care areas.

**When does the order take effect?**

The Health Officer Order is effective during influenza season, defined for 2016-2017 as November 1, 2016 through May 20, 2017.

**Does reporting vaccination status or wearing a mask violate HIPAA?**

Reporting vaccination status to an employer for the purposes of complying with a vaccination policy is not a violation of the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule because compliance is a condition of employment and has been legally mandated by the Health Officer.

**How should a health care facility track and identify who has received the influenza vaccine?**

A strategy to track and clearly identify which HCWs have received the influenza vaccine for the 2016-2017 season is highly recommended, but the specific approach will be determined by each facility.

**What kind of mask should be used? When should masks be changed?**

The term “mask” in this order refers to a surgical mask. HCW should adhere to their facility’s policies regarding what types of masks are available and how often to change the masks. In some patient care situations, infection control guidelines require more protection than a surgical mask (e.g., N95 respirators). In these situations, unvaccinated HCWs should wear N95 respirators instead of surgical masks as the facility’s infection control guidelines indicate.

**Can HCWs decline influenza vaccination based on religious or medical exemption?**

HCWs may decline influenza vaccination. However, HCWs who do not get vaccinated for influenza, whether through religious declination, personal beliefs, or due to a medical exemption, must wear a mask during influenza season while working in patient care areas.
VACCINATION QUESTIONS

What type of influenza vaccine can HCWs receive?

There are multiple influenza vaccines available with varying indications and ways to administer them. Within specified age and health status indications, there are no recommendations for any given influenza vaccine over another. Vaccination should not be deferred because a certain product is not offered, unless there are medical contraindications. See the following link for key information on influenza vaccines: http://www.cdc.gov/flu/protect/vaccine/index.htm.

What about HCWs who have egg allergy?

True egg allergies are rare and should be assessed by a physician for likely risk of vaccine reaction. The CDC recently updated their recommendations on the influenza vaccine in persons with egg allergy for the 2016-2017 season and this information can be found at http://www.cdc.gov/flu/protect/vaccine/egg-allergies.htm

Should a HCW who is immunocompromised or has a chronic health condition (asthma, diabetes, etc.) receive the influenza vaccine?

Yes, HCWs in these groups are considered a priority group that should get yearly influenza vaccination as they are at greater risk of severe influenza illness and complications.

Should a HCW who is pregnant receive the influenza vaccine?

Yes, the influenza shot is safe and should be given to pregnant women during any trimester. Pregnant women who get influenza are at a higher risk of hospitalization, and even death, than non-pregnant women. Severe illness in the pregnant mother can also be dangerous to her baby because it increases the chance for serious problems such as premature labor and delivery. Once vaccinated, a pregnant mother’s body makes antibodies against influenza. These antibodies can be passed on to the unborn baby, helping to protect the baby for up to 6 months after birth. This is very important because babies younger than 6 months of age are too young to receive the influenza vaccine themselves.

REFERENCES


2. The California Health and Safety Code is available via the internet: http://leginfo.legislature.ca.gov/faces/codes.xhtml