



DATE: September 17, 2020

TO: Hospitals, Ambulatory and Community Clinics, Medical Practices, Skilled Nursing and other Long-Term Care Facilities, Dentist Offices, Chiropractic Offices, Physical Therapy Practices, and other Health Care Facilities, Ambulance Service Providers, Home Health Agencies, Adult Day Health Centers

FROM: Karen Ramstrom, DO, MSPH
Health Officer, Shasta County

SUBJECT: **HEALTH OFFICER ORDER:** Mandatory Influenza Vaccination of Health Care Workers During the 2020/2021 Influenza Season

Order

Pursuant to Health and Safety Code section 120175:

- **Every health care facility in Shasta County is hereby ORDERED to implement a program requiring all health care workers providing services at the facility to receive an annual influenza vaccination.**
- **Every health care facility shall provide a copy of this Order to each health care worker providing services at the facility and post a copy of this Order in a prominent and accessible location in the facility for the duration of the 2020/2021 influenza season.**

Background and Reasons for the Order

In response to the previous seven years' flu vaccine mandates, Shasta County has had good results in increasing the flu vaccination rate in healthcare workers. Most healthcare facilities were 100% compliant with this mandate. Data for flu vaccination rates 2019/2020 season will be available soon.

During the COVID-19 pandemic it remains a top priority for HCWs to be vaccinated. The overlap in symptoms of these diseases accompanied by the lack of effective treatment for COVID- 19 requires additional public health intervention to prevent illness and alleviate stress on our health care system.

Influenza infection accounts for an estimated 4.3-21 million medical visits, 140,000-810,000 hospitalizations and 12,000-61,000 deaths in the US each year. HCWs are both at risk for influenza *and*

can transmit the virus to their vulnerable patients, families and coworkers. Multiple studies have demonstrated that vaccinating HCWs against influenza helps to protect against illness in health care settings and reduces employee absenteeism during influenza season.

State law only requires that general acute care hospitals and certain employers offer influenza vaccinations to employees. If hospital employees decline vaccination, they are only required to sign a declination statement in lieu of vaccination. (Health & Safety Code, §1288.7, subdivision (a); California Code of Regulations, title 8, § 5199, subdivision (c)(6)(D) and (h)(10).) While compliance rates with these laws are high, actual HCW vaccination rates in the absence of a mandate are not and may be below that which would reduce the spread of infection. Prior to the 2013 mandate, nearly 30% of Shasta County hospital employees or 900 HCW were not vaccinated against influenza.

This mandate requires influenza vaccination for all HCWs who are unable to provide an accepted medical exemption signed by an MD or DO.

Our goals are to increase rates of influenza vaccination of HCWs, reduce employee absenteeism during influenza season and reduce HCW to patient transmission of influenza.

Facilities Subject to the Order

This order applies to hospitals, ambulance service providers, ambulatory and community clinics, skilled nursing and other long-term care facilities, adult day health centers, dentist offices, home health agencies, chiropractic offices, physical therapy practices and any other health care facility.

Definition of HCWs

For the purposes of this order, “health care workers” or “HCWs” are persons, paid and unpaid, working in health care settings who have direct patient contact or who work in patient care areas including but not limited to physicians, nurses, nursing assistants, therapists, technicians, emergency medical service personnel, dental personnel, pharmacists, laboratory personnel, autopsy personnel, volunteers, students, contracted employees, registry and vendors. Also includes persons not directly involved in patient care but potentially exposed to infectious agents that can be transmitted to and from health care workers and patients (e.g., clerical, dietary, housekeeping, laundry, security, maintenance, administrative, billing, and volunteers). In addition to medical personnel this includes dentists, chiropractors, and physical therapists.

Duration of Order

This Order applies to the 2020/2021 influenza season and future influenza seasons unless rescinded. The influenza season is defined as November 1, 2020 to April 30, 2021.

Compliance

Compliance with this Order is **mandatory** for all health care facilities in the incorporated and unincorporated areas of Shasta County. Violation may result in civil enforcement or criminal penalties under Division 105 and/or Division 112 of the Health and Safety Code.

For any additional questions, please contact Stephanie Taylor, MPH, Shasta County HHS—Public Health at 229-8406.

Influenza Mandate 2020/2021 Frequently Asked Questions

- **Why the change from the previous mandates?**

The COVID-19 pandemic requires rigorous attention to nonpharmaceutical interventions (NPIs) as we approach the influenza season. Even though every person should be masking per the State Order and CDC recommendations for universal source control in health care settings, this may not provide enough protection with regards to exposure for both COVID-19 and Influenza.

- **What if I decide I don't want to get the influenza vaccine and I don't meet the criteria for medical exemption?**

The Mandate is to be enforced by the employer, and they will be the one to follow up on the employee's actions.

- **How easy is it to distinguish Influenza from COVID-19 infection?**

Many characteristics of both illnesses are similar so clinical methods to differentiate them often fail. Rapid testing for both may not be available to quickly make a diagnosis. COVID-19, Influenza, Respiratory Syncytial virus (RSV) and other respiratory viruses often are difficult to distinguish and are labeled influenza like illness (ILI).

- **If I am positive for COVID-19 should I receive the influenza vaccine?** Influenza vaccination should be delayed until approximately 2 weeks from onset of COVID-19 symptoms or the date of the positive test.

- **What are California's predictions for the upcoming viral season?**

COVID-19 infection may peak during respiratory virus season, during the same time frame that we usually see an increase in influenza cases. Hospitalizations are expected to peak approximately 2-3 weeks later. This has the potential to flood the health care system with many ill individuals. Vaccination for Influenza will help prevent this situation.

- **What is happening in the southern hemisphere?**

Influenza activity are reported at lower rates, but fewer countries are reporting data since they are focusing on COVID-19. Social distancing and wearing masks during the COVID-19 pandemic may have helped to reduce the spread of influenza viruses. Additionally, the COVID-19 pandemic has influenced health-seeking behaviors, testing priorities and capacities making interpretation of the southern hemisphere data very challenging.

Influenza A(H1N1), influenza A(H3N2), and influenza B/Victoria have been circulating. These strains are included in the influenza vaccine used in the United States.

- **Is there an adequate supply of influenza vaccine available?**

There are plenty of doses of the vaccine available to supply the needs for this mandate and the public in general. To get vaccinated, call your medical provider or pharmacy, or contact Public Health at 530-225-5591 to make an appointment. In addition, you may attend the Public Health influenza vaccine drive-thru clinic on October 7 from 10 AM – 2 PM at the Shasta District Fairgrounds.

- **Is the influenza vaccine effective?**
In the 2019-20 season, influenza vaccine was effective against 37% of influenza A (H1N1) and 50% of influenza B strains. Data was insufficient to assess vaccine efficacy against influenza A (H3N2) strains. Despite lower estimated effectiveness of the vaccine in the 2018-19 season, vaccination prevented an estimated 4.4 million illnesses, 3.7 million medical visits, 58,000 hospitalizations, and 3,500 deaths.
- **What if I have an egg allergy?**
For individuals with a severe egg allergy there are two influenza vaccines available that are either cell-culture based or recombinant.
- **Is it possible to develop Influenza from getting the vaccination?**
Often individuals develop low grade fever, inflammation at the injection site and myalgias, headache or arthralgias following influenza vaccination. This is simply a response of your immune system to the vaccination and reflects the presence of some previous antibody development. It just means that your immune system is healthy and effective. If you are an individual who has that type of response, then take an NSAID (e.g., ibuprofen) approximately 1 hour prior to the vaccination or consider taking the recombinant influenza vaccine (Flublok). None of the vaccines except for Flumist contain live influenza virus. Flumist contains live attenuated influenza.
- **What is the role of antiviral agents?**
Four medications are available for treatment of Influenza and they are very effective in shortening the length and severity of disease. Remdesivir is the only antiviral medication currently effective against COVID-19, although it is costly and administered under certain clinical circumstances to hospitalized patients.