

**MINISTRY OF HEALTH
INFORMATION BRIEFING NOTE**

Cliff # 938602

PREPARED FOR: Honourable Michael de Jong, QC, Minister - **FOR INFORMATION**

TITLE: Health Care Worker Immunization Policy

PURPOSE: To provide background information and an overview of a new health care worker immunization policy being implemented Fall 2012.

BACKGROUND:

- Each year, influenza causes serious complications – including death – for many British Columbians. People with underlying illnesses and those in long-term care facilities are among the hardest hit.
- The primary and most effective method of symptom reduction and prevention of influenza is vaccination.
- There is an existing voluntary Facilities Immunization Policy currently in place (non-immunized employees can be sent home in the event of an influenza outbreak). However the policy has not increased the level of Health Care Worker (HCW) immunization rates.
- Influenza immunization coverage among HCWs in acute care facilities gradually declined from 2005/2006 to 2008/2009. In 2009/2010, the rate of uptake was as low as 34.7 percent while the uptake of the pandemic H1N1 was as much as 46.3 percent. In 2010/2011, seasonal influenza immunization coverage increased over 2009/2010, reaching 39.8 percent which is a continuation of the observed downward trend from 2005/2006.
- BC will be the first jurisdiction in Canada to implement an immunization or mask policy as a condition of employment, and is targeting a 95 percent compliance rate, similar to results achieved in the United States (US).
- There is sufficient vaccination available to meet the increased demand need and a variety of vaccination options will be available to staff (e.g., on site/off site clinics, peer to peer injections, pharmacists, physicians). Costs to implement the policy will be borne by the health authorities.
- Health care unions will be a crucial component of a successful roll out, and unions will be engaged prior to the public announcement.
- We anticipate that the unions may have questions regarding the new policy; however, we do not believe that they will challenge a policy put in place to address patient safety. The new policy is consistent with the various collective agreements.
- A provincial working group has been created and has been tasked with developing materials/processes that will support a consistent approach to implementation across the province. Individual health authorities are responsible for implementation at the local level.

DISCUSSION:

- Fall 2011 – Leadership Council discussed implementing a new policy to increase HCW immunization rates. Given that discussions commenced close to the time that implementation would need to occur, the decision to implement was deferred to 2012.
- April 2012 – Leadership Council agreed to implement a new HCW immunization policy that would require anyone working with, or in proximity to, patients in a health care facility to either be immunized or wear a mask for the duration of the influenza season - typically December to the end of March.

S14

S13

S13

- Communications will begin by notifying the unions of the new policy (they were advised last year that the policy was being considered). Chief Executive Officers will be advising their staff of the new policy and a News Release will be issued to the general public.
- Communications will enforce the message that the policy is about patient safety and that HCWs have an ethical duty to provide safe care to their patients/clients.

CONCLUSION:

- HCWs are one of the most common sources of flu transmission to patients in health care settings, and their patients are often the most vulnerable to serious consequences as a result of illness.
- Voluntary immunization programs have proved to be ineffective in increasing the percentage of HCWs being immunized. More directed programs (e.g., mandatory immunization in the US) have raised immunization rates to 95 percent and higher.
- The flu vaccine is safe and effective – when used in conjunction with other infection control practices, such as hand washing and remaining home when sick, it is extremely effective at preventing illness.

Program ADM/Division:	Nichola Manning, ADM, MSHHRD
Telephone:	(250) 952-3465
Program Contact (for content):	Sharon Stewart, Executive Director, HHRP (Nursing & Allied)
Telephone:	(250) 952-3656
Drafter:	Sharon Stewart
Date:	July 31, 2012
Filename:	Y:\MCU\DOCS PROCESSING\Briefing
	Documents\2012\Approved\MSHHRD\938602 - Health Care Worker Immunization Policy.docx

Pages 3 through 6 redacted for the following reasons:

S13