

Influenza Prevention

1. Introduction

1.1. Description

Influenza can be a serious contagious disease spread by droplet transmission through close contact with an infected individual. The Public Health Agency of Canada estimates that in a given year there are an average of 12,200 hospitalizations related to influenza and approximately 3,500 deaths attributable to influenza. Infected individuals are highly contagious and can transmit influenza for 24 hours before they are symptomatic.

Among vaccine-preventable diseases, influenza causes by far the most deaths, outpacing all other vaccine preventable diseases combined. Hospitalized patients are frequently more vulnerable to influenza than members of the general population. Influenza in vulnerable groups especially the elderly, the very young and the immunosuppressed, is associated with significant morbidity and mortality. It is a major contributor to hospitalizations in winter.

Healthcare workers have been implicated as the source of influenza in healthcare settings. Vaccination of healthcare workers will reduce their risk of getting influenza and spreading it to patients. The most effective strategy for preventing influenza is annual vaccination. Influenza vaccine is safe and effective.

The wearing of masks can serve as a method of source control of infected healthcare workers who may have had no symptoms. Masks may also protect unvaccinated healthcare workers from as yet unrecognized infected patients or visitors with influenza.

Other infection control measures such as rapid identification of ill patients, hand hygiene, cough etiquette, restrictions on work and visiting, and the use of anti-viral medications all help but vaccination remains the cornerstone of efforts to control influenza transmission.

1.2. Scope

This policy applies to all Providence Health Care (PHC) employees (unionized and excluded), other credentialed professionals (including medical staff), residents, volunteers, students, contractors, and vendors (collectively, these individuals are referred to as "[Covered Individuals](#)") who attend or may attend a Patient Care Location.

This policy also applies to any other persons who attend a [Patient Care Location](#) (these individuals are referred to as "Visitors").

1.3. Exceptions

There are no exceptions to this policy.

2. Policy

All individuals covered by this policy are expected to be vaccinated annually against influenza or wear a surgical/procedure mask during influenza season when in patient care areas in accordance

with this policy. During an influenza outbreak, this policy is suspended at the outbreak location and PHC's outbreak policies will apply.

3. Responsibilities

All Covered Individuals must annually advise PHC of whether they have chosen to vaccinate by the [Policy Application Date](#).

During the annual [Policy Application Period](#), Covered Individuals and Visitors who are not vaccinated against influenza are expected to wear a surgical/procedural mask provided by PHC while at a Patient Care Location. Individuals expected to wear a surgical/procedural mask will be responsible for maintaining their mask in good condition in accordance with PHC protocols. During an influenza outbreak, this policy is suspended at the outbreak location and PHC's outbreak policies will apply.

Covered Individuals should continue to use personal protective equipment and abide by PHC's infection control practices to prevent the transmission of communicable disease, including influenza.

Covered Individuals who experience influenza like illness/respiratory infection should follow PHC's established reporting protocols.

Covered Individuals who witness any instances of non-compliance with this policy are expected to report the incident of non-compliance immediately to their supervisor.

PHC will inform Visitors of the requirements of this policy and will make surgical/procedure masks available to Visitors.

PHC will collect influenza vaccine coverage data for both healthcare workers and for long-term care facility residents, and report aggregate information to their respective health authority as per the provincial reporting form.

4. Compliance

Any Covered Individual found in violation of the policy compliance status reporting obligation in section 3 of this policy may be subject to remedial and/or disciplinary action up to and including termination of employment, cancellation of contract and/or revocation of privileges.

Any Visitor found in violation of this policy may be denied access to Patient Care Locations.

5. Supporting Documents

5.1. Related Policies

- None

5.2. Guidelines/Procedures/Forms

- [Flu Campaign](#)¹
- [IPAC Influenza-like-illness Outbreak Protocol](#)²

¹ Internal access only to this page

6. Definitions

“Covered Individuals” means all PHC employees (unionized and excluded), other credentialed professionals (including medical staff), residents, volunteers, students, contractors, and vendors who attend or may attend a Patient Care Location.

“Patient Care Location” means

- a. any building, property, or site owned, leased, rented or operated by PHC where there are patients, residents or clients who are receiving care; and
- b. any patient/client/resident home or other location where Covered Individuals interact with the patient/client/resident in the course of his/her work for PHC;

but does not include any location designated by PHC to be excluded from the definition of Patient Care Location.

“Policy Application Date” means the date established annually by the Provincial Health Officer after which all persons covered under this policy are expected to be vaccinated against influenza or wear a mask in accordance with this policy. The Policy Application Date will usually be no later than the first week of December.

“Policy Application Period” means a period of time determined by the Provincial Health Officer which starts on the Policy Application Date. The Policy Application Period will usually be from the end of November until the end of March but may vary with seasonal epidemiology and will also include any period of time relating to novel strains of influenza. During the Policy Application Period, Covered Individuals will be expected to be vaccinated against influenza or wear a surgical/procedure mask in accordance with this policy.

7. References

1. Schanzer DL, Mcgeer A, Morris K. Statistical estimates of respiratory admissions attributable to seasonal and pandemic influenza for Canada. *Influenza and other Respiratory Viruses*. 2013;7(5):799-808.
2. Schanzer DL, Langley JM, Tam TWS. Role of influenza and other respiratory viruses in admissions of adults to Canadian hospitals. *Influenza and other Respiratory Viruses*. 2008;2(1):1- 8.
3. Schanzer DL, Langley JM, Tam TW. Hospitalization attributable to influenza and other viral respiratory illnesses in Canadian children. *Pediatr Infect Dis J*. 2006;25(0891-3668; 0891-3668; 9):795-800.
4. Schanzer DL, Sevenhuysen C, Winchester B, et al. Estimating influenza deaths in Canada, 1992- 2009. *PLoS ONE*. 2013;8(11).

² Internal access only to this page