



National Adult Immunization Coordinators Partnership
January 3, 2012, 2:00-3:30 PM
Quarterly Conference Call Minutes

Carlie Shurtliff (Utah), Chair, Facilitated the meeting.

CDC Updates

Carolyn Bridges, MD NCIRD

The Adult and Influenza Summit will be held May 15-17, 2012 in Atlanta. The Adult Summit is scheduled for all day May 15th and the morning of May 16th. The Influenza Summit is scheduled for the afternoon of May 16th and all day May 17th. Carolyn will send a notice announcing the Adult/Influenza Summit to the Program Managers.

During March 26-28, the first “virtual” on-line National Immunization Conference will take place. There will be nine topics presented over three days. Adult Immunization will be the second topic on March 26th from 1:30 to 2:30 PM. See the link for the NICO, information is, <http://www.cdc.gov/vaccines/events/nic/default.htm>

The 2012 Adult Immunization Schedule will be published February 2, 2012. Carolyn announced that on December 30, 2011, FDA approved the pneumococcal conjugate 13 for adults 50 years of age and older. ACIP has been discussing the recommendations for PCV15 for persons in this age group and recommendations are expected to be available after the clinical trials in the Netherlands are completed in approximately one year.

Presentation on Influenza Vaccine for Health Care Workers

Ginny Heller, Program Manager, Washington Immunization Coalition Partnership.

Ginny presented the HCW Toolkit. The Washington Health Department has been working with the Washington Immunization Coalition Partnership developing an influenza vaccination toolkit for HCWs. This project began in 2004 when the influenza immunization rates for physicians and nurses were 36% in the state of Washington. A resource list was compiled with links to websites such as CDC and IAC containing information on influenza and HCWs. Guidelines for increasing influenza vaccine rates for hospitals and clinic settings were developed using the Virginia Mason Hospital's guidelines as a model. The resource list was expanded into a HCW Toolkit, and copied to a CD and sent to hospitals, clinics and health facilities the first year of implementation. The following year, the coalition built a website to post the HCW Toolkit. The toolkit is updated annually with the most current influenza promotional materials, posters, educational materials, and information on influenza vaccination for HCWs. Hospitals are notified annually when the updates have been made to the toolkit on the website. The toolkit provides a step-by-step guide for mandating influenza vaccine for HCWs, if facilities choose to implement a mandate.

At this time, there is no system to determine how many hospitals have implemented the toolkit or to analyze which parts of the toolkit are proving to be the most useful. According to a Washington health insurance company, the influenza vaccination rate is 86% for the HCWs in the State of Washington.

The toolkit may be accessed at:

http://www.immunizewa.org/healthcare_toolkit

or at our NAICP webpage:

<http://www.ct.gov/dph/cwp/view.asp?a=3136&Q=473604&PM=1>

First Stage of Mandating Flu Vaccination for HCWs

Patricia Raymond, Rhode Island Immunization Program Manager.

Rhode Island has made history by being the first state to mandate an adult universal program. A few years ago, the Medical Director supported a proposal and the legislature passed it. The vaccines included in this program are influenza, pneumococcal, and Tdap. The universal program is funded by insurance companies and receives federal funding as well.

Rhode Island is the first state to begin the process to mandate influenza vaccine for HCWs. The directive to mandate came at the request of the Rhode Island Medical Director. The Director established a task force consisting of physicians, nurse associations, nursing homes, LTCFs, hospital associations and other stakeholders to consider the barriers and best practice guidelines. The Rhode Island Health Department then proceeded to write the proposal mandating influenza vaccination of HCWs. All required documents are currently in the legislative process. It is hoped that the mandate will be passed and implemented in time for the 2012/2013 influenza season.

The health department already has a reporting system in place for hospitals to send in a form with required data.

Life Span Health Care System in Rhode Island put out a directive for all their employees to report their influenza vaccination coverage to the company's employee health department by December 31st. Employees must receive their flu vaccine or present documentation of having received it from another source or submit a medical exemption form. As of December 8, 85 % of HCWs had received their influenza vaccination.

Employee Influenza Vaccination Campaign in LTCs

Beth Nivin, Bureau of Communicable Diseases, NYC Department of Health and Mental Hygiene. Beth reported on an effort by a NYC team to increase influenza vaccination rates in long-term care facilities. Beth provided a twenty-four slide PowerPoint presentation which outlined her project's two objectives: (1) identify strategies used in employee influenza vaccination campaigns in long-term care facilities, and (2) use survey findings to develop a NYC-specific toolkit to assist LTCFs in improving vaccination coverage among health care workers. Thorough information was presented regarding the questions and methods; information was gleaned through the accrued survey results. Ms. Nivin searched for trends, emphasized the importance of incentives, the necessary involvement of the facilities' leadership, and importance of

involving all units when promoting influenza vaccinations. For more information, refer to the “lessons learned,” and “limitations” section of the study (in the PowerPoint presentation) for valuable takeaway strategies and creative ideas.

NAICP business items

- The Executive Committee gratefully acknowledged the hard work over the last few years of Debbye Rosen, our recently resigned co-chair. Debbye has lobbied to strengthen the role and visibility of adult immunization coordinators and we are grateful for her vigorous efforts.
- NAICP disseminated an elections’ policy focused on term limitations and how to replace the executive committee members. After this call, Carlie will re-send the policy and asks all adult immunization coordinators to approve it.
- Carlie also asked participants to consider volunteering to run for open positions on the executive committee. The email mentioned above will include a reminder to respond to her if you can offer some time to our body.
- **2012 NAICP quarterly conference call dates are: April 3, July 10 and October 2, 2012 at 2:00-3:30 EST**

NAICP website

<http://www.ct.gov/dph/cwp/view.asp?a=3136&Q=473604&PM=1>