

Policy Title: Staff Influenza Management Policy
Policy #: X - 240
Section: Corporate, Health, Safety and Wellness
Issuing Authority: Vice President, People and Transformation
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PURPOSE

Influenza is an acute respiratory infection caused by influenza A and B viruses and characterized by the sudden onset of fever, cough, and myalgia. Other common symptoms include headache, chills, loss of appetite, fatigue and sore throat.

Among vaccine preventable diseases, influenza causes more deaths than all others combined. Hospitalized patients (which include residents and clients at Providence Healthcare) are more vulnerable to influenza than members of the general population. Influenza in vulnerable groups, especially elderly, very young, pregnant, and immune-suppressed individuals, is associated with significant morbidity and mortality. Influenza infection is a major contributor to hospitalizations during winter.

Healthcare workers can be a source of influenza transmission in healthcare settings. They are also susceptible to becoming infected when coming into contact with patients or other healthcare workers who have influenza. Vaccination of healthcare workers will reduce their risk of getting influenza and spreading it to patients, especially if it is a well-matched vaccine.

In addition to vaccination, there are other important infection control measures that help to prevent influenza transmission. This include Routine Practices such as hand hygiene, cough etiquette, restrictions on work and visiting when symptomatic and wearing protective equipment such as a mask. Rapid identification of suspected influenza cases, with implementation of Droplet/Contact Precautions, is also critical to minimizing influenza transmission from patient to patient and patient to staff.

APPLICATION

This Policy applies to the following Health Service Providers:					
Non-Union Employees	Unionized Employees	Credentialed Staff / Physicians	Students/ Learners	Volunteers	Employer Affiliates
•	•	•	•	•	•

For the purpose of this policy all applicable Health Service Providers listed above will be referred to as staff.

POLICY

Unit Health Toronto is comprised of Providence Healthcare (Providence), St. Joseph's Health Centre (St. Joseph's), and St. Michael's Hospital (St. Michael's). Unity Health Toronto is committed to ensure the safety of all patients, residents and clients (hereafter referred to collectively as patients) as well as staff and visitors. Unity Health Toronto will implement effective measures to prevent the transmission of influenza within the organization which include offering the influenza vaccine to staff during the influenza season.

This policy applies to all persons carrying on activities at Unity Health Toronto, including but not limited to employees, credentialed staff, contract workers, students/learners, residents, fellows, researchers and volunteers. The term staff is used in this policy to describe these individuals. This policy does not apply to patients, clients or visitors.

Staff are encouraged to be vaccinated annually against influenza as the influenza vaccine remains the most effective prevention measure available.

ROLES AND RESPONSIBILITIES

Employer

- Support the Influenza Management Policy and Program, including appropriate operational and financial support for the administration of the vaccine and implementation of influenza outbreak protocols and procedures.
- Ensure that all staff have appropriate education and training related to the management of patients with suspected and confirmed influenza-like illness (ILI), and the appropriate use of personal protective equipment (PPE) in accordance with Infection Prevention and Control (IPAC) policies, including droplet/contact precautions.
- Ensure that staff have access to appropriate PPE for the management of suspected or confirmed patients with Influenza Like Illness (ILI).

Supervisors, Managers, Directors

- Ensure staff have access to the influenza vaccine and all PPE required to provide safe care to suspected or confirmed patients with influenza.
- Support influenza programs within their respective departments.
- Ensure staff compliance with Influenza outbreak protocols and procedures.
- Be vigilant and observe for staff who may have ILI. Staff with ILI should be sent home and reminded to call the Corporate Health, Safety and Wellness (CHSW) hotline; or direct them to CHSW to be assessed. For service afterhours contact the After Hours Management team representative for the specific site who will provide direction to the staff member regarding reporting off duty and instruct the staff member to contact the CHSW hotline promptly.
- Ensure staff compliance with education and training related to the management of patient with suspected and confirmed ILI, and the appropriate use of personal protective equipment (PPE) in accordance with Infection Prevention and Control (IPAC) practices, including droplet/contact precautions.

Corporate Health, Safety and Wellness (CHSW)

- Administer influenza vaccine for staff.
- Offer antiviral prophylaxis to staff who have not been vaccinated during an outbreak
- Maintain staff influenza immunization records.
- Report staff influenza immunization rates as required.
- Provide education regarding the vaccine and other protection measures as required.
- Assess staff with possible ILI to ensure staff do not work while ill and assist in determining when staff are eligible for return to work.
- Implement influenza outbreak protocols and procedures in accordance with Infection Prevention and Control practices and Toronto Public Health (TPH) and the Ontario Hospital Association/Ontario Medical Association (OHA/OMA) Communicable Disease Surveillance Protocol for Influenza.
- Staff shall be informed of the importance of vaccination at their Pre-placement Health Assessment and again through an annual influenza campaign.
- Report occupationally acquired influenza to the Ministry of Labour and Workplace Safety and Insurance Board as required.
- In the event of an outbreak perform nasopharyngeal testing for rapid detection of influenza and viral culture for respiratory pathogens.

Staff

- Staff are encouraged to be vaccinated on an annual basis for the protection of vulnerable patient populations, themselves and their co-workers.
- Staff that are vaccinated elsewhere are requested to provide CHSW with a copy of their vaccination record to allow accurate tracking of staff vaccination.
- Staff who are unable to take the vaccine due to a medical contraindication are requested to provide CHSW with medical documentation satisfactory to CHSW from their treating physician. In the event of an influenza outbreak medical documentation contraindication is a requirement as per Toronto Public Health.
- Abide by network infection control practices, including adherence to Routine Practices and Additional Precautions, to prevent the transmission of communicable diseases, including influenza.
- Comply with influenza outbreak protocols and procedures.
- Staff may voluntarily wear a procedure/surgical mask when providing care to a patient who is not exhibiting signs and symptoms of an ILI should they chose.
- Avoid coming in to work when they have a communicable disease such as an ILI and to promptly notify their supervisor/manager and CHSW of the reason for absence by calling the respective sites reporting hotline:
 - St. Joseph's site call 416-530-6800
 - St. Michael's site call 416-864-5400
 - Providence site call 416-285-3666 extension 4386
- If you develop signs and symptoms of an ILI while at work report/inform your manager to ensure all patient care duties are appropriately delegated; go directly to CHSW during regular business hours to be assessed. For direction afterhours contact the After Hours

Management team representative for your specific site regarding reporting off duty and contact the CHSW reporting hotline promptly.

PROCEDURES

Nasopharyngeal Swabbing

During an outbreak, if a staff member present with symptoms of ILI a nasopharyngeal swabs may be obtained for rapid detection of influenza and viral culture for respiratory pathogens. Blood specimens may also be requested for serologic testing.

STAFF INFLUENZA OUTBREAK PROCEDURE

The Influenza Outbreak Management Team (IOMT), in consultation with Toronto Public Health, will declare when a unit is in outbreak.

1. Ill staff must be excluded from work and cannot work in any other facility. CHSW will provide direction on the length of time the staff member will be excluded from work.
2. If staff are immunized ≥ 14 days prior to first day of outbreak then no antiviral prophylaxis is required and can continue to work as scheduled without restrictions*.
3. If staff are immunized ≤ 14 days ago then they may continue to work without interruption only if they are on a course of antiviral prophylaxis such as Oseltamivir for 14 days after immunization while immunity is still developing*.
4. Staff who decline antiviral prophylaxis must be excluded from the outbreak unit 14 days after receipt of influenza vaccination. During this period they can be reassigned to work outside of the outbreak unit, if work is available, pending a waiting period. CHSW in consultation with IOMT will determine the length of time the staff member is required to wait pending reassignment. A wait time is required to ensure the staff member does not acquire or transmit influenza virus to others such as patients/coworkers/departments. If reassignment is not available staff may be placed on an unpaid leave for 14 days post vaccination. The unpaid leave will be communicated by CHWS to the department Manager and Payroll. Once the 14 days has elapsed the staff member can return to the outbreak unit.
5. Staff who choose not to be vaccinated or are unable to take the vaccine due to medical contraindications may continue working without interruption as long as they start and continue on an appropriate antiviral prophylaxis for the duration of the outbreak or the outbreak is declared over whichever is shorter. Satisfactory medical documentation to support medical contraindication must be provided to CHSW.
6. Staff who (a) choose not to be vaccinated; (b) do not provide supporting documentation for a medical contraindication; and (c) decline antiviral prophylaxis may be reassigned to work outside the outbreak unit pending a waiting period or placed on an unpaid leave of absence for the length of the outbreak until such time as they are cleared to return to work by CHSW.

Note: Staff on unpaid leave may use banked lieu time or vacation credits in order to keep their pay whole. If reassignment is available then CHSW in consultation with IOMT will determine the length of time the staff member is required to wait pending reassignment. A wait time is required to ensure the staff member does not acquire or transmit influenza virus to others. If reassignment is not available then staff will be placed on an unpaid leave for the length of the outbreak. The unpaid leave will be communicated by CHWS to the department Manager and Payroll.

7. When the outbreak is declared over by the IOMT all staff shall return to work.

*In case of an influenza outbreak where there is not a good match between the strains in the vaccine and the outbreak strain all workers in the affected areas may be required to take antiviral prophylaxis for the duration of the outbreak in order to continue working in the outbreak area.

DEFINITIONS:

Employer Affiliate: An external provider who is engaged in providing services with/at the employer in some manner such as contractors, third party providers such as CCAC etc.

Influenza-like Illness (ILI): Acute onset of respiratory illness with fever ($\geq 38^{\circ}\text{C}$) and cough and with one or more of the following: sore throat, arthralgia (joint pain), myalgia (muscle aches) or prostration (extreme fatigue).

Influenza Outbreak Management Team: The membership of this team may change by Network site but is generally formed in consultation with Infection Prevention and Control and Toronto Public Health. It may be comprised of the following members:

- Chair of the Infection Control Committee
- Director of the affected area(s) or delegate
- Infection Control Professional for the affected areas(s)
- Manager of CHSW or delegate
- Clinical Leader Manager/Patient Care Manager of the affected area(s)
- Director Support Services or delegate
- Director of Enterprise Risk, Corporate Resources
- Medical Director of Infection Prevention and Control or delegate
- Director of Corporate Communications or delegate
- Director of Pharmacy or delegate
- Medical Director of Microbiology or delegate

This team will report to the Executive Vice President (EVP) responsible for the affected area(s).

Medical Contraindication: Influenza vaccine should not be given to persons who have had an anaphylactic reaction to a previous dose or any component of the vaccine, which is manifested, as hives, swelling of the mouth and throat, difficulty breathing, hypotension and shock. The medical contraindication must be supported by documentation from the attending physician. Egg allergy is no longer considered a contraindication to receipt of influenza vaccine.

REFERENCES

National Advisory Committee on Immunization (NACI) Statement on Seasonal Influenza Vaccine

REGULATORY REFERENCE

OMA/OHA Communicable Disease Protocols: Influenza Surveillance Protocol for Ontario Hospitals

Ontario *Occupational Health and Safety Act R.S.O. 1990*

Ontario *Regulation 67/93 Health Care and Residential Facilities*

DEVELOPED BY: Corporate Health, Safety and Wellness

REVIEWED BY: JHSC's, Leadership Policy Advisory Group, Senior Leadership Committee

DISTRIBUTION: Everyone