

Frequently Asked Questions

HEALTH OFFICER ORDER TO VACCINATE HEALTHCARE PERSONNEL AGAINST THE FLU

1. What does this Health Officer Order require?

This Order requires that all licensed acute care hospitals, intermediate care facilities, and skilled nursing facilities in Los Angeles County require that healthcare personnel who have direct patient contact or work in patient areas receive an annual influenza vaccination for the current influenza season or wear a mask for the duration of the influenza season when working in patient areas. For purposes of this Order, the influenza season is defined as November 1 through March 31, unless extended due to ongoing influenza activity.

2. What is the purpose of the Health Officer Order?

This Order helps protect patients, residents, and clients receiving services at the covered facilities from acquiring influenza from infected healthcare personnel. The Order also protects unvaccinated healthcare personnel from acquiring influenza from patients, residents, and clients.

3. Which types of facilities are covered under the Health Officer Order?

This Order applies to all licensed acute care hospitals, intermediate care facilities, and skilled nursing facilities in the jurisdiction of the Los Angeles County Department of Public Health. The order does not apply to outpatient clinics (unless located in an acute care hospital), acute psychiatric facilities (unless located in an acute care hospital), residential substance abuse/rehab facilities, or non-medical residential care programs (i.e., custodial or board and care facilities). However, healthcare personnel working in these settings are strongly encouraged to be vaccinated against influenza.

4. What is the definition of healthcare personnel?

For the purposes of this Order, healthcare personnel are all paid and unpaid persons who have direct patient contact or work in patient areas in licensed acute care hospitals, intermediate care facilities, and skilled nursing facilities. This includes, but is not limited to, physicians, nurses, aides, physical therapists, contract workers, students, volunteers, registration/reception staff, housekeeping, and maintenance personnel. In addition, unvaccinated emergency personnel who transport patients to and/or from the facilities covered under this order may be required to wear a mask when in contact with patients.

5. What is the definition of contact with patients?

This means being within 6 feet of a patient. However, some facilities may determine that different criteria are appropriate in their specific setting. Administrators of the facilities covered under this Order are aware of the unique features of their facility that could result in exposure to patients and possible disease transmission. For that reason, they have an important role in defining the specific scenarios that could lead to contact with patients in their facility.

6. What is the definition of patient-care areas?

Patient-care areas include, but are not limited to, patient or resident rooms, as well as areas where patients receive diagnostic or treatment services, can be taken for procedures or tests, and are allowed to be present. It includes elevators, hallways, and nurses' stations in areas where patients are present or are likely to be present. Administrators are aware of the unique features of their facility that could result in exposure to patients and possible disease transmission. For that reason, they have an important role in defining the specific areas that are designated for patient care.

7. What is the evidence that masks prevent transmission of influenza and other communicable diseases?

While vaccination is the most effective method to prevent influenza, masking can help prevent its spread between patients and personnel. Studies have not been done to assess whether mask-wearing by healthcare personnel prevents the transmission of influenza to patients. However, numerous studies provide evidence that masks prevent the spread of respiratory agents from healthcare workers to patients. One study found that surgical and N-95 masks, when worn by patients with suspected influenza, prevented the spread of influenza (1). Another study showed that an educational campaign and having pertussis patients wear masks reduced pertussis transmission to hospital personnel (2). Other studies have shown that mask-wearing by patients with active TB prevents transmission (3,4) and that the risk of transmission of influenza from patients to healthcare personnel decreases significantly when personnel wear masks. Finally, wearing masks has been associated with a reduction in influenza-like-illness for college dormitory residents and in households, when used in conjunction with hand hygiene. (5,6) These studies provide substantial evidence that masks have a measurable benefit in preventing transmission of respiratory disease and that wearing of masks by healthcare workers will likely protect workers and their patients.

8. What kind of mask does this Health Officer Order require?

The Order requires unvaccinated healthcare personnel at the covered facilities to wear a surgical or procedure mask (also designated by some manufacturers as isolation, dental, or medical procedure facemasks). The Order does not require nor recommend the use of N95 masks to meet the requirement, although such masks should be used by healthcare personnel when indicated for other reasons (e.g., to protect against the spread of aerosol transmissible diseases such as Tuberculosis).

9. How often does a mask need to be changed according to this Order?

A mask should be changed whenever it is soiled, or per the health facility protocol.

10. How should facilities monitor compliance among healthcare personnel?

Facilities are expected to monitor compliance with the vaccination and masking requirement among healthcare personnel in the same way that they monitor compliance with other infection prevention and control activities (e.g., hand hygiene) and employee health requirements (e.g., tuberculin testing, vaccination against aerosol-transmissible diseases.) Facilities should follow standard personnel policies and procedures regarding discipline, when necessary.

References:

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2. Chatterjee A, et al. A modified “cover your cough” campaign prevents exposures of employees to pertussis at a children’s hospital. *Am J Infect Control* 2007; 35:489-491.
3. Dharmadhikari AS, et al. Surgical face masks worn by patients with multidrug-resistant tuberculosis. *Am J Respir Crit Care Med* 2012; 185:1104-09.
4. Fennelly KP, Hosford JL. Behind the mask: overdue evidence. *Am J Respir Crit Care Med* 2012; 185: 1041-3.
5. Aiello AE, Murray GF, Perez V, et al. Mask use, hand hygiene, and seasonal influenza-like illness among young adults: a randomized intervention trial. *J Infect Dis*;201(4):491–498.
6. Cowling BJ, Chan KH, Fang VJ, et al. Facemasks and hand hygiene to prevent influenza transmission in households: a cluster randomized trial. *Ann Intern Med* 2009;151(7):437–446.