



## Influenza Immunization Challenge: Onwards and Upwards

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# Outline

1. 2012-13 influenza season
2. Influenza immunization for health care workers
3. Simcoe Muskoka Influenza Immunization Challenge: 2012-13 results and local Innovations



## 2012-13 Influenza Season

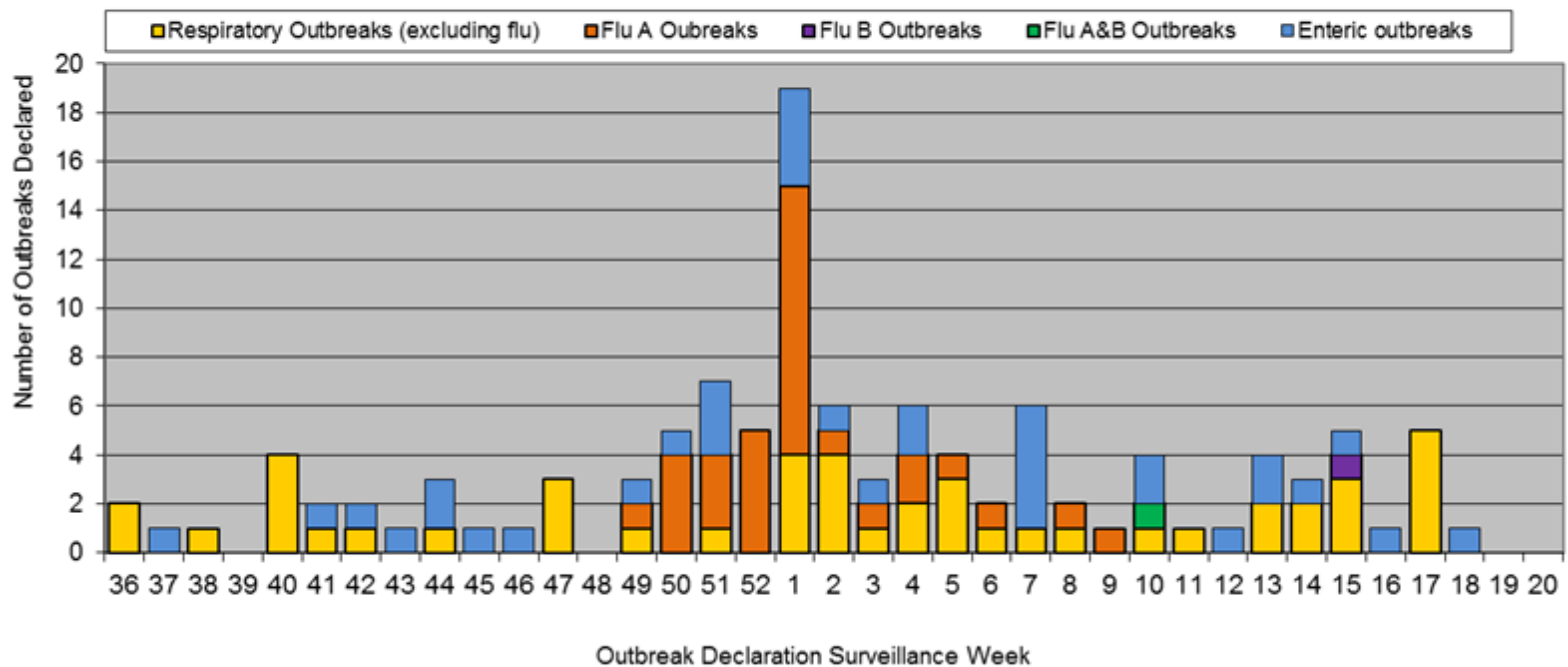
- ◆ Early and more severe season, dominated by influenza A(H3N2)
- ◆ More reported influenza cases and outbreaks in Simcoe Muskoka than past decade+
  - ◆ 429 lab-confirmed cases, 34 facility outbreaks
- ◆ SMDHU reported widespread influenza activity from Dec 9, 2012 to Jan 12, 2013





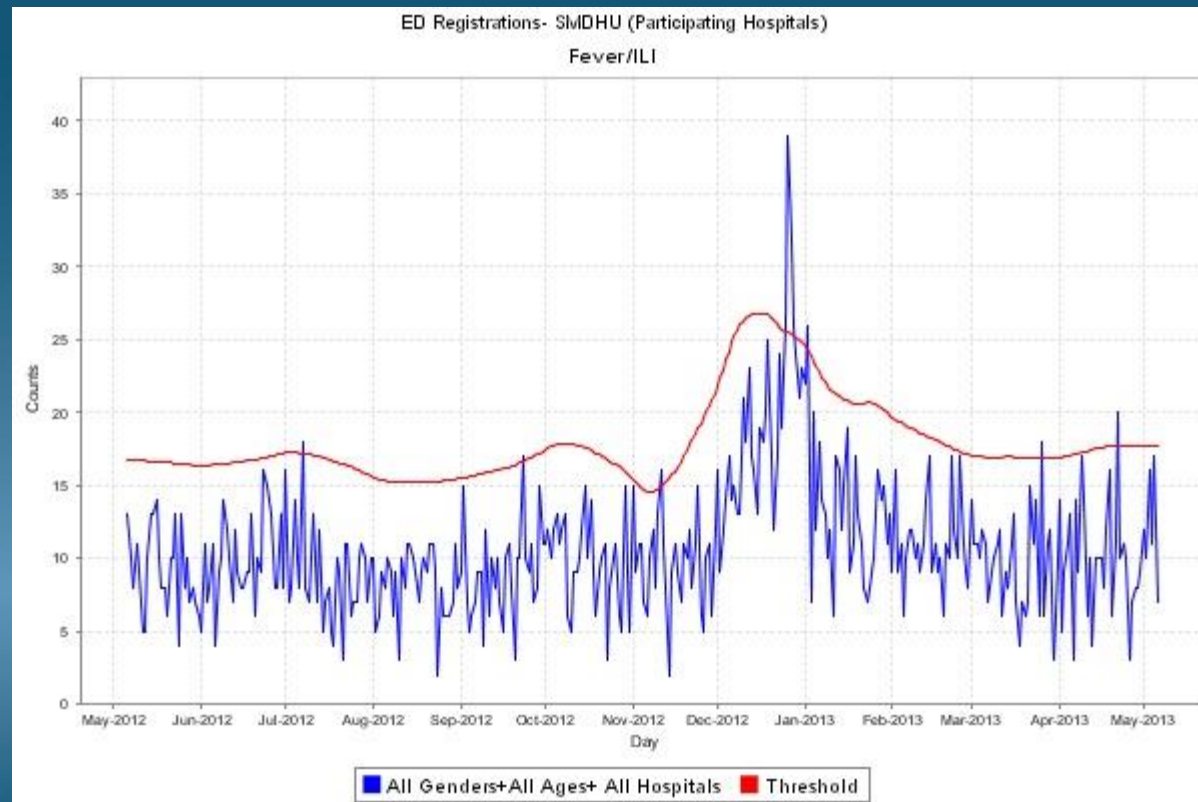
## Outbreaks in Simcoe Muskoka by Type September 2012 - April 2013

Data Sources: Outbreak Log, 2012-13





## Number of Emergency Department Visits for Influenza-Like Illness Syndrome, Simcoe Muskoka Participating Hospitals, 2012 - 2013



(Data Source: Emergency Department Surveillance System)





# Influenza Immunization for Health Care Workers (HCWs): Rationale

- ◆ ↓ risks of influenza transmission, especially:
  - ◆ can't be vaccinated (infants, contraindications)
  - ◆ sub-optimal immune response (e.g. age, immunocompromised)
  - ◆ risks of transmission with asymptomatic/mild influenza
- ◆ Protect HCWs within institution / organization / family / community
- ◆ Maintain essential health / healthcare services + continuity of operations
- ◆ Modelling vaccination behaviour for broader community

Slide acknowledgement: Drs. Doug Sider and Gary Garber, PHO





# Influenza Immunization for HCWs: Recommendations

- ◆ Multiple strategies:
  - ◆ Education and promotion
  - ◆ Improved access to immunization
  - ◆ Role models
  - ◆ Legislation and regulation
  - ◆ Measurement and feedback
- ◆ Organizations increasingly recommending influenza vaccination as a condition of employment – e.g.:
  - ◆ National Advisory Committee on Immunization (annually)
  - ◆ Provincial Infectious Disease Advisory Committee (2012)
  - ◆ Canadian Nurses' Association (2012)
  - ◆ Association of Medical Microbiology and Infectious Disease Canada (2012)





# Influenza Immunization for HCWs: Challenges

**Influenza vaccine is the best preventive tool available, but challenges & controversies persist:**

- ◆ Vaccine efficacy (RCTs):
  - ◆ Systematic review: 59% for TIV in adults (Osterholm et al, 2012)
- ◆ Vaccine effectiveness (real life – observational studies):
  - ◆ 2012-13 Canadian interim VE estimate: 45% for H3N2 - “substantial but suboptimal” – subtleties of vaccine mismatch?
- ◆ Voluntary vs. condition-of-service measures to maximize rates



# Simcoe Muskoka Influenza Immunization Challenge (IIC): 2010 to Present

## Goals:

- ◆ To enhance staff and resident / patient influenza immunization rates (in order to protect all of the above).
- ◆ To provide public recognition for facilities that achieve high (or greatly improved) immunization rates.

## Approach:

- ◆ Public recognition for achieving target immunization rates.
- ◆ Peer supports re: best practices – ‘positive deviance’.



## 2012-13 IIC Awards

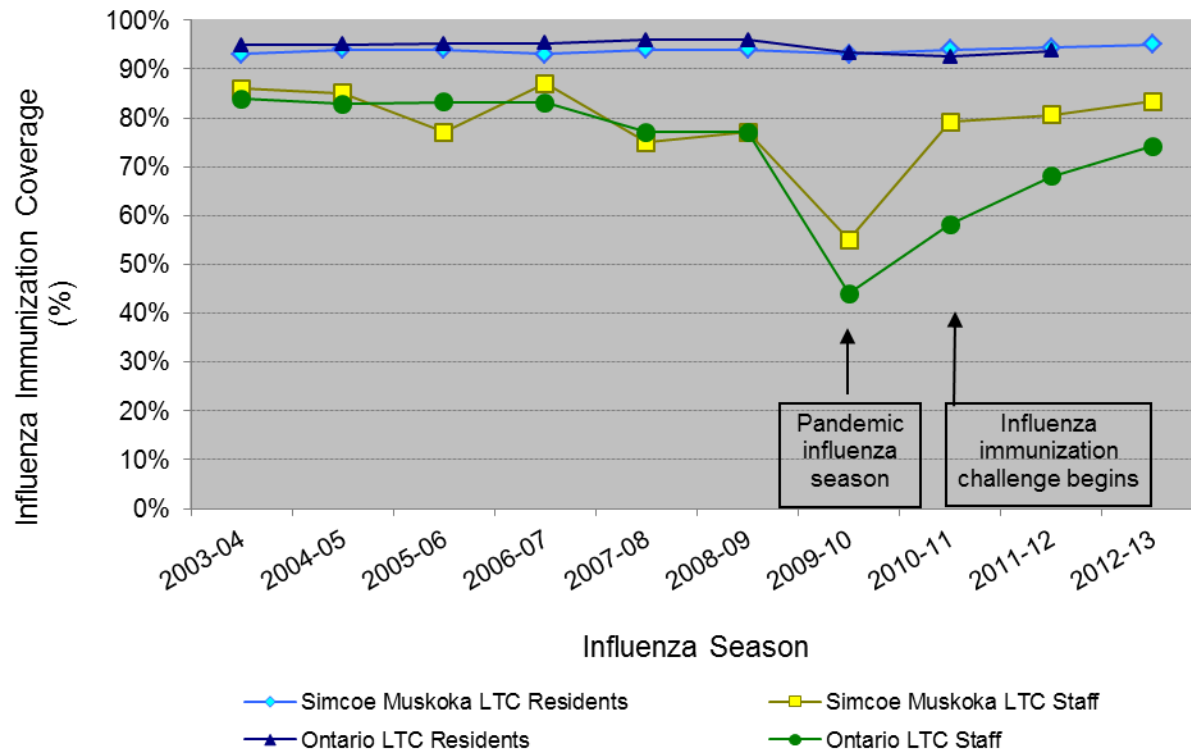
Award*	Long Term Care	Acute Care
Gold (>90%)	10	0
Silver (>80%)	11	0
Bronze (>70%)	4	1
Honourable Mention (10% absolute ↑)	0	2

\*Awards based on Total Facility Immunization Rates: for staff in Acute Care, and for staff and residents in Long Term Care



# Rates in Long-Term Care Facilities

Median Influenza Immunization Coverage\* in Long-Term Care Facilities, Simcoe Muskoka and Ontario, 2003/04 - 2012/13



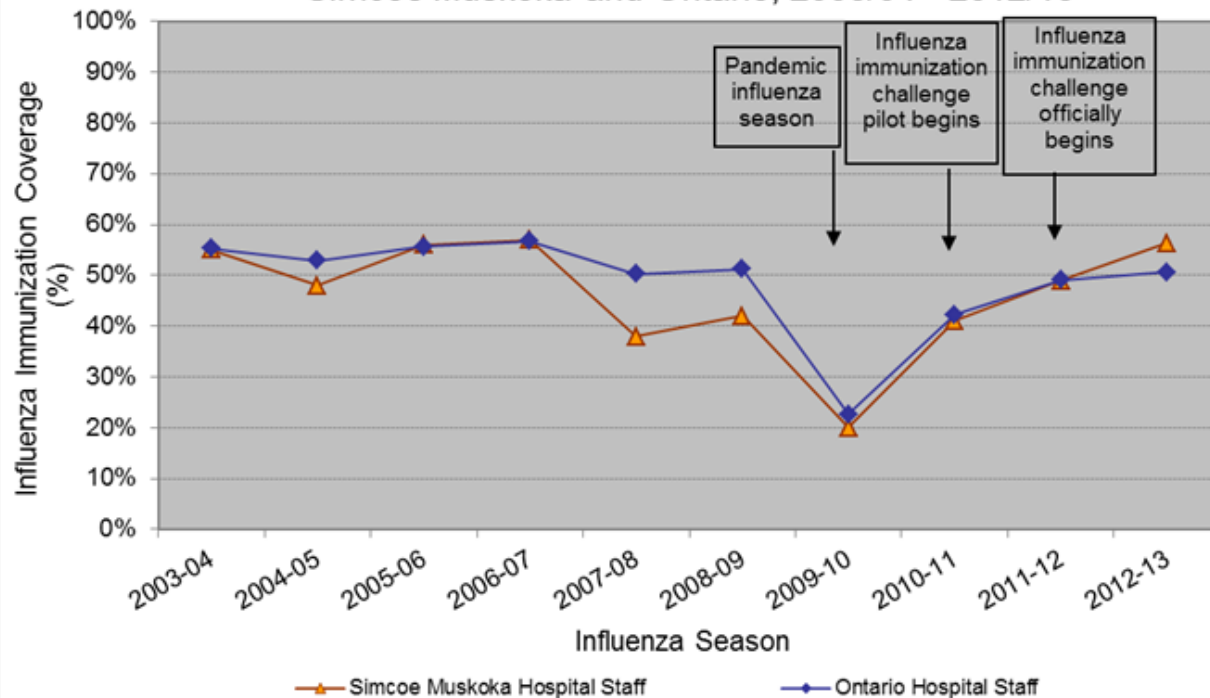
Data Sources: SMDHU immunization records; Public Health Ontario 2012/2013 Ontario Respiratory Virus Bulletin # 11

\*Immunization rates in 2010/11 - present are reported as of January 15. Note that these rates may not be directly comparable to previous years when rates were reported as of November 15.  
Provincial resident rates were not provided for 2012-13



# Rates in Acute Care Facilities

Median Influenza Immunization Coverage\* in Hospitals,  
Simcoe Muskoka and Ontario, 2003/04 - 2012/13

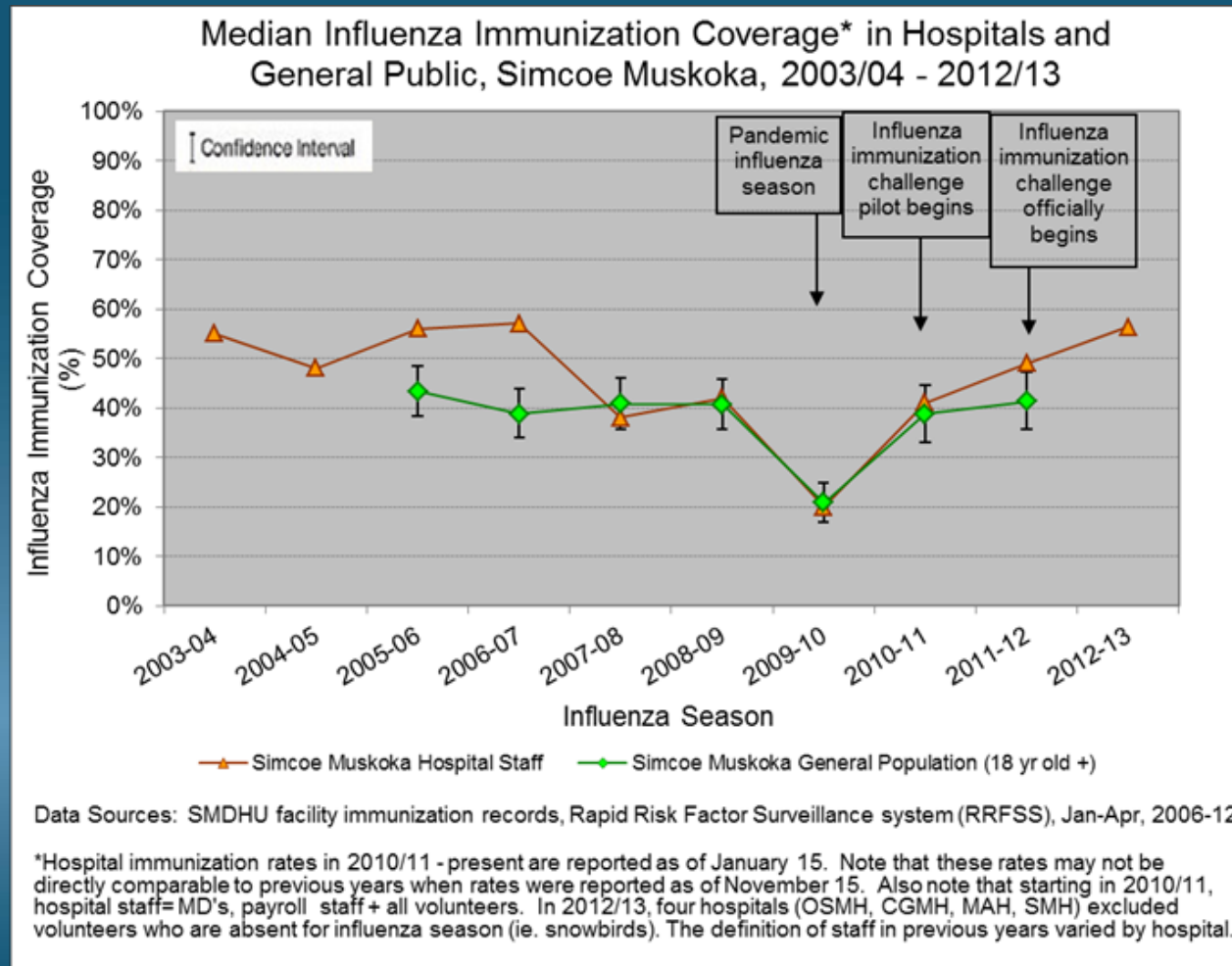


Data Sources: SMDHU facility immunization records; 2012/2013 Ontario Respiratory Virus Bulletin # 11

\*Immunization rates in 2010/11 - present are reported as of January 15. Note that these rates may not be directly comparable to previous years when rates were reported as of November 15. Also note that starting in 2010/11, hospital staff= MD's, payroll staff+ all volunteers. In 2012/13, four hospitals (OSMH, CGMH, MAH, SMH) excluded volunteers who are not present for influenza season (ie. snowbirds). The definition of staff in previous years varied by hospital.



# Rates in Acute Care and General Public



# Local Leadership and Successful Policy Innovations

- ◆ Policy change in Simcoe Muskoka Acute Care facilities:
  - ◆ Majority now have policies with protective requirements for unimmunized staff during community-wide influenza activity (non-outbreak policy)
- ◆ Policy change in Simcoe Muskoka LTC facilities:
  - ◆ At least 3 facilities now require staff influenza immunization as condition of employment, and others are considering
- ◆ Other key factors:
  - ◆ Determination of IPC/OH&S managers and staff
  - ◆ Support of leadership for staff influenza immunization



## Next Steps

- ◆ Earlier launch of 2013-14 Challenge
- ◆ Continued support to and between facilities

*Thank you for your dedication to helping prevent influenza in Simcoe Muskoka, and best of luck for the 2013-14 Challenge!*

