Statement of Support for the Minnesota Department of Health FluSafe Recognition Program

Given that:

- Influenza is a highly contagious disease that is spread person to person and is vaccine preventable;
- Influenza virus can be transmitted by both symptomatic and asymptomatic workers and influenza vaccination protects vulnerable patients and improves patient safety;
- Organizations such as the Association for Professionals in Infection Control, the National Foundation for Infectious Disease, the Infectious Diseases Society of America, and the National Patient Safety Foundation as well as the Joint Commission and National Quality Forum agree that influenza vaccination of workers in health care settings should be a baseline health care standard;
- Studies show that immunizing workers in health care facilities against influenza reduces the rate of disease in those facilities;
- Health care systems and those who work in health care settings have an ethical duty to protect vulnerable patients from transmissible diseases;
- In 2007 the Minnesota Department of Health set the standard of a 90% influenza vaccination rate among health care personnel, which was endorsed by the Minnesota Immunization Practices Advisory Committee; and
- The employee vaccination rate for influenza in Minnesota hospitals and nursing homes is approximately 70% and must be increased to improve patient safety.

We resolve that our organization will:

- Promote achievement of at least a 90% influenza vaccination rate among workers* in health care settings with the goal of ultimately reaching 100% coverage.
- Collaborate in efforts to educate workers in health care settings on the importance of influenza vaccination for patient safety, consistent with recommendations developed by the Minnesota Medical Association Health Care Worker Vaccination Task Force.¹
- Support the Minnesota Department of Health influenza vaccination recognition program (FluSafe) by sharing the details and goals of the program with relevant partners and encouraging their participation.
- Foster use of the statewide immunization registry (Minnesota Immunization Information Connection-MIIC) to document an increase in influenza vaccination rates among workers in health care settings.

* For the purposes of this program workers include all paid personnel in a health care setting including licensed independent practitioners.

1. In January 2010, the Minnesota Medical Association endorsed the following elements as components of a model policy on influenza vaccinations for hospital medical staff across Minnesota: 1) education for staff and licensed independent practitioners about influenza vaccination, non-vaccine control measures (such as hand hygiene, sneeze and cough etiquette), and the diagnosis, transmission, and potential impact of influenza and 2) a “required learning” module that includes information about vaccine benefits, risks to patients and other staff associated with non-vaccination, and a mechanism for managing contraindications or declinations.