



Influenza Vaccine Programs for Fire/EMS Services- Is It Required?

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The cost benefit of annual influenza (Flu) vaccination was first recognized in the 1980s. When staff is out on sick leave due to flu, they are using sick time and then they need to be replaced. All of this costs money for the employer.

The administration of Influenza vaccine on an annual basis has been recommended for **all** providers of health care for many years by the Centers for Disease Control & Prevention (CDC). The CDC has published influenza vaccine recommendations every year, and every year fire/EMS personnel have been listed as being in the priority group. It is important to note that the CDC guidelines set the “medical standard of care,” which means they are not just “nice to do” guidelines. In addition, the General Duty Clause of the Occupational Safety and Health Act states that employers must offer a safe workplace for employees. If there is a known hazard in the workplace for which there is an abatement measure available to protect employees, and the employer does not implement it, there is a potential for an OSHA citation based on the general duty clause. The hazard is the flu and the abatement is the vaccine.

Administration of flu vaccine as one of the vaccines to be offered to staff appeared in the very first version of NFPA 1581 published in 1989 and is still part of that standard. There are many benefits to employers as well as to employees in establishing an annual influenza vaccine. First, the program will assist in the reduction of absenteeism. Second, the employee will develop more protective antibodies against more strains of influenza virus by taking the vaccine every year. And, third, this is part of pandemic planning which should be addressed in every department. As the incidence rate of annual seasonal flu illness declines, this will assist in the more rapid identification of a pandemic. It should be noted that department members may decline vaccination but must sign a declination form. This is clearly stated in NFPA 1581. A declination form documents that the employer did offer the vaccine. Consent forms are advisable as well, this documents that the department member was offered education on the vaccine and had the opportunity to ask questions and then agreed to participate. This is a good risk management practice.

Influenza vaccines can be administered at a very low cost. CDC notes the cost as being between \$9.72 and \$11.25 per dose. Compare that to the cost of staff being off duty for the flu, and the cost of replacement for approximately 5-7 days. The math is very easy. Meeting a

positive goal for influenza reduction in the workplace saves valuable dollars, promotes employee health and is a patient protection issue.

References:

1. Immunization of Health-Care Workers: Recommendations of the Advisory Committee on Immunization Practices (ACIP) and the Hospital Infection Control Practices Advisory Committee (HICPAC), MMWR, December 26, 1997/46(RR-18);1-42.
2. National Fire Protection Association, Standard 1581, Infection Control, 2005
3. Influenza Vaccine Price List, CDC, October 29, 2009, <http://cdc.gov/vaccines/programs/vfc/cdc-vac-proce-list.htm>
4. OSHA General Duty Clause – 1970
5. Use of Influenza A (H1N1) 2009 Monovalent Vaccine, Recommendations Advisory Committee on Immunization Practices (ACIP), 2009