

**Important Information: 2014-2015 Maryland Assisted Living Staff
Influenza Vaccination Survey****Background:**

Infection with seasonal influenza causes considerable morbidity and mortality among older adults. Persons aged 65 years and older account for 90% of the 36,000 deaths that occur from complications of influenza each year. Therefore, it is important that household contacts and/or caregivers of adults aged 50 years and older and the caregivers of persons with medical conditions that put them at higher risk for severe complications from influenza receive influenza vaccine to protect themselves, their families and their patients from influenza.

Since 2011 Maryland assisted living residences have submitted data on the influenza vaccination status of staff employed in the facility. The data collected is used to calculate vaccination rates for each assisted living residence for public report on the Maryland Consumer Guide to Long Term Care Services.

Following are important points you need to know about the influenza reporting initiative:

Important Points:

- 1) The MHCC requires Maryland assisted living residences with 10 beds or more to report data on the number of paid, full-time and part-time employees and medical staff (defined as physicians, nurse practitioners, or physician assistants PAID by the nursing home) who received nasal spray or injectable influenza vaccine either at the nursing home (on-site) or off-site.
- 2) **The reporting period is October 1, 2014 – March 31, 2015.** All paid staff of the assisted living residence who worked at least one day during that time period are included in the data to be reported. Owners of assisted living residences who are regularly on-site are also considered employees for the purpose of this survey.
- 3) The flu vaccine obtained by the employee must be vaccine released for the 2014-2015 influenza season.
- 4) In response to questions from some providers, we provide the following clarification of declination for medical reasons. In order to qualify as a medical reason for not receiving flu vaccine, the individual must have a documented medical contraindication **diagnosed by a physician or requiring medical treatment** such as a severe allergic reaction, severe egg allergy, severe reaction to any vaccine component, severe reaction after a previous dose of influenza vaccine, or a history of Guillian-Barre Syndrome.

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- 5) Written documentation of vaccine received inside or outside the facility or declination must be maintained. Those declining should receive education about the importance of protecting themselves and particularly the vulnerable residents they work with. Staff vaccination records could be inspected as part of an Office of Health Care Quality Survey or audited by Maryland Health Care Commission staff.
- 6) Participation in the survey is mandatory for all assisted living residences with a license for ten or more beds, so please maintain the records you will need to complete the survey when the online survey is posted on the MHCC website in April 2015. The Commission under its authority to fine for incomplete, inaccurate or untimely data (COMAR10.24.03.02) may impose fines of up to \$100 per day for non-report. We plan to post the online survey on or around April 1, 2015 for completion by May 15, 2015.
- 7) Data for the reporting period, **October 1, 2014 – March 31, 2015**, must be submitted to MHCC via the online survey by May 15, 2015. The link to the online survey will be e-mailed to all nursing homes on or around April 1, 2015.

The Survey Questions for the 2014-2015 Influenza Season appear on the following pages

Introduction

Infection with seasonal influenza causes considerable morbidity and mortality among older adults. Therefore, it is important that people who live with or care for people at high risk for flu-related complications get vaccinated in order to protect themselves, their families and their patients from influenza. Maryland assisted living residences with 10 or more beds are required to report data on all paid full-time and part-time employees working in the facility at least one day between October 1, 2014 – March 31, 2015 who either received influenza vaccine (on-site or off-site) or choose not to be vaccinated, and the reason why. **The completed online survey must be submitted to the MHCC by May 15, 2015.**

Facility-specific data collected through the 2014-2015 survey **will** be published as part of the MHCC Consumer Guide to Long Term Care.

If you have questions regarding these reporting requirements or you are unable to access the survey, please contact Carol Christmyer at carol.christmyer@maryland.gov or 410-764-3575; or Julie Deppe at Julie.deppe@maryland.gov or 410-764-3563.

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Part A: Assisted Living Residence Identification and Contact Information

1. Assisted Living Residence Name
2. Assisted Living ID
3. Name of Person Completing Survey
4. Title of Person Completing Survey
5. Telephone Number
6. Email address

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Part B: Flu Vaccination Questions

1. Total number of paid full-time and part-time assisted living staff working in your facility at least one day between October 1, 2014 and March 31, 2015. _____

Calculating the number to be reported:

- A. Number of employees on staff October 1, 2014 (full and part time)
- B. Number of newly hired employees October 1, 2014 – March 31, 2015

Add A+B to get the total number of paid full-time and part-time employees to be reported

2. Of the total number of paid full-time and part-time assisted living staff listed in question 1, provide the number who received influenza vaccine on-site or off-site (and provided written documentation). _____

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3. Of the total number of paid full-time and part-time assisted living staff listed in question 1, provide the number who did NOT receive influenza vaccine due to **medical contraindications**. _____

Note: in order to qualify as a medical reason for not receiving flu vaccine, the individual must have a documented medical contraindication **diagnosed by a physician or requiring medical treatment** such as a severe egg allergy, severe reaction to any vaccine component, severe reaction after a previous dose of influenza vaccine, or a history of Guillian-Barre Syndrome after vaccination.

4. Of the total number of paid full-time and part-time assisted living staff listed in question 1, provide the number who did NOT receive influenza vaccine due to **religious objections**. _____

5. Of the total number of paid full-time and part-time assisted living staff listed in question 1, provide the number who did NOT receive influenza vaccine due to **other objections or no documentation** provided. _____

6. What strategies does your assisted living residence employ to raise awareness and provide access to influenza vaccination for employees and others working in the facility? (Check all that apply)

- _____ Provide vaccinations onsite
- _____ Distribution of educational material (including fliers, posters, leaflets, etc.) for influenza vaccination education
- _____ Educational presentations to staff on the importance of influenza vaccination

Select one option from the three choices below:

- _____ Provide influenza vaccination free of charge to employees
- _____ Provide influenza vaccination at reduced cost to employees
- _____ Not applicable

7. What methods does your facility use to document influenza vaccination and declinations among employees? (Check all that apply)

- _____ Employees required to provide written proof of off-site vaccination
- _____ Employees required to provide physician documentation to support medical contraindications
- _____ Employees sign a form when declining for medical contraindications
- _____ Employees sign a form when declining for religious reasons
- _____ Employees sign a form when declining for other reasons
- _____ Documentation (if any items above are checked) is kept with other employee records
- _____ No documentation is required