

Flu Advisory Board (FAB) Meeting
Date: Wednesday, December 8, 2010
Time: 12:15 p.m. – 2:30 p.m.

Members in Attendance: Tracy Newhouse, Beverly Piskorski, Dawn Lukomski, Barbara Day, Janice Arsenault, Barbara Wolicki, Rebecca Blake, Vanita Shaw, Susan Palmer, Jan Teltow, Mary Jo Flenner, Carolee Besteman, Jim Mathews, Elaine Houser, Patricia White, Peter MacDonald, Glory Aiken, Jon Stekete, Nichole Penny, Christopher Smith, Eden Wells, Donna Nursdorfer, Judy Gwozdek, Mark Upfal, Morgan Brooks, Basim Asmar, Ahdi Amer, Rosemary Franklin, Susan Peters, Leonard Pollack, Greg Pratt, Joanne Eakins, Pat Krehn, Sue Schryber, Terri Adams, Stephanie Sanchez, Liz Ritchie, David Wright, Marian Beck Clore, JoAnn Hyde, Patricia A. Vranesich, Bob Swanson, Robert Miller, Cristi Carlton

On Phone: May Haun, Donna Lewis, Carol Rombach, Linda McGrath, Dianne McCagg, Susan Bass

Review of Minutes/List Attendees – minutes approved

Influenza Surveillance Update (Susan Peters)

- Currently all of the influenza surveillance systems are reporting very little activity
- 0.7% of patient visits are due to flu-like illnesses according to sentinel flu sites (this is below Michigan's baseline of 1.8%)
- MDSS individual and aggregate counts are very low
- Labs results – sentinel labs reporting sporadic activity – occasional flu A or RSV
- State lab – 2 positive 2009 H1N1 viruses from SE; 3 Influenza A H3 viruses; no flu Bs in Michigan yet. BOL received a couple of positive cultures; however the residents were from Georgia
- Reminder – As the flu season picks up, BOL is not a diagnostic lab; specimens of interest are: outbreaks, severe cases, first influenza positive cases for hospitals, sentinel physicians
- Check flu kits from last year – if viral media has expired, let MDCH know and we can replace the media

Influenza Vaccination Coverage (Cristi Carlton)

Michigan 2009 Seasonal Flu Vaccination Coverage according to BRFSS and NHFS

- Flu vaccination coverage for all persons 6 months and older was 36.8% \pm 1.7
 - Below the national avg: 41.2% \pm 0.4
- 65+ age group had highest coverage (68.6 \pm 2.7)
 - Below national avg: 69.6% \pm 0.6
- Lowest coverage: non-high risk 18-49 yr olds (23% \pm 2.6)
 - Below national avg: 28.4 \pm 0.6
- Across all ages disparities were noted by race and ethnicity
- According to MCIR data, 2009 seasonal influenza coverage was:
 - 6mos – 4yrs: 37.2% (one dose coverage)
 - 5-18 yrs: 14.7% (one dose coverage)
 - 19-24 yrs: 3.8%
 - 25-49 yrs: 5.0%
 - 50-64 yrs: 9.2%
 - 65+ yrs: 15.7%
 - these data are only as good as what is reported in the registry
 - while the number of sites entering adult vaccine doses is increasing; seasonal flu doses are not routinely entered for adults

Michigan 2009 H1N1 Flu Vaccination Coverage

- 1,629,090 vaccine doses were entered into MCIR

- this represents 1,457,609 persons
- Statewide coverage for 6 months and older was 14.7%
 - County range: 6.2 % - 23.6%

Pregnant Women: Seasonal and 2009 H1N1 Flu Vaccination coverage

- Since 2004, ACOG and ACIP have recommended that all pregnant women be given seasonal flu vaccine during any trimester of pregnancy
- <25% for seasons prior to 2009-2010
- CDC MMWR published Dec. 3, 2010
 - Data from 10 states from the Pregnancy Risk Assessment Monitoring System (PRAMS)
 - 50.7% received seasonal influenza
 - 46.6% received 2009 H1N1
 - 66.0% received at least one
 - 34.1% received both
 - 19.7% received only the seasonal vaccination
 - 12.2% received only the 2009 H1N1
 - Women whose HCP offered or recommended vaccine were 3 times more likely to get a seasonal flu shot and 10 times more likely to accept the pandemic vaccine

2010-11 Seasonal Flu Vaccination Coverage – Preliminary Data

- Total doses distributed: 3,632,275
- Total doses administered: 1,002,795
 - 90% of doses administered have been TIV
 - 56% female; 44% male
 - Family Practice offices have administered the most vaccine (44.6%), followed by Pediatrics (17.3%)
 - Coverage by county for 6 months and older ranges by county from 2.6% - 24.6%

CDC's Rapid Flu Survey

- Developed to provide in-season estimates of flu vaccination coverage and knowledge, attitudes, and behaviors regarding flu vaccines
- Conducted November 1-14, 2010 nationally and in 20 local areas
 - Washtenaw County participated (more data to come)
- 32.8% (± 2.4) of persons aged 6 months and older, 30.6% (± 5.0) of children, and 33.5% (± 2.5) of adults had already received influenza vaccination
 - Slightly higher than at this time last year
- Many people not yet vaccinated are interested in doing so
 - Among those not yet vaccinated, 15% answered they will definitely get vaccinated and 25% reported they will probably get vaccinated.

Rapid Flu Survey information available at: <http://www.cdc.gov/flu/pdf/vaccination/rapidflusurvey.pdf>

Michigan State Medical Society (MSMS) Update (Becky Blake)

- MSMS presented a resolution, "Priority Vaccine Distribution to Physician Offices," to the American Medical Association (AMA) which was intended to ensure that high-risk patients would have access to the vaccine, by distributing vaccines to physicians and other medical facilities before retail and other non-medical facilities.
- AMA reviewed this proposal at the November meeting
- AMA is working with CDC to facilitate distribution of flu vaccine to medical providers (in a timely manner) in order to immunize patients at high risk for flu-related complications

- CDC has been clear that VFC vaccine will not come out at the same time as private supply vaccine – even though this would be ideal, the process is different (from McKesson) and it will always take longer to get VFC vaccine than private flu vaccine

Trends in Influenza Vaccine Distribution (Cristi Carlton)

- Nationally: 162.8 m doses have been distributed this flu season
 - Most ever distributed in a flu season
 - ~ 114 million in 2009-10 flu season
- Michigan: 3.6m doses (as of November 15, 2010)
 - 5 years ago: 2.4m vaccine doses distributed
- Data analyzed from the last 6 flu seasons
 - Gradual increase in doses distributed nationally and in Michigan
 - Private providers and hospitals continue to receive the largest percentage of vaccine doses
 - ~60-70% of total doses distributed
 - Distribution to hospitals has increased since 05-06
 - Significant rise from 06-07 to 07-08 & from 09-10 to the current season
 - Current season: first time hospitals received more vaccine doses than private providers
 - 1,131,025 doses as of Nov 2010, compared to 1,037,590 doses in 2009-10
 - Pharmacies have received increased amounts
 - 2005-06: 23,413 doses (0.98%) of total doses distributed
 - 2007-08 season: 6.38%
 - Current season: 7.79%
 - State/local health departments and government, which incorporates the Vaccine for Children (VFC) program, has increased steadily
 - 2006-07 season: 9.49%
 - Current season: 16.49%
 - Factors: expanded age recss, increased provider participation, increase in supply, increase in eligibility
 - Timing of Flu Vaccine Distribution
 - Distribution date available for the last 2 flu seasons
 - *When* was vaccine distributed:
 - 2009-10: majority in Aug. & Sep.
 - Current season: majority in Sep.& Oct.
 - *Who* was vaccine distributed to:
 - Both seasons: hospitals and private providers started receiving vaccine in July
 - Pharmacies received the bulk of their vaccine doses in August and September; although during these months, hospitals and private providers were still receiving more total number of vaccine doses compared to pharmacies.
- Administration of flu vaccine – MCIR data
 - Majority of doses administered by family practice and pediatric offices
 - Role of pharmacies
 - Current season: 1,002,795 doses have been entered into MCIR (as of 11/13/10)
 - 171,887 (17%) have been administered by pharmacies
 - 09-10 season: 7.1%
 - 08-09 season: 0.8%
 - 07-08 season: 0.2%
 - More doses are being entered into MCIR
 - There is still a lot of room for improvement
- Overarching flu messages

- Increase in the amount of influenza vaccine produced.
- Vaccine is being distributed sooner to private providers, hospitals and pharmacies.
- Coverage rates need to be improved.
- The flu season is just starting to pick up.
- It's not too late to vaccinate.
- Vaccinate throughout the influenza season!

Role of Community Vaccinators in Influenza Vaccination – Open Discussion

Pharmacies, Visiting Nurses Associations, Long Term Care Facilities

Entering doses into MCIR

Do pharmacies get vaccine distributed to an out-of-state depot or directly to the pharmacy? Walgreens uses Cardinal (centralized distributor) and Hometown Pharmacies gets vaccine from FFF on the West Coast. Walgreens received their doses by the end of August. Walgreens did a tremendous job of entering all flu vaccine doses (for all ages) in MCIR.

Best practices from Partner Organizations

Walgreens enters data into one centralized, real-time computer system and all Walgreens' pharmacies can see this data. Walgreens computer system directly transfers data into MCIR. They are able to enter doses for children less than 18 years of age by linking to the head of the household via another form. Walgreens vaccinates children 9 years of age and older.

Walgreens is giving other vaccines (zoster, HPV) and they are entering these doses into MCIR, too. They also enter data into Indiana's registry as well as registries in other states. They offer other vaccines to patients and also offer to notify the primary care provider of the vaccination if the patient chooses to do so.

Visiting Nurse Associations held clinics at churches and workplace sites. Adult data is not entered at this time. Explored using scan forms but would still need to hire someone to scan the forms in – MDCH would be willing to work with VNA on this.

Hometown Pharmacies has encountered challenges entering doses into MCIR because their computer system doesn't link. He is willing to look into scan forms if MDCH can facilitate the data entry. MCIR and MAPS are very similar programs and data transfer may be much easier than it seems.

Mandatory Flu Vaccination Coverage for Health Care Personnel (Pat Vranesich)

- AAP, AMA, IDSA, and other health care organizations/associations strongly support mandatory flu vaccination of Health Care Personnel (HCP). There are numerous policy statements available to help build the case for mandatory vaccination.
- Discussed what other states are doing
 - The state's power to mandate vaccinations in the interest of the public health has been established since 1905
 - Washington State Hospital Association Flu Immunization Policy
 - 94 of 98 hospitals have adopted flu immunization policies that require health care personnel to be immunized or take protective actions
 - Toolkit available online: http://www.wsha.org/files/82/Flu_Immunization_Policy_FULL_print_2_sided.pdf
 - New York State: state mandate last year

- California requires employees of general acute care hospitals to be vaccinated annually or sign a written declination explaining their refusal
- Virginia Mason: 98.9% coverage levels among HCP – successful program in place for many years.
- MDCH has encouraged hospitals and health systems in MI to review their flu vaccination policies
 - Letter sent to hospital administrators asking them to review flu vaccination policies
 - IAC’s Honor Roll for patient safety
 - Recognizes stellar examples of flu vaccination mandates in healthcare settings
 - <http://www.immunize.org/honor-roll/>
 - 5 institutions and 3 medical practices in MI
- We are compiling a list of contacts who have mandated flu vaccines in their health care facility so that organizations who are considering developing a similar policy can talk to their colleagues throughout the state to learn from their experiences.

Mandatory Flu Vaccination at the DMC (Dr. Mark Upfal)

- 2009-10 flu season
 - Few Michigan hospitals were requiring flu vaccination
 - Most hospitals were strongly promoting the flu vaccine
- DMC flu vaccination rates
 - 12/8/2008 – 38.3%
 - 12/7/2009 – 45.4% (Seasonal Flu)
 - 47.5% in “High Risk Areas”
 - 35.1% for H1N1
 - 41.6% for H1N1 in “High Risk Areas”
- Last flu season
 - Letter submitted by Dr. Holzman to Michigan Hospital CEOs encouraging review of flu vaccination policies
- DMC: 2010 Mandatory Flu Vaccination
 - Aug 8, 2010 Joint Press Release
 - Detroit Medical Center
 - Henry Ford Hospital
 - Karmanos Cancer Institute
 - Applies to physicians, nurses, students, transporters, volunteers, vendors, contractors, housekeepers, clerical, lab & dietary staff, and others providing pt care in hospitals, outpatient facilities & home care
 - ALL employees/staff in direct contact with patients in high-risk areas must be vaccinated
 - Identified by Badge Sticker
 - High risk = ED, ICU, OB, Peds
 - Direct contact = > 5 min; < 6 ft
 - If unable or unwilling, must wear a mask while providing direct patient care during flu season
 - Flu season defined by Infection Control Dept. based on CDC/MDCH “regional spread”
- Vaccination Opportunities
 - 3 clinic sites – Promoted to all OHS encounters & walk-in visits
 - Mass vaccination clinics (also serves as pandemic planning drills)
 - Data swiped into database by employee badge
 - Roving vaccinators
 - Department-based vaccinators
 - Conferences & meetings
 - Accepting documentation of vaccination elsewhere
- 2010 flu vaccination rates (as of 12/7/2010)
 - 71.1% in high risk areas, 63% overall

- Plans for next flu season
 - Likely expansion of requirement to all HCWs next year
 - Expansion of Tdap vaccination
 - Required of new hires working in peds & OB
 - Will expand to those of all ages & regardless of prior 2 yrs TD

Discussion

- Henry Ford has posted signs in their patient care areas to notify patients of their flu vaccination policy. They ask patients to remind HCP without stickers to wear a mask before coming into the room. Henry Ford declared this on December 1st and they put into policy that they could declare the start of flu season earlier based on surveillance and flu activity in the state.
- Nursing and medical schools that work with DMC follow these same guidelines. They will explore this with pertussis.
- There is inconsistent guidance from hospitals to nursing and medical school students with regard to required vaccines and serology testing. As we get further into this topic, we will need to explore guidance being given to these students by hospitals and institutions they work with. Perhaps MACI could put together a position statement and distribute it to hospitals on this topic. CDC will be updating their national guidance for HCP vaccinations. IAC has great materials, too.
- Walgreens provided flu vaccine free-of-charge to all store employees, even if not on their insurance plan (part time, full time, students, etc.) can all get this for free. Immediate family members could receive the flu vaccine for free if they were on their insurance plan. Hometown Pharmacies provided flu vaccine to employees for free, too.

Manufacturers/Shipping updates

- MedImmune – 100% FluMist VFC doses have been distributed to McKesson; inventory management – first VFC doses will expire December 9 – can exchange these doses for new doses (through the end of January)
- sanofi pasteur – over 10 million doses of Fluzone; expanding the season – still many doses out there; 2011 reservations have started and will proceed through the end of March; educate on those over 65 years of age who are at increased risk
 - Will sanofi continue to produce many doses in multi-dose vials? Not sure. Trend has been to move away from multi-dose vials, but they still produce them and are currently sold out of them. Fluzone high dose vaccine will be expanded next year and more doses will be available. They did not sell out of Fluzone this year.
- GlaxoSmithKline (GSK) – currently have Fluarix doses available; out of Flulaval; next year 14 million Fluarix and 25 million Flulaval (15 million of this goes directly to the distributor); pre-booked 13 million already
- Novartis – sold out of 40+ million doses of flu vaccine; all doses were out by early October; pre-booking process has started already
- CSL Biotherapies – no report
- Roche – no report

Flu Gossip & Hot Topics

Association between Flu Vaccination Rates and Medicaid Reimbursement

- 3 years of National Immunization Surveys (NISs)
- Children 6 to 23 months of age during:
 - 2005–2006 (n=12,885); 2006 –2007 (n=9,238);
 - 2007–2008 (n=11,785)
- Children categorized into 3 income levels: poor, near-poor, or non-poor
- Selected results

- \$10 increase in reimbursement rate was associated with a 50% relative increase in the rate of full vaccination among poor children
- \$1 increase was associated with a 5% relative increase in the full vaccination rate
- Conclusion: Medicaid reimbursement rates for influenza vaccinations seem to be strongly associated with influenza vaccination rates among poor children
- An increase in Medicaid reimbursement rates is one policy option to improve influenza vaccine coverage levels for this nation's poor children

Length of time community outreach agencies store records

- Many hospitals don't keep this data, as the out-patients are not typical hospital patients
- The hospital purchases the vaccine and it is probably included in the hospital policy that they need to store this – it becomes a medical record
- VNA stores these – customers, not registered patients of U of M – they store records for ~ 7 years by clinic, not patient name. Each person doesn't get their own chart, but each clinic has their own section by year.
- Is MCIR the safety net? Technically not. It isn't a medical record – it is a registry. You still need to have the hard copy pieces.
- Could transfer records electronically and save space, but this would take time to do.

Extending the influenza season

- What are we not doing right? We have plenty of vaccine available, yet our “late season” rates are really poor every year.
- How do we get people interested past fall?
- LHDs give flu vaccine until it expires in June; however, it is hard for them to sell this to patients, unless they are traveling. LHDs even have to argue with providers to give flu vaccine until January.
- Some of the problem lies in terminology. Not really “late season” vaccination if flu disease hasn't even started. How do we get the media interested later in the fall and early into winter? This drives patients to want flu vaccine, yet they only seem to talk about it in late summer/early fall.
- Peak flu season is typically February or beyond.
- How much of their stock have pharmacies used so far? Slightly over 50% of flu vaccine has been administered so far for Hometown Pharmacies. About 64% of flu vaccine doses have been administered by Walgreens.

FAB Website: http://www.michigan.gov/mdch/0,1607,7-132-2940_2955_22779_40563_48357-197755--_00.html