

Influenza Immunization of Staff in British Columbia Acute Care Hospitals

NOTES

Data are submitted by Health Authorities (Annual Influenza Immunization Program Survey) and compiled by Epidemiology Services, BC Centre for Disease Control.

For the 2009/10 influenza season priority was placed on the H1N1 vaccination campaign. Coverage of H1N1 vaccine among acute care health care workers was reported in the same manner as seasonal influenza vaccination coverage for NHA and VCH, and was reported through the WHITE system for PHSA, FHA, IHA and VIHA. Data from WHITE only captures health care workers employed by the health authority (does not include data on contracted employees or facilities) thus the denominators for WHITE data may be slightly different than those ascertained directly from facilities.

For the purposes of this analysis, "Acute Care Hospitals" are defined as non-profit institutions that have been designated as a hospital by the Minister and are operated primarily for the reception and treatment of persons (a) suffering from the acute phase of illness or disability, (b) convalescing from or being rehabilitated after acute illness or injury, or (c) requiring extended care at a higher level than that generally provided in a private hospital.

For the purpose of this analysis, "Staff" includes all persons who work train on a full time, part time or casual basis in a facility or hospital who have direct or indirect contact with patients or residents, regardless of whether they are health care providers.

Some facilities reported coverage for only staff on payroll, while other facilities included contracted staff and/or trainees.

It is common for staff to work in more than one acute care hospital, or work in a long term care facility and an acute care hospital. In most situations, these staff members are included in the calculations of influenza immunization statistics for all facilities they are associated with and are therefore accounted for more than once.

Due to difficulties in accurately determining the number of people who meet the definition of "Staff" in each facility, changes in immunization coverage rates may be a result of changes in methods of calculating the denominator (the total number of "staff").

Percent of acute care hospitals in each Health Authority providing influenza immunization data:

Year	% of Facilities Reporting Immunization Data
2010/11	100%
2009/10	100%
2008/09	100%
2007/08	100%
2006/07	97%-100%
2005/06	100%
2004/05	unrecorded

Data may not be comparable by facility and Health Authority from year to year due to ongoing changes in data collection methods, changes in geographic health area boundaries and changes in facility denominators as licensed bed capacity changes. However, assuming consistency in reporting practices, overall trends in immunization coverage can be assessed by examining these data.

In North America, most influenza cases happen in the winter. An influenza season is usually considered to start in October of one calendar year and end in April the following calendar year.

Abbreviations:

IHA = Interior Health
FHA = Fraser Health
VCH = Vancouver Coastal Health
VIHA = Vancouver Island Health

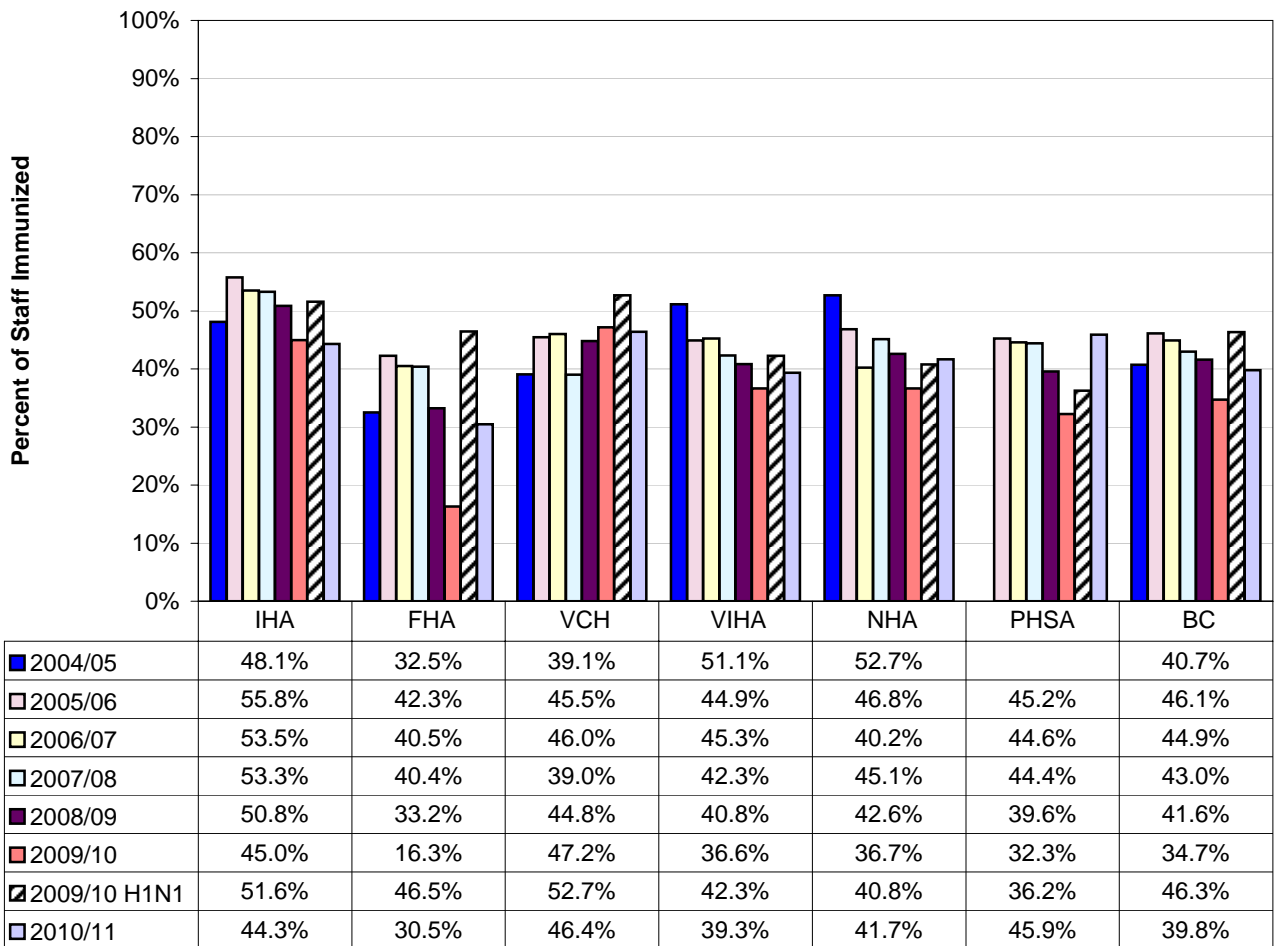
NHA = Northern Health
PHSA = Provincial Health Services Authority
BC = Province of British Columbia

For an explanation of BC Health Authorities, please visit:

<http://www.health.gov.bc.ca/socsec/index.html>

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**Influenza Immunization Rates for Staff of Acute Care Hospitals
Health Authorities and British Columbia**



From 2005/06 to 2008/09 influenza immunization coverage among health care workers in acute care facilities in British Columbia gradually decreased from 46.1% to 41.6%. In 2009/10 uptake of the seasonal influenza vaccine was very low (34.7%), but uptake of the pandemic H1N1 vaccine was higher (46.3%). In 2010/11 seasonal influenza immunization coverage increased over 2009/10 results to 39.8%, which is a continuation of the observed downward trend from 2005/06.

Influenza immunization coverage among health care workers in acute care facilities has consistently been lower than the Immunize BC coverage target of 60%. [\(Immunize BC Strategic Framework\)](#)

Rates and trends varied by health region.