



Senate Committee on Health and Human Services Senate Bill 1177

Presented by: **Charles J. Lerner, MD, FSHEA**

April 5, 2011

Chairman Nelson and members of the committee, it is a privilege for me to speak with you today in support of Senate Bill 1177 on behalf of the Texas Medical Association, the Texas Pediatric Society, and the Texas Academy of Family Physicians, which represent nearly 48,000 physicians and medical students in our state.

My name is Charles J. Lerner, MD, FSHEA, and I am a physician and the medical director of hospital epidemiology and employee health for the Methodist Health Care system in San Antonio. I am a past president of the Texas Infectious Disease Society and the current chair of the Texas Medical Association's Committee on Infectious Diseases.

First I want to thank you for your great support over the years in improving Texas' ability to immunize children across Texas. We appreciate it. And it has made a difference. Getting vaccinated is one of the most effective things we can do to keep our children, ourselves, and our community healthy.

Most of us think we are protected from infectious diseases by vaccinating our young children and ensuring they are vaccinated before entering school. However, as we reach adulthood, many of us don't get vaccinated again, except for an occasional tetanus shot. We are learning much more about the waning immunity of adults, and how this puts adults at increased risk of getting sick and also spreading disease. This is a public health threat, especially in environments with children or other people at risk of serious illness, such as child care centers, preschools, and hospitals.

Health care workers, especially, who are not immunized against influenza and other diseases may unknowingly spread these diseases to the patients in their care. In fact, this is a significant problem. So much so, national and international organizations, as well as organized medicine, including TMA, have adopted strong policies calling for physicians and other health care workers to be vaccinated routinely. This includes the American College of Physicians, Academy of Family Physicians, American Academy of Pediatrics, Infectious Diseases Society of America, and Society for Healthcare Epidemiology of America.^{1,2,3,4}

Numerous published medical studies show that when health care workers are immunized, patient mortality is reduced almost by half.^{5,6} Additionally, there is evidence that preventing influenza reduces patient hospitalizations and death from heart, chronic lung and kidney disease, as well as from diabetes.⁷

As physicians, we are doing our part by promoting the importance of vaccinations to our staff, coworkers, and other health care workers.⁸ But we need your help to make sure each health care facility has strong policies to protect patients and health care workers.

Health care is unique. You can't have health care workers going into a health care facility potentially carrying an infectious disease that they can transmit to others. Physicians and other health care workers have an ethical and moral obligation to protect their patients. **As a physician in a large hospital system, I can tell you that vaccination of all health care workers is a cornerstone of a strong patient safety program.** In my hospital,

we require all health care workers to be immunized against influenza or wear a mask at all times during the entire influenza season when within six feet of any patient.⁹

Yes, this may be complicated for hospitals and facilities that do not have up-to-date policies or systems for monitoring vaccination recommendations. Hospitals and other facilities will need to review the Advisory Committee on Immunization Practices recommendations and develop their own facility policy. We think the policy should state clearly which vaccinations are required and of whom, specify the action employees must take, describe when and who must use protective equipment, and also track why a worker may choose to decline.

There are very few acceptable reasons for an employee to decline a vaccination. Studies show that health care workers often decline to be vaccinated because they believe a vaccine will make them sick. This misconception likely was influenced by the fraudulent studies promoted by Andrew Wakefield and others. We firmly believe that a **health care worker should be able to decline only if he or she has a documented medical reason or religious belief**. This is not in the current legislation, and we would hope to see clear language on this provision.

Many hospitals and other facilities already have strong vaccination programs for their employees; this legislation will not have an impact on their current programs.

In closing, I wish to thank Senator Nelson for sponsoring this legislation, which will be a giant step for Texas in promoting patient safety in our health facilities. **Vaccination is one of the most important parts of an infection control prevention program. Perhaps it is one of the most important actions any of us can take to keep ourselves healthy, and more importantly, to keep from making those around us sick.** This legislation would help ensure that patients and their families know the facility they are going to has been diligent in making sure that the facility staff will not be a cause of further illness or even death.

¹ ACP policy on influenza vaccination of health care workers. Accessed online March 15, 2011, at www.acponline.org/clinical_information/resources/adult_immunization/flu_hcw.pdf.

² Policy statement — recommendation for mandatory influenza immunization of all health care personnel. *Pediatrics*. Published online Sept. 13, 2010.

³ IDSA Policy on Mandatory Immunization of Health Care Workers Against Seasonal and Pandemic Influenza. Accessed on line March 15, 2011, at www.idsociety.org/pandemicinfluenzapolicy.htm.

⁴ Talbot T, Babcock H, Caplan A, et al. Revised SHEA position paper: Influenza vaccination of healthcare personnel. *Infect Control and Hosp Epidemiol*. 2010; 31(10): 987-995.

⁵ Carman W, Elder A, Wallas L, et al. Effects of influenza vaccination of health-care workers on mortality of elderly people in long-term care: a randomized controlled trial. *Lancet*. 2000; 355: 93-97.

⁶ Potter J, Stott D, Roberts M, et al. Influenza vaccination of health care workers in long-term-care hospitals reduces the mortality of elderly patients. *Journal Infect Dis*. 1997; 175:1-6.

⁷ CDC. Prevention and control of seasonal influenza with vaccines. *MMWR Recomm Rep*. 2010; 58(RR08): 1-52.

⁸ Texas Medical Association, *Increasing Influenza Vaccination Coverage of Health Care Workers*, October 2010.

⁹ Health care workers should be vaccinated annually for seasonal influenza; they should show they are immune to measles, mumps, and rubella or be vaccinated; and to varicella, tetanus and pertussis, and hepatitis B for health care workers who are exposed to blood. Some may need to be vaccinated for meningococcal disease.