Influenza Vaccinate-or-Mask Policy Learners FAQ

1. Why did Bridgepoint implement the policy?
   • Influenza is a serious contagious disease spread through close contact with an infected individual. Influenza in vulnerable groups, especially the elderly, the very young and the immunosuppressed, is associated with significant morbidity and mortality. It is a major contributor to hospitalizations in winter.
   • Vaccinating health-care workers reduces the risk of influenza transmission to patients. Infected individuals are highly contagious and can transmit influenza for 24 hours before they are symptomatic. By ensuring that staff are vaccinated against influenza or wearing a mask, we can best protect ourselves and our vulnerable patients.
   • In addition to causing deaths from acute influenza illness and secondary bacterial pneumonia, influenza has been associated with increased mortality from ischaemic heart disease, cerebrovascular disease, and diabetes. Generally, patients in health-care facilities and long-term care residents are especially at risk of developing serious complications from flu.
   • Influenza-related complications in older adults include profound disability. Pneumonia and influenza are among the top three leading causes of catastrophic disability. These patients do not return home after hospitalization but require long-term care.

2. Do other hospitals have similar policies?
   • In 2013, vaccinate-or-mask policies were in place in one of two New Brunswick Health Authorities, all British Columbia Health Authorities, and 13 acute care hospitals in Ontario.

   All TAHSN hospitals believe that vaccination is the best way to ensure patients and staff are as safe as possible. However, each hospital is implementing in a way that takes into account its individual circumstances.

3. Who is accountable for enforcing the policy?
   • Leaders will be asked to be diligent to ensure the policy is adhered to. Staff may be asked by senior leadership, patients or family members if they are compliant with either obtaining the flu shot or wearing a mask during the delivery of patient care.
   • To assist staff in remembering to either obtain the vaccine or wear a mask while in areas where patients are present and care is being delivered, we will have auditors randomly checking compliance around the hospital on all shifts. This will also help everyone understand where and when a mask should be worn.

4. Who is required to be vaccinated under this policy?
   • Any staff, health professionals with facility privileges, students, contract workers and volunteers who attend a patient care location are included in this policy.
   • No one is required to be vaccinated. People who choose not to be vaccinated are required to wear a mask in areas where patients are present.

5. Do I have to get vaccinated at Bridgepoint?
   • No, if you choose to get vaccinated, you may get your influenza vaccine wherever you wish.
• As per the Prevention and Management of Influenza Policy (IC 3.023), all Sinai Health System staff are required to provide the hospital with a completed Influenza Vaccination Status Form if they receive the influenza vaccination elsewhere, or are declining the vaccination (for medical or personal choice reasons). This will ensure that your records with OHWS are accurate should an influenza outbreak occur.

6. Will we have to wear stickers to demonstrate that they are vaccinated?
• As always, we will be providing vaccination stickers for badges for those health-care workers who wish to wear them. You are not required to wear the stickers.
• However, workers who have chosen to be vaccinated will be required to have evidence of vaccination with them at all times in patient care areas (e.g. a vaccination card). If you don’t have evidence, you may be asked to wear a mask until you can provide it.

7. What kind of mask is to be worn by workers who choose not to get vaccinated?
• Any regular medical or surgical mask is adequate.
• The purpose of the mask is to protect patients—that is, to prevent influenza virus being shed by the worker from getting into the air around the worker. Because particles containing virus are large when they leave your mouth/nose, a medical mask is adequate to capture them. Respirators (which protect workers from inhaling small particles) are not needed.

8. Do those who choose not to be vaccinated have to wear masks at all times in the hospital?
• All individuals covered by the Vaccinate-or-Mask Policy must be vaccinated annually against influenza or wear a mask during the Vaccination or Mask Required Period in areas where patients are present and patient care is delivered. Areas may include, but are not limited to:
  • Ambulatory and inpatient areas
  • When carrying out direct patient care activities, including patient transport
  • When patients are present, in locations where close patient contact and/or exposure may occur, such as: hallways in patient care areas; holding areas or waiting rooms; some parts of nursing stations; patient transport elevators; patient transport hallways with access to procedure areas.

• A good rule of thumb is to consider this: Are you currently in a therapeutic relationship with the patient? (e.g. practicing ambulation in the halls, delivering meals, administering medications, or doing a home assessment). If yes, then you should be wearing a mask if you are not vaccinated.

9. If I choose to wear a mask, how often should I change it?
• During the vaccinate or mask required period we recommend you follow the organizational practices (outlined in IC4.010-Routine Practices). These guidelines include:
  • Mask must be changed if it becomes soiled or wet
  • Do not touch mask or eye protection while wearing them
  • Remove mask and eye protection immediately after completion of the task, discard into an appropriate waste receptacle and perform hand hygiene
  • Do not allow mask to hang or dangle around the neck
  • Do not fold the mask or put it into a pocket for later use.
10. **If I choose not to be vaccinated, when will I have start wearing a mask?**
   - We will implement the policy at the beginning of flu season, typically around early December. Every effort will be made to limit the duration of the Vaccination or Mask Required Period to the shortest period required to protect patients from high levels of circulating influenza. The duration will be determined by the Task Force consisting of participating TAHSN IPAC medical experts and the Medical Officer of Health for the City of Toronto (or designate).

11. **If I get vaccinated after the vaccination required period begins, do I have to wear a mask for the next 2 weeks until my immune response has been built up?**
   - Anyone who receives their vaccination after the vaccinate-or-mask-required date will be required to wear a mask for the next two weeks.

12. **What do I say when a patient asks me why I am wearing a mask?**
   - As part of our new influenza prevention strategy, health care workers who cannot receive influenza vaccination are required to wear masks in patient care areas during the flu season.
   - You will see a lot more masks around the hospital this flu season.

13. **What happens if there is not a good match in the virus strains that are circulating and those covered in the vaccine?**
   - There are years when circulating influenza strains may be less well matched to the vaccine. Even in those years, getting vaccinated provides a benefit by providing some protection against different but related influenza viruses. In fact, when there is a degree of mismatch, healthy people getting vaccinated is even more important than usual, to protect vulnerable patients. Because protection may be reduced for people who are most vulnerable, the additional protection we can provide by preventing transmission from contacts is even more important.