

## SENATE CONCURRENT RESOLUTION NO. 2

A CONCURRENT RESOLUTION, Strongly supporting influenza vaccination for health care workers who have direct patient contact.

WHEREAS, along with the public health benefits of appropriate immunization comes an individual and community responsibility to ensure maximum disease prevention, especially among the most vulnerable members of society; and

WHEREAS, achieving and sustaining high vaccination coverage among health care workers will protect staff and their patients, and reduce disease burden and related health care costs; and

WHEREAS, a study conducted by the University of Virginia Health System showed that when health care workers' vaccination rates increased from four percent in 1987-1988 to sixty-seven percent in 1999-2000, the proportion of hospital-acquired (nosocomial) influenza cases declined significantly among employees (forty-two percent to nine percent) and patients (thirty-two percent to three percent); and

WHEREAS, influenza transmission and outbreaks in hospitals and nursing homes associated with low vaccination rates among health care workers are well-documented; health care workers can acquire influenza from patients or transmit influenza to patients and other staff; and

WHEREAS, influenza vaccination coverage among health care workers remains low despite the documented benefits of health care worker vaccination on patient outcomes, reducing influenza infection among staff and reducing health care worker absenteeism; and

WHEREAS, a November 2008 study by RAND found that the influenza vaccine uptake level for health care workers and caregivers was approximately forty-two percent, consistent with the Centers for Disease Control and Prevention estimates of health care workers vaccination; and

WHEREAS, cost-effectiveness studies of adults aged sixty-five and younger indicate that influenza vaccination can reduce both direct medical costs and indirect costs from work absenteeism: thirteen percent to forty-four percent fewer health care provider visits; eighteen percent to forty-five percent fewer lost workdays; eighteen percent to twenty-eight percent fewer days working with reduced effectiveness; and a twenty-five percent decrease in antibiotic use for influenza-like illness; and

WHEREAS, among healthy persons aged eighteen to sixty-four years, vaccination can save an estimated sixty dollars to four thousand dollars per illness, depending on the costs of vaccination, the influenza attack rate, and vaccine effectiveness against influenza-like illness; and

WHEREAS, in another economic analysis, vaccination resulted in an average annual cost savings of thirteen dollars and sixty-six cents per person vaccinated; and

WHEREAS, the American Association of Physician Assistants, American College of Physicians, American Medical Association, American Nurses Association, American Pharmacist Association, Association for Professionals in Infection Control, the Center for Disease Control's Advisory Committee on Immunization Practices, the Hospital Infection Control Practice Advisory Committee, and the Public Health Agency of Canada support routine vaccination of health care workers:

NOW, THEREFORE, BE IT RESOLVED, by the Senate of the Eighty-fifth Legislature of the State of South Dakota, the House of Representatives concurring therein, that the South Dakota Legislature strongly supports routine influenza vaccination for health care workers who have direct patient contact.

Adopted by the Senate,  
Concurred in by the House of Representatives,

February 22, 2010  
February 24, 2010

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Dennis Daugaard  
President of the Senate

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Trudy Evenstad  
Secretary of the Senate

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Timothy A. Rave  
Speaker of the House

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Karen Gerdes  
Chief Clerk of the House