Many of the SPD and DD residential providers have been determined to be “health care workers” and have priority access to the H1N1 vaccination. Those who have priority access are the following:

- Nursing Homes
- Assisted Living Centers
- Residential Care Centers
- Retirement Continuing Care Communities
- DD 24 hour residential
- Supported Living
- Adult foster homes
- Medical Child Foster Homes (individually identified)
- Proctor Care
- DD Comprehensive In-Home Services
- Model Waiver providers
- Support Services Providers (those providing personal care-like services)
- Personal Care providers
- Home Care Workers
- Home Care Agencies

Providers of the following types of services are not considered health care workers:

- Vocational, employment or alternatives to employment,
- Day programs or Senior Centers
• Non-medical child foster care
• Administrative staff of residential agencies
• Unpaid family members.

Attached are the notices and attachments that have been sent to the various providers. They are recommended to contact their local public health department to potentially set up their own “flu clinics” if they have nurses. If they don’t, they are directed to contact their own physician or watch public media for public flu clinics.

For AFHs who serve high medical need clients, SPD is attempting to provide limited access to contract nurses to go into those homes. Because of the very limited resources, this will be coordinated centrally and only available to homes serving very high need clients but local offices may request exceptions via email to SPD.H1N1@state.or.us.

The Health Support Unit will be responsible for prioritizing AFH homes; contacting the CRNs; referrals and payment. The Health Support Unit will provide information to the local office regarding what AFH are assigned to each participating CRN.

*If you have any questions about this information, contact:*

<table>
<thead>
<tr>
<th>Contact(s):</th>
<th>Tina Kitchin</th>
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<tbody>
<tr>
<td>Phone:</td>
<td>503-945-5812</td>
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<tr>
<td>E-mail:</td>
<td><a href="mailto:Tina.c.kitchin@state.or.us">Tina.c.kitchin@state.or.us</a></td>
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Q&A About Seasonal and Pandemic H1N1 Flu Vaccinations

The 2009-10 flu season
The best way to prevent influenza or “the flu” is vaccination. It’s important to get a seasonal flu shot or nasal-spray vaccine as soon as they become available in the fall. The flu season is different this year because of the pandemic H1N1 flu virus, which is a new virus causing illness in people around the world. Very few people are immune to the H1N1 virus. There is a separate vaccine for pandemic H1N1 flu that requires an additional flu shot.

Should I get a flu vaccination?
Yes. It is highly recommended that you get both the seasonal flu shot and the pandemic H1N1 flu shot because they will protect you, your family, and the people you serve from getting the flu. There are different priority groups for each vaccine, but there will eventually be enough for everyone. If you have questions about getting a flu shot, consult your health care provider.

Seasonal flu is a serious disease that kills about 450 Oregonians a year. The new virus, pandemic H1N1 flu, has the potential to make millions sick in our country and around the world. Persons in certain age groups, those with underlying medical conditions, and pregnant women are at greater risk for complications from the flu. Most people, however, recover from the flu on their own, but it frequently makes you sick for a week to 10 days, with coughing and fatigue lasting longer.

Do I have to get a shot to be protected against the flu virus?
No, there are two forms of vaccine: a shot and a nasal spray. People not eligible for the nasal spray are those over 50 years old, pregnant women, people with chronic health conditions and young children under the age of 2. Talk to either your doctor or the person providing the vaccine about which one is better for you.

Is the H1N1 flu shot safe?
The pandemic H1N1 flu shot has been thoroughly tested and approved by the Food and Drug Administration. Each year three different flu viruses are chosen to be included in the seasonal flu shot. This year those three were chosen before the H1N1 virus was identified. The H1N1 virus is an additional fourth flu virus for which the new vaccine was developed. H1N1 vaccine is made in the same way as the regular seasonal flu vaccine. In testing, H1N1 vaccine has not shown any unusual side effects.

Can I get the flu from a flu shot?
No, a flu shot contains killed virus. The shot doesn’t contain any live virus. You may have a sore arm and feel somewhat crummy after the shot but that is caused by your immune system being “turned on” so it can fight the flu virus if you come into contact with it. You could mistake your body’s reaction as a mild case of the flu.

The nasal spray (FluMist’) does contain live virus but it has been weakened so that it also can’t cause a flu infection.

(Continued over)
I have had the seasonal flu vaccine and still got the flu. Why is that?

First off, you may have been reacting to other infections. The flu vaccine only prevents influenza, an illness with cough, sore throat, usually fever, body aches, and, for some, diarrhea and vomiting. Influenza is not the 24-hour illness of vomiting and diarrhea that our mothers called the “stomach flu.” The flu vaccination also won’t prevent colds and other viruses.

It is also possible to catch a strain of flu that wasn’t chosen for the vaccine. Every year health officials make their best guess of what flu will circulate next year. Some years their guess wasn’t the best. It is also possible to have been exposed to the flu, get the shot, and not have had enough time for your body to develop immunity from the shot.

Who shouldn’t get the flu shot?

There are very small numbers of people who should not get the flu shot. Everyone should talk to their doctor or the nurse who gives the vaccination. Basically people who are allergic to eggs and those who have had a bad reaction to a previous flu shot should not get the standard flu shot. There will be limited flu vaccine available that was not grown in eggs. Those who can get the nasal spray are more limited. Again, talk to your health care provider.

Can getting the seasonal flu shot make the H1N1 illness worse or can getting the H1N1 vaccination make the seasonal flu worse?

No, getting one vaccination will not prevent the other type of flu and it won’t make it worse.

Can I get both shots at once?

Both can be given at once if both vaccines are available at the same time. It’s recommended that the nasal pandemic H1N1 vaccine and the nasal seasonal vaccine not be given at the same time.

Will it cost me anything to get the H1N1 vaccine?

The federal government has purchased all of the H1N1 vaccine that will be used in the country. Because it is funded by taxpayers, there is no charge for the vaccine itself. However, there may be an administration fee (usually $15 or less), depending upon where you get the vaccination. Call the Oregon Public Health Flu Hotline, 1-800-978-3040, for a location near you.

For more information:

<table>
<thead>
<tr>
<th>Oregon Public Health Division</th>
<th>Federal Pandemic H1N1 Flu Information</th>
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<tr>
<th>Oregon Public Health Flu Hotline</th>
<th>World Health Organization</th>
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<tr>
<td>1-800-978-3040</td>
<td><a href="http://www.who.in">www.who.in</a></td>
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<th>Oregon County Health Departments</th>
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<td><a href="http://www.oregon.gov/DHS/ph/lhd/lhd.shtml">www.oregon.gov/DHS/ph/lhd/lhd.shtml</a></td>
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H1N1 Action:
Home Care Agency Workers: High Priority for H1N1 Vaccination

A limited initial supply of H1N1 vaccine should start being available in Oregon shortly. Initially, the vaccine will be targeted for certain priority groups. Because of the increased risk of exposure and the need to have workers available to provide vital services, health care workers are in the initial priority group. Please note that unlike most years, clients (even those with chronic conditions) who are age 65 or older are not in the priority population for H1N1 flu vaccination.

Home Care Agency Workers are considered “health care workers” and have priority access to the H1N1 vaccination.

This alert gives instructions about getting the workers who are in the priority group vaccinated and should not include vaccination for clients who are age 65 and older or other groups not authorized by the local health department (such as office staff, families of workers, etc.).

If the agency has nurses available who could administer the vaccine, it is recommended that the agency set up their own “flu clinic.” This will involve

- contacting your local Public Health Department (attached is a list of local PH contacts),
- telling them the number of workers expected to consent to vaccination,
- registering the nurse as a vaccine distributor,
- setting up and understanding the refrigeration needs of the vaccine, and then
- picking up the vaccine. It will come with the syringes and other supplies needed to administer the vaccine.
- If your refrigeration system is not certified for vaccines, unused vaccine must be returned to the local health department at the end of the day.

If the vaccine is not used as agreed upon with the local public health department, the vaccine must be returned to them.
If the agency does not have nurses available, please direct your staff to either their personal physician (some have agreed to administer the vaccine to their patients) or to public flu clinics sponsored by the local health department. Once they know when they will have the H1N1 vaccine, they will use public media and potentially their website to advertise the sites of the flu clinics. Workers should be warned that there may be an administration fee (usually $15 or less) but no one will be turned away because of inability to pay. Medicare and/or Medicaid will pay the administration fee for those eligible for those programs who obtain their vaccination at the physician’s office.

If workers are sent to public flu clinics, it may be helpful to print this letter have them take it with them as proof that they are “health care workers.”

Attachments:
PH contact list
Q&A on Vaccination
H1N1 Action: Facility Workers: High Priority for H1N1 Vaccination

A limited initial supply of H1N1 vaccine should start being available in Oregon shortly. Initially, the vaccine will be targeted for certain priority groups. Because of the increased risk of exposure and the need to have workers available to provide vital services, health care workers are in the initial priority group. Please note that unlike most years, clients (even those with chronic conditions) who are age 65 or older are **not** in the priority population for H1N1 flu vaccination.

Workers in the following facilities are considered “health care workers” and have priority access to the H1N1 vaccination:

- Nursing Facilities
- Assisted Living Facilities
- Residential Care Facilities
- Continuing Care Retirement Communities.

This alert gives instructions about getting the workers who are in the priority group vaccinated and should not include vaccination for residents who are age 65 and older or other groups not authorized by the local health department (such as office staff, families of workers, etc.).

If the agency/facility has nurses available who could administer the vaccine, it is recommended that the agency/facility set up their own “flu clinic.” This will involve

- contacting your local Public Health Department (attached is a list of local PH contacts),
- telling them the number of workers expected to consent to vaccination,
- registering the nurse as a vaccine distributor,
- setting up and understanding the refrigeration needs of the vaccine, and then
- picking up the vaccine. It will come with the syringes and other supplies needed to administer the vaccine.
- If your refrigeration system is not certified for vaccines, unused vaccine must be returned to the local health department at the end of the day.
• Most ALF/RCFs do not have a “house doctor” available to sign the needed order. By a direct email, ALF/RCFs will receive a “standing order” signed by the SPD Medical Director, Tina Kitchin, MD. If you do not receive the standing order by 10/15, please contact her at Tina.c.kitchin@state.or.us

If the vaccine is not used as agreed upon with the local public health department, the vaccine must be returned to them.

If the agency does not have nurses available, please direct your staff to either their personal physician (some have agreed to administer the vaccine to their patients) or to public flu clinics sponsored by the local health department. Once they know when they will have the H1N1 vaccine, they will use public media and potentially their website to advertise the sites of the flu clinics. Workers should be warned that there may be an administration fee (usually $15 or less) but no one will be turned away because of inability to pay. Medicare and/or Medicaid will pay the administration fee for those eligible for those programs who obtain their vaccination at the physician’s office.

If workers are sent to public flu clinics, it may be helpful to print this letter have them take it with them as proof that they are “health care workers.”

Attachments:
PH contact list
Q&A on Vaccination
H1N1 Action:
Residential Workers: High Priority for H1N1 Vaccination

A limited initial supply of H1N1 vaccine should start being available in Oregon shortly. Initially, the vaccine will be targeted for certain priority groups. Because of the increased risk of exposure and the need to have workers available to provide vital services, health care workers are in the initial priority group. Please note that unlike most years, clients (even those with chronic conditions) who are age 65 or older are not in the priority population for H1N1 flu vaccination.

Paid Workers in the DD 24 Hour Residential for children and adults, Supported Living services and children’s proctor care services are considered “health care workers” and have priority access to the H1N1 vaccination if the following is true:

- Work directly with clients in the home setting.

Workers who do the following are not considered health care workers:

- Provide vocational, employment, or alternatives to employment services,
- Provide consultative or training services that don’t involve hands-on contact with people receiving services
- Perform administrative services and are not regularly involved in hands-on contact with people receiving services.

Family members who are not paid to provide service unfortunately at this point do not fall into the definition of Health Care Worker.

This alert gives instructions about getting the workers who are in the priority group vaccinated. However, most people with developmental disabilities (who are less than 65 years old) are also in the high priority group and can be immunized using these instructions.

If the agency has nurses available who could administer the vaccine, it is recommended that the agency set up their own “flu clinic.”

This will involve

- contacting your local Public Health Department (attached is a list of local PH contacts),
- telling them the number of workers and/or people receiving services expected to consent to vaccination,
• registering the nurse as a vaccine distributor,
• setting up and understanding the refrigeration needs of the vaccine, and then
• picking up the vaccine. It will come with the syringes and other supplies needed to administer the vaccine.
• If your refrigeration system is not certified for vaccines, unused vaccine must be returned to the local health department at the end of the day.
• Attached is the necessary doctor’s “standing order” signed by the SPD Medical Director, Tina Kitchin, MD.

If the vaccine is not used as agreed upon with the local public health department, the vaccine must be returned to them.

If the agency does not have nurses available, please direct your staff to either their personal physician (some have agreed to administer the vaccine to their patients) or to public flu clinics sponsored by the local health department. Once they know when they will have the H1N1 vaccine, health departments will use public media (TV, radio, newspaper) and potentially their website to advertise the sites of the flu clinics. Workers should be warned that there may be an administration fee (usually $15 or less) but no one will be turned away because of inability to pay. Medicare and/or Medicaid will pay the administration fee for those eligible for those programs who obtain their vaccination at the physician’s office.

If workers are sent to public flu clinics, it may be helpful to print this letter have them take it with them as proof that they are “health care workers.”
**H1N1 Action:**

**Medical Children Foster Provider: High Priority for H1N1 Vaccination**

Dear Provider:

A limited initial supply of H1N1 vaccine should start being available in Oregon shortly. Initially, the vaccine will be targeted for certain priority groups. Because of the increased risk of exposure and the need to have workers available to provide services that potentially impact health, health care workers are in the initial priority group. All children, 6 months and older, are also considered high priority.

You, as the foster provider in a medical child foster home and your workers are considered “health care workers” and have priority access to the H1N1 vaccination.

This alert gives instructions about getting vaccinated.

You and your workers can get the H1N1 vaccine from either your personal physician (some have agreed to administer the vaccine to their patients) or public flu clinics sponsored by the local health department. Once the health department knows when they will have the H1N1 vaccine, they will use public media (TV, radio, newspaper) and potentially their website to advertise the sites of the flu clinics. There may be an administration fee (usually $15 or less), but no one will be turned away because of inability to pay. Medicare and/or Medicaid will pay the administration fee for those eligible for those programs who obtain their vaccination at the physician’s office.

We recommend you print this letter and take it as proof that you and your workers are “health care workers.”

To protect yourself and the children you serve, it is highly recommended that you get both the H1N1 and seasonal flu shot as soon as possible.

Thanks for your kind consideration,
Oregon Department of Human Services,
Senior and People with Disabilities & Children, Adults and Families
**H1N1 Action:**

**Adult Foster Home Workers:**
High Priority for H1N1 Vaccination

Dear Provider:

A limited supply of H1N1 vaccine is now available in Oregon. Initially, the vaccine will be targeted for certain priority groups. Because of the increased risk of exposure and the need to have workers available to provide services that potentially impact health, health care workers are in the initial priority group. However, unlike the seasonal flu vaccine, clients (even those with chronic conditions) who are age 65 or older are not in the priority population for H1N1 flu vaccination. There will eventually be enough H1N1 vaccine for everyone.

**You, as the provider in the Adult Foster Home and your workers are considered “health care workers” and have priority access to the H1N1 vaccination.** Owners are included if they provide direct services in the homes.

This alert gives instructions about getting vaccinated. Although residents who are age 65 and older are not in the first priority group, many people with developmental disabilities and younger people with physical disabilities are in the high-risk group.

You and your workers can get the H1N1 vaccine from either your personal physician or public flu clinics sponsored by the local health department. Once the health department knows when they will have the H1N1 vaccine, they will advertise the sites of the flu clinics. There may be an administration fee (usually $15 or less), but no one will be turned away because of inability to pay. Medicare and/or Medicaid will pay the administration fee for those eligible for those programs who obtain their vaccination at the physician's office.

It may be helpful to print this letter and take it as proof that you and workers are “health care workers.”

If you have been identified as serving people with very high medical needs, a contract nurse may contact you about getting a vaccination.

To protect yourself and the people you serve, please get both the H1N1 and seasonal flu shot as soon as possible.

Thanks for your kind consideration,

Oregon Department of Human Services, Seniors and People with Disabilities

For more information, call the Oregon Public Health Flu Hotline at 1-800-978-3040.

**Attached:**

Vaccination Q&A
H1N1 Action:

Home Care Workers:
High Priority for H1N1 Vaccination

Dear Home Care Worker:

A limited supply of H1N1 vaccine is now available in Oregon. Initially, the vaccine will be targeted for certain priority groups. Because of the increased risk of exposure and the need to have workers available to provide services that potentially impact health, health care workers are in the initial priority group. However, unlike the seasonal flu vaccine, clients (even those with chronic conditions) who are age 65 or older are not in the priority population for H1N1 flu vaccination. There will eventually be enough H1N1 vaccine for everyone.

You, as an active Home Care Worker, are considered “health care workers” and have priority access to the H1N1 vaccination.

This alert gives instructions about getting vaccinated.

You can get the H1N1 vaccine from either your personal or public flu clinics sponsored by the local health department. Once the health department knows when they will have the H1N1 vaccine, they will advertise the sites of the flu clinics. There may be an administration fee (usually $15 or less), but no one will be turned away because of inability to pay.

It may be helpful to print this letter and take it as proof that you are a “health care worker.”

To protect yourself and the people you serve, please get both the H1N1 and seasonal flu shot as soon as possible.

Thanks for your kind consideration,

Oregon Department of Human Services, Seniors and People with Disabilities
For more information, call the Oregon Public Health Flu Hotline at 1-800-978-3040.
**H1N1 Action:**

**In-Home and Personal Care Workers:**
**High Priority for H1N1 Vaccination**

Dear In-Home or Personal Care Provider:

A limited supply of H1N1 vaccine is now available in Oregon. Initially, the vaccine will be targeted for certain priority groups. Because of the increased risk of exposure and the need to have workers available to provide services that potentially impact health, health care workers are in the initial priority group. However, unlike the seasonal flu vaccine, people (even those with chronic conditions) who are age 65 or older are not in the priority population for H1N1 flu vaccination. There will eventually be enough H1N1 vaccine for everyone.

You, as an active paid In-Home or Personal Care provider, are considered “health care workers” and have priority access to the H1N1 vaccination if you provide personal care or other medical services.

Family members who are not paid to provide service do not fall into the definition of Health Care Worker. Most people with developmental disabilities less than the age of 65 years are considered a high priority population for the getting the H1N1 vaccine. It appears that many over the age of 65 have some immunity to this virus and are not in the first priority group.

This alert gives instructions about getting vaccinated.

You can get the H1N1 vaccine from either your personal physician or public flu clinics sponsored by the local health department. Once the health department knows when they will have the H1N1 vaccine, they will advertise the sites of the flu clinics. There may be an administration fee (usually $15 or less), but no one will be turned away because of inability to pay.

It may be helpful to print this letter and take it as proof that you are a “health care worker.”

To protect yourself and the people you serve, please get both the H1N1 and season flu shot as soon as possible.

Thanks for your kind consideration,

Oregon Department of Human Services, Seniors and People with Disabilities
For more information, call the Oregon Public Health Flu Hotline at **1-800-978-3040**.