

# Influenza + COVID-19 = A Double Crisis for the Fall and Winter?

Every fall season hospitals begin to prepare for a significant surge of patients who suffer serious complications from seasonal influenza. Emergency departments can quickly go from manageable to extreme overflow during a difficult flu season. The CDC estimates between 140,000 – 810,000 hospitalizations and between 12,000 – 61,000 deaths annually from influenza since 2010. As serious as these numbers are, this year’s influenza surge is likely to pale in comparison to the recent surges from COVID-19, which has infected millions and killed hundreds of thousands in just a few months in the United States.

Chronic understaffing has left healthcare institutions ill-equipped to deal with surges of any kind. However, a combined flu and COVID-19 surge could quickly push hospitals well beyond capacity and into a crisis situation.

The New York State Department of Health has issued a regulation called the Surge and Flex Health Coordination System (effective August 6, 2020) to make sure healthcare institutions are prepared for additional surges of COVID-19 cases. However, the regulation’s requirements, which include the ability to significantly expand acute care bed capacity, expand staffing to cover the increase in beds, obtain at least a 90-day supply of PPE and other equipment, restrict visitation and coordinate statewide reporting requirements, can help address the demands of both flu and COVID-19 surges.

**NYSNA strongly encourages its members and local bargaining unit leaders to take the following steps to make sure healthcare employers are adequately preparing for a possible double surge this fall and winter:**

- Formally request a copy of your facility’s Surge and Flex Health Coordination Plan. Share this plan with your NYSNA facility representatives and NYSNA Health & Safety staff.
- Work with your NYSNA representatives and LBU leaders to fight for adequate nurse staffing to handle a surge of influenza and/or COVID-19 patients.
- The New York State Health Department has mandated that all healthcare workers either get vaccinated for influenza or wear surgical masks. This is a minimum requirement, and hospitals can go beyond the requirements of this regulation. Note that surgical masks do not provide full protection from influenza. Therefore, NYSNA recommends nurses voluntarily receive flu vaccines on an annual basis in order to either prevent or minimize the effects of the flu.
- If your facility has policies in place that “punish” employees for taking time off when ill, speak with your union representative. Working while ill is the

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quickest way to spread influenza, COVID-19 and other diseases in the workplace.

- Adequate ventilation is an important factor in limiting the spread of both influenza and COVID-19. Make sure your facility has adequate ventilation in areas where patients with suspected or confirmed influenza or COVID-19 are held. For more information on ventilation, review the NYSNA ventilation fact sheet at <http://bit.ly/NYSNAventilation>. Although the CDC continues to state that influenza is transmitted via contact and droplets only, NYSNA and other healthcare unions and healthcare professionals believe it also can be spread via airborne transmission. The CDC has finally acknowledged that COVID-19 can be spread via airborne particulates. Therefore an N95 or respirator with a higher level of protection is necessary to protect healthcare workers.
- Enough PPE must be in your facility's stockpile to cover shortages that may occur if a surge of influenza and/or COVID-19 hits. The New York State Department of Health requires that healthcare facilities maintain a 90-day supply of PPE for COVID-19. However, due to the possibility of a "twindemic" situation, NYSNA recommends stockpiles of greater than 90 days and a transition to reusable gowns and reusable elastomeric respirators to prevent supply chain shortages.
- Make sure your facility has an area separate from the ED for initial screening and triage of patients who potentially have influenza or COVID-19 (e.g., tent, etc.)
- Visitation should be significantly restricted to limit the spread of both influenza and COVID-19 from the community.
- Your facility should have a good contact tracing system in place to quickly notify staff who may have been exposed to influenza and/or COVID-19.
- The facility's Hospital Incident Command System (HICS) should be in place during a surge situation.
- A root cause analysis should be conducted to determine what changes need to be made in preparation for a second surge based on conditions during past surges.
- Always file a Protest of Assignment (POA) or COVID-POA if you believe conditions on your unit are unsafe for patients and/or staff.

More information on protecting nurses from infectious diseases and preparing for patient surges during epidemics and pandemics can be found at [www.nysna.org](http://www.nysna.org). You can also contact the NYSNA Health & Safety staff at [healthandsafety@nysna.org](mailto:healthandsafety@nysna.org).