University of Kentucky / UK HealthCare Policy and Procedure	Policy # A03-005
Title/Description: Employee Health Program	
Purpose: To outline the employee health program for UK HealthCare workers.	

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Policy

UK HealthCare's Employee Health Program is designed to protect both patients and employees from illnesses that could be transmitted or acquired while on the job. The Employee Health Program implements the requirements of the Kentucky Cabinet for Health and Family Services, OSHA, and other regulating authorities for the protection of health care workers. The Employee Health Program serves as a focal point for the collection of information and disposition of employee job-related health problems. It is not intended to be a substitute for services provided by the employee's private physician.

The Director of the Employee Health Service and each UK HealthCare Service Director are responsible for administration of the provisions of this policy. The Employee Health Steering Committee has oversight responsibility for the Employee Health Program.

This policy applies to all individuals who are employed by, or volunteer in, a UK HealthCare facility. In addition, any non-UK HealthCare employee or person who provides patient care-related services shall also meet these Employee Health requirements. It is the responsibility of the non-UK HealthCare employee's employer or agency to verify that UK HealthCare Employee Health requirements are met.

Definition

Health Care Worker

For the purposes of this policy, a Health Care Worker (HCW) is defined as all persons paid or unpaid, working within a UK HealthCare facility where there is the potential for exposure to patients and/or to infectious materials, including bodily substances, contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air.

A UK HealthCare HCW means each HCW who is either employed by UK HealthCare or is a volunteer within the UK HealthCare volunteer program. This definition includes, but is not limited to physicians, nurses, nursing assistants, therapists, technicians, emergency medical service personnel, dental personnel, pharmacists, laboratory personnel, autopsy personnel, students and trainees, contractual personnel, home health care personnel, and persons not directly involved in patient care (e.g., clerical, dietary, house-keeping, laundry, security, maintenance, billing, chaplains, and volunteers) but potentially exposed to infectious agents that can be transmitted to and from HCW and patients (adapted from 2008 HHS definition of Health Care Personnel).

Procedure

Initial Employment Screening and Immunization

The Employee Health Program shall provide employee health screening on initial appointment and shall provide periodic rescreening. Except with the prior approval of the Director for Employee Health, each UK Healthcare HCW is screened before his or her first day of employment. The employee and his or her supervisor shall be responsible for compliance with pre-employment screening requirements.

1. Health Questionnaire: Each new UK HealthCare HCW shall complete an employee health history questionnaire to assist Employee Health personnel in providing appropriate care. Compliance with the pre-employment screening is mandatory.
2. Tuberculosis Test: As a condition of employment, each new UK HealthCare employee or volunteer is given either a two-step tuberculin skin test (TST) in the manner recommended by the Centers for Disease Control and Prevention, or the employee shall be tested with an interferon-gamma release assay (IGRA) for tuberculosis. In some circumstances, the new employee may be required to have a chest radiograph. If the TST is done, the employee shall return to Employee Health to have the skin test read within 48 to 72 hours.
3. Measles, Mumps, and Rubella (MMR)
   (a) New UK HealthCare employees and volunteers who are deemed HCWs and were born in or after 1957, shall provide evidence of two MMRs, or documentation of physician diagnosed measles, mumps, and rubella, or laboratory evidence of measles, mumps, and rubella immunity. If the employee cannot provide this evidence, he/she shall receive one MMR at the time of employment and shall be re-vaccinated at no less than one month later. Employees born before 1957 are not required to show immunity to measles, mumps, or rubella.

(b) The MMR is not administered to pregnant women or to women who plan to be pregnant within one month. It is also not to be administered to persons who have a medical contraindication to the vaccine or a religious objection as defined by the Americans with Disabilities Act. It is not given for three months after immune globulin has been administered. Routine titers are not performed. Lack of immunity to measles, mumps, and/or rubella shall be documented in the employee's record and temporary or permanent re-assignment may be necessary at the discretion of UK HealthCare.

(c) Upon request, the MMR is administered as an employee benefit to non-HCWs who are women of child bearing age, who are uncertain of their immunity to rubella or rubeola, and who wish to receive it. Proof of immunity to rubella and rubeola or MMR vaccination is required for HCWs only. Each employee who receives the MMR shall sign an informed consent which becomes part of his or her permanent record.

4. Hepatitis B (HBV) Vaccine

(a) The vaccine is offered at no cost to all UK HealthCare employees and volunteers. If a UK HealthCare employee chooses not to receive the HBV vaccine, he or she shall sign a declination form which shall be kept by the Employee Health Service. An additional copy of the declination shall be kept in the employee's personnel file.

(b) All employees completing the hepatitis B vaccination series shall be required to have a titer drawn within two months after the last injection is received. Employees with positive titers are considered to be protected from hepatitis B. Employees with negative titers shall repeat the vaccination series. Employees with indeterminate titer results shall be managed in consultation with the Director of Employee Health or his or her delegate. Another titer is performed within two months after the second vaccination series to determine if the employee is protected from hepatitis B. Failure to demonstrate a positive titer at this point shall result in a required medical consultation with a clinician of Employee Health.

5. Varicella - Refer UK HealthCare Policy A03-020, Control of Varicella-Zoster (Chicken Pox)

(a) UK HealthCare requires that all HCWs demonstrate immunity to varicella either by history of the disease, demonstrated antibody titer, or varicella vaccine (completed series of two injections, one month apart).

(b) Employee Health shall determine and record the employee's history of immunity to varicella-zoster virus at the initial employee health screening. If the employee cannot recall disease or cannot provide proof of immunization, Employee Health may either draw a varicella antibody titer or provide immunization to the employee. The employee's respective supervisor shall make any necessary decisions about job reassignments necessary due to lack of varicella immunity for all UK HealthCare HCWs.

(c) The varicella vaccine shall not be administered to employees with a medical contraindication to the vaccine or a religious objection as defined by the Americans with Disabilities Act. Lack of immunity to varicella shall be documented in the

employee's record and temporary or permanent re-assignment may be necessary at the discretion of UK HealthCare.

6. Meningococcal Vaccine

   All clinical microbiology laboratory staff shall be offered the quadrivalent meningococcal vaccine. The supervisor shall provide a letter of need to the employee, which the employee shall submit to Employee Health at the time of vaccination. Currently, there are no recommendations for revaccination.

7. Pertussis, Diphtheria, and Tetanus Vaccine (Tdap)

   One dose of Tdap vaccine shall be given to all HCWs who have not received a dose previously to help prevent transmission of pertussis between patients and employees.

   The Tdap vaccine is not administered to employees with a medical contraindication to the vaccine or a religious objection as defined by the Americans with Disabilities Act. Lack of potential immunity to pertussis shall be documented in the employee's record and temporary or permanent re-assignment may be necessary at the discretion of UK HealthCare.

8. Routine testing for Human Immunodeficiency Virus (HIV) or hepatitis C (HCV) is not offered by Employee Health to employee, and UK HealthCare does not require screening for these pathogens of employees, students, faculty members, or volunteers. Testing shall be performed upon occupational exposure. See A03-085, Monitoring Employee Exposure to Transmissible Agents.

Annual Screening and Follow-Up

1. Tuberculosis: All UK HealthCare HCWs shall have a test for tuberculosis (TST or IGRA) performed annually during the birth month of the employee. This is a condition of continuing employment. Testing and managing the results shall be coordinated by Employee Health as outline in the A03-075, TB Control Plan.

2. MMR: Currently employed HCWs born during or after 1957 shall receive an MMR immunization or shall show proof of immunity at their next annual employee health screening. Currently employed HCWs who have proof of one MMR immunization shall receive one dose of MMR vaccine at their next annual employee health screening. Currently employed persons who have no proof of vaccine shall receive one dose of vaccine at annual screening plus one dose one month later. The MMR vaccine is a onetime requirement for all HCWs born during or after 1957. The MMR vaccine shall not be given to pregnant women or to women who are planning to be pregnant within one month. It shall not to be given to persons who have a medical contraindication to the vaccine or a religious objection as defined by the Americans with Disabilities Act. It is not given for three months after immune globulin has been administered. Routine titers are not performed. Lack of immunity to measles, mumps, and/or rubella shall be documented in the employee's record and temporary or permanent re-assignment may be necessary at the discretion of UK HealthCare. Currently employed personnel born before 1957 shall not be required to show immunity to measles, mumps, or rubella.

3. Varicella: Currently employed HCWs who cannot prove immunity (either by history of the disease, antibody titer, or varicella vaccine) shall receive a varicella vaccine

(completed series of two injections, one month apart) at their next annual employee health screening. The varicella vaccine shall not be administered to employees with a medical contraindication to the vaccine or a religious objection as defined by the Americans with Disabilities Act. Lack of immunity to varicella shall be documented in the employee's record and temporary or permanent re-assignment may be necessary at the discretion of UK HealthCare.

4. Tdap: To help prevent transmission of pertussis between patients and employees, one dose of Tdap vaccine shall be given to all HCWs who have not received a dose previously. This shall be given at their next annual health screening. The Tdap vaccine shall not be administered to employees with a medical contraindication to the vaccine or a religious objection as defined by the Americans with Disabilities Act. Lack of potential immunity to pertussis shall be documented in the employee's record and temporary or permanent re-assignment may be necessary at the discretion of UK HealthCare.

5. Influenza: To help prevent transmission of influenza between patients and employees, one dose of influenza vaccine shall be required annually for all UK HealthCare employees. Employees may receive the vaccination free of charge from Employee Health during the annual vaccination campaign. Alternatively, employees may choose to receive a vaccination (at their expense) from another acceptable source and provide documentation to Employee Health. The influenza vaccine shall not be administered to employees with a medical contraindication to the vaccine or a religious objection as defined by the Americans with Disabilities Act. Lack of potential immunity to influenza shall be documented in the employee's record and additional measures to reduce potential transmission of influenza may be required. These measures shall include, but are not limited to, additional employee education, use of a mask at all times within a UK HealthCare facility during periods of increased local flu prevalence as determined by the UK HealthCare Infection Prevention and Control program, and temporary or permanent re-assignment of the employee at the discretion of UK HealthCare.

Responsibility for Fulfilling Employee Health Requirements

1. Employee Health Service shall notify employees of the due date of annual employee screening. Each employee shall be contacted directly. Any UK HealthCare HCW overdue for testing may be suspended from work without pay until the employee has completed the TB test or other Employee Health Requirements. If the employee fails to have the TB test or other required tests completed within in ten days after suspension, the employee may be terminated. The tuberculin skin test is not considered complete until it has been read by Employee Health personnel.

2. All employees shall be given a verification slip by Employee Health stating that the required activity has been completed. The employee shall give this verification slip to his/her supervisor to be filed in the employee's personnel file. The supervisor shall maintain copies of the last three years of the verification slips in the employee's file.

3. Employees who report a medical contraindication or religious objection to a vaccine shall complete the "Employee Health Immunization Declination" and submit in writing supporting documentation detailing the contraindication or objection to Employee Health for evaluation.

Medical Support

1. Medical support of Employee Health shall be provided by the University Health Service.
2. Injuries sustained while on the job shall be treated as any UK Worker's Care injury.

Illness

1. Employees who have patient care responsibility and have signs or symptoms of a transmissible disease shall report to their supervisor. Employees may be reassigned, restricted or excluded from work. The supervisor may consult with Infection Prevention and Control or Employee Health for a final determination regarding work restrictions.
2. An employee who has health considerations (i.e., pregnancy, immune deficiency) that may result in increased vulnerability to infection shall notify his/her supervisor who may consult with Employee Health. The employee shall be counseled regarding work-related risks.

Monitoring Employee Exposure to Transmissible Agents

In order to verify that employees receive prompt and effective treatment for occupational exposure to bloodborne pathogens (HIV, HCV, HBV), UK HealthCare has established a screening and monitoring program and post-exposure protocols that are consistent with OSHA standards. See A03-055, Bloodborne Pathogen Exposure and Control Plan.

When it is known or suspected that an employee has been exposed to other communicable diseases, the employee shall be notified by Infection Prevention and Control. Infection Prevention and Control shall notify the nursing manager of the unit of the index case, as well as departments identified from chart review whose personnel has documented or suspected significant contact with the index case. Infection Prevention and Control shall also notify the Employee Health Service and UK Workers' Care. Supervisors are responsible for contacting Infection Prevention and Control, Employee Health Service, and UK Workers' Care with the names of all exposed personnel.

Persons and Sites Affected	
☒ Enterprise ☐ Chandler ☐ Good Samaritan ☐ Kentucky Children's ☐ Ambulatory ☐ Department	
Policies Replaced	
☒ Chandler HP03-01 ☐ Good Samaritan ☐ Kentucky Children's CH ☐ Ambulatory KC ☐ Other	
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