Old ID Number: EH #13

PURPOSE
This policy is established to eliminate the occurrence of vaccine preventable diseases in all health care workers.

Policy
As a condition of employment all persons selected for employment will participate in the Susquehanna Health (SH) immunization program. Medical staff, allied health professional staff and affiliated support staff are required to meet the mandatory immunization requirement of Susquehanna Health. Immunity requirement applies to all service partners, students, volunteers, physicians, and agency or contract staff/nurses using the SH facilities. Agency or contracted staff/nurses and students will provide documentation of required vaccines or laboratory confirmed antibody titer prior to starting their experience/employment at SH.

INFECTION CONTROL PRACTICES

A. MEASLES, MUMPS, AND RUBELLA VACCINE PROGRAM

1. Immunity to Rubella, Mumps and Rubeola will be determined by one of the following methods.
   - Laboratory testing (persons who have indeterminate level upon testing will be considered non-immune.
   - Documentation of two Measles, Mumps and Rubella (MMR) vaccine. The first dose given on or after the first birthday and the second dose given at least 28 days later
   - Individuals who have a negative titer will be required to have two doses of MMR vaccine. MMR trivalent vaccine is the vaccine of choice.

2. Exemptions to MMR Vaccine
   Individuals exempt from vaccination with MMR vaccine and those who will receive additional counseling from Employee Health
a. Females pregnant or contemplating pregnancy within the following month exempt (only until after delivery).

b. Those who have ever had a life threatening allergic reaction to gelatin, neomycin or a previous dose of MMR vaccine.

c. People who are moderately or severely ill at the time the vaccine is scheduled should wait until they recover before receiving MMR vaccine.

d. Persons with certain medical conditions, including but not limited to immunosuppression.

3. Service Partner's who have patient contact and who were on staff prior to implementation of this policy will be asked to provide the above documentation of vaccine or have Rubella, Rubeola and Mumps titers done to establish immunity.

- MMR vaccine will be given to those who do not have immunity to Rubella, Rubeola, or Mumps.
- Those service partners who refuse vaccine will, if exposed to the virus will be restricted from working and must use PTO or sick time during the following period of time:
  a. Rubella (Measles), 5th day through 21st day post exposure
  b. Mumps, 12th day through 21st day post exposure
  c. Rubella (German Measles) 5th day through 21st day post exposure.

B. VARICELLA

Service Partners, physicians, students, volunteers, allied health professional and contracted staff/nurses will be considered immune to varicella:

- Documentation of two doses of varicella vaccine given according to recommendation time frame (after first birthday and at least 28 days later)
- Laboratory confirmed evidence of immunity (persons who have an indeterminate test result will be considered non-immune).
- Individuals who do not show immunity will receive two doses of vaccine. Note: Laboratory test not to be done post vaccine administration.

Service partner who have patient contact and were on staff prior to implementation of this policy will verify if they had chickenpox. A varicella titer will be done on those who do not have history of the disease.

- Those who refuse the vaccine and if exposed to chickenpox or herpes zoster will be restricted from working and must use PTO or sick time during the following period of time: 10th day through the 21st post exposure.

C. HEPATITIS B

Hepatitis B vaccine is offered free of charge to all service partners, volunteers, medial staff, allied health professional staff and affiliated support staff whose job involves participation in tasks with exposure to blood and body fluid. Employees who decline the vaccine will be required to sign the System's Hepatitis B Vaccine Declination.

Students, student volunteers, and agency and contract staff/ nurses who have risk of blood or other potentially infectious material will be required to provide a copy of their hepatitis B vaccine record or a copy of the Hepatitis B Vaccine Declination prior to starting their clinical experience at SHS.
Hepatitis B series will be provided to temporary employees free of charge when employed. After termination, the person may return to complete the series at the cost of the vaccine.

Employees who terminate while they are in the process of receiving the Hepatitis B vaccine may elect to complete the series at their own expense. They may contact the Employee Health Department to complete the vaccine schedule.

Hepatitis B antibody testing is done one-two months after completion of the vaccine series. If the Anti-HBs is negative the individual will be given an additional 3 injection series and will have their Anti-HBs repeated. Routine boosters of Hepatitis B vaccine are not indicated, if the individual has had previous positive Anti-HBs.

1. **DIALYSIS**: Hepatitis B antigen (HBsAG) and hepatitis B antibody (Anti-HBs) are done on dialysis personnel on hire. Staff members who are HBsAG negative and Anti-HBs negative are retested if an exposure occurs. Staff who are HBsAG negative and Anti-HBs positive are considered to be immune to Hepatitis B virus and do not require further serology testing. Hepatitis B vaccine is a condition of employment in the dialysis unit for staff providing patient care.

**INFLUENZA**

Consistent with the Susquehanna Health value of placing the needs of our patients first, and following the Center for Disease Control's recommendation that all healthcare workers receive the influenza vaccination when appropriate:

Effective April 1, 2013, Susquehanna Health mandated that upon hire, a condition of employment for new service partners would be the expectation that, unless a medical contraindication has been documented by a medical professional (Physician, Nurse Practitioner, Physician Assistant), the vaccination for influenza will be accepted by the service partner when appropriate and as available on an annual basis.

Medical contraindications are as follows:

A. ◦ verified allergy to the flu vaccine or one of it's components
   ◦ Guillain Barre Syndrome within 6 weeks of receiving a flu vaccine.

Service partners who were employed prior to April 1, 2013 will still be required to either obtain the vaccination or wear a face mask while working during the declared influenza season (December 1 of each year and will end when Infection, Prevention and Control determines the season is over based on the number of influenza cases being seen in our area).

Non-employee service partners such as volunteers, students and business associates and contractors spending time in SH healthcare facilities will also be required to receive the influenza vaccination, no masking option, or not be allowed in the facility during the declared influenza season annually.

Non-Susquehanna Health employed providers (i.e. physicians) who apply for privileges after April 1, 2013, will only be granted those privileges upon declaration of their willingness to accept the annual influenza vaccination when appropriate. Those non-Susquehanna Health employed providers with privileges prior to April 1, will be required to either accept immunization for influenza or wear a face mask when in an SH healthcare facility during the declared influenza season on an annual basis.

Influenza immunizations are offered to all employees free of charge annually.
B. TETANUS/DIPHTHERIA

Adult tetanus diphtheria toxoid is offered to all employees every ten years. Tetanus/Diptheria/Pertussis vaccine is given according to current ACIP recommendations.

C. MONITORING

Monitoring of these requirements will be done by Employee Health for service partner, volunteers, volunteers, students interns and physicians. Assignment of responsibility for monitoring these requirements is included in the contract of affiliating schools and contract workers.

1. Flu vaccination rate is calculated using the total number of employees and divide it by the number of employees that have received the vaccine to get the percentage. This is done for each campus and then as a system.

2. Annual report submitted to NHSN using the supplied form.

REFERENCE:

A. Advisory Committee on Immunization Practices (ACIP), "Summary of Recommendation for Adult Immunization.


C. CDC, Immunization of Health Care Personnel, MMWR, November 25, 2011

Attachments:  No Attachments

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