
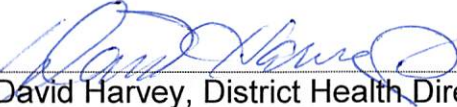




North Central Health District
County Board of Health
POLICY # NCHD – EC- 507

Occupational Health Requirements For Public Health Workers

Approval:		<i>10/21/15</i>
	Dr. Anita Barkin, Director of Nursing & Clinical Services	Date
		<i>Oct. 21, 2015</i>
	Dr. David Harvey, District Health Director/Appointing Authority	Date

1.0 PURPOSE

The purpose of this policy is to achieve and sustain high vaccination coverage among public health workers in order to reduce occupational risk of exposure to vaccine-preventable diseases and protect patients and the community by preventing or limiting the transmission of infection.

1.1 Authority – The County Board of Health (CBOH) Occupational Health Requirements for Public Health Workers is published under the authority of the District Health Director (DHD).

2.0 SCOPE

This policy applies to all CBOH employees in District 5-2 North Central Health District (NCHD).

3.0 POLICY

Certain Public Health personnel work in client care and environmental health settings in which they can be exposed to infectious individuals or materials and transmit infectious disease to vulnerable populations. Because all CBOH employees play a critical role in response to a public health emergency and the potential risk of exposure to infectious individuals or materials is inherent in assuming such a role, the vaccination status of all employees is important to know in advance of such an event. Vaccination programs are an essential component of infection prevention and control. Therefore, the NCHD supports an immunization and tuberculosis control program for public health workers based on the recommendations of the Centers for Disease Control and Prevention (CDC), Advisory Committee for Immunization Practices, and the U.S. Occupational Safety and Health Administration.

4.0 DEFINITIONS

4.1 Client Care Settings – places where health services are delivered.

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4.2 Environmental Health Settings – places where work related to minimizing public health risks due to physical, chemical, and biological factors takes place.

4.3 Occupational Risk - any condition of a job that can result in illness or injury.

5.0 RESPONSIBILITIES

5.1 The NCHD Executive Leadership Team is responsible for issuing and updating procedures to implement this policy.

5.2 HR in collaboration with program leadership will be responsible for identifying specific positions to which these requirements apply and incorporating them into job descriptions.

5.3 The Immunization Coordinator is responsible for assessment of employees' immunization status and management of compliance with requirements.

5.4 The Tuberculosis (TB) Coordinator is responsible for ensuring initial and annual TB testing requirements are met.

6.0 PROCEDURES

6.1 Immunization Records

All District and County employees are expected to provide their immunization record to their supervisor within 30 days of the date of hire. The supervisor is responsible for submitting the record to the Immunization Program Coordinator for assessment and management of compliance with requirements.

6.2 Tuberculosis Screening

6.2.1 All public health workers in client care settings shall have proof of having had a Tuberculin Skin Test (TST) with five (5) tuberculin units of purified protein derivative within six months prior to the date of hire and in each year of employment thereafter. TST done at the District or County Health Departments will be free of charge to the employee.

6.2.2 An employee may be exempt from this requirement if they have received INH therapy in the past, are asymptomatic and have documentation from their health care provider. On hire, the staff member shall complete the top section of the Tuberculin Reactor form and schedule an exam with their health care provider. The employee shall return the form to their supervisor upon completion by their provider. The supervisor shall submit the form to the TB Coordinator for review. The symptom checklist shall be completed each year. An examination by a

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health care provider shall be required if the employee answers “yes” to any of the symptoms.

6.2.3 If an employee has a positive reaction (≥ 10 mm induration) to initial or annual testing, then a follow-up chest x-ray must be obtained and the report submitted to the TB Coordinator.

6.2.4 Employees having an initial negative reaction shall be given a TST yearly.

6.2.5 The TB Coordinator shall determine whether two-step testing is appropriate on a case-by-case basis following Georgia Tuberculosis Reference Guide.

6.3 Post Exposure Testing/Prophylaxis

6.3.1 Any employee reporting exposure to a known TB patient should have a TST performed and be considered for immediate chemoprophylaxis. If the initial skin test is negative, the test should be repeated in 3 months. If the result of the second skin test is negative, the chemoprophylaxis can be stopped.

6.3.2 Any Environmental Health employee with a confirmed exposure to a known or suspected rabid animal during the course of his/her work will file an incident report and receive Rabies PEP.

6.3.3 If an employee is exposed to a blood borne pathogens, refer to the Blood Borne Pathogen policy.

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6.4 Immunization Requirements

Applies to	Vaccine
Category A: Employees who work in client care settings. (Includes TB test)	<ul style="list-style-type: none"> • MMR (2 doses or evidence of immunity to measles, mumps, and rubella) • Varicella (2 doses or reliable history of disease, or evidence of immunity to chickenpox) • Tdap (one dose) • Influenza (1 dose annually)
Category B: Employees performing tasks involving exposure to blood or blood-contaminated body fluids.	<ul style="list-style-type: none"> • Hepatitis B (Documentation of 3 doses. Unimmunized new employees must complete a 3-dose series and post-vaccination test showing immunity. If test result is negative, up to 3 additional doses of vaccine may be required).
Category C: Employees performing tasks involving exposure to soil or animals or who routinely work outdoors.	<ul style="list-style-type: none"> • Td (complete series with one booster dose every 10 years)
Category D: Employees with exposure to raw waste or contaminated water.	<ul style="list-style-type: none"> • Hepatitis A (2 doses) • Hepatitis B (see above)

6.5 Immunization Recommendations

Applies to	Vaccine
Category E: All employees excluded from the above categories.	<ul style="list-style-type: none"> • MMR (2 doses or evidence of immunity to measles, mumps, and rubella) • Varicella (2 doses, reliable history of disease, or evidence of immunity to chickenpox) • Td (complete series with one booster dose every 10 years). • Tdap (1 dose) • Influenza (1 dose annually)

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6.6 Vaccination And Laboratory Tests

6.6.1 All required vaccines and laboratory tests are available through each of the county health departments.

6.6.2 There will be no cost to current NCHD employees for any required vaccine, titer, TST, or chest x-ray (if needed in connection with Tuberculin screening/follow-up). These services will be offered to contract workers, interns/students, and volunteers for a fee.

6.7 Exemptions

6.7.1 Employees may request a waiver to decline or be excluded from one or more of the health requirements covered by this policy based on one of the following:

6.7.1.1 Medical Exemption: Persons with severe (life threatening) allergies to the vaccine or vaccine components or any other valid contraindication to a vaccine. Documentation from employee's private provider is required.

6.7.1.2 Religious Exemption: Religious beliefs that prevent an employee from being vaccinated.

6.7.2 A waiver may be granted after submission of the "Employee Immunization Exemption Application Form" (see Attachment A) to the Immunization Program Coordinator with subsequent approval from District Health Director.

6.7.3 Employee with an approved exemption from influenza vaccine and/or Tdap will receive a statement noting their exemption and a copy of the protocol describing the expectations for using alternative protection (see Attachment B). A copy of the signed protocol is to be returned to the employee's supervisor.

7.0 REVISION HISTORY

REVISION #	REVISION DATE	REVISION COMMENTS
0		Initial Issue

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8.0 RELATED FORMS

Attachment A - Employee Immunization Exemption Application

Attachment B - Protocol for use of alternative infection control measures in the absence of influenza and/or Tdap vaccination