



JEFFERSON COUNTY PUBLIC HEALTH Administrative Services Division	SHORT TITLE: CDC IMM Policy – Employees
SUBJECT: Communicable Disease Control Immunization Policy for Employees	ADOPTION / REVISION DATES: February, 2015 January, 2014 June 1, 2011 November 1, 2008 July 1, 2003 EFFECTIVE DATE: July 1, 2003
APPROVED BY: <u>Mark Johnson MD</u> <u>3-4-15</u> <div style="display: flex; justify-content: space-around;"> Executive Director Date </div>	

PURPOSE

Jefferson County Public Health (JCPH) has established immunization policies to prevent the spread of vaccine preventable diseases to workforce and community members.

SCOPE

All temporary and regular hire employees of JCPH must meet these requirements.

POLICY

Communicable Disease Control (CDC) Program requirements are listed on the following pages. All new employees of the Department must meet these requirements. The documentation and records of immunity, statements of liability release and immunization records will be kept in HealthNet as well as the Medical Record Room at Jefferson County Public Health (JCPH).

As a policy, the Department will follow the most current communicable disease and immunization guidelines of the Centers for Disease Control and Prevention and its advisory committees.

All required or recommended vaccines will be provided by JCPH with an appointment with a Communicable Disease Control Program Public Health Nurse (PHN). During the PHN assessment, should serologic testing be advised over an immunization, the cost will be covered by JCPH. Full fees will be charged for all other non-required or recommended vaccines and services.

VACCINE REQUIREMENTS AND RECOMMENDATIONS

A. Requirements for Employees

1. Measles, Mumps, Rubella

New employees must provide documentation of immunity to measles, mumps and rubella within one week of their start of employment. Documentation must be by a written record of:

- a. Two measles, mumps and rubella vaccines given on or after the first birthday and at least 28 days apart; or
- b. Serologic confirmation of immunity to measles, mumps and rubella.

If no documentation of vaccination or immunity is provided by the employee, serologic testing or vaccination of the 2 dose MMR series will be provided at no cost to the new employee.

2. Varicella

New employees must provide documentation of immunity to varicella within one week of their start of employment. Documentation must be by a written record of:

- a. Two doses of varicella containing vaccines given on or after the person's first birthday and separated by 3 months if given through age 12 years or at least 4 weeks apart if given at age 13 years or greater; or
- b. Laboratory test results of varicella antibody titer confirming immunity; or
- c. Documented confirmation of illness by a health care provider.

If no documentation of vaccination, disease or immunity is provided by the employee, serologic testing or vaccination of the 2 dose varicella vaccination series will be provided at no cost.

3. Tuberculin Skin Test

All new employees are required to complete an Initial Tuberculosis Symptom Screening Questionnaire and have a 2-step tuberculin skin test (TST) begun within one week of the start of their employment unless contraindicated. Documentation of a negative TST within the past 12 months can be acceptable as the first step in the 2-step TST process. Each TST must be read by an authorized PHN 48-72 hours after administration.

For the 2-step TST, if the initial TST result is interpreted as negative a second test is repeated 1 week after the initial test was placed. If either TST is interpreted as positive the reaction is documented and followed up as positive test result. Refer to the following sections for more information: Follow-up Procedure for JCPH Employees with a Positive TST, Positive TB Skin Test Procedure and Obtaining Services from Denver Metro TB Clinic Procedure.

Employees with documentation of a negative TB screening blood test within the past year or a history of a positive TST will **not** be required to repeat the test. These employees are required to complete an Initial Tuberculosis Symptom Screening Questionnaire, provide a copy of the negative blood test result, positive test measurement, chest x-ray (CXR) results and/or documentation of treatment. A PHN will counsel the new employee regarding the signs and symptoms of TB disease

and request that the employee report any suspicious symptoms. Annually, all employees who have had a positive TST in the past will need to complete an Annual Tuberculosis Symptom Screening Questionnaire. This questionnaire will assess signs and symptoms, risk of progression and the need for an additional evaluation.

An employee who has significant exposure in the work place to a diagnosed case of active TB will be required to have a TST immediately following exposure and a second TST 8-10 weeks after exposure or first negative TST.

If there is ever a concern by the employee or PHN about TST test results, sign and symptoms or risk factors, the employee will be referred to the Denver Metro TB Clinic for further evaluation.

It is recommended that all employees receive a TST prior to leaving employment with the Department. The cost for this testing will be assumed by JCPH.

4. Environmental Health Employees and Incident Response Team (IRT) Vaccines Include

Any individual employed by Environmental Health or JCPH employee participating on the IRT is required to provide documentation of the Hepatitis B and Hepatitis A vaccination series, Tdap (Tetanus-Diphtheria-Pertussis) /Td (Tetanus-Diphtheria) and Typhoid vaccinations if indicated.

If no documentation of vaccination or immunity is provided by the employee the vaccine or vaccine series will be provided at no cost to the employee.

B. Other Recommended Vaccines

1. Hepatitis B Vaccine

All persons with the potential for exposure to or transportation of blood or body fluids as a part of their assigned duties should receive the Hepatitis B vaccine series. A PHN will discuss risk factors and recommendations for vaccination with the new employee. The department will provide the 3 dose vaccine series according to CDC program guidelines. A Hepatitis B surface antibody (anti-HBs) blood test for immunity will be offered 1-2 months after the third dose of the vaccination series at no cost to the employee. Serology testing is offered to employees when the Hepatitis B series is completed at JCPH.

If the anti-Bs is positive ($\geq 10\text{mIU/mL}$) the employee is considered immune. No further serology testing of vaccination is recommended. If the anti-Bs is negative ($\leq 10\text{mIU/mL}$) the employee is unprotected from the Hepatitis B virus infection. JCPH will offer revaccination with an additional 3-dose series and retest anti-Bs 1-2 months after dose #6. If anti-HBs is positive after the retest the employee is considered immune. No further serology testing or vaccination is recommended. If the retest anti-Bs is negative after the 6 dose vaccination series the employee is considered a non-responder. Employees who are non-responders are considered susceptible to Hepatitis B.

If the employee chooses not to be immunized, he/she must sign the Hepatitis B Declination form.

2. Tetanus/Diphtheria/Pertussis

All adults who have not previously received Tdap (Tetanus-Diphtheria-Pertussis) or for whom vaccination status is unknown should receive a Tdap. Tdap can be administered regardless of interval since the most recent tetanus or diphtheria-toxoid containing vaccine. This immunization is not required, but is highly recommended. The Department will provide vaccination within the CDC program guidelines. The department will provide either the Td (Tetanus-Diphtheria) or Tdap vaccine to employees at no cost to the employee.

3. Influenza

All employees are strongly recommended to have the annual influenza (flu) vaccine. The Department offers the flu vaccine annually within CDC Program guidelines at no cost to the employee, as a benefit of employment.

If the employee chooses not to be immunized, he/she must sign a Declination of Influenza Vaccination.

VACCINATION PROCEDURE

1. A JCPH HR representative will ensure that the employee has an appointment with a PHN on the first day of hire for evaluation of their immunization history and compliance with JCPH disease control requirements and recommendations.
2. New employees are requested to provide immunization records for the PHN to review at their appointment.
3. The PHN will record the immunization history, vaccine requirements and recommendations on the New Employee Immunization Plan and Record. A copy of the original immunization record, laboratory and medical documentation will be attached to the New Employee Immunization Plan and Record.
4. When all disease control requirements have been met and documented the PHN will enter all lab results and immunization history into HealthNet and submit the **completed** New Employee Immunization Plan and Record to the JCPH Medical Records Room.
5. The employee's supervisor will be notified if an employee is non-compliant with any of the JCPH disease control requirements.

FOLLOW-UP FOR JCPH EMPLOYEES WITH A POSITIVE TST

Positive TST that measures:

- $\geq 5\text{mm}$ – A person that is/has been in contact with an active case, is HIV+, is immuno-suppressed, has had TB in the past, has had an abnormal CXR or clinical findings or has had an organ transplant.
- $\geq 10\text{ mm}$ – A person that has recently immigrated (within 5 years) from a high prevalence country, resident or employee of high risk group settings, mycobacteriology lab workers, people with certain medical conditions (silicosis, diabetes, chronic renal failure, etc.), IV drug user or infants/children/adolescents exposed to adults in high risk categories.
- $\geq 15\text{mm}$ – A person with no known risk.

Interferon-Gamma Release Assay (IGRA)

IGRA is a whole-blood immunologic test for determining if a person is infected with tuberculosis. The test measures the amount of interferon gamma produced in a small sample of a person's blood after exposure to proteins from *Mycobacterium tuberculosis* (*M. tuberculosis*). Results of IGRAs are unaffected by Bacillus Calmette-Guérin (BCG) vaccination and nearly all non-tuberculous mycobacteria. QuantiFERON-TB Gold Test (QFT-G) is the specific test performed by Denver Metro TB Clinic.

BCG

An immunization used to protect against more serious forms of TB in developing countries, usually among children, and more recently used to treat bladder cancer.

Follow-up Evaluation from Denver Metro TB Clinic

For new employees, JCPH will cover the cost of the initial follow-up consultation/evaluation and testing needed including IGRA and CXR. Any additional services or follow-up treatment will be paid by the new employee.

For current employees with exposure to TB in the work place, a Colorado Workers' Compensation claim will be initiated and processed for follow-up treatment and care payment. This is completed through your supervisor and the Risk Management Department.

POSITIVE TB SKIN TEST PROCEDURE

- A. Positive TST and has a history of BCG** → refer to Denver Metro TB Clinic for evaluation. Do not test using TST in the future. Complete Annual TB Symptom Screening Questionnaire.
 - 1. **Negative IGRA** → person is **not** considered to have been exposed to TB.
 - 2. **Positive IGRA** → refer to Denver Metro TB Clinic and restrict work until cleared to return to work by Denver Metro TB Clinic or treating physician.

- B. Positive TST and no history of BCG** → refer to Denver Metro TB Clinic for evaluation and restrict work until cleared to return to work by Denver TB Clinic or treating physician. Do not test using TST in the future. Complete Annual TB Symptom Screening Questionnaire.

- C. History of +TST or +IGRA and negative CXR**. Do not test using TST in the future. Complete Annual TB Symptom Screening Questionnaire.
 - 1. **CXR Documentation** → provide negative CXR documentation and verification that no further treatment is necessary.
 - 2. **No CXR Documentation** → refer to Denver Metro TB Clinic for evaluation.

- D. History of Latent or Active TB**. Do not test using TST in the future. Complete Annual TB Symptom Screening Questionnaire.
 - 1. **Medication Documentation** → present documentation of treatment including medications and length of treatment and that no further treatment or follow-up is necessary.

2. **No medication Documentation** → refer to Denver Metro TB Clinic for evaluation. JCPH will not cover the cost of treatment for new employees. Restrict work until no longer and cleared to return to work by Denver Metro TB Clinic or treating physician.

OBTAINING SERVICES FROM DENVER METRO TB CLINIC PROCEDURE

A. Denver Metro TB Clinic contact information

Denver Metro TB Clinic
605 Bannock St., 1st Floor
Denver, CO 80204-4507
Phone: 303-602-7240
Fax: 303-602-7263

Kathryn Root, Clinic Manager
303-602-7251
Kathryn.Root@dhha.org

B. Payment and Approved Services

- QuantiFERON-TB Gold Test (QFT-G), CXR and diagnostic visit with a TB RN= \$100.00
- If initial testing is positive-follow-up visits will not incur a charge
- Employees who need drug treatment medication (JCPH will **NOT** cover these costs):
 - Those **with** insurance- TB physician will write a prescription to be taken to a retail pharmacy.
 - Those **without** insurance- TB physician will write a prescription to be taken to Denver Public Health's Pharmacy and the charge will be \$50.00 per month.
- Denver Metro TB Clinic Administrator will email a copy of charges run on the JCPH credit card to the Administrative Coordinator within 24 hours of service.

C. Procedure to Access Services

1. Complete JCPH Employee Immunization Plan and Record, Annual TB Symptom Screening Questionnaire and/or Initial TB Symptom Screening Questionnaire.
2. If PHN identifies a need for further testing or treatment, refer employee to the Denver Metro TB Clinic.
 - a. PHN will contact Denver Metro TB Clinic Clinical Manager.
 - b. PHN will complete and fax to the Denver Metro TB Clinic the Denver Health Referral Form, filing the original document in the Employee Immunization Plan and Record.
 - c. PHN will contact Administration Coordinator for the JCPH Credit Card # (Denver Metro TB Clinic does not keep our number on file).
 - d. PHN will call or email the Denver Metro TB Clinic Clinical Manager the JCPH credit card number. PHN will request that the Clinical Manager email the JCPH Administration Coordinator the receipt from the evaluation within 24 hours of the service (provide contact information).
 - e. PHN will wait for contact from the Denver Metro TB Clinic as to when they would like to schedule JCPH employee
3. PHN will provide written and verbal information to the employee about TB, their particular circumstances and answer any questions the employee may have.

4. PHN will provide employee with written directions to Denver Metro TB Clinic.
5. Employee will obtain services from Denver Metro TB Clinic and bring documentation of results and services back to PHN.
6. PHN will follow-up with employee after Denver Metro TB Clinic's evaluation and treatment. Results and treatments will be documented in Health Net and records will be included in the employee's Medical Record file.
7. PHN will conduct further follow-up and monitoring of employee as needed.