13.2 EMPLOYEE IMMUNIZATIONS

Health department employees are at risk for exposure to and possible transmission of vaccine-preventable diseases, because of their contact with patients or infective material from patients. Maintenance of immunity is therefore an essential part of prevention and infection control programs for the department. The Advisory Committee on Immunization Practices (ACIP) for the Centers for Disease Control and Prevention (CDC) states that optimal use of immunizing agents safeguards the health of workers and protects others from becoming infected through exposure to infected workers.

This policy establishes:

- Schedule for recommended and required vaccines/screenings
- Requirements for TB screening
- Exemptions

All employees of Metro Health should register in Immtrac2. In response to certain emergency situations and for the protection of staff, Metro Health has a need to know what staff members have taken precautionary measures.

CDC-recommended immunizations are recommended for all staff. Influenza vaccine is required for all staff. Employees who are unable to obtain influenza vaccination will be required to wear a mask when working within 3 feet of vulnerable individuals, including:

- People with HIV or TB
- People older than 65
- Children under 5
- Pregnant women

Employees hired after Dec. 1, 2018, who are unable to obtain measles, rubella, and varicella vaccinations will also be required to wear a mask when working within 3 feet of vulnerable individuals, including:

- People with HIV or TB
- People older than 65
Children under 5

Pregnant women

The requirement for measles, rubella and varicella vaccination is waived for employees hired before Dec. 1, 2018.

Metro Health adopts a standard for immunizations and TB screenings to maximize protective measures for staff and the public served.

13.2.1 Responsibilities

Metro Health’s immunizations and screening schedule for employees is based on best-practice guidelines published by the CDC and the Texas Health and Human Services Commission (HHSC). The Medical Director may direct the frequency of vaccinations or screening to be conducted more frequently than suggested by the CDC or HHSC, but will ensure the schedule does not pose a risk to employees.

Program managers will ensure that their assigned employees are up to date with immunizations.

Any full time or part time CoSA employee may receive immunizations from the City of San Antonio Occupational Health center. Non-CoSA employees must obtain services through his/her parent agency or through a private physician or clinic.

All employees are responsible for confirming with his/her supervisor / manager which immunizations are required for his/her position. Employees are responsible for coordinating with an appropriate service provider to receive screenings and immunization as well as reporting compliance.

Employees opting to receive services through a private physician or clinic will be responsible for any costs incurred.

The influenza season runs from October 1 through May 31. The Assistant Director of the Communicable Disease Division may establish different start and end dates during some influenza seasons. Employees will be notified in a timely fashion to ensure adequate time to obtain necessary vaccinations.

13.2.2 Tuberculosis (TB) Screening

TB screening is required only for Medical/Dental and Laboratory staff. TB screening is recommended for those at high risk (e.g. direct contacts to TB cases, individuals with HIV or immunosuppression, IV drug users, some recent immigrants) and those employees exhibiting symptoms.

Screening may consist of any of the following annually:

- Positive Purified Derivative Skin Test (PPD)
- Interferon Gamma Release Assay (IGRA / T-Spot) blood test
- X-ray
Because the PPD remains the standard of care, an IGRA may entail a cost to the employee.

When necessary, follow-up X-rays may be obtained by CoSA employees at no cost through Occupational Health.

Non-CoSA Temporary Employees and contractors working within the TB program may be screened at no cost at the TB clinic.

Non-CoSA Temporary Employees and contractors working outside the TB program will be responsible for the cost of screening.

Two-step screening is required of all new hire TB staff. The first screening is to be completed as soon after hire as practicable with the second screening occurring at least three weeks later, but within the first two months of employment.

13.2.3 Immunizations / Screening Exemptions

Metro Health staff members who are required to receive immunizations and/or TB screening may file an exemption based on the following criteria:

1. **Medical Exemption**: A medical exemption may be granted to an employee with a contraindication that poses a risk to the health of the employee as determined by a physician.
   a. The contraindication must be listed in a recognized medical sourcebook.
   b. The employee must have a signed statement from a physician stating:
      1) The employee has a contraindication,
      2) The employee should not receive the vaccine,
      3) Whether the condition is temporary or permanent.

2. **Religious Exemption**: A religious exemption may be granted to an employee if receiving the vaccine would violate doctrine as determined by clergy of the recognized church.
   a. The employee must have a signed letter from a clergy member of a 501(c)(3) church stating that it is against church doctrine to receive immunizations.

3. **Personal Appeals**: Employees may present an appeal on a basis of personal ethics for an exemption from immunizations and/or TB screening. For influenza vaccination, appeals should be presented in writing at least one week before the fall meeting of the Quality Management Clinical Subcommittee (QMCS). The Medical Director will present the appeal to the QMCS for review and formulation of a recommendation. The recommendation of the committee will be presented to the Director of Public Health for consideration. The Director may grant an exemption based on the personal appeal.

Employees with an exemption to a vaccine that is necessary to protect the health of clients served by the Metro Health may be prohibited from working in areas where their lack of immunity could pose a health risk to others and/or be required to wear a mask when within 3 feet of a patient, client or daycare attendee.
For TB staff, there is no exemption to TB screening.

13.2.5 Immunization and Screening Requirements

All Metro Health Employees are encouraged to receive recommended vaccinations, including the Influenza vaccination annually, for personal health and safety.

Immunization requirements for Metro Health employees follow CDC recommendations for healthcare workers. Requirements are based on recommendations of the CDC-ACIP and exposure risks.

All CoSA full- or part-time applicants will be notified during the hiring process of the vaccination and screening requirements.

Any employee not vaccinated or screened poses a potential risk to the health of other staff members and clients served by the Metro Health. Employees in this status may be prohibited from working in areas where his/her lack of immunity could pose a health risk to others and/or be required to wear personal protective equipment when working within 3 feet of vulnerable individuals.

While vaccines do protect employees and prevent the spread of disease, not all vaccines are recommended for all employees. The following guidelines detail requirements for specific positions within the department.

1. Recommended for Metro Health Employees working with vulnerable populations

   a. Influenza

   **Required for:** Influenza vaccine is required for all employees. For each episode of the flu, workers lose from ½ day to 5 days of productivity. Metro Health also recommends frequent handwashing, cough hygiene and staying home when sick during flu season.

   **Frequency/Timing:** A new vaccine is administered each year beginning in the fall. Employees required to take the vaccination must obtain it by December 31st each year.

   **Vaccine:** Inactivated influenza virus

   b. Measles – Mumps – Rubella (MMR)

   **Required for:** Measles vaccine is recommended for ALL employees but is **REQUIRED** only for employees working directly with vulnerable populations, including: individuals with HIV or TB, people older than 65, children under 5 and pregnant women.

   **The requirement will be waived under the following conditions:**
   - Employee born before 1957
   - Physician-documented proof of past measles
   - Valid immunization record of measles vaccination
• Positive measles titer

_Vaccine:_ Live measles, mumps, rubella virus (MMR)

c. Varicella (chicken pox)

_Required for:_ Varicella vaccine is recommended for ALL employees but is _REQUIRED_ only for employees working directly with vulnerable populations, including: individuals with HIV or TB, people older than 65, children under 5 and pregnant women.

_The requirement will be waived under the following conditions:_

• Physician-documented proof of past varicella
• Valid immunization record of varicella vaccination
• Positive varicella titer

_Vaccine:_ Live varicella zoster virus (VZV)

d. Hepatitis B

_Required for:_ Hepatitis B vaccine is recommended for ALL employees.

_Frequency:_ No booster is recommended for immune-competent personnel, unless an exposure occurs (for example, a needle-stick involving a known hepatitis B carrier or a person at high risk) and at the time of the exposure, the employee demonstrates an inadequate antibody titer.

_Titers:_ Recommended 1-2 months after the last dose of the series, and after an exposure if the employee never had a post-series titer. No titer is needed after an exposure if an employee completed the vaccine series and had a post-series titer. In the absence of an exposure, no titer is recommended. For employees who believe they were immunized but lack documentation, repeating the series is preferable to a titer.

_Vaccine:_ Hepatitis B recombinant vaccine

e. Tetanus/Diphtheria (Td) or Tetanus/diphtheriaacellular Pertussis (TdaP)

_Required for:_ Tetanus (Td / TdaP) vaccine is recommended for ALL employees but is only _REQUIRED_ for medical/dental staff who perform direct clinical care.

_Requirement:_ Employees must have completed a primary series or must complete one within the first year of employment. TdaP will replace a single dose of Td for employees younger than 65 who have not previously received a dose of TdaP.

_Frequency:_ A booster is required every ten years.

_Vaccine:_ Tetanus/Diphtheria toxoid; Tetanus/Diphtheria/acellular Pertussis

f. Tuberculosis (TB) Screening

_Required for:_ TB Screening is recommended for employees who have spent time with someone who has TB disease; who have HIV infection or another medical problem that weakens the immune system; who are from a country where TB
disease is common; or who have TB symptoms. TB screening is **REQUIRED** only for employees providing direct clinical care and TB program employees.

* **TB program employees may be tested at shorter intervals if required by the Texas Health & Human Services Commission.**

**Provision:** City employees may obtain PPD skin test and X-rays if needed, through Occupational Health. TB clinic staff may obtain testing through the TB Clinic.

* **In the event an employee should test positive for TB, the employee will be directed to seek care through his/her primary care physician.**

**Test:** PPD, IGRA

2. **Recommended ONLY for Employee in a position with a High Risk of Exposure**
   
a. **Rabies**

   **Required for:** Laboratory personnel responsible for rabies diagnosis

   **Recommended for:** **No one else**

   **Provision:** Vaccine will be given to City employees by Occupational Health

   **Requirement:** Three 1.0 ml doses given intramuscularly (deltoid) in the lateral aspect of the upper arm, one dose each on days 0, 7, and 21 or 28.

   **Titers:** Done on the following schedule;

   - Every six months for any employee working directly with brain material
   - Every 2 years for employees required to have the vaccine but who do not work directly with brain material
   - Immediately post-vaccination only if the employee is immunosuppressed

   **Boosters:** When titers fall below 1.5 (or minimum titer determined by the laboratory director), a booster of 1.0ml HDCV-IM will be given intramuscularly.

   **Vaccine:** Human diploid cells rabies vaccine (HDCV-IM) or purified chick embryo cell vaccine (PCECV).

b. **Smallpox (Vaccinia)**

   **Required for:** Public Health Response Team (voluntary team of employees specified by the Medical Director in collaboration with Public Health Emergency Preparedness).

   **Recommended:** **No one else**

   **Provision:** Provided through CDC with extensive follow-up per protocol.

13.2.6 **Reporting Requirements**

Reporting is required to assess the Metro Health workforce response capabilities in the event of an emergency. Staff not adequately protected from certain situational factors
should not be deployed into a situation that poses a risk to his/her personal health or safety. Reports are required from all employees.

The Attestation of Compliance – Immunization and Screening and the Hepatitis B Vaccination Declination are only required to be completed once by each employee during the first six months of employment. The only exception exists when employee has a change in Exemption status or change in immunization category that elevates the employee to a different risk category.

- **Attestation of Compliance - Immunization and Screening Requirements (MHD012):** All employees are required to complete the Employee Attestation of Compliance with Immunization and Screening Requirements form (MHD012) during on-boarding at their work site.

  In the event an employee in a required category claims an exemption, the supervisor / manager will collect the necessary supporting documentation and ensure all documents are attached to the attestation and forwarded to the Medical Director for consideration.

- **In the event an employee declines the Hepatitis B series during New Employee Orientation, the Workforce Development Coordinator will ensure the employee completes the Hepatitis B Vaccination Declination form (MHD014).**

On an annual basis, employees who are REQUIRED to obtain the influenza vaccine will complete an attestation online. The Medical Director will provide Assistant Directors with a list of REQUIRED staff who have not completed attestations.

  Such employees must have a valid exemption to decline receiving the vaccine. Employees are required to receive the vaccine prior to Dec. 31 of each year.

  The direct supervisor / manager is responsible for ensuring that employees attest to their influenza vaccine status.

13.2.7 **Review and Update**

At minimum, the Medical Director will review the Metro Health Schedule for Vaccines and Screenings on an annual basis. As CDC releases new requirements or the ACIP develops new recommendations, the schedule may be updated. The Medical Director will provide information for personnel deployment decisions in the event of an emergency.

13.2.8 **Compliance**

Employees required to receive vaccinations and /or TB screening and fail to do so without an approved exemption are subject to progressive discipline and the requirement to wear personal protective equipment while in the workplace.