STAFF IMMUNIZATION OR PROOF OF IMMUNITY POLICY

PURPOSE
To establish requirements and recommendations for vaccinations/immunity for designated personnel within Spokane Regional Health District (SRHD). It is an expectation of SRHD that staff be properly immunized (unless they have signed a statement of declination) against vaccine preventable diseases, which they may be exposed to in the course of their duties or for which they may potentially expose clients.

APPLICABILITY
Designated SRHD staff. Please note that this is a revised policy. WSNA represented employees must refer to the original policy attached to WSNA’s collective bargaining agreement.

EMPLOYEE/ RISK CATEGORIES FOR IMMUNIZATION AND VACCINATION
Risk categories are based on employee classifications that may, as a result of their duties associated with SRHD, require direct contact with patients or clients and potential exposure to blood or other potentially infectious materials exposing them to infectious diseases. New programs at SRHD will be evaluated and placed into the appropriate category based on the criteria listed below (Category A or Category B).

Category A: Employees who provide direct patient or client care, including those who perform procedures that put them at risk of respiratory and blood/ fluids exposure to communicable diseases.

- Community and Family Services – Nurse Family Partnership program manager, all public health nurses
- HIV/STD Program – program manager and all staff
- Maintenance – program manager and all staff including the Safety and Security Officer
- Needle Exchange - any primary or secondary staff, including volunteers, serving clients
- Opioid Treatment Program – medical director, program manager, and all staff, except administrative assistants and Programmer Analyst
- Tuberculosis Program – all staff
- WIC - staff who do hematocrits (certifiers, lead certifiers, dual certifier/assistant positions)

Category B: Employees who provide direct client interactions (face-to-face), including those who are at risk for exposure to respiratory diseases, but do not perform procedures that put them at risk for exposure to blood or bodily fluids.

- Environmental Public Health –field staff, and front desk staff
- Immunization Outreach – all staff supporting community clinics
- Infant Toddler Network - program manager and family resource coordinators
- Neighborhoods Matter - program manager and all staff
- Opioid Treatment Program - administrative assistants
- Vital Records/Financial Services – program manager and all staff
- WIC - program managers and all staff (other than those listed in category A above)
- SNAP-Ed – all staff
- Public Health Emergency Preparedness & Response (PHEPR) – program manager and all staff
IMMUNIZATION AND PROOF OF IMMUNITY

Employees within designated risk categories who do not sign a declination form will obtain vaccinations or provide written medical verification of vaccinations and/or immune status as listed in Table 1. Laboratory evidence of immunity or medical health record evidence of disease history and vaccines administered serve as documented proof of disease immunity. No other documentation will be accepted, including self-reports of disease with the following exceptions:

If an employee was born before 1957, they will not need to show documentation for measles, mumps, or rubella; if born before 1980, no documentation is needed for varicella.

<table>
<thead>
<tr>
<th>Disease or Vaccine</th>
<th>Category A</th>
<th>Category B</th>
</tr>
</thead>
<tbody>
<tr>
<td>MMR</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Tdap</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Varicella</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>Hep B</td>
<td>X</td>
<td>Recommended, not required</td>
</tr>
<tr>
<td>Influenza</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

Table 2 - Recommended Vaccinations

<table>
<thead>
<tr>
<th>Disease</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza</td>
<td>The vaccine will be offered to employees by SRHD at a reduced fee or no cost or can be obtained through their healthcare provider,¹ Due annually by October 31.</td>
</tr>
<tr>
<td>Tetanus</td>
<td>It is recommended that those employees at risk of injury and exposure to contaminated soil be vaccinated against tetanus every 10 years.</td>
</tr>
<tr>
<td>Hep B</td>
<td>It is recommended that those employees serving as First Aid Responders for the agency be vaccinated against Hepatitis B.</td>
</tr>
</tbody>
</table>

MMR=measles, mumps, rubella   Tdap=Tetanus, diphtheria, pertussis   Hep B=hepatitis B virus

CONDITION OF EMPLOYMENT REQUIREMENTS

As a condition of employment, new hires must show written medical verification of vaccinations and/or proof of immune status for the following diseases at the time of hire if the position they are filling requires category A or B immunizations. New employees may sign a declination of immunizations based only on medical, religious, or philosophical objections. New employees are responsible for all costs associated with obtaining immunizations from their physician.

1. Measles
2. Mumps
3. Rubella
4. Tetanus
5. Diphtheria
6. Pertussis
7. Varicella (Chicken Pox)

¹ SRHD recognizes that some employees may prefer to receive required vaccinations and or medical screening (titers) directly from their personal medical provider. In these cases, SRHD will allow employees to use work time to receive the vaccinations and or screenings and will reimburse employees for associated costs, up to the amount that would have been paid had the employee utilized SRHD services.

Immunization Policy: 12/06/2016; rev. 04/05/2017; rev. 10/24/2017
8. **Hepatitis B** (except when required by law, in which case SRHD will be responsible for paying for staff vaccinations)

Once condition of employment requirements are met, employees will be subject to requirements as outlined in the remainder of this document.

**CURRENT EMPLOYMENT REQUIREMENTS**

For all vaccinations, employees in categories A or B shall provide written documentation from a medical provider with verification of vaccination dates and/or immunity to the specified communicable diseases (unless previously provided) or sign declination forms. Employees who do not have documentation of immunity will either receive vaccinations and/or titer testing (as appropriate), which will be paid for by agency programs (see footnote 1, page 2), or will sign declination forms. All other non-designated employees will be exempt, except in the event of a declared outbreak in the community. In this instance, the Health Officer will decide if employees previously considered non-designated will be required to show proof of immunity, vaccination, or signed declination for the relevant disease.

**EMPLOYEE DECLINATION OF IMMUNIZATIONS**

All employees have the right to refuse immunizations for medical reasons, religious beliefs, or philosophical beliefs. Employees who decline to have a titer drawn and/or who are unable to be vaccinated or who have a religious or philosophical objection will complete a declination form. Employees will not be discriminated against or disciplined for signing a declination form. However, he/she shall not be required to divulge personal health information or declare his/her reason for such declination.

The local Health Officer shall have the authority granted pursuant to RCW 70.05.070, to “control and prevent the spread of any dangerous and contagious diseases that may occur in his or her jurisdiction.” This may include excluding those employees who have not obtained vaccination(s) or are not otherwise immune from regular duties or from work during a declared outbreak. In this case, employees who signed declination forms may (1) be assigned to responsibilities that do not include direct contact with the public; or (2) perform normal duties that do not require direct contact with the public; or, (3) when the District has no work available, the employee may use any accrued leave, or take leave without pay, at his/her discretion.

**RESPONSIBILITIES**

**SPOKANE REGIONAL HEALTH DISTRICT WILL:**

Provide vaccination(s) and/or titer testing to designated current employees at no cost. Employees should receive vaccinations and/or medical screenings (titers) directly from their personal medical provider. In these cases, SRHD will allow employees to use work time to receive the vaccinations and/or screenings and will reimburse employees for associated costs.

**HUMAN RESOURCES WILL:**

1. Obtain authorization to disclose information from employees specifically regarding employees’ immunization/immunity status or declination only to program managers, division directors, the health officer, and Washington State Immunization Information System (IIS) program staff.
2. Maintain immunization documentation and/or signed declinations in respective employee confidential files.
3. Send immunization records to the Immunization Outreach staff to enter information into the IIS and GP.
4. Maintain records for all terminated employees pursuant to OSHA regulations.
5. Notify the appropriate program manager of employees who remain out of compliance after two requests to update the employee’s status.
6. Provide vaccination documentation to third parties such as L&I and state auditors.
7. Review agency programs annually to adjust staff who may fall under or no longer fall under categories A and B. Monitor staff who change programs within the agency and adjust accordingly.

PROGRAM MANAGERS WILL:
1. Determine employee’s risk assessment category for new or transferred employees.
2. Advise human resources of new employee risk assessment category for immunity and vaccination records.
3. Ensure that employees comply with this immunity/vaccination policy.

IMMUNIZATION OUTREACH STAFF WILL:
1. Assist staff in finding their records in the Washington State Immunization Information System, if needed.
2. Enter staff records into the IIS and GP.

EMPLOYEES WILL:
1. Comply with this policy.
2. Consider obtaining any recommended vaccinations.
3. Provide declination or verification of immune/vaccination status from healthcare provider, if applicable.
4. Utilize the IIS to find immunization records by contacting Immunization Outreach staff.
5. Sign the release of information form to allow their immunization records to be entered into the IIS and shared with management.