**POLICY PURPOSE**: The purpose of this policy is to protect the health and safety of patients, employees, patient and employee family members, and the community as a whole by providing a consistent testing and immunization standard for all Health Care Personnel.

**POLICY STATEMENT**: Lancaster General Health has adopted a compulsory immunization policy effective September 1, 2012. LG Health is committed to providing a safe and healing environment for our patients and protect our employees who are our most valuable resource. Research demonstrates the effectiveness of a strong vaccination program in reducing patient infections and mortality.

**APPLICABILITY/SCOPE/EXCLUSIONS**: Health Care Personnel at Covered Entities as defined in this policy. Failure to comply with testing and immunization requirements within this policy will be subject to disciplinary action, up to and including termination or restricted access to LG Health facilities.

**DEFINITIONS**

**Covered Entities** shall mean all Lancaster General Health facilities, including Lancaster General Hospital (includes WBH and all outpatient centers), Employed Physician Offices, and LG Health administrative offices. Excluded are organizations where LG Health has ≤50% ownership or non-employed physician offices who lease space within a LG Health facility.

**Health Care Personnel** shall mean:
- Employees of Lancaster General Health;
- Volunteers of a Covered Entity;
- Medical and Dental Staff of Lancaster General Hospital (members and medical affiliates) who are or may be physically present on site at a Covered Entity during Flu Season;
- Residents, interns, or students who perform clinical rotations at a Covered Entity; or
- Contracted personnel or vendors who have patient contact at a Covered Entity.

**PROCEDURES**

**A. PRE-EMPLOYMENT REQUIREMENTS**

1. Employment is contingent upon passing a pre-employment physical assessment provided at no cost to the applicant. The assessment shall be conducted within 30 days of the date of hire. Employee/Student Health or LG Health Occupational Medicine will complete the assessment. This includes but is not limited to:
   a) Completion of a health history.
   b) Evaluation of immunization status including proof of: 2 MMR’s or titers for Rubella, Rubeola and Mumps; proof of 2 Varicella vaccinations or Varicella titer; Influenza vaccination; and Hepatitis B vaccination and titer.
   c) Hepatitis C antibody testing.
   d) Ten panel drug screen and alcohol testing.
   e) Chest x-ray, if history of tuberculosis or positive Tb skin test, and no documentation of x-ray within the past year.

2. The pre-employment assessment will be scheduled by the Human Resources Employment Department for all new job applicants.

3. Employee Health must clear all applicants prior to the applicant starting employment.
4. Failure to provide information regarding prior or current injuries and/or illness, whether work related or not, will be sufficient grounds for withholding clearance for employment or immediate release from employment.

B. STUDENTS AND AGENCY PERSONNEL
1. Students and agency personnel will meet the standards set by LG Health regarding pre-placement testing, to assure they are free of communicable disease.
2. LG Health is not responsible for this testing or providing health care.
3. At a minimum the following is required:
   a) Tb skin testing or a chest x-ray (if prior positive TST) done within the last year.
   b) Drug and alcohol testing
   c) Hepatitis B vaccine or positive titer for those participating in patient care
   d) Documentation of two MMR vaccinations or titer, influenza vaccination during flu season, and chicken pox vaccination or positive titer.

C. TUBERCULOSIS SKIN TESTING (TST) FOR EMPLOYEES AND VOLUNTEERS
1. New Employees
   a) A mantoux Tb skin test (TST) will be applied on the second day of New Employee Orientation (NEO) and read 48 to 72 hours later by an Employee Health Nurse or designee. A second TST will be completed 2-3 weeks after the first test (unless the employee able to show proof of a TST within prior 12 months).
   b) If an employee is found to have a positive TST at time of hire, the individual will complete information regarding signs and symptoms, have a chest x-ray completed and be referred to the State Health Tb clinic for evaluation and treatment.
2. Tb skin testing is required on an annual basis for all employees, students and volunteers and is offered at no charge. Employees failing to obtain a TST during offered times, are required to obtain a mantoux TST at their own expense. Pregnant employees are to be tested unless there is documentation of a direct contraindication from their attending physician. Employees having had a TST test within the preceding three months are exempt from the annual testing requirements, as well as employees known to have had prior allergic response or positive TST results.
3. Records of TST’s and necessary follow-ups will be maintained by Employee and Student Health.
4. A reaction of 10 mm or more will be considered a positive TST reaction.
5. Health care workers with a positive TST will receive an annual symptom screening questionnaire and will be instructed to notify Employee and Student Health immediately, if any symptoms occur.
   a) For individuals found to have positive results and referred to the State Health Center for evaluation; applicable accommodation and reassignment may be necessary. Should the employee refuse treatment, they may be placed on inactive status until Employee/Student Health clears them for active duty.
   b) If the employee does not comply with the treatment within one month, they will be released from employment. Physician visits and medication are provided at no charge to the employee when the contagion is traced to the work environment.

D. INFLUENZA VACCINATION
1. General
   a) All Health Care Personnel are required to be immunized against influenza each flu season unless a specific exemption is requested and approved in accordance with this policy prior to a date to be determined and announced by LG Health on an annual basis.
   b) Lancaster General Health will provide influenza vaccinations free of charge to all Health Care Personnel.
   c) If Health Care Personnel obtain influenza vaccination from a personal physician, another health care facility, or other vaccination service available in the community, proof of such immunization must be provided to Lancaster General Health on an annual basis.
   d) All Health Care Personnel whose affiliation with LG Health commences during flu season will be required to comply with this policy.
   e) Flu Season shall mean the period of time from November 1st each year through March 31st of the immediately following year. The Flu Season may be extended as determined by LG Health in its discretion.
f) Employees on a leave of absence or FMLA when the flu season starts are encouraged to receive the flu vaccine prior to returning to work; however, if the employee has not received the flu vaccine, they should contact Employee Health to make arrangements to receive the vaccine on the first day of returning to work.

2. Exemptions
   a) Any exemption because of medical or religious contraindications must be submitted to Employee Health by October 1 st each year for the Flu Season commencing November 1.
   b) Each exemption will be reviewed and the individual requesting the exemption will be notified in writing as to whether his/her request for exemption has been granted. If an exemption request is denied, the individual will be required to be immunized pursuant to this policy.
   c) Medical Exemption
      1) An individual requesting medical exemption because of medical contraindications must complete an Influenza Vaccination Acknowledgement and Exemption Form Request (Attachment A) AND documentation (Attachment B) from the individual’s private physician who attests to the medical contraindication.
      2) Standard criteria for medical exemption will be utilized based on recommendations from the Centers for Disease Control and Prevention. If a medical exemption is granted for a temporary medical condition, the individual must resubmit a request for exemption annually. If the exemption is granted permanently, the individual does not need to submit a request for medical exemption annually unless vaccine technology changes and eliminates issues related to allergies.
   d) Religious Exemption
      1) An individual requesting exemption because of religious reasons must complete an Influenza Vaccination Acknowledgement and Exemption Form Request (Attachment A) AND documentation (Attachment C) from his/her clergy that supports the exemption.

3. Vaccine Shortages
   a) In the event of an influenza vaccine shortage, the shortage will be evaluated and a plan established by Lancaster General Health Infection control specialists and medical leadership.
   b) Influenza vaccination will be offered to Health Care Personnel based on job function and risk of exposure to influenza. Priority will be given to Health Care Personnel who provide direct hands-on patient care with prolonged face-to-face contact with patients, care for patients at high risk for complications from influenza and/or have the highest risk of exposure to patients with influenza, as well as to personnel who are at high risk for complications from influenza.

4. Infection Control Procedures
   a) All Health Care Personnel are responsible for performing appropriate infection control standards to prevent risk to others and themselves. This includes, but is not limited to, frequent hand washing, surgical masking, covering coughs and sneezing, disinfecting equipment and work stations, and not reporting to work when ill.
   b) Health Care Personnel who have been granted a medical or religious exemption in accordance with this policy must wear a surgical mask when working within 6 feet of any person, while influenza virus is active in the community (as determined by LG Health).

5. Corrective Action Procedures
   a) Health Care Personnel, who are employees, will be subject to discipline, in accordance with the Employee Counseling and Progressive Corrective Action Policy for failure to comply with this policy, up to and including termination.
   b) Medical and Dental Staff Members will be adjudicated by the medical staff rules and regulations.
   c) Volunteers, students, interns or contracted workers will not be permitted to enter a Covered Entity if they fail to comply with this policy.
E. VACCINE PREVENTABLE DISEASES – EMPLOYEE AND VOLUNTEER IMMUNIZATIONS

1. Hepatitis B Vaccination (Required for employees whose jobs may involve exposure to blood, body fluid, or tissues)
   a) The first injection of the vaccine is offered by the Employee Health staff or designee within the first ten working days (normally given during the second day of orientation) and given to existing employees, on request.
   b) Employees at risk for occupational exposure to blood and body fluids are especially encouraged to receive the vaccine.
   c) Post vaccination screening is offered to all at risk employees, after completing the series. Those not responding to the vaccine will be offered another series. Those choosing not to obtain the Hepatitis B vaccine must sign a declination statement.
   d) Employees may receive the vaccine, upon request, at any time.

2. MMR - Rubella, Rubeola, and Mumps (Required)
   a) Must show positive titers or proof of 2 doses of MMR given at least 4 weeks apart and both doses given after 12 months of age. The vaccine will be offered after the TST is completed.
   b) Employees refusing the vaccine must provide proof of contraindication.

3. Varicella Vaccination (Required)
   a) Must show proof of positive titer or 2 doses of varicella vaccination.
   b) Employee refusing the vaccination must show proof of contraindication. Must obtain two doses at least one month apart.

4. Tdap - Tetanus, Diphtheria, and Acellular Pertussis (Voluntary)
   a) Offered to employees ages 19-64 who have not had a Tdap vaccine in the past.
   b) Recommended for those having contact with babies and young children.

5. Tetanus and Diphtheria (Voluntary)
   a) Every ten years, if Tdap was provided.

REFERENCES/RELATED INFORMATION - Indicates the authoritative source and the related regulatory citation, standard, and/or best practice as applicable.

- [http://www.cdc.gov/vaccines/](http://www.cdc.gov/vaccines/)

ATTACHMENTS:
- ATTACHMENT A Influenza Vaccination Acknowledgement and Exemption Form Request
- ATTACHMENT B Request For Medical Exemption From Influenza Vaccination
- ATTACHMENT C Request For Religious Exemption From Influenza Vaccination

REVISION HISTORY – 8/3/2012
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