

Model Health Care Organization Policy

Health Care Organization Policy on Influenza Vaccination for Health Care Personnel

Policy Statement:

It is the policy of the [NAME OF ORGANIZATION] that all individuals working in the [NAME OF ORGANIZATION] are immunized against influenza on an annual basis. Influenza vaccination is a requirement of working at [NAME OF ORGANIZATION]. Individuals working at [NAME OF ORGANIZATION] include employees, credentialed medical staff (as well as their employed or sponsored advanced practice professionals and clinical assistants), students, residents, interns, fellows, volunteers, clergy, contracted personnel and vendors who have contact with patients. [HEALTH CARE ORGANIZATIONS WILL WANT TO PRECISELY DEFINE WHO IS AFFECTED BY THIS POLICY. CONSIDERATION NEEDS TO BE GIVEN TO PEOPLE WHO HAVE DIRECT CONTACT WITH PATIENTS; THOSE WHO DO NOT HAVE DIRECT CONTACT WITH PATIENTS BUT WHO HAVE JOBS THAT PUT THEM IN CLOSE CONTACT WITH PATIENTS OR THE PATIENT ENVIRONMENT; AND THOSE WHO HAVE NO CONTACT WITH PATIENTS OR THE ENVIRONMENT IN WHICH PATIENTS ARE CARED FOR, BUT WHO HAVE CONTACT WITH HEALTH CARE PERSONNEL THAT DO]

Purpose:

The purpose of this policy is to protect the health and safety of patients, health care personnel, patient and health care personnel family members and the community as a whole from influenza infection through annual influenza vaccination.

Procedure:

Annual Influenza Vaccination

- As a condition of employment, maintenance of medical staff privileges or access to patient care or clinical care areas, [NAME OF ORGANIZATION] requires health care personnel to receive an annual influenza vaccination or possess an approved medical or religious exemption.
- Annually, health care personnel, covered by this policy, must do one of the following:
 - Receive the influenza vaccine(s), provided by [INSERT DEPARTMENT NAME THAT WILL ADMINISTER VACCINES], by [INSERT DATE, DECEMBER 1 IS THE LATEST DATE RECOMMENDED].
 - Provide [NAME OF DEPARTMENT OR POSITION TITLE] with proof of vaccination if vaccinated through services other than [NAME OF ORGANIZATION], by [INSERT DATE, DECEMBER 1 IS THE LATEST DATE RECOMMENDED]. Proof of vaccination must include a copy of documentation indicating the vaccine was received. [HEALTH CARE ORGANIZATIONS WILL WANT TO DETERMINE WHAT IS ACCEPTABLE AS PROOF OF INFLUENZA VACCINATION AND ALSO DETERMINE WHERE THE PROOF OF VACCINATION NEEDS TO BE DELIVERED. IN SOME CASES, IT MAY BE EMPLOYEE HEALTH SERVICES OR IT MAY BE OTHER DESIGNATED PEOPLE FOR SPECIFIC TYPES OF HEALTH CARE PERSONNEL, SUCH AS A RESIDENCY DIRECTOR OR THE DIRECTOR OF VOLUNTEER SERVICES]
 - Comply with the designated procedure for obtaining a permissible exception by [INSERT DATE; IT IS RECOMMENDED THIS BE AT LEAST TWO MONTHS PRIOR TO THE FINAL DEADLINE TO ALLOW FOR PROCESSING, NOTIFICATION AND OBTAINING VACCINATION IF THE EXEMPTION IS DENIED], as described in this policy.
- Health care personnel who begin or resume employment, a training rotation or provision of services between October 1 and April 30 are required to receive an influenza vaccination, provide proof of current vaccination status or obtain a medical or religious exemption prior to or on the first day their employment, rotation or service provision begins. [HEALTH CARE ORGANIZATIONS WILL NEED TO DETERMINE THE ABOVE DATES IN ACCORDANCE WITH THE EXPECTED OR ACTUAL INFLUENZA SEASON]

Exemptions:

(NAME OF ORGANIZATION) will grant exemption to annual influenza vaccination for approved medical reasons or religious beliefs.

Medical Exemption

- Exemptions to required vaccination may be granted for certain medical contraindications. Standard criteria will be established and include:
 - Severe allergy to the vaccine or components as defined by the most current recommendations of the CDC's Advisory Committee on Immunization Practices [HEALTH CARE ORGANIZATIONS MUST DECIDE IF THEY WILL REQUIRE ALLERGY TESTING AND IF THEY WILL PAY FOR THIS TESTING]
 - History of Guillian-Barre'
- An individual requesting medical exemption because of medical contraindications must complete the Medical Exemption Request Form. Part A of the request must be completed and signed by the health care personnel member. Part B of the request must be completed and signed by the health care personnel member's personal physician. [ORGANIZATIONS MAY ELECT TO USE A STANDARDIZED FORM THAT EMPLOYEES NEED TO HAVE THEIR PHYSICIAN COMPLETE OR MAY ELECT TO IDENTIFY WHAT DOCUMENTATION WOULD BE ACCEPTABLE. IT IS RECOMMENDED THAT THE EMPLOYEE HEALTH NURSE(S) NOT SERVE THIS ROLE.]
- [HEALTH CARE ORGANIZATIONS WILL WANT TO INCLUDE THE PROCESS THEY WILL USE FOR EVALUATING REQUESTS FOR MEDICAL EXEMPTIONS. SOME ORGANIZATIONS PROCESS THESE THROUGH THEIR EMPLOYEE HEALTH SERVICES; OTHERS USE A MEDICAL EVALUATION COMMITTEE. CONSIDERATION SHOULD BE GIVEN TO CONTACTING PERSONAL PHYSICIANS WHO HAVE SIGNED THE FORM FOR REASONS OTHER THAN THE CDC RECOMMENDED EXEMPTIONS.]
- The individual requesting the medical exemption will be notified in writing as to whether his/her request for medical exemption has been granted. If a medical exemption request is denied, the individual will be required to be immunized pursuant to this policy.
- 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.
- [HEALTH CARE ORGANIZATIONS MUST DECIDE WHAT PROCESS, IF ANY, WILL BE USED FOR THOSE WHO HAVE NOT BEEN VACCINATED. CONSIDERATION MUST BE GIVEN TO WHAT PERSONNEL THIS WOULD APPLY TO, UNDER WHAT CONDITIONS, HOW THESE INDIVIDUALS WILL BE IDENTIFIED AND HOW IT WILL BE ENFORCED.][FOLLOWING IS AN EXAMPLE OF A MASKING POLICY - Health care personnel who are not vaccinated, due to a medical exemption, must wear a surgical mask within six (6) feet of any patient and when entering a patient room during the influenza season.]

Religious Exemption

- Exemptions may be granted because vaccination conflicts with the tenets of a religious belief.
- Persons requesting a religious exemption must complete a Religious Exemption Request Form. [ORGANIZATIONS MAY ELECT TO USE A STANDARDIZED FORM THAT EMPLOYEES SHOULD COMPLETE OR MAY ELECT TO IDENTIFY WHAT DOCUMENTATION WOULD BE ACCEPTABLE.]
- [HEALTH CARE ORGANIZATIONS WILL WANT TO INCLUDE THE PROCESS THEY WILL USE FOR EVALUATING REQUESTS FOR RELIGIOUS EXEMPTIONS. SOME ORGANIZATIONS PROCESS THESE THROUGH HUMAN RESOURCES OR MAY MAKE USE OF OTHER DIVERSITY OR ETHICS COMMITTEES.]
- The individual requesting the religious exemption will be notified in writing as to whether his/her request for religious exemption has been granted. If a religious exemption request is denied, the individual will be required to be immunized pursuant to this policy.
- [ORGANIZATIONS MUST DECIDE IF RELIGIOUS EXEMPTIONS ARE PERMANENT OR MUST BE APPLIED FOR EACH YEAR]
- [HEALTH CARE ORGANIZATIONS MUST DECIDE WHAT PROCESS, IF ANY, WILL BE USED FOR THOSE WHO HAVE NOT BEEN VACCINATED. CONSIDERATION MUST BE GIVEN TO WHAT PERSONNEL THIS WOULD APPLY TO, UNDER WHAT CONDITIONS, HOW THESE INDIVIDUALS WILL BE IDENTIFIED AND HOW IT WILL BE ENFORCED.][FOLLOWING IS AN EXAMPLE OF A MASKING POLICY - Health care personnel who are not vaccinated, due to a religious exemption, must wear a surgical mask within six (6) feet of any patient and when entering a patient room during the influenza season.]

Record Keeping:

[HEALTH CARE ORGANIZATIONS WILL WANT TO IDENTIFY RECORD KEEPING PROCEDURES FOR PROOF OF VACCINATION AS WELL AS FOR EXEMPTIONS. THIS INFORMATION WILL BE IMPORTANT FOR HEALTH CARE ORGANIZATIONS WHEN THEY DETERMINE THEIR INFLUENZA VACCINATION RATES AS WELL AS IF CONFLICTS ARISE WHEN THE HOSPITAL DENIES EXEMPTION REQUESTS.]

[HEALTH CARE ORGANIZATIONS ARE ENCOURAGED TO DESCRIBE RESPONSIBILITY FOR REPORTING VACCINATION RATES TO CDC-NHSN TO ENSURE COMPLIANCE WITH FEDERAL AND STATE REPORTING AND PAY-FOR-PERFORMANCE REQUIREMENTS]

Corrective Action Procedures:

Failure to comply with this vaccination policy will result in a written warning. If an individual is not vaccinated or granted an exemption within two (2) weeks of receiving the warning, that individual will be subject to further corrective action, up to and including termination of employment, automatic relinquishment of medical staff membership and clinical privileges, and/or the forfeiture of the right to continue working and providing services within [ORGANIZATION NAME].

[HEALTH CARE ORGANIZATIONS WILL NEED TO IDENTIFY WHAT CORRECTIVE ACTION STEPS IT WILL TAKE IF AN INDIVIDUAL SUBJECT TO THE POLICY DOES NOT MEET THE ESTABLISHED DEADLINES. SOME ORGANIZATIONS WILL GIVE EMPLOYEES WRITTEN WARNINGS AND ESTABLISH A TIME FRAME UNDER WHICH THE PERSON MUST BE VACCINATED OR OBTAIN AN EXEMPTION BEFORE FURTHER DISCIPLINARY ACTION, INCLUDING TERMINATION OF EMPLOYMENT. OTHER ORGANIZATIONS HAVE OPTED TO PLACE THE EMPLOYEE ON IMMEDIATE LEAVE FOR A CERTAIN AMOUNT OF TIME. IN MOST CASES, HEALTH CARE ORGANIZATIONS PROVIDE A TWO-WEEK TIME PERIOD FOR EMPLOYEES TO COMPLY WITH THE POLICY BEFORE FURTHER DISCIPLINARY ACTION OR TERMINATION OCCURS. ORGANIZATIONS ARE ENCOURAGED TO REVIEW THIS COURSE OF ACTION WITH APPROPRIATE LEGAL COUNSEL.

ORGANIZATIONS ALSO NEED TO CONSIDER WHAT ACTIONS THEY WILL PUT IN PLACE FOR OTHER INDIVIDUALS WHO ARE SUBJECT TO THE HEALTH CARE ORGANIZATION POLICY BUT ARE NOT EMPLOYEES OF THE HEALTH CARE ORGANIZATION INCLUDING MEMBERS OF THE MEDICAL STAFF.

ORGANIZATIONS THAT HAVE LABOR AGREEMENTS COVERING SOME OR ALL OF THEIR EMPLOYEES SHOULD CONSIDER WORKING WITH THOSE UNION(S) IN DEVELOPING A HEALTH CARE PERSONNEL VACCINATION POLICY AND THE CONSEQUENCES ASSOCIATED WITH BARGAINING UNIT EMPLOYEES WHO FAILURE TO COMPLY WITH THE HEALTH CARE ORGANIZATION POLICY.]

Infection Control Procedures:

- All individuals are responsible for monitoring their health status and reporting to work only when they are not in a status that would put others at risk of contracting an infection, whether viral or bacterial.
- All employees 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, masking, covering coughs and sneezes, disinfecting equipment and work stations, and not reporting to work when ill.

Vaccine Shortages:

In the event of an influenza vaccine shortage, the situation will be evaluated by [NAME OF ORGANIZATION], relying on the expertise of employee health services, infection prevention and control, human resources, pharmacy, management and medical leadership. Influenza vaccination will be offered to personnel based on job function and risk of exposure to influenza. Priority will be established in concordance with the recommendations by the Department of Public Health.

[HEALTH CARE ORGANIZATIONS WILL WANT TO IDENTIFY WHAT PROCESS THEY WILL USE WHEN THERE IS A SHORTAGE OF VACCINE AVAILABLE. ORGANIZATIONS MAY HAVE ALREADY FACED THIS IN PREVIOUS FLU SEASONS OR DURING THE H1N1 EPIDEMIC AND WILL WANT TO REVIEW THE PROCEDURES THAT THEY USED DURING THOSE SITUATIONS.]