

HARBOR-UCLA MEDICAL CENTER

SUBJECT: EMPLOYEE HEALTH SERVICES PROGRAM POLICY NO: 204

PURPOSE:

To protect the health, safety and well-being of Harbor-UCLA Medical Center (HUMC) Workforce Members (WFMs) through compliance with federal, state and local regulations, supporting education and providing appropriate training and the promotion of safe work practices.

POLICY:

Harbor-UCLA Medical Center's Employee Health Services (EHS) will provide health screening services to all WFMs working at Harbor-UCLA Medical Center facilities and for other Los Angeles County Departments, when appropriate. EHS services are provided to comply with various regulatory, accreditation and licensing agencies, including Titles 8, 17 and 22 of the California Code of Regulations, the Joint Commission, Occupational Safety and Health Administration (OSHA), California Occupational Safety and Health Administration (CalOSHA), Centers for Disease Control and Prevention (CDC) Guidelines and the National Institute of Occupational Safety and Health (NIOSH). Upon authorization, services are also provided to comply with local guidelines including Public Health initiatives. Medical treatment to WFMs shall not be provided unless specifically authorized by the Chief Medical Officer. Emergency care will be provided to HUMC WFMs in the Emergency Room in accordance with provisions in DHS Policies 705 and 705.001. Follow-up treatment must be provided by the WFM's physician or licensed health care professional (PLHCP).

It is the responsibility of the EHS provider to determine if an applicant can perform the essential functions of the job with or without reasonable accommodations. EHS screens all applicants for specific vaccine-preventable diseases and tuberculosis. It is the responsibility of all WFMs to comply with pre-placement and annual health screening requirements. All line managers for this Department are responsible to ensure their staff comply with the annual screening. Failure to comply with this policy is managed by Human Resources.

EHS PROGRAM GOALS:

1. Participate in evaluation and medical surveillance and management of exposures to transmissible diseases and hazardous materials.
2. Meet regulatory requirements regarding workplace health standards and exposure management.
3. Collaborate efforts between EHS and Administration, Human Resources, Infection Prevention and Control, Environment of Care and Safety Officers to promote and implement workplace safety and surveillance programs.
4. Standardize services through automation and unification of protocols.
5. Implement a tracking and monitoring database to improve processes and service delivery.

EFFECTIVE DATE: 3/99

SUPERSEDES:

REVISED: 9/10, 1/14, 1/17, 9/19


REVIEWED: 1/14, 1/17, 9/19

REVIEW COMMITTEE: Infection Control Committee

APPROVED BY:


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HARBOR-UCLA MEDICAL CENTER

SUBJECT: EMPLOYEE HEALTH SERVICES PROGRAM POLICY NO: 204

6. Respect the confidentiality of individuals and handle all information in an ethical manner.
7. Promote respect, acceptance, and appreciation to WFMs for their unique, diverse and important contributions.
8. Pursue opportunities to improve financial performance by decreasing costs and minimizing workers' compensation claims.
9. Provide efficient and quality services for WFMs.

EHS FUNCTIONS:

1. Assess fitness for duty by ensuring the applicant is physically and mentally qualified and capable to perform the duties of their job assignment.
2. Ascertain the health status and the immunity to communicable diseases of WFMs in order to protect the health of all patients, WFMs and the public.
3. Assure and document continued well-being through medical surveillance and annual health screening.
4. Participate in the evaluation and medical surveillance and management of exposures to transmissible diseases and toxic materials.

METHODOLOGY:

1. To accomplish the above functions, EHS interfaces with the Environment of Care Committee, the Infection Prevention and Control Committee, DHS Risk Management Division, Safety Officers, Hazardous Materials Committee and Chief Executive Office, Occupational Health Programs.
2. Confidential medical records are maintained on each WFM. EHS stores and maintains these records as required by County policy and regulatory guidelines.

SERVICES PROVIDED TO COUNTY WORKFORCE MEMBERS:

(Refer to DHS Policy 705.001 to address non-County workforce members).

1. Pre-Placement/Post-Offer Health Evaluation

Pre-placement health evaluation is performed to ascertain medical fitness for duty, document the absence of and/or immunity to certain infectious diseases, and to establish a baseline for those who require ongoing medical surveillance. This assessment also includes a health evaluation prior to respirator fit testing and respirator use. An annual exam will be required for returning retirees and reinstatements that have a break in service of less than one (1) year. All others will be required to undergo a pre-placement health evaluation prior to being rehired. WFMs requiring an accommodation must be referred to DHS Risk Management, Return-to-Work for review of needs and to initiate the interactive process for a reasonable accommodation.

2. Annual Health Screening

Annual health screenings are performed for medical surveillance, job safety and health promotion. It may also include immunizations.

3. Respirator Fit Testing

EHS ensures that any WFM using a respirator is medically able to use that respirator and that it does not present a health hazard to the user. A qualitative fit test will be administered using the Cal-OSHA accepted Qualitative Fit Test as defined in 8 CCR §5144, [Reference: Appendix A].

HARBOR-UCLA MEDICAL CENTER

SUBJECT: EMPLOYEE HEALTH SERVICES PROGRAM POLICY NO: 204

4. **Medical Surveillance – Asbestos, Anti-neoplastic, Hearing, Lead, and DOT Enrollment**
WFMs that may be exposed to certain environmental hazards in the course of their job assignment will undergo screening tests as recommended by published guidelines (i.e., Cal/OSHA, NIOSH). A WFMs enrollment into annual surveillance programs will be determined through submittal of exposure data and relevant working conditions.

5. **Aerosol Transmissible Disease Exposure Control Plan (ATD)**
HUMC follows the established ATD Exposure Control Plan. EHS shall assist with compliance of the ATD Exposure Control Plan consistent with 8 CCR §5199.
Tuberculosis surveillance is included as part of the Pre-Placement Health Evaluation, Annual Health Screening and Post Exposure Evaluation. Services are as follows:
 - All WFM shall receive a baseline TB screening upon hire, using two-step Tuberculosis skin test (TST) or a single Interferon-Gamma Release Assays (IGRAs), or unless workforce member presents documentation validating that such testing has occurred within the preceding 12 month period.
 - After baseline testing for infection with *M. tuberculosis*, WFMs will receive annual TB screenings (i.e., symptom screening for all WFMs and testing for infection of TB for all WFMs with baseline negative test results).
 - WFMs with baseline positive or newly positive test for TB infection or documentation of previous treatment for latent tuberculosis infection (LTBI) or TB disease should receive one chest radiograph result to exclude TB disease. Instead of participating in serial testing, WFMs should receive a symptom screen annually.
 - Identification of “new converters”. A TB skin test (TST) conversion is defined as an increase of at least 10 mm of induration from less than 10mm of induration to 10mm or greater within a two year period.

6. **Exposure Control Plan for Bloodborne Pathogens**
Assessment and treatment of WFMs exposed to blood and/or body fluids in accordance with 8 CCR § 5193.

7. **Promotion of Health and Safety in the Workplace**
EHS will participate in Environment of Care Committee surveillance activities and promote reduction of hazards in the workplace, as directed.

8. **Psychological or Medical Re-evaluations**
Psychological or medical re-evaluations shall only be conducted in accordance with CEO policies and procedures.

9. **Industrial Accidents**
EHS will collectively communicate with DHS Risk Management Division, Return-to-Work to ensure regulatory compliance.

10. **Appeal Process**
A DHS WFM who is determined to not meet required health standards for his/her job requirements, based on health evaluation documentation, has the right to appeal/review the decision per CEO policy and procedures.

HARBOR-UCLA MEDICAL CENTER

SUBJECT: EMPLOYEE HEALTH SERVICES PROGRAM POLICY NO: 204

PROCEDURE:**MEDICAL LEAVE/RETURN-TO-WORK**

Workers' Compensation injuries and illnesses related to communicable disease exposure including blood and other potentially infectious material exposures can be managed by EHS. All other workers' compensation injuries and illnesses are referred to the approved Medical Provider Network. WFM illnesses covered by the Family Medical Leave Act (FMLA)/California Family Rights Act (CFRA) and Pregnancy Disability Leave (PDL) are managed by the Department/Service Manager and the DHS Office of Human Resources Return-to-Work Unit. Medical certification should be provided to the Return-to-Work Unit upon return in accordance to DHS Policies 782 and 782.1.

When the WFM returns to work from a FMLA/CFRA or PDL leave for their own serious illness, they only need to furnish a medical release certification from their PLHCP to Return to Work. No second or third opinions are allowed on releases to return to work by EHS. Only if the WFM is evidencing symptoms of infectious disease may they be screened by EHS.

A WFM may be requested to undergo a medical or psychological re-evaluation after return to work only if there is a reasonable concern that the WFM may be of significant harm to himself/herself, patients, or others. The medical or psychological re-evaluation must be consistent with the duties and responsibilities of the WFM's assigned job. Such requests must be coordinated through the Administrator, DHS Human Resources.

AUTHORITY:

California Code of Regulations,

8 CCR §§ 5144, 5193, 5199

17 CCR Chapters 4 and 8

22 CCR §70723

2 CCR § 7297 et seq

Government Code Sections 12945.1, 12945.2 & 19702.3

Federal Regulations

29 CFR 825.312(b) & (h)

Los Angeles County Tuberculosis Control Manual, 2003 (with 2013 revisions)

CTCA Guidelines, Targeted Testing and Treatment in Latent TB Infections for Adults and Children; revised May 2, 2006; <http://publichealth.lacounty.gov/tb/Forms/LTBI%20guide2002.pdf>

CROSS REFERENCES:

DHS Policies:

925.000-925.999 - Employee Health Services Program and Surveillance Policies