

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: XIII-107 EMPLOYEE HEALTH INFECTION CONTROL	POLICY #: 1125
	VERSION: 1
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DATE APPROVED: 11/21/2017	

PURPOSE: To provide sufficient health services for employees to ensure their on-the-job effectiveness, as well as, to protect the well-being of those under their care.

POLICY: High Desert Health System (HDHS) ASC employees, students and volunteers will be referred to the HDHS Ambulatory Care Employee Health Service (EHS) for employee health care needs and requirements per County, State and Federal Regulations (Contract/Student Employees see section VI. below).

PROCEDURE:

I. Employee Health Services Provides:

A. Pre-Employment Physicals: This examination is performed on all individuals accepted for employment.

1. Job specific requirements will include (but are not limited to):

- a. Medical Questionnaire
- b. Laboratory evidence of immunity or vaccination is required for:
 - Measles, Mumps, Rubella (MMR)
 - Varicella
- c. Hepatitis B At-Risk Personnel are to be screened for Hepatitis B evidence of immunity and vaccination is offered when indicated (Staff identified in categories I & II per Bloodborne Pathogens Exposure Protocol)
- d. Tdap, Acellular Pertussis Vaccine is to be offered to all employees.
- e. Employees declining any of the above vaccines are to sign a declination statement.
- f. Respirator Medical Questionnaire and Fit Testing for N-95 respirator mask.
 - Patient's requiring Airborne Isolation will be deferred until Airborne Isolation is no longer needed, thus N-95 respirator masks for staff are not needed for Airborne Isolation within the ASC.

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- Per OSHA Regulations, N-95 respirator masks are recommended, but not mandatory, to be worn as a preventive measure for exposure to surgical smoke.
- ASC staff who are to wear an N-95 respirator are to complete the Respirator Medical Questionnaire and Fit Testing.

- B. Annual Health Reviews: All employees shall be screened annually. The review includes the following:
1. Abbreviated Medical questionnaire
 2. TB Screening
 3. Job specific requirements (e.g., Hazard exposure screening)
 4. Respirator Annual Fit Testing - Respirator Fit Test if performed elsewhere than at HDHS Employee Health Service must be performed with the same N-95 mask provided at HDHS ASC.
 5. Influenza Annual Vaccination (during flu season) or completion of influenza Declination Form.
- C. Industrial Accidents (IA's)- (Occupational Events) Initial and emergent treatment is offered for job related injuries or illnesses as indicated. These industrial injuries (IA's) (Occupational Events) are referred to:
1. A designated Worker's Compensation Medical Provider.
 2. All IA's are to be coordinated through the HDHS Office of Human Resources return-to-work coordinator either immediately or after the initial evaluation.
 3. Communicable Disease exposures (e.g., blood body fluid exposures) will be evaluated and followed up by EHS/HDHS Urgent Care Clinic **immediately**.
- D. Communicable Diseases- In association with other appropriate consultants, the EHS assists in the evaluation and treatment of occupationally associated epidemics, outbreaks and exposures of communicable diseases.
- E. Maintenance of Records - The EHS will maintain employee medical records and information of personnel in a confidential manner, and per regulatory requirements. Employee Health Records are not to be disclosed without the employee's written consent (except for request for review by regulatory agencies, e.g. Cal-OSHA, Public Health).
- F. Quarterly reports of EHS ASC data and statistics are to be provided to the ASC Advisory Committee.

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II. EHS Notifications to Supervisors

- A. EHS will notify Supervisor and employee in the month prior when the annual health review is due.
- B. After receiving notification from the EHS, the supervisor is responsible to ensure the employee is notified of when his/her health review is due and for providing the time necessary to obtain it. The supervisor is also responsible for notifying the EHS if the employee is on an extended leave and when he/she is expected to return.
- C. It is the responsibility of the employee and immediate supervisor to see that the annual health reviews are completed in a timely manner. The annual health review will be considered overdue if it has not been obtained within the month designated in the notification memo sent to the employee's supervisor and a copy will be forwarded to the HDHS ASC Administrator. The employee and Supervisor(s) may be subject to disciplinary action.
- D. Employees may opt to have their annual health review performed by their personal physician in lieu of the review by the EHS physician, in which case, the private physician must attest to the employee's freedom from communicable disease that interferes with work assignment and his/her ability to perform assigned duties. The annual review form and any special screening tests will need to be completed by the personal physician and returned to the EHS. If any of the conditions or reports are in question then the employee must submit to a health exam by the EHS physician. EHS shall be the final judge as to the employee's fitness for continuation of his/her duties. Any new restriction that is validated will be referred to the HDHS Office of Human Resources (OHR)- Return to Work Coordinator.
- E. The EHS staff will notify the HDHS OHR when employee's Annual Health Review has been completed. OHR will notify the Supervisor of the employee's completion of the Annual Health Review.

III. EMPLOYEE ILLNESS/INJURY ON DUTY

- A. Any employee who develops a routine/non-emergent condition/illness while the employee is on duty, which is not the result of an occupational injury or exposure related, will be sent home or referred to the individual's private physician and referenced to existing HDHS OHR policies regarding sick leave.
- B. If an employee has an emergent illness/injury/situation, the Supervisor will facilitate the appropriate care.
- C. The EHS is not involved in providing medical releases for return to work clearance. The exception to this is the protocols relating to occupationally associated acute communicable illnesses and exposures.

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- D. In the event of an acute communicable disease exposure or illnesses refer to Section IV below.

IV. COMMUNICABLE DISEASES

- A. Employees who develop an acute communicable disease must notify his/her supervisor immediately. Such diseases include, but are not limited to:

Chicken Pox/Shingles	Hepatitis	Mumps
Rubella	Pediculosis	Tuberculosis (active)
Typhoid	Measles	Conjunctivitis
Pertussis	Scabies	Meningitis

- B. The supervisor will notify the HDHS Infection Prevention Nurse and EHS that the employee has contracted or been exposed to an acute communicable disease.
- C. Depending on the clinical evaluation and the duties of the individual involved, the EHS physician can make recommendations regarding employee activity or job duties, or the imposition of extra precautions which may be necessary to minimize the risk of exposure to patients and other staff.
- D. Any employee diagnosed as having an acute communicable disease which may be transmitted in the work environment, must obtain a medical clearance before returning to work. The employee shall obtain a written statement from his/her private physician verifying treatment and clearance to return to full duty. Such statement shall be furnished to the OHR and EHS upon return to work.
- E. Employees who are exposed to the communicable illnesses as listed above in section A or are exposed (or potentially exposed) to a communicable disease which may be transmitted in the work environment are to notify their supervisors in the following time frames:
 1. Blood/body fluid exposure - notify Supervisor/EHS/Urgent Care Clinic **immediately**
 2. Aerosol Transmissible Diseases (e.g., TB, chickenpox, measles, pertussis, meningitis, etc.), notify Supervisor and/or EHS/Infection Prevention Nurse as soon as possible within 24 hours of exposure.
 3. Other Communicable Disease (e.g., scabies, pediculosis, etc.) notify Supervisor and Infection Prevention Nurse and/or EHS immediately.
- F. HDHS Exposure Protocols for Bloodborne Pathogens and TB, are to be followed and public health and CDC guidelines, are to be followed and/or consulted when indicated.

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V. CONTRACT/AGREEMENT EMPLOYEES

- A. All contract employees/vendors must meet the minimum standards of clearance/testing for relevant health examinations as for HDHS ASC employees and receive clearance from EHS prior to beginning a work assignment, per HDHS OHR requirements.

- B. The contract employee who becomes ill, is injured on the job, or is diagnosed with or exposed to a communicable disease is to report immediately to the ASC supervisor or vendor supervisor for determination of the level of care required and directing the employee to the appropriate health care provider (private hospital emergency room, private physician, HDHS Clinic), per emergent need and contractual requirements.

REFERENCES:

California Occupational Safety and Health Act
 Chapter 3, Section 6401, 6402, 6403 and 6404
 Los Angeles County, Department of Health Services Employee Health Policies
 High Desert Health System Policy for Bloodborne Pathogens Exposure Control Plan
 High Desert Health System Policy for TB Exposure Control Plan

Original Date: 07/01/2003
Reviewed: 11/21/2017
Next Review Date: 06/21/2020
Previous Review Dates: 10/30/07; 11/08; 11/28/12; 03/27/13; 05/13/14
Previous Revise Dates: 11/01/07; 11/28/12; 03/27/13; 06/09/14