UCSF Communicable Disease Surveillance and Vaccination Policy

I. Purpose:
This policy identifies requirements for enterprise-wide communicable disease surveillance and vaccinations to reduce the risk of exposure and the transmission of communicable diseases at its many campus settings and to be compliant with regulations. This policy applies to all students, staff, housestaff, fellows, post-doctoral scholars, trainees, faculty, visiting students and scholars, volunteers, contractors and affiliates who have occupational-based risk due to contact with patients, human subjects, animals, or cell lines, potential for blood-borne pathogen exposure, or other regulatory requirement.

II. Definitions:
Risk Category 1
Risk category 1 applies to individuals performing activities with the highest risk of transmission of an infectious agent. These activities usually involve staff who have direct, prolonged contact with the infectious agent, have face-to-face contact with an individual capable of spreading the infection, pose a risk of transmission to a human research subject or laboratory animal or as required by regulation or directive.

Risk Category 2
Risk category 2 applies to individuals performing activities with a probable risk of transmission of an infectious agent as a result of the geographic location of their work – on the clinical unit or in the laboratory.

Risk Category 3
Risk category 3 applies to individuals performing activities with a possible risk of transmission of an infectious agent. These activities usually involve staff who have indirect contact with the source of the infectious agent through airborne transmission, through the use of vehicles, accidental face-to-face contact such as the cafeteria, or an academic or administrative office in the Medical Center building.

Risk Category 4
Risk category 4 applies to individuals performing activities with minimal risk of transmission of an infectious agent. These staff work off-site from the source of an infectious agent and do not travel to any site of the source with the infectious agent – either medical center, dental clinic, or laboratory setting, or are researchers whose methodologies do not require face-to-face contact with high risk subjects.

III. Policy
1. UCSF requires baseline and annual tuberculosis skin testing (TST) and immunity to Measles, Mumps, Rubella (MMR), and Varicella for all occupational groups that meet the definitions of Risk Category I and II and have contact with patients or human subjects through their work or research in the UCSF Medical Center and Ambulatory Care Clinic practices.
2. Other specific regular surveillance, vaccinations, demonstration of immunity, or written declination may be required, recommended, or available for occupational groups working with selected patient, human research subject, animal populations, biological agents associated with research protocols, or for occupational groups covered by specific regulation. Requirements are presented in the UCSF Occupational Health Service Pre-Placement Assessments, Vaccinations and Surveillance Matrix which is reviewed and updated on a periodic basis to reflect changes in requirements.

3. UCSF OHS provides baseline surveillance, immunity testing, and vaccination to new hire UCSF staff and faculty at SFGH and Fresno according to the criteria presented on the attached Matrix (Appendix I). Annual surveillance to currently employed UCSF personnel is provided by SFGH and Fresno. SFVA provides both surveillance and vaccination to UCSF personnel at that facility.

4. Services to contract staff will be consistent with contractual requirements and established UCSF requirements. The vendor is responsible to ensure compliance with baseline and annual surveillance and baseline communicable disease immunity. In the event that OHS provides tuberculosis surveillance, required vaccinations, or medical clearance and respirator fit-testing to agency staff in Risks groups I and II, the vendor will be invoiced.

5. UCSF Student Health Services is responsible for ensuring compliance with these baseline and annual surveillance and vaccination requirements for registered UCSF students. Occupational Health Services is responsible for providing appropriate surveillance and vaccinations to registered students working in research laboratories.

6. New incoming registered students, incoming new housestaff, incoming clinical fellows, incoming post-doctoral scholars, visiting students, visiting faculty and scholars, without-salary faculty who are not also employees, volunteers in campus programs, and individuals who are not otherwise listed in the UCSF payroll system (unless exempted below) are responsible for independently meeting and demonstrating compliance with the surveillance, vaccination standards, and providing evidence of immunity applicable to their occupational risk at the time of hire, appointment, or upon request. Exemptions to the payroll provision include:
   a. UCSF Medical Center Volunteers
   b. Faculty and staff of Howard Hughes Medical Institute
   c. Faculty and staff of the UCSF affiliates Gallo and Gladstone. These programs will be re-charged for services provided by OHS.
   d. Any other case-by-case exemption based on approval of Occupational Health Services Medical Director

In the event that OHS provides baseline tuberculosis surveillance or vaccinations to individuals noted above, the individual will be invoiced.

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7. For personnel within its program scope of responsibility only (see exclusions in #6), Occupational Health Services (OHS) requires evidence of immunity and medical record documentation if required surveillance and vaccinations have been provided elsewhere.

8. Requirements related to tuberculosis and vaccination against communicable diseases will be based on regulatory requirements, Medical Center Infection Control policy, clinical decisions determined by Occupational Health Services (OHS), recommendations made by the Institutional Bio-safety Committee (IBC), or recommendations from the TB control officer for the county.

IV. Program
UCSF will provide direction for the implementation of this policy through program directives and will provide additional direction through related policies.

V. Responsibility
1. Responsibility for monitoring and enforcing compliance is decentralized and owned by the following programs:
   a. Medical Center program managers for Medical Center staff
   b. Medical Staff Affairs office for individuals with clinical privileges
   c. Managers in Schools of Dentistry, Nursing, Medicine, and Pharmacy for faculty and staff with patient contact in clinical programs outside the Medical Center license
   d. Principal Investigators for research programs with human subjects regardless of setting, or travel programs
   e. Graduate Medical Education for House-staff and Clinical Fellows
   f. Graduate Division – Post-Doctoral Affairs
   g. Institutional Bio-safety committee for research laboratories
   h. Institutional Animal Care and Use Committee for animal protection
   i. Environmental Health and Safety Public Health Officer for other campus staff
   j. Managers for any programs hosting visiting students, faculty, or other visitors, vendors, or contract staff

2. OHS makes surveillance and vaccination compliance information (not clinical results) available to responsible enforcement programs.

3. The Chancellor’s Occupational Health and Safety Steering Committee receives periodic reports of compliance with TB skin testing and vaccination requirements.

VI. Related Policies
1. UCSF Medical Center Epidemiology and Infection Control Manual Health Care Worker (HCW) Screening and Immunization Policy 3.1
2. Occupational Health Services Tuberculosis Surveillance and Control Program.
3. UCSF Polio Immunization Policy for the Research Laboratory Setting
4. UCSF Yellow Fever Immunization Policy for the Research Laboratory Setting
5. UCSF Vaccinia Immunization Policy for the Research Laboratory Setting
VII. References
1. CDC “Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Settings”, 2005
http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5417a1.htm
2. CDC, December 26, 1997, “Immunization of Health-Care Workers: Recommendations of the Advisory Committee on Immunization Practices (ACIP) and the Hospital Infection Control Practices Advisory Committee (HICPAC)
http://www.cdc.gov/mmwr/preview/mmwrhtml/00050577.htm
3. CCR, Title 22, Section 70723
4. Joint Commission on Accreditation of Healthcare Organizations (JCAHO)
5. Centers for Disease Control Health Information for International Travel Yellow Book
http://wwwnc.cdc.gov/travel Chapter 4 Tuberculosis
http://wwwnc.cdc.gov/travel/yellowBookCh4-TB.aspx
6. Department of Social Services http://ccll.ca.gov/PG411.htm

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