

# Occupational Health Program (OHP) Communicable Disease Management and Emergency Response Plan

## I. Overview

The member programs of the Occupational Health Program (OHP) are responsible for enterprise-wide communicable disease surveillance, vaccinations, infection control, personal precautions, and exposure screening, prophylaxis, and treatment *to reduce the risk of exposure and the transmission of communicable diseases and to be compliant with regulations*. Occupational Health Programs are Hospital Epidemiology and Infection Control (HEIC), UCSF Occupational Health Services (OHS), and Office of Environment, Health and Safety (EH&S). OHP works collaboratively with Student Health and Counseling Services (SHCS) and SHS has specific responsibilities for these same duties for the student population. This Plan summarizes core responsibilities and links to specific policies within each of the individual OHP programs.

## II. Occupational Exposure Risk

OHS utilizes the following 4 categories to assign overall occupational risk.

### **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 work location in 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 research laboratory setting, or are researchers whose methodologies do not require face-to-face contact with high risk subjects.

## III. Surveillance and Confirmation of Immunity

A. Surveillance and immunization requirements for UCSF personnel are described in the Communicable Disease Surveillance and Vaccination Policy (CDSV). The CDSV 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. [http://www.occupationalhealthprogram.ucsf.edu/Forms/UCSF\\_Communicable\\_Disease\\_Surveillance\\_Vaccination\\_Policy\\_FINAL.pdf](http://www.occupationalhealthprogram.ucsf.edu/Forms/UCSF_Communicable_Disease_Surveillance_Vaccination_Policy_FINAL.pdf)

B. Recommendations for surveillance and vaccination are based on occupational risk and regulation.

1. Exception to these criteria may be made on a case-by-case basis by the Occupational Health Services Medical Director.

2. Routine requirements are described in [http://www.occupationalhealthprogram.ucsf.edu/Forms/Service\\_Matrix.xls](http://www.occupationalhealthprogram.ucsf.edu/Forms/Service_Matrix.xls)

C. Student Health Services is responsible for medical surveillance and confirmation of immunity for students and supports consistent standards with OHP.

## IV. Identified Case, Exposure Definition and Exposure Investigation

A. In the event of an actual exposure, the Technical Advisory Group will develop a case definition and identify the concentric circles of exposure describing the specifics of who was likely to be exposed, where and when the exposure occurred. This exposure definition and identification of concentric circles of exposure will consider all personnel (campus, Medical Center, and students), regardless of the assigned risk level of their occupational category.

## V. Exposure Investigation

A. Hospital Epidemiology and Infection Control (HEIC) receives reports of possible exposures, investigates the exposure via laboratory reports, patient symptoms and other pertinent information, and briefs the Infections Disease physicians (ID MDs). <http://infectioncontrol.ucsfmedicalcenter.org/infection-control-policy-manual>

B. The Public Health Officer in Environment, Health & Safety (EH&S) receives reports of possible exposures in campus settings, investigates the exposure via laboratory reports, patient symptoms and other pertinent information, and briefs the Medical Director, Occupational Health Services. [http://www.occupationalhealthprogram.ucsf.edu/Forms/Campus\\_Communicable\\_Disease\\_Exposure\\_Plan.doc](http://www.occupationalhealthprogram.ucsf.edu/Forms/Campus_Communicable_Disease_Exposure_Plan.doc)

C. Student Health and Counseling Services (SHCS) receives reports of possible exposures within the UCSF student population, investigates the exposure via laboratory reports, patient symptoms and other pertinent information, and briefs the Medical Director of Student Health Services.

1. SHCS Medical Director will notify the appropriate Director of Student Academic Affairs in the event a student has been advised to stay out of classroom activities until symptoms resolve.
2. SHCS Medical Director will notify Hospital Epidemiology and Infection Control in the event a student has been advised to stay out of clinical rotations until symptoms resolve.
3. In the event that a student has been exposed to a communicable disease during the course of their assignment in the UCSF Medical Center and pharmaceutical prophylaxis or treatment is recommended, a prescription will be honored by the UCSF Medical Center pharmacy and Occupational Health Services will be re-charged. All other expenses associated with the exposure will be charged through student health insurance.

D. Non-UCSF registered students: In the event of communicable disease exposure to non-UCSF registered students, UCSF is responsible for stabilization.

E. HEIC, EH&S, OHS, SHCS regularly communicate regarding surveillance and outbreak information; notify the Technical Advisory Group for guidance regarding exposure investigation and follow-up; and implement the Exposure Follow-up process.

1. Technical Advisory Group membership represents (but is not limited to) CMO, Infectious Disease physicians, OHS Medical Director, SHCS Medical Director, and other experts from the specialty

appropriate to the type of exposure. <http://infectioncontrol.ucsfmedicalcenter.org/infection-control-policy-manual>

### Surveillance Matrix

Program	External sources of information	Case Identification	Exposure Investigation
Medical Center Hospital Epidemiology and Infection Control (HEIC)	X	X	X
Medical Center Clinical Laboratories	X	X	
Medical Center Emergency Department	X	X	
UCSF Acute Care Clinics		X	
UCSF Occupational Health Services (OHS)	X	X	X
UCSF Student Health and Counseling Services (SHCS)	X		X
UCSF Office of Environment, Health and Safety (EH&S), Public Health Officer	X		X

## VI. Alerts, Notifications, and Communications

### A. Internal

1. The *Communicable Disease Communication Algorithm* presents the internal alert and notification process in a flow chart. <http://infectioncontrol.ucsfmedicalcenter.org/infection-control-policy-manual>
  - a. The Notifind system (maintained by Medical Center IT and Medical Center Operators) is used to activate and communicate to the 3 tiers of the Algorithm.
  - b. HEIC has primary responsibility to distribute SF DPH notifications by activating Tiers 1, 2, or 3 of the *Algorithm*.
2. Clinical Standards Communications  
CMO communicates clinical guidelines to UCSF Medical Center personnel and campus-based clinicians via the CMO listserv.
3. Additional communicable disease precautions, guidance, and management may be found at:  
<http://infectioncontrol.ucsfmedicalcenter.org/html/ICManual.html>  
<http://www.occupationalhealthprogram.ucsf.edu/>

### B. External Alerts

1. The San Francisco Department of Public Health distributes Health Alerts, Advisories and Updates regarding communicable disease outbreaks, immunization updates and emerging infectious diseases to San Francisco clinicians.
2. SF DPH is the Local Health Authority and has final responsibility defined by Public Law to determine infection control precautions and define the public health response to a communicable disease. SF DPH is the primary source for outbreak information in the San Francisco community and distributes notifications via:
  - a. EMSystem
  - b. Health Alert Email, Fax notification, and Web site: <http://www.sfcddcp.org/healthalerts.html>

Program/Department	EMSystem	Health Alert Notification Database Fax or email
Medical Center Emergency Department	X	
Hospital Epidemiology and Infection Control		X
UCSF Occupational Health Services		X
UCSF Office of Environment, Health and Safety – Public Health Officer		X
UCSF Student Health and Counseling Services		X
Ambulatory Care Screening Clinics (adults and pediatrics)		X

## VII. External Reporting

A. OHS is the source for data on confirmed exposures to UCSF personnel.

1. San Francisco Department of Public Health Reporting

2. Medical Center-based exposures:

[http://www.occupationalhealthprogram.ucsf.edu/Forms/Campus\\_Communicable\\_Disease\\_Exposure\\_Plan.doc](http://www.occupationalhealthprogram.ucsf.edu/Forms/Campus_Communicable_Disease_Exposure_Plan.doc)

3. Campus-based exposures:

[http://www.occupationalhealthprogram.ucsf.edu/Forms/Campus\\_Communicable\\_Disease\\_Exposure\\_Plan.doc](http://www.occupationalhealthprogram.ucsf.edu/Forms/Campus_Communicable_Disease_Exposure_Plan.doc)

4. California Department of Public Health

Medical Center's Regulator Affairs is responsible to make formal reports to CA DPH Licensing and Certification and these may include special requests for information on communicable disease exposures that occur in the Medical Center, including exposures to UCSF staff, faculty, and students.

5. Other External Reporting

In the event of other external agency requests for communicable disease exposure data (e.g. UCOP), OHS reports exposure data for all faculty and staff when the exposure occurs in the Medical Center setting. Reporting follows all existing policies and procedures regarding release of information.

B. SHS is the source for data on confirmed exposures to UCSF students

1. SHS reports diagnosed conditions that are reportable whether or not it occurs in the Medical Center. SHS does not report exposures that do not result in disease.

## VIII. Screening, Tracking, and Restrictions from Work

A. OHS is responsible to screen, restrict from work, track, and treat personnel with an occupational exposure. OHS may use the following steps and tools to screen, restrict from work, treat, and track personnel identified as potential exposed: <http://infectioncontrol.ucsfmedicalcenter.org/infection-control-policy-manual>

B. Student Health is responsible to screen, restrict from academic activities, track, and treat UCSF students with a communicable disease exposure regardless of source of the exposure (except Blood borne pathogen exposure).

***C. All UCSF students, staff, faculty, house staff, clinical fellows, other trainees, volunteers and contracted employees who are infected with potential pathogens can be restricted from work to prevent transmission to patients, staff, faculty and trainees until they are symptom-free and***

***cleared for return to work. Campus recommendations are consistent with restriction guidelines outlined by the UCSF Medical Center Infection Control Manual <http://infectioncontrol.ucsfmedicalcenter.org/infection-control-policy-manual> or as designated by the Public Health Officer for the San Francisco Department of Public Health.***

D. Any staff, faculty, trainee, or student who has been exposed to a communicable disease and meets requirements for prophylaxis but who either refuse prophylaxis or are not able to take prophylaxis can be restricted from work, clinical, or academic activities to prevent transmission until the end of the incubation period.

## **IX. Prophylaxis and Vaccination**

A. OHS is responsible to administer individual and mass prophylaxis and vaccination to eligible occupational groups. SHCS is responsible to administer individual prophylaxis and vaccination to eligible students consistent with OHS practice.

1. Eligibility for prophylaxis or vaccination is consistent SF DPH guidance (Local Health Authority), and the recommendations by UCSF Technical Advisors.
2. The determination of eligibility for prophylaxis and / or vaccination will depend on the nature of the infectious agent, the extent of community transmission, and directions from the local public health authority.
3. The primary goal for determining eligibility for prophylaxis and/or vaccination will be the reduction of the risk of transmission to the highest risk patient populations and high risk staff, faculty and trainees.
4. Depending on the availability of pharmaceutical inventory, clinical standards, and SF DPH guidance, and other regulatory requirements targeted to the source of the inventory, other goals that may be considered when determining eligibility for prophylaxis or vaccination include maintenance of critical infrastructure positions.
5. This determination will be performed when there are general measures for prevention such as vaccination, when there is prophylaxis on an individual or mass basis, or when directed by the local health authority.
6. Medical Center and campus personnel and students who are exposed to a communicable disease as a result of their clinical rotation in a Medical Center setting may receive prophylaxis from OHS.

## **X. Treatment**

A. OHS provides treatment to staff, faculty and trainees with an occupational exposure to a communicable disease (e.g. exposure occurs as a result of patient care, research or in the course of the usual and customary activities) unless the communicable disease is endemic in the population.

B. OHS determines whether the exposure treatment and any resulting lost time from work are related to work. A report for workers compensation may not be filed in all cases.

C. Symptomatic personnel (regardless of illness) whose exposure cannot be attributed to an occupational exposure, are referred to their private physician. Standard sick leave reporting and return to work clearance procedures are followed.

D. SHCS provides treatment to students who have selected SHCS as their primary care provider.

## XI. Infection Control and Personal Protective Equipment

A. HEIC is responsible to establish and confirm the appropriate level of Medical Center clinical infection control precautions which determines the type of personal protective equipment. These precautions will be consistent with guidance from the Local Health Authority (SF DPH). <http://infectioncontrol.ucsfmedicalcenter.org/>

B. Information related to infection control and appropriate level of precautions and associated personal protective equipment distributed to the campus community will be consistent with HEIC directions.

## XII. Non-Pharmaceutical Interventions

A. OHP recommends the following non-pharmaceutical interventions and education resources to reduce the spread of communicable disease in the UCSF community.

These include:

- **Personal Hygiene:** make tissues, hand soap, no-touch trash and towel dispensers, hand sanitizers
- **Practice Cough Etiquette** <http://www.sfcddcp.org/index.cfm?id=97>
- **Clean work services, computers, telephones, computer equipment and avoid sharing these work tools**
- **Education and Information:**
  - WHO and US Federal Government Phases, Goals, and Actions
  - Communicable Disease Self Monitoring Form
  - Individual, Family, and Community Response to Pandemic Influenza
  - UCSF Precautions for Febrile Respiratory Illness
  - UCSF Workplace Guidelines <http://infectioncontrol.ucsfmedicalcenter.org/infection-control-policy-manual>
  - San Francisco Department of Public Health <http://sfcddcp.org/H1N1ill.html>
- **UCSF Listservs**
  - UCSF Today <http://www.ucsf.edu>
  - UCSF Health and Safety or Chancellor Listserv notifications
  - CMO Listserv Communications
  - Human Resource listserv
  - iJET Alert Notices
  - Postings are compiled at: <http://www.occupationalhealthprogram.ucsf.edu/>
- **Seasonal Influenza Vaccine**

UCSF offers seasonal flu vaccination at no charge to all UCSF staff, faculty, and students. The vaccination program is managed by the UCSF Occupational Health Services. A focused flu vaccine campaign is offered each fall, usually in October and November. Information about seasonal flu vaccine is posted on UCSF Today or the Occupational Health Program website <http://www.occupationhealthprogram.ucsf.edu>

OHS is responsible to monitor and make recommendations regarding additional vaccinations that may be appropriate during a pandemic or emergency.
- **Social Distancing Strategies**

Depending on severity of an outbreak and recommendations from SF DPH and UCSF TAG, additional social distancing strategies to reduce person-to-person contact may be implemented at the direction of the Chancellor or designee. These include:

  - Telecommute or modified work schedules
  - Reduce face-to-face meetings and interactions

- Cancel Public Gatherings
- Engineering controls such as physical barriers
- Dismissal of school programs (includes university and child care)
- Quarantine in University-sponsored housing

### **XIII. Human Resource Policies**

A. UCSF campus and Medical Center Human Resource policies continue to apply to use of sick and vacation leave and alternate work arrangements. <http://ucsfhr.ucsf.edu/index.php/pubs/article/family-and-medical-leave-act-fmla/>

### **XIV. International Business Travelers**

A. UCSF business travelers who receive pre-travel medical consultation and vaccination services from the UCSF Travel Medicine and Vaccination Clinic will receive education and guidance regarding communicable diseases they may encounter (including H1N1) in the locations where they are traveling.

B. Additionally, UCSF business travelers who register for Business Travel Accident insurance will receive communicable disease and other alerts.

C. UCSF travelers at high risk for exposure to tuberculosis as a result of business travel will be referred to OHS for post-travel surveillance.

D. UCSF travelers who become ill as a result of business travel may contact OHS for determination of eligibility for Workers Compensation services.

E. UCSF travelers who have symptoms of communicable disease or infection upon return from travel must not return to work until cleared by OHS.

1. UCSF student travelers who have symptoms of communicable disease or infection upon return from travel are cleared by SHCS.

## **XV. Appendices**

### **1. Mass Prophylaxis**

#### **A. Target Population**

- i. OHS coordinates with UCSF Technical Advisory Group and other ad hoc groups (e.g. Ethics committee) to identify eligible UCSF occupational categories to receive prophylaxis or treatment.

#### **B. Pharmaceuticals and Supplies**

- i. OHS coordinates with UCSF Pharmacy to determine availability of appropriate medications and to distribute to service delivery locations.
- ii. In the event that pharmaceuticals are distributed through non-traditional vendors (e.g. SF DPH) and regardless of the intended UCSF target population (Medical Center vs. campus), the UCSF Pharmacy is responsible to receive, store, and manage the distribution of pharmaceuticals from all sources.

#### **C. Personnel**

- i. OHS may request staff support for medical screening from Office of Environment, Health & Safety.
- ii. OHS may request additional staff support (services including clinicians, safety, security, pharmacy, other mental health providers, and administrative support personnel) through HCC Labor Pool to provide mass prophylaxis.

#### **D. Space**

- i. OHS coordinates with Medical Center discharge lounge, inpatient and ambulatory care units, and Center conference rooms for primary space for mass screening and prophylaxis of Medical Center personnel.
- ii. OHS coordinates with campus room scheduling for mass screening and prophylaxis of campus personnel and students.
- iii. OHS may request additional space resources through HCC.

#### **E. Clinical Care Documentation**

- i. OHS documents pharmaceutical administration in STIX.

#### **F. Education and Medication Information**

- i. OHS provides Education materials at the time of medication administration which include guidance regarding side effects and follow-up care.



## 2. Stay at Home Guidelines

### RESPIRATORY VIRAL ILLNESS (including Influenza) UCSF STAY AT HOME - RETURN TO WORK GUIDELINES FOR STAFF <sup>(1)</sup>

Symptoms	Stay At Home	Return to Work
<b>FEVER</b> <ul style="list-style-type: none"> <li>Fever (T38C or 100.4F)</li> </ul>	T > 38C or 100.4F	<ul style="list-style-type: none"> <li>No fever for 24 hours<sup>(2)</sup></li> </ul>
<b>RESPIRATORY SYMPTOMS without fever</b> <ul style="list-style-type: none"> <li>Cough</li> <li>Sore throat</li> <li>Nasal Congestion / Runny Nose</li> <li>Myalgia (body aches)</li> </ul>	One or more symptoms on high risk units <sup>(3)</sup>  Two or more symptoms on all other units <sup>(4)</sup>	<ul style="list-style-type: none"> <li>24 hours after onset of symptoms</li> </ul> <b>AND</b> <ul style="list-style-type: none"> <li>No fever<sup>(2)</sup></li> </ul> <b>AND</b> <ul style="list-style-type: none"> <li>Symptoms have significantly improved</li> </ul>
<b>RESPIRATORY SYMPTOMS with fever (presumed Influenza)</b> <ul style="list-style-type: none"> <li>Fever (T38C or 100.4F)</li> <li>Cough</li> <li>Sore throat</li> <li>Nasal Congestion / Runny Nose</li> <li>Myalgia (body aches)</li> </ul>	T > 38C or 100.4F and at least one symptom	<ul style="list-style-type: none"> <li>At least 5<sup>(5)</sup> days after onset of symptoms</li> </ul> <b>AND</b> <ul style="list-style-type: none"> <li>No fever for 24 hours<sup>(2)</sup></li> </ul> <b>AND</b> <ul style="list-style-type: none"> <li>Symptoms have significantly improved</li> </ul>

<sup>(1)</sup> Staff includes all employees, faculty, temporary workers, trainees, volunteers, students, and vendors, regardless of employer. This includes staff who provide services to or work in UCSF Medical Center patient care or clinical areas.

<sup>(2)</sup> Assumes the individual has not taken fever-reducing medication (e.g. Tylenol, Motrin).

<sup>(3)</sup> High risk units include adult and pediatric hematology / oncology / BMT services (7 Long, 11 Long, 14L annex, Hematology / Oncology Outpatient Clinic, Infusion outpatient clinic, and Pediatric Treatment Center.) **For high-risk units, there is a zero tolerance policy of working while ill.**

<sup>(4)</sup> If you have received the seasonal influenza and H1N1 vaccine and work on units other than high-risk units, you may work with minimal symptoms if you adhere to excellent hand hygiene and wear a mask when performing direct patient care activities.

<sup>(5)</sup> For the purposes of counting the days, the onset of symptoms happens on Day 0. Day 1 begins the next calendar day. eg. Symptoms begin on Sunday; Sunday is day zero; Monday is day one; and Friday is day five. You can return to work **if well**.

Questions about the process should be directed to Occupational Health Services at 415/885-7580 or [OHS@ucsfmedctr.org](mailto:OHS@ucsfmedctr.org)