**PURPOSE:**

Because of close interaction between health personnel, patients, and visitors, hospitals may present many potential opportunities for transmission of infectious/communicable diseases. The goal of hospital-based employee health programs is to play a major role in diagnosing, treating and preventing infectious/communicable diseases in health care workers (HCWs). The purpose of the following policy is to establish guidelines for restricting employees and/or credentialed practitioners, contractors and volunteers from the work place when actively infected with, or have been exposed to certain communicable diseases/infections, in order to prevent the spread of disease or infection.

**Employee Communicable Diseases and Work Restrictions:**

1. All CHLA work force as defined may need to be restricted from work place access if determined infectious or with a communicable disease that could be transmitted.
   1. CHLA work force is expected to report to their supervisor, any of the following:
      1. infectious disease diagnosis or symptoms
      2. exposure to a communicable disease for which there is no current immunity or an unknown immune status, or
      3. skin lesions
   2. This requirement includes anyone diagnosed with serious and/or easily transmissible diseases (i.e. chicken pox, measles, tuberculosis, rashes, lice, and scabies)
      1. Exception include mild common conditions (e.g. upper respiratory infections, sinusitis, or otitis media)
      2. Required reporting should be directed to Employee Health Services (EHS).
2. Managers should report to Employee Health Services (EHS) and Infection Prevention & Control (IPC) any high incidence of cough, sore throat, diarrhea and/or vomiting, fever is identified in their work area or unit. Timely reporting of clusters of illness can help identify outbreaks early.
3. Work force returning to work after treatment for a serious infectious/communicable disease must be cleared by EHS, regardless of the length of time off work. See IC 602.1 for a detailed list of work restriction recommendations for select infectious diseases.
   1. Employees or medical staff with diarrheal diseases will be restricted from work for 24 hours after the resolution of symptoms. Employees who handle food will be restricted from work for 48 hours after the resolution of symptoms.
4. EHS will notify the IPC team following work force exposure or diagnosis of a serious communicable disease when patient follow-up is necessary. In addition, EHS can seek assistance from the patient’s physician, the Medical Director of IPC or EHS medical director when appropriate.

**Exposures at CHLA:**

1. IPC and/or EHS will identify that a communicable disease exposure has occurred and notify the manager(s) of the impacted work area immediately.
2. The unit manager(s) will provide IPC with a list of all potentially exposed Staff. Potential exposure will be determined based on the mode of transmission and communicability of the particular disease, and the location and time of exposure.
3. IPC will notify all potentially exposed staff of the exposure, and refer those with doubtful or unknown immunity to EHS for further evaluation.
4. Notified Staff will make an appointment to be seen in EHS for evaluation.
5. EHS will perform appropriate screening, testing, education and counseling and notify unit manager or division head of non-immune Staff who are to be relieved from duty involving direct contact with patients during incubation period;
6. If requested, IPC will provide county or state Public Health agency with list of exposed Work Force and indicate follow-up action taken.

**ATTACHMENTS:**

1. [IC – 602.1 Summary of Suggested Work Restrictions](https://secure.compliance360.com/ext/CQWkgeFIAmFzBmlYeas3Fw==)

**REFERENCES:**

1. APIC Text of Infection Control and Epidemiology 4th Edition, Ch. 100 Occupational Health, 2014

**POLICY OWNER:**

*Director, Infection Prevention and Control*