

POLICY CLASSIFICATION: TMC Health	POLICY TYPE: Employee Health	PAGE: 1 of 3
DOCUMENT ID: EH-01-11	VERSION: C	EFFECTIVE: 2/20/2024
TITLE: Influenza Vaccinations		

Purpose:	In order to promote patient and staff safety by decreasing exposure to the influenza virus and to reduce TMC HealthCare (TMCH) staff absenteeism through increased influenza vaccination rates, TMCH will provide the applicable influenza vaccination annually.
Definitions:	None
Keywords:	Influenza, Vaccination, Exemptions
Applicability:	TMC Hospital Main, TMC Hospital at Rincon, and TMCHone
Statement of Policy:	TMCH is committed to providing a safe environment for TMCH patients, staff, volunteers and visitors by providing annual seasonal influenza vaccinations to all that provide services to the TMCH organization. This includes, but is not limited to, employees, licensed independent practitioners, agency personnel, contract personnel, vendors and volunteers.
Procedure:	<ol style="list-style-type: none"> 1. Annual vaccination with the seasonal influenza vaccine is mandatory for all TMCH staff; this includes but is not limited to employees, credentialed staff, volunteers, agency and contract personnel, as well as vendors. 2. Influenza vaccination clinics will be held on the TMC campus throughout October of each year, with hours conducive to increased attendance. Notification of clinics location and hours are via mass email, TMCH intranet, eLounge, flyers and other forms of organizational mass communication. 3. Acceptable reasons for vaccination exemption are medical contraindication to the influenza vaccination as defined by vaccine manufacturer's recommendations as well as Center for Disease Control and Prevention (CDC) recommendations and contraindication to one's religious beliefs. <ol style="list-style-type: none"> 3.1. Medical contraindication/exemption documentation is required yearly via forms completed by staff's personal physician. 3.2. Medical contraindication/exemption may be considered permanent

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	<p>if severe allergic reaction to any vaccine component or history of Guillain-Barre Syndrome (GBS) exist.</p> <p>3.3. A new updated Religious exemption document is required yearly via the current years exemption form.</p> <p>3.4. Employee Health Services (EHS) reviews exemptions to the annual influenza vaccination program; consultation with infectious disease medical director and/or Human Resources as needed.</p> <p>4. All TMCH staff exempt from vaccination for approved reason will be required to don a droplet/surgical mask upon entering patient care areas (i.e., hallways, nursing stations, patient rooms, procedure/exam rooms) and within group settings (i.e., meetings, educational settings). Masks are not required when alone in a private office.</p> <p>This activity will commence during influenza season as defined by the CDC, annually October 1 through April 30.</p> <p>5. Yearly compliance period will be from date of vaccine availability through the 2nd week of November (on or around November 15). New employees that onboard during influenza season must provide proof of current season's influenza vaccination, or obtain an approved exemption.</p> <p>Vaccination will remain available to staff while vaccine supplies last.</p> <p>6. Individual department leadership to ensure general program compliance of department staff through available resources.</p> <p>6.1. Compliance with the program is reflected in the flu non-compliant report in Report2Web.</p> <p>6.2. Those staff listed on the departmental exemption report in Report2Web are required to don a mask during influenza season as defined by the CDC, annually October 1 through April 30.</p> <p>7. Individual department leadership to ensure that established Human Resources disciplinary policy is utilized when addressing non-compliance.</p> <p>8. EHS will be accountable for extraction of overall immunization data for</p>
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	<p>purposes of overall organization compliance, and communication of such data, as well as annual National Healthcare Safety Network (NHSN) reporting.</p> <p>9. Vaccination rates and goals will be evaluated annually; annual data will be communicated to the organization's key stakeholders.</p>
Standard Work:	TMCH has not adopted Standard Work for this Policy.
References:	<p>National Healthcare Safety Network (NHSN), Surveillance for Healthcare Personnel Vaccination</p> <p>Center for Disease Control and Prevention (CDC), Influenza Prevention Strategies for Seasonal Influenza in Healthcare Settings (05/13/2021) https://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm</p> <p>COVID-19 Vaccination and Testing Emergency Temporary Standard [Docket no. OSHA-2021-0007]; Federal Register/Vol. 86, No. 212 (11/5/2021): https://www.osha.gov/sites/default/files/laws-regs/federalregister/2021-11-05.pdf</p> <p>The Joint Commission, Influenza Vaccination</p>
Policy Creator:	Vice President; Chief Human Resources Officer
Executive Sponsor:	Vice President; Chief Human Resources Officer
Review:	This Policy shall be reviewed as needed per changes in applicable laws, regulations, and accreditation or operational requirements, but no less often than every 3 years.

Approved: /s/ Alex Horvath 2/20/2024
 Alex Horvath Date
 Vice President; Chief Human Resources Officer