

I. PURPOSE

The purpose of this policy is to assign actions and responsibilities for confirming an exposure, identifying those people likely exposed to a communicable disease and determining the risk of transmission and the appropriate follow-up activities.

II. POLICY

As required by the California Labor Code Section 6401.7 (Injury and Illness Prevention Program) the Departments of Hospital Epidemiology and Infection Control (HEIC) and Occupational Health Services (OHS) will coordinate required follow up and implement the action plan when an exposure is reported. A technical advisory meeting will be convened within 24 hours or one business day of the initial report. HEIC is responsible for activities related to patients and visitors. OHS is responsible for activities related to students, staff, faculty, trainees, volunteers and contractors. Student Health Services (SHS) will be responsible for prophylaxis, treatment and follow-up related to exposures in students.

A debriefing will occur at the closure of the exposure follow-up activities.

III. PROCEDURE

- A. A possible exposure is reported to the Department of HEIC and an initial investigation is initiated.**
- B. HEIC takes the following actions:**
 1. Sends a text message alert to Occupational Health Services (OHS).
 2. Sends an email with additional detail to OHS and the Office of Environmental Health & Safety (EH&S)
- C. OHS takes the following actions:**
 1. Telephones HEIC and acknowledges receipt of the exposure information.
 2. Assigns OHS liaison for communications with HEIC.
 3. Provides HEIC with contact information for the assigned liaison
- D. HEIC investigates the exposure via laboratory reports, patient symptoms and other pertinent information, and briefs the Infections Disease physicians (ID MDs).**
- E. If the diagnosis is ruled out, or if there is no exposure, HEIC will notify OHS and EH&S via email. No further action is required.**

F. If the diagnosis is confirmed or exposure follow-up is required, HEIC, OHS and EH&S work together to coordinate the exposure investigation and communication.

1. HEIC takes the following actions:
2. Identifies times, locations, organism and communicable period.
3. Confers with ID MDs to determine initial extent of exposure, the need to convene the Technical Advisors* and stakeholders meetings.
4. Determine preliminary timeline of exposure, incubation, transmission.
5. Sends emails with preliminary summary to Technical Advisors within 24 hours of confirmation of diagnosis and attach [Notification Algorithm](#).
6. When immediate action is required, convenes Technical Advisors meeting within 24 hours of initial report.

G. Technical Advisor Decision-Making:

1. The Technical Advisors 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, using the [Actions & Notifications Checklist](#).
2. The Technical Advisors will identify the stakeholders. Stakeholders may include senior leadership, departmental managers, appropriate physicians/groups and others whose expertise or involvement is necessary for appropriate follow-up.

H. HEIC Decision-Making:

1. HEIC will determine which patients and visitors to notify, and the content and the method of notification dissemination.
2. HEIC will call a Stakeholders' Meeting

I. I. Stakeholder Decision-Making:

1. Stakeholders will confirm assumptions of the technical advisors regarding concentric circles and the types of activities/functions of the involved areas.
2. The stakeholders will determine which groups of students, staff, faculty, volunteers, trainees and contractors to contact about possible exposure. These groups will reflect location-specific exposures as well as exposures in individuals who provide functions across the institution.
3. The stakeholders will provide input on who will collect exposed contacts' names and schedules from each identified group or department and send to OHS.
4. The CMO will make recommendations to activate Hospital Command Center/Emergency Operations Center (HCC/EOC) if indicated (trigger Disaster Plan).

J. Screening and Testing

1. HEIC notifies patients and who might be exposed.
 - a. HEIC develops a list of potentially exposed patients and reviews this list with the appropriate managers.
 - b. HEIC develop notification letters/scripts/response templates that include testing and other follow-up recommendations.
 - c. Seeks input from stakeholders, OHS, Risk Management, Patient Relations, CMO and ID MDs.
 - d. Obtains final language approval from Risk Management
 - e. Coordinates notification letter translation with-Patient Relations
 - f. Works with Interpreter Services for voice contact as necessary
 - g. Sends notification letters/scripts to identified patients/legal guardians.
 - h. Visitors: when patients receive notification, they may contact HEIC with visitors' information.
2. Under infrequent circumstances, HEIC works with Patient Relations and other appropriate departments to provide screening or testing. Decisions about UCSF-sponsored screening and testing will be made by the Technical Advisors group.
3. OHS notifies, screens and tests staff, faculty, trainees, volunteers and contractors who might be exposed. OHS will provide exposed student names to SHS. OHS will:
4. Assist the identified units/functions in developing lists of potentially exposed students, staff, faculty, trainees, volunteers or contractors.
5. Develop communication for exposed staff and their supervisors. Communication will include general background, screening, testing, prophylaxis, treatment, and contact information for follow-up questions.
6. OHS will obtain:
 - a. Input from stakeholders, OEH&S, SHS, Risk Management, Patient Relations, CMO and ID MDs.
 - b. Final approval for language from HR/Risk Management.
 - c. Assess the immune status of the potentially exposed (when required) through review of existing records, obtaining new screening, or obtaining current immune status.
 - d. Coordinate the provision of symptom review, prophylaxis or treatment.
 - e. Record the names of identified students, staff, faculty, trainees, volunteers and contractors and their participation status.

K. Reporting

1. HEIC notifies the San Francisco Department of Public Health (SFDPH) and/or California State Department of Public Health (CA-DPH), Communicable Diseases Branch as required by Title 17 ("Reportable Diseases")
2. HEIC and OHS jointly develop a summary of the exposure activities and reports to the Infection Control Committee→Quality Improvement Executive Committee→Executive Medical Board→Governance Advisory Committee.
3. HEIC reports the exposure to the Department of Regulatory Affairs so a report may be made to CA-DPH Licensing and Certification as required.

IV. DEFINITIONS

A. Technical Advisors are a defined group of UCSF personnel who will determine the severity of the exposure and recommend procedures for follow-up. Included in this group are:

1. Chief medical Officer (CMO)
2. Occupational Health Services (OHS)
3. Adult & Pediatric infectious disease physicians (ID MD's)
4. Office of Environmental Health & Safety (EH&S)
5. Student Health Services (SHS)
6. Patient Safety and Quality Services directors
7. HEIC Director

B. Stakeholders include the Technical Advisors group, identified senior leaders and/or managers of the identified exposed Patient, Visitors, Students, Staff, Faculty, Volunteers or Contractors.

Last revision: 2/08

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