

# **Pre-Employment Health Screening**

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# 1. Purpose of policy

To enable Auckland DHB to fulfil its obligation within the Health and Safety at Work Act 2015 to take all practicable steps to keep workers, patients, visitors, and others safe in our workplace.

# 2. Policy Statements

Auckland DHB is committed to:

- improving, promoting and protecting the health and wellbeing of workers and patients.
- taking all practicable steps to prevent harm to workers and others as required by the Health and Safety at Work Act 2015.
- protecting patients and service users, which includes taking reasonable precautions to protect them from exposure to communicable diseases while they are under the care of the DHB.
- ensuring workers have immunity against vaccine preventable infections that they are potentially exposed to in the workplace.
- ensuring workers are capable of safely performing essential and required tasks of the proposed role, and can comply with required hazard and risk mitigation.
- putting in place any reasonable accommodations to ensure that people with disabilities or preexisting health conditions are not disadvantaged during the recruitment process and are treated fairly when considering working arrangements and the working environment.
- collection, use and disclosure of employee health information in compliance with the Privacy Act 2020, the Health Information Privacy Code 2020, and the Human Rights Act 1993.

# 3. What is pre-employment health screening?

Pre-employment health screening refers to a variety of processes undertaken to assess whether preferred candidates are capable and fit to undertake a particular role. Its primary purpose is to help prevent work-related illnesses, injuries and the spread of contagious diseases.

The extent of any pre-employment health screening will be dependent on the requirements, hazards and risks associated with any given role that may impact on the health and wellbeing of either the individual carrying out that role and/or any patients or colleagues they may have contact with.

Any candidate under offer consents to Auckland DHB Occupational Health and Safety assessing their fitness to undertake that role.

# 4. The importance of pre-employment health screening

Auckland DHB has a duty of care to workers to ensure that they, and their workplaces, are safe and healthy in line with health and safety obligations and employment law. Pre-employment health screening has an important role in helping identify and consider prior to employment, any health condition or disability that may require:



- accommodations being made to the workplace or work tasks to enable the individual to safely carry out the duties they have been identified as the preferred candidate to carry out, or
- restrictions being placed on their duties.

# 5. Who needs pre-employment health screening?

Health screening should be carried out for all preferred candidates for roles at Auckland DHB, including all directly paid employees, temporary workers (supplied by an agency or any other external contractor), students, trainees and volunteers.

This includes when:

- an individual first takes up their position (whether or not this is preceded by a period of training)
- an existing member of staff moves to a different job and this significantly changes the nature
  of the work they will be undertaking, or the hazards or risks they will be exposed to changes.

Any assessment will need to be proportionate to the risks associated with the type of activities they will be required to undertake as part of their normal role.

Assessments should take place after an offer of appointment (regardless of whether this is a conditional or unconditional offer) when the worker is considered the preferred candidate, **but prior to the commencement of their employment/placement** or training, except for individuals on work experience.

## 5.1 Agency/external contractor requirements

If a worker is supplied by an agency or other external contractor under a framework agreement, the work health assessment may be undertaken by that employer's occupational health provider.

Managers should ensure that agencies are clear about what level of clearances, (including vaccination requirements) are required for different positions to avoid any unnecessary delays in using contractors. Written confirmation should be obtained from the agency to confirm that they have carried out an appropriate assessment, the worker is fit to start work, and what, if any, reasonable adjustments need to be considered.

#### 5.2 Work in other healthcare settings

Work in other health care settings can have an impact on the Occupational Health risk assessment for a worker.

If an existing employee returns from working overseas or from a secondment of greater than 3 months to another workplace within Aotearoa, the employee should be reviewed by the occupational health service prior to returning to their usual role within Auckland DHB.

If an existing employee intends to commence or make changes to their secondary employment these changes should be reviewed by the Occupational Health service prior to commencement.



#### 5.3 Work in areas where routine health monitoring takes place due to the nature of the work

Health monitoring looks at whether a worker's health is being harmed because of what they are being exposed to while they are at work. We carry out routine monitoring in specific work areas where work involves exposure to substances hazardous to health (as set out in Health and Safety at Work Act regulations).

Monitoring must be carried out at the beginning of a worker's employment during the preemployment phase for these workers as part of the obligation to establish baseline data.

# 6. Screening for Infectious Disease and Immune Status

As part of the pre-employment health screening process preferred candidates will be screened for immunity to common vaccine preventable infectious diseases.

Workers will also be screened to determine if they have or carry certain infectious diseases that may pose a risk of transmission to others.

The purpose of this process is to:

- manage risk to the individual worker if disease exposure should occur to them; and
- to reduce the risk of onward transmission of infection to other workers, patients and visitors.

Preferred candidates are screened by use of a questionnaire and provision of their laboratory results and/or vaccination records. Additional blood tests, X-rays, or assessment by the Occupational Health team may also be required.

It is expected that any preferred candidate will provide their records or have any required investigations or assessments in a timely manner to allow recruitment to progress.

#### 6.1 Infectious diseases we consider

Auckland DHB may screen for immunity or active disease for the following, dependent on role:

- SARS-CoV-2 / COVID-19
- Measles
- Mumps
- Rubella
- Varicella (Chicken pox)
- Pertussis
- Hepatitis B
- Tuberculosis (TB)
- Methicillin-resistant Staphylococcus aureus (MRSA)
- Meningococcal

In some circumstances we may also screen for:

- human immunodeficiency viruses (HIV)
- Hepatitis C



Other infectious diseases may be added following an Occupational Health risk assessment. There may be circumstances where, in order to manage infectious diseases risk, we will issue reasonable health and/or safety instructions which may include a vaccination requirement for certain workers.

Although this guidance is expected to cover the vast majority of circumstances, specific requirements relating to individual factors or unique workplace exposure scenarios will be considered on a case by case basis.

### 7. Vaccine Preventable Diseases

Auckland DHB has an obligation to take reasonably practicable steps to ensure that healthcare workers do not pose a risk of transmitting infection to patients. Similarly, it is essential to ensure that the risk to workers of acquiring infection from patients is minimised.

The requirement to ensure immunisation against common vaccine-preventable diseases will be dependent on an individual's role in the workplace and the risks of exposure that their role may pose. This may include workplace exposure to biological hazards, patients, the general public and other workers.

As part of the pre-employment health screening process Occupational Health will risk assess vaccination requirements or recommendations prior to work starting. Occupational Health will advise which vaccinations are required prior to commencement of employment and which may be scheduled after the worker commences.

Workers who are not yet fully vaccinated or are not demonstrating immunity may need to have their employment commencement delayed, job tasks restricted, or be relocated to another work area depending on the risk. Occupational Health will advise the hiring manager of any task restrictions or modifications required, and the hiring manager will determine whether this can be accommodated. Workers must demonstrate they are fully vaccinated to be employed in or allowed to work in areas where vaccine protection is required.

**Note** the COVID-19 Public Health Response (Vaccinations) Order 2021 requires vaccination for those working in the Health and Disability Sector including Workers who are employed or engaged by certified providers and carry out work at the premises at which health care services are provided. As Auckland DHB is a certified provider, it is our view that the Order applies to almost every worker employed by Auckland DHB. However, we will consult with any employee who queries whether their role is covered by the Order.

## 7.1 Areas where vaccination is required

We have risk assessed roles in the DHB to be in the following categories

- Category A: Protection against specified vaccine preventable diseases is required.
- Category B: Protection against vaccine preventable diseases is recommended but not required



## Category A: Protection against specified vaccine preventable diseases is required.

#### Worker has EITHER

Direct physical contact with:

- Patients and clients (including exposure prone procedures)
- Deceased persons and/or body parts
- Blood, body substances, infectious material or surfaces or equipment that might contain these (for example soiled linen, surgical equipment, syringes)

#### OR

Contact that would allow the acquisition or transmission of diseases that are spread by respiratory means including workers:

- whose work requires frequent and/or prolonged face to face contact with patients or service users, e.g. interviewing or counselling individuals or small groups, performing reception duties in an emergency/outpatients department
- whose normal work location is in a clinical area such as a ward, emergency department, outpatient clinic, or patient homes
- who are required to attend clinical areas frequently throughout their working week

All workers working with the following high risk patient groups or in the following high risk clinical areas are automatically considered to be "Category A" regardless of duties:

#### High risk patient groups

- Children less than 2 years of age including neonates and premature infants
- Pregnant women
- Immunocompromised patients and those at high risk of severe illness or complications
- Frail older patients

#### High risk clinical areas

- Antenatal, perinatal and postnatal areas including delivery suite
- Neonatal Intensive Care Unit (NICU)
- Paediatric wards
- Haematology and Oncology
- Intensive Care and High Dependency Unit (including Paediatric)
- Emergency Department (including Paediatric)
- Medical and older persons health wards
- Renal and Liver wards
- Surgical wards and Theatres
- Respiratory wards
- Cardiovascular wards



## Category B: Protection against vaccine preventable diseases is recommended but not required.

- Worker has no direct physical contact with patients/clients, deceased persons, blood, body substances, or infectious material or surfaces/equipment that might contain these
- Worker does not work with high-risk patient groups or in the high-risk clinical areas listed above

#### 7.2 Vaccination requirements and corresponding restrictions for non-immune Workers

Vaccine Preventable Disease	Staff affected	Restriction
Measles Mumps Rubella Varicella Pertussis* (*Vaccinated within last 10 years or 5 years when community prevalence high) COVID-19 Seasonal Influenza	Category A	Non-immune DHB workers in this category should not work in clinical areas unless there is a genuine or serious risk to service delivery if staff reassigned (requires service management approval and notification to CEO).  If the clinical area has a suspected case of any of these diseases, DHB workers who are not immune or have no evidence of vaccination, must be excluded from working in relevant clinical areas for
Meningococcal		a period of time as advised by Occupational Health
Hepatitis B	Category A (except for those who do not work with patients or have contact with potentially infectious material) and any other employees or contractor with likely exposure to sharps or needles	Non-convertors and non-immune DHB workers should be counselled regarding precautions to prevent HBV and on the need to obtain Hepatitis B Immunoglobulin (HBIG) prophylaxis for any known or possible exposure to Hepatitis B surface antigen HBsAg positive blood.
Hepatitis A	Health protection officers Plumbers	Non-vaccinated DHB workers should be restricted
Tetanus	Laboratory staff (if exposed to faeces)	from entering areas with suspect contaminated water in environment or plumbing systems

# 8. Considering reasonable adjustments

The aim of making reasonable adjustments is to reduce as far as possible, any significant disadvantages that may be presented to an individual with a disability that would not affect an able-bodied person. This may include reviewing how the employment is structured, removal of physical of barriers or providing additional support to the individual, such as:

- Personal protective equipment required (for example, tight fitting respirator, hearing protections)
- making practical adjustments to the premises
- altering the person's working hours



- allowing absences during working hours for medical treatment
- giving additional training
- providing special equipment or modifying existing equipment
- provide information in alternate formats
- providing additional supervision and support.

In most cases, adjustments will be easy and inexpensive to implement. Further information and guidance on making reasonable adjustments can be found in the 'Supporting Employees with an Access Need – Managers Guide' available on Hippo.

# 9. Relevant Legislation

- Health and Safety at Work Act 2015
- Privacy Act 2020
- Health Information Privacy Code 2020
- COVID-19 Public Health Response (Vaccinations) Order 2021

#### 10. Disclaimer

No guideline can cover all variations required for specific circumstances. It is the responsibility of the health care practitioners using this Auckland DHB guideline to adapt it for safe use within their own institution, recognise the need for specialist help, and call for it without delay, when an individual patient falls outside of the boundaries of this guideline.

## 11. Corrections and amendments

The next scheduled review of this document is as per the document classification table (page 1). However, if the reader notices any errors or believes that the document should be reviewed **before** the scheduled date, they should contact the owner or **Document Control** without delay.