

## **INFLUENZA POLICY FOR HCOP EMPLOYEES**

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*Responsible administrator: Associate Dean for Clinical Affairs and Outreach*

*Last updated/reviewed: 11/9/23*

### **POLICY:**

Influenza is caused by a number of virus strains that are typically seasonally contracted between October and March (late fall through late spring) in the United States. Influenza is an airborne virus that can be spread from one person to another and can result in acute illness that can last up to 3 weeks, potentially leading to increased absenteeism among HCOP employees and students.

The purpose of the policy is to outline the procedure to be followed by all HCOP employees in order to decrease the risk of contracting the flu and to outline steps to be taken for HCOP employees who have developed flu-like symptoms during flu season (October through March of each year); have visited a health care professional and received a confirmed diagnosis of the influenza; or who are being treated by a health care provider for suspected influenza.

### **PROCEDURES:**

#### **Prevention:**

- All HCOP employees (part-time, full-time, and temporary employees, including work study students and student workers) are strongly encouraged to receive an annual seasonal influenza vaccination in the fall of each year when the seasonal influenza vaccination is made available.
- Employees who work in a clinical environment such as HCOP's Clinical Health Services (CHS) pharmacies and clinics; affiliated clinical practice sites; clinical research labs where human research is conducted; or other practice settings will be required to strictly follow the policies and procedures of the practice or research site. Responsible party: Department Heads
- Clinical faculty must follow the policies and procedures of their practice site and must attest compliance to the Department Head of Pharmacy Practice and the HCOP Risk Management Committee. If a faculty member fails to follow the practice site's policies and procedures that pertain to healthcare providers who submit a declination (such as wearing a mask when in the patient care environment during designated months when the flu is prevalent- usually November through March), then this will be grounds for progressive discipline. This attestation must be provided annually, and compliance with the practice sites policies and procedures is mandatory. Random audits may be conducted. Responsible party: Department Head of Pharmacy Practice
- Influenza vaccination will be the employee's responsibility including obtaining the vaccination from a healthcare provider (clinic, physician office, pharmacy, or other resource); paying for any patient-borne cost of the vaccine; obtaining documentation that shows the employee's name, date, vaccine administered, and authorized signature verifying that the vaccine was administered to the employee; and submitting this documentation to their supervisor and appropriate HCOP employees that are delegated to monitor employee compliance.

- Employees should exercise appropriate prevention measures as outlined by the Centers for Disease Control (CDC) including frequent hand washing, covering mouth and nose with the arm or with a tissue when coughing or sneezing, and avoiding contact, whenever possible, with persons that are known or suspected of having influenza.
- It is the responsibility of employees to take actions that will minimize the spread of influenza to other members of the Auburn University community, and particularly to patients.
- Employees are asked to self-isolate should they develop influenza-like symptoms until the symptoms are assessed by a healthcare professional and influenza is ruled out.
- If diagnosed with influenza, employees should follow the treatment plan for their illness that is provided by their healthcare provider, including instructions on when it is safe to return to work.

**Attendance:**

- Employees with influenza or influenza-like symptoms (fever, cough, sore throat, headache, muscle aches, extreme tiredness, and possibly diarrhea and/or vomiting) should self-isolate and not come to work until they are evaluated by a healthcare provider and influenza is ruled out as a cause of the symptoms.
- Employees with influenza-like symptoms should not return to work until they have no fever for at least 24 hours without the use of fever-reducing medications.
- Employees are to notify their supervisor of their illness and absence at the earliest possible time.
- Supervisors may ask employees with influenza-like symptoms to leave the building and return to their place of residence; employees are expected to comply with such a request.
- Employees with family members who have influenza, but are not ill themselves, will be expected to report for work and are not allowed to work from home. This does not preclude the use of sick leave by employees in order to care for sick individuals in their immediate families, as per Auburn University policy.

**Policies for Faculty Members Located at Practice Sites:**

- In addition to HCOP policies, faculty members based at practice sites are expected to adhere to the specific policies and procedures of the practice site.
- Return to the practice site will follow practice site policies and procedures, which should be based on CDC recommendations regarding length of time away from the health care setting.

**Policy Maintenance**

- This policy will be reviewed annually by HCOP's Clinical Services Advisory Committee and updated as necessary to ensure current standards and procedures are adhered to and that current CDC recommendations are being followed.

**Additional references:**

1. [Centers for Disease Control \(CDC\) and Prevention- Influenza \(Flu\).](#) (Accessed 10/31/23)