

1.1.C.7 Staff Hepatitis Vaccinations

I Policy Index:



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Replaces Policy: 4E.15
Supersedes Policy Dated: 01/02/2019
Affected Units: Institutions
Effective Date: 11/15/2019
Scheduled Revision Date: November 2020
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Office of Primary Responsibility: DOC Administration

II Policy:

The Department of Corrections (DOC) will offer Hepatitis B vaccinations to staff, as specified in this policy. Hepatitis B vaccinations administered to a staff member will be provided at no cost to the staff member.

III Definitions:

Blood:

Human blood, human blood components, and products made from human blood.

Hepatitis B:

A serious disease caused by a virus that attacks the liver. Hepatitis B virus (HBV), can cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and death. HBV is spread when blood or body fluids from an infected person enters the body of a person who is not infected.

Occupational Exposure:

Reasonably anticipated skin, eye, mucous membrane or other parenteral contact (piercing mucous membranes or skin barrier through such events as needle sticks, human bites, cuts or abrasions) with blood or other potentially infectious material that may result from the performance of a staff member's assigned duties.

Significant Direct Contact:

Contact is defined as the duration of time a staff member spends in proximity with inmates housed in a DOC facility. Significant direct contact is contact between staff and inmates that is within 6 feet and involves at least twelve (12) hours of contact with inmates within a continuous twelve month period.

Staff Member:

Any person employed by the DOC, full or part time, including an individual under contract assigned to the DOC, an employee of another State agency assigned to the DOC, authorized volunteers and student interns.

IV Procedures:

1. Hepatitis B Vaccinations:

- A. Staff having significant direct contact with inmates housed in a DOC facility, their personal property or human blood, who have not previously received the Hepatitis B vaccination, are encouraged to receive the vaccination (ACA-4387). The vaccination is made available following employment with the DOC.
1. Newly hired staff assigned to a DOC institution housing inmates, whose job duties include direct contact with inmates, will be issued the Hepatitis B Description form (See [Attachment 1](#)) during pre-service training.
 2. Hepatitis B vaccinations are provided free of charge to staff by local Community Health Care Centers. To receive the vaccine, staff must not have previously received the complete Hepatitis B vaccination series.
 3. Hepatitis B vaccinations shall be administered in accordance with U.S. Public Health Service guidelines. Generally, the vaccination series consists of three (3) inoculations over a period of approximately six months, as determined by the prescribing authority. The second vaccination is usually received 1 month after the first and the last vaccination is received 6 months after the first vaccination.
 4. Staff receiving the first vaccination are required to receive the second and final vaccination, unless continued receipt of the vaccine is medically contradicted by their doctor or Community Health (CH) staff, or the staff member's employment with the DOC is terminated.
 - a. Staff receiving the complete Hepatitis B vaccination series will provide written documentation to their Bureau of Human Resource Manager confirming receipt of the vaccination series. If the series was started but not completed, staff will provide documentation of the medical contradiction, as documented by their doctor or Community Health Care staff.
 - b. Staff personal records maintained by the Bureau of Human Resources (BHR) shall be updated as necessary, including the staff member's receipt of the Hepatitis B vaccination or declination of the vaccine.
 - 1) BHR shall ensure staff records and any test results are kept private/confidential and are personal identifying information is not disclosed or reported without the staff member's expressed written consent, except as required or ordered, consistent with applicable law.
- B. Staff who has not previously received the vaccination, who chooses not to receive the vaccination, must sign the *Hepatitis B Declination* form (See [Attachment 2](#)). Bureau of Human Resources staff will ensure all signed declination forms are kept on file.
1. DOC staff declining the Hepatitis B vaccination may choose to receive the vaccination at any time in the future during their employment with the DOC, provided they are assigned a job position which requires significant direct contact with inmates. Staff may contact their Bureau of Human Resources manager to request vaccination.
- C. If the U.S. Public Health Service recommends a routine booster of Hepatitis B vaccine for those individuals who have received the vaccine, the DOC/BHR will cover the cost of the booster for eligible staff.

V Related Directives:

None.

VI Revision Log:

March 2002: **Revised** definition of employee. **Clarified** Office of Risk Management blood borne policy in Exposure section.

December 2003: **Changed** Office of Risk Management blood borne pathogen "policy" to "procedures" and referenced bulletin issue 45.

August 2004: **Revised** section on Vaccinations and attachment 1 to clarify the schedule for shots.

March 2005: **Changed** the policy name. **Revised** the policy statement. **Added** reference to Hepatitis A throughout the policy. **Added** attachments 3 and 4. **Revised** the definition of Hepatitis B.

January 2006: **Clarified** that only new maintenance employees will be given information on Hepatitis A and offered a vaccination. **Revised** the definition of employee.

December 2006: Minor style/format changes throughout the policy.

December 2007: No changes made.

November 2008: **Revised** formatting of policy and attachments in accordance with DOC policy 1.1.A.2. **Clarified** Hepatitis A and B forms throughout policy. Revised titles of Attachments 1, 2, 3 and 4 to be consistent with policy, attachment and WAN.

November 2009: **Added** hyperlinks.

November 2010: **Revised** formatting of Section I. **Replaced** "regular volunteers" with "Level One Volunteers" in the definition of Employee. **Added** definition of Level One Volunteers.

January 2012: **Deleted** "Non Public" and **Replaced** with "Public". **Deleted** "be directed to consult the Risk Management contact in their institution/ facility/agency or their Bureau of Personnel representative for a copy of these procedures." **Replaced** with "contact Health Service staff and/or their immediate supervisor. If the exposure occurs when an employee is outside the DOC facility i.e. during a transport or while supervising community service inmates in the community, the staff person will contact their supervisor immediately." in Section 3 B. **Added** C. "Staff who have been involved in a blood borne exposure will complete a First Report of Injury and Accident Report" to Section 3. **Added** Attachment 1. RM Bulletin #45 and renumbered existing attachments.

December 2012: **Added** definition of "Direct Care Employee". **Added** "during the performance of their assigned duties" to Section 1 B. **Added** "Newly hired" and "within the first month of employment" to Section 1 B. 2. **Added** (Department of Health Staff) to Section 1 B. 2. **Added** "direct care" to Section 2 A. **Added** "Newly hired" and "within the first month of employment" to Section 2 B. 1. **Added** "Direct care" to Section 2 D. **Added** a. and b. to Section 2 D. **Added** "any" and **Deleted** "at a later date" to Section 2 E. **Added** "or offenders released on supervision (paroles or juvenile community corrections staff)" to Section 3 B. **Added** "during the performance of their assigned duties" in Section 3 C. **Added** D. to Section 3. **Added** Attachment 6 and 7 to policy.

November 2013: **Added** "Staff" to title of policy. **Added** "and to those staff who through the performance of their regularly assigned job duties" to Section 1 B. **Replaced** "employee" with "staff" throughout the policy. **Deleted** Section 3 "Possible Exposure to Hepatitis". **Deleted** Attachments 1, 5, and 6.

November 2014: **Reviewed** with no changes.

November 2015: **Deleted** "All Units" and **Replaced** with "All Institutions" in the Affected Units section of the title. **Revised** the definition of Hepatitis A. **Deleted** definition of "Direct Care Staff" and "Level 1 Individual" **Added** "DOC facility housing offenders" in Section 1 A. **Deleted** "Hepatitis A vaccinations are encouraged and will be offered staff assigned to the maintenance department and to those staff who through the performance of their regularly assigned job duties may be exposed to fecal matter" and **Replaced** with "The following is a broad classification of DOC staff who may be at risk of occupational exposure to fecal material or other potentially infectious material containing the Hepatitis A virus:" in Section 1 B. **Added** 1-4 in Section 1 B. **Added** C. and C. 1. to Section 1. **Deleted** "maintenance" and **Replaced** with "assigned to the classification of job positions listed in Section 1 B" and **Deleted** "and offered the Hepatitis A vaccination within the first month of employment" and **Replaced** with "during pre-service training. Staff choosing to receive the vaccination may schedule a

time for the vaccination with Correctional Health Services” in Section 1 D. **Added** “to qualifying staff” in Section 1 D. 1. **Deleted** “dose” and **Replaced** with “inoculation” in Section 1 D. 1. and 2. **Added** 3. and 3. a. to Section 1 D. **Deleted** “maintenance staff” and **Replaced** with “Staff assigned to the classification of job positions listed in Section 1 B.” in Section 1 E. **Added** “Staff declining” and **Added** “may choose to receive the Hepatitis vaccination at anytime in the future by notifying their supervisor or contacting Correctional Health or a private doctor/health care provider and scheduling a time to receive the vaccination” and **Deleted** “shall be available for maintenance staff that chooses to receive the vaccinations at a later date” in Section 1 F. **Deleted** “direct care staff” and **Replaced** with “Employees assigned to a job position within a DOC facility housing offenders that may be at risk of possible occupational exposure to blood, other bodily fluids or infectious material” in Section 2 A. **Deleted** “Hepatitis B vaccinations and will be offered for all direct care staff that may be exposed to blood or body fluids” and **Replaced** with “Staff assigned to a job position within an DOC facility housing offenders are encouraged to receive the Hepatitis B vaccination free of charge from Correctional Health Service staff “ in Section 2 B. **Added** 3. - 4. and 4. a. to Section 2 B. **Deleted** “Direct care and **Added** “may potentially be exposed to blood, other bodily fluids or infectious material through their regularly assigned duties within a DOC facility housing offenders who choose” in Section 2 C. **Deleted** “Direct care staff may rescind their letter of declination at any time and receive the Hepatitis B vaccination.” and **Replaced** with “Staff declining the Hepatitis B vaccination may choose to receive the vaccination at anytime in the future by notifying their supervisor or contacting Correctional Health or a private doctor/health care provider and scheduling a time to receive the vaccination” in Section 3 C. 1. **Deleted** 2. in Section 2 C. **Deleted** D. **Updated** Attachments 1-4.

February 2016: **Deleted** definition of Hepatitis A. **Added** definition of “Blood” and “Occupational Exposure” **Deleted** Section 1 referencing Hepatitis A. **Deleted** “assigned duties within a DOC facility housing offenders “ and **Replaced** with “who have direct contact with offenders housed in a DOC facility, offender personal property or human blood” and **Deleted** “to blood, other bodily fluids or materials infected with” in Section 1 A. **Added** “who have not previously received the Hepatitis B vaccination” and **Deleted** “Correctional Health Service staff” and **Replaced** with “a Community Health Care center serving the area” and **Deleted** “assigned to a job position within a DOC facility housing offenders” and **Added** “The vaccination will be available as soon as possible following initial employment with the DOC” in Section 1 B. **Deleted** “Staff choosing to receive the vaccination may schedule a time for the vaccination with Correctional Health Services” in Section 1 B. 1. **Deleted** “correctional health staff” and **Added** “the complete Hepatitis vaccination series” in Section 1 B. 2. **Added** “accordance with U.S. Public Health Service guidelines. Generally the vaccination series consists of” in Section 1 B. 3. **Deleted** “Staff may choose to receive the Hepatitis B vaccination through a private doctor or health care provider (community health nurse)” and **Replaced** with “Staff who receives the first vaccination is required to receive the second and final vaccination unless excused by their doctor or Community Health (CH) staff providing the vaccination or employment with the DOC is terminated” in Section 1 B. 4. **Added** b. to Section 1 B. 4. **Deleted** “The staff member shall be responsible for all fees/co-pays/charges associated with receipt of the vaccination and for providing documentation of receipt of the complete vaccination regimen to Correctional Health staff” and **Replaced** with “Staff who receives the Hepatitis A vaccination will provide documentation to their supervisor confirming receipt of the vaccinations or recommendation from their doctor of CH staff the medical provider against receipt of the final vaccination” in Section 1 B. 4. a. **Added** “Bureau of Human Resources staff will ensure staff who decline to accept the Hepatitis B vaccination sign the Declination form” in Section 1 C. **Deleted** “supervisor or contacting Correctional Health or a private doctor/health care provider and scheduling a time to receive the vaccination” and **Replaced** with “Bureau of Human Resources manager, provided they are assigned a job position that is eligible for the vaccination” in Section 1 C. 1. **Added** D. to Section 1.

November 2016: **Added** definition of “Staff Member” and “Significant Direct Contact”

November 2017: **Reviewed** with no changes.

November 2018: Minor changes.

November 2019: Minor changes.

Mike Leidholt (original signature on file)

11/14/2019

Mike Leidholt, Secretary of Corrections

Date

Attachment 1: Hepatitis B Description

The **Hepatitis B Description** is located at:

<M:\DOC\DOC Policies\Agency\DOC Policies\Attachment Templates\HEPATITIS B DESCRIPTION.doc>

South Dakota Department of Corrections Policy Distribution: Non-Public	Attachment: Hepatitis B Description Please refer to DOC policy 1.1.C.7 Hepatitis Vaccinations
HEPATITIS B DESCRIPTION	
<p>Because your employment tasks include the possible exposure to blood or other bodily fluids, you have been identified by the Federal Centers for Disease Control as having "High/Intermediate risk" for contracting Hepatitis B.</p> <p>Hepatitis B is transmitted by exposure to blood, saliva and other bodily fluids. The usual means of catching Hepatitis B include through sexual intercourse, receiving contaminated blood or the use of contaminated needles. The most likely exposure to our staff has been identified as handling urinalysis tests.</p> <p>Hepatitis B is one of at least three (3) viral causes of Hepatitis. Having Hepatitis from one virus, or having the Hepatitis B vaccine, will not prevent you from having Hepatitis from one of the other viruses.</p> <p>Common symptoms of Hepatitis B include jaundice, abdominal pain, itching skin, low grade fever, fatigue, weight loss, loss of appetite, nausea and vomiting. Many people with Hepatitis B have no symptoms, or such mild symptoms that they do not recognize that they are sick.</p> <p>The South Dakota Department of Corrections is making the Hepatitis B vaccine available to you at no charge. Three (3) shots are required with this vaccine. The usual schedule for adults is two (2) doses separated by no less than four (4) weeks, and a third dose four to six (4-6) months after the second dose. If an accelerated schedule is needed, the minimum interval between the first two (2) doses is four (4) weeks, and a minimum interval between the second and third doses is eight (8) weeks. However, the first and third doses should be separated by no less than four (4) months. Doses given at less than these minimum intervals should not be counted as part of the vaccination series. It is not necessary to restart the series or add doses because of an extended interval between doses.</p> <p>The vaccine is eighty-seven percent (87%) to ninety-six percent (96%) effective in immunizing individuals. Adverse reactions to the vaccine are unusual. The most common side effects are related to the injection site and include soreness, redness, swelling, warmth and some itching in the skin. These side effects are usually mild and go away within a few days. Other side effects may include generalized fatigue, low grade fever - up to one hundred degrees (100°), various gastrointestinal complaints including loss of appetite, nausea and vomiting, abdominal pain, diarrhea, headache, symptoms of upper respiratory infection and vague muscle pains. As with any vaccine, an anaphylactic reaction is always a possibility.</p> <p>Potential adverse effects:</p> <ol style="list-style-type: none">1. Neurological disabilities, such as Guillain-Barre (French Polio), Sella, Babes and Herpes Zoster.2. Thrombocytopenia (decrease in blood platelets).3. Tinnitus, usual disturbances (ringing in the ears). <p>People with the following conditions should not receive the vaccine:</p> <ol style="list-style-type: none">1. Any serious acute infection.2. Any serious cardiac or pulmonary conditions for which the person is under a doctor's care.3. Pregnant or nursing mothers.4. Any demonstrated allergic reaction to any previous vaccination.5. Hypersensitivity to yeast.	
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Attachment 2: Hepatitis B Declination

The **Hepatitis B Declination** is located at:

<M:\DOC\DOC Policies\Agency\DOC Policies\Attachment Templates\Restrictive Housing Notice of Initial Hearing.doc>

South Dakota Department of Corrections Policy Distribution: Non-Public	Attachment: Hepatitis B Declination Please refer to DOC policy 1.1.C.7 Hepatitis Vaccinations
HEPATITIS B DECLINATION	
<p>I understand that due to my occupational exposure to blood or other potentially infectious materials, I may be at risk of acquiring Hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with Hepatitis B vaccine, at no charge to myself. However, I decline the Hepatitis B vaccine at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring Hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with Hepatitis B vaccine, I can receive the vaccination series at no charge to me.</p>	
<input type="text"/>	<input type="text"/>
(Printed Name)	(Department)
<input type="text"/>	<input type="text"/>
(Signature)	(Date)
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HEPATITIS B VACCINE

WHAT YOU NEED TO KNOW

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis.

1 What is hepatitis B?

Hepatitis B is a serious disease that affects the liver. It is caused by the hepatitis B virus (HBV). HBV can cause:

Acute (short-term) illness. This can lead to:

- loss of appetite
- diarrhea and vomiting
- tiredness
- jaundice (yellow skin or eyes)
- pain in muscles, joints, and stomach

Acute illness is more common among adults. Children who become infected usually do not have acute illness.

Chronic (long-term) infection. Some people go on to develop chronic HBV infection. This can be very serious, and often leads to:

- liver damage (cirrhosis)
- liver cancer
- death

Chronic infection is more common among infants and children than among adults. People who are infected can spread HBV to others, even if they don't appear sick.

- In 2005, about 51,000 people became infected with hepatitis B.
- About 1.25 million people in the United States have chronic HBV infection.
- Each year about 3,000 to 5,000 people die from cirrhosis or liver cancer caused by HBV.

Hepatitis B virus is spread through contact with the blood or other body fluids of an infected person. A person can become infected by:

- contact with a mother's blood and body fluids at the time of birth;
- contact with blood and body fluids through breaks in the skin such as bites, cuts, or sores;
- contact with objects that could have blood or body fluids on them such as toothbrushes or razors;
- having unprotected sex with an infected person;
- sharing needles when injecting drugs;
- being stuck with a used needle on the job.

2 Hepatitis B vaccine: Why get vaccinated?

Hepatitis B vaccine can prevent hepatitis B, and the serious consequences of HBV infection, including liver cancer and cirrhosis.

Routine hepatitis B vaccination of U.S. children began in 1991. Since then, the reported incidence of acute hepatitis B among children and adolescents has dropped by more than 95% – and by 75% in all age groups.

Hepatitis B vaccine is made from a part of the hepatitis B virus. It cannot cause HBV infection.

Hepatitis B vaccine is usually given as a **series of 3 or 4 shots**. This vaccine series gives long-term protection from HBV infection, possibly lifelong.

3 Who should get hepatitis B vaccine and when?

Children and Adolescents

- All children should get their first dose of hepatitis B vaccine **at birth** and should have completed the vaccine series by 6-18 months of age.
- Children and adolescents through 18 years of age who did not get the vaccine when they were younger should also be vaccinated.

Adults

- All unvaccinated adults **at risk for HBV infection** should be vaccinated. This includes:
 - sex partners of people infected with HBV,
 - men who have sex with men,
 - people who inject street drugs,
 - people with more than one sex partner,
 - people with chronic liver or kidney disease,
 - people with jobs that expose them to human blood,
 - household contacts of people infected with HBV,
 - residents and staff in institutions for the developmentally disabled,
 - kidney dialysis patients,

- people who travel to countries where hepatitis B is common,
 - people with HIV infection.
- Anyone else who wants to be protected from HBV infection may be vaccinated.

4 Who should NOT get hepatitis B vaccine?

- Anyone with a life-threatening allergy to **baker's yeast**, or to **any other component of the vaccine**, should not get hepatitis B vaccine. Tell your provider if you have any severe allergies.
- Anyone who has had a life-threatening allergic reaction to a **previous dose of hepatitis B vaccine** should not get another dose.
- Anyone who is **moderately or severely ill** when a dose of vaccine is scheduled should probably wait until they recover before getting the vaccine.

Your provider can give you more information about these precautions.

Pregnant women who need protection from HBV infection may be vaccinated.

5 Hepatitis B vaccine risks

Hepatitis B is a very safe vaccine. Most people do not have any problems with it.

The following **mild problems** have been reported:

- Soreness where the shot was given (up to about 1 person in 4).
- Temperature of 99.9°F or higher (up to about 1 person in 15).

Severe problems are extremely rare. Severe allergic reactions are believed to occur about once in 1.1 million doses.

A vaccine, like any medicine, *could* cause a serious reaction. But the risk of a vaccine causing serious harm, or death, is extremely small. More than 100 million people have gotten hepatitis B vaccine in the United States.

6 What if there is a moderate or severe reaction?

What should I look for?

- Any unusual condition, such as a high fever or behavior changes. Signs of a serious allergic

reaction can include difficulty breathing, hoarseness or wheezing, hives, paleness, weakness, a fast heart beat or dizziness.

What should I do?

- **Call** a doctor, or get the person to a doctor right away.
- **Tell** your doctor what happened, the date and time it happened, and when the vaccination was given.
- **Ask** your doctor, nurse, or health department to report the reaction by filing a Vaccine Adverse Event Reporting System (VAERS) form.

Or you can file this report through the VAERS web site at www.vaers.hhs.gov, or by calling 1-800-822-7967.

VAERS does not provide medical advice.

7 The National Vaccine Injury Compensation Program

In the event that you or your child has a serious reaction to a vaccine, a federal program has been created to help pay for the care of those who have been harmed.

For details about the National Vaccine Injury Compensation Program, call 1-800-338-2382 or visit their website at www.hrsa.gov/vaccinecompensation.

8 How can I learn more?

- Ask your doctor or nurse. They can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)**
 - Visit CDC websites at:
 - www.cdc.gov/ncidod/diseases/hepatitis
 - www.cdc.gov/vaccines
 - www.cdc.gov/travel



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION

Vaccine Information Statement (Interim)
Hepatitis B (7/18/07) 42 U.S.C. § 300aa-26