1. **Purpose**

All members of the HSDM workforce working within the Harvard Dental Center (HDC) must provide the necessary documentation as proof of compliance with the State and Harvard University immunization requirements listed below, by the given immunization deadline or immediately thereafter.

2. **Scope**

This policy, in alignment with Harvard University and Massachusetts Department of Public Health regulations, applies to all faculty, staff, Harvard appointees, students, and 3rd Parties that work within the Harvard Dental Center (including temporary staff and persons of interest) and/or have direct patient interaction. HSDM Staff that are not aligned to the Harvard Dental Center, or do not have direct clinic responsibilities, are exempt from this policy. Failure to comply with this policy could result in appropriate disciplinary actions being taken up to, and including, termination.

This policy is reviewed regularly to ensure alignment with University policy and applicable Massachusetts Department of Public Health regulations. If at any time a discrepancy is noted, HSDM defers to the most current and conservative policy requirements regarding the immunization schedule.

3. **Policy**

1. All faculty, staff, Harvard appointees, students, and 3rd Parties (including temporary staff and persons of interest) working within the Harvard Dental Center and/or have direct patient interaction must provide documentation for the State and University immunization requirements listed below, by the given immunization deadline (or upon their first day at HSDM as part of the onboarding process).

2. The following immunizations (and associated lab results) are required as a condition of employment/matriculation:

   **One Time Submission**
   - Laboratory reports that verify your immunity to infection with measles, mumps and rubella (MMR)
   - Laboratory reports that verify your immunity to varicella (chicken pox)
If you received the two-part varicella vaccine, you do not need to submit a blood test report verifying immunity to varicella.

**Annually**
- Proof of influenza (flu) vaccination or signed Declination Form
- (Tuberculosis) TB screening
  - Proof of freedom from active TB disease via medical clearance documentation from Primary Care Provider
  - HDC workers that have had the BCG vaccine and cannot have an annual PPD skin test need one of two available blood tests annually, the Quantiferon Gold or T spot.
  - **Note:** chest x-rays will not suffice, since they are not screens for latent TB
- HDC workers with a prior skin test reaction judged to be consistent with latent TB or with positive Quantiferon or T spot test results need the following:
  - Normal chest x-rays on file (without evidence of active or old pulmonary TB) performed one time after the PPD skin test result consistent with latent TB or since the positive TB blood test result. Abnormal chest x-rays should also include a letter from the worker’s physician explaining the abnormality.
  - Letters on file from the workers’ physicians indicating whether they had antibiotic treatment in the past for latent TB or will or will not do that in the future.
  - Yearly completion of a series of questions on file that screen for active TB.

**Every 10 years**
- Proof of hepatitis B vaccination or declination thereof as required by OSHA
  - If you completed the three-part hepatitis B vaccination series, you are required to also submit the laboratory report that verifies you have a titer of hepatitis B surface antibody (HBSAb)
- Proof /Date of up-to-date Tetanus-Diphtheria-Pertussis (Tdap)

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<thead>
<tr>
<th>One Time</th>
<th>Annually</th>
<th>Every 10 Years</th>
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<tbody>
<tr>
<td>MMR</td>
<td>TB</td>
<td>Hepatitis B</td>
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<tr>
<td>Varicella</td>
<td>Influenza</td>
<td>Tdap</td>
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3. If it is impossible to obtain documentation (laboratory results) of past immunizations, you must provide a positive antibody titer as proof of immunity or be vaccinated again.

4. All immunization records must be stored and maintained in accordance with the Massachusetts Department of Public Health 105 CMR 140.301 (see Appendix).
Appendix

Massachusetts Department of Public Health 105 CMR 140.301:

140.301: Administrative Records

(A) Each clinic shall maintain current, complete, and accurate administrative records in a safe location. The clinic shall make all administrative records available promptly to any agent of the Department seeking to determine compliance with 105 CMR 140.000.

(B) Administrative records shall include:

1. Updated articles of organization and by-laws, partnership agreement or trust instrument, as appropriate. The documents shall specify the organizational structure of the governing body and the methods of the selection of its members.
2. Updated lists of the names and addresses of the persons set forth in 105 CMR 104.102(B)(1)(a) through (d).
3. Minutes of meetings of the governing body and of the members.
4. An organizational chart for the entire organization.
5. Written policies and procedures designed to safeguard the health and safety of patients and staff. These policies and procedures shall be reviewed and updated annually. At a minimum the policies shall address:
   a. Selection of personnel and the qualifications for each position. A job description for each position must be included in the administrative records.
   b. Employee health policies that assure employees are free of communicable disease.
   c. Patient admission criteria.
   d. The provision of emergency care and the retention of emergency equipment appropriate to the clinic’s patient population.
   e. Obtaining informed consent for surgical procedures and other treatment where required by law.
   f. A policy for off-hour coverage posted conspicuously in the clinic and any of its satellite clinics. The policy must ensure compliance with 105 CMR 140.315(B).
   g. The disposal of hazardous and infectious waste.
   h. Infection control.
   i. Services which the clinic provides.
   j. Smoking on the premises. Such policies shall assure the comfort of all patients including patients in waiting areas.
   k. Procedures for complying with laws and regulations relating to reportable diseases and conditions.
   l. Procedures for assuring that all patients of a clinic that provides mobile medical services at host locations are provided with written information that clearly identifies the clinic, and not the host location, as the licensed health care facility responsible for the service provided.
6. Personnel records for each employee, including evidence of any required license or registration number; documentation of any specialty certification, education and job experience.