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	COVID-19 Immunization Policy		
Date Issued: September 2021 Date Review/Revised: Next Review Date: September 2024			
Owner: President & CEO		Reviewer(s): Chief Nursing Executive; Occupation Health & Safety	Approver: President & CEO
Cross Reference: 14-037 Immunization of Employees/Professional Staff/Students/Volunteers			

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Preamble

On August 17, 2021, Chief Medical Officer of Health (CMOH) Dr. Kieran Moore introduced new measures which establish minimum requirements for hospital policies regarding COVID-19 vaccination among healthcare workers. Click [here](#) to view Directive #6.

Purpose

The purpose of this policy is to outline the parameters and expectations related to COVID-19 immunization, including the tracking of vaccinations received, the medical exemption process for those who have a medical contraindication to COVID-19 vaccines, and the education required for those declining vaccination to ensure they are making an informed decision.

Hospitals have a duty to care to protect staff under the *Occupational Health and Safety Act* and to protect patients and ensure service continuity under the *Public Hospitals Act*. Healthcare organizations are required to remain vigilant and respond to quickly changing circumstances considering all relevant information at the particular time.

This policy endeavours to balance protecting the common good during the COVID-19 Pandemic, while still allowing individuals the right to exercise choice regarding their personal vaccination decisions. Vaccination against COVID-19 is strongly recommended for the following reasons:

To achieve high rates of COVID-19 vaccination and herd immunity in order to:

- Protect patients (many of whom are at high risk for serious health effects related to COVID-19 illness) who interact with and receive services from workers and volunteers;
- Protect workers and volunteers;
- Protect colleagues and family including those who may be at high risk for serious health effects related to COVID-19 illness;
- Minimize the risk of COVID-19 transmission and outbreaks in our facilities and protect the ability of the organization to provide and maintain the services we deliver to patients;
- To understand our vaccination rates to assist with decision making on resumption of services and discontinuation of certain infection prevention and control practices and Personal Protective Equipment (PPE);

- To provide leadership on COVID-19 prevention in our community and for our community partners; and
- To ensure that all workers and volunteers have access to information required to make an informed decision as to whether or not they will receive the COVID-19 vaccination.

This policy and procedure applies to all SHHA workers (staff, physicians and credentialed staff, students, contracted staff/affiliates, tenants and volunteers) who regularly work on site.

Contingent upon vaccine availability, all eligible SHHA workers (staff, physicians and credentialed staff, students, contracted staff/affiliates, tenants and volunteers) are strongly encouraged to receive a COVID-19 vaccine, unless it is medically contraindicated.

Application of the Policy

Regardless of how often they are at SHHA and how much time they spend there or in their respective workplace, this policy applies to:

- Employees and staff including regulated and non-regulated health professionals, and other workers that are or may be in the patient environment;
- Contractors (including people on contract, and people employed by an employment agency or other third party);
- Students on an educational placement;
- Volunteers including Board members and directors; and
- Tenants who rent space from SHHA.

Definitions

Additional Precautions: Precautions (i.e., Contact Precautions, Droplet Precautions and Airborne Precautions) that are necessary in addition to Routine Practices for certain pathogens or clinical presentations. These precautions are based on the method of transmission (e.g., contact, droplet, airborne).

COVID-19: is an acute respiratory illness caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). It may be characterized by fever, cough, shortness of breath, and several other symptoms. Asymptomatic infection is also possible. The risk of severe disease increases with age but is not limited to the elderly and is elevated in those with underlying medical conditions.

COVID-19 Outbreak: defined as two or more hospital acquired, COVID-19 cases occurring within 48 hours on a specific unit. The declaration of the outbreak will be made by Infection Prevention & Control in consultation with Huron Perth Public Health (HPPH).

Fully Vaccinated: means having received the full series of a COVID-19 vaccine or combination of COVID-19 vaccines approved by WHO (e.g., two doses of a two-dose vaccine series, or one dose of a single-dose vaccine series); and having received the final dose of the COVID-19 vaccine at least 14 days ago.

Healthcare Facility: Any location where health care is provided, including settings where emergency care is provided, hospitals, complex continuing care, rehabilitation hospitals, long-term care homes, mental health facilities, outpatient clinics, community health centers and clinics, physician offices, dental offices, offices of other health professionals and home health care.

Healthcare Worker: Any person delivering care to a client/patient/resident. This includes, but is not limited to, the following: emergency service workers, physicians, dentists, nurses, respiratory therapists and other health professionals, personal support workers, clinical instructors, students, home health care workers, and volunteers.

Herd Immunity: occurs when a large portion of a community (the herd) becomes immune to a disease, making the spread of disease from person to person unlikely. As a result, the whole community becomes protected, not just those who are immune.

Immunization: A process by which a person becomes protected against a disease through vaccination..(I don't think people use the term inoculation anymore) **Medical Contraindication:** Workers who have a medical reason preventing them from receiving the COVID-19 vaccine.

Medical Contraindication: An accepted medical reason that prevent an individual from receiving the COVID-19 vaccines.

Personal Protective Equipment: Personal protective equipment, commonly referred to as "PPE", is equipment and clothing worn to minimize exposure to hazards and prevent illnesses and infection to the worker. For the purposes of this document, PPE consists of a mask, gloves, gown and eye protection, and is chosen as part of personal risk assessment
Personal Risk Assessment: An evaluation of the interaction of the health care provider, the client/patient/resident and the client/patient/resident environment to assess and analyze the potential for exposure to infectious disease.

Routine Practices: The system of infection prevention and control practices recommended by the Public Health Agency of Canada to be used with all clients/patients/residents during all care to prevent and control transmission of microorganisms in all health care settings.

Vaccination: The act of introducing a vaccine into the body to produce immunity to a specific disease. Vaccination is a safe and effective way of protecting people against harmful diseases, before they come into contact with them. It uses your body's natural defenses to build resistance to specific infections and makes your immune system stronger.

Volunteer: Individuals providing an unpaid service to patient, staff and support services including members and directors of the Board.

Worker: employee, physician or credentialed staff, student, contracted staff/affiliate, tenant, or volunteer who regularly works on site.

Policy

It is important to protect the health and well-being of workers where there is evidence of a risk with identified measures for management. The Chief Medical Officer of Health (CMOH) has directed SHHA to develop, implement and ensure compliance with a COVID-19 vaccination policy.

All healthcare workers are strongly encouraged to be immunized against COVID-19 at the earliest possible opportunity. Healthcare workers refers to anyone working onsite at the facility for any amount of time and includes all staff, physicians, volunteers, students, tenants and contractors.

COVID-19 vaccination is NOT mandatory, however, healthcare workers MUST complete one of the following within 30 days of the implementation of this policy for current employees, or prior to their first shift for new employees or employees returning from leave:

1. Be fully vaccinated against COVID-19 AND provide proof of vaccination to Corporate Office (e-mail: stevie.cowdrey@shha.on.ca or emily.wells@shha.on.ca, fax: 519-235-3405, phone extension: 5151 or 5169).
 - If the individual has only received the first dose of a two-dose COVID-19 vaccination series approved by Health Canada, provide proof of this first dose; and
 - After the second dose is administered, and as soon as reasonably possible, provide proof of administration of the second dose.

OR

2. If all Health Canada approved COVID-19 vaccines are medically contraindicated, provide written proof of the medical contraindication from a physician or nurse practitioner to Corporate Office (e-mail: stevie.cowdrey@shha.on.ca or emily.wells@shha.on.ca, fax: 519-235-3405, phone extension: 5151 or 5169).
 - The medical note should indicate that the person cannot be vaccinated against COVID-19 AND the effective timeframe for the medical restriction (permanent or time limited).

OR

3. If a healthcare worker elects not to be vaccinated at this time, or they are unsure of whether they want to be vaccinated, they are required to complete a COVID-19 vaccine educational program approved by the organization.
 - If after completion of that module, the individual elects not to be vaccinated, they will be required to perform a rapid antigen self test within 48 hours prior to their shift. If an unscheduled shift is accepted, a rapid antigen self test is required within 48 hours prior to reporting to work.
 - Should, however, they chose to be vaccinated after completing the educational program they must provide proof of vaccination to Corporate Office (e-mail: stevie.cowdrey@shha.on.ca or emily.wells@shha.on.ca, fax: 519-235-3405, phone extension: 5151 or 5169).

SHHA will maintain immunization records and documentation of completion of the educational program for each employee. Immunization status will not be disclosed unless required due to an outbreak or possible exposure to COVID-19. Immunization rates for the facility may be disclosed via aggregate data with no identifying information.

Proof of Vaccination

If an individual has received the COVID-19 vaccine in Ontario, the only acceptable proof of vaccination is the receipt provided by the Ministry of Health. An individual who does not have a copy of their vaccination can download their COVID-19 vaccine receipt here:

<https://covid19.ontariohealth.ca/>

For people who have been vaccinated outside of Ontario, acceptable proof is based on the criteria provided by the province/state in which they received their vaccine. In Ontario, local public health units will enter the required information into the Provincial database for those who have received a vaccine course outside of Ontario that has been deemed acceptable by

Ontario:

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/vaccine/COVID-19_guidance_for_individuals_vaccinated_outside_of_ontario.pdf

COVID-19 Vaccine Education Program (Training module to be announced shortly.)

In addition to the above, anyone who is not fully vaccinated will be required to complete the COVID-19 Vaccine Information E-learning training module by September 30, 2021. The SHHA COVID-19 Vaccine Information E-learning training module addresses all of the following learning components:

- How COVID-19 vaccines work;
- Vaccine safety related to the development of the COVID-19 vaccines;
- Benefits of vaccination against COVID-19;
- Risks of not being vaccinated against COVID-19; and
- Possible side effects of COVID-19 vaccination.

Support for Vaccination

SHHA will provide the following supports for workers subject to this policy to receive a vaccine:

- assistance with booking vaccine appointment;
- access to vaccinations through the South Huron Medical Centre and/or Walk-in Clinic on a priority basis; and/or
- peer-to-peer support.

For students, the same requirements exist however each student's status will be managed and tracked by the student's school. SHHA will be responsible for orientating the schools to this policy. Should the school have more stringent requirements in place, the school's policy will apply as per the affiliation agreement.

For contracted staff who work on site at SHHA, the same requirements apply however the employer of the contracted staff member will be responsible for managing and tracking the worker's status. SHHA will be responsible for orientating the employer to this policy.

For all existing workers and volunteers, proof of their vaccination, medical exemption, or completion of the COVID-19 vaccine training must be provided/completed within 30 days of this policy going into effect.

For new workers, workers returning from leave or volunteers joining or being placed in the organization, requirements must be met before their first day of work, placement or first scheduled shift back for all returning employees. They will not be permitted to start work until proof of vaccination or medical exemption is provided.

Where proof of vaccination or medical exemption is not submitted to the Corporate Office, regardless of training completion, it will be assumed the worker or volunteer is not vaccinated for the purpose of contact tracing or outbreak management.

This policy is not withstanding the wide authority that the Medical Officer of Health has under the Health Protection and Promotion Act (1990).

Confidentiality Statement

SHHA is required, pursuant to the Chief Medical Officer of Health's Directive #6 for Public Hospitals within the meaning of the [Public Hospitals Act, 1990](#) and Service Providers in accordance with the [Home Care and Community Service Act, 1994](#), Local Health Integration Networks within the meaning of the [Local Health System Integration Act, 2006](#) and Ambulance Services within the meaning of the [Ambulance Act, 1990](#) (operating as Home and Community Care Support Services) providing long-term care home placement services COVID-19 Immunization Policy, to report statistical information to the Office of the Chief Medical Officer of Health (OCMOH) or the Ministry of Health (Ministry). No identifying information will be provided to the Ministry in relation to this policy; all statistical information will be provided in aggregate form.

References

Public Hospitals Act

<https://www.ontario.ca/laws/statute/90p40>

Home Care and Community Service Act, 1994

<https://www.ontario.ca/laws/statute/94l26>

Local Health System Integration Act, 2006

<https://www.ontario.ca/laws/statute/06l04>

Ambulance Act, 1990

<https://www.ontario.ca/laws/statute/90a19>

Health Protection and Promotion Act, 1990

<https://www.ontario.ca/laws/statute/90h07>

Huron Perth Public Health

<https://www.hp-ph.ca/en/index.aspx>

Provincial guidance on the use of antigen tests

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/Antigen_Screening_Guidance_2021-03-5.pdf

Chief Medical Officer of Health – COVID-19 - Directive #6

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/vaccination_policy_in_health_settings.pdf

Ministry of Health (MOH). Case and Contact Management Resources

https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/2019_guidance.aspx

National Advisory Committee on Immunization (NACI)

<https://www.canada.ca/en/public-health/services/immunization/national-advisory-committee-on-immunization-naci.html>

FAQs

[FAQs from Directive 6 can be found here.](#)