**Note: SE IPAC Hub assumes no liability resulting from any such application or use of these documents. The policy templates are to be used as an example outline. Directive #6 and the SE IPAC Hub templates provide the minimum requirements. Facilities/organization can enact stricter protocols based on organization/facility discretion (e.g., not accepting education as an alternative to vaccination and instead redeploying unvaccinated staff to limit risk to others OR requiring daily testing). The education requirement must be available for staff; however, does not need to be accepted as an alternative to vaccination. COVID-19 antigen point of care testing must occur minimum once a week; however, can occur more frequently. A reminder that the COVID-19 situation remains fluid, directives and minimum testing requirements may change based on emerging evidence, variants and COVID-19 prevalence.**

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| **Title: COVID-19 Immunization Program** |
| **Date First Created: TBD, Reflects Approval Date** | **Date Revised or Reviewed: N/A** |
| **Approved By:** | **Editor: (i.e., DOC, HR)** |

1. **Policy Statement**

The purpose of this policy is to outline organizational expectations with regards to COVID-19 immunization of staff and provide general guidance for implementing an immunization campaign at FACILITY NAME.

Contingent upon vaccine availability, all eligible FACILITY NAME staff should receive the COVID-19 vaccine, unless it is medically contraindicated.

1. **Definitions**

**Staff:**  For the purposes of this policy, staff includes all FACILITY NAME employees and physicians who conduct activities on the campus.

**Fully vaccinated:** A person is fully immunized against COVID-19 if:

* They have received the total required number of doses of a COVID-19 vaccine approved by Health Canada (e.g., both doses of a two-dose vaccine series, or one dose of a single-dose vaccine series); and,
* They received their final dose of the COVID-19 vaccine at least 14 days ago.

**Unvaccinated:** A person who does not meet the criteria above

**3.0 Background and Scope**

FACILITY NAME recognizes the importance of immunization of staff members who are considered at high risk for contracting and transmitting COVID-19 due to the nature of their work and potential for exposures in the community. The COVID-19 Immunization Program is offered by FACILITY NAME with the aim of optimizing client and staff safety and meets the legislative requirements in Ontario.

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

It is the position of the National Advisory Committee on Immunization (NACI) that:

* Individuals most likely to transmit COVID-19 to those at high risk of severe illness and death from COVID-19 and workers essential to maintaining the COVID-19 response, including healthcare workers, be prioritized to receive the COVID-19 vaccine.
* The authorized COVID-19 vaccines that are recommended for use by NACI have been shown to be safe, as well as efficacious against symptomatic laboratory-confirmed COVID-19 disease.

The position of the Canadian Nurses Association (CNA) is that:

* CNA supports the recommendations from the National Advisory Committee on Immunization and recommends that everyone living in Canada take the vaccine as it becomes available to them.
* CNA is committed to playing a key role in promoting vaccine acceptance and supporting nurses through clear, consistent messaging and evidence-informed resources.
1. **Procedure**

It is important that all staff make an informed decision about whether or not to receive the COVID-19 vaccine; to support staff with their decision-making, FACILITY NAME will provide information about the risks and benefits of the vaccine.

Effective DATE, 2021, all staff who are eligible to receive the vaccine must complete one of the following three options, unless an extension is provided by FACILITY NAME:

1. Receive at least one dose of the COVID-19 vaccine and provide proof of vaccination to the Department NAME (i.e., OH&S) (once staff receive their second dose, proof must be provided to the Department NAME (i.e., OH&S);
2. Submit a medical certificate from a qualified specialist confirming that the vaccine is medically contraindicated; or,
3. Decline to be vaccinated after completing a mandatory e-learning module.

**Antigen Point of Care Testing:**

Where an employee, staff, contractor, volunteer, or student does not provide proof of being fully vaccinated against COVID-19, but instead relies upon the medical reason described at (#2) or the educational session at (#3) the employee, staff, contractor volunteer or student shall

a) submit to regular antigen point of care testing for COVID-19 and demonstrate a negative result, at intervals to be determined by FACILITY NAME, which must be at minimum once every seven days or as directed by Local Public Health Agency. At FACILITY NAME, antigen point of care testing must occur \_\_\_ time(s) per week.

b) provide verification of the negative test result in a manner determined by FACILITY NAME that enables FACILITY NAME to confirm the result at its discretion.

In order to ensure compliance, managers will receive compliance reports from the Department NAME (i.e., OH&S). Compliance reports will verify that the COVID-19 Immunization Program has been completed; however, they will not provide information related to which component of the Program staff has complied with in order to maintain confidentiality. This program is mandatory and failure to comply with the COVID-19 Immunization Program may result in discipline.

The FACILITY NAME COVID-19 vaccine clinics or other designated vaccination clinics will offer COVID-19 vaccine to all employees free of charge. If the vaccine is received elsewhere, vaccine documentation is to be provided to the Department NAME (i.e., OH&S). Without written documentation, staff are considered to be not immunized.

Documentation of receipt of vaccine and consent will be kept in the Department NAME (i.e., OH&S) files. The Department NAME (i.e., OH&S) will offer an optional badge sticker once a staff member has been vaccinated.

1. **Cross Reference Policies/Documents**

Not applicable.

1. **Appendices/Links**
2. Recommendations on the use of COVID-19 Vaccines. National Advisory Committee on Immunization (NACI). January 12, 2021. (retrieved March 26, 2021 from: [https://www.ammi.ca/Content/NACI%20COVID- 19%20Stmt\_Jan%2012%20Update%20Advance%20Copy\_EN%5B1%5D.pdf](https://www.ammi.ca/Content/NACI%20COVID-%2019%20Stmt_Jan%2012%20Update%20Advance%20Copy_EN%5B1%5D.pdf)).
3. CNA welcomes the beginning of COVID-19 vaccination programs in Canada. Canadian Nurses Association. December 17, 2020. (retrieved March 26, 2021 from: https://cna-aiic.ca/en/news- room/news-releases/2020/cna-welcomes-the-beginning-of-covid-19-vaccination-programs-in-canada).
4. Early Evidence of the Effect of SARS-CoV-2 Vaccine a One Medical Center. The New England Journal of Medicine. March 23, 2021. (retrieved March 26, 2021 from: https://[www.nejm.org/doi/full/10.1056/NEJMc2102153)](http://www.nejm.org/doi/full/10.1056/NEJMc2102153%29).
5. Early Impact of Ontario’s COVID-19 Vaccine Rollout on Long-Term Care Home Residents and health Care Workers. Science Table COVID-19 Advisory for Ontario. March 8, 2021reference: [https://covid19-sciencetable.ca/sciencebrief/early-impact-of-ontarios-covid-19-vaccine-rollout-on- long-term-care-home-residents-and-health-care-workers/](https://covid19-sciencetable.ca/sciencebrief/early-impact-of-ontarios-covid-19-vaccine-rollout-on-%20%20long-term-care-home-residents-and-health-care-workers/)
6. Ministry of Health (2021). Directive #6 for COVID-19 Vaccination Policy in Health Settings. Available from: https://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/vaccination\_policy\_in\_health\_settings.pdf