

Employee COVID-19 Vaccine Policy

Policy

As a Medicare and Medicaid recipient, we are required to mandate the COVID-19 vaccination. It is policy that all persons with a student, volunteer or employment arrangement with this center will take necessary precautions and adhere to mandated guidelines established through this policy. The intent of this policy is to safeguard the health of our employees and their families; our customers and visitors; and the community at large from COVID-19 that may be reduced by vaccinations. This policy will comply with all applicable laws and is based on guidance from federal, state and local health authorities, as applicable.

As a condition of employment, all employees are required to receive the COVID-19 vaccination. Exemptions to this policy will be provided only for employees with an approved medical or religious exemption, as described below. Employees who do not timely receive the vaccine and do not obtain an exemption will be considered to have refused to comply with this policy and to have voluntarily resigned their employment.

Definitions:

“Booster” per Centers for Disease Control and Prevention (CDC), refers to a dose of vaccine administered when the initial sufficient immune response to the primary vaccination series is likely to have waned over time.

“Clinical contraindications” refer to conditions or risks that preclude the administration of a treatment or intervention. With regard to recognized clinical contraindications to receiving a COVID19 vaccine, facilities should refer to the CDC informational document, Summary Document for Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States, accessed at <https://www.cdc.gov/vaccines/covid-19/downloads/summary-interim-clinicalconsiderations.pdf>. For COVID-19 vaccines, according to CDC, a vaccine is clinically contraindicated if an individual has a severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine or an immediate (within 4 hours of exposure) allergic reaction of any severity to a previous dose or known (diagnosed) allergy to a component of the vaccine.

“Fully vaccinated” refers to staff for whom it has been 2 weeks or more since completion of their primary vaccination series for COVID-19.

“Primary Vaccination Series” refers to staff who have received a single-dose vaccine or all required doses of a multi-dose vaccine for COVID-19.

“Staff” refers to individuals who provide any care, treatment, or other services for the facility and/or its residents, including employees; licensed practitioners; adult students, trainees, and volunteers; and individuals who provide care, treatment, or other services for the facility and/or its residents, under contract or by other arrangements. This also

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.

includes individuals under contract or by arrangement with the facility, including hospice and dialysis staff, physical therapists, occupational therapists, mental health professionals, licensed practitioners, or adult students, trainees, or volunteers. Staff would not include anyone who provides only telemedicine services or support services outside of the facility and who does not have any direct contact with residents and other staff specified in paragraph §483.80(i)(2). Nursing homes are not required to ensure the vaccination of individuals who very infrequently provide ad hoc non-healthcare services (such as annual elevator inspection), or services that are performed exclusively off-site.

“Temporarily delayed vaccination” refers to vaccination that must be temporarily deferred, as recommended by CDC, due to clinical considerations, including known COVID-19 infection until recovery from the acute illness (if symptoms were present) and criteria to discontinue isolation have been met. (<https://www.cdc.gov/vaccines/covid-19/downloads/summary-interim-clinicalconsiderations.pdf>)

“Up to date” – A person who has received all recommended doses in their primary series of COVID-19 vaccine, and booster dose when eligible. (Definition as per CDC)

Guidelines

1. It is required that all employees working within the center are fully vaccinated (CMS) or up to date (CDC) against COVID-19 unless a valid medical or religious exemption is granted. All current employees are expected to either receive the first dose of a 2-shot series or a single dose of a 1 shot COVID-19 vaccine or obtain an approved exemption from the vaccination requirement by _____, and must complete the vaccination series by _____.
2. The facility may offer vaccinations or the employee may obtain through another provider such as a pharmacy, physician, health department or other health care entity.
3. Proof of vaccination must be provided to the Human Resources department within five (5) days of receiving the vaccination. Examples of proof of immunization include a vaccination card issued by the CDC, a physician’s note, a receipt containing the vaccine information, state immunization information system record, or a signed and current vaccination consent form.
 - a. An employee who has not provided written proof of immunization (or has failed to secure an approved exemption or immunization), within the aforementioned time period will be considered to have refused to comply with this policy and to have voluntarily resigned their employment. Providing false written proof of immunization will be considered a violation of this policy and will result in termination.
4. Clinical consideration for a temporarily delayed vaccination includes known COVID-19 infection until recovery from the acute illness (if symptoms were present) and criteria to discontinue isolation have been met.

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5. An educational program and/or educational materials/fact sheets will be provided to employees which includes information about the vaccine prior to administration and consent for the vaccine.
6. Any employee who obtains approval for a valid exemption will be required to follow additional precautions for infection prevention and control measure when in the center as defined by the facility guideline, and may be subject to routine COVID-19 testing as required by management in an effort to reduce the risks giving rise to the vaccine mandate.
7. New employees will be required to receive COVID-19 vaccination or provide proof of vaccination or provide adequate documentation of exemption at the time of hire. New applicants who have not provided documentation of compliance (or have failed to secure an approved exemption or immunization), will be listed as “pending” hire and will not participate in the new employee orientation program.
 - a. New employee applicants will be given seven (7) business days from the date of the employment health screening to provide adequate documentation of exemption or vaccination. If documentation is not received, Human Resources will advise the applicant they are not cleared for hire and may result in the rescission of the employment offer.
8. Employees on leave of absence who return to work are required to be in compliance with this policy upon return and must provide documentation of policy compliance (approved exemption or immunization) prior to the scheduled return to work date. If no documentation is provided to the Human Resource office at the time of the return to work, the employee will be advised that he/she is not cleared to return to work until he/she is in compliance with this policy.
9. Additional precautions will be implemented to mitigate the transmission and spread of COVID-19 for all staff who are not fully vaccinated (i.e., not completed primary series yet, has a pending or granted religious/medical exemption, or vaccine is delayed for a certain reason, etc. per CMS) or up to date per CDC for COVID-19.
 - a. These precautions include:
 - i. [FACILITY DEVELOPED PRECAUTIONS]
10. Vaccination status will be securely documented and tracked for all employees/staff to include:
 - a. Staff member role, work area and resident contact
 - b. Date of each dose given and specific vaccine given.
 - c. Date of any vaccine booster given.
 - d. Type of exemption if granted and supporting documentation.
 - e. Staff who must be temporarily delayed and when they can resume their vaccination.

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11. Vaccination documentation is kept in the employee's confidential medical file.

Exemption requests for medical and/or religious purposes

Exemptions to immunization may be available for medical contraindications or religious beliefs. The approval or denial of a requested exemption will be based upon documentation submitted by the individual in accordance with established guidelines. The process for employees, volunteers, and students is as follows:

1. Exemption request forms may be obtained in the Human Resources Department. The exemption request form must be submitted to Human Resources seven (7) days after the center and/or Human Resources informs the employees that the COVID-19 vaccinations will be available to the employees. Requests will be reviewed, and the employee will be notified of exemption status within three (3) days of receipt.
2. Individuals requesting an exemption due to a medical contraindication must submit documentation in the form of a letter supporting the medical need for the exemption on his/her provider's letterhead seven (7) days after the center and/or Human Resources informs the employees that the COVID-19 vaccinations will be available to the employees. Each request for medical exemption will be evaluated by the Medical Director.
 - a. Documentation for each staff who requests medical exemption must include:
 - i. The authorized COVID-19 vaccines that are contraindicated and the clinical reasons; and
 - ii. A practitioner statement that the staff member be exempted from the facility's COVID-19 vaccination requirements; and
 - iii. Must be signed and dated by a licensed practitioner, who is not the individual requesting the exemption
3. Individuals requesting a religious accommodation must submit a religious exemption form seven (7) days after the center and/or Human Resources informs the employees that the COVID-19 vaccinations will be available to the employees. Each request for religious exemption, regardless of the reason, will be evaluated by Human Resources.
4. If an exemption is:
 - a. Granted, the individual and the Department Supervisor will be notified in writing. If an exemption is granted for a permanent condition, the individual is not required to resubmit a request each year. Otherwise, the individual will resubmit as needed.

- b. Not granted, the individual and the Department Supervisor will be notified in writing. The employee will be expected to adhere to the vaccination requirement or resubmit documentation requesting an exemption.
- c. Employees who were granted an exemption and decide to take the vaccine at a later date will be expected to immediately take the vaccine barring any change in medical or religious status.

Centers for Disease Control and Prevention (March 30, 2022). *Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States*. <https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html>.

Centers for Medicare and Medicaid Services (April 5, 2022). *QSO-22-07-ALL. Revised Guidance for the Interim Final Rule – Medicare and Medicaid Programs; Omnibus COVID-19 Health Care Staff Vaccination*. <https://www.cms.gov/files/document/qso-22-11-all-revised.pdf>

Centers for Medicare and Medicaid Services (April 5, 2022). *QSO-22-11-ALL. Revised Guidance for the Interim Final Rule – Medicare and Medicaid Programs; Omnibus COVID-19 Health Care Staff Vaccination*. <https://www.cms.gov/files/document/qso-22-11-all-revised.pdf>

Centers for Medicare and Medicaid Services (April 5, 2022). *QSO-22-11-ALL. Long-Term Care and Skilled Nursing Facility Attachment A-Revised*. <https://www.cms.gov/files/document/attachment.pdf>

Centers for Medicare and Medicaid Services. (December 2021) *State Operations Manual (SOM); Appendix PP Guidance to Surveyors for Long Term Care Facilities*. F888 – Infection Prevention and Control. 42 C.F.R. §483.80(i)(1)(2)(3).

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