1. PURPOSE:
To outline the Royal Ottawa Health Care Group's (ROHCG/The Royal) expectations in regards to COVID-19 vaccine immunization of staff.

2. POLICY STATEMENT:
All ROHCG staff are required to be fully vaccinated, subject to medical or other human rights exemptions, by October 15th, 2021. All staff are required to provide proof of full vaccination status or a documented medical/human rights exemption by September 7th 2021. Effective September 7th 2021 all unvaccinated staff will be required to undertake regular antigen testing as per Chief Medical Officer of Health’s (CMOH) Directive #6 for Public Hospitals within the meaning of the Public Hospitals Act, Service Providers in accordance with the Home Care and Community Services 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, R.S.O. 1990, c. A.19. In addition, these staff members will be required to complete an education session to help guide the decision to become fully vaccinated by October 15th, 2021.

3. SCOPE:
This policy applies to all staff (whether working on site or remotely) of the ROHCG, including the Institute for Mental Health Research (IMHR), Royal Ottawa Volunteer Association (ROVA) and the Royal Ottawa Foundation for Mental Health (ROFMH), the Brain Imaging Centre (BIC) and the Centre of Excellence (CoE).

4. GUIDING PRINCIPLES:
The ROHCG recognizes the importance of immunization of staff due to the nature of their work with vulnerable populations and potential for exposure in the community. This policy aims to protect the Royal’s population including all clients/patients, visitors and staff. It is important that all staff make an informed decision about receiving the COVID-19 vaccine and the implications of not receiving the vaccine.
5. DEFINITIONS:

**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.

*Staff* refers to all current and new regular, part-time, casual and temporary staff, and includes employees, physicians, students, trainees, volunteers and contractors.

6. PROCEDURE:

6.1. All staff receive the COVID-19 vaccine, unless it is medically contraindicated. All staff must provide either proof of vaccination or the completed medical exemption form to OHS by September 7, 2021. The ROHCG will provide information about the risks and benefits of the vaccine. All staff will be required to attest during entry screening that either they have been fully vaccinated or have a completed a rapid antigen test with a negative result (within 48 hours prior to shift) when coming on-site to work. *(Appendix 1)*

6.2 In order to ensure that all staff are adequately educated about COVID-19 and the COVID-19 vaccines, the following processes shall be implemented:

6.2.1 **All Staff will provide Proof of COVID-19 vaccine administration as per the following requirements:**

- If the individual has only received the first dose of a two-dose COVID-19 vaccination series approved by Health Canada, proof that the first dose was administered and, as soon as reasonably possible, proof of administration of the second dose; or
- Proof of all required doses of a COVID-19 vaccine approved by Health Canada.
- Confirmation of receiving the vaccine shall be provided to the ROHCG’s Occupational Health & Safety (OHS) Department (*OHSS@theroyal.ca*). Without written confirmation, staff are considered to be not immunized. OHS will maintain a record of staff vaccination status.
- In order to ensure compliance, Managers will receive compliance reports from OHS. Compliance reports will verify that the staff member has received their vaccine and/or COVID-19 Vaccine Educational Module has been completed.

6.2.2 Staff who are not able to receive any of the Health Canada approved Covid-19 Vaccines shall provide written proof of medical contraindication *(Appendix 2)*, from either their primary care physician or nurse practitioner that sets out:

- that the person cannot be vaccinated against COVID-9; and
- the effective time period for the medical reason (i.e., permanent or time-limited).

6.2.3 Staff who choose to remain unvaccinated or choose not to declare their status will be required to participate in a **COVID-19 Vaccine Educational Module** on the benefits of vaccination. In addition, staff who are unvaccinated or choose not to declare their status will submit to regular rapid antigen testing for COVID-19 and demonstrate a negative result, within 48 hours prior to shift. Staff must provide verification of the negative test result in a manner determined by the ROHCG that enables the ROHCG to confirm the result at its discretion. **Note:** Tests are for the exclusive use of the staff member only and are to be used only for routine asymptomatic screening. Educational materials will be provided on how to use the home rapid antigen testing and the documentation that will be required to be provided for each test.
6.2.4 The COVID-19 Vaccine Educational Module (Appendix 3) provided to all staff who have not been vaccinated will cover:
- 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.

6.2.5 Upon completion of the COVID-19 Vaccine Educational Module, staff will have their completion reported through PALMS.

6.3 Those who have yet to confirm a full series of COVID-19 vaccination with OHS by September 7, 2021 will be required to provide proof of a negative COVID-19 test prior to shift commencement. Testing will cease to be required 14 days after the staff member has received and submitted documentation of their full series of COVID-19 vaccine.

6.4 Non-compliance: Staff will adhere to the policies and procedures of the ROHCG. Failure to comply with this Policy will result in disciplinary action, up to and including dismissal. Any staff member providing untruthful information regarding testing or vaccine status will face termination.

6.5 The ROHCG is required, pursuant to the CMOH’s Directive #6 for Public Hospitals within the meaning of the Public Hospitals Act, Service Providers in accordance with the Home Care and Community Services 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, R.S.O. 1990, c. A.19, to report statistical information to the MoHLTC. This information will include:
- the number of staff who have provided proof of being fully vaccinated against COVID-19;
- the number of staff who have provided a documented medical exemption for not being fully vaccinated against COVID-19;
- the number of staff who have completed an educational session about the benefits of COVID-19 vaccination where applicable and;
- the total number of ROHCG staff to whom the Directive applies.

No identifying information will be provided to the Ministry in relation to this policy; all statistical information will be provided in aggregate form. OHS will be responsible for maintaining and supplying COVID-19 vaccination stats as needed.

7. RELATED PRACTICES AND/OR LEGISLATIONS:
Long-Term Care Homes Act, 2007
Public Hospital’s Act, 1990
Occupational Health and Safety Act and its Regulations.
Chief Medical Officer of Health for Ontario - Directive #6 for Public Hospitals within the meaning of the Public Hospitals Act, Service Providers in accordance with the Home Care and Community Services 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, R.S.O. 1990, c. A.19
8. REFERENCES:
Resource Guide – Minister of Long-Term Care’s Directive - Long-Term Care Home COVID-19 Immunization Policy,
Resource Guide - Chief Medical Officer of Heath’s (CMOH) Directive #6 for Public Hospitals within the meaning of the Public Hospitals Act, Service Providers in accordance with the Home Care and Community Services 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, R.S.O. 1990, c. A.19 (collectively the “Covered Organizations”)
Covid 19 Vaccine Policy, University Health Network, Toronto, Ontario (06/2021)
Covid-19 Worker and Volunteer Vaccination Policy, Providence Care, Kingston, Ontario (06/2021)

9. APPENDICES:
http://oreo.rohcg.on.ca/departments/ohs/Resources-PolicyAppendices.cfm
Appendix 1 – Attestation Form
Appendix 2 - Medical Exemption Form
Appendix 3 - COVID-19 Vaccine Educational Module