Ontario COVID-19 Vaccinations

Workplace Vaccination Policy Toolkit

August 31, 2021



Workplace Vaccination Policies | Overview

The following provides an overview of the context and rationale for the recent Provincial Directive on COVID-19 vaccination policies in high-risk settings.

Context and Rationale for Directive #6

- Achieving high immunization rates in Ontario's Covered Organizations through vaccination is part of a range of measures and actions that can help prevent and limit the spread of COVID-19 in these settings.
- Vaccination against COVID-19 helps reduce the number of new cases, and, most importantly, can limit severe outcomes including hospitalizations and death due to COVID-19 in patients, employees, staff, contractors, volunteers, students, and all others who may be present in Covered Organizations.
 - A provincial vaccination policy promoting vaccine uptake among health care workers in the hospital, home and community care and ambulance sectors is aligned with the goals and overall provincial response to COVID-19 in:
 - Protecting vulnerable patients who may be health compromised or at risk of being health compromised in settings that face a higher risk of contracting and transmitting COVID-19.
 - Protecting staff and health human resource (HHR) capacity
 - Reducing the potential for outbreaks, potential disruptions in service and continuity of care.
- On August 17, the Chief Medical Officer of Health (CMOH) issued **Directive #6 mandating high-risk settings** (e.g., hospitals, home and community care service providers, ambulance services) **to have a COVID-19 vaccination policy** for employees, staff, contractors, students and volunteers (directive, resource guide). Vaccination policies **must be effective no later than September 7, 2021.**



Workplace Vaccination Policies | Minimum Requirements for Vaccination Policies

The recent Provincial Directive on COVID-19 vaccination set minimum requirements for vaccination policies in high-risk settings.

Minimum Requirements for Vaccination Policies

- Vaccination policies must be effective no later than September 7, 2021.
- At minimum, policies must require individuals to provide proof of one of three things:
 - Full vaccination* against COVID-19;
 - A medical reason for not being vaccinated against COVID-19; or
 - Completion of a COVID-19 vaccination education session
- Individuals who do not provide proof of full vaccination against COVID-19 are required to undertake regular antigen point of care testing and demonstrate a negative result, at minimum once every seven days.
- Covered Organizations must collect, maintain and disclose, statistical (non-identifiable) information, such as:
 - The number of employees, staff, contractors, volunteers and students that provided proof of being fully vaccinated against COVID-19
 - The number of employees, staff, contractors, volunteers and students that provided a documented medical reason for not being fully vaccinated against COVID-19
 - The number of employees, staff, contractors, volunteers and students that completed an educational session about the benefits of COVID-19 vaccination
 - The total number of employees, staff, contractors, volunteers and students to whom Directive #6 applies

While these are the minimum requirements, more stringent vaccination policies (e.g., increased frequency of antigen point of care testing – up to 2-3 times per week, increased monitoring and follow-up with unvaccinated employees, etc.) can be implemented.





Readiness Area	#	Requirements	Complete d (Y/N)	If no, please indicate steps to complete	Resources
	1	Developed and implemented a workplace vaccination policy. For Covered Organizations outlined in Directive #6, vaccination policies must be in place by September 7 th , 2021.			• <u>Policy Example</u> (Appendix A)
Policy Development & Communication	2	Communications plan developed and implemented to communicate the vaccination policy to all employees, staff, contractors, students and volunteers, and a copy is made available to employees, patients and their substitute-decision makers and family members attending to the setting free of charge.			• <u>Sample policy communication</u> <u>examples (p. 8-9)</u>
	3	The vaccination policy meets the language and accessibility needs of impacted workers.			
	4	IPAC requirements/guidance for in-person training have been followed.			
	1	The vaccination policy clearly defines which workers (e.g., employees, staff, contractors, students, etc.) are impacted by the policy.			
Impacted Workers	2	The vaccination policy clearly defines requirements for contractors (e.g., hospital).			
	3	For Covered Organizations outlined in Directive #6: The vaccination policy is applicable to all employees, staff, contractors , students and volunteers, including businesses or entities operating on the hospital site.			• <u>Directive Resource Guide (p. 3-4)</u>

Readiness Area	#	Requirements	Complete d (Y/N)	If no, please indicate steps to complete	Resources
	1	Developed and implemented an Educational Program that addresses the following components: • how COVID-19 vaccines work; • vaccine safety related to the development of the COVID-19 vaccines; • the benefits of vaccination against COVID-19; and • possible side effects of COVID-19 vaccination.			
Choosing and Delivering the Right Educational Program	2	The content of the Educational Program meets the following requirements:			
	3	The Educational Program meets accessibility needs of people who will be taking the program.			
	4	The Educational Program is appropriate for the linguistic and cultural characteristics of the people who will be taking the program.			
	5	For Covered Organizations outlined in Directive #6: The Educational Program meets the requirements specified Directive #6.			• Resources to support the creation of a covered organization's educational program (Appendix B)
	6	For Covered Organizations outlined in Directive #6: Infection Prevention and Control (IPAC) specialists have been consulted where appropriate/feasible.			

Readiness Area	#	Requirements	Completed (Y/N)	If no, please indicate steps to complete	Resources
	1	 Pollowing existing Provincial Antigen Screening Program (PASP) processes to access government-provided rapid antigen screening kits Adhering to Antigen Point-of-Care Testing Guidance, including, but not limited to, organizational responsibilities outlined 			 Provincial Antigen Screening Program (PASP) Accessing Antigen Tests COVID-19 Antigen Point-of- Care Testing Guidance
	2	Testing occurs at a minimum every 7 days, and up to 2-3 times per week, and should only be used for asymptomatic individuals.			
Testing Program	3	If testing occurs in the workplace, it meets the following operational components: • Staffing requirements (incl. rapid testing lead) or identification of a service provider • Training of testers on specimen collection, testing procedures, and results communications. Ensure testers sign a confidentiality agreement aligned with PHIPA • Identification of testing and storage areas on site that meet Ontario Health recommendations • Performance of regular inventory management (incl. necessary PPE) and quality control testing • Tracking and reporting of results • Compliance with disposal procedures If supervised or unsupervised self-collection occurs in workplace, the individual supervising and/or conducting the self-swabbing must consult the self-swabbing training resource.			 PASP onboarding and training resources Best Practice for Point of Care Testing

Readiness Area	#	Requirements	Completed (Y/N)	If no, please indicate steps to complete	Resources
Testing Program	4	If testing occurs away from the workplace (i.e., at-home testing through unsupervised self-swabbing), it meets the following requirements: • Staffing requirements, including rapid testing lead. • Identification of storage areas on site that meet Ontario Health recommendations, for storage of tests prior to distribution for at home use. • Performance of regular inventory management and quality control testing. • Tracking and reporting of results, including establishing protocol for validating the test result when performed off-site. PASP guidance is being followed to ensure testing protocol meets the Directive requirements of validation of test result. • Organizations must ensure that individuals performing antigen POCT at-home receive a copy of the COVID-19 Antigen Point-of-Care Testing Guidance document and comply with its conditions and instructions before operating the testing device. • The individual conducting the self-swabbing must consult the self-swabbing training resource.			 PASP onboarding and training resources COVID-19 Antigen Point-of-Care Testing Guidance Creative Destruction Lab Rapid Screening Consortium (for tools and cross-learning to support at-home testing program implementation)
	5	Developed processes for validating a negative test result have been determined.			

Readiness Area	#	Requirements	Completed (Y/N)	If no, please indicate steps to complete	Resources
	1	Developed a manual or technology-enabled data collection process to collect impacted workers' required information (proof of full vaccination, written proof of a medial exemption, proof of completion of educational session).			 Acceptable proof of vaccinations (p. 4-5) Acceptable medical exemption (p. 5-6) Acceptable proof of completion of educational session (p. 6-7)
Data Collection, Management, and Reporting	2	Developed processes to collect, maintain and disclose, statistical (non-identifiable) information, such as: i. The number of employees, staff, contractors, volunteers and students that provided proof of being fully vaccinated against COVID-19 ii. The number of employees, staff, contractors, volunteers and students that provided a documented medical reason for not being fully vaccinated against COVID-19 iii. The number of employees, staff, contractors, volunteers and students that completed an educational session about the benefits of COVID-19 vaccination iv. The total number of employees, staff, contractors, volunteers and students to whom Directive #6 applies			
	3	Outlined frequency / cadence of collection of information (e.g., daily, weekly, one-time, etc.).			
	4	Identified privacy implications relating to data access, retention, and storage and developed processes to continually monitor breaches to privacy.			

Readiness Area	#	Requirements	Completed (Y/N)	If no, please indicate steps to complete	Resources
Risk & Legal	1	Engaged in legal consultations to understand the human-rights implications of the vaccination policy.			 COVID-19 and Ontario's Human Rights Code - Questions and Answers Corporate Resources (19tozero.ca) 19zero Briefing Note - Workplace Vaccine Considerations - May 17, 2021
	2	Developed strategy to deal with employees and stakeholders who falsify proof of vaccination.			
Technology	1	Identified technology-enabled solutions to manage the tracking / reporting of employee vaccination status and / or antigen testing results.			COVID-19 Rapid Screening Test Results – Thrive Health
	2	Developed processes to verify vaccination status and / or antigen testing results.			
	1	Outlined how the vaccination policy will affect business operations and/or client services.			
Business Operations	2	Outlined how frequently vaccination status will need to be confirmed (e.g., daily verification upon arrival to workplace, weekly, monthly, etc.).			

Workplace Vaccination Policies | Contact Information



Covered Organizations who have additional questions or concerns about this Directive can contact:



Ministry's Health Care Provider Hotline at 1-866-212-2272



Email at emergencymanagement.moh@ontario.ca



Appendix A: Examples of COVID-19 Vaccination Policies



Examples of COVID-19 Vaccination Policies | Middlesex London Health Unit

Policy Component	Example
MLHU's Employee COVID-19 Immunization Policy	 All employees, regardless of the work they perform, are required to receive the COVID-19 vaccine and any related boosters. Employees who are unvaccinated for COVID-19 (i.e., those who submitted a completed exemption form – medical exemption form or self-attestation of relevant human rights to decline the COVID-19 vaccine – or whose vaccine status information is incomplete) will be required to participate in a COVID-19 Rapid Testing Program. Personal and/or philosophical objections to the COVID-19 vaccine will not be accepted for granting an exemption from receiving the COVID-19 vaccine or any related boosters.
Monitoring	 MLHU requires employees to notify Occupational Health and Safety (OHS) of any new immunizations or TB skin tests they receive. This information is entered by OHS into the employee immunization database. Employees are responsible for updating their personal immunization record through the Immunization Connect Ontario (ICON) Online System. OHS monitors for employees who are no longer up to date with immunizations that are classified as "required", "highly recommended" or "consider" and informs them of their status via email. Employees who signed an exemption form because they did not receive a required or highly recommended vaccine/test can decide to receive the vaccine/test at any time. Employees can contact OHS for assistance and/or to report the immunizations or tests they have received. Documentation of the completion of a health and safety educational session is filed within employee's immunization file and stored with OHS.
Follow-Up	 OHS sends an email reminder to employees who have not provided required immunization/testing information/documentation within two weeks of the first contact/request. If an employee has not provided required immunization/testing information/documentation within one week of the first email reminder being sent, a second email reminder is sent to the employee, with the appropriate leader copied. If an employee has not provided required immunization/testing information/documentation by the date specified in the second email reminder, OHS notifies the appropriate leader to ensure a meeting is arranged as soon as possible. Continued non-compliance will be addressed by leadership with the support of HR.



Examples of COVID-19 Vaccination Policies | Middlesex London Health Unit

Policy Component	Example
Testing Procedures	1. During times where MLHU determines that COVID-19 community incidence rates amongst those who are unvaccinated is high and/or there is an outbreak that impacts MLHU employees, unvaccinated staff, who work in the community and/or in MLHU offices, including clinics, will be required to participate in a COVID-19 Rapid Testing program. 1.1. COVID-19 community incidence rates/outbreaks amongst those who are unvaccinated will be internally monitored by the Population Health Assessment Surveillance Team (PHAST) regularly to determine when rapid testing is required for unvaccinated employees. Employees required to participate in the Rapid Testing Program will be notified by OHS via e-mail. 1.2. Employees who are considered unvaccinated are those who: a. submitted a completed applicable exemption form; or b. whose vaccination information status is incomplete. 1.3. Self-tests are available for pick up at Citi Plaza from OHS. When there are 5 tests left in the provided kit, the employees hall notify OHS. 1.4. The self-test must be completed 24-hours prior to coming onsite for work, this includes work in the community (e.g., home visits, inspections, enforcement activities, etc.). For employees who work five consecutive days, 3 tests will be required on alternating days, within those five days. 1.5. All test results must be reported to OHS. Employees participating in this program will also have to attest when they complete their active screening that they have completed a rapid test with a negative result in the last 24 hours, or other such reporting as they are directed to complete. Documentation will be kept in the employee immunization file. 1.6. Employees who test positive on the rapid test must notify OHS and seek PCR testing at an assessment centre within 24-hours of a positive test or self-isolate for 10 days if testing is refused. Public health guidelines for self-isolation shall be followed. 1.7. If symptomatic, the employee shall not complete at home rapid testing and shall seek PCR testing at an asses



Examples of COVID-19 Vaccination Policies | Bluewater Health

Policy Component	Example
BWH's COVID-19 Vaccination Policy	 The following persons are required to be fully vaccinated before entering the premises of BWH and provide documented proof of this to Occupational Health & Safety: All new hires to BWH are required to be fully vaccinated on their first day of employment. If not fully vaccinated the new hires' offer of employment may be rescinded. All students who will be performing any component of their education within BWH must be fully vaccinated before their first day of learning on site at BWH. All volunteers who will be on-site at BWH. All contract/agency workers when coming on site to BWH and will be asked to sign an attestation form for confirmed fully vaccinated; Exception to contract workers, if essential service where programs or equipment are not able to continue to run; the contractor will be allowed on-site under the condition of: must be fully vaccinated or have tested negative for COVID-19 PCR within 72 hours of on-site visit. Any other personnel who have office space within the BWH buildings and maintain on-site work. Immediately, all BWH staff, are required to declare their vaccination status. There are six responses that can be declared: I am fully vaccinated and have submitted proof to Occupational Health & Safety. I have received at least one dose of the vaccine and will receive a second dose when offered or when able to do so, based on BWH and/or provincial criteria. I am medically contraindicated and unable to receive the COVID-19 vaccine. NOTE: Satisfactory Medical certification will be required to be submitted Occupational Health and Safety I have elected not to be vaccinated for reasons set out in the Human Rights Code of Ontario (HRC), including both creed and disability. Note: Except for reasons of disability, any other objection
Monitoring	 In order to ensure compliance, managers/Medical Affairs will receive/review compliance reports for follow-up. Compliance reports will verify that the COVID-19 program has been completed; however, they will not provide information related to which component of the program staff are completing. Failure to comply with the COVID-19 program may result in discipline up to, and including, termination of employment and revocation of privileges.



Examples of COVID-19 Vaccination Policies | Bluewater Health

Policy Component	Example
Testing Procedures	 All staff in categories 2, 3, 4, 5 and 6 arriving on BWH premises for any work or education-related activities will be required to participate in the self-administered COVID-19 testing program. Testing kits will be provided by BWH. These employees must produce a test result twice every week by completing a mandatory self-administered rapid COVID-19 antigen test to continue to work on-site. Testing requirements will commence on September 7, 2021. Test results must be documented and submitted to Occupational Health & Safety. A date stamped photo of this test will be required upon request. Employees are required to keep a date stamped picture of tests for a minimum of three weeks. If requested, employees will be required to submit a retroactive record of their tests. Employees may also be required to submit a ransom PCR test upon request. Employees may also be required to submit a ransom PCR test upon request. Employees may also be required to submit a ransom PCR test upon request. Employees may also be required to submit a ransom PCR test upon request. Employees who test positive on the rapid test must contact OHS and arrange for a confirmatory diagnostic PCR test at a testing center. They will need to self-isolate at home pending the result of the confirmatory test. Asymptomatic, unvaccinated (or partially vaccinated) employees required to isolate will be placed on a leave of absence from work for the duration of isolation. Employees who fall under category 5 and 6 will be isolated without pay. Consideration will be given to those individuals in category 2, 3, and 4 who have satisfactory medical documentation, approved by OHS for not being fully vaccinated, and those with approved HRC objections will be reviewed. Rapid test kits distributed to those staff members in categories 2, 3, 4, 5 and 6 are to be used only by the staff members who receive them and may not be given or sold to any other person. <



Examples of COVID-19 Vaccination Policies | Kingston Health Sciences Centre

Policy Component	Example
	 1. All KHSC workers and volunteers should make an informed decision about whether to receive a COVID-19 vaccine and must then take one of the following actions as outlined below: 1.1 Be vaccinated for COVID-19 AND provide proof of vaccination to Occupational Health, Safety & Wellness; 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; After the second dose is administered, and as soon as reasonably possible, provide proof of administration of the second dose;
COVID-19 Vaccination Policy	 1.2 Where all Health Canada approved COVID-19 vaccines are medically contraindicated, the individual must provide written proof of the medical contraindication from their physician or nurse practitioner that indicates: that the person cannot be vaccinated against COVID-19; and the effective time period for the medical reason (i.e., permanent or time limited) OR 1.3 Where a worker or volunteer elects not to be vaccinated, or they are unsure of whether they want to be vaccinated, they are required to complete a COVID-19 vaccine training module. If after completion of that module, the individual elects not to be vaccinated, no further action is required. Should, however, they chose to be vaccinated, they must provide proof of vaccination or will be assumed to be unvaccinated.
	 COVID-19 vaccination is NOT mandatory however staff are required to comply with one of the three requirements outlined above. For students, the same requirements exist however each student's status will be managed and tracked by the student's school. KHSC 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 regularly work on site, the same requirements apply however the employer of the contracted staff member will be responsible for managing and tracking the worker's status. KHSC 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 or volunteers joining or being placed in the organization, they will have 30 days from their first day of work or placement to meet the requirements.



Examples of COVID-19 Vaccination Policies | Kingston Health Sciences Centre

Policy Component	Example
	6. 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. 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 but only NACI approved vaccines will be accepted. Proof shall include your name, date of birth, date of vaccination, vaccine name, lot number, and name of the health care practitioner administering the vaccine
COVID-19 Vaccination Policy	



Appendix B: Examples of Resources to Promote COVID-19 Vaccination in the Workplace



Examples of Resources to Promote COVID-19 Vaccination in the Workplace | Toronto Public Health



Five Tips to Increase Employee Vaccine Uptake

Supporting employees to get vaccinated will help protect your employees, customers and the community from COVID-19. As more people get vaccinated, it can help build confidence in the safe return to workplaces, businesses, and strengthen economic recovery.

1. Be a vaccine champion



- Lead by example and get fully vaccinated as soon as you can.
- Share why you got vaccinated or your experience getting vaccinated.
 People who are unsure about getting vaccinated may benefit from hearing from someone they trust.

2. Build trust



- Listen and acknowledge employee concerns.
- Ask questions and help employees understand the benefits of getting vaccinated.
- · Encourage employees to speak with a health care provider.

3. Share information from credible sources



- Share and post COVID-19 vaccine information from credible and trusted sources, such as toronto.ca/COVID19, Health Canada, 19 to Zero
- Encourage people to speak with their health care provider if they have questions.

4. Make vaccination as easy as possible



- Post information about nearby vaccine clinics in common areas.
- · Offer help booking appointments.
- Offer flexible hours to help employees to get vaccinated or time off if they are not feeling well after the vaccination.

5. Celebrate positive actions



- Some employees may be motivated by incentives or challenges. Try
 using the 19 to Zero toolkit to encourage employees to get vaccinated
- Thank employees for getting vaccinated to protect themselves and others.



Promoting COVID-19 Vaccination in the Workplace Checklist

Getting Started

Employers are a trusted source of information for their employees. Workplaces can be a supportive environment that make it easier for employees to get vaccinated. Use this checklist to promote COVID-19 vaccine confidence in the workplace.

	Workplace safety is a shared responsibility. Talk to your Joint Health & Safety committee,
	human resources, management team and/or union about how to support employees to
	get vaccinated.

☐ Highlight the benefits of having high vaccination rates at your workplace, including
reduced absenteeism, employees are protected from COVID-19 and enhanced employee
and customer confidence in returning to the business/workplace.

\square Post vaccine information in staff break rooms and common areas. Use credible sources that
balance benefits and risks. Include locations & dates of nearby clinics.

	Recruit employee	/ management	champions to	o talk about wh	y they go	t vaccinate
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L	Create policies that make it easier for employees to get vaccinate	ed. Offer flexible hours or
	paid sick days if they have side effects after getting vaccinated.	

Use your	organization's	internal	communi	ication	channels	such	as the	intranet	or a	ll staff
emails to	encourage em	plovees	to get va	ccinate	d.					

Create a workplace challenge or a second	d dose challenge. Offer incentives for employees
to confirm they are fully vaccinated.	

Depending on the size of your workplace, you could also consider partnering with other
local organizations to host a joint vaccination clinic in a nearby location for employees and
recidents



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