

**Category:**

**Subject:**

**Issued By:**

**Approved By:**

**Rescinded Policies:**

**Harmonized:**

Workplace Health and Safety

**COVID-19 Immunization Program**

Vice President, People and Transformation

Senior Leadership Team

Yes  No

**Policy Number:**

**Date:**

**Revision Date (s):**

**Page**

SHN-ADMIN-OH-COVID-19

2021/04

2021/09

**Page 1 of 7**

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## PURPOSE:

Scarborough Health Network (SHN) recognizes the importance of immunization of Health Care Workers (HCWs) who are considered at high risk for contracting or transmitting COVID-19 due to the nature of their work and the potential for exposure in the community. The purpose of this policy is to outline organizational expectations with regards to COVID-19 vaccination of employees, medical staff, contractors, volunteers and students. The COVID-19 vaccination program is offered by SHN to meet the requirements of the *Public Hospitals Act* 1990, Revised Statutes of Ontario, Regulation 965. In keeping with our Mission, Vision and Values we are accountable to provide a COVID-19 vaccination program that promotes safe environment for patients and HCWs.

## POLICY STATEMENT:

The safety of our people is critically important and COVID-19 is a communicable disease that can be transmitted among HCWs and patients. The Chief Medical Officer of Health issued [Directive 6](#) on August 17, 2021 directing all public hospitals to develop, implement and ensure compliance with a COVID-19 vaccination policy.

At SHN, COVID-19 vaccination will be mandatory unless medically contraindicated, effective September 7, 2021 for all employees, medical staff, volunteers, students/learners, contractors and on-site vendors. The policy allows a period of time for the unvaccinated to get fully vaccinated during which time they must undergo COVID PCR testing three times per week beginning September 7. Employees who are unvaccinated as of October 1 will be excluded from the workplace on an unpaid leave of absence. Employees who remain unvaccinated and not compliant with this policy as of October 15 will be subject to termination unless there are extenuating circumstances and Credentialed Professional Staff will have their privileges reviewed in accordance with the *Public Hospitals Act*. SHN will provide education and supports for people to remove barriers to vaccination.

## DEFINITIONS:

**Acceptable Medical Exemption to COVID-19 Vaccine:** documentation that aligns with Directive #6 for a medical exemption from a qualified medical practitioner (i.e. family physician, specialist, nurse practitioner) confirming that the vaccine is medically contraindicated.

**Contractors:** third party contractors such as building maintenance (e.g., HVAC, fire alarm inspection, trades, landscaping, pest control, etc.) or suppliers (e.g., Sysco/MM/Eco lab/Life Labs/Arjo, etc.) do fall under the definition of “contractor” for employers responsible for congregate care settings. These would, in general, fall under the category of support worker, which is commonly defined as a type of essential visitor who is visiting to perform essential support services for a hospital or other Covered Organization in the context of a congregate care setting.

**COVID-19:** 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. The risk of severe disease increases with age and is elevated in those with underlying medical conditions. The global pandemic has claimed millions of lives and outbreaks in healthcare facilities have been common.

**Health Care Workers (HCWs):** applies to all persons carrying out activities at SHN, including employees, medical staff, students, undergraduate and postgraduate medical trainees, volunteers and contract workers.

<b>Category:</b>	Workplace Health and Safety	<b>Policy Number:</b>	SHN-ADMIN-OH-COVID-19
<b>Subject:</b>	<b>COVID-19 Immunization Program</b>	<b>Date:</b>	2021/04
<b>Issued By:</b>	Vice President, People and Transformation	<b>Revision Date (s):</b>	2021/09
<b>Approved By:</b>	Senior Leadership Team	<b>Page</b>	<b>Page 2 of 7</b>
<b>Rescinded Policies:</b>			
<b>Harmonized:</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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**Self-isolation:** means staying at home and avoiding contact with other people to help prevent the spread of disease. This includes staying in a separate room away from other people in your home as much as possible and use a separate bathroom if you have one. Make sure that shared rooms have good airflow (i.e. open windows). If you are in a room with other people, keep a distance of at least two metres/6 feet and wear a mask that covers your nose and mouth. If you cannot wear a mask, people should wear a mask when they are in the same room as you.

**Staff working at businesses or entities on hospital premises:** Can include but is not limited to food service establishments, community programs, medical offices etc.

**Work self-isolation:** means maintaining self-isolation measures outside of work for 10 days from their last exposure (for contacts with high-risk exposures); or 10 days from symptom onset (or 10 days from positive specimen collection date if consistently asymptomatic). While at work, the HCW must adhere to universal masking recommendations, maintain physical distancing (remaining greater than 2m/6 ft. from others) except when providing direct care, and perform meticulous hand hygiene. These measures at work are required to continue until non-test based clearance (or test based clearance if required by SHN). The HCW on work self-isolation should not work in multiple locations.

**Fully vaccinated:** 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.

**Not Fully Vaccinated:** having received one dose of COVID vaccine or two doses of vaccine less than two weeks post second dose.

**Unvaccinated:** not having received any doses of COVID-19 vaccine.

## PROCEDURE:

### The SHN COVID-19 Vaccination Program:

There are four(4) components to SHN's COVID-19 Vaccination Program:

- Mandatory Vaccination
- Testing of Individuals Not Fully Vaccinated
- Education and Support
- Accountability for Policy Compliance

#### Mandatory Vaccination

To facilitate this policy all employees, medical staff, contractors, volunteers and students will be required to provide one of the following to Workplace Health and Safety (WHS):

- Proof of full vaccination against COVID-19 OR
- Written proof of an acceptable medical exemption, provided by either a physician or nurse practitioner that sets out: a) that the person cannot be vaccinated against COVID-19; and b) the effective time period for the medical reason (i.e., permanent or time-limited). An SHN approved Certificate of Exclusion from COVID-19 Vaccination form is available.

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 Vice President, People and  
 Transformation  
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**Policy Number:**

**Date:**

**Revision Date (s):**

**Page**

SHN-ADMIN-OH-COVID-19

2021/04

2021/09

**Page 3 of 7**

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HCWs may receive their vaccination at any SHN vaccine clinic. No appointment is necessary. HCWs may also make a request to have a mobile team administer their vaccine in their department/unit.

*New Hires.* Effective September 7, all new hires must be fully vaccinated prior to starting work at SHN. This will be communicated to job candidates during the recruitment process. If a job candidate provides medical exemption documentation, Human Resources will connect with WHS prior to offer of employment to review the documentation and discuss the specific case.

*Volunteers.* All volunteers must be fully vaccinated before volunteering onsite at SHN including SHN vaccine clinics and assessment centres. Vaccination status will be collected by Volunteer Services and submitted to WHS.

*Students, trainees, contract workers, third party contractors and vendors.* The supplying school/agency is responsible for ensuring that the mandatory vaccination requirements of this policy are met.

### Testing of Individuals who are not Fully Vaccinated

Based on a risk assessment, SHN has identified Polymerase Chain Reaction (PCR) testing via nasopharyngeal swabs to be the best testing method to keep patients and HCWs safe in our very high-risk environment. This policy includes an implementation period to allow individuals who are not fully vaccinated to become fully vaccinated by October 1. During this time period, HCWs who are not yet fully vaccinated will be required to participate in Polymerase Chain Reaction (PCR) testing via nasopharyngeal swabs three times per week through SHN's COVID Assessment Centres.

Beginning September 7, HCWs who are unvaccinated (including those with an acceptable medical exemption) or not fully vaccinated must participate in the testing protocol outlined below. The protocol applies to HCWs who work on-site at SHN or remotely (e.g. from home).

- A PCR test is required three times a week (over a seven-day period from Monday to Sunday). The minimum time period between tests must be at least 48 hours.
- Testing is not required when HCWs are on vacation or approved leave and not attending the hospital.
- Testing will be completed on a HCW's own time and there will not be additional compensation for time required for testing. (Note, the Paid Infectious Disease Emergency Leave (Paid IDEL) criteria does not include HCWs receiving regular testing for policy compliance).
- HCWs who are being tested under this policy are required to report for all regularly scheduled shifts while waiting for testing results. (Note, HCWs who seek testing due to the onset of COVID-19 symptoms or a high-risk exposure should contact WHS and not report to on-site work until they are cleared to do so.)
- A QR coded consent form has been created for HCWs to scan and sign at the Assessment Centre in order for WHS to obtain their confidential test results. Where a HCW is unable to utilize the QR Code, hard copies of the consent form are available for signing and will be submitted to WHS in order for the Workplace Health and Safety team to access these results.
- HCWs participating in this testing protocol will be contacted by WHS if they receive a positive test result. HCWs will not be contacted if their test result is negative.

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 Vice President, People and  
 Transformation  
 Senior Leadership Team

**Policy Number:**

**Date:**

**Revision Date (s):**

**Page**

SHN-ADMIN-OH-COVID-19

2021/04

2021/09

**Page 4 of 7**

Yes  No

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- Should a HCW test positive for COVID-19 under this testing protocol, contact tracing will be led by WHS following contact tracing standard work and current guidance for [“Public Health Management of Cases and Contacts of COVID 19 in Ontario”](#) .
- Leaders will be notified when one of their staff tests positive for COVID-19 so that schedule adjustments can be made. They will be engaged in contact tracing if required.

### Education and Supports

SHN believes in an education first approach to building confidence in the COVID-19 vaccine. To ensure that HCWs are educated about COVID-19 and the COVID-19 vaccine the following educational supports are available.

- An educational video based on credible scientific evidence. Instructions for logging into the iLearn system to view the educational video are [available here](#). The iLearn educational materials are also available in hard copy through your Manager.
- HCWs who have questions about COVID-19 vaccine can contact our *VaxFacts Clinic* by calling 416-438-2911 ext. 5738 to have a confidential conversation with a qualified physician who can provide support compassionate counselling and vaccine education virtually on the benefits of vaccination.
- Support is also available from SHN’s Occupational Health Nurses via [occhealth@shn.ca](mailto:occhealth@shn.ca).

SHN will provide the following supports for people covered by this policy to receive a vaccine:

- SHN will provide vaccinations in a specific department/unit upon request. To make arrangements contact Patient Vaccine Team at [patientvaccines@shn.ca](mailto:patientvaccines@shn.ca).
- HCWs may visit any of our Scarborough Vaccination Clinics. No appointment is needed. Vaccination Clinic locations and hours can be found at [www.ScarbVaccine.ca](http://www.ScarbVaccine.ca).
- Assistance with booking a vaccine appointment at an SHN Vaccine Clinic can be accessed by contacting WHS at [occhealth@shn.ca](mailto:occhealth@shn.ca).
- Support of an Occupational Health Nurse via [occhealth@shn.ca](mailto:occhealth@shn.ca).

### Accountability for Policy Compliance

- This is an important health and safety policy. As such, it is critical that all HCWs comply with the policy.
- HCWs are encouraged to access the education and supports described above.
- Employees who have not submitted proof of at least one dose of the vaccine or an acceptable medical exemption by October 1, 2021 will be placed on an unpaid leave of absence, for a maximum of 14 days.
- Employees who have still not submitted proof of at least one dose of the vaccine or an acceptable medical exemption by October 15, 2021 will be subject to termination unless there are extenuating circumstances and Credentialed Professional Staff will have their privileges reviewed in accordance with the *Public Hospitals Act*.
- Organizational leaders will receive status reports from WHS indicating compliance with this policy.
- If an employee or credentialed professional staff member wishes to appeal the application of this policy they may submit a written request to the Director, Workplace Health and Safety, that their concerns be considered, such request to include the reasons for the request and outcome sought. The Director, Workplace Health and Safety, will determine if a further review is to be conducted, which may include consultation with other leaders, medical or other experts, and will respond in writing to the individual requesting the appeal.

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**Revision Date (s):**

**Page**

SHN-ADMIN-OH-COVID-19

2021/04

2021/09

**Page 5 of 7**

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**Important Dates:**

- September 7, 2021 – Policy comes into effect. Testing begins for individuals who are not fully vaccinated.
- October 1, 2021 – First deadline for submitting proof of at least one dose of vaccine or acceptable medical exemption. If proof of vaccine or acceptable medical exemption is not received, the employee will be placed on an unpaid leave of absence.
- October 15, 2021 – Final deadline for submitting proof of at least one dose of vaccine or acceptable medical exemption. If proof of vaccine or acceptable medical exemption is not received, the employee will be subject to termination unless there are extenuating circumstances and Credentialed Professional Staff will have their privileges reviewed in accordance with the *Public Hospitals Act*.

**Other COVID-19 Health and Safety Considerations:**

Continuing Surveillance

Even in the presence of vaccination all HCWs are responsible for reporting any COVID-19 like symptoms which include, but are not limited to, respiratory symptoms to WHS on the first day of illness whether or not they are scheduled to work. Respiratory surveillance for HCWs is enhanced during the COVID pandemic.

Acute Disease

If a HCW is diagnosed with COVID-19, current guidelines will be followed for possible work restrictions. Clearance for work will be determined by WHS. With the environment changing frequently WHS will have all current guidelines. WHS will inform IPAC of any HCW that test positive for COVID-19.

Outbreak Management

COVID-19 watches/outbreaks may include HCWs and/or patient cases that are determined to be health care associated. Using a collaborative approach, IPAC investigates patient cases and WHS investigates HCW cases.

IPAC and WHS in consultation with Toronto Public Health will determine if a particular cluster of infection is an outbreak. Staff who are not fully vaccinated more than two weeks before the outbreak may be placed on an unpaid leave of absence for the duration of the outbreak. Once an outbreak is declared, IPAC will make recommendations on HCW testing. This may include prevalence testing of HCWs for COVID-19.

As information changes regarding COVID-19, the management of outbreaks will follow the most current guidelines.

Exposure Management

WHS will perform contact tracing for any HCWs exposed to COVID-19 in the workplace without proper Personal Protective Equipment (PPE).

Employee Work Restrictions

Work restrictions are determined by WHS. Work restrictions for HCWs who have contracted COVID-19 or had a COVID-19 exposure could include:

- Self-isolation and/or quarantine for the recommended time as set out in current guidelines.
- Work self-isolation may be considered in exceptional circumstances based on current guidelines.

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**Date:**

**Revision Date (s):**

**Page**

SHN-ADMIN-OH-COVID-19

2021/04

2021/09

**Page 6 of 7**

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## **Reporting:**

In accordance with Directive 6, SHN will collect, maintain and disclose, statistical (non-identifiable) information on the number of HCWs to whom this policy applies, number of fully vaccinated HCWs, number of acceptable medical exemptions, and number of HCWs attending educational sessions. Upon request of the Ontario Chief Medical Officer of Health, SHN will disclose the statistical information to the Ministry of Health in the manner and within the timelines specified in the request.

Suspect or confirmed reportable diseases (as per the Ontario Regs 559/91 and amendments under the *Health Protection and Promotion Act*), such as COVID-19, must be reported to the local Medical Officer of Health.

If a diagnosis of COVID-19 results from an occupational exposure, it is reportable to the Workplace Safety and Insurance Board (WSIB).

In accordance with the *Occupational Health and Safety Act* and its regulations, an employer must provide written notice within four (4) days of being advised that a worker has an occupational illness, including an occupationally-acquired infection, or has filed a claim with the WSIB with respect to an occupational illness, to the Ministry of Labour, the hospital's Joint Health Safety Committee (JHSC) and the Union, if applicable.

## **COMPETENCY GUIDELINES:**

WHS Occupational Health Nurses have education on all occupational health policies, processes and legislative requirements. They utilize College of Nurses of Ontario standards and guidelines and the Ontario Hospital Association/Ontario Medical Association Communicable Disease Surveillance protocols to guide decision making. They have received education on COVID-19 vaccines and vaccine hesitancy amongst HCWs.

## **DOCUMENTATION:**

WHS staff will document all HCW information, including proof of vaccination or medical exemption in the electronic occupational health documentation system.

## **REFERENCES:**

1. Sunnybrook Health Sciences Centre, COVID-19 Immunization Policy (March 26, 2021)
2. [Recommendations on the use of COVID-19 Vaccines](#). National Advisory Committee on Immunization (NACI). January 12, 2021. (Retrieved April, 2021)
3. [CNA welcomes the beginning of COVID-19 vaccination programs in Canada](#). Canadian Nurses Association. December 17, 2020. (Retrieved April 2021)
4. [Early Evidence of the Effect of SARS-CoV-2 Vaccine at One Medical Center](#). The New England Journal of Medicine. March 23, 2021. (Retrieved April 2021)
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, 2021.
6. [Public Health Ontario](#) (Retrieved April 2021)
7. [Directive #6 for Public Hospitals](#)

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SHN-ADMIN-OH-COVID-19

2021/04

2021/09

**Page****Page 7 of 7** Yes  No

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**REVIEWED BY:**

Director - Workplace Health &amp; Safety Department (2021/08)

Occupational Health Physician (2021/04, 2021/08)

Infection Prevention and Control (IPAC) (2021/04, 2021/08)

Director Human Resources and Organizational Development and Diversity (2021/04, 2021/08)

Clinical Policy Committee (2021/04)

Risk Management (2021/04, 2021/08)

Joint Health and Safety Committees (2021/04, 2021/09)

Vice President- People &amp; Transformation (2021/04, 2021/08)

**APPROVED BY:**

Medical Advisory Committee (MAC) (2021/05)

Nursing Professional Practice Committee (NPCC) (2021/04)

Professional Advisory Committee (PAC) (2021/04)

Senior Leadership Team (2021/04, 2021/09)