# Policy

It is the policy of this facility that all (100%) of facility staff, regardless of clinical responsibility or resident contact must receive the first dose of a two-dose COVID-19 vaccine or a one-dose COVID-19 vaccine prior to providing any care, treatment, or other facility services by January 27, 2022, and be fully vaccinated by February 28, 2022, unless an exemption is granted based on recognized medical conditions or sincere religious beliefs consistent with federal law. All employees who are fully vaccinated are recommended to receive a COVID-19 vaccine booster (as recommended by the Centers for Disease Control and Prevention).

## **Definitions:**

## Fully Vaccinated:

• Two weeks or more after completing a primary vaccination series for COVID-19. (2 weeks or more since administration of a single-dose vaccine or the administration of all required doses of a multi-dose vaccine.<sup>1</sup>)

## Facility Staff:

- "All facility employees regardless of clinical responsibility or resident contact
- Licensed practitioners
- Students, trainees, and volunteers
- Individuals who provide care, treatment or other services for the facility and/or its residents, under contract or by other arrangement."<sup>1</sup>

**Note:** The COVID-19 vaccine requirements do not apply to facility staff who exclusively perform telehealth or telemedicine services and are located outside of the facility setting, without resident or staff contact or facility staff providing support services exclusively outside of the facility setting without resident or staff contact.

#### Procedure:

- 1. All COVID-19 vaccination(s) provided in the facility to employees will be documented on the employee COVID-19 Vaccine Card and documented in the employee medical record and on the COVID-19 secure roster
  - a. Employees receiving a COVID-19 vaccine outside of the facility will provide documentation to the Infection Preventionist or designee
- 2. The Infection Preventionist or designee will complete a confidential and secure roster of all facility staff (including contract staff) and current vaccination status
  - a. Dates and type of each of the primary two doses of a two-dose COVID-19 series (Pfizer-BioNTech [Comirnaty] or Moderna Vaccines)

- b. Date and type of the one dose of a one-dose COVID-19 Vaccine (Janssen [Johnson & Johnson] Vaccine)
- c. Date and type of booster vaccine
- d. Date and type of additional dose for immunocompromised employees
- e. Date of scheduled vaccine dose for employees not fully vaccinated
- f. Type and date of exemption requested
- g. Type and date of exemption granted
- 3. The Infection Preventionist or designee will identify employees who do not meet the definition of fully vaccinated.
- 4. The Infection Preventionist or designee will contact each employee who does not meet the definition of fully vaccinated to determine:
  - a. If facility staff has received one-dose of the two-dose series and has an appointment for the second dose with verification of documentation
  - b. If facility staff has an appointment to receive the single-dose COVID-19 vaccine
  - c. The employee must request and be granted an exemption for medical contraindications to the COVID-19 vaccine or sincerely held religious beliefs. The employee must provide documentation for exemption for becoming vaccinated for COVID-19:
    - i. Medical condition, contraindications:
      - 1. "Severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine
      - 2. Known diagnosed allergy to a component of the COVID-19 vaccine
      - For the Janssen COVID 19 Vaccine, TTS following receipt of a previous Janssen COVID-19 Vaccine (or other COVID-19 vaccines not currently authorized in the United States that are based on adenovirus vectors)"<sup>2</sup>
      - 4. Other contraindications identified by Centers for Disease Control and Prevention on the "Summary Document for Interim Clinical Considerations for Use in COVID-19 Vaccines Currently Authorized or Approved in the United States", CS321571-W, 12/21/2021: https://www.cdc.gov/vaccines/covid-19/downloads/summaryinterim-clinical-considerations.pdf
    - ii. Documentation must be signed and dated by a licensed practitioner (other than the individual requesting the exemption) that includes:
      - All information specifying which of the authorized COVID– 19 vaccines are clinically contraindicated for the staff member to receive and the recognized clinical reasons for the contraindications; and
      - b. A statement by the authenticating practitioner recommending that the staff member be exempted from

the facility's COVID–19 vaccination requirements for staff based on the recognized clinical contraindications

- iii. Sincere religious beliefs
- iv. Other (i.e., employees for whom COVID-19 vaccination must be temporarily delayed, as recommended by the CDC, due to clinical precautions and considerations)
  - Documentation must be signed by a licensed practitioner that indicates the reason for the temporary delay as recommended by the CDC (for example, individuals with acute illness secondary to COVID-19, individuals who received monoclonal antibodies or convalescent plasma, etc.).
- d. If facility staff (other than employees with valid exemptions) refuses to be vaccinated with a COVID-19 first dose of a two-dose series or a dose of the one-dose COVID-19 vaccine by December 5<sup>,</sup> 2021, or final dose of a two-dose series by January 4, 2022, employee will be terminated (or placed on unpaid leave for up to 60 days if able to show evidence employee is fully vaccinated).
- 5. The Infection Preventionist will educate all employees who are not fully vaccinated (i.e., employee received one dose of a two-dose series or less than 2 weeks since the last dose of a primary COVID-19 vaccine and employees with a valid exemption) additional precautions and measures to mitigate the spread of COVID-19 for all staff that are not fully vaccinated:
  - a. Personal Protective Equipment
    - i. Staff who have not completed their primary vaccination series are to use a NIOSH-approved N95 equivalent or higher-level respirator for source control regardless of whether they are providing direct care to or otherwise interacting with residents
  - b. Transmission-Based Precautions
  - c. Hand Hygiene
  - d. Physical Distancing
  - e. Cleaning and Disinfection
  - f. Screening
  - g. Testing per facility COVID-19 testing policy and procedure
- 6. Employees who are not yet fully vaccinated or those pending or granted an exemption may be reassigned to non-patient care areas when feasible as determined by the Infection Preventionist, Director of Nursing and Administrator.
- 7. All employees not fully vaccinated will be required to be tested weekly for COVID-19.
- 8. All new employees will be required to show evidence of COVID-19 vaccination(s) to determine if fully vaccinated or if the second dose of a two-dose series will need to be administered prior to providing care to any residents.
- 9. Booster Dose: It is recommended that a booster dose of a COVID-19 vaccine for employees 18 and older, at least 6 months after completion of a mRNA vaccine (Pfizer-

BioNTech or Moderna) primary series, or at least 2 months after receipt of the single primary dose Janssen Vaccine. (For employees 16-17 years of age, a single booster of Pfizer-BioNTech COVID-19 vaccine can be administered at least 6 months after completion of the primary series, based on individual benefits and risk. **NOTE:** It is recommended that individuals receive an mRNA COVID-19 Vaccine over Johnson & Johnson's COVID-19 vaccine.

#### Process for Requesting Exemptions to the COVID-19 Vaccine Requirements

- All employees requesting a medical exemption from the COVID-19 Vaccinations must formally request in writing on Attachment A "COVID-19 Vaccine Medical Exemption Form" and have your medical provider complete Section 2 on the form and return to the facility Occupational Health.
- 2. All employees requesting a religious exemption from the COVID-19 Vaccinations must formally request in writing on Attachment B "COVID-19 Vaccine Religious Exemption Form" and return it to the facility Occupational Health.
- 3. The facility Occupational Health representative will present all medical and religious exemptions to the QAA Special Committee to review exemptions for approval or denial.
  - a. At the discretion of the Administrator or QAA Committee, an exemption can be referred to the facility legal team for review and decision
- 4. Employee will be promptly informed of exemption decision
  - a. Employee will be educated on all requirements for testing and mitigation
- 5. The Infection Preventionist will be informed of the COVID-19 exemption decision(s)a. Information will be logged on the confidential COVID-19 Employee Vaccine Log
- 6. All COVID-19 Vaccination Exemption Forms will be placed in the employee personnel file

#### **References and Resources**

- <sup>1</sup>Centers for Medicare & Medicaid Services. QSO-22-07-ALL: Guidance for the Interim Final Rule - Medicare and Medicaid Programs; Omnibus COVID-19 Health Care Staff Vaccination, December 28, 2021: <u>https://www.cms.gov/files/document/qso-22-07-all.pdf</u>
- <sup>2</sup>Centers for Disease Control and Prevention. Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States, December 23, 2021: <u>https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html</u>

- Centers for Medicare & Medicaid Services, Long-Term Care and Skilled Nursing Facility Attachment A, QSO-22-07-ALL: <u>https://www.cms.gov/files/document/qso-22-07-all-attachment-ltc.pdf</u>
- Centers for Disease Control and Prevention, Summary Document for Interim Clinical Considerations for Use in COVID-19 Vaccines Currently Authorized or Approved in the United States, CS321571-W, 12/21/2021: <u>https://www.cdc.gov/vaccines/covid-19/downloads/summary-interim-clinical-considerations.pdf</u>
- Centers for Disease Control and Prevention. CDC Endorses ACIP's Updated COVID-19 Vaccine Recommendations. December 16, 2021: <u>https://www.cdc.gov/media/releases/2021/s1216-covid-19-vaccines.html</u>
- Centers for Disease Control and Prevention. When You've Been Fully Vaccinated. Updated Oct. 15, 2021: <u>https://www.cdc.gov/coronavirus/2019-ncov/vaccines/fully-vaccinated.html</u>
- Centers for Medicare & Medicaid Services. CMS Omnibus COVID-19 Health Care Staff Vaccination Interim Final Rule External FAQ: <u>https://www.cms.gov/files/document/cms-omnibus-staff-vax-requirements-2021.pdf</u>
- Centers for Medicare & Medicaid Services. Federal Register, Medicare and Medicaid Programs; Omnibus COVID-19 Health Care Staff Vaccination. 11/05/2021: <u>https://www.federalregister.gov/documents/2021/11/05/2021-23831/medicare-and-medicaid-programs-omnibus-covid-19-health-care-staff-vaccination</u>
- Centers for Disease Control and Prevention. Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States. Last Updated: December 23, 2021: <u>https://www.cdc.gov/vaccines/covid-19/info-by-</u> product/pfizer/clinical-considerations.html
- Centers for Disease Control and Prevention. Interim Considerations: Preparing for the Potential Management of Anaphylaxis after COVID-19 Vaccination. Page last reviewed: November 3, 2021: <u>https://www.cdc.gov/vaccines/covid-19/clinical-</u> <u>considerations/managing-anaphylaxis.html</u>
- Vaccine Adverse Event Reporting System (VAERS) Frequently Asked Questions (FAQs): <u>https://vaers.hhs.gov/faq.html</u>

- Centers for Disease Control and Prevention. COVID-19 ACIP Vaccine Recommendations. Advisory Committee on Immunization Practices (ACIP), Page last reviewed, November 5, 2021: <u>https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19.html</u>
- Centers for Disease Control and Prevention. New COVID-19 Vaccination Provider Trainings. 03/24/2021: <u>https://www.cdc.gov/vaccines/covid-19/downloads/covid19-vaccination-provider-trainings.pdf</u>