COVID-19 IMMUNIZATION POLICY

Frequently Asked Questions Revised Mar. 2022

Immunization of Workers for COVID-19 Policy

The following information addresses some questions contracted providers may have about Alberta Health Services' (AHS) Immunization of Workers for COVID-19 Policy (Policy). The following FAQs will be updated as additional information is available. We encourage you to check it frequently for updates.

NOTE: This is a living document. As more information is available we will continue to update this document. We appreciate your patience.

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1. What is the purpose of the Policy?

- The purpose of the <u>immunization policy</u> is to protect the health and safety of our workers, patients and the public, and to preserve workforce capacity to support the healthcare system.
- The Policy sets out worker immunization requirements for COVID-19.
- Alberta Health Services (AHS), Alberta Precision Laboratories (APL), Carewest, CapitalCare and Covenant Health will require all employees, members of medical and midwifery staffs, students, volunteers and contractors to be fully immunized for COVID-19 by Nov. 30, 2021.

2. Why is the policy being amended?

- At the direction of Government, AHS will amend the <u>Immunization or Testing of Workers for COVID-19 Policy</u>, effective March 10, 2022.
- For those contracted service providers who, prior to Nov. 30, 2021, had staff who were unable
 to provide services to AHS as a result of such staff not being fully immunized in accordance with
 the Policy, such contracted service providers may, should they so desire, have such staff return
 to provide services to AHS once again; notwithstanding that they are not fully immunized and
 without further testing.
- In addition, for contracted service provider staff who opted into the rapid testing option they may
 also return to provision of services, should the contracted service provider so desire, even if not
 fully immunized and without further testing.
- The Policy applies to contracted service providers for AHS, APL, Covenant Health, CapitalCare and Carewest.
- The successful rollout and implementation of the policy resulted in high immunization rates across AHS and overwhelmingly positive response with 97.7 per cent of staff and 99.8 per cent of physicians becoming fully immunized.
- We are extremely grateful to all of those who are fully immunized and continue to recommend immunization as the best way of protecting ourselves, our patients, and the healthcare system.
- Change has been a constant throughout the pandemic, and we recognize another change to
 this policy may cause frustration and stress among our teams. It is important to reinforce with
 our teams and patients that the vast majority of our staff are fully immunized and that there are
 numerous measures in place to ensure their health and safety while at our sites.

3. Does this Policy change apply to contracted providers?

 Yes. Staff of contracted service providers who have been on leave due to the Immunization of Workers for COVID-19 policy or who have been granted an accommodation under that policy will be affected by this policy change.

4. How will this impact workers granted an approved accommodation for medical or other protected grounds?

• Those workers with an approved accommodation will need to work with their leader and organization around options related to their work.

5. What does this mean for new hires?

• A worker who starts after Nov. 30, 2021 must be fully immunized.

6. Do I need to disclose my immunization status to patients or my co-workers if asked?

- No, you do not have an obligation to disclose your immunization status. It's your choice whether
 you disclose that information to patients or your co-workers.
- If workers do not wish to disclose their health status, patients have the right to ask what other protection methods are in place, such as those listed below.

- Patients in our care may be emotionally vulnerable, please be considerate and compassionate
 in your response to questions about immunization status or other health information. The
 pandemic has been stressful for everyone and people may respond in different ways based on
 their circumstances and experiences.
- There are many ways we can help each other get the information needed to stay safe and supported. See <u>Moral Distress: Considerations for COVID-19</u>.

7. With some workers returning to work, how can I have respectful and safe conversations?

- We have a shared responsibility to create <u>safe and respectful</u> work environments. We must work together in a way that supports respectful workplaces and safe patient care.
- Organizational values guide us to act with compassion and respect, even when we don't understand or agree with the reasoning or motivation behind someone's decisions.
- It is important that we do not engage in inflammatory and confrontational discussions in the work environment and respect the decisions of others.
- If you have specific concerns about your ability to work with another worker in a safe manner, please discuss them with your leader.
- See these supports:
 - o How to stay safe and be respectful
 - o How to talk about COVID-19 Immunization at work
 - o Being Respectful while physical distancing
 - Respectful Workplaces

8. What measures are in place to protect worker and patient safety?

- All healthcare workers, regardless of immunization status, must still follow all current PPE and screening requirements, as well as isolation and quarantine requirements. All staff and physicians are still required to wear a mask, complete daily fit for work screening and stay home when sick.
- As the threat of COVID-19 evolves, we will continue to focus on protecting the health and safety
 of patients, families, and healthcare workers who are essential to keeping our healthcare
 system available for all Albertans.

9. What happens if contracted providers fail to comply?

• Failure to comply will result in AHS' reviewing the applicable contract and initiating further discussions with the vendor and in this respect, AHS reserves all rights it has at law, equity, or pursuant to any applicable agreement.

10. Will AHS be responsible for any increased costs associated with the Policy?

Subject to any previously arranged terms that may have been agreed to by AHS and the
contracted provider, ensuring compliance with the Policy and any associated costing
implications will be the responsibility of the contracted provider. AHS does not have any plans
to reimburse any additional costs incurred in compliance with the Policy.

11. In a construction situation, does the identity of the 'prime contractor" impact application of the Policy?

• No. The Policy applies to all contracted providers at AHS sites or who otherwise have in-person engagement with staff or patients. This is the case irrespective of who the prime contractor is.

12. What is an "AHS patient" for the purposes of the Policy?

• An AHS patient is any patient, client or resident who is receiving medical or health treatment that is funded, in whole or in part, by AHS/Alberta Health.

13. How should contracted providers deal with staff non-compliance, human rights concerns, or potential employment law issues?

AHS requires contracted providers to provide staff according to the policy. Individual
providers/operators are responsible for managing employees in accordance with their
operational governance/structure. Contracted providers must consult their own legal counsel
and other advisors for any issues related to non-compliance by staff, human rights concerns,
employment law, or related matters.

14. Does the Policy apply to Chartered Surgical Facilities (previously called Non-Hospital Surgical Facilities)?

 While individual surgeons with surgical privileges are not considered AHS contracted providers for the purposes of the Policy, staff within Chartered Surgical Facilities must comply with the policy.

15. Does the Policy apply to Indigenous Communities/Organizations?

• Yes. If such Indigenous Communities or Organizations are a contracted provider to AHS where they provide services or attend at an AHS site or where they otherwise engage directly with AHS staff or patients the Policy will apply.

16. Does the Policy apply to contracted provider staff in non-medical roles?

- Yes, the policy applies to contracted staff in non-medical roles.
- The purpose of the Policy is to protect the health and safety of AHS workers, patients, and the
 public, and to preserve workforce capacity to support the healthcare system. The criteria for
 application of the Policy is not whether medical services are provided. Rather, the Policy applies
 to all AHS contracted providers: providing services, or attending, at an AHS facility, including
 continuing care facilities; or who otherwise have in-person contact with AHS workers or patients
 (even if not at an AHS facility).
- Any contracted staff at non-AHS sites who do not have contact with AHS workers or patients do
 not need to be fully immunized. However, if there is contact with an AHS staff member or patient
 the Policy will apply to that individual irrespective of any other COVID-19 precautions such as
 masks, glass barricades, etc.

17. Does the Policy apply to non-AHS contracted providers who transport patients to an AHS facility?

 No. The Policy only applies to AHS contracted providers and would not extend to such an organization in this circumstance.

18. Who should I contact if I have questions?

• Questions can be directed to <u>AHSContractorCovidVaccineConfirm@albertahealthservices.ca</u> or to <u>contcare.vaccine@albertahealthservices.ca</u>.