

CARL POLICY

COVID-19 Vaccination Policy

Category: Administration, Employees and Emergencies
Number: 025

PURPOSE

The purpose of this policy is to maintain a safe work environment for CARL's staff and reduce the risk of COVID-19 transmission within CARL's office by implementing this workplace vaccination policy for staff, members, and visitors.

STATEMENT

COVID-19 vaccinations have proven to be one of the most effective tools to prevent transmission of and infection by COVID-19. CARL is mandating vaccination against COVID-19 for all of its employees whose position entails visiting the CARL office or engaging in business travel on CARL's behalf.

PROCEDURE

This COVID-19 Vaccination Policy applies to all individuals that may visit CARL's office. This includes, but is not limited to, full-time, part-time, indefinite and contract employees, colleagues, contractors, consultants and members (hereinafter collectively referred to as "Individuals").

This Policy shall be effective as of January 3, 2022. As of January 3, 2022, only fully vaccinated Individuals shall be permitted to enter CARL's office or to and participate in any CARL in-person events.

General Requirements for Employees

Effective January 3, 2022, all employees, must provide (see Appendix A):

1. An attestation that the person is fully vaccinated against COVID-19 with proof of COVID-19 vaccine administration; or
2. Written proof of a medical or disability-related reason provided by a physician or registered nurse in the extended class that sets out both:
 - a. a documented medical reason for not being fully vaccinated against COVID-19
 - b. the effective time period for the medical reason; or
3. Prior to declining vaccination for any reason other than a medical reason, proof of completing an educational session approved by CARL about the benefits of COVID-19 vaccination prior to declining vaccination for any reason other than a medical reason. The approved session must, at minimum address:
 - a. how COVID-19 vaccines work.
 - b. vaccine safety related to the development of the COVID-19 vaccines
 - c. the benefits of vaccination against COVID-19

- d. risks of not being vaccinated against COVID-19
 - e. possible side effects of COVID-19 vaccination
4. An employee declining vaccination for any reason other than a medical reason may be subject to suspension without pay.

Proof of Vaccination

Proof that an Individual is fully vaccinated – the electronic or paper receipt provided to the Individual at the time of vaccination – must be sent to the *CARL Manager, Administration and Programs*, who will save it in the respective employees' folders on Secure Drive. This document will only be accessed by the *Executive Director, Manager, Administration and Programs*, and *Administrative Officer and Event Coordinator* and retained by CARL in accordance with applicable laws and will only be used to implement the Policy or for any other related purpose. An Individual who does not provide an attestation to CARL and/or their vaccination receipt is considered to be "not fully vaccinated" for the purposes of this Policy.

Continued Compliance with COVID-19 Protective Measures

Individuals must continue to comply with public health measures and with CARL's policies, protocols and rules with respect to hand hygiene, physical distancing, masking, screening, personal protective equipment and any other measures intended to reduce the risk of exposure and transmission of COVID-19.

Accommodations

Individuals who are unable to receive the vaccine for reasons related to a protected ground under the [Human Rights Code of Ontario \("Code"\)](#) must notify the *Executive Director* in writing as soon as possible (see Appendix A). CARL is committed to complying with its duty to accommodate pursuant to the *Code*.

Rapid Antigen Testing for COVID-19

Individuals who are partially vaccinated or have declined vaccination on medical or disability grounds shall submit to rapid antigen testing for COVID-19, at least once a week and provide verification of the negative test result by emailing them to *Manager, Administration and Programs* before attending CARL's office or client workspaces. Employees are expected to fulfill testing requirements outside of working hours. The frequency of testing is subject to change.

If an Individual tests positive for COVID-19, they will not be permitted to attend CARL's office. The Individual will be required to isolate and undergo PCR (polymerase chain reaction) laboratory testing to confirm the results of the rapid antigen test within forty-eight (48) hours.

New Employees

Subject to human rights obligations, all new employees, as a condition of their offer of employment, are required to be fully vaccinated and to disclose their vaccination status in accordance with the form attached as Appendix "B".

Visitors and Members

Effective January 3, 2022, all visitors and members must be fully vaccinated and disclose their vaccination status prior to entry to in-person meetings or visits, at CARL's office or other meeting venues. Proof of vaccination (electronic or paper copy of a COVID-19 vaccine receipt) will be required upon arrival to CARL's office or welcome to the meeting.

All visitors and members in need of an exemption from vaccination due to a medical or disability-related reason, must contact CARL, prior to their arrival, to disclose the nature of the reason and provide the documentation required to consider accommodation options. CARL reserves the right to request additional information in order to make accommodation determinations.

Consequences of Non-Compliance with Policy

An Individual who is an employee of CARL and who is not in compliance with the Policy may be subject to administrative and/or disciplinary measures including suspension without pay.

Any other Individual who does not comply with the terms of this Policy will be denied access to CARL's office or meeting workspaces and may be subject to other measures.

Use and Disclosure of Information

Personal information and personal health information ("Information") will be collected and retained by the *Administrative Officer and Event Coordinator* at CARL in accordance with applicable laws and will only be used to implement the Policy or for any other related purpose. The information will not be used or disclosed for other purposes without the consent of the Individual to whom it relates, except as required by law. The information will be stored in a secured manner by CARL.

Review and modification of Policy

The measures described in the Policy will be modified as required, as additional relevant information becomes available. CARL reserves the right to implement any other reasonable measure of control to protect the workplace.

GUIDELINES

REFERENCES

Responding to COVID-19 in the Workplace Procedure

[Ontario Human Rights Commission policy statement on COVID-19 vaccine mandates and proof of vaccine certificates](#)

DEFINITIONS

For the purposes of this Policy, "fully vaccinated" means having received the full series of a COVID-19 vaccine or combination of COVID-19 vaccines approved by Health Canada (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 prior to entering CARL's offices or engaging in CARL activities. In the event that applicable governments or public health authorities recommend or require booster shots, "fully vaccinated" status shall also require receipt of booster shot(s) and the passage of the required period of time after having received the booster shot(s).

FORMS

APPROVAL

Approved by: Board of Directors

Approval date: November 29, 2021

Previous Approval Date: N/A

Review Frequency: As needed

Appendix "A" - Consent and Vaccination Status Disclosure

By signing this form, I, _____ (name) consents to the collection, use and disclosure of:

- 1) My name;
- 2) My COVID-19 vaccination status; and,
- 3) My COVID-19 vaccination receipt (if applicable), or such other receipts or confirmation which is implemented by the applicable level of government or public health authority (and which CARL may accept as constituting valid proof of vaccination).

(a) to CARL, solely for the purpose of managing the employment (or other) relationship, planning, implementing, and administrating the COVID-19 vaccination Policy;

(b) to CARL's members, in order to comply with CARL members' policies requiring confirmation of vaccination in order to attend any offsite work-related event requiring proof of vaccination. In the event that clients require such confirmation, CARL shall only disclose the least amount of information necessary to comply with the members' requirements; and

I understand that disclosing my vaccination status is voluntary. However, completing this form is mandatory.

The collected information will be retained for the greater of (a) one year or (b) until the purpose for which the information is collected is no longer reasonably served by the retention of the information and retention is no longer necessary for business purposes or as required by law.

The statement below that accurately describes my vaccination status as of _____ (date) is:

- 1) Fully vaccinated (I received my final dose of a vaccine series approved by Health Canada more than 2 weeks ago). I have attached the vaccination receipt(s);
- 2) Fully vaccinated in waiting period (I received my final dose of a vaccine series approved by Health Canada less than 2 weeks ago. The 2 weeks period will be completed on _____ (date). I have attached the vaccination receipt(s);
- 3) Partially vaccinated (I received my first dose of a two-dose vaccine series approved by Health Canada, and my second appointment is scheduled for _____ (date). I will advise the *Executive Director and Manager, Administration and Programs* once I have received my second dose. I have attached the first vaccination receipt, and will provide the second dose vaccination receipt within 3 days of receiving my second dose. In such case, this Consent shall also apply;
- 4) I received a vaccine series which has not been approved by Health Canada;
- 5) I am not vaccinated;
- 6) I decline to answer whether I have been vaccinated.

IF NOT VACCINATED, PLEASE COMPLETE THIS SECTION - CONFIRMATION OF REASON:

In the space below, please indicate the reason(s) why you have not received all required doses of the COVID-19 vaccine. If you are unable to receive the COVID-19 vaccine for reasons related to a disability in accordance with the [Human Rights Code of Ontario](#), please attach the required written proof as outlined under "General Requirements" of the Policy, but please do not include your diagnosis.

Consent

Furthermore, I consent to the collection, use and disclosure of:

- 1) My name;
- 2) My COVID-19 vaccination status; and,
- 3) My COVID-19 vaccination receipts (if applicable), or such other receipts or confirmation which is implemented by the applicable level of government or public health authority (and which CARL may accept as constituting valid proof of vaccination).

(a) to CARL, solely for the purpose of assessing my candidacy for employment, managing the employment relationship, planning, implementing, and administrating CARL's COVID-19 vaccination Policy and in order to comply with any reporting requirements of CARL's members;

(b) and to CARL's members in order to comply with CARL's members' policies requiring receipt of vaccination in order to attend any offsite work-related event requiring proof of vaccination. In the event that clients require such confirmation, CARL shall only disclose the least amount of information necessary to comply with client requirements.

The collected information will be retained for the greater of (a) one year or (b) until the purpose for which the information is collected is no longer reasonably served by the retention of the information and retention is no longer necessary for business purposes or as required by law.

With my signature below, I confirm that I have received and reviewed, and understand this COVID-19 Vaccination Policy

I consent to the collection, use, retention, and disclosure of the information requested and provided as set out in this policy.

I understand that my conditional offer of employment may be revoked and I will not be an employee of CARL in the event that I do not comply with this Policy.

I certify that all information and answers provided herein and in any related documents are complete, true and correct to the best of my knowledge.

Date	
Name	

Signature	
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Appendix "B" - Consent and Vaccination Status Disclosure (New Employee)

I, _____ (name), understand that my offer of employment dated [date] is conditional on my having been fully vaccinated against COVID-19 in advance of my anticipated start date of [date].

Pursuant to the terms of my offer of employment, the offer of employment may be revoked and I will not be an employee of CARL in the event that I have not been fully vaccinated in advance of my start date, or in the event that I fail to provide satisfactory proof of my vaccination status.

However, if I am unable to receive a vaccination for valid reasons requiring accommodation, I have been encouraged to disclose this requirement to CARL and in such case CARL will determine whether I may be reasonably accommodated.

The statement below that accurately describes my vaccination status as of _____ (date) is:

- 1) Fully vaccinated (I received my final dose of a vaccine series approved by Health Canada more than 2 weeks ago). I have attached the vaccination receipt(s);
- 2) Fully vaccinated in waiting period (I received my final dose of a vaccine series approved by Health Canada less than 2 weeks ago. The 2 weeks period will be completed on which is prior to my anticipated start date). I have attached the vaccination receipt(s);
- 3) Partially vaccinated (I received my first dose of a two-dose vaccine series approved by Health Canada, and my second appointment is scheduled for: _____ which is at least 2 weeks before my anticipated start date.) I will advise CARL once I have received my second dose. I have attached the first vaccination receipt and will provide the second dose vaccination receipt within three days of receiving my second dose. In such case, this Consent shall also apply. **If I fail to receive my second dose or if I fail to provide CARL with the second vaccination receipt, I will be considered non-compliant with my conditional offer of employment and the offer of employment shall be revoked;**
- 4) I am unable to receive a COVID-19 vaccination. I have completed below the section 'Confirmation of Reason'. CARL will be in touch to ascertain whether a reasonable accommodation is possible. CARL may request further information from you;
- 5) I am not vaccinated.

IF NOT VACCINATED, PLEASE COMPLETE THIS SECTION - CONFIRMATION OF REASON:

In the space below, please indicate the reason(s) why you have not received all required doses of the COVID-19 vaccine. If you are unable to receive the COVID-19 vaccine for reasons related to a disability in accordance with the [Human Rights Code of Ontario](#), please attach the required

written proof as outlined under "General Requirements" of the Policy, but please do not include your diagnosis.

Consent

Furthermore, I consent to the collection, use and disclosure of:

- 1) My name;
- 2) My COVID-19 vaccination status; and,
- 3) My COVID-19 vaccination receipts (if applicable), or such other receipts or confirmation which is implemented by the applicable level of government or public health authority (and which CARL may accept as constituting valid proof of vaccination).

(a) to CARL, solely for the purpose of assessing my candidacy for employment, managing the employment relationship, planning, implementing, and administrating CARL's vaccination Policy and in order to comply with any reporting requirements of CARL's members;

(b) and to CARL's members in order to comply with CARL members' policies requiring receipt of vaccination in order to attend any offsite work-related event requiring proof of vaccination. In the event that clients require such confirmation, CARL shall only disclose the least amount of information necessary to comply with client requirements.

The collected information will be retained for the greater of (a) one year or (b) until the purpose for which the information is collected is no longer reasonably served by the retention of the information and retention is no longer necessary for business purposes or as required by law.

With my signature below, I confirm that I have received and reviewed, and understand this COVID-19 Vaccination Policy

I consent to the collection, use, retention, and disclosure of the information requested and provided as set out in this policy.

I understand that my conditional offer of employment may be revoked and I will not be an employee of CARL in the event that I do not comply with this Policy.

I certify that all information and answers provided herein and in any related documents are complete, true and correct to the best of my knowledge.

Date	
Name	
Signature	