

COMMUNITY LIVING DURHAM NORTH

COVID - 19 VACCINATION POLICY AND RAPID ANTIGEN  
TESTING AS AN ACCOMMODATION

Policy No. C-29 (Human Resources)

Effective Date: September 7, 2021

Last Revision: April 4, 2022

Last Review:

Rationale:

To enable Community Living Durham North to provide a safe environment to supported people, its employees, volunteers and students, and also to contractors entering into CLDN workplaces.

Policy Statement:

Community Living Durham North is committed to ensuring the health and safety of all supported persons, as well as the employees, volunteers, students and contractors who provide services on its behalf.

All people are encouraged to be vaccinated, and to get the booster as well, and the second booster if eligible. The agency is able to request proof of vaccination and it will share aggregate information with our funding Ministry (MCCSS). Aggregate data is anonymous, numbers only information.

People who do not provide proof of full vaccination (meaning, minimally, just the first and second dose) must do one of two things:

- Provide a medical reason for not being vaccinated against COVID-19, signed by a qualified physician or nurse practitioner, which sets out the effective time period of the medical reason; or
- Complete of a COVID-19 vaccination educational session that will be provided by CLDN.

Regardless of vaccination status, all employees and visitors must complete a rapid antigen test twice per week, if they work two or more shifts, or if they visit twice or more often, in that week. An employee who works a single shift in a week, or a one-time visitor, must test on that one occasion.

Approved by: Clare Suggitt  
for the Board of Directors

Date: April 4, 2022

COMMUNITY LIVING DURHAM NORTH

COVID - 19 VACCINATION POLICY AND OUR RAPID ANTIGEN TESTING ACCOMMODATION

Procedure No: C-29-1

**Background on the Pandemic**

Effective Date: September 7, 2021

Last Revision:

Last Review: April 4, 2022

- The COVID-19 pandemic has caused levels of disease and death not experienced world-wide in 100 years. COVID-19 is spread primarily through respiratory droplets. Individuals with certain pre-existing medical conditions are at a higher risk for more severe symptoms after contracting COVID-19.
- The original virus has evolved into multiple, increasingly deadly variants, and at the time of writing Ontario has entered into its 4<sup>th</sup> wave with new cases again topping 600 per day.
- There are currently four vaccines approved for use in Canada: the Pfizer-BioNTech vaccine, the Moderna COVID-19 vaccine, Johnson and Johnson COVID 19 Vaccine and Astra Zeneca COVID Vaccine. The vaccines currently approved in Canada have been shown to be safe and effective against symptomatic COVID-19. Information regarding these vaccines can be found at <https://covid-19.ontario.ca/covid-19-vaccines-ontario>.
- Some people supported by CLDN are medically fragile and/or unable to comply with social distancing and infectious disease transmission prevention protocols. Vaccination for COVID-19 has been found to be both safe and effective in preventing the disease.

Procedure No: C-29-2

**The Range of Options for Existing Employees**

Effective Date: September 7, 2021

Last Revision: April 4, 2022

Last Review:

- The preferred option is to provide proof of full vaccination to the HR Department.
- Alternatively, an employee who has been advised, for health reasons, to not get the vaccine, may choose to provide proof of this fact via written communication signed by a physician or nurse practitioner. CLDN will not pay for such notes as it would place at least as much value in a completed training session... see next bullet.
- Any employee who cannot provide proof of vaccination, or of the medical contraindication, must undertake to complete a COVID – 19 vaccination training session.
- The educational module selected by CLDN is “COVID-19 Vaccine Education; Helping You Make an Informed Decision.” This resource is an adaption of a training module

created by the Sunnybrook Health Sciences Centre, and it has been mounted on CLDN's Surge training platform. The module will be integrated with a brief quiz designed to ensure that the employee has actually completed the course, and a notification of completion will be generated by the platform and sent directly to HR.

- All employees current as of September 7, 2021 will have until September 27, 2021 to provide proof of full vaccination; of a medical contraindication, or of having completed the aforementioned educational training module. Failure to do so will result in progressive discipline up to and including termination of employment.
- Note that the meaning of maintaining our vaccination status in good standing may evolve over time. Boosters and even annual vaccinations may become necessary, and if these or other measures become recognized best practices or are mandated by government this policy will be revised accordingly.

Procedure No: C-29-3

**Vaccination is Mandatory for New Hires and for New Student Placements**

Effective Date: September 7, 2021

Last Revision: April 4, 2022

Last Review:

- As of September 7, 2021, all offers of employment will be conditional upon proof of full vaccination and a commitment to maintaining vaccination in good standing through the entire course of the pandemic - subject to accommodation for substantiated medical reasons.
- A prospective employee/student will be given time to obtain full vaccination but under no circumstance will employment (or the placement) commence without it.

Procedure No: C-29-4

**Rapid Antigen Testing**

Effective Date: September 7, 2021

Last Revision: June 2, 2022

Last Review:

- Regardless of vaccination status, all employees and visitors must complete a rapid antigen test twice per week; or once if they will only work or visit once (for visitors, see the exceptions noted in C-29-7 below).
- Note however that Rapid Antigen testing is not indicated for anyone who has COVID symptoms, and of course such persons should not be coming to work. In addition, if someone has tested positive through either PCR or RAT, they do not need to be a part of surveillance testing for 30 days afterwards. After 30 days, normal RAT testing can re-commence. Anyone who remains asymptomatic and continues to test positive up to 90 day's post-illness can continue to work. If, at anytime throughout the 90 days the staff has a negative test result the 90-day count will cease. The next positive test result

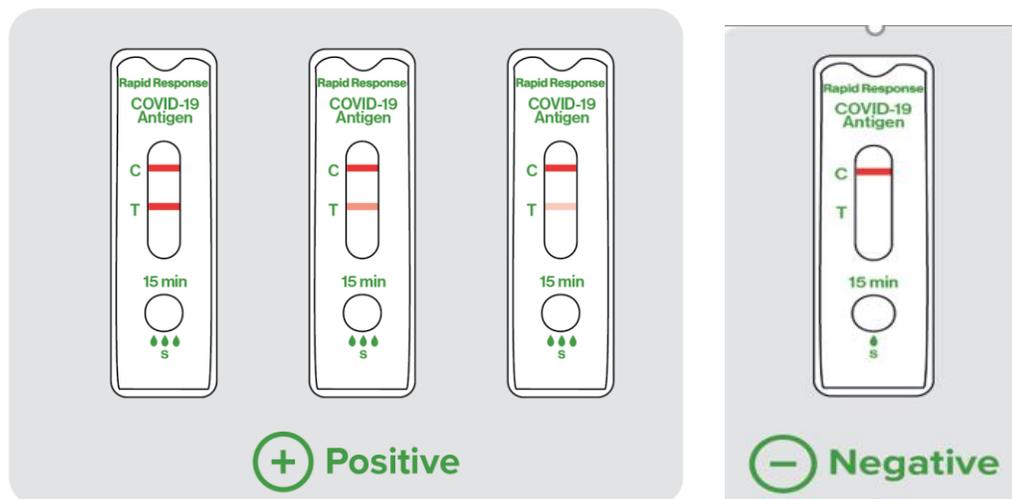
will be treated as a first positive and staff will need to start over and follow the existing protocols in place for testing positive.

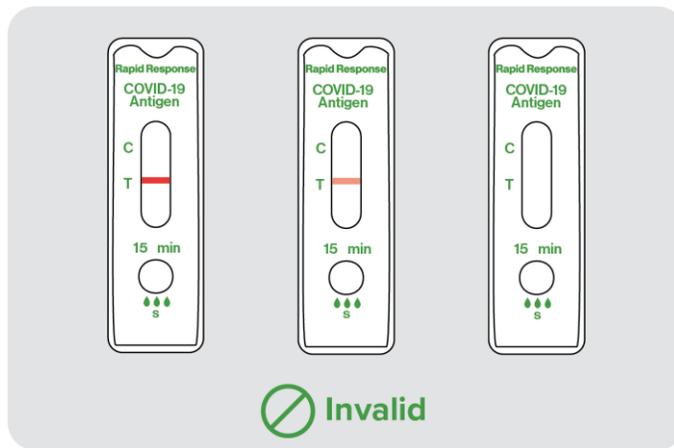
- A staff member who has been off isolating due to living with a positive case is required to test at the beginning of their first shift back and may not pass the screening station until a negative result is received.
- We will employ the “supervised self-testing” option and every location will be provided with a supply of kits so that testing can happen during the employee’s shift, whether they’re at their regular place of work or doing a shift at a different site.
- Each location will create a temporary setting that allows for self-testing to occur in a clean and safe environment. The area should be kept temporarily clear of anyone other than the self-testing employee and the designated “supervisor.” Hands and the surface area of the station should be sanitized. Put gloves on both hands. Avoid splashing and clean up any spills using disinfectant. Afterwards, dispose of gloves, specimens, used extraction tubes (with dispensing nozzle closed), used test devices, and other potentially contaminated materials into biohazard containers that will be supplied to each location. Afterwards, clean the surface area where you have tested with disinfectant and store it away.
- Self-testing must be observed by a colleague who has been trained. For this reason, it is mandatory that all staff (full time, part time, vaccinated and unvaccinated) are prepared to act as a “supervisor” whenever a colleague is about to self-test. It is also mandatory that all staff access and take full advantage of the on-line training modules that are provided (see below) in order to ensure that we are all providing “informed supervision.”
- The Rapid Antigen test takes about 15 minutes to generate a result. For this reason, we are not using it in the strict sense as a screening tool for employees. If necessary, the employee can enter the program and self-test later on when the necessary supervision is available. Obviously, however, it is critical that the employee notify their manager and leave the work site immediately if the result of the test is Positive.
- A Failed or Inconclusive test must be repeated with a new swab and test kit. But only one re-test is allowed. A second failed or inconclusive test must be treated as a positive.
- The result of the self-test will be communicated directly to HR via *Formstack*. The template in *Formstack* calls for the location, the name of the self-testing employee, the person’s signature, and the test result. It also calls for the name and signature of the “supervising” colleague, and it is this second person who is actually certifying the result and who will click “Send.” The date of the test will be generated automatically.
- In those locations that have very small staff teams, the manager will put in place individualized solutions to ensure that self-testing is supervised.

- This paperless, electronic transmission of information, to a centralized HR department, is the best way available to us to safeguard peoples’ privacy.
- At the present time, the result of every self-test must be reported to HR in the manner described above.
- Any positive test result should be regarded as a preliminary positive, but it must be reported immediately and the person must leave the work place as soon as this can be done safely.

Procedure No: <u>C-29-5</u> <b>What all Staff Must Know about Rapid Antigen Self-Testing</b>	Effective Date: <u>September 7, 2021</u> Last Revision: <u>April 4, 2022</u> Last Review:
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- All staff need to be trained to self-test and to act as informed “supervisors” when others have to self-test. Therefore, the following online training will be necessary and mandatory.
- All staff will participate in training on Surge Learning which includes a brief video demonstration specific to completing a Rapid Antigen test. The video includes instructions specific to the rapid tests we use along with the nasal swab technique. Watching this video and getting a perfect test score is all that is required for you to be deemed fully trained.
- It explains that after a wait of 15 minutes you will get one of the following readings:





- If there is only one red line and its under the T, or if there is no red line at all, you have a failed or an inconclusive test. As stated above, you must then re-test with a new swab and test kit. A second failed or inconclusive test must be treated as a positive; i.e. you have failed the Screening Tool; you need to go home, self-isolate, and arrange for a PCR test. Communicate the result to HR immediately. If the PCR test is negative you can return right away to the workplace.

Procedure No: C-29-6  
**Accommodation**

Effective Date: September 7, 2021  
Last Revision: April 4, 2022  
Last Review:

- While all staff must self-test twice per week, mandatory Rapid Antigen Testing is a kind of accommodation offered by CLDN to people who cannot, or choose not, to provide proof of being fully vaccinated.
- It enables them to remain actively employed, while also providing assurance to supported people, to the families of supported people, and to their own colleagues, that the resulting risks are being monitored and contained.
- No other accommodations are foreseen at this time, but as the pandemic continues to run its course one or more of the following may become necessary:
  - Use of Enhanced PPE;
  - Reassignment to non-direct care functions (a form of accommodation that will rarely be possible, given the nature of our organization);
  - Reassignment to work with supported people who are believed to be at lower risk;
  - Temporary, unpaid leaves of absence (during which time, unvaccinated people would be permitted to use any unused vacation and/or lieu time).

Procedure No: C-29-7  
**Visitors and Contractors**

Effective Date: September 7, 2021  
Last Revision: July 8, 2022  
Last Review:

- Contractors who agree to perform indoor work at CLDN locations, and all other visitors, including Family members, must do a self-test upon arrival at the program. Alternatively, they may self-test at home and certify upon arrival, on a CLDN form, that they tested negative.
- That said, this policy, like the Ministry directive behind it, is intended for congregate settings utilized by supported people. While we have made the requirement to test applicable to administrative employees, visitors to our office locations are exempted because they are not congregate settings and the requirement is simply not practical in the case of many visitors, including delivery people and the employees of our janitorial service, who arrive after hours when no one is present to supervise their test. The janitorial crews that service our day program buildings after hours are also exempt from the testing requirement.
- If a CLDN test is used, the result must be reported. The staff who meets the contractor or visitor and provides the test will also supervise that test and then assist the person to report the result via *Formstack*.
- If the contractor's work requires them to attend our site on two or more days in a 7-day period, then, like employees, they will need to test twice. Guests visiting on two or more occasions will do likewise.
- In addition, of course, contractors and visitors must follow our protocols throughout their stay (i.e. wear a mask and social distance).
- Should a visitor or contractor refuse to adhere to these protocols, staff will call their immediate supervisor during office hours or the on call manager in off hours.

Procedure No: C-29-9  
**Other COVID-19 Protective Measures**

Effective Date: September 7, 2021  
Last Revision:  
Last Review: April 4, 2022

- Our website includes series of protocols that are frequently updated and added to. At the time of writing, they include, but are not limited to:
  - CLDN's Response to COVID-19;
  - Protocols for CLDN employees, visitors and contractors;
  - Covid-19 Resources;

- COVID 19 Protocol for an outbreak in a location where a person(s) is/are not able to self-isolate;
  - COVID 19 Protocol for bedroom isolation;
  - Transportation Protocol;
  - Guidelines for visitors;
  - Guidelines for Community Support Services;
  - Guidelines for Respite Services;
  - Our Protocols for Group Homes; and our plans for Respite and Day Programs as they move toward a partial re-opening during COVID-19;
  - Handwashing;
  - Physical Distancing;
  - PPE
- At this time, and until further notice, none of these protocols are being relaxed regardless of vaccination status or compliance with Rapid Antigen testing requirements.

Approved by: Glenn Taylor  
CEO

Date: July 8, 2022