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Section:	Infection Prevention & Control

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Title: COVID-19 Vaccination Policy - Workers

PURPOSE

Healthscope is responsible for providing a safe workplace and in doing so reduce the risk of transmission of COVID-19. Healthscope recognises that COVID-19 is a highly contagious and potentially fatal condition and has developed this risk-based policy to reduce the risk of COVID-19 transmission in the workplace.

Risk Assessment

This policy has been developed and implemented following a comprehensive risk assessment undertaken by Healthscope and is based on guidance provided by the Australian Government Coronavirus (COVID-19) website, Safe Work Australia and other federal, state and territory government websites and safety regulators.

Healthscope has deployed vaccination as a safety control and considers it to be more effective than alternative controls such as personal protective equipment (PPE). This policy has been deployed to afford Healthscope's workers with the greatest protection reasonably practicable.

Control Measures

Healthscope has already implemented a number of safety control measures to manage COVID-19 in the workplace and minimise the risk of its transmission, including:

 COVID Safe Business Plans, Operational Readiness Checklists, ventilation processes, physical distancing, staggering of breaks, increased cleaning of equipment and high touch surfaces, the use of personal protective equipment, good hand hygiene, COVID-19 patient and staff screening app, COVID-19 policies and guidelines.

All workers must continue to comply with Healthscope's policies and procedures relating to COVID-19. This COVID-19 Vaccination Policy supplements and should be read in conjunction with the following Healthscope policies and guidelines:

- Healthscope Respiratory Protection Program (2.72)
- Healthscope COVID-19 PPE Guideline
- Healthscope COVID-19 Asymptomatic Testing
- Local site COVID Safe plan
- Immunisation for Vaccine Preventable Diseases for Healthcare Workers Policy (6.29)
- Personal Protective Equipment Policy (6.23)
- Patient Precautions Standard and Transmission Based, Management of Policy (2.72)
- Work Health and Safety (WHS) Policy (6.01)

Healthscope recognises that the COVID-19 vaccine is not a total solution to managing COVID-19 in the workplace but it must form a part of robust, multi-layered strategy to ensure we can go about business and provide care as safely as possible.

Consultation

Healthscope has undertaken a considered and extensive consultation process with its Workers in the development and implementation of this policy, which included: (1) notifying them of the introduction of this policy and its likely effect on Workers; (2) providing information on the policy rationale and risk assessment methodology; (3) providing workers with any relevant information in writing; (4) inviting workers to express their views on the policy and risk-based approach; and (5) giving genuine consideration to any matters raised by Workers.

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SCOPE

This policy applies to all clinical, non-clinical, support, administrative and executive workers working within any Healthscope premises or providing care to Healthscope patients or residents including employees, individual contractors / sole traders, and volunteers of Healthscope (hereafter collectively referred to as "**Workers**").

A separate and similar Healthscope COVID-19 vaccination policy is being developed for credentialled practitioners not employed or engaged directly by Healthscope including but not limited to Visiting Medical Officers ("VMOs"), Surgical Assistants, Registered Health Practitioners, Osteopaths, Dietitians, Dental Assistants, Speech Pathologists, Social Workers and Psychologists.

A separate and similar Healthscope COVID-19 vaccination policy is being developed for contracted service providers, sub-contractors, employees of a contractor or subcontractor, agency staff and students.

Separate Healthscope COVID-19 vaccination policies, or modifications to existing policies may be developed for other cohorts including temporary workers not engaged directly by Healthscope, Healthscope tenants, visitors and patients. The reason for creating separate policy documents related to vaccination is due to the different legal relationships we have with various stakeholders, and the policy terms need to be appropriate in light of the legal relationships.

POLICY

Principles:

- Healthscope has implemented this risk-based policy to reduce the risk of COVID-19 transmission in the workplace. Healthscope recognises that COVID-19 is a highly contagious and potentially fatal condition.
- Healthscope has a moral and legal responsibility to take all reasonable practical steps to provide a safe workplace.
- Healthscope has deployed vaccination as a safety control and considers it to be more effective than alternative controls such as personal protective equipment (PPE). This policy has been deployed to afford Healthscope's workers with the greatest protection reasonably practicable.

COVID-19 Vaccination Program Aims:

- Ensure optimal protection for our patients from COVID-19, especially vulnerable patients
- Provide safe workplaces for our people and partners
- Create a reputation as a safe health provider and destination health employer
- Assure compliance with Public Health Orders

Policy Framework:

• Unless required to do so earlier pursuant to an applicable Public Health Order or other legislation or directive, to work for Healthscope after <u>31 January 2022</u>, all Workers are required to show evidence of completed vaccination against COVID-19 (which currently requires two doses of a COVID-19 vaccine approved by the Therapeutic Goods Administration or otherwise approved by Healthscope), or alternatively to demonstrate evidence of a valid exemption.

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- The requirement for COVID-19 vaccination is based on the high transmissibility and level of risk to the Workers or patients of exposure to COVID-19.
- It is the Worker's responsibility to arrange their vaccination to ensure compliance with this policy or applicable Public Health Order.
- In some Healthscope facilities, Healthscope will offer on-site administration of COVID-19 vaccinations.
- COVID-19 vaccination does not exempt Workers from compliance with all other infection prevention policies, protocols and directives such as those itemised in Healthscope's Respiratory Protection policy.

Evidence:

- Evidence of COVID-19 vaccination can be in the form of either an individual's COVID-19 Vaccination Certificate or Immunisation History Statement from the Australian Immunisation register (AIR). Data will be collected in accordance with Healthscope's COVID-19 Vaccination privacy statement. If the Worker is unable to obtain the prescribed form of required evidence, Healthscope will discuss alternative acceptable evidence under the circumstances.
- All Workers are required to provide evidence by 31 January 2022 to confirm they have received the required COVID-19 vaccinations, unless required earlier pursuant to a Public Health Order or other legislation or directive.
- Prior to commencing work for Healthscope, prospective Workers are required to provide evidence of receipt of the COVID-19 vaccinations or valid exemption.

Exemptions:

- Healthscope is only able to offer exemptions where permitted by law.
- Healthscope recognises that there may be circumstances which prevent a Worker from being able to comply with this policy, for example in circumstances where a medical contraindication makes it unsafe for the Worker to have the COVID-19 vaccination. Healthscope will consider and discuss those circumstances with the relevant Worker and determine whether to grant an exemption.
- Should a Worker wish to apply for an exemption, the Worker is required to:
 - Provide a completed 'Request for Exemption Form', together with supporting documentation in writing to the Worker's manager.
 - Exemptions must be submitted to the Worker's Manager by no later than 30 November 2021, unless required earlier pursuant to a Public Health Order or other legislation or directive
 - For medical contraindications, supporting documentation must follow the prescribed form pursuant to any applicable Public Health Order, and if no standard form applies, be issued from a qualified medical practitioner and state the medical reason(s) why the Worker should be exempt.
- Once the above has been received, Healthscope will assess each exemption request on a case-by-case basis. The assessment process will involve measures to ensure objectivity and consistency in the evaluation of exemption requests and associated safety controls. Healthscope may request additional information from the Worker as part of this assessment. Healthscope may not in all cases be able to grant a Worker's request. Examples of exemption requests which are <u>not</u> likely to be accepted by Healthscope include:

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- 'Conscientious objections' (i.e. theories or personal position against COVID-19 vaccination)
- Requests where the reason for the exemption does not meet the Public Health Order or legislative requirements for exemption, as applicable (for example, only limited medical contraindications are permitted pursuant to the NSW Public Health Order).
- If an exemption is granted, Healthscope will conduct a risk assessment and may, at its discretion, implement additional control measures for the Worker which may include additional COVID-19 testing, the use of PPE and/ or explore alternative work arrangements to ensure the health and safety of the Worker and others in the workplace.
- It should be considered that additional control measures and/or redeployment of a Worker to an alternative work environment may not be possible depending on matters including but not limited to:
 - The high infectivity of the COVID-19 virus and risk of transmission
 - The volume of staff seeking redeployment
 - Skills matrix requirements
 - The inherent requirements of the role
 - Patient case mix, and/or
 - The location of high-risk people in the workplace
- If an exemption is not granted or where alternative control measures or redeployment to another work environment is not possible, the Worker will have their circumstances reviewed by the relevant General Manager or line manager in consultation with WHS, WPR and Infection Prevention and Control. Healthscope will need to review the ongoing employment or contractual relationship (as applicable) with the Worker under these circumstances to explore alternatives up to and including termination of employment or contract.

Requests to work remotely

- Workers who are not vaccinated (either through personal choice or because they have a medical exemption) may make a request to perform their roles solely from home. Any request must be submitted to their manager using the form 'Request from Unvaccinated Employee to Work Solely from Home'. Each request will be considered on a case-by-case basis and will only be approved where the Worker is able to perform all requirements of their role remotely without the need to attend any Healthscope or other public premises.
- Workers will be advised in writing within 21 days if the request has been approved or declined. If approved, all arrangements will be reviewed regularly. Healthscope retains the right to cancel or amend the arrangement. Once agreed, the Worker will be consulted regarding any major change to the arrangement.

<u>Assistance</u>

- Information regarding the risks and efficacy of vaccines is available. Please refer to information and links provided with this policy.
- Workers with questions or concerns regarding COVID-19 vaccines and/or Workers with impaired immunity are encouraged to discuss with their primary health care provider.

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- It is the Worker's responsibility to arrange their vaccination to ensure compliance with this policy or applicable Public Health Order. However, in some Healthscope facilities, Healthscope will offer on-site administration of COVID-19 vaccinations.
- In order to assist Workers in attending COVID-19 vaccination appointments, Healthscope will offer flexibility in rostering and work schedules wherever reasonably possible to accommodate such appointments. Workers may be asked to show evidence of an appointment confirmation upon the request of their manager.
- If a Worker experiences side effects after receiving the COVID-19 vaccine and is not well enough to work, the Worker may be eligible to take their sick leave. Where a Worker does not have this entitlement then Healthscope may provide the Worker with unpaid leave at its discretion. Workers may also be eligible to make a claim for workers' compensation. Additional federal government schemes may offer support for those who have a moderate to significant impact following an adverse reaction to an approved COVID-19 vaccine.
- For employees: Our Employee Assistance Program ('EAP') is available to all staff should they wish to use it. This service can provide a range of free and confidential counseling services including specialist COVID support to Healthscope employees and their immediate family members. EAP can be contacted on 1300 687 327.

<u>Breach</u>

In the case of a Worker that fails to comply with the terms of this policy or unreasonably
refuses to disclose their vaccination status as required, Healthscope may take disciplinary
action up to and including dismissal or termination.

Variation

- Healthscope follows the best available evidence and advice by government and other experts in the management of COVID-19, and the administration of the COVID-19 vaccination program.
- Healthscope will continue to review the situation in relation to vaccinations under its ongoing COVID-19 risk assessment. Healthscope may need to review and/ or amend this policy depending on its risk assessments or government guidance.
- This policy is not contractual in nature and does not form part of a Worker's employment contract.

1. BACKGROUND

World Health Organisation

- Coronavirus disease (COVID-19) is an infectious disease caused by the coronavirus SARS-CoV-2.
- Most people infected with the COVID-19 virus will experience mild to moderate respiratory illness and recover without requiring special treatment. Older people, and those with underlying medical problems like cardiovascular disease, diabetes, chronic respiratory disease, and cancer are more likely to develop serious illness.
- The COVID-19 virus spreads primarily through droplets of saliva or discharge from the nose when an infected person coughs or sneezes, so it's important that you also practice respiratory etiquette (for example, by coughing into a flexed elbow). There has also been evidence suggesting aerosol transmission.
- All patients represent a vulnerable, high risk group whilst unwell or in the perioperative phase of treatment when an overlying COVID-19 infection would hold serious risk.

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• In addition, the consequences of an outbreak in a Healthscope facility or premises would be potentially harmful to our patients, workforce and organisation.

2. COVID-19 VACCINES:

Australian Government Advice:

- Before a COVID-19 vaccine is approved for use in Australia, it must pass the Therapeutic Goods Administration's (TGA) rigorous assessment and approval processes. This includes assessment of the evidence surrounding a vaccine's safety, quality and effectiveness.
- None of the vaccines currently provisionally approved or being reviewed for use in Australia contain a live virus that can cause COVID-19. This means that the COVID-19 vaccine cannot result in illness from COVID-19.
- As part of regulatory assessment, the Therapeutic Goods Administration considers information about possible side effects. For a vaccine to be registered for use in Australia, the benefits must outweigh the risks. All vaccines can cause side effects. Usually any side effects are mild and temporary.
- Clinical trials of COVID-19 vaccines have reported temporary side effects typical of vaccines, such as
 pain or redness at the injection site, as well as mild to moderate fever, tiredness, headache, muscle
 aches and chills. These side effects may be more common after the second dose.
- A very small number of people may have more severe side effects—defined as side effects affecting a person's ability to do their normal daily activities. These side effects usually only last a day or two after getting the vaccine.
- For the COVID-19 vaccines that are provisionally approved or currently available in Australia, each person will need to receive two doses of the vaccine to be adequately immunised against COVID-19.
- The latest information can be found at: <u>https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines</u>. Here are several trusted sources of information:
 - o <u>ls it true?</u> (https://www.health.gov.au/initiatives-and-programs/covid-19-vaccines/is-it-true)
 - Answers to common questions on COVID-19 vaccines is available in <u>63 languages</u>. (https://www.health.gov.au/resources/translated/covid-19-vaccination-covid-19-vaccinescommon-questions-other-languages)
 - <u>Getting vaccinated information pack</u> (https://www.health.gov.au/resources/collections/covid-19-vaccination-patient-resources)
 - <u>About the Vaxzevria (AstraZeneca) vaccine</u> (https://www.health.gov.au/initiatives-andprograms/covid-19-vaccines/learn-about-covid-19-vaccines/about-the-vaxzevriaastrazeneca-covid-19-vaccine)
 - <u>About the Comirnaty (Pfizer) vaccine</u> (https://www.health.gov.au/initiatives-andprograms/covid-19-vaccines/learn-about-covid-19-vaccines/about-the-comirnaty-pfizer-covid-19-vaccine)
 - <u>Myth busting information from the Australian Government</u> (https://www.australia.gov.au/covid-19-mythbusting)

3. HEALTHSCOPE VACCINATION CLINICS:

- Healthscope has no control over which COVID-19 vaccine is available for distribution to, or for administration at Healthscope vaccination clinics.
- If administered at a Healthscope vaccination clinic, a pre-vaccination assessment will be conducted by the person providing the vaccination, and Workers will be informed of any potential adverse reactions associated with the vaccination. Advice will be provided in a confidential manner. The Worker will be required to provide informed consent before being vaccinated at a Healthscope vaccination clinic.

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4. VACCINATION EXEMPTIONS:

Current Medical exemptions from receiving the COVID-19 vaccines in Australia include:

- History of any vaccine anaphylaxis. Further medical assessment will be necessary before COVID-19 vaccination.
- Anaphylaxis following a previous dose of the relevant vaccine
- Anaphylaxis following any component of the relevant vaccine

In the case of the COVID-19 vaccination, there may be other circumstances where exemptions may be considered.

5. WORKER RISK PROFILE:

Healthscope's Risk Assessment for Workers produced the following results:

	<u>Risk Ass</u>	essment
Healthscope Worker categories for COVID-19 Risk Assessment:	Mandatory Vaccine	Priority based on risk
¹ Healthcare Professionals: Clinical professionals including doctors, residents, nurses, allied health workers, students, clinical trainees and apprentices, peer support workers, consumer consultants, who provide healthcare services in an inpatient or outpatient setting.	yes	Red
2 Support Services: Workers who provide non-clinical support services in a facility-based setting such as hospital porters/orderlies, food services, and volunteers.	yes	Red
³ Diagnostic and support service providers : Workers not engaged by Healthscope but who work in Healthscope facilities (e.g. radiology, pharmacy, pathology, laboratory)	yes	Red
⁴ Carers (HIS): Workers who provide care services to patients but are not clinicians.	yes	Red
5 Dual Workers (On/off site): Healthcare professionals and support services workers whose role involves travelling between hospitals and patient's homes or other sites to administer healthcare such as in-home nurses and patient transport drivers		Red
⁶ Hospital Cleaners: Workers who perform cleaning and disinfection of Healthscope's facilities	yes	Red
7 Site-based Administrative Services: Workers who perform administrative and clerical tasks such as patient scheduling, managing medical records, completing insurance forms, handling patient files, reception, billing and collections, audits, accounts and payroll, IT support, communications, consultants and executive support services		Red
8 Business Development workers: Workers whose role involves interaction with Healthscope workers and traveling to community sites (e.g. GP practices)	yes	Red
9 Maintenance Workers: Workers who provide facility and equipment maintenance services, such as plumbers, electricians, and equipment technicians	yes	Red
10 Landscape & Gardening Services: Workers who provide outdoor gardening, landscape and lawn services, whose role does not require them to enter premises or come into contact with other Healthscope workers and members of the community		Red
1 Corporate Services: Workers who are office-based and work from the corporate offices of Healthscope in operations, human resources, technology and digital solutions, in-house legal, monitoring and compliance, supplier management, finance, marketing and communications, media and public relations, and quality and risk	ves	Red
2 HSO Executive / Corporate visiting: Corporate Services workers whose role requires travel (occasional or frequent) to multiple sites/locations.	yes	Red
³ Corporate Cleaners: Workers who perform cleaning services at Healthscope's corporate offices	yes	Red
# Yes Code Vaccine Mandate – Priority Ranking		

Responses	Code	Vaccine Mandate – Priority Ranking	
0	Green	No mandate – encourage vaccination	
1	Yellow	Lower priority for mandate	
2 – 3	Orange	Medium priority for mandate	
3 +	Red	Highest priority for mandate (immediate action)	

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6. RISK OF SERIOUS ILLNESS FROM COVID-19

People are at **high risk** of serious illness from COVID-19 if they:

- o are age 70 years and older
- o have had an organ transplant and are on immune suppressive therapy
- o have had a bone marrow transplant in the past 24 months
- o are on immune suppressive therapy for graft versus host disease
- have had a blood cancer for example, leukaemia, lymphoma or myelodysplastic syndrome — in the past 5 years
- o are having chemotherapy or radiotherapy

People are at moderate risk of serious illness from COVID-19 if they have:

- o chronic kidney failure
- o heart disease
- o chronic lung disease but excluding mild or moderate asthma
- o a non-blood cancer in the past 12 months
- o diabetes
- o severe obesity with a BMI (body mass index) of 40kg per square metre or more
- o chronic liver disease
- o some neurological conditions such as stroke or dementia
- o some chronic inflammatory conditions and treatments
- o other primary or acquired immunodeficiencies
- o poorly controlled blood pressure

Having 2 or more conditions might increase the risk, regardless of the person's age. If the condition is severe or poorly controlled, this might also increase the risk of serious illness from COVID-19.

Other factors that might increase the risk of severe illness include:

- o age risk increases as you get older, even for those under 70
- o being male
- o living in poverty
- o smoking
- o Late pregnancy

7. PREGNANCY AND BREASTFEEDING

Current evidence notes that pregnant women with COVID-19 have a higher risk of severe illness compared to non-pregnant women with COVID-19 of the same age.

This includes an increased risk of:

- hospitalisation
- admission to an intensive care unit
- invasive ventilation.

COVID-19 during pregnancy also increases the risk of complications for the baby including a higher risk of stillbirth and of being born prematurely.

Vaccination is the best way to reduce these risks. Pregnant women are a **priority** group for COVID-19 vaccination, and should be routinely offered the appropriate vaccine as determined by their antenatal care provider, at any stage of pregnancy.

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Women who are trying to become pregnant can receive vaccination and do not need to delay vaccination or avoid becoming pregnant after vaccination.

8. GUIDELINES FOR IMMUNISATION:

It is recommended that the flu vaccine or any other vaccine not be administered to a person within 7 days of receiving the COVID-19 vaccine. The same applies if the flu vaccine or another vaccine is received first. The COVID-19 vaccine should not be administered within 7 days of receipt of a flu vaccine or any other vaccine.

- Facilities administering vaccinations must upload vaccination data to the AIR and provide the Worker with a record of the vaccination which includes:
 - o the date,
 - o name of vaccination
 - o dosage administered
 - \circ $\;$ information about subsequent dosages that are required
- Workers with impaired immunity should consult their treating medical practitioner prior to vaccination.

9. IMMUNISATION RECORDS:

Recording of COVID-19 vaccine administration in the Australian Immunisation Register (AIR) is mandatory. This assists in ensuring that the correct vaccine and interval is used for the second dose, and in identifying those who are due for a second dose. This will also allow verification or provision of evidence of completion of COVID-19 vaccination, if required.

10. ADVERSE EVENT REPORTING:

An adverse event following immunisation (AEFI) is any negative reaction that follows vaccination. It does not necessarily have a causal relationship with the vaccine.

The adverse event may be any:

- unfavourable or unintended sign
- unfavourable or unintended symptom
- o disease
- o abnormal laboratory finding

Information related to adverse events and State and Territory reporting requirements and processes are available:

https://immunisationhandbook.health.gov.au/vaccination-procedures/after-vaccination

Adverse events following the administration of a COVID-19 vaccine in a Healthscope facility, are to be entered into Riskman as a WHS incident.

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Authors: Chief Medical Officer

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- Healthscope Policy 8.01 Respiratory Protection Policy
- Healthscope Policy 6.29 Immunisation for Vaccine Preventable Diseases for Healthcare Workers
- Healthscope Policy 6.01 Occupational Health and Safety
- Healthscope Policy 6.14 Pre-Employment Medical Assessment
- Form Request for Exemption Form Covid-19 Vaccination HSPCOVIDdocref#90011
- Form Risk Assessment for those unable to be vaccinated HSPCOVIDdocref#90012

All General Managers	All Directors of Nursing	All Quality Managers
Chief Medical Officer	All Infection Control Coordinators	All Staff
Corporate WHS Team	COVID Vaccination Working Group & Steering Committee	

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