[**NTD: CONFIRM CORRECT LEGAL NAME]** **COVID-19 Vaccination Policy**

# POLICY

[**NTD: CONFIRM CORRECT LEGAL NAME]** (the “**Organization**”) is committed to taking every reasonable precaution in the circumstances for the protection of the health and safety of workers from the hazard of COVID-19 as required by the *Occupational Health and Safety Act (“****OHSA****”)*. This Policy is intended to encourage, support and maximize COVID-19 Vaccination rates and safety at the Organization’s workplaces as one of the critical preventatives and control measures for the hazard of COVID-19 in the workplace. The Organization is also committed to compliance with all applicable public and occupational health and safety, human rights, privacy, and other laws in the development and implementation of this Policy.

# Scope and Applicability

This Policy applies to all Organization employees, workers (unionized and non-unionized) and contractors at workplaces where the Organization has any duties as an employer as defined by the ***OHSA***.

# DEFINITIONS

“Organization Business” means all business activities related to [**NTD: CONFIRM CORRECT LEGAL NAME]** operations, whether conducted on or off Organization Premises. It does not include work performed remotely from the Covered Individual’s own home.

“Organization Premises” includes, but is not restricted to, all land, property, structures, installations, vehicles or equipment owned, leased, operated, used, or otherwise controlled by the Organization for the purpose of conducting Organization Business. It does not include a Covered Individual’s own home.

“Covered Individuals” includes all Organization unionizedand non-unionized employees and contractors.

“COVID-19” is the infectious disease caused by SARS-CoV-2, a highly contagious virus.

“Vaccine(s)” refers to a vaccine approved by Health Canada for use in Canada in relation to COVID-19.

“Vaccination” refers to the administration of a Vaccine(s) to protect individuals from COVID-19. It may include the administration of one or more doses of Vaccine.

“Vaccinated” refers to an individual who has received all doses of a Vaccine recommended or required to produce an immune response to COVID-19.

# Vaccination

## The Organization Recommends Vaccination for all Covered Individuals

In accordance with the approval by Health Canada, the recommendations of the federal and provincial governments, the Public Health Agency of Canada, regional public health authorities, the Canadian Medical Association, the Organization strongly encourages all Covered Individuals to voluntarily receive a COVID-19 Vaccination who may safely receive the Vaccine. Everyone with questions regarding the benefits, risks and precautions for Vaccines is encouraged to speak with their healthcare professional.

## Return to the Office

The Organization requires that all Covered Employees be Vaccinated prior to entering the Organization Premises.  Outside service workers, independent contractors, visitors and customers must also provide proof of Vaccination prior to entering the Organization Premises.

Covered Employees who are not Vaccinated may be eligible to work from home, depending on the needs of the Organization and the requirements of the Covered Employee’s position. In some circumstances, a refusal to become Vaccinated may impact a Covered Employee’s employment, including the possibility that their employment could be terminated.

# Continued Application of Health and Safety Measures

As we begin to return to the physical office, the following COVID-19 health and safety measures, supported or otherwise required by public health guidance and recommendations, will be in effect.

Nothing in this Policy relieves Covered Employees, even those who are Vaccinated, from their obligation to comply with applicable health and safety measures required or recommended by the provincial public health authorities and related Organization policies in effect to reduce the spread of COVID-19 in the workplace.

1. **Visitors**

Visitors, including clients or potential clients, delivery drivers or service people, etc. (“**Visitors**”) are only permitted on Organization Premises in connection with Organization Business. While on Organization Premises, Visitors must be accompanied by a Covered Employee at all times, and comply with all existing applicable health and safety measures required or recommended by public health authorities and related Organization policies or protocol.

1. **Workplace Screening**

Covered Employees and Visitors must complete a COVID-19 screening questionnaire each day before reporting to work. The screening questionnaire can be accessed here [●]. Throughout the day, if an employee begins to experience any of the symptoms noted on the questionnaire, the employee must immediately advise their immediate supervisor.

1. **Physical Distancing**

All Covered Employees must practice physical distancing of 2 meters when in indoor workplaces, wherever possible.  Signs have been posted around the building (posters, floor decals, digital) that ensure all patrons of the building maintain appropriate distancing at all times.

Follow all guidelines put in place by the building landlord.

1. **Masking and Personal Protective Equipment (PPE)**

Covered Employees and Visitors are required to wear a mask at all times when entering, working at and leaving the office, unless you are in an area of the office where you can ensure that you will maintain a distance of at least 2 meters from anyone else (e.g. by yourself in a space with a closed door).

1. **Workplace Hygiene and Disinfection**

All Covered Employees are expected to regularly wash their hands, and where it is not possible, disinfect their hands using hand sanitizer. Covered Employees must clean up after themselves after using shared spaces (e.g. personal garbage must be removed and any utensils or dishes must be cleaned by the employee). Covered Employees should refrain from carrying out non-essential activities that require close contact between persons.

Hand sanitizer will be available [●].

The building landlord has committed to on-going deep cleaning and sanitization of common building areas with particular attention being paid to high-frequency touch points.  The landlord is using approved products and disinfectants recommended for COVID-19.

1. **Reporting Illness**

Covered Employees who are sick must advise their managers or supervisors immediately and stay home. Covered Employees who have or suspect that they have COVID-19 or any cold or flu-like symptoms should follow the protocols outlined by public health authorities (e.g. Public Health in Quebec).

# Accommodation

## Accommodation for Covered Individuals Who Cannot Be Vaccinated

The Organization is committed to a workplace free from discrimination and harassment in accordance with Quebec human rights laws. The Organization will accommodate Covered Individuals from the strict application of this Policy who qualify based on one or more of the protected grounds of discrimination in the *Charter of Human Rights and Freedom* up to the point of undue hardship.

Covered Individuals seeking accommodation are required by law to self-identify the specific prohibited ground of discrimination they believe Vaccination would infringe and also participate in the accommodation process, including, but not limited, to providing information to establish the existence of a protected grounds, related restrictions and possible methods of accommodation. To discuss possible exemptions and related accommodation under this Policy, eligible Covered Individuals should contact their immediate supervisor or human resources.

## Accommodation of Side Effects

Public health authorities have publicly said that it is not unusual to have mild side effects after Vaccination and that serious adverse reactions to Vaccines are rare. If a Covered Individual experiences a reaction related to their Vaccination that prevents them from performing the essential duties of their job, Covered Individuals should contact their immediate supervisor or human resources.

The Covered Individuals who are Vaccinated and experience illness or injury as a result may also be eligible for benefits and/or for government relief.

# Privacy

## The Purposes of the Collection, Use and Disclosure of Vaccination Status Information

Vaccination status information, including Vaccine type, and the date, time, and location for each Vaccine dosage, will be collected, used and disclosed pursuant to the Organization’s Privacy Policy, . Vaccination status information will only be collected, used and disclosed as required under applicable privacy legislation and/or as reasonably necessary for the reasonable purposes of:

* + - * 1. taking all reasonable precautions during the pandemic to ensure the health and safety of everyone in the workplace through appropriate health and safety planning based on Vaccination status;
				2. limited disclosure to Organization clients as required by the terms of the service relationship, to organizations running competitions or events or when determined to be necessary by the Organization; and
				3. administering this Policy.

The Organization also reserves the right to disclose limited Vaccination status information, such as the fact that a Covered Individual is Vaccinated and the date of Vaccination, to clients for the purposes of facilitating client engagement, contractual obligations and verification, subject to obtaining separate consent from the relevant Covered Individual.

## The Terms of the Collection, Use and Disclosure of Vaccination Status Information

The collection, use or disclosure of this information will be based on the following terms:

* + - * 1. Covered Individuals to disclose their Vaccination status to the Organization on a proactive and ongoing basis or otherwise as directed in accordance with this Policy and will be asked to execute their written consent in the form appended as Schedule “A” to this Policy;
				2. Covered Individuals who refuse to disclose their Vaccination status in accordance with this Policy may be subject to certain health and safety measures, including without limitation, remote work, redeployment to a different position or location, modified duties, customized workplace arrangements, and/or a temporary unpaid leave of absence as required;
				3. Covered Individuals who have completed a consent form will be asked to provide a copy of their certificate of Vaccination or other appropriate alternative documentation so that the Organization can confirm their Vaccination status and record essential information;
				4. The Organization will keep confidential all Covered Individuals’ Vaccination status and underlying medical condition (if this is all so disclosed), in accordance with applicable privacy and health laws. Specifically, this information will only be shared and accessed on a need-to-know basis by human resources, Risk Management Department and, in some cases, a direct supervisor or manager, solely for the purposes outlined above, or to comply with a legal order to disclose the information;
				5. The information will be securely stored and maintained by [●] in a separate file, to be hosted in [the province of Quebec, Canada]. Depending on their jurisdiction, Covered Individuals may exercise their access and rectification rights as set out in the Privacy Policy and as required under applicable privacy legislation; and
				6. This information will only be retained for the duration of the employment or service relationship and will be destroyed thereafter, unless otherwise required or permitted under applicable laws. Subject to official guidance on the outcome of the COVID-19 pandemic, it may be destroyed earlier, in which case a general notification will be communicated.

# ResponsibilitIES

Human resources, the Risk Management Department and all levels of management of the Organization are responsible for the administration of this Policy in accordance with applicable law.

Covered Individuals are responsible for compliance with this Policy, and shall comply with all applicable legal obligations in doing so, including with respect to public health measures such as physical distancing, wearing a mask, and staying home if they are sick.

# Amendments

The Organization will review this policy and update it as required and as reasonable in the evolving nature of the pandemic, Vaccine availability and government and public health authority direction.

# Review and Approval

This Policy has been reviewed and approved by [●] on [●].

# Revision History

[●]

Schedule “A”

Express Consent Form – COVID-19 Vaccination Information

This document is an express consent for the collection, use and disclosure of COVID-19 Vaccination status information, which includes Vaccine type, and the date, time, and location for each Vaccine dosage in relation to COVID-19. By agreeing with this Consent, you are giving permission for the Organization to collect, use and disclose your personal information as described above for the following purposes:

* to take all reasonable precautions for the health and safety of our employees, contractors, clients, and others in the workplace;
* to make decisions about workplace staffing and modifications, particularly where employees must directly interact with co-workers, contractors, clients and others;
* to provide limited disclosure to clients as required by the terms of the service relationship or when reasonably required to facilitate client engagement and interaction; and
* for administering the Organization’s COVID-19 Vaccination Policy, including to determine eligibility for Vaccination-related incentives, entitlements or Awards.

Personal information will be kept in a separate file maintained by human resources and appropriate safeguards will be taken. It will be accessed only on a need-to-know basis by human resources, Risk Management Department and, in some cases, a direct supervisor or manager, solely for the purposes outlined above, or to comply with a legal order to disclose the information.

Your information is being collected, used and disclosed pursuant to the Organization’s COVID-19 Vaccination Policy and its Privacy Policy. The information will only be retained for the duration necessary to accomplish the purposes listed above, or as otherwise required under applicable privacy legislation.

**Express consent**

I hereby agree and consent that the Organization may collect, use and disclose my COVID-19 vaccination status information for the purposes of this Policy as described above.

Signature:

Employee Name:

Date: