

COVID-19 Vaccine Status Verification and Testing Policy

I. PURPOSE

This policy is enacted in order to set forth the County of San Mateo's policy regarding COVID-19 vaccine status verification, vaccine requirements and testing requirements as directed by the County Manager and/or mandated by the July 26th, August 5th, August 19th and December 22nd, 2021 and February 22nd and September 13th, 2022 Orders of the State Public Health Officer of the State of California.

II. EFFECTIVE DATE

This policy is effective as of September 17, 2022.

III. SCOPE OF POLICY

This policy applies to all County staff.

IV. POLICY

A. Emergency Health and Safety Measure.

The COVID-19 pandemic is a public health emergency. The overwhelming consensus of public health authorities, including the State Public Health Officer and the County Health Officer, is that vaccination and boosters against COVID-19 are the most effective means of preventing infection with the COVID-19 virus, and subsequent transmission and outbreaks. COVID-19 vaccine status verification and vaccine or testing requirements are critical and necessary steps to ensuring the health and safety within County facilities and preventing the spread of COVID-19, especially in light of the highly transmissible variants.

State Public Health Officer Orders establish vaccine mandates for workers in specified health care facilities and other high-risk settings where there is frequent exposure to staff and highly vulnerable patients. The County has expanded these requirements and currently requires all County employees not already covered by one of the State Public Health Officer Orders to submit proof of vaccination.

The below COVID-19 vaccine-related requirements are reasonable and essential health and safety measures that are job related and consistent with business necessity because individuals with COVID-19 pose a direct threat to others in any indoor facilities during the COVID-19 pandemic. By complying with these requirements, staff diminish the risk of transmitting COVID-19 and can more safely perform their duties working among colleagues and with members of the public. The requirements described below are mandatory and a condition of employment for County employees.

B. Vaccine Status Verification.

All County facilities identified in the July 26th, August 5th, August 19th, and December 22nd State Public Health Orders (including health care, long-term care, and correctional facilities) must verify the vaccine status of all workers, including employees, contractors, and volunteers. Employees in all other County

departments are encouraged to provide proof of COVID-19 vaccination; such employees who decline to provide proof of vaccination shall be considered unvaccinated.

1. Pursuant to the [CDPH Guidance for Vaccine Records Guidelines & Standards](#), the County will accept a photo or a scanned copy of any of the following records as proof of vaccination:
 - a. COVID-19 Vaccination Record Card (issued by the Department of Health and Human Services Centers for Disease Control & Prevention or WHO Yellow Card) which includes name of person vaccinated, type of vaccine provided and date last dose administered); OR
 - b. Documentation of COVID-19 vaccination from a health care provider; OR
 - c. Digital record that includes a QR code confirming the vaccine record as an official record of the state of California.

Please note: The proof of vaccination staff provide may be used by the County of San Mateo (1) Occupational Health Coordinator, (2) Risk Manager, (3) Community Contact Tracers, (4) County Contact Tracers, and (5) County Safety Officers to prevent, manage, and respond to COVID-19 transmission and exposure risk.

2. Employees are to upload their proof of vaccination to Workday so the County can verify their vaccination status.
 - a. Employees who are required to comply with the July 26, 2021 State Health Orders must have uploaded their proof of vaccination by August 23, 2021 (or as soon thereafter as the employee is fully vaccinated), as specified in that Order.
 - b. Employees who are not subject to that State Health Order must upload this proof of vaccination by November 15, 2021.
 - c. Employees who are required to comply with the December 22, 2021 State Health Orders on booster vaccinations must upload their proof of vaccination booster by February 1, 2022 or, for those not yet eligible for a booster by February 1, 2022, no later than 15 days after becoming eligible for the booster dose.
3. Workers who are not fully vaccinated, or for whom vaccine status is unknown or documentation is not provided, must be considered unvaccinated.

C. Health care setting vaccine requirements:

1. All workers who provide services or work in health care settings identified by CDPH in the August 5, 2021 and December 22, 2021 State Health Orders must comply with those Orders and thus must:
 - Have their first dose of a one-dose COVID vaccine regimen or their second dose of a two-dose COVID vaccine regimen by September 30, 2021.
 - Have a vaccine booster dose no later than March 1, 2022, or within 15 days of becoming eligible for a vaccine booster dose if not eligible for one by March 1, 2022.

Workers who provide proof of COVID-19 infection after completion of their primary vaccination series may defer booster administration for up to 90 days from the date of first positive test or clinical diagnosis, which may extend the above deadlines. Workers with a deferral due to a proven COVID-19 infection must be in compliance no later than 15 days after the expiration of their deferral.

- Below are the CDPH guidelines for vaccine booster dose eligibility as of September 17, 2022:

Initial COVID-19 vaccine received:	Get vaccine booster by:	Which vaccine booster to receive:
Moderna or Pfizer-BioNTech	At least 2 months and no more than 6 months after 2 nd dose	Any authorized booster dose vaccine, but Moderna or Pfizer-BioNTech preferred
Johnson & Johnson [J&J] / Janssen	At least 2 months and no more than 6 months after 1 st dose	Any authorized booster dose vaccine, but Moderna or Pfizer-BioNTech preferred
World Health Organization (WHO) emergency use listing vaccine	At least 2 months and no more than 6 months after receiving all recommended primary doses	Single booster dose of Moderna or Pfizer-BioNTech COVID-19 vaccine
A mix and match series composed of any combination of FDA-approved, FDA-authorized, or WHO-EUL COVID-19 vaccines		

The requirements of this section apply to the following settings:

- a. Acute Health Care and Long-Term Care Settings:
 1. General Acute Care Hospitals
 2. Skilled Nursing facilities (including Subacute Facilities)
 3. Intermediate Care Facilities
- b. Other Health Care Settings:
 1. Acute Psychiatric Hospitals
 2. Adult Day Health Care Centers
 3. Program of All-Inclusive Care for the Elderly (PACE) and PACE Centers
 4. Ambulatory Surgery Centers
 5. Chemical Dependency Recovery Hospitals
 6. Clinics & Doctor Offices (including behavioral health, surgical)
 7. Congregate Living Health Facilities
 8. Dialysis Centers
 9. Hospice Facilities

- 10. Pediatric Day Health and Respite Care Facilities
- 11. Residential Substance Use Treatment and Mental Health Treatment Facilities.

2. All workers who are regularly assigned to 1) provide health care or health care services to inmates, prisoners, or detainees or 2) work within hospitals, skilled nursing facilities, intermediate care facilities, or the equivalent that are integrated into the correctional facility or detention center in areas where health care is provided must comply with the August 19, 2021 and December 22, 2021 State Health Orders and thus must:

- Have their first dose of a one-dose COVID vaccine regimen or their second dose of a two-dose COVID vaccine regimen by October 14, 2021.
- Have a booster dose no later than March 1, 2022, or within 15 days of becoming eligible for a vaccine booster dose if not eligible for one by March 1, 2022. Workers who provide proof of COVID-19 infection after completion of their primary vaccination series may defer booster administration for up to 90 days from the date of first positive test or clinical diagnosis, which may extend the above deadlines. Workers with a deferral due to a proven COVID-19 infection must be in compliance no later than 15 days after the expiration of their deferral.
 - The above chart contains the CDPH guidelines for vaccine booster dose eligibility as of September 17, 2022.

3. Workers may be exempt from these vaccination requirements only upon providing Human Resources a declination form, signed by the individual stating either of the following: (1) the worker is declining vaccination based on Religious Beliefs, or (2) the worker is excused from receiving any COVID-19 vaccine due to Qualifying Medical Reasons.

- a. To be eligible for a Qualified Medical Reasons exemption, the worker must also provide to the County's ADA Manager a written statement signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician stating that the individual qualifies for the exemption (but the statement should not describe the underlying medical condition or disability) and indicating the probable duration of the worker's inability to receive the vaccine (or if the duration is unknown or permanent, so indicate).

4. If the County deems a worker subject to a State Health Officer Order vaccine requirement to have met the requirements of an exemption pursuant to section IV.C.3, the unvaccinated exempt worker must continue to comply with any current 1) respirator or mask requirements and 2) testing requirements, as described below in Sections IV.D-E.

D. Respirator or mask requirements:

1. All County facilities must strictly adhere to current CDPH Masking Guidance. To the extent they are applicable, facilities must also continue to adhere to Cal/OSHA's standards for Aerosol Transmissible Diseases (ATD), which requires respirator use in areas where suspected and

confirmed COVID-19 cases may be present, and the Emergency Temporary Standards (ETS) that requires all workers be provided a respirator upon request.

2. Health Care Settings: In addition to the above requirements for respirators required under Title 8 of the California Code of Regulations, unvaccinated or incompletely vaccinated workers who work in facilities covered by Section IV.C.1-2 must wear a respirator approved by the National Institute of Occupational Safety and Health (NIOSH), such as an N95 filtering facepiece respirator, or surgical mask, at all times while in the facility. The facility must provide the respirators or masks at no cost, and workers must be instructed how to properly wear the respirator and how to perform a seal check according to the manufacturer's instructions.

E. Testing requirements:

1. Health Care Setting Testing Requirements:

- a. This testing requirement applies to workers in health care facilities, as enumerated in Section IV.C.1-2.
- b. On and after September 17, 2022, weekly testing is not required for unvaccinated or incompletely vaccinated workers due to their vaccination status unless they work in a facility subject to federally imposed testing requirements, including those based on the level of community transmission, such as QSO-20-38-NH.

2. Availability of Testing:

- a. The County will provide tests to satisfy current testing requirements for individuals required to be tested pursuant this policy during regular work shifts. Alternatively, individuals may choose to get tested on their own time and submit the date-stamped and identifiable results to the County.
- b. Unvaccinated or incompletely vaccinated individuals subject to this policy are not exempted from any applicable testing requirements even if they have a medical contraindication to vaccination, since they are still potentially able to spread the illness. Previous history of COVID-19 or a previous positive antibody test for COVID-19 do not waive this requirement for testing.
- c. Departments may have their own specific testing policy in place that may apply to County employees, regardless of vaccination status.
- d. Facilities and departments should have a plan in place for tracking test results, conducting workplace contact tracing, and must report positive test results to local public health departments.

. Missed Tests.

If a staff member misses required COVID-19 testing provided by the County because they were not working on the date of the County testing opportunity, the County will determine if the staff member can continue to work while still complying with the above policy requirements until

such time as the next COVID-19 testing opportunity occurs, depending on the circumstances of each case. Alternatively, a staff member may obtain testing on their own time and provide documentation indicating the date of the test and the results. The County will determine if the staff member can continue to work until such time as they are able to provide the required documentation, depending on the circumstances of each case.

If a staff member misses a required test and is unable to continue working until they comply with the testing requirement, they will be considered non-compliant with this policy, as discussed below in Section V.

4. Disclosure of Test Results and Confidentiality.

Staff are required to disclose required COVID-19 test results to the County (or to authorize a County-provided testing vendor to disclose results) in accordance with this policy and may be required to acknowledge receipt of testing disclosures from the County or the County's testing vendor.

The results from COVID-19 testing will be reported to the County's Occupational Health Coordinator, Risk Manager, Community Contact Tracers, County Contact Tracers, and the San Mateo Medical Center Infection Control/Employee Health team for any purpose that the County reasonably deems necessary in order to take actions consistent with guidance from the CDC, CDPH and other public health or occupational safety authorities.

The County will take reasonable measures to maintain the confidentiality of information regarding the COVID-19 vaccination or testing status of staff. Any information that the County stores regarding the COVID-19 status of an employee will be separately maintained from the employee's personnel file, thus limiting access to this confidential information. The results from COVID-19 testing will only be used for purposes related to preserving the health and safety of employees, patients, clients, inmates, and the community, and will not be used for any other purpose.

An employee who tests negative for COVID-19 may continue working. An employee who has tested positive for COVID-19 and who believes they were exposed to COVID-19 while working on-site or in the field for the County (1) must contact the County's Workers Compensation Department to make a claim, and (2) should contact the County Occupational Health Coordinator to obtain guidance on health and wellness.

V. NON-COMPLIANCE WITH POLICY

If an individual is unable to comply with the vaccination or testing requirements based on a qualifying disability or medical restrictions, they may request an ADA accommodation by contacting the County's ADA Manager. Staff who are unable to comply with the vaccination or testing requirement for any other reason, including but not limited to a religious exemption, should contact their manager or the Human Resources Department.

Volunteers who refuse to comply with vaccination or testing requirements will no longer be permitted to volunteer at County facilities that require vaccination or testing.

County employees who do not comply with this policy cannot enter any County facility. Employees who work in the field or telework may be required to report to a County facility at any time and therefore must also comply with this policy. If an employee does not comply with this policy, the employee will be sent home. The employee may initially use paid time off balances, except sick pay, for all missed work time until such time that they comply with the policy or the policy is revoked by the County. If you disagree with this decision you may contact Deputy Director, Human Resources, Michelle Kuka, mkuka@smcgov.org, to provide information in support of your position.

Employees who continue to not comply with this policy may be subject to disciplinary action up to and including termination.

VI. DEFINITIONS:

For purposes of this Policy, the following definitions apply:

1. “Fully Vaccinated” means individuals who are considered fully vaccinated for COVID-19: two weeks or more after they have received the second dose in a 2-dose series (Pfizer-BioNTech or Moderna or vaccine authorized by the World Health Organization), or two weeks or more after they have received a single-dose vaccine (Johnson and Johnson [J&J]/Janssen). COVID-19 vaccines that are currently authorized for emergency use or that are fully approved:
 - a. By the US Food and Drug Administration are listed at <https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines>
 - b. By the World Health Organization are listed at <https://extranet.who.int/pqweb/vaccines/covid-19-vaccines>
2. “Incompletely vaccinated” means persons who have received at least one dose of COVID-19 vaccine but do not meet the definition of fully vaccinated.
3. “Respirator” means a respiratory protection device approved by the National Institute for Occupational Safety and Health (NIOSH) to protect the wearer from particulate matter, such as an N95 filtering facepiece respirator.
4. “Unvaccinated” means persons who have not received any doses of COVID-19 vaccine or whose status is unknown.
5. “WHO Yellow Card” refers to the original World Health Organization International Certificate of Vaccination or Prophylaxis issued to the individual following administration of the COVID-19 vaccine in a foreign country.
6. “Worker” refers to all paid and unpaid persons serving in health care, other health care or congregate settings who have the potential for direct or indirect exposure to patients/clients/residents or SARS-CoV-2 airborne aerosols. Workers include, but are not limited to, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, students and trainees, and persons not directly involved in patient care, but who could be exposed to infectious agents that can be transmitted in the health care setting (e.g., clerical, dietary, environmental services, laundry, security, engineering and facilities

management, administrative, billing, and volunteer personnel). Workers who are on leave must be compliant with this policy by the time they return to work after their leave.