

**MANDATORY CORONAVIRUS VACCINATIONS
IN CARE HOMES POLICY**

		POLICY	
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	X		
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Associated Documents/ Information		Date Associated Documents/ Information was reviewed	
GD 20 Suitable Alternative Employment Register		February 2020	

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1.0 INTRODUCTION

The Department of Health and Social Care (DHSC) recently conducted a public consultation regarding a proposed amendment to the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 that would require older adult care home providers to deploy only those workers who have received their COVID-19 vaccination in line with government guidance (unless medically exempt).

As a result of the consultation, the Health and Social Care Act 2008 (Regulated Activities) (Amendment) (Coronavirus) Regulations 2021 (the 2021 Regulations) were made on 22 July 2021 and will come into force on 11 November 2021. They insert a new provision into the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 requiring all persons working or deployed in any CQC registered care home (which provides accommodation together with nursing or personal care) to be fully vaccinated against COVID-19, unless an exemption applies. Whilst the 2021 Regulations extend to both England and Wales, they will apply to England only.

The scope of the new rules mean that they will not just impact upon care home providers and care home staff: they apply to **anyone working or deployed in a care home**, unless an exemption applies. This is regardless of role, how often the individual works in the care home, or, who employs them.

2.0 POLICY STATEMENT

The purpose of this policy is to set out our position on the mandatory COVID vaccination requirements and our expectations for staff in respect of those requirements.

This policy applies to all staff employed or engaged by us who work, or may be required to work, in a care home setting in order to fulfil their role / carry out their duties.

3.0 DEFINITIONS/ ABBREVIATIONS

Care Homes -	CQC registered care home (which provides accommodation together with nursing or personal care)
Care Home workers -	All persons working or deployed in a CQC registered care home

4.0 ROLES AND RESPONSIBILITIES

Line managers will be responsible for:-

- Requiring staff to confirm, in writing, their vaccination status no later than [DATE].
- Noting the deadline for first vaccinations (16 September 2021)
- Noting the deadlines for notice to be given to staff to ensure notice periods are worked in full if decisions to dismiss have to be made
- Having an informal meeting with staff who do not intend to be vaccinated or are medically exempt to discuss next steps;
- Considering redeployment opportunities or reallocation of duties and recording outcomes; and
- Referring staff who do not intend to be vaccinated and cannot be redeployed to HR (who will appoint an independent manager to hold a formal meeting with the staff member to discuss their case and make a decision on their future employment).

HR will be responsible for:-

- Ensuring line managers are aware of their obligations under this policy and deadlines for compliance;
- Supporting line managers considering redeployment opportunities or reallocation of duties;
- Arranging formal meetings with staff and an independent line manager to discuss their case and make a decision on their future employment;
- Arranging any appeal meeting required with a second independent manager;
- Collating and sharing information packs to the independent manager, the member of staff and their representative in advance of the formal meeting or appeal meeting;
- Supporting decision makers throughout this process.

5.0 APPROVAL

Incident Control Team & JSPF

6.0 DOCUMENT REQUIREMENTS

TRUST POSITION

Although it is the responsibility of the CQC registered care home provider to ensure compliance with the new requirements, it is our responsibility as a service provider to ensure that we only send staff who have the correct proof (of vaccination or exemption) to work in a care home. Otherwise, the care home provider will have no alternative but to make alternative arrangements for provision of the service. We can only meet our legal obligations if all our staff that are working in or deployed to CQC registered care facilities have had the full COVID-19 vaccination (unless any exemption applies) before 11 November 2021.

For the avoidance of doubt, the mandatory COVID-19 vaccination requirements will not apply to staff working in any role that is outside the scope of the 2021 Regulations. We shall, however, keep this under review.

SUPPORT FOR STAFF

It is normal that some of our staff may have queries about having the vaccine. We have provided, and will continue to provide, credible information and access to relevant authorities about the vaccine to assist with further understanding and answer any concerns.

Staff should check the source of any information they read about the vaccine as we are aware that there is a certain amount of uncertified information available.

To find out more information about the vaccine, please contact your manager who will be able to support you with your queries and have access to the latest and most up to date vaccine details.

Should staff, line managers or decision makers have any queries about this policy or require any support to implement anything within it, you should contact one of the Operational HR Team.

EXEMPTIONS

The mandatory vaccination rules do not apply:-

- if one or more of the exemptions in Regulation 5 of the 2021 Regulations apply (those who have medical exemptions; residents of that care home; friends and family of residents who are visiting; those entering to assist with an emergency or carrying out urgent maintenance work; and those under the age of 18);

- where care is being provided in accommodation that is not provided as part of the service user's care or treatment; and/or
- to the surrounding grounds of any care home premises / accommodation.

MEDICAL EXEMPTIONS

Staff will not be subject to the mandatory vaccination requirements if they provide evidence that satisfies us that for clinical reasons they should not be vaccinated with any authorised vaccine ("medical exemption").

Evidence of medical exemptions must be provided by the staff member's GP or consultant in the form of a letter, report, fit note and/or with supporting medical records, setting out the reason for the exemption.

We shall review this policy and its position on medical exemptions and the evidence required in accordance with any Government guidance that may be published (or revised).

Medically exempt staff will be required to take a Lateral Flow Device Test prior to each shift or prior to attending care home premises, and to produce evidence of their negative test result on request.

Managers should carry out an individual risk assessment for each medically exempt staff member to identify what other additional control measures will need to be in place (if any) to allow them to work safely in a care home.

RECRUITMENT

As a provider of services to CQC registered care homes, from the date of this Policy, we shall only employ those who are fully vaccinated in roles that require them to work in a care home setting (unless they are medically exempt).

We will be clear to all applicants that the mandatory vaccination will be part of their terms and conditions employment (unless an exemption applies).

BANK & AGENCY STAFF

As a provider of services to CQC registered care homes, from the 11 November 2021, we shall only allow those who are fully vaccinated to accept bank shifts that require them to work in a care home setting (unless they are medically exempt).

We will be clear to all bank and agency staff that the mandatory vaccination will be part of their terms and conditions engagement (unless an exemption applies).

EXISTING STAFF

With effect from the date of this Policy, we shall require all staff employed in roles that are either care home based or may require them to work within a care home setting, to have received both doses of an approved vaccine by 11 November 2021 (unless an exemption applies) in accordance with the following timeline:-

Vaccination timeline
16 week grace period to receive your vaccine commences 22 July 2021
First Covid vaccine dose to be administered by 16 September 2021
Second Covid vaccine dose to be administered by 11 November 2021

Any member of staff (who is not medically exempt) who is unvaccinated by 11 November 2021 may be dismissed if their care home duties cannot be reallocated or they cannot be redeployed.

There may be members of staff who have advised of their intention to be fully vaccinated, but are then unable to meet the mandatory vaccination deadline (i.e. due to long-term ill health or being ill with COVID). Managers should ensure that they understand the reasons for the delay and work with the staff member to agree next steps (with advice and support from HR if required), before any decisions about the individual's future employment are made.

PROCEDURE FOR UNVACCINATED STAFF

The following procedure will be followed:-

- If member of staff is refusing to be vaccinated and has no exemption, explore redeployment options within 7 days of confirmation of their vaccination status;
- If no redeployment is available, invite the member of staff to a formal meeting, warn that might be dismissed and give right of representation;
- Hold the formal meeting with an independent manager, with appropriate authority (who should be provided with a pack containing the relevant correspondence, the informal meeting notes and details of any efforts to secure redeployment);
- If the member of staff will not be fully vaccinated by 11 November 2021, and there are no options for redeployment, a decision may be taken to dismiss with notice and confirm outcome in writing;
- Provide the member of staff with the opportunity to appeal.

See Appendix 2 for Flowchart and Appendix 3 for Checklist.

RISK ASSESSMENTS

We will continue to review and carry out risk assessments to ensure that we comply with our statutory duties. The approach we take is developing as new information and data is published and we will keep staff updated of any changes which affect them.

REDEPLOYMENT

For existing staff who do not wish to have the vaccine, line managers must proactively consider redeployment opportunities with the individual before any decisions are made about their future employment.

Redeployment opportunities can be identified from current vacancies and/or discussions with HR and managers in other departments, divisions or areas. Staff should be encouraged to make their own enquiries and put forward redeployment options for further consideration.

If a decision is made to dismiss, line managers and staff should continue to consider redeployment opportunities throughout the notice period using the Suitable Alternative Employment Register.

FALSIFICATION OF INFORMATION

Any member of staff who misrepresents information relating to their vaccination status or medical exemption may be subject to disciplinary action and/or dismissal without notice.

VACCINATION DATA

Data on vaccination status is being collated, used and processed for the purposes of delivering services to patients, clinicians, the health services and adult social care services workforce and the public about and in connection with COVID, including the provision of information, fit notes and the provision of healthcare and adult social care services.

Vaccination status data is 'health' information and will be kept confidential, with access to it strictly controlled. It is also 'special category' data for the purposes of data protection legislation (the UK GDPR), which means that it must be used fairly, lawfully, supported by good reasons, and in compliance with other specific obligations under data protection law.

In accordance with our privacy notice for staff, we shall collate and hold information on an individual's vaccination status securely and in compliance with our obligations under the General Data Protection Regulation, the UK Data Protection Act 2018 and all other data protection legislation.

7.0 MONITORING COMPLIANCE AND EFFECTIVENESS

Minimum Requirement to be Monitored (WHAT – element of compliance or effectiveness within the document will be monitored)	Responsible Individual (WHO – is going to monitor this element)	Process for Monitoring e.g. Audit (HOW – will this element be monitored (method used))	Frequency of Monitoring (WHEN – will this element be monitored (frequency/ how often))	Responsible Individual or Committee/ Group for Review of Results (WHERE – Which individual/ committee or group will this be reported to, in what format (eg verbal, formal report etc) and by who)
Policy Implementation	Head of Operational HR	Audit	Monthly	JSPF

8.0 TRAINING AND IMPLEMENTATION

This policy will be communicated to Line Managers.

9.0 IMPACT ASSESSMENTS

- This document has been subject to an Equality Impact Assessment, see completed form at Appendix 1
- This document is not subject to an Environmental Impact Assessment

10.0 EVIDENCE BASE (Relevant Legislation/ National Guidance) AND RELATED SFHFT DOCUMENTS

Evidence Base:

Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Related SFHFT Documents:

GD20 Suitable Alternative Employment Register

11.0 KEYWORDS

Coronavirus Vaccine
Care Homes

12.0 APPENDICES

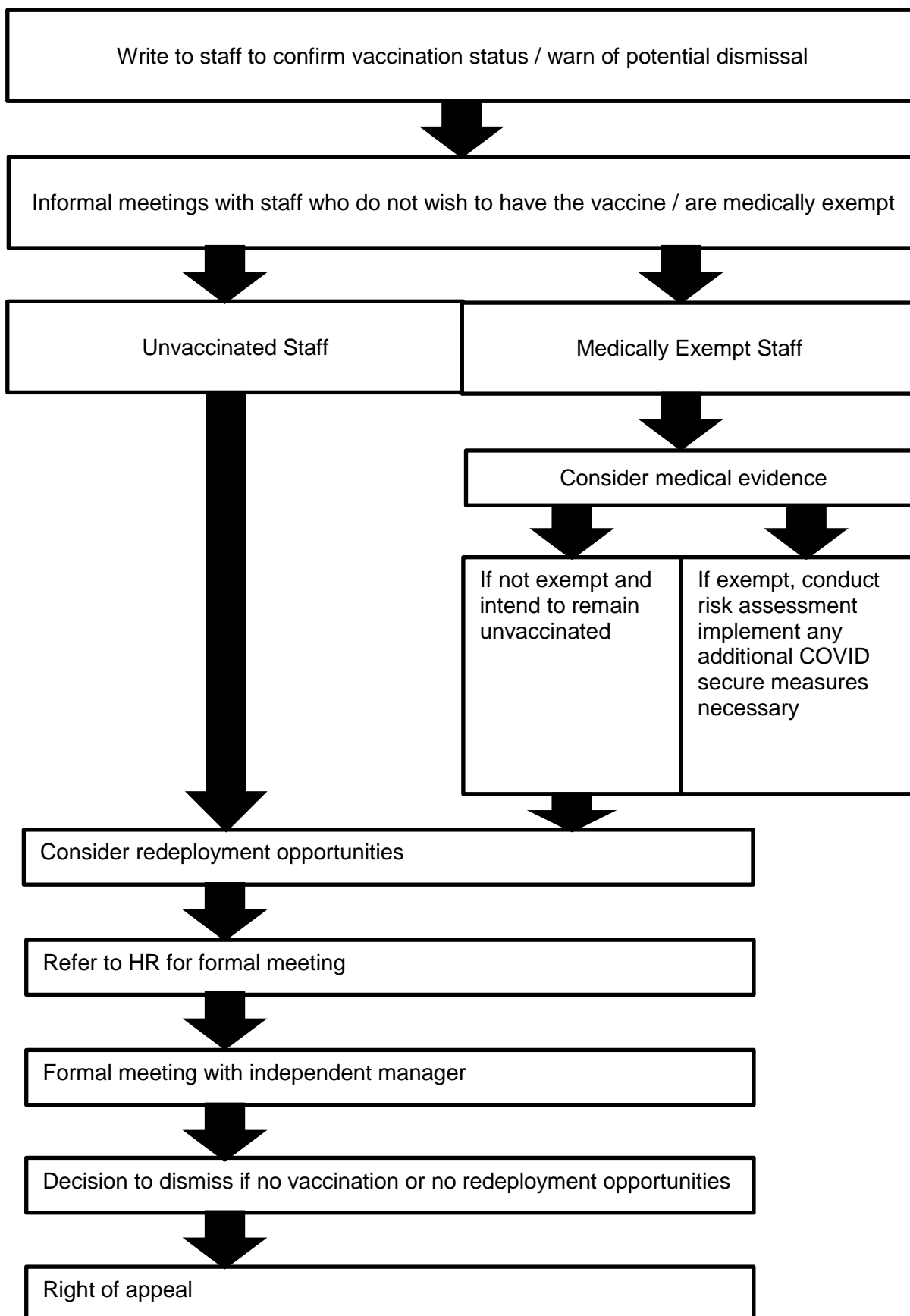
- Appendix 1 – Equality Impact Assessment
- Appendix 2 – Flow Chart
- Appendix 3 – Risk Assessment
- Appendix 4 – Confirmation of vaccination status and form
- Appendix 5 – Informal meeting outcome and invite to formal meeting
- Appendix 6 – Formal meeting outcome letter

APPENDIX 1 - EQUALITY IMPACT ASSESSMENT FORM (EQIA)

Name of service/policy/procedure being reviewed: Mandatory Coronavirus Vaccination in Care Homes			
New or existing service/policy/procedure: New			
Date of Assessment: 31 August 2021			
For the service/policy/procedure and its implementation answer the questions a – c below against each characteristic (if relevant consider breaking the policy or implementation down into areas)			
Protected Characteristic	a) Using data and supporting information, what issues, needs or barriers could the protected characteristic groups' experience? For example, are there any known health inequality or access issues to consider?	b) What is already in place in the policy or its implementation to address any inequalities or barriers to access including under representation at clinics, screening?	c) Please state any barriers that still need to be addressed and any proposed actions to eliminate inequality
The area of policy or its implementation being assessed:			
Race and Ethnicity	None	Clear policy to support implementation	None
Gender	None	Clear policy to support implementation	None
Age	None	Clear policy to support implementation	None
Religion	None	Clear policy to support implementation	None
Disability	None	Clear policy to support implementation. Medical exemptions to support in with medical conditions which prevents the uptake of the vaccination.	None
Sexuality	None	Clear policy to support implementation	None
Pregnancy and Maternity	None	Clear policy to support implementation	None
Gender Reassignment	None	Clear policy to support implementation	None
Marriage and Civil Partnership	None	Clear policy to support implementation	None

Socio-Economic Factors (i.e. living in a poorer neighbourhood / social deprivation)	None	Clear policy to support implementation	None
What consultation with protected characteristic groups including patient groups have you carried out? <ul style="list-style-type: none"> ICT 			
What data or information did you use in support of this EqIA? <ul style="list-style-type: none"> Guidance from NHS Employers, Legislation. 			
As far as you are aware are there any Human Rights issues be taken into account such as arising from surveys, questionnaires, comments, concerns, complaints or compliments? <ul style="list-style-type: none"> No 			
Level of impact From the information provided above and following EQIA guidance document Guidance on how to complete an EIA (click here), please indicate the perceived level of impact: Low Level of Impact For high or medium levels of impact, please forward a copy of this form to the HR Secretaries for inclusion at the next Diversity and Inclusivity meeting.			
Name of Responsible Person undertaking this assessment: Deborah Kearsley			
Signature: DA Kearsley			
Date: 31 August 2021			

APPENDIX 2 – FLOWCHART



APPENDIX 3 – CHECK LIST

NOTE: staff will be required to work their notice periods in full if decisions to dismiss have to be made. Therefore, line managers should ensure that the process that is followed takes the deadlines for notice to be given to staff in account.

Action	Date	By	Tick when completed
Speak to staff to discuss their intentions including those employees who are currently absent from work including sickness, maternity etc.		Line manager	
Write to all staff, including those absent, to confirm their vaccination status / intentions		Line manager	
Response Form to be scanned and sent on to named contact in HR and information recorded on a spreadsheet		Line manager	
For those who have chosen to be vaccinated, Line Manager to monitor vaccination dates and record vaccination details		Line manager	
For those who advise they are medically exempt, ensure sufficient evidence received of the exemption in one of the following formats: GP/Consultant letter/fit note/medical records which should scanned and sent to named contact in HR		Line manager	
Have informal meetings with all staff who have chosen not to be vaccinated or believe that they are medically exempt		Line manager	
If staff are not exempt and still do not wish to be vaccinated, consider redeployment opportunities		Line manager	
If redeployment not possible, refer to HR to arrange a formal meeting with an independent manager		Line manager	
HR to arrange formal meeting with member of staff, their representative and an independent manager		HR	
HR to collate and share information pack for meeting in advance with member of staff, their representative and the independent manager		HR	
HR to attend meeting to provide procedural support and act as note taker		HR	
If decision made to dismiss, outcome to be confirmed in writing together with right of appeal <i>NOTE: dismissal will be with notice and staff will be expected to work their notice period, with their last day of employment no later 11 November 2021</i>		Independent Manager	
If appeal lodged, HR to arrange appeal meeting with member of staff, their representative and independent manager		HR	
HR to collate and share information pack for appeal meeting in advance with member of staff, their representative and the independent manager		HR	
HR to attend appeal meeting to provide procedural support and act as note taker		HR	
Appeal outcome to be confirmed in writing		Appeal Manager	

Appendix 4 - Confirmation of vaccination status letter

PRIVATE AND CONFIDENTIAL

Dear

Mandatory COVID-19 vaccination requirements

The Health and Social Care Act 2008 (Regulated Activities) (Amendment) (Coronavirus) Regulations 2021 (the Regulations) were made on 22 July 2021 and will come into force on 11 November 2021. The Regulations require all persons working or deployed in a CQC registered care home (which provides accommodation together with nursing or personal care) in England to be fully vaccinated. To achieve this you must have received your first dose of the vaccine by the 16th September 2021. There are, however, exemptions for those who should not be vaccinated for clinical reasons, under 18s, those visiting family or friends, emergency services, and, people undertaking urgent maintenance work.

The new mandatory vaccination rules will not just impact upon care home providers and care home staff; **the rules will apply to anyone working or deployed in a care home (unless an exemption applies)**, regardless of their role, how often they are required to work in the care home, or, who employs them. The rules apply to volunteers, students, job applicants, workers visiting from non-care settings and visiting professionals.

In view of this, we now require you to advise of your vaccination status. Please complete and return the attached for to [me / NAME] by [DATE]. If you are medically exempt (there is a clinical reason why you should not be vaccinated) you will be required to provide satisfactory evidence from your consultant/GP before we can confirm acceptance of your medically exempt status. Please attach this evidence to your form.

Should you have any further questions you wish to raise, or need any additional support, please contact me or [NAME].

Yours sincerely

[NAME]

Enc. COVID-19 vaccination status form

COVID-19 vaccination status form

Name:

Employee Number:

Work Location:

Line Manager:

.....

I confirm that I have already attended / now booked [*delete as applicable*] my two COVID-19 vaccination appointments as follows:

.....

.....

Please provide proof of vaccination on receipt of your second vaccination.

Signed: Date:

.....

I confirm that I will not have the COVID-19 vaccination due to the following medical reasons:

.....

.....

.....

Please provide a copy of your exemption certificate and / or any medical evidence.

Signed: Date:

.....

I confirm that I will **not** be participating in the COVID-19 vaccination programme because:

.....

.....

.....

Signed: Date:

APPENDIX 5 - Informal meeting outcome and invite to formal meeting

PRIVATE AND CONFIDENTIAL

Dear

Mandatory COVID-19 vaccination requirements – invite to formal meeting

I am writing further to our recent meeting on [DATE], which took place following receipt of your COVID-19 vaccination status form.

During the meeting, we discussed your current vaccination status, the impact the new mandatory vaccination rules will have on your role, and the options available to you.

I explained that:

- The legal changes require us to ensure that everyone working or deployed in a CQC registered care facility is fully vaccinated by the 11th November 2021, unless an exemption applies.
- To achieve this you must have received your first dose of the vaccine by the 16th September 2021.
- The new mandatory vaccination rules not just impact upon care home providers and care home staff; **the rules will apply to anyone working or deployed in a care home (unless an exemption applies)**, regardless of their role, how often they are required to work in the care home, or, who employs them.

You explained that you will not be participating in the COVID-19 vaccination programme because [SET OUT DETAILS].

I am therefore inviting you to attend a formal meeting to discuss this with you in more depth. The meeting will be held on [DATE] at [TIME] at [LOCATION].

[NAME] will chair the meeting, with support from [NAME] (Human Resources) and [NAME] (Note taker). You have the right to representation at the meeting and are entitled to be accompanied by a Trade Union Representative or current work place colleague acting in a non-professional capacity.

I must inform you that a possible outcome of this meeting is that your contract of employment may be brought to an end.

Please contact [me / NAME] by email to confirm your attendance and advise who your companion will be. If you have any supporting documentation you wish to present, please forward this to [me / NAME] by the above date.

Please note that if you fail to attend the meeting without a good reason, it may proceed in your absence.

I appreciate that this process may cause you some anxiety. I'd like to take this opportunity to remind you of the support available to you. The Trust has an Employee Assistance Provision (EAP) which offers a range of information and practical support for problems at work and home. This service can be accessed 24 hours per day, 7 days per week via 03303 800658. In addition Nottinghamshire Healthcare NHS Foundation Trust has developed a service for any staff members experiencing acute distress. This service can be accessed via 0115 9555471 or via staffsupportservice@nottshc.nhs.uk.

If you need any advice or clarification regarding the contents of this letter please do not hesitate to contact [me / NAME] on [NUMBER].

Yours sincerely

[NAME]

APPENDIX 6 - Formal Meeting Outcome Letter

PRIVATE AND CONFIDENTIAL

Dear

Meeting Outcome

I am writing to confirm the content and outcome of the formal meeting you attended at <PLACE> on <DATE>. You were offered the opportunity to be accompanied at the meeting and chose not to be accompanied/were accompanied by <NAME JOB TITLE>.

I chaired the meeting and XXX from HR was also present for procedural advice and to take notes. A copy of the notes from this meeting are attached. I opened the meeting by informing you that the reason for the meeting was to discuss your decision not to participate in the COVID-19 vaccination programme.

I reiterated the matters already discussed with you by [NAME] and confirmed to you in earlier correspondence, namely, that:-

- The legal changes require us to ensure that everyone working or deployed in a CQC registered care facility is fully vaccinated by the 11th November 2021, unless an exemption applies.
- To achieve this you must have received your first dose of the vaccine by the 16th September 2021.
- The new mandatory vaccination rules do not just impact upon care home providers and care home staff; **the rules will apply to anyone working or deployed in a care home (unless an exemption applies)**, regardless of their role, how often they are required to work in the care home, or, who employs them.

You were given the opportunity to respond to the evidence presented and your [Work Colleague/Trade Union Representative] was also given an opportunity to make submissions on your behalf.

You explained that you will not be participating in the COVID-19 vaccination programme because [SET OUT DETAILS].

I have carefully considered your response.

I recognise that it has been a difficult decision for you. However, the legislation is very clear that we cannot allow you to work in a CQC registered care facility beyond 11 November 2021 if you are not fully vaccinated against COVID-19.

We discussed whether it would be possible to re-allocate your care home duties. However, I concluded that this would not be a viable option due to [SET OUT WHY THIS IS NOT POSSIBLE – CONSIDER THE NATURE OF THEIR ROLE, THE IMPACT ON THE SERVICES PROVIDED, ADDITIONAL PRESSURE THIS MAY PLACE ON OTHER STAFF, ETC].

We also discussed redeployment opportunities. Whilst there are no suitable alternative roles for you for within our CQC registered care facilities, we have reviewed other options and services including [SET OUT DETAILS]. However, due to [SET OUT RELEVANT FACTORS – i.e. LACK OF SUITABLE VACANCIES / LOCATIONS / VULNERABILITY OF SERVICE USERS IN OTHER LOCATIONS, ANY OBJECTIONS RAISED BY THE WORKER TO ALTERNATIVES PROPOSED, ETC.], we have been unable to redeploy you. We will continue to keep this under review during your notice period and you are encouraged to visit our website to do so too and highlight any opportunities.

Accordingly, I confirm that we have taken the decision to bring your contract to an end, on the basis that we can only meet our legal obligations under the Regulations if all our staff working in or deployed to CQC registered care facilities have had the full COVID-19 vaccination (unless any exemption applies) before 11 November 2021.

Your contract will end on [EITHER the date of this letter OR DATE NOTICE IS TRIGGERED – *this will depend on how much notice the worker is entitled to*] and you will be required to work during this notice period. Your last day of service will be [10 November 2021].

Please note, should you provide, before your last day of service (DATE):-

1. Evidence that you have received both doses of the COVID-19 vaccine, and,
2. Confirmation in writing that you wish your employment to continue, the decision to dismiss you may be overturned and your employment allowed to continue.

You have the right of appeal against this action. Should you wish to exercise this right, you should do so in writing within 14 calendar days of receipt of this letter clearly stating the grounds for the appeal. This should be sent to Mr Robert Simcox, Deputy Director of People.

I appreciate that this decision may cause you some anxiety. If you require any support or advice, you can contact the Trust's Employee Assistance Provision (EAP) which offers a range of information and practical support for problems at work and home. This service can be accessed 24 hours per day, 7 days per week via 03303 800658. In addition Nottinghamshire Healthcare NHS Foundation Trust has developed a service for any staff members experiencing acute distress. This service can be accessed via 0115 9555471 or via staffsupportservice@nottshc.nhs.uk.

If you need any advice or clarification regarding the contents of this letter please do not hesitate to contact [me / NAME] on [NUMBER].

Yours sincerely

[NAME]