## [Employer name]’s Vaccination, Testing, and Face Covering Policy

*This COVID-19 Policy on vaccination, testing, and face covering use applies to all employees of* [Employer Name], *except for employees who do not report to a workplace where other individuals (such as coworkers or customers) are present; employees while working from home; and employees who work exclusively outdoors.* [Identify specific groups of employees or job categories, if any, that are not covered by this policy because they fall under these exceptions.] *Additionally, all new employees are required to comply with the vaccination, testing, and face covering requirements outlined in this policy as soon as practicable and as a condition of employment. Potential candidates for employment will be notified of the requirements of this policy prior to the start of employment.*

*All employees are encouraged to be fully vaccinated. Employees are considered fully vaccinated two weeks after completing primary vaccination with a COVID-19 vaccine with, if applicable, at least the minimum recommended interval between doses. For example, this includes two weeks after a second dose in a two-dose series, such as the Pfizer or Moderna vaccines, two weeks after a single-dose vaccine, such as Johnson & Johnson’s vaccine, or two weeks after the second dose of any combination of two doses of different COVID-19 vaccines as part of one primary vaccination series. Employees who are not fully vaccinated will be required to provide proof of weekly COVID-19 testing and wear a face covering at the workplace.*

*Some employees may be required to have or obtain a COVID-19 vaccination as a term and condition of employment at* [Employer Name]*, due to their specific job duties (e.g., public facing positions). Employees subject to mandatory vaccination requirements should follow all relevant vaccination procedures in this policy and are not given the choice to choose testing and face covering use in lieu of vaccination.* [Identify specific groups of employees or job categories, if any, that are subject to a mandatory vaccination requirement.]

*All employees are required to report their vaccination status and, if vaccinated, provide proof of vaccination. Employees must provide truthful and accurate information about their COVID-19 vaccination status, and, if not fully vaccinated, their testing results. Employees not in compliance with this policy will be subject to discipline.*

*Proof of vaccination status can be submitted via* [insert how employees can submit vaccination information, e.g., the employer’s vaccination portal or in-person at the HR office].

*Acceptable proof of vaccination status is:*

1. *The record of immunization from a health care provider or pharmacy;*
2. *A copy of the COVID-19 Vaccination Record Card;*
3. *A copy of medical records documenting the vaccination;*
4. *A copy of immunization records from a public health, state, or tribal immunization information system; or*
5. *A copy of any other official documentation that contains the type of vaccine administered, date(s) of administration, and the name of the health care professional(s) or clinic site(s) administering the vaccine(s).*

*Proof of vaccination generally should include the employee’s name, the type of vaccine administered, the date(s) of administration, and the name of the health care professional(s) or clinic site(s) that administered the vaccine. In some cases, state immunization records may not include one or more of these data fields, such as clinic site; in those circumstances* [Employer name] *will still accept the state immunization record as acceptable proof of vaccination.*

*If an employee is unable to produce one of these acceptable forms of proof of vaccination, despite attempts to do so (e.g., by trying to contact the vaccine administrator or state health department), the employee can provide a signed and dated statement attesting to their vaccination status (fully vaccinated or partially vaccinated); attesting that they have lost and are otherwise unable to produce one of the other forms of acceptable proof; and including the following language:*

*“I declare (or certify, verify, or state) that this statement about my vaccination status is true and accurate. I understand that knowingly providing false information regarding my vaccination status on this form may subject me to criminal penalties.”*

*An employee who attests to their vaccination status in this way should to the best of their recollection, include in their attestation the type of vaccine administered, the date(s) of administration, and the name of the health care professional(s) or clinic site(s) administering the vaccine.*

*An employee may take up to four hours of work time per dose to travel to the vaccination site, receive a vaccination, and return to work.  This would mean a maximum of eight hours of work time for employees receiving two doses.  If an employee spends less time getting the vaccine, only the necessary amount of work time will be granted.  Employees who take longer than four hours to get the vaccine must send [their supervisor] an email documenting the reason for the additional time (e.g., they may need to travel long distances to get the vaccine). Any additional time requested will be granted, if reasonable, but will not be paid; in that situation, the employee can elect to use accrued leave, e.g., sick leave, to cover the additional time. If an employee is vaccinated outside of their approved work time they will not be compensated.*

*Employees may utilize up to two workdays of sick leave immediately following each dose if they have side effects from the COVID-19 vaccination that prevent them from working. Employees who have no sick leave will be granted up to two days of additional sick leave immediately following each dose if necessary.*

*Employees may request an exception from vaccination requirements (if applicable) if the vaccine is medically contraindicated for them or medical necessity requires a delay in vaccination. Employees also may be legally entitled to a reasonable accommodation if they cannot be vaccinated and/or wear a face covering (as otherwise required by this policy) because of a disability, or if the provisions in this policy for vaccination, and/or testing for COVID-19, and/or wearing a face covering conflict with a sincerely held religious belief, practice, or observance. Requests for exceptions and reasonable accommodations must be initiated by* [insert relevant instructions]. *All such requests* *will be handled in accordance with* *applicable laws and regulations and* [insert reference(s) to the employer’s applicable policies and procedures].

*All employees who are not fully vaccinated as of* [Date] *will be required to undergo regular COVID-19 testing and wear a face covering when in the workplace. Policies and procedures for testing and face coverings are described in the relevant sections of this policy.*

*Employees who report to the workplace at least once every seven days:*

*(A) must be tested for COVID-19 at least once every seven days; and*

*(B) must provide documentation of the most recent COVID-19 test result to [the supervisor] no later than the seventh day following the date on which the employee last provided a test result.*

*Any employee who does not report to the workplace during a period of seven or more days (e.g., if they were teleworking for two weeks prior to reporting to the workplace):*

*(A) must be tested for COVID-19 within seven days prior to returning to the workplace; and*

*(B) must provide documentation of that test result to [the supervisor] upon return to the workplace.*

*If an employee does not provide documentation of a COVID-19 test result as required by this policy, they will be removed from the workplace until they provide a test result.*

*Employees who have received a positive COVID-19 test, or have been diagnosed with COVID-19 by a licensed healthcare provider, are not required to undergo COVID-19 testing for 90 days following the date of their positive test or diagnosis.*

[Employer name] *will require all employees who are not fully vaccinated to wear a face covering. Face coverings must: (i) completely cover the nose and mouth; (ii) be made with two or more layers of a breathable fabric that is tightly woven (i.e., fabrics that do not let light pass through when held up to a light source); (iii) be secured to the head with ties, ear loops, or elastic bands that go behind the head. If gaiters are worn, they should have two layers of fabric or be folded to make two layers; (iv) fit snugly over the nose, mouth, and chin with no large gaps on the outside of the face; and (v) be a solid piece of material without slits, exhalation valves, visible holes, punctures, or other openings. Acceptable face coverings include clear face coverings or cloth face coverings with a clear plastic panel that, despite the non-cloth material allowing light to pass through, otherwise meet these criteria and which may be used to facilitate communication with people who are deaf or hard-of-hearing or others who need to see a speaker’s mouth or facial expressions to understand speech or sign language respectively.*

*Employees who are not fully vaccinated must wear face coverings over the nose and mouth when indoors and when occupying a vehicle with another person for work purposes. Policies and procedures for face coverings will be implemented, along with the other provisions required by OSHA’s COVID-19 Vaccination and Testing ETS, as part of a multi-layered infection control approach for unvaccinated workers.*

*The following are exceptions to* [Employer name]*’s requirements for face coverings:*

1. *When an employee is alone in a room with floor to ceiling walls and a closed door.*
2. *For a limited time, while an employee is eating or drinking at the workplace or for identification purposes in compliance with safety and security requirements.*
3. *When an employee is wearing a respirator or facemask.*
4. *Where* [Employer name] *has determined that the use of face coverings is infeasible or creates a greater hazard (e.g., when it is important to see the employee’s mouth for reasons related to their job duties, when the work requires the use of the employee’s uncovered mouth, or when the use of a face covering presents a risk of serious injury or death to the employee).*

[Employer Name] *will require employees to promptly notify [their supervisor] when they have tested positive for COVID-19 or have been diagnosed with COVID-19 by a licensed healthcare provider.*

 [Describe any leave policies (e.g., sick leave, Family Medical Leave Act, other policies) that the employer will implement for employees who test positive for or are diagnosed with COVID-19.]

Medical Removal from the Workplace

[Employer name] *has also implemented a policy for keeping COVID-19 positive employees from the workplace in certain circumstances.* [Employer name] *will immediately remove an employee from the workplace if they have received a positive COVID-19 test or have been diagnosed with COVID-19 by a licensed healthcare provider (i.e., immediately send them home or to seek medical care, as appropriate).*

[Describe the employer’s policies for removing employees from the workplace and any relevant procedures for working remotely or in isolation.]

Return to Work Criteria

*For any employee removed because they are COVID-19 positive,* [Employer name] *will keep them removed from the workplace until the employee receives a negative result on a COVID-19 nucleic acid amplification test (NAAT) following a positive result on a COVID-19 antigen test if the employee chooses to seek a NAAT test for confirmatory testing; meets the return to work criteria in CDC’s “Isolation Guidance”; or receives a recommendation to return to work from a licensed healthcare provider.*

*Under CDC’s “*[*Isolation Guidance*](https://www.osha.gov/sites/default/files/CDC%27s_Isolation_Guidance.pdf)*,” asymptomatic employees may return to work once 10 days have passed since the positive test, and symptomatic employees may return to work after all the following are true:*

* *At least 10 days have passed since symptoms first appeared, and*
* *At least 24 hours have passed with no fever without fever-reducing medication, and*
* *Other symptoms of COVID-19 are improving (loss of taste and smell may persist for weeks or months and need not delay the end of isolation).*

*If an employee has severe COVID-19 or an immune disease,* [Employer name] *will follow the guidance of a licensed healthcare provider regarding return to work.*

*Employees not in compliance with this policy will be subject to discipline which can range from warnings, to unpaid leaves of absence or suspension to termination of employment.*

 *All medical information collected from individuals, including vaccination information, test results, and any other information obtained as a result of testing, will be treated in accordance with applicable laws and policies on confidentiality and privacy.*

**Questions:**

*Please direct any questions regarding this policy to* [e.g., Human Resources Department].