

## **OTD and DPT COVID Vaccination Procedures**

*Approved by BCU Administration on 9/1/22*

### Background

The Doctor of Occupational Therapy (OTD) and Doctor of Physical Therapy (DPT) Programs at Briar Cliff University depend on clinical partnerships, including hospitals, nursing homes, and outpatient clinics, for the education of students. For students to graduate with the breadth and depth necessary to be a generalized entry-level practitioner, students must complete long-term clinical affiliations in a variety of health care settings. It is crucial that our current and future students understand the regulations relevant to COVID-19 vaccinations for health care workers, as well as potential ramifications if they choose not to get the COVID-19 vaccination.

The information in this document was derived from federal and state government rules and relevant documents released by professional organizations. Discussions with DPT Advisory Board Members in administrative positions within various clinical settings and core DPT faculty members at other institutions also contributed to this document.

In 2022 the Centers for Medicare and Medicaid Services (CMS) issued final rules for the Omnibus COVID-19 Health Care Staff Vaccinations. The rules required COVID-19 vaccination immunization of staff among Medicare- and Medicaid-certified providers and suppliers. The rules state that facilities “must develop and implement policies and procedures to ensure that all staff are fully vaccinated for COVID-19.” Students are specifically listed in the various final rules:

“Regardless of clinical responsibility or resident contact, the policies and procedures must apply to the following facility staff, who provide any care, treatment, or other services for the facility and/or its residents: (i) Facility employees; (ii) Licensed practitioners; (iii) Students, trainees, and volunteers; and (iv) Individuals who provide care, treatment, or other services for the facility and/or its residents, under contract or by other arrangement.”

According to the final rules, the policies and procedures must include, at a minimum, the following components:

1. A process for ensuring all staff (except for those staff who have pending requests for, or who have been granted, exemptions to the vaccination requirements of this section, or those staff for whom COVID-19 vaccination must be temporarily delayed, as recommended by the CDC, due to clinical precautions and considerations) have received, at a minimum, a single-dose COVID-19 vaccine, or the first dose of the primary vaccination series for a multidose COVID-19 vaccine prior to staff providing any care, treatment, or other services for the facility and/or its residents.
2. A process for ensuring that all staff are fully vaccinated for COVID-19, except for those staff who have been granted exemptions to the vaccination requirements of this section, or those staff for whom COVID-19 vaccination must be temporarily delayed, as recommended by the CDC, due to clinical precautions and considerations.
3. A process for ensuring the implementation of additional precautions, intended to mitigate the transmission, and spread of COVID-19, for all staff who are not fully vaccinated for COVID-19.
4. A process for tracking and securely documenting the COVID-19 vaccination status of all staff.

5. A process for tracking and securely documenting the COVID-19 vaccination status of any staff who have obtained any booster doses as recommended by the CDC.
6. A process by which staff may request an exemption from the COVID-19 vaccination requirements based on an applicable Federal law.
7. A process for tracking and securely documenting information provided by those staff who have requested, and for whom the facility has granted, an exemption from the staff COVID-19 vaccination requirements.
8. A process for ensuring that all documentation, which confirms recognized clinical contraindications to COVID-19 vaccines and which supports staff requests for medical exemptions from vaccination, has been signed and dated by a licensed practitioner, who is not the individual requesting the exemption, and who is acting within their respective scope of practice as defined by, and in accordance with, all applicable State and local laws, and for further ensuring that such documentation contains:
  - a. All information specifying which of the authorized COVID-19 vaccines are clinically contraindicated for the staff member to receive and the recognized clinical reasons for the contraindications.
  - b. A statement by the authenticating practitioner recommending that the staff member be exempted from the facility's COVID-19 vaccination requirements for staff based on the recognized clinical contraindications.
9. A process for ensuring the tracking and secure documentation of the vaccination status of staff for whom COVID-19 vaccination must be temporarily delayed, as recommended by the CDC, due to clinical precautions and considerations, including, but not limited to, individuals with acute illness secondary to COVID-19, and individuals who received monoclonal antibodies or convalescent plasma for COVID-19 treatment.
10. Contingency plans for staff who are not fully vaccinated for COVID-19.

According to the Kaiser Family Foundation, an estimated 95% of health care facilities/practitioners accept patients with Medicare. The American Physical Therapy Association (APTA) estimates the CMS rule covers approximately 76,000 health care facilities and more than 17 million health care workers. Even if the COVID-19 vaccination rules do not pertain to a health care facility, specifically some private practice outpatient clinics, OSHA and state regulations may require a clinic to have staff vaccinated.

It should be noted that even if a health care facility allows for exemptions, multiple regional organizations have stated they will not take students who are not vaccinated due to associated risks. During conversations with DPT Advisory Board Members, there have been cases of therapists who were vaccinated that did not want to work with those who were not vaccinated, patients who refused to work with therapists who were not vaccinated, and even organizations including vaccination status in the application process for hiring of therapists for acute and long-term care facilities. When an organization has allowed for exemptions, some facilities have required the student be tested for COVID-19 at least weekly and/or wear special personal protective equipment.

In August of 2021, the American Occupational Therapy Association (AOTA), the APTA, and the American Speech-Language-Hearing Association (ASHA) released a joint statement calling for members of their professional associations to adhere to guidance on vaccinations.

“AOTA, APTA, and ASHA strongly encourage, recommend, and support all health care professionals to obtain full vaccination status ... Our Associations believe it is a professional responsibility to promote standards that are critical to protecting the health, safety, and welfare of patients, peers, practitioners, and the general public.”

Although professional programs at some universities have mandated COVID-19 vaccinations, the majority have strongly recommended students to have the vaccination. These Universities have also made students aware that clinical partners may require the vaccination, and failure to receive the vaccination may significantly impact a student’s ability to complete the professional program. Briar Cliff University has not mandated the COVID-19 vaccination partially because the Iowa Legislature passed a law in the Spring of 2022 prohibiting such requirements at colleges, universities, K-12 schools, and licensed childcare centers through mid-2029.

### Policy

In order to abide by Iowa state law and giving the professional OTD and DPT students autonomy of judgement, while at the same time protecting the welfare of others and abiding by federal, other state, and health care organization rules, Briar Cliff University will provide relevant information about how the rules may effect clinical placement and graduation and strongly recommend to potential and current OTD and DPT students to get the COVID-19 vaccination.

### Procedures

A multitiered approach will be utilized to inform potential and current students of the recommendation to be COVID-19 vaccinated and potential consequences for the decision not to be vaccinated:

1. Admissions:
  - a. During the admissions process, the Admissions Coordinator will make potential applicants publicly aware that COVID-19 vaccinations and boosters are highly recommended, that exemptions must be applied for via each facility that a student may affiliate with during the didactic portion and long-term clinical components of the curriculums, that exemptions are not guaranteed, and a denial of an exemption by a facility may result in a failure to complete a course and/or delay graduation.
  - b. Prior to the start of classes, the Admissions Coordinator will send additional notifications out to accepted and deposited individuals requesting proof of immunizations, including COVID-19. Appropriate documentation of requests for exemption, as noted below, may also be submitted at this time. The vaccination status will be shared with necessary team members of the student’s respective department.
2. Program Directors and Clinical Education Administrators:
  - a. Will inform current and future faculty and students the following:
    - i. Background (above) on why COVID-19 vaccinations are highly encouraged.
    - ii. The final OMBUS rules require documentation confirming:
      1. Requests for **medical exemptions**
        - a. Signed and dated verification of a recognized contraindication to the COVID-19 vaccination by a licensed practitioner, who is not the individual requesting the exemption and who is acting within their respective scope of practice as defined by state and

local laws. The health care practitioner's documentation must contain:

- i. All information specifying which of the authorized COVID-19 vaccines are clinically contraindicated for the student to receive and the recognized clinical reasons for the contraindications.
- ii. A statement by the authenticating practitioner recommending that the student be exempted from the facility's COVID-19 vaccination requirements based on the recognized clinical contraindications.

**1. Recognized conditions for exemption:**

- a. Documented history of severe allergic reaction to one or more ingredients of all the COVID-19 vaccines available in the U.S.
- b. Documented history of severe or immediate-type hypersensitivity allergic reaction to a COVID-19 vaccine, along with a reason why the individual cannot be vaccinated with one of the other available vaccines.

**2. Conditions not recognized for exemption:**

- a. Allergic reactions (including severe allergic reactions) not related to vaccines (COVID-19 or other vaccines) or injectable therapies, such as allergic reactions related to food, pet, venom, or environmental allergies, or allergies to oral medications.
- b. Latex, egg, or gelatin allergies
- c. Delayed-onset local reaction around the injection site after the first COVID-19 vaccine dose.

2. A **religious exemption** may be applied for with individual health care organizations. A religious exemption should be applied for only if the COVID-19 vaccination conflicts with a genuine and sincerely held religious belief, observation, or practice. Students are encouraged to review reliable resources regarding religions with considerations, concerns, or restrictions regarding vaccinations, in general, particular reasons for vaccination, or specific vaccine ingredients. Personal preference and philosophical, political, or sociological objections are not "religious beliefs" for which a religious exemption should be applied for.
  - a. Definitions:

- i. Religion: Includes not only traditional, organized religions, but also religious beliefs that are new, uncommon, not part of a formal church or sect, only subscribed to by a small number of people, or that seem illogical or unreasonable to others.
  - ii. Religious belief: Includes theistic beliefs (i.e., those that include a belief in God) as well as non-theistic “moral or ethical beliefs as to what is right and wrong which are sincerely held with the strength of traditional religious views.” Religious beliefs typically concern “ultimate ideas” about “life, purpose, and death.”
  - iii. Religious practice: Includes, for example, attending worship services, praying, wearing religious garb or symbols, displaying religious objects, adhering to certain dietary rules, proselytizing or other forms of religious expression, or refraining from certain activities. Whether a practice is religious depends on the employee’s motivation.
- b. If a student does have a sincere religious belief that prevents them from receiving the COVID-19 vaccine, the clinical site must then determine whether it can offer a reasonable accommodation. Employers are not required to accommodate students if it would cause an undue burden on operations or result in more than a "de minimis" cost to the business. For example, an employer does not have to accommodate a student's religious beliefs if the accommodation is costly, infringes on other employees' job rights or benefits, compromises workplace safety, decreases workplace efficiency, or requires other employees to do more than their share of potentially hazardous or burdensome work.
- c. In making this determination, an employer may consider whether the student's job requires them to encounter non-employees whose vaccination status could be unknown or who may be ineligible for the COVID-19 vaccine. In such cases, an unvaccinated student may pose a direct threat of harm to coworkers or non-employees if they remain in the workplace and an accommodation may not be possible.
- d. Whether an employer can offer an accommodation depends on the nature of the business and the specific student's job duties. An employer must engage in an interactive process with its student to determine whether a reasonable accommodation exists under the particular circumstances. Depending on the student's job duties and location, reasonable accommodations may include requiring the student to regularly test for COVID-19

and wear an appropriate face covering. A student may be responsible for costs of the associated accommodations.

- iii. If applicable, in collaboration with the respective Director of Clinical Education/Academic Fieldwork Coordinator or Course Director, students who are not vaccinated will need to individually apply for exemptions with each health care facility that a student may affiliate with during the didactic portion and long-term clinical components of respective curriculums.
  1. Students should enter into discussions with the appropriate faculty member as soon as clinical locations are disclosed.
  2. If a student is granted an exemption from a clinical location, the student must adhere to the facility's policies and may be responsible for all related expenses associated with the exemption, including, but not limited to regular COVID testing and fitting and purchasing of specialized equipment.
  - 3. If a student is not granted an exemption by the clinical location:**
    - a. The student may choose to get vaccinated. The student should be aware that CMS considers an individual fully vaccinated if it has been two weeks or more from completion of the primary vaccination series for COVID-19. The timeframe to complete the series and wait at least two weeks after the last vaccination may result in the course or clinical education experience being delayed. Such a delay would result in delay in the progression within the respective program and/or graduation date.
    - b. If the student chooses not to get vaccinated, but has all of the appropriate documentation for exemption noted above:
      - i. For didactic courses, a Course Director may give an alternative assignment or experience, which is aimed at meeting the same objectives of the integrated clinical experience. The expenses related to this experience may be incurred by the student.
      - ii. For long-term clinical education courses, the Director of Clinical Education/Academic Fieldwork Coordinator will consider the individual clinical needs of the student and attempt to place the student at an alternate facility. If placement is not able to be reasonably found, a student's progression in the respective program and/or graduation may be delayed. Finding alternative sites will not be given priority by the Director of Clinical Education/Academic Fieldwork Coordinator.
    - c. If the student chooses not to get vaccinated and does not have all of the appropriate documentation for exemption noted above:
      - i. For didactic courses, a Course Director may fail the student on the assignment, which may affect the overall

course grade and ability to progress in the respective program.

- ii. For long-term clinical education courses, the Director of Clinical Education/Academic Fieldwork Coordinator does not have to find alternative placement for the student, and the student can choose whether to accept placement, including being vaccinated, or not progress in the respective program.
- b. The respective programs require students to submit documentation to the respective clinical education department relevant to COVID-19 vaccination status or medical or religious exemption requests, as noted above.

Disclaimer

1. With the dynamic rules and recommendations put forth by CMS, OSHA, and other federal and state agencies, these procedures may be edited at any time to reflect current practice.
2. The onus to be aware of and abide by these policies and procedures is on the student.