

Purpose/Background

Rocky View Schools (RVS) is committed to providing safe and healthy learning and working environments. RVS commits to protecting students and Employees from injury, illness, and accidents as required by *Occupational Health and Safety Legislation*, the *Education Act*, and common law. Transmittable diseases, including COVID-19, are identifiable workplace hazards. Such hazards can have a detrimental effect on health and safety, division operations, student learning, Employee productivity, costs, and Employee morale. RVS has legal obligations to take all reasonable steps to identify, eliminate, and control workplace hazards like COVID-19.

Government and Health Officials advise that COVID-19 represents an identifiable workplace hazard. COVID-19 is an acute respiratory illness caused by the severe acute respiratory syndrome coronavirus 2 (SARS-COV-2). Exposure to the virus typically occurs through: (1) inhalation of fine respiratory droplets and aerosol particles; (2) deposit of respirator droplets and particles on exposed mucous membranes in the mouth, nose, or eye by a direct splash or spray; or (3) touching mucous membranes with hands that have been soiled by virus-containing respiratory fluids (or touching surfaces with the virus on them).

Government and Health Officials advise that typical symptoms include fever, cough, shortness of breath, and several other symptoms. Asymptomatic infection is also possible. The risk of severe disease and death increases with age and is elevated in those with underlying medical conditions and those who are pregnant. Previously, younger persons have been less likely to develop serious illness or death, however, the emergence of variant strains have seen increasing hospitalization rates and death among younger age groups.

Our division has identified multiple cases of confirmed COVID-19 infection in all sites, among both its staff and student population, notwithstanding attempts to control spread through administrative controls (including physical distancing and cohorting) and through personal protective equipment (such as masking). The effectiveness of these existing measures to limit the risk of the COVID-19 hazard intensifies the need for this administrative procedure.

The Division recently received a joint letter from the Ministers of Health and Education encouraging a mandatory proof of vaccination or negative test policy be implemented by all School Divisions.

The purpose of this administrative procedure is to mitigate the risk of spread of COVID-19 infection in all RVS facilities to protect staff, students, and their families from the highly contagious illness during a global pandemic.

Definitions:

COVID-19: Refers to the virus designated “coronavirus 2 (SARS-COV-2)” or the symptoms of that virus where the context requires.

Employee: Means any and every Employee of the Division while such individual is performing services on behalf of the Division or on Division property.

Fully

Immunized: Refers to receiving the required number of doses of vaccine as per Health Canada Guidelines and having 14 days elapsed since the date upon which the person received the second dose of the COVID-19 vaccine considered valid by Health Canada of a two-dose series, or one dose of the COVID-19 vaccine considered valid by Health Canada in a one dose vaccine series. See “Vaccine” for further information.

Human

Resources: Refers to the Human Resources Department of RVS.

Rapid Test:

Refers to any COVID-19 rapid testing devices authorized by Health Canada and approved by RVS. This does NOT include testing provided by Alberta Health Services (AHS) nor at-home tests.

Vaccine:

Refers to any vaccine approved by Health Canada for inoculation against COVID-19. Currently this includes: the Moderna COVID-19 vaccine (2 doses required); the Pfizer-BioNTech COVID-19 vaccine (2 doses required); AstraZeneca/COVISHIELD COVID-19 vaccine (2 doses required); and the Janssen (Johnson & Johnson) COVID-19 vaccine (1 dose required). Any combination of two dose Health Canada approved vaccines are acceptable (e.g., one dose of AstraZeneca and one dose of Pfizer-BioNTech).

Compliance

Coordinator: The individual(s) designated by Human Resources, or in the absence of such designation, a Wellness Coordinator.

Procedures

1. EMPLOYEE REQUIREMENTS

- 1.1. This procedure is in addition to other Employee requirements mandated by government authorities and by the Board with respect to COVID-19 (e.g., mask wearing requirements) and does not supersede or replace any other measures or policies in place to address the hazard posed by COVID-19. The administrative procedure imposes two alternatives for compliance, immunization against COVID-19 (section 2) or semi-weekly rapid testing (section 3).
- 1.2. All Employees are required to show proof of full immunization against COVID-19 or comply with the semi-weekly proof of negative test requirement.
- 1.3. Employees who cannot comply with this administrative procedure have a duty to inform the Division, under section 4.

- 1.4. Employees who are unable to show proof of immunization and be fully immunized by January 3, 2022 or are unwilling to routinely show proof of negative COVID-19 testing, shall be considered non-compliant with this administrative procedure. Human Resources will review each non-compliant circumstance in its own context and circumstances, and at its discretion will determine available options including but not limited to:
 - 1.4.1. Leave of absence without pay and benefits;
 - 1.4.2. Reassignment or modification of duties in very limited circumstances; and
 - 1.4.3. Conclusion of employment.
- 1.5. Any Employees hired to or within the Division on or after January 3, 2022, will require proof of immunization or semi-weekly proof of a negative COVID-19 Rapid Test as a condition of employment prior to their first day of work.

2. PROOF OF IMMUNIZATION REQUIREMENT

- 2.1. To comply with this alternative, the Employee must:
 - 2.1.1. Be Fully Immunized with a Vaccine, as recommended by Health Canada or Alberta Health Services, no later than January 3, 2022.
 - 2.1.2. Provide Human Resources proof of immunization via a secure, online form in Atrieve by December 1, 2021.
 - 2.1.2.1. Proof of immunization includes:
 - 2.1.2.1.1. A screen shot/image of the QR code proof of immunization produced by Alberta Health (available via <https://covidrecords.alberta.ca>); or
 - 2.1.2.1.2. If you are fully immunized and unable/unwilling to provide the QR code, please contact your Compliance Coordinator to discuss other options to demonstrate proof of immunization.
 - 2.1.2.2. Compliance Coordinator will record that the division has verified proof of immunization in a field in the Employee's electronic file in Atrieve. The uploaded image of the proof of immunization will be kept in Atrieve as well. These will be used for the purpose of tracking who has shown proof of immunization.
- 2.2. Employees who do not provide proof of immunization in Atrieve by December 1, 2021, will be required to indicate in Atrieve that they will be participating in semi-weekly proof of negative COVID-19 testing as of January 3, 2022.

- 2.3. Employees must update their COVID-19 immunization status with the Division if changes occur.
- 2.4. All full-time or part-time Employees under contract are entitled to up to 3 hours of paid sick leave to obtain a COVID-19 immunization to the extent provided under s. 53.9821 of the Employment Standards Code (Alberta).

3. SEMI-WEEKLY PROOF OF NEGATIVE COVID-19 TEST REQUIREMENT

- 3.1. An Employee who does not provide proof of immunization by December 1, 2021, may comply with this administrative procedure by providing proof of negative COVID-19 testing via a Rapid Test on a semi-weekly basis, at the Employee's own expense outside of work time by a laboratory/pharmacy beginning January 3, 2022.
- 3.2. An Employee participating in the semi-weekly proof of negative COVID-19 testing program will need to declare this intention to Human Resources via a secure, online form in Atrieve by December 1, 2021.
- 3.3. To comply with this alternative, the Employee must:
 - 3.3.1. Beginning January 3, 2022, obtain a valid Rapid Test which demonstrates a negative result for COVID-19 infection from a laboratory/pharmacy. Valid test results should be recorded in a written or printed copy that clearly outlines the type of test, the time and date of sample collection, a clear indication of a negative result and the laboratory that completed the test. Proof of rapid testing remains valid for 72 hours from the time and date of the test.
 - 3.3.2. Provide Compliance Coordinator, with proof of a negative COVID-19 Rapid Test result before your shift starts on the first day of each week working (typically Mondays) and then again later in the work week prior to 72 hours expiring following the negative COVID-19 Rapid Test provided at the beginning of the week.
 - 3.3.3. Upon demonstration of the negative Rapid Test, the Employee is authorized to work for a period of 72 hours from the time of the Rapid Test.
 - 3.3.4. The Employee will repeat steps in section 3.3.1 – 3.3.3 for the duration of when this administrative procedure is in effect or should an Employee become fully vaccinated and shows proof of immunization as per section 2, then they can stop this semi-weekly rapid testing protocol.
- 3.4. If an Employee tests positive in response to a COVID-19 rapid test or if the test result is inconclusive, the Employee must not report to work and:
 - 3.4.1. Submit to mandatory COVID-19 PCR testing as soon as possible but no more than 48 hours following confirmation of the results of the Rapid Screening test, and as directed by the Division;

- 3.4.2. Inform the Division through Compliance Coordinator;
- 3.4.3. Isolate until the results of the COVID-19 PCR test are confirmed; and
 - 3.4.3.1 If negative, provide proof of a negative COVID-19 PCR test to Compliance Coordinator prior to the beginning of the Employees start time.
 - 3.4.3.2 If positive, comply with Alberta Health requirements for isolation, and provide proof of a negative COVID-19 PCR test prior to attending at any Division property.
- 3.4.4. Contact or arrange through the Division for a replacement for their assigned duty for time of absence.

4. EXEMPTIONS – INABILITY TO COMPLY - EMPLOYEE DUTY TO DISCLOSE

- 4.1. Any Employee who is unable, or believes that they may be unable, to comply with this administrative procedure must disclose that inability (or perceived inability) to Human Resources before breaching this administrative procedure or as soon as possible.
- 4.2. Human Resources will treat any such disclosure in confidence and will only share the information as is reasonably necessary to:
 - 4.2.1. determine the validity of the claimed inability to comply;
 - 4.2.2. determine the obligation of the Division to respond to, or accommodate, the inability to comply; and,
 - 4.2.3. determine the ability of the Division to accommodate the individual.
- 4.3. The Division may request additional information from the Employee and/or their licensed physician, where applicable, which the Employee must facilitate.
- 4.4. The Division recognizes its responsibilities and duties pursuant to the *Alberta Human Rights Act*. If an Employee is unable to be vaccinated due to a protected ground as defined by the *Act*, the Division will consider requests for exemption and reasonable accommodation to the point of undue hardship. The Division will request supporting documentation.
 - 4.4.1. Any Employee seeking a Human Rights (i.e., medical, or religious) exemption from compliance with this administrative procedure should notify Human Resources as soon as possible. Human Resources will advise any Employee inquiring on applying for an exemption the required information to do so. All Employees considering applying for an exemption should understand that this administrative procedure is purposely designed to provide an alternative for Employees not able or wishing to be fully vaccinated, to remain compliant with this administrative procedure by providing the required semi-weekly COVID-19 negative Rapid Test result at the Employee's own expense outside of work time by a laboratory /

pharmacy beginning January 3, 2022. As a result, it is anticipated in most cases that Employees that have a proven legitimate Human Rights exemption to vaccination will be reasonably accommodated by participating in the semi-weekly COVID-19 Rapid Test procedures outlined above in this administrative procedure.

- 4.5. No Employee will be disciplined for disclosing an inability, or perceived inability, to comply with this administrative procedure.
- 4.6. The protection in 4.5 shall not shield the Employee from discipline from any breach of the administrative procedure which occurred before the disclosure in 4.1 (although no discipline is appropriate where prior disclosure was not reasonably possible).

5. NON-EMPLOYEE REQUIREMENTS

- 5.1. Non-Employee individuals 18 years old or older, not including RVS students, must produce proof of immunization or proof of negative COVID-19 Rapid Test as of January 3, 2022, to be in RVS facilities.
- 5.2. As of January 3, 2022, contractors/service providers must ensure their workers who carry out duties or activities on Division property comply with this administrative procedure by meeting the requirements under section 2.1 or 3.3. Contractors/service providers must produce proof of compliance upon the request of the Division manager responsible for the supervision of their contract. For further clarity, this requirement applies to contracted bus drivers as well.
- 5.3. As of January 3, 2022, volunteers of the Division 18 years old or older, and not a student in RVS, are required to comply with this administrative procedure with similar expectations as staff members. Where the volunteer is in the facility routinely, the Principal/Supervisor can record they have verified proof of immunization, the date proof demonstrated and keep that information in a secure electronic file limited to only office staff being able to access so the volunteer does not need to demonstrate proof of immunization each visit. If the volunteer is only in a Division facility occasionally or utilizing proof of negative COVID-19 test, they must demonstrate their compliance with proof of immunization requirement or proof of negative COVID-19 test requirement by showing evidence in compliance with 2.1 or 3.3 to the office staff prior to starting their volunteer activity. These requirements apply whether inside the school or outside on Division property.
- 5.4. As of January 3, 2022, post-secondary institutions placing or requesting placement of practicum students in the Division who are 18 years old or older, and not a student in RVS, must ensure their students placed on Division property comply with this administrative procedure by meeting the requirements under section 2.1 or 3.3. Post-secondary institutions must produce proof of compliance upon the request of the Division.

- 5.5. As of January 3, 2022, visitors in Division facilities (not applying to those entering a Division facility for the purpose of just dropping something off in an office/warehouse or picking up their child) 18 years old or older, and not a student in RVS, are required to demonstrate their compliance with proof of immunization requirement or proof of negative COVID-19 test requirement by showing evidence in compliance with 2.1 or 3.3 to the office/designated individual(s) upon arrival. For further clarity, this applies to non-RVS students and those 18 years old and older who are attendees of indoor school events such as sporting activities, performances, presentations, etc.
- 5.6. As of January 3, 2022, community use groups when accessing indoor RVS spaces must ensure their users, who are 18 years of age or older and not RVS students, are in compliance with this administrative procedure and enact a process to ensure compliance with the proof of immunization / proof of negative COVID-19 test requirements. Community use groups must produce proof of compliance upon the request of the Divisional Community use supervisors.

6. CONSEQUENCES FOR BREACH

- 6.1. Compliance with this administrative procedure is mandatory. Any failure to comply with this administrative procedure by an Employee, including the refusal to disclose immunization status, the provision of proof of immunization status, compliance with applicable testing requirements, or the provision of false or misleading information in any regard, may result in administrative or disciplinary action up to and including conclusion of employment.
- 6.2. With respect to any non-Employees to which this administrative procedure is applicable, any visitor, volunteer, contractor/service provider, community use organization and others who fails to comply with any part of this administrative procedure, including being found to have falsified immunization or test results, will be considered to be in non-compliance with this administrative procedure. This will result in a request to immediately leave Division property and may further result in the termination of contract or participation in Division activities. With respect to any practicum students, any event of non-compliance may result in reporting the event of non-compliance to the appropriate post-secondary institution and removal from Division property until compliance has been resolved.
- 6.3. All persons scheduled or required to carry out duties or activities on Division property who are 18 years old or older and not a RVS student, beyond those entering a Division facility for the purpose of just dropping something off in an office/warehouse or picking up their child, who are not in compliance with this administrative procedure, will not be allowed on Division property.

7. PREVENTION OF HARASSMENT, BULLYING, OR DISCRIMINATION

- 7.1. Harassment, bullying or discrimination of any type against Employees based on their immunization status will not be tolerated. Employees experiencing harassment, bullying or discrimination are encouraged to discuss their concerns with their supervisor or Human Resources.

8. TEMPORARY ADMINISTRATIVE PROCEDURE

8.1. This administrative procedure is temporary. The Division will re-evaluate the need for this administrative procedure when the government and medical authorities no longer support the identification of COVID-19 as a workplace hazard. The Superintendent will review this administrative procedure for amendment or elimination a minimum of every 6 months, or as deemed necessary.

Reference:

- *Alberta Human Rights Act*
- *Occupational Health and Safety Legislation*
- *Education Act*
- *Freedom of Information and Protection of Privacy Act*

Appendix A

1. HUMAN RESOURCES DUTIES

- 1.1. Human Resources and Compliance Coordinator(s) are generally responsible to ensure the confidentiality of information obtained in this administrative procedure. Human Resources / Compliance Coordinator(s) shall be responsible for taking all prudent and reasonable steps to protect the confidentiality and security of all personal information disclosed to the Division under this administrative procedure.
- 1.2. The Division shall ensure that all questions and information relating to this administrative procedure, including information obtained from proof of immunization and proof of negative COVID-19 testing, are directed to Human Resources.
- 1.3. Where the Division has a legal obligation under the *Alberta Human Rights Act* to modify the requirements or expectations of this administrative procedure, Human Resources will do so on behalf of the Division.
- 1.4. About proof of immunization, the Compliance Coordinator(s) shall be responsible for:
 - 1.4.1. Communicating the process for Employees to submit their proof of immunization via Atrieve.
 - 1.4.2. Reviewing proof of immunization prior to permitting Employees to work, as of January 3, 2022.
 - 1.4.3. Determining that the proof of immunization is authentic and relates to the Employee submitting the proof of immunization (see appendix A section 1.6 if unable to do so).
 - 1.4.4. Protecting Employee private information, the Compliance Coordinator(s) will store proof of immunization in Atrieve only.
 - 1.4.5. Ensuring that information gathered under this administrative procedure is only used for the purpose of ensuring compliance with this administrative procedure. Such information will not be shared with any other person except when required to manage the Employee's employment relationship with the Division or as otherwise permitted under the *Freedom of Information and Protection of Privacy Act*.
 - 1.4.6. Destroying any notation or record in their possession gathered from the proof of immunization if it was not originally uploaded directly into Atrieve.
 - 1.4.7. Answering questions from Employees with respect to the use, collection, and storage of information gathered under this administrative procedure.

- 1.5. In regard to proof of negative COVID-19 testing, the Compliance Coordinator(s) shall be responsible for:
 - 1.5.1. Collecting information from Employees regarding proof of negative COVID-19 Rapid Test.
 - 1.5.2. Verifying proof of semi-weekly Rapid Testing prior to permitting Employees to work on or after January 3, 2022.
 - 1.5.3. Determining that the proof of Rapid Testing is authentic and relates to the Employee submitting the proof of rapid testing (see appendix A section 1.6 if unable to do so).
 - 1.5.4. Advising the Employee that the proof of Rapid Testing is valid only for a period of 72 hours, and that another negative Rapid Test and proof will be required prior to commencing work after that 72-hour period.
 - 1.5.5. Recording the date in Atrieve that the Rapid Test was provided.
 - 1.5.6. Ensuring that information gathered under this administrative procedure is only used for the purpose of ensuring compliance with this administrative procedure. Such information will not be shared with any other person except when required to manage the Employee's employment relationship with the Division or as otherwise permitted under the *Freedom of Information and Protection of Privacy Act*.
 - 1.5.7. Destroying any notation or record in their possession gathered from the proof of Rapid Testing beyond what is recorded in Atrieve.
- 1.6. If Compliance Coordinator is unable to determine the authenticity or veracity of proof of negative COVID-19 Rapid Test or proof of immunization, then Human Resources shall retain the proof of Rapid Test or proof of immunization (as the case may be) until the record has been verified.