

HEALTH CARE WORKER VACCINATION REQUIREMENT

MANDATING EMPLOYERS OF HEALTH CARE AND HOME CARE WORKERS WHO WORK IN OR ROUTINELY VISIT HIGH-RISK OR RESIDENTIAL CARE SETTINGS TO DOCUMENT THEIR FULLY VACCINATED AND BOOSTER DOSE VACCINATION STATUS

Issue Date: **Friday, September 16, 2022**
Effective as of **Saturday, September 17, 2022**

Recent Updates (Revisions are highlighted in yellow):

9/16/2022:

Updated to align with the recent change to the [State Health Officer's Health Care Worker Vaccine Requirement Order](#), which:

- Rescinds the testing requirement (except as specifically noted to comply with federal requirements) for workers exempt due to medical reasons or religious beliefs.
- Notes that facilities should maintain testing capacity at their worksite and have the ability to ramp up testing at their worksite in the event of outbreaks or if it is required again at a future date.
- Updates timing of required booster doses consistent with current Centers for Disease Control and Prevention (CDC) recommendations.

Please read this Order carefully.

SUMMARY OF THE ORDER: California has seen a dramatic increase in the percentage of Californians that are fully vaccinated and boosted. At present, 80% of Californians 12 years of age and older have completed their primary series of COVID-19 vaccines and 48% have received their first booster dose. In Los Angeles County, 74.8% of residents 12 years of age and older have completed their primary series of COVID-19 vaccines and 41.6% of residents have received a booster dose.

Vaccines for children 5-11 years of age have been available since October 2021. Across the state, vaccine coverage is high among workers in high-risk settings and the proportion of unvaccinated workers is low. Additionally, the Omicron subvariants have shown immune escape and increased transmissibility, and while unvaccinated individuals still have higher risk of infection, previously infected, vaccinated, and boosted persons have also been infected. Consequently, mandated testing of the small number of unvaccinated workers is not effectively preventing disease transmission as it did with the original COVID-19 virus and prior variants encountered earlier in the pandemic.

On August 11th and August 24th the Centers for Disease Control and Prevention (CDC) indicated in [updated guidance](#) that screening testing is no longer recommended in general community settings, and while screening testing may still be considered in high-risk settings, if implemented, should include all persons, regardless of vaccination status, given recent variants and subvariants with significant immune evasion.

As a result, required testing for exempt covered workers is being updated to reflect recent CDC recommendations, the current science of the Omicron subvariants, the increases in community immunity from vaccination and infection, and increases in vaccine coverage of our health care workforce.

COVID-19 vaccination and boosters continue to remain the most important strategy to prevent serious illness and death from COVID-19. They lower the risk of getting and spreading the virus that causes COVID-19 and also prevent serious illness and death. They are critical for building a foundation of individual and herd immunity, especially while a portion of our population continues to be unvaccinated.

Covered workers must continue to comply with all required primary series and vaccine booster doses pursuant to Table A below. The timing of required booster doses has been amended to reflect current CDC and California Department of Public Health (CDPH) recommendations. Additionally, facilities must continue tracking workers' vaccination or exemption status to ensure they are complying with these requirements. CDPH recommends all workers stay up to date on COVID-19 and other vaccinations.

Based on this current science, this Order mainly aligns with the updated **September 13**, 2022 version of the State Public Health Officer's Order entitled "[Health Care Worker Vaccine Requirement](#)," which requires eligible Workers in High-Risk Settings where COVID-19 transmission and outbreaks can have severe consequences for vulnerable populations resulting in hospitalization, severe illness, and death, to be fully vaccinated and receive a COVID-19 booster vaccination by March 1, 2022. Further, the updated State Public Health Officer's Order was updated to allow for workers who have completed the primary series of COVID-19 vaccination and provide sufficient proof of recent COVID-19 infection after completion of their primary series, to defer their booster dose by up to 90 days from infection. To provide proof of recent infection, workers must provide documentation of previous COVID-19 diagnosis from a health care provider or confirmed laboratory results.

High-Risk Settings, as determined by this Order, are health care facilities within the County of Los Angeles public health jurisdiction, including every licensed acute care hospital, skilled nursing facility (SNF), intermediate care facility, dental office, other health or direct care facility types, and emergency medical services provider agency, adult and senior care facilities or home care residential settings or individual homes where vulnerable individuals receive care or reside. Patients and residents receiving care at these facilities or in their homes are at an increased risk for severe illness and death from COVID-19 due to age, underlying health conditions, or both.

Since studies show the protection from the primary COVID-19 vaccination series is decreasing over time without boosters, all Workers in High-Risk Settings currently eligible for boosters need to receive a booster dose of the COVID-19 vaccine by no later than March 1, 2022; those fully vaccinated who are not yet eligible for a booster must receive a booster within 15 days of becoming eligible for receiving one, and those that provide proof of recent COVID-19 infection after completion of their primary series may defer their booster dose by up to 90 days from

infection. With an increased immune response, Workers in High-Risk Settings should have improved protection against getting infected with and, if infected, becoming seriously ill or dying from COVID-19, including the variants. Vaccination with a booster dose of COVID-19 vaccine is the most effective means of preventing infection with the COVID-19 virus, including against existing variants.

Although the County's health care system is currently able to manage the current level of cases and hospitalizations, because of the highly contagious nature of the Omicron variant, additional measures are needed to protect particularly vulnerable populations, and ensure a sufficient, consistent supply of workers in health care and home health care settings. Additionally, preventing stress on the health care delivery system avoids placing everyone at risk since it compromises care not just for those sick with COVID-19 infection, but also those requiring care for things like accidents, heart conditions, and cancer.

Health care facilities and home care residential settings identified by this Order, are considered particularly high-risk settings where COVID-19 outbreaks can have severe consequences for vulnerable populations, including large outbreaks of disease, hospitalizations, severe illness, and death. These consequences also exist in home health care settings. Moreover, the High-Risk Settings identified in this Order share the following features: frequent exposure to staff and highly vulnerable patients, including elderly, chronically ill, critically ill, medically fragile, and disabled patients.

Outbreaks in health care, SNFs, and other congregate settings have often been traced to infected staff members. The current requirement of a fully vaccinated workforce in health care and home care settings, appear to be insufficient to prevent transmission of the Omicron variant, which is highly transmissible and may cause more severe illness. As the receipt of a booster dose of COVID-19 vaccine is the most effective means of preventing infection with the virus that causes COVID-19 (including the Omicron variant) and subsequent transmission and outbreaks, this Order seeks to require staff and Workers in health care, prehospital care, and home health care settings to be "fully vaccinated and boosted" for COVID-19, receiving all recommended doses of the primary vaccine series of COVID-19 vaccine and a vaccine booster dose when eligible, to reduce the chance of transmission to vulnerable populations and to reduce the risk for transmission between staff in these settings. Requiring Workers in these High-Risk Settings to be "fully vaccinated and boosted" for COVID-19, along with other prevention efforts, are needed to improve the protection against COVID-19 for both the individuals being served as well as the Workers providing the services.

COVID-19 clearly remains a clear and present threat to public health. To prevent the further spread among the most vulnerable populations of patients and residents and to reduce the risk for health care workers, the requirements of this Order, with the additional requirements for boosters are necessary.

NOW, THEREFORE, I, as the Health Officer of the County of Los Angeles, order:

1. All workers who provide services or work in facilities described in subdivision (a) and home care settings under home care organizations described in subdivision (b), ("High-Risk

Settings”) have their first dose of a one-dose regimen or their second dose of a two-dose regimen by September 30, 2021:

- a. Health Care Facilities:
 - i. General Acute Care Hospitals
 - ii. Skilled Nursing Facilities (including Subacute Facilities)
 - iii. Intermediate Care Facilities
 - iv. Emergency Medical Services Provider Agencies
 - v. Acute Psychiatric Hospitals
 - vi. Adult Day Health Care Centers
 - vii. Program of All-Inclusive Care for the Elderly (PACE) and PACE Centers
 - viii. Ambulatory Surgery Centers
 - ix. Chemical Dependency Recovery Hospitals
 - x. Clinics & Doctor Offices (including behavioral health, surgical, dental)
 - xi. Congregate Living Health Facilities
 - xii. Dialysis Centers
 - xiii. Hospice Facilities
 - xiv. Pediatric Day Health and Respite Care Facilities
 - xv. Residential Substance Use Treatment and Mental Health Treatment Facilities
 - b. Home Care Settings
 - i. Home Care Organization
 - ii. Home Health Agency
2. All workers who provide services or work in facilities described in subdivisions (a) through (e) are required to have their first dose of a one-dose regimen or their second dose of a two-dose regimen by November 30, 2021:
- a. All workers who provide services or work in Adult and Senior Care Facilities licensed by the California Department of Social Services;
 - b. All in-home direct care services workers, including registered home care aides and certified home health aides, except for those workers who only provide services to a recipient with whom they live or who are a family member of the recipient for whom they provide services;
 - c. All waiver personal care services (WPCS) providers, as defined by the California Department of Health Care Services, and in-home supportive services (IHSS) providers, as defined by the California Department of Social Services, except for those

- workers who only provide services to a recipient with whom they live or who are a family member of the recipient for whom they provide services;
- d. All hospice workers who are providing services in the home or in a licensed facility;
 - e. All regional center employees, as well as service provider workers, who provide services to a consumer through the network of Regional Centers serving individuals with developmental and intellectual disabilities, except for those workers who only provide services to a recipient with whom they live or who are a family member of the recipient for whom they provide services.
3. All workers who are eligible for the exceptions outlined in subdivisions (b), (c), and (e) of section (2) must only provide services to a single household. If the worker provides services across multiple households, then the exception does not apply, and the worker must adhere to the provisions of this Order.
 4. Two-dose vaccines include: Pfizer-BioNTech, Moderna, or **Novavax** or vaccines authorized by the World Health Organization. The one-dose vaccine is: Johnson and Johnson [J&J]/Janssen. All COVID-19 vaccines that are currently authorized for emergency use can be found at the following links:
 - i. By the U.S. Food and Drug Administration (FDA), are listed at the [FDA COVID-19 Vaccines webpage](#).
 - ii. By the World Health Organization (WHO), are listed at the [WHO COVID-19 Vaccines webpage](#).
 5. For the purposes of this Order, "Worker" refers to all paid and unpaid employees, contractors, students, and volunteers who work in indoor or other settings where (1) care is provided to individuals in care (patients), (2) patients have access for any purpose, leading to direct or indirect patient contact or exposure to SARS-CoV-2 airborne aerosols, or (3) home care or daily living assistance is provided to residents. This includes workers serving in health care, prehospital care, patient transport, dental offices, residential care or other direct care settings, other health care settings or home health care settings who have the potential for direct or indirect exposure to patients, residents, or SARS-CoV-2 airborne aerosols. Workers include, but are not limited to, direct supportive services staff, hospice providers, nurses, nursing assistants, medical assistants, physicians, dental assistants, dentists, technicians, therapists, WPCS providers, IHSS providers, phlebotomists, pharmacists, emergency medical technicians (EMTs), EMT—paramedics, prehospital care personnel, affiliated home care aides, registered home care aides, certified home health aides, independent home care aides, home health aides, contractual staff not employed by the facility, students and trainees, contractual staff not employed by the residential facility, and persons not directly involved in providing care or services, but who could be exposed to infectious agents that can be transmitted in the care setting (e.g., clerical, clergy, dietary, environmental services, laundry, security, engineering and facilities management, administrative, billing, cosmetology, personal training and volunteer personnel). For the purposes of this Order, "Employer" refers to an organization that employs and directs the worker in providing services. In the case of workers in a facility, the facility is the employer. In the case of certified

home health aides and affiliated home care aides, the home health agencies and home care organizations are the employer.

6. For the purposes of this Order, "Employer-Recipient" refers to the person receiving services from IHSS workers, WPCS workers, and independent registered home care aides.
7. All Workers currently eligible for boosters who provide services or work in facilities described in Paragraphs 1(a), 1(b), and 2 must be "fully vaccinated and boosted" for COVID-19, receiving all recommended doses of the primary series of vaccines and a vaccine booster dose pursuant to **Table A** below.

Table A: COVID-19 Immunization Requirements for Covered Workers

COVID-19 Vaccine	Primary vaccination series	When to get the vaccine booster dose	Which vaccine booster dose to receive
Moderna	1st and 2nd doses	Booster dose at least 2 months and no more than 6 months after 2nd dose	Any of the COVID-19 vaccines authorized in the United States may be used for the booster dose, but either Moderna or Pfizer-BioNTech are preferred. Novavax is not authorized for use as a booster dose at this time.
Novavax	1st and 2nd doses	Booster dose at least 2 months and no more than 6 months after 2nd dose	Any of the COVID-19 vaccines authorized in the United States may be used for the booster dose, but either Moderna or Pfizer-BioNTech are preferred. Novavax is not authorized for use as a booster dose at this time.
Pfizer-BioNTech	1st and 2nd doses	Booster dose at least 2 months and no more than 6 months after 2nd dose	Any of the COVID-19 vaccines authorized in the United States may be used for the booster dose, but either Moderna or Pfizer-BioNTech are preferred. Novavax is not authorized for use as a booster dose at this time.
Johnson and Johnson [J&J]/Janssen	1st dose	Booster dose at least 2 months and no more than 6 months after 1st dose	Any of the COVID-19 vaccines authorized in the United States may be used for the booster dose, but either Moderna or Pfizer-BioNTech are preferred. Novavax is not authorized for use as a booster dose at this time.
World Health Organization (WHO) emergency use listing COVID-19 vaccine	All recommended doses	Booster dose at least 2 months and no more than 6 months after getting	Single booster dose of Moderna or Pfizer-BioNTech COVID-19 vaccine. Novavax is not authorized for use as a booster dose at this time.

COVID-19 Vaccine	Primary vaccination series	When to get the vaccine booster dose	Which vaccine booster dose to receive
		all recommended doses	
A mix and match series composed of any combination of FDA-approved, FDA-authorized, or WHO-EUL COVID-19 vaccines	All recommended doses	Booster dose at least 2 months and no more than 6 months after getting all recommended doses	Single booster dose of Moderna or Pfizer-BioNTech COVID-19 vaccine. Novavax is not authorized for use as a booster dose at this time.

- a. Those Workers currently eligible for booster doses per **Table A** above must receive their booster dose by no later than March 1, 2022. Workers not yet eligible for boosters must be in compliance no later than 15 days after the recommended timeframe above for receiving the booster dose.
 - b. Workers who provide sufficient proof of COVID-19 infection after completion of their primary series may defer booster administration for up to 90 days from date of first positive test or clinical diagnosis, which in some situations, may extend the booster dose requirement beyond March 1st. To provide proof of prior infection, workers must provide documentation of previous diagnosis from a health care provider or confirmed laboratory results. Workers with a deferral due to a proven COVID-19 infection must receive their booster dose no later than 15 days after the expiration of their deferral.
8. Workers may be exempt from the vaccination requirements of this Order only upon providing the operator of the facility, their employer, their employer-recipient, their employing home health care organization or home health agency, 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 their employer or employer-recipient 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). See the most updated version of the [Center for Disease Control and Prevention’s Interim Clinical Considerations for Use of COVID-19 Vaccines](#) guidance.
9. If an operator of a facility, organization or agency listed above under sections (1) or (2) deems a worker to have met the requirements of an exemption pursuant to section (8), OR deems a booster-eligible Worker to have not yet received their booster dose pursuant to section (7), the Worker must meet the following requirements when entering or working in such facility or home:

- a. Wear a surgical mask or higher-level respirator approved by the National Institute of Occupational Safety and Health (NIOSH), such as an N95 filtering facepiece respirator, at all times while in the facility or in residential care or other direct care settings.

10. Covered facilities should maintain capacity at their worksite, to continue to test as recommended during outbreaks and in the event it is required again at a future date. Facilities may also still consider various screening testing strategies (point in time testing, serial testing, etc.) and based on concerning levels of transmission locally. Workers may also consider routine diagnostic screening testing if they have underlying immunocompromising conditions (e.g., organ transplantation, cancer treatment), due to the greater risks such individuals face if they contract COVID-19:

- a. Skilled Nursing facilities must continue to comply with current federal requirements that may require more stringent testing of staff, including [QSO-20-38-NH REVISED](#) "Interim Final Rule (IFC), CMS-3401-IFC, Additional Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency related to Long-Term Care (LTC) Facility Testing Requirements" or similar requirements that may be imposed in the future.

11. Consistent with applicable privacy laws and regulations, the operator of the facility, organization or agency must maintain records of workers' vaccination or exemption status. If the worker is exempt pursuant to section (8), the operator of the facility, organization or agency then also must maintain records of the workers' testing results pursuant to section (9).

- a. The facility must provide such records to the County Department of Public Health or their designee promptly upon request, and in any event no later than the next business day after receiving the request.
- b. Operators of the facilities subject to the requirement under sections (1) and (2) must maintain records pursuant to the CDPH Guidance for Vaccine Record Guidelines & Standards with the following information: (1) full name and date of birth; (2) vaccine manufacturer; and (3) date of vaccine administration (for first dose and, if applicable, second dose).
- c. For unvaccinated workers: signed declination forms with written health care provider's statement where applicable, as described in section (8) above.
- d. Testing records (when required) pursuant to section (10) must be maintained.

12. Nothing in this Order limits otherwise applicable requirements related to Personal Protective Equipment, personnel training, and infection control policies and practices. Public Health strongly recommends that all Workers immediately begin to wear a surgical mask or higher-level respirator approved by the National Institute of Occupational Safety and Health (NIOSH), such as an N95 filtering facepiece respirator, at all times while in the facility or in a residential care or other direct care setting.

13. Facilities, organizations, and agencies covered by this Order are encouraged to provide onsite vaccinations, easy access to nearby vaccinations, and education and outreach on vaccinations, including:
- a. Access to epidemiologists, physicians, and other counselors who can answer questions or concerns related to vaccinations and provide culturally sensitive advice; and
 - b. Access to online resources providing up to date information on COVID-19 science and research.
14. This Order is issued pursuant to Health and Safety Code sections 101040, 120175, and 120295.
15. This Order shall become effective on **Saturday, September 17, 2022** and will continue until it is revised, rescinded, superseded, or amended in writing by the Health Officer.

IT IS SO ORDERED:



Muntu Davis, M.D., M.P.H.

Health Officer,
County of Los Angeles

9/16/2022

Issue Date