

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; FOR THOSE WITH APPROVED MEDICAL OR RELIGIOUS EXEMPTIONS OR BOOSTER-ELIGIBLE WORKERS WHO HAVE NOT YET RECEIVED A BOOSTER, DOCUMENT WEEKLY OR TWICE WEEKLY REGULAR TESTING FOR COVID-19

Issue Date: Wednesday, January 12, 2022
Effective as of Wednesday, January 12, 2022
Full Compliance Required by: Tuesday, February 01, 2022

Recent Updates (Revisions are highlighted in yellow):

1/12/2022:

Updated "When to get the vaccine booster dose" column in Table A to reflect booster dose can be received at 5 months instead of 6 months after 2nd dose of Pfizer-BioNTech, Moderna, and other specified COVID-19 vaccines.

12/23/2021:

- Updated to mainly align with the December 22, 2021 [State Public Health Officer Order](#). This Order requires that Workers who provide service or work in High-Risk Settings, including in hospitals, skilled nursing facilities, and other health care settings and who are currently eligible for a COVID-19 booster vaccination, receive their booster dose by no later than February 1, 2022.
- Workers not yet eligible for a booster must receive a booster within 15 days of becoming eligible for receiving one.
- Beginning December 27, 2021, Workers in acute health care and long-term care settings, who are booster-eligible but have not yet received a booster dose of COVID-19 vaccine, must test at least twice each week. Booster-eligible workers in other High-Risk Settings must test at least once each week.
- Includes a strong recommendation that even Workers who have received booster 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 at a High-Risk Setting.

Please read this Order carefully.

SUMMARY OF THE ORDER: The spread of Novel Coronavirus (COVID-19) remains a substantial danger to the health of the public. COVID-19 daily cases and community transmission of COVID-19 are at a high level; on **January 12, 2022** alone, Los Angeles County reported **40,452** new cases. Since Thanksgiving Day, the County's test positivity rate and hospitalizations have steadily increased. As of **January 5, 2022**, Los Angeles County is reporting a 7-day daily average case rate of **326.2** cases per 100,000 people. These statistics indicate a continued and high risk of COVID-19 infection, especially for those who are not or cannot be vaccinated against COVID-19. Based upon federal CDC indicators and thresholds, this means

that community transmission of COVID-19 within the County of Los Angeles remains High and is highly likely to increase as we are at a time when respiratory viruses, like influenza and SARS-CoV-2, spread more easily. Moreover, with the emergence and arrival of the Omicron variant in the county, state and nation, the risk of rapid community transmission has increased.

The current high rate of COVID-19 community transmission with the increasing circulation of the highly communicable Omicron variant presents an increased risk to both workers and patients/residents in certain settings who have a greater risk of negative health outcomes from a COVID-19 infection. This Order mainly aligns with the State Public Health Officer's Order of December 22, 2021 entitled "[Health Care Worker Vaccine Requirement](#)," which now 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 receive a COVID-19 booster vaccination by February 1, 2022.

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.

The highly communicable Omicron variant, which early data suggests is two to four times as infectious as the Delta variant, will soon become the most common variant causing new COVID-19 infections in the County. The recent emergence of the Omicron variant, for which current primary COVID-19 vaccines may not be as effective at preventing infection or milder illness with symptoms, signal the continued importance of vaccination and boosters since they are still expected to protect against severe COVID-19 related illness, hospitalization, and death. While evidence shows mRNA COVID-19 vaccines initially reduced the risk of COVID-19, including severe illness, by 90% or more among people who are fully vaccinated, the appearance of new variants, including Omicron, have made vaccine boosters increasingly important. Recent lab studies of antibodies from people vaccinated against COVID-19 who had and had not received COVID-19 vaccine boosters have shown that full vaccination without a booster dose likely offers a vaccine effectiveness of 30-40% against Omicron infection, while full vaccination with a booster dose raises that to about 70-75%. Accordingly, 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 February 1, 2022 and those fully vaccinated who are not yet eligible for a booster must receive a booster within 15 days of becoming eligible for receiving one. 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. Unvaccinated persons are more likely to get infected and spread the virus, which is transmitted

through the air. Most hospitalizations and deaths continue to be among unvaccinated persons. Currently, when compared to fully vaccinated individuals, unvaccinated individuals have five times the risk of infection, 21 times the risk of hospitalization, and 18 times the risk of death due to COVID-19. And people who are fully vaccinated but not boosted have about five times the risk of infection when compared with those who are fully vaccinated and boosted.

Although the County's health care system is currently able to manage the recent and substantial increase in cases and current level of 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 settings and home health care settings. Additionally, given the current hospital census, even a moderate surge in cases and hospitalizations could materially impact California's health care delivery system within certain regions of the state. Stress on the health care delivery system places 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.

Recent 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, including testing, 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 and additional testing of workers eligible for boosters who are not yet boosted, 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 or Moderna or vaccine 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:

California 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 5 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.
Pfizer-BioNTech	1st and 2nd doses	Booster dose 5 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.
Johnson and Johnson [J&J]/Janssen	1st dose	Booster dose 2 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.
<u>World Health Organization (WHO) emergency use listing COVID-19 vaccine</u>	All recommended doses	Booster dose 5 months after getting all recommended doses	Single booster dose of Pfizer-BioNTech COVID-19 vaccine
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 5 months after getting all recommended doses	Single booster dose of Pfizer-BioNTech COVID-19 vaccine

- a. Those Workers currently eligible for booster doses per **Table A** above must receive their booster dose by no later than February 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.

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. Test for COVID-19 with either polymerase chain reaction (PCR) or antigen test that either has Emergency Use Authorization (EUA) by the U.S. Food and Drug Administration or be operating per the Laboratory Developed Test requirements by the U.S. Centers for Medicare and Medicaid Services. Testing must occur at least twice weekly for unvaccinated exempt workers and booster-eligible Workers who have not yet received their booster in acute health care and long-term care settings, and once weekly for such workers in other health care and home settings. Operators of facility, organization, or agency ("High-Risk Setting") must begin testing of all booster-eligible workers who have not yet received their booster by December 27, 2021.
 - b. 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. 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. Testing records pursuant to section (9) must be maintained.
11. 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.
12. 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.
13. This Order is issued pursuant to Health and Safety Code sections 101040, 120175, and 120295.
14. This Order shall become effective on **Wednesday, January 12, 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

1/12/2022

Issue Date