Suffolk County Water Authority

Interoffice Memorandum

To: Chairman, Board Members, and all SCWA Employees

From: Jeffrey W. Szabo, CEO

Re: COVID-19 Response Plan - Phase X – Mandatory Vaccination Requirements

Date: August 9, 2021

The Centers for Disease Control and Prevention and the Equal Employment Opportunity Commission have determined that COVID-19 is a "direct threat" to public health.

SCWA has developed a Response Plan to this threat to provide for the safety of its employees and the public it serves. This Plan contains ten (10) Phases. Each Phase responded to the evolving pandemic and was tailored to the then current conditions.

Phase I governed the structural changes necessary to institutionalize social distancing within the workplace and in SCWA practices. As these changes were being implemented 180 employees worked remotely. Phase II guided the return of most of them. Resumption of full SCWA operations in the COVID-19 environment occurred under Phase III. Phase IV of the Response Plan returned the SCWA workforce to a modified workplace. Phase V and its Implementation on January 6, 2021, instituted a modified remote work strategy in response to a post-holiday increase in the COVID-19 positivity rate. Phase VI rescinded the Phase V measures. Phase VII recognized the efficacy of the emergency use authorization vaccines, the increasing number of SCWA fully vaccinated employees and lessened social distancing restrictions implemented in Phases I, II, and III. Phase VIII removed most of the restrictions governing the activities of fully vaccinated employees. Phase IX removed the remaining restrictions on fully vaccinated employees while maintaining them on non-fully vaccinated persons, removed social distancing requirements on fully vaccinated employees, and restored normal working hours while maintaining physical barriers to protect against the spread of transmissible disease.

Phase X sets forth vaccination mandate for every SCWA employee and Prospective Employee. It also establishes a mandatory SARS-CoV-2, the virus that causes COVID-19, testing program. Phase X provides for an exemption to the vaccination mandate if administration of a COVID-19 vaccine is contraindicated by a medical condition, if it would violate a person's sincerely held religious belief or practice, or if a non-fully vaccinated employee participates in SCWA's Mandatory SARS-CoV-2 Testing Program. A newly established Exemption Review Committee will consider exemption requests.

Suffolk County Water Authority

Guidance – COVID-19 Response Plan - Phase X – Mandatory Vaccination Requirements

Components of Phase X Plan:

- I. Definition of Fully Vaccinated Employee
- II. Prospective SCWA Employee Vaccination Requirement
- III. SCWA Employee Vaccination Expectation
- IV. SCWA Employee Vaccination Requirement
- V. Mandatory SARS-CoV-2 Testing Program
- VI. Exemption Review Committee
- VII. Adoption and Incorporation of Prior Phases
- VIII. Implementation, Corrective Action, and Non-
 - Retaliation
- IX. Phase X Duration

I. Definition of Fully Vaccinated Employee

A SCWA employee is considered Fully Vaccinated for COVID-19 \geq 2 weeks after they have received the second dose in a 2-dose series (Pfizer-BioNTech or Moderna), or \geq 2 weeks after they have received a single-dose vaccine (Johnson & Johnson (J&J)/Janssen).

This definition applies to COVID-19 vaccines currently authorized for emergency use by the U.S. Food and Drug Administration: Pfizer-BioNTech, Moderna, and Johnson & Johnson (J&J)/Janssen COVID-19 vaccines. This guidance can also be applied to COVID-19 vaccines that have been authorized for emergency use by the World Health Organization (e.g. AstraZeneca/Oxford) or individuals participating in a clinical vaccine trial that has been issued a CDC authorized vaccine trial participation card stating the individual can be considered "fully vaccinated" for public health purposes.

To be deemed Fully Vaccinated, an employee must submit a copy of their vaccination card to Human Resources. The vaccination card should not contain the employee's medical or genetic information. Human Resources will keep vaccination information confidential. Absent submission of their vaccination card, an employee shall not be deemed Fully Vaccinated no matter whether they have received a COVID-19 vaccine.

II. Prospective SCWA Employee Vaccination Requirement

- A. Prospective SCWA employees are those individuals to whom an offer of SCWA employment has been made.
- B. Prospective SCWA employees must be Fully Vaccinated by their first day of employment as a condition of their offer of employment.

- C. SCWA will delay a Prospective SCWA Employee's first day of employment by thirty-five (35) days from the date of an offer of employment is made to allow the Prospective Employee to comply with the vaccination requirement.
- D. Exemptions from Prospective Employee Mandatory Vaccine Requirement
 - 1. Exemption for Medical Reason

SCWA will provide a Prospective Employee an exemption and reasonable accommodation if administration of a COVID-19 vaccine to the Prospective Employee is contraindicated based upon the Prospective Employee's documented medical condition.

To request an exemption, a Prospective Employee must complete the Request for Medical Exemption from COVID-19 Vaccination Requirement Form. The completed Exemption Request Form must be submitted to the Human Resources Department within five (5) days of the exemption request.

Exempted Prospective Employees who commence SCWA employment must comply with SCWA's Mandatory SARS-CoV-2 Testing Program.

2. Exemption for Sincerely Held Religious Belief

SCWA will provide a Prospective Employee an exemption and reasonable accommodation if administration of a COVID-19 vaccine to the Prospective Employee would violate a Prospective Employee's Sincerely Held Religious Belief and Practice.

To request an exemption, a Prospective Employee must complete the Request for Sincerely Held Religious Belief and Practice Exemption from COVID -19 Vaccination Requirement Form. The completed Exemption Request Form must be submitted to the Human Resources Department within 5 days of the exemption request.

Exempted Prospective Employees who commence SCWA employment must comply with SCWA's Mandatory SARS-CoV-2 Testing Program.

E. Exemption Review and Determination

The Exemption Review Committee shall consider exemption requests.

F. Non-compliance with Vaccination Requirement

Compliance with the vaccination requirement unless the Prospective Employee receives a Medical Condition or Sincerely Held Religious Belief exemption is a condition of the Prospective Employees Offer of Employment. Non-compliance shall result in the revocation of the Offer of Employment.

III. SCWA Employee Vaccination Expectation

SCWA's expectation is that all SCWA employees will be Fully Vaccinated. SCWA shall review the New York State and Suffolk County COVID-19 positivity rate, SCWA's vaccination rate, and the impact the implementation of COVID-19 Policy Phase X has on SCWA operations to determine whether to implement a mandatory vaccination requirement for all SCWA employees and to terminate the continual testing exemption accommodation.

Under a Mandatory Vaccination Requirement Program without a continual testing exemption accommodation, SCWA will suspend without pay and then terminate the employment of those employees who do not comply with the mandatory vaccination requirement unless the employee has an approved medical reason exemption or sincerely held religious belief exemption.

IV. SCWA Employee Vaccination Requirement

- A. Each SCWA employee must be Fully Vaccinated against COVID-19 or have approved exemption from this requirement.
- B. Each SCWA employee who is not Fully Vaccinated by August 16, 2021, must provide proof of a weekly SARS-CoV2 virus test pursuant to Section V below.
- C. Exemptions from Mandatory Vaccine Requirement
 - 1. Exemption for Medical Reason

SCWA will provide an employee an exemption and reasonable accommodation if administration of a COVID-19 vaccine is contraindicated based upon the employee's documented medical condition.

To request an exemption, an employee must complete the Request for Medical Exemption from COVID-19 Vaccination Requirement Form. The completed Request Form must be submitted to the Human Resources Department within five (5) days of the exemption request.

Exempted employees must comply with SCWA's Mandatory SARS-CoV-2 Testing Program.

2. Exemption for Sincerely Held Religious Belief

SCWA will provide an employee an exemption and reasonable accommodation if administration of a COVID-19 vaccine would violate the employee's Sincerely Held Religious Belief and Practice.

To request an exemption, an employee must complete the Request for Sincerely Held Religious Belief and Practice Exemption from COVID -19 Vaccination Requirement Form. The completed Request Form must be submitted to the Human Resources Department within five (5) days of the exemption request.

Exempted employees must comply with SCWA's Mandatory SARS-CoV-2 Testing Program.

3. Continual Participation in the Mandatory SARS-CoV-2 Testing Program.

SCWA will provide an accommodation to an employee with an exemption from the mandatory vaccination requirement if the employee continually participates in SCWA's Mandatory SARS-CoV2 Testing Program.

D. Exemption Review and Determination

The Exemption Review Committee shall consider Medical Reason and Sincerely Held Religious Belief Exemption Requests.

- V. Mandatory SARS-CoV-2 Testing Program
 - A. SCWA shall establish a Mandatory SARS-CoV-2 Testing Program. The program will consist of on-site and off-site testing during working and non-working hours. SCWA shall designate the time, place, and manner of testing for each employee in the Program. Employees designated to take a test during a non-working hour shall be compensated for up to one (1) hour of time to obtain the test.

Each employee shall be provided on instructions of how to participate in the Testing Program. Employees are expected to comply.

- B. Each non-Fully Vaccinated SCWA employee must be tested once a business week (e.g., Monday through Sunday) for the SARS-CoV-2 virus. The results from the test shall be provided to Human Resources.
- C. Participation in the Mandatory Testing Program is a condition of employment.

Each employee who is not Fully Vaccinated by August 16, 2021, must provide proof of their weekly SARS-CoV2 test result to SCWA.

- D. An employee who does not provide proof of their weekly SARS-CoV2 test result to SCWA will be suspended without pay until the result is provided to SCWA.
- E. Each SCWA employee that is not Fully Vaccinated must complete a daily COVID-19 symptom and temperature check.
- F. An employee who is Fully Vaccinated and fails to accurately report their vaccination status to SCWA shall be suspended without pay for a period of no less than twenty (20) days.

VI. Exemption Review Committee

SCWA establishes an Exemption Review Committee to consider exemption requests on a case-by-case basis. The Committee shall engage in a conversation with each person requesting an exemption about their request. The Committee may request additional documentation supporting the need for an accommodation or request for any other exemption. The Committee shall notify the person, in writing, if an exemption has been granted or denied. If the approved exemption contains an expiration, the exempted person will be required to vaccinate at that time. SCWA's decision to grant or deny an exemption request is final and not subject to appeal. Persons whose requests have been denied are permitted to reapply if new documentation and information should become available.

The CEO shall designate the members of the Committee which will consist of members of the Human Resources Department. The CEO may appoint others to the Committee.

VII. Adoption and Incorporation of Prior Phases

The measures instituted under Phase X are additive and supplementary to those implemented under the prior Phases. SCWA through its COVID-19 Response Plan is building layers of best practices to create and maintain a safe working environment. In the event of a conflict, the protocols established under Phase X shall control.

VIII. Implementation, Corrective Action, and Non-Retaliation

A. Implementation Date

This Policy goes into effect upon its issuance.

B. Corrective Action

Unless as otherwise provided herein, SCWA will enforce the COVID-19 protocols through disciplinary action in accordance with SCWA Policy 406.

C. Non-Retaliation

SCWA prohibits any form of discipline, intimidation, or retaliation for reporting a violation of this Phase or any other health or safety concern. Employees have the right to report work-related injuries and illness, and SCWA will not discharge, discriminate, or other retaliate against employees for reporting work-related injuries or good faith health and safety concerns.

IX. Phase X Duration

The CEO, in consultation with the Board, Senior Leadership Team and Office of Emergency Management, will determine the duration of the Phase X protocols. The CEO is authorized to modify or terminate any of the COVID-19 Response Plan protocols issued under any Phase, or issue new Phases, as conditions require without action of the Board.

SUFFOLK COUNTY WATER AUTHORITY

Request for Sincerely Held Religious Exemption from COVID-19 Vaccination Requirement

Name:
Department:
Phone:
SCWA policy requires all new employees receive a COVID-19 vaccination. An exemption may be granted if your sincerely held religious beliefs would be violated if you are vaccinated. Individuals with an approved exemption will be required to comply with SCWA's Mandatory COVID-19 Testing Program and other preventive requirements.
Please provide a personal written statement detailing the religious basis for your vaccination objection, explaining why you are requesting this religious exemption, the religious principle(s) that guide your objections to vaccination, and the religious basis that prohibits the COVID-19 vaccination. Please attach additional documentation, if necessary.
If you are a member of a religious organization, you may supplement your request with a statement from a leader in your organization attesting to your sincerely held religious belief.
Your request will be carefully reviewed and SCWA will have a conversation with you about it. After your request has been reviewed and processed, you will be notified, in writing, if an exemption has been granted or denied. If the approved exemption contains an expiration, you will be expected to complete the requirement at that time. SCWA's decision to grant or deny your exemption request is final and not subject to appeal. Individuals whose requests have been denied are permitted to reapply if new documentation and information should become available.
Certification
I certify that the information contained in this request is true to the best of my knowledge. If the basis of my exemption expires, I agree to notify SCWA. If the exemption is granted, I agree to comply with SCWA's Mandatory COVID-19 Testing Program and other preventative measures.
Signature:
Name:
Date:

SUFFOLK COUNTY WATER AUTHORITY

Request for Sincerely Held Religious Exemption from COVID-19 Vaccination Requirement

Religious Organization Statement

SCWA policy requires that all new employees receive a COVID-19 vaccination.
from this vaccination requirement.
In the space below, please provide a written and signed statement supporting the basis of the observant's faith/beliefs which are contrary to the practice of vaccination or use of the COVID-19 vaccination, including the length of time you have known the observant. Please attach additional documentation, if necessary.
I certify that my statement above is true and accurate and that the above-named observant is a member of my religious organization in good standing and holds a sincere religious belief that is against the receipt of the COVID-19 vaccination.
Signature:
Name: Date:

SUFFOLK COUNTY WATER AUTHORITY

Request for Medical Exemption from COVID-19 Vaccination Requirement

Name:
Department:
Phone:
SCWA policy requires all new employees receive a COVID-19 vaccination. A medical exemption may be granted upon receipt of a completed form (below) not more than 6 months old, signed and certified by a licensed healthcare provider, not related to you, and whose specialty is appropriate to the associated condition listed as the basis for the exemption.
Medical exemptions expire when the medical condition(s) contraindicating COVID-19 immunization changes in a manner which permits immunization, as determined by SCWA in reviewing the request.
Individuals with an approved exemption will be required to comply with SCWA's Mandatory COVID-19 Testing Program and other preventive requirements.
Your request will be carefully reviewed and SCWA will have a conversation with you about it. After your request has been reviewed and processed, you will be notified, in writing, if an exemption has been granted or denied. If the approved exemption contains an expiration, you will be expected to complete the requirement at that time. Should the condition continue, or a new immunization contraindication occur, a new request with updated documentation is required. SCWA's decision to grant or deny your exemption request is final and not subject to appeal. Individuals whose requests have been denied are permitted to reapply if new documentation and information should become available.
Certification
I certify that the information contained in this request is true to the best of my knowledge and I have not provided false, misleading, or incomplete information to my provider in their review of my request. If my conditions change or the basis of my exemption expires, I agree to notify SCWA. If the exemption is granted, I agree to comply with SCWA's Mandatory COVID-19 Testing Program and other preventative measures.
Signature:
Name:
Date:

SUFFOLK COUNTY WATER AUTHORITY Request for Medical Exemption from COVID-19 Vaccination Requirement Medical Provider Statement

Attention Health Care Provider:

SCWA policy requires that all new employees receive a COVID-19 vaccination. (insert patients name) is requesting a medical exemption from
this vaccination requirement. A medical exemption may be allowed for certain recognized contraindications.
Please certify below the medical reason that your patient should not be immunized for COVID-19 by completing this form and attaching available supporting documentation. Information provided on this form will be reviewed by SCWA in consideration of the exemption request.
Date of Last Examination of Patient:
An exemption may be based on the following options.
Option 1 - Allergy
A documented history of a severe allergic reaction to any component of a COVID-19 vaccine or to a substance that is cross-reactive with a component. Please indicate which of the following vaccines are contraindicated and name the components, by vaccine NOTE: since egg free vaccine is available, history of egg allergy will not be accepted as a routine medical exemption.
Moderna - List the component(s):
Pfizer - List the component(s):
Johnson & Johnson (J&J)/Janssen - List the component(s):
A documented history of a severe allergic reaction after a previous dose of the COVID-19 vaccine. Please indicate to which vaccine the patient had a reaction and the date of the vaccine and reaction.
Moderna - Date of Vaccine & Reaction:
Pfizer - Date of Vaccine & Reaction:
Johnson & Johnson (J&J)/Janssen - Date of Vaccine & Reaction:

SUFFOLK COUNTY WATER AUTHORITY Request for Medical Exemption from COVID-19 Vaccination Requirement Medical Provider Statement

Option 2 Physical Condition/Medical Circumstance

The physical condition of the patient or medical circumstances relating to the individual are such that immunization is not considered safe. Please state, with sufficient detail for independent medical review, the specific nature and probable duration of the medical condition or circumstances that contraindicate immunization with the COVID-19 vaccine.
Explanation:
Please attach separate sheet setting forth the explanation.
Option 3 - Other
Other. Please provide this information in a separate narrative that describes, in detail, the medical condition or disability in detail that you opine would exempt this individual from vaccination.
Explanation:
Please attach separate sheet setting forth the explanation.
Certification
I certify that (patient name) has the above contraindication and support the request for a medical exemption from SCWA's COVID-19 vaccine requirement at SCWA and it is made on the basis of my actual examination of the patient.
Provider Information:
Signature:
Medical Provider Name:
Medical Provider Specialty:
Medical Provider License Number