

## COVID-19 Guidance on Vaccination and Testing

Throughout the Covid-19 pandemic Occupational Health (OH) professionals have provided critical support to businesses and organisations with their programmes to assess and manage risk and protect employees.

Vaccination and testing remain critically important issues from both public and occupational health perspectives. OH professionals are being asked to comment on, plan, execute or participate in such programmes.

With pressure for rapid solutions it is easy to overlook the fundamental ethical and legal principles that are already firmly established to protect employees. These include risks such as breach of confidence and personal disadvantage associated with inaccurate tests performed or interpreted by inexperienced or incompetent individuals. Upholding these principles while balancing public and individual interest are the bedrock of OH practice.

Occupational Health professionals are reminded that existing Ethics Guidance remains appropriate and essential in these programmes.

Promoting or participating in any such programme, and handling associated special personal data must follow legal, ethical and professional principles as summarised in the Faculty of Occupational Medicine Ethics Guidance.

### VACCINATION

Occupational Health professionals should encourage the uptake of COVID-19 vaccine on a voluntary basis to protect individuals and populations.

Making a vaccine mandatory is a policy decision. The FOM is not supportive of mandatory vaccination as a condition of employment. An 'inform and consent' approach together with organisational leadership and reiterating professional responsibility of staff is very likely to achieve an excellent uptake whereas mandating the vaccine poses ethical and practical challenges and may increase vaccine hesitancy.

Any vaccination programme whether voluntary or mandatory should include and comply with the following ethical and legal considerations:

- Consistent with the national regulatory guidance such as those published by Medicine and Health products Regulatory Agency (MHRA), the Joint Committee on Vaccination and Immunisation (JCVI), Public Health England and the Chief Medical Officer Directorates and local NHS Boards
- Consent, which must be informed and freely given
- Opportunity to discuss with an appropriate expert any concerns, some of which may be non-clinical, about the vaccine
- Maintenance of accurate records which are readily accessible, in accordance with the national requirements (National Immunisation Vaccination System (NIVS))
- Rigorous application of transport and storage processes relevant to each vaccine type
- Trained and competent staff to screen the patients and to process and administer the vaccine

- Appropriate legal framework to prescribe the vaccine (Patient Specific Directions (PSD), Patient Group Directions (PGD), Written Instructions or National Protocols)
- Facilities and competence to deal with anaphylaxis
- All OH professionals involved in vaccination programmes must maintain knowledge of emerging national and clinical guidance.

## TESTING

Organisations may request that OH establish testing programmes for various purposes including, but not limited to, access to the workplace, fitness to attend work, prior to remote working, contact tracing, prevalence, research and international travel.

OH professionals are reminded of the advice summarised in the Ethics Guidance on any programme involving surveillance/testing of workers.

The programme should include:

- Confirmation of the specific issue/scenario to be addressed by testing
- Identification, supported by a subject matter specialist e.g. virologist or laboratory scientist, of the testing method appropriate to the specific scenario – PCR, Lateral Flow Antigen, Antibody etc,
- Confirmation that the purpose and proposed testing programme is consistent with current government guidance
- Reliability / licensing of the test method purchased or laboratory contracted
- Written procedure
- Information/instruction to participants on the nature of the programme, details of the test e.g. how it is carried out (especially if it is self-administered), how often, possible outcomes, and the implications of test results for them and their household.
- Consideration should be given to people with communication or learning difficulties or other impairments who may need additional support and to those for whom English is not their first language.
- Consent, which must be informed and freely given
- Clear privacy notice detailing how the data generated by testing is processed e.g. how the data is stored, to whom the result will be released (patient, personal physician, management, government etc)
- Trained and competent staff to undertake the testing
- Documented decision tree ensuring immediate action based on the test results

Mandatory Testing may be considered by an employer, making testing a condition of employment. This decision should only be taken after careful consideration of the risk being addressed / managed and the balance of benefits among a compulsory programme, personal right to privacy or autonomy, and the associated practical implications

Occupational health professionals may come under pressure from employers to approve or implement health or non-health interventions claimed to reduce the health or business impacts of the COVID-19 pandemic. While some interventions may offer significant benefits, others may result in expenditure with little benefit, or even harm. OH professionals should consider carefully the

relevant factors in relation to work and health when evaluating potential interventions, and should be able to justify their recommendations if challenged at a later date.

This advice is current as of 17th June 2021. It will be updated as new information on these aspects of COVID 19 emerge.

### References:

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9. Scottish Government COVID-19 vaccine deployment plan:  
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