



*A Union of Professionals*

## Key Elements of a Model Workplace COVID-19 Vaccination Program

**Adapted from the National Clearinghouse for Worker Safety and Health Training, National Institute of Environmental Health Sciences Worker Training Program**

We fundamentally understand that we cannot tackle the coronavirus pandemic unless vaccines are added to the arsenal. The strategies we have tried to date are simply not enough to contain the pandemic.

When vaccines become available at work sites, the program must be included as part of the comprehensive COVID-19 Control Plan. And AFT leaders should insist on complete transparency from management; on the guarantee that workers' rights and dignity are preserved as the vaccine program rolls out; and actively building trust in the vaccine program.

Maximum participation in and effectiveness of a workplace vaccination program require a commitment of time and resources to plan, promote and deliver the program. This resource is designed to assist those responsible for building and rolling out workplace vaccination programs.

Key factors for establishing a vaccination program include:

### Key Factors to Building Vaccination Programs

1. Establish a Vaccination Planning Committee
2. Collaboration, Education and Training
3. Open Communication and Information Dissemination
4. Establish Time and Location for Delivery of Vaccine
5. Safety and Transparency

#### 1. Establish a Vaccination Planning Committee

The committee should:

- a. **Involve all stakeholders.** Include key workplace stakeholders involved in operational management, safety and health, human resources and purchasing, as well as frontline employees and union representatives (when present).

---

The **American Federation of Teachers** is a union of professionals that champions fairness; democracy; economic opportunity; and high-quality public education, healthcare and public services for our students, their families and our communities. We are committed to advancing these principles through community engagement, organizing, collective bargaining and political activism, and especially through the work our members do.

Randi Weingarten  
PRESIDENT

Fedrick C. Ingram  
SECRETARY-TREASURER

Evelyn DeJesus  
EXECUTIVE VICE PRESIDENT



- b. **Plan, document and review.** Plan all aspects of the vaccination program and document the plan in writing. Review the plan, update it as needed, and make it accessible to workers across all shifts. Another part of the plan includes outlining how to deal with workers who may experience adverse side effects from the vaccine. Issues to consider may include time off, medical referrals, staff responsible for contact or questions.
- c. **Communicate benefits.** Clearly communicate the benefits to workers for participating in the vaccination program.
- d. **Identify barriers.** Identify obstacles and concerns that may cause workers to be hesitant to get the vaccine.
- e. **Consider program logistics.** Address logistical issues with scheduling workers for vaccination and consistency with state and federal guidelines. Also address logistical issues with plans for receiving, storing and administering the vaccine across the company or organization.

## 2. Collaboration, Education and Training

- a. **Develop an education plan.** Employers, unions, and community organizations should work together to develop an education plan for the vaccination program. This plan should outline steps to educate and provide information to workers so they can make informed choices about getting the vaccine.
- b. **Provide opportunities for questions.** The education plan should include an opportunity for workers to be transparent and readily raise questions and share concerns, as well as provide input on how to best build confidence about receiving the vaccine.
- c. **Address workers' questions and concerns.** A qualified person should be available to listen and respond to all questions and concerns, in real time. Additionally, the person should be prepared to handle questions for which there are currently no definite answers, such as the long-term effectiveness of the vaccine in protecting against COVID-19 infection.
- d. The education plan should **address the following topics** about the COVID-19 vaccine:
  - How the vaccine works.
  - It does not cause a person to be infected with SARS-CoV-2.
  - It does not contain live virus.
  - Overview of vaccine safety and effectiveness.
  - Potential side effects and how they are treated.
  - Contraindications for receiving the vaccine.
  - The role of the vaccine in combating the pandemic.

- The importance of continuing other important protective measures, such as mask wearing, physical distancing, use of barriers, ventilation and personal protective equipment.
- Addressing and dispelling myths.

### 3. Open Communication and Information Dissemination

- a. **Visibility of leaders.** Workplace leaders should be visible. They should hold meetings and educational campaigns, including emails, posters and other promotional activity, and group discussions. There should be opportunities for workers to ask questions and receive answers in real time from qualified personnel.
- b. Some **specific actions** that may be taken:



- i. Workplace leaders become vaccination champions. Ask them to lead by example by getting a COVID-19 vaccine and sharing pictures.
- ii. Develop an internal publicity campaign well in advance of the actual vaccination delivery that includes:
  - Testimonials
  - Meetings
  - Staff presentations
  - Short videos
  - Fact sheets, posters, stickers
  - Email blasts, social media, blogs, or web articles. NIH offers vaccine resources that can be shared with workers and recommendations for social media on its website:

<https://covid19community.nih.gov/resources/learning-about-vaccines>

#### 4. Establish Time and Location for Delivery of Vaccine

- a. **Convenience is key.** The vaccine should be provided at a time and location that is convenient to workers. Increasing accessibility and convenience increases participation in the vaccination program.
- b. **Time.** Pick a time that is convenient to workers. Provide the vaccine during work hours, for all shifts.
- c. **Location.** Pick a location at or near the work site. When selecting the location, consider elements such as refrigeration and storage of supplies, as well as the disposal of needles and syringes. Some COVID-19 vaccines require cold storage. This may have specific implications when using contractors or volunteers from other organizations (e.g., retail drug stores or occupational health clinics) in delivering vaccines.



#### 5. Safety and Transparency

- a. **Communicate risks.** Programs must ensure vaccination sites are prepared to communicate the risks of the vaccine and treat any reactions. This includes having a rapid response for workers who have severe reactions to the vaccine. It also includes providing vaccine recipients with the Centers for Disease Control and Prevention COVID-19 Emergency Use Authorization Fact Sheets for the type of vaccine they received. <https://www.cdc.gov/vaccines/covid-19/eua/index.html>
- b. **Protocol and documentation.** Have a written safety protocol in place at each work site or vaccination location. Document how medical emergencies such as a severe allergic reaction (anaphylaxis) will be managed following vaccinations.
- c. **Safety and medical needs.** Ensure that appropriately trained staff and correct medical response equipment and medications are available, which may include epinephrine prefilled syringes or autoinjectors, H1 antihistamine, blood pressure cuff, and stethoscope and timing device to assess pulse.
- d. **Observation period.** Establish an observation period that is monitored in a safe location for workers who are vaccinated (at least 15 minutes). Also, establish an observation

period for workers who have a history of anaphylaxis due to any cause (at least 30 minutes).

- e. **Medical leave time.** A model vaccination program should allow appropriate medical leave time for workers experiencing side effects. Typically, the majority of acute side effects will not interfere with work-related activities and should subside within a few days. Plans should also include identified points of contact for questions or concerns, and to help with medical referrals, if indicated.

## Reporting the Vaccine Adverse Events

The Vaccine Adverse Event Reporting System (VAERS) is a national early warning system to detect possible safety problems in vaccines used in the U.S. <https://vaers.hhs.gov/index.html> VAERS accepts and analyzes reports of adverse events after a person has received a vaccination. Anyone can report an adverse event to VAERS. Healthcare professionals are required to report certain adverse events, and vaccine manufacturers are required to report all adverse events that come to their attention.

## Resources

CDC COVID-19 Vaccination Communication Toolkit for Medical Centers, Pharmacies and Clinicians: <https://www.cdc.gov/vaccines/covid-19/health-systems-communication-toolkit.html>

CDC COVID-19 Vaccine Communication Toolkit for Essential Workers, Getting Started: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/toolkits/essential-workers.html>

CDC COVID-19 Vaccine Emergency Use Authorization (EUA) Fact Sheets for Recipients and Caregivers: <https://www.cdc.gov/vaccines/covid-19/eua/index.html>

CDC Poster, Getting 'Back to Normal' is Going to Take All of Our Tools: <https://www.cdc.gov/vaccines/covid-19/downloads/all-of-our-tools.pdf>

NIEHS Worker Training Program COVID-19: <https://tools.niehs.nih.gov/wetp/covid19worker/index.cfm>

NIH Community Engagement Alliance, Learning About Vaccines: <https://covid19community.nih.gov/resources/learning-about-vaccines>

OSHA Coronavirus Disease (COVID-19): <https://www.osha.gov/coronavirus>