

ORDER NO. 2023-01 OF THE LOS ANGELES COUNTY HEALTH OFFICER

ORDER OF THE LOS ANGELES COUNTY HEALTH OFFICER

COVID-19 VACCINATION REQUIREMENT FOR HEALTH CARE WORKERS

Issue Date: Thursday, March 30, 2023

Effective at 12:01am on Monday, April 03, 2023

Date Revised: Thursday, April 20, 2023

Recent Updates (Revisions are highlighted in yellow):

4/20/2023:

- Updated to reflect recent changes to the following:
 - 1) The <u>list of COVID-19 vaccines that are authorized by the FDA on April 18, 2023, and</u>
 - 2) The COVID-19 vaccine recommendations mad by the Centers for Disease Control and Prevention (CDC) on April 9, 2023.

4/11/2023:

- Clarifies that workers who are newly coming in a compliance with the health care worker vaccine requirements must receive a single COVID-19 bivalent vaccine. Workers who are already in compliance with the vaccine requirement (i.e., completed a primary series and received a single booster) are not required but are encouraged to stay up to date with recommended COVID-19 recommendations.
- Table A replaced by California pepartment of Public Health (CDPH) COVID-19 Vaccine Timing: Routine School [Spanish]

Please read this Order carefully.

SUMMARY OF THE ORDER:

On March 31, 233, the Los Angeles County emergency declarations for COVID-19 were lifted in ing at the emergency declarations was in response to the presence and greater availabil w of resources needed to respond to the pandemic, such as vaccinations, effective treat ents for those who are vulnerable to severe disease, and effective use of mitigation strategies, such as testing and masking—all of which were either not present or were in scarce supply early in the pandemic.

Despite improvements of knowledge about COVID-19 and the availability of resources, the SARS-CoV-2 virus, other future variants or subvariants of the SARS-CoV-2 virus, and other circulating respiratory viruses remain a concern for Los Angeles County residents. The SARS-CoV-2 and other circulating respiratory viruses pose a particular risk to the health of medically



vulnerable residents and people who may be exposed based upon the necessity of their circumstances. Patients, clients, and residents in healthcare settings have little choice about their potential exposure to COVID-19 when they seek care, and many of them are at greater risk of severe COVID-19-related illness and death due to age, underlying health conditions, or both.

COVID-19 vaccination continues to be the most important strategy to prevent serious illness and death from COVID-19. And when healthcare providers and workers in health care and home care settings are vaccinated, there is a reduced risk to those who interact with there, especially when they are wearing a well-fitting mask (see separate masking Court, Health Officer Order No. 2023-02).

Accordingly, this County Health Officer Order (Order) continues the requirement that covered health care facility and homecare workers have received either a single bivalent vaccine dose or received a single monovalent booster dose after completing a purpose. For information about where to get vaccinated visit the LAC DPH How to Set Vaccinated webpage (English | Spanish). Visit the CDC Stay Up to Date with Yor COVID-19 Vaccines webpage (English | Spanish) for more details about vaccine types and schedules, including for people vaccinated outside of the U.S. Individuals can view the California Department of Public Health (CDPH) COVID-19 Vaccine Timing: Routine Schedule (English | Spanish). Please note that this webpage may be in the process of being updated to reflect the April 18th and 19th changes made by the FDA and CDC, respectively.

Additionally, facilities must continue to track work as' vaccination or exemption status to ensure they are complying with these require near the County Health Officer anticipates that state and federal regulators will, in coming menths, shift the vaccination protocols to more of a seasonal model (like receipt of an angular affluenza vaccination), and the County Health Officer will evaluate such changes to determine whether to revise this Order in response. In any event, the County Health Officer will reevaluate the need for this Order before September 30, 2023.

As defined by this Order, high-Risk Settings within the County of Los Angeles Public Health Jurisdiction, include every licensed acute care hospital, skilled nursing facility (SNF), intermediate care facility, medical and dental offices, other health or direct care facility types, pre-hospital care settings, and home care residential settings or individual homes where vulnerable advictuals receive care or reside.

The Order revides limited exceptions and does not apply to people who only visit the Healt Care Facility on an intermittent or occasional basis or for short periods of time, such as firefighters, police, and law enforcement (unless they are stationed or routinely assigned to work at the Health Care Facility). This Order does not apply to health care workers, who work remotely from a health care facility 100% of their employed time. This Order also does not apply to patients, clients, residents, or their visitors, although the County Health Officer strongly recommends they wear a well-fitting mask in those health care settings as further



outlined in the companion order regarding masking (<u>County Health Officer Order No. 2023-02</u>) and are vaccinated consistent with the CDC guidance.

Aside from the requirements of this Order, the County Health Officer still strongly recommends that everyone continue appropriate protections based on their individual situation, including the following five measures: 1) following the CDC's most current COVID-19 vaccination guidance; 2) wearing a well-fitting mask in appropriate settings based upon personal and household tisk factors; 3) staying home whenever sick in order to protect others and following the state and County's guidance if they are a COVID-19 case or a close contact of a case; 4) staying aware of medication that can be used when sick with COVID-19, such as Paxlovil that can decrease the severity of the infection, especially for anyone over 50 years old or other last other risk factors; and 5) staying up-to-date on information about COVID-19 and other hispiratory illnesses.

This Order is effective within the County of Los Angeles Public Hearn Jurisdiction, defined as all cities and unincorporated areas within the County of Los Angeles, accept for the cities of Long Beach and Pasadena that must follow their respective City Health Officer orders and guidance. This Order is effective at 12:01 am on Monday, poril 03, 2023.

UNDER THE AUTHORITY OF CALIFORNIA HEALTH AND SAFETY CODE (HSC) SECTION 120175; CALIFORNIA CODE OF REGULATIONS (CCR), TITLE 17, SECTION 2501; AND LOS ANGELES COUNTY CODE, SECTION 11.04.010 THE COUNTY OF LOS ANGELES HEALTH OFFICER ORDERS:

- emergency will soon end, COVID-12 continues to spread and pose a risk to persons within Los Angeles County. COVID-19 vaccination continues to be the most important strategy to prevent serious illness and or atherom COVID-19. And when health care providers and workers in health care and none care settings are vaccinated, there is a reduced risk to those who interact with their. This Order continues the requirement that covered health care facility and home care workers receive a single monovalent booster dose or a bivalent vaccine dose. Add'hold they acilities must continue to track workers' vaccination or exemption status to ensure they are complying with these requirements. The County Health Officer will be attinue to monitor data regarding the evolving scientific understanding of the risks posed by COMD-19, including the impact of vaccinations, and will reevaluate the need for this Order before September 30, 2023.
- 2) Interp. The primary intent of this Order is to continue the COVID-19 requirement that covered health care facility and homecare workers have received either a single in novalent booster dose or a bivalent vaccine dose. Additionally, facilities must continue to track workers' vaccination or exemption status to ensure they are complying with these requirements.
- 3) Interpretation. All provisions of this Order must be interpreted to effectuate the purpose and intent of this Order as described above. The summary at the beginning of this Order as well as the headings and subheadings of sections contained in this Order are for convenience only and may not be used to interpret this Order. In the event of any



inconsistency between the summary, headings, or subheadings and the text of this Order, the text will control.

- **4) Facilities and Settings Subject to this Order.** All workers who provide services or work in health care facilities described in subdivision (a) and home care settings described in subdivision (b), ("High-Risk Settings"):
 - 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 Elder PACE) and PACE Centers
 - viii. Ambulatory Surgery Centers
 - ix. Chemical Dependency Recovery Hospital
 - x. Clinics & Doctor Offices (including enavioral health, surgical, dental)
 - xi. Congregate Living Health Facilities
 - xii. Dialysis Centers
 - xiii. Hospice Facilities
 - xiv. Pediatric Day Yealth and Respite Care Facilities
 - xv. Residential Substance Use Treatment and Mental Health Treatment Facilities
 - b. Home Care Settings
 - i. Hom Oganization
 - ii Home Health Agency
- 5) In-Home Service providers Subject to this Order. All workers who provide services or work in factories described in subdivisions (a) through (d) below:
 - An n-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;
 - b. 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;



- c. All hospice workers who are providing services in the home or in a licensed facility;
- d. 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.
- 6) Provision of Services to a Single Household for In-Home Service Providers to be Eligible for Specified Exceptions. All workers who are eligible for the exceptions outlined in subdivisions (a), (b), and (d) of section (2) must only provide services to a single household. If the worker provides services across multiple households, then he exception does not apply, and the worker must adhere to the provisions of this Cride.
- 7) Authorized COVID-19 Vaccines. COVID-19 vaccines currently approved or authorized in the United States include: Pfizer-BioNTech Bivalent, Moderna Bivalent Novavax vaccines, and Johnson and Johnson [J&J]/Janssen. Per the April 18, 202. FD. News Release, the monovalent Moderna and Pfizer-BioNTech COVID-19 vaccines are no longer authorized for use in the United States. All COVID-19 vaccines that are currently approved or 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 Nebusge.
- 8) **Definitions.** For purposes of this order the following terms have the meanings given below:
 - a. Worker. "Worker" rears 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 (atien), (2) patients have access for any purpose, leading to direct or indirect priest ontact or exposure to SARS-CoV-2 airborne aerosols, or (3) home care brain living assistance is provided to residents. This includes worker setting medical care, prehospital care, patient transport, medical or dental offices residential care or other direct care settings, other health care settings or home ealth care settings who have the potential for direct or indirect exposure to pare ts, seidents, or SARS-CoV-2 airborne aerosols. Workers include, but are not libited to, direct supportive services staff, hospice providers, nurses, nursing assistants, medical assistants, physicians, dental assistants, dentists, technicians, sapists, 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). People who, in the course of their duties, may enter or work in a Health Care Facility on an intermittent or occasional basis or for short periods of time including, but not limited to, firefighters, police, other law enforcement, and attorneys, are not included in the term "Worker" unless they are permanently stationed or regularly assigned to the Health Care Facility. And such people must wear a Well-Fitting Mask whenever they are onsite interacting with patients, clients, and residents and in patient care settings. The Order do is not apply to a Worker who is assigned to telework or remote work 100% of the time.

- b. **Employer.** "Employer" refers to an organization that employs and directs the worker in providing services. In the case of workers in a facility, the ricility is the employer. In the case of certified home health aides and affiliated home are asses, the home health agencies and home care organizations are the employer.
- c. **Employer-Recipient.** "Employer-Recipient" refers to the person receiving services from IHSS workers, WPCS workers, and independent registered home care aides.
- 9) COVID-19 Vaccination Requirement. All Workers who provide services or work in facilities described in Paragraphs 1(a), 1(b), and 2 must receive a single bivalent vaccine dose or a monovalent booster.

Workers who are already in compliance with the vaccine requirement (i.e., completed a monovalent primary series and received a single conovalent booster) are not required but are encouraged to stay <u>up to date</u> with recommended COVID-19 vaccine doses.

Workers who are newly coming into compliance with the health care worker vaccine requirements must receive a single bivare. Vaccine dose. For information about where to get vaccinated visit the LAC DPH How to Get Vaccinated webpage (English | Spanish). Visit the CDC Stay Up to Date with Your COVID-19 Vaccines webpage (English | Spanish) for details about vaccine types and schedules, including for people vaccinated outside of the U.S. Please note that this we spage may be in the process of being updated to reflect the April 18th and 19th changes made by the FDA and CDC, respectively.

- a. Workers must be in compliance no later than 15 days of hire or of becoming eligible for the bivalent vaccine.
- b. For we kers who have not received any booster doses and are unable or unwilling to receive ab valent vaccine, the monovalent Novavax booster may be administered a value gill gle booster dose at least 6 months after completion of the primary series to people 18 years and older. Individuals can view the California Department of Public Libalth (CDPH) *COVID-19 Vaccine Timing: Routine Schedule* (English | Spanish). Please note that this webpage may be in the process of being updated to reflect the April 18th and 19th changes from the FDA and CDC, respectively.
- c. Workers who provide sufficient proof of COVID-19 infection may defer vaccine administration for up to 90 days from the date of the first positive test or clinical diagnosis. 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 vaccine dose no later than 15 days after the expiration of their deferral.

- 10) Limited Exceptions. 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 is ned 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 is receive the vaccine (or if the duration is unknown or permanent, so indicate). See the proof updated version of the Center for Disease Control and Prevention's last rim Clinical Considerations for Use of COVID-19 Vaccines guidance. Please note that this webpage may be in the process of being updated to reflect the April 10 th and 19th changes made by the FDA and CDC, respectively.
- 11)COVID-19 Testing. Covered facilities should mantain 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 (e.g., 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 houst continue to comply with current federal requirements that may require core stringent testing of staff, including <u>QSO-20-38-NH REVISED</u> "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 recimposed in the future.
- 12) Addressing a Circal Staffing Shortage. If current trained staff at a Health Care Facility, as defined by his Order, is insufficient to meet the current need, despite the use of conventional and contingency strategies to address the shortage, and the clinical care of attents have be negatively impacted (elsewhere referred to as a "critical staffing shortage"), the County requirement for COVID-19 vaccination prior to hire may be relaxed until the critical staffing shortage is alleviated. Health Care Facilities that hire unvaccinated staff using this critical staffing shortage temporary exemption must notify the Los Angeles County Department of Public Health (LAC DPH) within 5 days of hire through LAC DPH's online REDCap system: https://dphredcap.ph.lacounty.gov/surveys/?s=T4734YYFWL. Once the critical staffing shortage is alleviated at the Health Care Facility, the COVID-19 vaccine requirement of this Order is in effect. Unvaccinated staff hired during the critical



staffing shortage must either receive a single dose of a bivalent COVID-19 vaccine within 6 months of the alleviation of the critical staffing shortage or, pursuant to section (8), obtain an exemption from the vaccination requirement. All Medicare- and Medicaid-certified facilities and those who provide services to certified facilities under contract or other arrangements are still required to comply with all federal health care worker COVID-19 vaccination requirements. See QSO-23-02-ALL (Revised Guidance for Staff Vaccination Requirements) to ensure that all applicable staff are vaccinated with COVID-19 primary series. The Centers for Medicare and Medicaid Services has also provided a decision tree for the federal staff vaccination requirement.

- **13) Maintenance of Records.** Consistent with applicable privacy laws an (regulations, the operator of the facility, organization or agency must maintain record of took vaccination or exemption status.
 - a. The facility must provide such records to LAC DPH or their designee promptly upon request, and in any event no later than the next using s day after receiving the request.
 - b. Operators of the facilities subject to the requirement under sections (1) and (2) must maintain records 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.
- 14) Masking and Other Infection Control collects and Practices. Nothing in this Order limits otherwise applicable requirements related. Personal Protective Equipment, personnel training, and infection control policies and practices. In a separate order (County Health Officer Order No. 2023-02), AC PPH requires all Workers continue to wear a well-fitting 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 when providing care to patients elients/residents and when in patient care areas in health care and direct care settings, when patients, clients or residents are present.
- **15)Access to Vaccinations.** Facilities, organizations, and agencies covered by this Order are encouraged in provide onsite vaccinations, easy access to nearby vaccinations, and education and utreach on vaccinations.
- 16) Obligator to Follow County Health Officer Orders and Directives and Mandatory tate and Ederal Rules. All covered facilities must follow any applicable orders of the County Health Officer and any applicable rules issued by state or federal authorities, in Juding but not limited to Cal/OSHA regulations. Based on local health conditions, this Order may include a limited number of health and safety requirements that are more protective or more detailed than those contained under other rules. Employers must adhere to applicable Cal/OSHA regulations relating to COVID-19 health and safety measures in the workplace. In the event of a conflict between provisions of any County Health Officer Order and any order or rule, the provision that is more protective of health supersedes the conflicting, less protective provisions of the other order or rule.



- 17) Copies. The County shall promptly provide copies of this Order by: (a) posting it on the Los Angeles Department of Public Health's website (publichealth.lacounty.gov), (b) providing it to any member of the public requesting a copy, and (c) issuing a press release to publicize the Order throughout the County.
- 18) Severability. If any subsection, sentence, clause, phrase, or word of this Order or any application of it to any person, structure, gathering, or circumstance is held to be invited or unconstitutional by a decision of a court of competent jurisdiction, then such decision when not affect the validity of the remaining portions or applications of this Order.
- 19) Amendments to Order. This Order may be revised in the future as the State Public Health Officer amends its guidance to reflect evolving public health conditions and recommendations issued by the federal Centers for Disease Control and Prevention (CDC) and other public health authorities. Should local COVID-19 conditions arrant, the County Health Officer may issue orders that are more protective that the didance and orders issued by the State Public Health Officer.
- 20) Statutory Authority. This Order is issued pursuant to California Halth and Safety Code (HSC) section 120175; California Code of Regulations, (CCN), Title 17, section 2501; and Los Angeles County Code, section 11.04.010.
- 21) Effective Date. This Order shall become effective at 12:01 am on Monday, April 03, 2023, and will continue until it is revised, rescinded, rescinded, or amended in writing by the County Health Officer.

IT IS SO ORDERED: 3/30/2023 Muntu Davis, M.D., M.P.H.

County Health Officer, County of Los Angeles Issue Date