Updated statement as of 8.6.21

AAEM recently signed onto the joint statement supporting COVID-19 vaccine mandates for all workers in health and long-term care (provided below). However, in addition as evidence continues to accumulate and we come to a greater understanding of COVID-19 infection, it appears that prior confirmed infection with COVID-19 produces a robust antibody response which may provide immunity comparable to receiving the vaccine. Given the current evidence, AAEM believes that those with a documented previous infection with COVID-19 should be treated similarly to those who have received full immunization. As always, further data will be considered and this statement may be revised in the future.

Joint Statement in Support of COVID-19 Vaccine Mandates for All Workers in Health and Long-Term Care

Joint Statement in Support of COVID-19 Vaccine Mandates for All Workers in Health and Long-Term Care

Due to the recent COVID-19 surge and the availability of safe and effective vaccines, our health care organizations and societies advocate that all health care and long-term care employers require their workers to receive the COVID-19 vaccine. This is the logical fulfillment of the ethical commitment of all health care workers to put patients as well as residents of long-term care facilities first and take all steps necessary to ensure their health and well-being.

Because of highly contagious variants, including the Delta variant, and significant numbers of unvaccinated people, COVID-19 cases, hospitalizations and deaths are once again rising throughout the United States.1 Vaccination is the primary way to put the pandemic behind us and avoid the return of stringent public health measures.

Unfortunately, many health care and long-term care personnel remain unvaccinated. As we move towards full FDA approval of the currently available vaccines, all health care workers should get vaccinated for their own health, and to protect their colleagues, families, residents of long-term care facilities and patients. This is especially necessary to protect those who are vulnerable, including unvaccinated children and the immunocompromised. Indeed, this is why many health care and long-term care organizations already require vaccinations for influenza, hepatitis B, and pertussis.

We call for all health care and long-term care employers to require their employees to be vaccinated against COVID-19.

We stand with the growing number of experts and institutions that support the requirement for universal vaccination of health workers.2,3 While we recognize some workers cannot be vaccinated because of identified medical reasons and should be exempted from a mandate, they constitute a small minority of all workers. Employers should consider any applicable state laws on a case-by-case basis.

Existing COVID-19 vaccine mandates have proven effective.4,5 Simultaneously, we recognize the historical mistrust of health care institutions, including among many in our own health care workforce. We must continue to address workers' concerns, engage with marginalized populations, and work with trusted messengers to improve vaccine acceptance.

As the health care community leads the way in requiring vaccines for our employees, we hope all other employers across the country will follow our lead and implement effective policies to encourage vaccination. The health and safety of U.S. workers, families, communities, and the nation depends on it.

SIGNATORIES

(Listed Alphabetically)

Academy of Neonatal Nursing (ANN) Academy of Managed Care Pharmacy (AMCP) American Academy of Ambulatory Care Nursing (AAACN) American Academy of Allergy, Asthma & Immunology (AAAAI) American Academy of Child and Adolescent Psychiatry (AACAP) American Academy of Family Physicians (AAFP) American Academy of Neurology (AAN) American Academy of Nursing (AAN) American Academy of Ophthalmology (AAO) American Academy of PAs (AAPA) American Academy of Pediatrics (AAP) American Association of Clinical Endocrinology (AACE) American Association of Colleges of Nursing (AACN) American Association of Colleges of Pharmacy (AACP) American Academy of Emergency Medicine (AAEM) American Association of Neuroscience Nurses (AANN) American Association for Respiratory Care (AARC) American College of Allergy, Asthma and Immunology (ACAAI) American College of Chest Physicians (CHEST) American College of Clinical Engineering (ACCE) American College of Clinical Pharmacy (ACCP) American College of Emergency Physicians (ACEP) American College of Gastroenterology (ACG) American College of Medical Genetics and Genomics (ACMG) American College of Medical Toxicology (ACMT) American College of Mohs Surgery (ACMS) American College of Obstetricians and Gynecologists (ACOG) American College of Osteopathic Family Physicians (ACOFP)

American College of Physicians (ACP) American College of Preventive Medicine (ACPM) American College of Surgeons (ACS) American Epilepsy Society (AES) American Gastroenterological Association (AGA) American Geriatrics Society (AGS) American Medical Association (AMA) American Medical Women's Association (AMWA) American Nurses Association (ANA) American Nurses Association - Illinois (ANA - Illinois) American Occupational Therapy Association (AOTA) American Osteopathic Association (AOA) American Pharmacists Association (APhA) American Psychiatric Association (APA) American Psychological Association (APA) American Public Health Association (APHA) American Society for Clinical Pathology (ASCP) American Society for Gastrointestinal Endoscopy (ASGE) American Society for Radiation Oncology (ASTRO) American Society for Transplantation and Cellular Therapy (ASTCT) American Society of Health-System Pharmacists (ASHP) American Society of Hematology (ASH) American Society of Nephrology (ASN) American Thoracic Society (ATS) Association of Bioethics Program Directors (ABPD) Association for Clinical Oncology (ASCO) Association of Pediatric Hematology/Oncology Nurses (APHON) Association for Professionals in Infection Control and Epidemiology (APIC) Association of Academic Health Centers (AAHC) Association of American Medical Colleges (AAMC) Association of Rehabilitation Nurses (ARN) Connecticut Nurses Association (CNA) Council of Medical Specialty Societies (CMSS) Delaware Nurses Association (DNA) Emergency Medicine Residents' Association (EMRA) Emergency Nurses Association (ENA) Hematology/Oncology Pharmacy Association (HOPA) **HIV Medicine Association** Illinois Pharmacists Association (IPhA) Infectious Diseases Society of America (IDSA) LeadingAge Medical Society of Virginia (MSV) Missouri State Medical Association (MSMA) National Association of Indian Nurses of America (NAINA)

National Association of Pediatric Nurse Practitioners (NAPNAP) National Council of Asian Pacific Islander Physicians (NCAPIP) National Council of State Boards of Nursing (NCSBN) National Hispanic Medical Association (NHMA) National League for Nursing (NLN) National Medical Association (NMA) National Pharmaceutical Association (NPhA) New Hampshire Medical Society (NHMS) New Hampshire Nurses Association (NHNA) New Mexico Medical Society (NMMS) Nurses Who Vaccinate (NWV) Organization for Associate Degree Nursing (OADN) Pediatric Infectious Diseases Society (PIDS) Philippine Nurses Association of America, Inc (PNAA) Society of Emergency Medicine Physician Assistants (SEMPA) Society of Gynecologic Oncology (SGO) Society for Healthcare Epidemiology of America (SHEA) Society for Immunotherapy of Cancer (SITC) Society of Hospital Medicine (SHM) Society of Infectious Diseases Pharmacists (SIDP) Society of Interventional Radiology (SIR) South Carolina Nurses Association (SCNA) Texas Nurses Association (TNA) The John A. Hartford Foundation Transcultural Nursing Society (TCNS) Vermont Medica Society (VMS) Virgin Islands State Nurses Association (VISNA) Wound, Ostomy, and Continence Nurses Society (WOCN)

When referring to this statement, please cite:

Emanuel EJ and Skorton DJ. Mandating COVID-19 Vaccinations for Health Care Workers. *Ann Intern Med.* Published online July 30, 2021. <u>https://doi.org/10.7326/M21-3150</u>

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