

Staff Mandatory COVID-19 Vaccination or Testing Procedure

1.0 Purpose

2.0 Scope

3.0 Vaccination Requirements

[3.1 Fully vaccinated](#) | [3.2 Current Staff](#) | [3.3 Prospective Staff](#) | [3.4 Providing evidence of vaccination status or medical contraindication](#) |

4.0 Exemptions

[4.1 Seeking a medical exemption](#) | [4.2 Participation in the Rapid Antigen Testing regime](#) | [4.3 Additional requirements for those working with vulnerable communities](#) | [4.4 Exceptional Circumstances Fully vaccinated](#)

5.0 Compliance

[5.1 Failure to comply](#)

6.0 Definitions

1.0 Purpose

The purpose of this Procedure is to establish the processes for the requirement that all staff be fully vaccinated against COVID-19. This procedure is to be read in conjunction with the Mandatory COVID-19 Vaccination or Testing Policy.

2.0 Scope

This Procedure applies to Griffith University staff, both current and prospective, except for those with a pre-existing arrangement to work wholly remotely and who agree not to attend campus.

For the purposes of this Procedure, “staff” means continuing, fixed-term and casual and sessional staff, including Council and Council Committee members, senior management, executive, academic, professional, visiting, honorary and adjunct, conjoint appointments and volunteers.

3.0 Vaccination Requirements

In acknowledgement of the risks posed by COVID-19 to the health and safety of the Griffith University community and to the broader community, all existing and prospective staff and individuals engaged by the University must comply with this Procedure as set out below.

All existing and prospective staff who are, or will be, employed by Griffith University and attend a Griffith University campus, are required to be vaccinated against COVID-19, subject to certain limited exemptions as described in section 4 of the Procedure. Staff who do not meet the vaccination deadlines as outlined below without an approved exemption may be subject to the processes as set out in section 5.0.

3.1 Fully vaccinated

The requirements and definition of being fully vaccinated will be updated from time to time and will be notified by the Vice Chancellor. When new vaccination requirements are notified, staff will be expected to respond to the updated requirement by booking an appointment within 10 working days. In circumstances of widespread limited vaccine availability, this may be extended at the discretion of the Provost.

When an additional booster is required by the University in order to be considered fully vaccinated or a staff member otherwise opts to do so, for vaccination scheduled during normal hours of University operation up to 2 hours paid COVID-19 vaccination leave will be available for continuing and fixed term staff, and for current casual and sessional staff who have worked at least 25 hours in the last 12 months.

3.2 Current Staff

Existing staff must provide evidence of full vaccination to the University by 18 February 2022, two weeks prior to the start of Orientation Week for Trimester 1 2022.

The requirements for providing evidence of vaccination are outlined in Section 3.5 of these Procedures. In addition to the University requirement that staff are fully vaccinated, a staff member whose role has COVID-19 vaccination requirements as listed in a Public Health Order or any other workplace specific directive must meet the conditions listed in that Order or directive. Examples of staff impacted by such directives include those who work in or visit healthcare and aged care settings as part of their role.

3.3 Prospective Staff

From 3 January 2022 all relevant advertising documentation will clearly state that the appointment is subject to the person being fully vaccinated against COVID-19, subject to certain limited exemptions as described in clause 4 of the Policy. Prospective staff must meet the University requirements of full vaccination status as a condition of employment when accepting their Offer of Employment. As part of their onboarding process, and performed prior to their commencement date, new staff must provide evidence of their vaccination or approved medical contraindication status as defined in clause 3.5. Failure to complete this process prior to their employment contract's commencement date will result in the cancellation of their Offer of Employment.

3.4 Additional requirements for those working with vulnerable communities

The University recognises some staff work outside University premise in vulnerable communities. Communities include rural and remote and Indigenous and aged populations. Activities in vulnerable communities include research, education or related extra-curricular, and those aimed to increase participation. The University will expect staff to demonstrate they have sought to minimise risk to the community. This includes, as appropriate, having a COVID Safe Plan approved by the ethics committee for research activity or Provost for activities related to education and participation. The University may deem, where risks cannot be appropriately mitigated, that unvaccinated individuals will not be able to physically participate in these activities.

3.5 Providing evidence of vaccination status, medical contraindication or temporary exemption

Staff will provide evidence of their vaccination, recent infection or approved medical contraindication status by submitting their COVID-19 digital certificate, positive PCR or RAT notification or Immunisation History Statement issued by the Australian Immunisation Register (AIR). Where a staff member has

been vaccinated overseas, they should add this to their AIR or if that is not available to them, they may submit their International COVID-19 Vaccination Certificate.

Staff will enter their information via the Staff Portal, and will be able to update their record if their situation changes. Wherever practical, the University will use automated systems to read and save relevant data. The confidential record held will be the vaccine type and date of last vaccine, date of prior infection, or relevant dates relating to medical contraindications. Certificates will not be subject to University's backup procedures.

Vaccination certification for some healthcare staff is required to be held on record, where this is a requirement, the University will make that clear to those impacted. Where certification is not required to be held on record for program requirements, certificates and other health related information will be destroyed as soon as practically feasible.

4.0 Exemptions

The University will only grant exemptions where a person has: a valid medical exemption in accordance with 4.1, a temporary exemption due to recent COVID-19 infection in accordance with 4.2, agreed to participate in a regular testing regime in accordance with 4.3, or has approved exceptional circumstance in accordance with 4.4. Some roles may be ineligible to be considered for exemptions. Such roles are typically covered by a vaccination requirement in a Public Health Order or other Directive.

4.1 Seeking a medical exemption

Staff seeking a medical exemption must submit an Immunisation History Statement issued by the Australian Immunisation Register (AIR) that records a valid immunisation medical exemption OR, as a temporary measure until their AIR is updated, a valid and complete Australian Immunisation Register (AIR) immunisation medical exemption [form](#) (IM011).

Individuals with approved medical exemptions will be subject to a regular Rapid Antigen Test supplied and funded by the University. In addition, medically exempted individuals may be supported by additional safety measures that are required from time to time.

The University, in consultation with the staff member, supervisor and treating medical practitioner, will make reasonable accommodations in order to protect the health and safety of a staff member with an approved medical exemption. Wherever possible, consideration will be placed on ensuring the staff member can continue performing their duties as usual and on campus.

4.2 Seeking a temporary exemption due to recent COVID-19 infection

The University recognises those staff who have recently been infected with COVID-19 may have had their vaccination schedule impacted. By providing evidence a PCR/RAT confirmed infection of COVID-19, staff will be granted a temporary exemption of four weeks from the date of their Queensland Health PCR/RAT confirmation. After their temporary exemption period has concluded, staff will be expected to resume their vaccination schedule. One week prior to the conclusion of their temporarily exemption period, staff must provide for review of the Provost, either their booking schedule to become fully vaccinated or details on how they intend to meet the Policy requirements.

Staff who meet the conditions to be temporarily exempt, will not be required to participate in the Testing Regime during their 4-week exemption period. Staff may be asked to conduct a testing regime after this period while fulfilling their requirement to be fully vaccinated.

Some roles may be ineligible for temporary exemptions, such as those covered by a vaccination requirement in a Public Health Order or Directive.

4.3 Participation in the Rapid Antigen Testing regime

Where a staff member is not fully vaccinated or decides not to apprise the University of their vaccination status, the University will allow employees to continue to work on campus on the basis that they agree to submit to regular Rapid Antigen Testing alongside any additional health measures that are required from time to time.

With a normal work week, staff will be required to conduct Rapid Antigen Testing on two days of the week when they are scheduled to attend campus and within 72 hours of their arrival. The Vice-Chancellor may increase the frequency of required testing from time to time if the level of risk as assessed by the University so warrants. The frequency of testing required for an individual will be reduced, where they are not contracted, or are approved under the work location policy, to attend campus for fewer days than the current weekly testing frequency.

Staff may be asked for evidence of compliance with this testing regime in a form determined by the Provost. Wherever practical, the University will use automated systems to confidentially record and track evidence of testing.

Unless they hold an approved medical exemption, a staff member who is not fully vaccinated or who decides not to apprise the University of their vaccination status will bear the cost of the Rapid Antigen Testing.

4.4 Exceptional Circumstances

The University recognises there may be exceptional cases in which a staff member may not have medical grounds for an exemption, be willing to be vaccinated or undertake a testing regime yet have grounds that are considered acceptable for exemption. The University will consider such situations on a case-by-case basis.

Staff members will be required to submit a brief description indicating how they propose to continue to perform their role and manage COVID-19 risks. Cases will be reviewed and determined by a COVID-19 Review Team. Risk mitigations that could be proposed include utilising paid or unpaid leave. Staff should not assume that they will be able to work from home as an alternative given the burden that this can create for other staff.

Staff can apply for consideration of an Exceptional Circumstance using this form [\[link\]](#).

The COVID-19 Review Team will typically comprise:

- Provost or delegated member of Executive Group (Chair)
- One Dean (Academic)
- One Director from a central division
- Senior representative with expertise in human resources
- The supervisor of the relevant staff member or another senior leader from that area may be consulted regarding alternative regimes for managing the potential risk.

The University will genuinely consider each case and advise the staff member within a timely manner.

The COVID-19 Review Team may approve an alternative regime for managing the potential risk posed by the staff member and the staff member will then be obliged to comply with this regime.

The COVID-19 Review Team may refuse the case made by the staff member. In such cases, the staff member will be directed to comply with the testing regime and be encouraged to be vaccinated. In doing so, the COVID-19 Review Team may engage with relevant experts to assist their decisions.

5.0 Compliance

All staff are required to comply with the Mandatory COVID-19 Vaccination or Testing Policy and this Procedure.

Unless required under a specific Public Health Order (such as for entertainment facilities), staff will not be expected to enforce compliance with this procedure by checking the vaccination status of individuals attending campus.

5.1 Failure to Comply

Staff will be excluded from campus unless they have complied with one of the regimes for maintaining a safe campus outlined in this Policy and Procedure. All staff members in this position will have their cases reviewed by the COVID-19 Review Team in consultation with the staff member and their manager to determine whether it is possible for the staff member to continue in employment. Staff should not assume that they will be able to work from home as an alternative to the vaccination or testing regime given the burden that this can create for other staff. The COVID-19 Review Team may determine that it is not possible to maintain the employment of the staff member in these circumstances and make that recommendation for implementation in accordance with the relevant employment instrument such as an Enterprise Agreement.

Staff who behave dishonestly with respect to any element of the regime in this procedure (eg through falsification of vaccination certificates or medical exemption or RAT results) will be dealt with in accordance with the misconduct or serious misconduct processes set out in any in accordance with their contract of employment and or relevant Enterprise Agreement.

Staff who have concerns regarding compliance with the Policy and Procedure may document their concerns and submit them to [Your Call](#).

6.0 Definitions

Campus means any Griffith campus, site or facilities.

COVID-19 vaccines mean a vaccine approved or recognised by the Therapeutic Goods Administration (TGA) for use in Australia or for travel.

COVID-19 testing means a test accepted by the TGA and approved for use by the Vice Chancellor.

Fully vaccinated: The requirements for being fully vaccinated will be determined and publicised by the Vice Chancellor. As at 18 February 2022 it means two doses of a TGA approved or recognised COVID-19 vaccine.

Evidence of vaccination means a copy of the staff member's immunisation history statement from the Australian Immunisation Register, the COVID-19 digital certificate or a certificate that meets the criteria as required by the Department of Foreign Affairs and Trade.

INFORMATION

Printable version (PDF) Downloadable version (Word)

Title	Staff Mandatory COVID-19 Vaccination or Testing Procedure
Document number	2022/0001202
Purpose	The purpose of this Procedure is to establish the processes for the requirement that all staff be fully vaccinated against COVID-19. This procedure is to be read in conjunction with the Mandatory COVID-19 Vaccination or Testing Policy.
Audience	Staff
Category	Operational
Subcategory	Safety
Approval date	25 January 2022
Effective date	25 January 2022
Review date	2024
Policy advisor	Provost
Approving authority	Vice Chancellor

RELATED POLICY DOCUMENTS AND SUPPORTING DOCUMENTS

Legislation	Work Health and Safety Act 2011 (Qld) Work Health and Safety Regulation 2011 (Qld) Codes of Practice Fair Work Act 2009 (Qld) Queensland Government Public Health Directions
Policy	Mandatory COVID-19 Vaccination or Testing Policy Health, Safety and Wellbeing Policy Code of Conduct Enterprise Agreements Work Location Policy
Procedures	N/A
Local protocols	N/A
Forms	COVID-19 Vaccine Medical Contraindication Form