NIEHS WTP COVID-19 Winter Series:
Addressing the Role of the Vaccine in Workplace COVID-19 Prevention: How to Weed through Misinformation, Mistrust, and Improve Worker Protection

Vaccine Panel Webinar Discussion Questions and Answers, January 14, 2021

The following are questions that were posed in the chat of the 01/14/2021 webinar. The answers are based on what is currently known about the coronavirus/COVID-19 vaccine.

Mandatory/Compulsory/Condition of Employment

1. Should the vaccine be mandatory? How does this compare to the flu model?

There are still many unknown questions regarding risk and benefit. Our current thought is that using the vaccine will reduce the chance of severe illness from exposure. Under the FDA EUA, the decision to vaccinate is voluntary. However, legal experts have indicated that under employment and some state health laws, mandatory vaccination has been upheld in past vaccination campaigns. There is more information available from the Equal Employment Opportunity Commission (EEOC) website: https://www.eeoc.gov/coronavirus.

The bottom line is that educating workers, answering their concerns, and providing a supportive and convenient vaccination program is the current approach recommended by most public health experts and many employers. Currently, an ideal approach may include having a policy in place where COVID-19 vaccines are voluntary and time off is provided for workers who experience serious side effects.

2. Do you recommend employers require the vaccine to keep the workplace safe?

As with any vaccines this should be an individual decision based on their knowledge, beliefs, and personal medical history. Vaccines required as a condition of employment puts the liability on the employer(s) should acute or chronic conditions develop (in the most liberal sense) as a result of the vaccine. All potential side effects currently known or later discovered would fall on the employer for compensation and coverage.

General Questions

1. Should people who have had COVID, get the vaccine?

Yes. It is important to prevent reinfections. If you have been treated with monoclonal antibodies or convalescent plasma, you can wait 90 days before getting a COVID-19 vaccine.

2. Can pregnant women get the vaccine?

There are no recognized issues in pregnancy, breastfeeding, or fertility. In fact, obstetricians and gynecologists advise discussion + vaccination.

3. Does vaccine affect people with health issues or food allergies?

No. In fact, those with underlying health issues should get the vaccine to prevent additional risks if they were to be infected with the coronavirus.

The two COVID-19 vaccines currently available in the United States do not contain eggs, preservatives, or latex.

4. What are the ingredients of the vaccine that people may be allergic to?

For a full list of ingredients, please see each vaccine's Fact Sheet for Recipients and Caregivers: https://www.fda.gov/media/144414/download and https://www.fda.gov/media/144638/download

5. Does temperature check accurately diagnose the virus?

Some people that experience side effects from COVID-19 do have an elevated temperature (100°+F). While many employers are taking temperatures daily, it is important not to rely on them as the only means of screening, therefore it is important to monitor your own signs and symptoms and take the appropriate steps to protect yourself and others. Temperature does vary greatly depending on eating or drinking something hot or cold, so it is important to take body temperature (by mouth) at least 10 minutes before or after drinking or eating anything.

6. Can you comment on the long-term safety of the vaccine?

Since current COVID-19 vaccines have FDA EUA, the long-term safety of the vaccine is unknown. However, given the science behind the vaccine (mRNA) has been studied for decades, it is unlikely to cause any long-term effects. NIH has many resources related to vaccine safety and effectiveness. https://www.nih.gov/news-events/nih-research-matters/experimental-coronavirus-vaccine-highly-effective

7. Since vaccines in healthcare are usually to protect patients, how might this differ when we are trying to protect ourselves from each other?

The same concept of protecting patients should apply to ourselves and others. At its best, it would allow the vaccinated to have reduced symptoms which then translates to potential less infectious to patients and coworkers and less down time due to illness. The COVID-19 vaccines protect us by preventing serious illness and death if we were to become exposed and infected by the virus. By preventing serious illness, we benefit others, by decreasing the number of people requiring hospitalization, leaving those healthcare resources for others who need them. It is too early to know to what degree the COVID-19 vaccines prevent transmission of the virus, but when that data becomes more clear, this may be another way that getting vaccinated protects others around us.

8. Is the mRNA from vaccine degraded after protein synthesis or is it stored for reuse? What does this mean?

The messenger RNA is quickly degraded inside your body. It is not stored for reuse.

Quarantine, PPE, Distancing, Engineering Controls

1. If one gets the vaccine, do they still have to quarantine if they've been exposed?

Yes. It is best to quarantine if you have been exposed and explore getting a COVID-19 test prior to returning to work.

2. If one gets the vaccine, do they still need to wear face coverings in public? At work?

Yes. Wearing a face covering when around others is a good idea. It is a way to protect you from others and others from you. How effective the vaccine is at preventing transmission is not yet known, so, properly wearing a face covering (covering the nose and mouth, without gaps) is still needed at this time.

3. Those that test positive, but do not have symptoms – do they need to go through quarantine (be isolated) and then test negative?

The CDC guidance for isolation and returning to work after a positive test can be found by CDC here: https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/isolation.html. People who test positive, may continue to test positive for weeks without being contagious to others. For this reason, public health is not requiring a negative test before returning to work.

4. Is it helpful to have a steamer at home, even if you are not sick?

Maintaining relative humidity in the 40%-60% range in indoor spaces may help slow the spread of the coronavirus in winter, according to experts from the Healthy Buildings program at Harvard T.H. Chan School of Public Health. Humidity can affect virus transmission in three ways - higher humidity can enhance the body's ability to fight off infection, coronavirus decays faster at close to 60% relative humidity, and that drier air can lead to greater numbers of tiny coronavirus particles that travel farther and penetrate deeper into the lungs.

Portable humidifiers can easily increase the relative humidity in homes and other locations. humidifiers can make you sick if they aren't maintained properly or if humidity levels stay too high. If you use humidifiers, be sure to monitor humidity levels and keep your humidifier clean. Dirty humidifiers can breed mold or bacteria.

Given the rollout of the COVID-19 vaccine, information about health and safety for workers is in high demand. In response, WTP and the National Clearinghouse for Worker Safety and Health

Training developed three new fact sheets. The first fact sheet, **COVID-19 Vaccine Information for Workers**, offers important facts to help workers make an informed decision about being vaccinated. The **Injection Safety for COVID-19 Vaccinators and Vaccine Administrators** fact sheet covers sharps and needle safety to protect vaccinators from needlestick injuries and blood exposures. The third fact sheet, **Key Elements of a Model Workplace Safety and Health COVID-19 Vaccination Program** includes a stepwise plan and key elements to help employers and workers implement a safe and effective workplace vaccination program. All are available here: https://tools.niehs.nih.gov/wetp/covid19worker/index.cfm

ADDITIONAL RESOURCES:

CDC Benefits of Getting a COVID-19 Vaccine: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/vaccine-benefits.html

CDC Frequently Asked Questions about COVID-19 Vaccination: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html

NIEHS WTP COVID-19 Vaccine Information for Workers https://tools.niehs.nih.gov/wetp/public/hasl_get_blob.cfm?ID=12583

NIEHS WTP COVID-19 Training Resources https://tools.niehs.nih.gov/wetp/covid19worker/index.cfm

NIEHS WTP Injection Safety for COVID-19 Vaccinators & Vaccine Administrators Preventing Needlesticks and Blood Exposures https://tools.niehs.nih.gov/wetp/public/hasl_get_blob.cfm?ID=12601

NIEHS Key Elements of a Model Workplace Safety and Health COVID-19 Vaccination Program https://tools.niehs.nih.gov/wetp/public/hasl_get_blob.cfm?ID=12621

NIH Experimental coronavirus vaccine highly effective https://www.nih.gov/news-events/nih-research-matters/experimental-coronavirus-vaccine-highly-effective

NIH Vaccine Resources https://covid19.nih.gov/treatments-and-vaccines/vaccines#vaccine-resources-1

NIOSH Safely Administering Vaccines: Resources for Healthcare Workers https://www.cdc.gov/niosh/index.htm

DHHS COVID-19 Vaccines https://www.hhs.gov/coronavirus/covid-19-vaccines/index.html

FDA COVID-19 Vaccines https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines

OSHA Protecting Workers: Guidance on Mitigating and Preventing the Spread of COVID-19 in the Workplace https://www.osha.gov/coronavirus/safework

WHO COVID-19 Vaccines https://www.who.int/emergencies/diseases/novel-coronavirus-2019/covid-19-vaccines

NAS Communication Strategies for Promoting COVID-19 Vaccine Acceptance https://www.nap.edu/resource/26068/interactive/vaccine-confidence.html