

Basic Covid Vax Consultation Position

April-May 2022

This is to acknowledge notice that the school is considering the development of a policy in relation to COVID vaccination of staff. The IEU readily accepts its responsibility to contribute to the consultation process. Whilst your school may desire a tight time frame for policy adoption, the IEU will need some time to access members' views when devising a specific response for this school. The IEU has no desire to unnecessarily delay any process, but short time frames are not conducive to genuine consultation.

There is no simple answer as to whether the IEU supports (or doesn't support) a continued vaccination mandate. Often there is a significantly divided opinion in a workplace.

Some basic principles will assist the decision making. Decisions should be based the health advice as a minimum and, if necessary, a logical consideration of any proposals in excess of that.

The IEU is content to accept that vaccines are safe and effective and form an important component of our COVID defence. We are not interested in agitating that issue.

The **current health advice** is that mandates for school staff are no longer necessary, but masks will be for four more weeks. The Chief Public Health Officer, Professor Spurrier, was instrumental in the provision of this advice, but has offered further advice to Catholic and Independent schools. She extolled the desirability of maximising **up to date** vaccinations but did not recommend mandating vaccination for school staff. That would have been contrary to the decision to remove the mandate in schools in the first place. Professor Spurrier is essentially saying that vaccination is not essential in schools, but it is still a very good idea. This we can accept as '**current health advice**' for the purposes of these discussions.

As the pandemic is very fluid and changeable, any policy needs to be set up with **reviews at relatively short intervals** to judge its ongoing appropriateness.

There are **3 options** for schools to consider in their consultation period.

1. Allow unvaccinated staff to return with no checks and balances - this is compliant with the basic health advice now that the mandate is rescinded. Vaccination might be simply encouraged.
2. Allow unvaccinated staff on site (with or without a booster requirement for vaccinated status) but with extra restrictions as per Department for Education Policy.
3. Allow only vaccinated staff on site as proposed by CESA and some AIS schools (with or without a booster requirement).

One of the IEU's concerns is whether **unvaccinated people are more infectious than vaccinated**. One reference cited by Professor Spurrier found that the viral load for Omicron was only significantly reduced if the vaccination was '**up to date**' (i.e. boosted). The obvious conclusion would be that *if* one is to continue a mandate it should be for '**up to date**' vaccination as per Department for Education Policy. '**Fully vaccinated**' (two jabs) is not worth the effort for a mandate.

The other IEU concern related to the relatively large number of **unvaccinated students** who would pose a collective risk to staff (vaxxed or not) greater than that posed by a few unvaccinated staff. That question was not satisfactorily answered but it was pointed out that the unvaccinated students would be safer if the staff were all vaccinated.

If there is an appetite from management for a policy in excess of the general health advice, it must be **reasonable and defensible** in both terms of likely **effectiveness and onerousness**. There must also have been **genuine consultation** with employees and the IEU.

One would have thought that all general schools would have similar risk profiles and one model would consistently apply across all schools. That is not to be and all three options will probably co-exist when the Catholic and Independent schools settle on their own policies. The Department for Education has probably arrived at the sweet spot in the risk/reward trade off and is worthy of emulating.

A cogent argument may be mounted that to either continue a mandate or to treat unvaccinated staff differently may be 'reasonable' and it may or may not be generally supported by the workforce. Where there is not that willingness to accept the continuation of a mandate on effectiveness, risk/reward, philosophical or other grounds, then the policy should not stray too far from the basic health advice or the Department model.

The IEU will engage with the consultation process to balance the health advice with local risk tolerance.