

MH 34:24/8

MOH Circular No. 190/2021

28 December 2021

Please refer to Distribution List

UPDATED GUIDANCE ON WORKPLACE MEASURES FOR HEALTHCARE AND COMMUNITY CARE SECTORS FROM 1 JANUARY 2022

(A) IMPLEMENTATION OF WORKFORCE VACCINATION MEASURES (WVM)

(B) CESSATION OF VACCINATE OR REGULAR TEST ("VoRT") TESTING REGIME AND SUBSIDIES FOR ART TESTING FOR MEDICALLY INELIGIBLE (MI) WORKERS

To sustain and further protect the workforce, the Multi-Ministry Taskforce has announced on 23 October 2021 and 26 December 2021, that all enterprises and/or institutions¹ including licensees and operators in the healthcare and community care sectors are required to implement the Workforce Vaccination Measures (WVM) with effect from 1 January 2022. With the implementation of WVM, the Vaccinate or Regular Test ("VoRT") regime for the healthcare and community care sectors will cease with effect from 1 January 2022. This circular outlines the key principles and guidelines for the healthcare and community care sectors on the implementation of the WVM and updates on the cessation of VoRT.

¹ Enterprises and/or institutions include MOH Holdings and all its entities, healthcare clusters and all public healthcare institutions (including public hospitals, community hospitals, national specialty centres and polyclinics), private healthcare institutions (including private hospitals, community hospitals, General Medical Clinics, Specialist Medical Clinics, General Practitioner (GP) Clinics, Dental Clinics, Private Allied Health (AH) Clinics/Private AH providers), Traditional Chinese Medicine (TCM) Clinics, Traditional & Complementary Medicine (T&CM) Service Providers, healthcare professional and related associations, councils and societies, Long Term Care (LTC) and community care/eldercare providers including service providers for residential care services (e.g. Nursing Homes, Psychiatric Rehabilitation Homes, Psychiatric Sheltered Homes), centre-based service providers (e.g. Active Ageing Centres, Active Ageing Care Hubs, Senior Care Centres, Active Ageing Hubs, Senior Activity Centres, Psychiatric Day Centres and related services such as CREST/COMIT, Cluster Support and Community Case Management Service), Home-based care service providers (e.g. Home Medical, Home Nursing, Home Palliative Care, Home Personal Care, including Home Personal Care component of Care Close to Home pilot, Home Therapy, home-based components of Integrated Home and Day Care Services and Interim Caregiver Service), renal dialysis centres, community mental health service providers, other LTC service providers such as home delivery service providers, case management service providers. In this regard, all healthcare institutions (HCIs) licensed under the Private Hospitals and Medical Clinics Act (PHMCA) and all registered medical and dental practitioners, nurses, pharmacists and allied health professionals (registered or unregistered) would be included regardless whether they are employees of a HCI, self-employed or in solo practice.











(A) WORKFORCE VACCINATION MEASURES (WVM) FROM 1 JANUARY 2022

- 2. From 1 January 2022, only workers who are fully vaccinated, certified to be medically ineligible (MI) for all COVID-19 vaccines under the National Vaccination Programme (NVP) or have recovered² from COVID-19 within the past 180 days, can return to the workplace to work onsite. All other unvaccinated workers, including partially vaccinated workers, will not be able to return to work onsite.
- 3. The WVM will be implemented across all sectors including the healthcare and community care sectors. It would be applicable to all employees (including staff in non-patient or non-public facing, backroom, and administrative functions, operating from home) and persons who work under the direction (e.g., contractors, subcontractors, vendors, locums, students on attachment, internships, research and clinical training and volunteers) of enterprises and/or institutions in the healthcare and community care sectors, which will be collectively termed as "Workers" in this Circular.
- 4. Enterprises and/or Institutions shall adhere to the guidelines under WVM that are issued by Ministry of Manpower (MOM) and shall also align to the Tripartite Advisory issued to guide employers and employee on managing unvaccinated staff who cannot physically return to the workplace, as outlined at MOM's website [https://www.mom.gov.sg/covid-19/advisory-on-covid-19-vaccination-in-employment-settings].

Concession for the use of PET testing to return for onsite work

5. During the transition in the implementation of WVM, time-limited concession will be granted for unvaccinated workers (including partially vaccinated workers) to return to onsite work each time, after obtaining a negative test result (valid for 24 hours) through a Pre-Event Test (PET) at a MOH-approved COVID-19 test provider³.

Phase 1 (1 January to 14 January 2022)

 Concession for all unvaccinated workers to return to onsite work via a negative PET test will be available for a limited time until 14 January 2022 (inclusive). The PET result must be valid for the entire duration that the unvaccinated staff is required to be onsite at the workplace.

³ The list of MOH-approved ART test providers may be found here: https://www.moh.gov.sg/licensing-and-regulation/regulations-guidelines-and-circulars/details/list-of-covid-19-swab-providers.











² Non-fully vaccinated individuals who had recovered from COVID-19 infection prior to 1 January 2022 and who will already exceed the 180-day period as of 1 January 2022 would be granted an additional one month grace period till 31 January 2022 to complete their primary series vaccination regime, to continue to work onsite.

Phase 2 (from 15 January 2022 onwards)

- Concession for unvaccinated workers to perform PET in lieu of being fully vaccinated will be removed, i.e. such workers will not be allowed to return to the workplace even if they did PET with a negative result.
- Those who have received their first dose of vaccination (i.e. partially vaccinated) and need more time to get fully vaccinated would have their concession extended until 31 January 2022 (inclusive). After which, they must be fully vaccinated to work onsite.
- 6. In the interim, Enterprises and/or Institutions should strongly encourage their unvaccinated staff to be vaccinated as soon as feasible, before the removal of the concession to avoid any impact on their employment.
- 7. The costs of the PET will not be funded by the Government and should be borne by the unvaccinated workers who have opted not to be vaccinated. Enterprises and/or Institutions are encouraged to come to reasonable arrangements on the cost-sharing of PET for pregnant employees during the concession period.

Identification and Verification of Vaccination Status

- 8. Enterprises and/or Institutions may request for their Workers' vaccination status for the purpose of planning deployment at the workplace. Workers can also be requested to produce proof of vaccination before reporting to the workplace. Workers who refuse to do so will be treated as unvaccinated.
- 9. For the purpose of the WVM, HCIs may refer to Table 1 outlined in **Annex A** for the current definition of 'fully vaccinated persons'. Going forward, Enterprises and/or Institutions may refer to the following link https://go.gov.sg/vdsmminfo for the prevailing definition of fully vaccinated individuals for the purpose of WVM.
- 10. Enterprises and/or Institutions shall adhere to the following when verifying if a Worker is vaccinated:
 - (a) Only recognise the proofs of vaccination as set out in Annex B; and
 - (b) Regard Workers who decline or are unable to produce the proofs of vaccination as set out in <u>Annex B</u> as not vaccinated for the purpose of the WVM.











11. Enterprises and/or Institutions may check their company's vaccination rate via a new web service available at https://go.gov.sg/percentvaccinated using their Corporate Pass account.

Work Arrangements for Unvaccinated Workers

- 12. For unvaccinated Workers whose work **can be performed at home**, Enterprises and/or Institutions may allow them to continue to work from home, but such working arrangements remain the Enterprises' and/or Institutions' prerogative⁴. As majority of the vaccinated Workers will eventually return to the workplace more frequently, the prolonged absence of unvaccinated Workers from the workplace may affect their individual performance as well as negatively impact team or organisational performance.
- 13. For unvaccinated Workers whose work **cannot be performed from home**, Enterprises and/or Institutions may consider the following:
 - (a) Redeploy them to suitable jobs which can be done from home if such jobs are available, with remuneration commensurate with the responsibilities of the alternative jobs; or
 - (b) Place them on no-pay leave (NPL) or, as a last resort, terminate their employment (with notice) in accordance with the employment contract. If termination of employment is due to Workers' inability to be at the workplace to perform their contracted work, such termination of employment would not be considered as wrongful dismissal.

Special consideration for unvaccinated employees who are pregnant

- 14. Pregnant Workers are also strongly encouraged to be vaccinated with the vaccines available under the NVP as soon as possible. There is no evidence to suggest that the vaccines available under the NVP cause harm to pregnant women or their babies. On the contrary, pregnant women who delay vaccination are at higher risks of complications should they contract COVID-19 during pregnancy. Enterprises and/or Institutions may want to encourage their pregnant workers to consult their obstetrician to discuss the benefits and risks.
- 15. Enterprises and/or Institutions should not terminate the employment of medically eligible but unvaccinated pregnant Workers and are strongly encouraged to

⁴ Subject to any Government mandated Safe Management Measures (SMM) that require employees to work from home by default.











give special consideration to the needs and concerns of their pregnant workers and should consider the following support measures for them.

- (a) Allow the employees to work from home if they are able to do so and their absence from the workplace should not affect assessment of their performance; or
- (b) Redeploy them to suitable jobs which can be done from home if such jobs are available, with remuneration commensurate with the responsibilities of the alternative jobs.
- (c) Place them on NPL based on mutual agreement until after the pregnant Worker has delivered. Such NPL should not affect their right to maternity benefits required under any legislation, employment contract or collective agreement.

Special consideration for medically ineligible (MI) Workers

- 16. Although the small minority of unvaccinated Workers who are certified by a doctor to be medically ineligible (MI) for the vaccines under the NVP are allowed to work onsite, Enterprises and/or Institutions are strongly encouraged to give special considerations to them and consider the following measures:
 - (a) Allow the MI Workers to work from home if they are able to do so and their absence from the workplace should not affect assessment of their performance; or
 - (b) Redeploy the MI Workers to suitable jobs which can be done from home if such jobs are available, with remuneration commensurate with the responsibilities of the alternative jobs.
- 17. Enterprises and/or Institutions should verify a person's status as a MI Workers by checking against the original certification or memo that was issued to that person by a medical practitioner in Singapore or the SMS notification sent to that person.

Support for Workers to get vaccinated

18. Unvaccinated Workers who are medically ineligible for the mRNA vaccine are strongly encouraged to get vaccinated with non-mRNA vaccines under the NVP such











as Sinovac at any of the approved private clinics⁵ as soon as possible.

19. Enterprises and/or Institutions should facilitate vaccination by granting paid time-off to Workers for their vaccination (including vaccination booster shots), and additional paid sick leave (beyond contractual or statutory requirement) in the rare event that the Worker experiences a vaccine-related adverse reaction.

(B) CESSATION OF VORT AND TESTING SUBSIDIES FOR MEDICALLY INELIGIBLE WORKERS FROM 1 JANUARY 2022

- 20. The WVM will supersede arrangements for unvaccinated Workers implemented under the VoRT testing regime since 1 October 2021. With the implementation of WVM from 1 January 2022, the VoRT testing regime will be no longer be applicable for the healthcare and community care sectors with effect from the same date.
- 21. In conjunction with this, testing subsidies including government-funded ART kits and subsidies for ART tests at the Quick Test Centres that were provided by the Government for the MI Workers under the VoRT testing regime will also cease with effect from the same date.

FURTHER DETAILS AND ENQUIRIES

- 22. For more details on the guidelines on the implementation of WVM and cessation of VoRT, Enterprises and/or Institutions could refer to MOM's website for more information on WVM. A list of Frequently Asked Questions (FAQs) is appended in <u>Annex C</u>. You may also contact the lead agency for healthcare and community care sectors via <u>gobiz_healthcare@moh.gov.sg</u> for further clarifications.
- 23. This Circular is for compliance by all Enterprises and/or Institutions including licensees and operators in the healthcare and community care sectors.



⁵ <u>List of Approved Private Healthcare Institutions</u> providing Sinovac vaccine.











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Distribution List

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All Registered Medical and Dental Practitioners

All Registered TCM Practitioners

All Registered Allied Health Professionals

Allied Health Associations and Societies

TCM and T&CM Associations and Societies

Operators of Renal Dialysis Centres

Operators of Long-Term Care Services











Table 1: Fully Vaccinated Workers (definition as at Dec 2021)

| Category | | Requirement(s) | | Period |
|----------|---|-------------------|--|--|
| (1) | Vaccinated with no prior history of COVID-19 infection | (a) (b) | Individual must not have had a history of COVID-19 infection; Individual must have been vaccinated against a COVID-19 infection by the administration of the appropriate regimen of any approved vaccine ⁶ ; and 14 days or more have elapsed after the day the individual was so vaccinated. | Starting 14 days after the day the individual was vaccinated and ending 365 days later. |
| (2) | Recovered from COVID-19 infection without prior vaccination, within 180 | (a) (b) | Individual must not have been vaccinated against COVID-19 infection; and Individual must have recovered from COVID-19 infection. | Starting the day the individual first tested positive for SARS-CoV-2 via a PCR test and ending 180 days later. |
| | days | (a) (b) (c) | Individual must not have been vaccinated against COVID-19 infection; and Individual must have recovered from COVID-19 infection; and Individual had a second COVID-19 infection and recovered from it. | Starting the day the individual first tested positive for SARS-CoV-2 via a PCR test for the second COVID-19 infection and ending 180 days later. |
| (3) | Recovered from COVID- 19 infection and subsequently vaccinated | (a) (b) | Individual must have recovered from COVID-19 infection Individual must have been vaccinated against a COVID-19 infection by the administration of one dose of the mRNA COVID- | Starting 14 days after the day the individual was vaccinated and ending 365 days later. |

⁶ These are limited to: (1) Tozinameran (Pfizer-BioNTech COVID-19 vaccine or Comirnaty COVID-19 vaccine); (2) Moderna COVID-19 vaccine; (3) Vaxzevria (AstraZeneca COVID-19 vaccine); (4) Covishield COVID-19 vaccine; (5) Johnson & Johnson's (J&J) Janssen COVID-19 vaccine; (6) Sinopharm COVID-19 vaccine; (7) Sinovac-CoronaVac COVID-19 vaccine; or (8) any other vaccine regimen as approved by the Ministry of Health (MOH). Where the individual is vaccinated under (3) to (8), their vaccination records must have been ingested into MOH's national IT systems before they will be recognised.











| | 19 vaccines or two doses of | |
|-----|--|--|
| | Sinovac under the National | |
| | Vaccination Programme ⁷ ; and | |
| (c) | 14 days or more have elapsed | |
| | after the day the individual was | |
| | so vaccinated. | |

⁷ For non-fully vaccinated recovered persons, it is recommended that to receive one dose of mRNA COVID-19 vaccine (or two doses of Sinovac under National Vaccination Programme or Sinopharm under Special Access Route) at least 3 months after the date of diagnosis of COVID-19 infection.





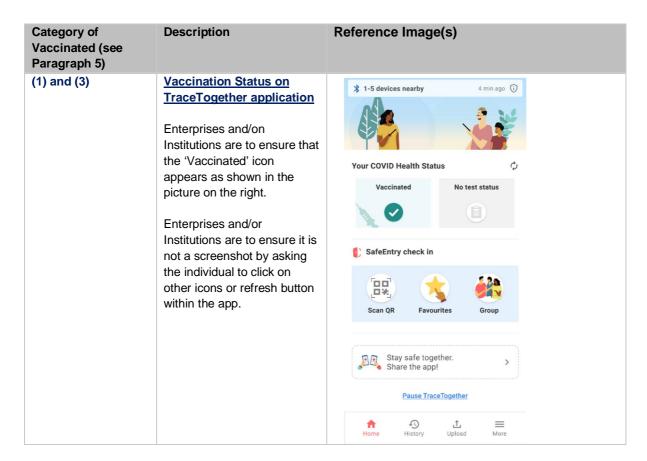






Recognised Proofs of Vaccination

Enterprises and/or Institutions can establish how many Workers are vaccinated by checking their vaccination status using the methods as set out on https://go.gov.sg/acceptabledocs (refer to the "For fully vaccinated individuals" and "For individuals who have recovered from COVID-19" sections).













Category of Vaccinated (see Paragraph 5) (1) and (3)

Description

Reference Image(s)

Vaccination Status on HealthHub application

Enterprises and/or Institutions are to ensure that the 'Vaccinated' icon as shown in the picture on the right.

Enterprises and/or Institutions are to ensure it is not a screenshot by asking the individual to click on other icons within the app.



(1) and (3)

Physical Vaccination Card/Slip

Enterprises and/or Institutions are to only accept original the hardcopy card/slip.

Enterprises and/or Institutions are to ensure that the card/slip belongs to the individual checking by against his/her Governmentissued photo identification.

Enterprises and/or Institutions are to ensure that more than 2 weeks have passed since the final dose of the vaccine (e.g. if your final dose was on 1 July 2021 (Day 1), you would be considered to be fully vaccinated from 15 July 2021 (Day 15)).

COVID-19 VACCINATION CARD

Information about COVID-19 Vaccination

The COVID-19 vaccine you have received consists of two doses. The second dose must be completed to achieve the best possible protection, and for the protection to be as long-lasting as possible.

The vaccine has been assessed to be safe for use. However, just like other vaccines, you may experience some side effects such as headache, body aches, tiredness and soreness at the injection site, or fever. These usually get better after 1-3 days and may be a sign that your immune system is making a protective response against COVID-19.



| Appointment Date | | Time | | Place | | |
|---|------------|---|---|---|-------------------------------------|--|
| OVID-19 VACCI | £100000000 | o Daniel Co. | ' | | | |
| Vaccine Dose | Date o | f Vaccination | Vaccine Brand | | Place of Vaccination | |
| □ e1 | | | ☐ Pfizer BioNTech / ☐ Sinovac Commaty ☐ Other ☐ Moderna | | | |
| □ #2 | | | ☐ Pfizer-BioN lech / ☐ Sinokac Comirnally ☐ Other ☐ Moderns | | | |
| AFTER VACCINAT | - | | How to Manage | | s de effects that you experience to | |
| Pain, redness, swelling at the injection site Fover, chills | | Those with fever are advised to self-isolate at horse until the fever subsides. Farecetamol 1 to 2 tablets every 6 hours for adults or dosed according to the child's weight as rended. Rest Usually gots better by isself in a week or so | | TISA vice go.gov.sg/srf This vaccine may cause a severe allergic reaction in very ran instances. If you experience a severe allergic reaction | | |
| lleadache, muscle pain, oint pain | | | | (difficulty breathing, swelling of your face, throat, eyes or lips, a fast heartheat, dizziness or weakness, rash all over your body), please sock immediate medical attention calling 995 or going to the nearest A&E. The doctor will also | | |
| Tiredness | | | | | | |
| Lymph node swelling at neck or arms | | | | decide if you should receive the second dose of the vaccine. | | |
| See a doctor if: the side effects | persist i | or get worse | urs | = | | |











| Category of Vaccinated (see Paragraph 5) | Description | Reference Image(s) |
|--|--|--|
| | Note. Hard-copy and digital overseas vaccination certs are not recognised. | |
| (2) | Enterprises and/or Institutions are to only accept the original hardcopy memo. Enterprises and/or Institutions are to ensure that the memo belongs to the individual by checking against his/ her Governmentissued photo identification. To ensure that the duration of the activity is within the 180 days exemption period calculated from the date of the 1st PCR test. Older versions of memo that do not indicate the exemption period or the date of the PCR positive test result will not be accepted. | DISCHARGE MEMO Name of Patient: NRIC/FIN: To whom it may concern, The abovementioned patient first tested positive for SARS-CoV-2 (COVID-19) via a professory of the profe |

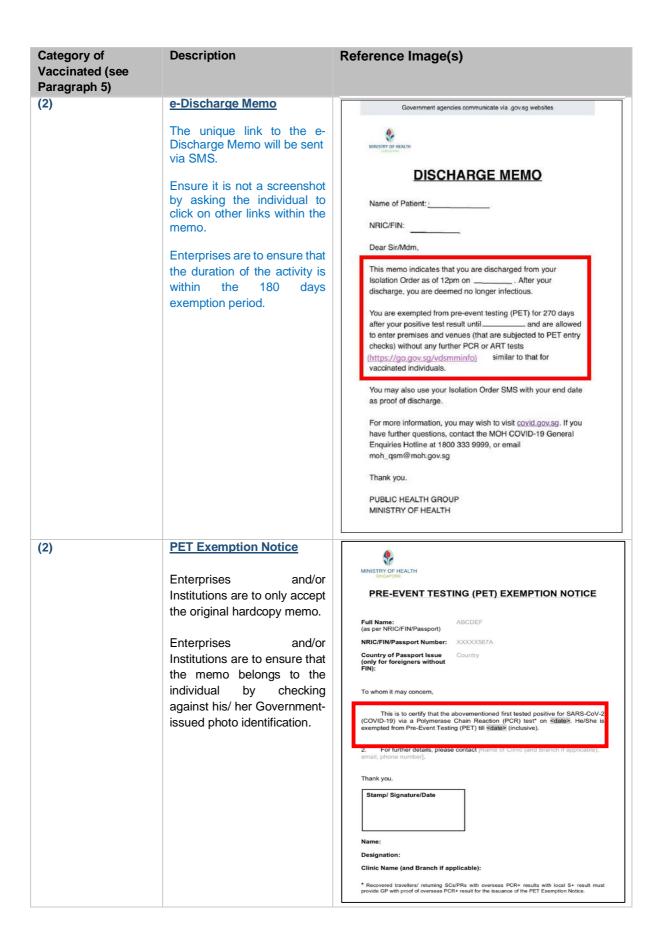






















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