



Buxton Fire-Rescue

Administrative Policy

Subject: Employee Vaccination Records (13)

Section/Number: COVID-19 Vaccination Declination (3)

Date Approved: September 13, 2021

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Maine Centers for Disease Control and Prevention (CDC) and Maine Emergency Medical Services (MEMS), requires that I receive the COVID-19 vaccination to protect myself, my patients/clients, my colleagues, and others in my community.

I acknowledge that I am aware of the following facts (*please read and initial next to each statement*):

COVID-19 is a serious respiratory disease. As of September 8, 2021, over 652,000 people have died in the U.S. and there have been over 40.5 million people with confirmed cases of COVID-19.

COVID-19 vaccination is recommended for me and all other public safety professionals to protect our colleagues and the communities that we serve from COVID-19, its complications, and death.

If I contract COVID-19, I may remain infectious for 10 days or more. During this time, I shed the virus and can transmit COVID-19 to my family, colleagues, and the people we serve.

If I become infected with COVID-19, even if my symptoms are mild or non-existent, I can spread COVID-19 to others. Symptoms that are mild or non-existent in me may cause serious illness and death in others.

I understand that it is impossible to get COVID-19 from the COVID-19 vaccine.

I understand that these vaccines have undergone rigorous trials and testing processes that met all the U.S. FDA requirements for issuance of an Emergency Use Authorization (EUA). Also, that at least one of the available vaccines has received full FDA approval for use on children and adults aged 12 and over.

I understand that receiving this vaccine will be essential to establishing herd immunity and eventually moving back to normal processes.

I understand that mRNA vaccines do not alter, change, or even interact with my DNA.

The consequences of my refusal to be vaccinated could have life-threatening consequences for my health and the health of everyone with whom I have contact, including my coworkers, my family, and members of the community.

I understand that on August 12, 2021, Maine CDC issued emergency amendments to the CDC Rule covering IMMUNIZATION REQUIREMENTS FOR HEALTHCARE WORKERS, 10-144 CODE OF MAINE RULES CHAPTER 264 and on August 26, 2021, Maine EMS issued an emergency rule adding CHAPTER 20: COVID-19 IMMUNIZATION REQUIREMENTS to the Maine EMS Rules.

I understand that these documents include “each EMS organization must require for all employees a Certificate of Immunization against COVID-19” by October 1, 2021, and “Each Entity with which a Covered Emergency Medical Services Person is associated must require that the Covered Emergency Medical Services Person provide to the Entity a Certificate of Immunization against COVID-19 or documentation of an Exemption”.

Nate R. Lee

I understand that I am only exempt from this requirement if I provide a written statement from a licensed physician, nurse practitioner or physician assistant that, in the physician's, nurse practitioner's or physician assistant's professional judgment, immunization against COVID-19 may be medically inadvisable.

I understand that I am being offered the COVID-19 vaccine and I am electing to not get vaccinated. I understand that I can change my mind at any time and receive the COVID-19 vaccination.

I understand that by declining the COVID-19 vaccine I am subject to Unpaid Administrative Leave leading to non-disciplinary discharge from Buxton Fire-Rescue, if I do not comply with current and future rules pertaining to the vaccination of healthcare workers against COVID-19.

I have read and fully understand the information found within this declination form.

Signature: _____ Date: _____

Name (Print Legibly): _____ DOB: _____

References:

- <https://www.maine.gov/dhhs/mecdc/rules/maine-cdc-rules.shtml#EmergencyRules>
- <https://www.maine.gov/ems/sites/maine.gov.ems/files/inline-files/Chapter-20-COVID-19-Immunization-Final-Text.pdf>

Policy History:

Original Approval Date: September 13, 2021
Review Date: XXXXX