

# Request for Exemption to Immunization Requirements - Clinical Programs

### Purpose/Explanation of Policy or Procedure

The Arizona State University (ASU) Edson College of Nursing and Health Innovation (Edson CONHI) requires that students who have advanced to or enrolled in a clinical program provide evidence to demonstrate compliance with immunization requirements. Students enrolled in a clinical program must meet all college and clinical agency health and safety requirements.

According to the CDC Advisory Committee on Immunization Practices (2011), health care personnel are defined as "all paid and unpaid persons working in health-care settings who have the potential for exposure to patients and/or infectious materials, including body substances, contaminated medical supplies and equipment, contaminated environmental surfaces, or contaminated air" (p. 2). Students enrolled in clinical programs are included in this definition of health care personnel.

The ASU Edson CONHI depends upon the cooperation of public and private health care agencies to provide clinical learning experiences that help our students meet clinical instruction requirements to comply with accreditation and licensure standards. The great majority of these facilities strictly require our students to show immunity or proof of immunization. This requirement is true, even for agencies that are willing to provide exemptions to immunization requirements for their own employees. The clinical education agencies where students are placed to complete clinical learning experiences very often prohibit clinical placement/learning opportunities for individuals who do not meet immunization requirements. Furthermore, employment opportunities may be limited for such individuals after graduation.

In all cases in which a student requests an exemption to the Edson CONHI immunization requirements, the student must agree to assume the risk that s/he will not be able to complete the program if opportunities for required clinical learning experiences cannot be found or are canceled for any reason (including but not limited to an outbreak of one or more communicable disease). The student also assumes the increased risk of infection with a communicable disease and the associated consequences.

The College recognizes that some students may be unable to comply with immunization requirements due to medical or religious reasons and may need to request an exemption to the immunization requirements. This protocol describes the process for requesting an exception to ASU Edson CONHI immunization requirements and discloses the potential risks incurred by students who obtain exemptions to the immunization requirement.

The purpose of these requirements are to:

Provide safe clinical care; Provide a safe environment for patients and healthcare workers to reduce the risk of nosocomial (hospital acquired) infections; Protect healthcare workers from exposure to potentially infectious blood and body fluids and Prevent transmission of communicable infections

All students enrolled in a clinical program in the Edson CONHI, who meet the CDC definition for health care personnel. This *includes all* students enrolled in the:

- Prelicensure Baccalaureate Nursing program
- Post Baccalaureate BSN program
- Doctor of Nursing Practice program
- Master of Science in Nursing Education program (MEPN).



This <u>may</u> include students who are enrolled in the:

- Clinical Research Management
- Master of Healthcare Innovation
- PhD in Nursing and Healthcare Innovation
- RN-BSN programs

### **Policy/Procedure text**

The following items must be submitted to the Petitions subcommittee office 120 days prior to advancement to or enrollment in a clinical program to facilitate a review of the request for exemption:.

- Petition requesting an Exemption to Immunization requirements.
- Titers of immunity to establish base-level risk.
- Request for Exemption to Immunization requirements Clinical Programs from identifying the immunizations for which you are requesting an exemption.
- Disclosure and Agreement Acknowledging the risks associated with this request for exemption.

The role of the ASU Edson CONHI in this protocol/procedure is to:

- 1. Provide students with a process for requesting an exemption to immunizations requirements;
- 2. Disclose to students the risks associated with requesting an exemption to immunization requirements;
- 3. Provide student's request for exemption and base-level titer information to the clinical agency for approval consideration;
- 4. Ensure students meet Edson CONHI Immunization requirements **or** have an approved exemption by each clinical agency in which they are scheduled to complete clinical learning experiences;
- 5. Notify students of potential exposure to communicable disease;
- 6. Prohibit students who are not immunized or who have not demonstrated immunity from participating in clinical learning experiences at health care agencies during the period of communicable disease outbreak.
- **7.** Make a reasonable effort to place a student whose request for exemption to immunization requirements has been denied by a clinical agency in a comparable clinical learning experience, if one exists.
- 8. Notify students who do not meet ASU Edson CONHI immunization requirements that they may experience a delay in graduation, an inability to maintain on-time progression in the academic program, or be unable to complete an academic program due to an inability to obtain the required clinical learning experiences.

The role of the health care agency is to:

- 1. Review the student's request for exemption to immunization requirements.
- **2.** Approve or deny the student's request for exemption to immunization requirements.
- **3.** Notify the ASU CONHI of the decision to approve or deny the student's request for exception to immunization requirements.
- 4. The health care agencies where students are assigned to complete clinical learning experience have the final decision-making authority as to whether or not they will accept a student for a clinical learning experience who does not meet their immunization requirements.

#### **Glossary of Terms/Definitions**

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## **Forms/Process Examples**

# **Arizona State University Edson College of Nursing and Health Innovation**

## **Request for Exemption to Immunization Requirements**

Name:	<u> </u>
Date:	_
Academic Program:	_
Request for Exemption to Immunization Requ	uirements for: (Check all that apply)
Hepatitis B	
Tuberculosis screening	
Measles (Rubella)	
Mumps	
German Measles (Rubella)	
TDAP	
Varicella	
Annual Influenza	
Covid	
Briefly explain why this request is being made:	



Reason for request:		
Medical	Religious (Specify religion:	)
•	nedical reasons, this document must be signed by a licens ctor of Osteopathic Medicine, or Medical Doctor.	sed Nurse Practitioner,
If this request is due to re	eligious reasons, this document must be signed by the stu	udent's religious leader.
Signature of person valid	dating medical or religious reason for accommodation	
Name/Credentials:		
Date:		
Mailing address:		
Email address:		
Phone number:		
Arizona	a State University College of Nursing and Health Inno	vation
F	Request for Exemption to Immunization Requirements	;
	Name:	
	Date:	
	Academic Program:	

#### DISCLOSURE AND AGREEMENT

I hereby request an exemption from the Edson CONHI Immunization requirements in accordance with the attached documentation, for the vaccines identified. If an exemption is granted in response to my request, I understand and agree:

• the above diseases may result in serious illness, disability or death.



- I may be required to receive my education in clinical settings where disease is prevalent, including the diseases for which I have requested an exception to immunization requirements.
- to assume the above risks of harm to myself, my family, and contacts, and I hereby agree to release and hold harmless ASU, the Edson College of Nursing and Health Innovation, and its clinical partners, their employees, students, agents, directors and officers from any claims I or my heirs or assigns may have based on the exception from CONHI immunization requirements granted and/or exposure to the identified diseases.
- if during my clinical learning experience(s) I expose a patient to a communicable disease that could be prevented by vaccination, I may be sued personally and that I am not entitled to indemnity or insurance for such claims.
- on behalf of myself, my heirs and my assigns I hereby agree to release and hold harmless ASU, the Edson College of Nursing and Health Innovation, and its clinical partners, their employees, students, agents, directors and officers from any claims for damages brought against them or me that result from a variance granted at my request and/or illness, injury or death resulting to a patient, clinical staff member, faculty member, or student I may expose to the illness(es) for which I would have been vaccinated under the general immunization requirements of ASU and the Edson CONHI.
- in all instances student placement for clinical learning experiences is the sole discretion of the faculty/director of the college and subject to the consent of the facility.
- ASU Edson CONHI does not guarantee clinical placements and cannot require a clinical facility to accommodate a student's request for an exemption from Edson CONHI immunization requirements and from the immunization requirements of the facility.
- ASU Edson CONHI cannot and does not guarantee that clinical placements will be made in a timely manner for me to progress through or complete the program of study.
- ASU Edson CONHI's inability to place a student in a clinical facility due to lack of immunity may affect the ability to complete or continue enrollment in the program. Options to continue or re-enroll in the program in that event are defined in the program's student handbook.
- Students who decline vaccinations may be asked to leave the clinical facility at any time due to exposure risk or policy change, resulting in loss of the opportunity to meet clinical competencies.



- To minimize exposure a student may be required to wear additional personal protective equipment (mask, gown, gloves, etc.) that other students may not be required to wear and to work in settings others may not be required to work.
- I know and agree to assume all the risks described above, and I hereby release and hold harmless ASU, the Edson College of Nursing and Health Innovation and its clinical partners, their employees, students, agents, directors and officers from any claims I have or may have in the future that result from failure to complete the program due to lack of clinical experiences.

I have read, understand, and agree to the above state	ments.	
Student signature	Date	
Parent or Guardian (if student under 18 years of age)		