
Ascension Texas Ministry Policy

Influenza Vaccination**Attachment to: Patient and Health Care Personnel Safety – Influenza Vaccination****Religious Declination Form**

1. All Health Care Personnel (HCP), as defined per the policy, requesting a religious exemption must complete the attached form and return to the following:

Ascension Texas
1345 Philomena St.
Austin, TX 78723
Employee-Health@seton.org

All requests must be received no later than **11:59 p.m. on October 31, 2018**. This allows enough time to review each request. *Requests received after October 1st will not be considered, unless otherwise outlined within this policy or legally required.*

2. Please ensure that you complete all fields. Incomplete requests will not be considered.
3. Send all original documentation to the address above and keep a copy for your records.
4. Per the Ascension Texas policy:
HCP previously granted a Religious Exemption must complete an Annual Statement requesting continuation of the exemption. HCP not working in close contact with patients/residents will still need to request an exemption. All HCP will be required to strictly adhere to respiratory hygiene and hand hygiene practices, as well as isolation precautions.
5. You will be notified of the designated reviewing body's decision. The original exemption letter will be filed in your associate/occupational health record.



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Religious Declination Form

In alignment with our values of Reverence and Integrity and for the safety of our patients and workforce, Ascension Texas is requiring annual influenza vaccination for all Health Care Personnel (HCP). This is similar to other vaccinations that the health care organization requires as a condition of employment. Influenza vaccination has been recommended for health care personnel and has been shown to be effective in protecting patients/residents from influenza illness and complications related to influenza. Increasingly, national professional, health care and infection prevention organizations are strongly recommending that health care organizations require annual influenza vaccination to protect the health and safety of patients/residents, associates, visitors and the community as a whole from influenza infection.

Ascension Texas recognizes exemptions to annual influenza vaccination for sincerely held religious beliefs. The individual identified below is requesting exemption from influenza vaccination for religious reasons. Provision of the following information is being required for any HCP requesting a religious exemption.

To be completed by HCP requesting exemption: (ALL fields must be completed)

Name of Individual Requesting Religious Exemption: _____

Associate ID: _____ Associate Type: Associate/Contractor/Student/Vendor/LIP
Circle One

Worksite: _____ Department: _____

Email Address: _____ Telephone Number: _____

I understand that should I fail to be vaccinated or granted an exemption, I will have until 11: 59 p.m. on December 15, 2018 to comply with the policy or I will be considered to have voluntarily resigned and/or cease providing services.

HCP Signature
(Person Requesting Religious
Exemption)

Date

Please describe the religious belief that is contrary to influenza vaccination and how you live the cited belief in your daily life (offer specifics to illustrate).

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Description of Religious Belief that is contrary to Influenza vaccination:

Description of how use of influenza vaccination is a violation of your moral conscience in light of this religious belief:

Description of how you live this belief in your daily life that demonstrates it is sincerely held:

FOR OFFICE USE ONLY

Date Received: _____

Date Reviewed: _____

Date Decision Communicated to HCP: _____

- Temporary Exemption Approved
- Exemption Denied for Incomplete Documentation