

A summary of the decision to implement a COVID-19 vaccination requirement



Made by Professor Deborah Terry AO, UQ Vice-Chancellor and President on 20 December 2021

Queensland's interstate border has now opened. It is clear from recent government announcements, that later this month Queensland's international borders will also reopen. All in an environment where Queensland has, to date, been relatively shielded from high COVID-19 infections, serious health effects and death throughout the pandemic.

Even with high vaccination rates, the modelling by the QIMR indicates that the easing of restrictions will result in daily infection rates and hospitalisation increasing next year – at 80% vaccination rates it is expected that new infections could reach 650 – 1,000 cases per day and hospitalisations could reach between 1,750 – 2,000. Modelling from the Doherty Institute paints a similar picture on a national scale.

UQ is a large operation with about 7,868 full-time equivalent staff members (including casuals), 56,272 enrolled students and approximately 7,700 honorary appointments and volunteers attending our campuses, facilities and sites.

The nature of our university community and the way in which it operates means there is frequent interaction and movement between various learning, work and recreational settings across our campuses, facilities and sites, as well as across many parts of Queensland, where vaccination rates are currently lower than in the South East corner of Queensland.

As we start to prepare for the possibility of increased community transmission, UQ is committed to the health and safety of our staff, students and others affected by our operations, while doing what we can to ensure that staff can continue to work, our research is not disrupted, and our teaching continues face-to-face as much as possible.

The student experience during 2020 was considerably poorer than in 2019. This was largely due to the impact of COVID-19 restrictions, on-line learning and the inability of students to come to campus in the normal way. Our research endeavours were also negatively impacted. It is important that UQ can restore its core businesses of teaching and research such that our students are able to safely return to learning on campus as much as possible and research activities can continue without disruption.

I have been asked to consider a risk assessment prepared by UQ's Health, Safety and Wellness Division. The risk assessment considers the risks to staff, students and others affected by UQ's operations in the context of this forecast increasing community COVID-19 transmission following the opening of Queensland's borders.

The risk assessment was prepared to comply with UQ's duty to ensure, so far as reasonably practicable, the health and safety of staff, students and others affected by UQ's operations and to minimise health and safety risks so far as is reasonably practicable.

There is a high potential of risk of harm to a proportion of the individuals exposed to COVID-19, including severe illness (and with potential long-term negative health effects) and death, and I consider this outweighs the very low risk (in comparison) of an adverse event from the COVID-19 vaccine.

UQ has, to date, been managing the risk of transmission of COVID-19 by complying with relevant Public Health Directions issued by the Queensland Government.

Given the opening of the Queensland border, and likely community transmission, the existing control measures are not alone sufficient to minimise the risk of transmission of, and the prevalence of serious illness and death from COVID-19 to as low as practicable at UQ's campuses, sites and facilities.

The risk assessment proposes a number of additional control measures that UQ could implement to reduce the risk of transmission of and the prevalence of serious illness or death from COVID-19 on its campuses, sites and facilities as far as is practicable. The lead control measure proposed is the introduction of a requirement that staff, students and others (excluding incidental visitors and those under 16) entering UQ campuses, facilities and sites must have been fully vaccinated against COVID-19 from 14 February 2022, when Semester 1 is due to commence next year.

Vaccinations are now readily accessible throughout Queensland, including vaccination hubs located at UQ's St Lucia campus, and vaccination clinics in the vicinity of other major UQ sites (e.g. Herston campus and at Woolloongabba).

The health advice accepted by the Australian governments is that vaccinations are highly effective at preventing serious health impacts arising from COVID-19. There are numerous studies that confirm the effectiveness of vaccination in reducing transmission and the likelihood of severe illness and death (noting that this position remains uncertain in relation to the Omicron variant). As such, vaccination presents a means for UQ to minimise risks to the health and safety of persons from COVID-19.

In making my decision, I have considered feedback from consultation about the proposed vaccination requirement and risk assessment with the Health and Safety Representatives, the JCC and the UQU. I have also considered the feedback and direct correspondence from two surveys to staff and students and the opinion of two Associate Professors on scientific literature raised by opponents of such a requirement.

I have preferred to rely on the health advice accepted by the State and Federal Governments and that highlighted to me by Associate Professors Kirsty Short and Linda Selvey that confirm the effectiveness of vaccinations in reducing transmission and the likelihood of severe illness and death. I would also say that, overall, there is overwhelming support for UQ to introduce a vaccination requirement. That is not to say that there aren't those that are stridently opposed to such a requirement.

I acknowledge the feedback of the UQU during consultation included that any measures implemented by UQ should align, where possible, with the restrictions imposed by the Queensland Government. The Queensland Government has based its roadmap to easing restrictions on the percentage of the population 16 years and over that have been vaccinated. In addition, vaccination has not been open to children between 12-16 for very long. In the interest of fairness, I consider it appropriate at this point in time for the requirement for vaccination against COVID-19 to apply to children 16 years and above, rather than 12 years and above, notwithstanding the fact that persons who are 12 years and above are now eligible to be vaccinated against COVID-19.

I also note the feedback from the NTEU, who sought assurances about the implementation of adequate ventilation in indoor workspaces as a control measure to minimise the risk of transmission and note that a control measure proposed provides for a ventilation review to be undertaken, commencing with UQ's most densely occupied spaces to make adjustments, where possible and feasible, to improve the ratio of fresh outside air to recirculated air.

Accordingly, I have decided to implement the requirement that, as from 14 February 2022, all staff, students and others 16 years and older (excluding incidental visitors) must be fully vaccinated against COVID-19 before they attend a UQ campus, site or facility, along with the other control measures proposed, in order meet UQ's obligations under the Work Health and Safety Act 2011 (Qld).

A person will be considered to be fully vaccinated if they have received the required number of doses of COVID-19 vaccines approved for use in Australia or recognised by the Therapeutic Goods Administration in line with the Queensland Government recommendations from time to time.

In my view, and in consideration of all of the evidence and materials, the decision to introduce a vaccination requirement is compatible with human rights under the HR Act as it limits human rights only to the extent that is reasonable and demonstrably justifiable.

As the requirement for vaccination against COVID-19 will apply to a broad cohort of people, I will ask that this requirement be contained in a procedure with which staff, students, honorary appointments, contractors, tenants and volunteers must comply. As a number of the recommended measures impact on UQ Sport and UQ-owned accommodation, the procedure should also apply to UQ's controlled entities. The procedure should reflect the recommendations in the risk assessment as well as providing for the operationalisation of the vaccination requirement, including details around data collection and compliance. I expect that consultation in relation to the new procedure would be undertaken in the usual course.

In my view, requiring vaccination will not amount to direct discrimination, as a refusal or unwillingness to submit to vaccination is not, on its face, a protected attribute. However, it is possible that a person with a protected attribute might claim a vaccination requirement imposes different requirements on them, which is unreasonable.

As a vaccination requirement might conceivably discriminate against persons based on disability (impairment), pregnancy, and age, I consider that the procedure containing a vaccine requirement should anticipate exemptions for medical conditions in line with current ATAGI guidance, and for children under 16 who may not yet have had an opportunity to, or are ineligible to, be vaccinated.

I acknowledge that a requirement to be vaccinated against COVID-19 may cause some angst for persons in our community, and UQ is committed to respectful discussions with staff and students and considering alternative work and study practices where it is reasonably practicable to do so, and where the health and safety of others can be maintained. However, I also note that compliance with procedures is mandatory, and where alternative work or study practices cannot be accommodated, compliance with the requirement will be expected.

I note that the collection and storage of information about vaccination status (and any other sensitive information) from those affected will be facilitated in a way that is compliant with relevant privacy obligations.

UQ takes its position as a leader in public health seriously. As a public institution and a leader in the contribution to vaccination research, the responsibility for the health, safety and wellbeing of our staff and students is of the utmost importance and contributes to the best outcomes for our broader community.

This decision will take effect on and from **20 December 2021**.