(1) West Chester University does not mandate that any student be vaccinated against COVID-19.

(2) The health care facilities where students complete their clinical requirements (an “affiliation site” or “clinical agency”) set their own rules for employees as well as students who work in clinical placements. The decision to require vaccination – along with all other participation requirements - is made by each clinical agency.

(3) As of the date of this Guidance, the majority of clinical agencies require the COVID-19 vaccination (and in some cases, a booster) to participate in clinical placements within their sites.

(4) Students enrolled in the program curriculum must complete clinical courses that have been approved by program’s specialized accreditation. Since most clinical agencies are requiring the COVID-19 vaccination, it is very likely that students who are not vaccinated will not be able to complete the curriculum with their cohort (or at all).

   • For example, even if an unvaccinated student completes one rotation at a site that allows for an exemption, the student might not be able to progress within the program (i.e., next rotation) if the agency for their next rotation is requiring the COVID-19 vaccination, but does not offer an exemption process.

(5) Clinical agencies may allow religious or medical exemptions to be considered. Exemption policies are set by the clinical agency.

   If a clinical agency permits student exemptions, and its policy requires review of the exception request by the agency, WCU is not involved in the exception review process, and students will deal directly with the agency on that matter.

   If a clinical agency permits student exceptions, and its policy requires review of exception requests by the placing institution, WCU will review and consider the exception according to University Policy.

   If additional clinical agencies are added to this category, WCU will inform students of this change.

(6) If there are no clinical agencies who will accept a student either because the student has not received a COVID-19 vaccination or the student’s request for an exemption from a vaccination requirement has been denied, and the student would not be able to continue with their program, WCU will seek to locate an alternative clinical placement. But because WCU cannot control the conditions established by clinical agencies, WCU cannot guarantee clinical placements – in specific clinical rotations– for unvaccinated students. As a result, it may be necessary for a student to pause their program curriculum for an undetermined time period.

   a. The establishment of new agreements with clinical agencies can take up to six months. In addition, even if WCU would enter into an affiliation agreement with a clinical agency that either does not require students to have a COVID-19 vaccine or it permits exemptions from such a requirement, there is no guarantee that the clinical agency would not change its vaccination
requirement in the future. Therefore, West Chester University may not be able to create new affiliation site agreements to allow unvaccinated students to continue in the program.

b. If applicable to individual program and specialized accreditation standards, students are not permitted to find their own clinical placements.

c. If applicable to individual program and specialized accreditation standards, students are not permitted to participate in clinical experiences that contain 100% simulation or lab.

(7) Should a student elect to pursue COVID-19 vaccination, their vaccination records must be updated with the department for records as soon as available. This will ensure the department will be able to onboard a student within the clinical agency in time for the next clinical rotation date, preventing a program progression delay.

STUDENT ATTESTATION

By signing this form, you acknowledge all the foregoing conditions, restrictions, and limitations that may be present if you have not received a COVID-19 vaccination.

_________________________________
Name

_________________________________
Signature

_________________________________
Date