



MILLE LACS BAND OF OJIBWE

Executive Branch of Tribal Government

EXECUTIVE ORDER 2022-04

An Executive Order Directing Mille Lacs Early Education to Comply with the United States Department of Health & Human Services' Interim Final Rule Titled "Vaccine and Mask Requirements To Mitigate the Spread of COVID-19 in Head Start Programs"

Section 1. Policy

On November 30, 2021, the United States Secretary of Health & Human Services issued an interim final rule modifying the Head Start Program Performance Standards to require (1) universal masking, with specified exceptions, for all individuals two years of age and older and (2) all Head Start staff, certain contractors, and volunteers in classrooms or who work directly with children to become fully vaccinated against COVID-19, with certain exemptions, and (3) for those granted an exemption to be tested for COVID-19 on a weekly basis.

The Secretary of Health & Human Services has designated Mille Lacs Early Education as a Head Start agency pursuant to 42 U.S.C. § 9836(a). As a designated Head Start agency, Mille Lacs Early Education must comply with the Head Start Program Performance Standards to maintain its designation. It is the policy of this Executive Order to maintain Mille Lacs Early Education's designation as a Head Start agency.

Section 2. Source of Authority

The Chief Executive issues this Executive Order pursuant to 4 MLBS § 6(e).

Section 3. Adoption of Vaccination Policy

This Executive Order hereby adopts the Mille Lacs Early Education Vaccination Policy and makes it applicable to Mille Lacs Early Education. The Commissioner of Administration and the Interim Executive Director of Education will implement the Vaccination Policy to ensure compliance with the interim final rule modifying the Head Start Program Performance Standards.

Section 4. Effectiveness

This Executive Order will effectuate upon issuance and remain in effect until January 21, 2024.

Issued on January 31, 2022:



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Melanie Benjamin, Chief Executive

Melanie Benjamin, Chief Executive

Mille Lacs Early Education Vaccination Policy

Section 1. Applicability and Scope

This policy applies to all staff, as defined in Section 2 of this policy, of Mille Lacs Early Education programs.

Section 2. Definitions

“Clinical contraindication” refers to conditions or risks that preclude the administration of a treatment or intervention. For COVID-19 vaccines, according to the United States Centers for Disease Control and Prevention, a vaccine is clinically contraindicated if an individual has a severe allergic reaction (e.g. anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine or an immediate (within 4 hours of exposure) allergic reaction of any severity to a previous dose or known (diagnosed) allergy to a component of the vaccine.

“COVID-19 (Coronavirus Disease 2019)” means the disease caused by SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2).

“Fully Vaccinated” means:

- (a) A person’s status 2 weeks after completing primary vaccination with a COVID-19 vaccine with, if applicable, at least the minimum recommended interval between doses in accordance with the approval, authorization, or listing that is:
 - (1) Approved or authorized for emergency use by the U.S. Food and Drug Administration (FDA);
 - (2) Listed for emergency use by the World Health Organization (WHO); or
 - (3) Administered as part of a clinical trial at a U.S. site, if the recipient is documented to have primary vaccination with the active (not placebo) COVID-19 vaccine candidate, for which vaccine efficacy has been independently confirmed (e.g., by a data and safety monitoring board) or if the clinical trial participant at the U.S. sites had received a COVID-19 vaccine that is neither approved nor authorized for use by FDA but is listed for emergency use by WHO; or
- (b) A person’s status 2 weeks after receiving the second dose of any combination of two doses of a COVID-19 vaccine that is approved or authorized by the FDA, or listed as a two-dose series by the WHO. The second dose of the series must not be received earlier than 17 days (21 days with a 4-day grace period) after the first dose.

“Staff” means paid adults, regardless of funding source, who have responsibilities related to children and their families who are enrolled in programs.

“Temporarily delayed vaccination” refers to vaccination that must be temporarily postponed, as recommended by the United States Centers for Disease Control and Prevention, due to clinical precautions and considerations, including, but not limited to, individuals with acute illness secondary to COVID-19, or individuals who received monoclonal antibodies or convalescent plasma for COVID-19 treatment in the last 90 days.

Section 3. Policy

The policies in this section are effective immediately.

(a) Masking Requirement

All individuals two years of age and older, regardless of program option, must wear a mask when:

- there are two or more individuals in a vehicle owned, leased, or arranged by the Head Start program;
- indoors in a setting when Head Start services are provided;
- and for those not fully vaccinated, outdoors in crowded settings or during activities that involve sustained close contact with other people¹.

Masks are not required to be worn when individuals:

- when individuals are eating or drinking;
- for children when they are napping;
- for persons who cannot wear a mask or cannot safely wear a mask because of a disability as defined by the Americans with Disabilities Act, consistent with guidance on disability exemptions issued by the U.S. Centers for Disease Control and Prevention; and
- for children with special health care needs, for whom programs should work together with parents and follow the advice of the child's health care provider for the best type of face covering.

(b) Vaccination Requirement

All staff, volunteers, and any contractors whose activities involve contact with or providing direct services to children and families must be fully vaccinated against COVID-19, except for those:

- for whom a vaccine is clinically contraindicated;
- for whom medical necessity requires a delay in vaccination; or
- who are legally entitled to an accommodation with regard to the COVID-19 vaccination requirement based on an applicable Federal law.

Any staff member, volunteer, or contractor who is granted an exemption under this requirement must provide proof of weekly testing for COVID-19. Weekly testing for COVID-19 is not, on its own, an exemption to the vaccination requirement.

Section 4. Determination of Vaccination Status

All staff must provide acceptable proof of vaccination. Acceptable proof of vaccination is:

- the record of immunization from a health care provider or pharmacy;
- a copy of the COVID-19 Vaccination Record Card;
- a copy of medical records documenting the vaccination;
- a copy of immunization records from a public health, state, or tribal immunization information system; and

¹ The U.S. Department of Health & Human Services' Office of Head Start notes that being outdoors with children inherently includes sustained close contact for the purposes of caring for and supervising children.

- a copy of any other official documentation that contains the type of vaccine administered, date(s) of administration, and the name of the health care professional(s) or clinic site(s) administering the vaccine.

Section 5. Exemptions

The Commissioner of Administration may authorize an exemption under this section. Any staff who are not fully vaccinated may request an exemption from the Commissioner of Administration pursuant to the processes described in subsections (a) and (b) of this section. If the Commissioner of Administration denies a request for an exemption, the aggrieved staff member may appeal the decision to the Nay-Ah-Shing School Board.

(a) Medical Exemption

Clinical contraindications and temporarily delayed vaccinations constitute medical exemptions under this policy. Staff members may request a medical exemption from this policy by providing to the Commissioner of Administration documentation that is signed and dated by a licensed practitioner, who is not the individual requesting the exemption, and who is acting within their respective scope of practice as defined by, and in accordance with, all applicable State and local laws, and contains:

- all information specifying which of the authorized COVID-19 vaccines are clinically contraindicated for the staff member to receive and the recognized clinical reasons for the contraindications; and
- a statement by the authenticating practitioner recommending that the staff member be exempted from this policy's requirements for staff based on the recognized clinical contraindications.

The Commissioner of Administration will verify that the documentation confirms recognized clinical contraindications and supports the staff member's request for a medical exemption. In addition to the supporting documentation described in this subsection, the Director of Human Resources will consider the United States Centers for Disease Control and Prevention's General Best Practice Guidelines on Contraindications and Precautions to determine granting a request for a medical exemption.

(b) Religious Exemption

Staff members may request a religious exemption from this policy if their compliance with this policy would substantially burden their religious exercise or conflict with their sincerely held religious beliefs, practices, or observances. Any staff member requesting a religious exemption must complete the Request for Religious Exemption Form and submit it to the Commissioner of Administration. The Director of Human Resources will provide copies of the Religious Exemption Form upon request.

Section 6. Information Storage

The Commissioner of Administration will track and securely store the following information:

- the vaccination status of all staff members, including whether they are fully or partially vaccinated; and
- all requests and any documentation related to such requests for an exemption under Section 5 of this policy, including whether such requests have been granted.