**Memo to Employees About Voluntary Vaccinations**

Date:

To:

From:

Subject: Voluntary Vaccination Policy

[Practice name] is implementing a voluntary vaccination policy effective [date] regarding COVID-19 vaccination(s) for employees. In accordance with [employer]’s duty to provide and maintain a workplace that is free of known hazards, we strongly encourage employees to receive this vaccination to minimize the risk of infectious disease in our workplace. In making this decision, [I/we] have reviewed recommendations from [insert department names or other organizations consulted such as the [Centers for Disease Control and Prevention](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html.), the Advisory Committee on Immunization Practices and local and state health officials].

Choose the best language for your situation:

Employees may obtain the vaccination wherever they choose.

[Employer] is facilitating vaccinations through [insert details regarding who will provide the vaccine and where employees can go to receive the vaccine].

Note to employer: Voluntary policies do not require an employer to pay employee costs associated with the vaccine or time obtaining the vaccine. However, employers who encourage employees to obtain the vaccine may consider reimbursement of costs and compensation of time to obtain it in order to remove any barriers for employees who may be reluctant to receive the vaccine.

Optional language: [Employer name] will pay for all vaccinations and the time spent receiving the vaccinations.

Should you have any questions regarding this new policy, please contact [name and contact information].