

Mandatory Vaccination Policy update

December 2021



Why we introduced a Mandatory Vaccination Policy for SA based employees



1 Unprecedented health tragedy

>240k excess deaths since May 2020
>15k client deaths
22 employee deaths

2 COVID-19 vaccines are effective and safe

Compared to those who are unvaccinated:

79% lower risk of infection
92% lower risk of hospitalisation
94% lower risk of death

<1 in 20

Discovery members showed any signs of side-effects

3 Public health imperative

Virus spreads slower in large vaccinated populations, and in large unvaccinated populations increases risk of variants

4 Issue is no longer one of limited access to vaccines, but one of hesitancy

80% of population can be vaccinated with the doses of Pfizer and J&J that SA secured
Slow take up in younger ages

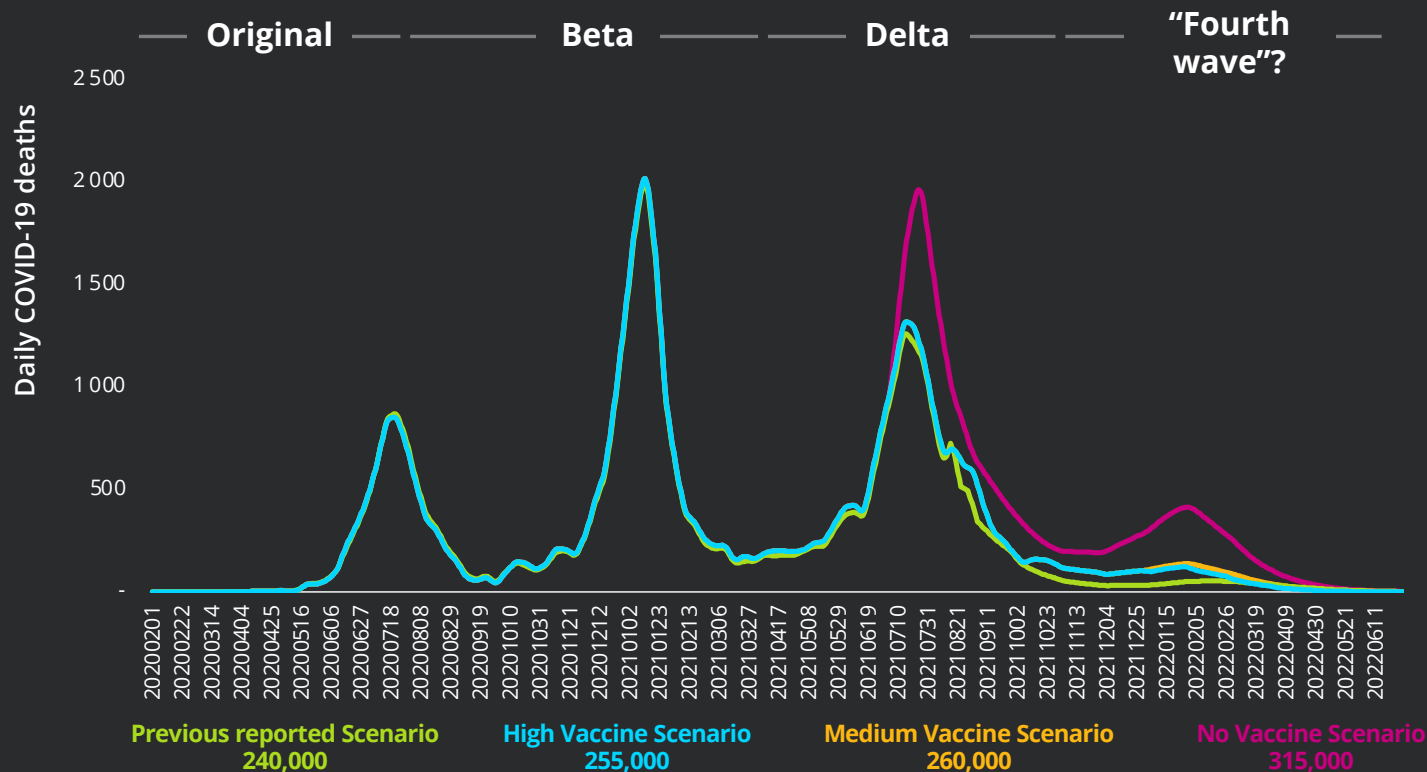
5 Modelling of fourth wave showed it was likely in December, and sensitive to vaccine take-up

55k additional deaths in a scenario without vaccines

COVID-19 has been an unprecedented health tragedy; with the fourth wave posing further risk



Incremental deaths under different scenarios



To date:

242k National deaths
(90% excess deaths)

15k Member deaths

22 Staff deaths

By June 2022, at the end of the 4th wave, ~16k incremental deaths expected under the medium scenario

There would have been 55k additional deaths in a scenario without vaccines

Data unequivocally supports efficacy of vaccination against COVID-19



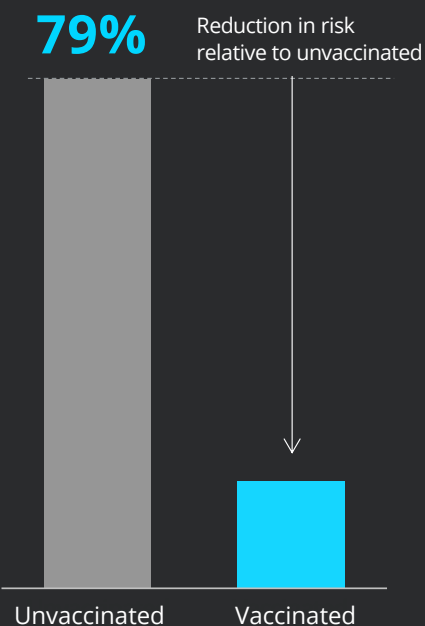
Vaccine is >90% effective in reducing death

Discovery Health data on vaccine effectiveness

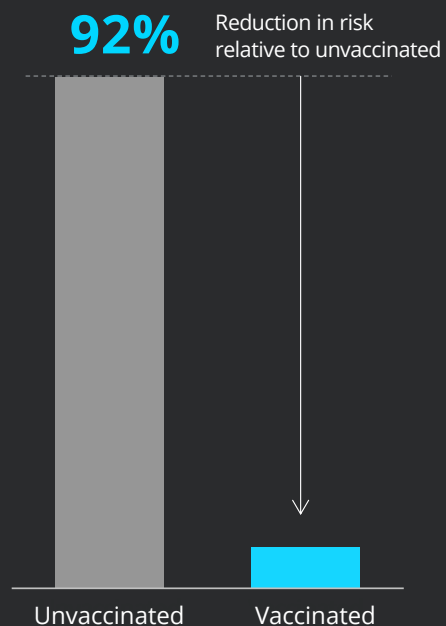
Study parameters

17 May – 23 Sept 2021	study duration
1.7m	unique COVID-19 data points
1.2m	vaccinated adult medical scheme members
526 516	COVID-19 PCR test results (pathology)
223 367	documented COVID-19 infections
14 673	COVID-19 hospital admissions
3 441	COVID-19 deaths

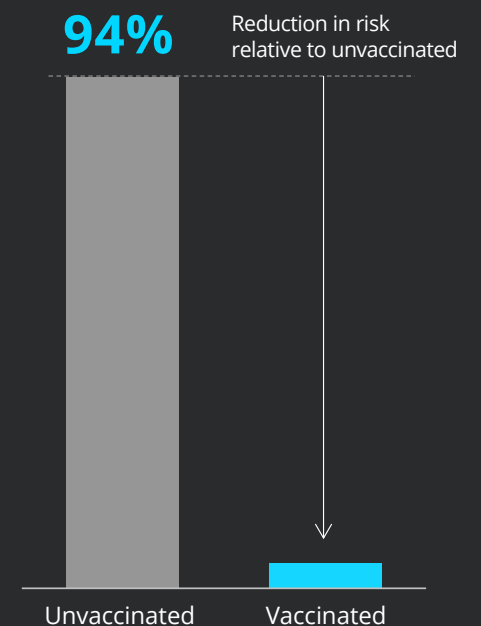
Confirmed infection



Admission

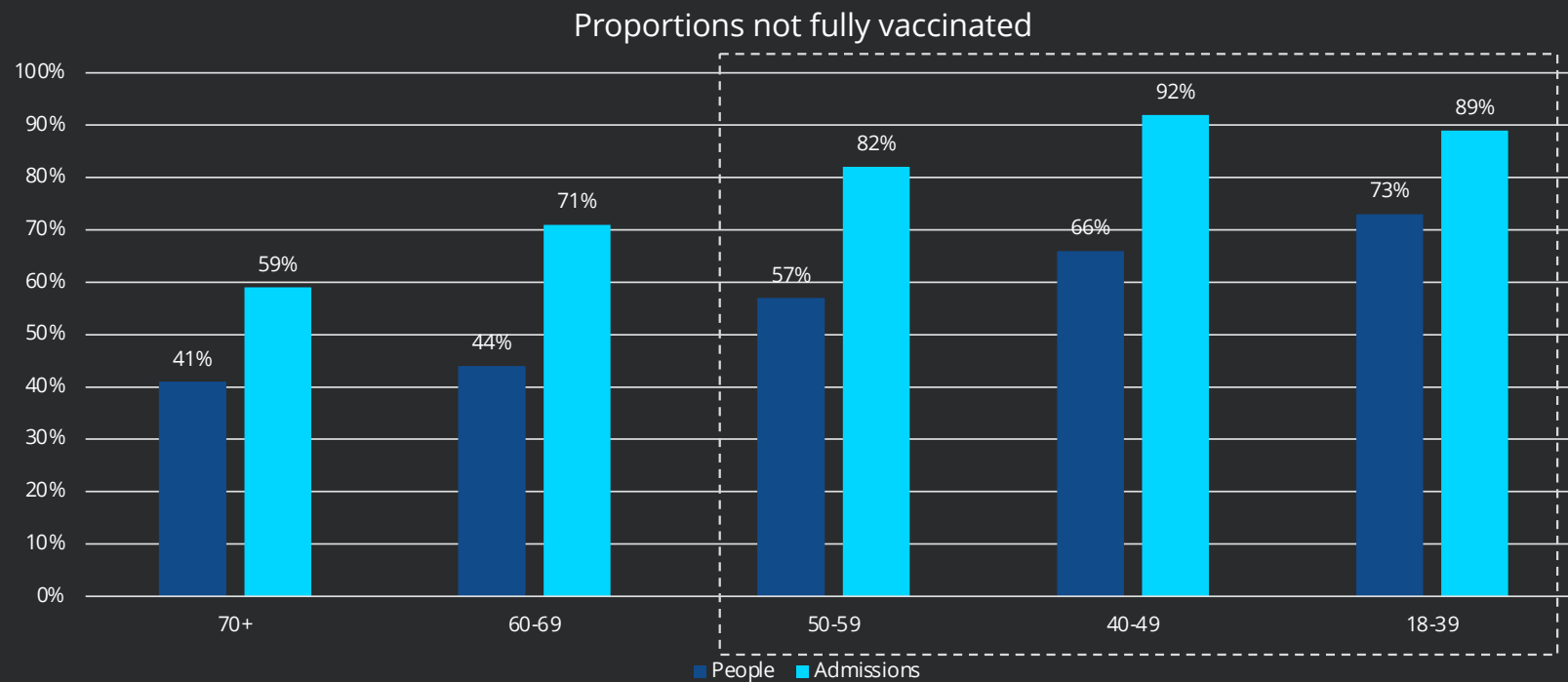


Death



*Pfizer vaccine 14 days – 99 days after second dose. Excludes data on members vaccinated in the public sector post September 2021. To be submitted for peer review and publication
Source: Discovery Health Insights <https://discv.co/DiscoveryHealthInsights>

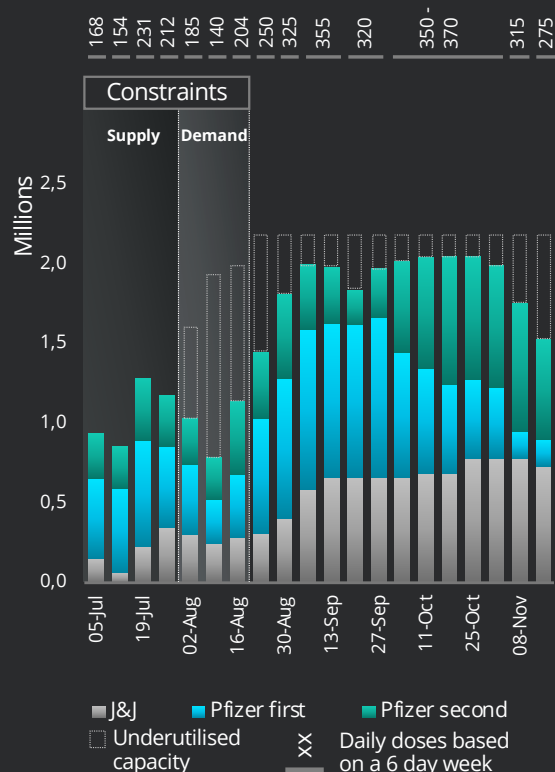
Higher proportion of Covid-19 admissions across unvaccinated and partially vaccinated populations



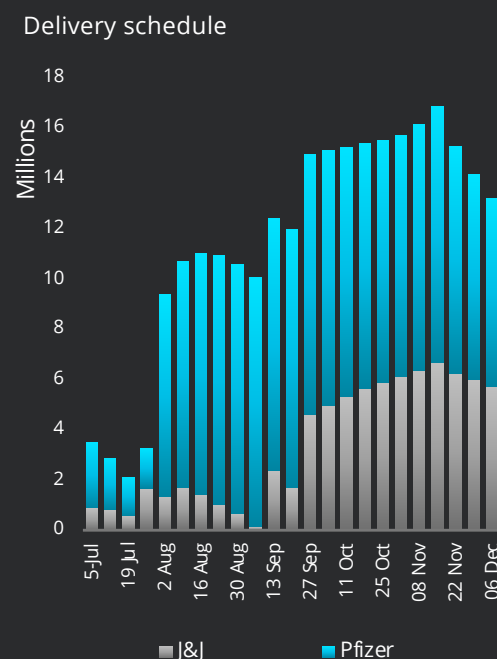
SA has capability to vaccinate at scale given our infrastructure and vaccine supply – issue is now one of hesitancy



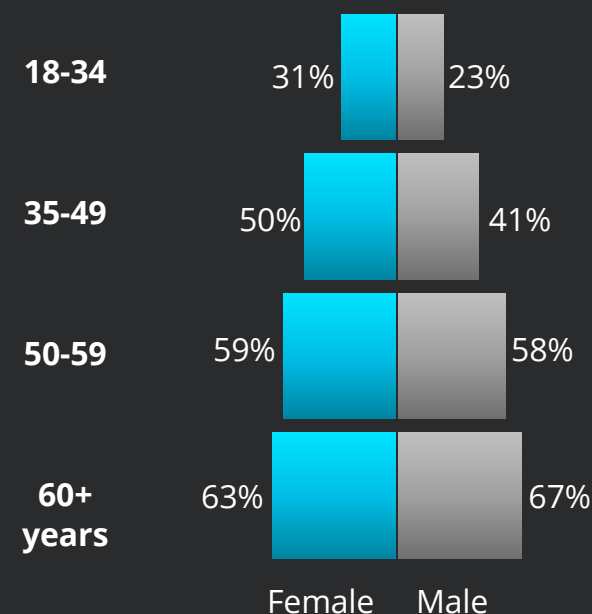
Vaccination Profile (doses)



Stock Profile



Individuals vaccinated as % of adult population by age group and sex



25.5m vaccinations delivered to-date
 41% SA adult population vaccinated (61% DSY members)
 65% of SA over 60 years population vaccinated

Public health imperative



Virus spreads slower in vaccinated populations; increased risk of variants in unvaccinated populations

Vaccines:

Lower individual risk of infection \times **Lower risk of transmission** $=$ **Lower overall infection risk**

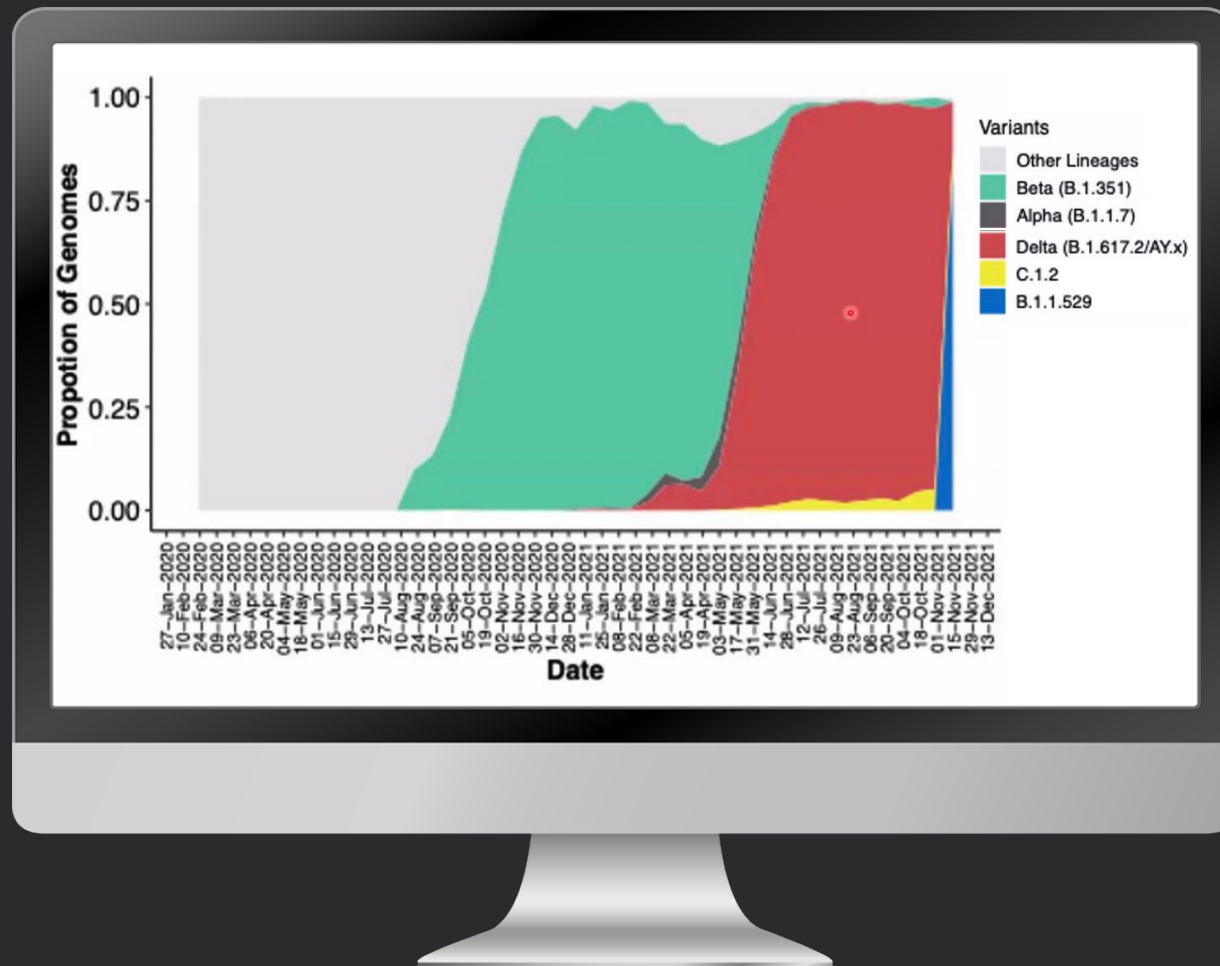
“ SARS-CoV-2 has shown that it can mutate into many variants of the original agent. An **unvaccinated pool of individuals provides a reservoir for the virus to continue to grow and multiply**, and therefore more opportunities for such variants to emerge. When this occurs within a background of a largely vaccinated population, **natural selection will favour a variant that is resistant to the vaccine**

The real danger is a future variant, which will be the **legacy of those people who are not getting vaccinated providing a breeding ground for the virus to continue to generate variants**. A variant could arise that is resistant to current vaccines, rendering those already vaccinated susceptible again

PNAS Proceedings of the National Academy of Sciences of the United States of America

”

New variant B.1.1.529 is spreading quickly



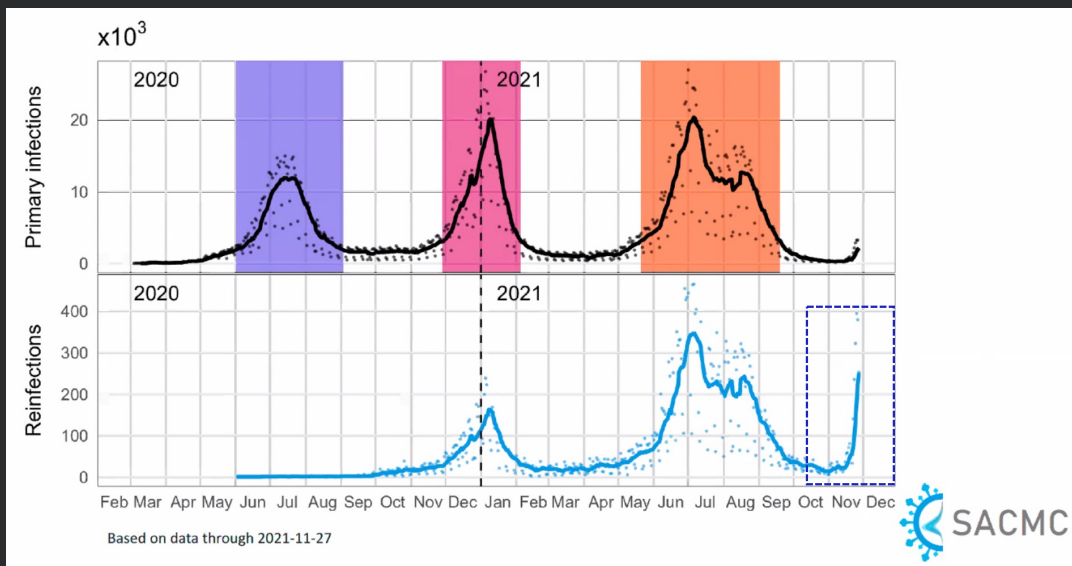
- Extensive mutations in the area of the spike protein
- Potential increased transmissibility and severity of disease
- Potential reduction in vaccine efficacy, likely preserved T-Cell response

Vaccination widely regarded as primary mitigant to severe disease and death

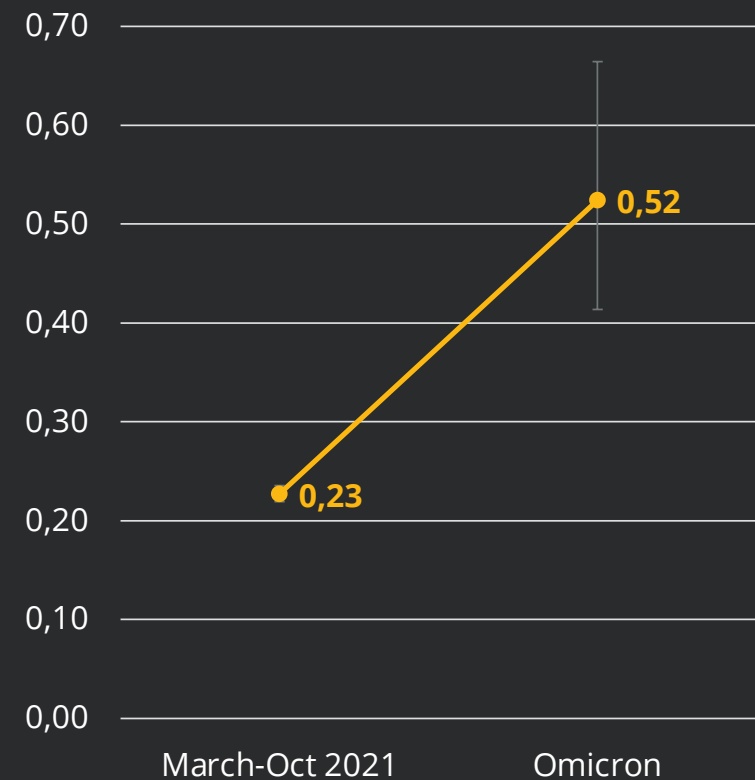
Protection as a result of prior infection appears to have declined from 77% to 48% as a result of Omicron variant



Re-infection trends



Infection risk after prior infection



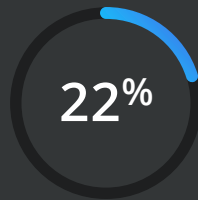
Discovery Employee Vaccinations

3 SEPTEMBER 2021

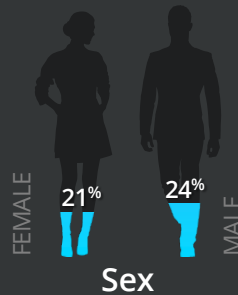
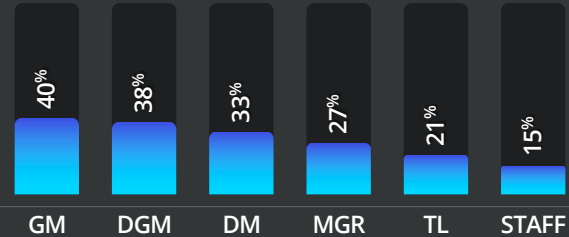


Discovery Overall

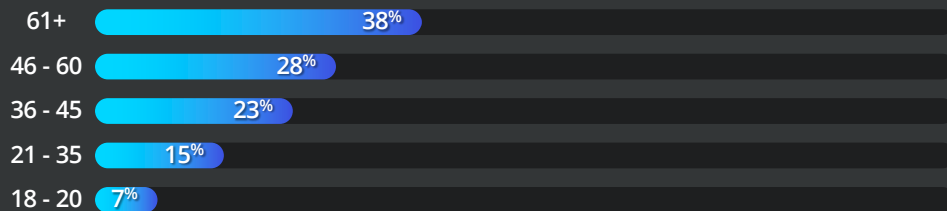
2,177
EMPLOYEES VACCINATED



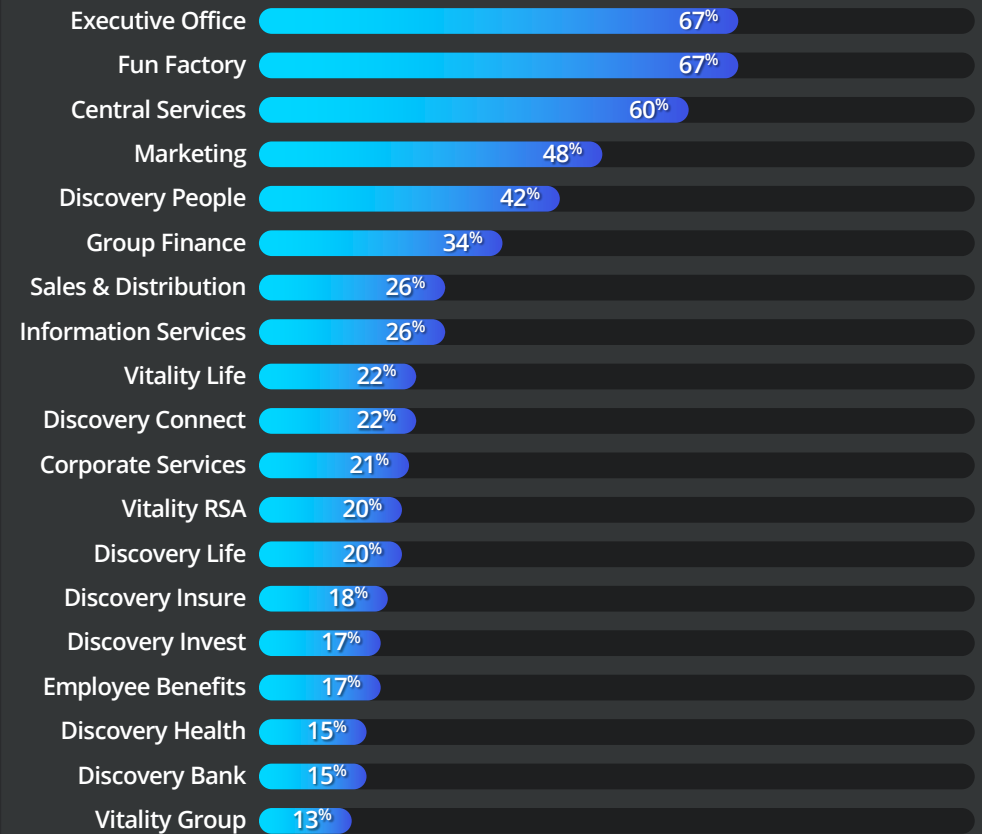
Job Level



Age Group



Business Unit Breakdown



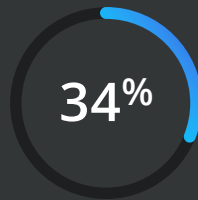
Discovery Employee Vaccinations

20 SEPTEMBER 2021

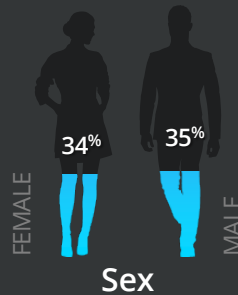


Discovery Overall

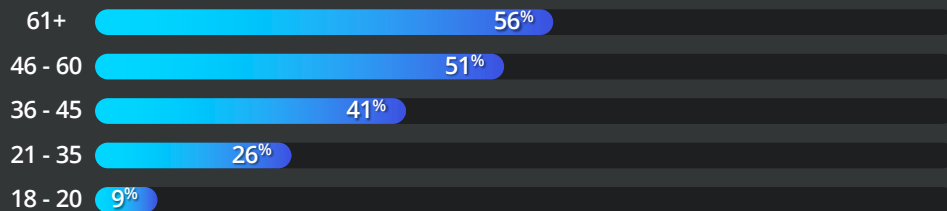
3,364
EMPLOYEES VACCINATED



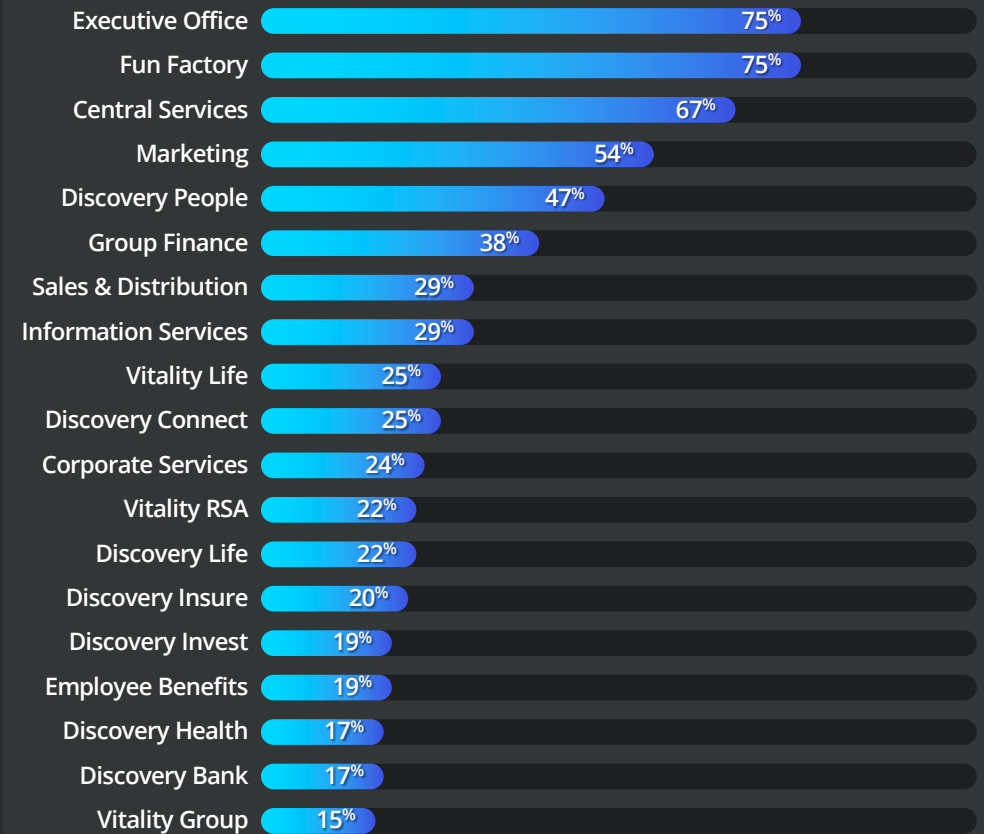
Job Level



Age Group



Business Unit Breakdown



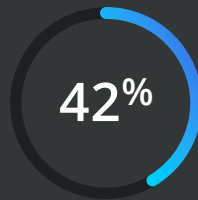
Discovery Employee Vaccinations

1 OCTOBER 2021

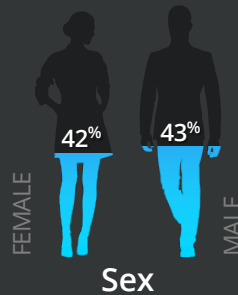


Discovery Overall

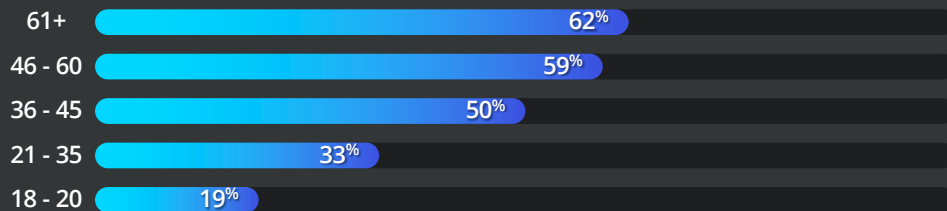
4,375
EMPLOYEES VACCINATED



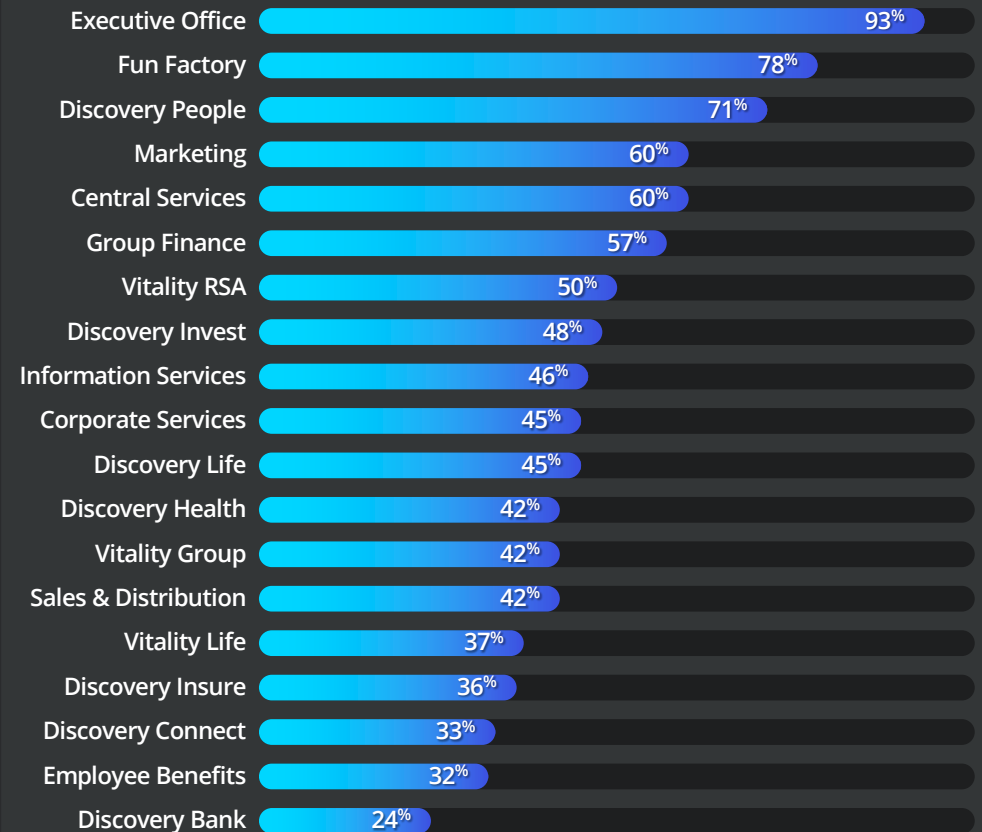
Job Level



Age Group



Business Unit Breakdown



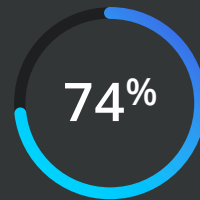
Discovery Employee Vaccinations

14 OCTOBER 2021

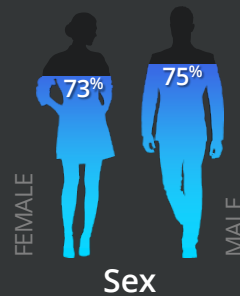


Discovery Overall

7,794
EMPLOYEES VACCINATED



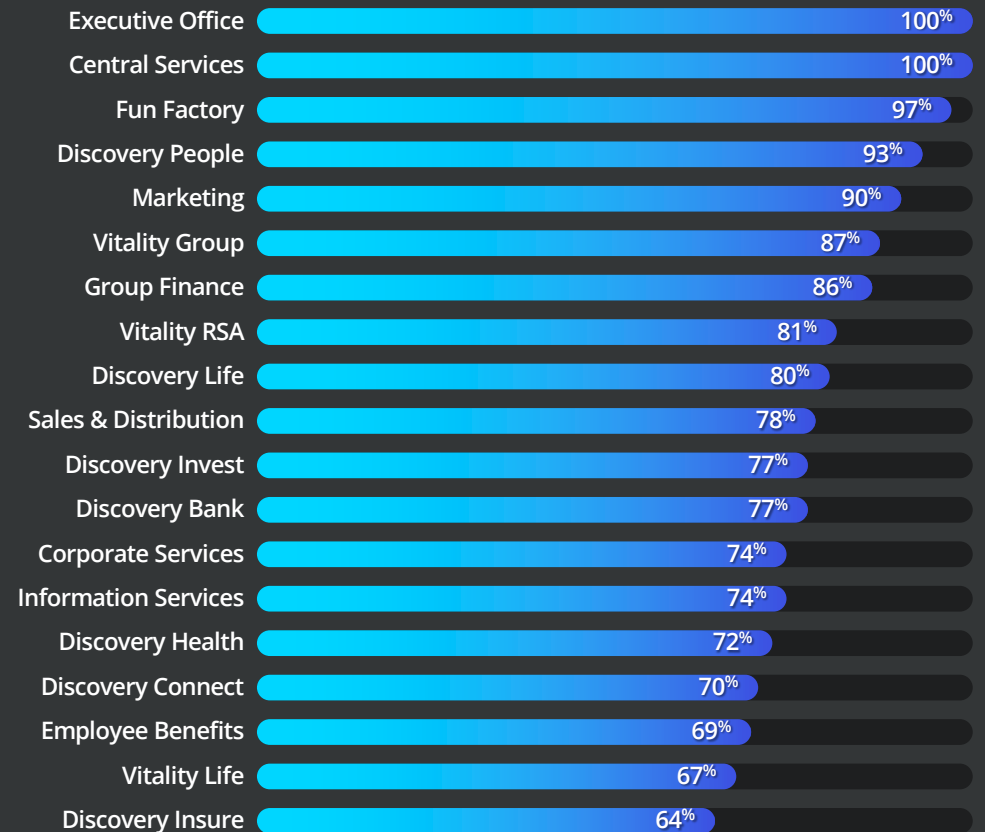
Job Level



Age Group



Business Unit Breakdown



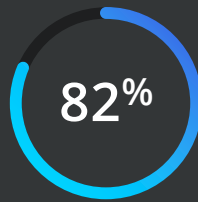
Discovery Employee Vaccinations

29 OCTOBER 2021

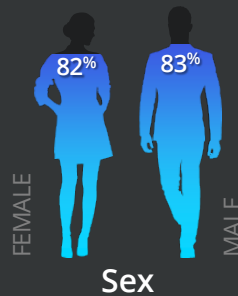
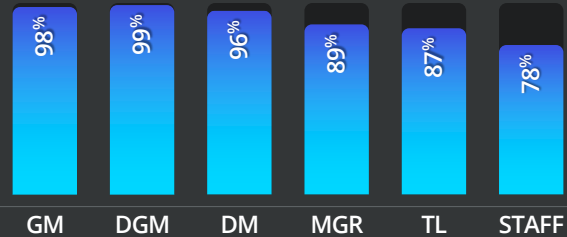


Discovery Overall

8,632
EMPLOYEES VACCINATED



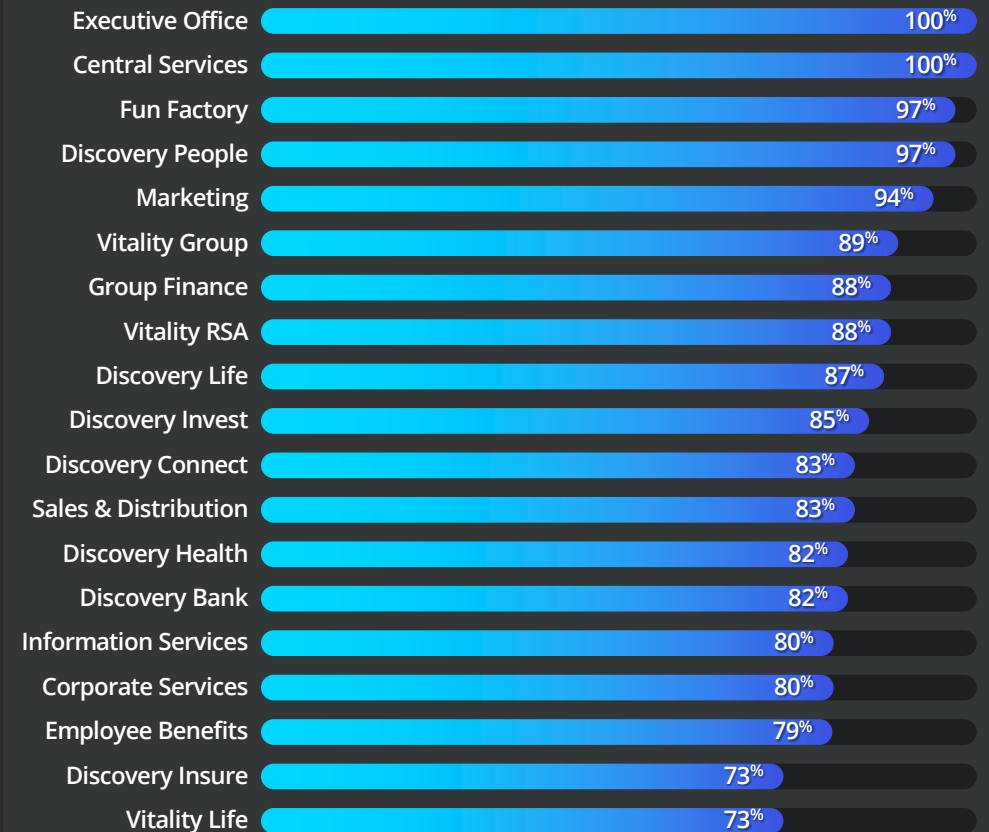
Job Level



Age Group



Business Unit Breakdown



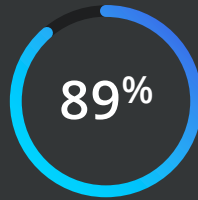
Discovery Employee Vaccinations

12 NOVEMBER 2021

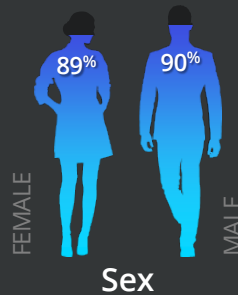
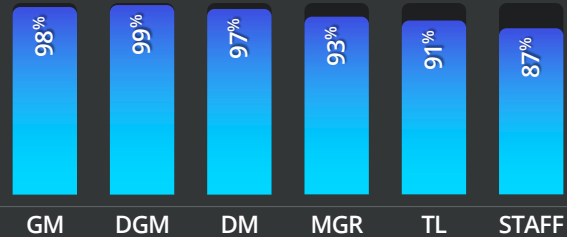


Discovery Overall

9,422
EMPLOYEES VACCINATED



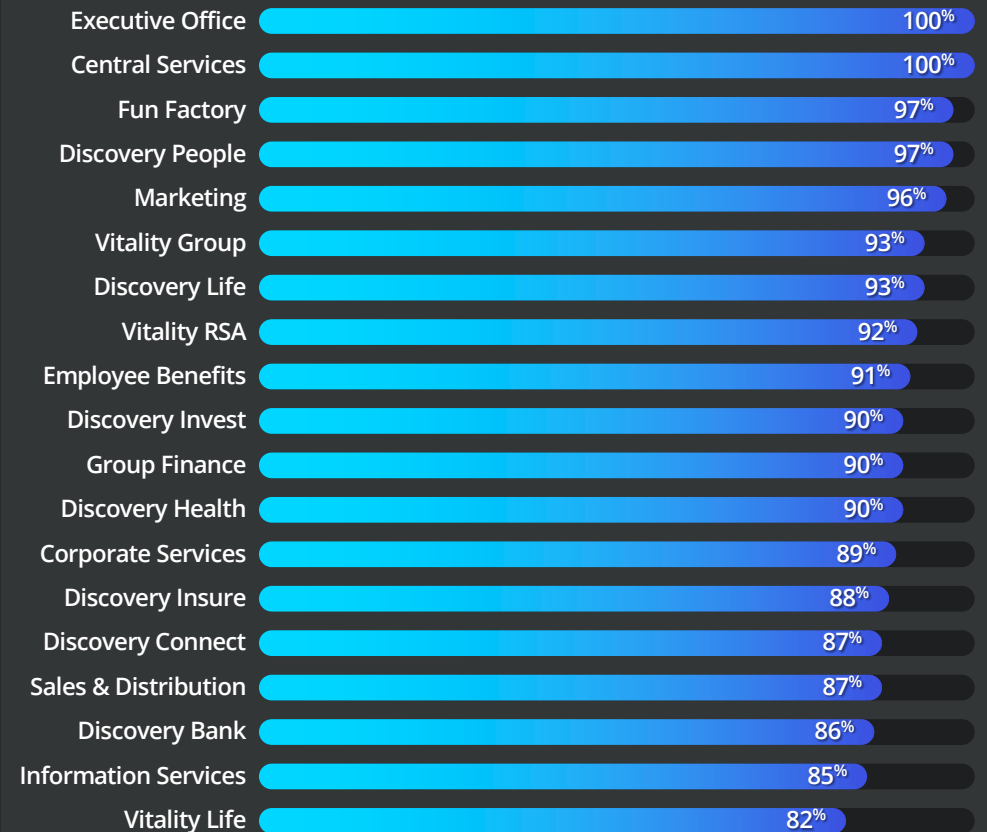
Job Level



Age Group



Business Unit Breakdown



Discovery Employee Vaccinations

26 NOVEMBER 2021

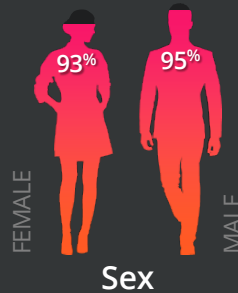
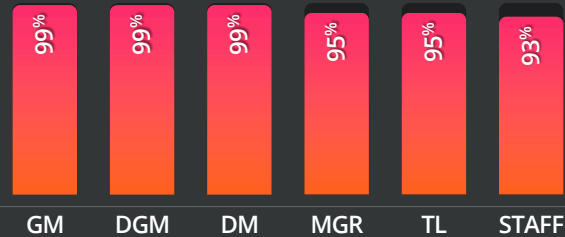


Discovery Overall

9,897
EMPLOYEES VACCINATED



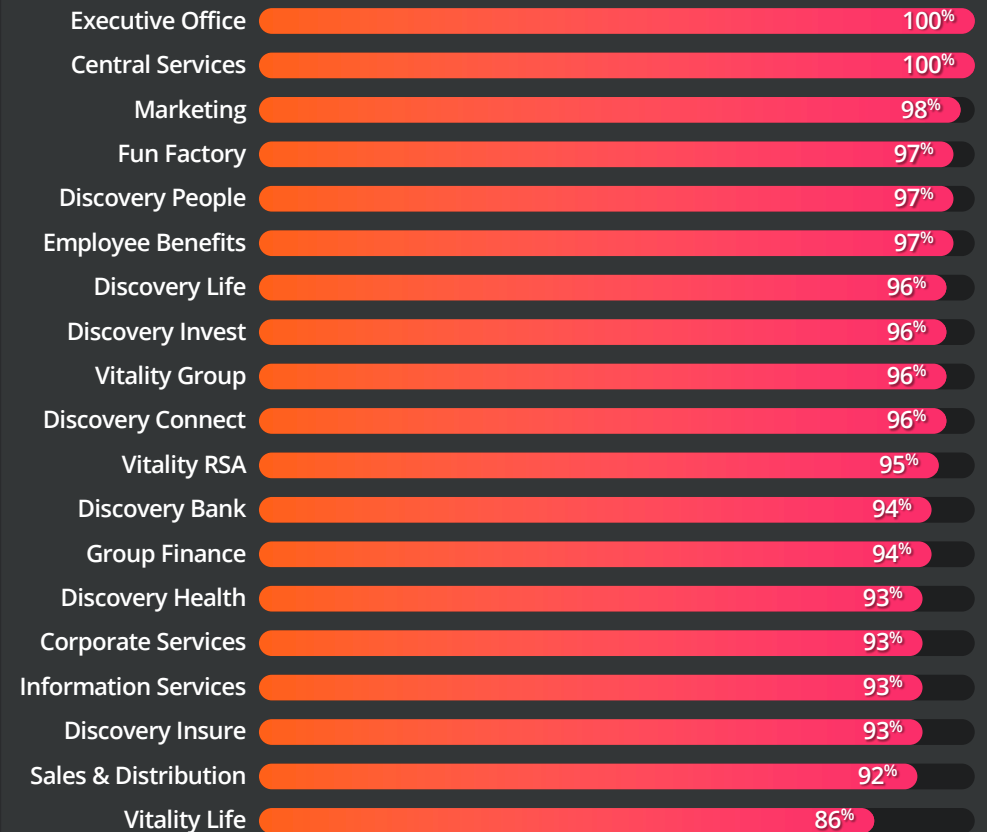
Job Level



Age Group



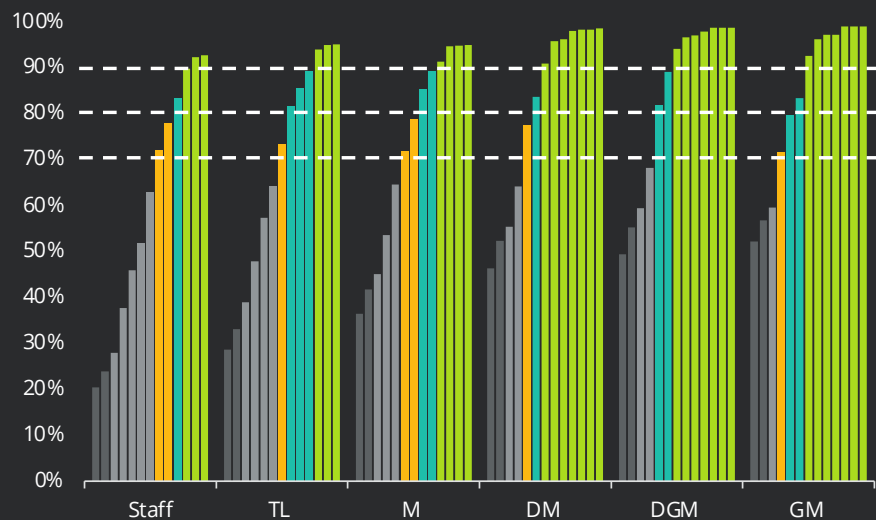
Business Unit Breakdown



Rate of vaccinating increased rapidly for lower level staff and younger ages over the last few weeks



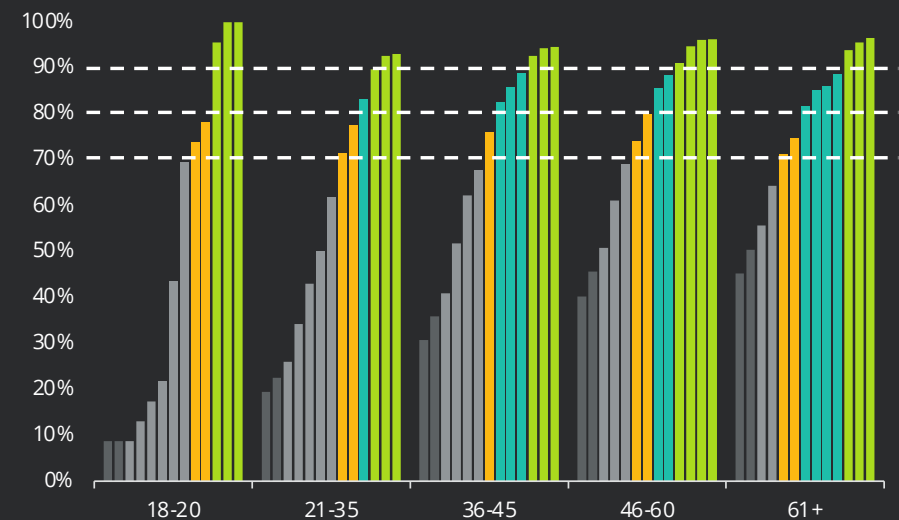
Senior staff got vaccinated earlier, but rapid increase for lower levels in past 4 weeks



Weeks to:

>70%	8	7	6	5	5	4
>80%	10	8	8	6	5	6
>90%	12	11	10	7	7	7

Older staff got vaccinated earlier (in line with eligibility), rapid increase for younger staff



Weeks to:

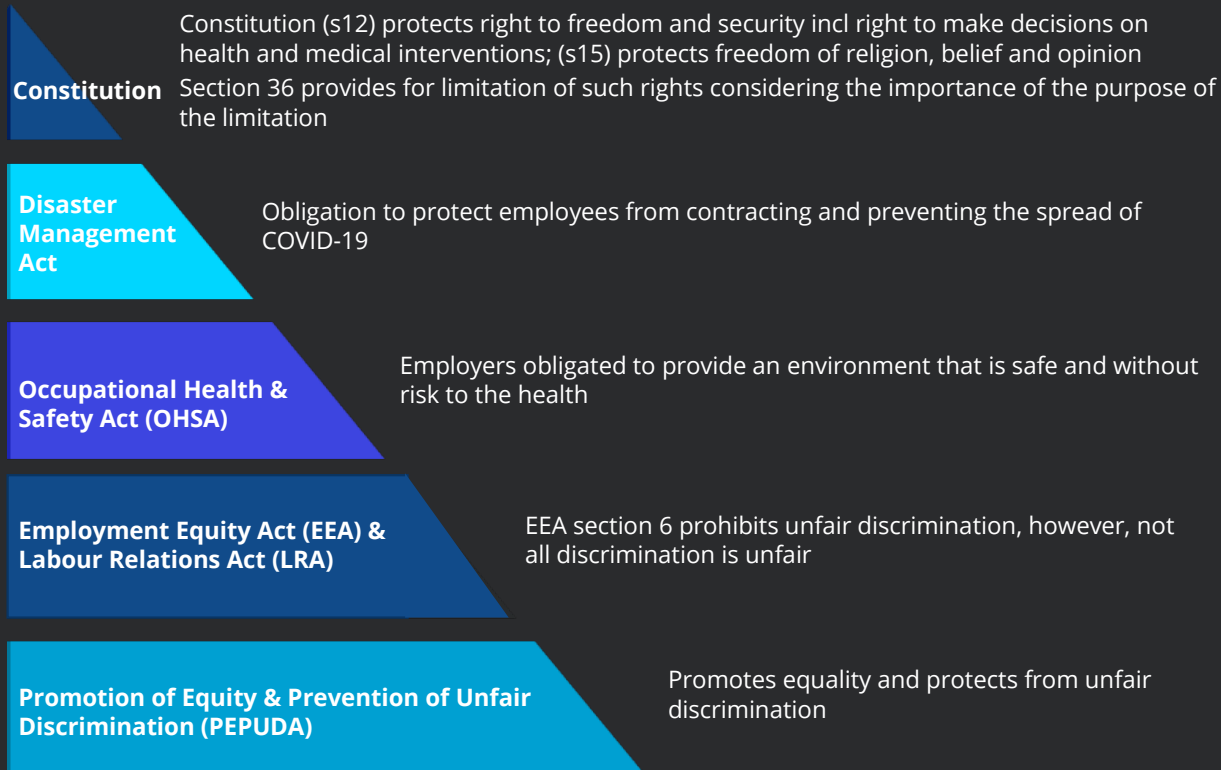
>70%	9	8	7	6	5
>80%	11	10	8	7	7
>90%	11	12	11	10	11

<70% at least one dose
 70-80% at least one dose
 80-90% at least one dose
 >90% at least one dose

Due diligence supported the legal and moral justification and defensibility of our position



Main legal frameworks for mandatory vaccination



Main legal, moral and ethical principles for mandatory vaccination

1. **All employees have rights** (not only unvaccinated employees)
2. **Employers and businesses also have rights**
3. **Rights are not absolute** (rights can be limited if in the broader public and societal interest)
4. **Employers have a legal and moral obligation to provide a safe workplace** (incl. protection from hazardous biological agents)
5. **Unfair discrimination avoided through:**
 - **Objections and exceptions process**
 - **Reasonable accommodation**

Mandate structure



Policy implementation principles

1) Mutual respect

Implement vaccination policy in strict accordance with mutual respect between employer and employee and in alignment with our values as an organisation

2) Balance the rights of all employees

Concerted effort to balance individual rights and liberties of all employees (vaccinated and unvaccinated) with the operational and broader stakeholder obligations of the business

3) Reasonable accommodation

Structured process to consider objections on the basis of constitutional rights and concerted effort to explore reasonable accommodation if and when required

4) Proactive engagement

Regular and proactive discussion and engagement to discuss and refine the implementation of the policy and to provide information and support to employees

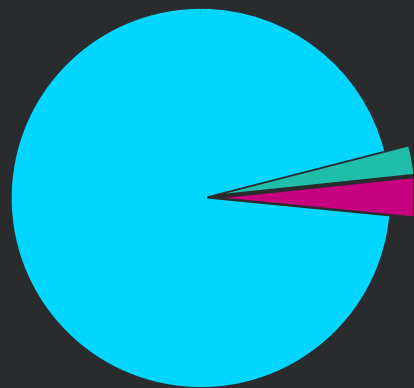
	September	October	November	December
Educating	<ul style="list-style-type: none"> Access to hesitancy content My COVID experience - hear from your colleagues Join Mia Malan to answer your COVID-19 vaccine questions 	<ul style="list-style-type: none"> Dr Ron in conversation with CEO of SAHPRA Vaccines unpacked with Prof. Glenda Gray COVID-19 vaccines and fertility, pregnancy and breastfeeding 	<ul style="list-style-type: none"> COVID-19 vaccines and children 	
Supporting & encouraging	<ul style="list-style-type: none"> Launch of enablers e.g. childcare and Uber vouchers One on one clinical consultations Don't miss out on having your COVID-19 vaccine questions answered by experts 	<ul style="list-style-type: none"> Manager outreach-emails and one-on one's One on one clinical consultations COVID-19 vaccination policy and objections - what you need to know 	<ul style="list-style-type: none"> One on one clinical consultations Exec outreach-emails and one-on one's 	
Nudging	<ul style="list-style-type: none"> Outbound calls campaign- nudging and reminding Make your job count on SmartPeople 	<ul style="list-style-type: none"> Outbound calls campaign- nudging and reminding Team and BU incentives Weekly BU Vaccination Leaderboard 	<ul style="list-style-type: none"> Personalised CEO outreach 	
Objections process		<ul style="list-style-type: none"> Policy understanding support Objections' guidelines & templates 	<ul style="list-style-type: none"> Constitutional sub-committee review & decision meetings Unvaccinated non-compliant employees issued formal letter to comply on or before 31 Dec 2021 	<ul style="list-style-type: none"> Reminder to unvaccinated non-compliant employees to vaccinate by 31 Dec or face disciplinary process and no access to the office from 1 Jan '22*

*Unless reasonable accommodation agreement

Current position as at end November



94.4% Vaccinated
9 919 Employees



■ Vaccinated : 9 919
■ Planned : 246
■ Objections : 337

2.3% Planned
246 Employees

3.2% Objections
337 Employees

Process:

Medical 26%

Body integrity 39%

Religious 17%

Other 17%

Cultural 2%

Medical concerns and contra-indications incl. potential allergic reaction or known allergy to component of the vaccine

Constitutional right reasons, like where the culture's or religion's stance may prohibit vaccination

➤ **Independent clinical review** and research of available clinical evidence and data

Active exploration and engagement
Determine whether vaccination goes against a **central tenet of the religious or cultural community** and the **employees' sincerity of practice**

Refer to:

- case law and precedents in nuanced cases e.g. religious or cultural complexity
- Religious scholars
- Bioethics and constitutional experts

97% vaccinated if we can convince 40% of employees with objections (c135) and get 63% of the planned (c156) to vaccinate

Key learnings



1. Clear 'why' – safest possible spaces
2. Consideration of rights of everyone
3. Extensive engagement, multiple channels
4. Structured objections process
5. Visible and active senior leadership

Mandatory Vaccination Policy update

December 2021

