

22 July 2021

Dear \_\_\_\_\_

**Termination of employment with \_\_\_\_\_**

I am writing to inform you that \_\_\_\_\_ has made the very difficult decision to terminate your employment on the basis of your failure to comply with its lawful and reasonable direction to receive the COVID-19 vaccination.

Before making this decision we carefully considered your 2 July 2021 response (**Response**) to our 16 June 2021 letter (**Show Cause Letter**). Also, you provided further information on 21 July 2021, after you were informed of our meeting to discuss the outcome of the show cause process. We consider that prior to this you have been given ample opportunity to provide a response to the Show Cause Letter. Despite this, we have also considered this additional information, where relevant. Set out in the attached schedule is our response to the relevant matters you have raised in your Response and any additional material you have provided in your email of 21 July 2021. To avoid unnecessary repetition, we have not responded in detail to matters that have been addressed in previous correspondence (although we confirm that we have considered each of these matters in reaching our decision).

In relation to the potential for you to take some long service leave, we previously considered this as an alternative option for all affected employees (including you). However we determined that it was not operationally possible for you to take a period of long service leave at this time, which is why we did not raise this with you during this process. This is because we do not currently have the resources to cover a period of leave. As you know periods of annual and long service leave are planned well in advance in accordance with our rosters.

We confirm that the direction to receive the COVID-19 vaccination is to:

- comply with the Designated COVID-19 Hospital Network Direction (**Direction**);
- comply with the \_\_\_\_\_ COVID-19 Vaccination Policy (**Policy**); and
- to ensure the health and safety of our staff (including you), patients (who are regularly high acuity patients), and the community.

Healthcare workers face a higher risk of COVID infection and illness compared to the general population and might also, unwittingly, be responsible for transmitting the virus to the vulnerable population in our care. \_\_\_\_\_ has assessed the risks of rostering an unvaccinated pilot to operate on our emergency rotary wing aeromedical service and determined that in the circumstances those risks are not acceptable. These risks include the risks to you, our patients, and the community which are detailed below.

Your role requires that you operate in the relatively small and confined space of an aircraft with regular visitations to hospitals to retrieve and deliver seriously ill and injured patients, including entry into hospital services, the provision of intermittent care to patients, and loading and unloading

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of patients from the aircraft. You also have an obligation to ensure that at all times the well-being and safety of all staff, aircrew, passengers and patients is given highest priority.

\_\_\_\_\_ is not prepared to place an unvaccinated employee into a work environment where they have an increased risk of exposure to a highly contagious disease when there is a vaccination available to mitigate this risk, and the employee has no valid reason (such as a medical condition) which prevents them receiving the vaccination. With the introduction of the Delta strain of COVID-19 into the community the risk of infection has dramatically increased by a factor of 60% to 70%, which the Queensland Chief Health Officer has described as 'almost impossible to contain.'

\_\_\_\_\_ is contracted primarily to retrieve high acuity patients and transfer them to a specialist tertiary hospital services to meet their specific clinical needs. \_\_\_\_\_ cannot put these patients at risk through the inclusion of an unvaccinated pilot in their aeromedical transfer. Even if you are excluded from transporting COVID-19 patients, the risk of you unknowingly transmitting the virus to non-COVID-19 patients (ie as an asymptomatic COVID-19 carrier), is unacceptable to \_\_\_\_\_.

Further, it is an unacceptable risk for \_\_\_\_\_ that you contract COVID-19 in the performance of your role in a high acuity health services environment and transmit it to other members of staff or the community.

#### **Next steps**

\_\_\_\_\_ will not require you to work out your notice period, and your employment will end immediately with payment in lieu of notice. We hope that payment in lieu of notice will go some way towards mitigating the effects of the termination on you. Your final pay will be processed by Tuesday 27 July 2021.

We ask that you make arrangements to return your company property by Friday 30 July 2021, which can be arranged through Base Lead \_\_\_\_\_.

Head of Flying Operations, \_\_\_\_\_, has agreed to act as a verbal reference for you should you require one in seeking alternative employment, and a positive, complimentary reference will be provided. We also wish to extend to you the services of \_\_\_\_\_'s EAP. If there is anything further we can do to support you during this time, please feel free to contact me.

We again reiterate that this has been a very difficult decision and not one that \_\_\_\_\_ has reached lightly. We wish you well in the future.

Yours sincerely

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Director, Human Resources, Commercial Projects & External Relations