# Executive Board

(Systemwide Senate Review) Presidential Policy – University of California – Policy on Vaccination Programs

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Re: Systemwide Review of Presidential Policy – University of California – Policy on Vaccination Programs

Dear Colleagues:

On August 16, 2023, the Policy on Vaccination Programs – With Interim Revisions was issued as instruction resumed and prior to the influenza season. The interim revisions move the University’s COVID-19 vaccination program to a systemwide opt-out program for all covered individuals. The University’s seasonal influenza vaccination program remains an opt-out program. We are now initiating the formal Systemwide Review and consultation process to finalize this Presidential Policy (enclosed).

Background and Key Policy Revisions

Since the University first issued its COVID-19 vaccine policy in December 2020, the University has continued to monitor changing public health conditions, and the policy has undergone regular review, comment, and updates. For example, the policy was updated with interim amendments on August 30, 2022 and again on December 12, 2022. The Systemwide Review period for those draft policies started on September 16, 2022 and continued through January 31, 2023, and the University considered the feedback provided in connection with that review.

There have been significant changes in federal and State public health guidance regarding COVID-19 since the last Systemwide Review period. The federal Public Health Emergency ended on May 11, 2023, along with the COVID-19 vaccination requirements for federal employees and federal contractors. California’s COVID-19 State of Emergency ended on February 28, 2023, and the California Department of Public Health rescinded its health care worker vaccination requirement effective April 3, 2023.

This draft policy is virtually identical to the policy with interim revisions that was issued on August 16, 2023. Key revisions include:
• Policy will require covered individuals to either be up-to-date on COVID-19 vaccination or to opt out of COVID-19 vaccination. In the event applicable law or public health orders impose stricter vaccination requirements, such as for healthcare workers, the policy will continue to require compliance with those stricter requirements.
• As policy will no longer require covered individuals to either be up-to-date on COVID-19 vaccination or receive a University-approved exception, model forms and other content regarding the exception process were removed.
• COVID-19 vaccination program implementation guidelines were removed. Relevant language regarding vaccination data moved to main policy. Policy noncompliance language added to main policy, including citations to relevant University policies.
• Removed content regarding rescinded California Department of Public Health (CDPH) health care worker vaccine requirement.
• Updated language consistent with current public health usage. Removed outdated deadlines and content.

The revisions were made in consultation with Systemwide Human Resources, Academic Personnel and Programs, UC Health, and UC Legal.

Systemwide Review

Systemwide Review is a public review distributed to the Chancellors, the Chair of the Academic Council, the Director of the Lawrence Berkeley National Laboratory, and the Vice President of Agriculture and Natural Resources requesting that they inform the general University community, especially affected employees, about policy proposals. Systemwide Review also includes a mandatory, 90-day full Academic Senate review.

Employees should be afforded the opportunity to review and comment on the draft policy. Attached is a Model Communication which may be used to inform non-exclusively represented employees about the draft policy. The University will adhere to its bargaining obligations, if any, that may exist in connection with the adoption of this policy. Accordingly, the University will follow appropriate procedures with respect to represented employees and the Office of the President’s Systemwide Labor Relations office will coordinate that process.

The Systemwide Review period for the Presidential Policy – Policy on Vaccination Programs draft policy is September 15, 2023 through December 15, 2023. The draft policy is posted on UCNet.

Comments should be submitted to vaccinepolicycomments@ucop.edu.

Questions from staff should be directed to location HR Policy Coordinators. Questions from academic personnel should be directed to location academic personnel policy coordinators. Location questions related to staff employees may be directed to Olga.Zundel@ucop.edu and Abigail.Norris@ucop.edu. Location questions relating to academic personnel may be directed to Tiffany Wilson at Tiffany.Wilson@ucop.edu.
Sincerely,

Douglas M. Haynes
Vice Provost
Academic Personnel and Programs

Cheryl Lloyd
Vice President and CHRO
Systemwide Human Resources

Enclosures:

1) Policy on Vaccination Programs – tracked
2) Policy on Vaccination Programs – clean
3) Model Communication

cc: President Drake
Provost and Executive Vice President Newman
Executive Vice Chancellors/Provosts
Interim Executive Vice President King
Executive Vice President and Chief Operating Officer Nava
Senior Vice President and Chief Compliance and Audit Officer Bustamante
Vice President Maldonado
Vice Provosts/Vice Chancellors for Academic Personnel
Chief of Staff Kao
Assistant Vice Provosts/Vice Chancellors for Academic Personnel
Deputy General Counsel Nosowsky
Deputy General Counsel Woodall
Associate Vice Provost Lee
Associate Vice President Matella
Executive Director Lin
Deputy CHRO and Chief of Staff Henderson
Chief of Staff Beechem
Chief of Staff Levintov
Chief Policy Advisor McAuliffe
Managing Counsel Essick
Senior Principal Counsel Mastro
Director Anders
Director Heng
Director Chin
Director Teaford
Interim Director Weston-Dawkes
Associate Director DiCaprio
Associate Director Garcia
Associate Director Woolston
Assistant Director LaBriola
HR Manager Crosson
For questions regarding individual employee situations and this policy, please contact your location’s applicable office. For individual student questions related to the medical aspects of the policy, please contact your campus Student Health Services.

| Responsible Officers: | Provost & Executive Vice President for Academic Affairs (Campuses, ANR, Labs)  
Executive Vice President – University of California Health (UC Health)  
Executive Vice President and Chief Operating Officer (Campuses, ANR, Labs) |
|------------------------|---------------------------------------------------------------------------|
| Responsible Offices:   | Academic Affairs  
University of California Health (UCH)  
University of California Operations (UCO) |
| Issuance Date:         | TBD 2024                                                                  |
| Effective Date:        | TBD 2024                                                                  |
| Last Review Date:      | TBD 2024                                                                  |
| Scope:                 | All University of California locations and faculty, academic personnel, staff, trainees, students, and others accessing University facilities and programs. |

**Campus Contact:** UC Emergency Management  
**Health System Contact:** UC Health  
**Email:** VaccinePolicyComments@ucop.edu
I. POLICY SUMMARY

The purpose of this policy is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel and all others who work, live, and/or learn in any of the University’s Locations or otherwise participate in person in University Programs.

The University strongly recommends that all members of the University community follow vaccine recommendations adopted by the U.S. Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) applicable to their age, medical condition, and other relevant indications.

In addition, this policy and its Program Attachments together require or provide for Mandate and/or Opt-Out Vaccination Programs. In a Mandate Program, Covered Individuals are subject to limited Exceptions and associated Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines before physically accessing as a condition of Physical Presence at any the University’s Locations or Programs. In an Opt-Out Program, Covered Individuals are required, subject to Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines or to properly decline such Vaccines as a condition of Physical Presence at any University Location or Program. The applicable Program Attachment indicates whether a Vaccine Program is a Mandate or Opt-Out Program.

II. DEFINITIONS

Compliance Date: The deadline for compliance with a Vaccination Program, as specified in the applicable Program Attachment. Unless otherwise specified in a Program Attachment, for new employees whose first date of employment is later, the deadline for initial vaccination compliance is within 14 days of the first date of employment; for students starting or returning to campus after the Compliance Date, the deadline is the first date of instruction for the term when they first enroll. Student employees are subject to the deadlines applicable to students.
Contraindications and Precautions: A contraindication or precaution to a Vaccine recognized by the CDC, CDPH, or in the case of internationally administered Vaccines, the World Health Organization (WHO). Contraindications and Precautions are limited and do not include conditions that are unrelated to Vaccines or injectable therapies, such as food, pet, venom, or environmental allergies, or allergies to oral medications.

Covered Individuals: A Covered Individual includes anyone designated as Personnel or Students under this policy who Physically Access a University Facility or Program in connection with their employment, appointment, or education/training. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

Covered Non-Affiliates: A Covered Non-Affiliate is a person who Physically Accesses a University Facility or Program as a Non-Affiliate (other than as an “official volunteer”) under the Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California. For purposes of this policy, “Covered Non-Affiliates” also includes K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non-degree-granting educational programs, professional development, and/or recreational programs. Refer to section III.B of this policy for additional information regarding Covered Non-Affiliates.

Deferral: A temporary delay of vaccination provided for in a Program Attachment based on a reason other than Medical Exemption, Disability, or Religious Objection. In the case of a Vaccine authorized for emergency use or recently approved, a Program Attachment may provide for Deferral based on pregnancy. In the case of a Vaccine for a disease where evidence suggests that contracting the illness or receiving treatment for the disease provides temporary protection, a Program Attachment may provide for Deferral based on recent illness or treatment.

Disability: A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.

Exception: In the context of a Mandate Program, an Exception is an approval issued by an authorized University official for a Covered Individual to not receive an otherwise required vaccination. Depending on the situation, Exceptions may be premised on Medical Exemption, Disability, and/or Religious Objection. In appropriate circumstances, Deferrals may be approved. In the context of an Opt-Out Program, an Exception may be premised on a Covered Individual’s informed decision to decline Vaccine, with appropriate notification to the Location Vaccine Authority or designee.

Healthcare Location: A collection of buildings and Personnel that service as an academic health system or student health or counseling center including hospitals, ambulatory surgery centers, outpatient centers, clinics, or other locations where preventive, diagnostic, therapeutic, or other interventional physical or behavioral healthcare services are provided.
provided to UC Health patients, students, employees, or research participants and any associated educational, research, or administrative facilities and offices. A Healthcare Location refers only to that part of a campus that meets this definition.

**Location (or Facility):** Any United States campus, medical center, or facility operated by the University in connection with its research, teaching, or public service (including clinical care) missions or programs, including University housing. A Location does not include a University-owned property that is leased to a third party unless (and only to the extent) a University Program occurs at that property.

**Location Vaccine Authority (LVA):** The office or person responsible for implementing the requirements set forth in a Program Attachment for a Location, typically the Chief Medical Officer or Occupational Health office at a Medical Center or an Occupational Health or Student Health office at an academic campus. The LVA is a health care provider and its records are considered confidential health records for purposes of the University’s privacy policies.

**Mandate Program:** A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines unless they have received a University-approved Exception.

**Medical Exemption:** An excuse from receiving an otherwise required Vaccine due to a medical Contraindication or Precaution for each Vaccine that would satisfy the vaccination requirement.

**Non-Pharmaceutical Intervention (NPI):** An action, other than getting vaccinated or taking medicine, that members of the University community can take to help prevent or slow the spread of contagious illnesses. NPIs may include, for example, staying home, especially when a person is sick or when a member of the person’s family or household is sick; quarantining when an unvaccinated person has been exposed to someone else with the illness; avoiding large gatherings; physical/social distancing; wearing personal protective equipment or face coverings; frequent handwashing and cleaning; and asymptomatic (surveillance) and symptomatic testing.

**Opt-Out Program:** A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines or to formally decline vaccination by completing an opt-out form provided by their Location (a “Vaccine Declination Statement”) and submitting it to their Location Vaccine Authority on or before the Compliance Date.

**Participation:** Participation in a Vaccination Program as required by the applicable Program Attachment, which may include providing certification or proof of being Up-To-Date on vaccination or obtaining a University-approved Exception under this policy in a Mandate Program or properly declining vaccination in an Opt-Out Program. Participation in all Vaccination Programs applicable to a Covered Individual is a condition of Physical Presence at any University Location or Program as set forth in this policy. For Covered Individuals who must be vaccinated under this policy, Participation compliance may require annual or recurring obligations, such as repeat vaccinations or boosters on an annual or recurring basis—consistent with U.S. Food and Drug Administration (FDA)-approved labeling and CDC or and CDPH recommendations.
Personnel: University faculty, other academic appointees, and staff, including but not limited to visiting, volunteer, without salary, and emeritus/a professors, visiting or volunteer academic appointees, contract, recall, and emeritus/a employees. “Personnel” also includes, for purposes of this policy, official volunteers, as defined in the Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California, and participants in post-graduate training programs who are not Students.

Physical Access or Physical Presence (or Physically Access/Accessing or Physically Present): Physical presence at a University Location or Program for any work, research, or education/training related purpose (as distinguished from accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public). Physical presence includes living in housing furnished by the University, using University amenities such as entertainment venues, museums, libraries, workout facilities, or dining halls or food courts in one’s capacity as Personnel or a Student, or participating in person in a University Program even if not occurring at a Location. Access is not defined by reference to any particular frequency (e.g., daily, weekly, monthly, ad hoc).

Primary Series: The initial dose(s) of a given Vaccine as specified by CDC, CDPH, the U.S. Food and Drug Administration (FDA) or in the case of internationally administered Vaccines, the WHO.

Program Attachment: An attachment as part of this Policy describing a specific Vaccination Program, under which Covered Individuals are required, subject to limited Exceptions and associated Non-Pharmaceutical Interventions, to be Up-To-Date on (or affirmatively decline) specified Vaccines before Physically Accessing the University’s Locations or Programs.

Reasonable Accommodation: An adjustment made to the requirements of a Vaccination Program, including an adjustment for a Covered Individual who has received a University-approved Exception to allow them to be Physically Present without impairing the health and safety objectives of this policy. Covered Individuals with Exceptions may be required to observe specified NPIs as a condition of Physical Presence.

Religious Objection: A Covered Individual’s objection to receiving an otherwise required Vaccine based on that person’s sincerely held religious belief, practice, or observance.

Responsible Office: The office at a Location responsible for processing Exceptions.

Student: The term “Student” has the same meaning as defined in the current version of the Policies Applying to Campus Activities, Organizations and Students (PACAOS) Section 14.40: an individual for whom the University maintains student records and who: (a) is enrolled in or registered with an academic program of the University; (b) has completed the immediately preceding term, is not presently enrolled, and is eligible for reenrollment; or (c) is on an approved educational leave or other approved leave status, or is on filing-fee status. For purposes of this policy, the term “Student” also includes visiting students.

Systemwide Vaccine Authority: The Systemwide Vaccine Authority is the Executive Vice President for UC Health or designee. A person is eligible to serve as the Systemwide Vaccine Authority if the person is Board-Certified in the subspecialty of Infectious Disease.
by an American Board of Medical Specialties or an American Osteopathic Association Specialty Certifying Board and maintains a faculty appointment that meets all of the good standing criteria established at that UC Location.

**University or UC:** The University of California.

**University Program:** A program or activity operated by the University to support the University’s teaching or research mission and generally offered exclusively to University Personnel or Students. Examples of covered Programs that may not be conducted at a Location include the [UC Education Abroad Program](https://www.uc.edu/programs/education abroad) and University-sponsored athletics programs.

**Up-To-Date:** A person is Up-To-Date with required Vaccines when they have received all doses of a Vaccine in a Primary Series and the most recent boosters recommended by the CDC or and CDPH. A person need not obtain boosters doses that are authorized but not explicitly recommended by CDC or and CDPH in order to be considered Up-To-Date.

**Vaccination Program:** A set of rules governing Physical Presence at University Locations or in University Programs intended to reduce the incidence of Vaccine-preventable disease, disability, and death in connection with University Facilities or Programs. A Vaccination Program is either a Mandate Program or an Opt-Out Program.

**Vaccine:** A Vaccine satisfies the requirements of this policy if: (i) the FDA has issued a License or an Emergency Use Authorization (EUA) for the vaccine; or (ii) the WHO has approved Emergency Use Listing (EUL) for the vaccine. If approved by LVA and consistent with any applicable public health mandates, a vaccine administered during a clinical trial but not yet approved, licensed, or authorized may also satisfy the requirements of this policy.

**Vaccine Education:** Vaccine Education is communication of the following information about a Vaccine-preventable illness through any combination of Vaccine Information Statements, other written information, verbal communications, or online or in-person training programs, as required by the LVA.

1. The potential health consequences of Vaccine-preventable illness for Covered Individuals, family members and other contacts, coworkers, patients, and the community;
2. Occupational exposure to Vaccine-preventable disease;
3. The epidemiology and modes of transmission, diagnosis, and NPIs, consistent with the Covered Individual’s level of responsibility in preventing Vaccine-preventable infections;
4. The potential benefits of vaccination; and
5. The safety profile and risks of the Vaccine.

**Vaccine Information Statement (“VIS”):** An information sheet produced by or including information derived from the CDC, CDPH, and/or UC Health or any of its components, explaining in plain language the benefits and risks of a Vaccine to Vaccine recipients. A VIS generally must be provided to an individual being vaccinated prior to each dose of the
Vaccine, in a language they understand. For purposes of this policy, a VIS may also include FDA fact sheets for Vaccine recipients and caregivers.

III. POLICY TEXT

This policy supplements, and does not replace, any policies or guidelines requiring University Personnel, Students, patients, and visitors to observe Non-Pharmaceutical Interventions (NPIs).

A. Vaccination Program. As a condition of Physical Presence at a Location or in a University Program, all Covered Individuals must Participate in any applicable Vaccination Program as described in a Program Attachment by no later than the Compliance Date providing proof that they are Up-To-Date with any required Vaccines or submitting a request for Exception in a Mandate Program or properly declining vaccination in an Opt-Out Program no later than the Compliance Date. This requirement may be subject to implementation guidelines and any local procedures for enforcement. The availability of alternative remote work arrangements will depend on systemwide guidance and any local policies or procedures, as well as the nature of the work to be performed.

1. Access to Vaccination. All campuses and medical centers must offer any required vaccination on-site or maintain a list of nearby and accessible off-site locations offering vaccination to Covered Individuals during working and non-working hours. This provision is not intended to restrict a Covered Individual’s choice of provider, but to maximize their access to vaccination.

2. Proof of Vaccination or Exception
   a. Mandate Programs. Covered Individuals must be Up-To-Date on mandated Vaccines or timely secure a University-approved Exception. They also may be required to submit proof or certification of their vaccination or of a University-approved Exception to their Location Vaccine Authority (LVA), if and as specified in a Program Attachment. Proof or certification of vaccination may be subject to audit.
   b. Opt-Out Programs. Covered Individuals must be Up-To-Date on Vaccines or receive Vaccine Education and timely complete and submit a Vaccine Declination Statement to their LVA for each applicable Vaccine. They also may be required to submit proof or certification of their vaccination to their LVA, if and as specified in a Program Attachment. Proof or certification of vaccination may be subject to audit.

3. Request for Exception. A Covered Individual seeking an Exception in a Mandate Program must, no later than the relevant Vaccine’s Compliance Date, submit their request to the appropriate Responsible Office. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe any NPIs as defined by the LVA and no less stringent than applicable public health directives. If an Exception is granted, the issuing office must notify the Covered
Individual and the LVA of the approval and the associated expiration date, if any. If an Exception request is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly become Up-To-Date or will be denied Physical Presence at the relevant University Location(s) or Program(s).

4. **Education.** Any Covered Individual who has not provided proof that they are Up-To-Date on all applicable Vaccines by the specified Compliance Date will receive from the LVA or designee Vaccine Education. This educational requirement is not an alternative to required Participation in a Vaccination Program as a condition of Physical Presence at a University Location or Program as set forth above. Additional education may be required consistent with applicable federal, state, -or local mandates or accreditation standards.

5. **Non-Pharmaceutical Interventions (NPIs).** All Covered Individuals must participate in any NPIs as specified by the relevant University Location or Program. In the event of a disease outbreak, Covered Individuals and Covered Non-Affiliates who are not Up-To-Date on the relevant Vaccine may be excluded from the Location or site of the outbreak.

6. **Optional Additional Measures.** Covered Individuals may wear masks or face coverings even if they are Up-To-Date on all relevant Vaccines and no mask/face covering mandate is in effect.

B. **Covered Non-Affiliates.** Each University Location and Program will define any requirements for public or other Covered Non-Affiliate Physical Presence (for example, at health facilities, entertainment venues, museums, libraries, workout facilities, dining halls and food courts, day care centers, or camps), no less stringent than applicable public health guidance.

C. **Superseding Public Health Directives.** A federal, state, or local public health agency with jurisdiction may impose a more restrictive/protective vaccine and/or NPI requirement that lawfully supersedes this policy. In the event of a perceived conflict between public health requirements and this Policy, UC Legal should be consulted.

D. **Tracking and Reporting**

1. **Vaccination Data.** The LVA or designated unit may be required to record and track certain information regarding vaccination in a Covered Individual’s confidential health record, consistent with University privacy and security policies including BFB-IS-3 (Electronic Information Security Policy) and consistent with University records policies including BFB-RMP-1 (the University Records Management Program). Such information may include, but not be limited to: (i) proof or certification of vaccination; (ii) date(s) of administration and Vaccine type and manufacturer; and (iii) documentation of an Exception (which may include a Vaccine Declination Statement in an Opt-Out Program).- Vaccination Program records must be kept confidential and only accessed for Vaccination Program-related purposes. Vaccination Program records must not be stored in an employee’s personnel file.

2. **Vaccines Administered by the University**
a. **Registries.** For all vaccinations administered by the University in its capacity as health care provider, appropriate information will be submitted to the [California Immunization Registry (CAIR)](http://www.cahir.ca.gov) or such other registries as may be required by applicable public health agencies or University policy. While Vaccine recipients ordinarily are permitted to opt out from registry reporting in California, the California Department of Public Health (CDPH) may, in some cases, mandate that all participating vaccinators report certain vaccinations. Accordingly, the typical opt-out option may not apply.

b. **Adverse Events.** Any adverse events associated with a required Vaccine administered at a Location and reported to the University must be tracked and logged by the LVA or designee and reported to federal and state public health officials using the [Vaccine Adverse Event Reporting System (VAERS)](https://vaers.hhs.gov).  

**E. Program Evaluation.** Locations are encouraged and, through a Program Attachment may be required, to evaluate Program Participation on an annual and ongoing basis, including evaluation of equity in Program implementation; reasons identified for non-Participation or untimely Participation; the number and population-level characteristics of Covered Individuals who are not vaccinated; and community outcomes.

**IV. COMPLIANCE/RESPONSIBILITIES**

**A.** CDC and FDA generally translate VIS into many languages commonly spoken in California and elsewhere in the United States and post these online. Whenever the University is administering a Vaccine in its capacity as health care provider, the relevant VIS should be provided to a person receiving Vaccine in a language that they understand. In the unlikely event relevant VIS translations are unavailable, they should be accompanied when distributed with a document with taglines such as those approved by the U.S. Department of Health & Human Services to facilitate language access by all affected Personnel and Students. Interpreters should also be made available in person, by video, or by phone during Vaccine clinics.

**B.** Each Location is responsible for: (i) assuring any necessary updates are made to its local Infectious Diseases/Infection Prevention and Control Programs; (ii) establishing Compliance Dates on an annual or ongoing basis, in consultation with epidemiology and infection prevention experts and occupational health representatives as applicable and consistent with any supply limitations; and (iii) assuring implementation of each Vaccination Program at all sites.

1. Implementation includes informing Personnel and Students (as well as Covered Non-Affiliates, as applicable) of (i) any Vaccine requirements and associated Compliance Dates; (ii) dates and Locations for on-site administration (if any); and (iii) for required Vaccines, that vaccination will be provided at no out-of-pocket cost to them if they receive the Vaccine from the University.

2. Each Location should implement reasonable strategies for Vaccine access, including efforts to ensure vaccination availability during all work shifts and to address Vaccine
hesitancy, particularly among groups at most significant risk for contracting Vaccine-preventable disease and suffering severe illness.

**C. The Chancellors, Lawrence Berkeley National Laboratory Director, (of the University-affiliated national laboratories), and the Vice President—of Agriculture and Natural Resources (ANR) are responsible for implementing this policy at their respective locations.** Deans, Department Chairs, unit heads, managers, supervisors, student affairs leaders, and others with responsibility for personnel or student management will support Vaccination Program implementation and enforcement. Consultation with Academic Senate leaders, especially on the campus, is encouraged with respect to implementation procedures for academic appointees.

**D. Noncompliance with this policy may result in educational efforts and/or employment consequences up to and including informal counseling, adverse performance evaluations, corrective action and/or discipline, or disciplinary sanctions for students as outlined in PACAOS 105.00.**

For policy-covered staff employees, corrective action and/or discipline is governed by Personnel Policies for Staff Members 62 (Corrective Action) and 64 (Termination and Job Abandonment); Personnel Policies for Staff Members- II–64 (Termination of Appointment), which applies to Senior Management Group (SMG) employees; and as applicable, other policies and procedures.

For policy-covered academic appointees, corrective action and/or discipline is governed by APM — 015 (The Faculty Code of Conduct), APM - 016 (University Policy on Faculty Conduct and the Administration of Discipline), APM - 150 (Non-Senate Academic Appointees/Corrective Action and Dismissal), and as applicable, other policies and procedures.

For represented employees, corrective action and/or discipline is governed by the applicable collective bargaining agreements.

For students, disciplinary procedures are governed by PACAOS.

**V. PROCEDURES**

Implementation guidelines for this policy may be included in the applicable Program Attachment. To facilitate implementation, Each Location may establish local procedures consistent with those guidelines to facilitate implementation of this policy and the applicable Vaccination Program.

**VI. RELATED INFORMATION**

- [CDC Advisory Committee on Immunization Practices](#)
- [CDC Immunization Schedules](#)
- [Cal. Health & Safety Code Division 2, Chapter 2, Article 3.5](#)
Californian Department of Public Health, Licenses Authorized to Administer Vaccines in California
Infectious Disease Society of America, Guidelines
American Academy of Pediatrics, Immunizations
American College of Physicians, Adult Immunization Hub
American Medical Association, Opinion 8.7, Routine Universal Immunization of Physicians
University of California [Student] Immunization Policy

VII. FREQUENTLY ASKED QUESTIONS

1. Some Program Attachments both encourage and require members of the University community to be vaccinated. Which is it?

This policy strongly encourages all members of the University community to follow vaccine recommendations adopted by the CDC and CDPH. Only Covered Individuals are required to Participate in a Vaccination Program by staying Up-To-Date on required Vaccines or receiving a University-approved Exception in a Mandate Program or properly declining vaccination in an Opt-Out Program. (University Locations and Programs will define any requirements for Covered Non-Affiliates.) For certain Covered Individuals, such as health care workers, CDPH or local public health orders may be more restrictive than this policy and the applicable Program Attachment. In those cases, the more restrictive public health order will apply in addition to any other requirements under this policy and the applicable Program Attachment.

Does this policy require me to be vaccinated to attend school or work for the University?

This policy strongly encourages all members of the University community to follow vaccine recommendations adopted by the CDC and CDPH. Only Covered Individuals are required to Participate in Vaccination Programs. (University Locations and Programs will define any requirements for Covered Non-Affiliates.)

For Mandate Programs: Covered Individuals must receive stay Up-To-Date on any required Vaccines as a condition to Physical Presence at Locations and in University Programs, unless they have been granted an Exception.

For Opt-Out Programs: Covered Individuals must receive stay Up-To-Date on any required-specified Vaccines or receive Vaccine Education and submit a Vaccine Declination Statement to the Location Vaccine Authority as a condition to Physical Presence at Locations and in University Programs.
Refer to the applicable Program Attachment for information regarding whether that Vaccination Program is a Mandate Program or an Opt-Out Program. Covered Individuals who receive an Exception or opt out may be subject to special NPIs.

For certain Covered Individuals, such as health care workers, CDPH or local public health orders may be more restrictive than this policy and the applicable Program Attachment. In those cases, the more restrictive public health order will apply in addition to any other requirements under this policy and the applicable Program Attachment.

2. Does this policy apply to union-represented employees?

Yes, in accordance with any applicable collective bargaining requirements.

3. How will I know if my co-workers or fellow Students are going unvaccinated?

You probably won’t know. Because vaccination-related information is private and confidential, the University will not disclose Vaccine status of Covered Individuals except on a need-to-know basis; however, third parties and some Locations may distribute badge attachments, stickers, pins, or other indicators that vaccinated individuals may use to show that they have received the Vaccine.

4. I teach both seminar and lecture classes, and as a result am typically exposed to many students. Will I be informed if someone in my class is not vaccinated?

As will be the case in any public setting, you will not be informed of the vaccination status of individual students and should expect that some may not be vaccinated.

5. Will University of California Health specify which authorized or licensed Vaccine is preferred when more than one is available to prevent a Vaccine-preventable disease?

No.

6. Will Locations provide paid time off for non-exempt employees for the time needed to get a Vaccine as required in a Program Attachment?

Yes. Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of Vaccine needed to stay Up-To-Date. These employees and academic appointees are not required to use accrued leave for up to four hours; however, they must provide advance notice to their supervisor.
7. What if I experience flu-like symptoms or other side effects as a result of a Vaccine that mean I cannot work as scheduled, or attend classes?

Employees should contact their supervisors, local human resources, or academic personnel offices with questions but as a general matter, accrued sick leave, vacation, and/or PTO may be used to take time off as needed to recover. Students should contact their faculty/instructors regarding minor illnesses or disability services to address any significant issues.

8. If I have applied for or been granted an Exception in a Mandate Program or if I have opted out of vaccination in an Opt-Out Program, what Non-Pharmaceutical Interventions (NPIs) will I be required to observe?

A Program Attachment may describe any required NPIs. Additional safety measures may be deemed necessary, depending on the circumstances, by local public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. In that case, you will be informed of any additional requirements.

9. Who will pay for the Vaccine?

All of the University’s health plans cover CDC-recommended Vaccines administered by an employee’s primary care physician or at a local pharmacy.

Efforts will be made to encourage Participation prior to the Compliance Date. Special requirements related to compliance for Personnel and Students may be addressed in Program Attachments. Those who fail to Participate by being Up-To-Date on vaccination or, as applicable, requesting an Exception (for Mandate Programs) or submitting a Vaccine Declination Statement (for Opt-Out Programs) on or before the Compliance Date will be barred from Physical Presence at University Facilities and Programs, and may experience consequences as a result of non-Participation, up to and including termination or dismissal.

10. I am at high risk for severe illness if I contract a Vaccine-preventable disease (e.g., immunocompromised) and even though I have been vaccinated, I know that no Vaccine is 100% effective. Do I have to come to work onsite if my co-workers or Students are not all not everyone is vaccinated? What accommodations will be made for me?

Please contact your local disability services office to discuss your situation and possible accommodations.

11. Will the University accept internationally approved vaccines even if not authorized or approved in the United States?
Yes, if the Vaccine is authorized by the World Health Organization (WHO). The WHO has developed a process for assessing and listing unlicensed vaccines, therapeutics, and diagnostics during public health emergencies. Through that process, a number of vaccines not available in the United States have received Emergency Use Listing (EUL). The University will, consistent with CDC and CDPH guidance, accept proof of vaccination with any internationally administered Vaccine that has been authorized for emergency use by WHO through the EUL process.

12. I am fully remote. Am I a Covered Individual?

You are a Covered Individual at the time you are first Physically Present at a University Location or Program other than as a member of the public (or as a Covered Non-Affiliate). Your Location may also treat you as a Covered Individual if you are authorized to be Physically Present in connection with your employment, appointment, or education or training program.

13. Are trainees Covered Individuals under this policy?

Yes, trainees may be Covered Individuals as either Students or Personnel depending on their circumstances.

VIII. REVISION HISTORY

TBD 2024:

August 16, 2023: This policy was updated with interim revisions, including clarifying edits.
- Updated language consistent with current public health usage.
- Moved relevant language regarding vaccination data to Policy Text from Program Attachment.
- Addressed noncompliance in Compliance/Responsibilities instead of in Program Attachment and FAQ.

December 12, 2022: This policy was updated with interim amendments. Minor technical edits were also made for clarity.

November 2, 2022: Technical edits to update the contact information.

August 30, 2022: This policy was updated with interim amendments effective September 1, 2022.
- Consolidated all existing vaccination requirements other than the Student Immunization Policy.
- Updated language consistent with current public health usage.
- Extended definition of Covered Non-Affiliate to include K-12 students and children
enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non-degree-granting educational programs, professional development, and/or recreational programs.

**July 15, 2021:** Extended to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

**January 15, 2021:** Extended from UC Health to all Locations.

Initial issuance effective **December 14, 2020**.

This Policy is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.

**IX. APPENDICES AND PROGRAM ATTACHMENTS**

**A. Appendices**
1. **CDPH Immunization Branch**
2. **CDC Vaccine Information Statements**
3. **Immunize.org Vaccine Information Statements**

**B. Program Attachments**
1. **SARS-CoV-2 (COVID-19) Vaccination Program**
2. **Seasonal Influenza Vaccination Program**
I. Purpose/Supporting Data

The purpose of this SARS-CoV-2 (COVID-19) Vaccination Program is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel, and all others who work, live, and/or learn in any of the University’s Locations or otherwise participate in person in University Programs. The University strongly recommends that all members of the University community obtain the COVID-19 vaccine as soon as they are eligible and remain Up-To-Date with boosters COVID-19 vaccination.

In addition, this COVID-19 Vaccination Program requires any Covered Individual, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to be Up-To-Date on COVID-19 vaccination or to receive the Primary Series before Physically Accessing the University’s Locations and Programs and to receive or, if eligible, properly decline COVID-19 vaccination, boosters at least once a year as a condition of Physical Presence at any University Location or Program. Covered individuals may have recurring obligations under this program to remain Up-To-Date or affirmatively decline COVID-19 vaccination. Covered Individuals subject to additional or more restrictive COVID-19 vaccination requirements under applicable law and/or applicable public health directives must also comply with those requirements.

Refer to Section VII (Related Information) for additional information supporting implementation of this program, which is incorporated into this Program Attachment by reference.

II. Compliance Date

Initial Implementation

The deadline for initial implementation of the COVID-19 Vaccination Program was two (2) weeks before the first day of instruction at any University campus or school for Fall 2021. For locations that do not operate on an academic calendar (e.g., UCOP, ANR, medical centers, national laboratories), the deadline was September 1, 2021.

Primary Series
For New Personnel must provide proof of being Up-To-Date on COVID-19 vaccination or properly decline such vaccination within 14 calendar days of whose first date of employment is after the deadline for initial implementation in Fall 2021, the Primary Series compliance deadline is no later than 12 weeks after the first date of employment. (See Exhibit 2, Section II.C. for details.) If the 14th calendar day after the first date of employment falls on a weekend or University holiday, the deadline will be the next business day that is not a University holiday.

For Students starting or returning to campus after Fall 2021, the deadline is the first day of instruction for the term when they first enroll.

Student employees are subject to the deadlines applicable to students. Locations may specify additional deadlines.

Booster

Before Fall 2022. All Covered Individuals who had not received a University-approved Exception were expected to be Up-To-Date with their Boosters.

Beginning Fall 2022. Compliance with this program may require recurring obligations to either remain Up-To-Date or affirmatively decline COVID-19 vaccination, and Locations will set the deadlines for compliance with any such requirements. In such cases, Covered Individuals will be required to certify or document that they are Up-To-Date on (or affirmatively decline the recommended boosters) COVID-19 vaccination or properly decline such vaccination if eligible) at least once each year, in a form and as of a date set by the LVA. The LVA may use different forms and set different dates for different groups of Covered Individuals (e.g., Personnel and trainees, or Non-Healthcare Location and Healthcare Location) but all deadlines must be on or after July 1 and on or before December 31.

Student employees are subject to the deadlines applicable to students. Locations may specify additional deadlines.

III. Program Type: Primary Series—Mandatory (Subject to Exceptions Marked Below) Boosters—Opt-Out

A. Primary Series.

All Covered Individuals must receive the Primary Series subject to the below permitted Exceptions and NPIs.

1. Permitted Exceptions (Refer to Model Forms)

Disability (A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.)
Medical Exemption (Medical Contraindications or Precautions to each Vaccine that would satisfy the vaccination requirement.)

Religious Objection (A Covered Individual’s objection to receiving an otherwise required Vaccine based on that person’s sincerely held religious belief, practice, or observance.)

Temporary Deferral (Temporary suspension of the Vaccine mandate for clinical reasons other than the above.) Covered Individuals who are pregnant may seek a Deferral of the Primary Series mandate throughout their pregnancy. Covered Individuals who have had a diagnosis of COVID-19 or received treatment for COVID-19 within the last 90 days may defer Primary Series vaccination until 90 days have lapsed since the date of diagnosis or last date of treatment.

2. Exception Requests

A Covered Individual seeking an Exception must, no later than the Compliance Date, submit their request to the appropriate Responsible Office. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe NPIs defined by the Location Vaccine Authority (LVA) no less stringent than applicable public health directives and any University or Location guidelines. If an Exception is granted, the issuing office must notify the Covered Individual and the LVA of the approval and the associated expiration date, if any. If a request for Exception is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly receive the Primary Series or will be denied Physical Presence at the relevant University Location(s) or Program(s).

Boosters

On or before the applicable Compliance Date, All Covered Individuals must: (i) receive Vaccine Education concerning COVID-19 and CDC-recommended boosters Vaccines vaccination as a preventive measure; and (ii) receive the most recent CDC-recommended COVID-19 vaccination as required to be Up-To-Date or affirmatively decline doing so COVID-19 vaccination.

Those who choose to decline to receive the most recent CDC-recommended booster Vaccines COVID-19 vaccination must complete a Vaccine Declination Statement provided by their Location on or before the applicable Compliance Date.

These Covered Individuals who are not Up-To-Date must observe any additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals who wish to defer their boosters for 90 days, 180 days, or more may do so by opting out. Covered Individuals who initially decline COVID-19 vaccination a booster but later decide to become vaccinated receive a booster may receive the Vaccine the booster through on-site or off-site providers at any time and may notify the LVA.
Some Covered Individuals may be subject to more restrictive COVID-19 vaccination requirements under applicable law and/or applicable public health directives. In such cases, the more restrictive vaccination requirements will apply in addition to any other requirements under this COVID-19 Vaccination Program.

IV. Evidence Required

A. Primary Series

Covered Individuals must submit proof of receiving the Primary Series or of a University-approved Exception to their LVA, by providing either: (i) in the case of one who has received the Primary Series, a copy of their CDC vaccination card (or foreign equivalent in the case of Covered Individuals who received their vaccinations abroad); official documentation issued by a State vaccine registry; or an official medical record; or (ii).

Those who are permitted under this COVID-19 Vaccination Program and applicable public health directives and applicable law to Participate by declining the Primary Series must complete their Location’s Vaccine Declination Statement on or before the applicable Compliance Date in the case of one who has received a University-approved Exception, documentation that an Exception has been granted. Proof of vaccination and Exceptions may be subject to audit.

B. Boosters

1. Covered Individuals at Healthcare Locations

a. Covered Individuals who Participate in the COVID-19 Vaccination Program by receiving the most recent CDC-recommended booster must submit proof that they received the booster by providing the LVA, within the timeframe set by the LVA, a copy of their CDC vaccination card (or foreign equivalent in the case of Covered Individuals who received their boosters abroad); official documentation issued by a State vaccine registry; or an official medical record.

b. Those who are permitted under this COVID-19 Vaccination Program and applicable public health directives and applicable law to Participate by declining the most recent CDC-recommended booster must complete their Location’s Vaccine Declination Statement on or before the applicable Compliance Date.

c. Those who are not permitted by applicable public health directives or applicable law to decline a booster but are eligible for an Exception that is both available for the Primary Series and permitted by applicable public health directives and applicable law must apply for the Exception on or before the applicable Compliance Date.

d. Proof of vaccination may be subject to audit.

2. Covered Individuals at Other Locations

a. Covered Individuals who Participate in the COVID-19 Vaccination Program by receiving COVID-19 vaccination as required to be Up-To-Date the most recent CDC-
recommended booster must submit proof that they received the booster-Vaccine by providing the LVA, within the timeframe set by the LVA, any evidence required by their Location as determined by the LVA. The LVA may choose to permit certification or self-attestation as evidence of receiving the boosterCOVID-19 vaccination.

b.— Those who are permitted under this Participate in the COVID-19 Vaccination Program and consistent with public health directives and applicable law to Participate by declining the most recent CDC-recommended booster COVID-19 vaccination must complete their Location’s Vaccine Declination Statement on or before the applicable Compliance Date.

c.— Those who are not permitted by applicable public health directives or applicable law to decline a booster but are eligible for an Exception that is both available for the Primary Series and permitted by applicable public health directives and applicable law must apply for the Exception on or before the applicable Compliance Date.

d.— Proof of vaccination may be subject to audit.

V. Non-Pharmaceutical Interventions (NPIs)

All members of the Location’s community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.

Those who have not completed the Primary Series and/or who have not received the most recent CDC-recommended booster dose are not Up-To-Date may be subject to NPIs above and beyond those who have.

VI. Systemwide Implementation Guidelines: ☐ Attached ☒ None

VII. Related Information

A. Current for Fall 2022

- CDC, Stay Up to Date with Vaccines
- CDC, COVID-19 Contraindications and Precautions
- CDC, New COVID-19 Vaccination Provider Trainings
- FDA, COVID-19 Vaccines (includes fact sheets and translations)
- CDC, COVID-19 Vaccination Clinical Resources for Each COVID-19 Vaccine
- CDC, COVID-19 Vaccination Program Operational Guidance, including Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States.
VIII. Frequently Asked Questions

1. How do I know if I am Up-To-Date? Specifically, how do I know what COVID-19 vaccines are recommended for me or if I am required to have them?

The U.S. Centers for Disease Control and Prevention (CDC) maintains current guidance on staying up to date with COVID-19 vaccines and recommended boosters. That guidance includes a tool to help individuals determine what boosters are recommended for them. The CDC maintains separate recommendations on its guidance website for individuals who received their vaccines through the University of California.
Primary Series abroad. You are Up-To-Date if you have received COVID-19 vaccination as recommended by the CDC.

What boosters are required depend in part on who you are and where you work. Health care workers continue to be subject to the August 5, 2021 California Department of Public Health Order, as amended (on December 22, 2021, February 22, 2022, and September 13, 2022), which at the time of this writing requires health care workers subject to the order to receive the Primary Series and at least one booster, subject to limited exceptions and deferrals. (See FAQ #9.)

2. **Why is UC now allowing Covered Individuals to “Opt Out” of Receiving Boosters COVID-19 vaccination?**


With the changes to federal and state public health guidance and widespread participation in the University’s COVID-19 Vaccination Program, the University has determined that it is now appropriate to move to a systemwide opt-out program for all Covered Individuals. The University has concluded that the combination of previous COVID-19 vaccination and naturally occurring immunity provides a large majority of the University community with adequate protection to reduce the public health risk faced during earlier stages of the pandemic.

The University strongly recommends that all members of the University community stay receive CDC-recommended Up-To-Date with COVID-19 boosters vaccination. And in the event applicable law or applicable public health orders impose stricter vaccination requirements, the University will continue to require compliance with those stricter requirements, and some Covered Individuals are required by applicable public health orders to receive certain boosters.

The University will continue to review current evidence and evaluate the need for adjustments to the COVID-19 Vaccination Program accordingly.

3. **University policy previously described primary series and booster requirements. Do the University’s current requirements differentiate between primary series and boosters?**

No. The University’s COVID-19 Vaccination Program requires Covered Individuals to be Up-To-Date on COVID-19 vaccination or to properly decline COVID-19 vaccination. The University’s vaccination requirements do not differentiate between your first dose and any later doses, and you may opt out of COVID-19 vaccination so long as you comply with all policy requirements. -Note, however, if you are
subject to more restrictive COVID-19 vaccination requirements under applicable law and/or applicable public health directives, you must also comply with those requirements. The CDC continues to recommend that everyone 6 months of age and older be up to date with COVID-19 vaccines.

4. **Will I have to opt out every year?**

   The University’s COVID-19 Vaccination Program requires Covered Individuals to be Up-To-Date on COVID-19 vaccination or to properly decline COVID-19 vaccination. Neither FDA nor CDC has yet made a recommendation on the frequency of vaccination, and the University does not currently require Covered Individuals to opt out every year. Compliance with this program may require recurring obligations to either remain Up-To-Date or affirmatively decline COVID-19 vaccination. In this case, your Location will set deadlines for compliance with any such requirements.

5. **Are there any COVID-19 vaccination requirements that apply to me besides the University’s COVID-19 Vaccination Program?**

   Some Covered Individuals might be subject to additional COVID-19 vaccination requirements under applicable law and/or applicable public health directives. For example, health care workers might be subject to more restrictive COVID-19 vaccination requirements under CDPH or local public health orders. Covered Individuals subject to additional or more restrictive COVID-19 vaccination requirements under applicable law and/or applicable public health directives must comply with those requirements in addition to any other requirements under the University’s COVID-19 Vaccination Program. Please contact your Location if you have questions about what COVID-19 vaccination requirements apply to you.

6. **I am a new University of California employee. What is my deadline for complying with the COVID-19 Vaccination Program?**

   Complying with the COVID-19 Vaccination Program is a condition of employment. If you’re a Covered Individual, you must provide proof of being Up-To-Date on COVID-19 vaccination or properly decline such vaccination within 14 calendar days of your first date of employment. If the 14th calendar day after your first date of employment falls on a weekend or University holiday, your deadline will be the next business day that is not a University holiday.

   As complying with the COVID-19 Vaccination Program may require recurring obligations to either remain Up-To-Date or affirmatively decline COVID-19 vaccination, you must then comply with any future applicable compliance deadlines as set by your individual Location.

   Student employees are subject to the deadlines applicable to students. Please refer to Exhibit 2, Section II.C. for the deadline applicable to you.

   Why is UC allowing Exceptions to the Primary Series for reasons other than Medical Exemption? If California can eliminate personal belief and religious exceptions for K-12
students, why can't UC do the same?

The University is required by law to offer reasonable accommodations to individuals who qualify for an Exception to the Primary Series vaccination requirement based on their disability, as well as to employees who object to vaccination based on their sincerely held religious belief, practice, or observance. A decision was made to adopt and implement a single uniform COVID-19 Vaccination Program consistently across all groups of Covered Individuals. Vaccination against the virus that causes COVID-19 is a critical step for protecting the health and safety of our communities.

How do I apply for an Exception to the Primary Series?

Covered Individuals who seek an Exception to the Primary Series must complete the request form provided by their Location and submit it to their Location’s applicable Responsible Office. Model Forms have been published in Section IX.A of this Program Attachment for adaptation or as-is use by each Location.

I am pregnant. Will I be eligible for a Medical Exemption?

No, you are not eligible for a Medical Exemption from the Primary Series vaccination requirement. But unless you work in a University health care facility, you are eligible for a Deferral of the Primary Series throughout your pregnancy until the time that you return to in-person work or instruction, as applicable, following pregnancy. If you have completed the Primary Series and are not required by California’s public health orders to have a booster, you may decline receiving recommended boosters.

You may also be eligible for a disability accommodation. It is important to understand, however, the additional risks you and your baby will be exposed to if you contract COVID-19 during pregnancy.

Information about these risks—including increased risk to the life of the mother and the health of the fetus—is posted on the CDC website. There is currently no evidence that any vaccines, including COVID-19 Vaccines, cause fertility problems. The American College of Obstetricians and Gynecologists (ACOG) recommends that all eligible individuals, including pregnant and lactating individuals, be vaccinated.

Note: Those who work in University health care facilities or clinics are subject to an order originally issued in 2021 by the California Department of Public Health that does not allow for deferrals based on pregnancy. These individuals therefore must receive the Primary Series and at least one booster, subject to limited exceptions and deferrals outlined in the order.
I was recently diagnosed with COVID-19, and/or I had an antibody test that shows that I have natural immunity. Does this support a Medical Exemption?

You may be eligible for a temporary Deferral of the Primary Series vaccination requirement for up to 90 days after your diagnosis or treatment. According to the US Food and Drug Administration, however, “at this time, antibody test results should not be used to decide if you need a COVID-19 vaccine or a vaccine booster, or to determine whether your vaccine worked” and “[a]ntibody tests do not tell you whether or not you can infect other people with SARS-CoV-2.” For this reason, individuals who have been diagnosed with COVID-19 or had an antibody test are not permanently exempt from Primary Series vaccination.

How do the California Department of Public Health (CDPH) orders and guidance regarding COVID-19 vaccination of health care workers affect Covered Individuals at the University’s medical centers, health professional schools, and clinics?

The August 5, 2021 CDPH order, as amended (on December 22, 2021, February 22, 2022, and September 13, 2022), requires that health care workers subject to the order have their first dose of a one-dose regimen or their second dose of a two-dose regimen for COVID-19 by September 30, 2021. It also requires that health care workers eligible for booster doses per the order to receive booster doses no later than March 1, 2022 and that health care workers not yet eligible for boosters be in compliance no later than 15 days after the CDPH’s recommended timeframe for receiving the booster dose. (Note that the University’s COVID-19 Vaccination Program may have different timeframes and compliance deadlines that may also apply.) The CDPH order permits health care workers to decline these vaccination requirements on one of the limited grounds recognized by the order.

Importantly, the CDPH order has fewer exceptions than the University’s COVID-19 Vaccination Program does. Specifically, Covered Individuals who work, train, or otherwise access any UC health care facilities—including medical centers, ambulatory surgery centers, Student Health Services, Counseling & Psychological Services, and other campus- and school-based medical and behavioral health clinics—may decline vaccination only based on “Qualifying Medical Reasons” or “Religious Beliefs” under the CDPH order. “Qualifying Medical Reasons” include only CDC-recognized contraindications and precautions, which corresponds with the University’s Policy on Vaccination Programs definition of Medical Exemption.

Effective February 22, 2022, health care workers subject to the CDPH order who provide proof of COVID-19 infection after completion of the Primary Series may also defer booster administration for up to 90 days from the date of first positive test or clinical diagnosis. Health care workers with a Deferral due to proven COVID-19 infection must be in compliance with the booster requirement no later than 15 days after the expiration of their Deferral.
For these reasons, the University is unable to grant the following Exceptions to the Primary Series for health care workers subject to the CDPH order: (a) Deferrals based on COVID-19 diagnosis or COVID-19 treatment within the last 90 days (though health care workers may be eligible for a Medical Exemption if the treatment they received qualifies as a CDC-recognized contraindication or precaution), (b) Exceptions based on Disabilities that are not CDC-recognized contraindications or precautions, or (c) Deferrals based on pregnancy.

Similarly, the University is unable to permit health care workers subject to the order to decline the order’s booster requirement for any reason other than Qualifying Medical Reasons or Religious Beliefs, and the University is unable to permit health care workers subject to the order to defer the order’s booster requirement for any reason other than COVID-19 diagnosis within the last 90 days. The CDPH order requires that any declination based on Qualifying Medical Reasons be supported by a written statement signed by a “physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician” (that is, a physician, a nurse practitioner or other advance practice nurse, or a physician’s assistant). The CDPH order also requires that health care workers seeking to defer booster administration due to recent COVID-19 diagnosis must provide documentation of previous diagnosis that includes date of infection from a health care provider or confirmed laboratory results.

Once a health care worker has received whatever boosters are required by the CDPH Order, they may decline additional boosters as permitted by this policy.

Covered Individuals should use the University’s Medical Exemption and/or Disability Exception Request form to decline any vaccines required by CDPH for Qualifying Medical Reasons.

Likewise, Covered Individuals should use the University’s Deferral Request Form to defer booster administration due to recent COVID-19 diagnosis, and Covered Individuals should use the University’s Religious Exception Request Form to decline the vaccine for Religious Beliefs under the CDPH order.

Additional information is available in the Health Care Worker Vaccine Requirement Q&A attached to the CDPH Order. The CDPH Order requires individuals who are exempt from its vaccination requirements to comply with Non-Pharmaceutical Interventions to help avoid preventable transmission of COVID-19.

How does the California Department of Public Health (CDPH) order discussed above impact Covered Individuals who are hired to work at UC health care facilities?

Covered Individuals hired to work at UC health care facilities (as described in FAQ
#9) must be in compliance with the CDPH order as of their start date. To comply with the order, by their start date, they must either (a) have been vaccinated against COVID-19 (i.e., have received their first dose of a one dose regimen or their second dose of a two-dose regimen for COVID-19) and have received their COVID-19 vaccine booster dose if booster-eligible per the order (or be within the 15-day compliance period after becoming booster-eligible); or (b) meet the order’s requirements with regard to declining the vaccine based on “Religious Beliefs” or “Qualifying Medical Reasons” or deferring the booster based on COVID-19 diagnosis within the last 90 days. FAQ #9 addresses the order’s requirements with regard to declining or deferring the vaccine.

IX. Model Forms and Exhibits

A. Model Form: Model Forms

Vaccine Declination Statement – Declination of COVID-19 Vaccine Booster

Medical Exemption and/or Disability Exception Request Form
Religious Exception Request Form
Deferral Request Form
Approval of Request for Exception
Denial of Request for Exception

Note: These model forms are is provided for convenience only and may be adapted by locations consistent with applicable policies and practices.

X. Exhibits

Implementation Guidelines: Exceptions
Implementation Guidelines: Employee Compliance
Student Compliance (refer to [Student] Immunization Policy)

Revision History

TBD 2024:
August 16, 2023:

- Amended COVID-19 vaccination requirement to permit Covered Individuals to decline COVID-19 vaccination after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements. Removed model forms and other content regarding Exception process.
- Updated language consistent with current public health usage, removed outdated content, and made clarifying edits.
• **Removed Implementation Guidelines on Exceptions and Employee Compliance**, moved relevant language regarding vaccination data to Policy Text, and addressed noncompliance in Compliance/Responsibilities.

• **Updated compliance deadlines and removed previous compliance deadlines**, including the initial implementation deadline for Fall 2021.

• **Authorized Locations to determine any evidence required to prove COVID-19 vaccination**, which may include certification or self-attestation.

**December 12, 2022:**

• Amended booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

• Authorized Locations (other than Healthcare Locations) to permit self-attestation as evidence of receiving the booster.

• Clarified that booster compliance may be assessed annually between July and December, rather than at the moment an additional dose or booster is recommended.

**August 30, 2022:**

• Converted from COVID-specific vaccine policy to Program Attachment.

• **Amended Program Evaluation Removed requirement to encourage rather than require that Healthcare Locations to must evaluate Program Participation on an annual and ongoing basis.**

• Extended compliance deadline for new employees to permit longer interval period between doses in alignment with the CDC guidance current as of August 30, 2022.

**July 15, 2021:** Extended COVID-19 vaccine policy to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

**January 15, 2021:** Extended COVID-19 vaccine policy from UC Health to all Locations.

**Initial issuance effective: December 14, 2020.**

This Program Attachment is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.
UNIVERSITY OF CALIFORNIA
VACCINE DECLINATION STATEMENT – DECLINATION OF COVID-19 BOOSTER VACCINATION

<table>
<thead>
<tr>
<th>EMPLOYEE OR STUDENT NAME</th>
<th>EMPLOYEE OR STUDENT ID</th>
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<tbody>
<tr>
<td>JOB TITLE (IF APPLICABLE)</td>
<td>LOCATION</td>
</tr>
<tr>
<td>DEPARTMENT (IF APPLICABLE)</td>
<td>SUPERVISOR (IF APPLICABLE)</td>
</tr>
<tr>
<td>PHONE NUMBER</td>
<td>EMAIL</td>
</tr>
</tbody>
</table>

The University of California strongly recommends that all members of the University community, except those who have had a severe allergic reaction to a previous dose of the COVID-19 vaccine or to any of its components, receive stay Up-To-Date on a COVID-19 vaccination consistent with vaccine recommendations adopted by the CDC and CDPH applicable to their age, medical condition, and other relevant indications to protect against COVID-19 disease as soon as they are eligible and get boosters as needed to stay Up-To-Date.

I am aware of the following facts:

- COVID-19 is a serious disease and has killed over 1 million people in the United States since February 2020, over 100,000 in California alone.
- The COVID-19 vaccine is recommended for me and other members of the University community to protect our students, patients, faculty, and staff, and our families and communities, from COVID-19, its complications, and death.
- If I contract COVID-19, I can shed the virus for days even before any symptoms appear. During the time I shed the virus, I can transmit it to anyone I contact.
- If I become infected with SARS-CoV-2, the virus that causes COVID-19, even if my symptoms are mild or non-existent, I can spread the disease to others, and they can become seriously ill or die as a result.
- Nearly-Approximately 1 in 5-10 American adults who have had COVID-19 is estimated to be suffering from Long COVID – symptoms that can last months or years after COVID-19 and can be debilitating.
- Contracting COVID-19 could have life-threatening severe consequences for my health and the health of everyone those with whom I have contact, including my coworkers or peers and the most vulnerable members of our community.
- Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of COVID-19 vaccine required recommended to stay Up-To-Date as explained in the UC Policy on Vaccination Programs.

Despite these facts, I am voluntarily choosing [LOCATION OPTION: “for this year”] to decline the most recent COVID-19 booster vaccination. My reason(s) for declining are as follows (answer this question is optional):

- [ ] medical contraindication
- [ ] disability
UNIVERSITY OF CALIFORNIA
VACCINE DECLINATION STATEMENT – DECLINATION OF COVID-19 BOOSTER VACCINATION

☐ religious objection
☐ concerned about risks of vaccine more than risks of disease
☐ want to delay but intend to get vaccinated later
☐ other ________________________________
☐ prefer not to say.

I understand that I can change my mind at any time and accept the COVID-19 booster vaccination. I understand that as long as I am not Up-To-Date on COVID-19 boosters vaccination, I will-may be required to take precautionary measures as required by my location, such as wearing a mask and increased testing. [LOCATION OPTION: “I also will not receive a badge sticker showing that I have received the vaccine.”]

______________________________________________________________________________

I have read the Vaccine Information Statement or Fact Sheet and the information on this Vaccine Declination Statement, and I have had a chance to ask questions.

NOTE: Health-care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement may not decline their first booster using this form.

Signature: ________________________________ Date: ______________________
This form should be used by University employees and students to request a Medical Exemption and/or Disability Exception to the COVID-19 Primary Series vaccination requirement in the University’s SARS-CoV-2 (COVID-19) Vaccination Program. This form should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) to request a Medical Exemption to the CDPH order’s booster requirement. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should instead use the Vaccine Declination Statement—Declination of COVID-19 Booster form.

Fill out Part A to request a Medical Exemption due to Contraindication or Precaution. Fill out Part B to request an Exception based on Disability. More than one section may be completed if applicable. Do not identify any diagnosis, disability, or other medical information. That information is not required to process your request.

Your request must be supported by a health care provider’s certification. Some local (city/county) public health departments have issued orders specifying that the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.

Part A: Request for Medical Exemption Due to Contraindication or Precaution

☐ I am requesting an Exception to the COVID-19 Primary Series vaccination requirement based on Medical Exemption. The Contraindications or Precautions to COVID-19 vaccination (recognized by the U.S. Centers for Disease Control and Prevention, the California Department of Public Health, or in the case of internationally administered vaccines, the World Health Organization) apply to me with respect to all available COVID-19 Vaccines.

☐ I am a health care worker subject to the CDPH order, and I am requesting an Exception to the COVID-19 booster vaccination requirement based on Medical Exemption. The Contraindications or Precautions to COVID-19 vaccination (recognized by the U.S. Centers for Disease Control and Prevention, the California Department of Public Health, or in the case of internationally administered vaccines, the World Health Organization) apply to me with respect to all available COVID-19 boosters.

My request is supported by the attached certification from my health care provider. For health care workers subject to the CDPH order, the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.

Part B: Request for Exception Based on Disability
I have a Disability and am requesting an Exception to the COVID-19 Primary Series vaccination requirement as a Disability accommodation. Health care workers subject to the CDPH order are not eligible for this Exception. My request is supported by the attached certification from my health care provider.

Please provide any additional information that you think may be helpful in processing your request. Do not identify your diagnosis, disability, or other medical information.

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location. I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: ____________________________ Date: ________________

Date Received by University: ________ By: ____________________________

CERTIFICATION FROM HEALTH CARE PROVIDER

Your patient is a University of California employee and/or student who has requested an Exception to the University’s COVID-19 vaccination requirement based on (a) Medical Exemption due to a Contraindication or Precaution; and/or (b) Disability. Your patient is seeking to support their request for such an Exception with a certification from their qualified licensed health care provider.

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<tr>
<th>HEALTH CARE PROVIDER NAME</th>
<th>LICENSE TYPE, # AND ISSUING STATE</th>
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<td>FULL NAME OF PATIENT</td>
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Please note the following from the Genetic Information Nondiscrimination Act of 2008 (GINA), which applies to all University employees:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. “Genetic information,” as defined by GINA, includes an individual’s family medical history, the results of an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assisted reproductive services.

Please complete Part A of this form if one or more of the Contraindications or Precautions to COVID-19 vaccination recognized by the U.S. Centers for Disease Control and Prevention (CDC), the California Department of Public Health (CDPH), or in the case of internationally administered vaccines, the World Health Organization (WHO), apply to this patient. Please complete Part B if this patient has a Disability, as defined below, that makes COVID-19 vaccination inadvisable in your professional opinion. More than one section may be completed if applicable to this patient.

**Important:** Do not identify the patient’s diagnosis, disability, or other medical information as this document will be returned to the University.

**Part A: Contraindication or Precaution to COVID-19 Vaccination**

☐ Primary Series. I certify that one or more of the Contraindications or Precautions (recognized by the CDC, the CDPH, or in the case of internationally administered vaccines, the WHO) for each of the currently available Vaccines used for the COVID-19 Primary Series applies to the patient listed above. For that reason, COVID-19 Primary Series vaccination using any of the currently available COVID-
UNIVERSITY OF CALIFORNIA
MEDICAL EXEMPTION AND/OR DISABILITY EXCEPTION REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement

19 Vaccines is inadvisable for this patient in my professional opinion. The Contraindication(s) and/or Precaution(s) is/are: [ ] Permanent [ ] Temporary.

If temporary, the expected end date is: ____________________________.

[ ] Booster. I certify that one or more of the Contraindications or Precautions (recognized by the CDC, the CDPH, or in the case of internationally administered vaccines, the WHO) for each of the currently available Vaccines used for COVID-19 boosters applies to the patient listed above. For that reason, COVID-19 booster vaccination using any of the currently available COVID-19 Vaccines is inadvisable for this patient in my professional opinion. The Contraindication(s) and/or Precaution(s) is/are: [ ] Permanent [ ] Temporary.

If temporary, the expected end date is: ____________________________.

Part B: Disability That Makes COVID-19 Primary Series Vaccination Inadvisable

“Disability” is defined as a physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.

[ ] I certify that the patient listed above has a Disability, as defined above, that makes COVID-19 Primary Series vaccination inadvisable in my professional opinion. The patient’s disability is: [ ] Permanent [ ] Temporary.

If temporary, the expected end date is: ____________________________

________________________________________  ____________________________
Signature of Health Care Provider Date
This form should be used by University employees and students to request a Religious Exception to the COVID-19 Primary Series vaccination requirement in the University's SARS-CoV-2 (COVID-19) Vaccination Program. It should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) to request a Religious Exception to the CDPH order’s booster requirement. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should instead use the Vaccine Declination Statement – Declination of COVID-19 Booster form.

Please select as applicable:

- Based on my sincerely held religious belief, practice, or observance, I am requesting an Exception to the COVID-19 Primary Series vaccination requirement as a religious accommodation.
- I am a health care worker subject to the CDPH order, and based on my sincerely held religious belief, practice, or observance, I am requesting an Exception to the COVID-19 booster vaccination requirement as a religious accommodation.

Please identify your sincerely held religious belief, practice, or observance that is the basis for your request for an Exception as a religious accommodation.

_____________________________________________________________________

Please briefly explain how your sincerely held religious belief, practice, or observance conflicts with the University’s COVID-19 vaccination requirement.

_____________________________________________________________________

Please provide any additional information that you think may be helpful in processing your religious accommodation request.

_____________________________________________________________________

Have you previously received any dose of a COVID-19 vaccine?

- Yes  -  No

If you have previously received any dose of a COVID-19 vaccine, please also complete the following:
UNIVERSITY OF CALIFORNIA
RELIGIOUS EXCEPTION REQUEST FORM
Accommodation to SARS-CoV-2 (COVID-19) Vaccination Requirement

1. Please explain why your sincerely held religious belief, practice, or observance did not conflict with the previous dose(s) of the COVID-19 vaccine that you received.

____________________________________________________________________________________

2. Please provide a written statement from someone else confirming that you have a sincerely held religious belief, practice, or observance that conflicts with the CDPH order requirement to receive a COVID-19 booster. For example, you may provide a statement from your religious leader, a fellow congregant, or someone else who has personal knowledge of your sincerely held religious belief, practice, or observance. Please submit that statement with this request form and provide the following information regarding the author of the statement:

   • Name and relationship to you:
   __________________________________________________________________________________

   • Basis of their knowledge regarding your sincerely held religious belief, practice, or observance:
   __________________________________________________________________________________

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location.

I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: ______________________________ Date: ____________________________

Date Received by University: __________ By: _____________________________________________
UNIVERSITY OF CALIFORNIA
DEFERRAL REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement
Based on Pregnancy or Recent COVID-19 Diagnosis or Treatment

This form should be used by University employees and students to request a Deferral of the COVID-19 Primary Series vaccination requirement in the University’s SARS-CoV-2 Vaccination Program due to pregnancy or recent COVID-19 diagnosis or treatment.

It should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) to request a Deferral of the CDPH order’s booster requirement due to recent COVID-19 diagnosis. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters may defer booster administration by using the Vaccine Declination Statement – Declination of COVID-19 Booster form.

Fill out Part A to request a Deferral of the Primary Series due to pregnancy. Fill out Part B to request a Deferral due to COVID-19 diagnosis or treatment within the last 90 days. If you are filling out Part B, your request may need to be supported by a health care provider’s certification. Some local (city/county) public health departments have issued orders specifying that the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.

Part A: Request for Deferral of the Primary Series Due to Pregnancy

☐ I am currently pregnant and am requesting a Deferral of the COVID-19 Primary Series vaccination requirement during my pregnancy. My anticipated due date is _________________. Health care workers subject to the CDPH order are not eligible for Deferrals based on pregnancy.

Part B: Request for Deferral Due to COVID-19 Diagnosis or Treatment

Check all that apply:

☐ Primary Series. I am requesting a Deferral of the COVID-19 Primary Series vaccination requirement because I have been diagnosed with COVID-19 within the last 90 days. Health care workers subject to the CDPH order are not eligible for this Deferral. My request is supported by the attached confirmed laboratory results or certification from my health care provider.

☐ Primary Series. I am requesting a Deferral to the COVID-19 Primary Series vaccination requirement because I have been treated for COVID-19 within the last 90 days. Health care workers subject to the CDPH order are not eligible for this Deferral. My request is supported by the attached certification from my health care provider.
UNIVERSITY OF CALIFORNIA
DEFERRAL REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement
Based on Pregnancy or Recent COVID-19 Diagnosis or Treatment

☐ Booster. I am a health care worker subject to the CDPH order, and I am requesting a Deferral to the COVID-19 booster vaccination requirement because I have been diagnosed with COVID-19 within the last 90 days. My request is supported by the attached certification from my health care provider.

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location.

I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: ___________________________ Date: __________________

Date Received by University: ____________ By: ________________________________
UNIVERSITY OF CALIFORNIA
DEFERRAL REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement
Based on Pregnancy or Recent COVID-19 Diagnosis or Treatment

CERTIFICATION FROM HEALTH CARE PROVIDER

Your patient is a University of California employee and/or student who has requested a Deferral of the University’s COVID-19 vaccination requirement based on COVID-19 diagnosis or treatment within the last 90 days. Your patient is seeking to support their request for such a Deferral with a certification from their qualified licensed health care provider.

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<thead>
<tr>
<th>HEALTH CARE PROVIDER NAME</th>
<th>LICENSE TYPE, # AND ISSUING STATE</th>
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Please note the following from the Genetic Information Nondiscrimination Act of 2008 (GINA), which applies to all University employees:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. “Genetic information,” as defined by GINA, includes an individual’s family medical history, the results of an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

Please complete the following. Important: Other than COVID-19 diagnosis, do not identify the patient’s diagnosis, disability, or other medical information as this document will be returned to the University.

☐ I certify that my patient has been diagnosed with COVID-19 within the last 90 days. My patient’s COVID-19 diagnosis was on ____________________.

☐ I certify that my patient has been treated for COVID-19 within the last 90 days. My patient’s last day of COVID-19 treatment was on ____________________.

☐ I certify that my patient is being actively treated for COVID-19. The expected end date of treatment is: ____________________.

________________________   ____________________
Signature of Health Care Provider                   Date
On [date], we received your request for the following Exception in connection with the COVID-19 vaccination requirement in the University’s SARS-CoV-2 Vaccination Program:

- [ ] Exception to Primary Series based on Medical Exemption due to Contraindication or Precaution
- [ ] Exception to Booster based on Medical Exemption due to Contraindication or Precaution (Health Care Workers Only)
- [ ] Exception to Primary Series based on Disability
- [ ] Exception to Primary Series based on Religious Objection
- [ ] Exception to Booster based on Religious Objection (Health Care Workers Only)
- [ ] Exception to Primary Series based on Deferral due to Pregnancy
- [ ] Exception to Primary Series based on Deferral due to COVID-19 Diagnosis and/or Treatment
- [ ] Exception to Booster based on Deferral due to COVID-19 Diagnosis (Health Care Workers Only)

For Exceptions to Primary Series other than Deferrals due to Pregnancy:
Based on the information you have provided, your request for Exception to the Primary Series has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid

- [ ] until [date],
- [ ] indefinitely.

If your approval has an end date and you no longer need an Exception, you will be subject to the following deadlines as applicable.

- If you have not completed the Primary Series when your approval expires, you will have until [date] (12 weeks after the end date) to submit proof that you have completed the Primary Series. You must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

- If you have completed the Primary Series when your approval expires, you must then provide proof of receiving or, if eligible, properly declining the most
 recent CDC-recommended booster at least once a year within the timeframe required by your location.

- If you are a health care worker subject to the CDPH order, you may be subject to additional deadlines as required by your location.

For Exceptions to Primary Series Based on Deferrals Due to Pregnancy:
Based on the information you have provided, your request for Exception to the Primary Series based on Deferral due to pregnancy has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid until you return to work or instruction, as applicable. If you no longer need an Exception, you will be subject to the following deadlines as applicable.

- If you have not completed the Primary Series when you return, you must submit proof that you have completed the Primary Series within 12 weeks of your return. You must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

- If you have completed the Primary Series when you return, you must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

For Exceptions to Boosters (Only Applicable to Health Care Workers Subject to the CDPH order):
Based on the information you have provided, your request for Exception to the CDPH order’s booster requirement based on Medical Exemption due to Contraindication or Precaution, Religious Objection, or Deferral due to COVID-19 diagnosis has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid:

☐ until __________
☐ indefinitely.

If your approval has an end date and you no longer need an Exception, you will be subject to the following deadlines as applicable.

- If you have an approved Deferral to the booster requirement due to recent COVID-19 diagnosis, you must receive a booster and submit proof of vaccination within 15 days of the Deferral’s end date.

- You must provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

- You may be subject to additional deadlines related to the CDPH order as required by your location.
As a condition of your Physical Presence at any University Location/Facility or Program, you must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination. You must also comply with the following Non-Pharmaceutical Interventions applicable to your position (if any):

An employee’s failure to comply with the University’s SARS-CoV-2 Vaccination Program, including the required Non-Pharmaceutical Interventions, may result in corrective action and/or discipline up to and including termination/dismissal. A student’s failure to comply with the University’s SARS-CoV-2 Vaccination Program, including the required Non-Pharmaceutical Interventions, may result in consequences up to and including dismissal from educational programs.

If you have any questions or concerns regarding the above, please contact:

You are hereby informed of the risks of COVID-19 infection, including long-term disability and death, both for you and for others who you may expose to the disease.

Approved by: ___________________________ Date: ___________________
(Signature of Issuer)
UNIVERSITY OF CALIFORNIA
DENIAL OF REQUEST FOR EXCEPTION
SARS-CoV-2 (COVID-19) Vaccination Requirement

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<th>Employee/Student-Name</th>
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<tr>
<td></td>
<td>Issuing Authority Name</td>
<td>Issuing Authority Title</td>
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<tr>
<td>CC:</td>
<td>Location/Vaccine Authority Name/Email</td>
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On______, we received your request for the following Exception in connection with the COVID-19 vaccination requirement in the University’s SARS-CoV-2 Vaccination Program:

- ✔️ Exception to Primary Series based on Medical Exemption due to Contraindication or Precaution
- ✔️ Exception to Booster based on Medical Exemption due to Contraindication or Precaution
- ✔️ Exception to Primary Series based on Disability
- ✔️ Exception to Primary Series based on Religious Objection
- ✔️ Exception to Booster based on Religious Objection
- ✔️ Exception to Primary Series based on Deferral due to Pregnancy
- ✔️ Exception to Primary Series based on Deferral due to COVID-19 Diagnosis and/or Treatment
- ✔️ Exception to Booster based on Deferral due to COVID-19 Diagnosis

Your request has been DENIED based on the information we have received to date.

The reason for the denial is the following:

- ✔️ You do not qualify for the Exception that you requested.
- ✔️ Your request is incomplete. We have requested the following additional information from you but have not received it.

_________________________________________________________

- ✔️ You do not need an Exception to the COVID-19 booster requirement because the COVID-19 Vaccination Program allows you to affirmatively decline the most recent CDC-recommended booster. You must complete the Vaccine Declination Statement – Declination of COVID-19 Booster form within the timeframe required by your Location to decline to receive the most recent CDC-recommended booster. If you later become subject to a booster requirement and wish to request an Exception at that time, you will need to submit a new Exception request. (Note: The deadlines referenced below do not apply to you.)

- ✔️ You are not a Covered Individual as defined by the Policy on Vaccination Programs. Accordingly, you do not need an Exception to the University’s
COVID-19 vaccination requirement at this time. If you later become a
Covered Individual and wish to request an Exception at that time, you will
need to submit a new request. (Note: The deadlines referenced below do
not apply to you.)

Because your request for an Exception has been denied, you are subject to the following
deadlines as applicable:

- If you have not completed the Primary Series as of the denial date below, you have
  until ____________ (14 calendar days from the denial date) to submit proof that you
  have received your first dose of a COVID-19 Vaccine. That proof must include the
  date that you received it. You then have until ____________ (12 weeks from the
denial date) to submit proof that you have completed the Primary Series. You must
then provide proof of receiving or, if eligible, properly declining the most recent CDC-
recommended booster at least once a year within the timeframe required by your
location.

- If you have completed the Primary Series as of the denial date below, you must
  then provide proof of receiving or, if eligible, properly declining the most recent CDC-
recommended boosters at least once a year within the timeframe required by your
location.

- If you are a health care worker subject to the CDPH order, you may be subject to
  additional deadlines as required by your location.

Until you are Up-To-Date on COVID-19 vaccination, you must comply with the
Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings,
regular asymptomatic testing) for individuals who are not Up-To-Date as a
condition of your Physical Presence at any University Location/Facility or
Program. You must also comply with the following Non-Pharmaceutical
Interventions applicable to your position (if any):

________________________________________________________________________

Notwithstanding the foregoing, health care workers subject to the CDPH order
cannot be Physically Present at any UC health care facility if they are not in
compliance with that order.

If you have any questions regarding the above, please contact:

________________________________________________________________________

Denied by: ___________________________ Date: __________

(Signature of Issuer)
**Exhibits 1, 2: Implementation Guidelines**

These Guidelines are provided to aid those charged with evaluating, processing, and resolving Personnel requests for Exception to the SARS-CoV-2 (COVID-19) Vaccination Program ("COVID-19 Vaccination Program") and also to provide information regarding compliance with the COVID-19 Vaccination Program.

**EXHIBIT 1: EXCEPTIONS**

This Exhibit applies to Covered Individuals who Physically Access a Location or University Program in connection with their employment or appointment and who have requested an Exception to the COVID-19 vaccination requirement.

Covered Individuals may request an Exception to the COVID-19 Primary Series vaccination requirement based on Medical Exemption, Disability, Religious Objection, and/or Deferral due to pregnancy or recent COVID-19 diagnosis or treatment. Covered Individuals who are health care workers subject to the August 5, 2021 California Department of Public Health order as amended on December 22, 2021, February 22, 2022, and September 13, 2022 ("CDPH order") may request an Exception to the CDPH order’s booster requirement based on Medical Exemption, Religious Objection, and/or Deferral due to recent COVID-19 diagnosis. Covered Individuals who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should comply with the declination process as directed by their location instead of seeking an Exception.

**I. DEFINITIONS**

All terms in the "Definitions" section of the University of California Policy on Vaccination Programs apply to these Guidelines.

**Additional Term:**

**Decision:** The determination of the approval or denial of an Exception request.

**II. ADMINISTRATION OF REQUESTS**

**A. Establishment of a Responsible Office**

1. Locations should designate a particular office(s) and/or individual(s) to field Exception requests and make this Responsible Office known to Personnel.

2. This Office might be different for each type of Exception allowed under the COVID-19 Vaccination Program—e.g., Medical Exemption or Disability Exception requests may be processed by a different Office from the Religious Objection Exception or Deferral requests.

3. When the Office of the President has approved the use of a Third Party Administrator (TPA), Locations can opt to utilize that TPA to support the administration and review of Medical Exemptions, Disability Exceptions, Religious Objection Exceptions, and/or Deferrals. If utilizing this option, the
Location must still designate a Responsible Office to manage the coordination with that TPA.

B. Documentation of the Request

1. The Responsible Office is responsible for reporting all Exception requests, approvals, and denials to the Local Vaccine Authority (LVA) at the Location.

2. The Responsible Office should make Exception Request Forms (see Model Forms 2-4) publicly available to Personnel and available upon request. Locations utilizing any TPA should provide full name and email address (individually or in a flat list format such as an Excel table) to the TPA; the TPA will then reply with the applicable Exception Request Form.

3. Either the Responsible Office or TPA (if any) should evaluate the Exception request using the applicable standardized criteria. The Responsible Office should use the Approval or Denial Form (see Model Forms 5 and 6) to record the Decision.

4. The Responsible Office will exercise best practice information security procedures and comply with BFB-IS-3 (Electronic Information Security Policy) as well as BFB-RMP-1 (the University Records Management Program) when storing COVID-19 Vaccination Program records (e.g., Exception request forms, approval forms, denial forms, related communications) and when notifying the LVA regarding pending requests for Exceptions and Exception Decisions. COVID-19 Vaccination Program records should be kept confidential and only accessed for COVID-19 Vaccination Program-related purposes. COVID-19 Vaccination Program records should not be stored in an employee's personnel file.

C. Standardized Communications and Process

1. All forms and notifications should follow standard templates. Location-specific forms may include consistently communicated modifications such as campus-specific Non-Pharmaceutical Intervention (NPI) requirements, Responsible Office contact information, etc.

2. Communications and forms regarding Exceptions (including request forms, notifications such as a notice of pending request, notice of approval, and notice of denial) should be standardized as much as possible regardless of medium (e.g., digital/e-mail vs. hard-copy) or the office sending the communication (e.g., local Responsible Office or any TPA).

3. Communications should be made in a timely fashion, both acknowledging receipt of the request and communicating the subsequent Decision.

D. Pending and Granted Exceptions Require Employee Use of NPI

All forms and references to Exception requests should clearly state that, as a condition of Physical Presence, employees are required to comply with the Location’s NPI requirements (e.g., face coverings, regular asymptomatic testing) while an Exception request is pending or after such requests have been approved. This requirement applies to Exceptions for both the Primary...
Series and boosters (when applicable). NPI requirements may be amended and communicated to employees subsequently, such as if public health conditions prompt revisions to NPI requirements. See Model Forms 2-6 of the COVID-19 Vaccination Program for recommended language.

Notwithstanding the foregoing, for Covered Individuals subject to the CDPH order, compliance with the order is required as a condition of Physical Presence at any UC health care facility. Therefore, such Covered Individuals are not allowed to be Physically Present at any UC health care facility after the CDPH order’s applicable compliance deadline while their requests are pending.

III. DECISION PROCESS

a. The Responsible Office will evaluate all Exception requests consistently in both the application of the Guidelines and treatment of similarly situated Personnel throughout the University. For those Covered Individuals who are subject to the CDPH order requiring COVID-19 vaccination for health care workers, evaluation of such requests will also consider the requirements of that order.

The Responsible Office will utilize system-wide training for individuals charged with evaluating Exception requests. The Responsible Office will stay up to date on training, which may be amended as new information or changes to conditions (i.e., public health) may require.

b. The Responsible Office will contact Personnel in a timely fashion in the event that an incomplete form is submitted or more information is needed in order to evaluate the request.

IV. END DATE OF APPROVAL FOR EXCEPTION

If an employee who has not completed the Primary Series has an approved Exception with an end date and the employee no longer needs an Exception at that time, they will have 12 weeks after the end date to receive the Primary Series and submit proof of vaccination. They must then submit proof that they received or, if eligible, properly declined the most recent CDC-recommended booster at least once a year within the timeframe required by the location. Student employees are subject to the timeframe required by the location for students. If the employee is a health care worker subject to the CDPH order, they may be subject to additional deadlines as required by the location.

If an employee has completed the Primary Series when the approval expires, they must then submit proof that they received or, if eligible, properly declined, the most recent CDC-recommended booster at least once a year within the timeframe required by the location. Student employees are subject to the timeframe required by the location for students. If the employee is a health care worker subject to the CDPH order, they may be subject to additional deadlines as required by the location.

An employee subject to the CDPH order who has a Deferral to the booster
requirement due to recent COVID-19 diagnosis must receive a booster and submit proof of vaccination within 15 days of the Deferral’s end date. Employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V.)

An employee must submit proof of vaccination per local guidelines and COVID-19 Vaccination Program requirements (see COVID-19 Vaccination Program, Section IV).

V. THE CDPH HEALTH CARE WORKER VACCINE REQUIREMENT

a. The August 5, 2021 California Department of Public Health order as amended on December 22, 2021, February 22, 2022, and September 13, 2022 (“CDPH order”) requires that health care workers subject to the order receive their first dose of a one-dose regimen or the second dose of a two-dose regimen for COVID-19 vaccination by September 30, 2021. It also requires that health care workers eligible for booster doses per the order receive booster doses no later than March 1, 2022 and that health care workers not yet eligible for boosters be in compliance no later than 15 days after the CDPH’s recommended timeframe for receiving the booster dose. Note that the UC COVID-19 Vaccination Program may have different timeframes and compliance deadlines that may also apply.

b. The CDPH permits health care workers to decline these vaccination requirements based on “Religious Beliefs” or “Qualifying Medical Reasons.” “Qualifying Medical Reasons” under the CDPH order include only CDC-recognized contraindications or precautions.

c. Effective February 22, 2022, the CDPH order also permits health care workers who completed the Primary Series and were then recently diagnosed with COVID-19 (breakthrough infection) to delay booster administration for up to 90 days from the date of their first positive test or clinical diagnosis.

d. Covered Individuals under the UC COVID-19 Vaccination Program who work, train, or otherwise access any UC health care facilities—including medical centers, ambulatory surgery centers, Student Health Services, Counseling & Psychology Services, and other campus- and school-based medical and behavioral clinics—cannot be Physically Present at such facilities if they are not in compliance with the CDPH order.

e. Given the requirements of the CDPH order, the University is unable to approve the following Exceptions to the Primary Series for Covered Individuals subject to the CDPH order: (1) Deferrals based on COVID-19 diagnosis or COVID-19 treatment within the last 90 days (though health care workers may be eligible for a Medical Exemption if the treatment they received qualifies as a CDC-recognized contraindication or precaution), (2) Exceptions based on Disabilities that are not CDC-recognized contraindications or precautions, or (3) Deferrals based on pregnancy.

f. Similarly, the University is unable to permit Covered Individuals subject to the CDPH order to decline the order’s booster requirement for any reason other than...
Qualifying Medical Reasons or Religious Beliefs, and the University is unable to permit Covered Individuals subject to the order to defer the order’s booster requirement for any reason other than COVID-19 diagnosis within the last 90 days.

g. Covered Individuals should use the University’s Medical Exemption and/or Disability Exception Request Form to decline the vaccination requirements for Qualifying Medical Reasons. Likewise, Covered Individuals should use the University’s Deferral Request Form to defer booster administration due to recent COVID-19 diagnosis, and Covered Individuals should use the University’s Religious Exception Request Form to decline the vaccination requirements for Religious Beliefs under the CDPH order.

h. Additional updates to the CDPH order are expected and can be found here: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx.

VI. EXHIBIT 1 REVISION HISTORY

TBD 2023:

December 12, 2022: Revised language for consistency with changes to booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

September 16, 2022: Revised language based on the September 13, 2022 amendment to the August 5, 2021 California Department of Public Health order.

August 30, 2022:

• Converted from COVID-specific vaccine policy to Program Attachment.
• Extended deadline to receive Primary Series to permit longer interval period between doses in alignment with CDC guidance.

March 9, 2022:

• Added language regarding December 22, 2021 and February 22, 2022 amendments to the August 5, 2021 California Department of Public Health order.
• Added language regarding booster requirement for employees who are Covered Individuals.

September 16, 2021: Added language regarding the August 5, 2021 California Department of Public Health order.

First Effective Date: July 20, 2021
EXHIBIT 2: EMPLOYEE COMPLIANCE

I. SUMMARY

The purpose of the COVID-19 Vaccination Program is to facilitate the protection of the health and safety of the University community. The COVID-19 Vaccination Program requires Covered Individuals, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to receive the Primary Series before Physically Accessing the University’s Locations and Programs and to receive or, if eligible, properly decline, boosters at least once a year.

These Guidelines provide information regarding compliance with the COVID-19 Vaccination Program by University of California policy-covered staff and Academic Personnel Manual (APM)-covered academic appointees. The University desires a consistent approach for all employee populations, including represented employees, subject to its collective bargaining obligations, applicable collective bargaining agreements, and applicable public health orders.

The path to full compliance with the COVID-19 Vaccination Program for each employee, including the notices provided, may differ depending upon the date that the employee complies with each compliance step or submits a request for Exception.

II. EMPLOYEE REQUIREMENTS

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements (see COVID-19 Vaccination Program, Section IV).

A. Primary Series

The COVID-19 Primary Series vaccination requirement applies to UC employees who Physically Access the University’s Locations or Programs in connection with their employment or appointment. As a condition of Physical Presence at a University Location/Facility or in a University Program, all of these UC employees must provide proof of having completed the Primary Series or submit a request for an Exception no later than the applicable Compliance Date. For employees who are subject to the CDPH order, compliance with that order is also a condition of Physical Presence at any UC health care facility. (See Exhibit 1, Sections II.D and V).

Consistent with the requirement for students, Covered Individuals who are student employees must provide proof of having completed the Primary Series or, if applicable, submit a request for an Exception no later than the first day of instruction for the term when they first enroll.

B. Booster
All Covered Individuals must: (i) receive Vaccine Education concerning COVID-19 and CDC-recommended boosters as a preventive measure; and (ii) receive the most recent CDC-recommended booster or affirmatively decline doing so. Covered Individuals will be required to certify or document that they are Up-To-Date (or affirmatively decline the recommended boosters, if eligible) at least once each year, in a form and as of a date set by the location. Locations may set different dates for different groups of individuals. Student employees are subject to the deadlines applicable to students.

For employees who are subject to the CDPH order, compliance with that order is also a condition of Physical Presence at any UC health care facility. (See Exhibit 1, Sections II.D and V.) For these employees, the University’s COVID-19 vaccination requirement includes compliance with the order’s booster requirements.

C. New Employees

Covered Individuals subject to the CDPH order must be in compliance with the CDPH order as of their start date. See COVID-19 Vaccination Program FAQ #10 for additional information about these compliance requirements.

Consistent with the requirement for students, Covered Individuals who are student employees must provide proof of having completed the Primary Series or, if applicable, submit a request for Exception no later than the first day of instruction for the term when they first enroll. Covered Individuals who are student employees must also comply with the booster deadlines required by the location for students.

All other Covered Individuals hired on or after October 20, 2021 (who are not subject to the CDPH order and who are not student employees) must do one of the following no later than 14 calendar days after their first date of employment: (a) submit proof that they have received at least one dose of a COVID-19 Vaccine; or (b) if applicable, submit a request for an Exception.

If an employee submits proof that they have received at least one dose of a COVID-19 Vaccine but they have not yet completed the Primary Series, they must submit proof of having completed the Primary Series no later than 12 weeks after their first date of employment.

After providing proof of completing the Primary Series, an employee must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by the location.

III. REQUEST FOR EXCEPTION

An employee seeking an Exception must, no later than the applicable Compliance Date for the Primary Series or within the timeframe required by the location for the booster, submit their request to the Responsible Office described in Exhibit 1, Section II.A. While a request is pending and if it is granted, the employee must, as a condition of Physical Presence, comply with
NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and IV). Therefore, such Covered Individuals are not allowed to be Physically Present at any UC health care facility after the CDPH order’s applicable compliance deadline while their requests are pending.

A. Request Approved

If an Exception is granted, the issuing office must notify the employee and the LVA of the approval and the associated expiration date, if any. The employee must, as a condition of Physical Presence, comply with NPIs defined by the Location.

B. Request for Exception to Primary Series Denied

If an employee has submitted a single request for an Exception that has been denied, or requests on more than one ground that have all been fully considered and denied, the employee (“Non-Excepted Employee” hereafter) will receive a Denial of Request for Exception.

1. Employee Chooses to Become Up-To-Date with their Vaccines

If the Non-Excepted Employee chooses to become Up-To-Date with their Vaccines and has not yet begun the Primary Series, they must provide proof that they have received their first shot within 14 calendar days of the date of denial of their Exception request for the Primary Series. This proof must include the date of the first shot. The employee must also submit proof that they have completed the Primary Series within 12 weeks of the date of that denial.

They must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by the location.

Until the Non-Excepted Employee is Up-To-Date with their Vaccines, they must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).

2. Employee Chooses Not to Become Up-To-Date with their Vaccines

If the Non-Excepted Employee has not completed the Primary Series and chooses not to receive their required shot(s) of the Primary Series within 14 calendar days of the date of denial of their Exception request for the Primary Series, the applicable process begins at Section IV.A.

IV. EMPLOYEE NON-COMPLIANCE

A. Primary Series Requirement
1. First Notice of Non-Compliance (All Employees)

UC employees subject to this COVID-19 Vaccination Program who fail to provide proof of receiving the Primary Series and who have not requested an Exception by the applicable Compliance Date (or Non-Excepted Employees, who fail to provide proof that they have received their required shot within the 14 calendar days as described in Section III.B.2) will receive a First Notice of Non-Compliance.

Once an employee has received a First Notice of Non-Compliance, they will have three business days to provide proof of receiving the Primary Series or to make a request for an Exception.

A Non-Excepted Employee will have three business days to provide proof that they have received their required shot or, if applicable, make a new request for an Exception.

UC employees hired on or after October 20, 2021 (other than those subject to the CDPH order and student employees) who fail to provide proof of receiving at least one dose of a COVID-19 Vaccine and who have not requested an Exception within the initial 14-day compliance period, will receive the First Notice of Non-Compliance on the 15th calendar day after their first date of employment. Once an employee hired on or after October 20, 2021 has received a First Notice of Non-Compliance, they will have three business days to provide proof of receiving at least one dose of a COVID-19 Vaccine or to make a request for an Exception.

During these three business days, UC employees must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Section II.D and V).

If an employee has not responded within three business days and is a Non-Excepted Employee, the applicable process continues below at Section IV.A.3; for other employees, the applicable process continues below at Section IV.A.2.

2. Second Notice of Non-Compliance (Employees Other Than Non-Excepted Employees)

If, after receipt of the First Notice of Non-Compliance, the employee does not submit proof of receiving the Primary Series or make a request for an Exception within three business days, they will receive a Second Notice of Non-Compliance.
that requires them to submit proof that they have received their required shot within 14 calendar days of the date of the Second Notice of Non-Compliance. This proof must include the date of the required shot.

As described in Section IV.A.1, until the employee is Up-To-Date with their Vaccines, the employee must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).

The employee will have 12 weeks from the date of the Second Notice of Non-Compliance to complete the Primary Series.

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements.

3. Notice of Continued Non-Compliance

If an employee fails to submit proof of receipt of the Primary Series or make a request for an Exception within the period prescribed in the Second Notice (or the First Notice, if a Non-Excepted Employee), the employee will receive a Notice of Continued Non-Compliance stating that the Department will commence a period of progressive corrective action and/or discipline, up to and including termination/dismissal, against the employee.

If an employee hired on or after October 20, 2021 (who is not subject to the CDPH order and is not a student employee) fails to submit proof of receiving at least one dose of a COVID-19 Vaccine or make a request for an Exception within 14 calendar days of the date of the Second Notice, the employee will receive a Notice of Continued Non-Compliance stating that the Department will proceed toward termination/dismissal.

During the corrective action and/or discipline period, the employee will be permitted Physical Presence for up to six weeks (at the Location’s discretion) and must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).

The Chancellor or designee may choose to briefly extend the six-week period of Physical Presence for employees other than those subject to the CDPH order (see Exhibit 1, Sections II.D and V) for exceptional circumstances, including but not limited to:

- Providing for a non-compliant instructor to continue teaching or mentorship in the best interest of student learning;
- Providing for a non-compliant employee to continue work in order to avoid potential negative impacts on critical University operations due to unanticipated business requirements; or
- For other urgent requirements.

B. Corrective Action and/or Discipline
Any corrective action and/or discipline, up to and including termination/dismissal, taken as a result of employee non-compliance will be consistent with the policies or collective bargaining provisions applicable to the specific employee population.

If an employee chooses to receive their required shot in the Primary Series after receiving the Notice of Continued Non-Compliance, the employee has up to 12 weeks to complete the Primary Series. During this time the corrective action and/or discipline process is paused. If the employee does not complete the Primary Series within 12 weeks, the corrective action and/or discipline process resumes.

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements.

1. Policy-Covered Staff

For regular status employees in the Professional & Support Staff (PSS) personnel group, corrective action and/or discipline is taken in accordance with PPSM 62 (Corrective Action) and termination is taken in accordance with PPSM 64 (Termination and Job Abandonment).

Probationary career employees in the PSS personnel group may be released at any time in writing at the discretion of the University in accordance with PPSM 22 (Probationary Period).

For career employees in the Managers & Senior Professionals (MSP) personnel group refer to PPSM 64 (Termination and Job Abandonment), although non-compliant MSP employees will not be eligible for severance or any termination assistance under PPSM 64 section III.E.

For Senior Management Group (SMG) employees refer to PPSM II-64 (Termination of Appointment), although non-compliant SMG employees will not be eligible for financial assistance or any termination assistance under PPSM II-64 section III.C.

For employees in the PSS or MSP personnel groups who are not regular status or career, refer to the specific appointment type in PPSM 3 (Types of Appointment).

2. Policy-Covered Academic Appointees

All members of the faculty are subject to the standards set forth in APM—015 (The Faculty Code of Conduct).

For Senate Faculty, the administration of discipline is set forth in APM—016 (University Policy on Faculty Conduct and the Administration of Discipline) in conjunction with Academic Senate Bylaw 336 Privilege and Tenure: Divisional Committees -- Disciplinary Cases concerning disciplinary hearings.

For all other non-Senate academic appointees, corrective action is taken in accordance with APM—150 Corrective Action and Dismissal, which also provides for grievance mechanisms.
3. Represented Employees
Corrective action and/or discipline for represented employees is described in the employee’s applicable collective bargaining agreement.

V. EXHIBIT 2 REVISION HISTORY

TBD 2023:

December 12, 2022: Revised language for consistency with changes to booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

September 16, 2022: Revised language based on the September 13, 2022 amendment to the August 5, 2021 California Department of Public Health order.

August 30, 2022:
- Converted from COVID-specific vaccine policy to Program Attachment.
- Extended deadline to receive Primary Series to permit longer interval period between doses in alignment with CDC guidance.
- Clarified corrective action/discipline language for policy-covered academic appointees.

March 9, 2022:
- Added language regarding the December 22, 2021 and February 22, 2022 amendments to the August 5, 2021 California Department of Public Health order.
- Added language to address non-compliance for employees hired on or after October 20, 2021.
- Added language regarding booster requirement for employees who are Covered Individuals.

September 16, 2021:
- Added language on deadline for providing proof of vaccination during a holiday/weekend.
- Clarified corrective action/discipline language;
- Added language regarding the August 5, 2021 California Department of Public Health order.

August 11, 2021:
- Added timeline for clarity.
- Updated language in sections IV.B, V.A and V.B for clarity.
- Added two additional examples in section V.D.
- Clarified corrective action/discipline for policy-covered staff.

First Effective Date: July 20, 2021
PROGRAM ATTACHMENT #2: Seasonal Influenza Vaccination Program

<table>
<thead>
<tr>
<th>Vaccine(s)</th>
<th>Targeted Disease or Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>See <a href="https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm">https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm</a> for details.</td>
<td>Seasonal Influenza</td>
</tr>
</tbody>
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I. Purpose/Supporting Data:

According to the [Centers for Disease Control & Prevention](https://www.cdc.gov), vaccination against the seasonal respiratory disease influenza or “flu” has long been accepted as a safe and effective way to prevent millions of illnesses and thousands of related doctor and hospital visits every year. In recent years, flu vaccines have reduced the risk of flu-associated hospitalizations among older adults by about 40% on average. A [2018 study](https://www.cdc.gov) showed that from 2012 to 2015, flu vaccination among adults reduced the risk of being admitted to an intensive care unit (ICU) with flu by 82 percent. Flu vaccination has been associated with lower rates of some cardiac events among people with heart disease, especially among those who had had a cardiac event in the past year. It can mitigate against worsening and hospitalization for flu-related chronic lung disease. It has also been shown in separate studies to be associated with reduced hospitalizations among people with [diabetes](https://www.cdc.gov) and [chronic lung disease](https://www.cdc.gov). A [2018 study](https://www.cdc.gov) that covered influenza seasons from 2010-2016 showed that getting a flu shot reduced a pregnant woman’s risk of being hospitalized with flu by an average of 40 percent.

Flu vaccination has been shown in several studies to reduce severity of illness in people who become ill after they get vaccinated. For example, a [2017 study](https://www.cdc.gov) showed that flu vaccination reduced deaths, ICU admissions, ICU length of stay, and overall duration of hospitalization among hospitalized flu patients. A [2018 study](https://www.cdc.gov) showed that among adults hospitalized with flu, vaccinated patients were 59 percent less likely to be admitted to the ICU than those who had not been vaccinated. Among adults in the ICU with flu, vaccinated patients on average spent 4 fewer days in the hospital than those who were not vaccinated. Finally, by getting vaccinated, a person can protect those around them, including those who are more vulnerable to serious flu illness.

The CDC’s Advisory Committee on Immunization Practices (“ACIP”) issues recommendations regarding influenza specific to each flu season. For example, ACIP advised that the “2021-22 influenza season is expected to coincide with continued circulation of SARS-CoV-2, the virus that causes COVID-19. Influenza vaccination of persons aged ≥ 6 months to reduce prevalence of illness caused by influenza will reduce symptoms that might be confused with those of COVID-19. Prevention of and reduction in the severity of influenza illness and reduction of outpatient visits, hospitalizations, and intensive care unit admissions through influenza vaccination also could alleviate stress on the U.S. health care system.”

During the COVID-19 pandemic, where COVID-19, like influenza, results in respiratory symptoms, it is even more critical than usual to assure widespread vaccination. As California has lifted COVID-19 restrictions, outbreaks have followed...
and the possibility of a surge that overwhelms the health care system and causes hospitals to adopt crisis standards of care necessarily increases. Population-level interventions that decrease the likelihood of absenteeism, disease transmission, hospitalization, and ICU utilization must therefore be considered and adopted where feasible.

Refer to Section VII (Related Information) for additional information supporting implementation of this program, which is incorporated into this Program Attachment by reference.

For all of these reasons, the University has concluded that critical steps must be taken to reduce the likelihood of severe disease among students, faculty, and staff, and in turn to reduce the likelihood that our health systems will be overwhelmed.

II. Compliance Date: Annually, no later than December 1 or an earlier date set by an individual Location.

III. Program Type: ☐ Mandatory (Subject to Exceptions Marked Below) ☑ Opt-Out

On or before the Compliance Date, Covered Individuals must: (i) receive Vaccine Education concerning influenza and vaccination as a preventive measure; and (ii) receive or affirmatively decline influenza vaccination. Those who choose to decline influenza vaccination must complete a Vaccine Declination Statement provided by their Location on or before the Compliance Date. Covered Individuals who are not vaccinated must observe additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they interact. Covered Individuals who initially decline the influenza Vaccine but later decide to become vaccinated may receive the Vaccine through on-site or off-site providers at any time and may notify the LVA.

IV. Evidence Required: To be determined by the LVA.

V. Non-Pharmaceutical Interventions (NPIs):

All members of the Location’s community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing. Those who are not Up-To-Date on their Vaccines may be subject to NPIs above and beyond those who are.

VI. Systemwide Implementation Guidelines: ☐ Attached ☑ None

VII. Related Information:
VIII. Frequently Asked Questions:

1. I am a new University of California employee. What is my deadline for complying with the Seasonal Influenza Vaccination Program?

Complying with the Seasonal Influenza Vaccination Program ("Flu Vaccination Program") is a condition of employment, and all Covered Individuals must provide proof of being Up-To-Date on seasonal influenza vaccination or properly decline such vaccination by no later than the applicable deadline each year. If you are a Covered Individual, your first deadline to comply with the Flu Vaccination Program depends on when your first date of employment is in relation to the flu season.

a) If your first date of employment with the University is during the flu season before the Compliance Date at your Location (i.e., December 1 or an earlier date set by your Location), then you must first comply with the Flu Vaccination Program by that Compliance Date. For example, if your first date of employment is November 1, 2022, and your Location has a Compliance Date of December 1, 2022, then you must first comply with the Flu Vaccination Program by December 1 of that year, 2022.

b) If your first date of employment with the University is on or after May 1 (or a different end date set by your Location), then you must first comply with the Flu Vaccination Program by your Location’s Compliance Date for the upcoming next flu season. For example, if your first date of employment is May 2, 2023, and your Location is using May 1 as the end date, then you must first comply with the Flu Vaccination Program by your Location’s Compliance Date for the 2023-24 following flu season.

c) If your first date of employment with the University is on or after the Compliance Date at your Location but before May 1 (or the different end date set by your Location), then you must first comply with the Flu Vaccination Program within 14 calendar days of your first date of employment. For example, if your first date of employment is December 2, 2022, then you must first comply with the Flu Vaccination Program by December 16 of that year, 2022.

All Covered Individuals must then comply with the Flu Vaccination Program annually by the Compliance Date set at their individual Locations. Student employees are subject to the deadlines applicable to students.

2. I am an employee who is not working during flu season. Do I still need to comply with the Seasonal Influenza Vaccination Program?

No, but if you must be Physically Present in your capacity as a Covered Individual at any time between your Location’s Compliance Date and May 1 (or a different end date set by your Location), then you must comply.

IX. Model Forms and Exhibits: TBD
X. Revision History:

**TBD 2024:**

**August 16, 2023:** Updated FAQs for clarity regarding compliance deadlines. Removed outdated content.

**August 30, 2022:** Executive Order Converted to Program Attachment

**October 8, 2021:** Executive Order Issued Extending Program to all Campuses

**September 29, 2020:** Revised July 31, 2020 Executive Order

**July 31, 2020:** Executive Order Issued Extending Program to all Campuses

**First Effective Date:** Longstanding at UC Medical Centers
Policy on Vaccination Programs

DRAFT FOR SYSTEMWIDE REVIEW 9/15/23-12/15/23

Responsible Officers: Provost & Executive Vice President for Academic Affairs (Campuses, ANR, Labs)
Executive Vice President – University of California Health (UC Health)
Executive Vice President and Chief Operating Officer (Campuses, ANR, Labs)

Responsible Offices: Academic Affairs
University of California Health (UCH)
University of California Operations (UCO)

Issuance Date: TBD 2024
Effective Date: TBD 2024
Last Review Date: TBD 2024

Scope: All University of California locations and faculty, academic personnel, staff, trainees, students, and others accessing University facilities and programs.

For questions regarding individual employee situations and this policy, please contact your location’s applicable office. For individual student questions related to the medical aspects of the policy, please contact your campus Student Health Services.

Campus Contact: UC Emergency Management
Health System Contact: UC Health
Email: VaccinePolicyComments@ucop.edu
I. POLICY SUMMARY

The purpose of this policy is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel and all others who work, live, and/or learn in any of the University’s Locations or otherwise participate in person in University Programs.

The University strongly recommends that all members of the University community follow vaccine recommendations adopted by the U.S. Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) applicable to their age, medical condition, and other relevant indications.

In addition, this policy and its Program Attachments together may provide for Mandate and/or Opt-Out Vaccination Programs. In a Mandate Program, Covered Individuals are required, subject to limited Exceptions and associated Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines as a condition of Physical Presence at any University Location or Program. In an Opt-Out Program, Covered Individuals are required, subject to Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines or to properly decline such Vaccines as a condition of Physical Presence at any University Location or Program. The applicable Program Attachment indicates whether a Vaccine Program is a Mandate or Opt-Out Program.

II. DEFINITIONS

Compliance Date: The deadline for compliance with a Vaccination Program, as specified in the applicable Program Attachment. Unless otherwise specified in a Program Attachment, for new employees whose first date of employment is later, the deadline for initial compliance is within 14 days of the first date of employment; for students starting or returning to campus after the Compliance Date, the deadline is the first date of instruction for the term when they first enroll. Student employees are subject to the deadlines applicable to students.
Contraindications and Precautions: A contraindication or precaution to a Vaccine recognized by the CDC, CDPH, or in the case of internationally administered Vaccines, the World Health Organization (WHO). Contraindications and Precautions are limited and do not include conditions that are unrelated to Vaccines or injectable therapies, such as food, pet, venom, or environmental allergies, or allergies to oral medications.

Covered Individuals: A Covered Individual includes anyone designated as Personnel or Students under this policy who Physically Access a University Facility or Program in connection with their employment, appointment, or education/training. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

Covered Non-Affiliates: A Covered Non-Affiliate is a person who Physically Accesses a University Facility or Program as a Non-Affiliate (other than as an "official volunteer") under the Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California. For purposes of this policy, “Covered Non-Affiliates” also includes K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non-degree-granting educational programs, professional development, and/or recreational programs. Refer to section III.B of this policy for additional information regarding Covered Non-Affiliates.

Deferral: A temporary delay of vaccination provided for in a Program Attachment based on a reason other than Medical Exemption, Disability, or Religious Objection. In the case of a Vaccine authorized for emergency use or recently approved, a Program Attachment may provide for Deferral based on pregnancy. In the case of a Vaccine for a disease where evidence suggests that contracting the illness or receiving treatment for the disease provides temporary protection, a Program Attachment may provide for Deferral based on recent illness or treatment.

Disability: A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.

Exception: In the context of a Mandate Program, an Exception is an approval issued by an authorized University official for a Covered Individual to not receive an otherwise required vaccination. Depending on the situation, Exceptions may be premised on Medical Exemption, Disability, and/or Religious Objection. In appropriate circumstances, Deferrals may be approved. In the context of an Opt-Out Program, an Exception may be premised on a Covered Individual’s informed decision to decline Vaccine, with appropriate notification to the Location Vaccine Authority or designee.

Healthcare Location: A collection of buildings and Personnel that serve as an academic health system or student health or counseling center including hospitals, ambulatory surgery centers, outpatient centers, clinics, or other locations where preventive, diagnostic, therapeutic, or other interventional physical or behavioral healthcare services are provided.
to UC Health patients, students, employees, or research participants and any associated educational, research, or administrative facilities and offices. A Healthcare Location refers only to that part of a campus that meets this definition.

**Location (or Facility):** Any United States campus, medical center, or facility operated by the University in connection with its research, teaching, or public service (including clinical care) missions or programs, including University housing. A Location does not include a University-owned property that is leased to a third party unless (and only to the extent) a University Program occurs at that property.

**Location Vaccine Authority (LVA):** The office or person responsible for implementing the requirements set forth in a Program Attachment for a Location, typically the Chief Medical Officer or Occupational Health office at a Medical Center or an Occupational Health or Student Health office at an academic campus. The LVA is a health care provider and its records are considered confidential health records for purposes of the University’s privacy policies.

**Mandate Program:** A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines unless they have received a University-approved Exception.

**Medical Exemption:** An excuse from receiving an otherwise required Vaccine due to a medical Contraindication or Precaution for each Vaccine that would satisfy the vaccination requirement.

**Non-Pharmaceutical Intervention (NPI):** An action, other than getting vaccinated or taking medicine, that members of the University community can take to help prevent or slow the spread of contagious illnesses. NPIs may include, for example, staying home, especially when a person is sick or when a member of the person’s family or household is sick; quarantining when an unvaccinated person has been exposed to someone else with the illness; avoiding large gatherings; physical/social distancing; wearing personal protective equipment or face coverings; frequent handwashing and cleaning; and asymptomatic (surveillance) and symptomatic testing.

**Opt-Out Program:** A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines or to formally decline vaccination by completing an opt-out form provided by their Location (a “Vaccine Declination Statement”) and submitting it to their Location Vaccine Authority on or before the Compliance Date.

**Participation:** Participation in a Vaccination Program as required by the applicable Program Attachment, which may include providing certification or proof of being Up-To-Date on vaccination or obtaining a University-approved Exception under this policy in a Mandate Program or properly declining vaccination in an Opt-Out Program. Participation in all Vaccination Programs applicable to a Covered Individual is a condition of Physical Presence at any University Location or Program as set forth in this policy. Participation compliance may require annual or recurring obligations, such as repeat vaccinations or boosters consistent with U.S. Food and Drug Administration (FDA)-approved labeling and CDC and CDPH recommendations.

**Personnel:** University faculty, other academic appointees, and staff, including but not limited to visiting, volunteer, without salary, and emeritus/a professors, visiting or volunteer
academic appointees, contract, recall, and emeritus/a employees. “Personnel” also includes, for purposes of this policy, official volunteers, as defined in the Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California, and participants in post-graduate training programs who are not Students.

Physical Access or Physical Presence (or Physically Access/Accessing or Physically Present): Physical presence at a University Location or Program for any work, research, or education/training related purpose (as distinguished from accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public). Physical presence includes living in housing furnished by the University, using University amenities such as entertainment venues, museums, libraries, workout facilities, or dining halls or food courts in one’s capacity as Personnel or a Student, or participating in person in a University Program even if not occurring at a Location. Access is not defined by reference to any particular frequency (e.g., daily, weekly, monthly, ad hoc).

Program Attachment: An attachment as part of this Policy describing a specific Vaccination Program.

Reasonable Accommodation: An adjustment made to the requirements of a Vaccination Program, including an adjustment for a Covered Individual who has received a University-approved Exception to allow them to be Physically Present without impairing the health and safety objectives of this policy. Covered Individuals with Exceptions may be required to observe specified NPIs as a condition of Physical Presence.

Religious Objection: A Covered Individual’s objection to receiving an otherwise required Vaccine based on that person’s sincerely held religious belief, practice, or observance.

Responsible Office: The office at a Location responsible for processing Exceptions.

Student: The term “Student” has the same meaning as defined in the current version of the Policies Applying to Campus Activities, Organizations and Students (PACAOs) Section 14.40: an individual for whom the University maintains student records and who: (a) is enrolled in or registered with an academic program of the University; (b) has completed the immediately preceding term, is not presently enrolled, and is eligible for reenrollment; or (c) is on an approved educational leave or other approved leave status, or is on filing-fee status. For purposes of this policy, the term “Student” also includes visiting students.

Systemwide Vaccine Authority: The Systemwide Vaccine Authority is the Executive Vice President for UC Health or designee. A person is eligible to serve as the Systemwide Vaccine Authority if the person is Board-Certified in the subspecialty of Infectious Disease by an American Board of Medical Specialties or an American Osteopathic Association Specialty Certifying Board and maintains a faculty appointment that meets all of the good standing criteria established at that UC Location.

University or UC: The University of California.

University Program: A program or activity operated by the University to support the University’s teaching or research mission and generally offered exclusively to University Personnel or Students. Examples of covered Programs that may not be conducted at a
Location include the UC Education Abroad Program and University-sponsored athletics programs.

Up-To-Date: A person is Up-To-Date when they have received all doses of a Vaccine as recommended by the CDC and CDPH. A person need not obtain doses that are authorized but not explicitly recommended by CDC and CDPH in order to be considered Up-To-Date.

Vaccination Program: A set of rules governing Physical Presence at University Locations or in University Programs intended to reduce the incidence of Vaccine-preventable disease, disability, and death in connection with University Facilities or Programs. A Vaccination Program is either a Mandate Program or an Opt-Out Program.

Vaccine: A Vaccine satisfies the requirements of this policy if: (i) the FDA has issued a License or an Emergency Use Authorization (EUA) for the vaccine; or (ii) the WHO has approved Emergency Use Listing (EUL) for the vaccine. If approved by LVA and consistent with any applicable public health mandates, a vaccine administered during a clinical trial but not yet approved, licensed, or authorized may also satisfy the requirements of this policy.

Vaccine Education: Vaccine Education is communication of the following information about a Vaccine-preventable illness through any combination of Vaccine Information Statements, other written information, verbal communications, or online or in-person training programs, as required by the LVA.

1. The potential health consequences of Vaccine-preventable illness for Covered Individuals, family members and other contacts, coworkers, patients, and the community;
2. Occupational exposure to Vaccine-preventable disease;
3. The epidemiology and modes of transmission, diagnosis, and NPIs, consistent with the Covered Individual’s level of responsibility in preventing Vaccine-preventable infections;
4. The potential benefits of vaccination; and
5. The safety profile and risks of the Vaccine.

Vaccine Information Statement (“VIS”): An information sheet produced by or including information derived from the CDC, CDPH, and/or UC Health or any of its components, explaining in plain language the benefits and risks of a Vaccine to Vaccine recipients. A VIS generally must be provided to an individual being vaccinated prior to each dose of the Vaccine, in a language they understand. For purposes of this policy, a VIS may also include FDA fact sheets for Vaccine recipients and caregivers.

III. POLICY TEXT

This policy supplements, and does not replace, any policies or guidelines requiring University Personnel, Students, patients, and visitors to observe Non-Pharmaceutical Interventions (NPIs).

A. Vaccination Program. As a condition of Physical Presence at a Location or in a University Program, all Covered Individuals must Participate in any applicable
Vaccination Program as described in a Program Attachment by—no later than the Compliance Date—providing proof that they are Up-To-Date with Vaccines or submitting a request for Exception in a Mandate Program or properly declining vaccination in an Opt-Out Program. This requirement may be subject to implementation guidelines and any local procedures for enforcement. The availability of alternative remote work arrangements will depend on systemwide guidance and any local policies or procedures, as well as the nature of the work to be performed.

1. **Access to Vaccination.** All campuses and medical centers must offer any required vaccination on-site or maintain a list of nearby and accessible off-site locations offering vaccination to Covered Individuals during working and non-working hours. This provision is not intended to restrict a Covered Individual’s choice of provider, but to maximize their access to vaccination.

2. **Proof of Vaccination or Exception**
   a. **Mandate Programs.** Covered Individuals must be Up-To-Date on mandated Vaccines or timely secure a University-approved Exception. They also may be required to submit proof or certification of their vaccination or of a University-approved Exception to their Location Vaccine Authority (LVA), if and as specified in a Program Attachment. Proof or certification of vaccination may be subject to audit.
   
   b. **Opt-Out Programs.** Covered Individuals must be Up-To-Date on Vaccines or receive Vaccine Education and timely complete and submit a Vaccine Declination Statement to their LVA for each applicable Vaccine. They also may be required to submit proof or certification of their vaccination to their LVA, if and as specified in a Program Attachment. Proof or certification of vaccination may be subject to audit.

3. **Request for Exception.** A Covered Individual seeking an Exception in a Mandate Program must, no later than the relevant Vaccine’s Compliance Date, submit their request to the appropriate Responsible Office. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe any NPIs as defined by the LVA and no less stringent than applicable public health directives. If an Exception is granted, the issuing office must notify the Covered Individual and the LVA of the approval and the associated expiration date, if any. If an Exception request is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly become Up-To-Date or will be denied Physical Presence at the relevant University Location(s) or Program(s).

4. **Education.** Any Covered Individual who has not provided proof that they are Up-To-Date on all applicable Vaccines by the specified Compliance Date will receive from the LVA or designee Vaccine Education. This educational requirement is not an alternative to required Participation in a Vaccination Program as a condition of Physical Presence at a University Location or Program as set forth above. Additional education may be required consistent with applicable federal, state, or local mandates or accreditation standards.
5. **Non-Pharmaceutical Interventions (NPIs).** All Covered Individuals must participate in any NPIs as specified by the relevant University Location or Program. In the event of a disease outbreak, Covered Individuals and Covered Non-Affiliates who are not Up-To-Date on the relevant Vaccine may be excluded from the Location or site of the outbreak.

6. **Optional Additional Measures.** Covered Individuals may wear masks or face coverings even if they are Up-To-Date on all relevant Vaccines and no mask/face covering mandate is in effect.

**B. Covered Non-Affiliates.** Each University Location and Program will define any requirements for public or other Covered Non-Affiliate Physical Presence (for example, at health facilities, entertainment venues, museums, libraries, workout facilities, dining halls and food courts, day care centers, or camps), no less stringent than applicable public health guidance.

**C. Superseding Public Health Directives.** A federal, state, or local public health agency with jurisdiction may impose a more restrictive/protective vaccine and/or NPI requirement that lawfully supersedes this policy. In the event of a perceived conflict between public health requirements and this Policy, UC Legal should be consulted.

**D. Tracking and Reporting**

1. **Vaccination Data.** The LVA or designated units may be required to record and track certain information regarding vaccination in a Covered Individual’s confidential health record, consistent with University privacy and security policies including **BFB-IS-3** (Electronic Information Security Policy) and consistent with University records policies including **BFB-RMP-1** (the University Records Management Program). Such information may include, but not be limited to: (i) proof or certification of vaccination; (ii) date(s) of administration and Vaccine type and manufacturer; and (iii) documentation of an Exception (which may include a Vaccine Declination Statement in an Opt-Out Program). Vaccination Program records must be kept confidential and only accessed for Vaccination Program-related purposes. Vaccination Program records must not be stored in an employee’s personnel file.

2. **Vaccines Administered by the University**
   a. **Registries.** For vaccinations administered by the University in its capacity as health care provider, appropriate information will be submitted to the California Immunization Registry (CAIR) or such other registries as may be required by applicable public health agencies or University policy. While Vaccine recipients ordinarily are permitted to opt out from registry reporting in California, the California Department of Public Health (CDPH) may, in some cases, mandate that all participating vaccinators report certain vaccinations. Accordingly, the typical opt-out option may not apply.
   b. **Adverse Events.** Any adverse events associated with a required Vaccine administered at a Location and reported to the University must be tracked and
logged by the LVA or designee and reported to federal and state public health officials using the Vaccine Adverse Event Reporting System (VAERS).

E. Program Evaluation. Locations are encouraged and, through a Program Attachment may be required, to evaluate Program Participation on an annual and ongoing basis, including evaluation of equity in Program implementation; reasons identified for non-Participation or untimely Participation; the number and population-level characteristics of Covered Individuals who are not vaccinated; and community outcomes.

IV. COMPLIANCE/RESPONSIBILITIES

A. CDC and FDA generally translate VIS into many languages commonly spoken in California and elsewhere in the United States and post these online. Whenever the University is administering a Vaccine in its capacity as health care provider, the relevant VIS should be provided to a person receiving Vaccine in a language that they understand. In the unlikely event relevant VIS translations are unavailable, they should be accompanied when distributed with a document with taglines such as those approved by the U.S. Department of Health & Human Services to facilitate language access by all affected Personnel and Students. Interpreters should also be made available in person, by video, or by phone during Vaccine clinics.

B. Each Location is responsible for: (i) assuring any necessary updates are made to its local Infectious Diseases/Infection Prevention and Control Programs; (ii) establishing Compliance Dates on an annual or ongoing basis, in consultation with epidemiology and infection prevention experts and occupational health representatives as applicable and consistent with any supply limitations; and (iii) assuring implementation of each Vaccination Program at all sites.

1. Implementation includes informing Personnel and Students (as well as Covered Non-Affiliates, as applicable) of (i) any Vaccine requirements and associated Compliance Dates; (ii) dates and Locations for on-site administration (if any); and (iii) for required Vaccines, that vaccination will be provided at no out-of-pocket cost to them if they receive the Vaccine from the University.

2. Each Location should implement reasonable strategies for Vaccine access, including efforts to ensure vaccination availability during all work shifts and to address Vaccine hesitancy, particularly among groups at most significant risk for contracting Vaccine-preventable disease and suffering severe illness.

C. The Chancellors, Lawrence Berkeley National Laboratory Director, and the Vice President of Agriculture and Natural Resources (ANR) are responsible for implementing this policy at their respective locations. Deans, Department Chairs, unit heads, managers, supervisors, student affairs leaders, and others with responsibility for personnel or student management will support Vaccination Program implementation and enforcement. Consultation with Academic Senate leaders, especially on the campus, is encouraged with respect to implementation procedures for academic appointees.

D. Noncompliance with this policy may result in educational efforts and/or employment consequences up to and including informal counseling, adverse performance.
evaluations, corrective action and/or discipline, or disciplinary sanctions for students as outlined in PACAOS 105.00.

For policy-covered staff employees, corrective action and/or discipline is governed by Personnel Policies for Staff Members 62 (Corrective Action) and 64 (Termination and Job Abandonment); Personnel Policies for Staff Members II-64 (Termination of Appointment), which applies to Senior Management Group (SMG) employees; and as applicable, other policies and procedures.

For policy-covered academic appointees, corrective action and/or discipline is governed by APM – 015 (The Faculty Code of Conduct), APM - 016 (University Policy on Faculty Conduct and the Administration of Discipline), APM - 150 (Non-Senate Academic Appointees/Corrective Action and Dismissal), and as applicable, other policies and procedures.

For represented employees, corrective action and/or discipline is governed by the applicable collective bargaining agreement.

For students, disciplinary procedures are governed by PACAOS.

V. PROCEDURES

Implementation guidelines for this policy may be included in the applicable Program Attachment. To facilitate implementation, each Location may establish local procedures consistent with this policy and the applicable Vaccination Program.

VI. RELATED INFORMATION

- CDC Advisory Committee on Immunization Practices
- CDC Immunization Schedules
- Cal. Health & Safety Code Division 2, Chapter 2, Article 3.5
- California Department of Public Health, Licensees Authorized to Administer Vaccines in California
- Infectious Disease Society of America, Guidelines
- American Academy of Pediatrics, Immunizations
- American College of Physicians, Adult Immunization Hub
- American Medical Association, Opinion 8.7, Routine Universal Immunization of Physicians
- University of California [Student] Immunization Policy

VII. FREQUENTLY ASKED QUESTIONS

1. Does this policy require me to be vaccinated to attend school or work for
the University?
This policy strongly encourages all members of the University community to follow vaccine recommendations adopted by the CDC and CDPH. Only Covered Individuals are required to Participate in Vaccination Programs. (University Locations and Programs will define any requirements for Covered Non-Affiliates.)

For Mandate Programs: Covered Individuals must stay Up-To-Date on any required Vaccines as a condition to Physical Presence at Locations and in University Programs, unless they have been granted an Exception.

For Opt-Out Programs: Covered Individuals must stay Up-To-Date on any specified Vaccines or receive Vaccine Education and submit a Vaccine Declination Statement to the Location Vaccine Authority as a condition to Physical Presence at Locations and in University Programs.

Refer to the applicable Program Attachment for information regarding whether that Vaccination Program is a Mandate Program or an Opt-Out Program. Covered Individuals who receive an Exception or opt out may be subject to special NPIs.

For certain Covered Individuals, such as health care workers, CDPH or local public health orders may be more restrictive than this policy and the applicable Program Attachment. In those cases, the more restrictive public health order will apply in addition to any other requirements under this policy and the applicable Program Attachment.

2. Does this policy apply to union-represented employees?
Yes, in accordance with any applicable collective bargaining requirements.

3. How will I know if my co-workers or fellow Students are going unvaccinated?
You probably won’t know. Because vaccination-related information is private and confidential, the University will not disclose Vaccine status of Covered Individuals except on a need-to-know basis; however, third parties and some Locations may distribute badge attachments, stickers, pins, or other indicators that vaccinated individuals may use to show that they have received the Vaccine.

4. I teach both seminar and lecture classes, and as a result am typically exposed to many students. Will I be informed if someone in my class is not vaccinated?
As will be the case in any public setting, you will not be informed of the vaccination status of individual students and should expect that some may not be vaccinated.

5. Will University of California Health specify which authorized or licensed
Vaccine is preferred when more than one is available to prevent a Vaccine-preventable disease?

No.

6. Will Locations provide paid time off for non-exempt employees for the time needed to get a Vaccine covered by a Program Attachment?

Yes. Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of Vaccine needed to stay Up-To-Date. These employees and academic appointees are not required to use accrued leave for up to four hours; however, they must provide advance notice to their supervisor.

7. What if I experience flu-like symptoms or other side effects as a result of a Vaccine that mean I cannot work as scheduled, or attend classes?

Employees should contact their supervisors, local human resources, or academic personnel offices with questions but as a general matter, accrued sick leave, vacation, and/or PTO may be used to take time off as needed to recover. Students should contact their faculty/instructors regarding minor illnesses or disability services to address any significant issues.

8. If I have applied for or been granted an Exception in a Mandate Program or if I have opted out of vaccination in an Opt-Out Program, what Non-Pharmaceutical Interventions (NPIs) will I be required to observe?

A Program Attachment may describe any required NPIs. Additional safety measures may be deemed necessary, depending on the circumstances, by local public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. In that case, you will be informed of any additional requirements.

9. Who will pay for the Vaccine?

All of the University’s health plans cover CDC-recommended Vaccines administered by an employee’s primary care physician or at a local pharmacy.

10. I am at high risk for severe illness if I contract a Vaccine-preventable disease (e.g., immunocompromised) and even though I have been vaccinated, I know that no Vaccine is 100% effective. Do I have to come onsite if not everyone is vaccinated? What accommodations will be made for me?

Please contact your local disability services office to discuss your situation and
possible accommodations.

11. Will the University accept internationally approved vaccines even if not authorized or approved in the United States?

Yes, if the Vaccine is authorized by the World Health Organization (WHO). The WHO has developed a process for assessing and listing unlicensed vaccines, therapeutics, and diagnostics during public health emergencies. Through that process, a number of vaccines not available in the United States have received Emergency Use Listing (EUL). The University will, consistent with CDC and CDPH guidance, accept proof of vaccination with any internationally administered Vaccine that has been authorized for emergency use by WHO through the EUL process.

12. I am fully remote. Am I a Covered Individual?

You are a Covered Individual at the time you are first Physically Present at a University Location or Program other than as a member of the public (or as a Covered Non-Affiliate). Your Location may also treat you as a Covered Individual if you are authorized to be Physically Present in connection with your employment, appointment, or education or training program.

13. Are trainees Covered Individuals under this policy?

Yes, trainees may be Covered Individuals as either Students or Personnel depending on their circumstances.

VIII. REVISION HISTORY

TBD 2024:

August 16, 2023: This policy was updated with interim revisions, including clarifying edits.
- Updated language consistent with current public health usage.
- Moved relevant language regarding vaccination data to Policy Text from Program Attachment.
- Addressed noncompliance in Compliance/Responsibilities instead of in Program Attachment and FAQ.

December 12, 2022: This policy was updated with interim amendments. Minor technical edits were also made for clarity.

November 2, 2022: Technical edits to update the contact information.

August 30, 2022: This policy was updated with interim amendments effective September 1, 2022.
• Consolidated all existing vaccination requirements other than the Student Immunization Policy.

• Updated language consistent with current public health usage.

• Extended definition of Covered Non-Affiliate to include K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non-degree-granting educational programs, professional development, and/or recreational programs.

**July 15, 2021:** Extended to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

**January 15, 2021:** Extended from UC Health to all Locations.

Initial issuance effective **December 14, 2020**.

This Policy is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.

IX. APPENDICES AND PROGRAM ATTACHMENTS

A. Appendices
   1. CDPH Immunization Branch
   2. CDC Vaccine Information Statements
   3. Immunize.org Vaccine Information Statements

B. Program Attachments
   1. SARS-CoV-2 (COVID-19) Vaccination Program
   2. Seasonal Influenza Vaccination Program
PROGRAM ATTACHMENT #1: SARS-CoV-2 (COVID-19) Vaccination Program

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I. Purpose/Supporting Data

The purpose of this SARS-CoV-2 (COVID-19) Vaccination Program is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel, and all others who work, live, and/or learn in any of the University’s Locations or otherwise participate in person in University Programs. The University strongly recommends that all members of the University community stay Up-To-Date with COVID-19 vaccination.

In addition, this COVID-19 Vaccination Program requires any Covered Individual, subject to Non-Pharmaceutical Interventions (NPIs), to be Up-To-Date on COVID-19 vaccination or to properly decline COVID-19 vaccination as a condition of Physical Presence at any University Location or Program. Covered Individuals may have recurring obligations under this program to remain Up-To-Date or affirmatively decline COVID-19 vaccination. Covered Individuals subject to additional or more restrictive COVID-19 vaccination requirements under applicable law and/or applicable public health directives must also comply with those requirements.

Refer to Section VII (Related Information) for additional information supporting implementation of this program, which is incorporated into this Program Attachment by reference.

II. Compliance Date

New Personnel must provide proof of being Up-To-Date on COVID-19 vaccination or properly decline such vaccination within 14 calendar days of the first date of employment. If the 14th calendar day after the first date of employment falls on a weekend or University holiday, the deadline will be the next business day that is not a University holiday.

For Students, the deadline is the first day of instruction for the term when they first enroll. Compliance with this program may require recurring obligations to either remain Up-To-Date or affirmatively decline COVID-19 vaccination, and Locations will set the deadlines for compliance with any such requirements. In such cases, Covered Individuals will be required to provide proof that they are Up-To-Date on COVID-19 vaccination or properly
decline such vaccination in a form and as of a date set by the LVA. The LVA may use different forms and set different dates for different groups of Covered Individuals (e.g., Personnel and trainees, or Non-Healthcare Location and Healthcare Location).

Student employees are subject to the deadlines applicable to students. Locations may specify additional deadlines.

III. Program Type: □ Mandatory (Subject to Exceptions Marked Below) ☑ Opt-Out

On or before the applicable Compliance Date, Covered Individuals must: (i) receive Vaccine Education concerning COVID-19 and vaccination as a preventive measure; and (ii) receive COVID-19 vaccination as required to be Up-To-Date or affirmatively decline COVID-19 vaccination. Those who choose to decline COVID-19 vaccination must complete a Vaccine Declination Statement provided by their Location on or before the applicable Compliance Date. Covered Individuals who are not Up-To-Date must observe any additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals who initially decline COVID-19 vaccination but later decide to become vaccinated may receive the Vaccine at any time and may notify the LVA.

Some Covered Individuals may be subject to more restrictive COVID-19 vaccination requirements under applicable law and/or applicable public health directives. In such cases, the more restrictive vaccination requirements will apply in addition to any other requirements under this COVID-19 Vaccination Program.

IV. Evidence Required

Covered Individuals who Participate in the COVID-19 Vaccination Program by receiving COVID-19 vaccination as required to be Up-To-Date must submit proof that they received the Vaccine by providing the LVA, within the timeframe set by the LVA, any evidence required by their Location as determined by the LVA. The LVA may choose to permit certification or self-attestation as evidence of receiving COVID-19 vaccination.

Those who Participate in the COVID-19 Vaccination Program by declining COVID-19 vaccination must complete their Location’s Vaccine Declination Statement on or before the applicable Compliance Date.

Proof of vaccination may be subject to audit.

V. Non-Pharmaceutical Interventions (NPIs)

All members of the Location’s community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.
Those who are not Up-To-Date may be subject to NPIs above and beyond those who have.

VI. Systemwide Implementation Guidelines: ☐ Attached ☒ None

VII. Related Information

- CDC, Stay Up to Date with Vaccines
- CDC, COVID-19 Contraindications and Precautions
- CDC, New COVID-19 Vaccination Provider Trainings
- FDA, COVID-19 Vaccines (includes fact sheets and translations)
- CDC, COVID-19 Vaccination Clinical Resources for Each COVID-19 Vaccine
- CDC, COVID-19 Vaccination Program Operational Guidance, including Interim Clinical Considerations for Use of COVID-19 Vaccines in the United States.
- CDC Immunization Schedules
- CDC and Infectious Diseases Society of America, Vaccines & Immunity
- American Academy of Pediatrics, COVID-19 Vaccines in Infants, Children & Adolescents
- American College of Obstetricians and Gynecologists, COVID-19 Vaccination Considerations for Obstetric-Gynecologic Care
- American Society of Transplantation, COVID-19 Resources for Transplant Community
- Congregation for the Doctrine of the Faith, Note on the Morality of Using Some Anti-COVID-19 Vaccines (December 21, 2020)
- UC COVID-19 Vaccination Program Responsible Offices

VIII. Frequently Asked Questions

1. How do I know if I am Up-To-Date? Specifically, how do I know what COVID-19 vaccines are recommended for me?

   The U.S. Centers for Disease Control and Prevention (CDC) maintains current guidance on staying up to date with COVID-19 vaccines. You are Up-To-Date if you have received COVID-19 vaccination as recommended by the CDC.

2. Why is UC now allowing Covered Individuals to “Opt Out” of COVID-19 vaccination?

   The federal Public Health Emergency ended on May 11, 2023, along with the COVID-19 vaccination requirements for federal employees and federal contractors. California’s COVID-19 State of Emergency ended on February 28,

With the changes to federal and state public health guidance and widespread participation in the University’s COVID-19 Vaccination Program, the University has determined that it is now appropriate to move to a systemwide opt-out program for all Covered Individuals. The University has concluded that the combination of previous COVID-19 vaccination and naturally occurring immunity provides a large majority of the University community with adequate protection to reduce the public health risk faced during earlier stages of the pandemic.

The University strongly recommends that all members of the University community stay Up-To-Date with COVID-19 vaccination. And in the event applicable law or applicable public health orders impose stricter vaccination requirements, the University will continue to require compliance with those stricter requirements.

The University will continue to review current evidence and evaluate the need for adjustments to the COVID-19 Vaccination Program accordingly.

3. University policy previously described primary series and booster requirements. Do the University’s current requirements differentiate between primary series and boosters?

No. The University’s COVID-19 Vaccination Program requires Covered Individuals to be Up-To-Date on COVID-19 vaccination or to properly decline COVID-19 vaccination. The University’s vaccination requirements do not differentiate between your first dose and any later doses, and you may opt out of COVID-19 vaccination so long as you comply with all policy requirements. Note, however, if you are subject to more restrictive COVID-19 vaccination requirements under applicable law and/or applicable public health directives, you must also comply with those requirements. The CDC continues to recommend that everyone 6 months of age and older be up to date with COVID-19 vaccines.

4. Will I have to opt out every year?

The University’s COVID-19 Vaccination Program requires Covered Individuals to be Up-To-Date on COVID-19 vaccination or to properly decline COVID-19 vaccination. Neither FDA nor CDC has yet made a recommendation on the frequency of vaccination, and the University does not currently require Covered Individuals to opt out every year. Compliance with this program may require recurring obligations to either remain Up-To-Date or affirmatively decline COVID-19 vaccination. In this case, your Location will set deadlines for compliance with any such requirements.

5. Are there any COVID-19 vaccination requirements that apply to me besides the University’s COVID-19 Vaccination Program?

Some Covered Individuals might be subject to additional COVID-19 vaccination
requirements under applicable law and/or applicable public health directives. For example, health care workers might be subject to more restrictive COVID-19 vaccination requirements under CDPH or local public health orders. Covered Individuals subject to additional or more restrictive COVID-19 vaccination requirements under applicable law and/or applicable public health directives must comply with those requirements in addition to any other requirements under the University’s COVID-19 Vaccination Program. Please contact your Location if you have questions about what COVID-19 vaccination requirements apply to you.

6. I am a new University of California employee. What is my deadline for complying with the COVID-19 Vaccination Program?

Complying with the COVID-19 Vaccination Program is a condition of employment. If you’re a Covered Individual, you must provide proof of being Up-To-Date on COVID-19 vaccination or properly decline such vaccination within 14 calendar days of your first date of employment. If the 14th calendar day after your first date of employment falls on a weekend or University holiday, your deadline will be the next business day that is not a University holiday.

As complying with the COVID-19 Vaccination Program may require recurring obligations to either remain Up-To-Date or affirmatively decline COVID-19 vaccination, you must then comply with any future applicable compliance deadlines as set by your individual Location.

Student employees are subject to the deadlines applicable to students.

IX. Model Forms and Exhibits

Model Form: Vaccine Declination Statement – Declination of COVID-19 Vaccine

Note: This model form is provided for convenience only and may be adapted by locations consistent with applicable policies and practices.

X. Revision History

TBD 2024:

August 16, 2023:

- Amended COVID-19 vaccination requirement to permit Covered Individuals to decline COVID-19 vaccination after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements. Removed model forms and other content regarding Exception process.

- Updated language consistent with current public health usage, removed outdated content, and made clarifying edits.

- Removed Implementation Guidelines on Exceptions and Employee Compliance, moved relevant language regarding vaccination data to Policy Text, and addressed noncompliance in Compliance/Responsibilities.

- Updated compliance deadlines and removed previous compliance deadlines, including the initial implementation deadline for Fall 2021.
• Authorized Locations to determine any evidence required to prove COVID-19 vaccination, which may include certification or self-attestation.

**December 12, 2022:**

• Amended booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

• Authorized Locations (other than Healthcare Locations) to permit self-attestation as evidence of receiving the booster.

• Clarified that booster compliance may be assessed annually between July and December, rather than at the moment an additional dose or booster is recommended.

**August 30, 2022:**

• Converted from COVID-specific vaccine policy to Program Attachment.

• Amended Program Evaluation requirement to encourage rather than require Healthcare Locations to evaluate Program Participation on an annual and ongoing basis.

• Extended compliance deadline for new employees to permit longer interval period between doses in alignment with the CDC guidance current as of August 30, 2022.

**July 15, 2021:** Extended COVID-19 vaccine policy to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

**January 15, 2021:** Extended COVID-19 vaccine policy from UC Health to all Locations.

**Initial issuance effective: December 14, 2020.**

This Program Attachment is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.
The University of California strongly recommends that all members of the University community stay Up-To-Date on COVID-19 vaccination consistent with vaccine recommendations adopted by the CDC and CDPH applicable to their age, medical condition, and other relevant indications.

I am aware of the following facts:

- COVID-19 is a serious disease and has killed over 1 million people in the United States since February 2020, over 100,000 in California alone.
- The COVID-19 vaccine is recommended for me and other members of the University community to protect our students, patients, faculty, and staff, and our families and communities, from COVID-19, its complications, and death.
- If I contract COVID-19, I can shed the virus for days even before any symptoms appear. During the time I shed the virus, I can transmit it to anyone I contact.
- If I become infected with SARS-CoV-2, the virus that causes COVID-19, even if my symptoms are mild or non-existent, I can spread the disease to others, and they can become seriously ill or die as a result.
- Approximately 1 in 10 American adults who have had COVID-19 is estimated to be suffering from “Long COVID” – symptoms that can last months or years after COVID-19 and can be debilitating.
- Contracting COVID-19 could have severe consequences for my health and the health of those with whom I have contact, including my coworkers or peers and vulnerable members of our community.
- Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of COVID-19 vaccine recommended to stay Up-To-Date as explained in the UC Policy on Vaccination Programs.

Despite these facts, I am voluntarily choosing to decline COVID-19 vaccination. My reason(s) for declining are as follows (answering this question is optional):

- [ ] medical contraindication
- [ ] disability
- [ ] religious objection
- [ ] concerned about risks of vaccine more than risks of disease
- [ ] want to delay but intend to get vaccinated later
- [ ] other ________________________________
VACCINE DECLINATION STATEMENT – DECLINATION OF COVID-19 VACCINATION

☐ prefer not to say.

I understand that I can change my mind at any time and accept COVID-19 vaccination. I understand that as long as I am not Up-To-Date on COVID-19 vaccination, I may be required to take precautionary measures as required by my location, such as wearing a mask and increased testing. [LOCATION OPTION: "I also will not receive a badge sticker showing that I have received the vaccine."]

I have read the Vaccine Information Statement or Fact Sheet and the information on this Vaccine Declination Statement, and I have had a chance to ask questions.

Signature: ___________________________ Date: ___________________
PROGRAM ATTACHMENT #2: Seasonal Influenza Vaccination Program

<table>
<thead>
<tr>
<th>Vaccine(s)</th>
<th>Targeted Disease or Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Seasonal Influenza</td>
</tr>
</tbody>
</table>

See [https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm](https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm) for details.

I. Purpose/Supporting Data:

According to the Centers for Disease Control & Prevention, vaccination against the seasonal respiratory disease influenza or “flu” has long been accepted as a safe and effective way to prevent millions of illnesses and thousands of related doctor and hospital visits every year. In recent years, flu vaccines have reduced the risk of flu-associated hospitalizations among older adults by about 40% on average. A 2018 study showed that from 2012 to 2015, flu vaccination among adults reduced the risk of being admitted to an intensive care unit (ICU) with flu by 82 percent. Flu vaccination has been associated with lower rates of some cardiac events among people with heart disease, especially among those who had had a cardiac event in the past year. It can mitigate against worsening and hospitalization for flu-related chronic lung disease. It has also been shown in separate studies to be associated with reduced hospitalizations among people with diabetes and chronic lung disease. A 2018 study that covered influenza seasons from 2010-2016 showed that getting a flu shot reduced a pregnant woman’s risk of being hospitalized with flu by an average of 40 percent.

Flu vaccination has been shown in several studies to reduce severity of illness in people who become ill after they get vaccinated. For example, a 2017 study showed that flu vaccination reduced deaths, ICU admissions, ICU length of stay, and overall duration of hospitalization among hospitalized flu patients. A 2018 study showed that among adults hospitalized with flu, vaccinated patients were 59 percent less likely to be admitted to the ICU than those who had not been vaccinated. Among adults in the ICU with flu, vaccinated patients on average spent 4 fewer days in the hospital than those who were not vaccinated. Finally, by getting vaccinated, a person can protect those around them, including those who are more vulnerable to serious flu illness.

The CDC’s Advisory Committee on Immunization Practices (“ACIP”) issues recommendations regarding influenza specific to each flu season. Population-level interventions that decrease the likelihood of absenteeism, disease transmission, hospitalization, and ICU utilization must be considered and adopted where feasible.

Refer to Section VII (Related Information) for additional information supporting Implementation of this program, which is incorporated into this Program Attachment by reference.

For these reasons, the University has concluded that steps must be taken to reduce the likelihood of severe disease among students, faculty, and staff.

II. Compliance Date: Annually, no later than December 1 or an earlier date set by an
III. **Program Type:** ☐ Mandatory (Subject to Exceptions Marked Below) ☑ Opt-Out

On or before the Compliance Date, Covered Individuals must: (i) receive Vaccine Education concerning influenza and vaccination as a preventive measure; and (ii) receive or affirmatively decline influenza vaccination. Those who choose to decline influenza vaccination must complete a Vaccine Declination Statement provided by their Location on or before the Compliance Date. Covered Individuals who are not vaccinated must observe additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they interact. Covered Individuals who initially decline the influenza Vaccine but later decide to become vaccinated may receive the Vaccine through on-site or off-site providers at any time and may notify the LVA.

IV. **Evidence Required:** To be determined by the LVA.

V. **Non-Pharmaceutical Interventions (NPIs):**

All members of the Location’s community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing. Those who are not Up-To-Date on their Vaccines may be subject to NPIs above and beyond those who are.

VI. **Systemwide Implementation Guidelines:** ☐ Attached ☑ None

VII. **Related Information:**
- CDC, [Seasonal Influenza Vaccination Resources for Health Professionals](#)
- CDPH, [Influenza (Flu), RSV, and Other Respiratory Diseases](#)

VIII. **Frequently Asked Questions:**

1. **I am a new University of California employee. What is my deadline for complying with the Seasonal Influenza Vaccination Program?**

   Complying with the Seasonal Influenza Vaccination Program ("Flu Vaccination Program") is a condition of employment, and all Covered Individuals must provide proof of being Up-To-Date on seasonal influenza vaccination or properly decline such vaccination by no later than the applicable deadline each year. If you are a Covered Individual, your first deadline to comply with the Flu Vaccination Program depends on when your first date of employment is in relation to the flu season.
a) If your first date of employment with the University is during the flu season before the Compliance Date at your Location (i.e., December 1 or an earlier date set by your Location), then you must first comply with the Flu Vaccination Program by that Compliance Date. For example, if your first date of employment is November 1, and your Location has a Compliance Date of December 1, then you must first comply with the Flu Vaccination Program by December 1 of that year.

b) If your first date of employment with the University is on or after May 1 (or a different end date set by your Location), then you must first comply with the Flu Vaccination Program by your Location’s Compliance Date for the next flu season. For example, if your first date of employment is May 2 and your Location is using May 1 as the end date, then you must first comply with the Flu Vaccination Program by your Location’s Compliance Date for the following flu season.

c) If your first date of employment with the University is on or after the Compliance Date at your Location but before May 1 (or the different end date set by your Location), then you must first comply with the Flu Vaccination Program within 14 calendar days of your first date of employment. For example, if your first date of employment is December 2, then you must first comply with the Flu Vaccination Program by December 16 of that year.

All Covered Individuals must then comply with the Flu Vaccination Program annually by the Compliance Date set at their individual Locations. Student employees are subject to the deadlines applicable to students.

2. I am an employee who is not working during flu season. Do I still need to comply with the Seasonal Influenza Vaccination Program?

No, but if you must be Physically Present in your capacity as a Covered Individual at any time between your Location’s Compliance Date and May 1 (or a different end date set by your Location), then you must comply.

IX. Model Forms and Exhibits: TBD

X. Revision History:

TBD 2024:

August 16, 2023: Updated FAQs for clarity regarding compliance deadlines. Removed outdated content.

August 30, 2022: Executive Order Converted to Program Attachment

October 8, 2021: Executive Order Issued Extending Program to all Campuses

September 29, 2020: Revised July 31, 2020 Executive Order

July 31, 2020: Executive Order Issued Extending Program to all Campuses

First Effective Date: Longstanding at UC Medical Centers
January 31, 2023

DOUGLAS HAYNES, VICE PROVOST
ACADEMIC PERSONNEL & PROGRAMS

Re: Academic Senate Review of University of California Policy on Vaccination Programs – with Interim Amendments

Dear Vice Provost Haynes:

As requested, I distributed for systemwide Senate review a draft of the University of California Policy on Vaccination Programs – with Interim Amendments. The Senate distributed the original draft policy to Senate divisions and committees for review in September 2022 with a comment deadline of December 2022. We paused the review in November after learning that UCOP had updated the policy with interim amendments and circulated the revised policy for expedited review on December 14. All ten Academic Senate divisions and three systemwide committees (BOARS, UCFW, and UCAADE) submitted comments. These were discussed at Academic Council’s January 25 meeting and are attached for your reference. The following summary captures several themes from the Senate review, but we encourage you to review the letters for additional details as you finalize the policy.

We understand the policy consolidates existing systemwide vaccination requirements into a single policy with specific program attachments for the COVID-19 Vaccination Program and the Seasonal Influenza Vaccination Program. The policy maintains the existing mandate for all faculty, staff, students, and trainees to receive the COVID-19 primary vaccination series, subject to limited religious, medical, and disability exceptions. Covered individuals must also receive the most recent CDC-recommended booster at least once per year, or affirmatively decline the booster by completing a vaccine declination statement. The seasonal influenza vaccine is an opt-out program that individuals are required to receive but may decline after receiving education.

In general, the Senate supports the policy as an important public health tool that facilitates the health and safety of the University community by aligning UC vaccine requirements and recommendations with science-based federal and state guidelines. The faculty strongly support maintaining a mandate for the COVID vaccine primary series. We know that widespread vaccination against contagious disease is sound public health policy and that the adoption of
COVID vaccines has saved lives, relieved pressure on the public health infrastructure, and allowed UC campuses to resume standard operations. The policy strikes the right balance with the mandate by including appropriate flexibility for individuals who need exceptions or wish to pursue alternatives for opting out. The allowable exceptions focus on populations with the most legitimate concerns about vaccinations and restricts loopholes that could undermine the mandate’s public health purpose.

There was more mixed support for the policy’s approach to booster mandates. Some faculty appreciate the relaxation of processes around continuous booster compliance in the interim amendments, particularly given the status of the virus. Other faculty seek a more rigorous mandate for annual boosters than provided in the policy. They are concerned about the low uptake of the latest COVID-19 booster and want the University to extend the primary series mandate to boosters. The UCLA division and UCFW oppose the interim amendments based on these concerns and the absence of data about the effects of removing the booster mandate on UC community safety.

Senate reviewers recommend moving the compliance deadline for the Influenza Vaccination Program to November 1 to better protect the public, given that flu season is well underway by December 1.

The Council believes the University should continue to make evidence-based policy decisions and commit to an ongoing review of UC public health mandates and mechanisms based on evolving scientific consensus of best practices for community health threats and emergencies. The vaccination policy should include enough flexibility to allow the University to respond to current public health conditions and to experts’ advice and directives about the need for either more or less restrictive requirements.

The letters also include numerous suggestions for improving the policy to better convey information, purpose, and implementation. These include calls for a more educational and positive document, more explicit definitions to avoid future problems with differences in interpretation, and a quick reference guide table summarizing relevant deadlines and timelines for various compliance and exception processes to help covered individuals navigate these processes.

Reviewers emphasized that the University should ensure consistent enforcement of the policy across campuses and staff, faculty, and student groups. They observed that the policy encourages general campus locations, but not healthcare locations, to evaluate COVID-19 vaccination participation. All UC locations, including healthcare locations, should be encouraged to conduct program evaluations and provide annual compliance reporting. The policy should also clarify the extent to which it applies to outside contractors, volunteers, guests, and short-term visitors, and specify the section of the Faculty Code of Conduct that would apply to faculty who are out of compliance.

Reviewers also expressed concern that the removal of the guarantee of access to free COVID-19 vaccinations could hurt underrepresented communities, emphasized that the policy should apply only to vaccines that are broadly available and not restricted to marginalized social groups, and
encouraged UC to provide employees with the opportunity to take paid leave to recover from side effects associated with required vaccinations or boosters.

Finally, there were numerous comments that the short review timeline did not permit fuller evaluation of the proposed interim amendments. When we paused the review in November, some campus committees had already met to discuss and draft analyses of the policy. The subsequent reissuance of the policy created confusion and inconvenienced faculty who had invested time in the initial review and were asked to conduct an additional accelerated review during a period that included the winter break.

We appreciate the opportunity to comment. Please do not hesitate to contact me if you have additional questions.

Sincerely,

Susan Cochran, Chair
Academic Council

Cc: Academic Council
Campus Senate Executive Directors
Executive Director Lin

Encl.
Jane 17, 2022

SUSAN COCHRAN
Chair, Academic Council

Subject: Systemwide Review of Presidential Policy on Vaccination Programs, with updated interim amendments

Dear Chair Cochran:

I forward Berkeley’s comments on the systemwide review of the Presidential Policy on Vaccination Programs, with updated interim amendments. Our comments were developed by the Academic Senate Committee on Faculty Welfare (FWEL), which I endorse on behalf of the Council of the Berkeley Division (DIVCO).

The consensus was that the Policy strikes the right balance, although the tone could perhaps be more positive. FWEL raised questions about who will pay for the vaccination(s) and whether supply chain delays or shortage of medical professionals have been considered in drafting this Policy. The Committee also suggested UCOP endeavor to develop a strategy for communicating about the effectiveness of the influenza and the Covid-19 vaccines, although it was agreed that this policy was not the appropriate place for such a statement.

Please see the enclosures for more information.

Sincerely,

Mary Ann Smart
Professor of Music
Chair, Berkeley Division of the Academic Senate

Enclosures

cc: Maximilian Auffhammer, Vice Chair, Berkeley Division of the Academic Senate
Jocelyn Surla Banaria, Executive Director, Berkeley Division of the Academic Senate
Thomas Leonard, Co-Chair, Committee on Faculty Welfare
Nancy Wallace, Co-Chair, Committee on Faculty Welfare
Patrick Allen, Senate Analyst, Committee on Faculty Welfare
January 5, 2023

CHAIR MARY ANN SMART
Academic Senate

Re: Extension of Systemwide Review of Presidential Policy –
Policy on Vaccination Programs (revised from the September 2022 version)

Dear Chair Smart,

The Committee on Faculty Welfare (FWEL) reviewed the revised “Presidential Policy –
Policy on Vaccination Programs.” FWEL had submitted comments regarding concerns
with the original draft back on November 8, 2022. Overall, the Committee stands by the
comments and have no further concerns to comment on at this time.

We appreciate the opportunity to weigh in on these matters.

Sincerely,

Thomas Leonard, Co-Chair
Committee on Faculty Welfare

Nancy Wallace, Co-Chair
Committee on Faculty Welfare

TL/NW/pga
CHAIR MARY ANN SMART
Academic Senate

Re: Draft of the Presidential Policy on Vaccination Programs

Dear Chair Smart,

On October 24, 2022, the Committee on Faculty Welfare (FWEL) reviewed and discussed “The Policy on Vaccination Programs—with Interim Amendments.” Two of our members had the benefit of hearing the thoughts on this public document from a UCBEA Working Group on Retiree Health that met a few days before our Oct. 24 meeting.

We believe that the Policy strikes the right balance, neither too stringent nor too relaxed, in the present circumstances. But we would likely support moves in either direction as federal or California health agencies advise at a later date.

The tone of the Policy should be made more positive, first thanking the UC community for protecting the health and well-being of all its members and also acknowledging our productive work in the very challenging environment of the pandemic.

FWEL seeks more clarity in the Policy about who will be paying for the vaccination(s). We wonder if delays in the supply chains, or a shortage of medical personnel to give the shots, has been properly factored into the Policy.

FWEL wishes the Policy could better inform everyone in our community about the effectiveness of both the influenza and the Covid-19 vaccines now available. But there is a consensus on our committee that the policy statement itself, including the FAQs, is not the place to handle this task. As a practical matter, information of this type would require constant updating and would have to allow for shifting expert opinion. This very important part of a complete Policy on Vaccination Programs is best achieved on each campus, we believe.

A model for doing this at Berkeley has been the Response and Recovery Newsletter that was active from August 2021 to August 2022, supplemented by the current site: https://coronavirus.berkeley.edu
To our knowledge, the effectiveness of these channels of communication has not been reviewed by committees of the Academic Senate. Perhaps this would be useful now.

We appreciate the opportunity to weigh in on these matters.

Sincerely,

Thomas Leonard, Co-Chair
Committee on Faculty Welfare

Nancy Wallace, Co-Chair
Committee on Faculty Welfare

TL/NW/pga
January 18, 2023

Susan Cochran  
Chair, Academic Council

RE:  Presidential Policy on Vaccination Programs

Dear Susan,

The proposed Presidential Policy on Vaccination Programs was forwarded to all standing committees of the Davis Division of the Academic Senate. Five committees responded: Faculty Welfare (FW) and the Faculty Executive Committees of the College of Agricultural and Environmental Sciences (CAES), the College of Letters and Science (L&S), the School of Medicine (SOM), and the School of Nursing (SON).

Committees support the policy. SON notes, however, that half of its faculty recommend COVID-19 boosters be treated in the same way that the university treats the primary vaccination series for COVID-19.

To improve transparency, FW recommends that the policy “cite the overarching reason for the creation and implementation of this policy as well as citations to articles supporting this choice. There are many other vaccines that are not required by the University, so it would be helpful to provide more information on why these vaccines are being required.”

The Davis Division appreciates the opportunity to comment.

Sincerely,

Ahmet Palazoglu  
Chair, Davis Division of the Academic Senate  
Distinguished Professor of Chemical Engineering  
University of California, Davis

Enclosed:  Davis Division Committee Responses
January 12, 2023

Ahmet Palazoglu  
Chair, Davis Division of the Academic Senate

RE: Request for Consultation – Presidential Policy on Vaccination Programs

Dear Ahmet:

The Committee on Faculty Welfare has reviewed the RFC – Presidential Policy on Vaccination Programs and has some suggestions to help increase the transparency of the policy. The committee feels that it would be helpful for the policy to cite the overarching reason for the creation and implementation of this policy as well as citations to articles supporting this choice. There are many other vaccines that are not required by the University, so it would be helpful to provide more information on why these vaccines are being required. The committee also expressed concern with the December 1 deadline for flu vaccinations, as flu season starts before then.

Sincerely,

Janet Foley  
Chair, Committee on Faculty Welfare

c: Edwin M. Arevalo, Executive Director, Davis Division of the Academic Senate
Presidential Policy on Vaccination Programs

FEC: College of Agricultural and Environmental Sciences Committee Response

January 13, 2023

The Faculty Executive Committee of College of Agricultural and Environmental Sciences reviewed the Presidential Policy on Vaccination Programs. The committee appreciates the opportunity to comment on the program and supports the policy.
Presidential Policy on Vaccination Programs

FEC: College of Letters and Science Committee Response

January 13, 2023

The committee approves and has no further questions.
Presidential Policy on Vaccination Programs

FEC: School of Medicine Committee Response

January 13, 2023

The FEC approves this Proposal for Presidential Policy on Vaccination Programs. Has the public Health or someone looked at this policy?
The SON FEC reviewed the revised policy and has two different opinions among the faculty members. The half of the members support the revisions made on the draft policy while the other half recommend the COVID-19 vaccination boosters be treated in the same way the University treats the Primary Series of the COVID-19 vaccination.
January 17, 2023

Susan Cochran, Chair
Academic Council

Re: Systemwide Review of Presidential Policy on Vaccination Programs

Dear Chair Cochran,

The Irvine Division discussed the presidential policy on vaccination programs at its Cabinet meeting on January 17, 2023. The Council on Faculty Welfare, Diversity, and Academic Freedom (CFW), Council on Equity and Inclusion (CEI), Council on Teaching, Learning, and Student Experience (CTLSE), and Committee on Privilege and Tenure (CPT) also reviewed the policy. The committees’ feedback is attached for your review.

The Irvine Division appreciates the opportunity to comment.

Sincerely,

Georg Striedter, Chair
Academic Senate, Irvine Division

Enclosures: CFW, CEI, CTLSE, CPT memos

Cc: Arvind Rajaraman, Chair Elect-Secretary
    Jisoo Kim, Executive Director
    Gina Anzivino, Associate Director
GEORG STRIEDTER, CHAIR
ACADEMIC SENATE, IRVINE DIVISION

Re: Presidential Policy on Vaccination Programs

The Council on Equity and Inclusion discussed the updated presidential policy on vaccination programs at its meeting on January 9.

Overall, members did not have significant concerns about the updated policy. However, one member expressed strong support for requiring vaccinations in the interest of public health and shared their concern about the low uptake of the latest booster and general lack of masking indoors. By allowing covered individuals to opt out of COVID-19 boosters, the updated policy will not do anything to incentivize or encourage members of the UC community to take the booster. Another member noted the significant administrative burden involved with tracking employee compliance, noting that with multiple opportunities for deferrals, exemptions, or exceptions to the policy, it is almost impossible to ensure compliance.

Members appreciated that the policy builds in flexibility and responsiveness to current public health conditions and expert directives when more restrictive or protective requirements are needed. They also appreciated the “facts” section on the new vaccine declination statement, ensuring individuals who decline the booster are aware of the possible implications to others in the UC community.

The Council on Equity and Inclusion appreciates the opportunity to comment.

Sincerely,

Jane Stoever, Chair
Council on Equity and Inclusion

Cc: Arvind Rajaraman, Chair Elect-Secretary
    Jisoo Kim, Executive Director
    Gina Anzivino, Associate Director and CEI Analyst
    Stephanie Makhlouf, Senate Analyst
January 11, 2023

GEORG STRIEDTER, CHAIR
ACADEMIC SENATE – IRVINE DIVISION

Re: Presidential Policy on Vaccination Programs

On August 30, 2022, the Policy on Vaccination Programs – With Interim Amendments was issued, with an effective date of September 1, 2022. On September 16, 2022, the University of California Office of the President distributed a draft policy for Systemwide Review with a comment deadline of December 15, 2022. Based on feedback received from the Systemwide Review thus far and discussions with leadership, updated interim amendments were made to the policy to include an option for members of the University community to opt out of COVID-19 boosters as well as technical edits. On December 12, 2022, the Policy on Vaccination Programs – With Updated Interim Amendments was issued.

The Council on Faculty Welfare, Diversity, and Academic Freedom (CFW) discussed the original draft policy on November 7, 2022, and then the interim amendments on January 10, 2023.

A member expressed some minor concern that “Laboratory Directors” in Section IV.C. are not defined. Otherwise, the Council has no objections to the current policy with interim amendments at this time.

Sincerely,

Lisa Naugle, Chair
Council on Faculty Welfare, Diversity, and Academic Freedom

C: Jisoo Kim, Executive Director
   Academic Senate

Gina Anzivino, Associate Director
   Academic Senate

Stephanie Makhoul, Cabinet Analyst
   Academic Senate
January 12, 2023

GEORG STRIEDTER, CHAIR
ACADEMIC SENATE, IRVINE DIVISION

RE: Presidential Policy on Vaccination Programs

The Committee on Privilege and Tenure (CPT) reviewed the revised Presidential Policy on Vaccination Programs. Due to the abbreviated timeline for review, the Committee was unable to discuss the policy as a group so members provided written feedback instead.

The Committee submitted the following comments and questions for consideration:

- The policy should define “primary series” for COVID-19 vaccination in more detail (page 4, section II. Definitions). The different entities cited in the current definition may not use the same criteria and there are age-specific recommendations. The CDC gives guidance on the optimal primary series but it is not clear from the policy how much deviation from these optimal schedules would be allowed.

- When the policy references several sources, members questioned what happens if the sources are not in agreement (e.g., page 7, section III.A.4: “Additional education may be required consistent with applicable federal, state, or local mandates or accreditation standards.”). Which source -- federal, state, or local mandates or accreditation standards -- is prioritized and who decides?

- According to page 8, section III.D.2.a, for vaccinations administered by the University, appropriate information will be submitted to the California Immunization Registry (CAIR) or “other such registries as may be required by applicable public health agencies or University policy.” Members reported that initial doses of the vaccine administered by the University are not recorded on the CDC Vaccination Card and that CAIR is not accepted universally as proof of vaccination. There needs to be a mechanism in place to ensure vaccinations administered by the University are recorded on the CDC Vaccination Card.

- Members suggested that the University replace the word “shall” with “should” in sections of the policy that appear to be obligations rather than suggestions (e.g., page 9, section IV.B.2: “Each location should implement reasonable strategies for vaccine access, including efforts to ensure vaccination ability during all work shifts and to address vaccine hesitancy, particularly among groups at most significant risk for contracting vaccine-preventable disease and suffering severe illness.”).

- A member cited possible confusion over the reference to Laboratory Directors (page 9, section IV.C) and whether it refers to lab directors on the campuses or directors of University-affiliated National Laboratories. Others understood it to be the latter. It may be helpful to be explicit to avoid any confusion.

- A member noted that the reason given for why a COVID-19 infection does not exempt an individual from the primary vaccination series (pages 19-20, section VIII.8 of the...
FAQ) makes no sense when it is clear that a recent COVID-19 infection provides better protection than a primary vaccination series taken at the beginning of the pandemic; other members agreed that a primary vaccination series taken at the beginning of the pandemic confers little protection today. Some members recommended that, given the current status of the virus, the University should consider making the COVID-19 vaccination program an opt out program for all non-healthcare workers.

The Committee on Privilege and Tenure appreciates the opportunity to comment.

Sincerely,

Bogi Andersen, Chair
Committee on Privilege and Tenure

Cc: Arvind Rajaraman, Chair Elect
    Jisoo Kim, Executive Director
    Gina Anzivino, Associate Director
    Julie Kennedy, CPT Analyst
    Stephanie Makhlouf, Senate Analyst
GEORGE STRIEDTER, CHAIR
ACADEMIC SENATE – IRVINE DIVISION

Re: Presidential Policy on Vaccination Programs

On August 30, 2022, the Policy on Vaccination Programs – With Interim Amendments was issued, with an effective date of September 1, 2022. On September 16, 2022, the University of California Office of the President distributed a draft policy for Systemwide Review with a comment deadline of December 15, 2022. Based on feedback received from the Systemwide Review thus far and discussions with leadership, updated interim amendments were made to the policy to include an option for members of the University community to opt out of COVID-19 boosters as well as technical edits. On December 12, 2022, the Policy on Vaccination Programs – With Updated Interim Amendments was issued.

The Council on Teaching, Learning, and Student Experience (CTLSE) discussed the original draft policy on November 7, 2022, and then the interim amendments on January 9, 2023.

The Council has no objections to the current policy with interim amendments at this time.

Sincerely,

Mary McThomas
Mary McThomas, Chair
Council on Teaching, Learning, and Student Experience

C: Jisoo Kim, Executive Director
Academic Senate

Gina Anzivino, Associate Director
Academic Senate

Stephanie Makhlouf, Cabinet Analyst
Academic Senate
January 18, 2023

Susan Cochran
Chair, UC Systemwide Academic Senate

Re: (Systemwide Senate Review) Presidential Policy on Vaccination Programs

Dear Chair Cochran,

At the January 12, 2023, meeting of the Executive Board, members reviewed the Presidential Policy on Vaccination Programs, and divisional committee and council responses. Members appreciated the opportunity to review the policy and offered the following comments.

The Executive Board recognizes this is a complicated issue. For such a proposed change, members requested a stronger empirical justification and sound data to show that removing the COVID-19 booster mandate will not negatively affect the safety of our university population. They requested citations to support this important claim: “At this point, however, a large proportion of the population has experienced COVID-19 since January 2022, and the University has concluded that the combination of Primary Series, earlier boosters, and naturally occurring immunity provides a large majority of the University community with adequate protection to reduce the public health risk faced during earlier stages of the pandemic.” Thus, members could not support the proposal at this time. Specifically, they asked for further consideration and evidence that this proposed opt-out change in policy would not place greater risks on campus members who may be more vulnerable due to age, disability status, or medical issues.

Sincerely,

Jessica Cattelino
Chair
UCLA Academic Senate

Encl.

Cc:  April de Stefano, Executive Director, UCLA Academic Senate
     Andrea Kasko, Vice Chair/Chair Elect, UCLA Academic Senate
     Shane White, Immediate Past Chair, UCLA Academic Senate
To: Jessica Cattelino, Chair  
Academic Senate

From: Marco Giovannini, Chair  
Committee on International Education

Date: October 27, 2022

Re: Systemwide Senate Review: Presidential Policy – University of California – Policy on Vaccination Programs

Dear Chair Cattelino,

At its meeting on October 26, 2022, the Committee on International Education discussed the Presidential Policy – University of California – Policy on Vaccination Programs.

Members support the concern raised by the Graduate Council regarding pregnancy being labeled as a disability. Members also recommend that the university provide ample opportunities for students to obtain the vaccines before the compliance deadline.

Thank you for the opportunity to review and comment. If you have any questions, please do not hesitate to contact me via the Committee on International Education analyst, Emily Le, at ele@senate.ucla.edu.
October 25, 2022

To: Jessica Cattelino, Chair, UCLA Academic Senate

From: James Bisley, Chair, Graduate Council

Re: (Systemwide Senate Review) Presidential Policy - University of California - Policy on Vaccination Programs

At its meeting on October 14, 2022, the Graduate Council reviewed and discussed the (Systemwide Senate Review) Presidential Policy – University of California – Policy on Vaccination Programs and offers the following observations for the Executive Board’s consideration:

Some members expressed concern over pregnancy being labeled as a disability. Members noted that the policy does not mention breastfeeding and that proposers should consider including breastfeeding for exemption or deferral.

As an aside, members were interested in the origin and rationale for the flu vaccine mandate. There was a concern that the Seasonal Influenza Vaccination Program grew out of an executive order during the COVID-19 pandemic and that there was no consultation and justification for retaining this new standard.

We appreciate the opportunity to express our views on this matter. If you have any questions, please contact us via Graduate Council’s Analyst, Estrella Arciba, at earciba@senate.ucla.edu.
January 18, 2023

To: Susan Cochran, Chair, Academic Council

From: Patti LiWang, Chair, UCM Divisional Council

Re: Systemwide Senate Review of Presidential Policy on Vaccination Programs

The Presidential Policy on Vaccination Programs was distributed for comment to the Merced Division Senate Committees and School Executive Committees.

Two committees offered comments in fall 2022 and have no further comments. One committee submitted comments in December 2022 following the new request from UCOP and their comments are highlighted below. All committee comments are appended to this memo.

- The Graduate Council (GC) recommended that in order to improve accessibility of this policy, a table should be added at the beginning of the policy that summarizes all the various relevant deadlines/timelines (3 days, 14 days, 15 days, 30 days, 90 days, and 180 days are mentioned throughout the policy for various different processes). GC believes this key information should be initially stated together with references to the corresponding detailed policy sections. GC also recommended making the 14- and 15-day requirement to submit proof of vaccination/booster consistent (e.g. 15 calendar days) throughout the policy. Additionally, GC was concerned that 15 days may not be sufficient time for certain individuals in areas that are undeserved and have limited access to health services.

Divisional Council reviewed the committees’ comments and supports their various points and suggestions.

The Merced Division thanks you for the opportunity to comment on this policy.

CC: Divisional Council
Monica Lin, Executive Director, Systemwide Academic Senate
Michael LaBriola, Assistant Director, Systemwide Academic Senate
Senate Office
December 21, 2022

To: Patti LiWang, Chair, Academic Senate

From: Michael Scheibner, Chair, Graduate Council (GC)

Re: Presidential Policy on Vaccination Programs (previously paused in November)

GC reviewed the Presidential Policy on Vaccination Programs and offers the following comments:

In order to improve accessibility of this policy, GC recommends adding a table at the beginning of the policy that summarizes all the various relevant deadlines/timelines (3 days, 14 days, 15 days, 30 days, 90 days, and 180 days are mentioned throughout the policy for various different processes). GC believes this key information should be initially stated together with references to the corresponding detailed policy sections.

GC recommends making the 14- and 15-day requirement to submit proof of vaccination/booster consistent (e.g. 15 calendar days) throughout the policy. Additionally, GC is concerned that 15 days may not be sufficient time for certain individuals in areas that are undeserved and have limited access to health services.

GC thanks you for the opportunity to review the proposal.

Cc: Graduate Council
Senate Office
November 1, 2022

To: Patti LiWang, Chair, Division Council

From: David Jennings, Chair, Committee on Faculty Welfare and Academic Freedom (FWAF)

Re: Presidential Policy on Vaccination Programs

FWAF reviewed the proposed Presidential Policy on Vaccination Programs and offers the below comments.

FWAF generally supports the proposed policy. However, we wish to highlight the need for clearly communicating to all stakeholders both what the policy requires of them and what the consequences of noncompliance are. It’s also important that there be uncomplicated processes for documenting one's compliance and for seeking exceptions to the policy.

Should the decisions concerning exemptions be entrusted to third-party actors (as the policy permits), FWAF recommends the campus or system oversee them carefully.

We appreciate the opportunity to opine.

cc: Senate Office
October 28, 2022

To: Patti LiWang, Chair, Divisional Council  
From: Committee for Equity, Diversity and Inclusion (EDI)  
Re: Presidential Policy on Vaccination Programs

The Committee for Equity, Diversity and Inclusion (EDI) reviewed the Presidential Policy on Vaccination Programs and offers the following comments.

This new policy is primarily a reorganization and simplification of existing policy language. From the EDI perspective, the change to the Covered Non-Affiliates makes sense, because it sufficiently considers diversity and inclusion.

EDI has a question about the change to the locations that are “encouraged to evaluate COVID-19 Vaccination Program Participation”. In the proposed new policy, the Healthcare Locations are not required to evaluate the participation. EDI wonders whether the change can lead to missing records of participation. But this question may not be related to EDI.

EDI appreciates the opportunity to comment.

cc: EDI Members
January 18, 2023

Susan Cochran, Chair, Academic Council
1111 Franklin Street, 12th Floor
Oakland, CA 94607-5200


Dear Susan,

The Riverside Executive Council will discuss the subject policy during their January 23, 2023 meeting after which Council’s comments and those pending from other local committees will be transmitted to your attention.

For now, I attach the comments of committees able to respond by the January 18, 2023 due date.

Sincerely yours,

Sang-Hee Lee
Professor of Anthropology and Chair of the Riverside Division

CC: Monica Lin, Executive Director of the Academic Senate
    Cherysa Cortez, Executive Director of UCR Academic Senate Office
COMMITTEE ON EDUCATIONAL POLICY
January 11, 2023

To: Sang-Hee Lee, Chair
    Riverside Division

From: Lorenzo Mangolini, Chair
      Committee on Educational Policy

RE: Proposed Revision to Presidential Policy on Vaccination Programs

The Committee on Educational Policy (CEP) reviewed the proposed revision to the Presidential Policy on Vaccination Programs at their January 6, 2023 meeting and noted that the proposal does not fall under the Committee’s charge of undergraduate education.
COMMITTEE ON EDUCATIONAL POLICY

January 11, 2023

To: Sang-Hee Lee, Chair
    Riverside Division

From: Lorenzo Mangolini, Chair
      Committee on Educational Policy

RE: Proposed Revision to Presidential Policy on Vaccination Programs

The Committee on Educational Policy (CEP) reviewed the proposed revision to the Presidential Policy on Vaccination Programs at their January 6, 2023 meeting and noted that the proposal does not fall under the Committee’s charge of undergraduate education.
COMMITTEE ON DIVERSITY, EQUITY, & INCLUSION

January 18, 2023

To: Sang-Hee Lee, Chair
   Riverside Division Academic Senate

From: Katherine Stavropoulos, Chair
      Committee on Diversity, Equity, & Inclusion


The Senate Committee on Diversity, Equity, and Inclusion (DEI) has reviewed and deliberated on the subject proposal and has no additional comments to add and accept it in its present form.
January 17, 2023

To: Sang-Hee Lee, Chair
Riverside Division

From: Weixin Yao, Chair
Committee on Research


The committee on research reviewed the proposal and had no comments.
FACULTY WELFARE

January 10, 2023

To: Sang-Hee Lee, Chair
    Riverside Division

From: Robert Clare, Chair
       Committee on Faculty Welfare

RE: Proposed Policy: Extension of Systemwide Review of Presidential Policy
    – Policy on Vaccination Programs

Faculty Welfare reviewed the Policy on Vaccination Programs at their January 10, 2023 meeting. The committee agreed the policy was acceptable as written.
To: Sang-Hee Lee, Chair
   Riverside Division

From: Christiane Weirauch, Chair
       Graduate Council

Re: [Systemwide Review] (Proposed Policy) Extension of Systemwide Review of
    Presidential Policy – Policy on Vaccination Programs

Graduate Council reviewed the Extension of Systemwide Review of Presidential Policy
on UC Vaccination Programs and was supportive of the policy.
January 13, 2023

To: Sang-Hee Lee, Division Chair of the UCR Division of the Academic Senate and Cherysa Cortez, Executive Director of the UCR Academic Senate

From: Raquel M. Rall, Ph.D., Faculty Chair of the School of Education Executive Committee


The SOE Executive Committee reviewed the [Systemwide Review] (Proposed Policy) Extension of Systemwide Review of Presidential Policy – Policy on Vaccination Programs. Committee members provided feedback via email because the deadline for comments fell between FEC meeting dates.

The Executive Committee does not have any additional feedback to offer on this policy at this time.

Thank you for the opportunity to provide feedback.

Sincerely,

Raquel M. Rall, Ph.D.
Faculty Executive Committee Chair 2022-2025
School of Education
University of California, Riverside
January 17, 2023

TO: Sang-Hee Lee, Ph.D., Chair, Academic Senate, UCR Division
FROM: Marcus Kaul, Ph.D., Chair, Faculty Executive Committee, UCR School of Medicine

Dear Sang-Hee,

The SOM Faculty Executive Committee has reviewed the Extension of Systemwide Review of Presidential Policy on Vaccination Programs. The committee feels that the revisions would assist in streamlining the current array of policies to ensure the policies surrounding this topic are clear and concise. The committee feels this policy would enhance the safety of the work place environment. There are no recommendations for further edits.

Yours sincerely,

Marus Kaul, Ph.D.
Chair, Faculty Executive Committee School of Medicine
COMMITTEE ON UNDERGRADUATE ADMISSIONS

January 17, 2023

To: Sang-Hee Lee, Chair
    Riverside Division

From: Peter M. Sadler, Chair
    Committee on Undergraduate Admissions


The Committee on Undergraduate Admissions reviewed the Extension of Systemwide Review of Presidential Policy – Policy on Vaccination Programs and did not have any concerns as it relates to the Committee’s charge of undergraduate admissions. However, the question of whether students (both first year and transfer) were deterred from attending a UC due to the strict vaccination requirements was raised.
January 12, 2023

Professor Susan Cochran
Chair, Academic Senate
University of California
VIA EMAIL

Re: Divisional Review of the Presidential Policy on Vaccination Programs

Dear Chair Cochran,

The Presidential Policy on Vaccination Programs was discussed at the January 9, 2023 Divisional Senate Council meeting. Senate Council endorsed the proposal. Reviewers agreed with the revised and more restrictive deferral and exception request policies.

The initial version of the policy was distributed to all Senate standing committees. Due to the review schedule of the revised policy, there was insufficient time to distribute the review materials to all standing committees for formal review. The Divisional Committee on Faculty Welfare (CFW) submitted a response (attached) after reviewing the initial version of the policy; CFW did review the revised policy but had insufficient time to submit an updated memo. It was reported to Senate Council that CFW also endorsed the additional revisions.

Sincerely,

Nancy Postero
Chair
San Diego Divisional Academic Senate

Attachment

cc: John Hildebrand, Vice Chair, San Diego Divisional Academic Senate
    Lori Hullings, Executive Director, San Diego Divisional Academic Senate
    Monica Lin, Executive Director, UC Systemwide Academic Senate
November 14, 2022

NANCY POSTERO, CHAIR
Academic Senate, San Diego Division

SUBJECT: Systemwide Review of Presidential Policy – University of California – Policy on Vaccination Programs

The Committee on Faculty Welfare (CFW) reviewed the proposed revisions to the Presidential Policy on Vaccination Programs at its October meeting. The members of the committee endorsed the proposed revisions.

Sincerely,

Juan Pablo Pardo-Guerra, Chair
Committee on Faculty Welfare

cc: J. Hildebrand
January 18, 2022

Susan Cochran  
Chair, Academic Council  
Systemwide Academic Senate  
University of California Office of the President  
1111 Franklin St., 12th Floor  
Oakland, CA 94607-5200

Re: Revised Vaccination Policy

Dear Susan:

The San Francisco Division of the Academic Senate recently reviewed the revisions to UC’s Vaccination Policy. This policy facilitates protection of the health and safety of the University community, including its patients, as well as its students, personnel, and others, by aligning our vaccine recommendations with the U.S. Centers for Disease Control and Prevention, and the California Department of Public Health. While we welcome the reorganization and simplification of prior language and are appreciative of clarifications in sections concerning corrective action for policy-covered employees, UCSF offers comments related to healthcare locations, influenza vaccinations, and policy enforcement. Our Clinical Affairs Committee (CAC), Committee on Faculty Welfare (CFW), and Committee on Rules and Jurisdiction (R&J) opined on the revised policy.

Healthcare Locations:
- Definition of ‘Healthcare Locations’: UCSF’s R&J believes there may be a typographical error in the definition of “Healthcare Location” and asks UCOP to consider whether “serve as” was intended to be used instead of “service” at the beginning of the definition, as follows, “A collection of buildings and Personnel that service an academic health system or student health or counseling center including hospitals, ambulatory surgery centers, outpatient centers, clinics, or other locations where…”
- Program Reviews: Both CFW and R&J feel that that “Healthcare Locations” should conduct program evaluations, and should be encouraged to do so, just as “Location[s]” are. CFW believes program evaluations are especially important in health care settings. Indeed, R&J was unsure why the University would create this distinction. R&J reviewed the policy more carefully and found definitions for “Healthcare Location” and “Location (or Facility).” However, R&J did not find anything in the policy that explains why Locations are encouraged to evaluate their programs, but Healthcare Locations are not. As R&J cannot think of a reason Healthcare Locations should not evaluate their programs, R&J does not support this revision.

Influenza Vaccination Program:
- Compliance Deadline: Both CAC and CFW agree that the University-wide compliance deadline for the Seasonal Influenza Vaccination Program should be November 1 rather than December 1 to better protect the University and our larger communities from influenza.

Thank you for the opportunity to opine on the revisions to this important Policy. If you have any questions, please let me know.
Enclosures (3)
Cc: Matt Tierney, Chair, UCSF Clinical Affairs Committee
    Jenny Liu, Chair, UCSF Committee on Faculty Welfare
    Spencer Behr, Chair, UCSF Rules & Jurisdiction
Clinical Affairs Committee
Matt Tierney, MS, NP, FAAN, Chair

November 30, 2022

Steven Cheung, MD
Division Chair
UCSF Academic Senate

Re: Presidential Policy on Vaccination Programs Systemwide Review

Dear Chair Cheung:

The Committee on Clinical Affairs (CAC) writes to comment on the Presidential Policy on Vaccination Programs that is out for a systemwide review.

CAC recommends that the University revise the compliance deadline for the Seasonal Influenza Vaccination Program from December 1 to November 1. Flu season is well underway by December 1. CAC recommends a systemwide compliance deadline of November 1 to facilitate more members of the UC community getting vaccinated earlier in flu season so the vaccine can better protect against infection and severe disease.

Thank you for the opportunity to comment on the Presidential Policy on Vaccination Programs. Please contact me or Senate analyst Kristie Tappan if you have questions about CAC’s comments.

Sincerely,

Matt Tierney, MS, NP, FAAN
Clinical Affairs Committee Chair

CC: Todd Giedt, Senate Executive Director
     Sophia Root, Senate Analyst
Committee on Faculty Welfare  
Jenny Liu, PhD, MPP, Chair  

January 12, 2023  

Steven Cheung, MD  
Division Chair  
UCSF Academic Senate  

Re: Presidential Policy on Vaccination Programs Systemwide Review with Interim Amendments  

Dear Chair Cheung:  

The Committee on Faculty Welfare (CFW) writes to comment on the Presidential Policy on Vaccination Programs that is out for a systemwide review. CFW joins its colleagues on the Senate’s Clinical Affairs Committee (CAC) and the Rules and Jurisdiction Committee (R&J) in raising two issues.  

First, CFW agrees with CAC that the University-wide compliance deadline for the Seasonal Influenza Vaccination Program should be November 1 rather than December 1. CFW believes a November 1 compliance deadline will better protect the University and our larger communities from influenza.  

Second, CFW agrees with R&J that “Healthcare Locations” should conduct program evaluations and should be encouraged to do so just as “Location[s]” are. CFW believes program evaluations are especially important in health care settings. Without knowing or understanding why “Healthcare Locations” were carved out of the program evaluation section, CFW cannot support this provision.  

CFW reviewed these comments following the addition of amendments to the proposed revisions in the middle of the systemwide review. The amendments did not impact CFW’s comments. Please contact me or our Senate analyst Kristie.Tappan@ucsf.edu if you have questions about CFW’s comments.  

Sincerely,  

Jenny Liu, PhD, MPP, MA  
Committee on Faculty Welfare Chair  

CC: Todd Giedt, Senate Executive Director  
Sophia Bahar Root, Senate Analyst
Re: Presidential Policy on Vaccination Programs Systemwide Review (with interim amendments)

Dear Chair Cheung:

The Committee on Rules and Jurisdiction (R&J) writes to comment on the proposed revisions with interim amendments to the Presidential Policy on Vaccination Programs. R&J previously submitted comments on the proposed revisions before interim amendments were made to the proposed policy. The changes addressed several of R&J’s concerns. R&J has two remaining comments.

1. Program Evaluations for Healthcare Locations

The introductory letter for the review signed by Vice Provost Douglas Haynes and Vice President Cheryl Lloyd states, “Locations are encouraged to evaluate COVID-19 Vaccination Program Participation, but Healthcare Locations are not required to do so.” R&J was unsure why the University would create this distinction. R&J reviewed the policy more carefully and found definitions for “Healthcare Location” and “Location (or Facility).” However, R&J did not find anything in the policy that explains why Locations are encouraged to evaluate their programs, but Healthcare Locations are not. As R&J cannot think of a reason Healthcare Locations should not evaluate their programs, R&J does not support this revision.

2. Typo in “Healthcare Location” Definition

R&J believes there may be a typographical error in the definition of “Healthcare Location” and asks UCOP to consider whether “serve as” was intended to be used instead of “service” at the beginning of the definition. The definition for “Healthcare Location” follows with the potential typo in bold.

A collection of buildings and Personnel that service an academic health system or student health or counseling center including hospitals, ambulatory surgery centers, outpatient centers, clinics, or other locations where preventive, diagnostic, therapeutic, or other interventional physical or behavioral healthcare services are provided to UC Health patients, students, employees, or research participants and any associated educational, research, or administrative facilities.
and offices. A Healthcare Location refers only to that part of a campus that meets this definition.

Thank you for the opportunity to comment on this review. Contact me or Senate analyst Kristie Tappan (kristie.tappan@ucsf.edu) with any questions.

Sincerely,

Spencer Behr, MD
Committee on Rules and Jurisdiction Chair

Cc: Todd Giedt, UCSF Academic Senate Executive Director
    Sophia Bahar Root, UCSF Academic Senate Analyst
January 18, 2023

To:      Susan Cochran, Chair
         Academic Senate

From:   Susannah Scott, Chair
        Santa Barbara Division

Re:      Systemwide Review on the Proposed Presidential Policy – University of California – Policy on Vaccination Programs

The Santa Barbara Division distributed the Proposed Presidential Policy on Vaccination Programs to the Council on Faculty Welfare, Academic Freedom, and Awards (CFW), the Council on Planning and Budget (CPB), the Graduate Council (GC), the Undergraduate Council (UgC), the Committee on Diversity and Equity (CDE), the Committee on International Education (CIE), the Committee on Library, Information, and Instructional Resources (CLIIR), the Committee on Research Policy and Procedures (CRPP), the Committee on Privilege and Tenure (P&T), the Committee on Admissions, Enrollment, and Relations with Schools (CAERS), the Charges Advisory Committee (CAC), the Committee on Academic Personnel (CAP), Committee on Courses and General Education (CCGE), and the Faculty Executive Committees (FECs) of the College of Letters and Science (L&S), College of Engineering (ENGR), College of Creative Studies (CCS), Bren School of Environmental Science and Management (BREN), and the Gevirtz Graduate School of Education (GGSE). CIE, CLIIR, CAP, CCGE, L&S FEC, BREN FEC, and CCS FEC opted not to opine.

The reviewing agencies expressed broad support for the UC Policy on Vaccination Programs, viewing these programs as an indispensable public health tool in support of the University's ability to carry out its mission. At the same time, they raised some general concerns about the seemingly indefinite nature of the programs, and questioned the inconsistency of the policy in its mandate of the flu vaccine, particularly given the fact that other CDC-recommended vaccines are not mandated. There were a number of additional areas for which the groups offered feedback, summarized below. More details are provided in the attached reviewing group responses.

CPB called attention to the clarified language regarding exceptions on the premise of “medical exemption, disability, and/or religious objection,” which had previously been less stringent. In reference to these changes, the Council emphasized the need for the policy to be fair, tailored to the particular population with the most legitimate concerns about vaccinations, but also to restrict loopholes that could undermine the mandate's public health purpose.
CFW noted that the revised policy has eased some of the onerous steps regarding continuous booster compliance and provides more information and education for those who do not wish to receive boosters. CPB questioned the utility of the opt-out programs as currently designed, specifically, whether the minimal requirements of the program would encourage more vaccinations or would simply increase bureaucratic paperwork and time spent in vaccine education. They note that the recent weakening of the COVID-19 booster mandate may in turn weaken the overall Policy, creating a precedent for adopting a “wait-and-see” attitude by employees. CPB therefore advocates for the adoption of a robust core Vaccination Policy, delegating other adjustments to regularly-updated (e.g. quarterly or annually, or as needed by CDPH directives) Program Attachment documents.

Several groups expressed concerns related to the lack of transparency regarding unvaccinated individuals on UC campuses. In order to increase transparency for others who share a space with unvaccinated individuals while also respecting their privacy, the COE FEC suggested that the University provide faculty with the percentage of their classroom that is vaccinated. This logic could also be extended to include other shared spaces, if feasible. CPB highlighted the need for an option to impose localized masking requirements in research and teaching scenarios that require close physical proximity, such as in labs or shared vehicles during field trips, given that unvaccinated individuals are unidentifiable. The Council suggested that the policy list such situations explicitly and offer guidance on how they might be addressed. They further called attention to the vague language surrounding the expectations regarding Nonpharmaceutical Interventions (NPI) and how they are to be enforced.

The Charges Advisory Committee requested clarification of the language in Section IV, Employee Non-Compliance. In reference to the Faculty Code of Conduct, under the heading Corrective Action and/or Discipline, the policy appears to indicate that Senate faculty could conceivably face disciplinary charges based on their non-compliance with UC’s Policy on Vaccinations. The Committee asked that the policy specify the precise section of the Faculty Code of Conduct that would be applicable, given the need to cite this information in the event that related disciplinary cases come forward. GC expressed concern about the seemingly inconsistent enforcement of vaccinations policy on the campuses, with reports of some staff being fired for non-compliance, and faculty and students not being subject to the same consequences. CPB recommended that each location prepare and distribute an annual report regarding disciplinary actions for mandate violations, summarizing the latest location enforcement policy, the aggregate number of violations, and their resolution.

Finally, the reviewing groups made a number of comments about the structure of the policy. CPB recommended that the policy begin with an articulation of the public health and campus community welfare goals the policy seeks to meet. The Council also encouraged inclusion of a statement of UCOP’s commitment to a transparent and accountable ongoing review of UC public health mandates and mechanisms based on evolving evidence-based scientific consensus regarding best practices for community health threats and emergencies. CPB further pointed out that the document remains vague with respect to policy coverage of outside contractors, volunteers, guests, and short-term visitors, and suggested the inclusion of clearer
definitions for the different categories of individuals and reasons for including non-covered individuals in that category. CRPP felt that important terms should be defined earlier in the document, and noted that some of the policy information seems to only be detailed in the FAQ, which may not be officially part of the policy. CRPP also noted that while University privacy and security policies are mentioned, the measures that will be taken to secure medical data, particularly those that are required by law, should be clearly stated.

We thank you for the opportunity to comment.
January 13, 2023

To: Susannah Scott, Divisional Chair
    Academic Senate

From: Subhash Suri, Chair
    Council on Faculty Welfare, Academic Freedom and Awards

Re: University of California - Policy on Vaccination Programs

At its meetings of November 2, 2022 and January 11, 2023, the Council on Faculty Welfare, Academic Freedom and Awards (CFW) discussed the University of California Policy on Vaccination Programs. There was broad support from the Council for UC’s vaccination policy. Widespread adoption of the policy has saved lives, relieved pressure on our health infrastructure, and allowed campuses to resume normal operations. The revised policy has eased some of the onerous steps regarding continuous booster compliance, has better safeguards, and provides more information and education for those who do not wish to receive boosters. One member of the Council expressed opposition to the policy, and shared a letter signed by 11 faculty across the UC system who share his views.

A few members did raise questions about whether UC is discussing how long this mandate will last. Will the expiration of California’s “state of Covid emergency” affect the policy? There was also a suggestion that UC could do more cost-benefit analysis in order to correlate mandates with studies of the effects on operations.

CC: Shasta Delp, Executive Director, Academic Senate
To: Susannah Scott, Divisional Chair  
UCSB Academic Senate

From: James Rawlings, Chair  
Council on Planning & Budget

Re: Policy on Vaccination Programs (Revised)

The Council on Planning & Budget (CPB) has reviewed the revised proposed Presidential Policy on Vaccination Programs With Updated Interim Amendments. Along with other reviewing agencies, CPB expresses support for a vaccine mandate. We and others regard such a mandate as essential for safeguarding the population of students, faculty, and staff, in addition to protecting those unable to be vaccinated and maintaining normal teaching and research operations.

CPB recommends that the vaccination policy begin by articulating the public health and campus community welfare goals the policy seeks to meet. We also encourage restating UCOP’s commitment to a transparent and accountable ongoing review of UC public health mandates and mechanisms based on evolving evidence-based scientific consensus regarding best practices for community health threats and emergencies. This is especially relevant given the frequent adjustments that are being made as the pandemic situation continues to evolve. CPB notes that the recent weakening of the COVID-19 booster mandate may in turn weaken the overall Policy, creating a precedent for adopting a “wait-and-see” attitude by employees. The CPB therefore advocates the adoption of a robust core Vaccination Policy, delegating other adjustments to regularly-updated (e.g. quarterly or annually, or as needed by CDPH directives) Program Attachment documents.

We are pleased to see that an issue of past concern, the mandate of obtaining only CDC recommended vaccines, a provision that would potentially have hindered access for international students, has been addressed with the expansion of internationally approved vaccines for this population. And the exception policy has been clarified to extend to the specific cases of “medical exemption, disability, and/or religious objection,” providing clearer guidelines than the more diluted language previously granting exceptions to “beliefs, observances, or practices, which an individual sincerely holds.” The revised exception policy needs to be fair but tailored to the particular population with the most legitimate concerns about vaccinations while also redressing potential loopholes that would undermine the mandate’s public health purpose.

There are a few issues that remain vague and potentially confusing in the document. “Covered affiliates” who are not subject to the vaccine mandate sensibly exclude attendees at art, sport,
and entertainment events open to the public. But the status of outside contractors, volunteers, guests, and short-term visitors remains unclear. It may not be feasible in such a policy statement to spell out every category of non-covered personnel, but clearer definitions and reasons for including non-covered individuals in that category would be helpful.

Also unclear is the issue of Nonpharmaceutical Interventions (NPI), which appears in the context of those granted an exception or pending a decision. The regulations state that such individuals “must as a condition of Physical Presence observe any NPI defined by the LVA [Local Vaccination Authority] consistent with public health directives.” Masks are mentioned in a later provision as an NPI for unvaccinated workers. Earlier we heard of hand washing, quarantining when sick, social distancing, etc. The vaccine mandate policy should more clearly explain the NPI activities expected of unvaccinated workers and the ways, if any, to enforce the policy. There is a provision stating “third parties and some locations may distribute badges, stickers, pins” to identify vaccinated individuals, authorizing bodily identification and ad hoc enforcement, but some reviewing agencies are concerned that such an approach could stigmatize unvaccinated employees.

CPB notes an ongoing concern of many faculty regarding their rights in instituting a mask mandate in research and teaching scenarios. For example, some labs require physical proximity, as do activities such as field trips that entail driving together for many hours. An option to impose localized masking requirements is essential given that campus members cannot identify unvaccinated workers. It would be helpful if the policy listed such situations explicitly and offered guidance on how to proceed.

CPB is pleased to see more detail about the policy’s mechanism of enforcement. CPB recommends that each location prepare and distribute an annual report regarding disciplinary actions for mandate violations, summarizing the latest location enforcement policy, the aggregate number of violations, and their resolution.

Our final concern is with respect to Opt-Out Programs. As described, these programs appear to be nothing more than more compliance paperwork, which carries substantial institutional cost. On the one hand, the stated process for declining an Opt-Out Vaccine Program includes only “formally decline vaccination by completing an opt-out form provided by their Location” followed potentially by “Vaccine Education.” CPB questions whether such minimal effort to opt out would have any real effect of inducing more vaccinations. On the other hand, the policy generates a non-negligible aggregate overhead for all Covered personnel to fill out (either affirmatively or declining) these forms and additional overhead for the time spent in Vaccine Education. Moreover, this overhead is expected to be on an annual basis. Is this extra overhead justified and does the Opt-Out mandate actually benefit our community rather than merely introduce more bureaucratic paperwork? Moreover, what is the expected scope of the Opt-Out Program? The earlier draft concerned only influenza vaccination, but now also includes COVID-19 boosters, both to be completed annually. CPB notes that CDC has been recommending annual Flu vaccinations for many years, but UC only added them to its Vaccination policy in 2020. Will influenza now be part of the Vaccine Opt-Out Program indefinitely? And is the UC committed to ensuring that all members of the community have access to free Opt-Out
programs/vaccinations at each Location? CDC has many other recommended vaccines, such as TdaP boosters.

cc: Shasta Delp, Academic Senate Executive Director
January 11, 2023

To: Susannah Scott, Divisional Chair
Academic Senate

From: Michelle O’Malley, Chair
Graduate Council

Re: University of California - Policy on Vaccination Programs

At its meeting of October 17, 2022, and over email, Graduate Council reviewed the University of California Policy on Vaccination Programs. The Council noted that enforcement of vaccinations is becoming unwieldy for our campus. Enforcement has also not been consistent, with reports of some staff being fired for non-compliance, while it does not seem like faculty or students have had the same consequences.

Graduate Council would like to see more clarity about the requirements, as well as better future planning, especially around return to work or return to classroom protocols. Covid protection is becoming highly individualized, and blanket policies are not necessarily working.

CC: Shasta Delp, Executive Director, Academic Senate
January 13, 2023

To: Susannah Scott, Chair

From: Julie Bianchini, Chair
Undergraduate Council

Re: University of California Policy on Vaccination Programs

The Undergraduate Council has reviewed and considered the revised policy at its meeting of January 12th. The Council chose not to opine, as members do not possess the relevant expertise to assess the policy, but they emphasized their support for the health and safety of our undergraduate students.
January 13, 2023

To: Susannah Scott, Divisional Chair Academic Senate

From: Peng Oh, Chair Committee on Diversity and Equity

Re: University of California - Policy on Vaccination Programs

At its meeting of November 14, 2022, and over email, the Committee on Diversity and Equity (CDE) reviewed the University of California Policy on Vaccination Program.

The Committee had no issues with the policy other than that it seems late, as other institutions are currently removing policies implemented during the height of the pandemic.

CC: Shasta Delp, Executive Director, Academic Senate
January 12, 2023

To: Susannah Scott, Divisional Chair
    Academic Senate

From: David Stuart, Chair
      Committee on Research Policy and Procedures

Re: University of California - Policy on Vaccination Programs

At its meeting of October 14, 2022 and via email, the Committee on Research Policy and Procedures (CRPP) discussed the University of California Policy on Vaccination Programs, and had the following minor comments:

- HIPAA is not specifically referenced in the body of the policy. While University privacy and security policies are mentioned, the measures that will be taken to secure medical data should be clearly stated.
- Some of the policy information seems to only be detailed in the FAQ, which may not be officially part of the policy.
- Important terms should be defined earlier in the document.

CC: Shasta Delp, Executive Director, Academic Senate
January 13, 2023

To: Susannah Scott, Chair

From: Greg Mitchell, Chair
       Committee on Admissions, Enrollment & Relations with Schools

Re: University of California Policy on Vaccination Programs

The Committee on Admissions, Enrollment & Relations with Schools (CAERS) reviewed and considered the original policy at its meeting of November 10th. They voted to endorse the policy with six in favor, zero against, and two abstentions. CAERS decided to endorse the policy for the health of the community. They did not have a meeting following the distribution of the revised policy.

During its discussion, CAERS members raised concern about the vague language in the policy with respect to vaccine enforcement. These concerns may have been addressed by the recent policy updates which CAERS did not have the opportunity to review.
October 4, 2022

To: Susannah Scott, Divisional Chair, Academic Senate

From: Joao Hespanha, Chair, Charges Advisory Committee

Re: Review of Draft UC Policy on Vaccinations

After reviewing the draft UC Policy on Vaccinations, the Charges Advisory Committee (the Committee) would like to suggest a clarification in Section IV. Employee Non-Compliance. Specifically, Section IV.C.2 includes the following language:

All members of the faculty are subject to the standards set forth in APM – 015 (The Faculty Code of Conduct).

For Senate Faculty, the administration of discipline is set forth in APM – 016 (University Policy on Faculty Conduct and the Administration of Discipline) in conjunction with Academic Senate Bylaw 336 Privilege and Tenure: Divisional Committees -- Disciplinary Cases concerning disciplinary hearings.

Several committee members noted that this reference to the Faculty Code of Conduct, under the heading Corrective Action and/or Discipline, appears to indicate that Senate faculty could conceivably face disciplinary charges based on their non-compliance with UC’s Policy on Vaccinations. If this is the case, the Committee would like to see clarification on which section of the Faculty Code of Conduct would be applicable in cases of vaccine non-compliance. Should a charges case be brought against a Senate faculty member for non-compliance, the Committee is concerned that it may not be clear to Charges Advisory Committee members which section of the Faculty Code of Conduct would be relevant to their review of the charges.

The Charges Advisory Committee appreciates the opportunity to comment on these proposed changes.

Cc: Shasta Delp, Executive Director, Academic Senate
Monica J. Solorzano, Analyst, Committee on Privilege and Tenure
January 11, 2023

TO: Susannah Scott  
Divisional Chair, Academic Senate

FROM: Steven DenBaars, Chair  
College of Engineering, Faculty Executive Committee  
Chris Bates, Vice Chair  
College of Engineering, Faculty Executive Committee

RE: University of California - Policy on Vaccination Programs

The College of Engineering FEC met on Tuesday, November 1st, Tuesday, November 15th, and Wednesday, January 11th to review and discuss the draft policy.

The committee members noted that there is flexibility in the policy for those who wish to pursue options for opting-out.

The committee has concerns about lack of transparency regarding unvaccinated individuals on campus. Some faculty want to know if students and colleagues are unvaccinated so that they may take extra precautions in the classroom or lab. They understand that they may not ask individuals for their vaccination status and the university will not provide this information on an individual level. Instead, the committee suggests that the university provide faculty with a percentage of their classroom that is vaccinated without disclosing individual, private information.
January 13, 2023

To: Susannah Scott, Chair
    Academic Senate

From: Ty Vemon, Chair
    Faculty Executive Committee, GGSE

Re: University of California – Policy on Vaccination Programs

The Faculty Executive Committee of the Gevirtz Graduate School of Education has reviewed the University of California – Policy on Vaccination Programs and is in support of this regulation.

Ty Vemon, Ph.D.
Faculty Executive Committee Chair
Gevirtz Graduate School of Education

UC SANTA BARBARA
January 18, 2023

Susan D. Cochran, Chair
Academic Council

RE: Revised Proposed Presidential Policy on Vaccination Programs

Dear Susan,

The Santa Cruz Division has completed its review of the proposed revisions to the proposed Presidential Policy on Vaccination Programs. This response includes comments from the first and second cycle of reviews. The Committees on Academic Freedom (CAF) and Privilege and Tenure (CPT) provided comments on the first iteration but not the second. The Committee on Faculty Welfare (CFW) provided comments on the second round but not the first.

CFW raised concerns about both the lack of a guarantee for access to free vaccination, and the lack of reference of a guarantee for all employees (including faculty) to take paid time off in order to recover from potential side effects associated with required vaccinations (in particular COVID vaccinations). This is of a particular concern for faculty who do not accrue sick leave. CFW suggested that a program similar to the New Emergency Paid Sick Leave (EPSL22) for COVID-19 relief be created to ensure that all UC employees are able to take paid leave to recover from symptoms related to a COVID-19 vaccine or vaccine booster.

CAF observed that while the policy contemplates vaccines such as those for covid, flu, etc., which are broadly available to the general public, some in the future may be available only to those who fall under the status of specific marginalized and/or legally protected classes. CAF offered the example of the Monkeypox vaccine, which was initially offered only to sex workers, intravenous drug users, and/or men who have sex with men. Their concern was that this could create a system in which the University is mandating the collecting of data on which of its employees are sex workers, intravenous drug users, and/or men who have sex with men. CAF recommended that explicit protections are needed to ensure that the vaccination policy will be applied only to vaccines that are broadly available and not restricted to particular marginalized social groups. This could prevent any potential chilling of the speech and academic freedom of university employees who may choose not to be employed at the university should the University's vaccination policy require them to disclose their status within specific marginalized groups.

DMS 150
On a related note, CPT wrote that it is unreasonable to expect members of the University to keep monitoring Up-To-Date required vaccines pursuant to any Center for Disease Control and California Department of Public Health recommendations. When changes are made to the list of required vaccinations, CPT suggested notifications should be mandated in the policy, and all UC members notified by email.

As well, CPT noted that the definition of Program Attachment states that it is an attachment describing a specific Vaccination Program. The committee suggests the alternate phrasing of “an attachment to the end of this Policy, describing a specific Vaccination Program” to improve clarity.

Finally, CPT took issue with language on page 11, item 11 in the FAQ, which states that individuals who fail to comply with the policy will be:

“barred from Physical Presence at University Facilities and Programs, and may experience consequences as a result of non-Participation, up to and including termination or dismissal.”

This language implies that those meeting the definition of Covered Individual, someone who normally physically accesses University facilities, but can fulfill their duties without doing so, may face “consequences” as a result of non-Participation. To address this, CPT offered this alternative language:

“barred from Physical Presence at University Facilities and Programs. The inability to be physically present may result in consequences in accordance with the provisions of employment, up to and including termination or dismissal.”

On behalf of the Santa Cruz division, I thank you for the opportunity to provide comment on this policy.

Sincerely,

Patty Gallagher, Chair
Academic Senate, Santa Cruz Division

encl: Senate Committee Responses (Bundled)

cc: Roger Schoenman, Chair, Committee on Academic Freedom (CAF)
    David Cuthbert, Chair, Committee on Educational Policy (CEP)
    Alexander Sher, Chair, Committee on Faculty Welfare (CFW)
    Onuttom Narayan, Chair, Committee on Privilege and Tenure (CPT)
    Andy Fisher, Chair, Graduate Council (GC)
    Matthew Mednick, Executive Director, Academic Senate
Re: Proposed Presidential Policy on Vaccination Programs

Dear Patty,

While overall, we had a generally positive reaction to the Vaccination Programs Policy Draft that we reviewed, we had one concern we would like to see addressed in a future revision of the policy. While the kinds of vaccinations that the policy seems to have in mind (covid, flu, etc.) are vaccinations that are broadly available to the general public, some vaccinations that could potentially fall under the policy in the future may be vaccines that are only available to certain individuals who fall under the status of specific marginalized and/or legally protected classes.

For example, earlier this past summer, Monkeypox vaccinations were only being made available to sex workers, intravenous drug users, and/or men who have sex with men, as part of a public health effort to stop the spread of Monkeypox among these high-risk groups. However, if a vaccination requirement were to be required for a vaccination that is not broadly available, such as could have happened with the Monkeypox vaccination earlier this summer, it could unintentionally create a system in which the University is mandating the collecting of data on which of its employees are sex workers, intravenous drug users, and/or men who have sex with men. Similar issues could emerge in the future with gene-based vaccinations designed for particular racial or ethnic groups as part of race-based medicine (such as future sickle-cell anemia advancements, Tay-Sachs advancements, or Cystic Fibrosis advancements).

To protect from the university collecting data on marginalized identities in their relationship to potential future vaccinations, both to prevent discrimination lawsuits, and to avoid creating the appearance of discrimination, we would recommend that explicit protections be put in that the vaccination policy will only be applied to vaccines that are broadly available and not restricted to particular marginalized social groups.

Requiring these disclosures as a manner of policy would potentially chill the speech and academic freedom of university employees who may choose not to be employed at the university if the university is requiring them to disclose their status within specific marginalized groups as part of a vaccination policy. Thus, to protect academic freedom, we would recommend these protections be explicitly included in the Vaccination Programs Policy.

Sincerely

/s/
Roger Schoenman, Chair
Committee on Academic Freedom

cc: David Cuthbert, Chair, Committee on Educational Policy (CEP)
Alexander Sher, Chair, Committee on Faculty Welfare (CFW)
Onuttom Narayan, Chair, Committee on Privilege and Tenure (CPT)
Andy Fisher, Chair, Graduate Council (GC)
Patty Gallagher, Chair  
Academic Senate  

Re: Systemwide Review of Presidential Policy – UC Policy on Vaccination Programs

Dear Patty,

During its meeting of October 20, 2022, the Committee on Faculty Welfare (CFW) considered the original proposed UC Policy on Vaccination Programs, which is aimed to consolidate existing systemwide vaccination requirements into systemwide policy with program attachments for the COVID-19 Vaccination Program and the Seasonal Vaccination Program. In January 2023, CFW reviewed the updated materials for this review online. Members were pleased to see that additional optional measures such as masking are protected under the proposed policy. However, the committee raised concerns about both the lack of a guarantee for access to free vaccination, and the lack of reference of a guarantee for all employees (including faculty) to take paid time off in order to recover from potential side effects associated with required vaccinations (in particular COVID vaccinations).

As noted, members were pleased to find that optional additional measures such as wearing masks or face coverings (even for those up to date on all relevant vaccines) is protected by the draft policy in section III.A.6 – Optional Additional Measures.

CFW notes that section IV.B.1. states that each location is responsible for informing personnel and students that required vaccines will be provided at no out-of-pocket cost if they receive the vaccine from the university. Further, section III.A.1 – Access to Vaccination requires that all campuses and medical centers offer any required vaccination on-site or maintain a list of nearby and accessible off-site locations offering vaccination to covered individuals during working and non-working hours. However, CFW acknowledges that some campuses (particularly those without medical centers) may not be able to provide the full range of required vaccines to all employees. As such, this policy may unintentionally create inequities if some campuses and/or individual employees are able to receive free vaccination on campus, and others are forced to pay a copay or fee for required vaccinations. Although it may not be possible to require all campuses to provide free vaccination on campus, CFW notes that there should be some process spelled out in the policy whereby free vaccination for required vaccines is guaranteed to every employee on every campus.

Further, members noted that the Frequently Asked Questions Section VII.8 recommends employees who suffer from COVID vaccine side effects to “contact their supervisors, local human resources, or academic personnel offices with questions but as a general matter, accrued sick leave, vacation, and/or PTO may be used to take time off as needed to recover.” This is an issue of concern for faculty, who do not accrue sick leave or vacation. Members noted that some departments are supportive of faculty taking time off to recover from vaccine side effects, but some are not. Furthermore, the answer in Section VII.7 does not apply to faculty, making them ineligible
for a time off for receiving vaccination. In order to avoid placing the burden of recovery for a UC mandate on the individual, CFW recommends that the policy explicitly state that all employees must be provided with time to recover from potential side effects associated with receiving required vaccines, and should not have to claim personal sick leave and/or vacation hours to do so. Members discussed the temporary New Emergency Paid Sick Leave (EPSL22) for COVID-19 relief that was made available to employees and expired in September 2022, and recommend that a similar permanent program be put in place and noted in this policy, in order to ensure that employees are able to take paid leave to recover from symptoms related to a COVID-19 vaccine or vaccine booster.

Thank you for the opportunity to provide feedback.

Sincerely,

Alexander Sher, Chair
Committee on Faculty Welfare

cc: Roger Schoenman, Chair, Committee on Academic Freedom
    David Cuthbert, Chair, Committee on Educational Policy
    Kate Jones, Chair, Committee on Teaching
    Andy Fisher, Chair, Committee on Graduate Council
    Onuttom Narayan, Chair, Committee on Rules, Jurisdiction, and Elections
PATTY GALLAGHER, Chair
Academic Senate, Santa Cruz Division

Re: Systemwide Review of Presidential Policy – University of California – Policy on Vaccination Programs

Dear Patty,

The Committee on Privilege and Tenure (P&T) has reviewed the draft Policy on Vaccination Programs, and has the following comments:

Being Up-To-Date with required vaccines is defined in terms of CDC and CDPH recommendations. P&T believes that it is unreasonable to expect members of the University to keep monitoring these recommendations. Some updates may not even be relevant to UC employees. This definition should be amended to state that all vaccines that are required to be up-to-date are recommended by the CDC and CDPH, and are listed in the attachments to the Policy on Vaccination Programs. In addition to being posted with other UC policies, this Policy should be posted on relevant websites (such as campus health centers). When changes are made to the list of required vaccinations, all UC members should be notified by email. Campus (or systemwide) notification should be mandated in the policy.

On a related point: the definition of Program Attachment states that it is an attachment describing a specific Vaccination Program. This would be clearer if it were changed to “an attachment to the end of this Policy, describing a specific Vaccination Program”. The attachments themselves should be reviewed to eliminate unnecessary repetition, now that they are attachments instead of independent policies.

On page 11, item 11 in the FAQ states that individuals who fail to comply with the policy will be “barred from Physical Presence at University Facilities and Programs, and may experience consequences as a result of non-Participation, up to and including termination or dismissal.”

This should be changed to “barred from Physical Presence at University Facilities and Programs. The inability to be physically present may result in consequences in accordance with the provisions of employment, up to and including termination or dismissal.”

As it stands, the draft policy implies that even someone who normally physically accesses University facilities (thus making them a Covered Individual), but can fulfill their duties without doing so, may face “consequences” as a result of non-Participation.
Sincerely

Onuttom Narayan, Chair
Committee on Privilege and Tenure

cc: Roger Schoenman, Chair, Committee on Academic Freedom (CAF)
David Cuthbert, Chair, Committee on Educational Policy (CEP)
Alexander Sher, Chair, Committee on Faculty Welfare (CFW)
Catherine Jones, Chair, Committee on Teaching (COT)
Andy Fisher, Chair, Graduate Council (GC)
SUSAN COCHRAN, CHAIR
ACADEMIC COUNCIL

RE: Presidential Policy on Vaccination Programs

Dear Susan,

The Board of Admission and Relations with Schools (BOARS) has reviewed the Presidential Policy on Vaccination Programs, and we have a few comments. We are generally supportive of the policy, but we encourage clarifications regarding international students and approved “foreign equivalent” vaccinations. We also encourage additional specificity regarding the exemption criteria and the grace period, particularly for international students. Finally, communications in this area should follow the “early and often” rule.

Thank you for your support,

Sincerely,

Barbara Knowlton
BOARS Chair

cc: Members of the Board of Admissions and Relations with Schools (BOARS)
Executive Director Lin
SUSAN COCHRAN
CHAIR, ACADEMIC COUNCIL

RE: PRESIDENTIAL POLICY ON VACCINATION PROGRAMS

Dear Susan,

UCAADE discussed the vaccination policy proposed by the President and is in favor of wide vaccination uptake, both for COVID-19 and influenza. However, the committee expressed mixed responses to the policy, as exposure to COVID-19 on UC campuses is inevitable even with substantial vaccination rates, as vaccination does not confer immunity, rather a lessening of symptoms and effects.

As the policy asserts the principle that widespread vaccination for all communicable diseases is sound public health policy, UCAADE supports the policy.

Sincerely,

Louis DeSipio
Chair, UCAADE

cc: UCAADE
January 18, 2023

SUSAN COCHRAN, CHAIR  
ACADEMIC COUNCIL

RE: Presidential Policy on Vaccination Programs

Dear Susan,

The University Committee on Faculty Welfare (UCFW) has discussed the Presidential Policy on Vaccination Programs, and we have several comments. The majority of the committee finds that the policy is too lax: boosters should be mandatory, opt-out clauses should be tightened, and deadlines should be earlier, especially for the flu. Statistically, COVID remains deadly, and “long COVID” may require long-term disability accommodations. Voluntary reporting complicates already unclear enforcement guidelines.

We appreciate the goal of having an overarching Vaccination Policy, but this only seems to collate existing policies, not to improve them. We look forward to working on this important issue.

Sincerely,

Terry Dalton, UCFW Chair

Copy: UCFW
Monica Lin, Executive Director, Academic Senate
James Steintrager, Academic Council Vice Chair
January 18, 2023

Susan Cochran
Chair, UC Systemwide Academic Senate

Re: (Systemwide Senate Review) Presidential Policy on Vaccination Programs

Dear Chair Cochran,

At the January 12, 2023, meeting of the Executive Board, members reviewed the Presidential Policy on Vaccination Programs, and divisional committee and council responses. Members appreciated the opportunity to review the policy and offered the following comments.

The Executive Board recognizes this is a complicated issue. For such a proposed change, members requested a stronger empirical justification and sound data to show that removing the COVID-19 booster mandate will not negatively affect the safety of our university population. They requested citations to support this important claim: “At this point, however, a large proportion of the population has experienced COVID-19 since January 2022, and the University has concluded that the combination of Primary Series, earlier boosters, and naturally occurring immunity provides a large majority of the University community with adequate protection to reduce the public health risk faced during earlier stages of the pandemic.” Thus, members could not support the proposal at this time. Specifically, they asked for further consideration and evidence that this proposed opt-out change in policy would not place greater risks on campus members who may be more vulnerable due to age, disability status, or medical issues.

Sincerely,

Jessica Cattelino
Chair
UCLA Academic Senate

Encl.

Cc: April de Stefano, Executive Director, UCLA Academic Senate
    Andrea Kasko, Vice Chair/Chair Elect, UCLA Academic Senate
    Shane White, Immediate Past Chair, UCLA Academic Senate
December 14, 2022

CHANCELLORS
ACADEMIC COUNCIL CHAIR SUSAN COCHRAN
LABORATORY DIRECTOR MICHAEL WITHERELL
ANR VICE PRESIDENT GLENDIA HUMISTON

Re: Extension of Systemwide Review of Presidential Policy – University of California – Policy on Vaccination Programs

Dear Colleagues:

On August 30, 2022, the Policy on Vaccination Programs – With Interim Amendments was issued, with an effective date of September 1, 2022, as instruction resumed and prior to the influenza season.

A draft policy was distributed September 16, 2022, for Systemwide Review with a comment deadline of December 15, 2022. Based on feedback received from the Systemwide Review thus far and discussions with leadership, updated interim amendments were made to the policy to include an option for members of the University community to opt out of COVID-19 boosters as well as technical edits. On December 12, 2022, the Policy on Vaccination Programs – With Updated Interim Amendments was issued.

In light of these updated interim amendments, we are distributing an updated draft policy and extending the comment deadline for the formal Systemwide Review and consultation process from December 15, 2022, to January 31, 2023 to finalize this Presidential Policy (enclosed).

Background and Key Policy Revisions

Key revisions from the updated interim amendments include the following:

- The Primary Series of the COVID-19 vaccination will remain mandatory for all incoming faculty, staff, students, and trainees who are Covered Individuals subject only to religious, medical, and disability exceptions and temporary deferral due to pregnancy or recent COVID-19 diagnosis or treatment. (Health care workers will continue to be eligible for fewer exceptions due to a California Department of Public Health order.)
- Covered Individuals must be Up-to-Date with COVID-19 vaccination boosters. However, those who prefer to opt out of COVID-19 boosters will be permitted to do so by signing a declination statement after receiving education and subject to non-
pharmaceutical interventions specified by their locations (for example, masking). Please note that health care workers may not decline their first booster under a California Department of Public Health order unless they are eligible for one of the order’s limited exceptions or deferrals.

- If a Covered Individual prefers to defer the COVID-19 bivalent booster for more than 90 days after being diagnosed with or treated for COVID-19, they can do so by declining the booster after receiving education. When they do receive the booster, they will again be considered Up-to-Date.
- Locations will ordinarily set an annual compliance deadline between July and December for existing faculty, staff, and students to participate in the COVID-19 vaccine program. This year Locations may set that deadline as late as February 1, 2023.

The version of this policy distributed on September 16, 2022 renamed the policy “Policy on Vaccination Programs” and consolidated existing systemwide vaccination requirements (other than the Student Immunization Policy) into a systemwide policy with Program Attachments for the SARS-CoV-2 (COVID-19) Vaccination Program and the Seasonal Influenza Vaccination Program. Key revisions include the following:

- The COVID-19 Vaccination Program Attachment incorporates language from the July 15, 2021 SARS-CoV-2 (COVID-19) Vaccination Program policy with a focus on reorganizing and simplifying existing policy language. Those updates were not intended to institute substantive changes in policy regarding existing COVID-19 vaccination requirements.
- In alignment with CDC guidance, the deadlines for completion of the primary COVID-19 vaccination series have been extended to allow for a longer interval period between doses.
- Locations are encouraged to evaluate COVID-19 Vaccination Program Participation, but Healthcare Locations are not required to do so.
- The COVID-19 Vaccination Program corrective action/discipline language for policy-covered academic appointees has been clarified.
- The Seasonal Influenza Vaccination Program Attachment incorporates language from the President’s past flu vaccine Executive Orders. The Seasonal Influenza Vaccination Program is an Opt-Out program, which means Covered Individuals may decline vaccination after receiving vaccine education. The Program has an annual compliance date of no later than December 1. Locations may choose an earlier compliance date. The first compliance date for new employees depends on when their first date of employment is in relation to the flu season.
- The language has been updated throughout consistent with current public health usage.
- The following groups are Covered Non-Affiliates instead of Covered Individuals: “K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non-degree-granting educational programs.” For clarity, individuals enrolled in professional development and recreational programs are also included in the definition of “Covered Non-Affiliates.” This provides Locations with flexibility on local program implementation as Locations define the requirements for Covered Non-Affiliates.
The revisions were made in consultation with Systemwide Human Resources, Academic Personnel and Programs, UC Health, and UC Legal. After reviewing and analyzing the comments received during Management Consultation of the updated interim amendments, we are now extending the comment period deadline and distributing the updated Presidential Policy – Policy on Vaccination Programs for Systemwide Review to gather input.

**Systemwide Review**

Systemwide Review is a public review distributed to the Chancellors, the Chair of the Academic Council, the Director of the Lawrence Berkeley National Laboratory, and the Vice President of Agriculture and Natural Resources requesting that they inform the general University community, especially affected employees, about policy proposals. Systemwide Review also includes a mandatory, 90-day full Academic Senate review.

Employees should be afforded the opportunity to review and comment on the draft policy. Attached is an updated Model Communication which may be used to inform non-exclusively represented employees about the updated draft policy. The University will adhere to its bargaining obligations, if any, that may exist in connection with the adoption of this policy. Accordingly, the University will follow appropriate procedures with respect to represented employees and the Office of the President’s Systemwide Labor Relations office will coordinate that process.

The Systemwide Review period for the Presidential Policy – Policy on Vaccination Programs draft policy started on September 16, 2022 and continues through **January 31, 2023**. The draft policy is posted on [UCNet](https://ucnet). Questions and comments should be submitted to [vaccinepolicycomments@ucop.edu](mailto:vaccinepolicycomments@ucop.edu).

Sincerely,

Douglas M. Haynes
Vice Provost
Academic Personnel and Programs

Cheryl Lloyd
Vice President
Systemwide Human Resources

Enclosures:

1) Policy on Vaccination Programs (clean copy)
2) Policy on Vaccination Programs (tracked copy)
3) Model Communication

cc: President Drake
Provost and Executive Vice President Brown

DMS 163
Medical Center Chief Executive Officers
Vice Chancellors Administration
Executive Vice Chancellors/Provosts
Executive Vice President Byington
Executive Vice President and Chief Operating Officer Nava
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Associate Vice President Matella
Associate Vice Provost Lee
Assistant Vice Provosts/Vice Chancellors for Academic Personnel
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Deputy General Counsel Woodall
Chief Campus Counsel
Chief of Staff Henderson
Chief of Staff Levintov
Chief of Staff Kao
Chief of Staff Peterson
Chief Policy Advisor McAuliffe
Executive Director Lin
Executive Director Silas
Director Anders
Director Heng
Principal Counsel Essick
Principal Counsel Mastro
Director Roller
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Associate Director Woolston
Assistant Director LaBriola
Labor Relations Manager Donnelly
HR Manager Crosson
Policy Specialist Norris
Policy Specialist Zundel
Policy Analyst Durrin
Policy Analyst Wilson
Administrative Officer Babbitt
# Policy on Vaccination Programs

**DRAFT FOR SYSTEMWIDE REVIEW: 9/16/22-12/15/22-1/31/23 (EXTENDED)**

| Responsible Officers: | Provost & Executive Vice President for Academic Affairs (Campuses, ANR, Labs)  
|                       | Executive Vice President – University of California Health (UC Health)  
|                       | Executive Vice President and Chief Operating Officer (Campuses, ANR, Labs) |
| Responsible Offices:  | Academic Affairs  
|                       | University of California Health (UCH)  
|                       | University of California Operations (UCO) |
| Issuance Date:        | TBD 2023 |
| Effective Date:       | TBD 2023 |
| Last Review Date:     | August 18, 2022/TBD 2023 |
| Scope:                | All University of California locations and faculty, academic personnel, staff, trainees, students, and others accessing University facilities and programs. |

For questions regarding individual employee situations and this policy, please contact your **location’s applicable office**. For individual student questions related to the medical aspects of the policy, please contact your campus **Student Health Services**.

<table>
<thead>
<tr>
<th>Campus Contact:</th>
<th>UC Emergency Management</th>
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<tr>
<td>Health System Contact:</td>
<td>UC Health</td>
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<tr>
<td>Email:</td>
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## UC Health

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## Campuses, ANR, Labs

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I. POLICY SUMMARY

The purpose of this policy is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel and all others who work, live, and/or learn in any of the University’s Locations or otherwise participate in person in University Programs.

The University strongly recommends that all members of the University community follow vaccine recommendations adopted by the U.S. Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) applicable to their age, medical condition, and other relevant indications.

In addition, this policy and its Program Attachments together provide for Vaccination Programs under which Covered Individuals are required, subject to limited Exceptions and associated Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines before physically accessing the University’s Locations or Programs.

II. DEFINITIONS

Compliance Date: The deadline for compliance with a Vaccination Program, as specified in the applicable Program Attachment. Unless otherwise specified in a Program Attachment, for new employees whose first date of employment is later, the deadline for initial vaccination is within 14 days of the first date of employment; for students starting or returning to campus after the Compliance Date, the deadline is the first date of instruction for the term when they first enroll. Student employees are subject to the deadlines applicable to students.

Contraindications and Precautions: A contraindication or precaution to a Vaccine recognized by the CDC, CDPH, or in the case of internationally administered Vaccines, the World Health Organization (WHO). Contraindications and Precautions are limited and do not include conditions that are unrelated to Vaccines or injectable therapies, such as food, pet, venom, or environmental allergies, or allergies to oral medications.

Covered Individuals: A Covered Individual includes anyone designated as Personnel or Students under this policy who Physically Access a University Facility or Program in connection with their employment, appointment, or education/training. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.
Covered Non-Affiliates: A Covered Non-Affiliate is a person who Physically Accesses a University Facility or Program as a Non-Affiliate (other than as an “official volunteer”) under the Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California. For purposes of this policy, “Covered Non-Affiliates” also includes K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non degree-granting educational programs, professional development, and/or recreational programs. Refer to section III.B of this policy for additional information regarding Covered Non-Affiliates.

Deferral: A temporary delay of vaccination provided for in a Program Attachment based on a reason other than Medical Exemption, Disability, or Religious Objection. In the case of a Vaccine authorized for emergency use or recently approved, a Program Attachment may provide for Deferral based on pregnancy. In the case of a Vaccine for a disease where evidence suggests that contracting the illness or receiving treatment for the disease provides temporary protection, a Program Attachment may provide for Deferral based on recent illness or treatment.

Disability: A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.

Exception: In the context of a Mandate Program, an Exception is an approval issued by an authorized University official for a Covered Individual to not receive an otherwise required vaccination. Depending on the situation, Exceptions may be premised on Medical Exemption, Disability, and/or Religious Objection. In appropriate circumstances, Deferrals may be approved. In the context of an Opt-Out Program, an Exception may be premised on a Covered Individual’s informed decision to decline Vaccine, with appropriate notification to the Location Vaccine Authority or designee.

Healthcare Location: A collection of buildings and Personnel that service an academic health system or student health or counseling center including hospitals, ambulatory surgery centers, outpatient centers, clinics, or other locations where preventive, diagnostic, therapeutic, or other interventional physical or behavioral healthcare services are provided to UC Health patients, students, employees, or research participants and any associated educational, research, or administrative facilities and offices. A Healthcare Location refers only to that part of a campus that meets this definition.

Location (or Facility): Any United States campus, medical center, or facility operated by the University in connection with its research, teaching, or public service (including clinical care) missions or programs, including University housing. A Location does not include a University-owned property that is leased to a third party unless (and only to the extent) a University Program occurs at that property.

Location Vaccine Authority (LVA): The office or person responsible for implementing the requirements set forth in a Program Attachment for a Location, typically the Chief Medical Officer or Occupational Health office at a Medical Center or an Occupational Health or Student Health office at an academic campus. The LVA is a health care provider and its records are considered confidential health records for purposes of the University’s privacy policies.
**Mandate Program:** A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines unless they have received a University-approved Exception.

**Medical Exemption:** An excuse from receiving an otherwise required Vaccine due to a medical Contraindication or Precaution for each Vaccine that would satisfy the vaccination requirement.

**Non-Pharmaceutical Intervention (NPI):** An action, other than getting vaccinated or taking medicine, that members of the University community can take to help prevent or slow the spread of contagious illnesses. NPIs may include, for example, staying home, especially when a person is sick or when a member of the person’s family or household is sick; quarantining when an unvaccinated person has been exposed to someone else with the illness; avoiding large gatherings; physical/social distancing; wearing personal protective equipment or face coverings; frequent handwashing and cleaning; and asymptomatic (surveillance) and symptomatic testing.

**Opt-Out Program:** A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines or to formally decline vaccination by completing an opt-out form provided by their Location (a “Vaccine Declination Statement”) and submitting it to their Location Vaccine Authority on or before the Compliance Date.

**Participation:** Participation in a Vaccination Program as required by the applicable Program Attachment, which may include providing certification or proof of being Up-To-Date on vaccination or obtaining a University-approved Exception under this policy in a Mandate Program or properly declining vaccination in an Opt-Out Program. Participation in all Vaccination Programs applicable to a Covered Individual is a condition of Physical Presence at any University Location or Program as set forth in this policy. For Covered Individuals who must be vaccinated under this policy, Participation compliance may require repeat vaccinations or boosters on an annual or recurring basis consistent with U.S. Food and Drug Administration (FDA)-approved labeling and CDC or CDPH recommendations.

**Personnel:** University faculty, other academic appointees, and staff, including but not limited to visiting, volunteer, without salary, and emeritus/a professors, visiting or volunteer academic appointees, contract, recall, and emeritus/a employees. “Personnel” also includes, for purposes of this policy, official volunteers, as defined in the Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California, and participants in post-graduate training programs who are not Students.

**Physical Access or Physical Presence (or Physically Accessing or Physically Present):** Physical presence at a University Location or Program for any work, research, or education/training related purpose (as distinguished from accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public). Physical presence includes living in housing furnished by the University, using University amenities such as entertainment venues, museums, libraries, workout facilities, or dining halls or food courts in one’s capacity as Personnel or a Student, or participating in person in a University Program even if not occurring at a Location. Access is not defined by reference to any particular frequency (e.g., daily, weekly, monthly, ad hoc).

**Primary Series:** The initial dose(s) of a given Vaccine as specified by CDC, CDPH, or in the case of internationally administered Vaccines, the WHO.

**Program Attachment:** An attachment describing a specific Vaccination Program, under which Covered Individuals are required, subject to limited Exceptions and associated Non-
Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines before physically accessing the University’s Locations or Programs.

**Reasonable Accommodation:** An adjustment made to the requirements of a Vaccination Program, including an adjustment for a Covered Individual who has received a University-approved Exception to allow them to be Physically Present without impairing the health and safety objectives of this policy. Covered Individuals with Exceptions may be required to observe specified NPIs as a condition of Physical Presence.

**Religious Objection:** A Covered Individual’s objection to receiving an otherwise required Vaccine based on that person’s sincerely held religious belief, practice, or observance.

**Responsible Office:** The office at a Location responsible for processing Exceptions.

**Student:** The term “Student” has the same meaning as defined in the current version of the Policies Applying to Campus Activities, Organizations and Students (PACAOS) Section 14.40: an individual for whom the University maintains student records and who: (a) is enrolled in or registered with an academic program of the University; (b) has completed the immediately preceding term, is not presently enrolled, and is eligible for reenrollment; or (c) is on an approved educational leave or other approved leave status, or is on filing-fee status. For purposes of this policy, the term “Student” also includes visiting students.

**Systemwide Vaccine Authority:** The Systemwide Vaccine Authority is the Executive Vice President for UC Health or designee. A person is eligible to serve as the Systemwide Vaccine Authority if the person is Board-Certified in the subspecialty of Infectious Disease by an American Board of Medical Specialties or an American Osteopathic Association Specialty Certifying Board and maintains a faculty appointment that meets all of the good standing criteria established at that UC Location.

**University or UC:** The University of California.

**University Program:** A program or activity operated by the University to support the University’s teaching or research mission and generally offered exclusively to University Personnel or Students. Examples of covered Programs that may not be conducted at a Location include the UC Education Abroad Program and University-sponsored athletics programs.

**Up-To-Date:** A person is Up-To-Date with required Vaccines when they have received all doses in a Primary Series and any the most recent boosters recommended by the CDC or by CDPH. A person need not obtain boosters that are authorized but not explicitly recommended by CDC or CDPH in order to be considered Up-To-Date.

**Vaccination Program:** A set of rules governing Physical Presence at University Locations or in University Programs intended to reduce the incidence of Vaccine-preventable disease, disability, and death in connection with University Facilities or Programs. A Vaccination Program is either a Mandate Program or an Opt-Out Program.

**Vaccine:** A Vaccine satisfies the requirements of this policy if: (i) the FDA has issued a License or an Emergency Use Authorization (EUA) for the vaccine; or (ii) the WHO has approved Emergency Use Listing (EUL) for the vaccine. If approved by LVA and consistent with any applicable public health mandates, a vaccine administered during a clinical trial but not yet approved, licensed, or authorized may also satisfy the requirements of this policy.

**Vaccine Education:** Vaccine Education is communication of the following information about a Vaccine-preventable illness through any combination of Vaccine Information Statements.
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other written information, statements, verbal communications, or online or in-person training programs, as required by the LVA.

1. The potential health consequences of Vaccine-preventable illness for Covered Individuals, family members and other contacts, coworkers, patients, and the community;
2. Occupational exposure to Vaccine-preventable disease;
3. The epidemiology and modes of transmission, diagnosis, and NPIs, consistent with the Covered Individual’s level of responsibility in preventing Vaccine-preventable infections;
4. The potential benefits of vaccination; and
5. The safety profile and risks of the Vaccine.

Vaccine Information Statement (“VIS”): An information sheet produced by or including information derived from the CDC, CDPH, and/or UC Health or any of its components, explaining in plain language the benefits and risks of a Vaccine to Vaccine recipients. A VIS generally must be provided to an individual being vaccinated prior to each dose of the Vaccine, in a language they understand. For purposes of this policy, a VIS may also include FDA fact sheets for Vaccine recipients and caregivers.

III. POLICY TEXT

This policy supplements, and does not replace, any policies or guidelines requiring University Personnel, Students, patients, and visitors to observe Non-Pharmaceutical Interventions (NPIs).

A. Vaccination Program. As a condition of Physical Presence at a Location or in a University Program, all Covered Individuals must Participate in any applicable Vaccination Program as described in a Program Attachment by providing proof that they are Up-To-Date with any required Vaccines or submitting a request for Exception in a Mandate Program or properly declining vaccination in an Opt-Out Program no later than the Compliance Date. This requirement may be subject to implementation guidelines and any local procedures for enforcement. The availability of alternative remote work arrangements will depend on systemwide guidance and any local policies or procedures, as well as the nature of the work to be performed.

1. Access to Vaccination.

   -All campuses and medical centers must offer any required vaccination on-site or maintain a list of nearby and accessible off-site locations offering vaccination to Covered Individuals during working and non-working hours. This provision is not intended to restrict a Covered Individual’s choice of provider, but to maximize their access to vaccination.

2. Proof of Vaccination or Exception

   a. Mandate Programs. Covered Individuals must be Up-To-Date on mandated Vaccines or timely secure a University-approved Exception. They also may be required to submit proof or certification of their vaccination or of a University-approved Exception to their Location Vaccine Authority (LVA), if and as specified
in a Program Attachment. Proof or certification of vaccination may be subject to audit.

b. Opt-Out Programs.

-Covered Individuals must be Up-To-Date on Vaccines or receive Vaccine Education and timely complete and submit a Vaccine Declination Statement to their LVA Location Vaccine Authority for each applicable Vaccine. They also may be required to submit proof or certification of their vaccination to their LVA, if and as specified in a Program Attachment. Proof or certification of vaccination may be subject to audit.

3. Request for Exception. A Covered Individual seeking an Exception in a Mandate Program must, no later than the relevant Vaccine’s Compliance Date, submit their request to the appropriate Responsible Office. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe any Non-Pharmaceutical Interventions (NPIs) as defined by the LVA and no less stringent than consistent with applicable public health directives. If an Exception is granted, the issuing office must notify the Covered Individual and the LVA of the approval and the associated expiration date, if any. If an Exception request is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly become Up-To-Date or will be denied Physical Presence at the relevant University Location(s) or Program(s).

4. Education. Any Covered Individual who has not provided proof that they are Up-To-Date on all applicable Vaccines by the specified Compliance Date will receive from the LVA or designee Vaccine Education. This educational requirement is not an alternative to required Participation in a Vaccination Program as a condition of Physical Presence at a University Location or Program as set forth above. Additional education may be required consistent with Cal/OSHA and/or applicable federal, state, local or federal mandates or accreditation standards.

5. Non-Pharmaceutical Interventions (NPIs). All Covered Individuals must participate in any NPIs as specified by the relevant University Location or Program. In the event of a disease outbreak, Covered Individuals and Covered Non-Affiliates who are not Up-To-Date on the relevant Vaccine may be excluded from the Location or site of the outbreak.

6. Optional Additional Measures. Covered Individuals may wear masks or face coverings even if they are Up-To-Date on all relevant Vaccines and no mask/face covering mandate is in effect.

B. Covered Non-Affiliates. Each University Location and Program will define any requirements for public or other Covered Non-Affiliate Physical Presence (for example, at health facilities, entertainment venues, museums, libraries, workout facilities, dining halls and food courts, day care centers, or camps), no less stringent than consistent with applicable public health guidance.

C. Superseding Public Health Directives. A federal, state, or local public health agency with jurisdiction may impose a more restrictive/protective vaccine and/or NPI requirement that lawfully supersedes this policy. In the event of a perceived conflict between public health requirements and this Policy, UC Legal should be consulted.

D. Tracking and Reporting
1. **Vaccination Data.** The LVA or designee may be required to record and track certain information regarding vaccination in a Covered Individual’s confidential health record, consistent with University privacy and security policies including BFB-IS-3 (Electronic Information Security Policy). Such information may include, but not be limited to: (i) proof or certification of vaccination; (ii) date(s) of administration and Vaccine type and manufacturer; and (iii) documentation of an Exception.

2. **Vaccines Administered by the University**
   
   a. **Registries.** For all vaccinations administered by the University in its capacity as health care provider, appropriate information will be submitted to the [California Immunization Registry (CAIR)](https://www.ca.gov) or such other registries as may be required by applicable public health agencies or University policy. While Vaccine recipients ordinarily are permitted to opt out from registry reporting in California, the California Department of Public Health (CDPH) may, in some cases, mandate that all participating vaccinators report certain vaccinations. Accordingly, the typical opt-out option may not apply.

   b. **Adverse Events.** Any adverse events associated with a required Vaccine administered at a Location and reported to the University must be tracked and logged by the LVA or designee and reported to federal and state public health officials using the [Vaccine Adverse Event Reporting System (VAERS)](https://www.vaers.hhs.gov).

E. **Program Evaluation.** Locations are encouraged and, through a Program Attachment may be required, to evaluate Program Participation on an annual and ongoing basis, including evaluation of equity in Program implementation; reasons identified for non-Participation or untimely Participation; the number and population-level characteristics of Covered Individuals who are not vaccinated; and community outcomes.

IV. **COMPLIANCE/RESPONSIBILITIES**

A. CDC and FDA generally translate VIS into many languages commonly spoken in California and elsewhere in the United States and post these online. Whenever the University is administering a Vaccine in its capacity as health care provider, the relevant VIS should be provided to a person receiving Vaccine in a language that they understand. In the unlikely event relevant VIS translations are unavailable, they should be accompanied when distributed with a document with [taglines such as those approved by the U.S. Department of Health & Human Services to facilitate language access by all affected Personnel and Students](https://www.hhs.gov). Interpreters should also be made available in person, by video, or by phone during Vaccine clinics.

B. Each Location is responsible for: (i) assuring any necessary updates are made to its local Infectious Diseases/Infection Prevention and Control Programs; (ii) establishing Compliance Dates on an annual or ongoing basis, in consultation with epidemiology and infection prevention experts and occupational health representatives as applicable and consistent with any supply limitations; and (iii) assuring implementation of each Vaccination Program at all sites.

1. Implementation includes informing Personnel and Students (as well as Covered Non-Affiliates, as applicable) of (i) any Vaccine requirements and associated Compliance Dates; (ii) dates and Locations for on-site administration (if any); and (iii) for required
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Vaccines, that vaccination will be provided at no out-of-pocket cost to them if they receive the Vaccine from the University.

2. Each Location should implement reasonable strategies for Vaccine access, including efforts to ensure vaccination availability during all work shifts and to address Vaccine hesitancy, particularly among groups at most significant risk for contracting Vaccine-preventable disease and suffering severe illness.

C. Chancellors, Laboratory Directors, and the Vice President–Agriculture and Natural Resources (ANR) are responsible for implementing this policy. Deans, Department Chairs, unit heads, managers, supervisors, student affairs leaders, and others with responsibility for personnel or student management will support Vaccination Program implementation and enforcement. Consultation with Academic Senate leaders, especially on the campus, is encouraged with respect to implementation procedures for academic appointees.

V. PROCEDURES

Implementation guidelines for this policy may be included in the applicable Program Attachment. Each Location may establish local procedures consistent with those guidelines to facilitate implementation of this policy and the applicable Vaccination Program.

VI. RELATED INFORMATION

- CDC Advisory Committee on Immunization Practices
- CDC Immunization Schedules
- Cal. Health & Safety Code Division 2, Chapter 2, Article 3.5
- California Department of Public Health, Licensees Authorized to Administer Vaccines in California
- Infectious Disease Society of America, Guidelines
- American Academy of Pediatrics, Immunizations
- American College of Physicians, Adult Immunization Hub
- American Medical Association, Opinion 8.7, Routine Universal Immunization of Physicians

VII. FREQUENTLY ASKED QUESTIONS

1. Some Program Attachments both encourage and require members of the University community to be vaccinated. Which is it?

This policy strongly encourages all members of the University community to follow vaccine recommendations adopted by the CDC and CDPH. Only Covered Individuals are required to Participate in a Vaccination Program by staying Up-To-Date on required Vaccines or receiving a University-approved Exception in a Mandate Program or properly declining vaccination in an Opt-Out Program. (University Locations and Programs will define any requirements for Covered Non-Affiliates.) For certain workers Covered Individuals, such as health care workers, CDPH or local public health
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orders may be more restrictive than this policy and the applicable Program Attachment. In those cases, the more restrictive public health order will apply in addition to any other requirements under this policy and the applicable Program Attachment.

2. **Am I required to be vaccinated to attend school?**
   
   **For Mandate Programs:** Covered Individuals must receive any required Vaccine as a condition to Physical Presence at Locations and in University Programs, unless they have been granted an Exception.
   
   **For Opt-Out Programs:** Covered Individuals must receive required Vaccines or receive Vaccine Education and submit a Vaccine Declination Statement to the Location Vaccine Authority as a condition to Physical Presence at Locations and in University Programs.
   
   Covered Individuals who receive an Exception or opt out may be subject to special NPIs.

3. **Does this policy apply to union-represented employees?**
   
   Yes, in accordance with any applicable collective bargaining requirements.

4. **How will I know if my co-workers or fellow Students are going unvaccinated?**
   
   You probably won’t know. Because vaccination-related information is private and confidential, the University will not disclose Vaccine status of Covered Individuals except on a need-to-know basis; however, third parties and some Locations may distribute badge attachments, stickers, pins, or other indicators that vaccinated individuals may use to show that they have received the Vaccine.

5. **I teach both seminar and lecture classes, and as a result am typically exposed to many students. Will I be informed if someone in my class is not vaccinated?**
   
   As will be the case in any public setting, you will not be informed of the vaccination status of individual students and should expect that some may not be vaccinated.

6. **Will University of California Health specify which authorized or licensed Vaccine is preferred when more than one is available to prevent a Vaccine-preventable disease?**
   
   No.

7. **Will Locations provide paid time off for non-exempt employees for the time needed to get vaccinated as required in a Program Attachment?**
   
   Yes. Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of Vaccine required to stay Up-To-Date. These employees and academic appointees must provide advance notice to their supervisor.

8. **What if I experience flu-like symptoms or other side effects as a result of a Vaccine that mean I cannot work as scheduled, or attend classes?**
   
   Employees should contact their supervisors, local human resources, or academic personnel offices with questions but as a general matter, accrued sick leave, vacation, and/or PTO may be used to take time off as needed to recover. Students should contact their faculty/instructors regarding minor illnesses or disability services to address any significant issues.

9. **If I have applied for or been granted an Exception in a Mandate Program or if I have opted out of vaccination in an Opt-Out Program, what Non-Pharmaceutical...**
Interventions (NPIs) will I be required to observe?

Each A Program Attachment may will describe any required NPIs. Additional safety measures may be deemed necessary, depending on the circumstances, by local public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. In that case, you will be informed of any additional requirements.

10. Who will pay for the Vaccine?

All of the University’s health plans cover CDC-recommended Vaccines administered by an employee’s primary care physician or at a local pharmacy. In some cases, supplies may be paid for and furnished by federal or state programs. In addition, for required Vaccines, vaccination will be provided at no out-of-pocket cost to them if Covered Individuals receive the Vaccine from the University.

11. How will enforcement work for failure to participate in a Vaccination Program?

Efforts will be made to encourage Participation prior to the Compliance Date. Special requirements related to compliance for Personnel and Students may be addressed in Program Attachments. Those who fail to Participate by being Up-To-Date on vaccination or, as applicable, requesting an Exception (for Mandate Programs) or submitting a Vaccine Declination Statement (for Opt-Out Programs) on or before the Compliance Date will be barred from Physical Presence at University Facilities and Programs, and may experience consequences as a result of non-Participation, up to and including termination or dismissal.

12. I am at high risk for severe illness if I contract a Vaccine-preventable disease (e.g., immunocompromised) and even though I have been vaccinated, I know that no Vaccine is 100% effective. Do I have to come to work if my co-workers or Students are not all vaccinated? What accommodations will be made for me?

Please contact your local disability services office to discuss your situation and possible accommodations.

13. Will the University accept internationally approved vaccines even if not authorized or approved in the United States?

Yes, if the Vaccine is authorized by the World Health Organization (WHO). The WHO has developed a process for assessing and listing unlicensed vaccines, therapeutics, and diagnostics during public health emergencies. Through that process, a number of vaccines not available in the United States have received Emergency Use Listing (EUL). The University will, consistent with CDC and CDPH guidance, accept proof of vaccination with any internationally administered Vaccine that has been authorized for emergency use by WHO through the EUL process.

14. I am fully remote. Am I a Covered Individual?

You are a Covered Individual at the time you are first Physically Present at a University Location or Program other than as a member of the public (or as a Covered Non-Affiliate). Your Location may also treat you as a Covered Individual if you are authorized to be Physically Present in connection with your employment, appointment, or education or training program.
15. Are trainees Covered Individuals under this policy?

Yes, trainees may be Covered Individuals as either Students or Personnel depending on their circumstances.
VIII. REVISION HISTORY

TBD 2023:

December 12, 2022: This policy was updated with interim amendments. Minor technical edits were also made for clarity.

November 2, 2022: Technical edits to update the contact information.

August 30, 2022: This policy was updated with interim amendments effective September 1, 2022.

- Consolidated all existing vaccination requirements other than the Student Immunization Policy.
- Updated language consistent with current public health usage.
- Extended definition of Covered Non-Affiliate to include K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non degree-granting educational programs, professional development, and/or recreational programs.

July 15, 2021: Extended to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

January 15, 2021: Extended from UC Health to all Locations.

Initial issuance effective December 14, 2020.

This Policy is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.

IX. APPENDICES AND PROGRAM ATTACHMENTS

A. Appendices

1. CDPH Immunization Branch
2. CDC Vaccine Information Statements
3. Immunize.org Vaccine Information Statements

B. Program Attachments

1. SARS-CoV-2 (COVID-19) Vaccination Program
2. Seasonal Influenza Vaccination Program
I. Purpose/Supporting Data:

The purpose of this SARS-CoV-2 (COVID-19) Vaccination Program is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel, and all others who work, live, and/or learn in any of the University’s Locations or otherwise participate in person in University Programs. The University strongly recommends that all members of the University community obtain the COVID-19 vaccine as soon as they are eligible and remain Up-To-Date with boosters.

In addition, this COVID-19 Vaccination Program requires any Covered Individual, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to receive the Primary Series be Up-To-Date on COVID-19 vaccination before Physically Accessing the University’s Locations and Programs and to receive or, if eligible, properly decline, boosters at least once a year. This program further provides that Locations must collect proof of vaccination.

Refer to Section VII (Related Information) for additional information supporting implementation of this program, which is incorporated into this Program Attachment by reference.

II. Compliance Date:

A. Initial Implementation

The deadline for initial implementation of the COVID-19 Vaccination Program was two (2) weeks before the first day of instruction at any University campus or school for the Fall 2021. For locations that do not operate on an academic calendar (e.g., UCOP, ANR, medical centers, national laboratories), the deadline was September 1, 2021.

B. Primary Series

1. For new Personnel employees whose first date of employment is after the deadline for initial implementation in Fall 2021, the Primary Series compliance deadline is no later than 12 weeks after the first date of employment. (See Exhibit 2, Section II.C. for details.)

2. For Students starting or returning to campus after Fall 2021, the deadline is the first day of instruction for the term when they first enroll. Student employees are subject to the deadlines applicable to students. Locations may specify additional deadlines.

C. Boosters
1. **Before Fall 2022.** All Covered Individuals who had not received a University-approved Exception were expected to be Up-To-Date with their Boosters.

1.2. **Beginning Fall 2022.** Covered Individuals will be required to certify or document that they are Up-To-Date (or affirmatively decline the recommended boosters, if eligible) at least once each year, in a form and as of a date set by the LVA. The LVA may use different forms and set different dates for different groups of Covered Individuals (e.g., Personnel and trainees, or Non-Healthcare Location and Healthcare Location) but all deadlines must be on or after July 1 and on or before December 31.

### III. Program Type:

- **Primary Series** – Mandatory (Subject to Exceptions Marked Below)
- **Boosters** – Opt-Out

#### A. Primary Series. All Covered Individuals must receive the Primary Series subject to the below permitted Exceptions and NPIs.

1. **Permitted Exceptions (Refer to Model Forms):**
   - Disability (A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.)
   - Medical Exemption (Medical Contraindications or Precautions to each Vaccine that would satisfy the vaccination requirement.)
   - Religious Objection (A Covered Individual’s objection to receiving an otherwise required Vaccine based on that person’s sincerely held religious belief, practice, or observance.)
   - Temporary Deferral (Temporary suspension of the Vaccine mandate for clinical reasons other than the above.) Covered Individuals who are pregnant may seek a Deferral of the Primary Series mandate throughout their pregnancy. Covered Individuals who have had a diagnosis of COVID-19 or received treatment for COVID-19 within the last 90 days may defer Primary Series vaccination until 90 days have lapsed since the date of diagnosis or last date of treatment.

2. **Exception Requests:**

A Covered Individual seeking an Exception must, no later than the Compliance Date, submit their request to the appropriate Responsible Office. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe NPIs defined by the Location Vaccine Authority (LVA) no less stringent than consistent with applicable public health directives and any University or Location guidelines. If an Exception is granted, the issuing office must notify the Covered Individual and the LVA of the approval and the associated expiration date, if any. If a request for Exception is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly receive the Primary Series become Up-To-Date or will be denied Physical Presence at the relevant University Location(s) or Program(s).

#### B. Boosters
All Covered Individuals must: (i) receive Vaccine Education concerning COVID-19 and CDC-recommended boosters as a preventive measure; and (ii) receive the most recent CDC-recommended booster or affirmatively decline doing so.

Those who choose to decline to receive the most recent CDC-recommended booster must complete a Vaccine Declination Statement provided by their Location on or before the applicable Compliance Date.

Those who are not Up-To-Date must observe any additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals who wish to defer their boosters for 90 days, 180 days, or more may do so by opting out. Covered Individuals who initially decline a booster but later decide to receive a booster may receive the booster through on-site or off-site providers at any time and may notify the LVA.

IV. Evidence Required:

A. Primary Series

Covered Individuals must submit proof of receiving the Primary Series or of a University-approved Exception to their LVA, by providing either: (i) in the case of one who has received the Primary Series is Up-To-Date on vaccination, a copy of their CDC vaccination card (or foreign equivalent in the case of Covered Individuals who received their vaccinations abroad); official documentation issued by a State vaccine registry; or an official medical record; or (ii) in the case of one who has received a University-approved Exception, documentation that the Exception has been granted. Proof of vaccination and Exceptions may be subject to audit.

B. Boosters

1. Covered Individuals at Healthcare Locations

   -a. Covered Individuals who Participate in the COVID-19 Vaccination Program by receiving the most recent CDC-recommended booster must submit proof that they received the booster by providing the LVA, within the timeframe set by the LVA, a copy of their CDC vaccination card (or foreign equivalent in the case of Covered Individuals who received their boosters abroad); official documentation issued by a State vaccine registry; or an official medical record.

   b. Those who are permitted under this COVID-19 Vaccination Program and applicable public health directives and applicable law to Participate by declining the most recent CDC-recommended booster must complete their Location’s Vaccine Declination Statement on or before the applicable Compliance Date.

   c. Those who are not permitted by applicable public health directives or applicable law to decline a booster but are eligible for an Exception that is both available for the Primary Series and permitted by applicable public health directives and applicable law must apply for the Exception on or before the applicable Compliance Date.

   d. Proof of vaccination may be subject to audit.

2. Covered Individuals at Other Locations
a. Covered Individuals who Participate in the COVID-19 Vaccination Program by receiving the most recent CDC-recommended booster must submit proof that they received the booster by providing the LVA, within the timeframe set by the LVA, any evidence required by their Location as determined by the LVA. The LVA may choose to permit certification or self-attestation as evidence of receiving the booster.

b. Those who are permitted under this COVID-19 Vaccination Program and consistent with public health directives and applicable law to Participate by declining the most recent CDC-recommended booster must complete their Location’s Vaccine Declination Statement on or before the applicable Compliance Date.

c. Those who are not permitted by applicable public health directives or applicable law to decline a booster but are eligible for an Exception that is both available for the Primary Series and permitted by applicable public health directives and applicable law must apply for the Exception on or before the applicable Compliance Date.

d. Proof of vaccination may be subject to audit.

V. Non-Pharmaceutical Interventions (NPIs):
All members of the Location’s community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.

Those who have not completed the Primary Series and/or who have not received the most recent CDC-recommended booster dose are not Up-To-Date on their Vaccines may be subject to NPIs above and beyond those who have are.

VI. Systemwide Implementation Guidelines:
☑ Attached      □ None

VII. Related Information:
A. Current for Fall 2022
   - CDC, Stay Up to Date with Vaccines
   - CDC, COVID-19 Contraindications and Precautions
   - CDC, New COVID-19 Vaccination Provider Trainings
   - FDA, COVID-19 Vaccines (includes fact sheets and translations)
   - CDC, COVID-19 Vaccination Clinical Resources for Each COVID-19 Vaccine
   - CDC, COVID-19 Vaccination Program Operational Guidance, including Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States.
   - CDC Advisory Committee on Immunization Practices, ACIP Immunization Schedule Vote (Oct. 20, 2022)
   - CDC Immunization Schedules
University of California – Policy on Vaccination Programs  — With Updated Interim Amendments

- CDC and Infectious Diseases Society of America, Vaccines & Immunity
- American Academy of Pediatrics, COVID-19 Vaccines in Infants, Children & Adolescents
- American College of Obstetricians and Gynecologists, COVID-19 Vaccination Considerations for Obstetric-Gynecologic Care
- American Society of Clinical Oncology, COVID-19 Provider & Practice Information
- American Society of Transplantation, COVID-19 Resources for Transplant Community
- Congregation for the Doctrine of the Faith, Note on the Morality of Using Some Anti-COVID-19 Vaccines (December 21, 2020)
- UC COVID-19 Vaccination Program Responsible Offices

B. Archived

- Advisory Committee on Immunization Practices – Ethical Principles for Allocating Initial Supplies of COVID-19 Vaccine – United States, 2020 (MMWR Nov. 23, 2020) and Meeting Information (November 23 and December 1, 2020)
- American College Health Association Recommends COVID-19 Vaccination Requirements for All On-Campus College Students in Fall 2021
- American College of Obstetricians and Gynecologists, COVID-19 Vaccination Considerations for Obstetric-Gynecologic Care (December 2020)
- Joint Statement in Support of COVID-19 Vaccine Mandates for All Workers in Health and Long-Term Care (2021)
- UC Health Coordinating Committee – Bioethics Working Group Vaccine Allocation Recommendations

- Centers for Disease Control and Prevention, Stay Up to Date with Vaccines
- Centers for Disease Control and Prevention, COVID-19 Contraindications and Precautions
- Centers for Disease Control and Prevention, COVID-19 Vaccine Training: General Overview of Immunization Best Practices for Healthcare Providers
- FDA COVID-19 Vaccine Information (includes fact sheets and translations)
- COVID-19 Vaccination Clinical & Professional Resources
- CDC COVID-19 Vaccination Program Operational Guidance including Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States
- Infectious Disease Society of America — COVID-19 Vaccine Information
- Congregation for the Doctrine of the Faith, Note on the Morality of Using Some Anti-COVID-19 Vaccines (December 21, 2020)
VIII. Frequently Asked Questions:

1. **I recently had COVID-19. I’m willing to get a booster, but I want to delay the booster for 180 days, and I’m not a health care worker. Can I do that?**

   Yes. The University encourages all members of the community to stay Up-To-Date at all times. For most people, this means getting a booster within a few months of their COVID-19 diagnosis or treatment. A person who prefers to delay the booster for 180 days may do so by opting out and submitting their location’s vaccine declination statement, subject to masking or other NPIs required by their location. They can change their mind at any time and get boosted consistent with expert recommendations and product labeling.

   If you are a health care worker subject to the California Department of Public Health (CDPH) order discussed in COVID-19 Vaccination Program FAQ #9, please refer to that FAQ for the booster compliance rules applicable to you.

2. **Why is the University continuing to mandate that Covered Individuals receive the Primary Series (or an Exception) at this point in the pandemic?**

   The University continues to evaluate the evidence for its Injury and Illness Prevention Programs, COVID-19 Prevention Programs, and other mitigation measures in response to COVID-19. Vaccine-induced immunity continues to play an important role in immune response to SARS-CoV-2, the virus that causes COVID-19. A patient’s degree of infection-induced immunity varies by disease severity, age, and underlying medical conditions, among other factors. The University will continue to review current evidence and evaluate the need for adjustments to the COVID-19 Vaccination Program accordingly.

3. **How do I know if I’m Up-To-Date? Specifically, how do I know what boosters are recommended for me or I am required to have?**

   The U.S. Centers for Disease Control and Prevention (CDC) maintains current guidance on recommended boosters. That guidance includes a tool to help individuals determine what boosters are recommended for them. The CDC maintains separate recommendations on its guidance website for individuals who received their Primary Series abroad.

   What boosters are required depend in part on who you are and where you work. Health care workers continue to be subject to the August 5, 2021 California Department of Public Health Order, as amended (on December 22, 2021, February 22, 2022, and September 13, 2022), which at the time of this writing requires health care workers subject to the order to receive the Primary Series and at least one booster, subject to limited exceptions and deferrals. (See FAQ #9.)

   Health care facilities, including clinics, must develop and implement processes to verify and maintain documentation of vaccination status of all health care workers and for obtaining and tracking documentation of certain testing.
4. Why is UC now allowing Covered Individuals to “Opt Out” of Receiving Boosters?

The University strongly recommends that all members of the University community receive CDC-recommended COVID-19 boosters, and some Covered Individuals are required by applicable public health orders to receive certain boosters.

At this point, however, a large proportion of the population has experienced COVID-19 since January 2022, and the University has concluded that the combination of Primary Series, earlier boosters, and naturally occurring immunity provides a large majority of the University community with adequate protection to reduce the public health risk faced during earlier stages of the pandemic. The University will continue to review current evidence and evaluate the need for adjustments to the COVID-19 Vaccination Program accordingly.

1. I do not have any approved Exceptions and I received my Primary Series outside the United States. What boosters do I need to have to comply with the policy?

2. A person is Up-To-Date with their COVID-19 vaccination when they have received all doses in the Primary Series and all CDC- or CDPH-recommended boosters, when eligible. The CDC has made specific recommendations for people vaccinated outside the United States, which depend on whether the vaccines received are accepted in the United States, whether the Primary Series was completed, and whether a booster dose was received. For details, please review the information online at the CDC website.

3. I do not have any approved Exceptions. What boosters do I need to have to comply with the policy, and when do I need to get them?

4. The policy requires you to be Up-To-Date on your Vaccine(s). This means that you have received the Primary Series and all additional doses or boosters recommended by the CDC or by CDPH, including the updated (bivalent) booster if recommended for you. Please consult your location to determine the compliance deadline for boosters.

5. If you are a health care worker subject to the California Department of Public Health (CDPH) order discussed in COVID-19 Vaccination Program FAQ #7, please refer to that FAQ for additional booster compliance deadlines applicable to you.

6.5. Why is UC allowing Exceptions to the Primary Series for reasons other than Medical Exemption? If California can eliminate personal belief and religious exceptions for K-12 students, why can’t UC do the same?

The University is required by law to offer reasonable accommodations to individuals who qualify for an Exception to the Primary Series vaccination requirement based on their disability, as well as to employees who object to vaccination based on their sincerely-held religious belief, practice, or observance. A decision was made to adopt and implement a single uniform COVID-19 Vaccination Program consistently across all groups of Covered Individuals. Vaccination against the virus that causes COVID-19 is a critical step for protecting the health and safety of our communities.
7.6. How do I apply for an Exception to the Primary Series?

Covered Individuals who seek an Exception to the Primary Series must complete the request form provided by their Location and submit it to their Location’s applicable Responsible Office. Model Forms have been published in Section IX.A of this Program Attachment for adaptation or as-is use by each Location.

8.7. I am pregnant. Will I be eligible for a Medical Exemption?

No, you are not eligible for a Medical Exemption from the Primary Series vaccination requirement. But unless you work in a University health care facility, you are eligible for a Deferral of the Primary Series throughout your pregnancy until the time that you return to in-person work or instruction, as applicable, following pregnancy. If you have completed the Primary Series and are not required by California’s public health orders to have a booster, you may decline receiving recommended boosters.

You may also be eligible for a disability accommodation. It is important to understand, however, the additional risks you and your baby will be exposed to if you contract COVID-19 during pregnancy.

Information about these risks – including increased risk to the life of the mother and the health of the fetus – is posted on the CDC website. There is currently no evidence that any vaccines, including COVID-19 Vaccines, cause fertility problems. The American College of Obstetricians and Gynecologists (ACOG) recommends that all eligible individuals, including pregnant and lactating individuals, be vaccinated.

Note: Those who work in University health care facilities or clinics are subject to an order originally issued in 2021 by the California Department of Public Health that does not allow for deferrals based on pregnancy. These individuals therefore must receive the Primary Series and at least one booster, subject to limited exceptions and deferrals outlined in the order be Up-To-Date on their Vaccines.

9.8. I was recently diagnosed with COVID-19, and/or I had an antibody test that shows that I have natural immunity. Does this support a Medical Exemption?

You may be eligible for a temporary Deferral of the Primary Series vaccination requirement for up to 90 days after your diagnosis or treatment. According to the US Food and Drug Administration, however, “at this time, antibody test results should not be used to decide if you need a COVID-19 vaccine or a vaccine booster, or to determine whether your vaccine worked” and “[a]ntibody tests do not tell you whether or not you can infect other people with SARS-CoV-2.” “A positive result from an antibody test does not mean you have a specific amount of immunity or protection from SARS-CoV-2 infection.” Currently authorized SARS-CoV-2 antibody tests are not validated to evaluate specific immunity or protection from SARS-CoV-2 infection.” For this reason, individuals who have been diagnosed with COVID-19 or had an antibody test are not permanently exempt from Primary Series vaccination.

10.9. How do the California Department of Public Health (CDPH) orders and guidance regarding COVID-19 vaccination of health care workers affect employees at the University’s medical centers, health professional schools, and clinics?
The August 5, 2021 CDPH order, as amended (on December 22, 2021, February 22, 2022, and September 13, 2022), requires that health care workers subject to the order have their first dose of a one-dose regimen or their second dose of a two-dose regimen for COVID-19 by September 30, 2021. It also requires that health care workers eligible for booster doses per the order to receive booster doses no later than March 1, 2022 and that health care workers not yet eligible for boosters be in compliance no later than 15 days after the CDPH’s recommended timeframe for receiving the booster dose. (Note that the University's COVID-19 Vaccination Program may have different timeframes and compliance deadlines that may also apply.) The CDPH order permits health care workers to decline these vaccination requirements on one of the limited grounds recognized by the order.

- Importantly, the CDPH order has fewer exceptions than some Exceptions available under the University’s COVID-19 Vaccination Program does are not available to workers and trainees in health care settings under the CDPH order. Specifically, Covered Individuals who work, train, or otherwise access any UC health care facilities – including medical centers, ambulatory surgery centers, Student Health Services, Counseling & Psychological Services, and other campus- and school-based medical and behavioral health clinics – may decline vaccination only based on “Qualifying Medical Reasons” or “Religious Beliefs” under the CDPH order. “Qualifying Medical Reasons” include only CDC-recognized contraindications and precautions, which corresponds with the University’s Policy on Vaccination Programs definition of Medical Exemption.

- Effective February 22, 2022, health care workers subject to the CDPH order who provide proof of COVID-19 infection after completion of the Primary Series may also defer booster administration for up to 90 days from the date of first positive test or clinical diagnosis. Health care workers with a Deferral due to proven COVID-19 infection must be in compliance with the booster requirement no later than 15 days after the expiration of their Deferral.

For these reasons, the University is unable to grant the following Exceptions to the Primary Series for health care workers subject to the CDPH order: (a) Deferrals based on COVID-19 diagnosis or COVID-19 treatment to the Primary Series based on COVID-19 diagnosis within the last 90 days; (b) Deferrals based on COVID-19 treatment within the last 90 days (though health care workers may be eligible for a Medical Exemption if the treatment they received qualifies as a CDC-recognized contraindication or precaution), (bc) Exceptions based on Disabilities that are not CDC-recognized contraindications or precautions, or (cd) Deferrals based on pregnancy.

Similarly, the University is unable to permit health care workers subject to the order to decline the order’s booster requirement for any reason other than Qualifying Medical Reasons or Religious Beliefs, and the University is unable to permit health care workers subject to the order to defer the order’s booster requirement for any reason other than COVID-19 diagnosis within the last 90 days. The CDPH order requires that any declination based on Qualifying Medical Reasons be supported by a written statement signed by a “physician, nurse practitioner, or other licensed medical professional practicing under the license of
a physician” (that is, a physician, a nurse practitioner or other advance practice nurse, or a physician’s assistant). The CDPH order also requires that health care workers seeking to defer booster administration due to recent COVID-19 diagnosis must provide documentation of previous diagnosis that includes date of infection from a health care provider or confirmed laboratory results.

Once a health care worker has received whatever boosters are required by the CDPH Order, they may decline additional boosters as permitted by this policy.

Covered Individuals should use the University’s Medical Exemption and/or Disability Exception Request form to decline any vaccines required by CDPH for Qualifying Medical Reasons.

Likewise, Covered Individuals should use the University’s Deferral Request Form to defer booster administration due to recent COVID-19 diagnosis, and Covered Individuals should use the University’s Religious Exception Request Form to decline the vaccine for Religious Beliefs under the CDPH order.

Additional information is available in the Health Care Worker Vaccine Requirement Q&A attached to the CDPH Order. The CDPH Order requires individuals who are exempt from its vaccination requirements to comply with Non-Pharmaceutical Interventions to help avoid preventable transmission of COVID-19.

11.10. How does the California Department of Public Health (CDPH) order discussed above impact Covered Individuals who are hired to work at UC health care facilities?

Covered Individuals hired to work at UC health care facilities (as described in FAQ #79) must be in compliance with the CDPH order as of their start date. To comply with the order, by their start date, they must either (a) have been vaccinated against COVID-19 (i.e., have received their first dose of a one dose regimen or their second dose of a two-dose regimen for COVID-19) and have received their COVID-19 vaccine booster dose if booster-eligible per the order (or be within the 15-day compliance period after becoming booster-eligible); or (b) meet the order’s requirements with regard to declining the vaccine based on “Religious Beliefs” or “Qualifying Medical Reasons” or deferring the booster based on recent COVID-19 diagnosis within the last 90 days. FAQ #97 addresses the order’s requirements with regard to declining or deferring the vaccine.

12.11. I am a new University of California employee. What is my deadline for complying with the COVID-19 Vaccination Program?

Complying with the COVID-19 Vaccination Program is a condition of employment. If you’re a Covered Individual, please refer to Exhibit 2, Section II.C. for the deadline applicable to you.
1. Vaccine Declination Statement – Declination of COVID-19 Booster

2. Medical Exemption and/or Disability Exception Request Form

3. Religious Exception Request Form

4. Deferral Request Form

5. Approval of Request for Exception

6. Denial of Request for Exception

Note: These model forms are provided for convenience only and may be adapted by locations consistent with applicable policies and practices.

B. Exhibits

1. Implementation Guidelines: Exceptions
2. Implementation Guidelines: Employee Compliance
3. Student Compliance (refer to [Student] Immunization Policy)

X. Revision History

TBD 2023:

December 12, 2022:

- Amended booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.
- Authorized Locations (other than Healthcare Locations) to permit self-attestation as evidence of receiving the booster.
- Clarified that booster compliance may be assessed annually between July and December, rather than at the moment an additional dose or booster is recommended.

August 30, 2022:

- Converted from COVID-specific vaccine policy to Program Attachment.
- Removed requirement that Healthcare Locations must evaluate Program Participation on an annual and ongoing basis.
- Extended compliance deadline for new employees to permit longer interval period between doses in alignment with CDC guidance.

July 15, 2021: Extended COVID-19 vaccine policy to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

January 15, 2021: Extended COVID-19 vaccine policy from UC Health to all Locations.


This Program Attachment is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.
The University of California strongly recommends that all members of the University community, except those who have had a severe allergic reaction to a previous dose of the COVID-19 vaccine or to any of its components, receive a vaccination to protect against COVID-19 disease as soon as they are eligible and get boosters as needed to stay Up-To-Date.

I am aware of the following facts:

- COVID-19 is a serious disease and has killed over 1 million people in the United States since February 2020, 100,000 in California alone.
- The COVID-19 vaccine is recommended for me and other members of the University community to protect our students, patients, faculty, and staff, and our families and communities, from COVID-19, its complications, and death.
- If I contract COVID-19, I can shed the virus for days even before any symptoms appear. During the time I shed the virus, I can transmit it to anyone I contact.
- If I become infected with SARS-CoV-2, the virus that causes COVID-19, even if my symptoms are mild or non-existent, I can spread the disease to others, and they can become seriously ill or die as a result.
- Nearly 1 in 5 American adults who have had COVID-19 is estimated to be suffering from "Long COVID" – symptoms that can last months or years after COVID-19 and can be debilitating.
- Contracting COVID-19 could have life-threatening consequences for my health and the health of everyone with whom I have contact, including my coworkers or peers and the most vulnerable members of our community.
- Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of COVID-19 vaccine required to stay Up-To-Date as explained in the UC Policy on Vaccination Programs.

Despite these facts, I am voluntarily choosing [LOCATION OPTION: “for this year”] to decline the most recent COVID-19 booster. My reason(s) for declining are as follows (answering this question is optional):

- ☐ medical contraindication
- ☐ disability
- ☐ religious objection
- ☐ concerned about risks of vaccine more than risks of disease
- ☐ want to delay but intend to get boosted
☐ other __________________________________________

☐ prefer not to say.

I understand that I can change my mind at any time and accept the COVID-19 booster. I understand that as long as I am not Up-To-Date on COVID-19 boosters, I will be required to take precautionary measures as required by my location, such as wearing a mask and increased testing. [LOCATION OPTION: “I also will not receive a badge sticker showing that I have received the vaccine.”]

__________________________________________________________

I have read the Vaccine Information Statement or Fact Sheet and the information on this Vaccine Declination Statement, and I have had a chance to ask questions.

NOTE: Health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement may not decline their first booster using this form.

Signature: ___________________________ Date: _________________________
UNIVERSITY OF CALIFORNIA
MEDICAL EXEMPTION AND/OR DISABILITY EXCEPTION REQUEST FORM
Exception to SARS-Co-V-2 (COVID-19) Vaccination Requirement

This form should be used by University employees and students to request a Medical Exemption and/or Disability Exception to the COVID-19 Primary Series vaccination requirement in the University’s SARS-Co-V-2 (COVID-19) Vaccination Program. This form should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement ("CDPH order") to request a Medical Exemption to the CDPH order’s booster requirement. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should instead use the Vaccine Declination Statement – Declination of COVID-19 Booster form.

Fill out Part A to request a Medical Exemption due to Contraindication or Precaution. Fill out Part B to request an Exception based on Disability. More than one section may be completed if applicable. Important: Do not identify any diagnosis, disability, or other medical information. That information is not required to process your request.

Your request must be supported by a health care provider’s certification. Some local (city/county) public health departments have issued orders specifying that the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.

Part A: Request for Medical Exemption Due to Contraindication or Precaution

☐ I am requesting an Exception to the COVID-19 Primary Series vaccination requirement based on Medical Exemption. The Contraindications or Precautions to COVID-19 vaccination (recognized by the U.S. Centers for Disease Control and Prevention, the California Department of Public Health, or in the case of internationally administered vaccines, the World Health Organization) apply to me with respect to all available COVID-19 Vaccines. For that reason, I am requesting an Exception to the COVID-19 vaccination requirement based on Medical Exemption.

☐ I am a health care worker subject to the CDPH order, and I am requesting an Exception to the COVID-19 booster vaccination requirement based on Medical Exemption. The Contraindications or Precautions to COVID-19 vaccination (recognized by the U.S. Centers for Disease Control and Prevention, the California Department of Public Health, or in the case of internationally administered vaccines, the World Health Organization) apply to me with respect to all available COVID-19 boosters.

My request is supported by the attached certification from my health care provider. For health care workers subject to the CDPH order, California Department of Public Health’s Health Care Worker Vaccine Requirement ("CDPH order"), the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.
Part B: Request for Exception Based on Disability

☐ I have a Disability and am requesting an Exception to the COVID-19 Primary Series vaccination requirement as a Disability accommodation. Health care workers subject to the CDPH order (California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”)) are not eligible for this Exception. My request is supported by the attached certification from my health care provider.

Please provide any additional information that you think may be helpful in processing your request. Do not identify your diagnosis, disability, or other medical information.

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location. I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: ___________________________ Date: ______________

Date Received by University: _______ By: _________________________________
UNIVERSITY OF CALIFORNIA
MEDICAL EXEMPTION AND/OR DISABILITY EXCEPTION REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement

CERTIFICATION FROM HEALTH CARE PROVIDER

Your patient is a [The University of California requires that its employees and/or students who be Up-To-Date on COVID-19 vaccination as a condition of accessing any University Location, Facility, or Program in person. The University may grant has requested an Exceptions to the University’s COVID-19 vaccination requirement based on (a) Medical Exemption due to a Contraindication or Precaution to COVID-19 vaccination recognized by the U.S. Centers for Disease Control and Prevention (CDC), the California Department of Public Health (CDPH), or in the case of internationally administered vaccines, the World Health Organization (WHO); and/or (b) Disability. The individual’s You are seeking to support their request for such an Exception must be supported by with a certification from their qualified licensed health care provider.]

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<tr>
<th>HEALTH CARE PROVIDER NAME</th>
<th>LICENSE TYPE, # AND ISSUING STATE</th>
</tr>
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<tbody>
<tr>
<td>FULL NAME OF PATIENT</td>
<td>DATE OF BIRTH OF PATIENT</td>
</tr>
<tr>
<td>PATIENT’S EMPLOYEE/STUDENT ID NUMBER</td>
<td>HEALTH CARE PROVIDER PHONE/EMAIL</td>
</tr>
<tr>
<td>PHYSICIAN SUPERVISOR AND LICENSE # (FOR A PHYSICIAN ASSISTANT WORKING UNDER A PHYSICIAN’S LICENSE)</td>
<td></td>
</tr>
</tbody>
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Please note the following from the Genetic Information Nondiscrimination Act of 2008 (GINA), which applies to all University employees:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information.

“Genetic information,” as defined by GINA, includes an individual’s family medical history, the results of an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

Please complete Part A of this form if one or more of the Contraindications or Precautions to COVID-19 vaccination recognized by the U.S. Centers for Disease Control and Prevention (CDC), the California Department of Public Health (CDPH), or in the case of internationally administered vaccines, the World Health Organization (WHO), apply to this patient. Please complete Part B if this patient has a Disability, as defined below, that makes COVID-19 vaccination inadvisable in your professional opinion. More than one section may be completed if applicable to this patient.

Important: Do not identify the patient’s diagnosis, disability, or other medical information as this document will be returned to the University.

Part A: Contraindication or Precaution to COVID-19 Vaccination
Primary Series. I certify that one or more of the Contraindications or Precautions (recognized by the CDC, the CDPH, or in the case of internationally administered vaccines, the WHO) for each of the currently available Vaccines used for the COVID-19 Primary Series applies to the patient listed above. For that reason, COVID-19 Primary Series vaccination using any of the currently available COVID-19 Vaccines is inadvisable for this patient in my professional opinion. The Contraindication(s) and/or Precaution(s) is/are: ☐ Permanent ☐ Temporary.

If temporary, the expected end date is: ____________________.

Booster. I certify that one or more of the Contraindications or Precautions (recognized by the CDC, the CDPH, or in the case of internationally administered vaccines, the WHO) for each of the currently available Vaccines used for COVID-19 boosters applies to the patient listed above. For that reason, COVID-19 booster vaccination using any of the currently available COVID-19 Vaccines is inadvisable for this patient in my professional opinion. The Contraindication(s) and/or Precaution(s) is/are: ☐ Permanent ☐ Temporary.

If temporary, the expected end date is: ____________________.

Part B: Disability That Makes COVID-19 Primary Series Vaccination Inadvisable

“Disability” is defined as a physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.

I certify that the patient listed above has a Disability, as defined above, that makes COVID-19 Primary Series vaccination inadvisable in my professional opinion. The patient’s disability is: ☐ Permanent ☐ Temporary.

If temporary, the expected end date is: ____________________.

________________________________________  __________________________
Signature of Health Care Provider        Date
This form should be used by University employees and students to request a Religious Exception to the COVID-19 Primary Series vaccination requirement in the University’s SARS-CoV-2 (COVID-19) Vaccination Program. It should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) to request a Religious Exception to the CDPH order’s booster requirement. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should instead use the Vaccine Declination Statement – Declination of COVID-19 Booster form.

Please select as applicable:

☐ Based on my sincerely held religious belief, practice, or observance, I am requesting an Exception to the COVID-19 Primary Series vaccination requirement in the University’s SARS-CoV-2 Vaccination Program as a religious accommodation.

☐ I am a health care worker subject to the CDPH order, and based on my sincerely held religious belief, practice, or observance, I am requesting an Exception to the COVID-19 booster vaccination requirement as a religious accommodation.

Please identify your sincerely held religious belief, practice, or observance that is the basis for your request for an Exception as a religious accommodation.

_____________________________________________________________________

Please briefly explain how your sincerely held religious belief, practice, or observance conflicts with the University’s COVID-19 vaccination requirement.

_____________________________________________________________________

Please provide any additional information that you think may be helpful in processing your religious accommodation request.

_____________________________________________________________________

Have you previously received any dose of a COVID-19 vaccine?

☐ Yes ☐ No

*If you have previously received any dose of a COVID-19 vaccine, please also complete the following:*
1. Please explain why your sincerely held religious belief, practice, or observance did not conflict with the previous dose(s) of the COVID-19 vaccine that you received.

__________________________________________________________________________

2. Please provide a written statement from someone else confirming that you have a sincerely held religious belief, practice, or observance that conflicts with the CDPH order requirement to receive CDC or CDPH recommended a COVID-19 booster when eligible. For example, you may provide a statement from your religious leader, a fellow congregant, or someone else who has personal knowledge of your sincerely held religious belief, practice, or observance. Please submit that statement with this request form and provide the following information regarding the author of the statement:

   • Name and relationship to you:

   _______________________________________________________________________

   • Basis of their knowledge regarding your sincerely held religious belief, practice, or observance:

   _______________________________________________________________________

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location.

I verify the truth and accuracy of the statements in this request form.

_____________________________ Date: _________________

Employee/Student Signature: ________________________________

_____________________________ __________________________

Date Received by University: _______________ By: _______________________________

DMS 196
UNIVERSITY OF CALIFORNIA
DEFERRAL REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement
Based on Pregnancy or Recent COVID-19 Diagnosis or Treatment

This form should be used by University employees and students to request a Deferral of the COVID-19 Primary Series vaccination requirement in the University’s SARS-CoV-2 Vaccination Program due to pregnancy or recent COVID-19 diagnosis or treatment.

It should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) to request a Deferral of the CDPH order’s booster requirement due to recent COVID-19 diagnosis. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters may defer booster administration by using the Vaccine Declination Statement – Declination of COVID-19 Booster form.

Fill out Part A to request a Deferral of the Primary Series due to pregnancy. Fill out Part B to request a Deferral due to COVID-19 diagnosis or treatment within the last 90 days. If you are filling out Part B, your request may need to be supported by a health care provider’s certification. Some local (city/county) public health departments have issued orders specifying that the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.

Part A: Request for Deferral of the Primary Series Due to Pregnancy

☐ I am currently pregnant and am requesting a Deferral of the COVID-19 Primary Series vaccination requirement during my pregnancy. My anticipated due date is ________________.

Health care workers subject to the CDPH order California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) are not eligible for Deferrals based on pregnancy.

Part B: Request for Deferral Due to COVID-19 Diagnosis or Treatment

Check all that apply:

☐ Primary Series. I am requesting a Deferral of the COVID-19 Primary Series vaccination requirement because I have been diagnosed with COVID-19 within the last 90 days. For that reason, I am requesting a Deferral to the COVID-19 vaccination requirement. Health care workers subject to the CDPH order California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) must have previously received the Primary Series to be eligible for this Deferral. I have previously received the Primary Series ☐ Yes ☐ No. My request is supported by the attached confirmed laboratory results or certification from my health care provider.

☐ Primary Series. I am requesting a Deferral to the COVID-19 Primary Series
UNIVERSITY OF CALIFORNIA
DEFERRAL REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement
Based on Pregnancy or Recent COVID-19 Diagnosis or Treatment

Vaccination requirement because I have been treated for COVID-19 within the last 90 days. For that reason, I am requesting a Deferral to the COVID-19 vaccination requirement. Health care workers subject to the CDPH order are not eligible for this Deferral due to COVID-19 treatment. My request is supported by the attached certification from my health care provider.

Booster. I am a health care worker subject to the CDPH order, and I am requesting a Deferral to the COVID-19 booster vaccination requirement because I have been diagnosed with COVID-19 within the last 90 days. My request is supported by the attached certification from my health care provider.

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location.

I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: ________________________ Date: ________________

Date Received by University: ___________ By: ________________________
CERTIFICATION FROM HEALTH CARE PROVIDER

Your patient is a University of California employee and/or student who has requested a deferral of the University’s COVID-19 vaccination requirement based on COVID-19 diagnosis or treatment within the last 90 days. Your patient is seeking to support their request for such a deferral with a certification from their qualified licensed health care provider.

Please note the following from the Genetic Information Nondiscrimination Act of 2008 (GINA), which applies to all University employees:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. “Genetic information,” as defined by GINA, includes an individual’s family medical history, the results of an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

Please complete the following. Important: Other than COVID-19 diagnosis, do not identify the patient’s diagnosis, disability, or other medical information as this document will be returned to the University.

☐ I certify that my patient has been diagnosed with COVID-19 within the last 90 days.
☐ My patient’s COVID-19 diagnosis was on _________________.
☐ I certify that my patient has been treated for COVID-19 within the last 90 days.
☐ My patient’s last day of COVID-19 treatment was on _________________.
☐ I certify that my patient is being actively treated for COVID-19. The expected end date of treatment is: _________________.

[Signature]

[Date]

[Health Care Provider Name]

[License Type, # And Issuing State]

[Full Name of Patient]

[Date Of Birth Of Patient]

[Patient’s Employee/Student ID Number]

[Health Care Provider Phone/Email]

[Physician Supervisor And License # (For a Physician Assistant Working Under A Physician’s License)]
UNIVERSITY OF CALIFORNIA
DEFERRAL REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement
Based on Pregnancy or Recent COVID-19 Diagnosis or Treatment

Signature of Health Care Provider

Date
On ________, we received your request for the following Exception in connection with the COVID-19 vaccination requirement in the University's SARS-CoV-2 Vaccination Program:

- □ Exception to Primary Series based on Medical Exemption due to Contraindication or Precaution
- □ Exception to Booster based on Medical Exemption due to Contraindication or Precaution (Health Care Workers Only)
- □ Exception to Primary Series based on Disability
- □ Exception to Primary Series based on Religious Objection
- □ Exception to Booster based on Religious Objection (Health Care Workers Only)
- □ Exception to Primary Series based on Deferral due to Pregnancy
- □ Exception to Primary Series based on Deferral due to COVID-19 Diagnosis and/or Treatment
- □ Exception to Booster based on Deferral due to COVID-19 Diagnosis (Health Care Workers Only)

For Exceptions to Primary Series other than Deferrals due to Pregnancy:
Based on the information you have provided, your request for Exception to the Primary Series has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid □ until ________.  
□ indefinitely.

If your approval has an end date and you no longer need an Exception, you will be subject to the following deadlines as applicable.

- If you have not completed the Primary Series when your approval expires, you will have until ________ (120 weeks after the end date) to submit proof that you have completed the Primary Series. You must then provide proof of receiving or, if eligible, properly declining the most recent-all CDC- or CDPH-recommended boosters, once eligible, at least once a year within the timeframe required by your location.

- If you have completed the Primary Series but are not yet eligible for a CDC- or CDPH-recommended booster when your approval expires, you must then provide proof of receiving or, if eligible, properly declining the most recent-all...
CDC- or CDPH-recommended boosters, once eligible, at least once a year within the timeframe required by your location.

- If you are a health care worker subject to the CDPH order, you may be subject to additional deadlines as required by your location.

- If you are eligible for a CDC- or CDPH-recommended booster when your approval expires, you must provide proof of receiving that booster within the same timeframe that your location requires for boosters. For example, if your location would have required you to receive a booster within 30 days of becoming eligible for a CDC- or CDPH-recommended booster, then you must provide proof of receiving a booster within 30 days of the Exception’s end date. You must then provide proof of receiving any additional CDC- or CDPH-recommended boosters, once eligible, within the timeframe required by your location.

- If you are a health care worker subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) who has an approved Deferral to the booster requirement due to recent COVID-19 diagnosis, you must receive a booster and submit proof of vaccination within 15 days of the Deferral’s end date.

For Exceptions to Primary Series Based on Deferrals Due to Pregnancy:

Based on the information you have provided, your request for Exception to the Primary Series based on Deferral due to pregnancy has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid until you return to work or instruction, as applicable. If you no longer need an Exception, you will be subject to the following deadlines as applicable.

- If you have not completed the Primary Series when you return, you must submit proof that you have completed the Primary Series within 120 weeks of your return. You must then provide proof of receiving, or, if eligible, properly declining the most recent all CDC- or CDPH-recommended boosters, once eligible, at least once a year within the timeframe required by your location.

- If you have completed the Primary Series but are not yet eligible for a CDC- or CDPH-recommended booster when you return, you must then provide proof of receiving, or, if eligible, properly declining the most recent all CDC- or CDPH-recommended boosters, once eligible, at least once a year within the timeframe required by your location.

- If you are eligible for a CDC- or CDPH-recommended booster when you return, you must provide proof of receiving that booster within the same timeframe that your location requires for boosters. For example, if your location would have required you to receive the booster within 30 days of becoming eligible for a CDC- or CDPH-recommended booster, then you must provide proof of receiving a booster within 30 days of your return. You must then provide proof of receiving...
any additional CDC- or CDPH-recommended boosters, once eligible, within the timeframe required by your location.

☐ For Exceptions to Boosters (Only Applicable to Health Care Workers Subject to the CDPH order): Based on the information you have provided, your request for Exception to the CDPH order’s booster requirement based on Medical Exemption due to Contraindication or Precaution, Religious Objection, or Deferral due to COVID-19 diagnosis has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid:

☐ until ________.
☐ indefinitely.

If your approval has an end date and you no longer need an Exception, you will be subject to the following deadlines as applicable.

• If you have an approved Deferral to the booster requirement due to recent COVID-19 diagnosis, you must receive a booster and submit proof of vaccination within 15 days of the Deferral’s end date.

• You must provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

• You may be subject to additional deadlines related to the CDPH order as required by your location.

As a condition of your Physical Presence at any University Location/Facility or Program, you must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination. You must also comply with the following Non-Pharmaceutical Interventions applicable to your position (if any):

An employee’s failure to comply with the University’s SARS-CoV-2 Vaccination Program, including the required Non-Pharmaceutical Interventions, may result in corrective action and/or discipline up to and including termination/dismissal. A student’s failure to comply with the University’s SARS-CoV-2 Vaccination Program, including the required Non-Pharmaceutical Interventions, may result in consequences up to and including dismissal from educational programs.

If you have any questions or concerns regarding the above, please contact:

You are hereby informed of the risks of COVID-19 infection, including long-term disability and death, both for you and for others who you may expose to the disease.

Approved by: ___________________________ Date: ___________________________
UNIVERSITY OF CALIFORNIA
APPROVAL OF REQUEST FOR EXCEPTION
SARS-CoV-2 (COVID-19) Vaccination Requirement

(Signature of Issuer)
UNIVERSITY OF CALIFORNIA
DENIAL OF REQUEST FOR EXCEPTION
SARS-CoV-2 (COVID-19) Vaccination Requirement

On ______, we received your request for the following Exception in connection with the COVID-19 vaccination requirement in the University’s SARS-CoV-2 Vaccination Program:

☐ Exception to Primary Series based on Medical Exemption due to Contraindication or Precaution
☐ Exception to Booster based on Medical Exemption due to Contraindication or Precaution
☐ Exception to Primary Series based on Disability
☐ Exception to Primary Series based on Religious Objection
☐ Exception to Booster based on Religious Objection
☐ Exception to Primary Series based on Deferral due to Pregnancy
☐ Exception to Primary Series based on Deferral due to COVID-19 Diagnosis and/or Treatment
☐ Exception to Booster based on Deferral due to COVID-19 Diagnosis

Your request has been DENIED based on the information we have received to date.

The reason for the denial is the following:

☐ You do not qualify for the Exception that you requested.
☐ Your request is incomplete. We have requested the following additional information from you but have not received it.

☐ You do not need an Exception to the COVID-19 booster requirement because the COVID-19 Vaccination Program allows you to affirmatively decline the most recent CDC-recommended booster. You must complete the Vaccine Declination Statement – Declination of COVID-19 Booster form within the timeframe required by your Location to decline to receive the most recent CDC-recommended booster. If you later become subject to a booster requirement and wish to request an Exception at that time, you will need to submit a new Exception request. (Note: The deadlines referenced below do not apply to you.)

☐ You are not a Covered Individual as defined by the Policy on Vaccination Programs. Accordingly, you do not need an Exception to the
University’s COVID-19 vaccination requirement at this time. If you later become a Covered Individual and wish to request an Exception at that time, you will need to submit a new request. (Note: The deadlines referenced below do not apply to you.)

Because your request for an Exception has been denied, you are subject to the following deadlines as applicable.

- If you have not completed the Primary Series as of the denial date below, you have until ____________ (14 calendar days from the denial date) to submit proof that you have received your first dose of a COVID-19 Vaccine. That proof must include the date that you received it. You then have until ____________ (120 weeks from the denial date) to submit proof that you have completed the Primary Series. You must then provide proof of receiving or, if eligible, properly declining the most recent all CDC- or CDPH-recommended boosters, once eligible, at least once a year within the timeframe required by your location.

- If you have completed the Primary Series but are not yet eligible for a CDC- or CDPH-recommended booster as of the denial date below, you must then provide proof of receiving or, if eligible, properly declining the most recent all CDC- or CDPH-recommended boosters, once eligible, at least once a year within the timeframe required by your location.

- If you are a health care worker subject to the CDPH order, you may be subject to additional deadlines as required by your location.

- If you are eligible for a CDC- or CDPH-recommended booster as of the denial date below, you have until ____________ (14 calendar days from the denial date) to submit proof that you have received the booster. You must then provide proof of receiving any additional CDC- or CDPH-recommended boosters, once eligible, within the timeframe required by the location.

Until you are Up-To-Date on COVID-19 vaccination, you must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date as a condition of your Physical Presence at any University Location/Facility or Program. You must also comply with the following Non-Pharmaceutical Interventions applicable to your position (if any):

_________________________________________________________________________________________________________________________

Notwithstanding the foregoing, health care workers subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order.

If you have any questions regarding the above, please contact:
DENIAL OF REQUEST FOR EXCEPTION
SARS-CoV-2 (COVID-19) Vaccination Requirement

Denied by: ________________________________ Date: ________________

(Signature of Issuer)
Exhibits 1, 2: Implementation Guidelines

These Guidelines are provided to aid those charged with evaluating, processing, and resolving Personnel requests for Exception to the SARS-CoV-2 (COVID-19) Vaccination Program (“COVID-19 Vaccination Program”) and also to provide information regarding compliance with the COVID-19 Vaccination Program.

EXHIBIT 1: EXCEPTIONS

This Exhibit Guidelines applies to Covered Individuals who Physically Access a Location or University Program in connection with their employment or appointment and who have requested an Exception to the COVID-19 vaccination requirement based on Medical Exemption, Disability, Religious Objection, and/or Deferral due to pregnancy or recent COVID-19 diagnosis or treatment.

Covered Individuals may request an Exception to the COVID-19 Primary Series vaccination requirement based on Medical Exemption, Disability, Religious Objection, and/or Deferral due to pregnancy or recent COVID-19 diagnosis or treatment. Covered Individuals who are health care workers subject to the August 5, 2021 California Department of Public Health order as amended on December 22, 2021, February 22, 2022, and September 13, 2022 (“CDPH order”) may request an Exception to the CDPH order’s booster requirement based on Medical Exemption, Religious Objection, and/or Deferral due to recent COVID-19 diagnosis. Covered Individuals who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should comply with the declination process as directed by their location instead of seeking an Exception.

I. DEFINITIONS

All terms in the “Definitions” section of the University of California Policy on Vaccination Programs apply to these Guidelines.

Additional Term:

Decision: The determination of the approval or denial of an Exception request.

II. ADMINISTRATION OF REQUESTS

A. Establishment of a Responsible Office

1. Locations should designate a particular office(s) and/or individual(s) to field Exception requests and make this Responsible Office known to Personnel.

2. This Office might be different for each type of Exception allowed under the COVID-19 Vaccination Program – e.g. Medical Exemption or Disability Exception requests may be processed by a different Office from the Religious Objection Exception or Deferral requests.

3. When the Office of the President has approved the use of a Third Party Administrator (TPA), Locations can opt to utilize that TPA to support the administration and review of Medical Exemptions, Disability Exceptions, Religious Objection Exceptions, and/or Deferrals. If utilizing this option, the Location must still designate a Responsible Office to manage the coordination with that TPA.

B. Documentation of the Request
1. The Responsible Office is responsible for reporting all Exception requests, approvals, and denials to the Local Vaccine Authority (LVA) at the Location.

2. The Responsible Office should make Exception Request Forms (see Model Forms 24-43) publicly available to Personnel and available upon request. Locations utilizing any TPA should provide full name and email address (individually or in a flat list format such as an Excel table) to the TPA; the TPA will then reply with the applicable Exception Request Form.

3. Either the Responsible Office or TPA (if any) should evaluate the Exception request using the applicable standardized criteria. The Responsible Office should use the Approval or Denial Form (see Model Forms 5 and 6) to record the Decision.

4. The Responsible Office will exercise best practice information security procedures and comply with BFB-IS-3 (Electronic Information Security Policy) as well as BFB-RMP-1 (the University Records Management Program) when storing COVID-19 Vaccination Program records (e.g., Exception request forms, approval forms, denial forms, related communications) and when notifying the LVA regarding pending requests for Exceptions and Exception Decisions. COVID-19 Vaccination Program records should be kept confidential and only accessed for COVID-19 Vaccination Program-related purposes. COVID-19 Vaccination Program records should not be stored in an employee’s personnel file.

C. Standardized Communications and Process

1. All forms and notifications should follow standard templates. Location-specific forms may include consistently communicated modifications such as campus-specific Non-Pharmaceutical Intervention (NPI) requirements, Responsible Office contact information, etc.

2. Communications and forms regarding Exceptions (including request forms, notifications such as a notice of pending request, notice of approval, and notice of denial) should be standardized as much as possible regardless of medium (e.g., digital/e-mail vs. hard-copy) or the office sending the communication (e.g., local Responsible Office or any TPA).

3. Communications should be made in a timely fashion, both acknowledging receipt of the request and communicating the subsequent Decision.

D. Pending and Granted Exceptions Require Employee Use of NPI

All forms and references to Exception requests should clearly state that, as a condition of Physical Presence, employees are required to comply with the Location’s NPI requirements (e.g., face coverings, regular asymptomatic testing) while an Exception request is pending or after such requests have been approved. This requirement applies to Exceptions for both the Primary Series and boosters (when applicable). NPI requirements may be amended and communicated to employees subsequently, such as if public health conditions prompt revisions to NPI requirements. See Model Forms 24-65 of the COVID-19 Vaccination Program for recommended language.

Notwithstanding the foregoing, for Covered Individuals subject to the August 5, 2021 California Department of Public Health order as amended on December 2021-08-05.
III. DECISION PROCESS

A. The Responsible Office will evaluate all Exception requests consistently in both the application of the Guidelines and treatment of similarly situated Personnel throughout the University. For those Covered Individuals who are subject to the CDPH order requiring COVID-19 vaccination for health care workers, evaluation of such requests will also consider the requirements of that order.

The Responsible Office will utilize system-wide training for individuals charged with evaluating Exception requests. The Responsible Office will stay up to date on training, which may be amended as new information or changes to conditions (i.e., public health) may require.

B. The Responsible Office will contact Personnel in a timely fashion in the event that an incomplete form is submitted or more information is needed in order to evaluate the request.

IV. END DATE OF APPROVAL FOR EXCEPTION

If an employee who has not completed the Primary Series has an approved Exception with an end date and the employee no longer needs an Exception at that time, they will have 120 weeks after the end date to receive the Primary Series and submit proof of vaccination. They must then submit proof that they received or, if eligible, properly declined the most recent all CDC- or CDPH-recommended boosters, at least once a year once eligible, within the timeframe required by the location. If the employee is a health care worker subject to the CDPH order, they may be subject to additional deadlines as required by the location.

If the employee is eligible for a CDC- or CDPH-recommended booster when the approval expires, they must receive the booster and submit proof that they are Up-To-Date with their Vaccines within the same timeframe that locations require for employees to receive a booster. For example, if a location requires employees to receive a booster within 30 days of becoming eligible for a CDC- or CDPH-recommended booster, then the employee must receive a booster within 30 days of the approved Exception end date. They must then submit proof of having received any additional CDC- or CDPH-recommended boosters, once eligible, within the timeframe required by the location.

If a student employee is eligible for a CDC- or CDPH-recommended booster when the approval expires, they must receive the booster and submit proof that they are Up-To-Date within the same timeframe that locations require for students to receive a booster. They must then submit proof of having received any additional CDC- or CDPH-recommended boosters, once eligible, within the timeframe required by the location for students. If the employee is a health care worker subject to the CDPH order, they may be subject to additional deadlines as required by the location.
If an employee has completed the Primary Series but is not yet eligible for a CDC- or CDPH-recommended booster when the approval expires, they must then submit proof of having received or, if eligible, properly declined, the most recent all CDC- or CDPH-recommended boosters, once eligible, at least once a year within the timeframe required by the location. Student employees are subject to the timeframe required by the location for students. If the employee is a health care worker subject to the CDPH order, they may be subject to additional deadlines as required by the location.

An employee subject to the CDPH order who has a Deferral to the booster requirement due to recent proven COVID-19 diagnosis must receive a booster and submit proof of vaccination within the CDPH-recommended timeframe required by the location. Employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V.)

An employee must submit proof that they are Up-To-Date with their Vaccines per local guidelines and COVID-19 Vaccination Program requirements (see COVID-19 Vaccination Program, Section IV).

V. THE CDPH HEALTH CARE WORKER VACCINE REQUIREMENT

A. The August 5, 2021 California Department of Public Health order as amended on December 22, 2021, February 22, 2022, and September 13, 2022 (“CDPH order”) requires that health care workers subject to the order receive their first dose of a one-dose regimen or the second dose of a two-dose regimen for COVID-19 vaccination by September 30, 2021. It also requires that health care workers eligible for booster doses per the order to receive booster doses no later than March 1, 2022 and that health care workers not yet eligible for boosters be in compliance no later than 15 days after the CDPH’s recommended timeframe for receiving the booster dose. Note that the UC COVID-19 Vaccination Program may have different timeframes and compliance deadlines that may also apply.

B. The CDPH permits health care workers to decline these vaccination requirements based on “Religious Beliefs” or “Qualifying Medical Reasons.” “Qualifying Medical Reasons” under the CDPH order include only CDC-recognized contraindications or precautions.

C. Effective February 22, 2022, the CDPH order also permits health care workers who completed the Primary Series and were then recently diagnosed with COVID-19 (breakthrough infection) to delay booster administration for up to 90 days from the date of their first positive test or clinical diagnosis.

D. Covered Individuals under the UC COVID-19 Vaccination Program who work, train, or otherwise access any UC health care facilities – including medical centers, ambulatory surgery centers, Student Health Services, Counseling & Psychology Services, and other campus- and school-based medical and behavioral clinics – cannot be Physically Present at such facilities if they are not in compliance with the CDPH order.
E. Given the requirements of the CDPH order, the University is unable to approve the following Exceptions to the Primary Series for Covered Individuals subject to the CDPH order: (1) Deferrals to the Primary Series based on COVID-19 diagnosis within the last 90 days, (2) Deferrals based on COVID-19 treatment within the last 90 days (though health care workers may be eligible for a Medical Exemption if the treatment they received qualifies as a CDC-recognized contraindication or precaution), (3) Exceptions based on Disabilities that are not CDC-recognized contraindications or precautions, or (4) Deferrals based on pregnancy.

e.F. Similarly, the University is unable to permit Covered Individuals subject to the CDPH order to decline the order’s booster requirement for any reason other than Qualifying Medical Reasons or Religious Beliefs, and the University is unable to permit Covered Individuals subject to the order to defer the order’s booster requirement for any reason other than COVID-19 diagnosis within the last 90 days.

f.G. Covered Individuals should use the University’s Medical Exemption and/or Disability Exception Request Form to decline the vaccination requirements for Qualifying Medical Reasons. Likewise, Covered Individuals should use the University’s Deferral Request Form to defer booster administration due to recent COVID-19 diagnosis, and Covered Individuals should use the University’s Religious Exception Request Form to decline the vaccination requirements for Religious Beliefs under the CDPH order.

H. Additional updates to the CDPH order are expected and can be found here: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx.
VI. EXHIBIT 1 REVISION HISTORY

**TBD 2023:**

**December 12, 2022:** Revised language for consistency with changes to booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

**Amended: September 16, 2022:** Revised language based on the September 13, 2022 amendment to the August 5, 2021 California Department of Public Health order.

**Amended: August 30, 2022:**
- Converted from COVID-specific vaccine policy to Program Attachment.
- Extended deadline to receive Primary Series to permit longer interval period between doses in alignment with CDC guidance.

**Amended: March 9, 2022:**
- Added language regarding December 22, 2021 and February 22, 2022 amendments to the August 5, 2021 California Department of Public Health order.
- Added language regarding booster requirement for employees who are Covered Individuals.

**Amended: September 16, 2021:** Added language regarding the August 5, 2021 California Department of Public Health order.

**First Effective Date: July 20, 2021**
EXHIBIT 2: EMPLOYEE COMPLIANCE

I. SUMMARY

The purpose of the COVID-19 Vaccination Program is to facilitate the protection of the health and safety of the University community. The COVID-19 Vaccination Program requires employees/Covered Individuals, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to receive the Primary Series be Up-To-Date on COVID-19 vaccination before Physically Accessing the University’s Locations/Facilities and/or University Programs and to receive or, if eligible, properly decline, boosters at least once a year, subject to specified Exceptions.

These Guidelines provide information regarding compliance with the COVID-19 Vaccination Program by University of California policy-covered staff and Academic Personnel Manual (APM)-covered academic appointees. The University desires a consistent approach for all employee populations, including represented employees, subject to its collective bargaining obligations, applicable collective bargaining agreements, and applicable public health orders.

The path to full compliance with the COVID-19 Vaccination Program for each employee, including the notices provided, may differ depending upon the date that the employee complies with each compliance step or submits a request for Exception.

II. EMPLOYEE REQUIREMENTS

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements (see COVID-19 Vaccination Program, Section IV).

If any of the dates below falls on a weekend or University holiday, the deadline for providing the required proof is the next business day that is not a University holiday.

A. Primary Series

The COVID-19 Primary Series vaccination requirement applies to UC employees who Physically Access the University’s Locations or Programs in connection with their employment or appointment. As a condition of Physical Presence at a University Location/Facility or in a University Program, all of these UC employees must provide proof of having completed the Primary Series (including the two-week period following the final shot of the Primary Series) or submit a request for an Exception no later than the applicable Compliance Date. For employees who are subject to the CDPH order, compliance with that order is also a condition of Physical Presence at any UC health care facility. (See Exhibit 1, Sections II.D and V).

Consistent with the requirement for students, Covered Individuals who are student employees must provide proof of having completed the Primary Series (including the two-week period following the final shot of the Primary Series) or, if applicable, submit a request for an Exception no later than the first day of instruction for the term when they first enroll.

B. Booster

B. 
All Covered Individuals must: (i) receive Vaccine Education concerning COVID-19 and CDC-recommended boosters as a preventive measure; and (ii) receive the most recent CDC-recommended booster or affirmatively decline doing so. Covered Individuals will be required to certify or document that they are Up-To-Date (or affirmatively decline the recommended boosters, if eligible) at least once each year, in a form and as of a date set by the location. Locations may set different dates for different groups of individuals. Student employees are subject to the deadlines applicable to students.

Those who choose to decline to receive the most recent CDC-recommended booster must complete a Vaccine Declination Statement provided by their Location on or before the applicable Compliance Date.

Those who are not Up-to-Date must observe any additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals who initially decline a booster but later decide to receive a booster may receive the booster through on-site or off-site providers at any time and may notify the LVA.

The COVID-19 vaccination requirement applies to UC employees who Physically Access the University’s Locations/Facilities or University Programs in connection with their employment or appointment. As a condition of Physical Presence at a University Location/Facility or in a University Program, all of these UC employees must provide proof of receiving all CDC- or CDPH-recommended boosters when eligible or submit a request for an Exception within the timeframe required by the location. See COVID-19 Vaccination Program FAQ #1 and FAQ #2 for additional details on booster requirements, including CDC recommendations.

For employees who are subject to the CDPH order, compliance with that order is also a condition of Physical Presence at any UC health care facility. (See Exhibit 1, Sections II.D and V.) For these employees, the University’s COVID-19 vaccination requirement that employees receive the most recent all CDC- or CDPH-recommended boosters at least once a year when eligible includes compliance with the order’s booster requirements.

Covered Individuals who are student employees must provide proof of receiving all CDC- or CDPH-recommended boosters when eligible or submit a request for an Exception within the timeframe required by the location for students.

If an employee completes the Primary Series but is not yet eligible for a CDC- or CDPH-recommended booster, they will be considered Up-To-Date with their Vaccines when two weeks have passed since they completed the Primary Series (for example, 1 dose of the Johnson & Johnson Vaccine or 2 doses within no more than 12 weeks of the Moderna or Pfizer Vaccine). They will continue to be considered Up-To-Date with their Vaccines so long as they then receive all CDC- or CDPH-recommended boosters when eligible. If they do not
receive a CDC–or CDPH-recommended booster when eligible, they will no longer be Up-To-Date with their Vaccines when the deadline for booster compliance at their location lapses.

C. New Employees

Covered Individuals subject to the CDPH order must be in compliance with the CDPH order as of their start date. See COVID-19 Vaccination Program FAQ #107 for additional information about these compliance requirements.

Consistent with the requirement for students, Covered Individuals who are student employees must provide proof of having completed the Primary Series (including the two-week period following the final shot of the Primary Series) or, if applicable, submit a request for Exception no later than the first day of instruction for the term when they first enroll. Covered Individuals who are student employees must also comply with the booster deadlines: provide proof of receiving all CDC– or CDPH-recommended boosters when eligible or submit a request for an Exception within the timeframe required by the location for students.

All other Covered Individuals hired on or after October 20, 2021 (who are not subject to the CDPH order and who are not student employees) must do one of the following no later than 14 calendar days after their first date of employment: (a) submit proof that they have received at least one dose of a COVID-19 Vaccine; or (b) if applicable, submit a request for an Exception.

If an employee submits proof that they have received at least one dose of a COVID-19 Vaccine but they have not yet completed the Primary Series, they must submit proof of having completed the Primary Series no later than 120 weeks after their first date of employment and must then submit proof of having received all CDC– or CDPH-recommended boosters, once eligible, within the timeframe required by the location.

After providing proof of completing the Primary Series, an employee must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by the location.

III. If an employee submits proof of completing the Primary Series and is eligible for a CDC– or CDPH-recommended booster, the employee must submit proof of having received a booster within 28 days of their first date of employment. They must then submit proof of having received any additional CDC– or CDPH-recommended boosters, once eligible, within the timeframe required by the location.

IV. If an employee submits proof of completing the Primary Series but is not yet eligible for a CDC– or CDPH-recommended booster, they must submit proof of having received all CDC– or CDPH-recommended boosters, once eligible, within the timeframe required by the location.
V. PROOF OF VACCINATION MUST BE SUBMITTED PER LOCAL GUIDELINES AND COVID-19 VACCINATION PROGRAM REQUIREMENTS.

VI.III. REQUEST FOR EXCEPTION

An employee seeking an Exception must, no later than the applicable Compliance Date for the Primary Series or within the timeframe required by the location for the booster, submit their request to the Responsible Office described in Exhibit 1, Section II.A. While a request is pending and if it is granted, the employee must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and IV). Therefore, such Covered Individuals are not allowed to be Physically Present at any UC health care facility after the CDPH order’s applicable compliance deadline while their requests are pending.

A. Request Approved

If an Exception is granted, the issuing office must notify the employee and the Location Vaccine Authority of the approval and the associated expiration date, if any. The employee must, as a condition of Physical Presence, comply with NPIs defined by the Location.

B. Request for Exception to Primary Series Denied

If an employee has submitted a single request for an Exception that has been denied, or requests on more than one ground that have all been fully considered and denied, the employee (“Non-Excepted Employee” hereafter) will receive a Denial of Request for Exception.

1. Employee Chooses to Become Up-To-Date with their Vaccines

If the Non-Excepted Employee chooses to become Up-To-Date with their Vaccines and has not yet begun the Primary Series, they must provide proof that they have received their first shot within 14 calendar days of the date of denial of their Exception request for the Primary Series. This proof must include the date of the first shot. The employee must also submit proof that they have completed the Primary Series within 120 weeks of the date of that denial.

They must then provide proof of receiving or, if eligible, properly declining the most recent that they received all CDC- or CDPH-recommended boosters, once eligible, at least once a year within the timeframe required by the location.

If the Non-Excepted Employee has completed the Primary Series and is eligible for a CDC- or CDPH-recommended booster, they must provide proof that they received the booster within 14 calendar days of the date of the denial of their Exception request for the booster. They must then submit proof that they received any additional CDC- or CDPH-recommended boosters, once eligible, within the timeframe required by the location.

If the Non-Excepted Employee has completed the Primary Series and is not yet eligible for a CDC- or CDPH-recommended booster, they must provide proof that they received all CDC- or CDPH-recommended boosters, once eligible, within the timeframe required by the location.

Until the Non-Excepted Employee is Up-To-Date with their Vaccines, they must, as a condition of Physical Presence, comply with NPIs defined by the Location.
Notwithstanding the foregoing, employees subject to the CDPH order cannot be
Physically Present at any UC health care facility if they are not in compliance
with that order. (See Exhibit 1, Sections II.D and V).

2. Employee Chooses Not to Become Up-To-Date with their Vaccines

If the Non-Excepted Employee has not completed the Primary Series and
chooses not to receive their required shot(s) of the Primary Series within 14
calendar days of the date of denial of their Exception request for the Primary
Series, the applicable process begins at Section IV.A.

VII. IF THE NON-EXCEPTED EMPLOYEE HAS COMPLETED THE PRIMARY SERIES
AND CHOOSES NOT TO RECEIVE THEIR CDC-OR CDPH-RECOMMENDED
BOOSTER SHOT WITHIN 14 CALENDAR DAYS OF THE DATE OF DENIAL OF
THEIR EXCEPTION REQUEST FOR THE BOOSTER (OR, IF NOT YET ELIGIBLE
FOR A CDC-OR CDPH-RECOMMENDED BOOSTER, WITHIN THE TIMEFRAME
REQUIRED BY THE LOCATION), THE APPLICABLE PROCESS BEGINS AT
SECTION IV.B.

VIII.IV. EMPLOYEE NON-COMPLIANCE

A. Primary Series Requirement

1. First Notice of Non-Compliance (All Employees)

UC employees subject to this COVID-19 Vaccination Program who fail to provide
proof of receiving the Primary Series and who have not requested an Exception
by the applicable Compliance Date (or Non-Excepted Employees, who fail to
provide proof that they have received their required shot within the 14 calendar
days as described in Section III.B.2) will receive a First Notice of Non-
Compliance.

Once an employee has received a First Notice of Non-Compliance, they will
have three business days to provide proof of receiving the Primary Series or to
make a request for an Exception.

A Non-Excepted Employee will have three business days to provide proof that
they have received their required shot or, if applicable, make a new request for
an Exception.

UC employees hired on or after October 20, 2021 (other than those subject to
the CDPH order and student employees) who fail to provide proof of receiving at
least one dose of a COVID-19 Vaccine and who have not requested an
Exception within the initial 14-day compliance period, will receive the First Notice
of Non-Compliance on the 15th calendar day after their first date of
employment.¹ Once an employee hired on or after October 20, 2021 has
received a First Notice of Non-Compliance, they will have three business days to
provide proof of receiving at least one dose of a COVID-19 Vaccine or to make a
request for an Exception.

¹ The initial 14-day compliance period does not apply to employees subject to the CDPH order (Covered Individuals subject to that
order must be in compliance with the order as of their start date) or to student employees (consistent with the requirement for
students, Covered Individuals who are student employees must provide proof of having completed the Primary Series (including the
two-week period following the final shot of the Primary Series) or, if applicable, submit a request for Exception no later than the first
day of instruction for the term when they first enroll).
During these three business days, UC employees must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Section II.D and V).

If an employee has not responded within three business days and is a Non-Excepted Employee, the applicable process continues below at Section IV.A.3; for other employees, the applicable process continues below at Section IV.A.2.

2. Second Notice of Non-Compliance (Employees Other Than Non-Excepted Employees)

If, after receipt of the First Notice of Non-Compliance, the employee does not submit proof of receiving the Primary Series or make a request for an Exception within three business days, they will receive a Second Notice of Non-Compliance that requires them to submit proof that they have received their required shot within 14 calendar days of the date of the Second Notice of Non-Compliance. This proof must include the date of the required shot.

As described in Section IV.A.1, until the employee is Up-To-Date with their Vaccines, the employee must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).

The employee will have 120 weeks from the date of the Second Notice of Non-Compliance to complete the Primary Series.

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements.

3. Notice of Continued Non-Compliance

If an employee fails to submit proof of receipt of the Primary Series or make a request for an Exception within the period prescribed in the Second Notice (or the First Notice, if a Non-Excepted Employee), the employee will receive a Notice of Continued Non-Compliance stating that the Department will commence a period of progressive corrective action and/or discipline, up to and including termination/dismissal, against the employee.

If an employee hired on or after October 20, 2021 (who is not subject to the CDPH order and is not a student employee) fails to submit proof of receiving at least one dose of a COVID-19 Vaccine or make a request for an Exception within 14 calendar days of the date of the Second Notice, the employee will receive a Notice of Continued Non-Compliance stating that the Department will proceed toward termination/dismissal.

During the corrective action and/or discipline period, the employee will be permitted Physical Presence for up to six weeks (at the Location’s discretion) and must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).
The Chancellor or designee may choose to briefly extend the six-week period of Physical Presence for employees other than those subject to the CDPH order (see Exhibit 1, Sections II.D and V) for exceptional circumstances, including but not limited to:

- Providing for a non-compliant instructor to continue teaching or mentorship in the best interest of student learning;
- Providing for a non-compliant employee to continue work in order to avoid potential negative impacts on critical University operations due to unanticipated business requirements; or
- For other urgent requirements.

B. Booster Requirement

UC employees subject to the COVID-19 vaccination requirement who fail to provide proof of receiving a CDC- or CDPH-recommended booster when eligible and who have not requested an Exception by the applicable deadline (or Non-Excepted Employees, who fail to provide proof that they have received the booster within the deadline specified in Section III.B.2) will receive a First Notice of Non-Compliance.

Once an employee has received a First Notice of Non-Compliance, they will have three business days to provide proof of receiving the booster or, if applicable, to make a request for an Exception.

If an employee has not responded within three business days and is a Non-Excepted Employee, the applicable process proceeds with the Notice of Continued Non-Compliance; for other employees, the applicable process proceeds with the Second Notice of Non-Compliance.

If the employee does not submit proof or make a request for an Exception within three business days, they will receive a Second Notice of Non-Compliance that requires them to submit proof that they have received the booster within 14 calendar days of the date of the Second Notice of Non-Compliance.

If an employee fails to submit proof or make a request for an Exception within 14 calendar days of the date of the Second Notice (or the First Notice, if a Non-Excepted Employee), the employee will receive a Notice of Continued Non-Compliance stating that the Department will proceed toward corrective action and/or discipline, up to and including termination/dismissal.

After receiving a Notice of Continued Non-Compliance, the employee will be permitted Physical Presence for up to six weeks (at the Location’s discretion) and must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V.)

The Chancellor or designee may choose to briefly extend the six-week period of Physical Presence for employees other than those subject to the CDPH order (see Exhibit 1, Sections II.D and V) for exceptional circumstances,
including but not limited to:

• Providing for a non-compliant instructor to continue teaching or mentorship in the best interest of student learning;

• Providing for a non-compliant employee to continue work in order to avoid potential negative impacts on critical University operations due to unanticipated business requirements; or

• For other urgent requirements.

Until the employee is Up-To-Date with their Vaccines, the employee must, as a condition of Physical Presence, comply with NPIs defined by the Location throughout this process. Notwithstanding the foregoing, Covered Individuals subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).

C.B.  Corrective Action and/or Discipline

Any corrective action and/or discipline, up to and including termination/dismissal, taken as a result of employee non-compliance will be consistent with the policies or collective bargaining provisions applicable to the specific employee population.

If an employee chooses to receive their required shot in the Primary Series after receiving the Notice of Continued Non-Compliance, the employee has up to 120 weeks to complete the Primary Series. During this time the corrective action and/or discipline process is paused. If the employee does not complete the Primary Series within 120 weeks, the corrective action and/or discipline process resumes.

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements.

1.  Policy-Covered Staff

For regular status employees in the Professional & Support Staff (PSS) personnel group, corrective action and/or discipline is taken in accordance with PPSM 62 (Corrective Action) and termination is taken in accordance with PPSM 64 (Termination and Job Abandonment).

Probationary career employees in the PSS personnel group may be released at any time in writing at the discretion of the University in accordance with PPSM 22 (Probationary Period).

For career employees in the Managers & Senior Professionals (MSP) personnel group refer to PPSM 64 (Termination and Job Abandonment), although non-compliant MSP employees will not be eligible for severance or any termination assistance under PPSM-64 section III.E.

For Senior Management Group (SMG) employees refer to PPSM II-64 (Termination of Appointment), although non-compliant SMG employees will not be eligible for financial assistance or any termination assistance under PPSM II-64 section III.C.

For employees in the PSS or MSP personnel groups who are not regular status
or career, refer to the specific appointment type in PPSM 3 (Types of Appointment).

2. Policy-Covered Academic Appointees

All members of the faculty are subject to the standards set forth in APM – 015 (The Faculty Code of Conduct).

For Senate Faculty, the administration of discipline is set forth in APM – 016 (University Policy on Faculty Conduct and the Administration of Discipline) in conjunction with Academic Senate Bylaw 336 Privilege and Tenure: Divisional Committees -- Disciplinary Cases concerning disciplinary hearings.

For all other non-Senate academic appointees, corrective action is taken in accordance with APM – 150 Corrective Action and Dismissal, which also provides for grievance mechanisms.

3. Represented Employees

Corrective action and/or discipline for represented employees is described in the employee’s applicable collective bargaining agreement.

IX.V. EXHIBIT 2 REVISION HISTORY

TBD 2023:

December 12, 2022: Revised language for consistency with changes to booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

Amended: September 16, 2022: Revised language based on the September 13, 2022 amendment to the August 5, 2021 California Department of Public Health order.

Amended: August 30, 2022:

• Converted from COVID-specific vaccine policy to Program Attachment.
• Extended deadline to receive Primary Series to permit longer interval period between doses in alignment with CDC guidance.
• Clarified corrective action/discipline language for policy-covered academic appointees.

Amended: March 9, 2022:

• Added language regarding the December 22, 2021 and February 22, 2022 amendments to the August 5, 2021 California Department of Public Health order.
• Added language to address non-compliance for employees hired on or after October 20, 2021.
• Added language regarding booster requirement for employees who are Covered Individuals.

Amended: September 16, 2021:
• Added language on deadline for providing proof of vaccination during a holiday/weekend.
• Clarified corrective action/discipline language;
• Added language regarding the August 5, 2021 California Department of Public Health order)

**Amended: August 11, 2021:**

• Added timeline for clarity.
• Updated language in sections IV.B, V.A and V.B for clarity.
• Added two additional examples in section V.D.
• Clarified corrective action/discipline for policy-covered staff.

**First Effective Date: July 20, 2021**
PROGRAM ATTACHMENT #2: Seasonal Influenza Vaccination Program

<table>
<thead>
<tr>
<th>Vaccine(s)</th>
<th>Targeted Disease or Condition</th>
</tr>
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<tbody>
<tr>
<td>See <a href="https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm">https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm</a> for details.</td>
<td>Seasonal Influenza</td>
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I. Purpose/Supporting Data:

According to the Centers for Disease Control & Prevention, vaccination against the seasonal respiratory disease influenza or “flu” has long been accepted as a safe and effective way to prevent millions of illnesses and thousands of related doctor and hospital visits every year. In recent years, flu vaccines have reduced the risk of flu-associated hospitalizations among older adults by about 40% on average. A 2018 study showed that from 2012 to 2015, flu vaccination among adults reduced the risk of being admitted to an intensive care unit (ICU) with flu by 82 percent. Flu vaccination has been associated with lower rates of some cardiac events among people with heart disease, especially among those who had had a cardiac event in the past year. It can mitigate against worsening and hospitalization for flu-related chronic lung disease. It has also been shown in separate studies to be associated with reduced hospitalizations among people with diabetes and chronic lung disease. A 2018 study that covered influenza seasons from 2010-2016 showed that getting a flu shot reduced a pregnant woman’s risk of being hospitalized with flu by an average of 40 percent. Flu vaccination has been shown in several studies to reduce severity of illness in people who become ill after they get vaccinated. For example, a 2017 study showed that flu vaccination reduced deaths, ICU admissions, ICU length of stay, and overall duration of hospitalization among hospitalized flu patients. A 2018 study showed that among adults hospitalized with flu, vaccinated patients were 59 percent less likely to be admitted to the ICU than those who had not been vaccinated. Among adults in the ICU with flu, vaccinated patients on average spent 4 fewer days in the hospital than those who were not vaccinated. Finally, by getting vaccinated, a person can protect those around them, including those who are more vulnerable to serious flu illness.

The CDC’s Advisory Committee on Immunization Practices (“ACIP”) issues recommendations regarding influenza specific to each flu season. For example, ACIP advised that the “2021-22 influenza season is expected to coincide with continued circulation of SARS-CoV-2, the virus that causes COVID-19. Influenza vaccination of persons aged ≥ 6 months to reduce prevalence of illness caused by influenza will reduce symptoms that might be confused with those of COVID-19. Prevention of and reduction in the severity of influenza illness and reduction of outpatient visits, hospitalizations, and intensive care unit admissions through influenza vaccination also could alleviate stress on the U.S. health care system.”

During the COVID-19 pandemic, where COVID-19, like influenza, results in respiratory symptoms, it is even more critical than usual to assure widespread vaccination. As California has lifted COVID-19 restrictions, outbreaks have followed and the possibility of a surge that overwhelms the health care system and causes hospitals to adopt crisis standards of care necessarily increases. Population-level interventions that decrease the likelihood of absenteeism, disease transmission, hospitalization, and ICU utilization must therefore be considered and adopted where feasible.
Refer to Section VII (Related Information) for additional information supporting implementation of this program, which is incorporated into this Program Attachment by reference.

For all of these reasons, the University has concluded that critical steps must be taken to reduce the likelihood of severe disease among students, faculty, and staff, and in turn to reduce the likelihood that our health systems will be overwhelmed.

II. **Compliance Date:** Annually, no later than December 1 or an earlier date set by an individual Location.

III. **Program Type:** ☐ Mandatory (Subject to Exceptions Marked Below) ☒ Opt-Out

On or before the Compliance Date, Covered Individuals must: (i) receive Vaccine Education concerning influenza and vaccination as a preventive measure; and (ii) receive or affirmatively decline influenza vaccination. Those who choose to decline influenza vaccination must complete a Vaccine Declination Statement provided by their Location on or before the Compliance Date. Covered Individuals who are not vaccinated must observe additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they interact. Covered Individuals who initially decline the influenza Vaccine but later decide to become vaccinated may receive the Vaccine through on-site or off-site providers at any time and may notify the LVA.

IV. **Evidence Required:** To be determined by the LVA.

V. **Non-Pharmaceutical Interventions (NPIs):**

All members of the Location’s community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing. Those who are not Up-To-Date on their Vaccines may be subject to NPIs above and beyond those who are.

VI. **Systemwide Implementation Guidelines:** ☐ Attached ☒ None

VII. **Related Information:**

- CDC, [Seasonal Influenza Vaccination Resources for Health Professionals](https://www.cdc.gov/vaccines/health-professionals/seasonal-influenza/index.html)
- CDPH, [Influenza (Flu) and Other Respiratory Diseases](https://www.cdph.ca.gov/Programs/IID/Flu/aboutflu.htm)

VIII. **Frequently Asked Questions:**

1. I am a new University of California employee. What is my deadline for complying with the Seasonal Influenza Vaccination Program?

   —Complying with the Seasonal Influenza Vaccination Program (“Flu Vaccination Program”) is a condition of employment, and all Covered Individuals must provide proof of being Up-To-Date on seasonal influenza vaccination or properly decline such vaccination by no later than the applicable deadline each year. If you are a Covered Individual, your first deadline to comply with the Flu Vaccination Program depends on
when your first date of employment is in relation to the flu season.

a) If your first date of employment with the University is during the flu season before the Compliance Date at your Location (i.e., December 1 or an earlier date set by your Location), then you must first comply with the Flu Vaccination Program by that Compliance Date. For example, if your first date of employment is November 1, 2022, and your Location has a Compliance Date of December 1, 2022, then you must first comply with the Flu Vaccination Program by December 1, 2022.

b) If your first date of employment with the University is on or after May 1 (or a different end date set by your Location), then you must first comply with the Flu Vaccination Program by your Location’s Compliance Date for the upcoming flu season. For example, if your first date of employment is May 2, 2023, and your Location is using May 1 as the end date, then you must first comply with the Flu Vaccination Program by your Location’s Compliance Date for the 2023-24 flu season.

c) If your first date of employment with the University is on or after the Compliance Date at your Location but before May 1 (or the different end date set by your Location), then you must first comply with the Flu Vaccination Program within 14 calendar days of your first date of employment. For example, if your first date of employment is December 2, 2022, then you must first comply with the Flu Vaccination Program by December 16, 2022.

All Covered Individuals must then comply with the Flu Vaccination Program annually by the Compliance Date set at their individual Locations.

IX. Model Forms and Exhibits: TBD[RESERVED]

X. Revision History:

**TBD 2023:**

August 30, 2022: Executive Order Converted to Program Attachment

October 8, 2021: Executive Order Issued Extending Program to all Campuses

September 29, 2020: Revised July 31, 2020 Executive Order

July 31, 2020: Executive Order Issued Extending Program to all Campuses

First Effective Date: Longstanding at UC Medical Centers
For questions regarding individual employee situations and this policy, please contact your location’s applicable office. For individual student questions related to the medical aspects of the policy, please contact your campus Student Health Services.

| Responsible Officers: | Provost & Executive Vice President for Academic Affairs (Campuses, ANR, Labs)  
|                       | Executive Vice President – University of California Health (UC Health)  
|                       | Executive Vice President and Chief Operating Officer (Campuses, ANR, Labs) |
| Responsible Offices:  | Academic Affairs  
|                       | University of California Health (UCH)  
|                       | University of California Operations (UCO) |
| Issuance Date:        | TBD 2023 |
| Effective Date:       | TBD 2023 |
| Last Review Date:     | TBD 2023 |
| Scope:                | All University of California locations and faculty, academic personnel, staff, trainees, students, and others accessing University facilities and programs. |

**Campus Contact:** UC Emergency Management  
**Health System Contact:** UC Health  
**Email:** VaccinePolicyComments@ucop.edu
I. POLICY SUMMARY

The purpose of this policy is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel and all others who work, live, and/or learn in any of the University’s Locations or otherwise participate in person in University Programs.

The University strongly recommends that all members of the University community follow vaccine recommendations adopted by the U.S. Centers for Disease Control and Prevention (CDC) and the California Department of Public Health (CDPH) applicable to their age, medical condition, and other relevant indications.

In addition, this policy and its Program Attachments together provide for Vaccination Programs under which Covered Individuals are required, subject to limited Exceptions and associated Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines before Physically Accessing the University’s Locations or Programs.

II. DEFINITIONS

Compliance Date: The deadline for compliance with a Vaccination Program, as specified in the applicable Program Attachment. Unless otherwise specified in a Program Attachment, for new employees whose first date of employment is later, the deadline for initial vaccination is within 14 days of the first date of employment; for students starting or returning to campus after the Compliance Date, the deadline is the first date of instruction for the term when they first enroll. Student employees are subject to the deadlines applicable to students.

Contraindications and Precautions: A contraindication or precaution to a Vaccine recognized by the CDC, CDPH, or in the case of internationally administered Vaccines, the World Health Organization (WHO). Contraindications and Precautions are limited and do not include conditions that are unrelated to Vaccines or injectable therapies, such as food, pet, venom, or environmental allergies, or allergies to oral medications.

Covered Individuals: A Covered Individual includes anyone designated as Personnel or Students under this policy who Physically Access a University Facility or Program in connection with their employment, appointment, or education/training. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.
Covered Non-Affiliates: A Covered Non-Affiliate is a person who Physically Accesses a University Facility or Program as a Non-Affiliate (other than as an “official volunteer”) under the Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California. For purposes of this policy, “Covered Non-Affiliates” also includes K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non degree-granting educational programs, professional development, and/or recreational programs. Refer to section III.B of this policy for additional information regarding Covered Non-Affiliates.

Deferral: A temporary delay of vaccination provided for in a Program Attachment based on a reason other than Medical Exemption, Disability, or Religious Objection. In the case of a Vaccine authorized for emergency use or recently approved, a Program Attachment may provide for Deferral based on pregnancy. In the case of a Vaccine for a disease where evidence suggests that contracting the illness or receiving treatment for the disease provides temporary protection, a Program Attachment may provide for Deferral based on recent illness or treatment.

Disability: A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.

Exception: In the context of a Mandate Program, an Exception is an approval issued by an authorized University official for a Covered Individual to not receive an otherwise required vaccination. Depending on the situation, Exceptions may be premised on Medical Exemption, Disability, and/or Religious Objection. In appropriate circumstances, Deferrals may be approved. In the context of an Opt-Out Program, an Exception may be premised on a Covered Individual’s informed decision to decline Vaccine, with appropriate notification to the Location Vaccine Authority or designee.

Healthcare Location: A collection of buildings and Personnel that service an academic health system or student health or counseling center including hospitals, ambulatory surgery centers, outpatient centers, clinics, or other locations where preventive, diagnostic, therapeutic, or other interventional physical or behavioral healthcare services are provided to UC Health patients, students, employees, or research participants and any associated educational, research, or administrative facilities and offices. A Healthcare Location refers only to that part of a campus that meets this definition.

Location (or Facility): Any United States campus, medical center, or facility operated by the University in connection with its research, teaching, or public service (including clinical care) missions or programs, including University housing. A Location does not include a University-owned property that is leased to a third party unless (and only to the extent) a University Program occurs at that property.

Location Vaccine Authority (LVA): The office or person responsible for implementing the requirements set forth in a Program Attachment for a Location, typically the Chief Medical Officer or Occupational Health office at a Medical Center or an Occupational Health or Student Health office at an academic campus. The LVA is a health care provider and its records are considered confidential health records for purposes of the University’s privacy policies.
Mandate Program: A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines unless they have received a University-approved Exception.

Medical Exemption: An excuse from receiving an otherwise required Vaccine due to a medical Contraindication or Precaution for each Vaccine that would satisfy the vaccination requirement.

Non-Pharmaceutical Intervention (NPI): An action, other than getting vaccinated or taking medicine, that members of the University community can take to help prevent or slow the spread of contagious illnesses. NPIs may include, for example, staying home, especially when a person is sick or when a member of the person’s family or household is sick; quarantining when an unvaccinated person has been exposed to someone else with the illness; avoiding large gatherings; physical/social distancing; wearing personal protective equipment or face coverings; frequent handwashing and cleaning; and asymptomatic (surveillance) and symptomatic testing.

Opt-Out Program: A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines or to formally decline vaccination by completing an opt-out form provided by their Location (a “Vaccine Declination Statement”) and submitting it to their Location Vaccine Authority on or before the Compliance Date.

Participation: Participation in a Vaccination Program as required by the applicable Program Attachment, which may include providing certification or proof of being Up-To-Date on vaccination or obtaining a University-approved Exception under this policy in a Mandate Program or properly declining vaccination in an Opt-Out Program. Participation in all Vaccination Programs applicable to a Covered Individual is a condition of Physical Presence at any University Location or Program as set forth in this policy. For Covered Individuals who must be vaccinated under this policy, Participation compliance may require repeat vaccinations or boosters on an annual or recurring basis consistent with U.S. Food and Drug Administration (FDA)-approved labeling and CDC or CDPH recommendations.

Personnel: University faculty, other academic appointees, and staff, including but not limited to visiting, volunteer, without salary, and emeritus/a professors, visiting or volunteer academic appointees, contract, recall, and emeritus/a employees. “Personnel” also includes, for purposes of this policy, official volunteers, as defined in the Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California, and participants in post-graduate training programs who are not Students.

Physical Access or Physical Presence (or Physically Access/Accessing or Physically Present): Physical presence at a University Location or Program for any work, research, or education/training related purpose (as distinguished from accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public). Physical presence includes living in housing furnished by the University, using University amenities such as entertainment venues, museums, libraries, workout facilities, or dining halls or food courts in one’s capacity as Personnel or a Student, or participating in person in a University Program even if not occurring at a Location. Access is not defined by reference to any particular frequency (e.g., daily, weekly, monthly, ad hoc).

Primary Series: The initial dose(s) of a given Vaccine as specified by CDC, CDPH, or in the case of internationally administered Vaccines, the WHO.
Program Attachment: An attachment describing a specific Vaccination Program, under which Covered Individuals are required, subject to limited Exceptions and associated Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines before Physically Accessing the University’s Locations or Programs.

Reasonable Accommodation: An adjustment made to the requirements of a Vaccination Program, including an adjustment for a Covered Individual who has received a University-approved Exception to allow them to be Physically Present without impairing the health and safety objectives of this policy. Covered Individuals with Exceptions may be required to observe specified NPIs as a condition of Physical Presence.

Religious Objection: A Covered Individual’s objection to receiving an otherwise required Vaccine based on that person’s sincerely held religious belief, practice, or observance.

Responsible Office: The office at a Location responsible for processing Exceptions.

Student: The term “Student” has the same meaning as defined in the current version of the Policies Applying to Campus Activities, Organizations and Students (PACAOSS) Section 14.40: an individual for whom the University maintains student records and who: (a) is enrolled in or registered with an academic program of the University; (b) has completed the immediately preceding term, is not presently enrolled, and is eligible for reenrollment; or (c) is on an approved educational leave or other approved leave status, or is on filing-fee status. For purposes of this policy, the term “Student” also includes visiting students.

Systemwide Vaccine Authority: The Systemwide Vaccine Authority is the Executive Vice President for UC Health or designee. A person is eligible to serve as the Systemwide Vaccine Authority if the person is Board-Certified in the subspecialty of Infectious Disease by an American Board of Medical Specialties or an American Osteopathic Association Specialty Certifying Board and maintains a faculty appointment that meets all of the good standing criteria established at that UC Location.

University or UC: The University of California.

University Program: A program or activity operated by the University to support the University’s teaching or research mission and generally offered exclusively to University Personnel or Students. Examples of covered Programs that may not be conducted at a Location include the UC Education Abroad Program and University-sponsored athletics programs.

Up-To-Date: A person is Up-To-Date with required Vaccines when they have received all doses in a Primary Series and the most recent booster recommended by the CDC or by CDPH. A person need not obtain boosters that are authorized but not explicitly recommended by CDC or CDPH in order to be considered Up-To-Date.

Vaccination Program: A set of rules governing Physical Presence at University Locations or in University Programs intended to reduce the incidence of Vaccine-preventable disease, disability, and death in connection with University Facilities or Programs. A Vaccination Program is either a Mandate Program or an Opt-Out Program.

Vaccine: A Vaccine satisfies the requirements of this policy if: (i) the FDA has issued a License or an Emergency Use Authorization (EUA) for the vaccine; or (ii) the WHO has approved Emergency Use Listing (EUL) for the vaccine. If approved by LVA and consistent with any applicable public health mandates, a vaccine administered during a clinical trial but not yet approved, licensed, or authorized may also satisfy the requirements of this policy.
Vaccine Education: Vaccine Education is communication of the following information about a Vaccine-preventable illness through any combination of Vaccine Information Statements, other written information, verbal communications, or online or in-person training programs, as required by the LVA.

1. The potential health consequences of Vaccine-preventable illness for Covered Individuals, family members and other contacts, coworkers, patients, and the community;
2. Occupational exposure to Vaccine-preventable disease;
3. The epidemiology and modes of transmission, diagnosis, and NPIs, consistent with the Covered Individual’s level of responsibility in preventing Vaccine-preventable infections;
4. The potential benefits of vaccination; and
5. The safety profile and risks of the Vaccine.

Vaccine Information Statement (“VIS”): An information sheet produced by or including information derived from the CDC, CDPH, and/or UC Health or any of its components, explaining in plain language the benefits and risks of a Vaccine to Vaccine recipients. A VIS generally must be provided to an individual being vaccinated prior to each dose of the Vaccine, in a language they understand. For purposes of this policy, a VIS may also include FDA fact sheets for Vaccine recipients and caregivers.

III. POLICY TEXT

This policy supplements, and does not replace, any policies or guidelines requiring University Personnel, Students, patients, and visitors to observe Non-Pharmaceutical Interventions (NPIs).

A. Vaccination Program. As a condition of Physical Presence at a Location or in a University Program, all Covered Individuals must Participate in any applicable Vaccination Program as described in a Program Attachment by providing proof that they are Up-To-Date with any required Vaccines or submitting a request for Exception in a Mandate Program or properly declining vaccination in an Opt-Out Program no later than the Compliance Date. This requirement may be subject to implementation guidelines and any local procedures for enforcement. The availability of alternative remote work arrangements will depend on systemwide guidance and any local policies or procedures, as well as the nature of the work to be performed.

1. Access to Vaccination. All campuses and medical centers must offer any required vaccination on-site or maintain a list of nearby and accessible off-site locations offering vaccination to Covered Individuals during working and non-working hours. This provision is not intended to restrict a Covered Individual’s choice of provider, but to maximize their access to vaccination.

2. Proof of Vaccination or Exception
   a. Mandate Programs. Covered Individuals must be Up-To-Date on mandated Vaccines or timely secure a University-approved Exception. They also may be required to submit proof or certification of their vaccination or of a University-approved Exception to their Location Vaccine Authority (LVA), if and as specified
in a Program Attachment. Proof or certification of vaccination may be subject to audit.

b. **Opt-Out Programs.** Covered Individuals must be Up-To-Date on Vaccines or receive Vaccine Education and timely complete and submit a Vaccine Declination Statement to their LVA for each applicable Vaccine. They also may be required to submit proof or certification of their vaccination to their LVA, if and as specified in a Program Attachment. Proof or certification of vaccination may be subject to audit.

3. **Request for Exception.** A Covered Individual seeking an Exception in a Mandate Program must, no later than the relevant Vaccine’s Compliance Date, submit their request to the appropriate Responsible Office. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe any NPIs as defined by the LVA and no less stringent than applicable public health directives. If an Exception is granted, the issuing office must notify the Covered Individual and the LVA of the approval and the associated expiration date, if any. If an Exception request is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly become Up-To-Date or will be denied Physical Presence at the relevant University Location(s) or Program(s).

4. **Education.** Any Covered Individual who has not provided proof that they are Up-To-Date on all applicable Vaccines by the specified Compliance Date will receive from the LVA or designee Vaccine Education. This educational requirement is not an alternative to required Participation in a Vaccination Program as a condition of Physical Presence at a University Location or Program as set forth above. Additional education may be required consistent with applicable federal, state, or local mandates or accreditation standards.

5. **Non-Pharmaceutical Interventions (NPIs).** All Covered Individuals must participate in any NPIs as specified by the relevant University Location or Program. In the event of a disease outbreak, Covered Individuals and Covered Non-Affiliates who are not Up-To-Date on the relevant Vaccine may be excluded from the Location or site of the outbreak.

6. **Optional Additional Measures.** Covered Individuals may wear masks or face coverings even if they are Up-To-Date on all relevant Vaccines and no mask/face covering mandate is in effect.

B. **Covered Non-Affiliates.** Each University Location and Program will define any requirements for public or other Covered Non-Affiliate Physical Presence (for example, at health facilities, entertainment venues, museums, libraries, workout facilities, dining halls and food courts, day care centers, or camps), no less stringent than applicable public health guidance.

C. **Superseding Public Health Directives.** A federal, state, or local public health agency with jurisdiction may impose a more restrictive/protective vaccine and/or NPI requirement that lawfully supersedes this policy. In the event of a perceived conflict between public health requirements and this Policy, UC Legal should be consulted.

D. **Tracking and Reporting**

1. **Vaccination Data.** The LVA or designee may be required to record and track certain information regarding vaccination in a Covered Individual’s confidential health record,
consistent with University privacy and security policies including BFB-IS-3 (Electronic Information Security Policy). Such information may include, but not be limited to: (i) proof or certification of vaccination; (ii) date(s) of administration and Vaccine type and manufacturer; and (iii) documentation of an Exception.

2. Vaccines Administered by the University
   a. Registries. For all vaccinations administered by the University in its capacity as health care provider, appropriate information will be submitted to the California Immunization Registry (CAIR) or such other registries as may be required by applicable public health agencies or University policy. While Vaccine recipients ordinarily are permitted to opt out from registry reporting in California, the California Department of Public Health (CDPH) may, in some cases, mandate that all participating vaccinators report certain vaccinations. Accordingly, the typical opt-out option may not apply.
   b. Adverse Events. Any adverse events associated with a required Vaccine administered at a Location and reported to the University must be tracked and logged by the LVA or designee and reported to federal and state public health officials using the Vaccine Adverse Event Reporting System (VAERS).

E. Program Evaluation. Locations are encouraged and, through a Program Attachment may be required, to evaluate Program Participation on an annual and ongoing basis, including evaluation of equity in Program implementation; reasons identified for non-Participation or untimely Participation; the number and population-level characteristics of Covered Individuals who are not vaccinated; and community outcomes.

IV. COMPLIANCE/RESPONSIBILITIES
   A. CDC and FDA generally translate VIS into many languages commonly spoken in California and elsewhere in the United States and post these online. Whenever the University is administering a Vaccine in its capacity as health care provider, the relevant VIS should be provided to a person receiving Vaccine in a language that they understand. In the unlikely event relevant VIS translations are unavailable, they should be accompanied when distributed with a document with taglines such as those approved by the U.S. Department of Health & Human Services to facilitate language access by all affected Personnel and Students. Interpreters should also be made available in person, by video, or by phone during Vaccine clinics.
   B. Each Location is responsible for: (i) assuring any necessary updates are made to its local Infectious Diseases/Infection Prevention and Control Programs; (ii) establishing Compliance Dates on an annual or ongoing basis, in consultation with epidemiology and infection prevention experts and occupational health representatives as applicable and consistent with any supply limitations; and (iii) assuring implementation of each Vaccination Program at all sites.
   1. Implementation includes informing Personnel and Students (as well as Covered Non-Affiliates, as applicable) of (i) any Vaccine requirements and associated Compliance Dates; (ii) dates and Locations for on-site administration (if any); and (iii)) for required Vaccines, that vaccination will be provided at no out-of-pocket cost to them if they receive the Vaccine from the University.
University of California – Policy on Vaccination Programs

2. Each Location should implement reasonable strategies for Vaccine access, including efforts to ensure vaccination availability during all work shifts and to address Vaccine hesitancy, particularly among groups at most significant risk for contracting Vaccine-preventable disease and suffering severe illness.

C. Chancellors, Laboratory Directors, and the Vice President–Agriculture and Natural Resources (ANR) are responsible for implementing this policy. Deans, Department Chairs, unit heads, managers, supervisors, student affairs leaders, and others with responsibility for personnel or student management will support Vaccination Program implementation and enforcement. Consultation with Academic Senate leaders, especially on the campus, is encouraged with respect to implementation procedures for academic appointees.

V. PROCEDURES

Implementation guidelines for this policy may be included in the applicable Program Attachment. Each Location may establish local procedures consistent with those guidelines to facilitate implementation of this policy and the applicable Vaccination Program.

VI. RELATED INFORMATION

- CDC Advisory Committee on Immunization Practices
- CDC Immunization Schedules
- Cal. Health & Safety Code Division 2, Chapter 2, Article 3.5
- California Department of Public Health, Licensees Authorized to Administer Vaccines in California
- Infectious Disease Society of America, Guidelines
- American Academy of Pediatrics, Immunizations
- American College of Physicians, Adult Immunization Hub
- American Medical Association, Opinion 8.7, Routine Universal Immunization of Physicians

VII. FREQUENTLY ASKED QUESTIONS

1. Some Program Attachments both encourage and require members of the University community to be vaccinated. Which is it?

   This policy strongly encourages all members of the University community to follow vaccine recommendations adopted by the CDC and CDPH. Only Covered Individuals are required to Participate in a Vaccination Program by staying Up-To-Date on required Vaccines or receiving a University-approved Exception in a Mandate Program or properly declining vaccination in an Opt-Out Program. (University Locations and Programs will define any requirements for Covered Non-Affiliates.) For certain Covered Individuals, such as health care workers, CDPH or local public health orders may be more restrictive than this policy and the applicable Program Attachment. In those cases, the more restrictive public health order will apply in addition to any other requirements.
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under this policy and the applicable Program Attachment.

2. **Am I required to be vaccinated to attend school?**

   **For Mandate Programs:** Covered Individuals must receive any required Vaccine as a condition to Physical Presence at Locations and in University Programs, unless they have been granted an Exception.

   **For Opt-Out Programs:** Covered Individuals must receive required Vaccines or receive Vaccine Education and submit a Vaccine Declination Statement to the Location Vaccine Authority as a condition to Physical Presence at Locations and in University Programs.

   Covered Individuals who receive an Exception or opt out may be subject to special NPIs.

3. **Does this policy apply to union-represented employees?**

   Yes, in accordance with any applicable collective bargaining requirements.

4. **How will I know if my co-workers or fellow Students are going unvaccinated?**

   You probably won’t know. Because vaccination-related information is private and confidential, the University will not disclose Vaccine status of Covered Individuals except on a need-to-know basis; however, third parties and some Locations may distribute badge attachments, stickers, pins, or other indicators that vaccinated individuals may use to show that they have received the Vaccine.

5. **I teach both seminar and lecture classes, and as a result am typically exposed to many students. Will I be informed if someone in my class is not vaccinated?**

   As will be the case in any public setting, you will not be informed of the vaccination status of individual students and should expect that some may not be vaccinated.

6. **Will University of California Health specify which authorized or licensed Vaccine is preferred when more than one is available to prevent a Vaccine-preventable disease?**

   No.

7. **Will Locations provide paid time off for non-exempt employees for the time needed to get vaccinated as required in a Program Attachment?**

   Yes. Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of Vaccine required to stay Up-To-Date. These employees and academic appointees must provide advance notice to their supervisor.

8. **What if I experience flu-like symptoms or other side effects as a result of a Vaccine that mean I cannot work as scheduled, or attend classes?**

   Employees should contact their supervisors, local human resources, or academic personnel offices with questions but as a general matter, accrued sick leave, vacation, and/or PTO may be used to take time off as needed to recover. Students should contact their faculty/instructors regarding minor illnesses or disability services to address any significant issues.

9. **If I have applied for or been granted an Exception in a Mandate Program or if I have opted out of vaccination in an Opt-Out Program, what Non-Pharmaceutical Interventions (NPIs) will I be required to observe?**

   A Program Attachment may describe any required NPIs. Additional safety measures may
be deemed necessary, depending on the circumstances, by local public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. In that case, you will be informed of any additional requirements.

10. **Who will pay for the Vaccine?**

All of the University’s health plans cover CDC-recommended Vaccines administered by an employee’s primary care physician or at a local pharmacy.

11. **How will enforcement work for failure to participate in a Vaccination Program?**

Efforts will be made to encourage Participation prior to the Compliance Date. Special requirements related to compliance for Personnel and Students may be addressed in Program Attachments. Those who fail to Participate by being Up-To-Date on vaccination or, as applicable, requesting an Exception (for Mandate Programs) or submitting a Vaccine Declination Statement (for Opt-Out Programs) on or before the Compliance Date will be barred from Physical Presence at University Facilities and Programs, and may experience consequences as a result of non-Participation, up to and including termination or dismissal.

12. **I am at high risk for severe illness if I contract a Vaccine-preventable disease (e.g., immunocompromised) and even though I have been vaccinated, I know that no Vaccine is 100% effective. Do I have to come to work if my co-workers or Students are not all vaccinated? What accommodations will be made for me?**

Please contact your local disability services office to discuss your situation and possible accommodations.

13. **Will the University accept internationally approved vaccines even if not authorized or approved in the United States?**

Yes, if the Vaccine is authorized by the [World Health Organization](https://www.who.int) (WHO). The WHO has developed a process for assessing and listing unlicensed vaccines, therapeutics, and diagnostics during public health emergencies. Through that process, a number of vaccines not available in the United States have received Emergency Use Listing (EUL). The University will, consistent with CDC and CDPH guidance, accept proof of vaccination with any internationally administered Vaccine that has been authorized for emergency use by WHO through the EUL process.

14. **I am fully remote. Am I a Covered Individual?**

You are a Covered Individual at the time you are first Physically Present at a University Location or Program other than as a member of the public (or as a Covered Non-Affiliate). Your Location may also treat you as a Covered Individual if you are authorized to be Physically Present in connection with your employment, appointment, or education or training program.

15. **Are trainees Covered Individuals under this policy?**

Yes, trainees may be Covered Individuals as either Students or Personnel depending on their circumstances.

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**VIII. REVISION HISTORY**
University of California – Policy on Vaccination Programs

TBD 2023:

December 12, 2022: This policy was updated with interim amendments. Minor technical edits were also made for clarity.

November 2, 2022: Technical edits to update the contact information.

August 30, 2022: This policy was updated with interim amendments effective September 1, 2022.

- Consolidated all existing vaccination requirements other than the Student Immunization Policy.
- Updated language consistent with current public health usage.
- Extended definition of Covered Non-Affiliate to include K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non degree-granting educational programs, professional development, and/or recreational programs.

July 15, 2021: Extended to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

January 15, 2021: Extended from UC Health to all Locations.

Initial issuance effective December 14, 2020.

This Policy is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.

IX. APPENDICES AND PROGRAM ATTACHMENTS

A. Appendices

1. CDPH Immunization Branch
2. CDC Vaccine Information Statements
3. Immunize.org Vaccine Information Statements

B. Program Attachments

1. SARS-CoV-2 (COVID-19) Vaccination Program
2. Seasonal Influenza Vaccination Program
PROGRAM ATTACHMENT #1: SARS-CoV-2 (COVID-19) Vaccination Program

<table>
<thead>
<tr>
<th>Vaccine(s)</th>
<th>Targeted Disease or Condition</th>
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<td>See <a href="https://extranet.who.int/pqweb/vaccines/vaccinescovid-19-vaccine-eul-issued">https://extranet.who.int/pqweb/vaccines/vaccinescovid-19-vaccine-eul-issued</a> for a list of vaccines with WHO Emergency Use Listing.</td>
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I. Purpose/Supporting Data

The purpose of this SARS-CoV-2 (COVID-19) Vaccination Program is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel, and all others who work, live, and/or learn in any of the University’s Locations or otherwise participate in person in University Programs. The University strongly recommends that all members of the University community obtain the COVID-19 vaccine as soon as they are eligible and remain Up-To-Date with boosters.

In addition, this COVID-19 Vaccination Program requires any Covered Individual, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to receive the Primary Series before Physically Accessing the University’s Locations and Programs and to receive or, if eligible, properly decline, boosters at least once a year.

Refer to Section VII (Related Information) for additional information supporting implementation of this program, which is incorporated into this Program Attachment by reference.

II. Compliance Date

A. Initial Implementation

The deadline for initial implementation of the COVID-19 Vaccination Program was two (2) weeks before the first day of instruction at any University campus or school for Fall 2021. For locations that do not operate on an academic calendar (e.g., UCOP, ANR, medical centers, national laboratories), the deadline was September 1, 2021.

B. Primary Series

1. For new Personnel whose first date of employment is after the deadline for initial implementation in Fall 2021, the Primary Series compliance deadline is no later than 12 weeks after the first date of employment. (See Exhibit 2, Section II.C. for details.)

2. For Students starting or returning to campus after Fall 2021, the deadline is the first day of instruction for the term when they first enroll. Student employees are subject to the deadlines applicable to students. Locations may specify additional deadlines.

C. Boosters
1. **Before Fall 2022.** All Covered Individuals who had not received a University-approved Exception were expected to be Up-To-Date with their Boosters.

2. **Beginning Fall 2022.** Covered Individuals will be required to certify or document that they are Up-To-Date (or affirmatively decline the recommended boosters, if eligible) at least once each year, in a form and as of a date set by the LVA. The LVA may use different forms and set different dates for different groups of Covered Individuals (e.g., Personnel and trainees, or Non-Healthcare Location and Healthcare Location) but all deadlines must be on or after July 1 and on or before December 31.

### III. Program Type:
- ☑ Primary Series – Mandatory (Subject to Exceptions Marked Below)
- ☑ Boosters – Opt-Out

#### A. Primary Series. All Covered Individuals must receive the Primary Series subject to the below permitted Exceptions and NPIs.

1. **Permitted Exceptions (Refer to Model Forms)**
   - ☑ Disability *(A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. “Disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is medically advisable.)*
   - ☑ Medical Exemption *(Medical Contraindications or Precautions to each Vaccine that would satisfy the vaccination requirement.)*
   - ☑ Religious Objection *(A Covered Individual’s objection to receiving an otherwise required Vaccine based on that person’s sincerely held religious belief, practice, or observance.)*
   - ☑ Temporary Deferral *(Temporary suspension of the Vaccine mandate for clinical reasons other than the above.)* Covered Individuals who are pregnant may seek a Deferral of the Primary Series mandate throughout their pregnancy. Covered Individuals who have had a diagnosis of COVID-19 or received treatment for COVID-19 within the last 90 days may defer Primary Series vaccination until 90 days have lapsed since the date of diagnosis or last date of treatment.

2. **Exception Requests**

   A Covered Individual seeking an Exception must, no later than the Compliance Date, submit their request to the appropriate Responsible Office. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe NPIs defined by the Location Vaccine Authority (LVA) no less stringent than applicable public health directives and any University or Location guidelines. If an Exception is granted, the issuing office must notify the Covered Individual and the LVA of the approval and the associated expiration date, if any. If a request for Exception is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly receive the Primary Series or will be denied Physical Presence at the relevant University Location(s) or Program(s).

#### B. Boosters
All Covered Individuals must: (i) receive Vaccine Education concerning COVID-19 and CDC-recommended boosters as a preventive measure; and (ii) receive the most recent CDC-recommended booster or affirmatively decline doing so.

Those who choose to decline to receive the most recent CDC-recommended booster must complete a Vaccine Declination Statement provided by their Location on or before the applicable Compliance Date.

Those who are not Up-To-Date must observe any additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals who wish to defer their boosters for 90 days, 180 days, or more may do so by opting out. Covered Individuals who initially decline a booster but later decide to receive a booster may receive the booster through on-site or off-site providers at any time and may notify the LVA.

IV. Evidence Required

A. Primary Series

Covered Individuals must submit proof of receiving the Primary Series or of a University-approved Exception to their LVA, by providing either: (i) in the case of one who has received the Primary Series, a copy of their CDC vaccination card (or foreign equivalent in the case of Covered Individuals who received their vaccinations abroad); official documentation issued by a State vaccine registry; or an official medical record; or (ii) in the case of one who has received a University-approved Exception, documentation that an Exception has been granted. Proof of vaccination and Exceptions may be subject to audit.

B. Boosters

1. Covered Individuals at Healthcare Locations

   a. Covered Individuals who Participate in the COVID-19 Vaccination Program by receiving the most recent CDC-recommended booster must submit proof that they received the booster by providing the LVA, within the timeframe set by the LVA, a copy of their CDC vaccination card (or foreign equivalent in the case of Covered Individuals who received their boosters abroad); official documentation issued by a State vaccine registry; or an official medical record.

   b. Those who are permitted under this COVID-19 Vaccination Program and applicable public health directives and applicable law to Participate by declining the most recent CDC-recommended booster must complete their Location’s Vaccine Declination Statement on or before the applicable Compliance Date.

   c. Those who are not permitted by applicable public health directives or applicable law to decline a booster but are eligible for an Exception that is both available for the Primary Series and permitted by applicable public health directives and applicable law must apply for the Exception on or before the applicable Compliance Date.

   d. Proof of vaccination may be subject to audit.
2. Covered Individuals at Other Locations

a. Covered Individuals who Participate in the COVID-19 Vaccination Program by receiving the most recent CDC-recommended booster must submit proof that they received the booster by providing the LVA, within the timeframe set by the LVA, any evidence required by their Location as determined by the LVA. The LVA may choose to permit certification or self-attestation as evidence of receiving the booster.

b. Those who are permitted under this COVID-19 Vaccination Program and consistent with public health directives and applicable law to Participate by declining the most recent CDC-recommended booster must complete their Location’s Vaccine Declination Statement on or before the applicable Compliance Date.

c. Those who are not permitted by applicable public health directives or applicable law to decline a booster but are eligible for an Exception that is both available for the Primary Series and permitted by applicable public health directives and applicable law must apply for the Exception on or before the applicable Compliance Date.

d. Proof of vaccination may be subject to audit.

V. Non-Pharmaceutical Interventions (NPIs)

All members of the Location’s community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.

Those who have not completed the Primary Series and/or who have not received the most recent CDC-recommended booster dose may be subject to NPIs above and beyond those who have.

VI. Systemwide Implementation Guidelines: ☒ Attached ☐ None

VII. Related Information

A. Current for Fall 2022

- CDC, Stay Up to Date with Vaccines
- CDC, COVID-19 Contraindications and Precautions
- CDC, New COVID-19 Vaccination Provider Trainings
- FDA, COVID-19 Vaccines (includes fact sheets and translations)
- CDC, COVID-19 Vaccination Clinical Resources for Each COVID-19 Vaccine
- CDC, COVID-19 Vaccination Program Operational Guidance, including Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States.
- CDC Advisory Committee on Immunization Practices, ACIP Immunization Schedule Vote (Oct. 20, 2022)
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- CDC Immunization Schedules
- CDC and Infectious Diseases Society of America, Vaccines & Immunity
- American Academy of Pediatrics, COVID-19 Vaccines in Infants, Children & Adolescents
- American College of Obstetricians and Gynecologists, COVID-19 Vaccination Considerations for Obstetric-Gynecologic Care
- American Society of Clinical Oncology, COVID-19 Provider & Practice Information
- American Society of Transplantation, COVID-19 Resources for Transplant Community
- Congregation for the Doctrine of the Faith, Note on the Morality of Using Some Anti-COVID-19 Vaccines (December 21, 2020)
- UC COVID-19 Vaccination Program Responsible Offices

B. Archived

- Advisory Committee on Immunization Practices – Ethical Principles for Allocating Initial Supplies of COVID-19 Vaccine – United States, 2020 (MMWR Nov. 23, 2020) and Meeting Information (November 23 and December 1, 2020)
- American College Health Association Recommends COVID-19 Vaccination Requirements for All On-Campus College Students in Fall 2021
- American College of Obstetricians and Gynecologists, COVID-19 Vaccination Considerations for Obstetric-Gynecologic Care (December 2020)
- Joint Statement in Support of COVID-19 Vaccine Mandates for All Workers in Health and Long-Term Care (2021)
- UC Health Coordinating Committee – Bioethics Working Group Vaccine Allocation Recommendations

VIII. Frequently Asked Questions

1. I recently had COVID-19. I’m willing to get a booster, but I want to delay the booster for 180 days, and I’m not a health care worker. Can I do that?

Yes. The University encourages all members of the community to stay Up-To-Date at all times. For most people, this means getting a booster within a few months of their COVID-19 diagnosis or treatment. A person who prefers to delay the booster for 180 days may do so by opting out and submitting their location’s vaccine declination statement, subject to masking or other NPIs required by their location. They can change their mind at any time and get boosted consistent with expert recommendations and product labeling.

If you are a health care worker subject to the California Department of Public Health (CDPH) order discussed in COVID-19 Vaccination Program FAQ #9, please refer to that FAQ for the booster compliance rules applicable to you.
2. **Why is the University continuing to mandate that Covered Individuals receive the Primary Series (or an Exception) at this point in the pandemic?**

   The University continues to evaluate the evidence for its Injury and Illness Prevention Programs, COVID-19 Prevention Programs, and other mitigation measures in response to COVID-19. Vaccine-induced immunity continues to play an important role in immune response to SARS-CoV-2, the virus that causes COVID-19. A patient’s degree of infection-induced immunity varies by disease severity, age, and underlying medical conditions, among other factors. The University will continue to review current evidence and evaluate the need for adjustments to the COVID-19 Vaccination Program accordingly.

3. **How do I know if I’m Up-To-Date? Specifically, how do I know what boosters are recommended for me or I am required to have?**

   The U.S. Centers for Disease Control and Prevention (CDC) maintains current guidance on recommended boosters. That guidance includes a tool to help individuals determine what boosters are recommended for them. The CDC maintains separate recommendations on its guidance website for individuals who received their Primary Series abroad.

   What boosters are required depend in part on who you are and where you work. Health care workers continue to be subject to the August 5, 2021 California Department of Public Health Order, as amended (on December 22, 2021, February 22, 2022, and September 13, 2022), which at the time of this writing requires health care workers subject to the order to receive the Primary Series and at least one booster, subject to limited exceptions and deferrals. (See FAQ #9.)

   Health care facilities, including clinics, must develop and implement processes to verify and maintain documentation of vaccination status of all health care workers and for obtaining and tracking documentation of certain testing.

4. **Why is UC now allowing Covered Individuals to “Opt Out” of Receiving Boosters?**

   The University strongly recommends that all members of the University community receive CDC-recommended COVID-19 boosters, and some Covered Individuals are required by applicable public health orders to receive certain boosters.

   At this point, however, a large proportion of the population has experienced COVID-19 since January 2022, and the University has concluded that the combination of Primary Series, earlier boosters, and naturally occurring immunity provides a large majority of the University community with adequate protection to reduce the public health risk faced during earlier stages of the pandemic. The University will continue to review current evidence and evaluate the need for adjustments to the COVID-19 Vaccination Program accordingly.

5. **Why is UC allowing Exceptions to the Primary Series for reasons other than**
Medical Exemption? If California can eliminate personal belief and religious exceptions for K-12 students, why can’t UC do the same?

The University is required by law to offer reasonable accommodations to individuals who qualify for an Exception to the Primary Series vaccination requirement based on their disability, as well as to employees who object to vaccination based on their sincerely-held religious belief, practice, or observance. A decision was made to adopt and implement a single uniform COVID-19 Vaccination Program consistently across all groups of Covered Individuals. Vaccination against the virus that causes COVID-19 is a critical step for protecting the health and safety of our communities.

6. **How do I apply for an Exception to the Primary Series?**

Covered Individuals who seek an Exception to the Primary Series must complete the request form provided by their Location and submit it to their Location’s applicable Responsible Office. Model Forms have been published in Section IX.A of this Program Attachment for adaptation or as-is use by each Location.

7. **I am pregnant. Will I be eligible for a Medical Exemption?**

No, you are not eligible for a Medical Exemption from the Primary Series vaccination requirement. But unless you work in a University health care facility, you are eligible for a Deferral of the Primary Series throughout your pregnancy until the time that you return to in-person work or instruction, as applicable, following pregnancy. If you have completed the Primary Series and are not required by California’s public health orders to have a booster, you may decline receiving recommended boosters.

You may also be eligible for a disability accommodation. It is important to understand, however, the additional risks you and your baby will be exposed to if you contract COVID-19 during pregnancy.

Information about these risks – including increased risk to the life of the mother and the health of the fetus – is posted on the CDC website. There is currently no evidence that any vaccines, including COVID-19 Vaccines, cause fertility problems. The American College of Obstetricians and Gynecologists (ACOG) recommends that all eligible individuals, including pregnant and lactating individuals, be vaccinated.

Note: Those who work in University health care facilities or clinics are subject to an order originally issued in 2021 by the California Department of Public Health that does not allow for deferrals based on pregnancy. These individuals therefore must receive the Primary Series and at least one booster, subject to limited exceptions and deferrals outlined in the order.

8. **I was recently diagnosed with COVID-19, and/or I had an antibody test that shows that I have natural immunity. Does this support a Medical Exemption?**

You may be eligible for a temporary Deferral of the Primary Series vaccination requirement for up to 90 days after your diagnosis or treatment. According to the US Food and Drug Administration, however, “at this time, antibody test results should not be used to decide if you need a COVID-19 vaccine or a vaccine booster, or to determine whether your vaccine worked” and “[a]ntibody tests do
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not tell you whether or not you can infect other people with SARS-CoV-2.” For this reason, individuals who have been diagnosed with COVID-19 or had an antibody test are not permanently exempt from Primary Series vaccination.

9. How do the California Department of Public Health (CDPH) orders and guidance regarding COVID-19 vaccination of health care workers affect Covered Individuals at the University’s medical centers, health professional schools, and clinics?

The August 5, 2021 CDPH order, as amended (on December 22, 2021, February 22, 2022, and September 13, 2022), requires that health care workers subject to the order have their first dose of a one-dose regimen or their second dose of a two-dose regimen for COVID-19 by September 30, 2021. It also requires that health care workers eligible for booster doses per the order to receive booster doses no later than March 1, 2022 and that health care workers not yet eligible for boosters be in compliance no later than 15 days after the CDPH's recommended timeframe for receiving the booster dose. (Note that the University’s COVID-19 Vaccination Program may have different timeframes and compliance deadlines that may also apply.) The CDPH order permits health care workers to decline these vaccination requirements on one of the limited grounds recognized by the order.

- Importantly, the CDPH order has fewer exceptions than the University’s COVID-19 Vaccination Program does. Specifically, Covered Individuals who work, train, or otherwise access any UC health care facilities – including medical centers, ambulatory surgery centers, Student Health Services, Counseling & Psychological Services, and other campus- and school-based medical and behavioral health clinics – may decline vaccination only based on “Qualifying Medical Reasons” or “Religious Beliefs” under the CDPH order. “Qualifying Medical Reasons” include only CDC-recognized contraindications and precautions, which corresponds with the University’s Policy on Vaccination Programs definition of Medical Exemption.

- Effective February 22, 2022, health care workers subject to the CDPH order who provide proof of COVID-19 infection after completion of the Primary Series may also defer booster administration for up to 90 days from the date of first positive test or clinical diagnosis. Health care workers with a Deferral due to proven COVID-19 infection must be in compliance with the booster requirement no later than 15 days after the expiration of their Deferral.

For these reasons, the University is unable to grant the following Exceptions to the Primary Series for health care workers subject to the CDPH order: (a) Deferrals based on COVID-19 diagnosis or COVID-19 treatment within the last 90 days (though health care workers may be eligible for a Medical Exemption if the treatment they received qualifies as a CDC-recognized contraindication or precaution), (b) Exceptions based on Disabilities that are not CDC-recognized contraindications or precautions, or (c) Deferrals based on pregnancy.

Similarly, the University is unable to permit health care workers subject to the order to decline the order’s booster requirement for any reason other than
Qualifying Medical Reasons or Religious Beliefs, and the University is unable to permit health care workers subject to the order to defer the order’s booster requirement for any reason other than COVID-19 diagnosis within the last 90 days. The CDPH order requires that any declination based on Qualifying Medical Reasons be supported by a written statement signed by a “physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician” (that is, a physician, a nurse practitioner or other advance practice nurse, or a physician’s assistant). The CDPH order also requires that health care workers seeking to defer booster administration due to recent COVID-19 diagnosis must provide documentation of previous diagnosis that includes date of infection from a health care provider or confirmed laboratory results.

Once a health care worker has received whatever boosters are required by the CDPH Order, they may decline additional boosters as permitted by this policy.

Covered Individuals should use the University’s Medical Exemption and/or Disability Exception Request form to decline any vaccines required by CDPH for Qualifying Medical Reasons.

Likewise, Covered Individuals should use the University’s Deferral Request Form to defer booster administration due to recent COVID-19 diagnosis, and Covered Individuals should use the University’s Religious Exception Request Form to decline the vaccine for Religious Beliefs under the CDPH order.

Additional information is available in the Health Care Worker Vaccine Requirement Q&A attached to the CDPH Order. The CDPH Order requires individuals who are exempt from its vaccination requirements to comply with Non-Pharmaceutical Interventions to help avoid preventable transmission of COVID-19.

10. How does the California Department of Public Health (CDPH) order discussed above impact Covered Individuals who are hired to work at UC health care facilities?

Covered Individuals hired to work at UC health care facilities (as described in FAQ #9) must be in compliance with the CDPH order as of their start date. To comply with the order, by their start date, they must either (a) have been vaccinated against COVID-19 (i.e., have received their first dose of a one dose regimen or their second dose of a two-dose regimen for COVID-19) and have received their COVID-19 vaccine booster dose if booster-eligible per the order (or be within the 15-day compliance period after becoming booster-eligible); or (b) meet the order’s requirements with regard to declining the vaccine based on “Religious Beliefs” or “Qualifying Medical Reasons” or deferring the booster based on COVID-19 diagnosis within the last 90 days. FAQ #9 addresses the order’s requirements with regard to declining or deferring the vaccine.

11. I am a new University of California employee. What is my deadline for complying with the COVID-19 Vaccination Program?

Complying with the COVID-19 Vaccination Program is a condition of employment. If you’re a Covered Individual, please refer to Exhibit 2, Section II.C. for the deadline applicable to you.
IX. Model Forms and Exhibits

A. Model Forms
1. Vaccine Declination Statement – Declination of COVID-19 Booster
2. Medical Exemption and/or Disability Exception Request Form
3. Religious Exception Request Form
4. Deferral Request Form
5. Approval of Request for Exception
6. Denial of Request for Exception
   Note: These model forms are provided for convenience only and may be adapted by locations consistent with applicable policies and practices.

B. Exhibits
1. Implementation Guidelines: Exceptions
2. Implementation Guidelines: Employee Compliance
3. Student Compliance (refer to [Student] Immunization Policy)

X. Revision History

TBD 2023:

December 12, 2022:

- Amended booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.
- Authorized Locations (other than Healthcare Locations) to permit self-attestation as evidence of receiving the booster.
- Clarified that booster compliance may be assessed annually between July and December, rather than at the moment an additional dose or booster is recommended.

August 30, 2022:

- Converted from COVID-specific vaccine policy to Program Attachment.
- Removed requirement that Healthcare Locations must evaluate Program Participation on an annual and ongoing basis.
- Extended compliance deadline for new employees to permit longer interval period between doses in alignment with CDC guidance.

July 15, 2021: Extended COVID-19 vaccine policy to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

January 15, 2021: Extended COVID-19 vaccine policy from UC Health to all Locations.


This Program Attachment is formatted to meet Web Content Accessibility Guidelines.
University of California – Policy on Vaccination Programs

(WCAG) 2.0.
UNIVERSITY OF CALIFORNIA
VACCINE DECLARATION STATEMENT – DECLINATION OF COVID-19 BOOSTER

The University of California strongly recommends that all members of the University community, except those who have had a severe allergic reaction to a previous dose of the COVID-19 vaccine or to any of its components, receive a vaccination to protect against COVID-19 disease as soon as they are eligible and get boosters as needed to stay Up-To-Date.

I am aware of the following facts:

- COVID-19 is a serious disease and has killed over 1 million people in the United States since February 2020, 100,000 in California alone.
- The COVID-19 vaccine is recommended for me and other members of the University community to protect our students, patients, faculty, and staff, and our families and communities, from COVID-19, its complications, and death.
- If I contract COVID-19, I can shed the virus for days even before any symptoms appear. During the time I shed the virus, I can transmit it to anyone I contact.
- If I become infected with SARS-CoV-2, the virus that causes COVID-19, even if my symptoms are mild or non-existent, I can spread the disease to others, and they can become seriously ill or die as a result.
- Nearly 1 in 5 American adults who have had COVID-19 is estimated to be suffering from "Long COVID" – symptoms that can last months or years after COVID-19 and can be debilitating.
- Contracting COVID-19 could have life-threatening consequences for my health and the health of everyone with whom I have contact, including my coworkers or peers and the most vulnerable members of our community.
- Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of COVID-19 vaccine required to stay Up-To-Date as explained in the UC Policy on Vaccination Programs.

Despite these facts, I am voluntarily choosing [LOCATION OPTION: “for this year”] to decline the most recent COVID-19 booster. My reason(s) for declining are as follows (answering this question is optional):

- [ ] medical contraindication
- [ ] disability
- [ ] religious objection
- [ ] concerned about risks of vaccine more than risks of disease
- [ ] want to delay but intend to get boosted
UNIVERSITY OF CALIFORNIA
VACCINE DECLINATION STATEMENT – DECLINATION OF COVID-19 BOOSTER

☐ other ____________________________________________

☐ prefer not to say.

I understand that I can change my mind at any time and accept the COVID-19 booster. I understand that as long as I am not Up-To-Date on COVID-19 boosters, I will be required to take precautionary measures as required by my location, such as wearing a mask and increased testing. [LOCATION OPTION: “I also will not receive a badge sticker showing that I have received the vaccine.”]

________________________________________________________________________

I have read the Vaccine Information Statement or Fact Sheet and the information on this Vaccine Declination Statement, and I have had a chance to ask questions.

NOTE: Health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement may not decline their first booster using this form.

Signature: _________________________________ Date: __________________________
This form should be used by University employees and students to request a Medical Exemption and/or Disability Exception to the COVID-19 Primary Series vaccination requirement in the University’s SARS-CoV-2 (COVID-19) Vaccination Program. This form should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) to request a Medical Exemption to the CDPH order’s booster requirement. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should instead use the Vaccine Declination Statement – Declination of COVID-19 Booster form.

Fill out Part A to request a Medical Exemption due to Contraindication or Precaution. Fill out Part B to request an Exception based on Disability. More than one section may be completed if applicable. Do not identify any diagnosis, disability, or other medical information. That information is not required to process your request.

Your request must be supported by a health care provider’s certification. Some local (city/county) public health departments have issued orders specifying that the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.

Part A: Request for Medical Exemption Due to Contraindication or Precaution

☐ I am requesting an Exception to the COVID-19 Primary Series vaccination requirement based on Medical Exemption. The Contraindications or Precautions to COVID-19 vaccination (recognized by the U.S. Centers for Disease Control and Prevention, the California Department of Public Health, or in the case of internationally administered vaccines, the World Health Organization) apply to me with respect to all available COVID-19 Vaccines.

☐ I am a health care worker subject to the CDPH order, and I am requesting an Exception to the COVID-19 booster vaccination requirement based on Medical Exemption. The Contraindications or Precautions to COVID-19 vaccination (recognized by the U.S. Centers for Disease Control and Prevention, the California Department of Public Health, or in the case of internationally administered vaccines, the World Health Organization) apply to me with respect to all available COVID-19 boosters.

My request is supported by the attached certification from my health care provider. For health care workers subject to the CDPH order, the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.

Part B: Request for Exception Based on Disability
☐ I have a Disability and am requesting an Exception to the COVID-19 Primary Series vaccination requirement as a Disability accommodation. Health care workers subject to the CDPH order are not eligible for this Exception. My request is supported by the attached certification from my health care provider.

Please provide any additional information that you think may be helpful in processing your request. Do not identify your diagnosis, disability, or other medical information.

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location. I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: ___________________________ Date: __________________

Date Received by University: __________ By: ________________________________
CERTIFICATION FROM HEALTH CARE PROVIDER

Your patient is a University of California employee and/or student who has requested an Exception to the University’s COVID-19 vaccination requirement based on (a) Medical Exemption due to a Contraindication or Precaution; and/or (b) Disability. Your patient is seeking to support their request for such an Exception with a certification from their qualified licensed health care provider.

<table>
<thead>
<tr>
<th>HEALTH CARE PROVIDER NAME</th>
<th>LICENSE TYPE, # AND ISSUING STATE</th>
</tr>
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<tbody>
<tr>
<td>FULL NAME OF PATIENT</td>
<td>DATE OF BIRTH OF PATIENT</td>
</tr>
<tr>
<td>PATIENT’S EMPLOYEE/STUDENT ID NUMBER</td>
<td>HEALTH CARE PROVIDER PHONE/EMAIL</td>
</tr>
<tr>
<td>PHYSICIAN SUPERVISOR AND LICENSE # (FOR A PHYSICIAN ASSISTANT WORKING UNDER A PHYSICIAN’S LICENSE)</td>
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Please note the following from the Genetic Information Nondiscrimination Act of 2008 (GINA), which applies to all University employees:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. “Genetic information,” as defined by GINA, includes an individual’s family medical history, the results of an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

Please complete Part A of this form if one or more of the Contraindications or Precautions to COVID-19 vaccination recognized by the U.S. Centers for Disease Control and Prevention (CDC), the California Department of Public Health (CDPH), or in the case of internationally administered vaccines, the World Health Organization (WHO), apply to this patient. Please complete Part B if this patient has a Disability, as defined below, that makes COVID-19 vaccination inadvisable in your professional opinion. More than one section may be completed if applicable to this patient.

**Important:** Do not identify the patient’s diagnosis, disability, or other medical information as this document will be returned to the University.

**Part A: Contraindication or Precaution to COVID-19 Vaccination**

- [ ] Primary Series. I certify that one or more of the Contraindications or Precautions (recognized by the CDC, the CDPH, or in the case of internationally administered vaccines, the WHO) for each of the currently available Vaccines used for the COVID-19 Primary Series applies to the patient listed above. For that reason, COVID-19 Primary Series vaccination using any of the currently available COVID-
19 Vaccines is inadvisable for this patient in my professional opinion. The
Contraindication(s) and/or Precaution(s) is/are: 🔺 Permanent 🔺 Temporary.
If temporary, the expected end date is: __________________.

☐ Booster. I certify that one or more of the Contraindications or Precautions
(recognized by the CDC, the CDPH, or in the case of internationally administered
vaccines, the WHO) for each of the currently available Vaccines used for COVID-
19 boosters applies to the patient listed above. For that reason, COVID-19 booster
vaccination using any of the currently available COVID-19 Vaccines is inadvisable
for this patient in my professional opinion. The Contraindication(s) and/or
Precaution(s) is/are: 🔺 Permanent 🔺 Temporary.
If temporary, the expected end date is: __________________.

Part B: Disability That Makes COVID-19 Primary Series Vaccination Inadvisable

“Disability” is defined as a physical or mental disorder or condition that limits a
major life activity and any other condition recognized as a disability under applicable law.
“Disability” includes pregnancy, childbirth, or a related medical condition where
reasonable accommodation is medically advisable.

☐ I certify that the patient listed above has a Disability, as defined above, that makes
COVID-19 Primary Series vaccination inadvisable in my professional opinion. The
patient’s disability is: 🔺 Permanent 🔺 Temporary.
If temporary, the expected end date is: __________________

______________________________  __________________________
Signature of Health Care Provider  Date
This form should be used by University employees and students to request a Religious Exception to the COVID-19 Primary Series vaccination requirement in the University’s SARS-CoV-2 (COVID-19) Vaccination Program. It should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) to request a Religious Exception to the CDPH order’s booster requirement. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should instead use the Vaccine Declination Statement – Declination of COVID-19 Booster form.

Please select as applicable:

☐ Based on my sincerely held religious belief, practice, or observance, I am requesting an Exception to the COVID-19 Primary Series vaccination requirement as a religious accommodation.

☐ I am a health care worker subject to the CDPH order, and based on my sincerely held religious belief, practice, or observance, I am requesting an Exception to the COVID-19 booster vaccination requirement as a religious accommodation.

Please identify your sincerely held religious belief, practice, or observance that is the basis for your request for an Exception as a religious accommodation.

____________________________________________________________________

Please briefly explain how your sincerely held religious belief, practice, or observance conflicts with the University’s COVID-19 vaccination requirement.

____________________________________________________________________

Please provide any additional information that you think may be helpful in processing your religious accommodation request.

____________________________________________________________________

Have you previously received any dose of a COVID-19 vaccine?

☐ Yes  ☐ No

If you have previously received any dose of a COVID-19 vaccine, please also complete the following:
1. Please explain why your sincerely held religious belief, practice, or observance did not conflict with the previous dose(s) of the COVID-19 vaccine that you received.

2. Please provide a written statement from someone else confirming that you have a sincerely held religious belief, practice, or observance that conflicts with the CDPH order requirement to receive a COVID-19 booster. For example, you may provide a statement from your religious leader, a fellow congregant, or someone else who has personal knowledge of your sincerely held religious belief, practice, or observance. Please submit that statement with this request form and provide the following information regarding the author of the statement:

- Name and relationship to you:

- Basis of their knowledge regarding your sincerely held religious belief, practice, or observance:

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location.

I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: __________________________ Date: ________________

Date Received by University: ________________ By: __________________________
This form should be used by University employees and students to request a Deferral of the COVID-19 Primary Series vaccination requirement in the University’s SARS-CoV-2 Vaccination Program due to pregnancy or recent COVID-19 diagnosis or treatment.

It should also be used by health care workers subject to the California Department of Public Health’s Health Care Worker Vaccine Requirement (“CDPH order”) to request a Deferral of the CDPH order’s booster requirement due to recent COVID-19 diagnosis. Those who are permitted by University policy and applicable public health directives to decline COVID-19 boosters may defer booster administration by using the Vaccine Declination Statement – Declination of COVID-19 Booster form.

Fill out Part A to request a Deferral of the Primary Series due to pregnancy. Fill out Part B to request a Deferral due to COVID-19 diagnosis or treatment within the last 90 days. If you are filling out Part B, your request may need to be supported by a health care provider’s certification. Some local (city/county) public health departments have issued orders specifying that the certification must be signed by a physician, nurse practitioner, or other licensed medical professional practicing under the license of a physician.

**Part A: Request for Deferral of the Primary Series Due to Pregnancy**

- [ ] I am currently pregnant and am requesting a Deferral of the COVID-19 Primary Series vaccination requirement during my pregnancy. My anticipated due date is ________________. Health care workers subject to the CDPH order are not eligible for Deferrals based on pregnancy.

**Part B: Request for Deferral Due to COVID-19 Diagnosis or Treatment**

Check all that apply:

- [ ] Primary Series. I am requesting a Deferral of the COVID-19 Primary Series vaccination requirement because I have been diagnosed with COVID-19 within the last 90 days. Health care workers subject to the CDPH order are not eligible for this Deferral. My request is supported by the attached confirmed laboratory results or certification from my health care provider.

- [ ] Primary Series. I am requesting a Deferral to the COVID-19 Primary Series vaccination requirement because I have been treated for COVID-19 within the last 90 days. Health care workers subject to the CDPH order are not eligible for this Deferral. My request is supported by the attached certification from my health care provider.
Booster. I am a health care worker subject to the CDPH order, and I am requesting a Deferral to the COVID-19 booster vaccination requirement because I have been diagnosed with COVID-19 within the last 90 days. My request is supported by the attached certification from my health care provider.

While my request is pending and if it is approved, I understand that I must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination as a condition of my Physical Presence at any University Location/Facility or Program. I also understand that I must comply with any additional Non-Pharmaceutical Interventions applicable to my position, as required by my Location.

I verify the truth and accuracy of the statements in this request form.

Employee/Student Signature: ____________________________ Date: _______________

Date Received by University: _______________ By: ___________________________
CERTIFICATION FROM HEALTH CARE PROVIDER

Your patient is a University of California employee and/or student who has requested a Deferral of the University’s COVID-19 vaccination requirement based on COVID-19 diagnosis or treatment within the last 90 days. Your patient is seeking to support their request for such a Deferral with a certification from their qualified licensed health care provider.

Please note the following from the Genetic Information Nondiscrimination Act of 2008 (GINA), which applies to all University employees:

The Genetic Information Nondiscrimination Act of 2008 (GINA) prohibits employers and other entities covered by GINA Title II from requesting or requiring genetic information of an individual or family member of the individual, except as specifically allowed by this law. To comply with this law, we are asking that you not provide any genetic information when responding to this request for medical information. “Genetic information,” as defined by GINA, includes an individual’s family medical history, the results of an individual’s or family member’s genetic tests, the fact that an individual or an individual’s family member sought or received genetic services, and genetic information of a fetus carried by an individual or an individual’s family member or an embryo lawfully held by an individual or family member receiving assistive reproductive services.

Please complete the following. Important: Other than COVID-19 diagnosis, do not identify the patient’s diagnosis, disability, or other medical information as this document will be returned to the University.

☐ I certify that my patient has been diagnosed with COVID-19 within the last 90 days. My patient’s COVID-19 diagnosis was on __________________.

☐ I certify that my patient has been treated for COVID-19 within the last 90 days. My patient’s last day of COVID-19 treatment was on _________________.

☐ I certify that my patient is being actively treated for COVID-19. The expected end date of treatment is: ___________________.

__________________________________________________________
Signature of Health Care Provider

__________________________________________________________
Date
On __________, we received your request for the following Exception in connection with the COVID-19 vaccination requirement in the University’s SARS-CoV-2 Vaccination Program:

- □ Exception to Primary Series based on Medical Exemption due to Contraindication or Precaution
- □ Exception to Booster based on Medical Exemption due to Contraindication or Precaution (Health Care Workers Only)
- □ Exception to Primary Series based on Disability
- □ Exception to Primary Series based on Religious Objection
- □ Exception to Booster based on Religious Objection (Health Care Workers Only)
- □ Exception to Primary Series based on Deferral due to Pregnancy
- □ Exception to Primary Series based on Deferral due to COVID-19 Diagnosis and/or Treatment
- □ Exception to Booster based on Deferral due to COVID-19 Diagnosis (Health Care Workers Only)

For Exceptions to Primary Series other than Deferrals due to Pregnancy:

Based on the information you have provided, your request for Exception to the Primary Series has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid

- □ until __________.
- □ indefinitely.

If your approval has an end date and you no longer need an Exception, you will be subject to the following deadlines as applicable.

- If you have not completed the Primary Series when your approval expires, you will have until __________ (12 weeks after the end date) to submit proof that you have completed the Primary Series. You must then provide proof of receiving or, if eligible, properly declining the most recent CDC- recommended booster at least once a year within the timeframe required by your location.

- If you have completed the Primary Series when your approval expires, you must then provide proof of receiving or, if eligible, properly declining the most...
recent CDC-recommended booster at least once a year within the timeframe required by your location.

- If you are a health care worker subject to the CDPH order, you may be subject to additional deadlines as required by your location.

☐ For Exceptions to Primary Series Based on Deferrals Due to Pregnancy:
   Based on the information you have provided, your request for Exception to the Primary Series based on Deferral due to pregnancy has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid until you return to work or instruction, as applicable. If you no longer need an Exception, you will be subject to the following deadlines as applicable.

   - If you have not completed the Primary Series when you return, you must submit proof that you have completed the Primary Series within 12 weeks of your return. You must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

   - If you have completed the Primary Series when you return, you must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

☐ For Exceptions to Boosters (Only Applicable to Health Care Workers Subject to the CDPH order):
   Based on the information you have provided, your request for Exception to the CDPH order’s booster requirement based on Medical Exemption due to Contraindication or Precaution, Religious Objection, or Deferral due to COVID-19 diagnosis has been APPROVED subject to the requirement that you comply with the Non-Pharmaceutical Interventions specified below. This approval is valid:

☐ until __________.
☐ indefinitely.

If your approval has an end date and you no longer need an Exception, you will be subject to the following deadlines as applicable.

- If you have an approved Deferral to the booster requirement due to recent COVID-19 diagnosis, you must receive a booster and submit proof of vaccination within 15 days of the Deferral’s end date.

- You must provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

- You may be subject to additional deadlines related to the CDPH order as required by your location.
As a condition of your Physical Presence at any University Location/Facility or Program, you must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date on COVID-19 vaccination. You must also comply with the following Non-Pharmaceutical Interventions applicable to your position (if any):

An employee’s failure to comply with the University’s SARS-CoV-2 Vaccination Program, including the required Non-Pharmaceutical Interventions, may result in corrective action and/or discipline up to and including termination/dismissal. A student’s failure to comply with the University’s SARS-CoV-2 Vaccination Program, including the required Non-Pharmaceutical Interventions, may result in consequences up to and including dismissal from educational programs.

If you have any questions or concerns regarding the above, please contact:

You are hereby informed of the risks of COVID-19 infection, including long-term disability and death, both for you and for others who you may expose to the disease.

Approved by: ____________________________ Date: ____________________________
(Signature of Issuer)
On ______, we received your request for the following Exception in connection with the COVID-19 vaccination requirement in the University’s SARS-CoV-2 Vaccination Program:

- Exception to Primary Series based on Medical Exemption due to Contraindication or Precaution
- Exception to Booster based on Medical Exemption due to Contraindication or Precaution
- Exception to Primary Series based on Disability
- Exception to Primary Series based on Religious Objection
- Exception to Booster based on Religious Objection
- Exception to Primary Series based on Deferral due to Pregnancy
- Exception to Primary Series based on Deferral due to COVID-19 Diagnosis and/or Treatment
- Exception to Booster based on Deferral due to COVID-19 Diagnosis

Your request has been DENIED based on the information we have received to date.

The reason for the denial is the following:

- You do not qualify for the Exception that you requested.
- You do not need an Exception to the COVID-19 booster requirement because the COVID-19 Vaccination Program allows you to affirmatively decline the most recent CDC-recommended booster. You must complete the Vaccine Declination Statement – Declination of COVID-19 Booster form within the timeframe required by your Location to decline to receive the most recent CDC-recommended booster. If you later become subject to a booster requirement and wish to request an Exception at that time, you will need to submit a new Exception request. (Note: The deadlines referenced below do not apply to you.)
- You are not a Covered Individual as defined by the Policy on Vaccination Programs. Accordingly, you do not need an Exception to the University’s
COVID-19 vaccination requirement at this time. If you later become a Covered Individual and wish to request an Exception at that time, you will need to submit a new request. (Note: The deadlines referenced below do not apply to you.)

Because your request for an Exception has been denied, you are subject to the following deadlines as applicable.

- If you have not completed the Primary Series as of the denial date below, you have until ____________ (14 calendar days from the denial date) to submit proof that you have received your first dose of a COVID-19 Vaccine. That proof must include the date that you received it. You then have until ____________ (12 weeks from the denial date) to submit proof that you have completed the Primary Series. You must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by your location.

- If you have completed the Primary Series as of the denial date below, you must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended boosters at least once a year within the timeframe required by your location.

- If you are a health care worker subject to the CDPH order, you may be subject to additional deadlines as required by your location.

Until you are Up-To-Date on COVID-19 vaccination, you must comply with the Location’s Non-Pharmaceutical Intervention requirements (e.g., face coverings, regular asymptomatic testing) for individuals who are not Up-To-Date as a condition of your Physical Presence at any University Location/Facility or Program. You must also comply with the following Non-Pharmaceutical Interventions applicable to your position (if any):

Notwithstanding the foregoing, health care workers subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order.

If you have any questions regarding the above, please contact:

______________________________

Denied by: ________________________________ Date: _______________

(Signature of Issuer)
Exhibits 1, 2: Implementation Guidelines

These Guidelines are provided to aid those charged with evaluating, processing, and resolving Personnel requests for Exception to the SARS-CoV-2 (COVID-19) Vaccination Program (“COVID-19 Vaccination Program”) and also to provide information regarding compliance with the COVID-19 Vaccination Program.

EXHIBIT 1: EXCEPTIONS

This Exhibit applies to Covered Individuals who Physically Access a Location or University Program in connection with their employment or appointment and who have requested an Exception to the COVID-19 vaccination requirement.

Covered Individuals may request an Exception to the COVID-19 Primary Series vaccination requirement based on Medical Exemption, Disability, Religious Objection, and/or Deferral due to pregnancy or recent COVID-19 diagnosis or treatment. Covered Individuals who are health care workers subject to the August 5, 2021 California Department of Public Health order as amended on December 22, 2021, February 22, 2022, and September 13, 2022 (“CDPH order”) may request an Exception to the CDPH order’s booster requirement based on Medical Exemption, Religious Objection, and/or Deferral due to recent COVID-19 diagnosis. Covered Individuals who are permitted by University policy and applicable public health directives to decline COVID-19 boosters should comply with the declination process as directed by their location instead of seeking an Exception.

I. DEFINITIONS

All terms in the “Definitions” section of the University of California Policy on Vaccination Programs apply to these Guidelines.

Additional Term:

Decision: The determination of the approval or denial of an Exception request.

II. ADMINISTRATION OF REQUESTS

A. Establishment of a Responsible Office

1. Locations should designate a particular office(s) and/or individual(s) to field Exception requests and make this Responsible Office known to Personnel.

2. This Office might be different for each type of Exception allowed under the COVID-19 Vaccination Program – e.g. Medical Exemption or Disability Exception requests may be processed by a different Office from the Religious Objection Exception or Deferral requests.

3. When the Office of the President has approved the use of a Third Party Administrator (TPA), Locations can opt to utilize that TPA to support the administration and review of Medical Exemptions, Disability Exceptions, Religious Objection Exceptions, and/or Deferrals. If utilizing this option, the Location must still designate a Responsible Office to manage the coordination with that TPA.

B. Documentation of the Request
1. The Responsible Office is responsible for reporting all Exception requests, approvals, and denials to the Local Vaccine Authority (LVA) at the Location.

2. The Responsible Office should make Exception Request Forms (see Model Forms 2-4) publicly available to Personnel and available upon request. Locations utilizing any TPA should provide full name and email address (individually or in a flat list format such as an Excel table) to the TPA; the TPA will then reply with the applicable Exception Request Form.

3. Either the Responsible Office or TPA (if any) should evaluate the Exception request using the applicable standardized criteria. The Responsible Office should use the Approval or Denial Form (see Model Forms 5 and 6) to record the Decision.

4. The Responsible Office will exercise best practice information security procedures and comply with BFB-IS-3 (Electronic Information Security Policy) as well as BFB-RMP-1 (the University Records Management Program) when storing COVID-19 Vaccination Program records (e.g., Exception request forms, approval forms, denial forms, related communications) and when notifying the LVA regarding pending requests for Exceptions and Exception Decisions. COVID-19 Vaccination Program records should be kept confidential and only accessed for COVID-19 Vaccination Program-related purposes. COVID-19 Vaccination Program records should not be stored in an employee’s personnel file.

C. Standardized Communications and Process

1. All forms and notifications should follow standard templates. Location-specific forms may include consistently communicated modifications such as campus-specific Non-Pharmaceutical Intervention (NPI) requirements, Responsible Office contact information, etc.

2. Communications and forms regarding Exceptions (including request forms, notifications such as a notice of pending request, notice of approval, and notice of denial) should be standardized as much as possible regardless of medium (e.g., digital/e-mail vs. hard-copy) or the office sending the communication (e.g., local Responsible Office or any TPA).

3. Communications should be made in a timely fashion, both acknowledging receipt of the request and communicating the subsequent Decision.

D. Pending and Granted Exceptions Require Employee Use of NPI

All forms and references to Exception requests should clearly state that, as a condition of Physical Presence, employees are required to comply with the Location’s NPI requirements (e.g., face coverings, regular asymptomatic testing) while an Exception request is pending or after such requests have been approved. This requirement applies to Exceptions for both the Primary Series and boosters (when applicable). NPI requirements may be amended and communicated to employees subsequently, such as if public health conditions prompt revisions to NPI requirements. See Model Forms 2-6 of the COVID-19 Vaccination Program for recommended language.

Notwithstanding the foregoing, for Covered Individuals subject to the CDPH
order, compliance with the order is required as a condition of Physical Presence at any UC health care facility. Therefore, such Covered Individuals are not allowed to be Physically Present at any UC health care facility after the CDPH order’s applicable compliance deadline while their requests are pending.

III. DECISION PROCESS

A. The Responsible Office will evaluate all Exception requests consistently in both the application of the Guidelines and treatment of similarly situated Personnel throughout the University. For those Covered Individuals who are subject to the CDPH order requiring COVID-19 vaccination for health care workers, evaluation of such requests will also consider the requirements of that order.

The Responsible Office will utilize system-wide training for individuals charged with evaluating Exception requests. The Responsible Office will stay up to date on training, which may be amended as new information or changes to conditions (i.e., public health) may require.

B. The Responsible Office will contact Personnel in a timely fashion in the event that an incomplete form is submitted or more information is needed in order to evaluate the request.

IV. END DATE OF APPROVAL FOR EXCEPTION

If an employee who has not completed the Primary Series has an approved Exception with an end date and the employee no longer needs an Exception at that time, they will have 12 weeks after the end date to receive the Primary Series and submit proof of vaccination. They must then submit proof that they received or, if eligible, properly declined the most recent CDC-recommended booster at least once a year within the timeframe required by the location. Student employees are subject to the timeframe required by the location for students. If the employee is a health care worker subject to the CDPH order, they may be subject to additional deadlines as required by the location.

If an employee has completed the Primary Series when the approval expires, they must then submit proof that they received or, if eligible, properly declined, the most recent CDC-recommended booster at least once a year within the timeframe required by the location for students. If the employee is a health care worker subject to the CDPH order, they may be subject to additional deadlines as required by the location.

An employee subject to the CDPH order who has a Deferral to the booster requirement due to recent COVID-19 diagnosis must receive a booster and submit proof of vaccination within 15 days of the Deferral’s end date. Employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V.)

An employee must submit proof of vaccination per local guidelines and COVID-19 Vaccination Program requirements (see COVID-19 Vaccination Program, Section IV).

V. THE CDPH HEALTH CARE WORKER VACCINE REQUIREMENT

A. The August 5, 2021 California Department of Public Health order as amended on
December 22, 2021, February 22, 2022, and September 13, 2022 ("CDPH order") requires that health care workers subject to the order receive their first dose of a one-dose regimen or the second dose of a two-dose regimen for COVID-19 vaccination by September 30, 2021. It also requires that health care workers eligible for booster doses per the order to receive booster doses no later than March 1, 2022 and that health care workers not yet eligible for boosters be in compliance no later than 15 days after the CDPH's recommended timeframe for receiving the booster dose. Note that the UC COVID-19 Vaccination Program may have different timeframes and compliance deadlines that may also apply.

B. The CDPH permits health care workers to decline these vaccination requirements based on "Religious Beliefs" or "Qualifying Medical Reasons." "Qualifying Medical Reasons" under the CDPH order include only CDC-recognized contraindications or precautions.

C. Effective February 22, 2022, the CDPH order also permits health care workers who completed the Primary Series and were then recently diagnosed with COVID-19 (breakthrough infection) to delay booster administration for up to 90 days from the date of their first positive test or clinical diagnosis.

D. Covered Individuals under the UC COVID-19 Vaccination Program who work, train, or otherwise access any UC health care facilities – including medical centers, ambulatory surgery centers, Student Health Services, Counseling & Psychology Services, and other campus- and school-based medical and behavioral clinics – cannot be Physically Present at such facilities if they are not in compliance with the CDPH order.

E. Given the requirements of the CDPH order, the University is unable to approve the following Exceptions to the Primary Series for Covered Individuals subject to the CDPH order: (1) Deferrals based on COVID-19 diagnosis or COVID-19 treatment within the last 90 days (though health care workers may be eligible for a Medical Exemption if the treatment they received qualifies as a CDC-recognized contraindication or precaution), (2) Exceptions based on Disabilities that are not CDC-recognized contraindications or precautions, or (3) Deferrals based on pregnancy.

F. Similarly, the University is unable to permit Covered Individuals subject to the CDPH order to decline the order’s booster requirement for any reason other than Qualifying Medical Reasons or Religious Beliefs, and the University is unable to permit Covered Individuals subject to the order to defer the order’s booster requirement for any reason other than COVID-19 diagnosis within the last 90 days.

G. Covered Individuals should use the University’s Medical Exemption and/or Disability Exception Request Form to decline the vaccination requirements for Qualifying Medical Reasons. Likewise, Covered Individuals should use the University’s Deferral Request Form to defer booster administration due to recent COVID-19 diagnosis, and Covered Individuals should use the University’s Religious Exception Request Form to decline the vaccination requirements for Religious Beliefs under the CDPH order.
H. Additional updates to the CDPH order are expected and can be found here: https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Order-of-the-State-Public-Health-Officer-Health-Care-Worker-Vaccine-Requirement.aspx.

VI. EXHIBIT 1 REVISION HISTORY

TBD 2023:

**December 12, 2022:** Revised language for consistency with changes to booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

**September 16, 2022:** Revised language based on the September 13, 2022 amendment to the August 5, 2021 California Department of Public Health order.

**August 30, 2022:**

- Converted from COVID-specific vaccine policy to Program Attachment.
- Extended deadline to receive Primary Series to permit longer interval period between doses in alignment with CDC guidance.

**March 9, 2022:**

- Added language regarding December 22, 2021 and February 22, 2022 amendments to the August 5, 2021 California Department of Public Health order.
- Added language regarding booster requirement for employees who are Covered Individuals.

**September 16, 2021:** Added language regarding the August 5, 2021 California Department of Public Health order.

**First Effective Date:** July 20, 2021
EXHIBIT 2: EMPLOYEE COMPLIANCE

I. SUMMARY

The purpose of the COVID-19 Vaccination Program is to facilitate the protection of the health and safety of the University community. The COVID-19 Vaccination Program requires Covered Individuals, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPis), to receive the Primary Series before Physically Accessing the University’s Locations and Programs and to receive or, if eligible, properly decline, boosters at least once a year.

These Guidelines provide information regarding compliance with the COVID-19 Vaccination Program by University of California policy-covered staff and Academic Personnel Manual (APM)-covered academic appointees. The University desires a consistent approach for all employee populations, including represented employees, subject to its collective bargaining obligations, applicable collective bargaining agreements, and applicable public health orders.

The path to full compliance with the COVID-19 Vaccination Program for each employee, including the notices provided, may differ depending upon the date that the employee complies with each compliance step or submits a request for Exception.

II. EMPLOYEE REQUIREMENTS

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements (see COVID-19 Vaccination Program, Section IV).

If any of the dates below falls on a weekend or University holiday, the deadline for providing the required proof is the next business day that is not a University holiday.

A. Primary Series

The COVID-19 Primary Series vaccination requirement applies to UC employees who Physically Access the University’s Locations or Programs in connection with their employment or appointment. As a condition of Physical Presence at a University Location/Facility or in a University Program, all of these UC employees must provide proof of having completed the Primary Series or submit a request for an Exception no later than the applicable Compliance Date. For employees who are subject to the CDPH order, compliance with that order is also a condition of Physical Presence at any UC health care facility. (See Exhibit 1, Sections II.D and V).

Consistent with the requirement for students, Covered Individuals who are student employees must provide proof of having completed the Primary Series or, if applicable, submit a request for an Exception no later than the first day of instruction for the term when they first enroll.

B. Booster

All Covered Individuals must: (i) receive Vaccine Education concerning COVID-19 and CDC-recommended boosters as a preventive measure; and (ii) receive the most recent CDC-recommended booster or affirmatively decline doing so. Covered Individuals will be required to certify or document that they are Up-To-Date (or affirmatively decline the recommended boosters, if eligible)
at least once each year, in a form and as of a date set by the location. Locations may set different dates for different groups of individuals. Student employees are subject to the deadlines applicable to students.

For employees who are subject to the CDPH order, compliance with that order is also a condition of Physical Presence at any UC health care facility. (See Exhibit 1, Sections II.D and V.) For these employees, the University’s COVID-19 vaccination requirement includes compliance with the order’s booster requirements.

C. New Employees

Covered Individuals subject to the CDPH order must be in compliance with the CDPH order as of their start date. See COVID-19 Vaccination Program FAQ #10 for additional information about these compliance requirements.

Consistent with the requirement for students, Covered Individuals who are student employees must provide proof of having completed the Primary Series or, if applicable, submit a request for Exception no later than the first day of instruction for the term when they first enroll. Covered Individuals who are student employees must also comply with the booster deadlines required by the location for students.

All other Covered Individuals hired on or after October 20, 2021 (who are not subject to the CDPH order and who are not student employees) must do one of the following no later than 14 calendar days after their first date of employment: (a) submit proof that they have received at least one dose of a COVID-19 Vaccine; or (b) if applicable, submit a request for an Exception.

If an employee submits proof that they have received at least one dose of a COVID-19 Vaccine but they have not yet completed the Primary Series, they must submit proof of having completed the Primary Series no later than 12 weeks after their first date of employment.

After providing proof of completing the Primary Series, an employee must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by the location.

III. REQUEST FOR EXCEPTION

An employee seeking an Exception must, no later than the applicable Compliance Date for the Primary Series or within the timeframe required by the location for the booster, submit their request to the Responsible Office described in Exhibit 1, Section II.A. While a request is pending and if it is granted, the employee must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and IV). Therefore, such Covered Individuals are not allowed to be Physically Present at any UC health care facility after the CDPH order’s applicable compliance deadline while their requests are pending.

A. Request Approved
If an Exception is granted, the issuing office must notify the employee and the LVA of the approval and the associated expiration date, if any. The employee must, as a condition of Physical Presence, comply with NPIs defined by the Location.

B. Request for Exception to Primary Series Denied

If an employee has submitted a single request for an Exception that has been denied, or requests on more than one ground that have all been fully considered and denied, the employee (“Non-Excepted Employee” hereafter) will receive a Denial of Request for Exception.

1. Employee Chooses to Become Up-To-Date with their Vaccines

If the Non-Excepted Employee chooses to become Up-To-Date with their Vaccines and has not yet begun the Primary Series, they must provide proof that they have received their first shot within 14 calendar days of the date of denial of their Exception request for the Primary Series. This proof must include the date of the first shot. The employee must also submit proof that they have completed the Primary Series within 12 weeks of the date of that denial.

They must then provide proof of receiving or, if eligible, properly declining the most recent CDC-recommended booster at least once a year within the timeframe required by the location.

Until the Non-Excepted Employee is Up-To-Date with their Vaccines, they must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).

2. Employee Chooses Not to Become Up-To-Date with their Vaccines

If the Non-Excepted Employee has not completed the Primary Series and chooses not to receive their required shot(s) of the Primary Series within 14 calendar days of the date of denial of their Exception request for the Primary Series, the applicable process begins at Section IV.A.

IV. EMPLOYEE NON-COMPLIANCE

A. Primary Series Requirement

1. First Notice of Non-Compliance (All Employees)

   UC employees subject to this COVID-19 Vaccination Program who fail to provide proof of receiving the Primary Series and who have not requested an Exception by the applicable Compliance Date (or Non-Excepted Employees, who fail to provide proof that they have received their required shot within the 14 calendar days as described in Section III.B.2) will receive a First Notice of Non-Compliance.

   Once an employee has received a First Notice of Non-Compliance, they will have three business days to provide proof of receiving the Primary Series or to make a request for an Exception.
A Non-Excepted Employee will have three business days to provide proof that they have received their required shot or, if applicable, make a new request for an Exception.

UC employees hired on or after October 20, 2021 (other than those subject to the CDPH order and student employees) who fail to provide proof of receiving at least one dose of a COVID-19 Vaccine and who have not requested an Exception within the initial 14-day compliance period, will receive the First Notice of Non-Compliance on the 15th calendar day after their first date of employment.\(^1\) Once an employee hired on or after October 20, 2021 has received a First Notice of Non-Compliance, they will have three business days to provide proof of receiving at least one dose of a COVID-19 Vaccine or to make a request for an Exception.

During these three business days, UC employees must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Section II.D and V).

If an employee has not responded within three business days and is a Non-Excepted Employee, the applicable process continues below at Section IV.A.3; for other employees, the applicable process continues below at Section IV.A.2.

2. **Second Notice of Non-Compliance (Employees Other Than Non-Excepted Employees)**

If, after receipt of the First Notice of Non-Compliance, the employee does not submit proof of receiving the Primary Series or make a request for an Exception within three business days, they will receive a Second Notice of Non-Compliance that requires them to submit proof that they have received their required shot within 14 calendar days of the date of the Second Notice of Non-Compliance. This proof must include the date of the required shot.

As described in Section IV.A.1, until the employee is Up-To-Date with their Vaccines, the employee must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).

The employee will have 12 weeks from the date of the Second Notice of Non-Compliance to complete the Primary Series.

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements.

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\(^1\) The initial 14-day compliance period does not apply to employees subject to the CDPH order (Covered Individuals subject to that order must be in compliance with the order as of their start date) or to student employees (consistent with the requirement for students, Covered Individuals who are student employees must provide proof of having completed the Primary Series or, if applicable, submit a request for Exception no later than the first day of instruction for the term when they first enroll).
3. **Notice of Continued Non-Compliance**

If an employee fails to submit proof of receipt of the Primary Series or make a request for an Exception within the period prescribed in the Second Notice (or the First Notice, if a Non-Excepted Employee), the employee will receive a Notice of Continued Non-Compliance stating that the Department will commence a period of progressive corrective action and/or discipline, up to and including termination/dismissal, against the employee.

If an employee hired on or after October 20, 2021 (who is not subject to the CDPH order and is not a student employee) fails to submit proof of receiving at least one dose of a COVID-19 Vaccine or make a request for an Exception within 14 calendar days of the date of the Second Notice, the employee will receive a Notice of Continued Non-Compliance stating that the Department will proceed toward termination/dismissal.

During the corrective action and/or discipline period, the employee will be permitted Physical Presence for up to six weeks (at the Location’s discretion) and must, as a condition of Physical Presence, comply with NPIs defined by the Location. Notwithstanding the foregoing, employees subject to the CDPH order cannot be Physically Present at any UC health care facility if they are not in compliance with that order. (See Exhibit 1, Sections II.D and V).

The Chancellor or designee may choose to briefly extend the six-week period of Physical Presence for employees other than those subject to the CDPH order (see Exhibit 1, Sections II.D and V) for exceptional circumstances, including but not limited to:

- Providing for a non-compliant instructor to continue teaching or mentorship in the best interest of student learning;
- Providing for a non-compliant employee to continue work in order to avoid potential negative impacts on critical University operations due to unanticipated business requirements; or
- For other urgent requirements.

**B. Corrective Action and/or Discipline**

Any corrective action and/or discipline, up to and including termination/dismissal, taken as a result of employee non-compliance will be consistent with the policies or collective bargaining provisions applicable to the specific employee population.

If an employee chooses to receive their required shot in the Primary Series after receiving the Notice of Continued Non-Compliance, the employee has up to 12 weeks to complete the Primary Series. During this time the corrective action and/or discipline process is paused. If the employee does not complete the Primary Series within 12 weeks, the corrective action and/or discipline process resumes.

Proof of vaccination must be submitted per local guidelines and COVID-19 Vaccination Program requirements.
1. **Policy-Covered Staff**

For regular status employees in the Professional & Support Staff (PSS) personnel group, corrective action and/or discipline is taken in accordance with **PPSM 62 (Corrective Action)** and termination is taken in accordance with **PPSM 64 (Termination and Job Abandonment)**.

Probationary career employees in the PSS personnel group may be released at any time in writing at the discretion of the University in accordance with **PPSM 22 (Probationary Period)**.

For career employees in the Managers & Senior Professionals (MSP) personnel group refer to **PPSM 64 (Termination and Job Abandonment)**, although non-compliant MSP employees will not be eligible for severance or any termination assistance under PPSM-64 section III.E.

For Senior Management Group (SMG) employees refer to **PPSM II-64 (Termination of Appointment)**, although non-compliant SMG employees will not be eligible for financial assistance or any termination assistance under PPSM II-64 section III.C.

For employees in the PSS or MSP personnel groups who are not regular status or career, refer to the specific appointment type in PPSM 3 (Types of Appointment).

2. **Policy-Covered Academic Appointees**

All members of the faculty are subject to the standards set forth in **APM – 015 (The Faculty Code of Conduct)**.

For Senate Faculty, the administration of discipline is set forth in **APM – 016 (University Policy on Faculty Conduct and the Administration of Discipline)** in conjunction with **Academic Senate Bylaw 336 Privilege and Tenure: Divisional Committees -- Disciplinary Cases** concerning disciplinary hearings.

For all other non-Senate academic appointees, corrective action is taken in accordance with **APM – 150 Corrective Action and Dismissal**, which also provides for grievance mechanisms.

3. **Represented Employees**

Corrective action and/or discipline for represented employees is described in the employee's applicable collective bargaining agreement.

V. **EXHIBIT 2 REVISION HISTORY**

**TBD 2023:**

**December 12, 2022:** Revised language for consistency with changes to booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

**September 16, 2022:** Revised language based on the September 13, 2022 amendment to the August 5, 2021 California Department of Public Health order.
University of California – Policy on Vaccination Programs

August 30, 2022:
- Converted from COVID-specific vaccine policy to Program Attachment.
- Extended deadline to receive Primary Series to permit longer interval period between doses in alignment with CDC guidance.
- Clarified corrective action/discipline language for policy-covered academic appointees.

March 9, 2022:
- Added language regarding the December 22, 2021 and February 22, 2022 amendments to the August 5, 2021 California Department of Public Health order.
- Added language to address non-compliance for employees hired on or after October 20, 2021.
- Added language regarding booster requirement for employees who are Covered Individuals.

September 16, 2021:
- Added language on deadline for providing proof of vaccination during a holiday/weekend.
- Clarified corrective action/discipline language;
- Added language regarding the August 5, 2021 California Department of Public Health order

August 11, 2021:
- Added timeline for clarity.
- Updated language in sections IV.B, V.A and V.B for clarity.
- Added two additional examples in section V.D.
- Clarified corrective action/discipline for policy-covered staff.

First Effective Date: July 20, 2021
PROGRAM ATTACHMENT #2: Seasonal Influenza Vaccination Program

<table>
<thead>
<tr>
<th>Vaccine(s)</th>
<th>Targeted Disease or Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>See <a href="https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm">https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm</a> for details.</td>
<td>Seasonal Influenza</td>
</tr>
</tbody>
</table>

I. Purpose/Supporting Data:

According to the Centers for Disease Control & Prevention, vaccination against the seasonal respiratory disease influenza or “flu” has long been accepted as a safe and effective way to prevent millions of illnesses and thousands of related doctor and hospital visits every year. In recent years, flu vaccines have reduced the risk of flu-associated hospitalizations among older adults by about 40% on average. A 2018 study showed that from 2012 to 2015, flu vaccination among adults reduced the risk of being admitted to an intensive care unit (ICU) with flu by 82 percent. Flu vaccination has been associated with lower rates of some cardiac events among people with heart disease, especially among those who had had a cardiac event in the past year. It can mitigate against worsening and hospitalization for flu-related chronic lung disease. It has also been shown in separate studies to be associated with reduced hospitalizations among people with diabetes and chronic lung disease. A 2018 study that covered influenza seasons from 2010-2016 showed that getting a flu shot reduced a pregnant woman’s risk of being hospitalized with flu by an average of 40 percent. Flu vaccination has been shown in several studies to reduce severity of illness in people who become ill after they get vaccinated. For example, a 2017 study showed that flu vaccination reduced deaths, ICU admissions, ICU length of stay, and overall duration of hospitalization among hospitalized flu patients. A 2018 study showed that among adults hospitalized with flu, vaccinated patients were 59 percent less likely to be admitted to the ICU than those who had not been vaccinated. Among adults in the ICU with flu, vaccinated patients on average spent 4 fewer days in the hospital than those who were not vaccinated. Finally, by getting vaccinated, a person can protect those around them, including those who are more vulnerable to serious flu illness.

The CDC’s Advisory Committee on Immunization Practices (“ACIP”) issues recommendations regarding influenza specific to each flu season. For example, ACIP advised that the “2021-22 influenza season is expected to coincide with continued circulation of SARS-CoV-2, the virus that causes COVID-19. Influenza vaccination of persons aged ≥ 6 months to reduce prevalence of illness caused by influenza will reduce symptoms that might be confused with those of COVID-19. Prevention of and reduction in the severity of influenza illness and reduction of outpatient visits, hospitalizations, and intensive care unit admissions through influenza vaccination also could alleviate stress on the U.S. health care system.”

During the COVID-19 pandemic, where COVID-19, like influenza, results in respiratory symptoms, it is even more critical than usual to assure widespread vaccination. As California has lifted COVID-19 restrictions, outbreaks have followed and the possibility of a surge that overwhelms the health care system and causes hospitals to adopt crisis standards of care necessarily increases. Population-level interventions that decrease the likelihood of absenteeism, disease transmission, hospitalization, and ICU utilization must therefore be considered and adopted where
feasible.

Refer to Section VII (Related Information) for additional information supporting implementation of this program, which is incorporated into this Program Attachment by reference.

For all of these reasons, the University has concluded that critical steps must be taken to reduce the likelihood of severe disease among students, faculty, and staff, and in turn to reduce the likelihood that our health systems will be overwhelmed.

II. **Compliance Date:** Annually, no later than December 1 or an earlier date set by an individual Location.

III. **Program Type:** ☐ Mandatory (Subject to Exceptions Marked Below)  ☒ Opt-Out

On or before the Compliance Date, Covered Individuals must: (i) receive Vaccine Education concerning influenza and vaccination as a preventive measure; and (ii) receive or affirmatively decline influenza vaccination. Those who choose to decline influenza vaccination must complete a Vaccine Declination Statement provided by their Location on or before the Compliance Date. Covered Individuals who are not vaccinated must observe additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they interact. Covered Individuals who initially decline the influenza Vaccine but later decide to become vaccinated may receive the Vaccine through on-site or off-site providers at any time and may notify the LVA.

IV. **Evidence Required:** To be determined by the LVA.

V. **Non-Pharmaceutical Interventions (NPIs):**

All members of the Location’s community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing. Those who are not Up-To-Date on their Vaccines may be subject to NPIs above and beyond those who are.

VI. **Systemwide Implementation Guidelines:** ☐ Attached  ☒ None

VII. **Related Information:**

- **CDC, [Seasonal Influenza Vaccination Resources for Health Professionals](https://www.cdc.gov/flu/professionals/vaccination/resources.htm)
- **CDPH, [Influenza (Flu) and Other Respiratory Diseases](https://www.cdph.ca.gov/Programs/QAC/CDPH%20Home%20Page/Disease%20Prevention%20and%20Control/Respiratory%20Diseases/Influenza.htm)**

VIII. **Frequently Asked Questions:**

1. I am a new University of California employee. What is my deadline for complying with the Seasonal Influenza Vaccination Program?

   Complying with the Seasonal Influenza Vaccination Program ("Flu Vaccination Program") is a condition of employment, and all Covered Individuals must provide proof of being Up-To-Date on seasonal influenza vaccination or properly decline such
vaccination by no later than the applicable deadline each year. If you are a Covered Individual, your first deadline to comply with the Flu Vaccination Program depends on when your first date of employment is in relation to the flu season.

a) If your first date of employment with the University is during the flu season before the Compliance Date at your Location (i.e., December 1 or an earlier date set by your Location), then you must first comply with the Flu Vaccination Program by that Compliance Date. For example, if your first date of employment is November 1, 2022, and your Location has a Compliance Date of December 1, 2022, then you must first comply with the Flu Vaccination Program by December 1, 2022.

b) If your first date of employment with the University is on or after May 1 (or a different end date set by your Location), then you must first comply with the Flu Vaccination Program by your Location’s Compliance Date for the upcoming flu season. For example, if your first date of employment is May 2, 2023, and your Location is using May 1 as the end date, then you must first comply with the Flu Vaccination Program by your Location’s Compliance Date for the 2023-24 flu season.

c) If your first date of employment with the University is on or after the Compliance Date at your Location but before May 1 (or the different end date set by your Location), then you must first comply with the Flu Vaccination Program within 14 calendar days of your first date of employment. For example, if your first date of employment is December 2, 2022, then you must first comply with the Flu Vaccination Program by December 16, 2022.

All Covered Individuals must then comply with the Flu Vaccination Program annually by the Compliance Date set at their individual Locations.

IX. Model Forms and Exhibits: TBD

X. Revision History:

TBD 2023:

August 30, 2022: Executive Order Converted to Program Attachment

October 8, 2021: Executive Order Issued Extending Program to all Campuses

September 29, 2020: Revised July 31, 2020 Executive Order

July 31, 2020: Executive Order Issued Extending Program to all Campuses

First Effective Date: Longstanding at UC Medical Centers
To: Jessica Cattelino, Chair
Academic Senate

From: Marco Giovannini, Chair
Committee on International Education

Date: October 27, 2022

Re: Systemwide Senate Review: Presidential Policy – University of California – Policy on Vaccination Programs

Dear Chair Cattelino,

At its meeting on October 26, 2022, the Committee on International Education discussed the Presidential Policy – University of California – Policy on Vaccination Programs.

Members support the concern raised by the Graduate Council regarding pregnancy being labeled as a disability. Members also recommend that the university provide ample opportunities for students to obtain the vaccines before the compliance deadline.

Thank you for the opportunity to review and comment. If you have any questions, please do not hesitate to contact me via the Committee on International Education analyst, Emily Le, at ele@senate.ucla.edu.
October 25, 2022

To: Jessica Cattelino, Chair, UCLA Academic Senate

From: James Bisley, Chair, Graduate Council

Re: (Systemwide Senate Review) Presidential Policy - University of California - Policy on Vaccination Programs

At its meeting on October 14, 2022, the Graduate Council reviewed and discussed the (Systemwide Senate Review) Presidential Policy – University of California – Policy on Vaccination Programs and offers the following observations for the Executive Board’s consideration:

Some members expressed concern over pregnancy being labeled as a disability. Members noted that the policy does not mention breastfeeding and that proposers should consider including breastfeeding for exemption or deferral.

As an aside, members were interested in the origin and rationale for the flu vaccine mandate. There was a concern that the Seasonal Influenza Vaccination Program grew out of an executive order during the COVID-19 pandemic and that there was no consultation and justification for retaining this new standard.

We appreciate the opportunity to express our views on this matter. If you have any questions, please contact us via Graduate Council’s Analyst, Estrella Arciba, at earciba@senate.ucla.edu.