Executive Board
(Systemwide Senate Review) Presidential Policy - University of California - Policy on Vaccination Programs

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September 16, 2022

CHANCELLORS
ACADEMIC COUNCIL CHAIR SUSAN COCHRAN
LABORATORY DIRECTOR MICHAEL WITHERELL
ANR VICE PRESIDENT GLENSA HUMISTON

Re: 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 resumes and prior to the influenza season.

We are now initiating the formal Systemwide Review and consultation process to finalize this Presidential Policy (enclosed).

Background and Key Policy Revisions

This policy is renamed “Policy on Vaccination Programs” and consolidates 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 from the interim amendments include the following:

- The COVID-19 Vaccination Program Attachment incorporates language from the July 15, 2021 SARS-CoV-2 (COVID-19) Vaccination Program policy. This is primarily a reorganization and simplification of existing policy language and is 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, we are now distributing the 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 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 16, 2022 through December 15, 2022**. The draft policy is posted on UCNet.

Comments from the Academic Senate and campus academic administrators should be submitted to VP-ACADEMICPERSONNEL@ucop.edu. Comments from staff employees should be compiled by HR Policy Coordinators and submitted to SHR Policy through Box. SHR Policy will communicate further with HR Policy Coordinators about this process.
Questions relating to academic personnel may be directed to Tiffany Wilson at Tiffany.Wilson@ucop.edu. Questions from staff should be directed to location HR Policy Coordinators. Location questions related to staff employees may be directed to Olga.Zundel@ucop.edu and Abigail.Norris@ucop.edu.

Sincerely,

Michael T. Brown, Ph.D.     Cheryl Lloyd
Acting Vice Provost      Vice President
Academic Personnel and Programs     Systemwide Human Resources

Enclosures:

1) Policy on Vaccination Programs
2) Model Communication

cc: President Drake
    Executive Vice Chancellors/Provosts
    Executive Vice President Byington
    Executive Vice President and Chief Operating Officer Nava
    Senior Vice President and Chief Compliance Officer Bustamante
    Vice President Maldonado
    Vice Provosts/Vice Chancellors for Academic Personnel
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    Assistant Vice Provosts/Vice Chancellors for Academic Personnel
    Deputy General Counsel Woodall
    Associate Vice Provost Lee
    Executive Director Lin
    Executive Director Silas
    Chief of Staff and Executive Director Henderson
    Chief of Staff Levintov
    Chief of Staff Peterson
    Chief Policy Advisor McAuliffe
    Principal Counsel Essick
    Principal Counsel Mastro
    Director Heng
    Director Roller
    Director Sykes
    Associate Director DiCaprio
    Associate Director Woolston
    Assistant Director LaBriola
Policy on Vaccination Programs

DRAFT FOR SYSTEMWIDE REVIEW: 9/16/22-12/15/22

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**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

**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.

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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 Access 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 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 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 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) defined by the LVA 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 state or federal mandates.

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), 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 healthcare 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 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 healthcare 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. 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 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

- Cal. Health & Safety Code Division 2, Chapter 2, Article 3.5
- California Department of Public Health, Licensees Authorized to Administer Vaccines in California
- 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, 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. 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 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 Program Attachment 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:

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. Vaccine Information Statements

B. Program Attachments
   2. SARS-CoV-2 (COVID-19) Vaccination Program
   3. 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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<tbody>
<tr>
<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 be Up-To-Date on COVID-19 vaccination before Physically Accessing the University’s Locations and Programs. 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:

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. For new employees whose first date of employment is later, the deadline is no later than 12 weeks after the first date of employment. (See Exhibit 2, Section II.C. for details.) 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.

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

A. 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 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 vaccination until 90 days have lapsed since the date of diagnosis or last date of treatment.

B. 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) 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 become Up-To-Date or will be denied Physical Presence at the relevant University Location(s) or Program(s).

IV. Evidence Required:

Covered Individuals must submit proof of their vaccination or of a University-approved Exception to their LVA, by providing either: (i) in the case of one who 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.

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:

- 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
VIII. Frequently Asked Questions:

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?

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.

2. 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?

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.

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.

3. Why is UC allowing Exceptions 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 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.

4. How do I apply for an Exception?

Covered Individuals who seek an Exception 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.

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

No, but unless you work in a University health care facility, you are eligible for a Deferral throughout your pregnancy until the time that you return to in-person work or instruction, as applicable, following pregnancy. 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 her 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 be Up-To-Date on their Vaccines.

6. 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 for up to 90 days after your diagnosis or treatment. According to the US Food and Drug Administration, however, “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 vaccination.

7. 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, some Exceptions available under the University’s COVID-19 Vaccination Program 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 for health care workers subject to the CDPH order: (a) Deferrals 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), (c) Exceptions based on Disabilities that are not CDC-recognized contraindications or precautions, or (d) Deferrals based on pregnancy.

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 healthcare provider or confirmed laboratory results.

Covered Individuals should use the University’s Medical Exemption and/or Disability Exception Request form to decline the vaccine 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 Frequently Asked Questions attached to the order. The CDPH order, like the University’s policy, requires individuals who are not Up-To-Date on their vaccines but are permitted to be Physically Present on the basis of an approved Exception to comply with Non-Pharmaceutical Interventions to help avoid preventable transmission of COVID-19.

8. 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 #7) 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. FAQ #7 addresses the order’s requirements with regard to declining or deferring the vaccine.

9. 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. Medical Exemption and/or Disability Exception Request Form
2. Religious Exception Request Form
3. Deferral Request Form
4. Approval of Request for Exception
5. Denial of Request for Exception

Note: The 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:
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.

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

This Program Attachment is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.
This form should be used by University employees and students to request an Exception to the COVID-19 vaccination requirement in the University’s SARS-CoV-2 Vaccination Program. 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

- [ ] 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. My request is supported by the attached certification from my health care provider. For health care workers subject to the 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 vaccination requirement as a Disability accommodation. Health care workers subject to the 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
UNIVERSITY OF CALIFORNIA
MEDICAL EXEMPTION AND/OR DISABILITY EXCEPTION REQUEST FORM
Exception to SARS-CoV-2 (COVID-19) Vaccination Requirement

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

The University of California requires that its employees and students 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 Exceptions to this 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); or (b) Disability. The individual’s request for such an Exception must be supported by 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 Part A of this form if one or more of the Contraindications or Precautions to COVID-19 vaccination (recognized by the CDC, the CDPH, or in the case of internationally administered vaccines, the 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**

- [ ] 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 COVID-19 Vaccines applies to the patient listed above. For that reason, COVID-19 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 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 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
Based on my sincerely held religious belief, practice, or observance, I am requesting an Exception to the COVID-19 vaccination requirement in the University’s SARS-CoV-2 Vaccination Program 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 requirement to receive CDC- or CDPH-recommended COVID-19 boosters 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.

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 vaccination requirement in the University’s SARS-CoV-2 Vaccination Program. Fill out Part A to request a Deferral 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 Due to Pregnancy

☐ I am currently pregnant and am requesting a Deferral of the COVID-19 vaccination requirement during my pregnancy. My anticipated due date is ________________.

Health care workers subject to the 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:

☐ 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 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.

☐ 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 Deferral due to COVID-19 treatment. 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

The University of California requires that its employees and students 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 Deferrals of this 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 ________________.
☐ 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 based on Medical Exemption due to Contraindication or Precaution
- Exception based on Disability
- Exception based on Religious Objection
- Exception based on Deferral due to Pregnancy
- Exception based on Deferral due to COVID-19 Diagnosis and/or Treatment

For Exceptions other than Deferrals due to Pregnancy: Based on the information you have provided, your request for Exception 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 _______ (10 weeks after the end date) to submit proof that you have completed the Primary Series. You must then provide proof of receiving all CDC- or CDPH-recommended boosters, once eligible, 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 provide proof of receiving all CDC- or CDPH-recommended boosters, once eligible, within the timeframe 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 Based on Deferrals Due to Pregnancy: Based on the information you have provided, your request for Exception 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 10 weeks of your return. You must then provide proof of receiving all CDC- or CDPH-recommended boosters, once eligible, 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 provide proof of receiving all CDC- or CDPH-recommended boosters, once eligible, 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.

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:__________________

_____________________________________________________________________

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

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 are not a Covered Individual as defined by the Vaccination Programs policy. 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 ________  (10 weeks from the denial date) to submit proof that you have completed the Primary Series. You must then provide proof of receiving all CDC- or CDPH-recommended boosters, once eligible, 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 provide proof of receiving all CDC- or CDPH-recommended boosters, once eligible, within the timeframe 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: ___________________

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 provide information regarding compliance with the COVID-19 Vaccination Program.

EXHIBIT 1: EXCEPTIONS

These Guidelines apply 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.

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 1-3) 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 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. NPI requirements may be amended and communicated to employees subsequently, such as if public health conditions prompt revisions to NPI requirements. See Model Forms 1-5 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 22, 2021, February 22, 2022, and September 13, 2022 (“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 10 weeks after the end date to receive the Primary Series and submit proof of vaccination. They must then submit proof that they received all CDC- or CDPH-recommended boosters, once eligible, within the timeframe 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 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 submit proof of having received all CDC- or CDPH-recommended boosters, once eligible, within the timeframe required by the location.

An employee subject to the CDPH order who has 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. 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.
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 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.

F. 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.

G. 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

Amended: TBD 2023:

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 to be Up-To-Date on COVID-19 vaccination before Physically Accessing the University's Locations/Facilities or University Programs, 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. 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 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 date of instruction for the term when they first enroll.

B. Booster

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 requirement that employees receive all CDC- or CDPH-recommended boosters 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 #7 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 date of instruction for the term when they first enroll. Covered Individuals who are student employees must also 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 10 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.
• 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.

• 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.

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

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 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 10 weeks of the date of that denial. They must then submit proof that they received all 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 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.

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.

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 10 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.

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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 (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
date of instruction for the term when they first enroll).
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 of receiving the booster 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. 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 10 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 10 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

Amended: TBD 2023:

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>
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<tbody>
<tr>
<td></td>
<td>Seasonal Influenza</td>
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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](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 and chronic lung disease. 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:

- CDC, Seasonal Influenza Vaccination Resources for Health Professionals
- CDPH, Influenza (Flu) 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, 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: [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
On August 30, 2022, the Policy on Vaccination Programs – With Interim Amendments was issued, with an effective date of September 1, 2022. The University of California Office of the President invites comments on revisions from the interim amendments to finalize this Presidential Policy.

This policy is renamed “Policy on Vaccination Programs” and primarily consolidates the University’s existing systemwide vaccination requirements other than the Student Immunization Policy into a single document. Key revisions that are being distributed for Systemwide Review include the following:

- The COVID-19 Vaccination Program Attachment incorporates language from the July 15, 2021 SARS-CoV-2 (COVID-19) Vaccination Program policy. This is primarily a reorganization and simplification of existing policy language and is 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 draft policy is posted on UCNet. If you have any questions or if you wish to comment, please contact _______________ at ____________________, no later than ___________, 2022.