



University of California
Executive Order
Issued: July 31, 2020
Revised: September 29, 2020

Background and Findings

As of this date, the world is facing a severe health crisis in which COVID-19, a new respiratory illness caused by a novel coronavirus, places millions of people at risk of serious illness or death. The World Health Organization has declared that the disease is a pandemic. Declarations of Emergency have been issued by the President of the United States, the Governor of California, and California counties and other local jurisdictions, including those where the University maintains campuses and other significant operations.

In California alone, notwithstanding concerted statewide efforts to mitigate the spread of the disease, by late July, nearly 400,000 people had been diagnosed with COVID-19 and more than 7,500 had perished. Statewide positivity rates and hospitalizations were trending upward; on any given day, over 8,000 were hospitalized and more than 2,000 were so sick that they were being treated in intensive care units. As of this writing, the numbers of cases and deaths have doubled: over 800,000 cases have been reported, with over 15,000 fatalities. While hospitalization and ICU rates are currently down, statewide positivity and transmission rates are starting to climb again, and state officials have predicted a significant increase in hospitalizations over the next month.

On March 19 of this year, the State Public Health Officer [issued an order](#) directing all individuals living in the State to stay at home except as needed to facilitate authorized, necessary activities or to maintain the continuity of operations of critical infrastructure sectors. This order caused virtually every government agency and private organization in the State to transition to remote operations to the greatest extent possible. Since then, the State has developed and refined a Pandemic Roadmap to guide prudent resumption of on-site or in-person operations and the University is developing and implementing plans to transition remote activities back to its campuses consistent with applicable public health orders and directives.

According to the [Centers for Disease Control & Prevention](#), flu vaccination 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 on average by about 40%](#). A [2018 study](#) showed that from 2012 to 2015, flu vaccination among adults reduced the risk of being admitted to an intensive care unit (ICU) with flu by 82 percent. Flu vaccination has been associated with [lower rates of some cardiac events](#) among people with heart disease, especially among those who had had a cardiac event in the past year. It can reduce worsening and hospitalization for flu-related

chronic lung disease. It has been shown in [separate studies](#) to be associated with reduced hospitalizations among people with [diabetes](#) and [chronic lung disease](#). A [2018 study](#) that included 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 get vaccinated but still get sick. For example, a [2017 study](#) showed that flu vaccination reduced deaths, intensive care unit (ICU) admissions, ICU length of stay, and overall duration of hospitalization among hospitalized flu patients. A [2018 study](#) showed that among adults hospitalized with flu, vaccinated patients were 59 percent less likely to be admitted to the ICU than those who had not been vaccinated. Among adults in the ICU with flu, vaccinated patients on average spent 4 fewer days in the hospital than those who were not vaccinated. Finally, by getting vaccinated, a person can protect those around them, including those who are more vulnerable to serious flu illness.

During the SARS-CoV-2 pandemic, where COVID-19, like influenza, results in respiratory symptoms, it is even more critical than usual to assure widespread vaccination. As California progresses through its roadmap, the possibility of an outbreak or surge that overwhelms the health care system and causes hospitals to adopt [crisis standards of care](#) necessarily increases – as of July 20, 2020, thousands of new cases are being reported every day and hospitals are experiencing shortages of testing supplies and medications necessary to treat COVID-19. Population-level interventions that decrease the likelihood of disease transmission, hospitalization, and ICU utilization must therefore be considered and adopted where feasible.

As President of the University, I have concluded that critical steps must be taken to reduce the likelihood of severe disease among students, faculty and staff, particularly those on campus, and in turn to reduce the likelihood that our health systems will be overwhelmed.

Executive Order

WHEREFORE AS PRESIDENT OF THE UNIVERSITY OF CALIFORNIA I DECLARE:

On the authority vested in me by Bylaw 30, Bylaw 22.1, Regents Policy 1500 and Standing Order 100.4(ee), and based on the foregoing circumstances, I hereby issue the following order, to be effective through the 2020-2021 flu season, and direct the following:

1. Universal Vaccine Encouraged. Each campus shall strongly encourage universal vaccination for all students, faculty, staff, and their families by October 31, 2020.
2. Mandate for those on Campus. Effective November 1, 2020, all students, faculty, and staff living, learning, or working on premises at any UC location must receive a flu vaccine, unless they receive an approved medical exemption or disability or religious accommodation, as described below or in Attachment A.
3. Disability or Religious Accommodations. Requests for disability or religious accommodations may be made by any person subject to this order and will be adjudicated through the interactive process consistent with existing location policies and procedures.

4. Coverage. The University's health plans provide coverage for routine health maintenance vaccinations, including seasonal influenza vaccine, without copays to any covered students, faculty, staff, or their covered families.
5. Implementation.
 - a. The Interim Vice President for Human Resources or her designee shall ensure that any applicable collective bargaining requirements are met with respect to the implementation of this order.
 - b. The Provost and the Executive Vice President or their designee(s) shall immediately consult with the Academic Senate on implementation of this order with respect to members of the University's faculty.
 - c. The Executive Vice President for UC Health or her designee shall provide technical guidance to the campuses at their request to facilitate execution of this mandate.

All University policies contrary to the provisions of this Executive Order, except those adopted by the Regents, shall be suspended to the extent of any conflict, during the period of this Order. The Executive Vice President – UC Health shall have the authority to issue further guidance about the parameters and use of this mandate, in consultation with the Provost and the Interim Vice President – Systemwide Human Resources.



Michael V. Drake, MD
President

ATTACHMENT A: EMPLOYEE EXEMPTIONS

Medical Exemptions

A list of established medical contraindications to and precautions for flu vaccine can be found at the Centers for Disease Control and Prevention website, *Guide to Contraindications*, online at: <https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html> (scroll to IIV) and currently includes:

Contraindications: Severe allergic reaction (e.g., anaphylaxis) after previous dose of influenza vaccine or to vaccine component.

Precautions: Guillain-Barré Syndrome <6 weeks after a prior dose of influenza vaccine
Moderate or severe acute illness with or without fever

Egg allergy other than hives, e.g., angioedema, respiratory distress, lightheadedness, recurrent emesis; or required epinephrine or another emergency medical intervention (IIV may be administered in an inpatient or outpatient medical setting and under the supervision of a health care provider who is able to recognize and manage severe allergic conditions).

Any request for medical exemption must be documented on the attached Medical Exemption Request Form and submitted by an employee to the designated campus medical official or disability coordinator (collectively an “Authorized Official”).

Faculty and Staff Appeals¹

Each campus shall designate a local Immunization Exemption Appeals Officer (IEAO) for faculty and staff appeals. The IEAO shall have appropriate qualifications and training to adjudicate appeals, meaning at a minimum California licensure as a physician, physician’s assistant, or advance practice nurse, who in turn may consult with other experts as necessary (e.g., environmental health and safety, infectious disease, occupational health).

Individuals who wish to appeal denial of a medical exemption must submit a written request to the Authorized Official, along with documentation provided by their treating medical provider on the Medical Exemption Request Form.

Appeals should be de-identified and forwarded to the IEAO. Decisions should be communicated to the Authorized Official, who will, in turn, communicate the IEAO decision to the faculty or staff member. IEAO decisions shall be rendered within 60 days of receipt by the IEAO and an

¹ An Immunization Exemption Appeals Committee (IEAC) has been established to evaluate student appeals. The IEAC is chaired by the UC Health Chief Medical Officer of Student Health and Counseling, and is convened as needed to evaluate medical exemption requests denied at the campus level for which students have submitted an appeal.

individual will not be barred from any campus activity while an appeal is pending. If the exemption denial is upheld, the faculty or staff member will be expected to comply with the immunization requirement within 15 days.

In active infectious disease outbreak situations, individuals granted medical exemptions may not be allowed to come to campus. These situations will be determined on a case-by-case basis, and in consultation with public health officials with jurisdiction.

The UC Immunization Exemption Policy Committee (IEPC) is a system-wide committee, appointed by the Executive Vice President, UC Health. It is comprised of UC faculty, staff and students, and public health officials. Members are selected from diverse backgrounds, and include actively practicing physicians, including at least one infectious disease specialist, and may also include faculty with expertise in a variety of other fields, such as medical ethics, law, public health, and international student services. Members serve a term of no less than one year. Campuses may consult with the IEPC on significant questions of policy.

University of California Medical Exemption Request Form

BERKELEY * DAVIS * IRVINE * LOS ANGELES * MERCED * RIVERSIDE * SAN DIEGO * SAN FRANCISCO



SANTA BARBARA * SANTA CRUZ

Name of Patient: _____

Status: Student Faculty/Academic Personnel Staff/Other Employee

Date of Birth: _____ MRN: _____

Name of Health Care Provider: _____

License Number: _____ Expiration Date: _____

State of Issuance: _____

License Type: Medical or Osteopathic Physician Nurse Practitioner Physician's Assistant

Practice Address: _____

Email: _____ Phone: _____

I hereby certify that the above-referenced patient qualifies for a medical exemption from the 2020-2021 seasonal influenza vaccine, as further provided below:

Reason for Exemption:

CDC Contraindication CDC Precaution Manufacturer's Insert Contraindication

This contraindication or precaution is: Permanent Temporary

- If temporary, the expiration date for the exemption is: _____

Signature of Health Care Provider: _____

Date of Signature: _____

*Students: Return this completed form to your Student Health Service.
Faculty and Staff: Return this completed form to your campus-Authorized Official.*

For Official Use Only:

Approved Denied Date: _____

Name: _____ Title: _____

Signature: _____

UC Location: <Choose One> _____