

**CORONAVIRUS DISEASE 2019 VACCINATION PROGRAM FOR VETERANS
HEALTH ADMINISTRATION HEALTH CARE PERSONNEL**

1. REASON FOR ISSUE: To establish policy and provide guidance for mandatory coronavirus disease 2019 (COVID-19) vaccination among health care personnel (HCP) in the Veterans Health Administration (VHA), hereafter referred to as VHA HCP. **NOTE:** *VHA Directive 1193(1), COVID-19 Vaccination Program for VHA HCP, dated July 27, 2021 is no longer valid. This policy, VHA Directive 1193, replaces the July 2021 publication.*

2. SUMMARY OF MAJOR CHANGES:

a. This VHA directive requires all VHA HCP covered by the policy to be vaccinated against COVID-19. **NOTE:** *This includes all VHA HCP as described in the Definitions paragraph (see paragraph 3.b.).*

b. This VHA directive updates the data in the Background paragraph (see paragraph 2).

c. This VHA directive clarifies the definition of HCP (see paragraph 3.b.) and the definition of fully vaccinated (see paragraph 3.c.).

d. This VHA directive adds responsibilities for the Chief, Voluntary Service (see paragraph 5.m.), the VA medical facility Designated Education Office (see paragraph 5.n.), and the VHA Contracting Officer (see paragraph 5.p.).

e. This VHA directive updates the requirements for VA Form 10-263 (see Appendix B).

3. RELATED ISSUES: VHA Directive 1131(5), Management of Infectious Diseases and Infection Prevention and Control Programs, dated November 7, 2017, and VHA Directive 1192.01, Seasonal Influenza Vaccination Program for VHA Health Care Personnel, dated August 10, 2020.

4. RESPONSIBLE OFFICE: The Office of Occupational Safety and Health (19HEFB) is responsible for the contents of this VHA directive. Questions may be referred to the COVID-19 Resource Room at <https://dvagov.sharepoint.com/sites/VHAOHT/SP-Directory/COVID-19%20Response%20Team/Lists/RR/Item/newifs.aspx>. **NOTE:** *This is an internal VA website that is not available to the public.*

5. RESCISSIONS: VHA Directive 1193(1), COVID-19 Vaccination Program for Title 38 Health Care Personnel, dated July 27, 2021 is rescinded.

6. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of August 2026. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

**BY DIRECTION OF THE OFFICE OF
THE UNDER SECRETARY FOR HEALTH:**

/s/ Renee Oshinski
Assistant Under Secretary for Health
for Operations

NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

DISTRIBUTION: Emailed to the VHA Publications Distribution List on August 13, 2021.

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CORONAVIRUS DISEASE 2019 VACCINATION PROGRAM FOR VETERANS HEALTH ADMINISTRATION HEALTH CARE PERSONNEL

1. PURPOSE

This Veterans Health Administration (VHA) directive establishes policy and provides guidance for the prevention of coronavirus disease 2019 (COVID-19) in VA medical facilities through the vaccination of VHA HCP **AUTHORITY:** 38 U.S.C. §§ 7301(b), 7318(b), 7421 and OPM approved variation to the requirements of 5 CFR 339.205, approval letter dated August 11, 2021. **NOTE:** *VHA Directive 1193(1), COVID-19 Vaccination Program for VHA HCP, dated July 27, 2021 is no longer valid. This policy, VHA Directive 1193, replaces the July 2021 publication.*

2. BACKGROUND

a. The emergence of SARS-CoV-2, the virus that causes COVID-19, has led to a global pandemic with dramatic societal and economic impact on individual persons and communities since late 2019. To combat this ongoing global health threat, and to reduce the risk of symptomatic laboratory-confirmed COVID-19, hospitalization due to COVID-19, and associated deaths, the Centers for Disease Control and Prevention (CDC) and its Advisory Committee on Immunization Practices (ACIP) recommends everyone 12 years of age and older receive a COVID-19 vaccination.

b. Recognized modes of SARS-CoV-2 transmission are via inhalation of very small droplets and aerosol particles that contain infectious virus, deposition of virus carried in exhaled droplets and particles onto exposed mucous membranes, and touching mucous membranes with hands soiled by exhaled respiratory fluids containing virus or from touching inanimate surfaces contaminated with virus. Some of these modes are similar to other respiratory pathogens that cause severe acute viral respiratory syndromes. Very small droplets and aerosol particles can land in the mouths or noses of people who are approximately 3 to 6 feet away from an infected person or possibly be inhaled into the lungs.

c. Moreover, the Occupational Safety and Health Administration's (OSHA) Emergency Temporary Standard for workplace safety against COVID-19 embraces vaccination by facilitating access to vaccination and requiring employers to provide reasonable time and paid leave for employee vaccinations and any side effects. It also exempts some well-defined areas of health care workplaces, where all employees are fully vaccinated, from some requirements of the standard.

NOTE: *OSHA's Emergency Temporary Standard is available at:*
<https://www.osha.gov/coronavirus/ets>.

d. The advent of vaccines does not eliminate the grave danger from exposure to SARS-CoV-2 in workplaces where some members of the workforce are not fully vaccinated. In fact, VHA community living centers (CLCs), without fully vaccinated staff introduce a potentially significant source of SARS-CoV-2 infections leading to ongoing viral transmission among vulnerable populations in the CLCs. In addition, transmission

of circulating viral variants raises public health concerns that hospitalization rates will rise, along with serious or fatal outcomes for those who contract COVID-19.

e. As of August 10, 2021, there have been 283,400 cases of COVID-19 in VA, and 12,909 known deaths. Greater than 21,500 of these COVID-19 cases have occurred among VA staff. During the same period, over 301,000 employees and other health care personnel in VHA have been vaccinated against COVID-19.

NOTE: VA COVID-19 National Summary is available at:
<https://www.accesstocare.va.gov/Healthcare/COVID19NationalSummary>.

f. Society and professional norms set the expectation that HCP “do no harm” to the patients they treat and serve. Employees of VA work to serve Veterans as part of the health care system and have a duty to protect their colleagues and the HCP with whom they may interact. This expectation can reasonably be applied to all health care staff in interactions with their colleagues such that employees of VA who work to serve Veterans as part of the health care system also have a duty to protect their colleagues. Accordingly, employees must take every reasonable step to prevent transmission of SARS-CoV-2 in VA medical facilities. Among other prevention efforts, which may include masking, social distancing, respiratory etiquette, and hand hygiene, vaccination against COVID-19 is fundamental to the prevention of COVID-19 for both patients and staff, and to the mitigation of transmission of this virus among susceptible populations in the workplace.

g. Millions of doses of vaccines have been administered since emergency use authorization by the Food and Drug Administration (FDA), with rigorous and intensive safety monitoring, and rare serious health problems reported after vaccination. All FDA-authorized COVID-19 vaccines prevent nearly all hospitalizations and deaths due to COVID-19.

h. In addition to CDC and ACIP, other preeminent health care organizations, such as the American Medical Association, American Nurses Association, and the American Hospital Association, urge the public to get vaccinated against COVID-19. Moreover, the American College of Physicians strongly encourages vaccination of physicians, other health care professionals, and patients when available. On July 13, 2021, a Multisociety Statement from the leading Infectious Diseases Societies was issued in the Infection Control & Hospital Epidemiology journal recommending that the COVID-19 vaccination should be a condition of employment for all health care personnel.

NOTE: The Multisociety Statement is available at:
<https://www.cambridge.org/core/journals/infection-control-and-hospital-epidemiology/article/multisociety-statement-on-covid19-vaccination-as-a-condition-of-employment-for-healthcare-personnel/690D1804B72FFF89C5FC0AED0043AD62#>.
This website is outside VA control and may not conform to Section 508 of the Rehabilitation Act of 1973.

3. DEFINITIONS

a. **Face Mask.** For the purposes of this directive, a face mask is a disposable surgical, medical procedure, dental, or isolation mask, provided by VHA, that covers the nose and mouth and fits snugly against the sides of face without gaps. Face masks should be worn as outlined in local and national policies.

***NOTE:** Fitted N95 respirators or other respirators are not required by this policy, but they should be used when appropriate to the task (e.g., when caring for a patient on airborne infection isolation precautions); if N95 or higher respirators are used, they also serve the purpose of being considered a face mask for this directive.*

b. **Health Care Personnel.** Healthcare personnel (HCP) refers to all paid and unpaid persons who work in or travel to VHA locations who have the potential for direct or indirect exposure to patients or infectious materials, including body substances (e.g., blood, tissue, and specific body fluids); contaminated medical supplies, devices, and equipment; contaminated environmental surfaces; or contaminated air. These HCP may include, but are not limited to, emergency medical service personnel, nurses, nursing assistants, physicians, technicians, therapists, phlebotomists, pharmacists, health professions trainees (HPTs), contractor personnel, and persons (e.g., clerical, dietary, environmental services, laundry, security, maintenance, engineering and facilities management, administrative, billing, and volunteer personnel) not directly involved in patient care but potentially exposed to infectious agents that can be transmitted from HCP and patients. HCP include all VA licensed and unlicensed, clinical and administrative, paid and without compensation, full- and part-time, intermittent, fee basis employees who are expected to perform any or all of their work at these locations. HCP also includes VHA personnel and contractor personnel providing home-based care to Veterans and drivers and other personnel whose duties put them in contact with patients outside VA medical facilities.

***NOTE:** VA employees who are not part of VHA are not covered by the contents of this Directive.*

c. **Fully Vaccinated.** Individuals are considered fully vaccinated 2 weeks after receipt of the second dose in a 2-dose series, or 2 weeks after receipt of a one-dose series.

d. **VHA Locations.** VHA locations include, but are not limited to, VA medical facilities (hospitals) and associated clinics, community living centers (CLCs), community-based outpatient clinics (CBOCs), domiciliary units, Vet centers and VA-leased medical facilities.

e. **COVID-19 Vaccine.** COVID-19 vaccine is any FDA-approved or authorized, commercially available product recommended by the CDC for the prevention of COVID-19. CDC guidelines should be followed to determine whether individuals who received COVID-19 vaccines that are not approved or authorized by FDA may be considered fully vaccinated.

NOTE: For more information, CDC guidelines are available at:
<https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html#people-vaccinated-outside-us>.

4. POLICY

It is VHA policy that VA medical facilities will implement a mandatory COVID-19 vaccination program by requiring all VHA HCP to receive a COVID-19 vaccination or obtain an exemption for medical or religious reasons. Compliance with this directive is a requirement. VHA HCP in violation of this directive may face disciplinary action up to and including removal from Federal service.

5. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for the overall compliance with this directive.

b. **Assistant Under Secretary for Health for Support Services.** The Assistant Under Secretary for Health for Support Services is responsible for:

(1) Providing oversight to the Office of Occupational Safety and Health (19HEFB) and ensuring that it provides and maintains the resources necessary to implement this directive.

(2) Collaborating with the Assistant Under Secretary for Health for Operations and the Assistant Under Secretary for Health for Quality and Patient Safety to support monitoring, reporting and evaluation of the impact of this directive as guided by the Office of Occupational Safety and Health.

c. **Assistant Under Secretary for Health for Operations.** The Assistant Under Secretary for Health for Operations is responsible for:

(1) Facilitating consistent compliance with this directive across the Veterans Integrated Service Networks (VISNs).

(2) Distributing communications pertaining to implementation, interpretation and evaluation of this directive in coordination with the VHA Office of Occupational Safety and Health.

(3) Collaborating with the Assistant Under Secretary for Health for Support Services and the Assistant Under Secretary for Health for Quality and Patient Safety to support monitoring, reporting and evaluation of the impact of this directive as guided by the VHA Office of Occupational Safety and Health.

d. **Assistant Under Secretary for Health for Quality and Patient Safety.** The Assistant Under Secretary for Health for Quality and Patient Safety is responsible for collaborating with the Assistant Under Secretary for Health for Support Services and the Assistant Under Secretary for Health for Operations to support monitoring, reporting and

evaluation of the impact of this directive as guided by the VHA Office of Occupational Safety and Health.

e. **Director, Office of Occupational Safety and Health.** The Director, Office of Occupational Safety and Health is responsible for:

(1) Ensuring the appointment of Occupational Safety and Health Program Office personnel to implement the requirements of this directive.

(2) Ensuring that adequate resources are provided to implement the requirements of this directive.

f. **Medical Advisor, Office of Occupational Safety and Health.** The Medical Advisor, VHA Office of Occupational Safety and Health is responsible for:

(1) Developing and administering a standardized program to measure VHA HCP vaccination status and rates and compliance with this directive across all VA medical facilities.

(2) Collaborating with the National Center for Health Promotion and Disease Prevention to provide further guidance on policies, procedures, education and training resources for COVID-19 vaccination.

(3) Collaborating with the Office of Analytics and Performance Integration to provide performance measures; oversight and compliance findings; and VHA HCP COVID-19 vaccination data requests.

g. **Clinical Occupational Health Program Manager for Policy Oversight, Office of Occupational Safety and Health.** The Clinical Occupational Health Program Manager for Policy Oversight is responsible for:

(1) Developing and consistently interpreting policies, procedures and guidance for implementation and operation of the COVID-19 vaccination program VHA HCP.

(2) Serving as a liaison among individuals listed in the Responsibilities paragraph (paragraph 5) to provide relevant vaccination program compliance data as relevant to stakeholders.

h. **Clinical Occupational Health Program Manager for Operations, Office of Occupational Safety and Health.** The Clinical Occupational Health Program Manager for Operations is responsible for:

(1) Overseeing the implementation and operation of the COVID-19 vaccination program for VHA HCP, including communicating with VA medical facility and leadership stakeholders about implementation of the program.

(2) Promoting VHA use of existing or improved systems, tools and technologies to manage the documentation and reporting of VHA HCP COVID-19 vaccination.

i. **Veterans Integrated Service Network Director.** Each VISN Director is responsible for:

(1) Ensuring that necessary resources are available to implement and oversee the COVID-19 vaccination program for VHA HCP in the VISN.

(2) Ensuring that all facilities within the VISN participate in oversight activities and measurements prescribed by the VHA Office of Occupational Safety and Health for the purposes of evaluating the COVID-19 vaccination program for VHA HCP.

(3) Reporting to the Director, VHA Office of Occupational Safety and Health, or designee, all metrics prescribed by the VHA Office of Occupational Safety and Health for the purposes of evaluating the COVID-19 vaccination program for VHA HCP.

j. **VA Medical Facility Director.** Each VA medical facility Director is responsible for:

(1) Ensuring that all aspects of this directive are implemented at their facility.

(2) Ensuring VHA HCP have access to available training or education pertaining to proper use of face masks and other mitigation strategies that reduce the spread of SARS-CoV-2, the virus that causes COVID-19, including how to access face masks, when to wear a mask, the appropriate type of mask to wear, when to replace a mask, and proper disposal of masks, according to local conditions.

(3) Designating an ad-hoc work group to respond to questions and address matters of local implementation and guidance from the VHA Office of Occupational Safety and Health in the form of a VA medical facility ad-hoc workgroup.

(4) Ensuring VA medical facility Employee Occupational Health personnel have the appropriate resources for implementation and operation of the COVID-19 vaccination program.

(5) Ensuring all VHA HCP are notified of the requirement to participate in the COVID-19 vaccination program, as described in Appendix A.

(6) Reporting to the VISN Director all metrics prescribed by the VHA Office of Occupational Safety and Health for the purposes of evaluating the COVID-19 vaccination program.

(7) Ensuring VHA HCP have access to information on: the existence, role, and procedures related to the VHA facility ad-hoc workgroup of subject matter experts; the current CDC Vaccine Information Statement (VIS) or Emergency Use Authorization Fact Sheet for Recipients and Caregivers; the package inserts for COVID-19 vaccines used by the VA medical facility; and COVID-19 vaccine including vaccinator and handler training.

(8) Addressing non-compliant VHA HCP, in conjunction with the supervisor and Chief Human Resources Officer, as necessary.

k. **VISN Chief Human Resources Officer.** The Chief of Human Resources Officer at each VISN is responsible for:

(1) Notifying all prospective employees of the requirement to participate in the COVID-19 vaccination program. (See Appendix B and <https://vaww.va.gov/vaforms/>. **NOTE:** *This is an internal VA website that is not available to the public. To access the form, type VA Form 10-263 into the search bar.*)

(2) Aggregating and reporting all administrative actions resulting from violations of this directive to each VISN Director as prescribed by the VHA Office of Occupational Safety and Health for the purposes of evaluating the COVID-19 vaccination program.

l. **VA Medical Facility Employee Occupational Health Staff.** Employee Occupational Health staff at each VA medical facility is responsible for:

(1) Ensuring appropriate entry and maintenance of all documentation involving vaccination or exemption by all VHA HCP in accordance with VA Handbook 5019, Employee Occupational Health Service, August 3, 2017.

(2) Formulating and communicating the local process for secure receipt of documentation involving vaccination or exemption by VHA HCP.

(3) Documenting and monitoring COVID-19 vaccination compliance of all VHA HCP and identifying to the VA medical facility executive leadership those individuals who have not signed and submitted the Health Care Personnel COVID-19 Vaccination Form, VA Form 10-263 (Appendix B) within 8 weeks of publication of this directive.

NOTE: *VA Medical Facility Employee Occupational Health staff may not identify individuals according to their vaccination status or otherwise indicate whether an individual has been vaccinated unless that individual has provided a qualifying authorization permitting the disclosure on VA Form 10-5345 Request for and Authorization to Release Health Information. Questions should be referred to the local Privacy Office.*

(4) Aggregating, analyzing and reporting to the VA medical facility Director all metrics prescribed by the Office of Occupational Safety and Health for the purposes of evaluating the COVID-19 vaccination program.

m. **Chief, Voluntary Service.** The Chief, Voluntary Service or other designated official at each VA medical facility is responsible for:

(1) Notifying all current and prospective volunteers about the COVID-19 vaccination program's vaccination requirement and providing them with information about how to comply with this directive.

(2) Providing and updating the roster of volunteers for VA medical facility Employee Occupational Health.

(3) Counseling those volunteers who are not compliant with the requirements set by this directive and implementing actions determined by the VA medical facility Director or designee for volunteers found to be in violation of this directive.

n. **VA Medical Facility Designated Education Officer (DEO) or Designee**. The DEO or his/her designee at each VA medical facility is responsible for all facility HPTs and:

(1) Ensuring through the Trainee Qualifications and Credentials Verification Letter (TQCVL) process that each academic affiliate, appropriate training program official and HPT is aware of the VHA COVID-19 vaccination program requirements stated below.

NOTE: The TQCVL guide is available at: <https://www.va.gov/oa/deo.asp>. For information on local implementation of the TQCVL process, contact the VA medical facility DEO.

(2) Receiving and maintaining trainee compliance certification via the TQCVL for all HPTs including paid and without compensation.

(3) Communicating with the academic affiliate and appropriate individuals at the VA medical facility about the necessity of HPT compliance with this policy.

(4) Monitoring trainee compliance and documentation is the responsibility of the Designated Education Officer.

o. **VHA Health Care Personnel**. VHA HCP are required to comply with this directive by:

(1) Receiving a complete COVID-19 immunization series or obtaining an exemption for medical or religious reasons.

(2) Submitting the Health Care Personnel COVID-19 Vaccination Form, VA Form 10-263 (Appendix B) to Employee Occupational Health.

(a) If a VHA HCP is vaccinated at a VHA location, by VHA EOH, they are not required to complete and submit VA Form 10-263 to EOH.

(b) If a VHA HCP is vaccinated outside of EOH and has submitted acceptable and complete documentation of vaccination, as prescribed in Appendix A, to EOH, they are not required to complete and submit VA Form 10-263 to EOH.

(c) If a VHA HCP is vaccinated outside of EOH, but has not submitted acceptable and complete documentation of vaccination, as prescribed in Appendix A, to EOH, they must complete and submit VA Form 10-263 to EOH with all required documentation and within the timelines as prescribed in this directive.

NOTE: Acceptable documentation includes a signed record of immunization from a health care provider or pharmacy, a copy of the COVID-19 Vaccination Record Card

(CDC Form MLS-319813_r, published on September 3, 2020), or a copy of medical records documenting the vaccination.

(d) If a VHA HCP is exempt from COVID-19 vaccination for medical or religious reasons, they must complete the COVID-19 Vaccination VA Form 10-263 (Appendix B), declaring the exemption and acknowledging the requirement to wear a face mask when under conditions in the work environment described (See Appendix A, paragraph 5.a and Appendix B).

The VA Form 10-263 is available at: <https://vaww.va.gov/vaforms/> and <https://www.va.gov/find-forms/>. **NOTE:** The first link is an internal VA website that is not available to the public. To access the form, type VA Form 10-263 into the search bar.

(3) Wearing a face mask as described in Appendix A of this directive before they are fully vaccinated as defined in paragraph 3 and when they have been granted an exemption to COVID-19 vaccination as defined in Appendix A.

NOTE: Compliance with this directive is a requirement. VHA HCP in violation of this directive may face disciplinary action up to and including removal from Federal service.

p. **VHA Contracting Officers.** Contracting Officers shall ensure all HCP contracts require compliance with this directive. VA contracting officers responsible for HCP contracts will notify the contractors about this directive and its requirements.

6. REFERENCES

a. 38 U.S.C. §§ 7301(b), 7318(b), 7421.

b. 29 C.F.R. 1910.

c. VA Handbook 5019, Employee Occupational Health Service, dated August 3, 2017.

d. VA Form 10-263, COVID-19 Vaccination: <https://vaww.va.gov/vaforms/> and <https://www.va.gov/find-forms/>. **NOTE:** The first link is an internal VA website that is not available to the public. To access the form, type VA Form 10-263 into the search bar.

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o. CDC. Post Vaccine Considerations for Residents: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/post-vaccine-considerations-residents.html>.

p. CDC. Wallace M, Woodworth KR, Gargano JW, et al. The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine in Adolescents Aged 12–15 Years — United States, May 2021. MMWR Morb Mortal Wkly Rep 2021;70:749–752: https://www.cdc.gov/mmwr/volumes/70/wr/mm7020e1.htm?s_cid=mm7020e1_w.

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cc. Nguyen et al. Risk of COVID-19 among front-line health-care workers and the general community: a prospective cohort study. Lancet. 1 September 2020. Accessed 9 Nov 2020 at [https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667\(20\)30164-X/fulltext](https://www.thelancet.com/journals/lanpub/article/PIIS2468-2667(20)30164-X/fulltext). **NOTE:** *This website is outside VA control and may not conform to Section 508 of the Rehabilitation Act of 1973.*

PROCEDURES FOR IMPLEMENTING THE COVID-19 VACCINATION PROGRAM AT VHA LOCATIONS

1. NOTIFICATION OF MANDATORY COVID-19 VACCINATION AMONG HEALTH CARE PERSONNEL IN THE VETERANS HEALTH ADMINISTRATION

a. VA medical facility executive leadership or designee and the VISN Chief Human Resources Officer, Chief, Voluntary Service, and the Designated Education Officer, will notify all VHA HCP that they are required to participate in the COVID-19 vaccination program. HPTs will be notified through their respective programs.

b. Each VA medical facility shall provide no less than two such notifications within 4 weeks after publication of this directive, including that VHA HCP in violation of this directive may face disciplinary action up to and including removal from Federal service.

c. Human Resources will notify prospective employees who begin work after publication of the mandatory COVID-19 vaccination program in their initial appointment/orientation documents.

d. VHA HCP can contact the VA medical facility ad hoc workgroup of subject matter experts regarding matters of local implementation and application of procedures and guidelines of this directive.

2. VACCINE PROGRAM COMPLIANCE

a. All VHA HCP must, within 8 weeks of publication of this Directive, or for applicants, within 8 weeks of beginning employment:

(1) Receive a complete COVID-19 vaccine series, or, if exempt from vaccination, wear a face mask as prescribed in this Appendix.

(2) Sign and submit to the VHA Employee Occupational Health (EOH) staff the COVID-19 Vaccination VA Form 10-263 (Appendix B) as required below:

(a) If a VHA HCP is vaccinated at a VHA location, by VHA EOH, they are not required to complete and submit VA Form 10-263 to EOH.

(b) If a VHA HCP is vaccinated outside of EOH and has submitted acceptable and complete documentation of vaccination, as prescribed in Appendix A, they are not required to complete and submit VA Form 10-263 to EOH.

(c) If a VHA HCP is vaccinated outside of EOH, but has not submitted acceptable and complete documentation of vaccination, as prescribed in Appendix A, to EOH, they must complete and submit VA Form 10-263 to EOH with all required documentation and within the timelines as prescribed in this directive.

NOTE: Acceptable documentation includes a signed record of immunization from a health care provider or pharmacy, a copy of the COVID-19 Vaccination Record Card

(CDC Form MLS-319813_r, published on September 3, 2020), or a copy of medical records documenting the vaccination.

(d) If a VHA HCP is exempt from COVID-19 vaccination for medical or religious reasons, they must complete the COVID-19 Vaccination VA Form 10-263 (Appendix B), declaring the exemption and acknowledging the requirement to wear a face mask when under conditions in the work environment described as outlined in national VHA guidance (See Appendix A, paragraph 5.a and Appendix B).

The VA Form 10-263 is available at: <https://vaww.va.gov/vaforms/> and <https://www.va.gov/find-forms/>. **NOTE:** The first link is an internal VA website that is not available to the public. To access the form, type VA Form 10-263 into the search bar.

(3) Vaccination of VHA HCP begins when the vaccine becomes available. While vaccine may continue to be available through VA, after publication of this directive, any unvaccinated VHA HCP must follow the procedures listed in paragraph 5 of this Appendix.

(4) New VHA HCP are required to participate in the COVID-19 vaccination program. New VHA HCP must wear a face mask until they are fully vaccinated as defined in this directive. New VHA HCP must complete a COVID-19 vaccination series or seek an exemption within 8 weeks of beginning employment.

(5) Monitoring compliance and documentation of HPT compliance with this directive is the responsibility of the DEO via the Trainee Qualifications and Credentials Verification Letter (TQCVL) process. However, VA may choose to offer vaccine to HPTs, and must document vaccinations of HPTs using the same process used for VHA HCP.

3. EXEMPTIONS

VHA HCP may request exemption from receiving the COVID-19 vaccine only for medical or religious reasons as prescribed in this directive. In such cases, VHA HCP must complete the COVID-19 Vaccination VA Form 10-263 (Appendix B), declaring the exemption and acknowledging the requirement to wear a face mask when under conditions in the work environment described as outlined in national VHA guidance. (See Appendix A, paragraph 5.a and Appendix B.) The confidential nature of Personally Identifiable Information (PII) and Protected Health Information (PHI) must be protected as required by statute, regulation, and VA and VHA policies.

a. Medical Exemption.

If VHA HCP decline to receive the COVID-19 vaccine because of a medical contraindication, they must complete the COVID-19 Vaccination VA Form 10-263 (Appendix B) declaring an exemption for medical contraindication, with a personal physician's signature and National Provider Identification number. The reasons for contraindication must be recognized contraindications and precautions by the Centers

for Disease Control and Prevention, found here: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F covid-19%2Finfo-by-product%2Fclinical-considerations.html at the link “Contraindications and precautions.” VHA HCP must obtain their immediate supervisor’s signature on the VA Form 10-263 (Appendix B) but need not disclose the reason for medical contraindication to their supervisor. VHA HCP must submit the completed VA Form 10-263 (Appendix B) to the VA medical facility Employee Occupational Health staff within 8 weeks of publication of this directive.

NOTE: *VA medical facility Employee Occupational Health staff may not identify individuals according to their vaccination status or otherwise indicate whether an individual has been vaccinated unless that individual has provided a qualifying authorization permitting the disclosure on VA Form 10-5345 Request for and Authorization to Release Health Information. Questions should be referred to the local Privacy Office.*

b. Religious Exemption.

If VHA HCP decline to receive the COVID-19 vaccine because of a deeply held religious belief, they must complete the COVID-19 Vaccination VA Form 10-263 (Appendix B) declaring an exemption for deeply held religious belief. VHA HCP must obtain their immediate supervisor’s signature on the VA Form 10-263 (Appendix B), but VHA HCP need not disclose the religious reason to their supervisor. VHA HCP must submit the completed VA Form 10-263 (Appendix B) to the facility Employee Occupational Health staff within 8 weeks of publication of this directive.

NOTE: *VHA medical facility Employee Occupational Health staff may not identify individuals according to their vaccination status or otherwise indicate whether an individual has been vaccinated unless that individual has provided a qualifying authorization permitting the disclosure on VA Form 10-5345 Request for and Authorization to Release Health Information. Questions should be referred to the local Privacy Office.*

4. DOCUMENTATION

a. When the VHA HCP is vaccinated in Employee Occupational Health, the person administering the vaccine, Employee Occupational Health staff or designee, must document the vaccination in accordance with VA Handbook 5019, Employee Occupational Health Service, August 3, 2017, or as directed by VHA’s Office of Employee Occupational Health.

b. When the VHA HCP is vaccinated outside of VHA Employee Occupational Health, the VHA HCP must complete VA Form 10-263 according to the requirements listed in Appendix A, Paragraph 2.a.(2). VHA Employee Occupational Health maintains VA Form 10-263 (Appendix B) as applicable per the aforementioned requirements. Acceptable and complete documentation verifying vaccination (with information on vaccine name,

date of administration, and name of health care professional or clinic site administering vaccine) must also be delivered to Employee Occupational Health, accompanying VA Form 10-263 as applicable in the requirements in Appendix A, Paragraph 2.a.(2).

NOTE: VA medical facility Employee Occupational Health staff may not identify individuals according to their vaccination status or otherwise indicate whether an individual has been vaccinated unless that individual has provided a qualifying authorization permitting the disclosure on VA Form 10-5345 Request for and Authorization to Release Health Information. Questions should be referred to the local Privacy Office.

5. MASKING FOR UNVACCINATED VHA HEALTH CARE PERSONNEL

a. VHA HCP who do not receive COVID-19 vaccination due to medical or religious exemptions must designate this on VA Form 10-263 (Appendix B) and wear a face mask while in any VA medical facility, including both clinical and non-clinical areas. In addition, unvaccinated VHA HCP are required to wear a face mask during performance of their assigned duties and responsibilities, as outlined in local conditions.

b. The face mask must be worn until the individual is considered fully vaccinated for COVID-19 and completes VA Form 10-263 (Appendix B).

NOTE: Local policy may require that all individuals wear a face mask, regardless of vaccination status, if a risk of transmission of SARS COV-2 exists.

c. VHA HCP may remove their face mask only in accordance with VHA masking guidance.

d. Face masks will be made available at VA medical facilities and distributed per local conditions. A face mask must be replaced when it becomes wet, visibly soiled, torn, or damaged. Alternatives to face masks may be considered under limited conditions with the guidance of infection control professionals.

6. VHA HEALTH CARE PERSONNEL IN VIOLATION OF THIS DIRECTIVE

a. VHA HCP will be in violation of this directive if they:

(1) Have not, within 8 weeks of publication of this directive:

(a) Received a complete COVID-19 vaccine series; OR

(b) Requested an exemption from vaccination, AND

(2) Have not, within 8 weeks of publication of this directive, completed, signed, and submitted to the VHA facility a completed Employee Occupational Health staff the COVID-19 Vaccination VA Form 10-263 (Appendix B) and accompanying required documentation as applicable. The requirements are as follows:

(a) If a VHA HCP is vaccinated at a VHA location, by VHA EOH, they are not required to complete and submit VA Form 10-263 to EOH.

(b) If a VHA HCP is vaccinated outside of EOH and has submitted acceptable and complete documentation of vaccination, as prescribed in Appendix A, to EOH, they are not required to complete and submit VA Form 10-263 to EOH.

(c) If a VHA HCP is vaccinated outside of EOH, but has not submitted acceptable and complete documentation of vaccination, as prescribed in Appendix A, to EOH, they must complete and submit VA Form 10-263 to EOH with all required documentation and within the timelines as prescribed in this directive.

NOTE: Acceptable documentation includes a signed record of immunization from a health care provider or pharmacy, a copy of the COVID-19 Vaccination Record Card (CDC Form MLS-319813_r, published on September 3, 2020), or a copy of medical records documenting the vaccination.

(d) If a VHA HCP is exempt from COVID-19 vaccination for medical or religious reasons, they must complete the COVID-19 Vaccination VA Form 10-263 (Appendix B), declaring the exemption and acknowledging the requirements to wear a face mask when under conditions as outlined in VHA guidance. (See Appendix A, paragraph 5.a and Appendix B).

The VA Form 10-263 is available at: <https://vaww.va.gov/vaforms/> and <https://www.va.gov/find-forms/>. **NOTE:** The first link is an internal VA website that is not available to the public. To access the form, type VA Form 10-263 into the search bar.

(3) Are required to wear a mask pursuant to paragraph 5 but refuse or fail to wear it as prescribed within the policies and procedures of this directive.

(a) Compliance with this directive is a requirement. VHA HCP in violation of this directive may face disciplinary action up to and including removal from Federal service.

7. VACCINE SHORTAGE CONTINGENCY

In the event of an COVID-19 vaccine shortage, VHA will determine an appropriate distribution plan for the resources available.

COVID-19 VACCINATION VA FORM 10-263

I am a VHA: ___ Employee ___ Volunteer ___ Other (ex: Trainee, Resident, Intern, Fee Basis, or Researcher) Please indicate: _____

CHECK ONE STATEMENT BELOW AND COMPLETE AND SIGN THE LAST SECTION OF THIS FORM PRIOR TO SUBMISSION TO EMPLOYEE OCCUPATIONAL HEALTH:

I have received a complete COVID-19 vaccine series (any required documentation is attached).

I have been granted a medical exemption from receiving the COVID-19 vaccine. I have a contraindication for the COVID-19 vaccine as defined by Centers for Disease Control and Prevention (CDC). The reasons for contraindication must be recognized contraindications and precautions by the CDC, found here: https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F covid-19%2Finfo-by-product%2Fclinical-considerations.html, located under Interim Clinical Considerations for Use or Vaccine Indications). This has been discussed and acknowledged by my personal physician. I understand that by declining to receive the vaccine within eight weeks of publication of this directive, or within eight weeks of beginning employment, I must wear a face mask according to requirements and guidelines within VHA Directive 1193, Coronavirus Disease 2019 Vaccination Program for VHA Health Care Personnel.

Printed Physician Name and Address

Physician Signature Date National Provider Identification Number

Supervisor Signature Date Supervisor Email

I notified my immediate supervisor in writing that I have a deeply held religious belief that prevents me from receiving the COVID-19 vaccine. I understand that by declining to receive the vaccine within eight weeks of publication of this directive, or within eight weeks of beginning employment, I must wear a face mask according to requirements and guidelines within VHA Directive 1193, Coronavirus Disease 2019 Vaccination Program for VHA Health Care Personnel.

Supervisor Signature Date Supervisor Email

I have read and fully understand the information on this form and have been given the opportunity to have my questions answered. I understand that violation of the directive may result in disciplinary action up to and including removal from Federal service.

Name (print): _____ Last 4 SS# _____

Dept./Serv: _____

Employee Signature: _____ Date: _____

Employees and volunteers provide this form to the VHA facility Employee Occupational Health Office. Secure electronic submission is permissible.

Health Professions Trainees requesting medical or religious exemptions provide this form to the Designated Education Officer (DEO); and proof of vaccination is provided to the DEO via the Trainee Qualifications and Credentials Verification Letter (TQCVL).