



Influenza (Flu) Vaccine Upload Process

University of California Influenza vaccine requirement: According to the “Seasonal Influenza Vaccination Program” attachment within the [UC Policy on Vaccination Programs](#), **all covered students, faculty, other academic appointees, and staff are required to get vaccinated against influenza or opt out annually.**

Process through Enterprise Health for Faculty and Staff

Influenza (Flu) Vaccine Upload Process:

Starting on October 16, 2024, Staff and Faculty will have access to the [Enterprise Health](#) record system. Staff and Faculty can log into the portal via standard campus multifactor authentication (MFA). This secure system is isolated to only information provided by the employee and does not connect to other health records an employee may have at other healthcare locations.

Staff and Faculty will receive an automated email from noreply@enterprisehealth.com with the subject line: **REMINDER TO REVIEW NOTIFICATIONS**, instructing you to complete the vaccine reporting requirements through the Employee Medical Record (EMR) portal

Reminder to Review Notifications



noreply@enterprisehealth.com
To: [Redacted]

Reply Reply All Forward ...

Wed 10/16/2024 4:54 AM

You don't often get email from noreply@enterprisehealth.com. [Learn why this is important](#)



This message is sent from an un-monitored mailbox, therefore please do not reply to this message

Reminder to Review Notifications

TO: [Redacted]

You have activities available for you to take advantage of.

The following questionnaire(s) are due:

- UCR Influenza Vaccine Reporting - Due: 12-16-2024
- UCR COVID Vaccine Reporting - Due: 12-16-2024

[Click here to visit the employee Portal to complete these activities.](#)

If you have any additional questions regarding this notification, please contact Health Services.

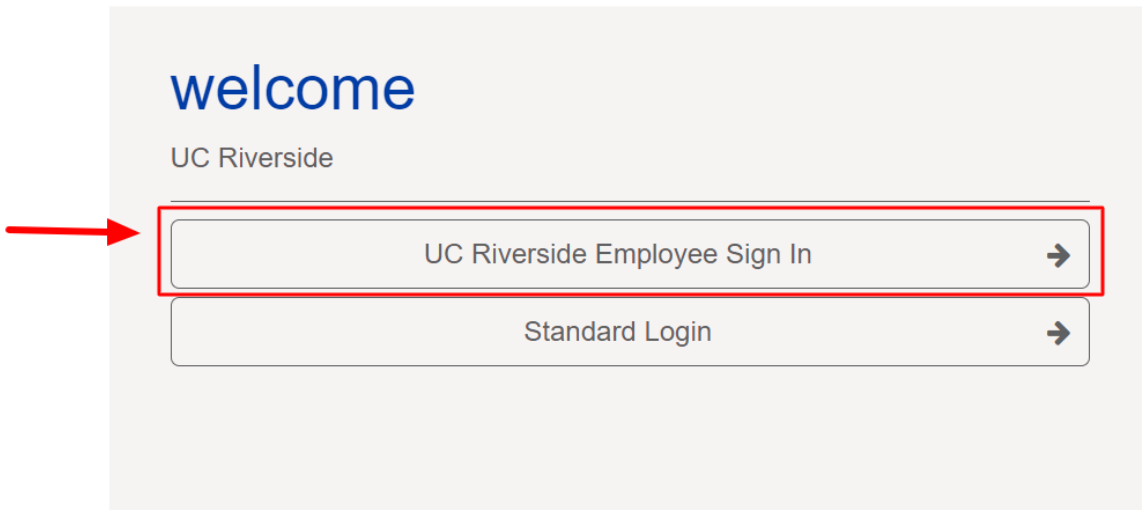
We thank you for your cooperation.

(000) 000-0000

CONFIDENTIALITY NOTICE:

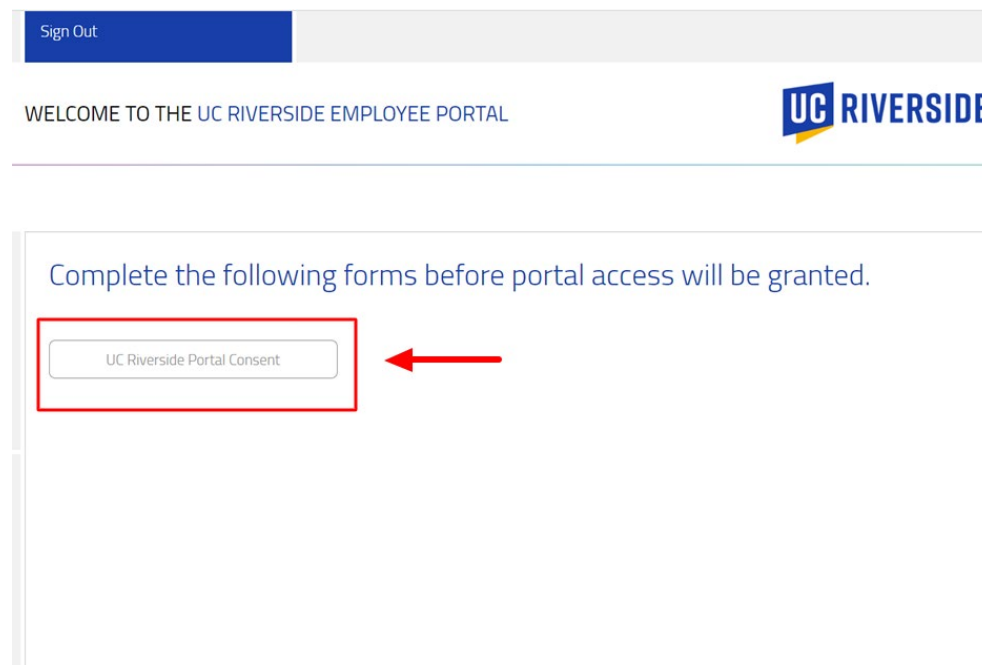
This E-mail and any attachments are confidential and may be protected by legal privilege. If you are not the intended recipient, be aware that any disclosure, copying, distribution, or use of this E-mail or any attachment is prohibited. If you have received this E-mail in error, please notify us immediately by returning it to the sender and delete this copy from your system. Thank you.

Step 1: Login to the [Employee Medical Record Portal: Enterprise Health](#) using your UCR credentials. **Click** the “UC Riverside Employee Sign In” button.



For assistance please contact Occupational Health Services 951-827-5528


Step 2: First time users will be prompted to **Click** the *UC Riverside Portal Consent Form* button.



Step 3: Review the UC Riverside Portal Consent Form

- Acknowledge the Data Consent portion by typing in your legal name within the open field text box.
- Review the SMS Opt-In Agreement and make a selection.
- Review the Telehealth Consent portion and make a selection.
- Click the Submit button.

[Sign Out](#)

UC RIVERSIDE PORTAL CONSENT (1/1)


Data Consent

You are about to access personal health information. This system should only be accessed by authorized users. By logging in and accessing this information, you acknowledge that you are doing so in accordance with the University of California, Riverside (UCR) policies and procedures. You agree you will only access or attempt to access that information necessary to perform your role. You also agree that you will treat this information as confidential and follow all UCR and UCR Health policies and procedures intended to protect the privacy of such confidential information. Access to this system is monitored and you will be held accountable for any activity on your login. I agree to the terms above.*

Acknowledge - Please type your legal name in the box *

By providing your mobile phone number and opting in to receive SMS messages from UCR Occupational Health, you acknowledge and agree to the following terms: 1. Consent to Receive SMS Messages: You voluntarily provide your mobile phone number and give consent to receive SMS messages from UCR Occupational Health. These messages may include transactional information, updates, alerts, and other relevant communications. 2. Message and Data Rates: You understand and acknowledge that message and data rates may apply to any SMS messages sent or received. These charges may be imposed by your mobile service provider or carrier, and you are solely responsible for any such charges. 3. Opt-Out Option: At any time, you have the right to opt-out of receiving SMS messages from UCR Occupational Health. You can do so by replying to the SMS message with the word "STOP" or by contacting our customer support. 4. Privacy and Data Usage: UCR respects your privacy and will handle any personal information collected in accordance with applicable laws and regulations. We may collect and process your mobile phone number and other relevant data to send SMS messages and improve our services. 5. Frequency of Messages: You acknowledge that the frequency of SMS messages may vary depending on the nature of the communication and your interaction with UCR Occupational Health. 6. Updates and Modifications: UCR Occupational Health reserves the right to update or modify these terms at any time. You will be notified of any material changes, and continued use of the SMS messaging service after such changes will constitute your acceptance of the revised terms.

SMS Opt-In Agreement

Do you consent to opt-in to receive SMS messages? By agreeing, you confirm that you have read, understood, and agreed to all the terms outlined in this agreement. You may opt-out at any time by replying STOP via text message or by opting-out on the portal. *

Telehealth Consent

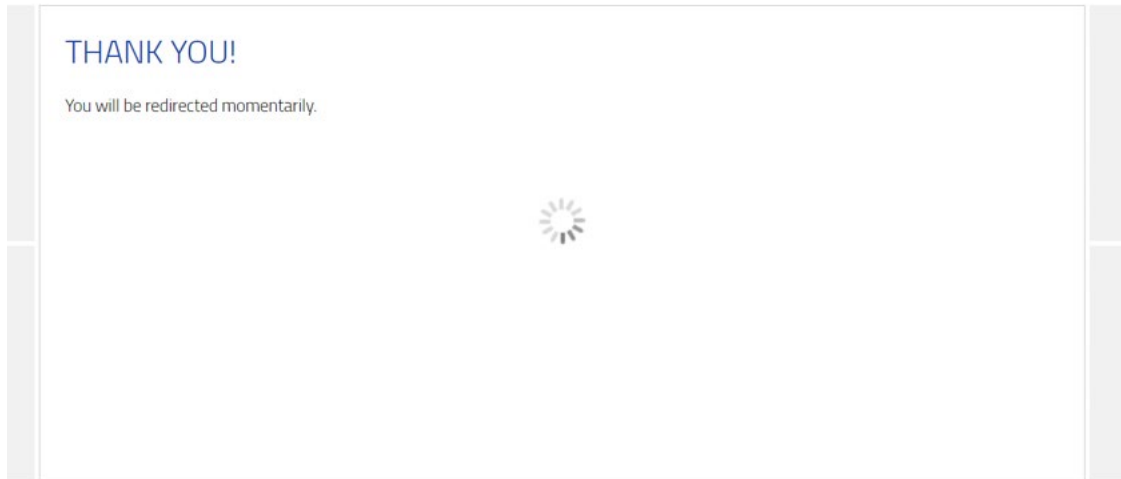
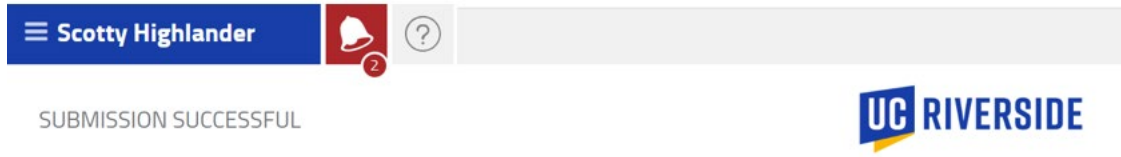
The federal government has authorized covered healthcare providers to use popular video chat applications for telehealth services without the risk of penalties from OCR for noncompliance with HIPAA rules. This flexibility applies to the good faith provision of telehealth during the COVID-19 nationwide public health emergency. However, it is important to note that these third-party applications may introduce potential privacy risks. Therefore, telehealth software utilized during any electronic visit should ensure that all available encryption and privacy settings are fully enabled when using such applications.

Do you consent to use your phone during an electronic visit with a healthcare provider, understanding that the conversation will be recorded for documentation and reimbursement? You will be required to receive SMS (text) messages to participate. Message and data rates may apply. *

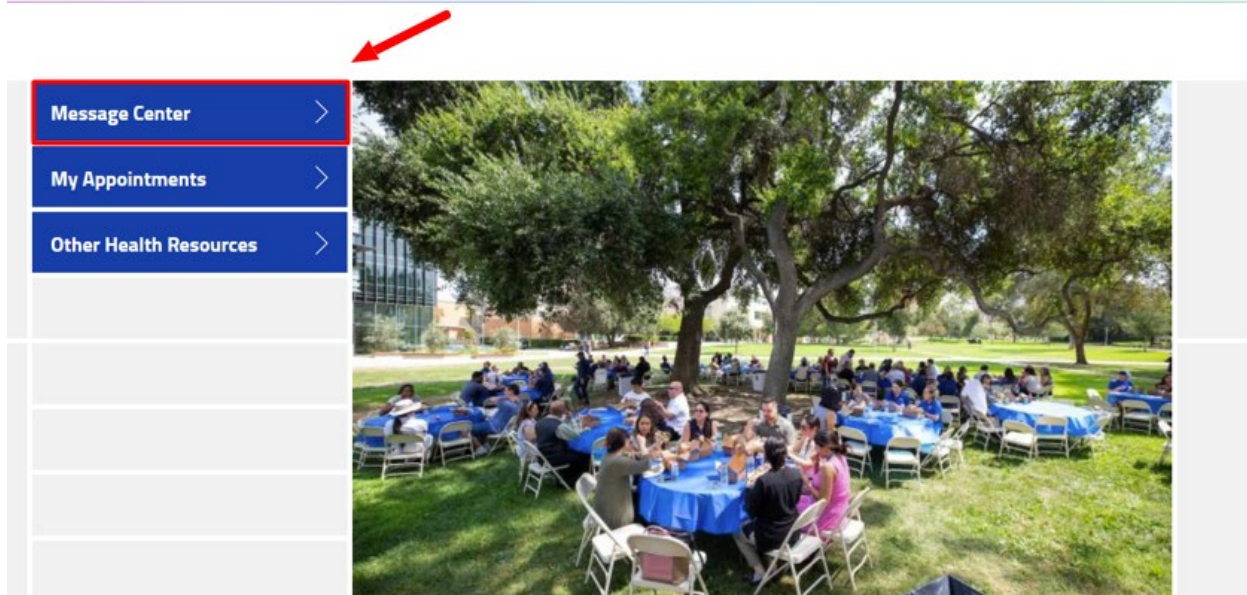
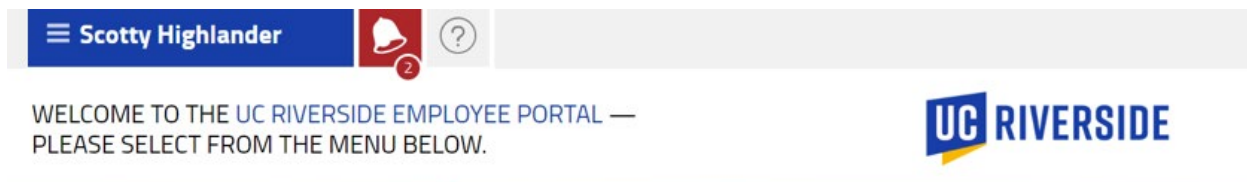
* indicates required information

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After hitting submit, the page will automatically redirect you to the home screen momentarily.



Step 4: Within the Home Screen, Click the “Message Center” button to open a questionnaire.



Step 5: Locate the “UCR Influenza Vaccine Reporting is due” questionnaire and click the “Begin” button to open the questionnaire.

The screenshot shows a user interface for a message center. At the top, there is a navigation bar with the name "Scotty Highlander" and a notification bell icon with a red circle containing the number "1". Below this, the text "MESSAGE CENTER" is displayed on the left, and the "UC RIVERSIDE" logo is on the right. The main content area is divided into two sections: "QUESTIONNAIRES" and "MESSAGES".

The "QUESTIONNAIRES" section contains a list of two items:

- The first item is dated "10-11-2024" and has the subject "UCR Influenza Vaccine Reporting is due". To the right of this item is a "begin" button, which is highlighted with a red rectangular box and a red arrow pointing to it.
- The second item is dated "10-11-2024" and has the subject "UC Riverside Portal Consent is completed". To the right of this item is a green checkmark icon followed by the word "completed".

The "MESSAGES" section is currently empty. It features a search bar with the placeholder text "Filter by Subject..." and a "search" button. Below the search bar is a table header with columns: "UNREAD", "DATE", "SENDER", "SUBJECT", and "UNREAD ONLY | SHOW ALL". The text "You have no messages at this time." is centered below the table header.

Step 6: Certify that the foregoing information is true and correct by Typing your legal name within the open field textbox.

The University of California Riverside (UCR) recommends that all members of the community, except those who have medical contraindications, receive a vaccination to protect against influenza (flu) during the current flu season starting September 1st - May 1st. I understand that: 1. According to the <https://www.cdc.gov/flu/season> 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. Flu vaccination in adults substantially reduces the risk of severe illness. By getting vaccinated, a person can also protect those around them, including those who are more vulnerable to serious flu illness.

I certify that the foregoing information is true and correct.
Please type your legal name. *

1. According to the <https://www.cdc.gov/flu/season> 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. Flu vaccination in adults substantially reduces the risk of severe illness. By getting vaccinated, a person can also protect those around them, including those who are more vulnerable to serious flu illness.

2. Influenza is a serious respiratory disease. Each year in the United States, influenza kills thousands of people and causes hundreds of thousands of hospitalizations.

3. Influenza vaccination is recommended to protect our campus staff, faculty and students from influenza, its complications, and death.

4. If I contract influenza, I can shed the virus for 24 hours before any influenza symptoms appear. During the time I shed the virus, I can transmit influenza to others.

5. If I become infected with influenza, even if my symptoms are mild or non-existent, I can spread influenza to others. Symptoms that are mild or non-existent in me can cause serious illness and death to others.

6. I understand that the strains of the virus that cause influenza infection change almost every year and, even if they don't change, my immunity declines overtime. This is why vaccination is recommended every year.

7. I understand that it is impossible to get influenza from the influenza vaccine.

8. The consequences of my refusal to be vaccinated could have life-threatening consequences for my health and the health of everyone with whom I have contact. I am choosing to decline the Influenza (flu) vaccine. I attest that I have read the above information. It's important to note that individuals who are not up-to-date on their vaccines may be subjected to additional NPIs compared to those who are vaccinated.

I acknowledge that: 1. I have read and understand the information provided in this informed refusal. 2. I DO NOT agree to have the vaccine as recommended.

In response to a public health emergency or during a localized outbreak, applicable public health authorities or the UCR Vaccine Authority may require all members of the Location's community to adhere to Non-Pharmaceutical Interventions (NPIs). These NPIs may include, but are not limited to: 1. Wearing face coverings, medical-grade masks, and other protective equipment. 2. Isolation and quarantine measures. 3. Practicing physical and social distancing. 4. Maintaining frequent handwashing and cleaning protocols. 5. Undergoing asymptomatic (surveillance/screening) and symptomatic testing.

Step 7: Complete the vaccination status portion and select “Already Received Vaccine”.

I understand that I can change my mind at any time and get the Influenza vaccine. If you choose to get vaccinated at a later date please upload your Influenza Vaccination Card on this Employee Portal.

Have you received your influenza vaccine this season? * Already Received Vaccine I decline the influenza vaccination AND I agree to the declination statement listed above.

* indicates required information

SUBMIT

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Step 8: Enter the date the vaccine was received. Click the “Submit” button to record your vaccination.

I understand that I can change my mind at any time and get the Influenza vaccine. If you choose to get vaccinated at a later date please upload your Influenza Vaccination Card on this Employee Portal.

Have you received your influenza vaccine this season? * Already Received Vaccine I decline the influenza vaccination AND I agree to the declination statement listed above.

Date recent vaccine was received *



Please upload a copy of your influenza immunization from this season (PNG, PDF or JPG file only).


* indicates required information

SUBMIT

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After clicking submit, the page will automatically refresh and redirect you to the portal Message Center.

☰ **Scotty Highlander**  


SUBMISSION SUCCESSFUL 


THANK YOU!

You will be redirected momentarily.



Once the page is refreshed, you will see that the “UCR Influenza Vaccine Reporting is completed” will state “completed”. You are now compliant with the UC Vaccination Policy regarding the yearly Influenza Program.

☰ **Scotty Highlander**  

MESSAGE CENTER 

QUESTIONNAIRES		▼
10-11-2024	UCR Influenza Vaccine Reporting is completed	✔ completed
10-11-2024	UC Riverside Portal Consent is completed	✔ completed

For any questions or concerns, please email COVID19@UCR.EDU