Workforce COVID-19 Vaccine Frequently Asked Questions from Diplomacy Strong Workforce Update

These vaccine FAQs address information on distribution criteria and considerations. They will be updated as new information becomes available.

General Questions:
1. Is the Department making vaccination mandatory?
2. Why won’t the Department say exactly where the next round of vaccines are going?
3. When can I expect to be vaccinated?
4. How is the Department prioritizing distribution to overseas posts?
5. Will everyone at a given post or domestic facility outside the National Capital Region (NCR) receive the vaccine at the same time?
6. Why have I seen colleagues in the DC area be vaccinated who don’t seem to meet the Department’s considerations for prioritization?

Local Vaccinations:
1. I’m posted overseas. Can I receive a vaccine on the local market?
2. I’m based in the U.S. Can I receive a vaccine outside of the Department?
3. What about locally employed staff (LE Staff)? Are they allowed to take advantage of local vaccine supplies in country?

Family Members and Other Medical Considerations:
1. Will my family members be vaccinated?
2. What about young children?
3. What about pregnant women?
4. Has there been any consideration of vaccinating household members of essential employees based in domestic locations?
5. I have already had COVID-19. Can I still get a vaccine?

PCS, FSI, and Detail Assignments:
1. I’m PCS-ing overseas from a domestic assignment, will I be vaccinated before I go?
2. I’m PCS-ing. If I receive my first dose in the U.S., do I need to stay in the U.S. until I get my second dose, or can I receive it once I get to post?
3. If I am on medevac, R&R, home leave, TDY, etc. when my post gets the vaccine, will it still be available when I return to post?
4. I’m currently a student at FSI, when can I expect to be vaccinated?
5. I’m on a detail assignment in the NCR, how can I ensure that I am accounted for when it comes to vaccine distribution?
6. If an EFM is in CONUS preparing to PCS overseas, will they be vaccinated domestically or depend on vaccination at post?
After Vaccination and Mask Guidelines:

1. I have been vaccinated. Do I have to continue following mask and social distancing guidelines?
2. Do I need to wear a mask in State Department buildings if I am socially distanced (my desk is more than six feet away from my co-worker)?
3. Do I need to wear a mask if I have my own individual office?
4. If I am a domestic employee who has been working remotely, will I be required to return to the workplace on a regular basis after receiving the vaccine?
5. If I am posted overseas and have been mostly working remotely, will I be required to return to the workplace on a regular basis after receiving the vaccine?

General Questions:

1. Is the Department making vaccination mandatory?

   Vaccination is voluntary. The Department will not institute any sort of mandatory vaccination policy. The Department continues to engage Health and Human Services to obtain additional allotments so we can achieve our goal of providing vaccines to every Department direct-hire employee, Eligible Family Member (EFM) overseas, Member of Household (MOH) overseas, Locally Employed Staff member, and contractor who wishes to receive it.

2. Why won’t the Department say exactly where the next round of vaccines are going?

   The Department is committed to being as transparent as possible, while also taking operational security into account. In order to ensure safe passage and distribution of vaccine supplies, there are some instances in which the Department will not be able to share where vaccines have been shipped until after their arrival and distribution. As this is a constantly evolving situation, as soon as MED receives notification of the timing and quantities of each new vaccine allotment to the Department, MED will review the real-time data to make a recommendation to the Under Secretary for Management that takes into account current conditions.

3. When can I expect to be vaccinated?

   It will depend on the timing and quantities of the allotments received by the Department from the Department of Health & Human Services. The Department’s goal is to offer vaccinations to every Department direct-hire employee, Eligible Family Member overseas, Member of Household overseas, Locally Employed Staff member, and contractor who wishes to receive the vaccine. Several variables will impact the next rounds of distribution, including:

   The timing and number of doses received in subsequent allotments: Smaller quantities will limit MED’s ability to distribute in a regional fashion, resulting in difficult decisions on where to distribute vaccines.

   The type of vaccine received and supply chain logistics: Both Pfizer and Moderna vaccines require temperature-controlled thermal shippers utilizing dry ice to maintain -80 and -20 degree Celsius, which makes them difficult to ship. MED must use dedicated charter flights to avoid incurring prohibitive costs. As other vaccines become available, these constraints may be diminished.

   The current security situations at post and potential risk to vaccine shipments.

Updated February 11, 2021
4. How is the Department prioritizing distribution to overseas posts?

A: MED has designed its overseas distribution using seven regional hubs to service overseas posts. This allows shipment of a large quantity of vaccine to a staging location and allows us to maximize the utility of aircraft to transport vaccines to individual posts. This method was chosen to ensure the rapid deployment and safe transport of vaccines, which require temperature-controlled thermal shippers utilizing dry ice to maintain -80 and -20 degree Celsius. For this model to work, there must be a critical mass of vaccine supply to leverage scale in the logistics strategy. In determining which hubs to prioritize, the Department is considering the following clinical metrics:

- Local disease burden as reported by public health authorities;
- Trends in the disease burden, including the severity of infections and transmissibility of a coronavirus strain within a given location;
- Number of cases and deaths reported in mission population;
- Current status of local health care capacity and hospital/ICU bed availability;
- Availability of vaccines to DOS personnel within host nation’s health systems;
- Quality and accessibility of local health care infrastructure; and
- Medevac constraints.

5. Will everyone at a given post or domestic facility outside the National Capital Region (NCR) receive the vaccine at the same time?

For locations outside of the National Capital Region the Department seeks to supply enough vaccine to cover all of the workforce (and overseas EFMs and MOHs) at a given location at the same time rather than sending multiple shipments.

6. Why have I seen colleagues in the DC area be vaccinated who don’t seem to meet the Department’s considerations for prioritization?

As mentioned in the January 4, 2021 Diplomacy Strong message, there were doses remaining from Allotment 1 that needed to be used in a short period of time at the end of December 2020 to ensure all vaccines were used. Bureaus were asked to quickly identify additional recipients able to receive the vaccine on short notice to ensure that all available vaccine was used.

Local Vaccinations:

1. I’m posted overseas. Can I receive a vaccine on the local market?

U.S. personnel are not prevented from seeking out vaccination locally and in their own direct personal capacity, but should not do so without consulting Post’s health unit or RMO first. Please see 21 STATE 2498 for additional information. At the Mission-level, Department approval must be obtained prior to accepting any host nation offer to vaccinate personnel under Chief of Mission authority or provide vaccine to Post. Please see 21 STATE 2498 for additional information.

2. I’m based in the U.S. Can I receive a vaccine outside of the Department?
Yes, employees are not prevented from seeking out vaccination locally and in their own direct, personal capacity. If you have received the vaccine independent of the Department’s allocation, please notify MED at medvams@state.gov to inform future distribution needs.

3. What about locally employed staff (LE Staff)? Are they allowed to take advantage of local vaccine supplies in country?

The Department’s goal is to offer vaccinations to any LE Staff member who wants to receive the vaccine. LE Staff may also obtain vaccinations or other clinical services from the host government in their personal capacity without approval from the Department. The Department encourages LE Staff to make informed decisions about locally offered vaccines and refers personnel with specific questions to Post’s Health Unit or Regional Medical Officer.

Family Members and Other Medical Considerations:

1. Will my family members be vaccinated?

The Department aims to offer vaccinations to Eligible Family Members posted overseas and Members of Household posted overseas. Family members of employees based in the United States cannot be vaccinated through the Department’s allocation.

2. What about young children?

Family members on orders overseas who are age 18 and older (for the Moderna vaccine) and 16 and older (for the Pfizer vaccine) are eligible to be vaccinated. The FDA has not yet approved vaccines for children under the age of 16.

3. What about pregnant women?

Pregnant women should have an individual consultation with MED to make a decision with complete information, but pregnancy is not a preclusion for receiving the vaccine. Please see the CDC’s Vaccination Considerations for People who are Pregnant or Breastfeeding.

4. Has there been any consideration of vaccinating household members of essential employees based in domestic locations?

While the Department would like to offer vaccinations to as many people as possible, family members of employees based in the United States will not be vaccinated through the Department’s allocation because the Department has no legal authority to do so. The Department cannot vaccinate family members domestically unless the vaccination is directly connected with the associated employee’s assignment abroad.

5. I have already had COVID-19. Can I still get a vaccine?

Yes. Because it is unclear at this point how long immunity from a COVID-19 infection lasts, employees who have been infected are still encouraged to be vaccinated when the vaccine becomes available to them. Ideally, those who have been infected should wait 8-12 weeks after infection to be vaccinated. However, you may be vaccinated anytime after the COVID-19 isolation period is over.

Updated February 11, 2021
PCS, FSI, and Detail Assignments:

1. I’m PCS-ing overseas from a domestic assignment, will I be vaccinated before I go?

This will depend on when you are PCS-ing and how much vaccine the Department has received at that time. MED’s goal is to have enough vaccine at the time of the summer transfer season to make receiving the vaccine part of the outbound predeparture process or check-in process at post, but exact allocation amounts will be determined by Health and Human Services. As the Department gets a clearer picture of how much vaccine will be available and when, guidance will be issued and updated accordingly.

2. I’m PCS-ing. If I receive my first dose in the U.S., do I need to stay in the U.S. until I get my second dose, or can I receive it once I get to post?

To ensure that dosages are properly allocated and that you receive the correct second dose, you should plan to receive both injections at the same location.

3. If I am on medevac, R&R, home leave, TDY, etc. when my post gets the vaccine, will it still be available when I return to post?

This will depend on the individual post. Employees are encouraged to be in close contact with their Post Health Unit so that dosages can be allocated and reserved to ensure complete vaccination for the entire post community, including those temporarily out of the country.

4. I’m currently a student at FSI, when can I expect to be vaccinated?

Because the vast majority of FSI training is currently done remotely, FSI students are not included among those who need to enter Department facilities for mission critical work. As more vaccine becomes available and more FSI classes return for in person instruction, the Department will include FSI students in vaccination distribution. Additional guidance will be released as soon as the Department has more information.

5. I’m on a detail assignment in the NCR, how can I ensure that I am accounted for when it comes to vaccine distribution?

Employees should be in contact with the Department bureau EX office of their formal position of assignment (typically through the sending office). Bureaus have received guidance on how to account for employees.

6. If an EFM is in CONUS preparing to PCS overseas, will they be vaccinated domestically or depend on vaccination at post?

MED’s goal is to have enough vaccine at the time of the summer transfer season to make receiving the vaccine for all those on PCS orders (including EFMs) part of the outbound pre-departure process or check-in process at post, but exact allocation amounts will be determined by Health and Human Services. As the Department gets a clearer picture of how much vaccine will be available and when, guidance will be issued and updated accordingly.

Updated February 11, 2021
After Vaccination and Mask Guidelines:

1. **I have been vaccinated. Do I have to continue following mask and social distancing guidelines?**

   Yes. Consistent with the President’s Executive Order (EO) on Protecting the Federal Workforce and Requiring Mask-Wearing, while on-site, all Department personnel must wear a mask and practice physical distancing. Vaccination does not override any of the CDC’s recommendations.

2. **Do I need to wear a mask in State Department buildings if I am socially distanced (my desk is more than six feet away from my co-worker)?**

   Yes. Per the Executive Order and Department guidance, on-duty or on-site federal employees, on-site federal contractors, and other individuals in federal buildings and on federal lands must wear masks, maintain physical distance, and adhere to other public health measures.

3. **Do I need to wear a mask if I have my own individual office?**

   Masks may be removed when an individual is alone in an office with floor to ceiling walls and a closed door or for a limited time when eating or drinking while maintaining distancing, in accordance with CDC guidelines.

4. **If I am a domestic employee who has been working remotely, will I be required to return to the workplace on a regular basis after receiving the vaccine?**

   It is the nature of the work that needs to be performed, not whether the employee has been vaccinated, that determines if an employee will be required to work on site. Consistent with the intent of the Executive Order, the Department remains in a maximum telework posture for the National Capitol Region. For those at domestic facilities outside of the NCR, the Executive Order still applies and facilities should be following the Diplomacy Strong framework.

5. **If I am posted overseas and have been mostly working remotely, will I be required to return to the workplace on a regular basis after receiving the vaccine?**

   Post leadership will determine what work must be performed on site based upon mission needs. Employees should follow Chief of Mission guidance, which will be based on the Diplomacy Strong framework, taking into account the specific circumstances at each post.

**Additional Questions:**

The Department will continue to update these questions as we have more information. Employees are encouraged to check the Diplomacy Strong site for updated guidance. Specific questions not covered by these FAQs may be sent to medvams@state.gov.