

Utah Admin Rule R432-40

Long-term care facility immunization rule guidebook

Updated 2026



Department of Health Population
& Human Services Health

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Utah Admin Rule R432-40

Background

Long-term care facilities present a high risk for the rapid spread of respiratory viruses like influenza and COVID-19. Infections are frequently introduced by staff, visitors, or transfers, leading to severe illness and hospitalizations among vulnerable residents. Vaccination is the most effective defense against severe outcomes.

[Utah Administrative Rule R432-40](#) formalizes immunization best practices for long-term care facilities that mirror ACIP recommendations and the Centers for Medicare & Medicaid Services (CMS) requirements, providing residents and staff with the opportunity to receive recommended vaccinations.



People 65 years and older are at higher risk of developing serious flu complications compared with young, healthy adults... it's estimated that between 70 percent and 85 percent of seasonal flu-related deaths in the United States occur among people 65 years and older, and between about 50 percent and 70 percent of seasonal flu-related hospitalizations have occurred among people in this age group. (CDC 2024)¹

Rule overview and core requirements

Long-term care facilities, defined by Utah Admin Rule R432-40 as nursing care facilities, small health care facilities, assisted living (type I and II), intermediate care facilities for the intellectually disabled, and general acute care hospital swing bed units, must maintain written policies and procedures to complete the following:

1. Offer vaccine opportunities
 - a. Offer influenza vaccines to residents and employees each year during flu season.

- b. Offer COVID-19 vaccines to residents and employees within 3 months of eligibility.
 - c. Offer pneumococcal vaccines to residents who are unvaccinated or due per ACIP recommendations.
 - d. Offer vaccinations even if a person previously claimed an exemption.
- 2. Document records onsite
 - a. Collect resident immunization histories upon admission.
 - b. Maintain employee influenza and COVID-19 vaccination records.
 - c. Record medical contraindications and exemptions for all residents and employees.
- 3. Mandated staff training
 - a. Ensure staff that are responsible for assessing, documenting, and reporting immunization data complete the [online training](#) upon hire.
- 4. Complete annual reporting
 - a. [Submit the annual report](#) by April 30 of each year.

Resident required immunization documentation

Immunization history

At the time of a resident's admission, collect a history of their past immunizations and as required by Utah Admin Rule R432-40, keep those records onsite at the facility.

Those immunization histories will help you determine your residents' vaccination status and which vaccines you must offer them. These records are also necessary to complete the annual immunization report and allows facilities to verify the reported information when requested.

Individual immunization record cards, primary care physician records, the [Utah State Immunization Information System \(USIIS\)](#), the [MyUtah portal](#), military records, pharmacy records, self-reported data, and/or other vaccine provider records can provide you with those immunization histories.



Vaccination protects the person receiving it while creating a stronger shield of protection for everyone around them.

Declined or has not received vaccination

For several reasons, a resident may not have received a specific vaccine, or all recommended vaccinations. Be sure to document the reason why a resident may not be vaccinated including:

1. The resident or representative declined the vaccine.
2. The resident has a medical contraindication to the vaccine.
3. A decision was made to delay the vaccination due to a precaution, such as if the resident has cancer or is ill.



“The vaccine can be administered if the benefit of the vaccine outweighs the risk, the resident or resident representative gives consent, and the resident’s physician approves.” (CMS 2024)²

Employee required immunization documentation

Immunization history

Employees’ annual influenza and COVID-19 vaccination records must be collected and recorded onsite per Utah Admin Rule R432-40. Although Utah Admin Rule R432-40 does not mandate the collection of employees’ complete immunization histories, it is strongly recommended.

Just like having your residents' immunization histories, having your employees' records will help you figure out their vaccination status and which vaccines you need to offer them.

It will also let you know which employees in direct patient care (hands-on, face-to-face contact with residents for diagnosis, treatment, and monitoring) have had the hepatitis B vaccine series per OSHA bloodborne pathogen standard. This is a question asked annually on the LTC facility immunization report, so now not only can you encourage those unvaccinated employees to get the hepatitis B vaccines, but the history will help you complete the report and allow you to verify the reported information when requested.

Declined or has not received vaccination

You must also document in the employee's file if they decline an offered vaccine (influenza or COVID-19) or have a medical contraindication.

Deemed to have offered influenza and COVID-19 employee vaccination

You may report that your facility offered influenza and COVID-19 vaccination if you document that each employee on staff had the opportunity to receive those vaccinations under their existing health plan coverage.

Suppose an employee does not have health plan coverage for influenza and COVID-19 vaccination. In that case, you may document that your facility offered those vaccines to that employee if you document they had the chance to receive those vaccinations at a cost to the employee at or below what is charged by their local health department.

Additional required immunization documentation

Also, per Utah Admin Rule R432-40, facilities must document circumstances beyond their control that prevent them from offering vaccinations, including the lack of vaccine availability if a facility cannot obtain the necessary vaccines. If that is the case, and you can't get the necessary vaccine, you must provide documentation and request an alternative plan from the local health department or DHHS.

Immunization documentation tools

There are several ways, from paper to apps, that can help you either document or collect resident and employee immunization records.

Utah Statewide Immunization Information System (USIIS)

[USIIS](#) is a confidential web-based information system that maintains immunization histories (subject to provider participation) for Utah residents of all ages. Facilities widely use it to generate individual immunization reports and forecasts, as well as batch immunization reports.



The immunization Program has developed a template to track immunization status in long-term care facilities both residents and staff. This Excel spreadsheet may be modified to fit the needs of your facility. Download this template by visiting the [Immunization Program website](#).

Individual immunization record forms

Immunize.org has numerous printable resources including administration record forms, screening checklists, VIS statements, healthcare personnel vaccination recommendations, and more. [Visit the clinical resources tab on their website.](#)

[illegible]

Annual immunization reporting

LTCF immunization report

The annual LTCF immunization report collects the resident and employee immunization data mandated by Utah Admin Rule R432-40. It is a REDCap survey completed online that opens April 1, does not require an ID or password, and **must be completed by April 30**.

Numerous report reminders are sent to all facilities, including a mailed and emailed letter in September and email notification of the reporting period in March. Ensure the facility's administrator's contact information is kept up to date with the Office of Licensing to receive important communications. You can also [update contact information](#) with the Immunization Program.

Key resident information needed to complete the report

- ❖ How many were in your facility between October 1 and March 31
- ❖ How many of those received influenza vaccination during the current flu season
- ❖ How many of those have at any time received pneumococcal vaccination
- ❖ How many of those received COVID-19 vaccination within 3 months of being eligible
- ❖ How many of those declined or have a medical contraindication to any offered vaccines
- ❖ Were their vaccinations, declinations, and medical contraindications recorded
- ❖ Were immunization histories collected and recorded onsite
- ❖ Were they screened for needed vaccinations

Key employee information needed to complete the report

- ❖ How many were employed between October 1 and March 31
- ❖ How many of those received influenza vaccination during the current flu season
- ❖ How many of those received COVID-19 vaccination within 3 months of being eligible
- ❖ How many of those declined or have a medical contraindication to any offered vaccines
- ❖ Were their vaccinations, declinations, and medical contraindications recorded
- ❖ Were their influenza and COVID-19 vaccination records collected and recorded onsite
- ❖ How many of those were in direct contact with residents
 - And of those, how many completed the hepatitis B vaccine series

Common non-compliance categories

Below are the most common categories where facilities struggle or fail Utah Admin Rule R432-40 compliance:

- ❖ Resident immunization histories not collected and recorded upon admission
- ❖ Residents (esp. pneumococcal) and employee vaccination status and needs not assessed
- ❖ Unaware that these vaccines, as outlined by Utah Admin Rule R432-40, are mandated to be offered to residents and employees, even if they have previously claimed an exemption
- ❖ Resident and employee influenza vaccinations, declinations, and medical contraindications are not recorded
- ❖ Resident pneumococcal vaccinations, declinations, and medical contraindications are not recorded
- ❖ The annual immunization report is not completed by the due date

Licensing fines

If the report still needs to be completed by April 21 you will begin to receive reminder emails.

If it is incomplete on May 1, licensing will be informed, and they may assess up to a \$5000 civil money penalty (CMP) for failure to report.

Licensing may first conduct a site visit and provide a new due date for report completion. In the case of continued non-compliance, licensing will determine if a CMP is warranted. If the report is not completed by the final extended due date, licensing will increase the level of non-compliance and reassess the CMP.

Additionally, licensing may assess up to a \$100 CMP per resident or employee who, for reasons under the control of the facility, does not get the offered vaccinations and the facility does not have documentation of a declination or medical contraindication.



Immunization report data

The data collected from the annual LTCF immunization reports are compiled into a summary report. This report and other immunization data for Utah may be viewed on our [website](#).

Employee required training

Utah Admin Rule R432-40 employee training

All employees who are responsible for long-term care facility resident and employee immunization data assessment, documentation, and annual reporting must be given an overview of the immunization reporting requirements at the time of hire and complete the Utah Admin Rule R432-40 online training.

The Utah long-term care facility immunization rule training is an online training that is approximately 30 minutes long.



**Utah long-term care
facility immunization
rule: compliance and
best practices**

It covers all long-term care facility resident vaccination requirements, employee vaccination requirements, and the immunization reporting requirement as outlined in Utah Admin Rule R432-40.

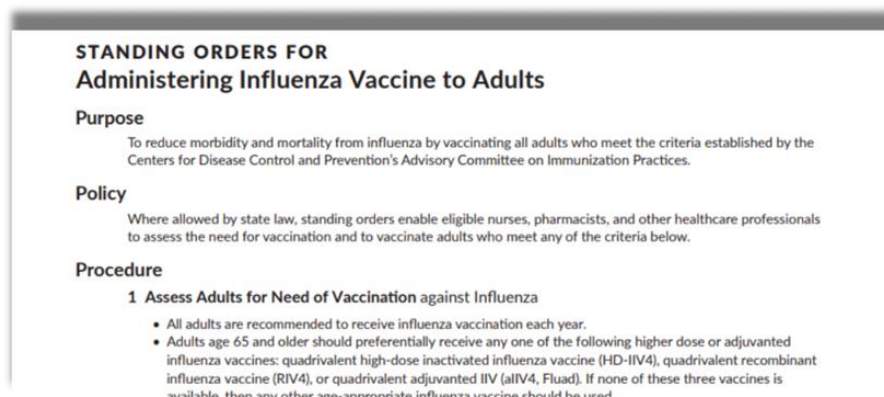
After successfully completing the quiz, a certificate will be provided to download. The certificate MUST be emailed to LTCVaxConnect@utah.gov. Please include the name of the facility you are affiliated with when emailing your certificate. Receiving a copy of the certificate is the only way the Immunization Program will know the training has been completed and mark compliance with the rule.

A copy of the certificate of completion must also be kept in the facility records as proof of compliance if requested.

The training can be accessed by visiting our website's [Long-term care facility immunization required training section](#).

Standing orders

The Utah Admin Rule R432-40 requires standing orders to establish protocols for vaccine management, screening, and documentation for all facilities whose staff administer vaccinations.



Standing orders allow qualified nurses, pharmacists, and other healthcare professionals to determine the need for vaccinations and vaccinate those eligible.

Immunize.org has comprehensive [standing order templates](#) available to download.

Recommended employee immunization policy

Many adults may not be aware of the vaccinations recommended for them. For complete vaccination guidance, see [immunization recommendations](#).

Strong recommendation and encouragement of vaccination is the easiest way to promote prevention and the spread of illnesses that could result in missed work, complications, hospitalizations, or death.

Long-term care facilities should have a recommended employee immunization policy to maximize vaccination rates among their employees, including the hepatitis B series (now universally recommended for all adults 19 to 59 years of age) for those in direct patient care.

High employee vaccination rates decrease their chance of getting vaccine-preventable illnesses that inevitably cause disruptions in the workflow, costs to both the employee and employer, and the spread of disease to other employees and vulnerable residents. Our program has a [Sample LTC employee immunization policy PDF](#) which incorporates compliance with Utah Admin Rule R432-40. This policy will help make sure you do all you can to promote the recommended employee vaccinations. Feel free to download and modify a copy to meet your facility's needs.

[Immunize.org](#) also has a Healthcare Personnel Vaccination Recommendations PDF and other resources you can download and share with staff.

Other successful ways you can use to encourage staff to vaccinate are:

- ❖ Offer a “Vaccination Day” with onsite vaccination clinics that include education.
- ❖ Suggest vaccination locations that are in-network for employees or refer to their local health department for convenient vaccination service.
- ❖ Have fun and friendly vaccination rate competitions between departments.
- ❖ Lead by example—vaccinate administration and managers.

SAMPLE LTC EMPLOYEE IMMUNIZATION POLICY

[Facility/Company Name]		
Policy: ##-##	Page 1 of #	
LTC Employee Immunization Policy		
RATIONALE: Employees of long-term care (LTC) facilities reduce the personal risk of infection and the spread of vaccine-preventable illnesses by ensuring they are up-to-date on all routine and recommended vaccines. Recommendations within this policy follow the Centers for Disease Control (CDC) and Prevention guidelines Recommended Vaccines for Adults: Healthcare Workers , and comply with Utah Admin Rule R432-40, Long-Term Care Facility Immunizations.		
Original Effective: mm/dd/yyyy	Revision: mm/dd/yyyy	Next Review Due: example: 3 years after

DESCRIPTION:
This policy includes [Facility/Company Name]'s responsibilities regarding employee vaccination assessment, employee influenza and COVID-19 vaccination opportunities, handling employee vaccination records, and encouraging all employees to receive and stay up-to-date with recommended and routine vaccines.
It also includes the employee's responsibility to provide this employer with a copy of their influenza and COVID-19 vaccinations and the resulting employee consequences for failure to comply.
This policy supersedes any previous [Facility/Company Name]'s policy governing this subject matter. It does not supplant any existing federal, state, or department laws/policies to which [Facility/Company Name] shall adhere.

SCOPE: [adjust if you require more than employees to follow this policy]
Unless otherwise noted, this policy applies to all employees of [Facility/Company Name]. Employees are defined as people who are paid to work for [Facility/Company Name] including medical staff, administrative staff, and support staff (e.g., kitchen, activities, etc.).

Vaccine Information Statements (VISs)

What is a vaccine information statement?

A Vaccine information statement (VIS) is a 1-page (2-sided) information sheet, produced by CDC. VISs inform vaccine recipients, or legal representatives, about the benefits and risks of a vaccine. The law requires VISs be given out prior to vaccination.

Who must give out VISs?

All providers of vaccines both public and the private sector. VISs must be provided prior to each vaccination.

Where do I get vaccine information statements?

VIS documents are available on the [CDC's website](https://www.cdc.gov/vaccines/imz/downloads/). Copies are available in English and in other languages.

Do I need to document that a vaccine information statement was given?

If your facility administers vaccines, yes. Vaccine information statements need to be documented with the date the patient received the form and the VIS publication date. By federal law anyone who receives a vaccine must get the appropriate VIS. If an outside service provides vaccination services, this is their responsibility.



Resources

In this section, you will find links to information shared in this guidebook, helpful articles, downloadable handouts, and videos related to Utah Admin Rule R432-40 requirements.

Utah Office of Administrative Rules

- ❖ Utah Admin Rule R432-40
<https://adminrules.utah.gov/public/rule/R432-40/Current%20Rules>

Utah Department of Health and Human Services Immunization Program

- ❖ Long-term care facility webpage
<https://immunize.utah.gov/long-term-care-facilities/>

Documentation tools

Facility immunization tracking form

- ❖ Sample immunization tracking form (click to download Microsoft Excel template)
<https://immunize.utah.gov/wp-content/uploads/Sample-template-LTCF-vaccination-tracker-1.xlsx>

Individual immunization tracking tools

- ❖ Immunize.org
<https://www.immunize.org/catg.d/p2023.pdf>

USIIS

- ❖ Website
<https://immunize.utah.gov/usiis/>
- ❖ Facility enrollment
<https://immunize.utah.gov/usiis-provider-facilities/>
- ❖ Record release (submit a USIIS support request request):
<https://immunize.utah.gov/usiis-provider-facilities/>

Employee immunization policy

- ❖ Sample employee immunization policy
<https://immunize.utah.gov/wp-content/uploads/Sample-LTC-Employee-Immz-Policy.pdf>

Improving facility vaccination rates

Preventing the spread of respiratory viruses in nursing homes

- ❖ Viral Respiratory Pathogens Toolkit for Nursing Homes
<https://www.cdc.gov/long-term-care-facilities/hcp/respiratory-virus-toolkit/index.html>

Standing orders

- ❖ All vaccine standing order templates
<https://www.immunize.org/clinical/topic/standing-orders-templates/>

Required online training

- ❖ Utah LTCF immunization rule training
<https://immunize.utah.gov/long-term-care-facilities/#required-training>

Vaccine information statements (VISs)

- ❖ CDC—Current VISs
<https://www.cdc.gov/vaccines/hcp/vis/index.html>

Immunization Program information

Mission statement

The mission of the DHHS Immunization Program is to improve the health of Utah's citizens through vaccinations to reduce illness, disability, and death from vaccine-preventable infections.

We seek to promote a healthy lifestyle that emphasizes vaccinations across the lifespan. We provide educational materials for the general public and healthcare providers to assess clinic immunization records and collect immunization data through online reporting systems.

The DHHS Immunization Program recognizes the importance of vaccinations as part of a well-balanced healthcare approach.

Contact us

For any questions regarding this guidebook, including if the links and web addresses are not working email LTCVaxConnect@utah.gov or call (801) 538-9450 and ask for the LTC facility immunization coordinator.

Other program contact information

Phone line: (801) 538-9450

Email: immunize@utah.gov

Fax line: (801) 538-9440

Website: <https://immunize.utah.gov>

LTCF point of contact (POC) change form:

<https://forms.gle/5CZa1ts9Y26kZUTT9>

¹ Centers Disease Control & Prevention. (2024) Flu and People 65 Years and Older.

<https://www.cdc.gov/flu/highrisk/65over.htm>

²Centers for Medicare and Medicaid Services (2024), State Operations Manual Appendix PP - Guidance to Surveyors for Long Term Care Facilities, §483.80 Infection Control. Provisions of Immunizations, p. 819.

<https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf>