

**ANNEX C**  
**FREQUENTLY ASKED QUESTIONS (FAQs) ON**  
**WORKFORCE VACCINATION MEASURES (WVM)**  
**[HEALTHCARE AND COMMUNITY CARE SECTORS]**

**GENERAL FAQs ON WORKFORCE VACCINATION MEASURES (WVM)**  
**(APPLICABLE FOR ALL SETTINGS)**

**1. What are the ‘Workforce Vaccination Measures’ (WVM)?**

From 1 January 2022, only workers who are fully vaccinated, certified to be medically ineligible (MI) for all COVID-19 vaccines under the National Vaccination Programme (NVP) or have recovered from COVID-19 within the past 180 days<sup>1</sup>, can return to the workplace to work onsite. All other unvaccinated workers including partially vaccinated workers, will not be able to return to the workplace.

During the transition, concession will be granted for unvaccinated workers to return to onsite work, only after obtaining a negative test through a Pre-Event Test (PET) at an MOH-approved COVID-19 test provider<sup>2</sup>. However, this concession will only be available on a time-limited basis until 14 January 2022 (inclusive). Those who have started their first dose of vaccination<sup>3</sup> will have the concession extended till 31 January 2022 (inclusive) to provide them more time to be fully vaccinated. In line with the enhancements to the Vaccine Differentiated Safe Management Measures (VDS) Framework, VDS will be fully implemented in workplaces from 15 January 2022 with the removal of the concession for unvaccinated workers to perform PET in lieu of being fully vaccinated.

**2. When will the WVM come into effect?**

WVM will be implemented across all sectors from 1 January 2022 with concession for Phase 1 (1-14 January) where unvaccinated workers could perform PET in lieu of being full vaccinated to return to onsite work in the interim. This includes all institutions in healthcare and community care sectors. It would apply to all workers in the healthcare and community care institutions, including MOHH-employed PGY1s, medical officers and dental officers; staff in non-patient/public facing, backroom and

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<sup>1</sup> Non-fully vaccinated individuals who had recovered from COVID-19 infection prior to 1 January 2022 and who will already exceed the 180-day period as at 1 January 2022 would be granted an additional one month grace period till 31 January 2022 to complete their primary series vaccination regime, to continue to work onsite.

<sup>2</sup> The list of MOH-approved ART test providers may be found here: <https://www.moh.gov.sg/licensing-and-regulation/regulations-guidelines-and-circulars/details/list-of-covid-19-swab-providers>. Healthcare and community care sector licensed under the Private Hospitals and Medical Clinics Act (PHMCA) could be MOH-approved Class A test providers.

<sup>3</sup> Workers must have received at least 1 dose of a vaccine under the NVP or WHO Emergency Use Listing.

administrative functions (both onsite and offsite); vendors operating onsite at premises of healthcare and community care institutions or have contact with clients (e.g. transport drivers); healthcare students on clinical training and/or any persons who need to be in healthcare settings for other purposes (e.g. clinical activities, research, volunteering activities, attachments or observerships).

### 3. What does “fully vaccinated” refer to?

You could refer to the website <https://go.gov.sg/vdsmminfo> for the prevailing definition of ‘fully vaccinated’ individual. For the purpose of the WVM and for ease of reference, a fully vaccinated individual refers to any of the following:

Category	Requirement(s)	Period
(1) Vaccinated with no prior history of COVID-19 infection	(a) Individual must not have had a history of COVID-19 infection; (b) Individual must have been vaccinated against a COVID-19 infection by the administration of the appropriate regimen of any approved vaccine <sup>4</sup> ; and (c) 14 days or more have elapsed after the day the individual was so vaccinated.	Starting 14 days after the day the individual was vaccinated and ending 365 days later.
(2) Recovered from COVID-19 infection without prior vaccination	(a) Individual must not have been vaccinated against COVID-19 infection; and (b) Individual must have recovered from COVID-19 infection.	Starting the day the individual first tested positive for SARS-CoV-2 via a PCR test and ending 180 days later.
	(a) Individual must not have been vaccinated against COVID-19 infection; and (b) Individual must have recovered from COVID-19 infection; and (c) Individual had a second COVID-19 infection and recovered from it.	Starting the day the individual first tested positive for SARS-CoV-2 via a PCR test for the second COVID-19 infection and ending 180 days later.
(3) Recovered from COVID-19 infection and	(a) Individual must have recovered from COVID-19 infection (b) Individual must have been vaccinated against a COVID-19	Starting 14 days after the day the individual was so vaccinated and

<sup>4</sup> These are limited to: (1) Tozinameran (Pfizer-BioNTech COVID-19 vaccine or Comirnaty COVID-19 vaccine); (2) Moderna COVID-19 vaccine; (3) Vaxzevria (AstraZeneca COVID-19 vaccine); (4) Covishield COVID-19 vaccine; (5) Johnson & Johnson’s (J&J) Janssen COVID-19 vaccine; (6) Sinopharm COVID-19 vaccine; (7) Sinovac-CoronaVac COVID-19 vaccine; or (8) any other vaccine regimen as approved by the Ministry of Health (MOH). Where the individual is vaccinated under (3) to (8), their vaccination records must have been ingested into MOH’s national IT systems before they will be recognised.

subsequently vaccinated	infection by the administration of one dose of the mRNA COVID-19 vaccines or two doses of Sinovac under the National Vaccination Programme <sup>5</sup> ; and  (c) 14 days or more have elapsed after the day the individual was so vaccinated.	ending 365 days later.
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**4. Why is there a need for all staff and persons who work under the direction of the healthcare and community care sectors to be vaccinated? If the vaccinated individuals can still get infected with COVID-19, why should we continue to advocate for vaccination?**

As we transit into a COVID resilient nation, vaccination is important to keep our community safe. Vaccination offers protection to the vaccinated individual and vulnerable segments of the population served by the healthcare and community care sectors such as the elderly, sick, as well as children, who cannot be vaccinated.

Studies have shown that vaccinated individuals are at reduced risks of being infected with COVID-19 (with a local vaccine efficacy/effectiveness rate of 55% in household contacts regardless of symptoms suffered by the infected person) and are at reduced risk of having severe symptoms even when infected. In addition, they are more likely to have a lower viral load at later stages of the disease due to more rapid viral clearance, which would result in lower risk of transmission to others.

With this risk reduction, vaccinated persons may be subjected to reduced surveillance testing and less stringent safe management measures, such as return to workplaces. Unvaccinated individuals are more likely to become infected and suffer from severe illness. Hence, it is important for staff to be vaccinated if they need to be onsite at workplaces.

**5. Is WVM also applicable for staff who are non-patient or non-client facing and those who primarily work from home (WFH) as they have minimal public contact?**

WVM is applicable for all staff who are in the workforce, regardless of their job functions and locations of work. It will also apply to visiting consultants and accredited specialists, vendors, locums, students on attachment/internships, research and clinical training, school tutors supporting clinical training, and volunteers who are operating onsite at premises of healthcare and community care institutions.

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<sup>5</sup> For non-fully vaccinated recovered persons, it is recommended that to receive one dose of mRNA COVID-19 vaccine (two doses of Sinovac under National Vaccination Programme or Sinopharm under Special Access Route) at least 3 months after the date of diagnosis of COVID-19 infection.

Unvaccinated staff who are non-patient or non-client facing may be able to work-from-home (WFH) instead. This means they will not be able to return to the workplace when the VDS is fully implemented at workplace from 15 January 2022, if they remain unvaccinated. During the transition, from 1 January 2022, concession will be granted for unvaccinated staff to return to the workplace, if they have tested negative, prior to return to onsite work, through a Pre-Event Test (PET) at an MOH-approved COVID-19 test provider. The cost of the PET must be borne by the unvaccinated staff. The negative results (valid for 24 hours) must be valid for the entire duration that they need to be present at the workplace. This concession is available for a limited time until 14 January 2022 (inclusive) and would be further extended to 31 January 2022 (inclusive) for those who have received their first dose of vaccination and will require more time to be fully vaccinated.

**6. When the WVM are in place from 1 January 2022, who will be allowed to return to the workplace?**

Only employees and workers who are fully vaccinated, certified to be medically ineligible (MI) for all COVID-19 vaccines under the National Vaccination Programme (NVP) or have recovered from COVID-19 within 180 days can return to the workplace to work onsite.

All other unvaccinated employees will be granted concession to return onsite to the workplace, if they are tested negative before returning to the workplace via a Pre-Event Testing (PET) at an MOH-approved COVID-19 test provider. The negative results (valid for 24 hours) must be valid for the entire duration that the employees and workers are required to be present at the workplace. However, this concession is available for a limited time until 14 January 2022 (inclusive) and would be further extended to 31 January 2022 (inclusive) for those who have received their first dose of vaccination and will require more time to be fully vaccinated. After which, they would not be allowed to return to the workplace even if they did PET with a negative result.

**7. Are vaccinated staff required to undergo a Pre-Event Testing (PET) before they report to the workplace?**

Under WVM, there is no requirement for vaccinated staff to undergo PET to work onsite. However, employers should continue to comply with existing requirements for regular testing of staff as part of services operations such as mandatory Routine Rostered Testing (RRT) regime where applicable, or other testing regimes according to prevailing guidelines.

**8. Would WVM apply to new staff/ students prior to commencing their first day of work?**

Yes, WVM would apply to new staff/ students who have to work onsite. Employers should check the vaccination status of new staff/ students prior to the commencement of their work or clinical attachments. Employers of students on scholarship or

sponsorship may also wish to check their vaccination status if they are graduating and about to start work when the WVMs kick in.

#### **9. Are volunteers subjected to WVM?**

All regular volunteers at healthcare and community care institutions should be subject to the WVM. Based on prevailing guidelines, we do not encourage ad-hoc volunteers at the healthcare and community care institutions. Ad-hoc volunteers, if required to be deployed, should be fully vaccinated and be treated the same as visitors, and be subjected to the prevailing testing protocol(s) for visitors (if any) at the respective facilities.

#### **10. What are the work arrangements for unvaccinated employees?**

For employees whose work can be performed at home, employers may allow them to continue to work from home but should take into consideration if their prolonged absence from the workplace could affect their individual, team or organisational performance.

For employees whose work cannot be performed from home, employers may allow them to be

- (a) redeployed to suitable jobs that can be done from home, with commensurate remuneration; or
- (b) placed on no pay leave or, as a last resort, terminate<sup>6</sup> their employment due to their inability to perform their contracted job.

#### **11. Would there be concession or exemption provided for unvaccinated employees who are medically ineligible or are pregnant?**

Although employees who are certified to be medically ineligible (MI)<sup>7</sup> for all COVID-19 vaccines under the National Vaccination Programme (NVP) will be allowed to work onsite, employers should give them special considerations, and consider the following measures:

- (a) allow the employees to work from home if they are able to do so and their absence from the workplace should not affect assessment of their performance;
- (b) redeploy them to a suitable job which can be done from home if such jobs are available, with commensurate remuneration; or

Pregnant employees are also strongly encouraged to be vaccinated immediately, as there is a higher risk of complications should they contract COVID-19 during their

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<sup>6</sup> According to Tripartite Advisory on COVID-19 vaccination at workplaces, such termination of employment would not be considered as wrongful dismissal.

<sup>7</sup> Please refer to <https://go.gov.sg/vdsmminfo> for prevailing definition of MI individuals.

pregnancy. There is also no medical evidence to suggest that the mRNA vaccines cause harm to pregnant women or their babies. Employers are strongly encouraged to give special considerations and consider similar support measures for pregnant employees as those who are MI (i.e. allow them to WFH or redeploy to a suitable job) except that pregnant employees should not be exempt from WVM should they need to work onsite.

Employer should not terminate the employment of medically eligible but unvaccinated pregnant Workers and could consider placing them on NPL based on mutual agreement until after the pregnant Worker has delivered. Such NPL should not affect their right to maternity benefits required under any legislation, employment contract or collective agreement.

## **12. How can employers know what is the vaccination rate for their institutions/enterprises?**

Healthcare and community care institutions can access their institution level vaccination rate through the appended link: <https://go.gov.sg/percentvaccinated>. Employers might wish to note that to access the information, you would need to use the Corporate Pass to login. Note that this link only provides a broad estimate. For more details, employers will need to ask their staff directly.

Non-employees of the institution such as external vendors and accredited specialists who are not employed by the institution would not be included in the institutions' vaccination rates.

## **13. How can employers identify the vaccination status of staff?**

Employers can approach their staff to enquire about their vaccination status. The vaccination status of the individual can be found on their TraceTogether (TT) or HealthHub (HH) app. A local physical vaccination card could also be produced to show the staff's vaccination status. For more details, you can refer to the methods to identify the vaccination status as set out on <https://go.gov.sg/acceptabledocs> (refer to the "For fully vaccinated individuals" and "For individuals who have recovered from COVID-19" sections).

## **14. What is the protocol for employees who do not want to share their vaccination status?**

If the employees, or any workers including vendors, students, school tutors, locums, accredited specialists and prospective employees, do not wish to share their vaccination status or produce proof of vaccination, they will be treated as unvaccinated workers and would not be allowed to work on-site.

Employers could counsel such staff and explain to them the rationale for the need for vaccination and highlight to them that the requirement is mandatory and according to the Updated Tripartite Advisory on COVID-19 Vaccination at the Workplace. Private

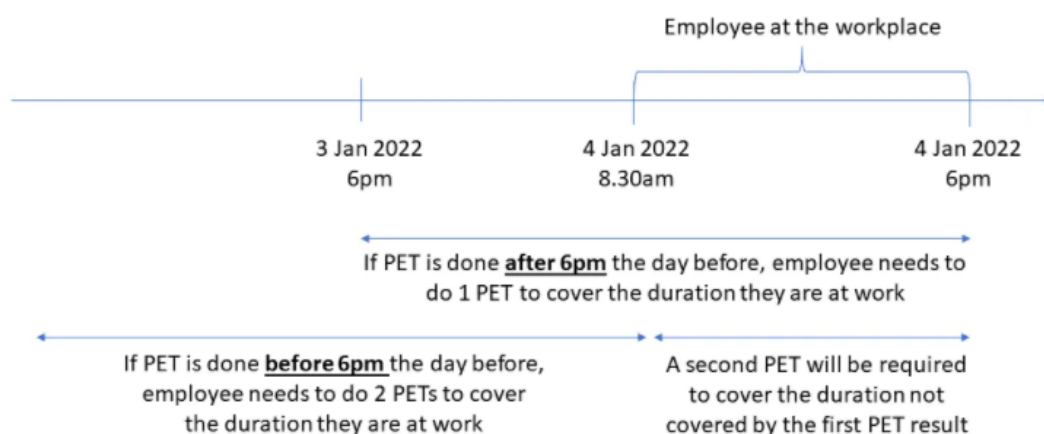
hospitals may also wish to consider vaccination status as a credentialing requirement for specialists to work onsite.

Employers should actively urge all their medically eligible employees who have yet to be vaccinated to do so, e.g. via public education programmes on vaccine safety and efficacy for their employees. Employers should facilitate vaccination by granting paid time-off to employees for COVID-19 vaccination, and additional paid sick leave (beyond contractual or statutory requirements) in the rare event that the employee experiences a vaccine-related adverse event. For more information, please visit MOM's website at [www.mom.gov.sg/covid-19/advisory-on-covid-19-vaccination-in-employment-settings](http://www.mom.gov.sg/covid-19/advisory-on-covid-19-vaccination-in-employment-settings).

**Transitional measures during Phase 1 (1-14 January 2022) – Time-limited concession for negative test result for PET for unvaccinated workers to return for onsite work**

**15. What does it mean for unvaccinated staff to do the PET within 24 hours and ensure its validity during the duration at the workplace in order to report to the workplace onsite?**

The PET result (valid for 24 hours) must be valid for the entire duration that the unvaccinated staff is required to be present on-site at the workplace. For example, if an unvaccinated staff is expected to work onsite until 6pm, he will need the PET to be completed after 6pm the previous day to cover the entire duration that he will be onsite.



**Note:** The concession to use negative PET results for unvaccinated workers to return to work onsite will be made available for a limited time until 14 January 2022 (inclusive). Those who have started their first dose of vaccination<sup>8</sup> will have the concession extended till 31 January 2022 (inclusive) to provide them more time to be fully vaccinated.

<sup>8</sup> Workers must have received at least 1 dose of a vaccine under the NVP or WHO Emergency Use Listing.

**16. Can a negative PCR test also count as a valid test to be used by an unvaccinated staff to return to workplaces?**

If an unvaccinated staff is tested negative via PCR by a MOH-approved Test Provider, the test result would be valid for 24 hours and can be used to return to the workplace within the 24-hour validity window during the concession period until 14 January 2022 (inclusive). The PCR result must be valid for the entire duration that the unvaccinated staff is required to be present on-site. However, employers are to remind all employees that they should stay home if they are symptomatic despite receiving a negative PCR test.

**17. For unvaccinated but medically eligible staff who are on mandatory Routine Rostered Testing (RRT) regime, are they able to return to workplace without PET?**

Under the WVM, all unvaccinated but medically eligible staff will not be allowed to return to the workplace unless tested negative via PET at an MOH-approved COVID-19 Test Provider, within 24 hours before returning to the workplace each time during the time-limited concession period prior to 15 January 2022.

The PET could be used to fulfil the requirements for the days they need to undergo regular testing for mandatory RRT. No additional RRT will be required for those days.

However, the converse does not apply i.e. RRT does not count towards PET as RRT does not have to be done at MOH-approved providers.

Additional PET will be required on the other days where regular testing is not conducted and whenever the unvaccinated staff or worker is required to report to the workplace for onsite work. For instance, if an unvaccinated worker is required to work onsite for 5 days (e.g. Monday to Friday) and he is scheduled on RRT twice a week (e.g. Mon and Thur). On Mon and Thur, the unvaccinated worker may use his negative PET test result to meet the mandatory RRT requirements. On the other days (Tue, Wed and Fri), the worker will need to conduct a PET at an MOH-approved COVID-19 test provider and have a valid negative test before returning to work onsite.

The VoRT testing regime will cease after 31 December 2021 once WVM takes effect from 1 January 2022, and workers would not be required to conduct any test under VoRT from 1 January 2022.

**18. What is the protocol for unvaccinated staff who do not agree to obtain a PET prior to return to onsite work?**

During Phase 1 (1-14 January 2022), unvaccinated staff who refuse to undergo testing will not be allowed to return to the workplace. Employers can consider redeploying them to suitable jobs which can be done from home, place them on no pay leave or, as a last resort, employers may exercise their right to contractually terminate employment if unvaccinated employees do not comply with the WVM.



As far as possible, employers should strongly encourage their unvaccinated staff to be vaccinated. Measures may be taken against employers who do not adhere to the VDS framework at their workplaces and allow their unvaccinated staff to work on-site.

**19. Will there be funding for PET for unvaccinated employees who require testing before returning to workplace?**

There will be no government-funding for PET testing of unvaccinated employees who need to return to the workplace under WVM, regardless of medical eligibility. Unvaccinated employees who are on any mandatory testing\* could use the PET test result in lieu of mandatory ART testing.

The VoRT testing regime will cease after 31 December 2021 once WVM takes effect from 1 January 2022. There is no testing subsidies for unvaccinated employees except for those who are medically ineligible which will cease after 31 December 2021.

**20. Can employers recover additional COVID-19 related costs from medically eligible but unvaccinated employees?**

As per MOM's guidelines, employers can require medically eligible but unvaccinated employees (i.e. excluding employees who are medically ineligible for the vaccines under the NVP) to bear the additional costs. These costs should be related to COVID-19 measures and incurred over and above those for vaccinated employees. These costs can be recovered either through salary deductions\* or by requiring these employees to pay the relevant service provider directly.

\*Please refer to Section 27(1)(i) of the Employment Act when making any salary deductions for recovering COVID-19 related costs.

Please visit MOM's website for the latest information: <https://www.mom.gov.sg/covid-19/frequently-asked-questions/covid-19-vaccinations>

**21. For unvaccinated employees who have arranged to go for vaccination, will the cost of PET test be covered by the employers during the period where the employees are still not fully vaccinated and have to undergo swab test?**

With effect from 1 Jan 2022 onwards, unvaccinated but medically eligible employees will have to pay for additional costs incurred due to COVID-19 testing requirements including the concession for PET before they are allowed to be present at the workplace between 1-14 January 2022 and the extended grace period till 31 January for those who have received their first dose of vaccine. Otherwise, they would need to be on a work-from-home (WFH) arrangement or be placed on no pay leave. Employers should encourage employees to go for vaccination as soon as possible prior to the implementation of workforce vaccination measures from 1 Jan 2022 onwards.

**22. Can we conduct the PET for our employees as a healthcare institution or community care institution?**

While Healthcare Institutions who are licensed under the Private Hospitals and Medical Clinics Act (PHMCA) could apply to be a Class A Test Provider for PET, the provision for the concession to use PET for unvaccinated staff to return to workplace is time-limited for two weeks after the implementation of WVM. Enterprises and/or Institutions may want to direct their unvaccinated staff who needs to be onsite at the workplace from 1 Jan to 14 Jan 2022 (inclusive) to obtain the PET from MOH-approved PET providers.

### **Vaccinate or Regular Test (VoRT)**

#### **23. There are many testing regimes such as VoRT and now WVM, which one should be applicable for my employees?**

With effect from 1 January 2022, all healthcare and community care institutions will be required to implement WVM. The VoRT testing requirements for all unvaccinated workers in the healthcare and community care will no longer apply with the implementation of WVM.

Only fully vaccinated workers, those who are certified to be medically ineligible for vaccines under NVP or those who have recovered from COVID-19 within the past 180 days can work onsite. All other unvaccinated workers will not be able to work onsite. They may either work from home or be redeployed to suitable jobs that can be done from home or be placed on no pay leave or as a last resort, terminate their employment due to the inability to perform their contracted job.

#### **24. My employees were provided with government-funded ART kits for VoRT, what will happen to the leftover kits with the cessation of the scheme?**

The government-funded ART kits were sized for the testing requirements up till 31 December 2021. Should there be leftover of ART kits, the employees can keep the ART kits for other ART testing required, including using it to fulfil any mandatory RRT testing regime.

#### **25. Will my unvaccinated employees who are working from home be subjected to do any ART testing?**

With the cessation of VoRT after 31 December 2021, all unvaccinated workers will not be required to do regular ART testing if they are working from home. They will not be allowed to work onsite from 1 January 2022, unless they have a negative result from a PET conducted by an MOH approved COVID-19 test provider. The concession to use negative PET results for unvaccinated workers to return to work onsite will be made available for a limited time until 14 January 2022 (inclusive) and would be further extended to 31 January 2022 for those who have received their first dose of vaccination and will require more time to be fully vaccinated. Only those unvaccinated workers who are Medically Ineligible (MI) are allowed to work onsite.

## Community Care

- 26. [For non-residential settings] There are clients who are unvaccinated and allowed access to non-residential care services e.g. senior care centres and home care services. If the risk of unvaccinated persons is the same, will vaccinated-differentiated measures apply to clients too?**

Yes, we have implemented VDS for centre-based clients with effect from 29 November 2021. Unvaccinated centre-based clients will have to produce a negative ART result before they will be allowed to enter centre-based care premises. These clients will not be able to participate in group activities. While there is no VDS for home care clients, providers should continue to provide home care services to unvaccinated home care clients to enable seniors to age well in the community. Seniors who are PCR+ or ART+ or have household members who are PCR+ (i.e. are issued with HRW) should notify the providers ahead of the visit to enable providers to prepare the appropriate PPE.

- 27. [For residential settings] There are residents who are unvaccinated and allowed access to residential care services. If the risk of unvaccinated persons is the same, will vaccinated-differentiated measures that are in place for staff apply to residents too?**

As part of ongoing efforts to incentivise vaccination and better protect the vulnerable population in residential care homes, we have prioritised admission for vaccinated persons (including the partially vaccinated where consent has been provided for the full vaccination course), unless they are medically ineligible or at end of life with known prognosis of less than 6 months. In addition, we have also introduced regular testing for unvaccinated/partially vaccinated residents, who will be tested via ART once every 7 days. This will allow us to pick up COVID-19 infection early in this group of particularly vulnerable and unprotected seniors, refer them for timely treatment, and to prevent larger outbreaks from occurring in the Homes. To further mitigate the risks, there are existing testing protocols in place for residents (e.g. for residents discharged from hospital, community admissions, residents returning from home leave).

- 28. With the implementation of WVM, should providers continue with existing surveillance testing regimes for staff?**

Prevailing surveillance testing arrangements should continue. This includes the mandatory twice weekly ART for residential care staff and mandatory 7D ART RRT for non-residential care staff who may come into contact with clients.

However, the WVMs will supersede prevailing VoRT arrangements for all unvaccinated staff who are returning to the workplace to work onsite. Under WVM, unvaccinated employees on RRT who are required to work onsite can use the PET test result done at an MOH-approved COVID-19 test provider in lieu of the mandatory

ART during the time-limited concession period prior to 15 January 2022. Please refer to Q17 for further details. Please note that the VoRT regime will cease with effect from 1 January 2022.

## **Healthcare Students**

### **29. Would an unvaccinated healthcare student's clinical training be affected if he/she remains not fully vaccinated?**

Healthcare students will be subject to the same vaccination and testing requirements as healthcare workers during clinical training, attachment, internships and observership. They will be subject to WVM where all who are not fully vaccinated will not be able to work onsite except healthcare students who are certified as MI for vaccines under the NVP may be allowed at the workplace onsite. For students who are medically eligible but refuse vaccination, their clinical training will be suspended until they are fully vaccinated as they will be categorised as unvaccinated persons and will not be able to enter the healthcare institutions (HCIs).

### **30. What can employers do if there are MOHH House Officers (HO), Medical Officers (MO), Dental Officers (DO), Senior Residents (SRs) on residency training in the organisation who are medically eligible but refuse to go for vaccination and are unable to work from home after the cessation of PET concession?**

House Officers, Medical Officers, Dental Officers and all Residents in training who remain unvaccinated may be suspended from employment and have their training progress halted. They may be placed on no-pay leave or, as a last resort be terminated from employment in accordance with MOHH employment contract. This is not an ideal outcome, but clinical work cannot be performed from home. We encourage all HOs, MOs, DOs and SRs to receive their vaccinations.

### **31. Would an unvaccinated healthcare student be able to continue clinical training by doing regular testing before returning to work onsite?**

From 1 January 2022, unvaccinated healthcare students can return to train onsite only if they have a negative PET test from a MOH-approved COVID-19 test provider and they will need to bear the cost of the PET test. However, this concession will be made available for a limited time until 14 January 2022 (inclusive) and would be further extended to 31 January 2022 (inclusive) for those who have received their first dose of vaccination and will require more time to be fully vaccinated. Following which, all unvaccinated healthcare students, except certified MI students, will not be able to train onsite.

### **32. With the implementation of WVM from 1 January 2022, how do HCIs that are receiving healthcare students for clinical training, attachment, internships and observership check the students' vaccination status prior to entering the HCIs?**

Institutes of Higher Learning (IHLs) that run healthcare programmes with training/attachments and internships conducted in healthcare institutions (HCIs) are to notify the HCIs of the vaccination status of their students with adequate lead time before the students are required to enter the HCIs.

**33. For students who are on scholarship or sponsorship, what should their sponsoring employer do if they remain unvaccinated?**

Employers who have students on sponsorship or scholarship may wish to check with their sponsored student or scholar on their vaccination status ahead of their commencing employment. Those who will be in non-patient or non-client facing roles could WFH. Those who are in patient facing roles will need to be vaccinated, or risk being placed on no-pay leave until they are vaccinated.

Those who remain unvaccinated may as a last resort be terminated from employment. Given that they are on sponsorship or scholarship and have to serve a bond, there is also the risk that they may become liable for liquidated damages.