PLANNING FOR COVID-19 VACCINE DELIVERY IN OFFICES

April 2021

BEFORE THE VACCINE GETS TO YOUR OFFICE...

- NIH research in collaboration with world research centers
- CDC endorsement and budgeting for US coverage using public funds
- Coordinate with State, local health departments and Association of Immunization Managers
- FDA approval and risk/efficacy profile of individual vaccine types
- Contracts with distributors

GET READY...

BRING THE ENTIRE TEAM INTO THE PLANNING PROCESS - ROLE IN RESPONSE

- YOU MUST OPT IN!
  - Enroll as vaccine provider with department of health - ADHS provider onboarding tool
  - Designate staff and sites for implementation
  - Secure storage equipment and supplies for any vaccine possibility
  - Detail hours and locations of immunization services
  - Credential and train staff: pharmacy, dental, medical, behavioral as possibilities
  - Secure refrigerator/freezers, storage space, supplies, PPE, electronic records, data logger
  - Budget costs

BE DETAILED

ANTICIPATE EXPANSION

PARTNERS IN VACCINE DISTRIBUTION

- CDC
  - Allocates Vaccine to state/groups. Report # doses to Vaccine Finder

- STATE HEALTH
  - Patient records/Inventory ASIIS
  - Note: Mark as Public/PAN

- COUNTY
  - County process reporting dose #

- HOSPITALS
- CLINICS
- PHARMACIES

REPORTING DOSES
- Total # of Doses to Vaccine Finder & County Health
- Patient Record and Inventory Doses to ASIIS
- FQHCS, IHS, PHARMACY VTrK5
  - Join TAPI COVID-19 Trainings

DIRECT ALLOCATION:
- SOME PHARMACY, FQHC, IHS
- Federal doses reported to VTrK5
  - Note: Mark as private not public
**CORE LEADERSHIP TEAM OVERSEES FOUR MAJOR PLANNING AREAS**

**DESIGN WORKFLOW**
- Patient intake process
- Registration & screening
- Delivery
- Post-vaccine waiting time
- Do a dress rehearsal
- Implement Standing Orders
- Order free patient posters/postcards & buttons for staff

**DATA USE**
- Plan for staff dosing being mindful of side effects and stagger delivery
- Prepare a list of staff, elderly and high risk as first tier recipients
- Allow for two dose schedule unless J&J
- Plan daily vaccine delivery goals based on supply and population
- Have IT & clinical leads collaborate with ASIIS

**EDUCATE & INFORM**
- Designate lead in staff training
- Separate training and delivery objectives by vaccine types
- Plan for separate storage and safety tracking
- Plan for weekly staff communication
- Include Team in decision-making

**ENGAGEMENT**
- Constantly update educational tools to population served: consider a hotline method or dedicated media site
- Address vaccine hesitancy
- Counter false claims
- Identify cultural and social barriers to vaccination
- Outreach to high risk groups - Develop call list of high risk for end of day doses

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**IT’S A MARATHON— STAY FLEXIBLE AND SAFE!**

**TRACK YOUR EFFORTS**
- Run charts on vaccine uptake
- Impact on populations at risk
- Changes in COVID-19 vaccine and disease

**MONITOR CHANGES**
- Staff satisfaction
- Effect on center operations
- Patient satisfaction & concerns addressed

**REVISE AS NEEDED**
- Continue contagion prevention efforts!
- Keep information factual and available

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**KEEP YOUR EYE ON THE FINISH LINE— DON’T FORGET ROUTINE VACCINES!**

- Moderna 2 dose
- Pfizer 2 dose
- J&J 1 dose
- Document charges

- 1st dose received
- Supply Patient Fact Sheet
- Schedule 2nd dose if needed
- Update ASIIS
- See AZ Billing Guide