



Imms-To-Go Manual

Developed by: Spokane Regional health District - 2017

Background

State law requirements

Washington Administrative Code 246-105 outlines the immunization requirements for schools and childcares for the purpose of protecting the school community from vaccine-preventable diseases. Schools and childcares have a legal obligation to collect immunization records for each enrolled child, ensuring monitoring of those children who are out of compliance (not meeting immunization requirements), and those with medical, philosophical, and religious membership exemptions. In the event of a disease outbreak, schools and childcares may exclude students with exemptions and out of compliance status for the vaccine that is related to the outbreak disease (i.e. medical exemption for Tdap; outbreak of pertussis, all students without the required doses on file or with exemption must be excluded from school premises for the duration of the outbreak). Acknowledgement of this risk is listed on the exemption form parents/caregivers discuss with their healthcare provider. Often outbreak management and associated exclusions are in tandem with the local health jurisdiction in Washington.

In Washington State, schools must report immunization coverage of their students by November 1 each year to the Washington State Department of Health (DOH). Because schools have a legal obligation to collect this immunization data, schools also have a legal liability to exclude out-of-compliance (OOC) or conditional status students who do not meet immunization requirements after thirty (30) days after the first start day of school. Out-of-compliance means that the student lacks immunization documentation (either of immunization administered or a valid exemption).

School-located vaccination event critical components

Since 2007, Spokane Regional Health District (SRHD) has worked with a variety of partners to coordinate and host immunization events (point-of-dispensing POD events) via our Public Health Emergency Preparedness and Response (PHEPR) program. This mass dispensing models are structured on the Incident Command System, and when activated, can mass dispense large amounts of medications to a very large population in a short amount of time. This particular model was employed during the H1N1 pandemic through which thousands doses of H1N1 vaccine were administered to the mass populous in Spokane County.

At the conclusion of the H1N1 pandemic, the PHEPR program identified facility infrastructure for mass and routine dispensing as a need in their after-action-review (AAR). The AAR is a valuable tool that is employed at the conclusion of an event to describe and identify the overall strengths, opportunities, and challenges of the event. Based on the AAR information, improvement opportunities and other activity considerations are assigned to partners and subsequently developed, implemented, and evaluated.

PHEPR then developed facility use agreements (memorandum of agreements) for every school district in Spokane County so that these sites could be used for emergency or routine mass dispensing events.

In addition to facility use agreements, SRHD has collaborative practice agreements and memorandum of understanding agreements with local healthcare professional academic programs including Washington State University College of Nursing (WSU CON), Washington State University College of Pharmacy (WSU COP), and Gonzaga University School of Nursing and Human Physiology (GU). These agreements enable these various partners to partner with SRHD as vaccinators at mass/routine immunization events. Furthermore, the Medical Reserve Corps of Eastern Washington, a local group of volunteers assisting to improve the public health in the community, provide licensed healthcare professional volunteers to aid in these events.

School-located vaccination events description and local success

According to the Community Preventive Services Task Force, school-located vaccination programs are evidence-based, best-practice strategies that reduce out-of-pocket costs, increase vaccination rates, and increase access to immunizations that reduce morbidity and mortality related to vaccine-preventable diseases. Immunizations reduce absenteeism and keeps funding within schools. Additionally, school-located and community facility-located vaccination events provide opportunities to schools to increase immunization coverage rates through direct outreach to families and populations that are in conditional or “out of compliance” status.

Community Profile

- 14 SCHOOL DISTRICTS
- SPOKANE, WA POPULATION: 212,052 (2014 EST)
- SPOKANE COUNTY POPULATION: 490,945 (2015 EST)
- 2015 PUBLIC K-12 ENROLLMENT: 79,141
- LOCAL HEALTH JURISDICTION
SPOKANE REGIONAL HEALTH DISTRICT



The Vaccines for Children (VFC) program is the cornerstone of the success for school-located events in Spokane County. Based on data retrieved from the Washington State Immunization Information System (IIS), over 132,000 doses of

VFC vaccine were administered to children through age 18 in Spokane County at the tune of \$10.2 million. Additionally, Spokane Regional Health District (SRHD) participates in DOH’s 317 Adult Vaccine Program and received \$709,958 of adult vaccine in 2015. This vaccine supply is available at school-located events for uninsured and underinsured adults. Underinsured adults include those that may have insurance coverage but the coverage doesn’t include vaccines or the co-pay/associated out-of-pocket costs may pose a significant barrier to vaccine services.

In 2009, the Immunization Outreach program identified school and childcare immunization record review processes as a key target area to help improve immunization rates in Spokane County. Our program received grant funding through Group Health Foundation to assist area schools and childcares with implementation of effective and efficient immunization record review processes. From this work, additional needs were identified, including the need for a standardized, step-by-step format replete with template letters and other tools for schools and child cares to follow. Coupled with the immunization record review process (which has evolved into the ImmsToolkit), schools and childcares desired opportunities to provide working families convenient, no-cost immunization clinics to obtain needed vaccine services.

To meet the needs of schools, SRHD, a VFC provider, utilized the facility use agreements and recruited volunteer vaccinator groups to coordinate and host immunization events. School staff, primarily school nurses, coordinated event location, assessed student gaps in immunization coverage, served as medical screeners and provided marketing to district families and targeted populations. Additional grant funding from the Group Health Foundation had been acquired to continue the successful model of these mobile clinics.

Shortly after the measles outbreak that began in California in December 2014, Spokane Public Schools (SPS-District 81) board reviewed their immunization coverage rates for the 32,857 students enrolled in their district. Based on data submitted for the [2014-15 school year](#), 24.6% of kindergarten-aged students and 46.4% of sixth grade students were out-of-compliance with state-required immunizations for school entry. The school undertook an aggressive approach, including setting an exclusion date for the first day after the conclusion of spring break in April 2015, modifying their immunization record review process, and partnering with their local health jurisdiction to plan and coordinate multiple school-located vaccination events to provide opportunities to families to obtain school-required immunizations during convenient hours at no-cost. These strategies resulted in a substantial decrease in OOC rates- approximately 1.6% and 1.1% OOC rates for kindergarten and sixth grade students, respectively.

To date (Dec 2016), 9 of the 14 school districts have employed the Imms-To-Go model.

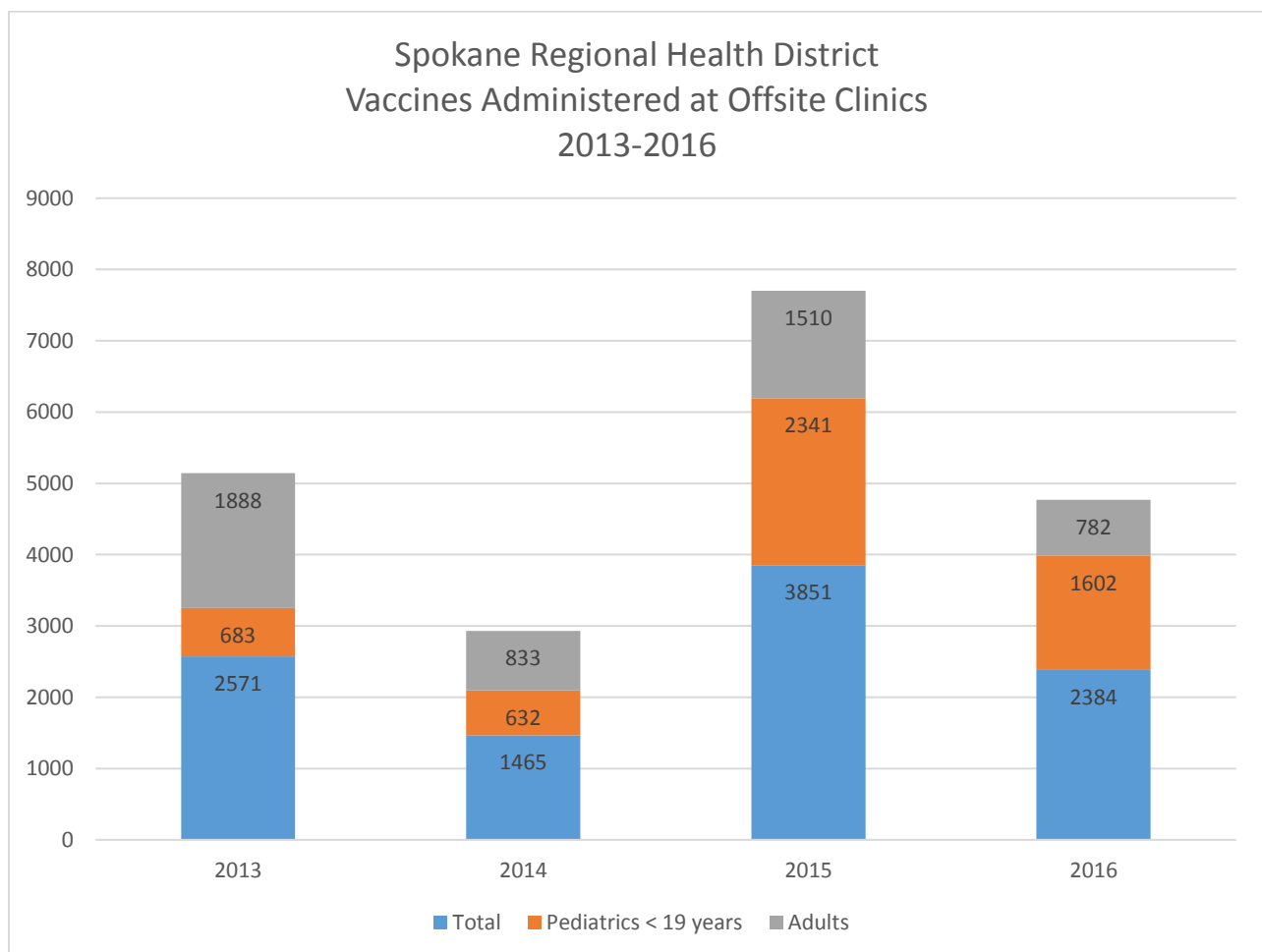
SPOKANE COUNTY SCHOOL IMMUNIZATION RATE COMPARISON

2014-15 SCHOOL YEAR

- ENROLLMENT: 82,667
- K OOC: 18.2%
- K COMPLETE: 73.4%
- 6TH OOC: 28.7%
- 6TH COMPLETE: 60.7%

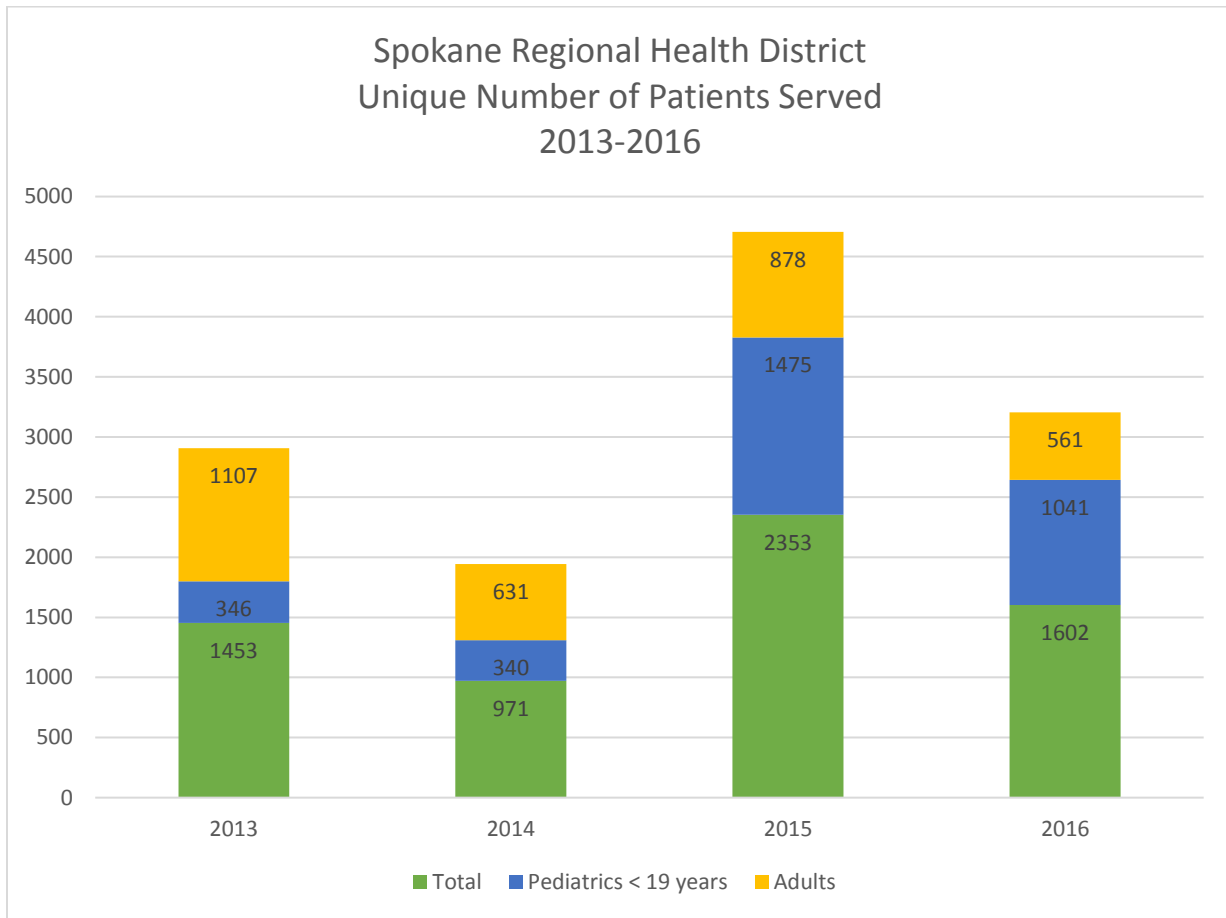
2015-16 SCHOOL YEAR

- ENROLLMENT: 79,141
- K OOC: 5.6%
- K COMPLETE: 84.5%
- 6TH OOC: 7.6%
- 6TH COMPLETE: 83.8%



SRHD's immunization events have resulted in the following:

- 10,271 vaccines administered to 6,379 patients at 54 events since January 2013

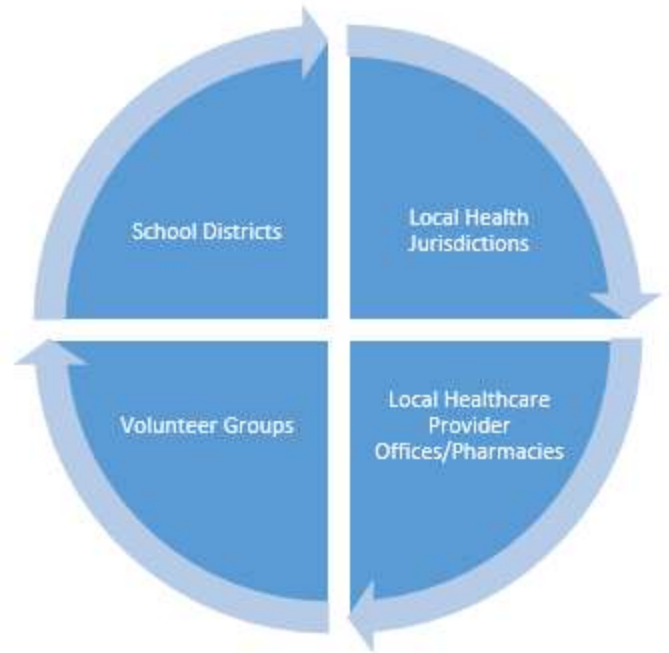


Implementation of mobile immunization clinic model since 2013 has resulted in:

Overview

School-located vaccination events (a.k.a. SLVs, Imms-To-Go events, mobile immunization clinics) are two-five hour vaccination events that take place in a facility that has been “transformed” into a clinical setting capable of mass vaccination. These events can be employed with a variety of partners. Key players in Spokane have included: healthcare providers, pharmacies, local health jurisdictions, local universities and colleges, school districts, and child care centers. The key components to making these events successful are:

- planning
- leadership buy-in
- strong communication
- creativity
- strong detail management
- partnership building and maintenance



Each player plays a definitive role; these roles can be interchangeable and overlap at times- this highlights the importance of clearly outlining roles and responsibilities at the very beginning of clinic planning. Most of the descriptions below pertain to Spokane County implementation and experience.

Local Health Jurisdictions (LHJ)

Respective Role of the LHJ:

- leadership support for school staff desiring to implement Imms-to-Go model
- leadership support for local healthcare providers desiring to implement Imms-to-Go model
- day of clinic organizer, or co-organizer
- school district facility use memorandum of agreement
- standing orders for offsite clinic vaccine administration, including emergency prophylaxis management
- collaborative practice agreement or memorandum of understanding for offsite vaccine administration with vaccinator groups
- childhood and adult vaccine supply
- Vaccine Information Sheets (VIS) printing
- clinic vaccine management coordinator
- vaccine administration supplies, including emergency response supplies
- vaccinator group recruitment
- immunization schedule and administration education
- clinic organization materials (stanchions, signage boards, rope, portable vaccine storage units)
- station organization based on job sheets
- clinic site assessment and layout development

- instructional tool dissemination/collection for vaccinator group
- instructional tool dissemination/collection for screener group
- just in time training development for overall clinic, screener group, and/or vaccinator group
- clinic design, implementation, execution tools and templates
- marketing material (clinic promotional flyers)
- data entry into the Immunization Information System (IIS)
- after-event communication

Spokane Regional Health District (SRHD) staff work with local schools and healthcare providers to discuss logistics of implementing offsite clinics that address facility use, liability, clinic organization, clinic needs, etc. This often includes VFC program education for administration, VFC vaccine billing, VFC inventory management, IIS data entry, National Vaccine Injury Compensation program education, standing orders design and considerations, and emergency management prophylaxis.

Spokane Regional Health District's Public Health Emergency Preparedness and Response (PHEPR) and Immunization Outreach (IO) program staff have developed an array of tools and templates over the last decade to help guide the successful design and implementation of mobile clinics. Many of the tools have are staff-created but many have been adapted from the Incident Command System (ICS) utilized during emergency response events. Even in its adapted form, the ICS structure utilized for these clinics provides the most optimum circumstances for success. If the components or steps are ignored or omitted (i.e. just in time training, designated clinic organizer), this can cause a serious breakdown on the day of the event and negate all of the careful planning that went into the design of the clinic. These can be utilized and adapted by any entity wishing to use them:

- standing orders for offsite vaccine administration (and special considerations)
- emergency prophylaxis management protocols
- facility use agreements
- collaborative practice agreements
- training materials for vaccine administration
- training materials for immunization record review and recommendation
- clinic planning timeline
- clinic organizer set up and just in time training guide
- vaccinator group just in time training guide
- job action sheets
- materials and supply checklists
- promotional flyers
- clinic layouts
- clinical incident report
- notice of privacy practice

School Districts/Childcare Centers

- gain school/center leadership administrative buy-in for Imms-to-go model
- assess immunization coverage gaps among student population

- coordinate marketing to families and targeted groups
- clinic organizer, co-organizer
- location/venue identification and management
- overall logistics and administrative support for clinic planning and day of execution
- vaccinator/general volunteer recruitment
- clinic organization materials (stanchions, signage boards, rope, portable vaccine storage units)
- signage
- station organization based on job sheets
- clinic site assessment and layout development
- instructional tool dissemination/collection for screener group
- Vaccine Information Sheets (VIS) printing
- just in time training development for overall clinic, screener group, and/or vaccinator group
- communication materials to parents (letters, robocall software)

Local Healthcare Providers/Pharmacies

- development of facility use agreement with school district
- day of clinic organizer, or co-organizer
- standing orders for offsite clinic vaccine administration, including emergency prophylaxis management
- collaborative practice agreement or memorandum of understanding for offsite vaccine administration
- childhood and/or adult vaccine supply
- clinic vaccine management coordinator
- vaccine administration supplies, including emergency response supplies
- vaccinator recruitment
- clinic organization materials (stanchions, signage boards, rope, portable vaccine storage units)
- station organization based on job sheets
- clinic site assessment and layout development
- instructional tool dissemination/collection for vaccinator group
- instructional tool dissemination/collection for screener group
- Vaccine Information Sheets (VIS) printing
- just in time training development for overall clinic, screener group, and/or vaccinator group
- clinic design, implementation, execution tools and templates
- marketing material (clinic promotional flyers)
- data entry into the Immunization Information System (IIS)
- after-event communication

Clinic Planning
Lead Agency and Partners can be any group (LHJ/School/HCP)

OFFSITE VACCINATION CLINIC CHECKLIST

Pre-event (6 weeks or more)

LEAD AGENCY	SCHOOL/COMMUNITY PARTNER
<input type="checkbox"/> Participate in any informational sessions/meetings with partners to obtain event approval	<input type="checkbox"/> Arrange and coordinate any necessary meetings/emails to obtain site administrator approval
<input type="checkbox"/> Ensure online calendar request tool is up-to-date and active	<input type="checkbox"/> Input event details and other information onto the online request tool
<input type="checkbox"/> Ensure a facility use agreement is current for requesting partner; if not, obtain a completed facility use agreement	<input type="checkbox"/> Ensure facility use agreement is on file with the lead agency and current
<input type="checkbox"/> Coordinate site assessment date with partner	<input type="checkbox"/> Plan and communicate site assessment date; ensure all necessary parties can be present
<input type="checkbox"/> Conduct site assessment using Clinic Checklist	<input type="checkbox"/> Participate in site assessment with lead agency
<input type="checkbox"/> Email copy of site assessment checklist with action items to partner	<input type="checkbox"/> Follow-up on agreed site assessment action items per checklist
<input type="checkbox"/> Create a volunteer roster document based on event needs and email to partner	<input type="checkbox"/> Assist in volunteer recruitment for greeters (station 1), flow monitors (stations 2 and 4), exit coordinator (station 6). If a school, coordinate school nursing staff as medical screeners (station 3)
<input type="checkbox"/> Arrange vaccinator group and associated preceptors based on available Collaborative Drug Therapy Agreements (CDTA) or Memorandum of Understanding (MOU) agreements	<input type="checkbox"/> Communicate volunteer recruitment updates to lead agency

- Determine if community partners (Managed Care Organizations, Washington Poison Center Control, etc) are invited to attend
- Prepare layout design and share with partner; make any additional changes
- Communicate vaccine ordering process and plan to partner

NOTES:

- Inform lead agency of decision to invite and host community partners
- Review layout design and provide feedback to lead agency
- Inform lead agency of expected attendance/anticipated client ages, and known vaccine coverage gaps, if applicable

NOTES:

pre-event (5 weeks)

LEAD AGENCY

- Develop communication plan for event marketing, including promotional flyer and social media messaging
- Prepare event marketing event flyer draft and email to partner (obtain all partner logos)
- Distribute all approved marketing materials through agency Public Information Officer (PIO) and all relevant contacts and networks
- Prepare contingency plans for any anticipated issues at site
- Send email to available vaccinator group and community partner contacts
- Confirm vaccinator volunteers, and community partner attendance, if applicable

NOTES:

SCHOOL/COMMUNITY PARTNER

- Review communication plan and inform lead agency of any potential issues/or site administrator approval needs
- Review event flyer and submit the materials through the appropriate channels needed for approval and submit any changes to lead agency
- Ensure all marketing materials have received necessary approval
- Distribute flyer to all contacts and networks
- Inform lead agency of any expected/anticipated issues (i.e. conflicting venue events, protesters)

NOTES:

pre-event (4 weeks)

LEAD AGENCY	SCHOOL/COMMUNITY PARTNER
<input type="checkbox"/> Place order for any needed vaccine for event	<input type="checkbox"/> Participate in a planning call with lead agency to review event materials (volunteer roster, checklist action items)
<input type="checkbox"/> Organize a planning call with partner to review volunteer roster, checklist action items, etc.	<input type="checkbox"/> Follow-up on any action items
<input type="checkbox"/> Prepare Vaccinator Job Action Sheets (JAS) and vaccination station reference materials (immunization schedules, available vaccine list with indications, how to administer sheets are current)	<input type="checkbox"/> Determine which unit lead position to fulfill for the event
<input type="checkbox"/> Follow-up with vaccinator group and provide all training tools via email (*or ensure all vaccinator volunteers have completed required training)	
NOTES:	NOTES:

Pre-event (3 weeks)

LEAD AGENCY	SCHOOL/COMMUNITY PARTNER
<input type="checkbox"/> Review volunteer list and solicit for remaining volunteers	<input type="checkbox"/> Assist in volunteer recruitment as needed
<input type="checkbox"/> Prepare job action sheets for all staffing positions and share with partner	<input type="checkbox"/> Communicate any restrictions with posting event signs on walls, etc.
<input type="checkbox"/> Email all volunteer JAS and associated training tools	<input type="checkbox"/> Continue communication plan action items
<input type="checkbox"/> Continue communication plan action items	

- Schedule agency vehicle, if needed/ensure transportation for supplies to event site
- Confirm that screeners have access to WA State Immunization Registry

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Pre-event (1-2 weeks)

LEAD AGENCY	SCHOOL/COMMUNITY PARTNER
<input type="checkbox"/> Inventory available medical/vaccine supplies and determine needs (per Clinic Checklist); order accordingly	<input type="checkbox"/> Ensure supplies identified on Clinic Checklist are arranged (tables, chairs, etc)
<input type="checkbox"/> Adapt Registration/Consent Forms, if needed, and email to partner for review	<input type="checkbox"/> Review registration/consent forms and provide any edits
<input type="checkbox"/> Obtain general supplies (per Clinic Checklist)	<input type="checkbox"/> Continue communication plan action items
<input type="checkbox"/> Make copies of all needed materials (consent forms, educational materials, vaccine information sheets, staff/volunteer evaluations, vaccination station lists, etc.)	<input type="checkbox"/> Identify any needs and communicate to partner for assistance
<input type="checkbox"/> Assemble vaccination station boxes replete with station supplies	<input type="checkbox"/> Provide bottled water/snacks to volunteers; if unable, communicate need to lead agency
<input type="checkbox"/> Gather needed supplies into travel totes	<input type="checkbox"/> Inform lead agency of any required reminders for volunteers (entrance/exit; footwear (no heels in the gymnasium)
<input type="checkbox"/> Send check-in email with event details to all volunteers, and community partners; confirm details with hosting partner	<input type="checkbox"/> Coordinate location set-up and clean-up with onsite staff (janitorial, building maintenance, etc).
<input type="checkbox"/> Ensure emergency response kits are complete; locate suckers and juice for the vaccination station	
<input type="checkbox"/> Continue communication plan action items	

- Ensure arrangements for bottled water/snacks (either lead or partner)

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NOTES:

pre-event (day before)

LEAD AGENCY	SCHOOL/COMMUNITY PARTNER
<input type="checkbox"/> Notify EMS of event	<input type="checkbox"/> Identify any needs and communicate to partner for assistance
<input type="checkbox"/> Obtain all traffic/safety/flow equipment and event signs and load into vehicle	<input type="checkbox"/> Confirm all identified site needs have been arranged or prepared (copier, laptops, printers, etc.)
<input type="checkbox"/> Identify any needs and communicate to partner for assistance	<input type="checkbox"/>
NOTES:	NOTES:

day of event

LEAD AGENCY	SCHOOL/COMMUNITY PARTNER
<input type="checkbox"/> Prepare all vaccines for transport	<input type="checkbox"/> Begin site set-up based on layout design, if possible
<input type="checkbox"/> Load all supplies into vehicle	<input type="checkbox"/> Assist with volunteer check-in
<input type="checkbox"/> Arrive 1 to 1 ½ hours prior to start time (promptly communicate any delays to partner)	<input type="checkbox"/> Fulfill unit lead position
<input type="checkbox"/> Act as clinic organizer/ Point of Dispensing (POD) supervisor; SRHD staff also fulfill vaccine management role	<input type="checkbox"/> Inform clinic organizer of any immediate issues

- Alert/involve site contact/partner in necessary situations (media, etc)
- Conduct just-in-time training for entire group 30 minutes prior to clinic start time
- Compile patients served and vaccines administered reports for share out and entry into master tracking sheet

NOTES:

- Provide any other feedback

NOTES:

post event

LEAD AGENCY

- Facilitate debrief session with partner and vaccinator groups, post-event day of or later
- Complete After-Action-Report (AAR) and submit to partner
- Send thank you email to all volunteers/site administrator

NOTES:

SCHOOL/COMMUNITY PARTNER

- Participate in debrief session with lead agency
- Share AAR and data with appropriate groups
- Engage in planning talks for the next event

NOTES:

Immunization Event Planning Checklist

VENUE/LOGISTICS	
	Determine out-of-compliance/immunization needs among students at school or among multiple schools- this number helps determine supply and volunteer needs
	Meet with necessary parties to identify feasible location- multipurpose room, gym, library, multiple classrooms
	Determine date and time of the event- potentially coupled with another school/community event? *Usually 2-4 hours in length, not including set-up and tear down time
	Involve custodial and janitorial staff who may be assisting with set-up/ tear down
	Ensure the location has ample parking spaces
	Develop map layout of clinic
	Location(s) should be able to accommodate 6 stations (Registration, Form Fill out, Screeners (requires electrical outlets), Waiting Area, Vaccination Area (requires ample space and access to area to wash hands), Exit/Form Drop Off)

VOLUNTEERS	
	Determine vaccinator group
	Suggested volunteers –(solicit school staff, community volunteers, parent volunteers, Medical Reserve Corps, etc.) <ul style="list-style-type: none"> • Registration (1-2 people) • Form Fill Out (1 person) • Screeners (3-4 people; licensed professionals- RNs, MAs) • Waiting Area (2 people- “flow monitors”) • Vaccination Station (6-15 people- licensed vaccinators, vaccine supply person, flow monitor) • Exit Station (1-2 people) • “Runners” or “clinic support” to help make copies or assist clients (1-3 people)

SUPPLIES	
	Determine vaccine supplier (local health department, private provider, etc.)
	Determine which vaccines to have at the event (all ACIP recommended vaccines? Only adolescent vaccines- Tdap, HPV, and Meningococcal?)
	Acquire/order vaccination station supplies (bandaids, alcohol prep pads, sharps containers, gloves, biohazard bags, trash bags, syringes) * Most clinics have between 3-6 vaccination stations.
	Writing utensils for form fill out and for all of the stations
	Stanchions or other barriers to create “Disney lines” to help guide participants throughout the clinic
	Clipboards

	Water and snacks for volunteers
	Registration forms (should come from whomever is supplying vaccine for inventory management purposes)
	Determine if privacy screens are needed
	Signage to direct traffic from the entrance of the clinic, throughout the venue, and on to the exit (sandwich boards for outside areas)
	Coloring books/ crayons as “distraction kits” for kids waiting at station #2 and station #4
	Printer/copier (for screeners)
	Wi-fi or Internet Access (for screeners to access WA Immunization Information System- IIS)
	Laptops for screeners (they usually have their own school laptops)
	Information for screeners (immunization schedules, use of state-supplied vaccine) (**SRHD has screener binders or links to documents with a lot of helpful information)
	Vaccine Information Sheets (VIS) for all available vaccines

PROMOTION	
	Develop promotional materials- flyer, poster, etc.
	Ensure all materials have received approval from necessary parties
	Distribute materials/announce event to staff, community partners, social media, school newsletter, outdoor reader board, community locations (i.e. malls or libraries)
	**You cannot over communicate! Inform everyone and anyone of your event!

Spokane Regional Health District has the following resources/equipment/supplies available for community use:

- Vaccine
- Vaccination Station Supplies (while supplies last)
- Consent form templates
- Clipboards
- Privacy Screens
- Signage for internal and external use (entrance, exit, station names, arrows, etc)
- Sandwich boards to hang signage
- Stanchions and rope to make Disney Lines
- Portable printer/copier
- Flyer template
- Screener reference materials
- Vaccinator reference materials

Spokane Regional Health District is also happy to help “consult” on your planning process- please call Alexandra Hayes, 509-324-1480 for assistance.

***Items in bold indicate critical elements

Key Roles and Assignments

****All volunteers are expected to assist with set-up and tear-down of POD site**

<p>Clinic Point-of-Dispensing (POD) Supervisor</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Provides overall clinic support <input type="checkbox"/> Provide just in time training for all staff prior to clinic start on day of <input type="checkbox"/> Oversees timely set up of POD layout <input type="checkbox"/> Manage and lead operations <input type="checkbox"/> Monitor through-put times and make adjustments in patient flow as needed <input type="checkbox"/> Determine staffing needs and adjust accordingly <input type="checkbox"/> Ensure all staff receive breaks <input type="checkbox"/> Record and collect staff/volunteer information
<p>Onsite Logistics Lead</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Ensure adequate supplies and signage are available at each station <input type="checkbox"/> Ensure each station has a supply checklist for set-up <input type="checkbox"/> Ensure any access and functional needs for clients and staff are met <input type="checkbox"/> Secure area for staff belongings and break room <input type="checkbox"/> Oversee and troubleshoot any issues <input type="checkbox"/> Provide regular updates to POD supervisor
<p>Dispensing Unit (Vaccination Station) Lead (direct reports: vaccinators)</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Provide just- in-time-training for vaccinator group <input type="checkbox"/> Advise personal protective equipment (PPE) requirements <input type="checkbox"/> Designate stations to dispensers <input type="checkbox"/> Ensure proper handling of vaccine <input type="checkbox"/> Ensure appropriate vaccine administration <input type="checkbox"/> Ensure proper completion and collection of all forms <input type="checkbox"/> Assist vaccinators with challenging patients <input type="checkbox"/> Monitor and respond to clients who may experience adverse reactions <input type="checkbox"/> Report any adverse events to POD supervisor <input type="checkbox"/> Provide regular updates to POD supervisor
<p>Dispenser/Vaccinator</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Set up station with appropriate forms, equipment, and supplies <input type="checkbox"/> Review emergency protocol for adverse reactions. <input type="checkbox"/> Review dispensing/vaccination protocol. <input type="checkbox"/> Review client registration form <input type="checkbox"/> Verify OK to administer vaccine <input type="checkbox"/> Review any notes from medical evaluation <input type="checkbox"/> Ensure client has signed intake form

	<ul style="list-style-type: none"> <input type="checkbox"/> Place labels on dispensed vaccine and form <input type="checkbox"/> Explain the dispensing procedure to the client. <input type="checkbox"/> Administer vaccines to clients according to protocol. <input type="checkbox"/> Ensure clients have vaccine information sheet(s). <input type="checkbox"/> Direct requests for additional supplies to appropriate Unit Lead. <input type="checkbox"/> Assess clients for immediate reactions and follow emergency protocol. <input type="checkbox"/> Indicate to the Flow Monitors that you are ready for the next client
Vaccine Management Coordinator	<ul style="list-style-type: none"> <input type="checkbox"/> Ensure vaccine is stored within appropriate temperature ranges <input type="checkbox"/> Facilitate vaccine provisions to vaccinators <input type="checkbox"/> Triage patient registration forms <input type="checkbox"/> Assist with supplies identification for vaccinators (appropriate syringe length, diluent, etc)
Medical Support Unit Lead (direct reports: medical screeners and clinic records staff)	<ul style="list-style-type: none"> <input type="checkbox"/> Provide just-in-time training to medical screener group <input type="checkbox"/> Ensure all staff review immunization schedules <input type="checkbox"/> Ensure availability and distribution of Vaccine Information Sheets (VIS) to clients <input type="checkbox"/> Ensure accurate screening of clients via Immunization Information System (IIS) and immunization records review <input type="checkbox"/> Ensure proper medical evaluation of clients with potential contraindications to vaccine <input type="checkbox"/> Provide regular updates to POD supervisor
Medical Screener	<ul style="list-style-type: none"> <input type="checkbox"/> Maintain the privacy, confidentiality, and security of all clients and protected health information. <input type="checkbox"/> Review client registration form for completeness and errors <input type="checkbox"/> Reference age-appropriate immunization schedule to provide accurate vaccine recommendations <input type="checkbox"/> Assess possible contraindications <input type="checkbox"/> Input information into Immunization Information System (IIS) Registry or utilize WAIS and/or hard copy immunization records to determine recommended vaccines <input type="checkbox"/> Copy any hard copy immunization records and attach to consent forms <input type="checkbox"/> Review and Distribute the Vaccine Information Sheet(s).

	<ul style="list-style-type: none"> <input type="checkbox"/> All paperwork must remain with client as he/she continues through the POD stations. <input type="checkbox"/> Direct clients with questions to the Medical Support Unit Leader, as needed. <input type="checkbox"/> Alert Team Leader to difficult clients, as appropriate. <input type="checkbox"/> Direct requests for additional resources to appropriate Staff Support Volunteer <input type="checkbox"/> Provide regular reports to Team Leader
Flow Monitor	<ul style="list-style-type: none"> <input type="checkbox"/> Direct clients to appropriate entrances/exits, stations and other personnel <input type="checkbox"/> Monitor overall POD flow and report any issues to Clinic POD Supervisor <input type="checkbox"/> Keep families together (families will go to each station as a group) <input type="checkbox"/> Communicate with other stations and staff to effectively manage patient flow.
Greeter	<ul style="list-style-type: none"> <input type="checkbox"/> Familiarize self with all forms, materials, and POD flow <input type="checkbox"/> Greet clients as they enter the POD <input type="checkbox"/> Identify non-English speakers and clients with special needs and alert interpreters to assist <input type="checkbox"/> Provide clients with patient registration form and other required forms such as Notice of Privacy Practice <input type="checkbox"/> Provide location of public restrooms <input type="checkbox"/> Review patient registration forms for completeness <input type="checkbox"/> Transfer vaccine record information from registration form to Vaccine Administered Record ½ sheet <input type="checkbox"/> Collect all registration forms at exit table <input type="checkbox"/> Ensure all forms are given to Onsite Logistics Unit Leader at conclusion of event. <input type="checkbox"/> Alert Team Leader to difficult clients, as appropriate <input type="checkbox"/> Direct requests for additional resources to appropriate Clinic Staff Support
Clinic Records Staff (Exit)	<ul style="list-style-type: none"> <input type="checkbox"/> Familiarize self with all forms, materials, and POD flow <input type="checkbox"/> Ensure all required fields are completed on registration form by the patient and dispensers <input type="checkbox"/> Collect registration form and patient evaluation at the final station and direct client to exit

Signage Coordinator

- Obtain list of signs and map of sign placement
- Post external signs to direct traffic to Clinic POD
- Work with Facility contact to comply with Facility requirements for posting signs
- Work with all Clinic Unit Leaders for proper placement of signs
- Work with Unit Leader to obtain or make additional signs that are needed
- Adjust signs during POD hours
- Take down all signs at the conclusion of the POD
- Ensure tape has been removed and signs are stored properly for future use

Clinic Planning- What it looks like (example timeframe: Feb 3-March 29) (Spokane Regional Health District has partnered with Riverside School District to host a clinic on Thursday, March 29 from 3:30p-6:30p.)

- Lead School nurse reached out to SRHD staff on February 3 to inquire about feasibility of reserving a time in March to host an immunization clinic. SRHD staff reviews staff calendars for availability and determines it is feasible. SRHD ensures facility use agreement is current. SRHD staff sends an Outlook calendar invite reservation to school contact.
- Lead school nurse identifies location
- Lead school nurse communicates which target groups for clinic (i.e. all ages/ kindergarten/ 6th grade/ varicella 2nd dose catch up) and vaccine needs based on OOC/immunization coverage data
 - Based on SRHD inventory and other planned clinic needs, SRHD places vaccine order at least 4 weeks in advance
- SRHD staff then sends an email to list of vaccinator group options (WSU CON, WSU COP, MRC, etc) to see who may be available on this date. Once vaccinator group is acquired, SRHD sends lead preceptor/group contact event information and vaccinator training tools
- Lead school nurse recruits volunteers from her school nurse team (and larger county school nurse group, if needed) to serve as medical screeners and general volunteers. SRHD sends lead school nurse medical screener tools and list of available vaccine.
- Lead school nurse and SRHD create marketing flyer for distribution and receive approval from all parties; determine translation needs based on student population; lead school nurse works with school to implement communication plan. SRHD follows lead agency communication plan
- Lead school nurse and SRHD staff coordinate a walk-through of the selected location to determine clinic layout using site assessment checklist. SRHD draws up a mock clinic layout and emails to lead school nurse.
- Lead school nurse works with school staff (and janitors, etc) to ensure building access and supplies are available
- SRHD and lead school nurse communicate via email re: details as needed
- SRHD and lead school nurse send reminder information to all volunteers; lead school nurse makes arrangements for bottled water/snacks for volunteers, if possible.



- SRHD prepares all forms and supplies for the clinic; using agency van, staff load all supplies (except vaccine) the day before or early the day of. Vaccine supply is loaded immediately prior to travel. SRHD uses Acu-Temp coolers for refrigerated and frozen vaccine (shown left).
- All volunteers arrive 60-90 minutes prior to event start to begin set up.

Implementation- What the day looks like

Scenario: Spokane Regional Health District has partnered with Riverside School District to host a clinic on Thursday, August 29 from 3:30p-6:30p. Volunteers have all received instructions

- SRHD staff has loaded the transport van with all vaccine administration supplies, stanchions, etc. and heads to the school
- Upon arrival, all volunteers help unload the van. Based on clinic layout map, volunteers begin arranging supplies.
- All clinics should maintain one-way directional flow using at least 6 stations (registration, form fill out, screeners, number assignment/waiting, vaccination, exit).
- All volunteers transform Riverside's gym into a one-way directional flow clinic
- The Clinic POD Supervisor leads the entire group in just-in-time training to explain overall flow and provide overall guidance; explains emergency response protocol and identifies medical station lead, epi kits, and AED locations
- Medical station and medical support leads conduct just in time trainings specific to their groups.
- Clinic begins promptly at 3:30p
- Patients arrive at station 1 to collect registration forms and notice of privacy forms
- Patients sit at station 2 and complete the front of the registration form
- Patients get in line to see medical screeners at station 3; medical screeners provide age-appropriate vaccine recommendations and review any medical precautions/contraindications
- Patients head to station 4 at which a flow monitor will provide a number to the family group and place the same number on all of the forms in the family group to identify them collectively. The family will then take a seat and wait to be called.
- Flow monitor at station 4 gives the family forms to flow monitor for station #5 (vaccination station) who delivers the forms to the vaccine management coordinator.
- The vaccine management coordinator reviews forms for age-appropriate vaccine indications (i.e. DTaP for 6 and under and Tdap for 7 and older)
- Available vaccinators indicate to vaccine management coordinator they are ready for client group
- Vaccine management coordinator provides forms, vaccine, and associated supplies to vaccinator. Vaccinator takes all supplies back to station and prepares vaccine. Vaccinator communicates any wasted vaccine to vaccine management coordinator for proper documentation.
- Once vaccinator is prepared, he/she informs flow monitor #5 of the family number. Flow monitor enters waiting area and calls back family and obtains additional forms from flow monitor #4.
- Family enters station #5 and vaccinator reviews screening form with patient and verifies demographic information. Reviews patient comfort techniques with parents; utilizes dual vaccinator approach if child is receiving multiple vaccines.
- Once vaccine administration is complete, vaccinator completes paperwork while monitoring patient.
- Family group/Patient then goes to the exit station where the clinic records staff person reviews form for final time, collecting any missing information (i.e. VFC status, clarifying illegible

handwriting). Staff transfers vaccines administered to a paper record that she hands back to the family. She informs the family that these vaccines will be entered into the IIS. She thanks them for getting vaccinated and tells them to have a great day.

- At the conclusion of event, all volunteers help tear down clinic and reload van.
- SRHD staff enter all forms into the IIS
- SRHD sends after-event communication that thanks all volunteers for their assistance along with recap of vaccines administered and types.

Special Considerations

- **Unaccompanied minors**
 - Spokane Regional Health District (SRHD) allows for unaccompanied minors to receive vaccination services:
 - Contact parent/caregiver via telephone to obtain verbal consent and read federally-required Vaccine Information Sheets (VIS) over phone
 - Emancipated minor
 - Invoke “mature minor doctrine” for patients 16 years and older based on clinical judgement that minor is able to make informed healthcare decisions for himself/herself
- **Vaccine Supply/ Management**
 - In order to reduce any missed opportunities for vaccine administration, SRHD-coordinated clinics always provide all childhood vaccination presentations for ages 6 months-18. The range of age for vaccine administration is based on your agency’s standing orders, collaborative practice agreements, and staff comfort level.
 - Once vaccinator group has been determined, number of vaccinators is important to determine feasible amount of vaccine to bring. If a clinic has all childhood vaccine presentations, feasibly one vaccinator can handle vaccine process for 20 vaccines (10-15 clients) an hour. Average expectation 150 clients (10-15 vaccinators)
 - Typically, SRHD clinics have between 10-15 vaccinators and 3-4 medical screeners
 - Mass vaccination clinics with one or two presentations 6-8 vaccinators can suffice if vaccine pre-draw protocols are implemented
- **Children/ Distraction Kits (value-added services)**
 - SRHD places colored paper and crayons at stations #2 and #4
 - SRHD obtains suckers and stickers for use at stations #5 and #6
 - SRHD has partnered with community agencies (managed care organizations (Amerigroup) and Washington Poison Control Center) to provide resources and other items for families.
- **Volunteers**
 - SRHD set up a one-time volunteer packet for volunteers to participate in immunization clinics. This allows the volunteer to operate under SRHD’s auspices and protections. Volunteers are bound by HIPAA and other confidentiality requirements.
- **Medical Station Lead Assignment**
 - Only assign faculty/preceptors/experienced vaccinators and emergency responders to this role. Please emphasize that if there is an adverse reaction ONLY the lead should respond and call upon others as needed. Lead will notify Clinic POD supervisor and they will respond accordingly. All other volunteers must continue business as usual and assist other patients. Maintain calm demeanor and attend to patient as needed.
- **Third-party vaccine billing/insurance collection**
 - All SRHD-coordinated events are no-cost. We do not collect insurance information and are not set up to bill third party. We do bill Medicaid for the \$5.96 vaccine administration fee reimbursement as permitted. SRHD staff investigating different

models for making billing a possibility for program sustainability (see LHJ Billing Resource Guide for more information). Most healthcare providers in Spokane County who partner with school districts donate this service as in-kind and do not collect insurance information or charge any fee.

- **FERPA/HIPAA**
 - FERPA does not apply when LHJ/private provider/pharmacy (aka outside parties) not employed by or under contract with the school provides healthcare services to students
 - FERPA allows disclosure of “personally-identifiable information with parent’s consent”. Outside parties should include language on their consent form to the effect that immunizations services provided to your child will be shared with his/her school for purposes of immunization record completion as well as added to the Immunization Information System (IIS).
- **Staff/Participant/Family Feedback**
 - Some schools found it incredibly helpful to ask parents to complete a brief evaluation form of the clinic at the conclusion of the immunization event at station 6. This information was really helpful to learn opportunities to improve the clinic organization, as well as to share to administration.
- **Medical Assistants as vaccinators**
 - Per Washington state law, Medical Assistants (MAs) are not allowed to administer vaccines without a midlevel practitioner with prescriptive authority onsite. When conducting offsite clinics, a midlevel practitioner must be present somewhere in the near vicinity for MAs to vaccinate. Only licensed healthcare professionals (RNs, ARNPs, LPNs, MDs, DOs) can serve as medical screeners at SRHD-coordinated events. These professionals can satisfy the practitioner requirement for MAs to vaccinate. Additionally, the vaccination station lead should also be a licensed healthcare professional and this too will meet the requirement.

<https://www.cdc.gov/h1n1flu/vaccination/slv/>

<http://www.immunize.org/school-vaccination/>