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## Planning and Implementing a Large-Scale COVID-19 Vaccination Clinic

## Recommendations, Reflections and Lessons Learned

&

#### A Guide for Maine Communities

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#### **Introduction**

In November 2020, the Maine Center for Disease Control and Prevention (Maine CDC) requested assistance from Maine hospitals to dispense COVID-19 vaccines. Mid Coast Hospital became a point of dispensing for Sagadahoc and Northern Cumberland Counties. Mid Coast Hospital became a MaineHealth member in January 2021, and benefitted from policies, procedures, and support of the larger MaineHealth system but did not adopt the Electronic Medical Record (EMR) system used by MaineHealth to schedule appointments, register patients and document vaccination until November 2021. The inability to use the EMR system required and allowed Mid Coast Hospital to make adaptations to the MaineHealth model, including an alternative online scheduling and eligibility screening system, unique registration forms, and a system to record each immunization with the State of Maine. These procedures had to be nimble and responsive to rapidly changing state mandates and weekly fluctuations in vaccine allocation, and meet the needs of the community, especially those who faced technology, mobility, literacy, and language barriers. I was assigned to serve as the COVID-19 Vaccine Clinic Director in November 2020 to plan and operate Mid Coast Hospital's COVID-19 community vaccination efforts.

This community guide provides guidance and templates used to turn the Town of Brunswick's Parks and Recreation building into an efficient, high-volume community clinic, able to administer 800 vaccines a day, while following pandemic health guidelines. The resources can be adopted and adapted by anyone interested in offering vaccines to their community. This successful model allowed Mid Coast Hospital to dispense 56,466 doses of COVID-19 vaccine from January to May 2021 (Dumas, 2022).

#### **Reflections on a Public Health Approach**

#### Roles

Like many public health efforts in Maine, the COVID-19 vaccination effort was decentralized but coordinated. This approach seems to have been successful – through collaboration, communication and leadership, Maine has regularly had one of the highest COVID-19 vaccination rates in the country. As of March 26, 2022, 78.7% of eligible Maine residents were fully vaccinated, the third highest rate in the country (U.S. COVID-19 Vaccine Tracker: See Your State's Progress, 2022).

**State of Maine**: Leading the statewide effort was Maine CDC, which procured the vaccine, determined eligibility, approved vaccination sites, and allocated weekly vaccines to approved sites, striving for geographic and health system equity. The state also led efforts to increase the public's trust and willingness to accept the COVID-19 vaccine, including weekly updates from Maine CDC director, Dr. Nirav D. Shah, media campaigns, and coordinating public health district level planning meetings for local support and coordination.

MaineHealth coordinated vaccination efforts as a system, receiving 1 weekly allocation of vaccine that was distributed to its nine local hospitals according to current capacity and eligible population estimates. Senior leaders were assigned to create a system-wide response, including creating a reservation system and toll-free appointment line, testing and providing clinic workflows and processes for sites to adopt, providing all required forms and releases, creating staff training modules, and coordinating weekly vaccine operation meetings to support clinic leadership, troubleshoot issues, and share concerns. Each local hospital designed their own dissemination process following this guidance.

Mid Coast Hospital: As mentioned in the introduction, Mid Coast Hospital has a unique role in the MaineHealth system. As a MaineHealth member, the hospital had access to all the system's resources and support. However, as a new member that had not yet adopted the EMR system, many vaccination processes had to be adapted. Thus, as Clinic Director, I was afforded flexibility to create a system that worked for our clinic and community.

My public health background and knowledge influenced my approach to vaccination efforts. I was fortunate that, although embedded in a healthcare system, the public health approach was encouraged and supported by Mid Coast Hospital and MaineHealth leadership. In particular, I found my knowledge and background in community organizing and environmental and ecological frameworks, combined with the community relationships and trust that had been built over a decade of community health work, were key to our success.

Below is a summary of the two models that were the most helpful for informing the work: the Social Ecological Model and community organizing principles from the Community Toolbox.

#### Approaches

The willingness to accept a COVID-19 vaccination continues to be influenced by many factors. As vaccine clinic director, my role was to identify and decrease barriers for those who had made the decision to seek a vaccine. The following public health approaches focus on removing barriers and increasing accessibility based on the needs of those seeking a vaccine.

<u>Social Ecological Model</u> The Social Ecological Model (SEM) proposes health behavior is influenced by the "interaction between the individual, the group/community, and the physical, social, and political environments" (CTSA Consortium and the Community Engagement Key Function Committee, 2011). The CDC adapted the SEM in 2007 (SEM; Figure 1) to promote a

multi-level approach to improve health. I used the SEM to identify characteristics of vaccine eligible groups and potential barriers, solutions and partners available to overcome these barriers. *Table 1: Barriers and Solutions to Vaccination, Age 70*+ is an example of barriers and solutions identified to make the Mid Coast clinic accessible to the first COVID-19 vaccine eligible group – Mainers aged 70 years and older.

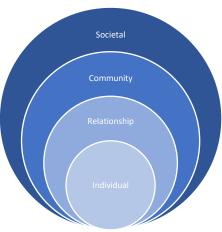


Figure 1 Social Ecological Model

Table 1: Barriers and Solutions to Vaccination, Age 70+

Individual	Barriers	Relationships	Community (Available to our service area, onsite environmental)	Societal (MaineHealth, State or Federal level support)		
Older Adult, age	Web based	Adult relatives	Appointment assistance:	System wide call center		
70+	reservation system:	Neighbors	Senior Centers	"Call center only"		
	lack of equipment,	Trusted medical	Libraries	appointments		
	Wi-Fi, and email	providers	Town offices			
	addresses and		Provider offices			
	unfamiliarity with		Internal call center			
	technology		Local social media campaigns			
			targeting helpers (relatives,			
			neighbors)			
			Local print and radio outreach			
			Priority access to "no show"			
			spots when eligibility age			
			lowered			
	Physical barriers	Adult relatives	Friendly Greeters & clinic	Multi-channel clinic		
	(mobility, vision,	Neighbors	navigation one on one support	advertising		
	hearing)		Clinic with ramp access and			
			handicapped parking	Home visiting		
			Wheelchairs and walkers	vaccination programs		
			Ensure chairs have arms			
			Forms & completion support			
			at clinic			
			Masks with clear windows			
			Assistive technology (portable			
	TD	A 1 1, 1	microphone systems)	E		
	Transportation	Adult relatives	Centrally located clinic	Free transportation		
		Neighbors	Clear wayfinding signs	programs – Uber, Lyft		
			Free bus & local taxi rides	E-man dina allamahla		
			Senior transportation networks	Expanding allowable		
			Hetworks	identification beyond		
				license (mail, clinical		
				judgment)		

#### **Community Organizing**

Planning, adapting and responding to barriers using community input and support was key to the Mid Coast Hospital clinic success. The Community Toolbox, created by the Center for Community Health and Development at the University of Kansas, is a free online resource for those "working to build healthier communities and bring about social change." (Center for Community Health and Development, 1994). It includes models, toolkits, and a database of best practices for public health and community action. Below are community organizing and mobilization strategies that were helpful to our planning and success from Chapter 5, Section 1 "Strategies for Community Change and Improvement: An Overview."

Gaining an understanding of the community: The vaccine clinic leadership team included diverse members who had lived and worked in our communities for years. We understood what was important to our community and had trust built from numerous past partnerships. For instance, while there were many available locations for our clinic, we chose a site based on our community knowledge and understanding of local politics and dynamics, accessibility, and familiarity, and also identified opportunities for other municipalities to support the effort.

Articulating issues: Due to my public health background and training, and strong community

connections, I was able to predict and clearly articulate potential community questions and concerns and make recommendations based on best practice. For instance, when requested to vaccinate private schools, we needed an approach that our community and state leaders viewed as equitable to our local students and community members and met the unique needs of our private school students. We were able to negotiate reserving blocks of onsite clinic appointment times for private schools, while still leaving most appointments open to the public.

Involving other people & generating other resources: Because we were vaccinating during a global pandemic, few of our active, frontline medical staff were available to staff the clinic at the level necessary; we also lacked the capacity to assist the community with external access barriers, such as transportation and web access. Our team harnessed our community assets to overcome these challenges. We quickly recruited more than 1,000 volunteers for our direct service roster, in addition to local service agencies who assisted with transportation and appointments, the Town of Brunswick, which coordinated all wayfinding signs and furnished their donated space, and many community members who helped neighbors and friends find and make appointments. Of particular pride was our volunteer clinic staff – often 90% of clinic shifts were staffed by volunteers.

Using a community organizing approach resulted in strong community support and pride in our clinic, leading to some of the highest vaccination rates in the state, and strengthened community trust that will continue to benefit public health work in the future.

# Planning and Implementing a Large-Scale COVID-19 Vaccination Clinic A Guide for Maine Communities

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#### INTRODUCTION

This guide is based on the author's experience planning and implementing Mid Coast Hospital's large-scale community COVID-19 vaccination clinic from January 2021 to May 2021. Mid Coast Hospital is a non-profit hospital located in Brunswick, Maine, serving communities in Sagadahoc and northern Cumberland Counties, a population of approximately 67,000. Adapting tools and resources provided by MaineHealth (Mid Coast hospital's parent health system, which consists of nine local hospitals in Maine and New Hampshire), Maine Center for Disease Control and Prevention (Maine CDC), and U.S. Centers for Disease Control and Prevention (CDC) Mid Coast Hospital administered more than 56,000 COVID-19 vaccine doses to community members ages 12 and older at its large-scale community vaccination clinic using a combination of staff and volunteers.

This guide provides general guidance, recommendations, and tips using publicly available resources that community agencies can adopt and adapt to support a welcoming, efficient, and safe COVID-19 vaccination clinic. While much of the advice may be used for the dispensing of other vaccines, this guide was designed to meet the 2021 COVID-19 pandemic guidelines of physical distancing and PPE (personal protective equipment) use, and responding to the vaccine scarcity and eligibility limits. Although much of the guide is applicable to any community, there are recommendations that are specific to the State of Maine and would have to be adapted to meet other state protocols.

Note – this guide does not cover vaccine acquisition, storage, and requirements. Partner with a local healthcare facility or contact Maine CDC for guidance on vaccine acquisition.

#### **Section 1: Clinic Roles and Responsibilities**

It is critical to have clearly defined roles and responsibilities. A summary of leadership and support roles are below; a sample organizational chart has been provided (Figure 2), and more detailed role descriptions are provided in Appendix 1. Follow all lead agency and state staffing and volunteer requirements. Number of staff suggested per shift is based on our maximum capacity of 80 patients per hour. Two, 5-hour shifts (one AM, one PM), Monday – Saturday allowed us to vaccinate 800 patients per day, without overwhelming staff.

SignUpGenius was used to schedule staff, allowing only vetted and trained staff and volunteers to sign up. Volunteers were sorted into Clinical and Non-Clinical groups and received notice when the SignUpGenius schedule was open and shift reminders. We strived to have schedules open at least two weeks in advance and sent "SOS" messages if we had openings to fill. Clinic Managers reviewed the schedule weekly to ensure coverage.

#### **Leadership and Support Roles**

- Clinic Director: Oversees operations and participates in community and agency planning. This person should have a clinical or public health background and excellent communication and leadership skills. Strong community relationships are helpful.
- **Chief Medical Officer:** Responsible for planning and guidance. Must be available during clinic hours but does not have to be onsite.
- **Pharmacy/Vaccine Director:** Supports the Clinic Director (as indicated by arrow in Figure 2) by securing and overseeing vaccine supply and requirements. Must be available during clinic hours but does not have to be onsite.
- Clinical and Non-Clinical Manager: Advises and supports the Clinic Director and oversees day-to-day operations, including managing and training staff, ordering supplies, building patient registration schedules, troubleshooting, etc.
- Communication Coordinator: Stays current on changing guidelines, responds to community questions and creates talking points for staff. May need additional support when communication demand surges. Clear voicemail messages and an email auto-response creates uniform messaging that can be disseminated and updated easily, and helps patients feel more connected. See Appendix 3 for sample communication.
- **Staffing Coordinator:** Recruits and on-boards all clinic staff and volunteers. Stays current on all requirements. Works with human resource and volunteer departments, if applicable.
- Administrative Assistant: Works closely with managers and directors, and provides
  logistical support, such as supply and material ordering, expenditure tracking, payroll
  processing, etc. Supports the Communication and Staffing Coordinators as needed.

#### **Onsite Roles**

<u>Non-Clinical</u> roles are suitable for all volunteers. Invite more experienced volunteers to become leads for the greeter, registration and check out teams. Leads can troubleshoot issues, train new volunteers, and ensure opening and closing tasks are completed.

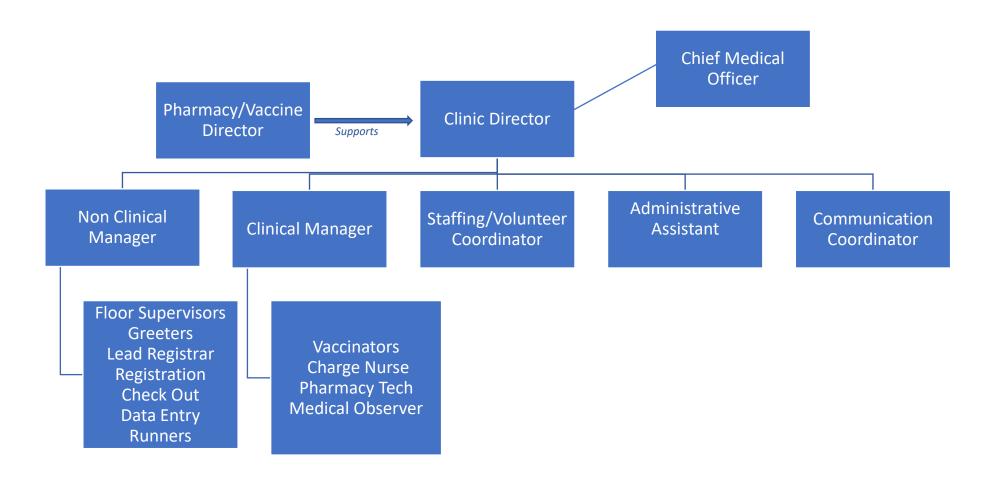
- **Floor Supervisors:** 2 per shift. Lead supervisor should be paid staff; the other can be a volunteer. Supervisors must be familiar with all roles, stay current on guidelines, troubleshoot, have excellent customer service skills, and approve any change from protocol. The volunteer does not require a health related background; some of the best supervisors were from restaurants, community agencies, development offices, etc.
- **Runner:** 1 per shift, floats to support staff as needed.
- **Greeters:** 4 per shift. Makes sure patient is masked, verbally screens for COVID-19 symptoms (using symptom checklist), asks if patient has appointment and paperwork, identifies support needs, such as wheelchair or interpretation. This is the first clinic staff the public encounters. Greeters should be friendly, reassuring, and familiar with eligibility guidelines. Helpful tools include appointment phone numbers and websites and talking tips to soothe frustrated patients.
- Lead Registrar: 1 per shift. Officially confirms patient appointment, maintains daily patient roster downloaded from SignUpGenius, assures clinic stays within vaccine daily limit. Assists with crowd control and calculating total vaccine needed at the end of the shift to prevent waste. This should be a seasoned volunteer or staff, comfortable answering patient questions, explaining eligibility, and soothing nervous or disgruntled patients. We called this position our "Maître D" to emphasize the customer service duties.
- **Registration:** 6 per shift. Reviews paperwork for accuracy and eligibility, provides required Vaccine Information Sheet.
- Check Out: 6 per shift. Reviews and collects consent and registration forms post vaccine, schedules follow up appointments. Should be comfortable using web-based platforms. This is a rewarding role for student volunteers, who are often comfortable with computers, and patients are often relieved and thankful at this stage.
- Data Entry: 3 per shift. Collects paperwork from check out, enters vaccine information into online immunization registry. In Maine, this is the Maine Immunization Information System, or ImmPact. All users must be trained and registered with ImmPact. Must be detail-oriented and comfortable with data entry. This the best role for volunteers who want limited face-to-face interactions. Once entered, forms should be alphabetized by last name (provide a "document sorter," see Figure 3), bundled by shift, and stored securely in dated file boxes until cleared for destruction by clinic manager.



<u>Clinical</u> Clinical Manager will ensure all clinical staff meet CDC COVID-19 vaccination core competencies: <a href="https://www.cdc.gov/vaccines/covid-19/training-education">https://www.cdc.gov/vaccines/covid-19/training-education</a>.

- Vaccinators: 10 per shift. May be a mix of paid and volunteer, based on current state licensing requirements. Reach out to retired medical professionals, provider offices, the Maine Medical Reserve Corp (<a href="https://mainemrc.org/">https://mainemrc.org/</a>) and nursing education programs for volunteers. If you also have core paid staff (we used our per diem flu vaccination staff), it is helpful to reserve spots for paid and volunteer staff members to ensure equitable access to staff.
- Charge Nurse: 1 vaccinator assigned per shift. Assists Clinical Manager in shift training and vaccinator support.
- **Pharmacy Technician:** 2 per shift. Draws up vaccine; can include trained pharmacy and other medical staff and pharmacy students. Including a pharmacy administrative support volunteer to document each patient name and dose in an excel sheet was useful in reconciling vaccine numbers. Rosters can be downloaded ahead of each shift to make this more efficient.
- Medical Observers: 2 per shift. Certified in Basic Life Support; oversees the patient waiting area observing for adverse reactions. This is a rewarding role for retired medical staff with expired licenses, but a current Basic Life Support certificate.

Figure 2: Sample Organizational Chart & Reporting Structure



#### **Section 2: Location Considerations**

When considering location, consider accessibility to the people you are serving. Your clinic should be conveniently located and accessible, with sufficient parking, and meet current local, state, and federal guidelines.

Seek a location large enough to accommodate physical distancing requirements (in 2021, this was 6-feet). Review state capacity guidance, which may fluctuate based on current conditions. When calculating capacity, consider spacing and wait time requirements to estimate the potential maximum occupancy and parking needs. A location allowing a unidirectional patient flow will support physical distancing and natural crowd flow.

See Appendix 1 for *Roles & Responsibilities Summary* (including trainings, paperwork, supply lists) & *Job Action Sheets*.

#### Other considerations:

- Pharmacy needs:
  - Vaccine storage consult with your pharmacist on current requirements.
  - o Lighting conducive to mixing and drawing hundreds of vaccines per day.
  - Access to electric outlets.
- Parking: Large enough to accommodate patients for at least 30-minute intervals (and staff) and has clearly marked traffic flow. Assess the need for parking lot volunteers we found dedicating a separate entrance and exit was adequate.
- Directions and wayfinding: Large-scale clinics will draw patients from outside your community. Include directions in all correspondence, and work with your municipal partner to install wayfinding signs. Our municipal partner identified a preferred route, and placed signs accordingly, based on experience.
- Emergency response: Work with site liaison and local emergency response to identify the best access point. Locate the patient observation area close to this spot.
- Wi-Fi & charging: Schedulers and data entry teams require laptops with access to Wi-Fi and electrical outlets.
- Phones: Landlines next to the supervisor station and medical observer is important for public safety. These phone lines should be used for clinic management and emergencies, and not be the general information line.
- Copiers, printers: Provide a printer and high-capacity copier with duplex and stapling ability. Send large-scale print jobs (forms, vaccine information sheets) to an outside printer.
- Handicap accessible: Choose a location with ramps, handicap parking, wheelchairs, and place chairs with arms at and between each station. These are particularly important when vaccinating large numbers of older patients.

- Environmental services: Clarify what environmental services can be provided by the site and
  what extra services will be needed due to the clinic's unique needs. For example, your
  partner may clean the floors and bathrooms nightly, but you may be responsible for
  providing confidential shredding, sharps boxes, and medical trash removal. Create a plan for
  storage and disposal of sharps boxes and confidential shredding waste.
- Liability: Add the clinic location to your lead/sponsoring agency liability coverage.
- Inclement weather: Create an inclement weather plan with your site liaison.
- Secure location: At least one secure room is required to lock pharmacy resources and patient documentation, which should be securely stored until reconciled with vaccines given by Clinic Managers and Maine ImmPact staff (usually no more than 1 week), then securely shredded. Patient forms can be stored in dated file boxes, in secure room on or off site.

#### **Section 3: Clinic Layout**

A thoughtful clinic layout can prevent patient frustration, naturally encourage traffic flow, and maximize patient capacity. Many patients and volunteers shared how the physical layout, which included generous spacing and clear guidance, helped ease the anxiety of those visiting a large public setting for the first time since the beginning of the pandemic.

A unidirectional flow is desirable for patient safety and efficiency, helping keep patients properly spaced and moving in the correct direction, and helping clinic staff collect all required clinic documents. Our clinic was large enough to set up as a unidirectional "loop", patients entered and exited in the same large entrance, with designated entrance and exit doors (two each). A Sample Clinic Flow (Figure 4) outlines the general responsibilities of each clinic station as encountered by the patient. In 2021, each station was separated by at least 6 feet to accommodate physical distancing requirements.

#### Tips:

- Use liberal amounts of cones, rope, signs, and floor markers to help patients navigate between sections and stay socially distanced.
- Clearly mark each section and station. Numbering each station (Vaccinator A, Vaccinator B, etc.) makes it easier to direct patients to open spots.
- Provide seating at and between stations. If available, chairs with arms are preferable.
- One 6-foot table for each station ensures proper spacing and provides enough room for required paperwork and supplies. If available, many Vaccinators preferred bedside tables that could be raised or lowered.
- Section off an area for clients who request privacy or those experiencing adverse reactions. Include a cot or yoga mat for those needing to lie down.
- The medical observer station should be near a landline, and access to first aid kits and AED. Placing data entry tables facing the observation area adds visual support and runners if extra medical support is needed.
- A "selfie wall" encourages social media sharing, helping with clinic advertising and vaccine promotion. Many clinics included "thank you walls" and post it notes for patients to leave encouraging words.
- Walkie Talkies can ease communication. Assign one to the floor supervisors, charge nurse, medical observer, manager, and section leaders.

#### Figure 4: Sample Clinic Flow

• Welcome, check for mask, eligibility, appointment and paperwork •Complete patient health screening •Staff paperwork assistance area Greeter • Identify any communication or mobility support needs and assist •Confirm appointment on patient roster Check eligibility • If neded, send patient to floor supervisor for appointment assistance, to charge nurse for medical Registrar questions Review paperwork Confirm eligibility •Offer vaccine information sheet Registration •Review consent and CDC Prevaccination Checklist, confirm age and time since last dose Vaccinate • Complete consent form & CDC COVID-19 Vaccination Record Card, note observation release Vaccinator • If patient backs out, keep paperwork, put an X through and give to charge nurse • Schedulers: Review paperwork, schedule second dose appointment • Data Entry: Enter into Maine Immunization Information System (ImmPact) Check out

Observation Area • Medical observer makes regular rounds to check on patients, observes for medical distress

•Make sure paperwork has been turned in

EXIT

Floor Supervisors & Runner available for questions and support

#### Section 4: Appointments & Crowd Management

When vaccine demand is high, supply limited, and there are strict eligibility requirements, it is imperative to find an equitable process for eligible patients to make appointments.

Requiring appointments can help with crowd management and eligibility screening. This is especially important if the weather is not conducive to long, outdoor lines.

Web-based scheduling platforms can be used for appointments; Mid Coast Hospital and others used SignUpGenius. <a href="www.SignUpGenius.com">www.SignUpGenius.com</a>. Check current federal privacy guidelines. DHHS stated it would "not impose penalties for noncompliance with regulatory requirements under the HIPAA Rules against covered health care providers or their business associates in connection with the good faith use of online or web-based scheduling applications for the scheduling of individual appointments for COVID-19 vaccinations during the COVID-19 nationwide public health emergency" (U.S. Department of Health and Human Services, 2021).

#### **Scheduling Tips**

- Create an appointment template that can be quickly adjusted based on vaccine availability before publishing. If vaccine availability is less than anticipated, consider scheduling fewer shifts per week versus fewer patients per shift to maximize staffing resources.
- Choose a consistent day and time to publish new appointments and widely communicate this. We received our allocation numbers by Thursday afternoon and consistently published "by noon every Friday" allowing us time to adjust appointment slots.
- Schedule patients in 15-minute increments to maintain steady flow. Our experienced clinic team could accommodate 2 patients per 15-minute interval, per vaccinator.
- Restrict appointment access to those eligible as much as
  possible. At the height of demand, Mid Coast Hospital restricted
  access to those with a pre-approved email address we had
  uploaded into SignUpGenius. When signing up, patients had to
  use a preapproved address, attest to their eligibility, and were
  reminded that eligibility would be confirmed on site (see Figure
  4).
- Request the minimal patient information required for identification and communication (see Figure 5).
- Limit the number of first-time volunteer spots to 2 per section and assign a seasoned volunteer/staff to mentor, and train.
- Recruit community partner assistance. Community partners and Figure 5 Sample Sign medical offices can promote the clinic and share email addresses of those eligible (with permission). Community partners can provide computer

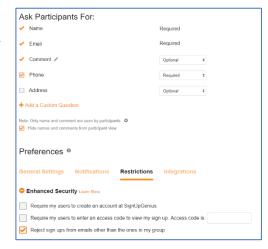


Figure 5 Sample SignUpGenius Settings

- access and assistance. Suggested partners: senior centers, libraries, town offices, schools, large employers.
- If a second dose is required, schedule the appointment before the patient leaves the clinic to account for dose 2 vaccine needs when planning future clinics. For instance, if you can accommodate 400 patients per shift, and you have scheduled 200 Dose 2 patients, you can only open 200 slots for dose 1 patients. Keep Dose 1 and Dose 2 schedules separate.

A note about technology: Although web-based scheduling worked for most, it was a barrier to some. MaineHealth did create a toll-free vaccine appointment line, but it took time to staff adequately enough to meet demand, and the call-back process was confusing to many. To assist, we encouraged friends and family members to assist those having difficulty and trained trusted community partners, including town and senior center staff, to enter appointments using a generic vaccine clinic email address. When demand waned and supply was steadier, email addresses became optional, as eligibility was well advertised and could be checked on site.

#### **Onsite crowd management tips**

- Staff appropriately: At the peak, seeing 80 patients per hour, we would schedule 10
   Vaccinators, 2 Medical Observers, 2 Pharmacy Technicians, 1 Pharmacy Clerk, 4 Greeters, 1
   Lead Registrar/Maître D, 6 Registration, 6 Schedulers, 3 Data Entry, 1 Runner and 2 Floor
   Supervisors.
- Schedule two shifts: One AM and one PM shift, with a 2-hour break between, allows time for
  a staff change, supply restocking, and any clearing of patient bottlenecks. Two shifts (7AM12 PM & 2 PM-7 PM), Monday-Saturday was a successful balance of patient-friendly hours,
  volunteer retention and staff care, and enough spots to deliver a high volume of vaccines.
  Having a day off also allowed room for flexibility in case of clinic closures due to inclement
  weather.
- Provide forms: Send forms to patients before their appointment AND communicate that
  forms will be available at the clinic. Provide a paperwork area out of the patient flow. Forms
  update often, we found that creating a website with current clinic hours, current eligibility
  and required forms was easier to maintain than attaching the forms to patient communication.
  We then directed everyone to <a href="www.MidCoastHealth.com/Vaccine">www.MidCoastHealth.com/Vaccine</a> in all communication.
- Spacing: Leave ample space between sections to accommodate lines and intervene when bottlenecks occur. A friendly person helping direct patients to open spots moves lines along, appearses disgruntled patients and decreases staff stress. We found 10 spots, 6 feet apart, between sections helps keep lines moving. Mark spots using orange cones, "Stay 6 feet apart" floor stickers, or duct tape marks.
- Security, if necessary: Some clinics benefitted from public safety presence for traffic and protests. Our local law enforcement was present the first 3 days of our clinic; after encountering no issues, the police department assigned an officer for us to call if needed, which never occurred. Our large-scale clinic had a wide service area, and neighboring law enforcement agencies were eager to help.

### Section 5 Communication

Consistent, community-friendly communication using multiple channels is key. Recognize community members may be confused, concerned, and frustrated when vaccine is limited and vaccine appointments difficult to access. Sample communication messages and tools are included in Appendix 3.

- Regularly promote current eligibility, clinic hours and location, scheduling instructions, and
  when appointments will be released. Remind your community that appointments are limited
  to the vaccine supply and share other vaccination locations (such as <a href="www.vaccines.gov">www.vaccines.gov</a>).
  Increase communication when eligibility or clinic hours change.
- Remind clinic staff that information changes quickly, and incorrect information can lead to community frustration. Create talking points for staff, and direct patient concerns and questions to designated clinic spokespeople.
- Celebrate successes widely and often. Sharing the number of vaccines given and thanking staff, volunteers, partners, and your community is important for morale and staff and volunteer retention, and eases community concerns.
- End-of-shift vaccine allocation: Create an end-of-day vaccine allocation plan with leadership. Communicate and emphasize to clinic staff the importance of following the plan; designate one clinic leader to make allocation decisions and communicate to the public. We did not allow unscheduled vaccine seekers to wait at the clinic. We did create an end-of-night call list, and prioritized vaccine seekers by current eligibility (age, job) and proximity to clinic.

#### Suggested communication channels:

- Dedicated website
- Social media messages
- Dedicated email address with auto reply
- Dedicated phone line with detailed voicemail (one line can be overwhelmed quickly; only promise call backs if you have access to a phone bank and call team)
- Regular press releases and updates to local media and community partners
- Updates to town councils from agency leadership
- Patient appointment confirmation and reminder emails

## Section 6 Special Considerations

To respond to needs of specific populations, there are times when processes should be adapted. Below are examples of adaptations made at the Mid Coast Hospital clinic.

- Pediatric Clinics: If possible, local pediatric experts recommend private vaccination stations when vaccinating toddlers and young children. If an eligibility change is coupled with a change in dosage, identify clear identification protocols to ensure correct dosages are given. We hosted a ten-day, pediatric-only community clinic at a former elementary school when eligibility expanded to youth ages 5-12 years in November 2021. Vaccinators were assigned to classrooms, with single rooms available for nervous patients. The waiting area was in the gym, separate from the vaccination area, and filled with pandemic friendly activities.
- School-Based Clinics: Although hosting school-based clinics was successful in some communities, we found having one clinic location with consistent hours convenient to families made it more accessible. We had success expanding hours and partnering with schools to encourage using the community clinic when eligibility changes were announced, followed by one day, onsite school clinics during school hours to reach students who had transportation barriers. Parents and schools praised the community/school-based clinic hybrid. It decreased demand on schools and made it more accessible to parents who wanted to be present for the vaccination. It resulted in Mid Coast Hospital giving the most 5-12 year old vaccinations in the MaineHealth system during the first month of eligibility.
- Older Patients: Early COVID-19 vaccination eligibility in Maine was age-based. We supported the initial high volume of older patients by providing wheelchairs and walkers, chairs with arms available at and between stations, volunteers assisting with mobility support and form completion, reminders to staff to be prepared for hard-of-hearing patients, and encouraging patients to bring a support person.
- Non-English-Speaking Patients: Ensure patient forms are prepared in several languages. If possible, secure translation line access for patient communication. Your medical or municipal partner may subscribe to a service, or contact the Association of Maine Interpreters and Translators www.mainetranslators.org/find-interpreter for assistance.
- Billing: If you are working with an agency that can bill for vaccine administration, adapt the permission/consent form to include the information needed to bill insurers.
- Patient Records/Lost Vaccination Cards: As of March 2022, all COVID-19 vaccines are
  required to be entered into the Maine Immunization Information System (ImmPact), which
  can be queried by electronic medical record systems or directly accessed by many medical
  offices at patient encounters. Patients can also request immunization records from the State
  of Maine Immunization Program: <a href="https://www.maine.gov/dhhs/forms/immpact-immunization-record-request">https://www.maine.gov/dhhs/forms/immpact-immunization-record-request</a>.

#### Thank you

This guide would not be possible without the support and dedication of the many people who made our large-scale vaccination clinic possible, including:

Mid Coast Hospital & MaineHealth leadership, providers, staff, and volunteers

Martins Point Health Care leadership, providers, and staff

The State of Maine, with a special thank you to the Maine Center for Disease Control and Prevention

The Town of Brunswick, with a special thank you to the Parks and Recreation Department

Local schools – leadership, staff, school nurses, and students

Businesses and community partners who redeployed staff, made appointments, provided rides, shared communication, donated food to clinic volunteers and promoted vaccination

The volunteers and staff who provided reassuring words, smiles (underneath their masks!), observations and advice – always asking "what more can we do?"

#### AND

Our local community members, who were thankful, supportive, and understanding

Planning and coordinating the COVID-19 Vaccine Clinic for my community was an honor, and a highlight of my public health career.

Melissa Fochesato
Director, Community Health Promotion
Director, COVID-19 Vaccination
Mid Coast Hospital

MPH Student Muskie School of Public Service University of Southern Maine Expected graduation: May 2022

<u>Melissa.Fochesato@MaineHealth.org</u> <u>MelissaFochesato@gmail.com</u>

#### **APPENDICES**

#### **APPENDIX 1**

## Clinic Roles & Responsibilities Summary Job Action Sheets

#### CLINIC ROLES AND RESPONSIBILITIES SUMMARY

Role	Required Trainings	Documents & Supplies Needed	Degrees/Certifications Personal Characteristics		
Greeter	Daily update on screening questions & eligibility, review of required paperwork	Required volunteer forms	<ul> <li>Symptom Screening Form</li> <li>Pens, clipbooards</li> <li>Eligibility Guidelines</li> <li>Patient forms</li> <li>Appointment guidance (phone or website)</li> </ul>	Strong customer service skills	
Registration	Required patient paperwork & current eligibility guidelines	Required volunteer forms	<ul> <li>Site map</li> <li>Pens, highlighters, post its</li> <li>Patient forms and Vaccine Information Sheets</li> <li>ImmPact brochures</li> <li>For lead registrar: Patient appointment roster</li> </ul>	<ul> <li>Strong customer service skills</li> <li>Detail oriented</li> </ul>	
Runner	Onsite orientation of supplies and clinic processes	Required volunteer forms	Clinic Supply List	Flexible, quick learner, problem solver	
Checkout & Data Entry	<ul> <li>ImmPact Data Entry (Data Entry)</li> <li>SignUpGenius: how to schedule 2nd doses in (Checkout)</li> <li>On-site training on Anaphylaxis Awareness</li> <li>Emergency Codes Policy</li> </ul>	<ul> <li>Required volunteer forms</li> <li>ImmPact User Agreement (Data Entry)</li> <li>SignUpGenius links (Checkout)</li> <li>Laptop and iPad Use</li> </ul>	<ul> <li>ImmPact User Manual (Data Entry)</li> <li>SignUpGenius cheat sheet (Checkout)</li> <li>Pens</li> <li>Blank patient forms to send home for Dose 2 appointment</li> </ul>	<ul> <li>Strong customer service skills</li> <li>Comfortable with web-based applications, in fast paced environment</li> <li>Detail oriented</li> <li>Data Entry: ImmPact certified</li> </ul>	
Floor Supervisor	<ul> <li>ImmPact (at least 1 leader on site)</li> <li>SignUpGenius: To print, edit and schedule 2nd doses (at least 1 leader on site)</li> </ul>	Required volunteer forms     ImmPact User Agreement     SignUpGenius Login and password	<ul> <li>Clinic Supply List</li> <li>Access to ImmPact User Manual</li> <li>Copy of Emergency Codes Policy</li> <li>SignUpGenius username and password</li> <li>Leadership Phone &amp; Pager numbers</li> <li>Patient Roster</li> </ul>	<ul> <li>Strong customer service skills</li> <li>Excellent communication skills, comfortable having difficult, respectful conversations</li> <li>Able to troubleshoot in a fast-paced environment</li> </ul>	
Manager: Clinical & Non-Clinical	<ul> <li>ImmPact (includes ImmPact Data Entry)</li> <li>SignUpGenius (all aspects)</li> <li>Clinical - all Vaccinator required trainings</li> </ul>	<ul> <li>ImmPact User Agreement</li> <li>SignUpGenius login and password</li> </ul>	<ul> <li>Clinic Supply List</li> <li>Access to ImmPact User Manual</li> <li>Emergency Codes Policy</li> <li>SignUpGenius Username and Password</li> <li>Leadership phone &amp; pager numbers</li> <li>Adverse Events Reporting Log</li> </ul>	<ul> <li>Non-Clinical: Healthcare or public health degree &amp; leadership experience</li> <li>Clinical: Clinical degree &amp; leadership experience</li> <li>Strong customer service and communication skills, comfortable in a fast-paced environment</li> </ul>	

Role	Required Trainings	Signed Paperwork & Required Access	Documents & Supplies Needed	Degrees/Certifications Personal Characteristics
Vaccinator	<ul> <li>Read EUA FACT SHEET FOR         HEALTHCARE PROVIDERS         ADMINISTERING VACCINE (for vaccine         formulation being used at clinic)</li> <li>Review Maine CDC COVID-19 Vaccine         Training PowerPoint: General Overview of         Immunization Best Practices for Healthcare         Providers</li> <li>Any specific requirements for competency</li> <li>Read the Standing Order for Anaphylaxis</li> <li>Review Contraindications Material</li> </ul>	Required volunteer forms     Attestation of completion of     Maine CDC COVID-19     Vaccine Training     (instructions on last slide of     the PowerPoint)	<ul> <li>Site map</li> <li>Vaccination supplies</li> <li>Pre-populated vaccine labels (provided by pharmacy)</li> <li>EUA Fact Sheet for Healthcare Providers Administering Vaccine (for vaccine formulation being used at clinic)</li> <li>Maine CDC COVID-19 Vaccine Training: General</li> <li>Immunization Best Practices for Healthcare Providers</li> <li>Emergency Codes Policy</li> <li>Contraindications List</li> </ul>	Basic Life Support (BLS)     Certification (at least one member of onsite team)     Clinical Degree approved for vaccinator role by Maine CDC     Pharmacist, Pharmacy Tech, Medical Assistant. (Pharmacy staff must complete required training per State of Maine and Medical Assistants must be supervised by an onsite physician)     Strong customer service skills, comfort with needle phobic patients
Medical Observer	Same as Vaccinators	Required volunteer forms	Same as Vaccinator	Basic Life Support (BLS)     Certification     Strong customer service skills

#### **Important Notes:**

- Review and follow lead agency and state requirements for staff and volunteers regularly
  At least one onsite team member must have active Basic Life Support (BLS) Certification at each clinic, preferably the medical observers
- All staff should have basic HIPPA training and customer service orientation

#### **JOB ACTION SHEET: Greeter**

Greet, screen, check for appointment, eligibility & paperwork

	Opening: Place Vaccine Clinic Open sign outside the front doors
	Restock PPE at all PPE stations
	<ul> <li>Facemasks, Hand Sanitizers, Face Tissues</li> </ul>
	Restock patient forms and single use pencils
	Restock cleaning supplies
	<ul> <li>Approved Gloves (small, medium, large)</li> </ul>
	<ul> <li>Approved sanitizer cloths for wiping down hard surfaces</li> </ul>
	Wipe down tables and chairs every hour. Wheelchairs should be wiped down after use.
	Closing: Bring in signs, clean hard surfaces, restock supplies
Four	Roles:
	<b>PPE Check:</b> Greet patients and request the use of hand sanitizer. Patients are welcome to wear their personal mask or one of the masks we supply.
	<b>Form Check:</b> Ask patients if they have their ID and forms filled out. Review current eligibility (do not ask for confirmation). Patients can use tables and single use pencils to complete forms – some patients may need help.
	<b>Health Screen:</b> Ask health screen questions – See a Clinic Leader to resolve issues.
	Patient Navigation: Assist with patient flow and support needs.

**Send to Registration** 

### **JOB ACTION SHEET: Registration**

Check in, review paperwork, confirm eligibility

Lead 1	Registrar/Maître D (1 staff)
	Welcome!
	Confirm appointment on roster (highlight or check off)
	If appointment found, send to open registration table
	If appointment is not found, send to Floor Supervisor to resolve
	Track/estimate number of no shows, report to floor supervisor regularly for vaccine
	planning
Gener	ral Registration (6 staff)
	Welcome!
	Eligibility Check (sample of past proof of eligibility below, review current state guidance)  ☐ Maine Residency – State of Maine ID, piece of recent mail with name/address ☐ Age – ID, or self-attestation
	Ensure paperwork has been completed correctly:
	□ Permission/Consent Form
	☐ CDC Prevaccination Checklist for COVID Vaccination
	If patient is here for Dose 2, place CDC Vaccination Card on TOP
	"You will receive < <insert name="" vaccine="">&gt; today."</insert>
	☐ Offer patient Vaccine Information Sheet or Emergency Use Authorization (EUA)
	Fact Sheet

#### **Send to Vaccination**

#### **JOB ACTION SHEET**

### Vaccinator, Medical Observer, Pharmacy

Vaccinate patients safely

Vacci	nator
	Call patient to your Vaccine Station.
	Take Consent Form to pharmacy.
	Receive vaccine, Vaccine Label for Consent Form, and CDC COVID-19 Vaccination
	Record Card or label (if dose 2, 3 or booster) from pharmacy.
	Return to vaccine station.
	<ul> <li>Review Consent Form &amp; CDC Prevaccination Checklist with patient.</li> </ul>
	<ul> <li>Verify Vaccine Information Sheet has been given to patient.</li> </ul>
	Administer vaccine following safe handling of medication and infection prevention
	practices.
	o Gloves optional (CDC guidance)
	Complete Consent Form with signature, attach vaccine label, document anatomical
	location of vaccine (left or right deltoid).
	Attach vaccine label and complete CDC COVID -19 Vaccination Record Card and give to
	patient.
	Give post-it note with 15-minute release time (or 30 min. if required).
	Direct patient to the Checkout station.
Medic	eal Observer
	Ensure 1 qualified person is assigned to be medical observer at all times.
	Ensure phone, Anaphylaxis kit, first aid kit & AED are accessible.
	Welcome each patient; confirm 15- or 30-minute wait.
Pharn	nacv
П	Draw up vaccine in single dose syringe.
	Prepare and label vaccine syringe.
П	Provide mailing label sized pre-printed vaccine label for consent form (includes vaccine
_	information needed for ImmPact entry, including lot number).
	Provide small vaccine label for CDC COVID -19 Vaccination Record Card.
	Log in patient for tracking (assign to administrative volunteer, who can also dispense
_	vaccine to vaccinators).
	Enter end-of-night waste in ImmPact.

#### **Send to Checkout**

### **JOB ACTION SHEET: Checkout & Scheduling**

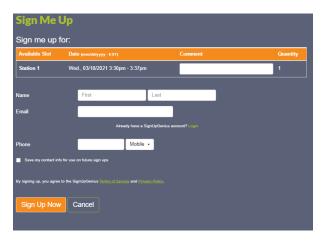
Review post-vaccination paperwork for accuracy and schedule second dose, if necessary

	Choose laptop station, open web browser to the SignUpGenius Registration Link of the day.
	Once a patient comes to your station, collect all paperwork.
	Confirm all required fields on the permission form are complete (sample provided), name is legible & confirm verbally with patient dose # and arm that was vaccinated (recorded on consent form).
IF SEC	COND DOSE IS NEEDED
	Find a time on the schedule that works for the patient 3 weeks from their first dose, or
	within current CDC recommended second dose window.
	Fill in all fields in SignUpGenius:
	o Name
	<ul> <li>Email Address, if available (preferable to have an email address for ease of mass communication)</li> </ul>
	o Phone
	Write appointment date and time on the back of the CDC Vaccination card and return it
	to the patient along with the release time provided by Vaccinator.
	Provide blank forms for dose #2, reminding patient to <b>bring completed forms and their</b>
	CDC Vaccination card to their second appointment.

#### **Send to Observation**

☐ Remind patient they need to email (preferable) or call with any changes or cancellations.

and direct them to stay there until release time



SignUpGenius Scheduler Screen Shot

## **APPENDIX 2 Sample Forms**

#### **STAYS WITH PATIENT**

Vaccine Information Sheets or Emergency Use Authorization Sheets: Need to be available to patient

- PDFs of all vaccine information sheets available: <a href="https://www.cdc.gov/vaccines/covid-19/info-by-product/index.html">https://www.cdc.gov/vaccines/covid-19/info-by-product/index.html</a>.
- Clinics can provide access to website and phone on site to meet requirement.

Global website	Telephone number
www.cvdvaccine.com	
	1-877-829-2619 (1-877-VAX-CO19)

**CDC Prevaccination Checklist for COVID-19 Vaccination:** Vaccinator reviews with patient https://www.cdc.gov/vaccines/covid-19/downloads/pre-vaccination-screening-form.pdf



**CDC COVID-19 Vaccination Record Card** – Remind patient not to laminate and to bring to all appointments!

#### **STAYS WITH CLINIC**

**Consent form:** See sample **COVID-19 Health Screen and Permission Form** used by Maine CDC to obtain consent and document vaccination.

## Prevaccination Checklist for COVID-19 Vaccination



For Vaccine recipients: The following questions will help us determine if there is any reason you shot get the COVID-19 vaccine today. If you answer "yes" to any question, it does not necessarily mean you should not be vaccinated. It just mear additional questions may be asked. If a question is not clear, please ask you	Age —
healthcare provider to explain it.	Don't Yes No know
1. Are you feeling sick today?	
Pfizer-BioNTech	Another Product
How many doses of COVID-19 vaccine have you received?	
Did you bring your vaccination record card or other document	ation?
3. Do you have a health condition or are you undergoing treatment or severely immunocompromised? (This would include treatment for cancimmunosuppressive therapy or high-dose corticosteroids, CAR-T-cell therapy, hematop or Wiskott-Aldrich syndrome)	er or HIV, receipt of organ transplant,
4. Have you received hematopoietic cell transplant (HCT) or CAR-T-COVID-19 vaccine?	cell therapies since receiving
5. Have you ever had an allergic reaction to:  (This would include a severe allergic reaction [e.g., anaphylaxis] that required treatmen to ao to the hospital. It would also include an alleraic reaction that caused hives. swellin  • A component of a COVID-19 vaccine, including either of the following o Polyethylene glycol (PEG), which is found in some medications, succolonoscopy procedures	na. or respiratorv distress. includina wheezina.) J:
o Polysorbate, which is found in some vaccines, film coated tablets, a	nd intravenous steroids
A previous dose of COVID-19 vaccine	
<b>6.</b> Have you ever had an allergic reaction to another vaccine (other or an injectable medication? (This would include a severe allergic reaction [e.g., anaphylaxis] that required treatmen to go to the hospital. It would also include an allergic reaction that caused hives, swelling	nt with epinephrine or EpiPen* or that caused you
7. Check all that apply to you:	
☐ Am a female between ages 18 and 49 years old	☐ Have a bleeding disorder
☐ Am a male between ages 12 and 29 years old	☐ Take a blood thinner
☐ Have a history of myocarditis or pericarditis	$\square$ Have a history of heparin-induced thrombocytopenia (HIT)
☐ Have been treated with monoclonal antibodies or convalescent serum to prevent or treat COVID-19	☐ Am currently pregnant or breastfeeding
☐ Diagnosed with Multisystem Inflammatory Syndrome (MIS-C or MIS-A) after a COVID-19 infection	☐ Have received dermal fillers ☐ Have a history of Guillain-Barré Syndrome (GBS)
Form reviewed by  Adapted with appreciation from the Immunization Action Coalition (IAC) screening ch	Date

26

12/02/2021 CS321629-E



### Maine CDC HEALTH SCREEN & PERMISSION FORM – COVID-19 Vaccine Please answer the following questions about the person to be vaccinated.

Name:		Date of Birth:		Age:		Preferred Language:				
Do you have health insurance? ☐ Yes ☐ No Gender: ☐ Male ☐ Female ☐ Non-Binary/X										
If yes:   Public Private  Transgender Prefer not to disclose Other										
Race: Ethnicity:										
	n Indian or Alaska Nat	□Black		☐Hispanic/Latino						
□Asian			America	n		□Non-Hispanic/Non-Latino				
□Native H	lawaiian or		□White							
	cific Islander		□Other							
Do you hav (SSDI)? □	The a disability that has reference $\square$ No $\square$ Pro	esulted in elig efer not to disc		lemental Se	curity Inco	me (SSI) or s	Social Sec	urity Dis	sability In	surance
Street Addre	ss:		City/Zip:		Phone:	E	lmail:			
Please ans	wer the following ques	tions about <u>th</u>	e person named	d above:					Yes	No
Have you	ever received a dose	of COVID-1	9 vaccine? (If	yes, docui	nentation	is required	)			
	had, in the last 10 da							one		
	body aches, headach							540,		
	miting, or diarrhea?	·, 11• · · 1000 0		., 5012 1110	,		1) 11000,			
	been advised to isola	te or quarant	ine for COVII	)-19 at this	time?					
	e you ever had a seve					mn12 a raa	ation for			
	ch you were treated v						SHOII IOI			
2. Have	e you ever had a non	-severe allerg	gic reaction to	a previous	COVID-1	9 vaccine?	For exan	nple,		
	you have hives, swell									
	e you ever had an all									
1000000	ications such as laxat		- Carrier - Carr	olonoscopy	y procedui	res) or poly	sorbate?			
	(found in some vaccines, pills, & IV steroids)									
4. Have you received any other vaccines in the last 14 days?										
5. Have you received passive antibody therapy for COVID-19 within the past 90 days?										
6. Do you have a weakened immune system for which you take immunosuppressive medications?						ıs?				
7. Do you have a bleeding disorder or are you taking a blood thinner (e.g. Coumadin, Xarelto)										
	you pregnant or brea									
	ou have any dermal									
If you ansv	vered "Yes" to any of	the above qu	estions, please	speak with	the Clinic	al Lead at t	his site be	fore pro	oceeding	
PERMISS	ION TO VACCINAT	E								
	was given a copy of the				t, which I l	nave read or	had this fa	ct sheet	explained	to me,
	d I understand the bene						T C	and Parent	T	rozor <b>a</b> t
	inderstand that a record inderstand that I am ad							on Syste	m, ImmP	act.
	give permission for the							below.		
	sive permission for the		. mee.me to be g	-	person na	neu above s	7 3-66	De10111		
X					ate:					
	f adult to be vaccinated	d, OR Signatui	re of guardian of			ed				
X				D	ate:					
Signature o	f interpreter (if applica	ble)								
FOR OFFICE USE ONLY:										
Dose	Date Dose	Vaccine	Lot Dose			and Creden		ection	Route	EUA date
	Administered	Manufactur	er Number	Volume	of Vac	of Vaccine Provider		Site - eltoid		
	J. V							Left		
Dose 1	1 1							Right		
	Immediate I	Reaction					Va	accine Ex	piration	
	COVID-19 Vaccinati	on Card Comp	oleted: 🗆 Y	□ N			1			
	COVID IS VICENMIATOR CARD COMPLETE.									

## **APPENDIX 3 Sample Communication**

## Sample Patient Reminder & Confirmation Email (Auto Generated from SignUpGenius)

#### <<< Appointment Details Auto Generated>>

This is confirmation/reminder of your COVID Vaccine Appointment, details above.

Your appointment will be at the Brunswick Parks and Recreation Center, 220 Neptune Dr., Brunswick.

#### Reminders:

- If this is your second dose, don't forget your CDC COVID-19 Vaccination Record Card.
- There are 2 required forms for each vaccination, forms can be found on our website or filled out at the clinic.
- Wear clothing that allows access to your upper arm.

IMPORTANT: It is important you keep your appointment, as vaccine availability differs day-to-day. If you need to reschedule, please call the MaineHealth Vaccine automated assistant at (877) 780-7545 or email <a href="MidCoastCovidVaccine@mainehealth.org">MidCoastCovidVaccine@mainehealth.org</a>. All appointment details can be viewed at the top of this message. We are happy to assist you with any appointment needs.

If you would like to complete the required COVID-19 health screen and get an entry pass before your appointment, visit www.midcoasthealth.com/screen or text 'SCREEN' to 47225 the day of your appointment. Screeners will also be available at the clinic doors.

#### Thank you,

- Mid Coast Hospital COVID Vaccine Team

#### **Sample Email Auto Reply**

A vaccine clinic email account was created and staffed by the communication coordinator and managers. An autoreply was created and updated regularly to address common questions.

Thank you for contacting the Mid Coast Hospital COVID-19 Vaccination Clinic. Although we do check this email regularly, please read the following information, as it may help guide you to the answer you need in a timelier manner.

For current **eligibility**, **forms**, **directions**, **hours**, **and appointment availability** visit our website: www.midcoasthealth.com/vaccine.

**Replacement Vaccine Cards:** The Maine Immunization Program does not issue replacement COVID-19 vaccination cards, but you can use the <u>online record request form</u> or call 207-287-3746 to obtain a copy of your immunization record.

**Community Vaccination Sites:** There are many community locations also offering COVID-19 vaccines. Please visit <a href="www.vaccines.gov">www.vaccines.gov</a> or <a href="https://www.maine.gov/covid19/vaccines">https://www.maine.gov/covid19/vaccines</a> to find other locations and hours that are convenient for you.

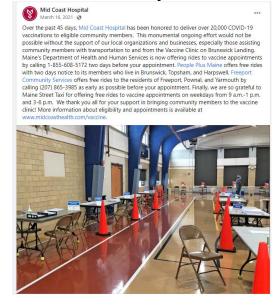
For all other inquiries, we will respond as soon as possible.

Thank you,

Mid Coast Hospital COVID-19 Vaccination Clinic

#### **Sample Social Media Posts**

#### **Share Community Resources**



#### **Communicate Storm Closures**



Due to the impending snow event, for the safety and wellbeing of our patients, we are cancelling the Mid Coast Hospital Vaccine Clinics and the Mid Coast Hospital Testing Site on Tuesday, February 2. We will be emailing and calling individuals who had an appointment scheduled for testing or vaccination, and we will make an appointment available to them in the next seven days. Mid Coast Medical Group practices, Laboratory Service Centers, and the Mid Coast Walk-In Clinic will delay opening until 11 a.m. Learn more: http://www.midcoasthealth.com/.../news-storm-undate.

MIDCOASTHEALTH.COM
Storm Update, Tuesday, February 2: Closures

#### Advertise Changes in Eligibility



The state of Maine announced today a change in COVID-19 vaccine eligibility. Beginning March 3, 2021, Maine residents aged 60 and above will be eligible for vaccination.

As this next phase opens up, Mid Coast Hospital will prioritize Maine residents 70 and older who have already pre-registered, and will also begin scheduling vaccination appointments for residents 60 and over within the coming week.

To ensure patient and staff safety, vaccination at the Mid Coast Hospital Vaccination Clinic continues to be by appointment only. Anyone in the community, regardless of age or eligibility, can visit www.midcoasthealth.com/vaccine or call (877) 780-7545 to use MaineHealth's automated COVID-19 Vaccine Assistant, which helps with determining eligibility and allows people to pre-register for a vaccine appointment.

Once you are eligible and there is an appointment available, you will receive a call back, in the order we received your call, to schedule a vaccine. Pre-registering is the best way to secure a place in line for the vaccine.



#### Celebrate Successes



This May, Mid Coast Hospital's COVID-19 Vaccination Clinic coordinators were honored to receive the Spirit of Service Award from Bowdoin College and the Joseph McKeen Center for the Common Good. The award recognizes the exceptional service of the Vaccination Clinic coordinators, a dedicated group of public health professionals who have changed lives and given hope to the community. Congratulations on this extraordinary achievement!



## APPENDIX 4 Helpful Websites & References

#### **Helpful Websites**

COVID-19 Vaccination in Maine

https://www.maine.gov/covid19/vaccines

CDC Large-Scale Vaccination Clinic Output and Staffing Estimates

https://www.cdc.gov/h1n1flu/vaccination/pdf/A\_Wortley\_H1N1\_sample\_clinic.pdf

Maine Immunization Information System (ImmPact)

https://www.maine.gov/dhhs/mecdc/infectious-disease/immunization/immpact.shtml

SignUpGenius

https://www.signupgenius.com/

U.S. COVID-19 Vaccine Product Information

https://www.cdc.gov/vaccines/covid-19/info-by-product/index.html

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