

Mobile Team Vaccine – Clinical Readiness

This document was created as a part of the Mobile Team Vaccine Documentation. This Clinical Readiness document provides the Clinical Vaccine Team information pre-, during and post- the site's clinic day. This includes roles and responsibilities, arrival information, vaccine readiness, documentation and unused doses. Please refer the [Mobile Team Vaccine – Training](#) document if you require more information.



NOTE: In this document

- *Clinical Vaccination Team* refers to the clinical team coming on site to help vaccinate
- *Site Team* refers to the staff that work for the organization where the vaccinations are taking place and who will be working with the Clinical Vaccination Team
- *Vaccine Recipients* refer to people at the site receiving the vaccine, such as residents, staff, and essential caregivers (ECGs)

Pre-Site Clinic Day

- Pack two duffle bags or containers using checklist/guidelines below:

Bag 1 (PPE, Large Black Bag)

- Gloves** – enough for 4 carts:
 - Pack a variety of sizes, formulations (i.e. latex, latex-free) and suitable quantities for team, along with 1-2 extra boxes
 - Recommend bringing 1 size up from what people normally wear to make it easier to remove/put on between vaccinations
- Face shields** – 10 on average, pack last on top of isolation gowns and visor masks
- Visor Mask Box** – replace with a new box if down to 5-6
- Hand Sanitizer** – 4 bottles, if less than half in bottle combine together
- Isolation Gowns** – 20 to 30 gowns;
 - If going to outbreak units take additional gowns, ~30
 - Also helpful to have the Clinical Vaccination Team easily identifiable (e.g., bring yellow gowns)
- Baggies of level 3 masks** – replenish if less than 15 masks
- Wipes** – take 2 containers approved disinfecting wipes and put in top side pocket

Bag 2 (Needle supplies, Smaller bag)

- Bag of vanish point syringes** – Round up to closest 100 (e.g. if estimated 140 doses pack 2 boxes of 100); if closer to 100 pack for next 100 (e.g. 190 doses pack 3 boxes)
- “Emergency”** stash of **syringes** in case estimate exceeded; only need 20-30 extra
- Blue Pads** – 2 bags of pads (total 20)
- Anaphylaxis Kit & Epi Pen** – check expiry before packing
- Alcohol Swabs** – At least 2 boxes
- Cotton Balls** – 1 biohazard bag full of cotton balls, replenish if needed
- Band-Aids** - 1 box of Band-Aids, replenish if needed
- Tissue Boxes** – 4 boxes, not needed but some prefer having
- 2 white trays**

Portable Cooler

- Prepare Portable Cooler
- Ensure temperature probe resting against an ice pack and ice packs are covered with blue pad; Moderna vaccine containers should not be in direct contact with ice packs
- Prepare labels for vials and syringes

Sample Vial Label

Moderna COVID-19 Vaccine

Volume: 0.5 ML Lot: 300042460

Discard by:

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Roles and Responsibilities

- The Clinical Vaccine Team lead will determine the roles and responsibilities for the day on site and will liaise with the Site Team's staff; numbers will depend on the size of the site and resources available on site:
 - First 30 minutes
 - 1-3 people to help thaw, prepare and dose vaccine
 - 1-2 people to prepare carts and set up supplies
 - Remainder of the clinic
 - 1-2 people to draw up vaccines, to maintain consistency
 - 2-4 MD/nursing staff to vaccinate
- Create group chat consisting of all Clinical Vaccination and Site team members at that particular site

NOTE:



- It can be helpful to document this in a visible location for the team to reference
- If someone is new to the team and has not done mobile vaccinations before, pair them with someone more experienced; does not need to be the entire time unless they are going to an outbreak or locked unit
- It is recommended for teams to work together continuously from site to site to ensure consistency
- Advise new members that a group chat is the best way to communicate, especially if more doses are required, they are planning to move to a different floor, etc.

Day of Site Clinic

Arrival

- Clinical Vaccination Team Lead to meet site's designated lead (e.g., Director of Care)
 - Introduce self and team
- Clinical Vaccination and Site Teams to meet to review plan for day including layout, supplies and roles team members will play for the day
 - Note that both teams will work in tandem
 - Work with site to determine the best flow for site
 - Preferred flow for LTCH has been to vaccinate all clients, followed by locked/outbreak clients, followed by staff and then Essential Care Givers (ECGs); if it is simply not feasible or efficient to do something in a certain way all members should feel free to speak up
 - Confirm if there is an on-call list in the event there are leftover doses (e.g. approved priority populations as identified by TPH), so no doses are wasted
 - Write important notes down in notebook to help organize and develop a plan
 - Confirm number of consenting clients per floor, staff and ECGs, if possible confirm there's a list, in order to get concrete numbers of doses required for the team to take to the unit/floor
 - Confirm if there are any outbreaks, clients on contact/droplet isolation, or locked units (e.g. clients with cognitive impairment)
 - Confirm site has enough staff to support and they are able to do multiple floors at a time, if needed
 - Confirm plans for 15-minute observation period with Site team
 - Recommend site to do observation
 - Common areas, outbreak/locked units and bedbound clients require consideration
 - Confirm site was able to provide empty carts, sharps disposal containers and extra garbage cans
- After convening with the Site team, decide who will be sent to which floor and document the plan before holding mini-team huddle

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- If number of clients per unit are low, may even assign team members up to four floors at a time
- Clinical Vaccination Team Lead identifies and documents roles and responsibilities

Vaccination Readiness

- Clinical Vaccination Team Lead requests Site's Team Lead to show where vaccine is stored
 - Count vials, document lot number and expiry date
 - Full vials must be stored in original box at all times
 - If the site does not have a fridge, they can put vials in a room temperature environment that is secure and away from excessive light. Once thawed, the vaccine will expire after 12 hours at room temperature (6 hours if punctured).
- Clinical Vaccination Team Lead is only person who distributes drawn syringes to the teams/carts and maintains counts
 - Lead places required doses on each cart
 - A Clinical Vaccination Team member must stay with vaccine station at all times
- Vaccine is in frozen state when it arrives. It takes 15 minutes to defrost out of the refrigerator
 - Hold vials in hand until just thawed; **NOTE:** Do not roll, jostle or shake
To check for thaw, hold vial up to light and gently tip to see if there are any frozen sections
- Write thaw time on each vial (can be written directly on label)
 - Each vial is 10 doses (drawn with regular 25 gauge needles and 3 cc syringes); **NOTE:** Do not use blunt needles to draw; the Vanishpoint 25 g 1cc syringe provides 11 doses/vial
 - Once each syringe is drawn with dose, place label at base of syringe
- Clients are priority – Clinical Vaccination Team Lead to ensure there are enough doses prior to allocating for staff and ECGs
- When on site, remind team members to state which floor/unit they are at and how many doses they need when communicating via group chat to reduce confusion and improve efficiency

IMPORTANT:



- Do not mix vaccine from multiple vials into the same syringe – even if it is same lot number
- Keep 1-2 vials in cooler and continue to monitor running tally; draw up only when sure there is a need for it (e.g. more staff members wishing to get vaccine than expected)
- **Never Leave Vaccines Unattended**

Clinic End – Documentation

- The Clinical Vaccination Team Lead completes and documents counts onto form:
 - All empty vials are disposed of in sharps disposal container by Clinical Vaccination Team
 - Any un-punctured, refrigerated vials are labelled: “Discard by d/m/y time” and calculated by adding 30 days from thaw time
 - Any thawed vials are drawn up into syringes and labelled: “Discard by d/m/y time” and calculated by adding 12 hours from thaw time if un-punctured and if punctured 6 hours from puncture time

IMPORTANT:

Shelf life for Moderna Vials



- Un-punctured vials maintained in refrigerated state (2 – 8 degrees) last **30 days from thaw**
- Thawed, un-punctured vials last **12 hours from thaw**
- Thawed, punctured vials and drawn up syringes last **6 hours from time of puncture**
- Refer to product monography for more detailed information

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Clinic End – Unused Doses

- If there are any unused doses available, site's Team Lead to check:
 - If any additional clients would like vaccine (site would arrange consent)
 - Any additional ECGs who are eligible for and would like the vaccine (site would arrange consent)
 - Any additional approved priority populations who are affiliated with the site and could come on site when required
- Any additional potential vaccinees must come to the site within the expiry time frame to receive vaccine
- The Clinical Vaccination Team is not required to stay and wait for any off-site staff to arrive – the site is responsible for the consent, administration and documentation of any doses after the team leaves



IMPORTANT:

- The site is responsible for obtaining and documenting consent and administration