

Mobile Team Vaccine – Site Readiness

This document was created as a part of the Mobile Team Vaccine Documentation and provides the Site's team information pre-, during and post- the site's clinic day. The document aims to ensure that sites are well prepared to support the Clinical Vaccination Team coming on site. It is meant to be a preparedness support for your team. There will also be a Go-Live meeting to review your site's vaccine clinic.

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 clients, staff, and essential caregivers (ECGs)

Pre Site Clinic Day

Pre Go-Live Prep Meeting

The Joint Operations Team will hold this meeting at least 1-2 days before your Vaccination Clinic to review the high-level plan. This includes an overview of the day of vaccination, consent and documentation required pre-, during and post- clinic.

- Start to think about what we will need to know about your site including layout, special information about your clients (e.g. language), outbreak status, approximate number clients that will not be able to come to a centralized location, and information about your daily schedule or special events to be aware of
- Identify Site Team Lead for the day to work in parallel with the Clinical Vaccination Team, help ensure all site staff know their roles for the day and are supported
- Familiarize yourself with the *Vaccine readiness Checklist for Toronto LTCH & RH (v3)* and start to complete this – you will need to send this to the Joint Operations Team after the call
- Begin to populate demographic information of all vaccine recipients that you have received consent from into the "Client Load template v6 - with dosage-v4" (e.g. first name, last name, date of birth, gender, OHIP number). Please refer to [COVax Guide – Client Load Template](#) for more information on COVax and documentation

Consent



IMPORTANT:

- Your site is responsible for obtaining and documenting informed consent for all vaccine recipients at your site

- Please use the [COVID-19 Vaccine Screening and Consent Form](#) when obtaining consent
- Have a process in place to **ensure physician assessment and documentation** for each client
 - If not, confirm a health professional on your team is reviewing eligibility and if a client answers a question that makes them ineligible, the Clinical Vaccination Team will not be vaccinating them
- Staff & ECGs:**
 - If you are unable to obtain written consent from staff/ECGs ahead of the clinic, **print copies of the consent form** to have staff/ECGs fill them out at the home before receiving the vaccine
 - Encourage staff to talk to their primary care provider (PCP) if they have questions about their eligibility for the vaccine. If they do not have a PCP there will be MDs on site that can review their questions; however we try to minimize due to lack of clinical documentation in a health record
- Have all consent prepared for the mobile vaccination team to review when they are on site with a complete list of all people to be vaccinated; this will speed up the on-the-ground process

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Preparation

Site Preparation

- Think about a designated vaccination room and space for clients post-vaccination for monitoring, per floor/unit (e.g. dining hall, common room)
- For a non-centralized model (e.g. room-to-room vaccination for non-ambulatory clients, outbreak floors, locked units, etc.) think about how the clients can be monitored
- Think about a designated vaccination room and space for staff and ECGs post-vaccination for monitoring (e.g. ground floor common room)

Supplies and Set Up

- Ensure your fridge has been between 2-8 degrees for the past 14 days with temperature logged twice per day (as per TPH approval); this is where you will store your vaccine
- Ensure you have completed consent for all vaccine recipients and have enough copies of the Consent form for any additional vaccine recipients
- Have the following supplies available:
 - Hand sanitizer pump bottles
 - Mobile carts (3-4)
 - Empty Sharps disposal containers
 - Garbage bins/bags
 - Blue pads
 - Tables and chairs for staff and ECG vaccination stations (in common room)
 - Additional ad hoc materials (e.g. carts, chairs, tables, garbage)
 - Extra PPE available for the Clinical Vaccination Team if required (gloves, isolation gowns, level 3 surgical masks & face shields)



NOTE:

- The Clinical Vaccination Team will bring syringes (1' or 3'), 25G 1.25" needles or 25Gx1" 1mL VanishPoint syringe, alcohol swabs, Band-Aids, Cotton balls, Anaphylaxis kit, PPE for Clinical Vaccination Team

Roles and Responsibilities

The Clinical Vaccination team will be there to support your site in vaccinating recipients; numbers will depend on the size of your site and resources available on site. Below are the roles for you to identify for the clinic day:

- 1 Site Team Lead
- 1-4 staff members (if available medical directors, physicians, nursing, and PSWs) for observation period, eligibility assessments and vaccination hesitancy
 - For LTCHs, recommended having a unit lead per unit who understands which clients on each unit had consented, has a list of the clients and proof of consent and is a floor lead
- 1-2 employed members of the site *per cart/vaccination station* to assist vaccinator, support vaccine recipients, document and log vaccine and dose
- 1-2 employed members of the site (e.g. PSW, Food Services, Housekeeping, etc.) to facilitate bringing vaccine recipients to the immunization station and then to observation area

If bedside vaccination needed:

- 1-2 staff members to accompany mobile team vaccinator to the rooms to support clients and document
- 1-2 staff members for observation period

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NOTE:

- Huddle with your staff that are supporting the clinic to ensure everyone knows what is going to happen and are prepared

Documentation

For each vaccine recipient to be immunized, ensure:

- Consent has been obtained (self/SDM/PGT) and documented as per Ministry process
- Allergy history and other contraindications reviewed and eligibility for Moderna vaccine confirmed
- Client Load Template* pre-populated with demographics of consented vaccine recipients (e.g. first name, last name, date of birth, gender, OHIP number)



NOTE:

- Please refer to the *COVax Guide – Client Load Template* document for more information on COVax and documentation

Send to Vaccination Team

- Send completed “*Vaccine Readiness Checklist for Toronto LTCH and RH - v3*” to mobilevaccinationteam@uhn.ca

Vaccine Recipient Preparation

Remind vaccine recipients to:

- Dress in clothing that makes it easy to administer vaccine (e.g. short sleeves, or stretchy fabric that is easy to pull up to expose upper arm)
- Wear a mask during clinic and perform hand hygiene

Day of Site Clinic

Vaccine Arrival

- Vaccine Acceptance Lead** will accept the vaccine delivery from the courier and place vials in the approved vaccination fridge. Please complete fields on packing slip and take a picture/scan the slip and send to the name on the slip and your Site Lead

Meet with Clinical Vaccination Team

- Clinical Vaccination Team Lead to meet your site’s **Team Lead** (e.g., Director of Care) when they arrive on site and walk through the plan for day including layout of site, flow for vaccination, supplies and roles team members will play for the day
- Both teams will work in tandem
- Clinical Vaccination Team will confirm:
 - number of consenting clients per floor, staff and ECGs
 - any outbreaks, clients on contact/droplet isolation, or locked units (e.g. Dementia clients)
 - If there is an on-call list of approved priority populations affiliated with your site –in the event there are leftover doses, so no doses are wasted

Vaccine Preparation

- 1-2 Clinical Vaccination team members will prepare the vaccines
- Please set up:

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- A table close to the fridge
- Ensure space has good lighting
- Sharps container and garbage nearby

Please refer to the appendix for information on site set up and client flow

Adverse Events Preparation

- If you have epinephrine, Benadryl or oxygen on site, please know where it is and have it available
- The Clinical Vaccination Team will also bring an anaphylaxis emergency kit including Epinephrine and Benadryl
- If an Adverse Event Occurs**
 - The Clinical Vaccination Team will provide medical support
 - If additional support needed, LTCH/RH staff will call 911 (as you know your location best)
 - Complete the [AEFI Reporting Form](#), document in your health record and follow local procedures

Clinic End – Documentation

- Send following information to mobilevaccinationteam@uhn.ca and your designated site lead as soon as your clinic has finished:
 - LTCH/RH Site
 - Vaccine dose (dose 1 or 2)
 - Number of clients vaccinated
 - Number of staff vaccinated
 - Number of ECGs vaccinated
 - Clinic start time
 - Clinic end time
- Update the *Client Load Template* with dosage information and enter into COVax using one of the following options:
 - Option One – inputting into COVax independently: If your site feels comfortable inputting information into COVax independently, please do so within 24 hours of your clinic
 - Option Two – support from Mobile Team Vaccine: If you require support, email your completed *Client Load Template* to mobilevaccinationteam@uhn.ca and the team will input in COVax on your behalf

Please refer to the *COVax Client Load Template Instructions Document* for more information.

IMPORTANT:



- Any inappropriate use of the vaccines for non-vulnerable populations will be reportable to regulatory bodies and disciplinary action will be taken. Also, the vaccine becomes unviable if transported without following a very specific protocol.

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 vaccine recipients must come to the site within the expiry time frame to receive vaccine

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- 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:

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

Mobile Team Vaccine Documentation

Consent	
COVID-19 Vaccine Screening and Consent Form	This consent form, released January 23, 2021, is the latest consent form
COVID-19 Vaccine Obtaining Informed Consent Script	A script for Healthcare Providers when obtaining Informed Consent
Dose 1 Site Documentation	
Toronto Public Health LTCH/ RH Readiness Checklist	This TPH checklist will be required in order to determine when your home will be able to receive Moderna vaccine for residents, and support delivery
Dose 2 Site Documentation	
Mobile Team Vaccine Dose 2 Readiness Checklist	Mobile Team Vaccine Dose 2 LTCH/RH Readiness Checklist and Information for sites to complete
Mobile Vaccination Clinic Overview Dose 2 Plan	The presentation of the Dose 2 Vaccination Clinic with the Joint Operations Site Lead
Recommendations for LTC Second Vaccine Dose (Jan 25 2021)	Additional information on clinical assessment following COVID-19 second dose vaccination
Other Site Documentation	
Vaccine Data Entry Form	To use if vaccinating staff and ECGs, manually fill out the bottom portion of the form to provide proof of vaccination to staff and ECG's
Vaccine Data Entry Form – Receipt*	This this version just includes two copies of the printable 'receipt' portion of the form to use during your clinic
AEFI Reporting Form	The Adverse Event Following Immunization (AEFI) form should be used if there is an adverse event while vaccinating; the form will need to be sent to your local Public Health Unit by a secure means
Adverse Event Following Immunization Reporting	This Public Health Ontario provides information on the types of Adverse Events to report
Mobile Team Vaccine - COVax Guide: Client Load Template (20210125)	A guidance document on the COVax spreadsheet/Client Load Template for Dose 2
Documentation for Vaccine Recipients	
After Care Sheet for COVID-19 Vaccine	A document to provide to vaccine recipients information on what to expect after their vaccination

* To view please [click here](#) and go to the **Site Readiness Section** to download the word version to the Vaccine Data Entry Form Receipt

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Appendix

Guidance for Site Set Up and Client Flow

Layouts will differ based on site size and layout, the following shows options and images of potential layouts. The sites will be most familiar with their layout and client needs and will work with the site leads to identify the best set up for their needs. Please note: The Joint Operations Site Leads will prep sites for these options.

Centralized Vaccine Area – preferred for larger settings/sites

We recommend a large area on site is used for all staff and ECGs. However, we recommend smaller areas on the unit/floor (e.g. dining rooms) are used for clients if possible, rather than taking them to a larger space on site.

- For sites with on-site refrigeration (validated with Toronto Public Health)
 - **Drawing Station:** Set up a table close to the fridge, in a well-lit area, to draw up vaccine doses
- Vaccination Stations:** Each station should have a table or cart with supplies and a sharps disposal container (see vaccination cart setup)
- Client Flow:** Clients may line up while observing social distancing OR site staff may choose to bring clients to locations (e.g. bring in groups of 10); staff and ECPs to be vaccinated after clients
- Observation Area:** All vaccine recipients should be monitored for adverse effects for a period of 15 minutes. The sites should designate a large area that will enable social distancing

Vaccination for Non-Ambulatory Clients

- Clients who cannot ambulate, have responsive behaviors or need to remain in their room can be vaccinated in their room
- Consider alternate observation strategy
- Vaccinations for these clients should be done last after completing all ambulatory clients on the unit first

Vaccinating a Unit in Outbreak

- Outbreak units will be visited once vaccination of other clients is complete
- COVID negative clients can be vaccinated in a central room on this unit if appropriate or at the bedside
- Have a separate cart for sharps disposal container so this can be brought in and out of room without contaminating main cart

Vaccination for Smaller Settings/Sites

- Consider having ambulatory clients sit or wait at their doors for their vaccination
- If this is not possible (e.g. if multiple clients share a room and limited space for observation), may have to consider vaccination in rooms instead
- Staff from the site may consider observation walk-throughs at regular intervals