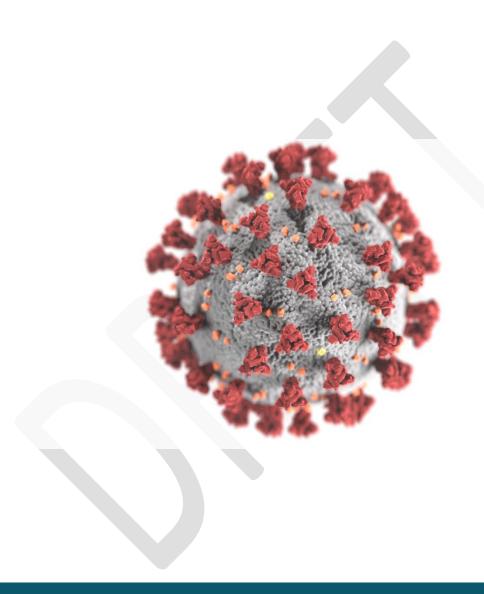
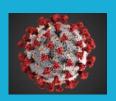
# COVID-19 Mass Vaccination Plan

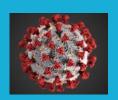


New Haven Health Department NOVEMBER 2020 VERSION 1



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### **RECORD OF CHANGES**

Date of Original Version: November 23, 2020

Number 1	Change		Author
	1/8/21	Phase eligibility, hourly output	Brooke Logan

#### **ACKNOWLEDGEMENTS**

This Plan was developed utilizing the *COVID-19 Mass Vaccination Planning Checklist*, located in Appendix K and N, and with input from internal and external partners. The following individuals contributed their expertise.

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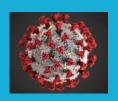
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#### **SECTION 1: INTRODUCTION**

#### A. Introduction

The City of New Haven Health Department (NHHD) must respond to and manage all public health emergencies that threaten the health and welfare of New Haven residents. To accomplish this, the NHHD has developed this COVID-19 Mass Vaccination Plan, to serve as an operational guide for mass vaccination of the COVID-19 vaccine within the City of New Haven.

#### **B.** Purpose

The COVID-19 Mass Vaccination Plan describes and documents the expected response by the NHHD to safely prepare for, activate, and implement an effective city-wide COVID-19 mass vaccination initiative to reduce COVID-19 related illnesses, hospitalizations, and deaths in New Haven. Using response guidance issued by the Centers for Disease Control and Prevention (CDC) and the State of Connecticut Department of Public Health (DPH)'s Office of Public Health Preparedness and Response, and Immunization Program, New Haven will work closely with DPH, other local health departments and districts, hospitals, and community partners to prepare and implement this COVID-19 mass vaccination initiative. This Plan will be modified and updated as more information about the COVID-19 vaccine, mass vaccination strategies, and additional guidance become available.

#### C. Scope

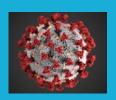
This plan is compatible with the Public Health Emergency Response Plan and utilizes common goals, strategies, and terminology. It applies primarily to large-scale emergencies that would cause severe illness, requiring a mass dispensing effort (i.e. dispensing of prophylactic medications or vaccines) over a defined period within the City of New Haven.

Capabilities and interventions in this plan are employed to prevent the spread of disease, not for the treatment of a disease.

NHHD has a limited cache of clinic supplies to set-up and operate points of vaccination (POVs) for an abbreviated period. Vaccines will be kitted with supplies necessary for administration. A full list of supplies that will be provided with the vaccine can be found in Appendix H. The Connecticut Department of Public Health has a stockpile of kitted supplies available if vaccines and supplies do not arrive in the same shipment. If DPH's stockpile is used, NHHD must send the kitted supplies to DPH to replace the used stockpile upon receipt.

#### D. Situation

The outbreak of 2019 novel coronavirus disease (COVID-19) was first reported on December 31, 2019 in Wuhan, China. Within a few weeks, the virus had spread rapidly throughout China and to several other countries. On March 11, 2020, the novel coronavirus disease (COVID-19) was declared a pandemic by the World Health Organization. On March 13, 2020, a national emergency was declared in the United States concerning the COVID-19 outbreak.



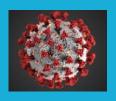
#### E. Assumptions

The City of New Haven Health Department will operate under the current guidance from the Connecticut Department of Public Health and the CDC including the planning assumptions for jurisdictions listed in the CDC COVID-19 Vaccination Program Interim Playbook for Jurisdictional Operations.

The scope of the New Haven Health Department plan is for First Responders and vulnerable populations as set out. Healthcare workers, pharmacies, businesses, and general population will be addressed by their respective organizations.

As new information is released about the Novel Coronavirus, the COVID-19 Mass Vaccination Plan will be revised to reflect the latest information.

- There may not be enough vaccine at first to vaccinate the entire population of the City. It may be necessary to vaccinate segments of the population in pre-designated groups at first, based on the risk of spread, impact to critical services, and nature of the disease. See Appendix H for populations to be vaccinated under this plan.
- The City may run a combination of open and closed POVs as well as utilize indoor and drive-through locations for vaccination clinics.
- Where there is a requirement for a second vaccine dose administered after the initial
  dose, additional logistical requirements for tracking a reminding those vaccinated will
  need to be implemented.



#### SECTION II: COVID-19 VACCINATION PREPAREDNESS PLANNING

#### A. Operations

The NHHD has extensive experience administering routine vaccinations for adult and pediatric populations, including seasonal influenza vaccination clinics in community-based settings. This fall's seasonal influenza clinics have permitted the evaluation of COVID-19 safety measures, e.g., pre-booking appointments, social distancing, mask wearing, COVID-19 screening, and the continual cleaning of public surfaces, to measure the effects on throughput and design.

Lessons learned through the administrations of routine vaccinations include:

- Creating and disseminating guidance, education, and clinic advertisement materials in multiple languages, including Spanish, Mandarin, and Arabic
- Allowing for paper registration and walk-in appointments for individuals who are unable to pre-register due to lack of internet access
- Addressing vaccine hesitancy among priority population is important to increase the number of individuals who elect to receive a vaccine.

#### **B. Staff Trainings**

Staff are trained on numerous topics ranging from vaccine ordering and inventory tracking, to role responsibilities at a POV via Just-in-Time trainings. The dates, topics, and audience for trainings are listed in **Table 1: Staff Trainings**.

The NHHD uses its seasonal influenza vaccination clinics as functional exercises for mass vaccination drills. Additionally, trainings are held with staff to hone their skills on vaccine administration, receipt, and storage, cold chain management, CT WiZ and VAMS.

### "Day-Of" or Just-In-Time Training

It may be necessary to utilize employees and volunteers who may not have received training on mass vaccination POV operations prior to the activation. Before activation, the POV Site Manager will provide an overview of POV operations, staffing, patient flow, key roles and responsibilities, supervisory and reporting relationships in the ICS structure, and staff documentation requirements including signing in and out procedures. The briefing will also include a review of all safety measures incorporated into mass vaccination POV operation to protect both staff and clients. A description of POV jobs and responsibilities is provided in **Appendix B**.



#### **Medical Screening and Vaccination Orientation**

Vaccination and/or Medical Operations Supervisors will provide training on patient screening, vaccine administration, per protocols, client flow, and how to answer certain frequently asked questions.

#### **Staff Walk-Through**

After training listed above is completed, the Medical Operation Leader and the Non- Medical/ Logistics Leader will walk their staff through their respective area of responsibility to familiarize them with their associated tasks and resources. The list of workstations in the POV can be found in **Appendix C**. All staff not associated with the actual dispensing operation should walk through the clinic to gain a better understanding of the entire operation.

#### **Late Staff Arrivals**

Late staff arrivals will receive orientation by Supervisors on a time-permitting basis.

**Table 1: Staff Trainings** 

Date of Training	Training Title/Topic	Audience		
12/2019	CT Wiz Inventory Mgmt	Grace Grajales, JAV		

#### C. Staff Vaccinations

All POV staff should be vaccinated at least two weeks prior to POV activation. Staff who are not vaccinated prior to activating the POV should be offered the opportunity to be vaccinated that day. A list of staff who have accepted and refused the vaccine will be maintained for liability reasons.

#### **D. COVID-19 Safety Protocols**

Each mass vaccination clinic will follow State and Local COVID-19 safety protocols to minimize the spread of the virus. Written messages relying the importance of social distancing, wearing a mask, and maintain proper hand hygiene will be displayed throughout each POV. Floors will be taped to ensure proper social distancing for staff and individuals waiting for a vaccine. All individuals staffing a mass vaccination clinic or attending a clinic to receive a vaccine will be required to wear mask. Proper hand hygiene will be required for staff and encouraged for individuals visiting the POV. Hand sanitizer will be made available for us by all and staff will have access to handwashing stations with warm water and soap. Any individual



exhibiting signs of COVID-19 will be turned away from the clinic and asked to make a new appointment for a later date. Staff will be screened for COVID-19 daily at the start of each vaccination shift.

# SECTION III: COVID-19 ORGANIZATIONAL STRUCTURE AND PARTNER INVOLVEMENT

#### A. Organizational Structure

The NHHD's COVID-19 response requires coordination between senior health department staff, various City departments, and community partners. The Vaccination Response efforts are headed by the Director of Health and Director of Public Health Nursing. Organizational support is provided by the Medical Reserve Corps Coordinator and logistical support is led by the City's Director of Emergency Management, the Police Chief, and the Fire Chief.

### B. Planning Team, Local Partners and Coordination of Efforts

A City-wide COVID-19 Vaccination Planning and Coordination Team meets weekly via Zoom, to coordinate efforts and identify and solve potential barriers to mass vaccination efforts. The Team is comprised of the following City Offices/Departments, each which have a designated staff member and assigned back-up person:

- New Haven Health Department
- New Haven Fire Department
- New Haven Police Department
- Office of Emergency Management
- Office of the Chief Administrator
- Office of Disability Services
- Community Services Administration

Participation in weekly regional mass vaccination calls, and biweekly calls with Connecticut DPH and local health departments/districts also serve to guide the NHHD's COVID-19 mass vaccination plans.

Local partners, with whom the NHHD already has strong existing relationships, will also be engaged in planning efforts. Community partners will be engaged based upon a tiered approach. Individuals in Tier One will provide greater support in mass vaccination efforts than individuals in Tier Three (**Table 2: Community Partners**). These partners include the DEMHS Region 2 Public Health Emergency Response Coordinator, local vaccine providers, including Yale New Haven Health System, private pediatricians, the two federally qualified health centers in New Haven, the City's public and parochial K-12 schools, as well as colleges/universities, including Yale University, Southern Connecticut State University, Gateway Community College. Social



service providers including those who provide prison re-entry and homeless services, will also play an integral role in the planning efforts and ensuring that critical and vulnerable populations are reached.

**Table 2: Community Partners** 

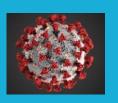
Name of Partner	Tier	Tier Role		MOU
			Required	Secured
YNHH	1		No	
Yale University	1	Vaccination support, APRN, RN, and medical students	Yes	Pending
Southern Connecticut State University	1	Vaccination support nursing students	Yes	Pending
Gateway Community College	1	Vaccination support with nursing students	Yes	Pending
Quinnipiac University	1	Vaccination support, APRN, PA, RN, and medical students	Yes	Pending
IRIS	2	Recruit priority population and provide vaccination site	No	N/A
Columbus House	2	Recruit priority population and provide vaccination site	No	N/A
IRIS	2	Recruit priority population and provide vaccination site	No	N/A
Belle Vista	2	Recruit priority population and provide vaccination site	No	N/A
The Towers	2	Recruit priority population and provide vaccination site	No	N/A

The NHHD is currently partnering with Yale School of Medicine, Yale New Haven Health System, and the Community Alliance for Research and Engagement to coordinate efforts and expand capacity around the seasonal influenza vaccine to ensure the all New Haven residents have the opportunity to be vaccinated regardless of ability to pay or insurance status.

A complete list of internal and community partners, including their relevant experience, is provided in **Appendix D**.

### C. Phased Approach to COVID-19 Vaccination

Due to changing vaccine supply levels at various points during the COVID-19 Vaccination Program, planning needs to be flexible but as specific as possible to accommodate a variety of scenarios. A key point to consider is that vaccine supply will be limited at the beginning of the



program, so the allocation of doses must focus on vaccination providers and settings for vaccination of limited critical populations as well as outreach to these populations. The vaccine supply is projected to increase quickly over the proceeding months, allowing vaccination efforts to be expanded to additional critical populations and the general public. It is important to note that recommendations on the various population groups to receive initial doses of vaccine could change after vaccine is available, depending on each vaccine's characteristics, vaccine supply, disease epidemiology, and local community factors.

Final decisions are being made about use of initially available supplies of COVID-19 vaccines. These decisions will be partially informed by the proven efficacy of the vaccines, but populations of focus for initial COVID-19 vaccination during Phases I and II may include: healthcare personnel, first responders, critical workforce, adults with high-risk medical conditions who possess risk factors for severe COVID-19 illness, people 75 years of age and older, including individuals living in LTCFs.

The New Haven Health Department will implement a phased-in approached to COVID-19 vaccination that can be readily scaled-up to meet the changes in vaccine availability. The three phases are listed **Table 3: Phased Vaccination** and outlined in greater detail below. The list of priority populations to be included in Phases II are enumerated in **Appendix H**.

**Table 3: Phased Vaccination** 

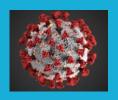
Phase 1a	Healthcare workers, medical first responders			
Phase 1b	ssential front line workers, individuals and staff congregate house,			
	individuals 75 years of age or older			
Phase 1c	Eligibility to be determined			
Phase 3	General population			

#### Phase I: Potentially Limited Doses of COVID-19 vaccine doses available

During Phase I, it is anticipated that the NHHD will receive a limited supply of COVID-19 vaccines. Therefore, only critical workforce members, including healthcare workers, first responders, select municipal employees will be considered the priority populations. NHPD and NHFD staff members will be among those vaccinated during Phase I. Vaccination clinics will be made available at the Fire Training Academy and at the NHHD clinic.

### Phase II: Remainder of Phase One, Vulnerable Populations, General Population Large Number of Doses Available, Supply Likely to Meet Demand

During Phase 1b, when vaccine becomes more widely available, vaccine distribution will first emphasize targeted vaccination outreach to priority groups such as ancillary health care workers and unvaccinated infrastructure workers in addition to other high-risk members of the general



population. Additional congregate settings (group homes, corrections) will need to be vaccinated. Some have the capability to vaccinate themselves, but others will require assistance from NHHD, a pharmacy, or a mobile vaccination team. NHHD will coordinate vaccination clinics at targeted locations to reach these individuals.

Focused public health efforts will shift to include other high priority groups (elderly, minority populations, persons with underlying conditions) as uptake among critical workforce members diminishes. The number of critical workforce members for the City of New Haven is provided in **Appendix G**. Based upon the assumptions provided, vaccine quantities will be plentiful during Phase II. While any person presenting for vaccination would be vaccinated, intense public health efforts to reach a high percentage of the non-prioritized population would wait until resources were available after reaching priority populations.

Mass clinics would continue to be held to reach those less likely to be reached by clinic providers and pharmacies (e.g., younger populations), but local outreach is likely to be emphasized as much or more than mass clinics (e.g., direct outreach to schools, colleges and workplaces in addition to homebound and "hard to reach" populations). In addition, it is likely that a substantial number of people will need to receive their second dose of the vaccine. Second dose reminders will be sent to all individuals via VAMS. Additionally, the NHHD will utilize the Everbridge system in to push out mass messaging to members of the community, as well as personalized letters, texts, phone calls, and mass communication. Nursing staff will conduct outreach to private vaccine providers encourage them to contact their patients to complete their vaccination series.

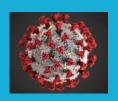
#### Phase III: General Population, Routine Vaccination

During Phases 2 and 3, it is expected that the vaccine will be widely available, but that demand will be reduced. The NHHD will continue its efforts to reach high-risk populations that have not yet been reached and those who remain unsure about whether to be vaccinated. Efforts will also be paced on ensuring all individuals receive their second dose of the vaccine, especially those served in under phase 2.

### D. Staffing and Safety Considerations for POV during all phases

POV sites should be conducive to vehicular traffic and/or pedestrian traffic, as well as able to accommodate buses or be located close to bus routes for individuals arriving via public transportation. POV sites should have:

- Sufficient queueing area for vehicles that will not significantly impede normal traffic patterns
- Separate vehicles from pedestrians if the POV is operating as both a drive-through and a walk-up



• Established flow patterns through the POV, including ease of ingress and egress

Use of publicly owned areas meeting the practical requirements above are the best option, as they are immediately accessible and fall under existing municipal control and/or mutual aid agreements. The list of approved POV sites that have been previously approved by the Department of Emergency Management and Homeland Security is available in **Appendix E**.

Weather forecasts should be considered when planning vaccination clinics as certain weather events may hinder vaccination efforts and create safety threats. A list of weather conditions which require specification considerations can be found in **Appendix F**.

#### **E.** Critical Populations

The NHHD is working with Region 2, to collect critical workforce data for Phase 1 of mass vaccinations. Information being collected at the Regional level includes the number of staff who are considered critical workforce and priority populations. This list is available in **Appendix G**. DPH is using guidance from the Cybersecurity & Infrastructure Security Agency to determine who is considered a Critical Workforce Group can be found here:

https://www.cisa.gov/publication/guidance-essential-critical-infrastructure-workforce.

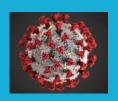
Surveys were developed and administered to the City's Police and Fire Department's to assess not only the number of individuals in these departments who are considered 'critical', are at a higher risk of exposure, and/or who have or live with someone who has underlying health conditions that pre-dispose them to COVID-19 but to ascertain their level of interest in being vaccinated.

In addition to maintain a list of the critical workforce, New Haven Health Department maintains an up-to-date contact list for community agencies serving vulnerable populations. These lists are available in **Appendix H**. These individuals also will be included in Phase I, as supplies allow, and will be prioritize in Phase II.

#### SECTION IV: COVID-19 PROVIDER RECRUITMENT AND ENROLLMENT

### A. Provider Recruitment

Providers able to administer a COVID-19 vaccination include doctors, nurses, licensed/trained pharmacists, and medical/nursing students. All medical staff that are employed directly by the NHHD are credentialed upon hire. The Director of Public Health Nurses verifies, through the State's e-licensing system, that the individuals have active nursing and/or medical licenses in the State of Connecticut. Additionally, the Public Health Nursing Division maintains a list of all employees and the date that their license expires. The list is referenced monthly to ensure there are no lapses in licenses.



Since approximately 130,000 New Haven residents will need to be vaccinated, possibly with two doses, the NHHD has been working to expand the number of licensed medical providers who are active members of its MRC. Utilizing credentialed MRC volunteers may be necessary to ensure adequate staffing levels. MRC members would be responsible for assisting with community-based vaccination clinics for Phase II and Phase III priority populations. The MRC Coordinator is responsible for recruiting, training, and verifying the credentials of MRC volunteers through CT Responds. The Coordinator maintains an up-to-date list of active New Haven MRC volunteers. Additionally, the Coordinator assigns volunteers to sites and assignments based upon need.

#### **B.** Provider Training

New Haven Health Department has enrolled in the COVID-19 Vaccination Administration Program (CoVP), which is required to order and administer the COVID-19 vaccine. It is important to ensure that all vaccination staff are trained to properly administer and document COVID-19 vaccines into CT WiZ.

The NHHD's Director of Public Health Nursing and pediatric will serve as the City's Vaccine Coordinators. These two individuals have access to the CT WiZ training site and has completed complete self-directed training on navigating the CT WiZ IIS, managing patient information, and ordering vaccines and managing vaccine inventory. Before ordering vaccine, the Vaccine Coordinators are required to complete CDC's web-based COVID-19 training module and review *The Guide for Providers Enrolled* in the CoVP that is accessed on the Connecticut DPH CoVP Provider webpage.<sup>i</sup>

Through CT WiZ, providers will receive training on the following:

- ACIP COVID-19 vaccine recommendations, when available
- COVID-19 vaccine indications, contraindications, and precautions for each vaccine product being administered
- Ordering, storing, and handling COVID-19 vaccine
- Preparing and administering the vaccine
- Documenting and reporting vaccine administration via the jurisdiction's IIS or other external system
- Managing and reporting vaccine inventory, including accessing and managing product expiration dates
- Managing temperature excursions
- Documenting and reporting vaccine wastage/spoilage
- Reporting moderate and severe adverse events as well as vaccine administration errors to the Vaccine Adverse Event Reporting System (VAERS)



- Providing Emergency Use Authorization (EUA) fact sheets or Vaccine Information Sheets (VIS) to vaccine recipients
- Submitting facility information for COVID-19 vaccination clinics to CDC's VaccineFinder (particularly for pharmacies or other high-volume vaccination providers/settings)

### C. Equitable Access

COVID-19 vaccines will be made available to residents in all neighborhoods throughout the City. Planning considerations will include analysis of the case heat map, bus routes, location of community resources serving the City's most at risk populations. Messaging will be made available to City residents in multiple formats to ensure that all individuals have access to the information to obtain a vaccine.

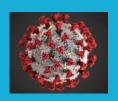
#### SECTION V: COVID-19 VACCINE ADMINISTRATION CAPACITY

The NHHD anticipates that will be able to vaccinate 60 individuals per hour. This is based upon the assumption that each nurse can vaccinate one individual every 10 minutes for a total of 6 individuals per hour. If ten nurses work at once, 60 individuals can be vaccinated hourly.

## SECTION VI: COVID-19 VACCINE ORDERING AND INVENTORY MANAGEMENT

The NHHD will order vaccines and track its inventory, including dose administered, stored, wasted, or transferred, directly through CT WiZ per DPH requirements. Once DPH approves the orders, DPH will upload the order into CDC's Vaccine Tracking System. For any order not approved by DPH, the NHHD will be notified via CT WiZ. Once a vaccine order is placed, approved, and transmitted to CDC, vaccine is shipped directly from the distributor/manufacturer to NHHD. Upon receipt of the shipment, NHHD will acknowledge receipt of vaccine received in CT WiZ.

It is anticipated that doses must be ordered in 100 dose increments, with a minimum order of 100. DPH will provide ancillary supplies that will be packaged in kits and shipped automatically with the vaccine doses. Each kit will contain the supplies to administer 100 doses of vaccine. COVID-19 vaccine and any required diluent or adjuvant will be shipped to NHHD within 48 hours of order approval, along with the dilutant and any ancillary supply kits and diluent, if applicable, will ship separately from vaccine but should arrive before or on the same day as vaccine. A list of kit contents and their quantities is provided in **Appendix I**. Any additional ancillary supplies and resources that are not included in the kits will be provided by the NHHD. This list of this items can be found in **Appendix J**.



### SECTION VII: COVID-19 VACCINE STORAGE AND HANDLING

#### A. Storage

The NHHD will assume responsibility for ensuring adherence to COVID-19 vaccine storage and handling requirements and has created a Vaccine Management Plan based on the CDC Vaccine Storage and Handling Toolkit and a Vaccine Storage and Handling Standard Operating Procedures for use by the Vaccine Coordinator. Vaccine shipments will be received by a designated clinic nurse and immediately placed in one of the NHHD's vaccine refrigerators for cold storage.

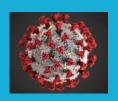
#### **B.** Handling

COVID-19 vaccine products are temperature-sensitive and must be stored and handled correctly to ensure efficacy and maximize shelf life. Proper storage and handling practices are critical to minimize vaccine loss and limit risk of administering COVID-19 vaccine with reduced effectiveness.

It is expected that cold chain storage and handling requirements for COVID-19 vaccine products will vary in temperature from refrigerated (2°C to 8°C) to frozen (-15 to - 25°C). These temperatures are based on information available as of 10/29/2020. Updated information will be provided as it becomes available. Each vaccine storage unit/container utilized by the NHHD has a temperature monitoring device. The fixed storage units at the NHHD are equipped with a digital data logger and a back-up digital data logger.

The cold chain begins at the COVID-19 vaccine manufacturing plant, includes delivery to and storage at NHHD, and ends with administration of COVID-19 vaccine to a person. NHHD is responsible for maintaining vaccine quality from the time a shipment arrives until the dose is administered. To minimize opportunities for breaks in the cold chain, most COVID-19 vaccine will be delivered from CDC's centralized distributor directly to the New Haven Health Department Clinic where the vaccine will be stored and/or administered. The Vaccine Order will be on-site at the time of delivery to ensure adherence to the cold chain.

The quantity of COVID-19 vaccine transported to temporary, off-site COVID-19 POV will be based upon the anticipated number of vaccine recipients and the ability of the NHHD to store, handle, and transport the vaccine appropriately. Off-site transport will be supervised by the Vaccine Coordinator. After each clinic, the temperature data will be analyzed to ensure the vaccine has not been comprised. Any temperature excursion shall be documented and reported by the Vaccine Coordinator according to Vaccine Management Plan and CT's Immunization Program's procedures. Vaccines that were exposed to out-of-range temperatures must be labeled "do not use" and stored at the required temperature until further information on usability can be gathered or further instruction on disposition or recovery is received.



#### C. Redistribution

Any vaccine redistribution, incoming or outgoing, will be managed and approved by DPH. All cold chain requirements will be followed, and vaccine transported will be minimized.

### SECTION VIII: COVID-19 VACCINE ADMINISTRATION DOCUMENTATION AND REPORTING

#### A. Vaccine Administration

The NHHD will administer the vaccine as recommended by ACIP. Vaccine dosing information, indications and contraindication will not be available for specific vaccines until they are approved/authorized by FDA and recommendations have been made by ACIP concerning their use and the information will be provided to NHHD from DPH.

Those receiving the COVID-19 Vaccine will be required to pre-register online through VAMS. This negates the sharing of paper, pens, etc. and will allow for faster intake as well as documentation and reporting of COVID-19 vaccine administration.

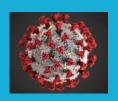
#### **B.** Vaccine Documentation

The NHHD will utilize CT WiZ/CoVP, the statewide Immunization Information System (IIS) for ordering, tracking supply, and documenting the administration of COVID-19 immunizations in a public health setting. It is a web-based database that maintains complete, accurate, and secure immunization records for all.

Each NHHD COVID-19 provider (i.e., public health nurses, credentialed MRC providers, etc.) will be required to sign the appropriate provider agreements, and then undergo training on how to utilize the functionalities of CT WiZ, how to monitor and manage vaccine inventory within CT WiZ, as well as how to submit data. Training will be given by Director of Public Health Nursing or his/her designee to field staff in a train-the-trainer setting, as well as via Just-in-Time trainings. Providers will be required to submit vaccine administration data records at the time the vaccine is given directly into CT WiZ. In event that the internet goes down or is not available at a POV, records will be manually entered into CT WiZ within 24 hours of the clinic.

#### SECTION IX: COVID-19 VACCINATION SECOND-DOSE REMINDERS

Second dose reminders will be available through the VAMS system. The NHHD will use redundant process to reach and remind all individuals of the second dose requirement. The primary method of reaching individuals will through the VAMS system. Traditional and non-traditional media platforms, including social media will be utilized. Additionally, during the first round of vaccination, everyone will receive a reminder card listing when and where they should return for the second dose. Participants will be encouraged to take a picture of the reminder card



with their mobile phone and to input the information into their calendar to diminish the likelihood that the information will be lost.

# SECTION X: COVID-19 REQUIREMENTS FOR IISS OR OTHER EXTERNAL SYSTEMS

#### A. Documenting Vaccine Administration for IIS

VAMS will be utilized as the documentation system most provided in the of State of Connecticut. This confidential, population-based, computerized database is used for exchanging vaccine information with healthcare providers. All COVID-19 vaccine information will be documented in VAMS. The use of VAMS will allow for:

- Documenting of vaccine lot numbers in each recipient's record to enable follow-up due to safety concerns, recalls, or adverse reactions.
- Providing second dose vaccine reminders to ensure the same vaccine provided is received for the first and second dose and that the doses are appropriately spaced according to ACIP-recommended intervals.
- Monitoring population vaccination rates for priority populations.
- Documenting recipient demographic and contact information, along with the type and date of each vaccine dose administered.

New Haven Health Department enrollment in CoVP through CTWiz has been approved through the State of Connecticut. To ensure timely data entry at POVs, the NHHD will purchase tablets with internet and hotpots for use at off-site POVs. When possible, POV sites with internet access will be prioritized. The list of POV sites with internet access is provided in **Appendix I**. Should a POV not have internet access and the hotspots fail to operate, vaccine administration data would be collected and entered manually in CT WiZ within 24 hours of the clinic.

The VAMS application contains three interfaces: the vaccine recipient interface will allow registration and appointment management, the clinic interface will allow clinic management and recording of vaccine administration, and the public health interface will allow data reporting and analysis. VAMS is being made available by the CDC.

Using VAMS, the New Haven Health Department can identify people designated for immunization in Phase 1. A point of contact from the employers or organizations will be invited by the DPH to establish an account in VAMS. These organizations will then use VAMS to upload rosters of people who should be vaccinated in Phase 1. The NHHD's enrollment in CoVP will initiate an invitation by the DPH to establish an account in VAMS.

The VAMS system will be utilized to do the following:

- Set up appointments to administer vaccine to those listed on an essential staff or high-risk patient roster.
- Gain consent for immunization and conduct medical screening before the



appointment.

- Sign in vaccinees at the POV
- Record doses administered
- Document and decrement vaccine inventory. Vaccines can be hand keyed in to
  populate POV inventory or scanned in and matched to the vaccine via 2D bar code
  technology if available.
- Set up and send out a reminder a required second dose of vaccine, if applicable.

The NHHD's Vaccine Coordinator will receive the name of the primary contact person for each department that will be vaccinated during Phase 1B. The designated contact will receive notification from the VAMS system requesting upload of the roster of employees to be vaccinated. Employees will then receive an invitation to preregister and choose an appointment.

Data quality assurance will be conducted by the Vaccine Coordinator to assure inventory and vaccine records are entered correctly.

#### SECTION XI: COVID-19 VACCINATION PROGRAM COMMUNICATION

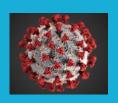
#### A. Phased Communications

The City of New Haven utilizes several platforms to community important messages with its residents and key partners. As New Haven is a diversity city, all communications and educational materials will be available in English and Spanish, the two most spoken languages in the City. Attempts will also be made to include information in Arabic and Mandarin, the next most frequently used languages. Telephone-based translations services are available through the NHHD's Language Line for non-English speakers. The Risk Communication Plan is available in **Appendix M**.

<u>Phase One:</u> Communication will focus on the use of internal messaging via direct e-mails to individuals identified as critical employees. Information will also be shared with the critical workforce via educational webinars, roll calls, shift change meeting, and employee newsletters.

<u>Phase Two and Three:</u> Vaccine hesitancy is expected to be high, especially among historically marginalized people who are highly represented in prioritized populations, so public communication efforts will focus on building a foundation of trust. The goals for initial communication efforts about COVID-19 vaccinations will be to: 1) Increase knowledge of vaccine and the process of COVID-19 vaccine development; 2) Set expectations for limited availability at the onset of the vaccine delivery; 3) Raise awareness and recognition of historical injustices to mitigate vaccine hesitancy.

The City's COVID-19 hotline, which has served as a vital resource in the community throughout the COVID-19 pandemic, will continue to be a value resource in mass vaccination efforts. The



non-emergency telephone hotline is staffed by public health nurses trained to answer a variety of COVID-19 related questions, including disease signs/symptoms, testing locations, and quarantine and isolation measures. The hotline will serve as an important mechanism for providing information on and answering questions about the COVID-19 vaccine for the general public during phases two and three. The hotline is staffed Monday to Friday from 7:00 a.m. to 9:00 p.m. Questions received on the hotline are tracked in the on-line platform, VEOCI, and will be used to inform needed public education and messaging. Additionally, both the NHHD webpage and the City's COVID-19 webpage will be updated with information on the COVID-19 vaccine and social media platforms (i.e., Twitter and Facebook) will be used to share information. Everbridge, the City's reverse 911 phone, e-mail, and text massing system will also be utilized to provide residents with important information about the vaccine. Lastly, the NHHD will engage local television media to reach individuals with limited phone and internet access.

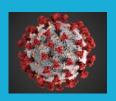
#### **B. Risk Communications**

The NHHD has an assigned staff member with expertise in communication to prepare the risk communication and disseminate information on short notice. After consultation and approvals by the Mayor's Office and Director of Health, messages can be communicated, usually within the hour, through the news media and social media channels. The NHHD also utilizes a COVID-19 hotline to provide risk communication messages and respond to individual questions and concerns from residents. The City of New Haven also utilizes Everbridge, a reverse 911 system, to send emergency notifications to residents.

#### SECTION XII: REGULATORY CONSIDERATIONS FOR COVID-19 VACCINATION

Current assumptions suggest the initial COVID-19 vaccine may be authorized for use under a EUA issued by FDA or approved as licensed vaccines. The NHHD will continue to monitor this development and share the below plans with COVID-19 vaccine providers and community partners to ensure preparedness under both scenarios. To ensure proper vaccine administration and patient care, NHHD will observe ACIP COVID-19 vaccine recommendations before the administration of a EUA approved vaccine product.

The public health nurses are knowledgeable about the requirement to provide a Vaccine Information Sheet as part of their patient information and education process. NHHD will be able to access a list of authorized COVID-19 vaccine products with corresponding EUA fact sheets for healthcare providers and vaccine recipients, and up-to-date expiration information by vaccine lot will be available on an HHS website.



#### SECTION XIII: COVID-19 VACCINE SAFETY MONITORING

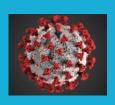
All vaccines are associated with some risk of adverse events. At the time of planning for COVID-19 vaccine, the safety profile is unknown. As part of its enrollment as a CoVP, the NHHD agreed to the CDC COVID-19 Vaccination Program Provider Agreement, which requires providers' organizations to report moderate and severe adverse events following vaccination to the Vaccine Adverse Event Reporting System (VAERS). Additionally, when NHHD providers enroll through the COVID-19 Provider Enrollment and Ordering Management System, they will be required to sign and agree to all the terms and conditions in the CDC agreement. This system delivers provider trainings on topics such as the use of VAERS. Through these mechanisms, NHHD affiliated providers will be directed to VAERS.

### How to Report to VAERS:

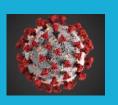
- Online via the VAERS website at https://vaers.hhs.gov/index
- For further assistance reporting to VAERS, visit https://vaers.hhs.gov/index or contact VAERS directly at info@VAERS.org or 1-800-822-7967.
- VAERS Data are Available to the Public VAERS data can be downloaded at https://vaers.hhs.gov/data/index or searched at http://wonder.cdc.gov/vaers.html.
   Privacy is protected and personal identifying information (such as name, date of birth, and address) is removed from the public data.

#### SECTION XIV: COVID-19 VACCINATION PROGRAM MONITORING

The NHHD is committed to maintaining transparency in its response to the COVID-19 pandemic. The City's public facing COVID-19 website (<a href="https://covid19.newhavenct.gov/">https://covid19.newhavenct.gov/</a>) houses information for residents on COVID-19 prevention, testing sites, and F.A.Q. The website also includes re-opening guidance for business sectors. The website will be used inform the public of vaccination options and locations.



### **APPENDIX**



#### APPENDIX A – ACRONYMS

Acronym/	Abbreviations	Definitions

ACIP Advisory Committee on Immunization Practices

CDC Centers for Disease Control and Prevention

CT DPH Connecticut Department of Public Health

CT WiZ CT Immunization Registry System

COVID-19 Coronavirus Disease 2019

CoVP COVID-19 Vaccination Partner

CVP Connecticut Vaccine Program Provider

DEMHS Division of Emergency Management and Homeland Security

EUA Emergency Use Authorization

FQHC Federally Qualified Health Center

HHS US Department of Health and Human Services

ICS Incident Command Structure

LTCF Long Term Care Facility

MRC Medical Reserve Corps

NHFD New Haven Fire Department

NHHD New Haven Health Department

NHPD New Haven Police Department

PHERP Public Health Emergency Response Plan

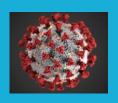
POD Point of Dispensing

POV Point of Vaccination

VAERS Vaccine Adverse Event Reporting System

VAMS Vaccine Administration Management System

VIS Vaccine Information Statement



#### APPENDIX B - POV POSITION DESCRIPTIONS

#### **POV Site Manager**

- The primary decision-maker for the site
- Ensures the POV has supplies needed to operate successfully
- Communicates status reports to and requesting assistance from the Public Health Division Operations
- Only authorized person to speak with the media unless there is a designated POV Public Information
  Officer available

### **Health & Safety Officer**

- Monitors and assesses client and staff health and safety hazards or unsafe situations
- Develops measures to ensure personnel and client safety
- Reports to the POV Site Manager

### **Medical Treatment Supervisor**

- Responses to medical emergencies at the POV
- Coordinates with Emergency Medical Services, as needed
- Performs or supervises the performance of medical treatment staff during the medical evaluation of injured client and/or POV staff to determine appropriate care and treatment
- Manages the Medical Treatment Area
- Ensures the availability of adequate First Aid supplies
- Coordinates with EMS for appropriate care of client through external facilities or to request medical transportation as needed
- Monitors staff and client for signs of fatigue or stress
- Reports to the POV Site Manager

#### **Medical Treatment Staff**

- Provides first aid assistance for clients and staff
- Reports to the Medical Treatment Supervisor

#### **Medical Operations Leader**

- Oversees medical operations of the POV including medical screening, vaccinations, and medical supplies
- Reports to the POV Site Manager



#### Non-Medical / Logistics Leader

- Oversees non-medical POV operations including, staff registration, breaks/refreshments, non-medical supplies inventory and distribution, client flow, special assistance and interpretation needs of client and runners
- Reports to the POV Site Manager

#### **Vaccination Supervisor**

- Oversees vaccination staff and clients
- Makes recommendations for change
- Observes staff and clients for signs of stress
- Provides general oversight of the vaccination unit function, including assisting clients arriving by bus or automobile. This may require staff to screen and vaccinate clients' while in their vehicle.
- Reports to the Medical Operations Leader

#### **Vaccinators**

- Prepare and administer vaccine to clients
- Reports to the Vaccination Supervisor

#### **Vaccination Assistants/Floaters**

- Assist with station set-up and/or breakdown
- Assist special needs clients or large families throughout clinic process
- Cover/fill in and/or temporarily assist with responsibilities from other areas of the mass clinic as appropriate
- Ensure proper documentation is maintained for all activities
- Report to the Vaccination Supervisor

#### **Vaccine Controllers/Fillers**

- Review screening forms
- Assist with the preparation of appropriate vaccines for Vaccinators
- Reports to the Vaccination Supervisor

#### **Screening Supervisor**

- Ensures Screeners follow appropriate screening procedures
- Observes unit operations and logistics and makes recommendations for change
- Observes staff and clients for signs of stress
- Provides general oversight of the screener unit function
- Reports to the Medical Operations Leader



#### **Screener**

- Review client screening forms
- Confirm the type of vaccinations clients will receive or refer to their own provider if the client is not able to be vaccinated at the POV site
- Answer any questions the client may have about the form or the medication they may receive
- Direct clients to Vaccination Station
- Reports to Screening Supervisor

### **Medical Supply Supervisor**

- Labels, stores, and inventories medications and vaccines
- Obtains general equipment and supplies necessary for activation and continuity of the POV operation
- Reports to the Medical Operations Leader

### Registration/Break Room Supervisor

- Ensures staff and volunteers are properly registered and all required forms are completed, and that every POV worker signs-in and out
- Manages and monitors the staff break room area to ensure a comfortable, safe, and clean place for staff to rest and/or eat
- Reports to the Non-Medical/Logistics Leader

#### Registration/Break Room Staff

- Staff the registration/check-in table
- Ensures all POV staff complete all required forms
- Distributes vests
- Assists workers in filling out name tags
- Monitors the break area for cleanliness, food supply, etc.
- Monitors meal distribution
- Reports to Registration/Break Room Supervisor

#### **Non-Medical Supply Supervisor**

- Ensures non-medical supplies and equipment necessary for the POV operation are available. This includes ensuring that equipment and supplies such as clinic forms, signage, and general supplies are inventoried, stored, and distributed at the site.
- Reports to Non-Medical/Logistics Leader



#### **Client Flow Supervisor**

- Supervises Greeters, Flow/Line Controllers, and Outside Monitors
- Guides arriving clients into the queue
- Maintains client flow into, within, and out of the POV
- Keeps dispensing lines moving smoothly
- Directs clients to stations throughout the clinic
- Places and/or moves Flow/Line Controller staff at specific areas to enhance smooth POV flow
- Reports to Non-Medical/Logistics Leader

### **Greeters**

- Greet clients upon entry to clinic, orient to clinic signage, operations, direct to Screening Station
- Answer client questions regarding general clinic operations
- Report to Client Flow Supervisor

#### Flow/Line Controller

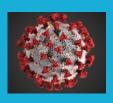
- Guides arriving clients into the queue
- Assists with client flow into, within, and out of the POV
- Directs and assists client movement between stations, monitors entry area, station areas flow for bottleneck
- Reports to Client Flow Supervisor

#### **Outside Monitors**

- Monitor outside of facility including ingress (entry) and egress (exit) access for any bottlenecks or lines
- Assist with setup and/or breakdown of clinic
- Assist with directing parking or traffic flow as safety permits
- Direct and monitor outside client line.
- Communicates status of exterior POV site (traffic, parking, lines, etc.)
- Report to Client Flow Supervisor

#### **Runners**

- Provide non-medical support and assistance where needed.
- Send communications between areas/stations
- Move/transport resources within the POV
- Report to the Non-Medical/Logistics Leader

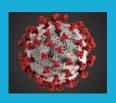


### **Special Assistance Supervisor**

- Ensures the availability of safe areas to assist clients with families, those needing interpretation or clients with other special needs
- Advises operations staff on recognizing subtle, unique, or difficult to recognize presentations of special needs in clients
- Works with Health & Safety Officer to ensure ADA compliance and general accessibility for all clients
- Supervises Interpreters
- Reports to Non-Medical Logistics Leader

#### **Interpreters**

- Provide interpretation services, as available, to assist non-English speaking clients, deaf and hard of hearing clients, and those unable to read
- Reports to Special Assistance Supervisor



#### APPENDIX C - POV STATIONS

#### **Client Check-In**

Clients will check-in and receive their vaccine screening form. After the form is completed, clients will be referred to the screeners. Client's eligibility to be vaccinated will be assessed and type of vaccine to be received is determined. If ineligible to receive a vaccine, the client will be referred to their medical provider.

### **Vaccination Station**

At the Vaccination Station a Vaccinator will review the client's form and administer the proper vaccine.

#### **Exit**

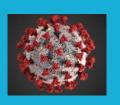
After vaccination, clients are directed toward the exit by the outdoor monitors.

#### **Supply Storage**

The Supply Storage area will house, out of public view, medications, and supplies (medical and non-medical) that may be needed by the vaccination stations or other POV operations. Portable ice chests/coolers will be used to store vaccine or other medication that must be kept cool.

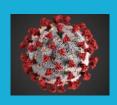
#### **Staff Registration & Break Area**

POV staff will report for their shifts to the Staff Registration area where they will be required to sign in and complete all required forms and documentation. Staff will also receive identification materials (vest, name tag, etc.) in this area. At the end of their work shift, all staff will report to this area and sign-out. During dispensing operations, this will also be the area where the staff can take a rest break and eat meals.

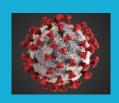


### APPENDIX D - INTERNAL & EXTERNAL PARTNER LIST AND AREAS OF EXPERTISE

Partner Organization	Name	Title	Role and
			Area of Expertise
NHHD	Maritza Bond	Director of Health	Public health statues, regulations, ordinances
NHHD	Dr. Jennifer Vazquez	Director of Public Health Nursing	Clinical guidance; staffing
NHHD	Brooke Logan	Health Programs Director	Health education; administration support
NHHD	Ermonda Markaj	Community Health Worker	Risk communications; health education
NHHD	Glenda Buenaventura	Senior Sanitarian	POV Safety Analysis
NHHD	Shellie Longo-Collins	Senior Sanitarian	POV Safety Analysis
NHHD	Brian Wnek	Senior Sanitarian	POV Safety Analysis
NHHD	Brian Weeks	Epidemiologist	Data analysis
Consultant	David Heiden	Consultant	Mass vaccination plan development; emergency management planning

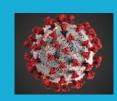


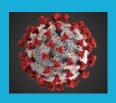
Consultant	Elisabeth Matuska	MRC Coordinator	MRC recruitment, training, and
			assignments
NHFD	John Alston	Chief	Logistics
NHPD	Renee Dominguez	Assistant Chief	Logistics; security
Office of Emergency Management	Rick Fontana	Coordinator	Emergency management planning
Office of Disability Services	Michelle Duprey	Director	Knowledge of disability community, its needs and resources



### APPENDIX E - APPROVED POV SITES

COVID-19 Point of Vaccination (POV) Name	Type of Facility	POV Type	Site has been evaluated to meet the needs of clinic (drop down)	Priority Population	POV Planning Type (primary or backup) *Backup for inclimate weather or if primary POV is unavailable (drop down)	Address	Phase	Estimated throughput per hour	Notes/Miscellaneous
James Hillhouse HS Floyd Little Fieldhouse	School	Open	X	General	Primary	480 Sherman Parkway	II, III	120	Walk up
James Hillhouse HS Bowen Field	School	Open	X	General	Primary	480 Sherman Parkway	II, III	120	Drive up
Columbus House	Community Site	Closed		Homeless	Primary	586 Ella Grasso Blvd	II	120	Walk up
Fire Training Academy	Municipal	Closed	X	First Responders	Primary	230 Ella Grasso Blvd	1B, II, III	120	Walk up and Drive up
New Haven Health Department	Municipal	Open	X	First Responders General Public	Primary	54 Meadow St.	IB, II, III		Walk up





#### APPENDIX F - WEATHER CONSIDERATIONS

**Ice and snow** – create mobility hazards, for both vehicles and pedestrians and should be avoided. POV should be rescheduled when to when those hazards are not present.

**Rain** – may create a mobility hazard due to slippery conditions as oils from parking lots are dislodged. Wet conditions will make operations more difficult to keep essential materials dry. Workers will need appropriate clothing (e.g., a poncho or raincoat) to stay dry and warm. Tents, that can be tied down, and umbrellas will also be essential. If there is a threat of thunderstorms, it will be to hazardous to conduct outside operations and operations should be postponed.

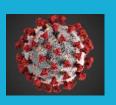
**Fog** – reduces visibility and is a hazard for both vehicles and pedestrians. Wet conditions may hinder operations as above.

**Wind** – presents the possibility of wind chill in cold weather and a possibility for tents and signage to become damaged if proper precautions are not taken to secure them. High wind and gusty conditions should be avoided.

**Extreme Heat** — workers and pedestrians are most at risk and precautions should be taken to monitor people for heat exhaustion. Workers and pedestrians should be located under shade from tents or awnings as much as possible. Drinking water should be readily available, if possible, to avoid dehydration. Vehicles waiting in line may overheat causing a backup until the vehicle can be removed. Extreme heat also presents a challenge for cold chain storage.

**Extreme Cold** — workers and pedestrians are most at risk and precautions should be taken to monitor people for hypothermia and frostbite. Workers and pedestrians should be in a tent to minimize wind exposure as much as possible. Portable heaters located at stations for workers and pedestrians may provide some relief. Drinking water should be readily available, if possible, as dehydration can also occur in cold weather.

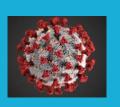
Respite/rehabilitation accommodations for workers will be available where they can get out of the weather, dry off, warm up or cool down, etc. Extra precautions will be taken to ensure social distancing can be maintained during respite periods.



## APPENDIX G - CRITICAL WORKFORCE

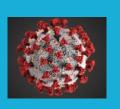
### **DPH** Analysis of Critical Workforce in New Haven

<b>Personnel Category</b>		Number
Local Health Personnel		154
Police		425
Fire		373
Municipality		585
BOE / Teachers		3,452
	Total	4,989

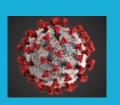


#### APPENDIX H - VULNERABLE / PRIORITY POPULATIONS

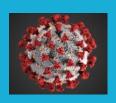
Population	Type of Entity	Address	Contact	E-mail Address	Phone Number
		•	Person		
	T		Homeless		
DESK	Food Pantry &	311 Temple Street	Evan Serio	eserio@deskct.org	203-624-6426
C 1 1 II	Soup Kitchen	704 FIL G	3.6.1.1	11 0 1 1 1	202 772 4200 2427
Columbus House	Shelter	586 Ella Grasso	Malynda	mmallory@columbushouse.org	203 772-4200 x2137
		Blvd.	Mallory		
Liberty Community	Housing	210 State Street			203-495-7600
Services					
Sunrise Cafe	Soup Kitchen	57 Olive Street			
Youth Continuum	outh Continuum Shelter 924 Grand Avenue Paul Kosowsky pkosowsky@youthcontinuum.org		203-777-8445		
		Elder	ly & Disabled		
The Towers	Elderly Housing	One Tower Lane		rebecca@towerone.org	203-772-1816
Mary Wade at Home	Assisted Living			info@marywade.org	203-562-7222
Regal Care	Assisted Living				203-745-2345
Advanced Nursing	Assisted Living				203-934-2676
East Shore Senior	Elderly Services /	211 Townsend Ave	Migdalia	mcastro@newhavenct.gov	203-946-7894
Center	Day Programs		Castro		
Atwater Senior Center	Elderly Services /	26 Atwater Street	Migdalia	mcastro@newhavenct.gov	203-946-7894
	Day Programs		Castro		
Dixwell/Newhallville	Elderly Services /	255 Goffe Street	Migdalia	mcastro@newhavenct.gov	203-946-7894
Senior Center	Day Programs		Castor		
CB Motley	Elderly	819 Sherman Ave.	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Subsidized		-		
	Housing				



Katherine Harvey Terrace	Elderly Subsidized	81-95B Liberty Street	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Housing	Street			
Newhall Gardens	Elderly	5A-45B Daisy	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Subsidized	Street			
	Housing				
Prescott Bush	Elderly	220-230 County	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Subsidized	Street			
	Housing				
Winslow Celentano	Elderly &	60 Warren Street	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Disabled				
	Subsidized				
	Housing				
Crawford Manor	Elderly &	90 Park Street	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Disabled				
	Subsidized				
	Housing				
Robert T. Wolf	Elderly &	49 Union Street	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Disabled				
	Subsidized				
	Housing				
McQueeney	Elderly &	358 Orange Street	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Disabled				
	Subsidized				
	Housing				
Rouppolo Manor	Elderly &	480 Ferry Street	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432
	Disabled				
	Subsidized				
	Housing				



Fairmont Heights	Elderly &	70-72 Fairmont	Gayatri Rana	grana@elmcitycommunities.org	203-675-9432	
	Disabled	Ave.				
	Subsidized					
	Housing					
Bella Vista	Elderly &	339 Eastern Street	Michelle	mdistefano@carabetta.com	203-469-6413	
	Disabled Housing		Distefano			
	Pr	rison Re-Entry / Sobo	er Living / Congr	egate Housing		
Whalley Jail						
Preschool Programs						



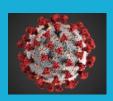
#### APPENDIX I - MEDICAL EQUIPMENT AND SUPPLIES LIST

If a COVID-19 vaccine that requires mixing with diluent is ordered and shipped from CDC's centralized distributor, a mixing kit that includes the necessary needles, syringes, and alcohol prep pads will also be automatically added to the order. For centrally distributed vaccines, providers will have the option to submit the order in a way that opts out of receiving the administration and mixing kits.

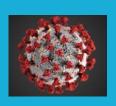
For vaccines that are shipped directly from the manufacturer, a combined kit will be included. This combined kit will include administration supplies (as noted above), mixing supplies, and vials of diluent to prepare the vaccine for use. Because it contains diluent, providers will not have the option to opt out of requesting this combined ancillary kit.

Ancillary supply kits will not include sharps containers, gloves, and bandages. Additional personal protective equipment (PPE) may be needed depending on vaccination provider site needs.

Location/ Supply Type	Supplies and Equipment	Estimated Number Needed	ilable Site No	Number Available
Centrally Distributed vaccine kits  For centrally distributed vaccines, each kit will contain supplies to administer 100 doses of vaccine, including:	Needles, 105 per kit (various sizes for the population served by the ordering vaccination provider) o 25-gauge, 1" (if vaccination indicated for pediatric population)  22–25-gauge, 1-1.5" (adult)  Syringes, 105 per kit (from 1–3 mL)  Alcohol prep pads, 210 per kit  4 surgical masks and 2 face shields for vaccinators per kit  COVID-19 vaccination record cards for vaccine recipients, 100 per kit  Vaccine needle guide detailing the appropriate length/gauge for injections based on route, age (for children), gender, and weight (for adults)			
	Tables			



Education &	Chairs		
Screening	Patient Check-In Forms		
Station	Clipboards		
	Pens, pencils		
	Tables		
	Chairs		
	First aid kit		
	Hand Sanitizer		
	Adhesive Tape		
	Gloves, Exam-Latex Free (S)		
	Gloves, Exam-Latex Free (M)		
Vaccination	Gloves, Exam-Latex Free (L)		
Station	Syringes & Needles (BD Safety Glide) 22-25g x 1"		
	Sharps Containers		
	Band-Aids		
	Cotton Balls/Swabs		
	Towels		
	Alcohol Wipes/Prep Pads		
	Garbage can and bags		
	Table covers (sheets or clean paper)		
	Paddle Signs		
	Grey Storage Containers		
	Vaccines		
	Ice Chests-Coolers		
	Vaccine Screening Form – English		
POD specific	Vaccine Screening Form - Spanish		
POD-specific Supplies	Vaccination Record/After Shots & Disclosur English		
	Vaccination Record/After Shots &		
	Disclosure – Spanish VIS Form – English		
	VIS POIIII — Eligion		
	VIS Form – Spanish		

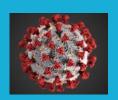


Location/ Supply Type	Supplies and Equipment	Estimated Number Needed	Ava On S	ilable Site	Number Available
			Yes	No	
	Flu Nasal Forms – Spanish				
POD Specific	Pneumococcal (Adult) Forms- English				
Supplies (Cont.)	Pneumococcal (Adult) Forms- Spanish				
	Tdap Forms – English				
	Tdap Forms – Spanish				
	Clinic Calendars – English				
	Clinic Calendars – Spanish				
	Pink Epidemiology Book – 10 <sup>th</sup> Edition				
	Stickers				
	Yellow Mobile Boxes				
	Epinephrine				
	First Aid Kit				
Emergency	Stethoscope				
Emergency	Oxygen w/delivery system				
	Pocket Masks, 1-way valve, adult				
	Pocket Masks, 1-way valve, child				



#### APPENDIX J - GENERAL POV OPERATION SUPPLIES LIST

Supply Type	Supplies & Equipment	Available		Number
		Yes	No	Available
	Push Carts			
	Paper pads, lined			
	Clipboards			
	Trash cans and bags			
	Paper clips			
	Scissors			
	Extension Cords			
	Empty Containers/Trash Bins			
General Supplies	Pens			
general supplies	Permeant Markers			
	Post-It Notes			
	Rubber Bands			
	Tape: Scotch, Duct, Packing			
	Paper Towels			
	Cups, paper plates			
	Stapler & Staples			
	Water			
,	Stopwatch			
	Cell phone			
	Landline phone			
Communications	Portable Mini-Vox			
	Hot spot			



	Wireless Internet		
	Signage (Enter, Exit,		
	Registration, Arrows, etc.)		
	Barricade, Caution Tape		
	Sign Stands/Holders		
Safety/Crowd	Velcro		
Control	Stanchions		
	Vests		
	Name Tags		



#### APPENDIX K - ACTIVATION CHECKLIST

#### **Opening POV**

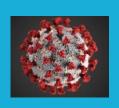
	Contact property owner of selected location and confirm availability and use of site as a Mass Vaccination POV site
	Establish location for staff and volunteer registration/break room for vest and badge issuance, communications equipment, food, water, refreshments, and any other necessary equipment
	Deliver all supplies and equipment necessary to operate
	Stage POV in preparation for client flow (i.e. tables, chairs, signage, stanchions (if available), etc.)
	When POV is staged for operation, gather all staff and volunteers for an initial briefing
	Brief all staff and volunteers about general incident and POV operation
	Provide "day-of" training on all issues that are applicable to the whole operation
	Establish work schedules for all staff and volunteers
	Receive pharmaceutical and medical supplies
	Validate initial inventory
	Store pharmaceuticals and medical supplies in a secure location
	Assign quality assurance staff to routinely monitor temperature of vaccine
	Periodically notify Public Health Operations (PH Ops) with estimates on readiness to open
	When appropriate, contact the PH Ops when POV is ready to receive clients
	Open POV at time specified by PH Ops
Statio	on Operations and Management Responsibility
	Describe the roles and responsibilities of the station
	Provide "Day-Of" or Just In Time Training (JITT)
	Describe and show the layout of the station
	Identify what materials are used at the station
	Identify the materials to be distributed at this station
	Identify and describe the various staff positions required at the station
	Have staff review their Job Action Sheets (JAS)
	Clarify any ambiguous or unclear directions presented on the Job Action Sheets.
	Assign break times for staff and volunteers



#### **Dry Run of the Station**

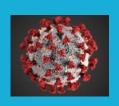
	Have staff practice a run-through of all station operation
	Provide feedback on the tasks and flow of the station
	Address concerns or issues identified by the staff
	Have all staff and volunteers process through the flow to receive their vaccination (if
needed	





# APPENDIX L - POV SITE MAPS TO BE ADDED





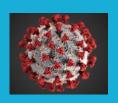
# APPENDIX M – RISK COMMUNICATION PLAN TO BE ADDED





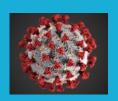
#### APPENDIX N - COVID-19 MASS VACCINATION PLANNING CHECKLIST

Submitting LHD: City of New Haven Health Department The completed checklist must be submitted to your DPH regional MCM Coordinator by Dec 15, 2020.				
1. Revise and/or update your jurisdiction's mass vaccination plan (COVID-19 template provided).				
2. Estimate Critical Workforce Group (CWG) for Phase 1 and 2. (COVID-19 Playbook, p10)	$\boxtimes$	Appendix G		
3. Enroll in the CoVP Program Provider Agreement (Vaccine Ordering, Inventory Management, Redistribution)	$\boxtimes$	Approval 11/12/20		
<ul> <li>4. Determine Partner Involvement</li> <li>Document how your LHD will coordinate efforts with local and/or regional partners.</li> <li>Identify who will order, manage, and administer COVID-19 vaccine</li> <li>Formalize agreements with an MOA, MOU, or contract</li> </ul>		Pages 8-9, 11		
5. Identify Points of Vaccination (POV): (complete the attached POV spreadsheet)  Type:  • Walk-through clinic  • Drive-through clinic  • Other (strike team, mobile clinic, etc)  POV staffing, training, and support  • # of staff needed, position types  • Who can administer, to whom, and under what condition  • JITT and JAS  Identify and obtain supplies and equipment  • Cold chain management *  • Ancillary supplies  • Other equipment  • IT equipment, supplies, and support  *pending final vaccine details				



6. Vaccine Administration Capacity (Determine and document your LHD's vaccine administration capacity)		
7. COVID-19 Vaccine Administration Documentation and Reporting Upon receipt of guidance from the DPH Immunization's Program: Document how your LHD will remind vaccine recipients of the need for a second dose Document how your LHD will submit vaccine administration data via CTWiZ or VAMS.	$\boxtimes$	PAGE 17
8. COVID-19 Vaccine Safety Monitoring Upon receipt of guidance from the DPH Immunization's Program, document your LHD's process for reporting adverse events to the Vaccine Adverse Event Reporting System (VAERS).	$\boxtimes$	PAGE 21

Connecticut Department of Public Health November 2020



#### **REFERENCES**

Alabama Department of Public Health (<a href="https://www.alabamapublichealth.gov/covid19/assets/adph-covid19-vaccination-plan.pdf">https://www.alabamapublichealth.gov/covid19/assets/adph-covid19-vaccination-plan.pdf</a>)

Connecticut Department of Public Health (https://portal.ct.gov/DPH/Immunizations/ALL-ABOUT-CT-WiZ)

Contra Costa Health Services (https://cchealth.org/covid19/clf/)

Georgia Department of Public Health (<u>file:///C:/Users/blogan/Downloads/covid-19\_vaccination\_plan\_georgia-\_interim\_draft\_v2%20(1).pdf</u>)

Maryland Department of Public Health

(https://phpa.health.maryland.gov/Documents/10.19.2020\_Maryland\_COVID-19\_Vaccination\_Plan\_CDCwm.pdf)

Georgia Department of Public Health (

Washington Department of Public Health

(https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/WA-COVID-19-Vaccination-Plan.pdf)