



COVID-19 Vaccine Planning Healthcare Situational Call

2020.11.06



Presenters

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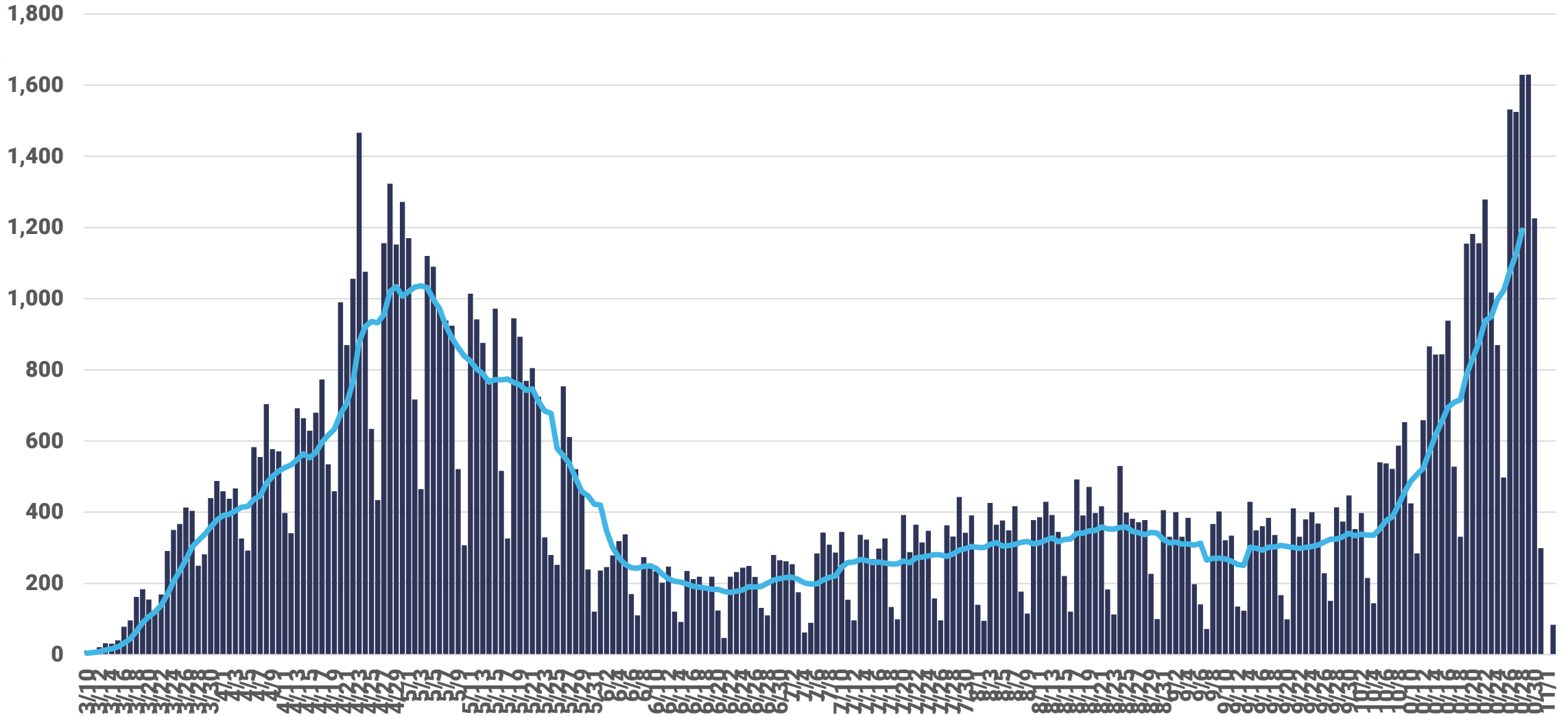
Chicago Department of Public Health



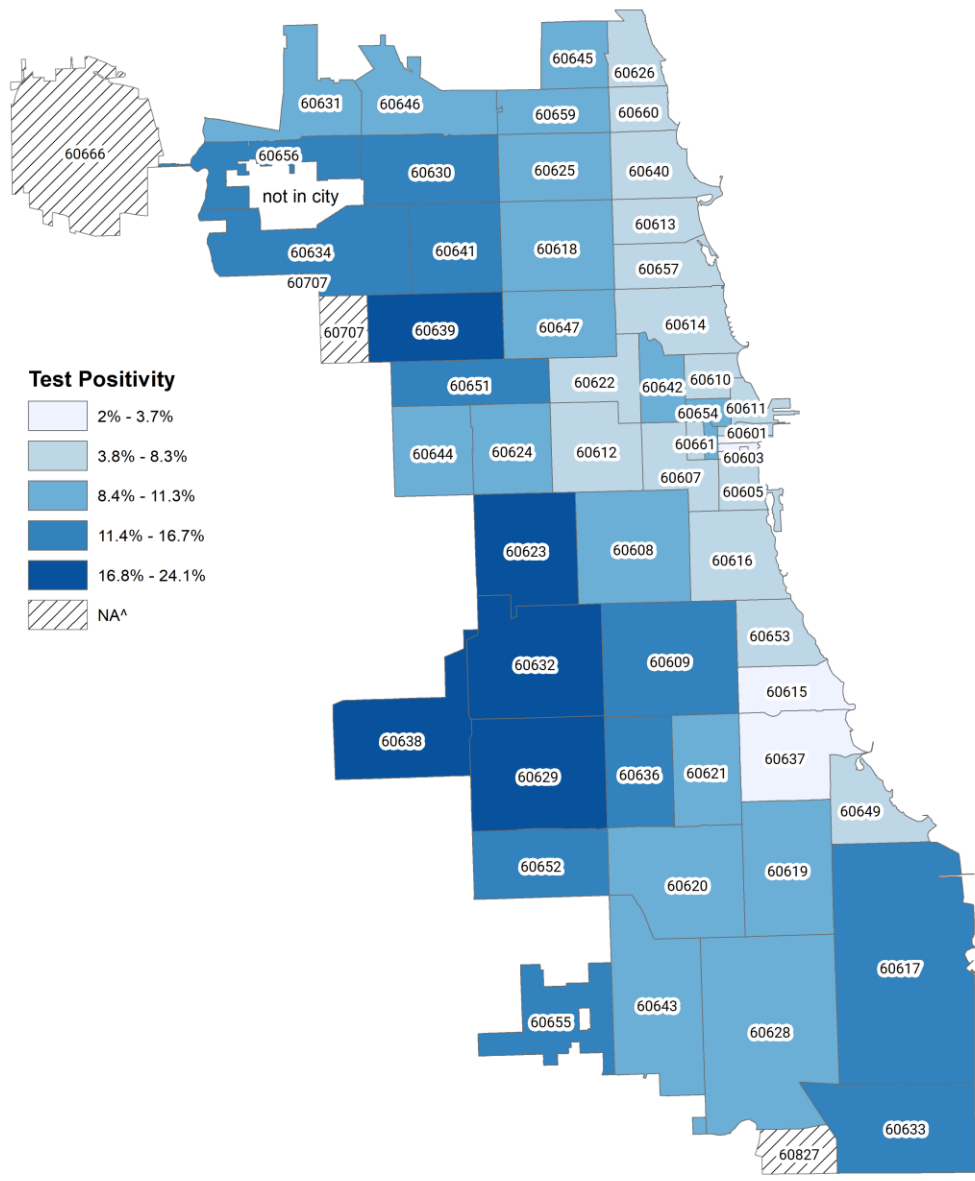
Agenda

- Brief overview COVID-19 in Chicago & MSACF information
- Follow-up of topics discussed during 10/30/2020 call
 - Provider Enrollment
 - Healthcare personnel survey
 - LTCF/Pharmacy partnership
- COVID-19 Vaccine
- Planning Scenarios for COVID-19 Vaccine Storage and Handling

COVID-19 cases, daily counts and rolling 7-day average, specimen date



COVID-19 Test Positivity by Chicago zip code Week ending Saturday October 31, 2020



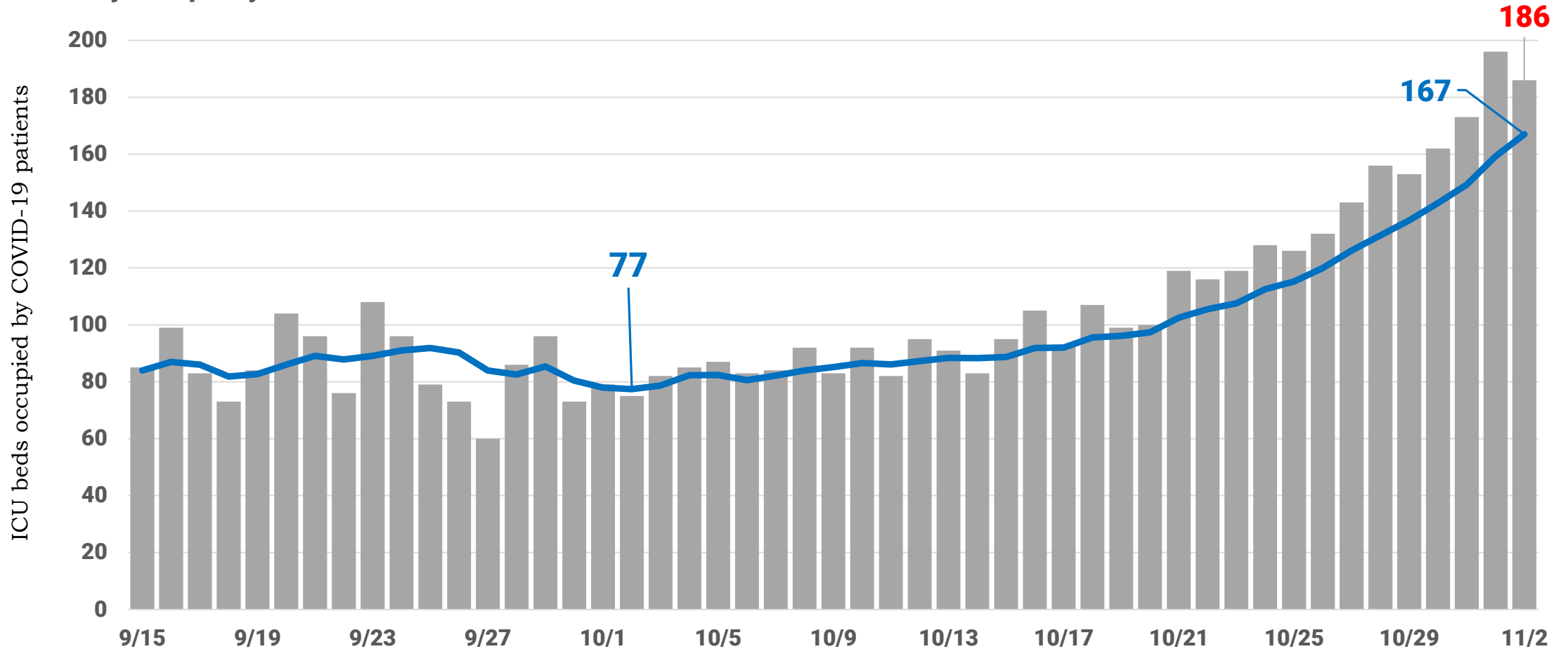
^Zip code with no population, zip codes extend beyond Chicago boundary
Data Source: Providers reporting to CDPH through the Illinois National Electronic Disease Surveillance System

ICU Occupancy from COVID-19



COVID-19 ICU beds occupied, daily counts and 7 day average, daily occupancy census

Peak 7-day rolling average	501 avg. occupied ICU beds 4/30/2020
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Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning March 19. ICU bed count includes all adult and pediatric ICU beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases. Beginning 4/24/2020, the definition of ICU status changed as requested by HHS.

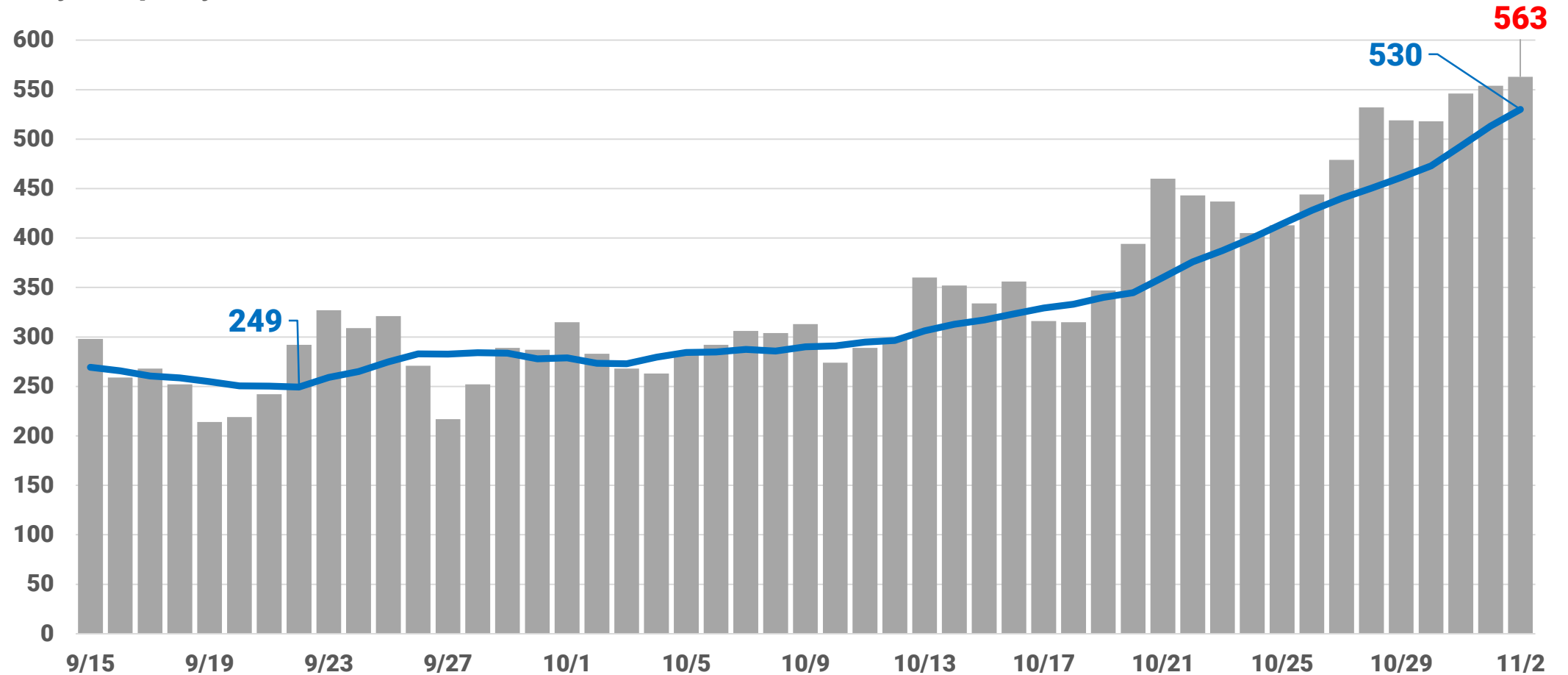
Non-ICU Bed Occupancy from COVID-19



Peak 7-day rolling average	1211 avg. occupied non-ICU beds 5/4/2020
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COVID-19 acute/non-ICU beds occupied, daily counts and 7 day average, daily occupancy census

Non-ICU beds occupied by COVID-19 patients



Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning April 3 (acute non-ICU occupancy). Acute non-ICU bed counts include burn, emergency department, med/surg, other, pediatrics and psychiatry beds in Chicago hospitals. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases.

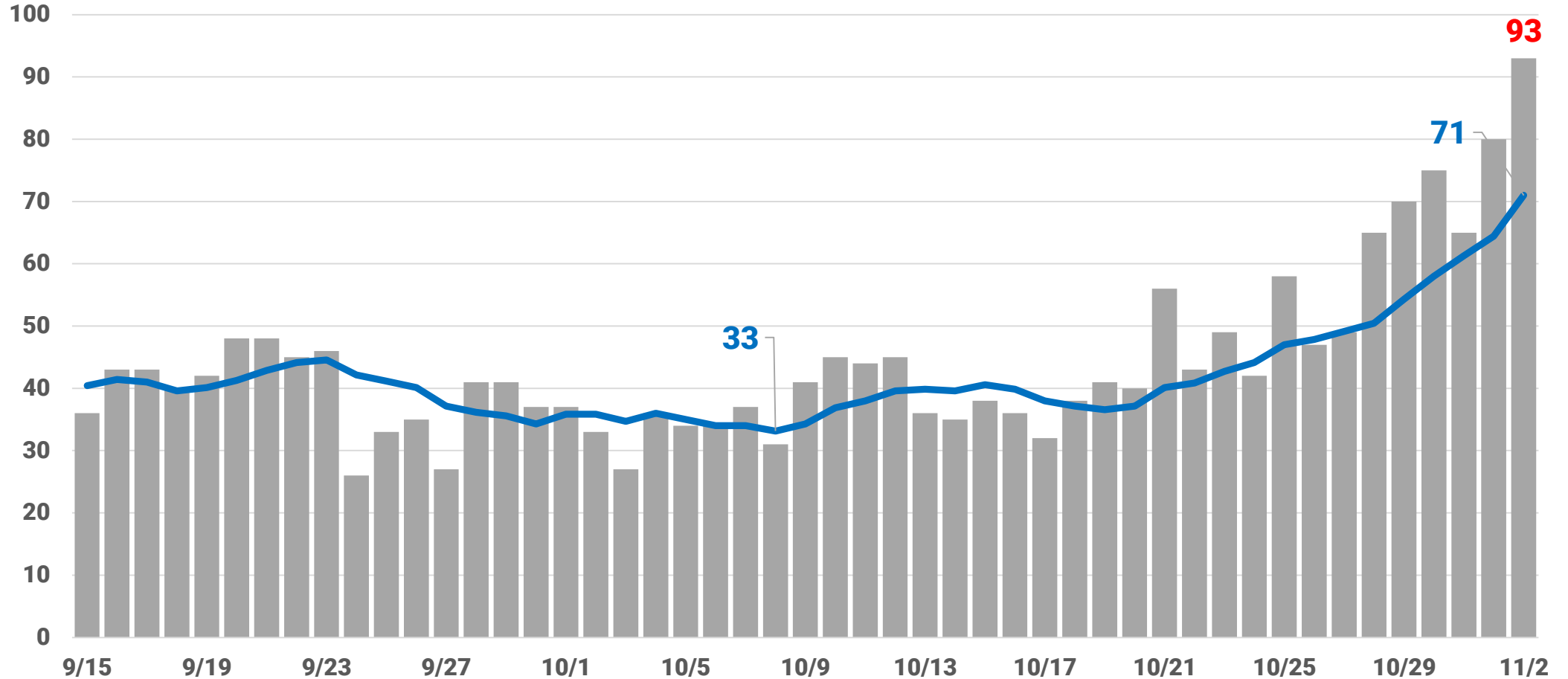
Ventilator Utilization from COVID-19



COVID-19 ventilators in use, daily counts and 7 day average, daily utilization census

Peak 7-day rolling average	344 avg. ventilators in use 5/2/2020
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Ventilators occupied by COVID-19 patients



Includes all Chicago hospitals. Hospitals report daily to CDPH via EMResource, beginning March 19. Includes Chicago and non-Chicago residents. Includes confirmed and suspected COVID-19 cases. Beginning 4/24/2020, ventilator counts include all full-functioning mechanical ventilators, BiPAP, anesthesia machines and portable/transport ventilators.



MetroSouth Alternate Care Facility (MSACF)

- FOR OFFICIAL USE ONLY (FOUO)
- Planning is ongoing
- Admission Criteria and Planning Assumptions to be distributed to CMOs and Emergency Preparedness Contacts
- In EMResource, Statewide View, IDPH, Region 7

Provider Enrollment

- Chief Medical Officer Call held 11/4/2020
- All hospitals are asked to have at least the site that will be responsible for staff vaccination enrolled no later than 11/13/2020
 - Completed Form A (CMO and CEO) and at least 1 Form B
- Email: COVID19Vaccine@cityofchicago.org with any questions!

Healthcare Personnel Survey

- Distributed to hospitals on Monday via CHSCPR@team-ihd.org with updated email on **11/3/2020 4:00PM**
- All hospitals are asked to complete the survey by COB Monday 11/9/2020
- Intent is to obtain the most accurate estimate of providers in each category
 - Does not have to be exact
 - Numbers will assist CDPH with planning



Healthcare Personnel Survey Question Error- It should read as follows:

How many HCP within your hospital/health system provide direct care to [REDACTED] patients that are at low risk of COVID-19 or lack acute symptoms of in inpatient, ambulatory or long-term care?





Long Term Care Facility (LTCF) and Pharmacy Partnership

- >130 Chicago LTCFs sign-up as of Monday 11/2!
- Provides end-to-end management of the COVID-19 vaccination process for LTCF residents, including cold chain management, on-site vaccinations, and fulfillment of reporting requirements
- Facilities must sign-up for the program
- Sign-up ends 11:59 pm EDT 11/06/2020
 - Skilled nursing facilities (SNFs) will make their selection through the National Healthcare Safety Network (NHSN). An “alert” will be incorporated into the NHSN LTCF COVID-19 module to guide users to the form.
 - Assisted living facilities (ALFs) will make their selection via an online REDcap (<https://redcap.link/LTCF>) sign-up form.



CDC COVID-19 Vaccination Program Provider Agreement

Agreement requirements

- Acknowledgement:
 - “ I understand this is an agreement between Organization and CDC. This program is part of a collaboration under the relevant state, local, or territorial immunization program’s cooperative agreement with CDC.
- To receive one or more of the publicly funded COVID-19 vaccines (COVID-19 vaccine), constituent products, and ancillary supplies at no cost, Organization agrees that it will adhere to the following requirements:



Requirements

- Administer COVID-19 vaccine in accordance with all requirements and recommendations of CDC and CDC's Advisory Committee on Immunization Practices (ACIP)
- Within 24 hours of administering a dose of COVID-19 vaccine record in the vaccine recipient's record and report required information to the relevant state, local, or territorial public health authority.
 - I-CARE
 - Must preserve the record for at least 3 years following vaccination
- Must not sell or seek reimbursement for COVID-19 vaccine and any adjuvant, syringes, needles, or other constituent products and ancillary supplies that the federal government provides without cost to Organization.



Requirements

- Administer COVID-19 vaccine regardless of the vaccine recipient's ability to pay COVID-19 vaccine administration fees.
- Before administering COVID-19 vaccine, provide an approved Emergency Use Authorization (EUA) fact sheet or vaccine information statement (VIS), as required, to each vaccine recipient, the adult caregiver accompanying the recipient, or other legal representative.
- Conduct COVID-19 vaccination services in compliance with CDC's *Guidance for Immunization Services During the COVID-19 Pandemic* for safe delivery of vaccines
 - <https://www.cdc.gov/vaccines/pandemic-guidance/index.html>



Requirements

- Comply with CDC requirements for COVID-19 vaccine management. Those requirements include the following:
 - **store and handle** COVID-19 vaccine under proper conditions, including maintaining cold chain conditions and chain of custody in accordance with manufacturer's package insert and CDC's *Vaccine Storage and Handling Toolkit*
 - *monitor vaccine storage unit temperatures at all times using equipment and practices that comply with CDC's Vaccine Storage and Handling Toolkit*
 - *comply with each relevant jurisdiction's immunization program guidance for dealing with temperature excursions*
 - *monitor and comply with COVID-19 vaccine expiration dates*
 - *preserve all records related to COVID-19 vaccine management for a minimum of 3 years*

CDC's Vaccine Storage and Handling Toolkit

- Will be updated to include specific COVID-19 vaccine information
- Sections:
 - Vaccine Cold Chain
 - Staff and Training
 - Vaccine Storage and Temperature Monitoring Equipment
 - Vaccine Inventory Management
 - Vaccine Preparation
 - Vaccine Transport
 - Emergency Vaccine Storage and Handling





Requirements

- Report the number of doses of COVID-19 vaccine and adjuvants that were unused, spoiled, expired, or wasted as required by the relevant jurisdiction
 - VaccineFinder will be used for inventory during early phases
- Comply with all federal instructions and timelines for disposing of COVID-19 vaccine and adjuvant, including unused doses
- Report any adverse events following vaccination to the Vaccine Adverse Event Reporting System (VAERS)
 - <http://vaers.hhs.gov/contact.html>
 - 1-800-822-7967



Requirements

- Provide a completed COVID-19 vaccination record card to every COVID-19 vaccine recipient, the adult caregiver accompanying the recipient, or other legal representative.
 - Each COVID-19 vaccine shipment will include COVID-19 vaccination record cards.
- Comply with all applicable requirements as set forth by the U.S. Food and Drug Administration, including but not limited to requirements in any EUA that covers COVID-19 vaccine.
- Administer COVID-19 vaccine in compliance with all applicable state and territorial vaccination laws.



COVID-19 Distribution, Storage, Handling, and Administration Planning Scenarios



Vaccines

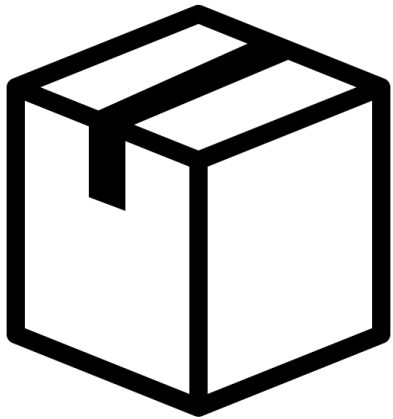
- CDC has provided vaccine storage and handling planning scenarios for 2 possible COVID-19 vaccines
 - Vaccine “A”
 - Requires Ultra-cold storage (-60C to -80C)
 - 3 separately acquired components (vaccine, diluent, ancillary supplies)
 - Vaccine “B”
 - Requires frozen storage (-25C to -15C)
 - 2 separately shipped components (vaccine and ancillary supplies)

***Vaccine scenarios are for planning purposes only. Details of approved vaccines may differ from these scenarios. Vaccine manufacturers will release storage/handling details for their specific vaccines at/near the time of product release.**

★ Vaccine “A” Shipment

Vaccine Shipped direct from manufacturer

Thermal Shipper*



Created by Rockicon
from Noun Project

Estimated dimensions
15.75in X 15.75in X
22.0in

1-5 trays

**Vaccine tray
“Pizza box”**



Created by lastspark
from Noun Project

Estimated dimensions
9in X 9in X 1.6in

195 vials

Multidose vials



Created by Olena Panasovska
from Noun Project

2 mL multidose vials
5 doses/vial

*Should be returned after use

Vaccine “A” orders

- Minimum order ~1,000 doses
- Maximum order/ box ~5,000 doses
- Diluent and ancillary supply kits (for mixing and administration) will accompany each order
 - Direct to site from the federal government
 - Storage at room temperature

Vaccine “A” On-site Storage

- Freezer unit capable of ultra-cold temperatures
- Use of thermal shipper for vaccine storage
 - Replenish with dry ice upon receipt (day 1)
 - Replenish with dry ice every 5 days (maximum 3 recharges)
 - On day 15, remaining vaccine transferred to refrigerated temperatures (2C – 8C)
 - Once refrigerated **must be used within 5 days (120 hours)**
 - Shippers may only be opened 2 times per day
- Both methods require temperature monitoring per CDC and manufacturer guidance

Vaccine “A” Handling Considerations

- Product may be removed from ultra-cold storage/thermal shipper, thawed and stored at 2C -8C for up to 5 days
 - Unused doses must be discarded after 5 days
 - Only thaw what will be used in this time frame
 - Product cannot be returned to ultra-cold storage or thermal shipper after thawed
- If removed directly from ultra-cold temperatures, vaccine must be thawed ~30 minutes at room temp before dilution
- Once thawed must be diluted or stored at 2C – 8C within 2 hours
- Diluted vaccine must be used within 6 hours
 - Unused diluted doses must be discarded after 6 hours

Vaccine “A” Administration

- 2-dose series (21 days between doses)
- On-site mixing required
- Dilute with diluent just prior to administration
- All 5 doses must be used within 6 hours of dilution
 - Remainder of diluted vaccine should be discarded
- Administer by intramuscular (IM) injection

Vaccine “B” Shipment

- Vaccine
 - To central distributor (at -20C)
 - Multidose vials (10 doses/vial)
- Ancillary supply kits
 - Shipped from federal government

Vaccine “B” On-site Storage

- Frozen (-25C to -15C) until ready for use
- Thaw before use:
 - Refrigerated conditions (2 hours)
 - 15 minutes at room temp before administration
 - Can be stored in refrigerated conditions for up to 7 days if vial has not been entered
 - Room temperature (20C – 25C) (1 hour)
 - Cannot be returned to freezer after thawing
- Room temperature
 - No more than 12 hours
 - Once vial has been entered must be used within 6 hours
 - Discard any unused vaccine after 6 hours

Vaccine “B” Administration

- 2-dose series (28 days between doses)
- No on-site mixing required
- Administer by intramuscular (IM) injection

Questions?



[Chicago.gov/Health](https://www.chicago.gov/Health)



HealthyChicago@cityofchicago.org



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