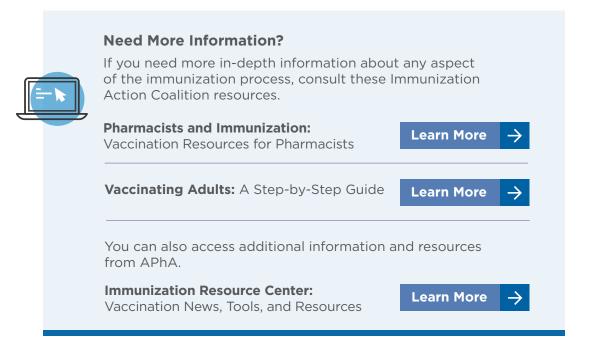


Organizing a large-scale off-site immunization event can be a major undertaking. Pharmacists who have conducted or participated in mass immunization clinics agree: the more planning you do, the more smoothly the event will run. The purpose of this guide is to walk you step-by-step through the key considerations of planning and conducting a large event. Pharmacists may be asked to lead or participate in large-scale immunization events. The success of these events relies on coordination and collaboration among members of the immunization neighborhood, such as public health and community leaders.

Not all of the activities in this timeline may be needed for your event. Conversely, you may need to complete tasks that aren't included here. Use the information in this guide as a general framework and modify it to fit your particular circumstances. The companion checklist includes columns for recording the date by which each task must be completed and the person responsible for completing it.



## **Determine Personnel Needs**

A large-scale immunization administration event requires three main types of personnel:

- → Healthcare professionals authorized to provide vaccinations.
- → Healthcare staff (eg, pharmacy technicians, student pharmacists, pharmacy residents) with knowledge about vaccines and experience handling vaccines and preparing vaccine doses.
- → Nonmedical personnel to fill a variety of support roles.

An early step in planning a large-scale immunization event team is figuring out personnel needs—what kind and how many.

The "Breakdown of Clinic Personnel for Vaccination Clinic With Four Vaccination Stations," provided with this toolkit, is based on a Centers for Disease Control and Prevention (CDC) guidance document that describes the different activities needed to conduct a large-scale emergency influenza vaccination clinic (ie, in response to an outbreak) and provides examples of personnel estimates for clinic staffing. The breakdown assumes four vaccination stations operating during an 8-hour clinic, with one vaccinator and one vaccine preparer per station. The breakdown further assumes that each vaccination station provides 30 vaccinations per hour, considering time for review of screening questions and vaccine administration. You can extrapolate these estimates to your own event to provide a general idea of personnel requirements.

In any mass immunization clinic setting, if possible, the role of the pharmacist and other immunizers should be limited to clinical patient care activities such as reviewing screening questions and administering vaccines. If it is geographically feasible, consider partnering with a local pharmacy school



(or other health profession school) to enlist the help of students, faculty, and practice residents. Students can help with tasks such as processing the initial paperwork, coordinating the flow of traffic, answering patient questions, and billing. Where permitted by law and regulations, students could assist with administering vaccines under direct pharmacist supervision.

Other important personnel considerations include the following:

- → If it is likely that participants will speak languages other than English, at least some personnel should be conversant in those languages (or translation services should be available).
- → At least one trained pharmacist, physician, emergency medical technician (EMT), or nurse certified in basic cardiopulmonary resuscitation (CPR) should be designated to administer treatment for allergic reactions and address urgent medical problems.
- → Larger clinics may benefit from having uniformed security personnel act as security and assist in managing crowds.

Use the <u>"Estimating Personnel Needs"</u> worksheet provided with this guide to help you determine the roles that may be needed during your immunization event, the number of people you would need for each position, and who might fill each role.

# **Assemble a Planning Committee**

To ensure a smooth and successful event, a small core planning committee should engage in working meetings to make decisions about the event and ensure tasks are completed by established deadlines.

The core planning committee for the immunization clinic should reflect anticipated personnel needs. It should include several people with experience providing immunizations—both administering vaccines (eg, pharmacists, nurses) and preparing vaccines (eg, pharmacy technicians). Ideally, at least one person will have experience administering vaccines in a clinic setting or planning an immunization event. If you will be collaborating with a local pharmacy school, invite a faculty member and student pharmacist to join the committee.

Other types of people to include on the core planning committee will depend on the nature and scope of your event and possibly state statutes and regulations governing immunizations.



Consider the need for planning committee members with expertise or experience in  $^{2,3}$ :

- → Public relations or communications.
- → Insurance and billing.
- → Information technology/computer support.
- → Public health.
- → Legal issues.
- → Research.

If your event will target a specific community group or local agency, invite a representative of that group to serve on the committee. If the targeted group has a specific racial or ethnic identity, the committee member can help to anticipate and address common language and cultural barriers that may hinder event communication and participation.

Keep in mind, though, that smaller is better when it comes to the planning committee. A smaller committee usually can meet more frequently (ie, fewer conflicting schedules to manage) and make decisions more quickly.<sup>2</sup>

Be clear from the start about how committee members will meet and communicate. Will meetings be conducted in person or virtually (eg, conference call, video meeting)? When will meetings be held? Should email messages be directed to the entire committee? How will everyone know when tasks have been completed?

Consider assigning specific leadership roles to core planning committee members. For example, individual members might be placed in charge of:

- → Identifying, ordering, and overseeing immunization supplies.
- → Interacting with the event venue.
- → Working with media contacts to promote the event.
- → Recruiting and coordinating volunteers.

These committee members could continue in their specialized roles during the immunization clinic. For example, the committee member tasked with recruiting and coordinating volunteers would be in charge of volunteers on the day of the event.

Use the <u>"Creating a Core Planning Committee"</u> worksheet provided with this guide to record your ideas for planning committee members along with their associated areas of expertise and possible leadership roles.



### **Find a Venue**

Large-scale immunization events ideally are held in venues that are conducive to efficient clinic operation and convenient for participants. Possibilities include (but certainly are not limited to) community centers, senior centers, school gyms, churches, auditoriums, theaters, and shopping malls.

At minimum, the venue should be a large, covered, public space that is close to your target population and accessible to elderly persons and individuals with disabilities. It should provide space and facilities for all immunization clinic functions such as screening, registration, vaccine storage, vaccination, and post-vaccination observation/treatment. Ideally, the venue will allow people to enter and move straight through the clinic stations to the exit, rather than having to circle back to the entrance. (See "Example of Large-Scale Influenza Vaccination Clinic" for a diagram of this concept.<sup>4</sup>)

It is critical that vaccines be maintained at appropriate temperatures throughout the immunization event. The venue **must** be able to provide or support the equipment needed to maintain the cold chain.

The ideal venue also will have<sup>2,4,5</sup>:

- → Proximity to population centers and mass transit.
- → Ample free parking.
- → Functional and accessible restrooms with sinks for handwashing.
- → Adequate lighting and heating.
- → Floors that can be cleaned easily (eg, not carpeted).
- → Landline telephone access and/or cell phone reception.
- → Internet access.
- → Tables and chairs that can be used for the event.
- → Space for reasonably large and well-delineated covered gathering areas outside and inside.

The <u>"Immunization Event Venue Evaluation Checklist"</u> provided with this guide summarizes important considerations for possible clinic locations.



# **Recommended Tasks to Complete 6 Months or More Before the Event**

Order vaccines and clinic supplies to arrive in time for the event.

- → Some vaccines (eg, influenza) may need to be ordered many months in advance of the event date.
- → If at all possible, arrange to have vaccines shipped directly to the event location provided cold chain management can be maintained and vaccines can be stored securely.

Consider using manufacturer-filled syringes for large immunization events because they are designed for both storage and administration.

→ If at all possible, use a single lot number of vaccine to expedite record keeping.

If the clinic will provide immunizations at no cost to participants, determine how the cost of the vaccines and administration will be covered.

- → Contact your local or state health department to inquire about obtaining free vaccines.
- → Reach out to potential grant partners.

Verify that existing standing order protocols will cover off-site immunizations. Establish a standing order protocol if one does not exist.

- → You should have standing orders for both administering vaccines and managing vaccine reactions.
- → The Immunization Action Coalition offers templates for standing orders for all routine vaccines and managing adverse events (www.immunize.org/standing-orders/). Templates always should be customized according to local conditions and legal requirements.

Ensure access to the local immunization information system. Verify local requirements for reporting administered vaccinations.

Confirm that your liability insurance covers off-site immunizations.

→ Individual policies for pharmacists may be advisable in addition to coverage through a company policy. Typical coverage minimums, based on pharmacists interviewed, are \$1 million per occurrence and \$3 million aggregate per policy interval.<sup>6</sup>

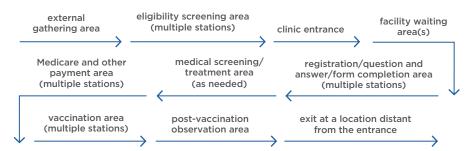
Discuss the need for general business liability insurance with the event venue.



Begin to visualize how you want patients to flow through the clinic from arrival to departure.

→ Immunization administration clinics ideally are designed as a series of well-delineated areas that allow participants to progress straight through from the entrance to the exit.

#### A unidirectional flow recommended by the CDC is4:



(See "Example of Large-Scale Influenza Vaccination Clinic" for a diagram of this flow.)

#### **Possible Immunization Clinic Areas**

- An area at the clinic entrance where staff greet participants and direct them to the initial station. Staff in this area also might conduct an initial screening (eg, for contraindications to vaccination).
- A registration/question and answer form completion area consisting
  of multiple tables and chairs. Healthcare professionals and other staff
  should be available in this area to answer questions.
- A station for accepting or processing payment.
- An open area to queue for vaccination administration stations. At least some chairs should be available for persons waiting to be vaccinated.
- Vaccination stations with tables for supplies and seats for providers and participants. If multiple individual rooms are not available, the stations should be enclosed by portable screens to provide patient privacy during vaccination. There should be adequate space to place sharps containers (for used needles) and waste baskets (for other trash) close to where the vaccinations will be administered.
- A designated area for vaccine preparation. Vaccines should not be prepared (including drawing up) at the individual vaccination stations.
- A post-vaccination observation area with seating. Participants may be asked to complete an immunization clinic evaluation at this station.
- A private area (eg, behind portable screens) where participants who experience acute adverse events after vaccination or who have medical problems can be evaluated and treated.
- An exit separate from the clinic entrance. Evaluation forms could be collected as participants exit the clinic.



# Tasks to Complete 3 to 6 Months Before the Event

Ensure that all needed vaccines and supplies have been ordered to arrive in time for the event.

Determine how payment and third-party billing will be managed.

→ If needed, obtain a Medicare mass immunization provider number(s) for the clinic site. Consult the CMS resource "Mass Immunizers and Roster Billing" for additional information.<sup>7</sup>

Recruit vaccination providers and support personnel.

- → Verify current licensure and credentials (eg, CPR certification) of vaccination providers.
- → Ensure that event staff are trained and demonstrate competency in vaccine storage, handling, and administration.

Establish security and emergency procedures.

Set up a system for record keeping and documentation.

Determine and order needed signage. If the clinic will serve diverse populations, be sure to have signs in multiple languages (or universal language).

- → Signs with the date, time, and location of the clinic can be used to promote the event during the preceding weeks and identify the venue on event day.
- → Signs may be needed both outside and inside the event venue.
- → Be sure to determine whether there are any regulations governing sign placement.

#### Signage You May Need

- General sign indicating the clinic location and time (to post outside the venue).
- Entrances and exits.
- Designated clinic areas.
- One-way flow of traffic inside the clinic.
- Restrooms.



If the vaccine that will be administered during the event is part of a series, consider how participants will receive the remaining doses.

- → Will you conduct additional immunization events at the appropriate time intervals?
- → Will you encourage participants to visit the pharmacy to receive subsequent doses?
- → Will you refer participants to their primary care physician or other providers in your immunization neighborhood?



#### Give It a Shot

Investigate whether you can scan patients' insurance information into a laptop computer or using an iPad. This can save telephone calls to patients after the event if there are questions about insurance coverage or if any information was transcribed incorrectly. Be sure to check your pharmacy HIPAA policies.



# Tasks to Complete 1 to 3 Months Before the Event

Review the "Immunization Clinic Supplies Checklist" to determine what may need to be ordered.

→ Ensure that an emergency medical kit (including epinephrine and equipment for maintaining an airway) will be available at the site for the duration of the clinic. Ensure that appropriately trained and qualified personnel are present at the immunization event to use the kit in case of an emergency. Develop a protocol for medical emergencies prior to the immunization event and make sure personnel are trained on it.

Meet with personnel at the event venue to discuss the desired clinic layout and clarify what is provided at the site (eg, tables, chairs, waste baskets, office supplies).

If you will need internet access during the event (eg, to access the immunization information system or for credit card processing), consider what equipment (eg, laptop computers, hotspot) and services (eg, secure internet connection) will be required.

Develop a plan for maintaining vaccine at appropriate temperatures during transport to the event venue and throughout the clinic day. Consult the CDC "Vaccine Storage & Handling Toolkit" for detailed information.<sup>8</sup>

→ Determine how the cold chain will be maintained during vaccine transport and confirmed upon arrival at the event venue.

Review and consider using the <u>"Checklist of Best Practices for Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations"</u> from the National Adult and Influenza Immunization Summit.<sup>9</sup>

Determine how medical waste will be collected and disposed of during and after the event.

Begin to create or gather and make copies of needed forms.



#### Forms You May Need

- General information/fact sheets about the target disease state.
- Current immunization schedules.
- Sign-in sheets.
- Patient contact information forms.
- Informed consent forms.
- Release of information forms.
- Screening questionnaires.
- Current Vaccine Information Statements for the types of vaccines to be administered (available in English on the <u>CDC website</u> and in multiple languages on the <u>Immunization Action Coalition website</u>).
- Blank vaccine administration record forms or cards (cards can be ordered from the Immunization Action Coalition).
- Vaccine administration documentation forms.
- Billing forms.
- Immunization roster billing log.
- Participant exit survey questionnaires.
- Vaccine Adverse Event Reporting System (VAERS) forms (available at vaers.hhs.gov).

If you anticipate a large turnout, consider how you will organize the queue of people waiting.

- → Consider using roped or belted stanchions both outside and inside the venue to delineate routes for participants to follow from station to station.
- → Consider providing sign-up sheets and calling people's names when it is their turn to enter the clinic, be vaccinated, etc.
- → Consider providing participants with a "deli-style" numbered ticket or other numbered card to define their place in line.

Identify roles for all event staff and volunteers and assign specific day-of-event tasks.

- → Make sure you will have sufficient help available for setup, breakdown, and cleanup duties.
- If you will be using the <u>"Checklist of Best Practices for Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations,"</u> designate the person who will be responsible for ensuring adherence to the guidelines.



Consider designing and/or ordering special shirts for all event staff and volunteers so that they will be easily identifiable.

→ For larger events, it may be helpful to have different colored shirts to indicate different roles/job functions.

Begin promoting the event. (This information is covered in Guide 4, "Raising Awareness of Immunization Events.")

# Tasks to Complete 1 to 2 Weeks Before the Event

Arrange for delivery and appropriate storage of vaccines including maintenance of cold chain.

Review the <u>"Checklist of Best Practices for Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations"</u> for items that must be completed before the event.

Review the "Immunization Clinic Supplies Checklist" to ensure you have all needed supplies and materials available.

- Determine who will be responsible for gathering and transporting supplies.
- → If needed, procure or purchase several plastic totes or bins to transport supplies (**not** vaccines) to the site.

Gather important documents that must be available during the event.

- → Standing order protocols.
- → Proof of licensure for immunizers.

Schedule a training session (or separate training sessions) for clinic staff and volunteers.

- → Describe the event setup and intended flow of clinic traffic.
- → Explain the general roles that staff and volunteers will fill on event day, including the command or supervision structure.
- → Discuss important general event policies, procedures, and responsibilities (eg, how the check-in process will work).
- → Provide answers to common and anticipated questions. Consider preparing a handout with this information.
- → Remind participating students (if applicable) to wear lab coats, name tags, and professional attire to the screening event.
- → Review immunization, documentation, and emergency management procedures with the clinic staff.



→ Ensure immunizers are knowledgeable about all possible contraindications and precautions to vaccination for the vaccines being administered at the clinic.

If participants will need to receive subsequent doses in a vaccine series, consider ways to remind them of the need for follow-up in HIPAA-compliant fashion.

- → Collect email or mailing addresses for reminder messages.
- → Collect mobile phone numbers for reminder text messages.
- → Create "save the date" cards with information about future vaccine series completion clinics.

Determine how you will capture important information about each participant in HIPAA-compliant fashion.

- → Medical history including potential contraindications to vaccination.
- → Contact information.
- → Insurance information.
- → Other information needed for billing.

Post signs promoting the event at and near the venue.

→ Be mindful of any regulations governing sign placement.

Schedule a post-event evaluation meeting with planning committee members on a date 1 to 2 weeks after the event. Be sure to give yourself enough time to tabulate results of exit surveys or other feedback mechanisms.

Consider designating at least one person to observe the clinic on event day and respond quickly to problems or challenges that arise.

Continue to promote the event. (This information is covered in Guide 4, "Raising Awareness of Immunization Events.")

Ensure that appropriately trained and qualified personnel are present at the immunization event to use the kit in case of an emergency. Develop a protocol for medical emergencies prior to the immunization event and make sure personnel are trained on it.

# Have a Plan in Place for Activating the Emergency Medical Protocol

Make sure appropriately trained personnel will be present at the event.

Assign specific tasks to personnel (eg, technician calls 911, facility representative waits by entrance to direct emergency responders to patient).

If at all possible, run through a medical emergency scenario to ensure all personnel are comfortable with and competent in their roles.



# Tasks to Complete 1 Day Before the Event

Review the "<u>Immunization Clinic Supplies Checklist</u>" to ensure that all needed materials will be transported to or available at the event venue.

Send a final reminder to all staff and volunteers with important event-day details (eg, what time to report to the venue, what to wear).

# **Conducting the Event**

The day of your immunization event is finally here! Time for all of your hard work and planning to pay off in a successful event.

Especially if you will be administering vaccinations, plan for clinic personnel to arrive (or begin arriving) at the venue well before the start of the event—at least 1.5 to 2 hours—to allow plenty of time for setup. And try to be flexible when unexpected situations arise on event day. Changes are inevitable; it's how you deal with them that counts.

#### **Before the Event**

Place signs outside the event venue.

→ Be sure to comply with any regulations governing sign placement.

If you plan on using stanchions, set up roped lines to delineate the routes that participants will follow from station to station.

Consider creating an expedited entry point and dedicated vaccination line for special-needs clients (eg, persons with disabilities or fragility, elderly adults).

Set up the registration area.

Arrange tables and chairs to create the form completion/question and answer area.

Place copies of forms (eg, screening questionnaires, disease fact sheets, Vaccine Information Statements, billing information forms, consent forms) in the form completion area. Consider collating forms onto clipboards to ensure that a complete set is handed to each participant.

Set up computers and verify internet access. Ensure access to the state or regional immunization information system.



Set up the vaccine preparation area and vaccination stations with furniture (eg, tables, chairs) and administration supplies.

- Create at least one vaccination station with surrounding screens for privacy.
- → If more than one vaccine type is being administered, set up separate administration stations for each vaccine type to prevent medication errors. Review Prescribing Information for vaccine products for information about coadministration with other vaccines.

Section off at least one private area where participants who experience acute adverse events after vaccination or who have medical problems can be evaluated and treated. Ensure that the on-site emergency medical kit is available in this area.

Create a post-vaccination observation area. Place exit surveys and pens in this area (use clipboards if no tables are available).

Determine the location of the nearest restrooms (patients and clinic staff will want to know).

Walk through the clinic as a participant would. Place signs in the spots that seem most logical and visible.

→ Ideally, have more than one person walk through the clinic venue; they may notice different things.

Immunizers should review relevant vaccine package inserts, Vaccine Information Statements, and emergency medical protocols before the clinic begins.

If you are using the "<u>Checklist of Best Practices for Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations</u>," begin completing each item. **Do not administer any vaccine until the designated person confirms that it is acceptable to move forward with the clinic.** 

## **During the Event**

#### Clinic Entrance/Registration Area

As participants arrive, direct them into appropriate lines or areas.

Time the immunization process from start (arriving at the clinic) to finish (vaccinated and leaving the clinic). If the process begins to have people waiting to get vaccinated, estimate and communicate the wait time to participants.





#### Give It a Shot

One approach to timing the immunization process is to give selected participants a time-stamped card when they join the queue and ask them to turn the card in as they exit the clinic. A designated person stationed at the exit should record the time to determine total process time.

#### Participant Registration/Form Completion Areas

Implement the queue tracking process as participants sign in for the clinic (eg, provide participants with a numbered ticket).

Provide a copy of the most up-to-date Vaccine Information Statement(s) to participants and answer questions as needed. If the patient is a minor, the Vaccine Information Statement must be given to the parent or legal representative.

Provide other necessary forms (eg, screening questionnaires) to participants. Assist with form completion as needed.

Maintain a steady flow of clients through the clinic so that vaccinators are never without a client at their stations; redirect clients who create bottlenecks.

#### **Vaccine Preparation**

Prepare vaccines using aseptic technique in a clean, designated area not adjacent to any area where potentially contaminated items are placed—and not adjacent to the patient care area. Vaccines should be prepared just prior to administration.

If it is not possible to use single-dose vials or prefilled syringes, use a new needle and new syringe to withdraw each dose of vaccine.

- → No more than one multidose vial or ten doses should be drawn up at one time. If syringes are not used immediately, they should be labeled appropriately and stored at the appropriate temperature.
- Monitor participant flow during the event to avoid drawing up unnecessary doses.

#### Vaccine Administration

Vaccinate participants according to the established process (eg, in the order of their numbered tickets).

Review each participant's screening questionnaire *carefully* to ensure there are no contraindications or precautions to vaccine administration.



The vaccine recipient and the immunizer both should be seated during vaccine administration.

Hand hygiene should be performed before vaccine preparation, between patients, and any time hands become soiled.

Follow the pharmacy's rules and procedures pertaining to use of gloves when administering vaccines. When gloves are worn when administering vaccines, they should be changed and hand hygiene performed between patients.

Use a new, appropriate-gauged needle and new syringe for each patient.

Immediately place the used needle and syringe in a sharps container following administration (do not recap the needle).

Consider providing colorful bandages or stickers to children.

→ Avoid items that could be problematic in the case of latex or other allergy.

Provide the CDC Vaccine Information Sheet (VIS) for each vaccine administered to patients.

Provide documentation of the vaccine(s) administered to patients for their personal records.

Direct participants to the post-vaccination observation area. Ideally, clinicians should observe participants for 15 minutes after vaccination (or longer, if appropriate).<sup>10</sup>

Document any post-vaccination adverse events reported by participants, regardless of whether you think the vaccine caused the event.

Collect completed evaluation forms as participants exit the clinic. Consider distributing "I Got My Shot" stickers to participants on their way out.

Record the following information for all vaccines administered:

- → Patient name.
- → Vaccine type.
- → Vaccine expiration date.
- → Vaccine manufacturer and lot number.
- → Date vaccine administered.
- → Injection site location and route of vaccine administration (eg, left deltoid, IM).
- → Name, address, and title of person administering the vaccine.
- → Date printed on the Vaccine Information Statement.
- → Date the Vaccine Information Statement is given to the vaccine recipient or that person's legal representative.

Record unanticipated situations as they arise so they can be addressed during the event evaluation meeting.





#### Give It a Shot

If unanticipated situations arise, use the cell phone voice memo function to record important details.

#### When the Event Ends

Thank all staff and volunteers for their efforts.

Tear down the clinic setup and clean up all areas.

Dispose of sharps and medical waste appropriately in compliance with legal requirements.

Remove all event signage.

Record the number of vaccinations provided during the event.

Ensure proper storage and handling of unused vaccine, ensuring cold chain is maintained.

If unused vaccines are going to be returned to the pharmacy after the event, qualified personnel should be assigned to consulting the CDC Vaccine Storage and Handling Toolkit <a href="https://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf">https://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf</a> and/or consulting the manufacturer(s) of the vaccine(s) regarding cold chain requirements and assuming cold chain has been retained. This should be determined prior to the event.

Get ready to celebrate! You've helped to make a difference by upping vaccination rates. Well done!

#### **After the Event**

Submit information on vaccinations administered to your local immunization information system.

Report the occurrence of any adverse events to the Vaccine Adverse Event Reporting System (VAERS).

To the extent possible, notify participants' physicians detailing the vaccination the patient had received.

Finalize and submit billing for the vaccine(s) and administration fee.

Tabulate all responses to participant exit surveys.

Conduct a post-event evaluation meeting with planning committee members. (See Guide 5, "Evaluating the Immunization Event.")

Send thank-you notes or other expressions of appreciation to everyone who helped make the event a success.



#### Who to Thank

- Pharmacists and other healthcare professionals who participated in the event.
- · Event volunteers.
- Event venue contacts.
- Community spokespersons and organizations that participated in or promoted the event.
- Legislators that participated in or promoted the event.
- Business locations that promoted the event.
- Media that promoted the event.
- Other local and state organizations that participated or promoted the event (eg, state pharmacy association).

Consider hosting a thank-you event to recognize the hard work of staff and volunteers.

# **Acknowledgments**

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- → Cynthia Knapp Dlugosz, BSPharm
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- → Sarah McBane, PharmD, CDE, BCPS, FCCP, FCPhA, APh

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# **Breakdown of Clinic Personnel for Vaccination Clinic With Four Vaccination Stations**

Task/Role	Number per 8-Hour Shift	Experience
Orientation/information	2	Nonmedical
Distribute/help with forms	2	Nonmedical
Clinic flow	2	Nonmedical
Billing/payment	2	Nonmedical
Vaccinators	4	As authorized by state laws
Vaccine preparers	4	Medical support
Post-vaccine observation	2	Medical
Medical records/data entry	5	Nonmedical
Clinic manager	1	Nonmedical public health/ immunization programs personnel
Supply manager	2	Nonmedical
Security	2	Non-public health resource
Translator (not counted in total clinic staffing estimates)	At least 1 per major language of participants	Language fluency with training
Float staff	1	Nonmedical volunteers
Emergency medical technician	On call	Medical
IT support	On call	Nonmedical



# **Creating a Core Planning Committee**

Record your ideas for planning committee members along with their associated areas of expertise and possible leadership roles.

Person	Expertise	Leadership Role(s)	Possible Role on Event Day
(example) Your Name	Immunizing pharmacist	Event chair	Lead immunizer



# **Estimating Personnel Needs**

Which of the roles listed below may be needed during your immunization event? Considering the length of your event and using the CDC estimates as a guide, how many people would you need for each position?

Position	Number Needed	Who Could Fill?
(example) Vaccinators	3	Pharmacists P4 students
(example) Forms helpers	2	Volunteers (one fluent in Spanish)
Greeters/information		
Registration		
Clinic flow		
Forms reviewer/helper		
Medical screeners		
Vaccinators*		
Vaccine preparers*		
Payment collectors		
Security		
Translator(s)		
Float staff		



Position	Number Needed	Who Could Fill?
Emergency medical technician		
IT support		
Other Roles:		

<sup>\*</sup>Assume 1 per vaccine station; consider need for breaks during the event.



# **Immunization Event Venue Evaluation Checklist**

This venue:	Yes	No
Is large enough to accommodate the anticipated event size		
Is covered		
Is close to the target population for the event		
Is close to mass transit		
Will be accessible to elderly persons and persons with disabilities		
Has or can accommodate equipment for storing vaccines at the appropriate temperature for the duration of the event		
Has space and facilities for all immunization clinic functions, such as screening, registration, vaccine storage, vaccination, and staff breaks		
Allows people to enter and move straight through the clinic stations to the exit, rather than having to circle back to the entrance		
Provides ample free parking		
Has functional and accessible restrooms with sinks for handwashing		
Has adequate lighting and heating		
Has landline telephone access and/or cell phone reception		
Offers internet access		
Has tables and chairs that can be used for the event		

