Louisiana Higher Education Allied Health Vaccination with Louisiana Department of Health

BOARD of REGENTS
STATE OF LOUISIANA

LSU

UNIVERSITY OF LOUISIANA SYSTEM

Louisiana's Community & Technical Colleges
Changing Lives, Creating Futures

LAICU

SOUTHERN UNIVERSITY AND A&M COLLEGE SYSTEM

REGENTS
BOARD of REGENTS
STATE OF LOUISIANA

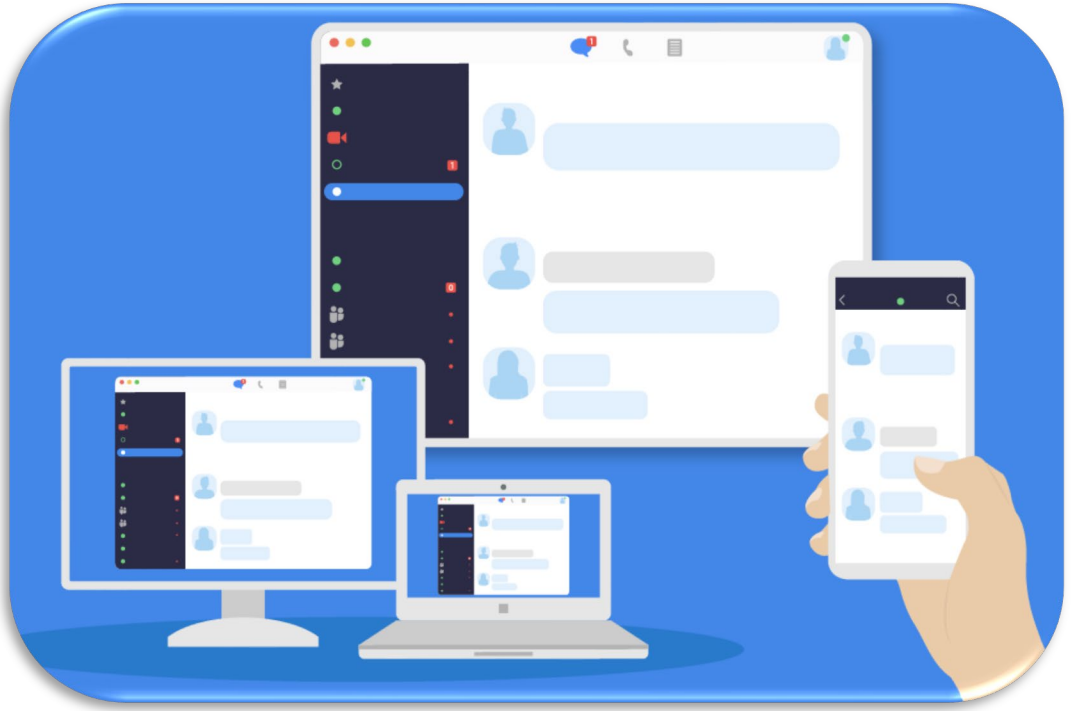
January 21, 2021

WEBINAR AGENDA

1. Welcome
2. Overview of COVID-19 Vaccine
3. Vaccination Administration & Management:
    1. Provider Agreement Enrollment Process
    2. Common Mistakes
    3. Lessons Learned
4. Next Steps
5. Question & Answer

WEBINAR INSTRUCTIONS

- **Submit questions via chat in Zoom.**
- **Please include your e-mail address.**



Louisiana Board of Regents and Department of Health Staff

BOARD of REGENTS
STATE OF LOUISIANA

Dr. Kim Hunter Reed, *Commissioner of Higher Education, BOR*
Dr. Susannah Craig, *Deputy Commissioner, BOR*
Mellynn Baker, *Assistant Commissioner, BOR*

Dr. DeAnn Gruber, *Director of Bureau for Infectious Diseases , Louisiana Office of Public Health*
Quan Le, *LINKS Program Manager, Office of Public Health Immunization Program*

LOUISIANA DEPARTMENT OF HEALTH

COVID-19 Vaccine Overview

Louisiana Board of Regents Allied Health Schools and Universities

Office of Public Health
Bureau of Infectious Diseases
Immunization Program
January 21, 2021

LOUISIANA DEPARTMENT OF HEALTH

COVID-19 Vaccine in Louisiana: Overview

- Planning Process
  - Vaccine Action Collaborative (VAC) established in July 2020
  - Priority Populations, Planning, Logistics/Operations, and Communications Work Groups
  - Engaged with associations of providers (Louisiana Hospital Associations, LA Nursing Home Association, etc.)
  - Developed plans with Health Equity lens across all activities
  - Advisory Committee on Immunization Practices (ACIP) recommendations continue to be considered

Effectiveness & Safety

- We are confident that COVID-19 vaccines will be a critical tool in ultimately ending the pandemic
- Two of the vaccines, developed by Pfizer and Moderna, indicate greater than **94% effectiveness**
- Safety is a top priority
- No steps were skipped in the development of the vaccines, and the COVID vaccines are being held to the same standards as other vaccines to ensure they are safe
- **While we remain in the pandemic the federal government plans to ensure vaccines are made available to those in need without cost to the individual**

Clinical Trials

- Both Moderna and Pfizer vaccines have received FDA authorization for emergency use
- FDA authorization means that clinical trials have shown the vaccine has an effective defense against COVID-19
- FDA and CDC will continue to monitor safety and effectiveness data
  - **70,000+** people participated in clinical trials for both vaccines
  - FDA made all documentation used when considering authorization available to the public, in case anyone wants to review the data before getting vaccinated

mRNA (Messenger RNA) Vaccines

- mRNA vaccines use a genetic fragment (messenger RNA)
- COVID-19 mRNA vaccines code for the harmless spike protein
- COVID-19 mRNA vaccines are injected in the upper arm muscle
- Once the mRNA gets into the cells, your own body produces COVID spike proteins
- Your body recognizes this “foreign protein” and produces antibodies against it
- When the COVID-19 virus gets into your body, your antibodies recognize and destroy them. The virus dies and you stay well.

Details on Pfizer COVID-19 Vaccine

- mRNA Vaccine
- 2-dose series – separated by 21 days
- Requires ultra-cold chain, 975 doses in a single tray
- Tested on >44,000 people in the U.S.
- Age 16 and older
- 95% effective in preventing serious disease
- No serious side effects – those with a history of allergic reaction to previous injections should not get vaccine
- Minor side effects (injection site pain, fatigue, headache, chills, joint and muscle pain)

Details on Moderna COVID-19 Vaccine

- mRNA Vaccine
- 2-dose series – separated by 28 days
- Only requires regular freezer, 100 doses in a single tray
- Tested on >30,000 people in the U.S.
- Age 18 and older
- 95% effective in preventing serious disease
- No serious side effects –Minor side effects (injection site pain, fatigue, headache, chills, joint and muscle pain)
- Currently in clinical trial for children 12-17 yo
- No diluent (need for advance mixing) included with this vaccine

COVID-19 VACCINE

WHO GETS IT RIGHT NOW?

PHASE 1A (POPULATION: 249,000)

- Hospital personnel
- Nursing home/long-term-care facility residents and staff
- First responders to serve as vaccinators (EMS, fire personnel, law enforcement)

PHASE 1B, TIER 1 (POPULATION: 640,000)

- Persons 70 years old and older,*
- Outpatient clinic providers and clinic staff,
- Urgent care clinic providers and staff,
- Community care clinic providers and staff,
- Behavioral health clinic providers and staff,
- Dialysis providers and recipients,
- Home health service providers, direct support workers and recipients,
- Dental providers and staff, and
- Schools of allied health students, residents and staff

*starts Jan. 4, 2021

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LOUISIANA DEPARTMENT OF HEALTH

COVID-19 VACCINE

WHO GETS IT RIGHT NOW?

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*starts Jan. 4, 2021

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Vaccine Administration and Management

- Robust Provider Enrollment efforts began in September
  - Tier 1 and 2 Hospitals
  - Emergency Medical Service (EMS) Workers
  - Pharmacies
  - Federally Qualified Health Centers/Rural Health Centers
  - Home Health and Dialysis Clinics
  - Allied Health Colleges/Universities
  - *More than 1,750 providers now enrolled in LINKS*
- Long Term Care Facilities are being vaccinated by Walgreens/CVS through federal partnership

Provider Enrollment Process

LOUISIANA DEPARTMENT OF HEALTH

Provider Agreement Enrollment Process

1. Complete CDC Provider Agreement (section A and B)
2. Save and submit CDC Provider Agreement to enrollLA.LINKS@la.gov
3. Update CDC Provider Agreement with corrections, as needed
4. Complete CDC Redistribution Agreement, as needed
5. Save and submit CDC Redistribution Agreement to enrollLA.LINKS@la.gov
6. Update CDC Redistribution Agreement with corrections, as needed

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Louisiana Immunization Network (LINKS)

CDC Provider Agreement Instructions

Links

1. Download the CDC Provider Agreement form. Open the form from your computer to complete it. **DO NOT** complete the form on a web browser, as you will not be able to save your responses.
2. Download Adobe Reader here. Forms that are scanned, faxed and/or completed by hand **WILL NOT** be processed.
3. Complete the CDC Provider form carefully. Note the following common mistakes.

PAGE 4

Primary and Backup Vaccine Coordinators

- If you have multiple facilities, list 2 different people for each facility. These 2 people must have physical access to the vaccine inventory and will have access to LINKS.

Days and times vaccine coordinators are available

- Military time should be entered in the following format: XX:XX-XX:XX (e.g. AM hours: 08:30-11:59; PM hours: 12:00-17:00).

PAGE 5

COVID-19 vaccination provider type for this location

- Select the location type from the dropdown menu on the right. "Other" should only be specified if "Other" is chosen from the dropdown menu.

Number of patients/clients routinely served by this location

- Check "Unknown" if the number of patients/clients seen is unknown.

PAGE 6

Population(s) served by this location

- Check the box(es) next to the populations that will be served.

Reporting Vaccine Administration

- Check "Yes" if your organization is currently reporting vaccine administration data in the IIS (LINKS). When you login to LINKS, at the top of the page, it will show your organization name and number. This number is your IIS identifier.

Estimated number of MDVs

- Check "No capacity" if your organization is unable to store MDVs during peak vaccination periods at ultra-frozen temperatures.

4. Save completed form as a PDF to computer.
5. Email completed form as an attachment to EnrollLA.LINKS@la.gov. This email will only be monitored for enrollment and no other purposes.
6. A confirmation email will be sent within 24 hours after submission. Be sure to check your spam inbox.
7. If you do not receive this confirmation, your form has not been received.

Provider Agreement Enrollment Process (cont.)

1. If new to LINKS, wait roughly 2 weeks to receive LINKS login credentials
2. Receive confirmation that your facility is enrolled (roughly 2 weeks)
3. Check your LINKS account to ensure that you have access. If not, contact LA.LINKS@la.gov
4. Wait to be contacted by LDH about COVID-19 vaccine allocations

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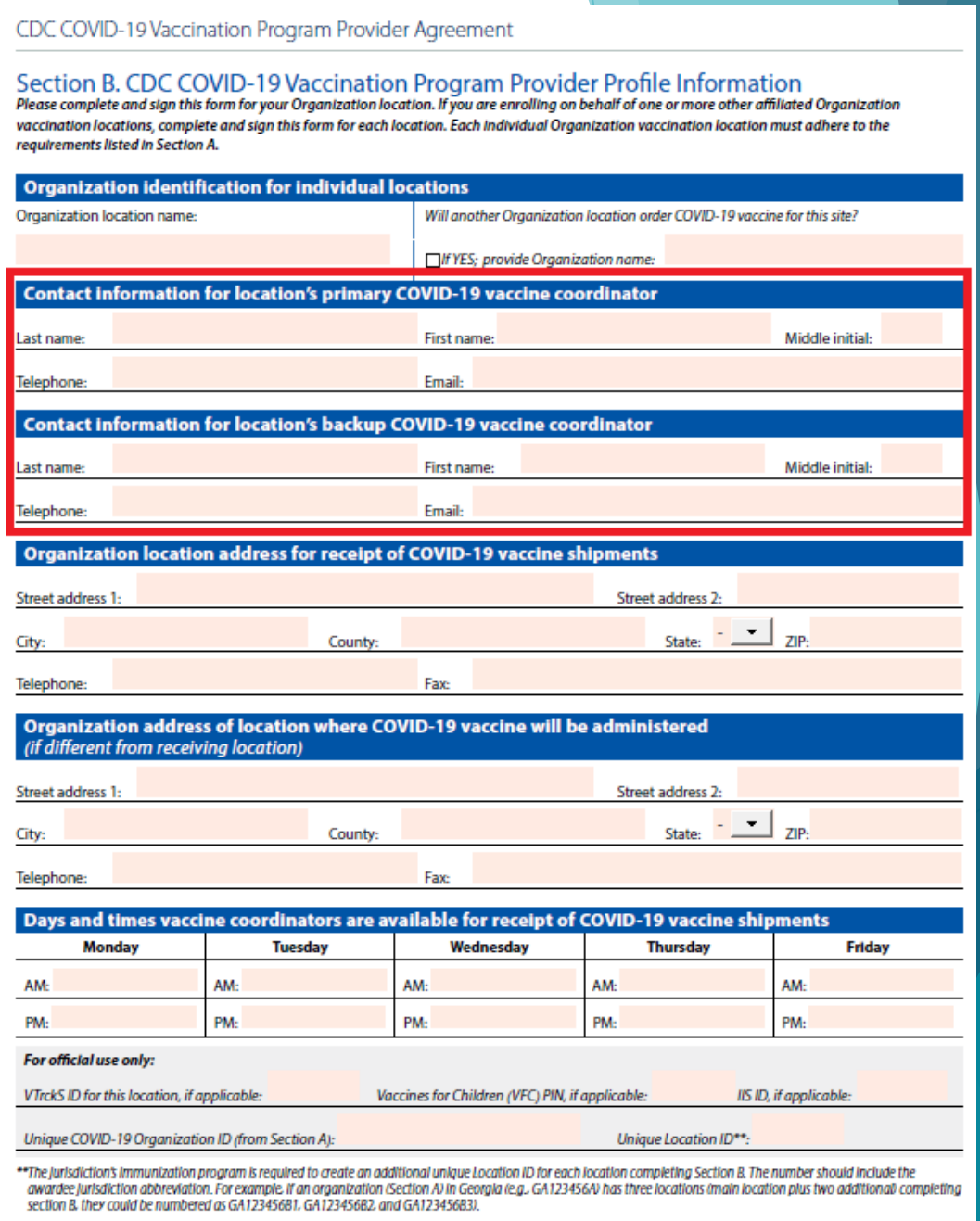
Vaccine Coordinators (page 4)

- If your site is not enrolled in LINKS, the information provided in this application will be used to create your site profile in LINKS
- If you have multiple facilities, do not list the same people as the primary and backup coordinator
- Vaccine coordinators must have physical access to the vaccine inventory
- New vaccine coordinators will be sent their LINKS login information roughly 2 weeks after submitting their CDC Provider Agreement



CDC COVID-19 Vaccination Program Provider Agreement

Section B. CDC COVID-19 Vaccination Program Provider Profile Information

Please complete and sign this form for your Organization location. If you are enrolling on behalf of one or more other affiliated Organization vaccination locations, complete and sign this form for each location. Each individual Organization vaccination location must adhere to the requirements listed in Section A.

Organization identification for individual locations

Organization location name:

Will another Organization location order COVID-19 vaccine for this site?

☐ *If YES; provide Organization name:*

Contact information for location's primary COVID-19 vaccine coordinator

Last name: First name: Middle initial:

Telephone: Email:

Contact information for location's backup COVID-19 vaccine coordinator

Last name: First name: Middle initial:

Telephone: Email:

Organization location address for receipt of COVID-19 vaccine shipments

Street address 1: Street address 2:

City: County: State: ZIP:

Telephone: Fax:

Organization address of location where COVID-19 vaccine will be administered *(if different from receiving location)*

Street address 1: Street address 2:

City: County: State: ZIP:

Telephone: Fax:

Days and times vaccine coordinators are available for receipt of COVID-19 vaccine shipments

Monday	Tuesday	Wednesday	Thursday	Friday
AM:	AM:	AM:	AM:	AM:
PM:	PM:	PM:	PM:	PM:

For official use only:

VTrckS ID for this location, if applicable: *Vaccines for Children (VFC) PIN, if applicable:* *IIS ID, if applicable:*

Unique COVID-19 Organization ID (from Section A): *Unique Location ID**:*

***The jurisdiction's immunization program is required to create an additional unique Location ID for each location completing Section B. The number should include the awardee jurisdiction abbreviation. For example, if an organization (Section A) in Georgia (e.g., GA123456A) has three locations (main location plus two additional) completing section B, they could be numbered as GA123456B1, GA123456B2, and GA123456B3).*

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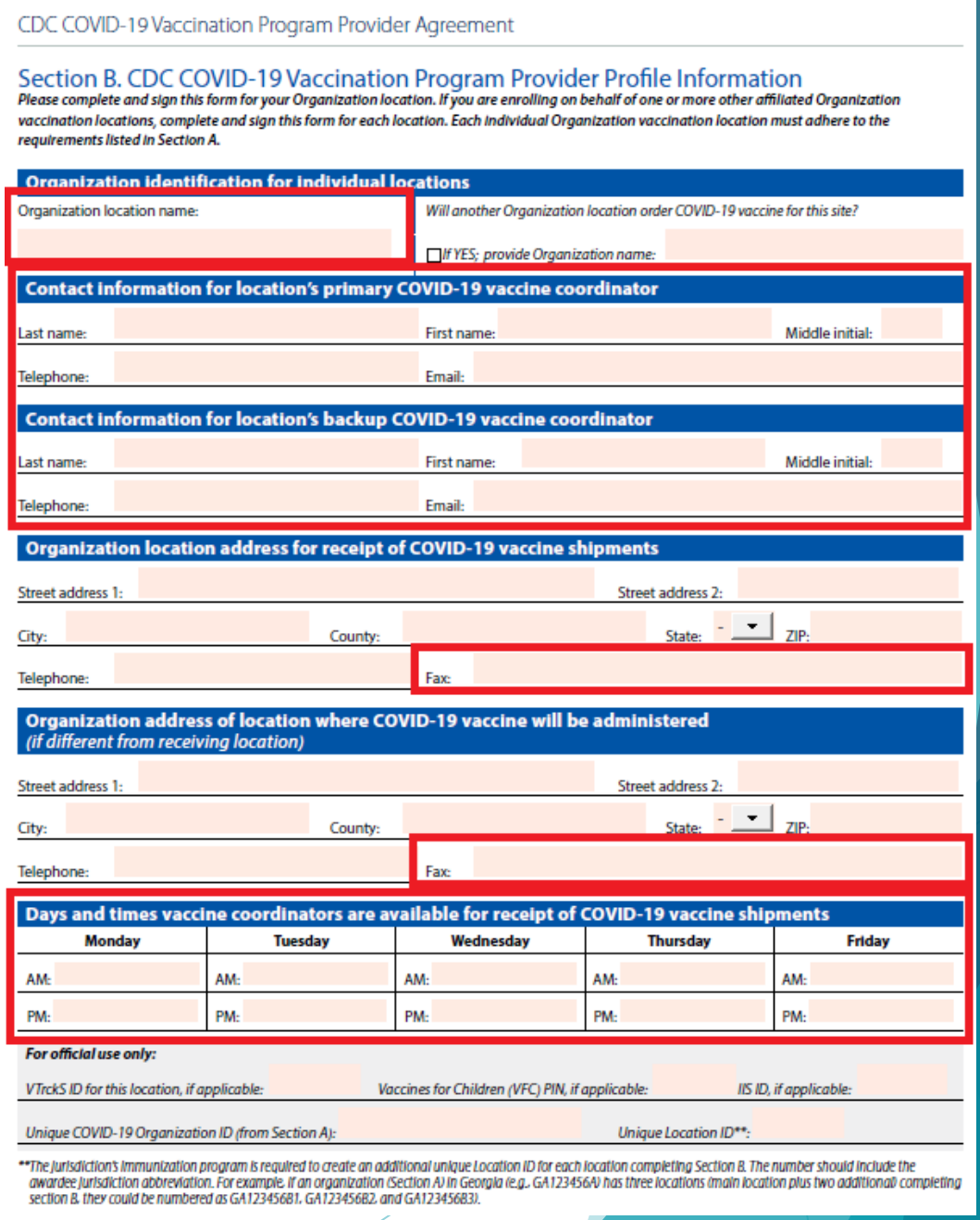
Common Mistakes (page 4)

- Not listing facility name as listed in LINKS
  - If your site is new, list how you would like your facility to be named in LINKS
- Listing the same vaccine coordinators across multiple facilities
- Not listing a fax number
- Incorrect date and time format
  - Correct format: XX:XX-XX:XX (military time)
  - Example
    - AM: 08:00-11:59



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Will another Organization location order COVID-19 vaccine for this site?

☐ *If YES; provide Organization name:*

Contact information for location's primary COVID-19 vaccine coordinator

Last name: First name: Middle initial:

Telephone: Email:

Contact information for location's backup COVID-19 vaccine coordinator

Last name: First name: Middle initial:

Telephone: Email:

Organization location address for receipt of COVID-19 vaccine shipments

Street address 1: Street address 2:

City: County: State: ZIP:

Telephone: Fax:

Organization address of location where COVID-19 vaccine will be administered *(if different from receiving location)*

Street address 1: Street address 2:

City: County: State: ZIP:

Telephone: Fax:

Days and times vaccine coordinators are available for receipt of COVID-19 vaccine shipments

Monday	Tuesday	Wednesday	Thursday	Friday
AM:	AM:	AM:	AM:	AM:
PM:	PM:	PM:	PM:	PM:

For official use only:

VTrckS ID for this location, if applicable: *Vaccines for Children (VFC) PIN, if applicable:* *IIS ID, if applicable:*

Unique COVID-19 Organization ID (from Section A): *Unique Location ID**:*

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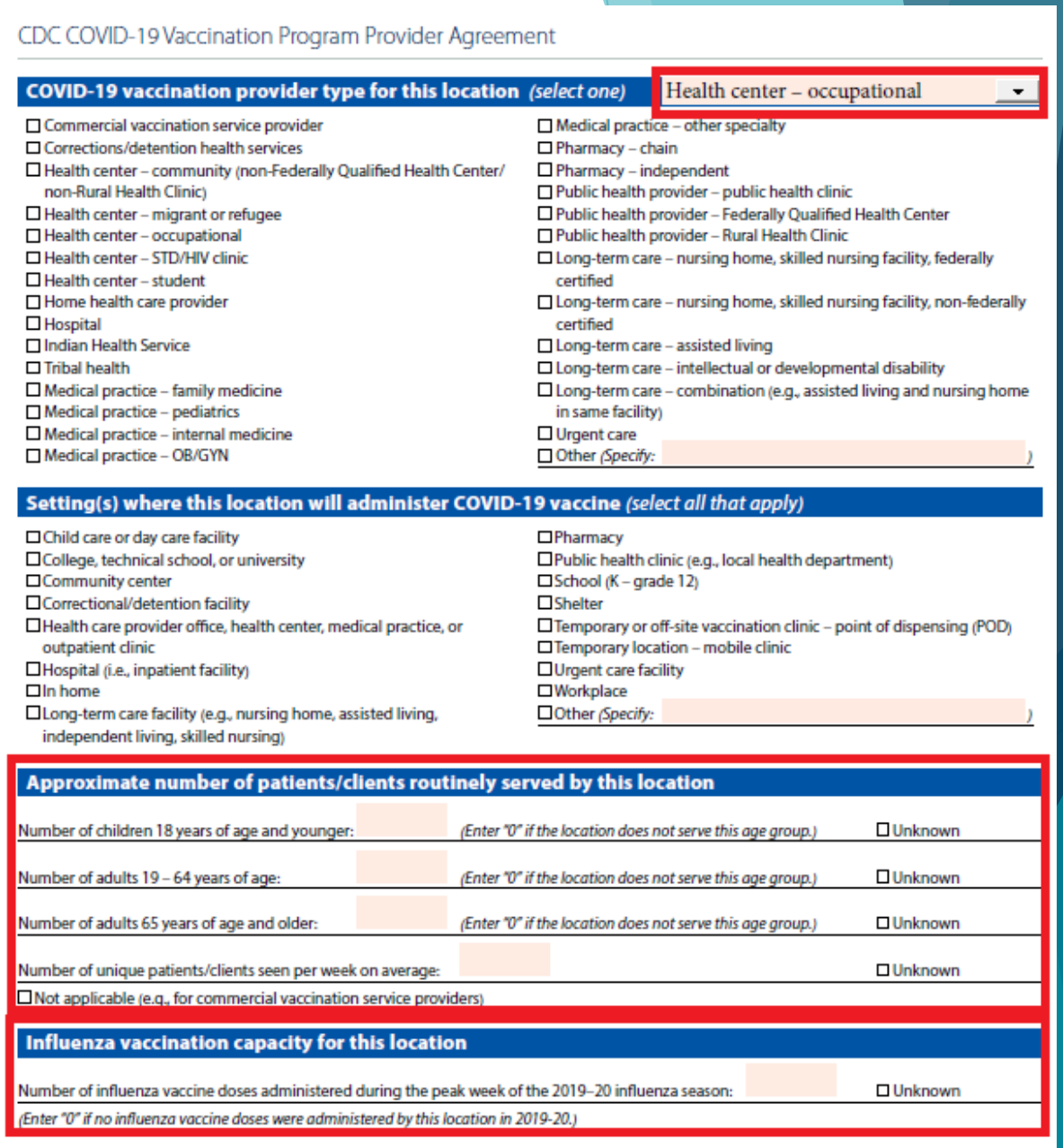
Common Mistakes (page 5)

- Select provider type from the dropdown menu. Boxes in the application cannot be checked
  - Only specify “Other” if “Other” is selected from the dropdown menu
- Do not leave any fields blank
- If an age group is not served, enter “0.” If this is not known, check unknown.
- If influenza vaccination capacity were not administered, enter “0.” If this is not known, check unknown.



CDC COVID-19 Vaccination Program Provider Agreement

COVID-19 vaccination provider type for this location *(select one)* — Health center – occupational

- ☐ Commercial vaccination service provider
- ☐ Corrections/detention health services
- ☐ Health center – community (non-Federally Qualified Health Center/ non-Rural Health Clinic)
- ☐ Health center – migrant or refugee
- ☐ Health center – occupational
- ☐ Health center – STD/HIV clinic
- ☐ Health center – student
- ☐ Home health care provider
- ☐ Hospital
- ☐ Indian Health Service
- ☐ Tribal health
- ☐ Medical practice – family medicine
- ☐ Medical practice – pediatrics
- ☐ Medical practice – internal medicine
- ☐ Medical practice – OB/GYN
- ☐ Medical practice – other specialty
- ☐ Pharmacy – chain
- ☐ Pharmacy – independent
- ☐ Public health provider – public health clinic
- ☐ Public health provider – Federally Qualified Health Center
- ☐ Public health provider – Rural Health Clinic
- ☐ Long-term care – nursing home, skilled nursing facility, federally certified
- ☐ Long-term care – nursing home, skilled nursing facility, non-federally certified
- ☐ Long-term care – assisted living
- ☐ Long-term care – intellectual or developmental disability
- ☐ Long-term care – combination (e.g., assisted living and nursing home in same facility)
- ☐ Urgent care
- ☐ Other *(Specify:*)

Setting(s) where this location will administer COVID-19 vaccine *(select all that apply)*

- ☐ Child care or day care facility
- ☐ College, technical school, or university
- ☐ Community center
- ☐ Correctional/detention facility
- ☐ Health care provider office, health center, medical practice, or outpatient clinic
- ☐ Hospital (i.e., inpatient facility)
- ☐ In home
- ☐ Long-term care facility (e.g., nursing home, assisted living, independent living, skilled nursing)
- ☐ Pharmacy
- ☐ Public health clinic (e.g., local health department)
- ☐ School (K – grade 12)
- ☐ Shelter
- ☐ Temporary or off-site vaccination clinic – point of dispensing (POD)
- ☐ Temporary location – mobile clinic
- ☐ Urgent care facility
- ☐ Workplace
- ☐ Other *(Specify:*)

Approximate number of patients/clients routinely served by this location

Number of children 18 years of age and younger:	*(Enter "0" if the location does not serve this age group.)*	☐ Unknown
Number of adults 19 – 64 years of age:	*(Enter "0" if the location does not serve this age group.)*	☐ Unknown
Number of adults 65 years of age and older:	*(Enter "0" if the location does not serve this age group.)*	☐ Unknown
Number of unique patients/clients seen per week on average:		☐ Unknown

☐ Not applicable (e.g., for commercial vaccination service providers)

Influenza vaccination capacity for this location

Number of influenza vaccine doses administered during the peak week of the 2019–20 influenza season: ☐ Unknown

(Enter "0" if no influenza vaccine doses were administered by this location in 2019-20.)

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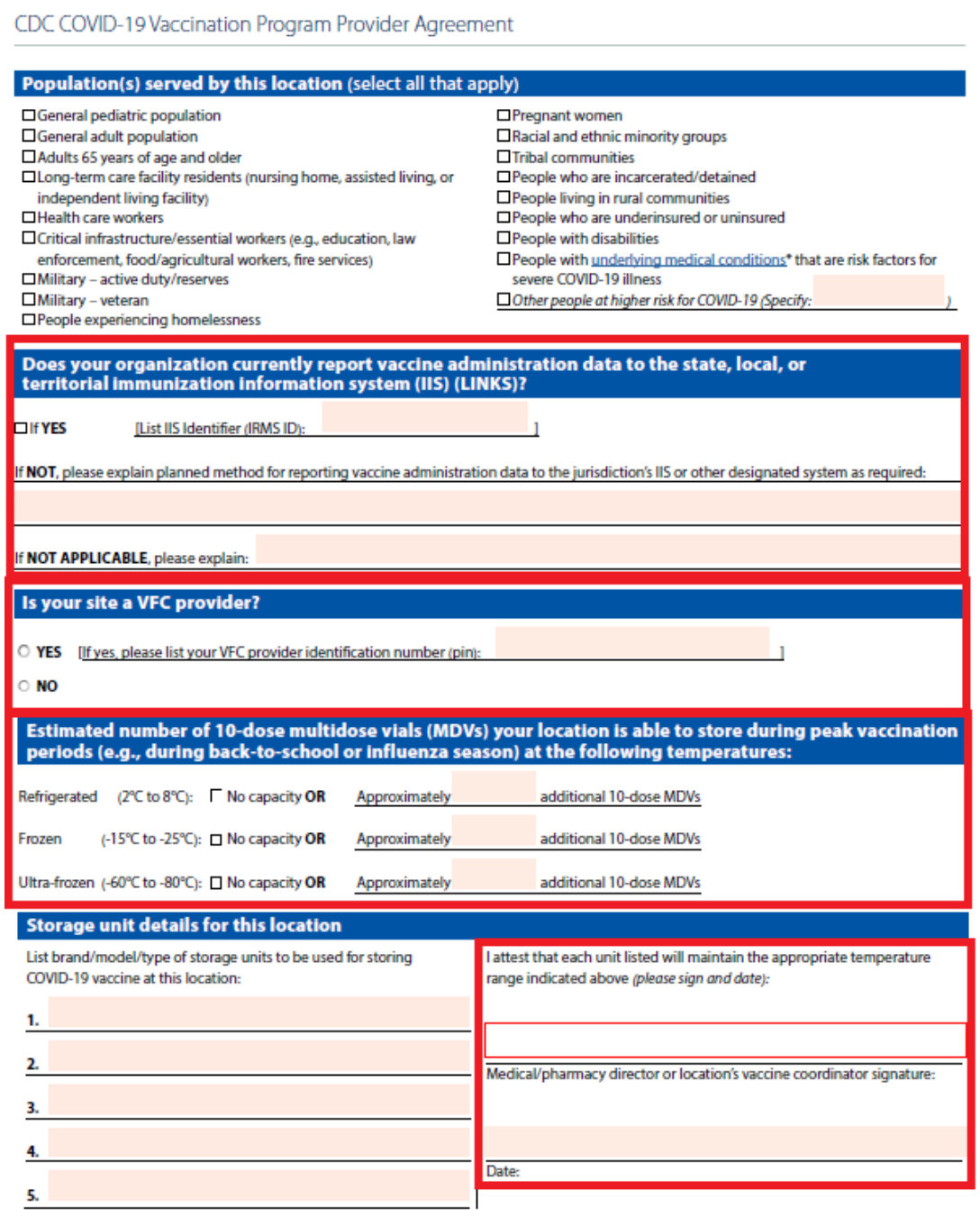
Common Mistakes (page 6)

- Check “yes” if your facility currently reports to LINKS
  - If so, the IRMS ID can be found by logging into LINKS. Next to the organization name is a number, this is your IRMS ID
- Select whether or not your facility is a VFC providers
- Do not leave any fields blank, check “No capacity” if your facilities does not have storage capacity at the specified temperature
- Be sure to sign and date (also on page 3)
  - Use “Fill & Sign” on Adobe Reader
  - Type directly into the signature field



CDC COVID-19 Vaccination Program Provider Agreement

Population(s) served by this location (select all that apply)

- ☐ General pediatric population
- ☐ General adult population
- ☐ Adults 65 years of age and older
- ☐ Long-term care facility residents (nursing home, assisted living, or independent living facility)
- ☐ Health care workers
- ☐ Critical infrastructure/essential workers (e.g., education, law enforcement, food/agricultural workers, fire services)
- ☐ Military – active duty/reserves
- ☐ Military – veteran
- ☐ People experiencing homelessness
- ☐ Pregnant women
- ☐ Racial and ethnic minority groups
- ☐ Tribal communities
- ☐ People who are incarcerated/detained
- ☐ People living in rural communities
- ☐ People who are underinsured or uninsured
- ☐ People with disabilities
- ☐ People with underlying medical conditions* that are risk factors for severe COVID-19 illness
- ☐ *Other people at higher risk for COVID-19 (Specify:*)

Does your organization currently report vaccine administration data to the state, local, or territorial immunization information system (IIS) (LINKS)?

☐ If **YES** [List IIS Identifier (IRMS ID):]

If **NOT**, please explain planned method for reporting vaccine administration data to the jurisdiction's IIS or other designated system as required:

If **NOT APPLICABLE**, please explain:

Is your site a VFC provider?

○ **YES** [If yes, please list your VFC provider identification number (pin):]

○ **NO**

Estimated number of 10-dose multidose vials (MDVs) your location is able to store during peak vaccination periods (e.g., during back-to-school or influenza season) at the following temperatures:

Refrigerated (2°C to 8°C): ☐ No capacity **OR** Approximately additional 10-dose MDVs

Frozen (-15°C to -25°C): ☐ No capacity **OR** Approximately additional 10-dose MDVs

Ultra-frozen (-60°C to -80°C): ☐ No capacity **OR** Approximately additional 10-dose MDVs

Storage unit details for this location

List brand/model/type of storage units to be used for storing COVID-19 vaccine at this location:

1.
2.
3.
4.
5.

I attest that each unit listed will maintain the appropriate temperature range indicated above *(please sign and date)*:

Medical/pharmacy director or location's vaccine coordinator signature:

Date:

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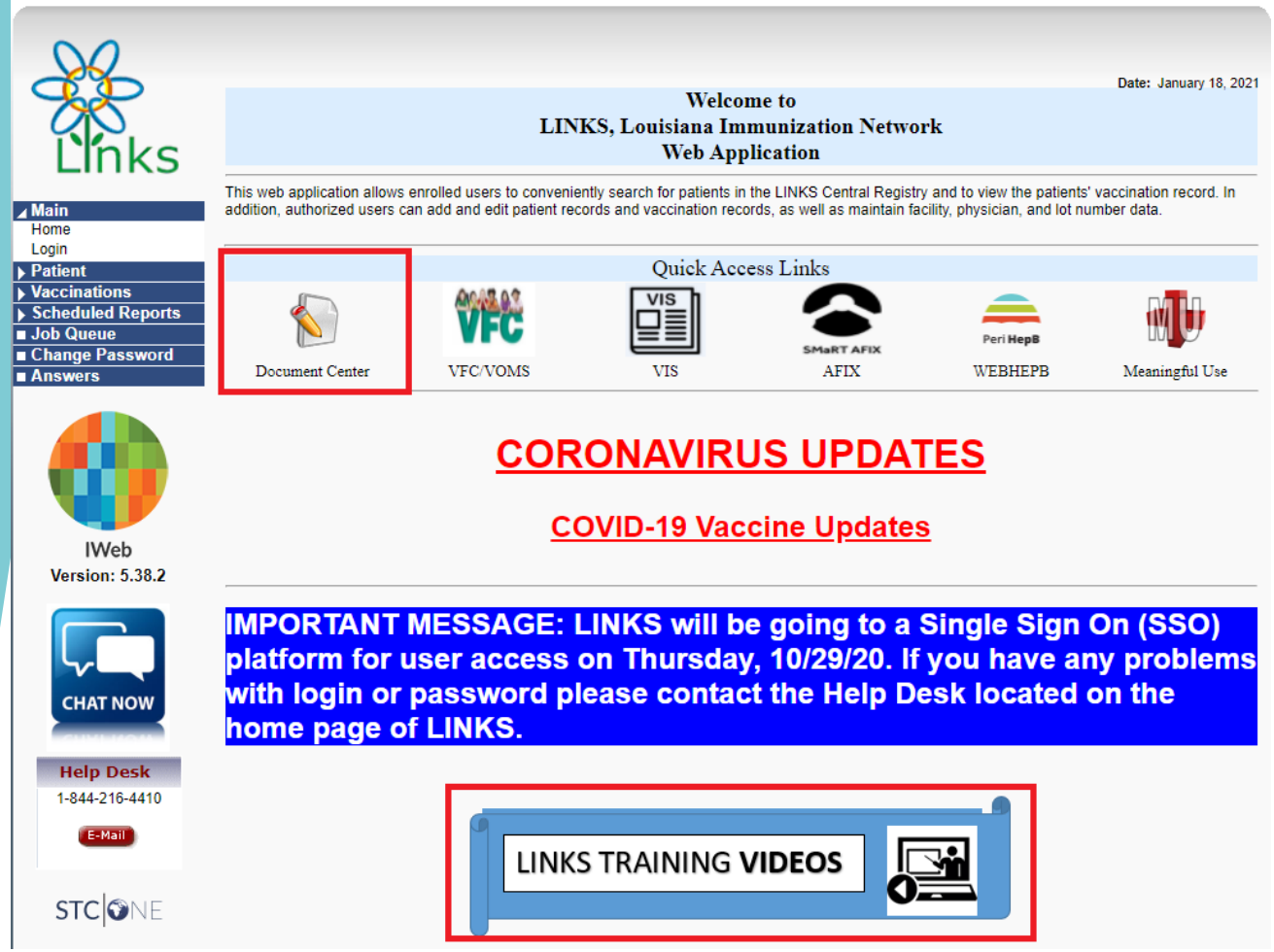
LALINKS.ORG

Document Center & Training Videos



COVID-19 Documents

COVID-19 Documents	
CDC COVID-19 Vaccination Program Provider Agreement - 11/2020	Download/View
CDC Supplemental COVID-19 Vaccine Redistribution Agreement - 10/2020	Download/View
COVID-19 Provider Agreement FQA's	Download/View
Provider Enrollment Common Mistakes	Download/View
LA Mass Immunization Quick Reference Guide	Download/View
Vaccine Transfer Quick Reference Guide	Download/View
Fact Sheet for HCP Administering Vaccine	Download/View
Fact Sheet for Recipients and Caregivers	Download/View
Fact Sheet For Recipients and Caregivers for Moderna COVID-19 Vaccine	Download/View

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Quick Reference Guides: Transfers

Transfer to another facility

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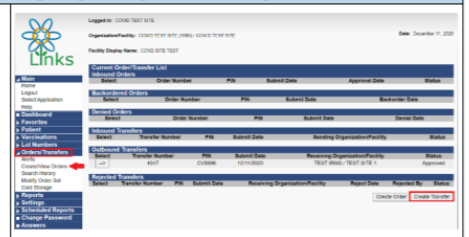
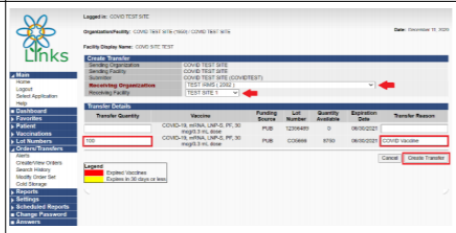
Louisiana Immunization Network (LINKS)

Vaccine Transfer Quick Reference Guide

Links

HOW TO TRANSFER VACCINES TO ANOTHER FACILITY	
1) Under "Orders/Transfers" on the left toolbar, click "Create/View Orders." 2) Click "Create Transfer."	
3) Select a Receiving Organization. 4) Select a Receiving Facility 5) Enter a Transfer Quantity for the vaccine you would like to transfer. 6) Enter a reason for the vaccine transfer. 7) Click "Create Transfer."	
8) The vaccines have now been transferred and are shown under "Outbound Transfers."	

Receive a transfer

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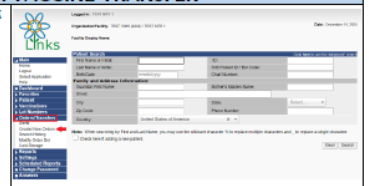
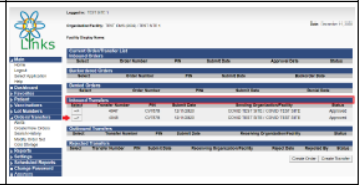
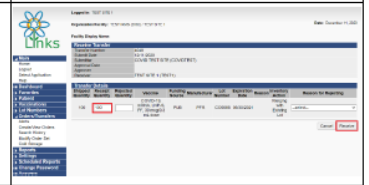
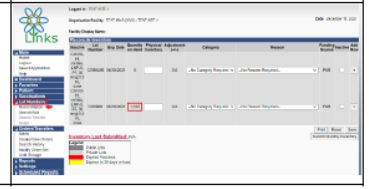
Louisiana Immunization Network (LINKS)

Vaccine Transfer Quick Reference Guide

Links

HOW TO RECEIVE A VACCINE TRANSFER	
1) Under "Orders/Transfers" on the left toolbar, click "Create/View Orders." 2) Click "Create Transfer."	
3) Under "Inbound Transfers," select the transfer you would like to receive.	
4) Enter the "Receipt Quantity." 5) Click "Receive."	
6) To confirm that the inventory was correctly received, go to "Lot Numbers" on the left toolbar. 7) Click "Reconciliation." 8) The new inventory is shown under Quantity on Hand.	

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Vaccine Administration/Mgmt

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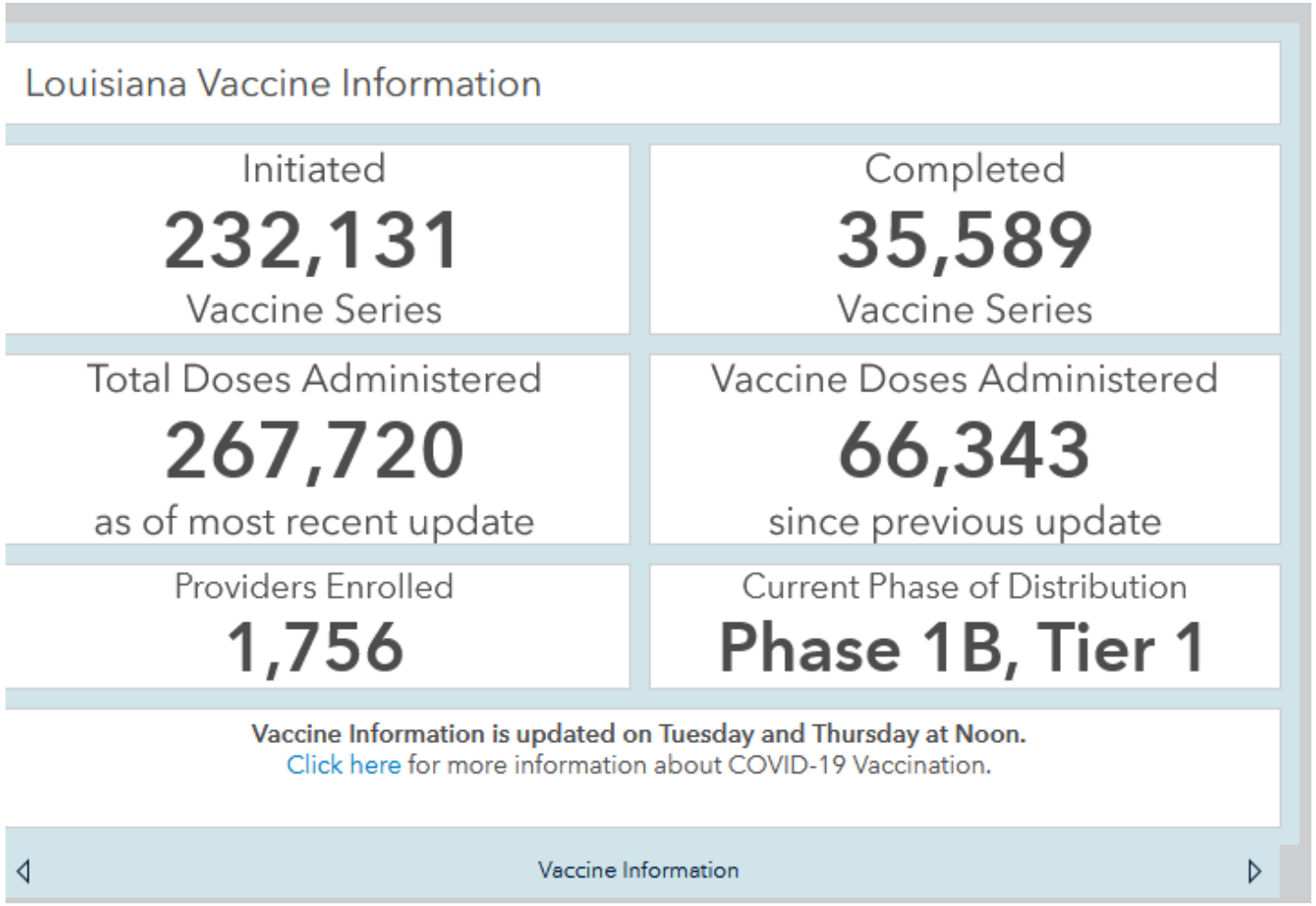
Vaccine Administration and Management

- Receive weekly allocation of doses from Operation Warp Speed (Tuesday am)
- Review list of enrolled and ready to receive providers, prior allocations to providers, estimated remaining inventory, and geographic distribution using Social Vulnerability Index
- OPH Regional Medical Directors make recommendations after they consult with local community providers
- Elevate recommendations to LDH Leadership and Governor
- Submit vaccine orders by Thursday evening, notify selected providers no later than Friday, and orders are received the following Monday-Wednesday

Vaccine Administration

To date, ***438,100 doses*** have been allocated to Louisiana, which includes allocation of 93,600 to long-term care facilities; the State will receive same amount for second doses



ldh.la.gov/coronavirus

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Provider Account: Successes, Challenges, and Lessons Learned

Crescent City Health Center

New Orleans, Louisiana

LOUISIANA DEPARTMENT OF HEALTH

Next Steps

- Identify Allied Health Schools that are ready to receive and administer vaccines among students, faculty, and staff
- Identify Allied Health Schools that have successfully connected with an external medical provider for vaccine administration
- Coordinate with OPH IZ Program to determine when sites can receive doses from upcoming shipments
- Continue to offer technical assistance through on-line training videos and other materials
- Connect with OPH Regional Medical Directors to learn of upcoming vaccination events where Allied Health resources may be utilized

Questions and Suggestions

LDH COVID-19
https://www.ldh.la.gov/coronavirus/

LDH COVID-19 Vaccination Provider Webpage:
https://ldh.la.gov/index.cfm/page/4073

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Thank You

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