Long Term Care Facilities (LTCF) should ensure they have an agreement in place for ongoing COVID-19 vaccination with their LTCF pharmacy provider or another designated provider <u>Long-Term Care</u> <u>Pharmacies Participating in the Federal Retail Pharmacy Program</u>

#### **Pre-Vaccination Administration:**

Establish facility points of contact (POCs), one of whom should be a licensed nurse, to communicate with and coordinate vaccination administration with the pharmacy provider.

- Secondary POC Name:
  - \* Best practice recommendation: designate a primary and secondary POC (e.g., administrator, director of nursing, or the infection preventionist) to receive notifications from your pharmacy provider.

Notify your pharmacy provider when the need for vaccination administration of residents and/or staff is identified.

Identify facility staff to assist with vaccination administration as needed.

Name(s) and roles: \_

Confirm with pharmacy provider:

- Supplies the facility needs to provide for vaccination administration (tables, chairs, trash receptacles, gloves, sharps container, band-aids, alcohol wipes, hand hygiene supplies, etc.).
- How emergency medications will be supplied, in the event of a severe anaphylactic reaction, and by whom (pharmacy or facility). <u>HQIN COVID-19 Vaccine Administration Quick Reference</u>

Identify vaccination administration area.

- Ensure dedicated space is well-ventilated, well-lighted, clean, and provides ample space for resident and staff to practice safe social distancing (at least 6 feet) while waiting to receive their vaccine and for the 15-minute observation period after each immunization.
- Have one table and two chairs for vaccine administration area.
  - Non-fabric chairs are preferred as they will allow for proper disinfecting procedures.
  - Power source or extension cords positioned in a way to safely provide power for laptops or other electronic devices.
- Source control masks for vaccinators (may provide their own), residents and staff.
- Identify residents needing bedside vaccination versus centralized vaccination area.

Facility POC to discuss specific information required with your pharmacy POC such as:

- Insurance information for staff and residents.
- Primary care physician
- Documentation of consent or consent forms







Follow your facility or state requirements regarding a physician order for the vaccine. Current CDC guidance regarding orders states:

 No, the Public Readiness and Emergency Preparedness Act (PREP Act) authorizes Statelicensed pharmacists to order and administer, and State-licensed or registered pharmacy interns acting under the supervision of the qualified pharmacist to administer, COVID-19 vaccinations that have been authorized or licensed by the FDA. CDC FAQs about COVID-19 Vaccination in Long-Term Care Facilities

Create a tracking sheet for residents and staff who have:

- Accepted or declined the vaccine.
- Completed consent form.

Ensure staff assisting with vaccination administration are knowledgeable on how to identify and respond to a severe anaphylactic reaction to the vaccine. <u>CDC Preparing for the Potential</u> <u>Management of Anaphylaxis after COVID-19 Vaccination</u>

Be prepared to activate EMS and begin clinical management in the event a severe anaphylactic reaction occurs. Facility should provide pulse oximeter and BP devices (manual with stethoscope and/or automatic).

**Educate and Obtain Consent: Residents** 

\*Note: Consents for residents and staff should be completed at least one day prior to the vaccination administration scheduled in your facility.

Identify facility staff who will oversee obtaining resident consent:

• Name(s):

Obtain copies of:

- Pharmacy provider consent forms
- COVID-19 Vaccine fact/education sheets for education prior to consent
  - FDA EUA fact sheet for consent:
    - <u>Pfizer</u>
    - <u>Moderna</u>
    - Janssen/J&J
    - <u>CDC Answering Residents and Loved Ones Questions</u>

Prepare and begin to promote vaccine acceptance with residents and staff. Consider posting fliers, meeting one-on-one, setting up town hall or unit meetings, etc.

• CDC Long-Term Care Facility Toolkit: Preparing for COVID-19 Vaccination at Your Facility

Identify which residents can and cannot consent for themselves.

Residents who can consent:

- Meet with resident(s) to discuss the importance of the vaccine, explain the benefits versus risk, answer questions, and determine their interest.
- Share FDA EAU fact sheet on COVID-19 vaccine.
- Document and store consent (share consent with pharmacy provider per their protocol on the day of the vaccination administration)







Residents who are unable to consent themselves:

- Identify residents' healthcare proxies (e.g., Power-of-attorney (POA), Resident Representative (RR), or legal guardian) and their contact information.
- Contact residents' healthcare proxies to discuss need to obtain consent:
  - Share consent form and appropriate FDA EAU fact sheet.
  - Reinforce value of vaccine and answer questions.
  - Provide additional resources for other questions.
  - Follow up with RR/health care proxy as needed.
- Document and store copy of consent to share with pharmacy provider (per their protocol and for review on the day of vaccination administration).

#### Educate and Obtain Consent: Staff

Promote vaccine acceptance with staff (<u>AHCA/NCAL Get Vaccinated</u>; <u>AHRQ Take Your Best Shot!</u>).

Involve medical director or facility infection preventionist to answer questions.

Share consent form and FDA EAU fact sheet on COVID-19 vaccine.

Follow up with staff who have not completed consent.

## **Pre-Vaccination Administration Day (<10 days)**

Develop a schedule for resident and staff vaccinations.

- Decide which residents will be vaccinated in their room verses the vaccination administration site.
- · Set up schedule with room numbers and resident names for vaccination in their rooms
- Plan staffing to ensure enough staff are present on vaccination administration day to transport residents and help pharmacy staff.

Submit required information to pharmacy, such as:

- Number of residents needing the vaccine.
- Number of staff needing the vaccine.
- Resident and staff consent forms
- Resident specific information (e.g., demographics, allergies, diagnoses, insurance information).
  - Discuss specific information required with your pharmacy POC.

**DAY PRIOR TO VACCINATION ADMINISTRATION:** Confirm with pharmacy any last-minute issues and final counts of residents and staff expected for vaccine.

## **Day of Vaccination Administration:**

\*Note: Vaccine may be administered by pharmacist, health department personnel, National Guard or Medical Corp., state-appointed clinicians, or facility personnel.

Print roster of:

- Residents receiving vaccine and whether it is first or second dose:
  - In the vaccination administration area.
  - In their rooms with room numbers.
- Staff receiving the vaccine and whether it is first or second dose.







Facility coordinator to meet with pharmacy POC to:

- Share roster of residents and staff receiving the vaccine.
- Provide pertinent clinical information for residents and staff needed day of vaccination administration (e.g., temperature, any feeling sick or "not well", history of previous vaccine issue e.g., Guillain Barre, SIRRS, need to use specific arm s/p breast CA, etc.).
- Confirm order of vaccination administration: staff, residents who are mobile, resident's bedside in cool/green areas, and finally resident's bedside in warm/yellow areas.

Assign staff to each unit to transport residents.

Assign designated clinical staff (at least one licensed nurse) who are familiar with the residents to the vaccination administration area to assist pharmacy staff as needed and monitor residents or staff waiting for the vaccine or in the post vaccine observation area.

Assign a facility staff to complete documentation on residents:

- Collect information on vaccine administration from pharmacy clinical team.
- Document in electronic medical record (EMR). If capable, scan the card into the EMR and retain the physical card which should be given to the resident at discharge.

# **Post Vaccination Administration**

Monitor residents for adverse effects of the vaccine as required. Provide printed material if appropriate to both residents and staff. <u>CDC What to Expect after Getting a COVID-19 Vaccine</u>

After residents complete the required initial monitoring, continue to monitor for adverse reactions three times daily for 72 hours post vaccination.

Encourage newly vaccinated staff to monitor and report adverse side effects to the designated POC at the facility and encourage them to use the <u>V-safe</u> app for reporting

Prepare to manage staff vacancies that may occur if newly vaccinated staff are experiencing side effect.

<u>AHCA/NCAL Guidance on Staffing Consideration Post-Vaccination for COVID-19</u>

Remind those vaccinated of second dose requirement if applicable.

Update your facilities internal COVID-19 Vaccination Tracking document/spreadsheet. <u>HQIN</u> <u>COVID-19 Vaccination Tracking Tool</u>

Update federal or state required vaccination administration databases. <u>NHSN Weekly HCP &</u> <u>Resident COVID-19 Vaccination Reporting</u>

Prepare for your next clinic.

This material was prepared by the Health Quality Innovation Network, a Quality Innovation Network Quality Improvement Organization, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The content presented does not necessarily reflect CMS policy



