

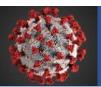
# **COVID-19 VACCINATION PLAN**

**IMPERIAL COUNTY** 

December 8, 2020

Imperial County Public Health Department

935 Broadway, El Centro CA 92243

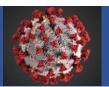


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### **COVID-19 Vaccine Implementation for CA Health Jurisdictions**





#### Introduction/Explanation

As is stated in the CDC COVID-19 Vaccination Program Interim Playbook for Jurisdiction Operations, immunization with a safe and effective COVID-19 vaccine is a critical component of the strategy to reduce COVID-19-related illnesses, hospitalizations, and deaths and to help restore societal functioning. The goal of the U.S. government is to have enough COVID-19 vaccine for all people in the United States who wish to be vaccinated. Early in the COVID-19 Vaccination Program, there may be a limited supply of COVID-19 vaccine, and vaccination efforts may focus on those critical to the response, providing direct care, and maintaining societal function, as well as those at highest risk for developing severe illness from COVID-19. California's COVID-19 Vaccination Plan, as well as a summary of CA's efforts to plan for COVID-19 vaccine, are both posted at <a href="https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-19/Vaccine.aspx">https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-19/Vaccine.aspx</a>.

This CDPH document is modeled after the CDC playbook and follows the recommendations for local health jurisdictions that have been presented in weekly webinars with Immunization Coordinators, Emergency Preparedness Planners, Local Health Officers and Health Department Executives. Slides from webinars and other important documents are posted at <a href="http://izcoordinators.org/covid-19-vaccination-planning/">http://izcoordinators.org/covid-19-vaccination-planning/</a> (Username: covidPlanningGroup and Password: covid2020!).

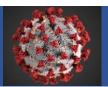
The intention of this document is to help prepare local health jurisdictions for the phased implementation of COVID-19 vaccine in their communities. Completion of this template is a requirement for the COVID-19 vaccine funding for your jurisdiction. We realize that there are still many unknowns about COVID-19 vaccine. Completion of this template, however, will help to ensure that the foundational planning components for your COVID-19 vaccine response are in place. This is a high-level planning tool that only requires concise responses. This completed template is **due to CDPH by:** 

5:00 pm December 1, 2020, Extension granted – December 8, 2020
Please email completed templates to <a href="mailto:CDPH.LHDCOVIDVAC@cdph.ca.gov">CDPH.LHDCOVIDVAC@cdph.ca.gov</a>

Box size roughly indicates how much we'd like to hear about your plan for the different sections. Boxes will expand if you need to add more text.

Thank you. We look forward to learning about your strategies and plans as we embark on this new and critical vaccine journey.





#### Section 1: COVID-19 Vaccination Preparedness Planning

A. Describe the multi-agency Task Force/Entity that has been put together in your jurisdiction to plan for COVID-19 vaccine implementation.

Imperial County's COVID-19 Vaccination Planning Group is made up of representatives from both hospitals (El Centro Regional Medical Center and Pioneers Memorial Healthcare District), the Federally Qualified Health Center (Clinicas de Salud del Pueblo, Inc.), Ft. Yuma Indian Health Services, Imperial County Department of Social Services, Imperial County Office of Education, Comité Cívico del Valle, Imperial Valley Business Recovery Task Force, Imperial Valley Joint Chambers of Commerce, Imperial County Medical Society, Imperial County Emergency Management Services Agency and the Imperial County Public Health Department. Additional stakeholders will join the group as needed.

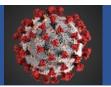
B. Revisiting institutional memory and after-action reports, what are the major lessons learned from H1N1 in your jurisdiction and how are they being considered for COVID-19 vaccine implementation?

Major lessons learned from H1N1 that need to be considered for COVID-19 vaccine implementation include, but are not limited to:

- Coordination and effective communication with traditional and nontraditional partners are essential;
- Support from clinical and non-clinical partners is needed during mass vaccination events;
- Emergency plans and policies need to be updated to be ready for use during actual emergencies;
- Readiness and use of existing volunteer groups is essential; and
- Participation of law enforcement in mass vaccination events is needed.
- C. What lessons have been learned thus far from influenza vaccine activities in your jurisdiction that can be applied to COVID-19 vaccine distribution and administration?

Several vaccination clinics have been held in Imperial County. Most recently (October and November 2020), 2 mass drive-thru weekend events where over 2,250 flu vaccines were administered in approximately 7 hours. Additionally, a farmworkers clinic was held in the early hours of the morning (1-5 am) reaching 120 individuals. Several flu clinics for seniors in outlying areas have been conducted this year. However, those clinics have not been as successful: 24 seniors were reached through 3 in-person clinics. Given that the Imperial County Public Health Department is not open for regular services, most of its state's flu allocation has been redistributed to local health care providers.



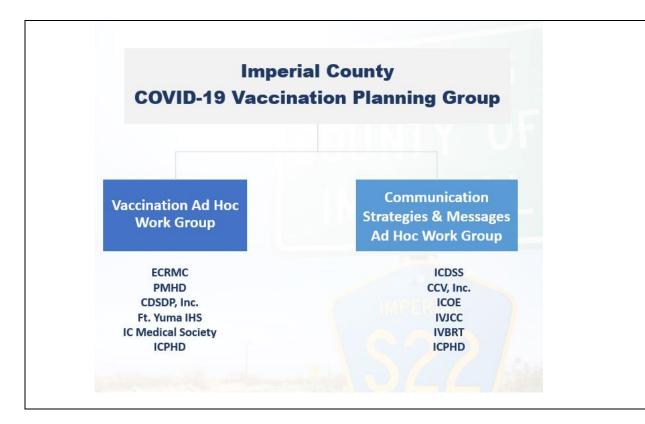


From the flu clinics held so far, the following has been learned and will be applied:

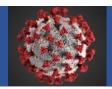
- Distribution: Some local providers eager to vaccinate
- Drive-thru mass vaccination clinic was, overall, a success and well-received by the community. Major lessons learned include: ~100 staff to run mass clinic, vaccinators high need, and partnership with clinical and non-clinical providers is a must.
- The screening component of individuals needs to be coordinated.
- Ensure the observation area is adequate and logistically strategic to allow for area to contract and expand as needed during the clinic event

#### Section 2: COVID-19 Organizational Structure and Partner Involvement

A. Please share your local organizational (org) chart that is guiding COVID-19 vaccine planning by pasting it into the space below or add it as an Appendix at the end of this document.



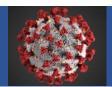




B. How are you engaging external partners in your planning process? Who are your primary external (outside of your local health department) planning partners?

During the earlier stages, key partners (hospitals, Federally Qualified Health Center, and Medical Society) received email updates. Once more was known about the COVID-19 vaccine, a small group was convened to discuss local capacity to receive, store and administer vaccine. Besides the partners mentioned above, Ft. Yuma Indian Health Services joined the conversation in November. Once more concrete information was known, a larger group was convened, and it includes representatives from the Imperial County Department of Social Services, Imperial County Office of Education, Comité Cívico del Valle, Imperial Valley Business Recovery Task Force, Imperial Valley Joint Chambers of Commerce, and Imperial County Emergency Management Services Agency. It is expected that external partners will: 1) be a source of input from the community on attitudes about the COVID-19 vaccination program; 2) know how the state's vaccine allocation system works & provide recommendations on how to ensure early vaccination of priority groups through communication strategies and addressing barriers to vaccination.; 3) Help understand community attitudes toward vaccination and develop strategies for encouraging people to get the COVID-19 vaccine; 4) Help explain vaccine program decisions, and provide a mechanism for sharing and distributing updates and information to the community; and will support mass vaccination clinics.





#### Section 3: Phased Approach to COVID-19 Vaccination

- A. Have you incorporated a phased roll out of COVID-19 vaccine into your overall COVID-19 Response Plan? ⊠ yes □no
- B. Have you established any point of dispensing (POD) agreements to potentially vaccinate Phase 1a populations? List entities with whom you have agreements and who they've agreed to vaccinate.

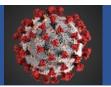
El Centro Regional Medical Center and Pioneers Memorial Hospital District are the only 2 acute care hospitals in Imperial County. Both hospitals have agreed to vaccinate their own Phase 1a staff, as well as emergency management service providers in need of a vaccine. Formal agreements are not yet in place. Additionally, through a recent local health care provider survey, 16 providers were identified as providers willing to collaborate with other providers to immunize each other's higher risk employees, as well as first responders. As far as points of distribution, the Imperial Valley Fairgrounds has been identified as a mass point of distribution. That is where the most current mass flu vaccination clinics have been held. Additionally, the Imperial County Office of Education is interested in supporting the mass vaccination efforts; additional points of distribution sites may be identified in the coming weeks.

#### Additional references include:

Graphic on page 11 of CDC COVID-19 Vaccination Program Interim Playbook and

A phased approach to Vaccine Allocation for COVID-19 from National Academies of Sciences Engineering Medicine





#### **Section 4: Critical Populations**

A. Describe your efforts to identify the health care workforce, critical infrastructure workforce and vulnerable populations in your jurisdiction including reviewing the data from CDPH.

Data from a recent local health care provider survey is being analyzed. Information from California Department of Public Health and Healthy Places Index is being used to identify vulnerable populations and areas of need. Additionally, a community survey is being deployed between December 7-16 to better understand the attitudes toward COVID-19 vaccination.

B. Describe your plan for communicating with acute care facilities about their readiness to vaccinate during Phase 1a. (Are they ready to hit the ground running?)

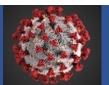
Imperial County has 2 acute care facilities. Ongoing conversations have taken place over the last several weeks. Formal discussions have included their ability to receive, store, and administer vaccines, as well as report into the CAIR2 system. Both hospitals have the capacity to vaccinate during Phase 1a and are willing to vaccinate outside emergency medical services personnel, if needed. Given that neither hospital will receive vaccine during the 1<sup>st</sup> allocation, the Public Health Department will redistribute the 1 box (975 doses) of vaccine that it will receive. As part of the redistribution, proper agreements and vaccination plans will need to be in place.

C. With an eye on equitable distribution, how do you plan on reaching other populations that will need vaccinations in subsequent phases?

The Public Health Department will work with the Local COVID-19 Vaccine Planning group to ensure that populations needing vaccination have access to it in subsequent phases. It is anticipated that there will be close coordination with schools and faith-based organizations, just like during H1N1, to set up clinics throughout the County to reach the general population. It is also expected that there will be a close partnership with those that serve the older adults and those with disabilities. This would include the Imperial County Department of Social Services, In-home Support Services and Adult Protective Services, the Area Agency on Aging, and ARC of Imperial Valley. Additionally, mass drive-thru vaccination events in key points of the community will need to be organized for greater reach, such as at the Imperial Valley Fairgrounds. If enough supply doesn't arrive until after May, then vaccination will probably need to occur in enclosed areas given that temperatures can reach over 120-degree Fahrenheit between May-September. Such venues may include, but are not limited to, school or church gyms and other air-conditioned venues.

Additional references include populations listed on page 14 of CDC COVID-19 Vaccination Program Interim Playbook





#### Section 5: COVID-19 Provider Recruitment and Enrollment

CDPH is identifying large health systems and other multi-county entities (MCEs) that will receive vaccine allocation directly from CDPH. Some MCE criteria are that the entity has facilities in three or more counties; is able to set policy for its facilities, can plan centrally and support implementation of a COVID vaccination program at all of its facilities in California; and that the entity can order, store and administer vaccine to its employees or arrange with an outside provider (other than the local health department) to do so. It is not necessary for local health departments (LHDs) to invite these entities to enroll as COVID vaccine providers. LHDs should review the list of MCEs for their jurisdiction and be familiar with the MCEs' vaccination plans.

A. What are you doing to identify non-MCE providers to invite to participate in Phase 1a? (e.g. acute care hospital providers not affiliated with an MCE, staff of long-term care facilities, ambulatory care settings providers).

There are no large health systems or MCEs in Imperial County that will receive vaccine allocation from CDPH.

Besides the 2 acute care hospitals, no other non-MCE providers were invited to participate in Phase 1a.

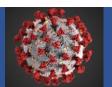
B. How will you continue to recruit new providers to register and vaccinate during subsequent phases when there is more vaccine?

Local providers willing and able to receive, store and administer vaccine have been identified through a local healthcare provider survey recently conducted. Additionally, the Imperial County Immunization Program Supervisor has close working relationships with the local vaccine providers and will be in close contact with them to ensure they enroll into the state's vaccine system.

C. Who will be reviewing your local provider enrollment data to ensure that pharmacies and providers are enrolled?

The Imperial County Public Health Department's Immunization Program Supervisor, Jovana Araujo, will be reviewing local provider enrollment data to ensure pharmacies and providers are enrolled.





#### **Section 6: Vaccine Administration Capacity**

A. Looking at your previous dispensing and vaccination clinic activities, what elements have resulted in greater throughput results?

Mass drive-thru vaccination clinics have resulted in greater throughput results. This year, during the 1<sup>st</sup> drive-thru vaccination clinic, over 1,300 individuals were immunized in a period of 3.75 hours. During the 2<sup>nd</sup> drive-thru clinic, over 900 individuals were immunization during a period of 3.25 hours. In prior years, over 2,000 people have been vaccinated during 4-hour drive-thru events. Additionally, during the 2<sup>nd</sup> drive-thru clinic, the flu clinic layout was reconfigured to allow for the expansion from 7 to 14 vaccination lanes, and that proved to be very successful.

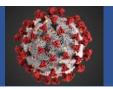
B. What mapping information do you have access to that will help your recruitment efforts and POD plans? (e.g. disease hot spots, vulnerable communities, testing sites, POD sites etc.)

A variety of tools will be used to help with recruitment efforts and POD plans. This includes data from Imperial County Public Health Department's Dashboard (zip code, age group, etc.), Healthy Places Index, testing sites, etc. Locally, the intent is to incorporate useful/successful elements from our previous plans and clinic sites during H1N1 efforts and clinics. Additionally, the local COVID-19 Vaccine Planning Group will help with the further identification of vulnerable communities.

C.	. How will data be entered into CAIR/SDIR/RIDE from your POD sites?		
	a.	☑ PrepMod	
	b.	☐ Mass Vax module	
	c.	□ Other -	

D. Please describe the staffing strategies you are planning for mass vaccination PODs. (e.g. mass vaccinator contract, Medical Reserve Corps, volunteers etc.) Also, in this section, please add any anticipated support you think you will need from the State for the different phases.





Similar strategies will be implemented as with the mass flu vaccination clinics for recruiting personnel for mass events. This includes seeking personnel support (vaccinators and general support) from Imperial County departments, both hospitals, the Federally Qualified Health Center (6 community clinic sites), home health, prisons, law enforcement, private health care providers, volunteer agencies and community volunteers. For local mass vaccination clinics, a minimum of 80-100 staff are needed per mass event.

Imperial County anticipates requesting additional support from CDPH for mass vaccinator contracts if available.

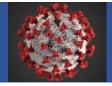
E. Describe your plan for identifying where PODs will be conducted in the community and for which populations.

Factors, such as disease prevalence/impact in specific geographic regions will need to be considered. Operationally, locations will be considered that can accommodate: 1) drive-thru clinics; 2) curbside clinics; 3) fixed facilities with adequate space for social distancing and other mitigation measures. Additionally, sites that have been previously used for previous large-scale vaccination events such as IV Fairgrounds and Brawley Lyons Club will be assessed. New sites in other more remote, less central locations such as schools, churches and community centers not currently in use will be looked at. Finally, alternate sites that serve homeless (Salvation Army center), churches, and possibly in combination with other services such as food and clothing distribution, will be explored.

F. How will you assess provider throughput for LHDs PODs and for the broader provider community? (Consider your current experience running socially distanced flu clinics to help answer this.)

As previously mentioned, over 1,300 individuals were vaccinated during a recent drivethru vaccination clinic. That equated to approximately 350 people vaccinated per hour. In prior years and during drive-thru vaccination clinics, over 500 people have been vaccinated per hour. Drive-thru clinics have proven to be an effective way to mass dispense vaccine in a socially distanced way. Local health centers and health-care providers have continued to provide services including influenza vaccine to the community in a socially distanced manner. The plan is to build upon their experiences to provide standards and ensure provider throughout for COVID-19 vaccine.





#### Section 7: COVID-19 Vaccine Allocation, Ordering, Distribution and Inventory Management

A. Who will be responsible for submitting allocations to State for conversion to orders? (title/role of individual(s))

The Imperial County Public Health Department's Immunization Program Supervisor, Jovana Araujo, will be responsible for submitting allocations to the State for conversion to orders.

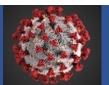
B. How will you use storage capacity information in the registration system to allocate doses?

Storage capacity information in CalVax will be used to identify the vaccine formulations that can be dispensed to each provider based on their storage and handling capabilities.

C. Describe your process to follow up with providers who may not be meeting ordering, storage, inventory or IIS requirements.

The Imperial County Public Health Department will develop a tracking system to follow-up with providers. This system will be maintained and managed by the County's Immunization Program Supervisor. Given that Imperial County has a small amount of health care providers who are able to vaccinate, it is not a cumbersome process to maintain a tracking system.





#### **Section 8: COVID-19 Vaccine Storage and Handling**

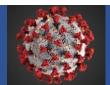
A. Describe your plan to assess cold storage capacity for LHDs and providers (including ultra-cold storage capacity)

A local health care provider survey was deployed late November. Questions related to cold storage capacity were included in the survey. The following is the status in Imperial County as of December 2<sup>nd</sup>:

- 5 local providers, besides the Public Health Department, stated that they had an ultra-low temperature unit (-60 to -80 degrees Celsius)
- 14 local providers, besides the Public Health Department, have frozen vaccine storage unit (-15 to -25 degrees Celsius)
- 13 local providers, besides the Public Health Department, have refrigerated vaccine storage (2-8 degrees Celsius)
- B. Describe your plan to ensure that you have access to dry ice if needed.

Dry ice resources in pelletized form are scarce in Imperial County. At this time, 2-3 potential providers, including Airgas, have been identified. The Public Health Department, as well as hospitals and the FQHC, are working with at least one of the providers to secure a contract. The challenges encountered though, are that with Airgas, the minimum order per week is 500 lbs. Other alternatives are currently being explored.





#### Section 9: COVID-19 Vaccine Administration Documentation and Reporting

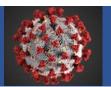
A. How will you handle questions from local providers about vaccine administration reporting and have you identified the staff responsible?

Staff responsible for handling questions from local providers will be the Imperial County Public Health Department's Immunization Program Supervisor. Providers will have the Immunization Program Supervisor's contact information available. Additionally, providers will be referred to available resources from the State and will also be referred to the Public Health Department's web page were additional information and resources will be made available.

B. On a high level, what kind of data analysis are you planning to do regarding COVID-19 vaccine administration for your jurisdiction? For reference, see pages 45and 46 of California's COVID-19 Vaccination Plan.

De-identified data will be used to identify and monitor facilities/providers of vaccine and location where vaccine is being administered; the number of doses administered to ensure completion of vaccine series; and number of doses administered during events such as mass vaccination clinics. Data would also be available to review and monitor vaccination by age or age group, gender, race/ethnicity, and co-morbidity status (if available) to determine if targeted populations are being reached, as well as vaccination refusal.





#### **Section 10: Vaccination Second Dose Reminders**

A. How will you inform vaccines at your PODs of second doses of COVID-19 vaccine and remind them when to come back?

It is expected that the CAIR2 reminder system will be utilized. Additionally, Imperial County is exploring the possibility of using emails or texts as a reminder system.

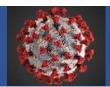
B. How will ensure that patients coming for their second doses receive the appropriate product?

The CAIR2 system will be used to verify that individuals have received a COVID-19 vaccine and what type of vaccine it was. As an added measure, individuals will be asked to bring in their vaccination record, if available. CAIR2 provides a line list of names and email addresses that could be used to send reminders to individuals who need a second dose. At local health care provider offices, it is expected that information about the type of COVID-19 vaccine administered will also be on the patient's chart.

C. How will you communicate with/monitor other providers about second doses for their patients?

The Imperial County Immunization Program Supervisor will have constant communication with vaccine providers about second dose reminders for patients. Alerts and reminders can be sent via email and text messages to health-care providers through the department's email distribution lists and CAHAN.



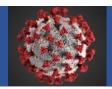


#### Section 11: COVID-19 Vaccine Requirements for IISs or Other External Systems

A. What are your strategies for directing providers to the CDPH Provider Enrollment and Management page/system for all phases?

Imperial County does not have a large pool of vaccine providers. With that said, communicating with local providers via email and telephone are effective. It is anticipated that providers will be made aware of the State's provider enrollment and management page via email, phone and during regular meetings. A tracking mechanism will be in place to keep track of providers that have been reached out to.





#### **Section 12: COVID-19 Vaccine Program Communication**

- A. On a high level, what is your COVID-19 vaccine communication plan? Please consider the following:
  - a. Communicating with external providers
  - b. Communicating with transparency to the general public
  - c. Using multiple communication channels to ensure information is accessible to all populations
  - d. Ensuring updated information on your website
  - e. Establishing methods to hear (or learn about) and respond to public concerns and address potential vaccine hesitancy

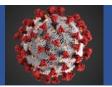
Messages will align with messaging from the Centers for Disease Control and Prevention, as well as the California Department of Public Health. Additionally, the Imperial County COVID-19 Vaccine Planning (Planning) Group was convened, and part of the tasks of this group are to:

- Be a source of input from the community on attitudes about the COVID-19 vaccination program;
- Know how the state's vaccine allocation system works & provide recommendations
  on how to ensure early vaccination of priority groups through communication
  strategies and addressing barriers to vaccination;
- Help understand community attitudes toward vaccination and develop strategies for encouraging people to get the COVID-19 vaccine;
- Help explain vaccine program decision to the community; and
- Support mass vaccination clinics.

Representatives from the following agencies are part of these meetings: El Centro Regional Medical Center; Pioneers Memorial Hospital District; Clinicas de Salud del Pueblo, Inc.; Ft. Yuma Indian Health Services; Imperial County Medical Society; Imperial County Public Health Department (Emergency Management Services, Immunization Program, etc.). On December 7<sup>th</sup>, the following member agencies joined the group: Imperial County Department of Social Services; Comité Cívico del Valle, Inc.; Imperial County Office of Education; Imperial Valley (IV) Joint Chambers of Commerce; & IV Business Recovery Taskforce. Additional members will be added as more is known or as the need arises.

Communication avenues include: ICPHD website/ COVID-19 toolkit; ICPHD social media platforms; partner agencies; Coalitions; earned media; paid media (billboards, radio spots, television commercials); Exploring use of nontraditional TV services including online/app based services Hulu, Plex, YouTube etc.). A bi-weekly virtual community forum is established





and information about the COVID-19 vaccine has been and will be continued to shared. What will be explored are opportunities to have bi-weekly segments with local television and/or radio stations to provide updates via those mechanisms. Messaging will be shared using a variety of media options including videos, graphics and audio.

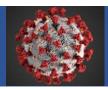
Some of the strategies that are currently employed in COIVD-19 efforts, which will be also applied as appropriate, include but are not limited to the following:

- Ensure graphics reflect diversity of the community.
- Focus on health literacy to ensure messaging is easy to understand.
- Inclusion of materials for non-English speakers and hearing impaired.
- Assure that the access and functional needs populations have access to risk information by having ASL and Spanish-language interpretation services are available for online community meetings (ZOOM) and at all news conferences.
- Targeted/community messaging based on State's health equity data.
- Targeted messaging to locally identified minority and marginalized communities including Native American, African Americans, low income, LGBT, etc.
- Messaging in a variety of ways to ensure equitable access to information (i.e. appropriate mix of digital, print, radio, tv, community spokespersons, etc.)
- COVID-19 vaccine information will be available on the Public Health Department's website.
- Use biweekly community forums to share information with partner agencies and the public about vaccine distribution and vaccine safety.
- Host weekly news conferences via zoom with local media to share updates on vaccine efforts. Post news conferences on ICPHD Website and on social media.
- B. Describe how you will identify and work with trusted messengers to communicate with vulnerable and diverse communities.

The Imperial County COVID-19 Vaccine Planning Group will play a key role in further identifying and working with trusted messengers to communicate with the vulnerable and diverse communities. Additional discussion needs to take place with the local Planning Group, but it is anticipated that champions/trusted messengers will include, but are not limited to the following:

- Local pediatricians and physicians
- Community leaders advocates, elected officials, school officials, youth advocates, etc.
- County, hospital, and community clinic CEOs

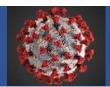




- Chairman Imperial County Board of Supervisors
- ICPHD Department Director and Health Officer
- EMS Medical Director
- C. Describe how you will communicate with employers, community-based organizations, faith-based organizations, and other stakeholders.

Different communication mechanisms exist to communicate with employers, community-based organizations, faith-based organizations, and other stakeholders. This includes via mass email distribution, ongoing virtual meetings, and community forums to name a few. Additionally, the Imperial County COVID-19 Vaccination Planning Group has members of the various sectors that may help reach to the communities and agencies they serve. The Public Health Department will also communicate with the healthcare and emergency response sectors through the CAHAN alert system, as well as mass email distribution.





#### **Section 13: Regulatory Considerations for COVID-19 Vaccination**

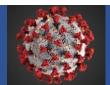
A. Have you designated where on your local website you will post the Emergency Use Authorization (EUA) Fact Sheets for COVID-19 vaccine? Please include the links to those pages.

It is anticipated that EUA Fact Sheets for COVID-19 vaccine will be posted on: <a href="http://www.icphd.org/health-information-and-resources/healthy-facts/covid-19/">http://www.icphd.org/health-information-and-resources/healthy-facts/covid-19/</a>, under the tab for health care professionals.

B. How will you communicate about EUA fact sheets to other providers and vaccinators in your jurisdiction? How will you ensure that all health department clinics use the proper EUA fact sheets?

Providers will be notified via email and reminded during meetings that EUA fact sheets are available at the Public Health Department's webpage mentioned above. It is anticipated that reminders about the availability of resources will be sent to the local Medical Society so that all local providers are kept informed. Additionally, the Public Health Department, has mass email distribution list for all local health care providers; reminders will be sent using that mechanism. Finally, the CAHAN system is a mechanism that can be tapped into to send important notifications to local health care providers.



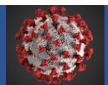


#### Section 14: COVID-19 Vaccine Safety Monitoring

A. How will you communicate with providers in your jurisdiction about reporting of potential adverse events (via <u>VAERS</u>) and reporting of potential vaccine errors (via <u>VERP</u>)? Have you identified where on your local website you will post links to VAERS and VERP? If yes, please provide links to those pages below.

Providers will be notified via email and reminded during meetings that EUA fact sheets are available at the Public Health Department's webpage mentioned above. It is anticipated that reminders about the availability of resources will be sent to the local Medical Society so that all local providers are kept informed. Additionally, the Public Health Department, has mass email distribution list for all local health care providers; reminders will be sent using that mechanism. Finally, the CAHAN system is a mechanism that can be tapped into to send important notifications to local health care providers. It is anticipated that information about VAERS and VERP will be posted here: <a href="http://www.icphd.org/health-information-and-resources/healthy-facts/covid-19/">http://www.icphd.org/health-information-and-resources/healthy-facts/covid-19/</a>, under the tab for health care professionals.





#### **Section 15: COVID-19 Vaccination Program Monitoring**

A. What key metrics will you monitor regarding your overall COVID-19 vaccine plan in your jurisdiction? For reference see page 71 of California COVID-19 Vaccination Plan

The Public Health Department will monitor vaccination program metrics, including provider enrollment, doses distributed, doses administered, and vaccination coverage, to ensure compliance with the COVID-19 Vaccination Plan. The Public Health Department will also monitor the number of individuals receiving vaccine by occupation setting, in particular those who are considered essential workers such as health-care providers, first responders, teachers, child-care providers, among others, as well as the number of individuals with high-risk conditions who receive the vaccine and the number who refuse vaccine. Vaccination coverage among targeted populations will be monitored.

B. How will you monitor the above metrics?

The immunization program will monitor vaccination provider enrollment, doses distributed, 1<sup>st</sup> and 2<sup>nd</sup> dose administered, vaccination coverage, adverse events, and unused or wasted doses, among other key metrics. The Public Health Department will make certain metrics such as number of vaccine doses administered, and other information available on the department website.

