Experiences, Lessons Learned, Recommendations

• Drive-through is a safe, effective and efficient process for immunization that can be scaled as needed
• Ideal during a time when social distancing and ‘isolation’ is important
• Staging the process so it is easy to develop job action sheets and train for specific responsibilities is key
• Student nurses are excellent untapped resources with existing baseline knowledge important in the process
• One nurse can reliably administer 60 IM injections per hour if the surrounding process supports other activities
• Up front community education helps speed the process
• Signage, recorded loops played on radio/TV, electronic communications can augment personnel

Vaccination in the Time of COVID-19

• Novel virus
• Transmitted via respiratory route
• Asymptomatic carrier state
• Pre-symptomatic state
• Need for social distancing
• Isolation or quarantine
• Remove barriers to vaccination access
• Potential interruption with other vaccination locations such as pharmacies, retail clinics, and employer sites

Location Selection

• Anticipated numbers of participants
• Flow of traffic in the vaccination area
• Flow of traffic in the adjacent area
• Space for vaccinations and others
• Access to electricity and water
• Access to restrooms and break area
• Adequate lighting
• Safety and security
• Away from sewer grates
• Away from animals (e.g., ponds)
Drive-Through vaccination provides an opportunity to address missed or delayed vaccines for all populations

Defining Clinic Flow will Determine Staffing

- Station 1: Greeter, Direct to Queue
- Station 2: Provides VIS Statement, number of patients to be vaccinated, provides forms
- Station 3: Financial component: payment, insurance, pre-visit receipt
- Station 4: Reviews form, 2 identifiers, Screening (age, allergies, contraindications /cautions), administration, vaccine, documentation
- Station 5: Provides patient vaccine record / further instructions
- Station 6: Waiting area post-vaccination
* Detour if medical attention or extra support needed

Competency-Based Training for Vaccine Preparation and Administration

Goal is to prevent:
- unsafe environments for all involved
- vaccine administration errors
- vaccine handling errors that may impact the vaccine itself

Safety
- Checks equipment and supplies for expiration dates, correct needle size.
- Ensures appropriate vaccine administered based on screening for contraindications / precautions: age, or medical conditions, allergies, etc.
- Maintains that appropriate VIS statements are provided prior to vaccination as required by Federal Law.
- May include other concerns such as:
  - "Two nurses working in each lane. This allows each nurse to safely handle one side of the vehicle, so no nurse has to walk in front of the car."
  - Extreme weather can be a concern including wind (if tents are utilized during blustery Fall weather), extreme heat or cold.

Runner / Staff

Needs will be dependent upon how the clinic is structured
- Answers questions / Traffic control
- Distributes consent forms / Provides VIS Statements
- Manages paperwork following vaccine / provides patient with record
- Completes financial transaction if applicable / keeping drivers on-site 15 minutes
- Assist with supplies / vaccine
Infection Control
• Hand hygiene
• Aseptic technique separating clean from dirty
• Single use of needles and syringes
• Proper handling, access and use of multidose vials (MDV)
• PPE as indicated
• Environmental infection control
• Monitoring of error, exposure, near-miss situations

PPE for a Drive-Through Event

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Typical Influenza Season</th>
<th>Influenza Season/During Time of COVID-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hand hygiene</td>
<td>Always</td>
<td>Always</td>
</tr>
<tr>
<td>N95 respirator</td>
<td>Not unless specific patient characteristics warrant (e.g., active MTB)</td>
<td>Not unless known positive COVID-19 recipients or if public health indication*</td>
</tr>
<tr>
<td>Face mask</td>
<td>Not historically, but probably a good idea</td>
<td>Yes (or respirator)</td>
</tr>
<tr>
<td>Face/eye protection</td>
<td>Not historically, but probably a good idea</td>
<td>Yes</td>
</tr>
<tr>
<td>Gown</td>
<td>No</td>
<td>No, but have available</td>
</tr>
<tr>
<td>Gloves</td>
<td>No</td>
<td>Have available and have meticulous attention to hand hygiene</td>
</tr>
</tbody>
</table>

Considerations At the Car
• Windows open, ventilation fan off, and car in park
• Talk with patient throughout
• Touch may be comforting
• Stay out of direct face of the one you are vaccinating
• A crying child is potentially an aerosol-generating child
• Patients often laugh and talk, sometimes nervously, during a drive-through so ask them to look forward
• Be prepared for sudden movement of adults and children
• A tight sleeve acts like a tourniquet
• Seatbelts should be worn by everyone (especially children)
• A tight sleeve acts like a tourniquet
• Immediate activation of safety device
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Infection Control for Supplies and Vaccine Preparation Area
• Separate clean from dirty
• Organize workflow so movement is from clean to dirty
• Hand hygiene
• Gather equipment
• Select vaccine
• Disinfect MDV septum
• Apply needle to syringe and draw vaccine into the syringe
• Add needle to prefilled syringe
• Gather FluMist but do not remove cap until ready to administer
• Gather alcohol wipes, 2x2, tissue, bandaid

Supply Checklist
• Emergency Kit and Protocol
• Immunization Protocol for the vaccine(s) given
• Vaccine Information Statements
• Screening Forms
• Extra Consent Forms / Perms / Clipboards
• Patient Immunization Record
• Offsite Temperature Logs
• one per qualified container or pack-out
• Tissue Boxes
• Disinfecting Wipes
• Paper Table Covers
• Hand Sanitizer
• Minimum 60% ethyl not methyl alcohol
• Sharps Container
• Medical Waste Bags / Trash Bags
• PPE as indicated
• Non-Latex Gloves, Mask, Face Shield, gowns?
• Fast Acting Carbohydrate
• regular soda—not diet, glucose tablets, Smarties, Cake Mate gel tube
• Treats / Stickers / Dog Treats!!

Equipment
• Plug-In Vaccine Refrigerator or Freezer (best option)
• Qualified Container and Packout
• NO PERSONAL COOLERS!
• An information sheet produced by the CDC that explains both the benefits and risks of a vaccine to vaccine recipients.
• Federal law requires that healthcare staff provide a VIS to a patient, parent, or legal representative before each dose of certain vaccines.
• Available in more than 35 different languages and are updated periodically by the CDC and can be printed or downloaded from the website.
• Federal law allows providers up to 6 months to initiate using the most recent version of a vaccine’s VIS statement.
• They should be supplemented with visual or oral explanations as appropriate.
• Federal law also requires documentation in the patient’s chart: 1) the current date of the VIS provided to the patient, AND 2) the date on which it was provided.

[Link to VIS page on CDC website]

VAERS Reportable Events – Seasonal Influenza - Inactivated & Live Attenuated Influenza Vaccines

• Anaphylaxis or anaphylactic shock
  • 7 days
• Shoulder Pain & Redness - Vaccine Administration
  • 7 days
• VHSV
  • 7 days
• Guillain-Barré Syndrome
  • 42 days
• Any acute complication or sequela (including death) of above events
Planning guide for large community events
Built around H1N1 immunization and much is relevant
Focuses on public health systems and processes

Scaling for a Small Community

Local Resources
- Schools of Nursing
- Kentucky Nurses Association Chapters (all states have chapters)
- Kentucky Association of Nurse Practitioners and Nurse Midwives (all states have associations or group meetings of Nurse Practitioners)
- Public health department
- Medical Reserve Corps
- School nurse
- Parish/Church nurses
- Local hospital volunteer department may have retired nurses
- Local pharmacy may help identify retired pharmacists or physician assistants

Finances
Costs
- Personnel (# personnel x hourly rate)
- Vaccine ($cost per dose)
- Supplies (# needles, syringes, alcohol swab, bandaid [$1.25 per dose])
- Venue: Cost of site per day including set up and break down
- Security: (# personnel x hourly rate)
- Marketing (media, frequency, additional talent, pre-recorded messages)
Payment
- Insurance
- Medicaid
- Medicare
- Spending accounts (e.g., FSA)
- Out of pocket (cash, credit card)