2024-2025 Immunization PHEP Deliverables

Montana Immunization Program

May 7th and May 10th, 2024



Our Team



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Immunization Deliverables

Due **Every** Quarter:

IZ1: Off-Site Vaccination Clinics

• IZ2: Vaccination Partners and Communication



IZ1: Off-Site Vaccination Clinics

Report the total number of off-site vaccination clinics and the total number of vaccine doses administered at the off-site clinics.

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IZ1: Purpose

Enhance and strengthen the capabilities of a local health jurisdiction to respond to a
public health emergency event requiring vaccine transport, handling, and
administration.

- Increases efficiency and decreases vaccine administration errors and vaccine wastages during a public health emergency.
- Off-site vaccination clinics may be for the administration of one or more vaccination groups (i.e., influenza and COVID-19, back-to-school vaccinations, etc.).



IZ1: Fulfilling This Deliverable

To fulfill this deliverable:

- 1. Use the IZ1 worksheet to track off-site clinics and doses administered.
- 2. Total the number of off-site vaccination clinics conducted every quarter.
- 3. Total the number of off-site vaccine doses administered every quarter.
- 4. Report the total number of off-site clinics and doses administered to complete the Progress Report every quarter.



IZ2: Vaccination Partners & Communication

Report vaccination planning with your jurisdiction's response partner agencies or groups and types of media outreach used to advertise vaccine-preventable disease prevention messaging and your vaccination clinics.



IZ2: Purpose

 Advanced planning, including identifying communication strategies, are important components to emergency management.

 Planned collaborations among local partners strengthen preparedness partnerships.

 Using effective communication methods during a public health emergency can streamline response activities.



IZ2: Fulfilling This Deliverable

To fulfill this deliverable:

1. Use the IZ2 worksheet to track vaccine partner meetings and prevention messaging and clinic advertising every quarter.

2. Report the information to the Progress Report every quarter.



CM1: Immunization Components

Completed Any Quarter

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Checklist of Best Practices for Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations

- Checklists provide systematic ways to ensure protocols and best practices are followed to ensure the safety of individuals.
- We ask that you review and complete the checklist throughout the process of planning, exercising, and reviewing your off-site clinic.

PHEP Resources (mt.gov)



BEFORE THE CLINIC (Please complete each item before the clinic starts.)

VACCINE SHIPMENT			
YES	NO	N.A.	
			Vaccine was shipped directly to the facility/clinic site, where adequate storage is available. (Direct shipment is preferred for cold chain integrity.)
VACCINE TRANSPORT (if it was not possible to ship vaccines directly to the facility/clinic site)			
YES	NO	N.A.	
	STOP		Vaccines were transported using a portable vaccine refrigerator or qualified container and pack-out designed to transport vaccines within the temperature range recommended by the manufacturers (i.e., between 2-8° Celsius or 36-46° Fahrenheit for ALL refrigerated vaccines). Coolers available at general merchandise stores or coolers used to transport food are NOT ACCEPTABLE. See CDC's Vaccine Storage and Handling Toolkit for information on qualified containers and pack-outs: www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf .
	STOP		The person transporting the vaccines confirmed that manufacturer instructions for packing configuration and proper conditioning of coolants were followed. (Your qualified container and pack-out should include packing instructions. If not, contact the company for instructions on proper packing procedures.)
			The person transporting the vaccines confirmed that all vaccines were transported in the passenger compartment of the vehicle (NOT in the vehicle trunk).
	STOP		A digital data logger with a buffered probe and a current and valid Certificate of Calibration Testing was placed directly with the vaccines and used to monitor vaccine temperature during transport.
			The amount of vaccine transported was limited to the amount needed for the workday.
VACCINE STORAGE AND HANDLING (upon arrival at facility/clinic)			
YES	NO	N.A.	
	STOP		If vaccines were shipped, the shipment arrived within the appropriate time frame (according to manufacturer or distributor guidelines) and in good condition.
	STOP		If the vaccine shipment contained a cold chain monitor (CCM), it was checked upon arrival at the facility/clinic, and there was no indication of a temperature excursion during transit. CCMs are stored in a separate compartment of the shipping container (a CCM may not be included when vaccines are shipped directly from the manufacturer). Note: CCMs are for one-time use and should be thrown away after being checked.
	STOP		Upon arrival at the facility/clinic (either by shipment or transport), vaccines were immediately unpacked and placed in proper storage equipment (i.e., a portable vaccine refrigerator or qualified container and pack-out specifically designed and tested to maintain the manufacturer-recommended temperature range). Follow the guidance for unpacking and storing vaccines specified in CDC's Vaccine Storage and Handling Toolkit: www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf .

Patient Screening and Tracking

- Patient screening and tracking during the clinic ensures an accurate accounting for vaccine distribution. In the event of a pandemic outbreak, jurisdictions may be asked to provide information on the vaccination tier groups who received the allocated vaccine.
- There must be a minimum of 3 screening group questions, and they may not all be age-defined.
- Review and decide how to incorporate your chosen screening questionnaire into the patient intake process during one off-site vaccination clinic.

PHEP Resources (mt.gov)



Example: Age-Related/Risk

Indicate if you fit into one or more of the groups below: (check all that apply)

- □ Pregnant woman
- Infant or toddler 6-35 months old
- Household contact of infant <6 months old</p>
- Person aged 3-64 years old who is at higher risk for influenza-related complications (for the vaccine-preventable dieses(s))
- Person aged 3-64 years old not at higher risk for influenza-related complications (for the vaccine-preventable disease(s))
- □ Adults 65+ years old



Additional Examples:

Examples include but are not limited to:

- □ Person experiencing homelessness
- Person reporting history of injection drug use
- Person currently in a correctional or transitional setting
- □ Person is a refugee



CM1: Fulfilling IZ Portion of this Deliverable

To fulfill this deliverable:

1. Upload completed checklist.

2. Submit document showing the screening questions you chose and the number of people that fell into each of those categories.



Thank you!

