Columbia/Boone County Department of Public Health and Human Services

H1N1 Mass Vaccination Plan

August 21, 2009

Introduction:

Novel H1N1 is a new virus causing illness in humans. The virus was identified in the United States in April, 2009 and continues to spread throughout the United States and around the world. In June, 2009, the World Health Organization declared a Phase 6 pandemic. CDC estimates that more than one million cases of H1N1 have occurred in the United States. Thus far, the virus has been relatively mild. It is unknown whether future waves of influenza will be of increased severity.

Production for a novel H1N1 vaccine is underway and is being manufactured and distributed under government control. Local, state, and federal public health agencies are working closely to assure the timely distribution of vaccine when it becomes available.

The Columbia/Boone County Department of Public Health and Human Services (CBCDPHHS) has developed comprehensive plans for Mass Prophylaxis and Pandemic Influenza. The H1N1 Mass Vaccination Plan augments existing plans for Mass Prophylaxis and Pandemic Influenza Vaccine Management in Columbia/Boone County, taking in to account the known expectations associated with the distribution and administration of Novel H1N1 vaccine. New guidance is being provided regularly by the Missouri Department of Health and Senior Services (DHSS) as federal requirements become known. This plan will be updated to reflect changes.

Vaccine Distribution:

CBCDPHHS will use a hybrid model to distribute H1N1 vaccine to the community. CBCDPHHS will receive vaccine for public clinics and further distribution, as needed, to local providers and closed POD sites. CBCDPHHS will also enroll local providers as vaccine receiving sites, using the centralized distribution system, to increase vaccination coverage in the community.

1. Vaccine Receiving Sites: CBCDPHHS will designate local facilities that will serve as vaccine receiving sites.

- Vaccine receiving sites will have to complete a provider agreement form to be developed by CDC and provided to CBCDPHHS by the DHSS. The provider agreement will outline all requirements that must be met to receive vaccine, including cold chain storage, data reporting requirements, and adherence to established vaccine prioritization groups. The provider agreements will be co-signed by the CBCDPHHS. Signed forms will be sent to DHSS who will be responsible for entering the receiving site into the H1N1 vaccine ordering system.

- CBCDPHHS will provide DHSS with the allocation amounts to be distributed to all vaccine receiving sites, and will coordinate with the sites to monitor vaccine utilization and assure timely re-supply of vaccine
- CBCDPHHS will assure that vaccine receiving sites adhere to all requirements and will provide training to providers using the Vaccine Adverse Events Reporting System.
- Contact information for the direct ship site will be sent to DHSS as requested.
- The designated LPHA point of contact is Mary Martin, with Trina Teacutter and Stephanie Browning as the alternate contacts.

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2. LPHA Distribution: CBCDPHHS recognizes that some providers may wish to receive vaccine but may be unable to accommodate the minimum shipment requirements (100 doses) required for vaccine receiving sites. Additionally, CBCDPHHS has previously identified 27 closed points of dispensing (PODs) that have plans in place for vaccine distribution. Closed PODs include major area employers with Employee/Occupational Health programs capable of vaccine administration. CBCDPHHS will distribute vaccine to all partners that are willing to abide by the established guidelines and administer vaccine according to the prioritization tiers for vaccination.

- Providers receiving vaccine from CBCDPHHS will sign a Memorandum of Understanding or Provider Agreement to assure that providers agree to all terms and conditions of proper H1N1 storage, vaccination, and reporting requirements.
- All vaccine received by CBCDPHHS will be managed using an excel spreadsheet (or other format supplied by DHSS/CDC) that includes lot numbers, amount distributed, verification of cold chain storage requirements, and other information required by DHSS/CDC. CBCDPHHS will provide data on LPHA distributed vaccine as requested by DHSS.
- Vaccine held at CBCDPHHS will be held within a secure facility with controlled access during business hours that is alarmed after business hours.
- Vaccine will be transported to LPHA Distribution sites by public health personnel or trained volunteers to assure cold chain storage. Should a provider or Closed POD elect to transport their own vaccine, CBCDPHHS will determine and verify

pick up times, vaccine transport requirements that must be met prior to release of vaccine.

- Vaccine stored at CBCDPHHS will meet all storage requirements outlined by DHSS and CDC. CBCDPHHS has 3 alarmed vaccine refrigerators kept in locked rooms. All refrigerators are alarmed on a 24 hour basis for temperature control and public health nursing staff records temperatures on a daily basis. The CBCDPHHS facility is served by a back up generator that is tested weekly and provides back-up power to the entire facility. The Duty Officer receives notification of deviation from the desired temperature ranges on vaccine refrigerators after hours and has defined procedures to follow should a vaccine storage issue arises that would impact cold chain storage.
- In May 2009 CBCDPHHS obtained a pharmacy distribution license.
- CBCDPHHS has agreements in place with local pharmacies for the distribution of antiviral medications. If local pharmacies elect to provide vaccine according to established guidelines, existing agreements will be amended to include Novel H1N1 vaccine.

3. LPHA Administration of Vaccine: Public Clinics:

Vaccine that is not distributed to vaccine receiving sites or private providers by CBCDPHHS will be administered to the public through vaccination clinics.

Command and Control Structure:

CBCDPHHS practices an ICS organizational structure each year during seasonal influenza clinics. Each public vaccination clinic will have an Incident Commander and other command positions as needed. Job Action Sheets have been developed and tested for each position during a vaccination clinic and include safety, parking / traffic flow, griage, forms/registration, dispensing, vaccinating, check out, and public information.

In addition to Command and Control during a public vaccination clinic, CBCDPHHS activates a Health Command structure when emergency planning and/or response activities demand extra staff and time. This includes assigning the following roles: Public Information Staff, Liaison Officer, Safety Officer, Planning Section Chief, Logistics Section Chief, and Operations Section Chief.

Organization of Event

- Facility selection and location: Decisions on facility selection and location will be based on anticipated demand for vaccination through public clinics. CBCDPHHS may utilize existing agreements with POD sites previously established for deployment of the Strategic National Stockpile. Current POD agreements include city and county schools as well as two local churches. The Mass Prophylaxis plan contains site schematics, security assessments, traffic flow, and vaccine clinic layouts for each POD and the CBCDPHHS. If necessary those POD agreements will be activated. Public vaccination clinics may be conducted at CBCDPHHS, which has been used successfully each year for large mass vaccination clinics. CBCDPHHS may also coordinate with local schools to conduct school

vaccination clinics. Additional sites that may be selected will be assessed to assure that the facility set-up will accommodate anticipated needs. Final decisions regarding the location of public clinics will be determined pending additional information on vaccine availability and when overall distribution through private providers is known.

- Support Functions: Public Clinics are supported by CBCDPHHS staff and MRC volunteers. If necessary additional volunteers will be requested by the City of Columbia Volunteer Coordinator.
- Flow Plans: Each designated POD site that has a signed agreement has a schematic for POD flow. These are included in the CBCDPHHS Mass Prophylaxis Plan.
- Access hours: Clinic access hours will be determined based on anticipated public demand for vaccine and vaccine supply availability.
- Back-up systems: Public Clinics conducted at the CBCDPHHS will have full back-up power provided by a generator.
- Vaccine Storage: All public vaccinations clinic locations will have appropriate cold chain storage and will be monitored throughout the public clinic by trained personnel.
- Supplies and equipment: CBCDPPHS has purchased the necessary equipment to set-up four simultaneous public vaccination clinics. POD Go-Kits are located at CBCDPHHS and are inventoried annually. Additional supplies may be needed.

Communications Plan

- With External and Internal Partners: CBCDPHHS has a robust communication plan in place for dealing with internal and external partners which includes a health alert database sorted by group, routine email communications, emergency after hours contact numbers, cell phones, landline, handheld radios, and HAM radio equipment. The Health Command has an established protocol for communicating with Hospital Emergency Operations Centers. A partnership with local providers has created plans and protocols for communicating through a Medical Coordination Center. The CBCDPHHS has established and exercised a system of communicating with DHSS during events.
- Public Information Plan: Public communication during a large scale event or an emergency is vital to inform and educate the public, resulting in the reduction of fear and anxiety. The Public Information Toolkit has templates for pandemic influenza and fact sheets are under development. The City and County both have well developed websites that can be updated immediately as needed. The City also has a Public Communications Department capable of producing video content as needed and aired on the City Cable channel and through web streaming. Public information will be coordinated by the Regional Public Information Specialist and the DHSS. A Joint Information Center will be activated as needed. All media inquiries will go through the Public Information Officer. Media representatives who self report to Public Vaccination Clinics will be directed to the Public Information Officer at the Public Vaccination Clinic who will inform the media of the Press policy for the event. The press policy will be

determined by the Health Command and communicated to all clinic sites. Call Center capability exists to answer high volume calls from the public or providers.

Security/Crowd Control

Security for the public vaccination clinics and distribution function will be provided by the City of Columbia Police Department and the Boone County Sheriff's Department, with assistance from the University of Missouri Police and the Police Departments of the respective towns in which public clinics will be set up. Local law enforcement will be responsible for traffic and crowd control and security within the clinic. Traffic and security plans have been drawn up for PODs by law enforcement and will be implemented in consultation with the appropriate agency of the jurisdiction. Security plans are on file at the CBCDPHS. Security will be scalable according to risk and situational awareness.

Clinical Protocols:

- CBCDPHHS has a policy in place for Continuous Quality Assurance. This policy declares that services are provided utilizing guidelines provided by the DHSS as well as other granting agencies. Under this policy we will follow all clinical protocols outlined by CDC and DHSS concerning H1N1 vaccine storage and administration. Policies and Protocols are reviewed and signed by all CBCDPHHS nursing staff, as well as by all other staff to whom they pertain.
- CBCDPHHS also has an extensive policy for Vaccine Storage and Handling. As noted above, there are three refrigerators connected to a thermometer system that notifies an alarm company if the temperatures go out of range. Temperatures in all refrigerators and freezers are checked twice daily when the office is open. When vaccine is transported off-site the agency uses several small coolers. CBCDPHHS policy dictates that coolers transporting vaccine should have a layer of ice packs on the bottom followed by several layers of paper towels to ensure that vaccine does not directly touch the ice packs. Another layer of paper towels and another ice pack may be used on top of the vaccine as well, depending on anticipated external temperature.
- Patient Information Sheets are distributed with vaccine administration. To ensure that the patient receives the sheet, there is a box on the consent form that is marked by CBCDPHHS staff. This will include any additional information sheets that will be required for Emergency Use Authorization or any state and federal regulations relating to H1N1 vaccine.
- Current Protocols for CBCDPHHS Clinic and Nursing outline the following: Reports received regarding adverse events following vaccination will be reported to the CDC through VAERS (Vaccine Adverse Event Reporting System). VAERS forms can be found in the Immunization Room as well as outside of the Nursing Supervisor's office. They can also be printed online at www.vaers.hhs.gov. The VAERS from will be completed by a CBCDPHHS nurse using information obtained from the person reporting the adverse event. After the form is completed, a copy will be made and placed in the "VAERS Reports Sent" file in the cabinet outside of the Nursing Supervisor's office. The original will be mailed or faxed to the VAERS office.

Data Management System

- CBCDPHHS will comply with all forms and information system requirements as determined by guidance to be provided by DHSS. CBCDPHHS has adequate technological equipment and systems necessary to meet all anticipated needs.

Methods for determining and allocating vaccination to targeted populations

- These plans are currently in progress for CBCDPHHS. A letter and survey for area physicians is being drafted that includes information about their willingness to administer H1N1 vaccine. Other information about each priority group is being collected. Once this information is collected it will be analyzed to determine the best allocation percentages for each vaccine receiving site, including CBCDPHHS. Priority groups that cannot be adequately reached through Private Providers will be encouraged to attend public clinics. CBCDPHHS plans to appropriately place vaccination clinics in areas that will reach the targeted populations (for example schools and large child care facilities).

Emergency procedures for medical services and medical transport

- Flow Plans for public clinics include a special room for persons that require medical attention. Appropriate staff will be available to provide limited medical care, and an ambulance will be called if necessary for additional care and transport.

Infection Control methodologies and procedures

- Staff/Worker protection: Safety Officer will use established protocols to assure staff and worker protection during public vaccination clinics. All public vaccination locations will have adequate hand washing facilities for staff and necessary supplies for staff/worker protection.

- Process for separating ill from well: All public clinics will include a griage/triage process to identify ill persons who may be presenting for vaccine. These persons will be deferred to a secondary area for further evaluation. Ill persons will be sent from the public clinic to appropriate health care providers for further assessment.

Columbia/Boone County Department of Public Health and Human Services

3rd MMR Mass Vaccination Plan

December 14, 2016

Introduction:

Mumps is an acute viral disease characterized by fever and swelling of the parotid or other salivary glands. Mumps outbreak can occur in close-contact settings like universities, despite high 2-dose MMR vaccination coverage. As of December 14, 2016 there were 232 cases of mumps in Columbia/Boone County. The majority of the cases are undergraduate students at the University of Missouri (MU). A third dose of MMR vaccine has been used in previous mumps outbreaks.

MMR vaccine inventory kept at various intuitions in Columbia/Boone County is not sufficient to support a mass vaccination clinic. Using current supply in Columbia/Boone County would impact day to day vaccinations for the individuals and children looking to receive their first or second dose through normal vaccination schedule.

The Columbia/Boone County Department of Public Health and Human Services (PHHS) have developed comprehensive plans for Mass Prophylaxis. The 3rd MMR Mass Vaccination Plan augments existing plans for Mass Prophylaxis and Vaccine Management in Columbia/Boone County, taking in to account the known expectations associated with the distribution and administration of MMR.

Vaccine Distribution:

PHHS will use a closed POD model to distribute MMR vaccine to undergraduate students at MU. PHHS will receive vaccine for one or more clinics to be held on the University of Missouri's campus.

- The designated LPHA point of contact is Mary Martin, with Trina Teacutter and Stephanie Browning as the alternate contacts.

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3. PHHS Administration of Vaccine: Closed PO:

Vaccine will be distributed to the University of Missouri site(s) and be administered to the undergraduate student population at the University of Missouri.

Command and Control Structure:

PHHS practices an ICS organizational when seasonal influenza clinics are held, or during routine exercises. The vaccination clinic will have an Incident Commander and other command positions as needed. Job Action Sheets have been developed and tested for each position during a vaccination clinic and include safety, parking / traffic flow, griage, forms/registration, dispensing, vaccinating, check out, and public information.

In addition to Command and Control during the vaccination clinic, PHHS activates a Health Command structure when emergency planning and/or response activities demand extra staff and time. This includes assigning the following roles: Public Information Staff, Liaison Officer, Safety Officer, Planning Section Chief, Logistics Section Chief, and Operations Section Chief.

Organization of Event

- Facility selection and location: Decisions on facility selection and location will be based on anticipated demand for vaccination, availability of sites, hours of operation, and availability of staff. PHHS may utilize existing agreements with POD sites previously established for deployment of the Strategic National Stockpile. A basic vaccine clinic layout for the POD has been developed (Attachment A).Final decisions regarding the location of public clinics will be determined pending additional information on vaccine availability and MU staff.
- Support Functions: Clinics will be supported by PHHS staff, MU Student health staff, and other partner agencies. If necessary additional volunteers can be requested by the City of Columbia Volunteer Coordinator, neighboring LPHAs, and the Columbia/Boone County MRC.
- Flow Plans: Using Mass Prophylaxis POD site schematics, and the BDS plan, a Flow Plan has been developed (Attachment B) .
- Access hours: Clinic access hours will be determined based on demand for vaccine and vaccine supply availability.
- Vaccine Storage: All public vaccinations clinic locations will have appropriate cold chain storage and will be monitored throughout the public clinic by trained personnel. Other than during clinic operations, the vaccine will be kept at PHHS in an alarmed refrigerator, and there is back up power provided to the building by a generator.
- Supplies and equipment: PPHS has purchased the necessary equipment to set-up four simultaneous public vaccination clinics. POD Go-Kits are located at CBCDPHHS and are inventoried annually. Additional supplies may be needed.

Communications Plan

- With External and Internal Partners: PHHS has a robust communication plan in place for dealing with internal and external partners which includes a health alert database sorted by group, routine email communications, emergency after hours contact numbers, cell phones, landline, handheld radios, and HAM radio equipment. The Health Command has an established protocol for communicating with Hospital Emergency Operations Centers. A partnership with local providers has created plans and protocols for communicating through a Medical Coordination Center. The PHHS has established and exercised a system of communicating with DHSS during events.
- Public Information Plan: Public information during a large scale event or emergency is vital to inform and educate the public, resulting in the reduction of fear and anxiety. The DHSS Emergency Response Public Information toolkit has information to aid in developing and distributing public messages. The City and County both have well developed websites that can be updated immediately as needed. The City also has a Community Relations Department capable of producing video content as needed to be streamed on the City Cable channel as well as on the internet. Public information will be coordinated by the Regional Public Information Specialist and DHSS. A Joint Information Center will be activated as needed. All media inquiries will go through the Public Information Officer. Media representatives who self report to Public Vaccination Clinics will be directed to the Public Information Officer at the Public Vaccination Clinic who will inform the media of the Public Information Policy for the event. The Public Information Policy will be determined by the Health Command and communicated to all clinic sites. Call Center capability exists to answer high volume calls from the public or providers.

Security/Crowd Control

Security for the vaccination clinic will be planned for and provided by the MU PD. The will partner with Columbia PD and Boone County Sherrif's office if needed.

Clinical Protocols:

- PHHS has a policy in place for Continuous Quality Assurance. This policy declares that services are provided utilizing guidelines provided by the DHSS as well as other granting agencies. Under this policy we will follow all clinical protocols outlined by CDC and DHSS concerning MMR vaccine storage and administration. Policies and Protocols are reviewed and signed by all PHHS nursing staff, as well as by all other staff to whom they pertain.
- HHS also has an extensive policy for Vaccine Storage and Handling. There are three refrigerators connected to a thermometer system that notifies an alarm company if the temperatures go out of range. Temperatures in all refrigerators and freezers are checked twice daily when the office is open. When vaccine is transported off-site the agency uses several small coolers. PHHS policy dictates that coolers transporting vaccine should have a layer of ice packs on the bottom followed by several layers of paper towels to ensure that vaccine does not directly touch the ice packs. Another layer of paper towels and another ice pack may be used on top of the vaccine as well, depending on anticipated external temperature.

- Patient Information Sheets are distributed with vaccine administration. To ensure that the patient receives the sheet, there is a box on the consent form that is marked staff. This will include any additional information sheets that will be required for MMR vaccine.
- Current Protocols for PHHS Clinic and Nursing outline the following: Reports received regarding adverse events following vaccination will be reported to the CDC through VAERS (Vaccine Adverse Event Reporting System). VAERS forms can be found in the Immunization Room as well as outside of the Nursing Supervisor's office. They can also be printed online at www.vaers.hhs.gov. The VAERS from will be completed by a PHHS nurse using information obtained from the person reporting the adverse event. After the form is completed, a copy will be made and placed in the "VAERS Reports Sent" file in the cabinet outside of the Nursing Supervisor's office. The original will be mailed or faxed to the VAERS office.

Data Management System

- CBCDPHHS will comply with all forms and information system requirements as determined by guidance to be provided by DHSS. CBCDPHHS has adequate technological equipment and systems necessary to meet all anticipated needs.

Methods for determining and allocating vaccination to targeted populations

- Mumps continues to have a presence on the MU campus despite the implementation of traditional control measures. An additional control measure for consideration during mumps outbreaks is the use of a third dose of measles, mumps, and rubella vaccine. The Centers for Disease Control and Prevention (CDC) has provide guidelines for considering a 3rd dose of MMR during outbreaks. Factors that might trigger this recommendation include outbreaks among populations with 2-dose MMR vaccination (coverage of >90%), intense exposure settings such as universities, evidence of sustained transmission (>2 weeks), and high attack rates (>5 cases per 1,00 population). An analysis of the data associated with this outbreak confirms each of the criteria has now been met.

Emergency procedures for medical services and medical transport

- Appropriate staff will be available to provide limited medical care, and an ambulance will be called if necessary for additional care and transport.

Infection Control methodologies and procedures

- Staff/Worker protection: Safety Officer will use established protocols to assure staff and worker protection during public vaccination clinics. All vaccination locations will have adequate hand washing facilities for staff and necessary supplies for staff/worker protection.
- Process for separating ill from well: All public clinics will include a griage/triage process to identify ill persons who may be presenting for vaccine. These persons will be deferred to student health or other clinic for treatment.