

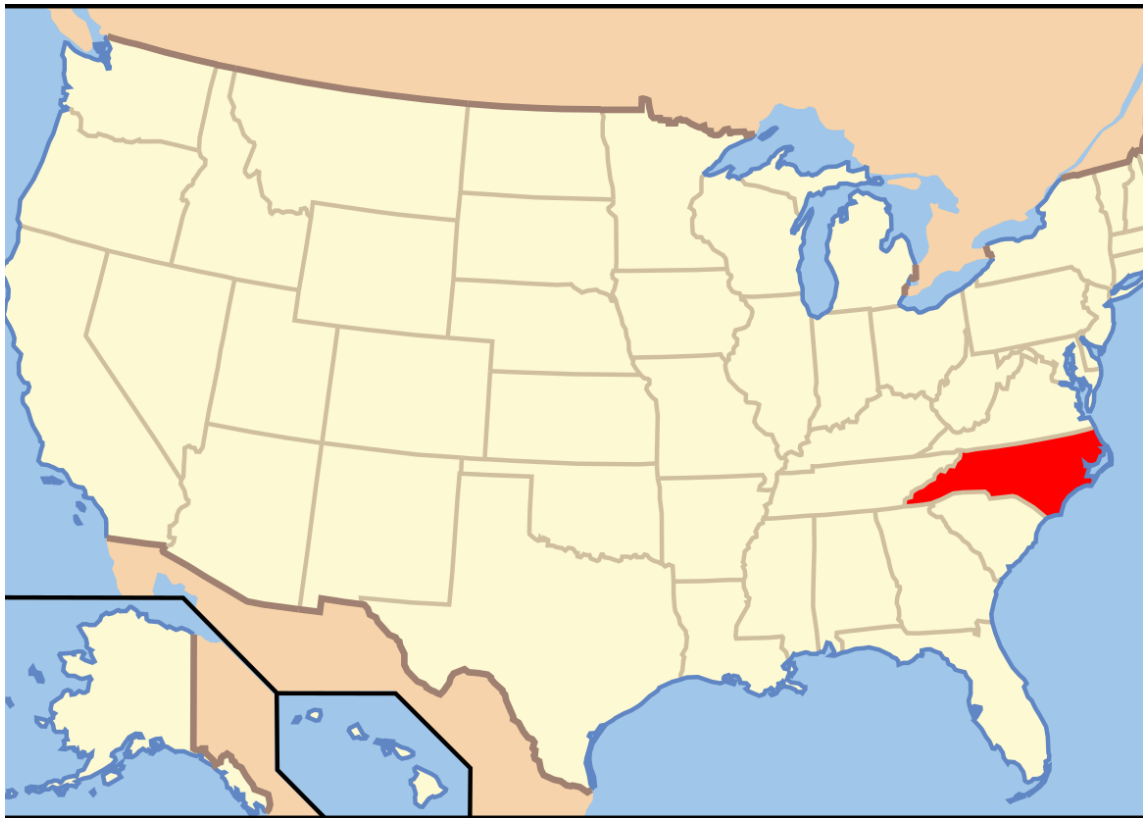
Piedmont Triad Regional Council

Area Agency on Aging Vaccination of Homebound Plan

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**Stroke Advisory Council
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NC Leads the Way with Vaccinating Older Adults BUT is it good enough?



In a press release on February 26, 2021 - RALEIGH

Kaiser Family Foundation ranks North Carolina as first in the nation for vaccinating the largest share of its 65 and older population at 49%. This rate does not include those in long-term care facilities.

Homebound Vaccination Efforts Across the Nation

- Boston Medical Center started February 1, 2021
- **Wake Forest Baptist Health started February 8, 2021**
- Miami Beach, Florida, fire department
- In East St. Louis, Illinois
- In central and northern Pennsylvania, Geisinger Health
- Nationally, the Department of Veterans Affairs
- Several other counties in NC are figuring out ways to deliver the vaccine in the home



Are the Homebound Considered a Priority?

- ▶ Between 2 million and 4.4 million older adults are homebound.
- ▶ Most are in their 80s and have multiple medical conditions, such as heart failure, cancer, and chronic lung disease, and many are cognitively impaired. Leaving their homes creates considerable difficulty.
- ▶ At this point, no effort has been made to put this population in a priority group.



The State of the State...

- ▶ The COVID-19 vaccine remains in short supply and poses handling and storage challenges.
- ▶ The PTRC/Area Agency on Aging continues to have conversation with state and local leaders that can have an impact on the homebound vaccination efforts.
- ▶ We are all hopeful that the Johnson & Johnson vaccine becomes readily available and earmarked for this priority group.



CDC Guidelines

Homebound Vaccination Procedures

Training



- ▶ Ensure that healthcare professionals are familiar with the storage and transportation requirements of the vaccine related products in their inventory.
- ▶ Consider needs of those with disabilities, i.e., those with limited vision, hearing impaired, service animals, etc.

Pre-vaccination Planning



- ▶ Estimate the number of doses needed:
 - ▶ Work with local agencies such as meal delivery services for the homebound to develop lists of those in need of the vaccine.
 - ▶ Contact recipients in advance.
 - ▶ Plan to use all doses in a vial, including contingency vaccination for caregivers or others in the home rather than wasting.
- ▶ Provide information on vaccine in a variety of formats:
 - ▶ Alternate languages, braille, large font.
- ▶ Map travel for appointments:
 - ▶ Take into account vaccine prep time and post-vaccine observation.
- ▶ Maintain, monitor, and report temperature of vaccine from the time it leaves facility, during transportation, and up to the time it is administered.

Storage and Handling

- ▶ Follow all guidelines specific to vaccine manufacturer.
- ▶ Transport using a portable vaccine refrigerator:
 - ▶ Use qualified packout.
 - ▶ Do not use commercially available soft-sided food or beverage coolers.
- ▶ Use a digital data logger:
 - ▶ Use the kind that can be read without opening or closing the container.
- ▶ Document the minimum and maximum temps:
 - ▶ When transport begins, each time container is opened, and upon return to facility.
- ▶ A punctured vial may be transported from home to home:
 - ▶ By the same provider, if the cold chain is maintained.




Storage and Handling

- ▶ Additional Transport Guidance:
 - ▶ Only transport in passenger compartment (not in trunk or truck bed).
 - ▶ Transport directly to vehicle that is already at comfortable temperature.
 - ▶ Keep containers out of sunlight.
 - ▶ Pack loose vials carefully to prevent from breaking.
 - ▶ Never leave container unattended in vehicle.
- ▶ Bring appropriate supplies to mix and administer:
 - ▶ Diluent and mixing supplies if needed.
 - ▶ Needles/syringes, sterile prep pads.
 - ▶ Proper sharps disposal.
 - ▶ Pre-vaccination checklist.
 - ▶ EUA Fact Sheets for Recipients <https://www.cdc.gov/vaccines/covid-19/index.html>.



Storage and Handling

- ▶ CDC recommends transporting vaccine in vials.
- ▶ However, there may be instances when the only option is to transport vaccine in a pre-drawn syringe.
- ▶ U.S. Pharmacopeia includes guidance for transporting pre-drawn vaccine in syringes in the [COVID-19 Vaccine Toolkit: Operational Considerations for Healthcare Practitioner](#)



Vaccine Administration

- ▶ Vaccines should be prepared and administered following aseptic technique.
- ▶ Give each recipient a copy of the EUA fact sheet ([Pfizer, Moderna or Johnson & Johnson](#)) for recipients and/or caregivers.
 - ▶ [V-safe](#) is a smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins for recipients after COVID-19 vaccination. Through v-safe, recipients can quickly tell CDC if you have any side effects after getting the COVID-19 vaccine. Depending on the answers, someone from CDC may call to check on recipients that have signed up for the program.
- ▶ Ask the person if he or she has any questions or concerns prior to vaccination, and address them, as appropriate.
- ▶ Best practices are to document consent/assent in the medical records.
- ▶ Before administering vaccine, screen recipients for contraindications and precautions (use the [pre-vaccination checklist for COVID-19 vaccination in Englishpdf icon](#) or [Españolpdf icon](#)), even if you are administering the second dose.

Vaccine Administration



- ▶ For homebound persons who might be at increased risk for anaphylaxis following vaccination (i.e., persons with a history of anaphylaxis due to any cause), consider whether they can be vaccinated in a setting where medical care is immediately available if they experience anaphylaxis following vaccination. If home vaccination is the only option for these persons and, through **risk assessment**, it is determined that the benefits of vaccination outweigh the potential risk for anaphylaxis, home vaccination providers should be able to manage anaphylaxis. This includes appropriate screening; post-vaccination observation; medications and supplies; staff qualifications for recognition and treatment of anaphylaxis; and ability to contact and availability of emergency medical services in the area. COVID-19 vaccination provider should have at least 3 doses of epinephrine on hand when administering vaccine. CDC currently recommends that persons without contraindications to vaccination who receive an mRNA COVID-19 vaccine be observed after vaccination for the following time periods:
 - ▶ **30 minutes:** Persons with a history of an immediate allergic reaction (within 4 hours) of any severity to a vaccine or injectable therapy, and persons with a history of anaphylaxis due to any cause.
 - ▶ **15 minutes:** All other persons.

Vaccine Administration



- ▶ Additional information about potentially managing an anaphylactic reaction is available.
- ▶ COVID-19 vaccination providers must document vaccine administration in their medical record systems within 24 hours of administration and use their best efforts to report administration data to the relevant system for the jurisdiction (i.e., immunization information system) as soon as practicable and no later than 72 hours after administration.
- ▶ Adverse events that occur in a recipient after COVID-19 vaccination must be reported to the Vaccine Adverse Event Reporting System (VAERS). FDA requires vaccination providers to report vaccine administration errors, serious adverse events, cases of multisystem inflammatory syndrome, and cases of COVID-19 that result in hospitalization or death after administration of COVID-19 vaccine under an EUA. Reporting is encouraged for other clinically significant adverse events, even if it is not clear that a vaccine caused the adverse event. Complete and submit reports to [VAERS online.external icon](#) .
- ▶ To prevent wasting vaccine doses, as appropriate and approved by jurisdictions, healthcare personnel may administer vaccine to caretakers and family members, given their high risk of exposure.

PTRC Area Agency on Aging Vaccination for Homebound Plan



The Piedmont Triad Regional Council Area Agency on Aging (a.k.a. PTRC AAA) administers federal, state, and local funding through contractual arrangements with the 12 counties in the region as well as other local agencies. Currently 109 contracts totaling over 18 million dollars are being administered.

Getting Started



- ▶ Convened health and human services leaders from across the region.
- ▶ Identified target population:
 - ▶ Homebound (focus on underserved and those at poverty level).
 - ▶ Considered caregivers in the home, especially to use any leftover doses.
 - ▶ Those living in rural areas.
 - ▶ Kept health equity in mind (80+ whites, 11+ blacks, balance was other minorities when initiative began). 65+ and minority focus.
- ▶ Determined how to identify potential recipients by using special needs lists including those receiving home delivered meals.
- ▶ Developed outreach efforts including use of the media.

Partnering is Critical



- ▶ Recruited volunteers for vaccine administration and data entry.
- ▶ Assured distribution and storage of vaccine (PTRC has two mobile units, and there are other mobile units in the region).
- ▶ Mapped routes using GIS.
- ▶ Decided how many vaccines could be administered in a day.
- ▶ Addressed training by tapping into those already trained in the health systems and health departments. Considered Home Health Agencies.
- ▶ Partnered with the faith-based community.

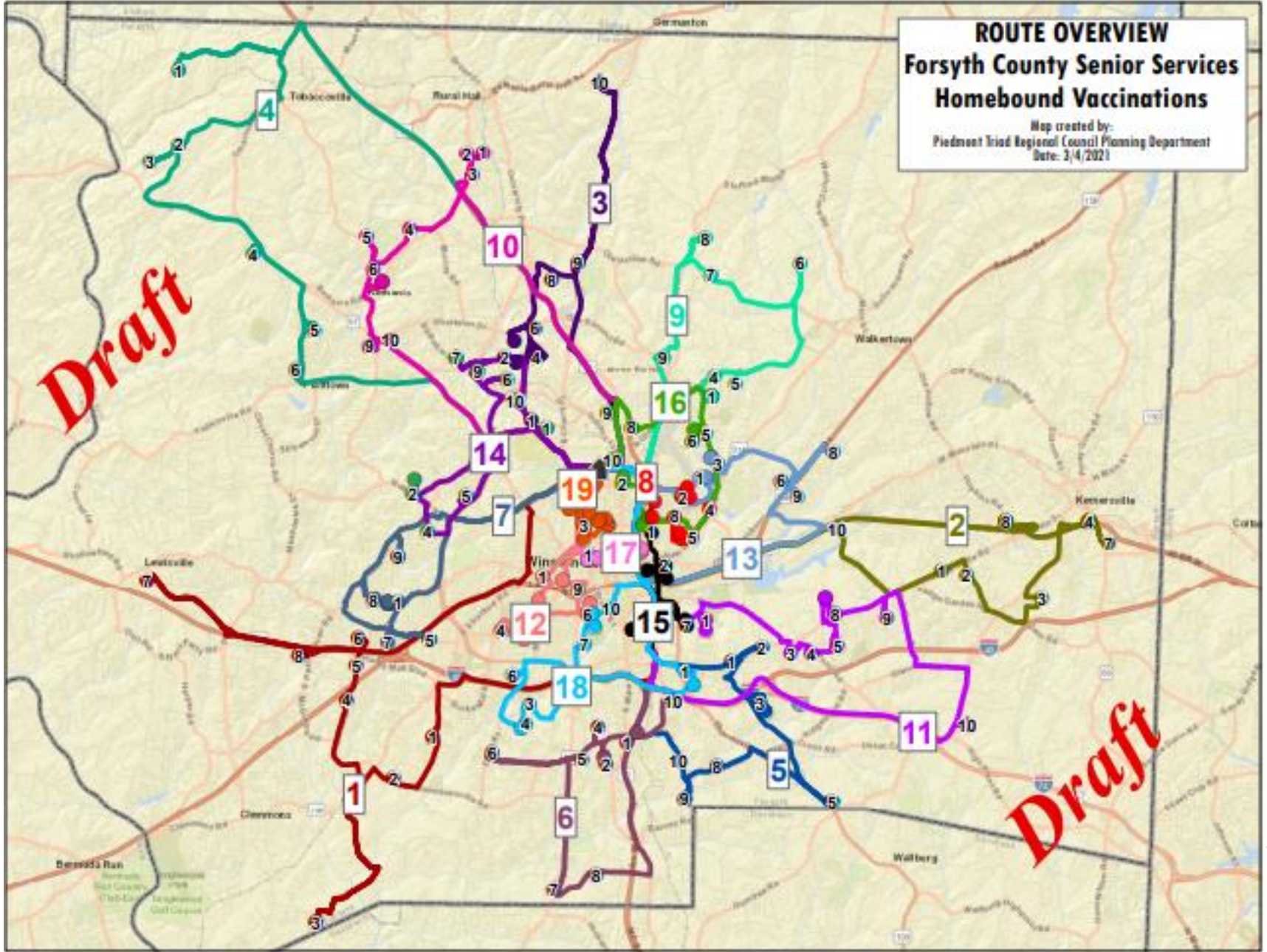


Regional Efforts Making a Difference

- Two-Hundred homebound home delivered meals and home care clients in Forsyth County are being set up. Novant and Wake Forsyth Baptist Health are attempting to split the list and provide vaccinations as early as this week. See Route Map.
- Yadkin County has a COVID paramedic that is going out into the community with remaining doses at the end of the allotted time and delivers to the homebound on a priority list.
- The Caswell County Senior Services is creating a list and working with the county paramedic to deliver shots.
- Guilford County is working on purchasing mobile units to use for this effort.
- Rockingham County Health Department is working closely with Aging Disability Transit Services (ADTS). Names of homebound individuals are being discussed and strategized.
- Other counties are in discussion.

ROUTE OVERVIEW
Forsyth County Senior Services
Homebound Vaccinations

Map created by:
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