# ARCHIVED DOCUMENT (COVID-19)

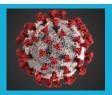


The following document is for historical purposes and is no longer being updated. Please go to the COVID-19

Vaccination Clinical & Professional

Resources for more recent information.

# CONNECTICUT INTERIM COVID-19 VACCINATION PLAN



# **Executive Summary**

#### 10/27/2020

Connecticut's COVID-19 Mass Vaccination Plan Appendix describes and documents the expected response by the Connecticut Department of Public Health (DPH) and its local public health and healthcare partners to implement an effective statewide COVID-19 mass vaccination initiative. Connecticut has established the multi-disciplinary, multi-departmental Public Health COVID-19 Vaccination Workgroup to develop this plan and coordinate planning activities.

The COVID-19 Mass Vaccination Plan Appendix is part of the Mass Vaccination Annex to the All Hazards Public Health Emergency Response Plan (PHERP) and combines CDC guidance, current systems and procedures, and existing plan formats. The PHERP is the Emergency Support Function #8 (ESF #8): Public Health and Medical Annex to Connecticut's State Response Framework (SRF).

### **Phased Approach to COVID-19 Vaccination**

Since vaccine supply may vary throughout this initiative, Connecticut is planning for three Phases of vaccination and to allocate limited vaccine resources to the population. Across all Phases, Connecticut will work to:

- 1. Implement the Governor's vaccine strategy based on the recommendations of the Governor's COVID-19 Vaccine Advisory Group.
- 2. Recruit, enroll, and maintain vaccine providers across the state.
- 3. Use CT WiZ (the existing Immunization Information System) for vaccine tracking.
- 4. Match vaccine providers with target populations and plan temporary or mobile vaccine clinics to reach target populations.
- 5. Monitor vaccine supply and redistribute if necessary.
- 6. Ensure equitable access and vaccine supply in al geographic areas of the state.

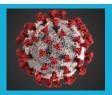
### **Critical Populations**

Connecticut will identify priority groups for early vaccination based on the recommendations of the Advisory Committee on Immunization Practices (ACIP), the Governor's COVID-19 Vaccine Advisory Group, and CDC recommendations. Several data sources are being used to identify populations in Connecticut at high risk for COVID-19, and DPH will utilize mapping tools to provide visual representation of target populations when the data is finalized. After applying recommendations and with visual data, DPH will coordinate with these target groups, coordinate vaccinators, and identify for COVID-19 vaccine administration setting for Phases 1-A, 1-B, and 2.

#### **Vaccination Provider Recruitment and Enrollment**

To begin, the DPH queried healthcare providers already enrolled in the Connecticut Vaccine Program (CVP) and pre-registered those sites interested in the COVID-19 Vaccine Program (CoVP). To expand further and engage adult providers, the DPH sent a recruitment letter to professional associations and those with an appropriate license to pre-register. In addition, DPH pre-registered hospitals, local health departments, pharmacies, community health centers, and private providers. After pre-registration, sites are being prioritized and invited to enroll in the CoVP. To receive and/or administer COVID-19 vaccine, providers must complete and sign the CDC COVID-19 Vaccination Program Provider Agreement and participate in the required training program.

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### **Vaccine Storage and Handling**

COVID-19 vaccine products are temperature-sensitive and must be stored and handled correctly to ensure efficacy and maximize shelf life. Vaccination providers are responsible for maintaining vaccine quality from the time a shipment arrives at a vaccination provider site until the dose is administered. To minimize opportunities for breaks in the cold chain, most COVID-19 vaccine will be delivered from CDC's centralized distributor directly to the location where the vaccine will be stored and administered, although some vaccine may be delivered to secondary depots based upon Redistribution Agreements. Certain COVID-19 vaccine products, such as those with ultra-cold temperature requirements, will be shipped directly from the manufacturer to the vaccination provider site.

#### **Vaccination Second-Dose Reminders**

For most COVID-19 vaccine products, two doses of vaccine, separated by 21 or 28 days, will be needed. Because different COVID-19 vaccine products will not be interchangeable, a vaccine recipient's second dose must be from the same manufacturer as their first dose. COVID-19 vaccination providers should make every attempt to schedule a patient's second-dose appointment when they get their first dose. Both the federal system, VAMS, and CT WiZ are capable of electronic second dose reminders.

### **Vaccination Program Communication**

All vaccination communication strategies will be coordinated with the Department of Public Health and the Office of the Governor in conjunction with Emergency Support Function (ESF #15). Messaging will be developed using risk communication principles as well as guidelines and products from the CDC Vaccinate with Confidence Framework, the FEMA coordinated New England Messaging Collaborative and with Connecticut specific messaging in development. Key audiences include healthcare personnel, health insurance providers and plans, employers, government and community partners and stakeholders, and the general public. Messages will meet the requirements of the Americans with Disabilities Act, the Rehabilitation Act, the Patient Protection and Affordable Care Act, the Plain Language Act, and other applicable disability rights laws for accessibility.

### **Vaccine Safety Monitoring**

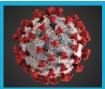
Per the CDC COVID-19 Vaccination Program Provider Agreement, COVID-19 vaccination providers are required to report adverse events following COVID-19 vaccination and should report clinically important adverse events even if they are not sure if the vaccination caused the event. Vaccinators should report clinically important adverse events following COVID-19 vaccination to Vaccine Adverse Event Reporting System (VAERS). VAERS is a national early warning system to detect possible safety problems with vaccines. In Connecticut, the Vaccine Coordinator is designated as the program safety officer and will notify DPH leadership of any reports entered into VAERS.

## **Vaccination Program Monitoring**

Continuous monitoring for situational awareness throughout the COVID-19 Vaccination Program is crucial for a successful outcome. To ensure situational awareness of the vaccine initiative, the DPH will monitor two existing CDC Dashboards (the Weekly Flu Vaccination Dashboard and the COVID-19 Vaccination Response Dashboard), CT WiZ, and department resources using processes established in the Incident Command System.

Many of the efforts outlined in this Appendix are based upon routine immunization and pandemic influenza program activities that serve as a foundation for COVID-19 mass vaccination planning. This Appendix will be

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modified and updated as more information about the COVID-19 vaccine, mass vaccination strate additional guidance become available from the CDC.	gies, and	

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