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U.S. Department of Health and Human Services Centers for Disease Control and Prevention



# New York City Department of Health and Mental Hygiene

# Interim COVID-19 Vaccination Plan – Executive Summary

# Introduction

The New York City Department of Health and Mental Hygiene (NYC Health Department) has established a Vaccine Task Force (VTF), an integral part of the Incident Command System (ICS) for NYC's COVID-19 response, with the objective of developing a plan for equitable distribution of COVID-19 vaccines when they become available. The plan builds upon a well-established immunization infrastructure and draws on the NYC Health Department's pandemic influenza plan, as well as lessons learned from H1N1 and annual flu vaccination plans.

The VTF includes staff from across the NYC Health Department dedicated to equity, provider communications, community partner engagement, people living in congregate settings, development and dissemination of information to the public, health care system support and field operations as well as vaccine distribution, allocation and accountability. The NYC Health Department has proven capable of managing infectious disease outbreaks and vaccine distribution (such as Ebola, Zika, H1N1 and measles), exercises and drills. The expanded flu vaccination campaign for 2020 is serving as the operational template for the COVID-19 vaccination campaign.

# COVID-19 Vaccination Planning Sections:

# Section 3: Phased Approach to COVID-19 Vaccination

The NYC COVID-19 Vaccination Plan looks to the National Academy of Science, Engineering and Medicine framework and guidance from the Advisory Committee on Immunization Practices for planning of a phased rollout that adheres to national guidance and ensures local equity in allocation and access to NYC residents.

In Phase 1a, when vaccine supply is expected to be limited, NYC expects to distribute the vaccine to health care settings, such as hospitals, to reach health care personnel for whom risk of COVID-19 infection is greatest. In phase 1b, priority populations are expected to be adults of all ages with underlying medical conditions that put them at higher risk of COVID-19 complications and older adults living in congregate settings. NYC expects to distribute vaccine to hospitals and their ambulatory care centers, federally qualified health centers (FQHCs) and urgent care networks contracted to provide services to the uninsured. NYC will also support the Centers for Disease Control and Prevention's (CDC) distribution to long-term care facilities. Notably, initial vaccine distribution will be directed to facilities with appropriate storage capacity, depending on the specific vaccines.

During Phase 2, in which vaccine supply is expected to be sufficient to meet demand, vaccine distribution will be expanded to additional vaccine providers across NYC to meet citywide demand, and community vaccinators will be deployed to reach communities as needed.

### **Section 4: Critical Populations**

The NYC Health Department will use available datasets, including administrative data, Community Health Survey and Citywide Immunization Registry (CIR) data to identify and estimate critical populations including but not limited to: number of people aged 65 and older, people with underlying medical conditions, essential workers and first responders, as well as those living in congregate settings such as long-term facilities, shelters and correctional facilities.

# Section 5: COVID-19 Vaccination Provider Recruitment and Enrollment

The NYC Health Department is leveraging existing relationships with immunization providers as well as reaching out to potential providers for enrollment in the COVID-19 vaccination program. The VTF will coordinate vaccine planning with these organizations, including hospitals, FQHCs, urgent care centers, independent and chain pharmacies, independent health care providers, as well as collaborate and work closely with New York State (NYS) and other government agencies.

The CIR was established in 1996 and is currently used by nearly 2,700 immunization providers across NYC. Many of the facilities that are prioritized for initial vaccine distribution are already enrolled in and using the CIR. The CDC COVID-19 Vaccination Program Provider Agreement will be completed online by providers through the CIR's Online Registry and will provide information about a facility's vaccination administration capacity. All COVID-19 vaccine ordering will be submitted by providers through the CIR's Online Registry.

# Section 8: COVID-19 Vaccine Storage and Handling

The COVID-19 Vaccination Program Provider Agreement includes detailed information on a facility's vaccine storage and handling capacity. This information will enable the NYC Health Department to identify which facilities can store ultra-cold, frozen, and refrigerated vaccine and the size of their storage capacity. Vaccine storage and handling toolkits will be disseminated to providers. Additionally, webinars and additional educational materials will be offered to providers to ensure proper vaccine storage and prevent wastage.

### Section 10: COVID-19 Vaccination Second-Dose Reminders

All COVID-19 vaccine doses administered are expected to be reported to the CIR, allowing the NYC Health Department to track doses of vaccine administered and overall vaccine uptake within NYC. The CIR has a text message reminder system available for all providers enrolled in the CIR. Further, the CIR supports bidirectional exchange through Health Level Seven between the CIR and a provider's electronic health record, allowing them to check a patient's vaccine history and will ensure that the second vaccine dose is the correct vaccine product and is administered at the proper interval.

### Section 12: COVID-19 Vaccination Program Promotion

The NYC Health Department will undertake a comprehensive COVID-19 vaccine marketing campaign that will be multi-lingual, multi-channel, and grounded in the concerns, questions and lived experiences of New Yorkers. The campaign will be informed by community feedback and will evolve with the different phases of the COVID-19 vaccine program. The VTF is actively engaging community members to understand vaccine hesitancy, especially as it relates to historic and persistent racial oppression. The VTF is prepared to deliver on-the-ground messaging, both from public health leaders and trusted community members, in multiple languages to increase uptake of the vaccine and combat misinformation.

### Section 14: COVID-19 Vaccine Safety Monitoring

All COVID-19 vaccination providers will be instructed on the requirements and process for reporting adverse events following vaccination to the Vaccine Adverse Event Reporting System (VAERS). The NYC Health Department will provide webinars, adverse event reporting guidance, technical assistance, and patient education materials to ensure these guidelines are met.

#### Section 15: COVID-19 Vaccination Program Monitoring

The NYC Health Department will have multiple levels of oversight for the COVID-19 vaccination program. The NYC Health Department will track provider enrollments, number of vaccines ordered, number of vaccine doses shipped, vaccine doses reported to the CIR by age and neighborhood, first and second dose coverage by age and compliance with reporting requirements. The VTF will also report out to ICS three times a week and be reviewed by the VTF once a week. Vaccination sites can be found by the public on the NYC Health Department's website using <u>NYC HealthMap</u> or by calling **311**.

#### Equity

Equity is at the core of all NYC Health Department planning including our vaccine operations. Vaccine planning and allocation decisions must be made through an anti-racist and intersectional lens. The VTF will oversee vaccine distribution in accordance with national allocation guidelines, with careful local oversight and monitoring to ensure rapid adjustments and adaptation as required to ensure equitable and ethical allocation and uptake.