

## FQHC/Community Clinic Vaccine Office Hours – February 5, 2021

Following is the Q&A from the Friday, February 5<sup>th</sup> Office Hours call. Also attached is a weekend email from LADPH regarding data, the new CalVax system (MyCA Vax), and MyTurn. Members are encouraged to send their questions for the Tuesday, February 9<sup>th</sup> call by COB Monday to Alyssa Mohamadzadeh, [amohamadzadeh@ccalac.org](mailto:amohamadzadeh@ccalac.org).

### Phases & Eligibility

- Q: Has there been an update on vaccination eligibility for people with chronic conditions?
  - A: We have no guidance yet, but encourage you to continue with vaccinating 65+ populations.
- Q: I read it somewhere that County will be releasing new vaccination plan next week. is there anything you can share on that?
  - A: DPH is not aware of a new vaccination plan. DPH is still following their original plan and using the tiers that were originally announced.
  - According to the Daily News, the county is slated to unveil a new vaccination plan on Tuesday. The plan will likely aim to coordinate efforts across many of the sites currently in operation. The plan may include several facets: a) the new statewide partnership of Blue Shield of California and Kaiser Permanente; an initiative to reach those without insurance or with limited access to services and mobility already; and c) focus on pharmacies and community clinics where people can go to receive a vaccine. It's unclear how this plan intersects with the state centralization happening in 3 weeks. Stay tuned for more details.

### Systems

- Q: We are starting to merge patients records from CAIR into our EHR (eCW) within the EHR. We have noticed the vaccine dose comes over as 1.0ML instead of 0.5ML or 0.3ML....are other clinics experiencing this? Our EHR said it was a CAIR issue and to contact them directly.
  - A: DPH hasn't seen a work around yet. Jennifer to contact CAIR. Also reach out to EHR vendor Account Manager with questions you might get a better response.
- Q: Can clinics give the 2<sup>nd</sup> vaccine dose to a patient that didn't receive the 1<sup>st</sup> dose from them? Clinics know they're technically not supposed to, but they wanted to know if this was due to a clinical/safety reason, or if it was simply for billing/administrative purposes, and if it could be done if absolutely necessary.
  - A: There isn't a patient safety reason that a clinic cannot provide a 2<sup>nd</sup> dose to a patient who didn't receive the 1<sup>st</sup> dose from your clinic. However, the 2<sup>nd</sup> dose would need to be given in the correct time-frame from the 1<sup>st</sup> and it does need to be from the same manufacturer. The reason it is discouraged is because of allocation concerns. The 2<sup>nd</sup> doses are provided to clinics based on the 1<sup>st</sup> doses that were already administered.
- Q: Additionally, even if the clinic doesn't provide the 2<sup>nd</sup> dose, should they be recording in their EHRs that their patients have received the 1<sup>st</sup> dose elsewhere?
  - A: Regarding patients who receive their vaccines elsewhere and whether or not this should be tracked in your system, the response from the county rep was that she personally thought this would be a good thing to do, but she didn't state that it was a requirement. You should enter into your EHR.

## Allocations & Vaccine Supply

- Q: Thank for our weekly allocation of 100 doses/week, that is starting to work smoothly. With the influx of mega sites, pharmacy vaccination sites; when can we expect an increase of allocation to FQHCs to meet capacity and patient demand?
  - A: LADPH does not have answers regarding the state's plan for vaccine allocations.
- Q: Do you have any updates on timeline / plans to adopt inventory from Johnson & Johnson once its approved?
  - A: FDA approval for the Johnson & Johnson is said to take 3 weeks or possibly even longer. Vaccine allocation increases are dependent upon the state allocation. FDA is scheduled to review the week of February 26.
- Q: We have been receiving more communications regarding the requirement for CHC's to use at least 65% of our doses per week or run the risk of being penalized by losing access to future vaccine allocations. However, is there a current process in place for how these vaccine allocations will be discontinued? Will CHC's be notified of the discontinuation of weekly allocations beforehand? Will a warning be issued or will one "violation" of the suggested use be cause for discontinuation of the weekly allocation?
  - A: County is working with everyone and trying their best to manage allocations. We don't know how future roll out of future State allocation will be at this point. For now, 90% usage encouraged by County.
- Q: Are there any guidelines or best practices others have implemented to account for extra doses in Moderna MDVs (some vials have 10, 11, 12 doses) and we find ourselves trying to find patients at the last hour to prevent waste. Is anyone pre-drawing? other recommendations?
  - A: Queenscare shared that they created a call-list with patients and community members over 65 that are higher risk. They are setting expectations that patients will need to arrive within 30 minutes of the call to receive the vaccine.
  - Clinics should utilize the previous guidelines set forth to prevent wastage of vaccines which can be found here:  
<http://publichealth.lacounty.gov/acd/docs/PreventVaccineWastage.pdf>

## Moving Vaccines

- Q: can you explain repositioning little bit more? so we can reposition on the same day? there is vaccine clinic at clinic A, and clinic B stores all allocation. we can move it on the day of vaccination clinic at Clinic A? what did you say about vaccine must stay overnight at vaccination clinic? do you have guideline or write up on repositioning? would you be able to send that to us?
  - A: Following are the guidelines for moving vaccines. Please note the difference between repositioning and redistributing vaccines.

**Repositioning:** This is the process for moving vaccines internally within the organization. The vaccines must be administered within the same day. To reposition and move doses out of inventory quickly, it is suggested that clinics schedule vaccination Clinics via PrepMod and take vaccines to other locations to vaccinate for the day.

**Redistributing:** Requires CDPH's approval. Instructions and template Redistribution Plan are attached. Once the plan is approved, vaccines may be transferred to other sites

within the plan. One clinic completed the process which took about 2 weeks. Click [here](#) and scroll down to the bottom of the page for the Redistribution Resources.

- Q: Would you please share the template for the transfer approval.
  - A: LAC DPH will be providing this template and ask for CCALAC to distribute. They need to enter the excursion [here](#). The vaccine is fine to use if that is what Moderna told them. It took me 24 hours to get the email when I called Moderna to report our excursion at the warehouse.