

1. What does mass vaccination mean?

Answer: A mass vaccination pandemic site is a site willing to serve their patients following normal business practices, as well as all members of the community during scheduled mass vaccination events.

2. How much will the vaccine cost?

Answer: There is no charge for the COVID-19 vaccine. The vaccines have been paid for with federal funds at no cost to the patient nor provider, which means that no one may be charged a fee for the vaccine itself.

3. If given to providers free of charge, can we charge patients an administration fee?

Answer: Providers may charge a set fee up to \$21.93 to administer each dose. If the family cannot afford the fee, the fee must be waived, and vaccines administered free of charge.

4. Are we agreeing to vaccinate the general population, not just our clinic's patients?

Answer: You have two options when expressing interest. You can either be a "mass" vaccination pandemic site or a "private" pandemic vaccination site:

- a. If your clinic has the staff/capacity to serve your patients following normal business practices, as well as, members of your community during scheduled mass vaccination events, you will be designated as a mass vaccination pandemic site and eligible to receive vaccine supply to serve your patient population and members of your community.
 - b. If your clinic *only* has the staff/capacity to serve your current patient population, you will be designated as a private pandemic vaccination site, and only receive vaccine supply to serve your patient population.
5. In what ways may hospitals, urgent care facilities, emergency medical services, and other facilities assist in the state's vaccination efforts?

Answer: You have three options when expressing interest. You can either be a closed point of dispensing (POD) site, "mass" vaccination pandemic site or a "private" pandemic vaccination site:

- a. If your facility *only* has the capacity to serve your staff, members of your staff's immediate household, and your admitted patient population, you will be

designated as a closed POD and eligible to receive vaccine supply to serve these populations.

- b. If your facility has the staff/capacity to serve your in-patients and out-patients following normal business practices, as well as, members of your community during scheduled mass vaccination events, you will be designated as a mass vaccination pandemic site and eligible to receive vaccine supply to serve your patient population and members of your community.
 - c. If your facility *only* has the staff/capacity to serve your current patient population, you will be designated as a private pandemic vaccination site, and only receive vaccine supply to serve your patient population.
6. If we are agreeing to vaccinate the population, what hours are required from us? Would this be after our normal business hours? During business hours? Are weekends required?

Answer: Your clinic will be responsible for setting your mass vaccination clinic hours and reporting these hours to the Georgia Immunization Program. Clinics should account for the needs of your patient population and the community when establishing hours.

7. What compensation will our employees receive for vaccinating the population?

Answer: While vaccine and ancillary supplies will be provided to participating providers at no cost to the provider or recipients, funding is not available to provide compensation for participating sites or your employees. Participation is voluntary.

8. Will supplies such as needles, syringes, Band-Aids, alcohol preps, and gauze be provided as they were when the H1N1 vaccine was released?

Answer: Yes, providers will receive two different types of kits based on the vaccine supply received:

- a. Administration Kits with needles, syringes, alcohol prep pads, facemasks, and face shields (all vaccines).
 - b. Mixing Kits with needles/mixing syringes to support vaccine that require field mixing (as applicable).
 - c. Sharps containers will not be supplied.
9. If you complete the survey, are you committed into the program?

Answer: No, Survey responses will be used to comprise a list of providers who have expressed interest in becoming a COVID-19 vaccine provider. Providers will be

enrolled using a phased approach according to vaccine availability, and target populations served/willing to serve. (Please see the response to question 9 for more information regarding phases.)

10. For pediatric clinical sites, does the vaccine logistics include administering to adults, as well?

Answer: Yes. If your clinic decides to be a mass vaccination pandemic site, you are agreeing to serve your patients and members of your community, including adults.

11. For adult clinical sites, does the vaccine logistics include administering to children, as well?

Answer: Yes. If your clinic decides to be a mass vaccination pandemic site, you are agreeing to serve your patients and members of your community, including children.

12. Please explain how the program will roll out (logistics/planning type questions).

Answer: Vaccines will be released in a phased approach:

- a. **Phase 1: Vaccines will be available in limited quantities and provided to closed points of dispensing (POD) partners to ensure vaccination of our Tier 1 targeted populations (First Responders, Emergency Personnel, Front-line Essential Workers, etc.)**
- b. **Phase 2: Vaccine will be available in higher quantities and provided to pandemic vaccination providers who agree to serve as mass pandemic vaccination sites, providers who serve members of the Tier 2 targeted population (senior adults, patients with chronic medical conditions, etc.)**
- c. **Phase 3: Vaccine will be widely available and provided to providers mentioned above, as well as providers who agreed to serve as a pandemic vaccine site. Vaccines will be available for general administration to the general public based on vaccine recommendations.**

13. We only want to provide to our patients, if we do not participate, will we still have the vaccine to administer?

Answer: If you only want to provide the vaccine to your patients, your clinic will need to sign up as a ""private"" pandemic vaccination site. We will ship vaccine to your site once available and based on the phases outlined above.

14. Do all health departments need to complete a survey?

Answer: Yes, every Health Department clinic that would like to be a vaccination site needs to complete a survey.

15. Will the allotment to Long Term Care Facilities (LTCF) include vaccination for staff family members?

Answer: This will be dependent on vaccine availability, but it is our intention to supply vaccine to facility workers and their families. To assist us in preparing accordingly, please provide numbers for both facility staff, staff family members, and facility residents under separate categories.

16. Are there any funds available to LTCF if they need supplies like another refrigerator?

Answer: There is limited funding to support vaccine storage units and other supplies for district and county public health sites. However, private facilities will need to support their own cold chain requirements.

17. Will there be a single dose vaccine, or will a second dose be required at some point after the 1st dose?

Answer: CDC has shared that vaccine may be available as both single dose and 2 dose series. There will likely be different brands and preparations with varying administration schedules.,
We will provide additional information when available.

18. What procedures will be followed for administration of vaccine for children?

Answer: Information for the pediatric vaccine(s) is currently not available. We will share that information once received.

19. Will the vaccine(s) go through the same FDA process as other vaccines, or have special considerations been made given due to the pandemic?

Answer: The FDA process has been streamlined for Project Warp Speed (The Federal COVID-19 vaccine development project). The vaccines will undergo a review and approval process with FDA, but the exact form of approval is still pending, e.g., standard approval, emergency use authorization (EUA), etc.

20. Will ancillary supplies be provided with the vaccine to local health departments?

Answer: Yes, ancillary supplies will be provided with the vaccines. Please refer to the response for Question 6 for more detailed information regarding anticipated supply kits.

21. Will our current contractual agency staffing be able to assist in giving the vaccine?

Answer: Yes, if it is within their scope of practice to administer vaccines and within the scope of the DPH contract.

22. Who will give the injections at the closed POD locations?

Answer: Staff within the closed POD may administer a vaccine based on their clinical scope.

23. After reviewing the slide (trying to read between the lines), it appears that we may have two or more different manufacturers of vaccines, and if you start with one, the second dose must be the same brand. When shipping out the vaccine to the closed pods will someone make sure that they get the same brand each time they receive a shipment?

Answer: The allocations of vaccines will go through the DPH Office of Immunization and the CDC Distribution site. The CDC has indicated that you should receive enough vaccine in the first shipment to provide the second dose from the same brand. However, inventory management at the vaccination clinic site will play an important role in tracking this information and ensuring the vaccine is available to complete patient vaccine series. Staff should also use GRITS as a resource for confirming previous doses administered if the first dose was received at an alternate location.

24. What kind of paperwork will closed PODs complete, and how will the information get into GRITS?

Answer: Closed PODs should use the electronic medical records and/or GRITS for data collection/submission. If a closed POD does not have access to GRITS, or their EMR does not interface with GRITS, please reach out to the Office of Immunization to work on a solution.

25. How will you make sure that closed PODs have digital data loggers and Koolatrons in place with a contact person to receive the vaccine?

Answer: Determining whether a location can support the cold chain requirements for the vaccine and having designated staff to oversee vaccine management practices within each location is part of the enrollment process for becoming a provider. These items must be confirmed prior to marking a site as an active provider.

26. Does the vaccine follow the same regulations for temperature monitoring as other vaccines the state provides?

Answer: Yes. Temperature monitoring requirements will be the same as other vaccines.

27. Are you developing just in time training with regards to administration of the vaccine as well as storage and handling?

Answer: Yes. Just in Time Training will be developed and shared with all vaccine providers.

28. Will vaccines be shipped to jails/ correctional institutions once critical workforce has been vaccinated?

Answer: No. Federal correctional institutions will receive guidance and vaccine directly from the CDC. If local public health would like to vaccinate at their county or local jails and are trying to develop a relationship, we have contacts with the 'Sheriff's Association to help establish the relationship, if needed. Additionally, the state vaccination planning team will work with the Georgia Department of Corrections to address their vaccination needs.

29. Should DPH Health Districts plan for the distribution of vaccines to EMS?

Answer: Vaccines will be shipped to EMS sites directly from CDC's distribution center if they are actively enrolled as pandemic vaccine providers with the Office of Immunizations. If a district would like to support storage of the vaccine to help their EMS partners, they may do so but need to ensure they have the capability/capacity to do so.

30. Do we need to plan for the cold chain for pre-filled syringes?

Answer: This is a possibility, so please prepare for all presentation types (multidose vials, single-dose vials, and pre-filled syringes).

31. Can a closed POD plan for vaccination of targeted partners? For example, EMS vaccinating other first responders in the county.

Answer: Yes, they should be able to administer the vaccine to other public safety agencies. Please make sure the EMS service provider consults their medical director for approval and coordinate with the DPH Office of EMS.

32. When will community engagement communication strategy documents be made available to begin education?

Answer: The CDC recently released guidance that includes communication strategies. The DPH COVID-19 Planning Committee are working to develop a state plan that will include these strategies and provide as a guide to vaccination partners once finalized.

33. How much education will be given to the public prior to vaccine administration?

Answer: Our goal is to provide as much education as possible prior to the vaccines' availability. As we receive information from the CDC regarding education and

guidance, we will work with DPH Communications, our state public health partners and the districts to develop appropriate education strategies.

34. Are cold chain requirements known for each of the products yet?

Answer: We were briefed on three different parameters (but final requirements are not yet known):

- 1. Refrigerated: 2-8C**
- 2. Frozen: -20C**
- 3. Ultracold: -80C**

35. If given "free," how will we know if someone goes to another source to get the vaccine and then chooses to come to PH to receive an additional vaccine?

Answer: All vaccinations should be recorded in GRITS following administration. This will allow clinical staff to view the recipients record to determine vaccine history if this is suspected of an individual.

36. Can closed PODs get assistance with expanding cold chain capacity?

Answer: If it is a public health county/district based closed POD, yes. Please contact the Office of Immunization for further guidance. If it is a private provider, they should procure their own cold chain management.

37. How do we dispose of expired vaccine?

Answer: Continue to provide vaccine until it has reached its expiration date. If a vaccine expires, it is possible it may be returned to the manufacturer. We will provide more information regarding expired vaccines as we receive it.

38. What is the definition of "front-line workers"?

Answer: The ACIP (Advisory Committee for Immunization Practices) is meeting next week (August 26) to discuss front-line workers based on risk exposure. A link will be posted the morning of the meeting. These meetings generally begin at 8:00 AM. We will look for this link and share with our partners once available. We will also have staff attend the meeting and provide additional information once received. The link for the recording of the July meeting is below:

<https://www.cdc.gov/vaccines/acip/meetings/live-mtg-2020-07.html>

39. Where can I find information regarding liability immunity for covered persons during an emergency response event?

The [Declaration Under the Public Readiness and Emergency Preparedness Act \(PREP Act\) for Medical Countermeasures Against COVID-19](#) provides liability immunity to covered persons. The [third amendment](#) to the declaration defines "covered persons".