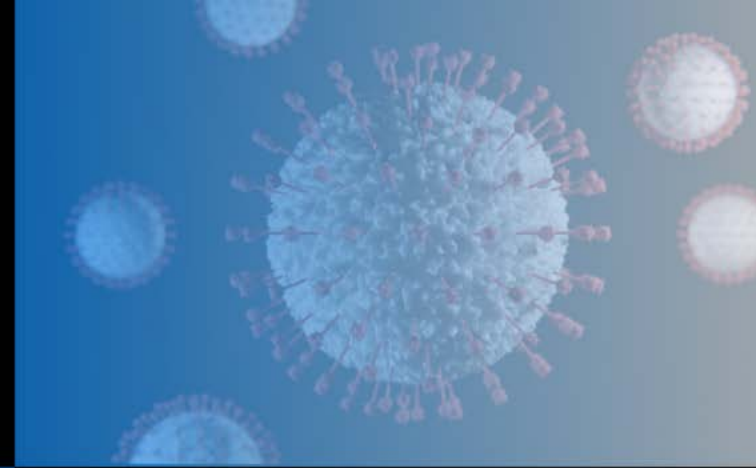


Wednesday, January 13th
@ 6pm



Oliver Brooks, MD
Watts HealthCare Corporation

COVID Conversations

Program #2
Preparing California for the COVID-19
immunizations



CALIFORNIA
IMMUNIZATION
COALITION

American
Academy of
Pediatrics
CALIFORNIA
Incorporated in California

Rob Schechter, MD

CA Department of Public Health
Immunization Branch



Welcome to COVID Conversations

- All lines are automatically muted for the duration
- Question-and-answer box can be utilized to communicate with the moderators
- Each panelist will speak for approximately 15 minutes, followed by another 15 minutes of questions
- The webinar will be recorded and posted to the California Immunization Coalition website (<https://www.immunizeca.org/>) as well as the CIC YouTube page (<https://www.youtube.com/channel/UCklkZ1SZQNQLcpmNpeQpDAg>)



GoToWebinar Platform

- All Participants will join the webinar in “listen only” mode. You should be able to hear through your computer audio – please make sure your speakers are not on mute. You should have received dial in information with your confirmation email if you need to listen by phone.
- Technical difficulties during the webinar?
 - For assistance, please visit this link: <https://support.goto.com/webinar/help/how-do-i-contact-gotowebinar-customer-support-g2w090151>
 - If you still need assistance please call: CIC at 916-414-9015 or GoTo Technical Support at: 1-(833) 851-8340



Questions for Presenters?



- To ask a question or leave a comment use the question window
- Questions will be answered after the presentations
- Additional questions may be sent to info@immunizeca.org for email response after the webinar.



The screenshot shows a webinar interface with two windows. The top window is titled 'Audio' and contains settings for 'Computer audio', 'Phone call', and 'No audio'. It also shows a 'MUTED' status, microphone and speaker selection, and a volume slider. The bottom window is titled 'Questions' and is highlighted with a red rounded rectangle. It contains a text input field with the placeholder text '[Enter a question for staff]' and a 'Send' button.



The California Immunization Coalition (CIC) is a 501(c)(3) non-profit public-private partnership dedicated to achieving and maintaining full immunization protection for all Californians to promote health and prevent serious illness, disability and death.

American Academy of Pediatrics

CALIFORNIA

Incorporated in California

- The AAP-CA is a partnership of the four local California AAP Chapters
- AAP-CA is committed to the attainment of optimal physical, mental, and social health and well-being for all infants, children, adolescents, and young adults living in California.



Future Conversations (save the date!)



- Program #3: **COVID vaccine hesitancy and combatting misinformation**
 - Monday, February 8 at NOON
 - Dr. Peter Hotez, founding dean of the National School of Tropical Medicine, Professor of Pediatrics and Molecular Virology & Microbiology at Baylor College of Medicine
- Program #4: TBD





COVID Vaccine Guiding Principles

- California's distribution of COVID-19 vaccines will be guided by the following overarching principles:
 - The vaccine meets safety requirements
 - The vaccine is distributed and administered equitably.
 - People with the highest risk of infection will get the vaccine first.
 - Community stakeholders are brought in from the outset for transparency
- A safe and effective COVID-19 vaccine will be one of the most important tools to end the COVID-19 pandemic. California will be transparent, careful, and above all, equitable in its vaccine distribution. The state will provide a COVID-19 vaccine to everyone in California who needs and requests vaccination.



Today's Hosts and Moderators



- **Dr. Pia Pannaraj**
 - Associate Professor of Pediatrics, Molecular Microbiology and Immunology, Keck School of Medicine, University Southern California
 - Director, Pediatric Immunization Advancement Laboratory, Division of Infectious Diseases, Children's Hospital Los Angeles
 - Co-Chair, Emerging Issues Committee, California Immunization Coalition



- **Dr. Eric Ball**
 - Primary Care Pediatrician, CHOC Primary Care Network
 - Board of Directors, American Academy of Pediatrics, California
 - Co-Chair, Emerging Issues Committee, California Immunization Coalition



Today's Panelists

- Dr. Oliver Brooks
 - Dr. Brooks is a present Board member and Past President of the California Immunization Coalition and Chairman of the Immunize LA Families Coalition. He is a member of the national Leadership Panel for the Adolescent Immunization Initiative (All), which advocated successfully for adding a column on the ACIP's yearly vaccine recommendations in 2017.



COVID-19 VACCINE CA ROLL-OUT

COVID CONVERSATIONS PROGRAM #2

JANUARY 13, 2021

OLIVERT. BROOKS, MD
CHIEF MEDICAL OFFICER, WATTSHEALTHCARE CORPORATION
IMMEDIATE PAST PRESIDENT, NATIONAL MEDICAL ASSOCIATION (NMA)
CHAIRMAN, IMMUNIZE LOS ANGELES (LA) FAMILIIES COALITION
PAST PRESIDENT, CA IMMUNIZATION COALITION
MEMBER, ACIP COVID-19 VACCINE WORK GROUP
CO-CHAIR, CA STATE COVID-19 VACCINE DEVELOPMENT WORK GROUP

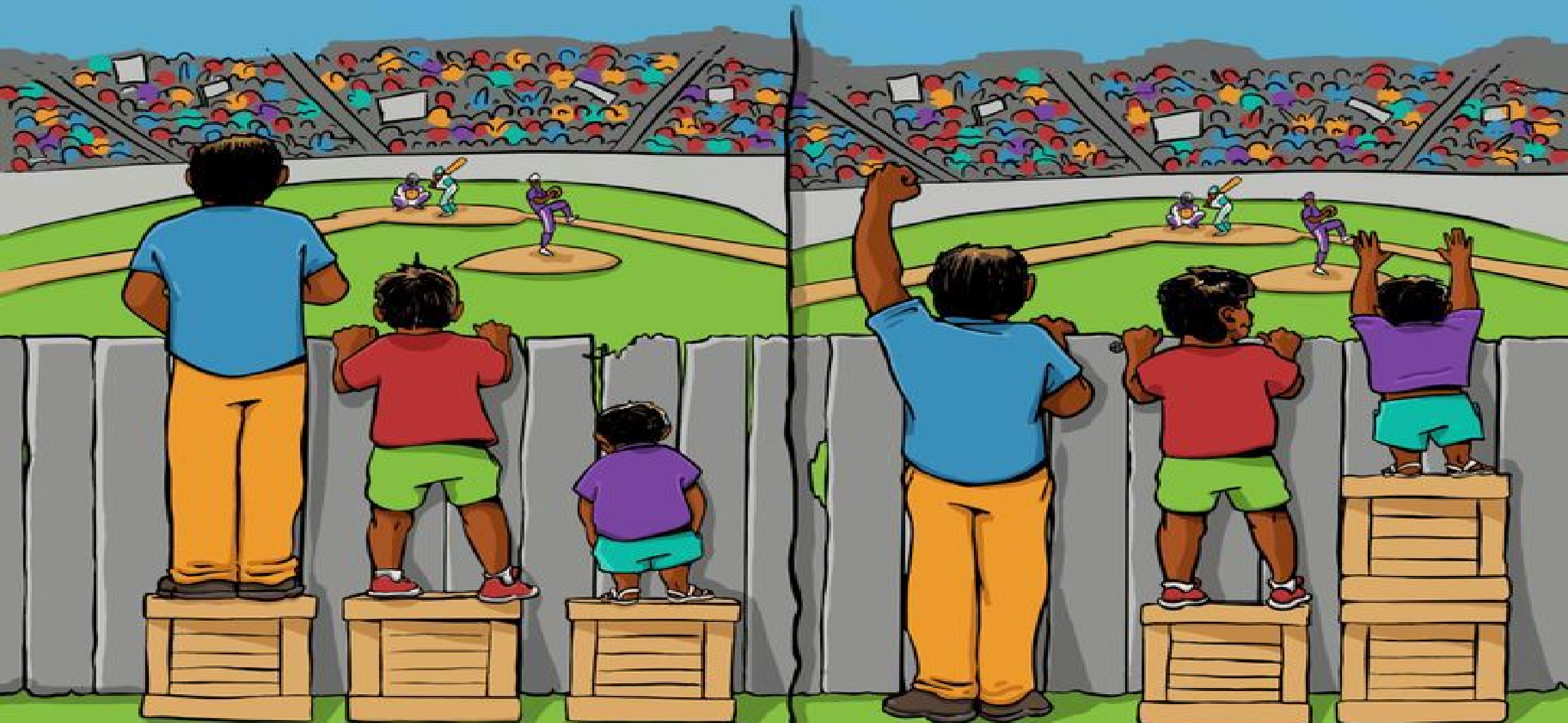
DISCLOSURES

- No conflicts in this presentation

RACIAL EQUITY¹: THE SOCIETAL CONDITIONS IN WHICH:

- The distribution of resources and opportunities is neither determined nor predicted by race, racial bias or racial ideology.
- The structures, systems, practices and cultural narratives in society provide true situational fairness and equal opportunity.
- There is a democratic commitment to dismantle the false narrative of white supremacy and address the legal, political, social, cultural and historical contributors to inequity.

1. <https://www.npesf.org/wp-content/uploads/2018/04/What-do-we-mean-by-Racial-Equity.pdf>



EQUALITY

EQUITY

DISPARITIES IN COVID-19 OUTCOMES: WHY?

- Underlying Conditions
- SDoH
- Racism

UNDERLYING CONDITIONS

CDC: UNDERLYING MEDICAL CONDITIONS THAT **ARE** AT INCREASED RISK FOR SEVERE ILLNESS FROM COVID-19 (ANY AGE) INCLUDE :

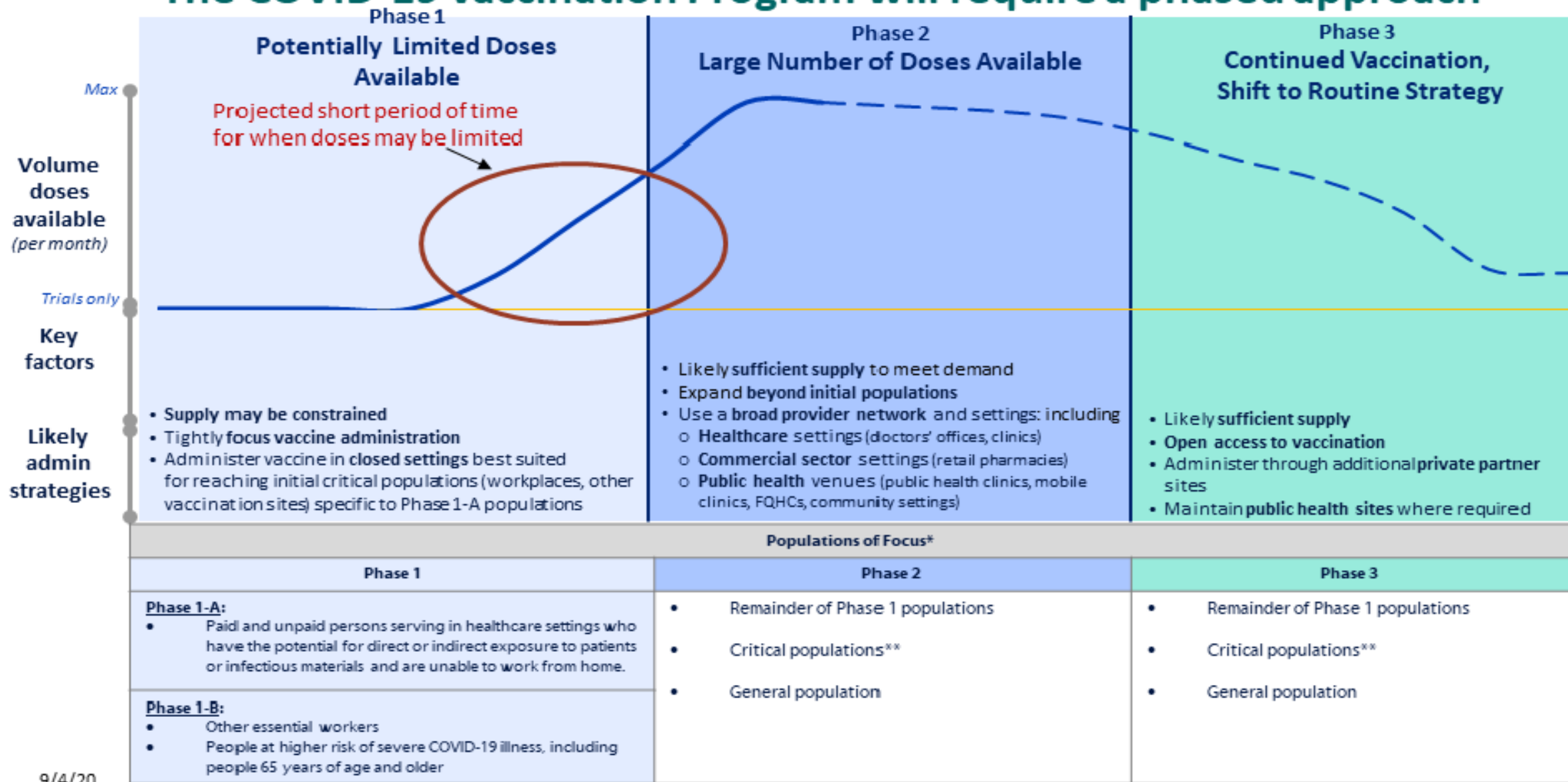
- Cancer
- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Immunocompromised state (weakened immune system) from solid organ transplant
- Obesity (body mass index [BMI] of 30 or higher)
- **Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies**
- Sickle cell disease
- Type 2 diabetes mellitus

UNDERLYING CONDITIONS:

CDC AND COVID-19 UNDERLYING CONDITIONS **MIGHT** BE AT AN INCREASED RISK FOR SEVERE ILLNESS FROM COVID-19 INCLUDE:

- Asthma (moderate-to-severe)
- Cerebrovascular disease (affects blood vessels and blood supply to the brain)
- Cystic fibrosis
- Hypertension or high blood pressure
- Immunocompromised state (weakened immune system) from blood or bone marrow transplant, immune deficiencies, HIV, use of corticosteroids, or use of other immune weakening medicines
- Neurologic conditions, such as dementia
- Liver disease
- Pregnancy
- Pulmonary fibrosis (having damaged or scarred lung tissues)
- Smoking
- Thalassemia (a type of blood disorder)
- Type 1 diabetes mellitus

The COVID-19 Vaccination Program will require a phased approach



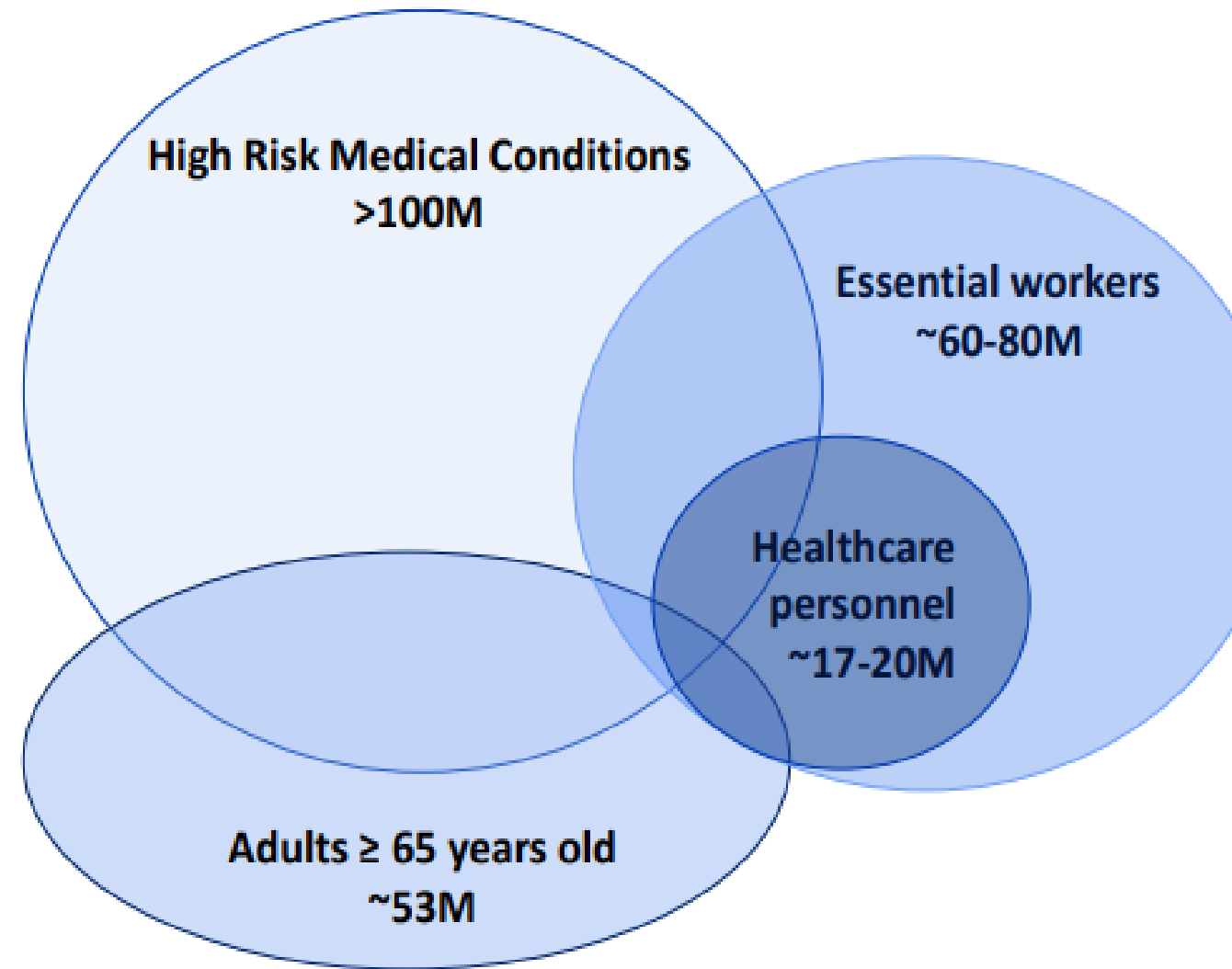
9/4/20

**Planning should consider that there may be initial age restrictions for vaccine products.*

***See Section 4: Critical Populations for information on Phase 1 subset and other critical population groups.*

Summary: Groups for early phase vaccination

- Overlapping
- Significant heterogeneity
- Accounts for > half of U.S. adults
- Need for additional sub-grouping



CALIFORNIA ESSENTIAL CRITICAL INFRASTRUCTURE SECTORS OTHER THAN HEALTH CARE AND PUBLIC HEALTH

- Food and Agriculture
- Emergency Services
- Energy
- Water and Wastewater
- Transportation and Logistics
- Communication and Information Technology
- Education and Child Care (included in Govt operations and community-based essential functions)
- Government Operations and other Community-Based Essential Functions
- Critical Manufacturing
- Financial Services
- Chemical and Hazardous Materials
- Defense Industrial Base
- Industrial, Commercial, Residential and Sheltering Facilities and Services

INDUSTRY VERSUS OCCUPATION

Industry

- Industry data shows that type of business a given job is at
- Industry data comes from administrative data reported by businesses
- Industry data is based on where they work
- Industry data is based on official unemployment insurance filings

Occupation

- The occupation data comes from a household survey
- Occupation data shows what kind of job it actually is
- Occupation data is based on where employees live
- Occupation data is based on how an employee self-identifies their work

*For instance, if a truck driver works for a lumber company, the industry is **forestry and logging**, but the occupation is **transportation**. And an accountant working for the same lumber company would have an occupation categorized as **business and financial operations**.*

CRITERIA SUGGESTED AT 11/30 CVAC MEETING BY MEMBERS

Societal impact of job (examples include)

- Necessary for survival/daily living basics/safety
- Scarcity of workers
- Parents losing jobs because no school/limited childcare (women disproportionately affected)
- Stability of safe functioning of communities
- Education of next generation
- Caring for people who cannot care for themselves

Impact on economy (examples include)

- Scarcity of workers
- Wage and price stability
- Indirect support of economy, i.e., schools, child care, families

Equity including (examples include)

- Economic necessity
- Disproportional impact on already disadvantaged communities
- Increased pressure on racial and ethnic communities
- Deepening health and educational disparities

Occupational exposure (examples include)

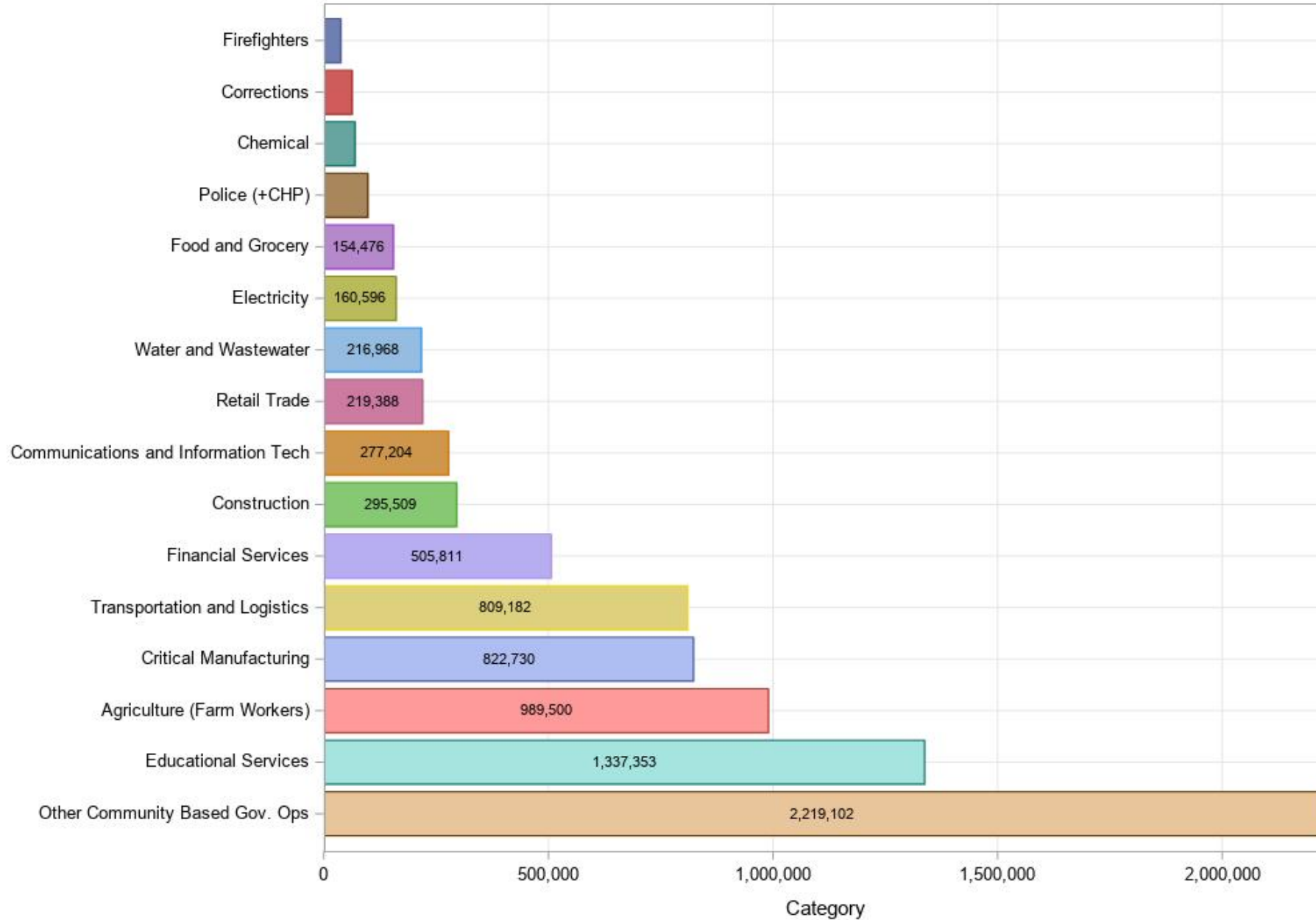
- Those unable to work from home
- Interaction with public
- Impact on other essential workers
- Risk of severe disease/death
- Likelihood to spread disease due to having to work
- Shared congregate workplace housing

Distribution of Critical Infrastructure by Group (excluding healthcare)

Total CI (excluding healthcare)=

8,274,635

Number of CI Workers



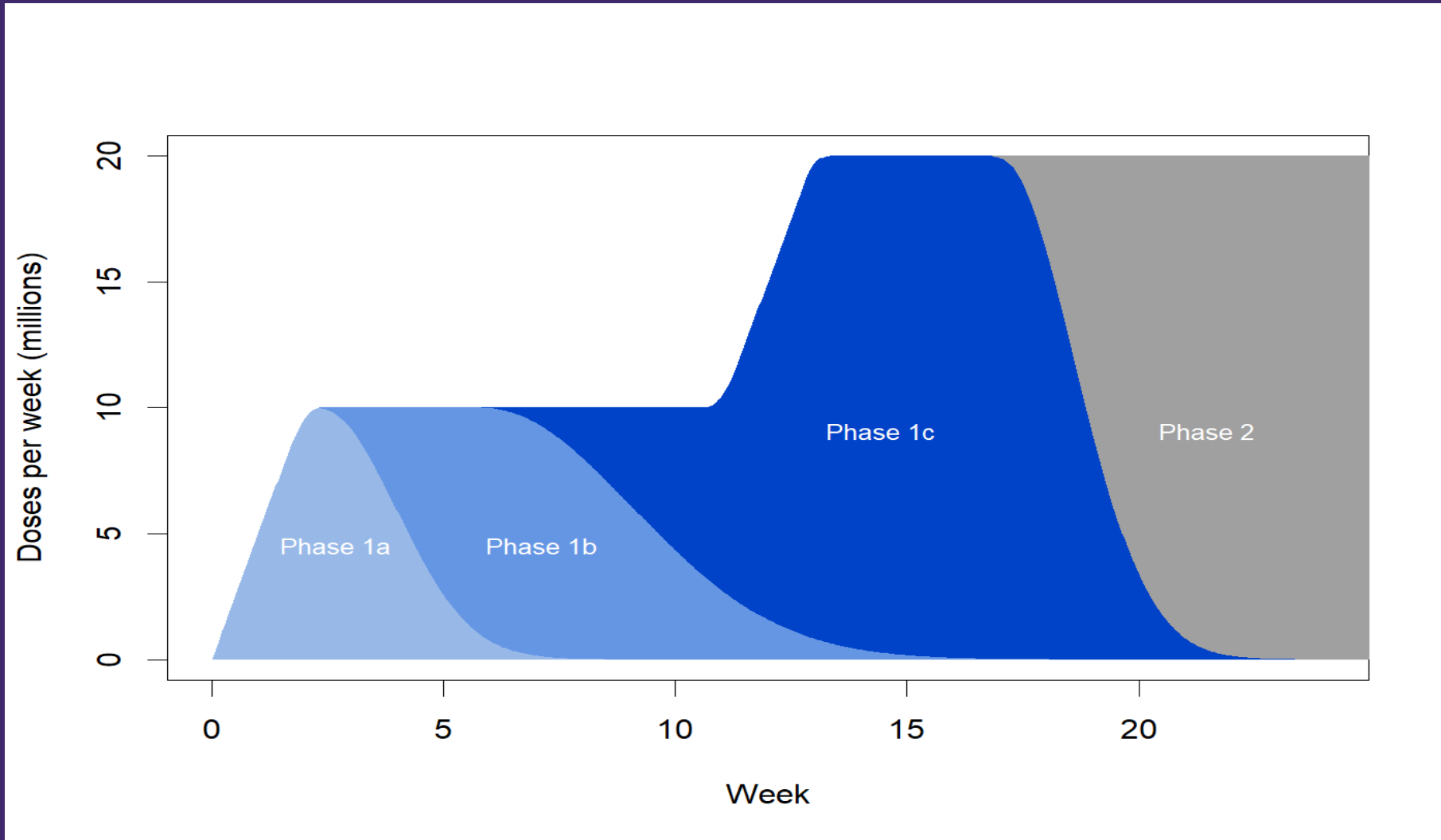
**Critical Infrastructure by
Group**

ESTIMATES INITIALLY UTILIZED FROM HHS

(PHASE 1A - ~2.5 M)

Month	New 1 st Doses (people)	Cumulative	Sufficient Doses for Phases...
December	≤ 2.5 M	≤ 2.5 M	1A
January	3.75 M	6.25 M	1B
February	6.25 M	12.5 M	1B (some 1C?)
Spring, Summer	?	?	1C and some 2

EXAMPLE OF PHASE 1 & PHASE 2 COVID-19 VACCINE ROLL-OUT



WORK GROUP CONSIDERATIONS: BALANCING GOALS

**Prevention of
Morbidity & Mortality**

**Preservation of
Societal Functioning**

1a	LTCF residents	Health care personnel
1b	Persons 75 years and older	Frontline Essential Workers
1c	Persons 65-74 years Persons 16-64 with high-risk medical conditions	Other Essential Workers

- Ensure safety and effectiveness of COVID-19 vaccines●
- Ensure equity in vaccine allocation and distribution●

PROPOSED CA STATE PHASE 1B (AS OF JAN. 12, 2021!):

1B Tier One:

- Individuals ~~75 and older~~ **65 and older**
- Those at risk of exposure at work in the following sectors:
 - Education
 - Childcare
 - Emergency services
 - Food and agriculture

1B Tier Two:

- ~~Individuals 65–74 years of age~~
- Those at risk of exposure at work in the following sectors:
 - Transportation and logistics
 - Industrial, commercial, residential, and sheltering facilities and services
 - Critical manufacturing
- Congregate settings with outbreak risk:
 - Incarcerated
 - Homeless

PROPOSED CA STATE PHASE 1C (AS OF JAN. 12, 2021!):

- Individuals 50 -64 years of age
- People 16-49 years of age and have an underlying health condition or disability which increases their risk of severe COVID-19
- Those at risk of exposure at work in the following sectors:
 - Water and wastewater
 - Defense
 - Energy
 - Chemical and hazardous materials
 - Communications and IT
 - Financial services
 - Government operations / community-based essential functions

WATTS HEALTHCARE CORPORATION EXPERIENCE

1. Enroll in COVIDReadi (CDPH)
 - Allows the entity to attest to the ability to receive, store, administer, manage potential side effects, and report accurately
2. Receive CDPH approval; LAC DPH notified
3. Enroll in PrepMod
 - Allows for documentation to the LAC DPH of activities related to administration, ordering of the vaccine, staff and public to scheduling an appointment to receive information and get vaccinated
4. Get the vaccine
5. Put together the Team to administer the vaccine
6. Prioritize the staff for allocation
7. **VACCINATE!**
8. Report to the LAC DPH
9. Order more vaccine

EXISTING SAFETY MONITORING SYSTEMS*

As people get vaccinated, CDC, FDA, and other federal partners will use the following existing, robust systems and data sources to conduct ongoing safety monitoring:

General public

- **CDC and FDA: [Vaccine Adverse Event Reporting System \(VAERS\)](#)^{external icon}** — The national system that collects reports from healthcare professionals, vaccine manufacturers, and the public of adverse events that happen after vaccination; reports of adverse events that are unexpected, appear to happen more often than expected, or have unusual patterns are followed up with specific studies
- **CDC: [Vaccine Safety Datalink \(VSD\)](#)** — A network of nine integrated healthcare organizations across the United States that conducts active surveillance and research; the system is also used to help determine whether possible side effects identified using VAERS are actually related to vaccination
- **CDC: [Clinical Immunization Safety Assessment \(CISA\) Project](#)** — A collaboration between CDC and 7 medical research centers to provide expert consultation on individual cases and conduct clinical research studies about vaccine safety
- **FDA and the Centers for Medicare and Medicaid Services: Medicare data** — A claims-based system for active surveillance and research
- **FDA: [Biologics Effectiveness and Safety System \(BEST\)](#)^{external icon}** — A system of electronic health record, administrative, and claims-based data for active surveillance and research
- **FDA: [Sentinel Initiative](#)^{external icon}** — A system of electronic health record, administrative, and claims-based data for active surveillance and research

• [* Ensuring the Safety of COVID-19 Vaccines in the United States | CDC](#)

EXISTING SAFETY MONITORING SYSTEMS (CONT'D)

Members of the military

- **Department of Defense (DOD): [DOD VAERS dataexternal icon](#)** — Adverse event reporting to VAERS for the DOD populations
- **DOD: [Vaccine Adverse Event Clinical System \(VAECS\)external icon](#)** — A system for case tracking and evaluation of adverse events following immunization in DOD and DOD-affiliated populations
- **DOD: DOD Electronic Health Record and [Defense Medical Surveillance Systemexternal icon](#)** — A system of electronic health record and administrative data for active surveillance and research

Veterans

- **Department of Veterans Affairs (VA): [VA Adverse Drug Event Reporting System \(VA ADERS\)external icon](#)** — A national reporting system for adverse events following receipt of drugs and immunizations
- **VA Electronic Health Record and Active Surveillance System** — A system of electronic health record and administrative data for active surveillance and research

Tribal nations

- **Indian Health Service (IHS): [IHS VAERS dataexternal icon](#)** — Spontaneous adverse event reporting to VAERS for populations served by IHS and Tribal facilities

EXPANDED SAFETY MONITORING SYSTEMS

The following systems and information sources add an additional layer of safety monitoring, giving CDC and FDA the ability to evaluate COVID-19 vaccine safety in real time and make sure COVID-19 vaccines are as safe as possible:

- **CDC: V-safe** — A new smartphone-based, after-vaccination health checker for people who receive COVID-19 vaccines. **V-safe** uses text messaging and web surveys from CDC to check in with vaccine recipients following COVID-19 vaccination. **V-safe** also provides second vaccine dose reminders if needed, and telephone follow up to anyone who reports medically significant (important) adverse events.
- **CDC: National Healthcare Safety Network (NHSN)** — An acute and long-term care facility monitoring system with reporting to the Vaccine Adverse Event Reporting System or VAERS that will allow for determination of COVID-19 vaccine adverse event reporting rates.
- **FDA: Other large insurer/payer databases** — A system of administrative and claims-based data for surveillance and research.

‘You will be sanctioned.’ Gavin Newsom warns against COVID-19 vaccine line-skipping--Sacramento Bee

BY ANDREW SHEELER-----DECEMBER 28, 2020 02:35 PM, UPDATED DECEMBER 29, 2020 07:15 AM

Gov. Gavin Newsom said Monday the state will enforce the order of people receiving vaccinations, issuing a warning to medical providers who may be tempted to cut a friend or relative in line to receive the shot.

“I just want to make this crystal clear: If you skip the line or you intend to skip the line, you will be sanctioned, you will lose your license,” Newsom said during a press conference. “You will not only lose your license, we will be very aggressive in terms of highlighting the reputational impacts as well.”

[COVID-19 vaccine line-skippers will be sanctioned, Newsom says | The Sacramento Bee \(sacbee.com\)](https://www.sacbee.com/news/coronavirus/article256111100.html)

ME FIRST!?

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[COVID-19 vaccine line-skippers will be sanctioned, Newsom says | The Sacramento Bee \(sacbee.com\)](#)

WELL...!



THANK YOU!





Today's Panelists

Robert Schechter, MD, MPH, FAAP



Dr. Schechter is Chief of the Immunization Branch for the California Department of Public Health (CDPH) and has been a medical officer with the CDPH since 2003. Dr. Schechter's work includes immunization program implementation and management, vaccine safety and post-marketing surveillance, vaccine communication, health information technology, immunization information systems (IIS), and vaccine research and development.



Vaccinate ALL 58

Together we can end the pandemic.

California COVID-19 Vaccine Program

COVID Conversation
January 13, 2021

Vaccines

COVID-19 Vaccine Authorization and Recommendations

Agency/Group	Date of Authorization/Recommendation	
	Pfizer-BioNTech vaccine	Moderna vaccine
Food and Drug Administration (FDA)	12/11/2020	12/18/2020
Advisory Committee on Immunization Practices (ACIP)	12/12/2020	12/20/2020
Western States Scientific Safety Review Workgroup	12/12/2020	12/20/2020

Comparing vaccines

Vaccine	Pfizer-BioNTech	Moderna
EUA: Ages for use?	16 years and older	18 years and older
Number of doses?	2 (30 µg, 0.3 mL each)	2 (100 µg, 0.5 mL each)
Days between doses?	21	28
Storage Temperature?	(-70°C)	(-20°C)
Phase III trial enrollees	43,931	30,420
Clinical trial sites in US	150 in 39 States	99 in 32 States
% Hispanic	26%	21%
% African-American	10%	10%
% Asian	5%	4%
% American Indian	1%	1%
% 65+ years of age	21%	25%
Many enrollees have: Diabetes, obesity, HIV, and lung, heart, and liver diseases, etc..		
Enrollee jobs include: healthcare workers, teachers, emergency response, transportation, etc.		

COVID-19 mRNA vaccines - Efficacy

- COVID-19 mRNA vaccines prevent COVID-19 disease
 - Pfizer-BioNTech COVID-19 vaccine is 95% effective
 - Moderna COVID-19 vaccine is 94% effective
- Vaccines seem
 - Similarly protective across age, gender, and race/ethnicity
 - To reduce risk of severe COVID-19 disease.
- More data needed - Do vaccines prevent SARS-CoV-2 virus infection:
 - That is asymptomatic?
 - That is fatal?
 - From spreading to others?
 - For how long?

Side effects of COVID-19 vaccination

Local side effects

- Pain
- Redness
- Swelling

Systemic side effects

- Fatigue
- Headache
- Muscle or joint pain
- Chills
- More common after 2nd dose

- Most side effects
 - are mild to moderate in severity
 - occur within 3 days post-vaccination
 - get better in 1-2 days
- Side effects are not harmful - just a sign that your immune system is kicking into gear.
- Other COVID-19 symptoms like cough, shortness of breath, rhinorrhea, sore throat, or loss of taste/smell have not been seen after vaccination.

Allergic Reactions Including Anaphylaxis After Receipt of the First Dose of Pfizer–BioNTech COVID–19 Vaccine — United States, December 14–23, 2020

Early Release / January 6, 2021 / 70

CDC COVID-19 Response Team; Food and Drug Administration ([View author affiliations](#))

What is added by this report?

During December 14–23, 2020, monitoring by the Vaccine Adverse Event Reporting System detected 21 cases of anaphylaxis after administration of a reported 1,893,360 first doses of the Pfizer–BioNTech COVID-19 vaccine (11.1 cases per million doses); 71% of these occurred within 15 minutes of vaccination.

<https://www.cdc.gov/mmwr/volumes/70/wr/mm7002e1.htm>

Vaccine safety monitoring systems

- **Existing** systems are used to monitor safety of vaccines after they are authorized or licensed, such as:
 - [Vaccine Adverse Event Reporting System \(VAERS\)](#)
 - [Vaccine Safety Datalink \(VSD\)](#)
 - [Clinical Immunization Safety Assessment \(CISA\)](#)
 - Other systems through the FDA, Department of Defense, Department of Veterans Affairs, Indian Health Service
- **V-safe** is a new system to monitor vaccine safety:
 - Smartphone-based, after-vaccination health checker
 - Allows someone to quickly report side effects after vaccination
 - Any clinically important events reported by a participant would be sent to VAERS for follow-up



One-dose Adenoviral Vector Vaccine - next in line for FDA review?

Johnson & Johnson Expects Vaccine Results Soon but Lags in Production

Jan. 13, 2021 Updated 5:05 p.m. ET

Johnson & Johnson expects to release critical results from its Covid-19 vaccine trial in as little as two weeks — a potential boon in the effort to protect Americans from the coronavirus — but most likely won't be able to provide as many doses this spring as it promised the federal government because of unanticipated manufacturing delays.

<https://www.nytimes.com/2021/01/13/health/covid-vaccine-johnson-johnson.html>

Study in Progress

- Ages 12-18 years
- (Pregnant Women)
- Other candidate vaccines

Federal Distribution of Vaccines

- Each week the Federal government determines how many vaccines each state will receive (allocation).
 - Federal direct recipients in CA: military, VA, IHS, few others
- Allocation to CDPH divided between:
 1. Local Health Departments (61 counties and cities)
 2. LTCFs, via federal program with CVS and Walgreens
 3. Multi-County Entities (Kaiser, Sutter, Dignity, etc.)
 4. State of California facilities

Local Health Jurisdictions Allocations

- **Local Health Jurisdictions** are responsible for determining what allocations are made at the local level.
- Each Local Health Jurisdiction works closely with approved **vaccine providers** like local hospital, clinics, etc.
- Vaccine providers offer the vaccine to **members of the public** that are prioritized, according to Federal and State guidelines
 - Ex: Phase 1A includes all our front-line health care workers

Dose Updates - VaccineDoses (ca.gov)



I am looking for



I am a



Programs



A-Z Index



[Home](#) | [Programs](#) | [Center for Infectious Diseases](#) | [Division of Communicable Disease Control](#) | [VaccineDoses](#)

COVID-19

COVID-19 Vaccine Doses Shipped

January 12, 2021

This includes doses shipped to Local Health Jurisdictions (the 58 county public health department and 3 city public health departments) and large health systems or state departments that span multiple counties (multi-county entities)

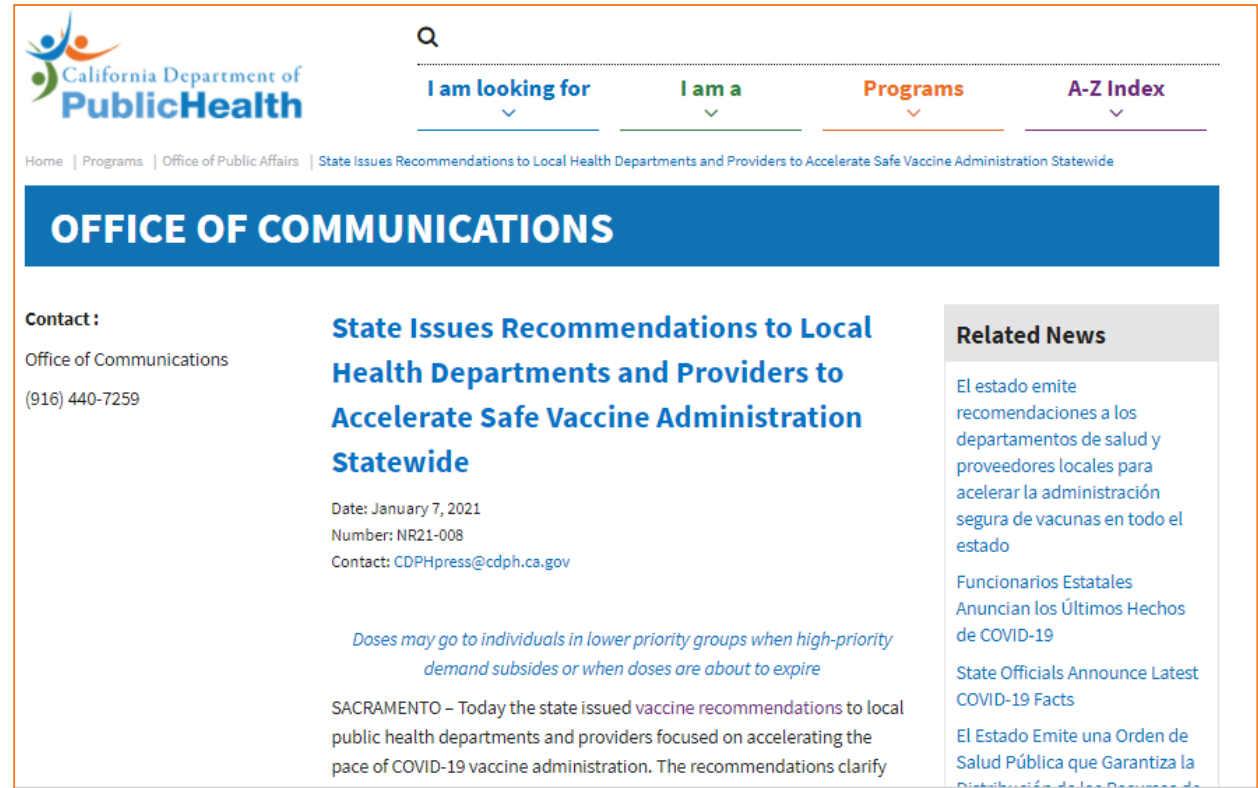
As of January 11, a total of 816,673 vaccine doses have been administered statewide. As of January 11, a total of 2,466,125 vaccine doses, which includes the first and second dose, have been shipped to local health departments and health care systems that have facilities in multiple counties.

Vaccinate All 58 – Vaccine Eligibility

Currently: Phase 1A

- ✓ healthcare workers &
- ✓ long-term care residents

Vaccinating all Tiers



The screenshot shows the California Department of Public Health website. At the top, there is a navigation bar with the department's logo and links for "I am looking for", "I am a", "Programs", and "A-Z Index". Below this is a breadcrumb trail: "Home | Programs | Office of Public Affairs | State Issues Recommendations to Local Health Departments and Providers to Accelerate Safe Vaccine Administration Statewide". The main heading is "OFFICE OF COMMUNICATIONS". The content area features a press release titled "State Issues Recommendations to Local Health Departments and Providers to Accelerate Safe Vaccine Administration Statewide", dated January 7, 2021. The release states that the state issued vaccine recommendations to local public health departments and providers to accelerate the pace of COVID-19 vaccine administration. A sidebar on the right titled "Related News" lists several articles, including "El estado emite recomendaciones a los departamentos de salud y proveedores locales para acelerar la administración segura de vacunas en todo el estado" and "Funcionarios Estatales Anuncian los Últimos Hechos de COVID-19".

*To maximize vaccine administration and reduce the potential for waste, local health departments and providers should immediately administer COVID-19 vaccines to individuals in **all tiers of Phase 1a**. In addition to frontline health care workers, this includes a wide range of people in health care settings such as community health care workers, public health field staff, primary care clinics, specialty clinics, laboratory workers, dental clinics and pharmacy staff.*

COVID-19 Vaccine Provider Enrollment

Call Center Questions

- When and where can I get vaccinated? Which tier am I in?
- When can we enroll?
 - PLEASE WAIT if not yet invited by your local health department
 - New CalVax system on line shortly
- Vaccine shipping - info and shipping incidents
- Second doses
- Transfer/redistribution questions
- I want to be a vaccinator/volunteer
- Please visit <https://eziz.org/covid/>

Requirements on Federal Provider Agreement

- Administering COVID-19 vaccine per ACIP recommendations.
- Report doses to registry (e.g. CAIR2, Healthy Futures or SDIR) within 24 hours of vaccine administration.
- Not selling or seeking reimbursement for COVID-19 vaccine and any supplies provided by the federal government.
- Administering COVID-19 vaccine regardless of the vaccine recipient's ability to pay.
- Providing an EUA fact sheet or VIS prior to vaccination.

Requirements on Federal Provider Agreement

- Complying with CDC requirements for vaccine management, including storage and handling, temperature monitoring at all times, complying with CDPH policies for dealing with temperature excursions, and monitoring expiration dates.
- Reporting supplies that are unused, spoiled, expired, or wasted.
- Proper disposal of unused COVID-19 vaccine and adjuvant.
- Reporting adverse events to VAERS.
- Providing a completed COVID-19 vaccination record to every vaccine recipient/parent/legal representative.
- Complying with the U.S. Food and Drug Administration's requirements, including EUA-related requirements, if applicable. Providers must also administer COVID-19 vaccine in compliance with all applicable state and territorial vaccine laws.

Provider Resources on EZIZ - <https://eziz.org/covid/>



ENHANCED BY Google

A one-stop shop for immunization training and resources.

Home

Vaccine Programs

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Contact VFC

Phone: 1-877-243-8832

Business hours:

Monday - Thursday: 9 am – 4:30 pm

Friday: 9 am – 4 pm

Fax: 1-877-329-9832

► Find a VFC field

COVID-19 Vaccine

Program

Enrollment

Management

Administration

Reporting

Communications

Clinical Care

California COVID-19 Vaccination Program

Resources

- [Guide to Other COVID-19 Vaccine Related Websites](#)
- [COVID-19 Vaccination Program Information](#)
- [COVID-19 Vaccination Program: FAQs for Providers](#)

COVID-19 Call Center

Email: covidcallcenter@cdph.ca.gov

Phone: (833) 502-1245

Monday through Friday from 9 am–5 pm.

 Vaccinate
ALL 58

64

Keep up to date with important communications

COVID-19 Vaccine

Program	Enrollment	Management	Administration
Reporting	Communications	Clinical Care	

Archived Communications

California COVID-19 Vaccination Program

- [Allocations, Moderna Webinar and Temperature Monitoring](#) January 5
- [Updated Guidance mRNA Vaccine and Pfizer Trainings](#) January 4
- [Redistribution Guidance for Moderna Vaccine, Returning Vaccine Shippers, Minimizing Wasted Doses, and Info About Vaccine Finder](#) December 30
- [New Vaccine Management System \(CalVax\) Coming Early 2021](#) December 29
- [COCA Call: Allergic Reactions, Contraindications and Precautions](#) December 24
- [Microsite, Temperature Excursions and Job Aids](#) December 24
- [Account for Additional Doses of COVID-19 Vaccine](#) December 24
- [Tips for Redistributing COVID-19 Vaccine](#) December 22
- [Updated information about VaccineFinder](#) December 21
- [Pfizer Vaccine: Reminders, training sessions & resources](#) December 21
- [Moderna Vaccine Resources](#) December 21
- [Moderna Vaccine Delivery](#) December 18
- [Pfizer COVID-19 Vaccines Guidance letter](#) December 18
- [Pfizer COVID-19 Vaccine: 6-7 Doses per Vial](#) December 17
- [Free Pfizer COVID-19 Vaccine Training Webinars: Thu & Fri only](#) December 16
- [COVID-19 Vaccine Provider Training](#) December 16
- [Provider Enrollment to PrepMod](#) December 15
- [Vaccine Redistribution Guidance](#) December 9

California COVID-19 Vaccination Program Update

Vaccine Allocations & Limited Supply

Local health departments are allocating Pfizer and Moderna doses to providers as they become available. Vaccine brand is selected based on provider storage capacities. At this stage in the COVID-19 vaccine distribution, vaccine supply is still limited. Providers will receive a notification from noreply@agreeya.com once vaccine allocations are approved. A second notification of order processing will alert providers to expect vaccine shipments within 24-48 hours of the notice.

Temperature Monitoring with Controlant

Please remember to read and respond to the Controlant email upon receipt of Pfizer vaccine. If you will store vaccine in thermal shippers, activate continued temperature monitoring of the shipping container. If you will store vaccine in an ultra-low freezer, please communicate that you will not need Controlant to monitor thermal shipper temperatures to avoid false alarms.

Moderna Webinars for Health Care Providers

Today Moderna [announced](#) that interim safety and primary efficacy results from the Phase 3 trial of the Moderna COVID-19 Vaccine (mRNA-1273) were published in the [New England Journal of Medicine](#). Additionally, Moderna is hosting a webinar for health care providers this month about the vaccine:

- January 14 at 11:00 AM ET | [Register](#)

Monitoring Storage Unit Temperatures

Storage unit temperatures must be checked and recorded twice daily to help prevent the loss of vaccines and the potential need for revaccination of patients. Any out-of-range temperatures must be documented and immediately reported. First complete the [Report Temperature Excursion Worksheet](#) to gather the information the vaccine manufacturer will need to determine whether doses may be administered. Then contact the manufacturer and report the excursion and stability determination to the COVID Call Center using the [Report Temperature Excursion e-form](#). (See [Reporting Temperature Excursions](#) for additional guidance.)

Public Call Centers

State:

- 1-833-422-4255
- <https://covid19.ca.gov/vaccines/>

Local Health Departments

Questions?

Extras

Eligibility Determination

“When and where do I get my vaccine?”

- Eligibility determination resources:
 - Online tool-in development
- User-friendly information for the public to determine if they are eligible to receive the vaccine
- List of occupations in phases is large:
 - <https://covid19.ca.gov/essential-workforce/>
- Examples:
 - Personal care assistants/attendants=healthcare sector=Phase 1a
 - Farmworker=food and agriculture=Phase 1b, Tier 1



Evaluation

- At the end of this webinar an Evaluation will pop up on your screen.
- The evaluation should take approximately 5 minutes to complete.
- CIC utilizes the evaluation from our COVID Conversations to guide us in future endeavors as well as sharing the performance with our panelists.

COVID Conversations Program #3

Monday, February 8th 12:00 pm – 1:00 pm (pst)

**Register
Today!**

Monday, February 8th
@ Noon

COVID Conversations

Program #3
Preparing California for the COVID-19
immunizations

Peter Hotez, MD
Baylor College of Medicine



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Academy of
Pediatrics
CALIFORNIA
Incorporated in California

Register here:

<https://attendee.gotowebinar.com/register/7577326574841979152>

Featured Speaker:

Peter Hotez, MD,

Professor of Pediatrics and Molecular
Virology & Microbiology at Baylor College of
Medicine



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Pediatrics
CALIFORNIA
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Thank you for your support and your participation!

www.ImmunizeCA.org/Covid-19-Updates