Vaccine Playbook for Public-Private Partnerships

MARCH 2021

VERSION
1.0

Table of Contents

Table of Contents (continued)

Table of Contents (continued)

March 15, 2021

Due to COVID-19, our state, like all governments around the world, has been tested in our ability and resilience in responding to a once-in-a-lifetime crisis.

I am proud of how our state has worked across all sectors, including the incredible resiliency of our more than 7 million residents, to combat the coronavirus.
Last year, our public health efforts were focused on detection, testing, surveillance, tracing and treating citizens suffering from COVID-19. Now, under the strong leadership of Dr. Umair Shah and our dedicated Department of Health colleagues, we are scaling up our statewide efforts to achieve mass vaccination of Washingtonians equitably.

The private sector has been a great partner throughout the pandemic. I am proud of our partnership with Challenge Seattle and a host of other private sector partners, including unions, businesses, and the healthcare system, in establishing the Vaccine Action Command and Coordination System (VACCS) Center in January to support Dr. Shah and the Department of Health in our mass vaccination efforts.

It is exciting to see Challenge Seattle publishing some of the early fruits of the VACCS Center public-private partnership reflected in the Playbook. I hope the playbook will aid organizations across Washington and other states looking for guidance that reflects lessons learned and best practices. Replicating what we've done in Washington will help more entities stand up vaccination sites in an efficient and replicable way. I also hope the background on how our VACCS Center operates may aid other public sector players see one example of how to efficiently standup a public- private partnership to harness the great resources and innovation of the private sector in supporting the public sector achieve mass vaccination.

It has been said throughout the pandemic that we are in this together. This playbook is another way for us to get out of this together.

Very truly yours,

Governor

On February 29th, 2020, the first known COVID-19 related death in the United States was reported in Washington State.

As Governor Jay Inslee and the Department of Health took action to protect the health and safety of Washingtonians, Challenge Seattle members and the broader business community felt the imperative to provide support. We communicated daily with business leaders across the state providing the science, data, experts, and decision makers to make available the best and timely information to employees. Together, we stood up our first public-private partnership that helped secure PPE for frontline workers, address shortages in food supply, and activate the philanthropic network of AllInWA to address unmet needs brought on by the COVID-19 crisis.

In December 2020, the first vaccine against COVID-19 received FDA approval, and Washington State prepared to add this critical tool to our fight against the virus.

On January 18, 2021 Governor Jay Inslee announced the creation of a public-private partnership to ready the state for a mass vaccination program. At the direction of the Governor and with the support of Challenge Seattle and other business leaders, the Department of Health established the Vaccine Command & Coordination Center System (VACCS) Center and named Dan Laster as Director.

The Center brings expertise and personnel from the private sector on a voluntary basis to address necessary work including technology, communications, business processes, supply logistics and deployment to support Secretary Umair Shah and his Department of Health team.

At the same time, we partnered with King County Public Health because it is home to the largest county population in the state. We work daily to ensure equity, increase accessibility, improve transparency, and create a better vaccine experience for Washingtonians.

These partnerships are committed to sharing our experiences with others with the goal of achieving optimum immunity in Washington State, the United States, and beyond.

That is why in coordination with the VACCS Center, our private partners, and the Department of Health, Challenge Seattle has compiled the Vaccine Playbook for Public-Private Partnerships, based on the Center for Disease Control and Prevention's interim Playbook for jurisdiction operations released in October 2020.

This Playbook serves as a non-exhaustive resource for those seeking best practices from the public-private partnerships we have established with our state and counties in Washington State.

Whether you are a state, public health agency, private company, community NGO or others, we hope this Playbook helps you in our collective effort to vaccinate all.

Sincerely,

Chris Gregoire
Chief Executive Officer
Challenge Seattle

The COVID-19 Vaccine Action Command and Coordination System (VACCS) Center is delighted that Challenge Seattle is publishing the Playbook for Partnered Vaccine Programs. This guide is designed to aid organizations who wish to move quickly to stand up a vaccination site or would like background on setting up a public-private partnership to aid mass vaccination efforts.

The VACCS Center was established to harness the incredible resources, capabilities, and innovations of the private sector in Washington State and to partner with the Department of Health (DOH) with the goal of achieving mass vaccination of Washingtonians in a safe, fast, equitable, and efficient manner. The Center serves to coordinate the state, private sector partners, and local health jurisdictions to scale up vaccination.

Our guiding principles are to "do no harm" to ongoing efforts of the State Department of Health and other players in the vaccine ecosystem, to surface the needs and identify the challenges facing DOH and other public entities, to curate the volunteer offerings of the private sector, and create extraordinary partnerships that help the administration of vaccine. Through the Center's workstreams we solve problems, communicate with the public regarding vaccine safety and access in order to increase vaccine demand, and work to improve the experience of Washingtonians receiving vaccine. All with a focus on doing so equitably.

Our private sector partners have played a key role in establishing and improving vaccination sites throughout Washington.

In one instance, within four days of DOH standing up a state-run mass vaccination site, private sector partners visited the site, analyzed and modeled through-put efficiency and patient experience, and were ultimately able to identify solutions to increase through-put by over 30%. This Playbook serves as another example of the beneficial outcomes of our public-private partnership.

The Playbook includes valuable lessons learned by public and private partners involved in setting up numerous vaccination sites. It is a non-exhaustive guide, based upon experiences in Washington state, designed to aid any group seeking to set up—or improve an existing—vaccination site. While the playbook is quite extensive in coverage to assist in setting up large vaccination sites, the insights shared may also be of use to partners in rural settings where site size and circumstances may vary.

Extraordinary things happen when the public and private sectors come together to serve all the people.

Best,

Dan Laster
Director
Washington State COVID-19 Vaccine Action Command and Coordination System (VACCS) Center

About the VACCS Center

► The Washington Covid-19 Vaccine Action Command and Coordination System (VACCS) Center has been established to support comprehensive access to mass vaccinations across the state of Washington in the safest, fastest, most equitable and efficient means possible. Through Public-Private partnerships **the Center supports the Department of Health** by innovating and delivering solutions that address this critical need for and with our community. **All Public-Private partnership efforts are strictly on a volunteer basis,** compliant with Washington State and Department of Health guidelines and will serve under the direction of Washington State and Department of Health.

Principles of the VACCS Center

1 – **Help** public sector surface needs and challenges

2 – **Identify** private sector resources and expertise

3 – **Translate** between public and private sectors

4 – **Match** public sector needs with private sector capabilities

5 – **Develop** work streams with public and private sector leads

6 – **Facilitate** problem solving to reach pragmatic, innovative solutions

Goal: *Vaccination with **Equity, Safety, Speed,** and **Efficiency.***

VACCS Center Structure

Department of Health

Governor's Office

Surface needs & challenges

VACCS Center

Under the leadership of the Director, the VACCS team matches public sector needs with private sector offerings, creating partnered solutions.

Private Sector Partners

Curate offerings

VACCS Center Workstreams: *Created as needed fit for purpose.*

| Technology & Data | Communications | Business Processes | Supply & Logistics Deployment | Situational Awareness |

Workstream Example

Technology & Data

Public Sector Lead:
Department of Health

Private Sector Partner:
Microsoft

Project Example

Enhancing DOH Vaccine Locator tool to improve daylighting of vaccine appointments across the state.

Project Example

Creating next generation chatbot with AI to answer vaccine questions and provide accurate guidance on demand for the public via the DOH website.

Project Example

Ongoing improvements to DOH vaccine allocation tool used weekly to make complex supply allocations to providers.

Workstream Example

Communications

Public Sector Lead:
Department of Health

Private Sector Partner:
Starbucks

Project Example

Providing communication resources to DOH through Challenge Seattle partners.

Project Example

Adding Amazon Connect capability to Call Center to increase both capacity and assistance in scheduling appointments.

Project Example

Developing PSA video for use during 15-minute post vaccination observation period.

Workstream Example

Business Processes

Public Sector Lead:
Department of Health

Private Sector Partner:
Starbucks

Project Example

Analyzing state mass vaccination sites using private sector experts to make recommendations for increasing efficiency and throughput.

Workstream Example

Supply & Logistics Deployment

Public Sector Lead: Department of Health

Private Sector Partner: Kaiser Permanente

Project Example

Convening three expert organizations together to enhance DOH supply planning.

Project Example

Partnering with DOH to surface and meet resource needs of local health jurisdictions to reach mass vaccination goals.
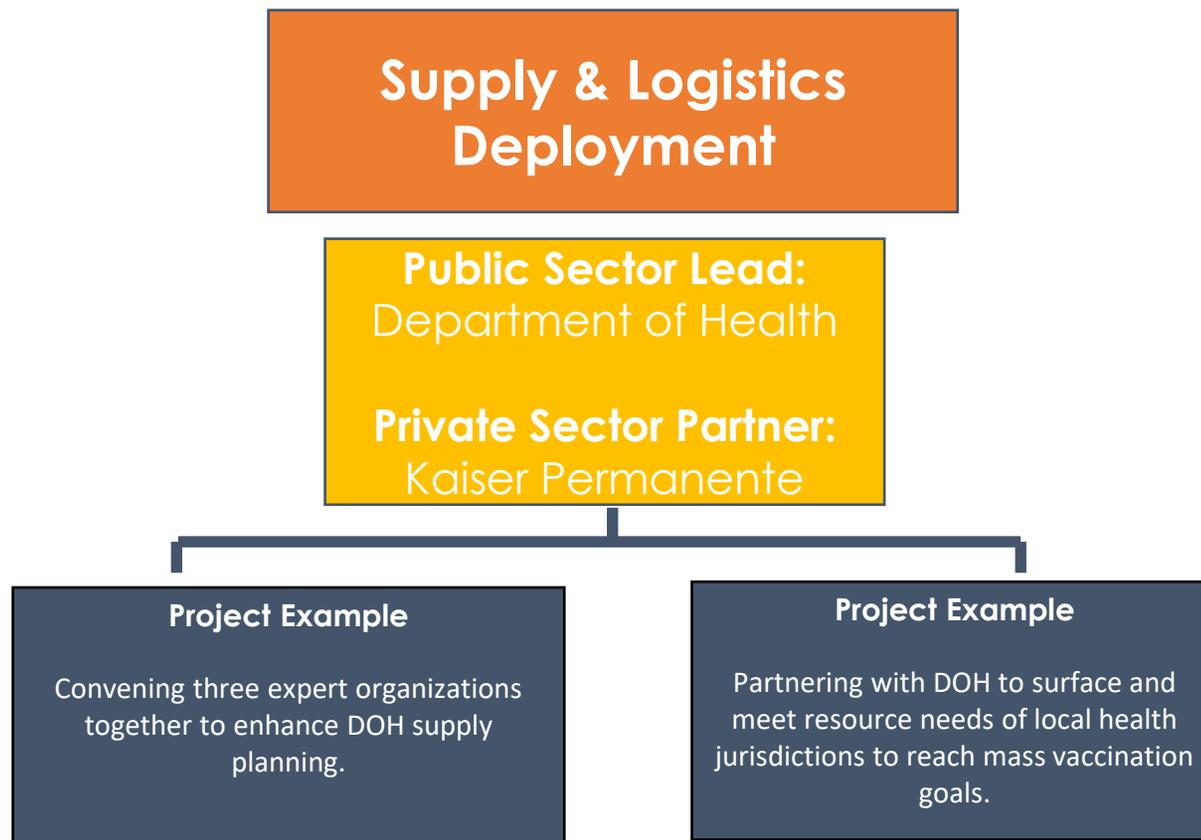
Workstream Example

Situational Awareness

Public Sector Lead:
Department of Health

Private Sector Partner:
Microsoft

Project Example

Utilizing private sector data experts to provide ongoing review of data dashboards used by DOH and state leadership with the goal of identifying improvements to aid in decision making.

About the King County COVID-19 Public-Private Partnership

The King County COVID-19 Public-Private Partnership Response Structure was established to support **equitable, efficient and rapid access to vaccinations** delivered to King County residents through public-private partnerships via a range of vaccination modalities. Participation in King County Vaccine Public-Private partnerships are **voluntary and do not involve remuneration.** All public-private vaccination partnerships are **under the direction of Public Health's vaccination strategy** and are fully compliant with King County's vaccination **equity principles**.

Principles of the King County COVID-19 Public-Private Partnership

1 – **Help** public sector identify resource and implementation gaps

2 – **Identify** private sector resources, capabilities, and willingness to help

3 – **Translate and Match** public sector needs with private sector capabilities

4 – **Facilitate** problem solving for rapid, pragmatic, innovative solutions

5 – **Share and Spread** standardized best practices

6 – **Coordinate** with state, cities and other public entities in King County

7 – **Report** measurable outcomes and progress against goals

Goal: Equitably, efficiently and rapidly vaccinate 70%+ of the adult King County population.

KC Public-Private Partnership Structure

King County Public Health

Identify needs & challenges

Public-Private Partnership Response
Under the leadership of the Chief, develop partnership strategies
Match public resource gaps with private solutions
Create partnerships

Private Sector Partners

Curate offerings

KC Public-Private Partnership Workstreams: *Identified by need on a case-by-case specific basis.*

Communications	IT & Data	Mobile Outreach	Community Pop-Ups	High Volume/Mass Vaccination Sites

Leading with Equity

The Washington State Department of Health, Seattle-King County Public Health, the VACCS Center, Challenge Seattle members, and all entities who are part of the public-private partnership have committed to prioritizing equitable vaccine distribution.

The work of our partnership is guided by the equity principles and frameworks of the Washington State Department of Health and Seattle-King County Public Health. In all instances, our partnered vaccine sites strive to support the equitable vaccination efforts of the State of Washington by creating welcoming, compassionate, and culturally responsive vaccination sites for all Washingtonians.

What Vaccine Equity Looks Like

- **Acknowledging** that COVID-19 has had disproportionate impacts on specific populations based on race and ethnicity, age and geography.

- Being **intentional** in reaching communities most impacted by COVID-19 with vaccine by prioritizing those who are high risk and most impacted.

- Using data to **prioritize** vaccine distribution and siting of high volume and pop-up clinics in areas with the highest incidence of disease and working closely with safety net providers who specialize in serving vulnerable communities.

Source: Seattle-King County Public Health

In the next few pages, we aim to share best practices and strategies to ensure equitable vaccine distribution based on the principles and lessons learned by our public and private sector partners.

A complete list of Washington State Department of Health approved strategies and Seattle-King County Public Health principles can be found in the appendix.

Best Practices (1 of 4)

Getting Started	Think about the individuals coming to your vaccination clinic. What is their experience before, during, and after their visit? Be intentional about the experience you are creating – it should be welcoming, reassuring and easy. *Who is coming?* Who are the individuals the site will serve and what unique needs do they have around accessibility or education about the vaccine? What social or cultural norms inform their visit? Create a clinic experience with their needs in mind. *How are they feeling when they come?* People coming to get vaccinated may be a little apprehensive, anxious, and hopeful. Create an experience that helps reduce anxiety, increases calm, and inspires confidence.
Accessibility	Locate vaccination sites near public transportation and work with partners to secure ride service for older adults, people with disabilities, people who are homebound, or others for whom transportation to the site is a barrier. Ensure that high volume vaccination sites are fully ADA compliant, have plain language and accessible signage, and are easy to navigate and comfortable for people of all abilities, with access to restrooms and drinking water. Deploy mobile vaccine teams for individuals who are homebound or otherwise unable to easily travel to a health clinic, pharmacy or site. *Source: Seattle-King County Public Health*

Best Practices (2 of 4)

Language access	From early planning, language access should be prioritized, including the availability of in-person and phone interpreters. Consider the languages most spoken in the target geography and prioritize translation and interpretation for those languages, and when possible, offer materials in the most common spoken languages. Identify staff onsite that speak multiple languages and create badges that show that they have multiple language capability. Make sure there is a point at the check-in for an interpreter in addition to a family member. When setting up the vaccination site think about going through the site as a non-English speaker – what does that perspective/practice show you? *Sources: Seattle-King County Public Health*
Communication	Keep communication simple and clear. Focus on experiential priorities to help ensure an efficient and effective patient journey and provide accessible guidance throughout the vaccination process.
Work with community	Invest in and coordinate with trusted, community-based leaders, messengers and organizations. Provide all necessary information to enable these trusted messengers to provide early notification of registration opportunities and other necessary support for people to successfully complete their vaccination. *Sources: Seattle-King County Public Health and Washington State Department of Health*

Best Practices (3 of 4)

Locations and hours	Ensure appointment availability outside of regular business hours, including weekends and evenings. Work closely with community organizations to inform siting of high-volume sites and pop-up clinics and to identify other points of delivery and providers that are known and trusted by community. Set up vaccine clinics in places that are safe, familiar, and accessible. *Source: Seattle-King County Public Health, Washington State Department of Health*
Registration and scheduling	Ensure that appointment and registration systems are simple to use , easy to understand, available in multiple languages, and accessible for people with disabilities. When possible, require the least amount of personal information up front. Recognize that technology dependent systems will create a barrier for many due to the digital divide. When possible, guarantee personal assistance by phone. Registration systems should allow for purposeful early or special access for highest risk and disadvantaged groups to ensure appointment slots are not all filled via online registration methods. Ensure an opportunity to schedule a second dose in person – either during check-in or at the end of the process – with the help of an interpreter in addition to a family member. Make sure to set aside space and time for this. *Source: Seattle-King County Public Health*
Signage	Customize the production of signage based on the needs of the patients accessing the site. Customize language, logos, and specific instructions as needed to create a welcoming and seamless experience

Best Practices (4 of 4)

Providing vaccine regardless of immigration or healthcare status	Ensure that immigration status is not a barrier to receiving a vaccine. If your state or jurisdiction requires proof of eligibility, be clear on what it is for and what the information will be used for – i.e., checking identification name spelling or date of birth, or employer documentation confirming essential worker status. *Source: Seattle-King County Public Health*
Multi-Modal Vaccine Delivery	Embrace a multi-modal COVID-19 vaccine delivery strategy that seeks to move as efficiently and quickly as possible to meet people where they are, builds trust, and allows for the highest level of convenience and access. The major delivery mechanisms include: Hospitals and health care systems • Community health centers • Pharmacies • Employer-based vaccination clinics • High-volume community vaccination sites • Mobile vaccination teams • Community-based pop-up vaccination clinics *Source: Seattle-King County Public Health*
Don't let efficiency be a barrier to equity	Create an experience that is informed by the needs of those in underserved communities. Put equity at the center of design and planning. Efficiency should never come at the expense of an equitable patient experience.

This playbook is designed to guide you through the beginning-to-end operations of a fixed venue vaccination site. Using a scalable Point of Dispensing (POD) design, we've created a flexible system that can be adjusted to suit the physical limitations of your site while keeping patients and staff safe and comfortable.

How To Use This Playbook

Upon arriving at the site, patients will be guided through four stations: Health Check, Registration, Vaccination and Observation. Required roles for clinical staff are outlined on the following pages, along with sample site layouts, org charts and procedure guides.

Best Practices

- Export to PDF (to view on phone).
- Print in BLACK and WHITE.
- Roles & Responsibilities could be printed on color paper for easier color-coding distinction.
- Station Procedures specific to a role are linked in the individual Roles & Responsibilities.
- Text in color RED are areas for customization.

Environmental Flow Chart

The following slides include example POD layout including process flow, as well as models for determining space requirements and throughput metrics. All models are based on several assumptions and will vary based on accessibility and patient experience considerations.

A throughput calculator for modeling and venue planning can be found in the appendix.

Patient Steps Overview

- Queue #1: Health screen
- Queue #2: Registration
- Queue #3: Vaccination station
- Observation area
- Exit

Site Considerations

- Patient flow should only be in one direction.
- Vaccination stations and observation area chairs need to be set up as properly distanced (at least 6 feet).
- Refrigerator and backup refrigerator are easily accessible and monitored for temperature to store vaccines.
- Multiple locations set up with sanitation supplies (hand sanitizer and Clorox wipes).
- Emergency area near exit and equipped with adequate materials for EMS support if needed.
- Additional filtration (portable HEPA units)
- Thermal screening or temperature readings upon entry
- ADA compliant, including accessible parking
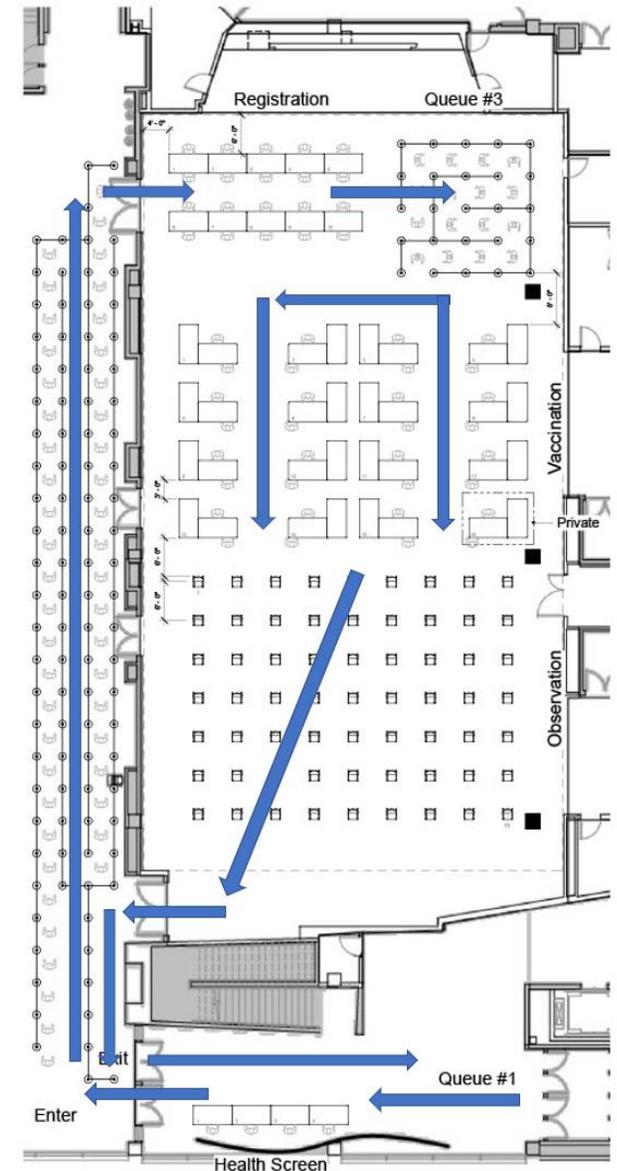
Space Requirements and Assumptions

Use the table below to estimate space requirements in a fixed venue. Use Column K as a starting point based on your total square footage. Note, spacing may vary due to accessibility or patient experience considerations. Space estimates reflect 6' social distancing for patients at all times.

POD UNITS			PER FACILITY		PER POD					PER FACILITY
A	B	C	D	E	F	G	H	I	J	K
# PODs (1 pod = 16 stations)	Size	Stations / PODS A x 16	Parking Spaces / Hr.	Health Screen Stations / Area	Queue 2 Size People / Area	Registration Stations / Area	Queue 3 Size People / Area	Vaccination Station Area	Observation Chairs / Area	Total Minimum Suggested Area
0.25	Micro	4	55	1 / 25ft²	16 / 500ft²	2 + 1 / 210ft²	4 / 100ft²	500ft²	16 / 840ft²	2,175ft²
0.5	Micro	8	108	2 / 50ft²	33 / 1,000ft²	4 + 1 / 350ft²	8 / 200ft²	1,000ft²	32 / 1,680ft²	4,280ft²
1	Small	16	215	4 / 100ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	8,660ft²
2	Small	16	429	6 / 200ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	17,120ft²
3	Medium	16	644	8 / 300ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	25,680ft²
4	Medium	16	858	10 / 400ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	34,240ft²
5	Large	16	966	12 / 450ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	42,750ft²
6	Large	16	1073	14 / 500ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	51,260ft²
7	Large	16	1502	16 / 550ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	59,770ft²
8	Mega	16	1716	18 / 600ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	68,280ft²
9	Mega	16	1931	20 / 650ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	76,790ft²
10	Mega	16	2145	22 / 700ft²	66 / 2,000ft²	8 + 2 / 700ft²	16 / 400ft²	2,000ft²	63 / 3,360ft²	85,300ft²

Assumptions

- Transportation modes are defined as 80% automobile (with 5% carpool rate), 15% public transit (train, bus), and 5% walk-up/drop-off.
- To promote accessibility, if parking spaces (Column D) is smaller than total square footage, you will need to adjust POD size to match parking availability.
- Parking calculations do not include parking for staff.

- Health screen is centralized and feeds pods. Space/arrival rate should be maintained at 20ft² per patient.
- Registration stations require 1 help desk per 4 registration stations. Minimum of 1 help desk per POD.

- Circulation and emergency egress is not accounted for in the total area requirement. This should be assessed on a per-site basis.
- In addition to space, building occupancy should be assessed to include both patients and staff.

6. Site Layout

Throughput Matrix and Assumptions

Based on your spacing requirements on the previous page, use the table below to evaluate throughput metrics. This information will vary based on your vaccination rate (consult your vaccinator or clinical advisor), accessibility and patient experience considerations. Generally, you will need three observation chairs per each vaccination station.

POD UNITS			PATIENT THROUGHPUT					
A	B	C	D	E	F	G	H	I
# PODs 1 pod =16 stations	Size	Stations / PODS	Patients / Station	Total Stations PODS	Patients / Station / Hr. 4/min avg	Vaccinations / Hr. (avg.)	Vaccinations / Hr. @ 90% Utilization	Vaccinations / (8-Hr. Day)
		A x 16		A x C		E x F	G x 90%	H x 8
0.25	Micro	4	1	4	14	55	50	396
0.5	Micro	8	1	8	14	110	99	792
1	Small	16	1	16	14	220	198	1584
2	Small	16	1	32	14	440	396	3168
3	Medium	16	1	48	14	660	594	4752
4	Medium	16	1	64	14	880	792	6336
5	Large	16	1	80	14	1100	990	7920
6	Large	16	1	96	14	1320	1188	9504
7	Large	16	1	112	14	1540	1386	11088
8	Mega	16	1	128	14	1760	1584	12672
9	Mega	16	1	144	14	1980	1782	14256
10	Mega	16	1	160	14	2200	1980	15840

Assumptions

- Single POD design can support an arrival rate of 4 patients per minute which when modeled, yielded 220 vaccinated patients per hour.
- Scaling PODs from 1 to 10 assumes patients throughout scales linearly with each additional POD.

- (4) health screen stations at ECP at rate of 15–30 seconds per patient.
- (10) registration stations at a rate of 1–2 minutes per patient.
    - (8) standard stations
    - (2) help desk stations

Station	#	Observed Time
Health Check In	½ of registration	30 seconds
Registration	½ of vaccination	60 seconds
Vaccination	Observed at 4 min.	240 seconds
Observation	4x vaccination	15 min.

Staffing Org Structure

```
                    ┌─────────────────────────────────────────────┐
                    │   Clinical Operations Director and/or Site Lead  │
                    └─────────────────────────────────────────────┘
```

Clinical Practice Supervisor ✳

Pharmacist Supervisor ✳

Non-Clinical Supervisor

Medical Interpreter

Provider Supervisor

Facilities Liaison Supervisor

Vaccinator *(16)* ✳

Observer Lead ✳

Data Entry *(16)*

Observer *(2)* ✳

EMS / AMR *(2)* ✳

Resource *(3)* ✳

Vaccinator Lead ✳

Vaccine Prep *(6)* ✳

Vaccine Supply Prep *(3)*

Registration Lead

POD Manager

Entry Control Point Lead

Onsite Tech Lead

Registration *(9)*

Clinical Registration Support *(1)* ✳

ECP *(4)*

Way Finder *(21)*

Onsite Appointment Support

Network / IT Support

Managing Site and Storage

EVS

Parking / Traffic Control

Security

* Director, Supervisor and Lead = one per rectangle

✳ *Clinical Staff*

Numbers listed under the role correspond to 1 POD. Multiply or divide to suit the number of POD units at your site.

Staffing Requirements Example (1 of 3)

	License / Qualifications	Priority Role Assignments	Possible Role Assignments
Non-Clinical Roles	Any Non-Clinical Staff	[Insert Priority Role – e.g., Way Finder Lead. N/A if none.]	• ECP Staff • Way Finder Staff • Way Finder Lead • Vaccine Supply Prep
	Any Non-Clinical Staff with Computer Skills	[Insert Priority Role – e.g., IIS Lead. N/A if none.]	• IIS Lead (Tech Lead) • IIS Entry (Data Entry) • Registration Lead • Register
	Designee – Non-Clinical *Local Knowledge of Resources and Processes at Facility Site*	[Insert Priority Role – e.g., Non-Clinical Supervisor. N/A if none.]	• Non-Clinical Supervisor

Staffing Requirements Example (2 of 3)

	License / Qualifications	Priority Role Assignments	Possible Role Assignments
Clinical Roles	Designee – Clinical	[Insert Priority Role – e.g., Clinical Operations Director]	• Clinical Operations Director • Clinical Practice Supervisor
	Registered Nurse (RN)	Vaccinator	• Vaccinator • Observer Lead • Observer • Resource (Runner, Breaks, Observer, etc.) • Vaccinator Lead • Vaccine Prep • Clinical Registration Support
	Licensed Practical Nurse (LPN)	[Insert Priority Role – e.g., Vaccinator]	• Vaccinator • Resource (Runner, Breaks, Observer, etc.) • Vaccine Prep • Clinical Registration Support
	Medical Assistant – Verified (MA-C)	[Insert Priority Role – e.g., Vaccinator]	• Vaccinator • Resource (Runner, Breaks, Observer, etc.) • Vaccine Prep • Clinical Registration Support

Staffing Requirements Example (3 of 3)

	License / Qualifications	Priority Role Assignments	Possible Role Assignments
Clinical Roles *(continued)*	Doctor of Pharmacy (Pharm.D)	[Insert Priority Role – e.g., Vaccinator]	• Vaccinator • Pharmacist • Clinical Registration Support
	Licensed Independent Practitioner (LIP)	[Insert Priority Role – e.g., Vaccinator]	• Vaccinator • Observer Lead • Observer • Resource (Runner, Breaks, Observer, etc.) • Vaccinator Lead • Provider
	Emergency Medical Services (EMS)	[Insert Priority Role – e.g., Observer]	• Observer • Observer Lead
	Emergency Medical Technician (EMT)	[Insert Priority Role – e.g., EMS / AMR]	• EMS / AMR

Roles & Responsibilities by Station

Jobs with the red asterisk are CLINICAL ROLES

Registration Roles
- Registration Lead
- Registration Troubleshooter
- Registration Staff
- Clinical Registration Support

Vaccination Roles
- Pharmacist
- Vaccine Supply Staff
- Vaccine Prep
- Vaccinator Lead
- Vaccinator
- Runner

Observation Roles
- Observer Lead
- Observer
- EMA & AMR

Operational Roles
- ECP & Way Finder Lead
- Entry Control Point Staff
- Way Finder
- Clinical Operations Director
- Site Lead
- Clinical Practice Supervisor
- Provider
- Non-Clinical Supervisor
- Clinical Resource
- Facilities Liaison
- Staff Lead
- Interpreter
- POD Manager
- Onsite Tech Lead
- Onsite Appointment Support
- Data Entry

Registration Lead

Schedule	• On-site 45 minutes before and after open hours.
Responsibilities	• Ensures stations are set up with laptops for each Registration Staff, and sanitization items including disinfectant wipes, hand sanitizer and goggles. • Checks and adjusts each station as needed. • Verifies patient information, helps solve registration issues and provides next steps in the registration process.
Lead Process	**Step 1:** Ensure stations are set up for success to maximize patient flow. **Step 2:** Direct Registration Staff to their stations and resources. **Step 3:** Observe and ensure safety expectations (social distancing and sanitization) are maintained. **Step 4:** Approve new appointment exceptions to be added to schedule. **Step 5:** Ensure patients are supported by staff regarding registration issues.

*Please also refer to **How To Troubleshoot a Patient** and **How To Register A Patient** Station Procedures on **pages 71-72***

Registration Troubleshooter

Schedule	• On-site 45 minutes before and after open hours.
Station Responsibilities	• Keeps station sanitized and organized throughout shift. • Ensures disinfectant wipes and hand sanitizer are available. • [Insert text – e.g., Ensure Video Remote Interpreter (VRI) Station is set up.] • Verifies patient information, helps solve registration issues and provides next steps.
Troubleshooting Process	**Step 1:** Assist patients who cannot be found in the system [Insert text – e.g., patient tab] by the registrars. **Step 2:** For approval in adding patients to the schedule escalate to Registration Lead. **Step 3:** [Insert text – e.g., if approved, add patient to the schedule for appointment either today or a future time slot, depending on availability.] **Step 4:** Assist patients with language assistance needs [Insert text – e.g., audio and visual interpreter services) using e.g., the Video Remote Interpreter (VRI) system.]

*Please also refer to **How To Troubleshoot A Patient** Station Procedure on **page 71***

Registration Staff

Schedule	• On-site 45 minutes before and after open hours.
Station Responsibilities	• Keeps station sanitized and organized throughout shift. • Ensures disinfectant wipes and hand sanitizer are available. • Ensures station has Vaccine FAQ sheets available (EUAs) and cues [Insert Text – e.g., to indicate when station is available for next patient.] • Verifies patient information, helps solve registration and provides next steps in the process.
Registration (Check-In) Process	Step 1: Ask a patient for photo ID and review DOH Intake Form; provide form to patients as needed. Note: If you identify a communication barrier, direct patient to the language assistance table. Step 2: Uses How to Register a Patient Station Procedure at station. Step 3: Verify appointment date and time are correct in system. Step 4: Ask if patient has reviewed Vaccine FAQs. If not, provide a copy for patient to review. Step 5: Ask patient if they are receiving their first or second dose and ensure needed dose type matches what is available at clinic today (dose and manufacturer). Step 6: After patient is checked in, direct them to a Way Finder who will guide them to the vaccination room. Prepare for next patient.

STATION PROCEDURE

*Please also refer to **How To Register A Patient** Station Procedure on **page 72***

Clinical Registration Support

Schedule	• Expected to be present on-site 45 minutes before open and after hours.
Responsibilities	• Works in partnership with Registration Troubleshooters to answer any medical and clinical questions that patients may have at the registration station.

Please also refer to **How To Troubleshoot A Patient Station Procedure on **page 71***

Pharmacist

Qualifications	• Pharm.D. (Doctor of Pharmacy)
Schedule	• Present on-site preparing vaccines for open hours. • On-site 45 minutes before and after open hours.

Responsibilities	• Collaborates with the Clinical Practice Supervisor during clinic hours to ensure optimal operations of vaccine preparation and management.
	• Provides oversight of vaccine preparation and management.
	• Manages flow of vaccines.
	• Maintains a working knowledge of how many vaccines are on the floor, the amount being made and how many people waiting for the vaccine.
	• Manages supplies needed:
	   o Sharps containers
	   o Vaccines
	   o Vaccine preparation supplies
	   o Epinephrine for IM

Vaccine Supply Staff

Schedule	• On-site 45 minutes before and after open hours.
Responsibilities	• Clinical or non-clinical position. • Reports to Pharmacist. • Ensures Vaccine Prep clinical staff have a steady supply of syringe kits.

Vaccine Prep

Schedule	• Expected to be present on-site 45 minutes before and 15 minutes after open hours.
Responsibilities	• Prepares vaccine using correct procedure from manufacturer. • Distributes vaccination, maintaining appropriate chain of custody. • Monitors for potential medication waste (including expiration) and escalates as necessary to prevent waste. • Assists and supports vaccinator, monitors for supplies, etc. • This role may flex to support medication supply preparation as needed. • Write expiration time (1 hour) on label if NOT drawn up at the vaccinator table.

Vaccinator Lead

Schedule	• Expected to be present on-site 45 minutes before and 15 minutes after open hours.
Responsibilities	• Reports to the Clinical Practice Supervisor.
	• Manages breaks for Vaccinators and Data Entry Staff.
	• Provides oversight of Vaccinators and workflow of this portion of the clinic.
	• Responsible for the safety of medication preparation.
	• Distributes vaccination, maintaining appropriate chain of custody.
	• Near the end of clinic, works with the Pharmacist and Clinical Practice Supervisor to ensure no vaccine is wasted.

Vaccinator

Schedule	• Expected to be present on-site 45 minutes before and 15 minutes after open hours.
Responsibilities	• Completes CDC Vaccination Record card legibly. • Screens for appropriateness to receive vaccine. Escalates questions or concerns to Clinical Practice Supervisor or LIP. • Confirms if this is the first or second dose. Note: If second dose, ensure that the vaccine being administered today matches what the patient needs. • Administers the COVID-19 vaccine using correct intramuscular injection technique (Deltoid). • Directs patient to Observation Area when IIS data entry is completed. • Ensures patient has V-Safe information. • May fill other roles if needed. • [Insert text – e.g., Video Remote Interpreter station (recommended to provide guide for equipment use).]

Runner

Schedule	• Expected to be present on-site 45 minutes before and 15 minutes after open hours.
Responsibilities	• Ensures sufficient supplies at each station. • Coordinates between Pharmacist and Vaccinators, running appropriate vaccination dose between the two stations.

Observer Lead

Schedule	• On-site in clinic 45 minutes before and after open hours.

Responsibilities	• Reports to the Clinical Practice Supervisor.
	• Supports and manages EMS and Observers with concerns or issues that arise in the Observation Area of the clinic.
	• May provide additional support to EMS and Observers when responding to adverse patient reactions post-vaccination.
	• Understands the steps in the patient observation and response process outlined in the Observer Roles & Responsibilities.
	• Manages breaks of staff stationed in Observation Area.
	• Maintains oversight workflow of the observation portion of the clinic.
	• Ensures supplies are available:
	    ○ Dynamap/Vitals Sign machine 2x
	    ○ Wheelchair 2x
	    ○ Epinephrine/Anaphylaxis kit (from EMS)
	    ○ Hand sanitizer

Observer

Schedule	• On-site in clinic 45 minutes before and after open hours.
Responsibilities	• Works in partnership with EMS to observe and respond to patient post-vaccination reactions, following EMS protocol for responding to anaphylaxis, and notifies Clinical Operations Director and/or Clinical Practice Supervisor.
	• Monitors patients for signs of vaccination reactions, including itchiness, angioedema and shortness of breath, and escalates concerns immediately.
	• Advises patients to rest for 15 minutes if no history of a prior adverse reaction; additional 15 minutes if needed.
	• Identifies and follows procedures to respond to patients with adverse reaction symptoms that require intervention.
	• Enters a record of any adverse reaction that requires intervention [Insert text – e.g., via QR Code provided]

EMS (Emergency Medical Services) & AMR

Schedule	• On-site 45 minutes before and after open hours.

Responsibilities	• Works in partnership with Observers to monitor patients for adverse post-vaccination reactions.
	• Provides support to patients who experience adverse post-vaccination reactions.
	• Advises patients to rest post-vaccine:
	    ○ 15 minutes for patients with no history of prior reaction
	    ○ 30 minutes for patients with history of prior reaction, or as needed
	• Communicates with Clinical Operations Director and Observer Lead on any issues.
	• Informs Observer Lead when taking breaks to ensure adequate coverage.

Entry Control Point (ECP) & Way Finder Lead

Schedule	• On-site 45 minutes before and after open hours.
Responsibilities	• Ensures patients have a safe and easy experience navigating the site. • Supports patients in escalating issues that are beyond basic ECP procedures. • Uses **Entry Control Point Quick Station Procedure** and **Way Finder Location and Routines Station Procedure** at stations. • Ensures Health Screening, Registration, Vaccination and Observation Stations are set up with necessary supplies. • Ensures ECP staff understand procedures. • Supports Non-Clinical Lead with supply distribution (if needed). • Observes and ensures social distancing and sanitization are maintained. • Escalates issues to Non-Clinical Supervisor.

Please also refer to **Covid-19 Symptoms List and **Entry Control Point** and **Way Finder Location & Routines** Station Procedures on **pages 77-78***

Entry Control Point Staff

Schedule	• On-site 45 minutes before and after open hours.
Responsibilities	• Ensures patients have a safe and easy experience navigating the site • Uses **Entry Control Point Station Procedure** at entry control point station. • Screens all persons entering the vaccination clinic to ensure they are free of COVID-19 symptoms to prevent risk of accidental transmission of COVID-19. • Ensures all persons review COVID-19 symptom list and attest that they are free of COVID-19 symptoms (see **Entry Control Point Station Procedure**). • Ask all persons entering to have their temperature taken with no-touch thermometer; use no-touch thermometer to take their temperature. • If cleared to enter, provide the individual a mask (if needed) and [sticker or other identifying marker that the patient has been cleared to enter.] • If patient or anyone entering requires assistance beyond basic ECP procedures, immediately escalate to ECP & Way Finder Lead or Non-Clinical Lead.

*Please also refer to **Covid-19 Symptoms List** and **Entry Control Point** Station Procedures on **pages 76-77***

Way Finder

Schedule	• On-site 45 minutes before and after open hours.
Responsibilities	• Ensures patients have a safe and easy experience navigating the site. • Understands location of supplies and can restock as needed. • Understands where to direct or escort patients if they would benefit from communication assistance such as translation services. • Uses **Way Finder Station Procedure** at the station. • Observes and ensures safety expectations (social distancing and sanitization) are maintained. • Helps those getting vaccinated find their way. • Distributes clipboards and pens with DOH Intake Form to patients. • Instructs patients to complete form in line prior to vaccination. • Cleans and sanitizes clipboards, pens and surfaces after each use.

Please also refer to **Way Finder Location & Routines Station Procedure on **page 78***

Clinical Operations Director

Schedule	• Expected to be present on-site in clinic during open hours; 60 minutes before and after clinic hours.

Responsibilities	• Is responsible for the operations of the clinic.
	• Huddles with staff to outline what is expected for the day.
	• Coordinates with other leads to ensure efficient workflow.
	   o Makes in-the-moment decisions to resolve "bottlenecks" and pinch points.
	• Assists with pre-training local resources and ensures high level of understanding for all roles and processes.
	• Works closely with Clinical Practice Supervisor to ensure best practices.
	• Supports issue resolution and escalation.
	• Supervises physical space preparation prior to clinic opening and cleanup at close of clinic.
	• Works with Clinical Practice Supervisor to manage staff and real-time resources and supplies as needed.
	• Ensures adverse reactions are managed appropriately.
	   o If EMS is transporting, have LIP in Observation Room.
	• Reviews playbook and roles prior to each clinic day for workflow changes; reports any need for changes.
	• Responsible for reporting all issues appropriately.
	• [Insert text – e.g., Responsible for decision-making regarding alibi dosing.]

Site Lead

Schedule	• On-site during all operating hours
Responsibilities	• Oversee overall coordination between partners onsite. • Manage daily schedule for overall site, including establishing daily agenda • Lead overall site meetings • Coordinate overall strategy and direction of site • Customer facing point of escalation • Track and manage outstanding deliverables/issues for site

*Please also refer to
Preparing for the Day
*and **How to Check-In Staff***
*on **page 73-75***

Clinical Practice Supervisor

Schedule	• Expected to be present on-site in clinic during open hours; 60 minutes before and after clinic hours.

Responsibilities	• Works under the direction of the Clinical Operations Director.
	• Manages and deploys clinical staff to stations.
	    o Ensures staff are present.
	    o Assigns roles; adjusts when needed.
	    o Knows all clinical roles.
	    o Facilitates huddles and just-in-time training.
	    o Manages breaks.
	• Helps with supply management at each station.
	• Has a working knowledge of vaccine inventory management: how many vaccines are on the floor, how many are being made, and how many people are waiting for the vaccine.
	• Works with Supply [Insert role – e.g., Pharmacist] to ensure enough supply for the day and the next clinic shift.
	• Works with Staffing [Insert role – e.g., Clinical Operations Director] to ensure staffing is adequate for next clinic (if needed).
	• Ensures all goggles, vests and other surfaces are cleaned and sanitized at the end of shift.
	• Documents reactions and needle sticks appropriately.

Provider

Schedule	• On-site 45 minutes before and after open hours.
Responsibilities	• Reports to the Clinical Operations Director and the Clinical Practice Supervisor. • Supports various roles in the clinic as assigned by the Clinical Practice Supervisor. • Uses station procedures provided for role assigned. • Responds to provider-level questions, concerns, and issues involving patients and staff. • Duties as assigned.

Non-Clinical Supervisor

Schedule	• On-site 45 minutes before and after open hours.
Responsibilities	• Collaborates with the Clinical Operations Director during clinic hours to ensure optimal operations. • Partners with IT Lead to ensure hardware and network readiness (scanners, laptops, etc.). • Oversees technical operational functions including, but not limited to, computers, database, document control, way finding and site coordination. • Ensures correct processes are being followed. • Trains and educates staff. • Answers questions; resolves and escalates issues as needed • Provides database issue resolution and escalation. • Manages laptops/security – storage if needed. • Able to troubleshoot IIS issues.

Clinical Resource

Schedule	• On-site in 45 minutes before and after open hours.

Responsibilities	• Reports to the Clinical Operations Director and the Clinical Practice Supervisor.
	
	• Uses **Station Procedures** and provided supporting guides for role assigned.
	
	• Flexes to support various roles including, but not limited to, Vaccinator and/or Observer as needed.
	
	• Ensures staff are provided breaks and lunches as needed.
	
	• Any additional duties as assigned.
	
	• Serves as a greeter outside (as needed):
	
	   o Welcomes patients and shares which vaccine is available that day.
	
	   o Empowered to connect with incoming patients and share: "If you are experiencing any signs and symptoms of COVID or are running a fever let me know; we will get you another vaccine time."
	
	   o Shares current wait times with patients (if available).
	
	   o Encourages incoming patients to read the EUA (Emergency Use Authorization), which contains information about the vaccine being offered today, including ingredients.

Facilities Liaison

Schedule	• Expected to be present/available on-site during open hours 45–60 minutes before and after clinic hours.

Responsibilities	• Collaborates with the Clinical Operations Director to ensure operational success of the clinic.
	
	• Manages physical space:
	   o Secured area (unlocks in a.m.; locks in p.m.)
	   o Environment/Custodian Services
	   o Wi-Fi issues; IT support
	   o Security
	   o Entry control point
	   o Setup/takedown
	
	• Supports Way Finder with parking and traffic control as needed. As the size of the venue grows, flow of vehicle traffic becomes increasingly important. Preparing a traffic and parking plan is advised, with a focus on accessibility and wayfinding.
	
	• Manages storage and receipt of supplies.
	
	• Supports issues during clinic hours of operation.
	
	• Supports additional accommodations that may be needed at the site

*Please also refer to **Way Finder Location & Routines** on page 78*

Staff Lead

Schedule	• On-site 60 minutes before and after open hours.
Responsibilities	• Validates, checks and adjusts staff schedules and collaborates with other leads to support any identified scheduling gaps.
	• Uses the **Preparing for the Day Station Procedure** provided at the station.
	• Checks in on staff utilizing the **How to Check-In Staff Station Procedure** provided at the station.
	• Downloads staff roster for the upcoming shift (hard copy), for backup and reference.
	• Logs in and opens [insert text here] database to review staff list and ensure there are no gaps in the schedule.
	• If gaps in schedule are determined, coordinates with other leads to determine what help is needed. Coordinates with Clinical Practice Supervisor if Vaccinator role needs to be filled.
	• Runs and prints list of individuals who are listed for upcoming shifts and need background checks run at the event and [Insert text - e.g., Runs background checks.]
	• Posts Entry Control Point for Staff before clinic/site opens and ensures all staff have checked in, background checks have been completed, and supplies are distributed and collected at the end of shift.
	• [Insert text - e.g., Supports background check process if needed and collects forms at vetting station.]

Please also refer to
Preparing for the Day
and **How to Check-In Staff**
*on **page 73-75***

Medical Interpreter

Schedule	• On-site all operating hours.
Responsibilities	• Provide medical interpretation (certification required) • Choose top languages for zip codes • Facilitate phone or online medical interpretation software for languages not spoken by onsite interpreter • Assist in observation room when not providing interpretation services

*Please also refer to
Preparing for the Day
*and **How to Check-In Staff***
*on **page 73-75***

POD Manager

Schedule	• On-site during all operating hours of POD.
Responsibilities	• Oversee coordination across partners within POD and serve as primary point of escalation within the Pod for issues that arise with vaccine guests or when workflows break. • Conduct daily stand up sessions; coordinate and aggregate staffing needs for Pod • Oversee appointments and bookings; • Understand and support (but not manage) dose allocation; • coordinate with Pod leads on Pod operations; • coordinate with overall site leader • serve as audit/tracking of errors/missteps within POD; • track and manage outstanding deliverables/issues specific to POD.

STATION PROCEDURE

Please also refer to ***Preparing for the Day*** *and* ***How to Check-In Staff*** *on* ***page 73-75***

Onsite Tech Lead

Schedule	• On-site all operating hours.
Responsibilities	• Ensure access is correctly provisioned based on roles and responsibilities • Conduct regular checks on data quality (correct vaccination lots in system, data matches doses used, D1/D2 recorded correctly, correctly formatted for upload into government immunization information system) • Troubleshoot issues throughout data • Identify and flag additional needed functionality in tech solution • Coordinate near-term solutions or workarounds in the event of tech outages

Onsite Appointment Support

Schedule	• On-site all operating hours
Responsibilities	• Ensure all devices are up and running prior to each shift • Aid guests that require assistance to schedule dose 2 appointments after receiving first dose • Provide Operational Support for scheduling/patient issues • Ability to edit and change appointments • Ensure changes to scheduling tool/technology are functional on first day of new updates • Train staff on any updates to scheduling tool or onsite technology

Data Entry Staff

Schedule	• On-site 45 minutes before and after open hours.
Responsibilities	• Detail-oriented data entry at the vaccination station, as well as document control to ensure patient's information is accurately captured and stored securely. • Follows **How to Use the IIS Entry System** and **How to Troubleshoot Common Issues in IIS Station Procedures.** • Attends a 45-minute training session. • Collects documents from customer. • Enters demographic data. • Enters vaccine administration data. • Escalates concerns appropriately.

Station & Operational Procedures

What this section covers:

Registration Procedures

- How to Troubleshoot a Patient in [Insert System Name Here]
- How to Register a Patient in [Insert System Name Here]

Operational Procedures

- Preparing for the Day
- How to Check-In Staff
- COVID-19 Symptoms List
- Entry Control Point
- Way Finder Location & Routines

STATION PROCEDURE

How to Troubleshoot a Patient in [Insert System Name Here]

GUIDE FOR:

- Registration Lead
- Registration Troubleshooter

PURPOSE:

Use these procedures to navigate the [registration program] and to assist locating patient information that cannot be found by the Registration Staff.

Step by Step

1. Open [Insert text.]

2. Once logged in [Insert text.]
- [Insert text.]
- [Insert text.]

3. Use patient's photo ID to [Insert text.]
- [Insert text]

4. On the patient's profile [Insert text.]
- [Insert text.]
- [Insert text.]

5. [Insert text.]

Note: At the end of your shift, please log out of the registration system and wipe down your computer and station using disinfectant wipes.

Placeholder only – add relevant screenshot

1. Caption

Placeholder only – add relevant screenshot

2. Caption

Placeholder only – add relevant screenshot

3. Caption

Placeholder only – add relevant screenshot
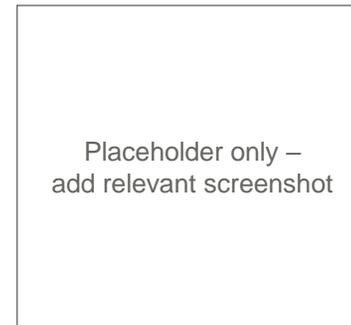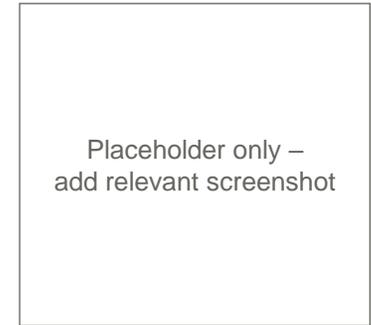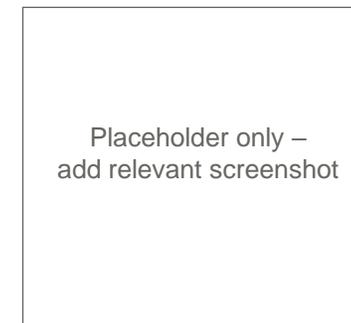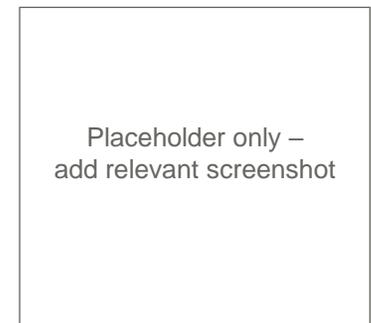
4. Caption

STATION PROCEDURE

How to Register a Patient in [Insert System Name Here]

GUIDE FOR:

• Registration Staff

PURPOSE:

Use these procedures to navigate the [registration program] and search for patient information.

Step by Step

1. Open [Insert text.]

2. Once logged in [Insert text.]
• [Insert text.]
• [Insert text.]

3. Use patient's photo ID to [Insert text.]
• [Insert text.]

4. On the patient's profile [Insert text.]
• [Insert text.]
• [Insert text.]

5. [Insert text.]

Note: At the end of your shift, please log out of the registration system and wipe down your computer and station using disinfectant wipes.

Placeholder only – add relevant screenshot

1. Caption

Placeholder only – add relevant screenshot

2. Caption

Placeholder only – add relevant screenshot

3. Caption

Placeholder only – add relevant screenshot
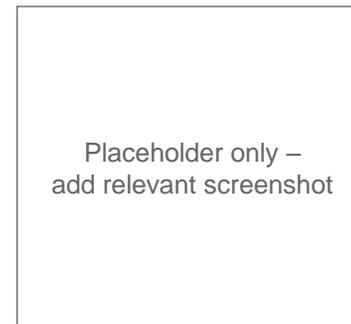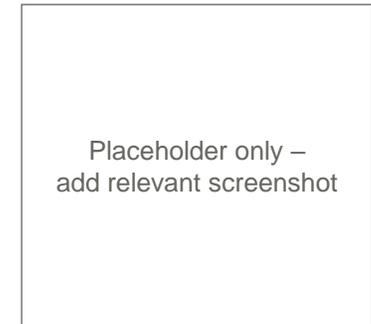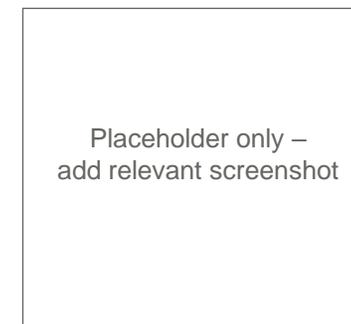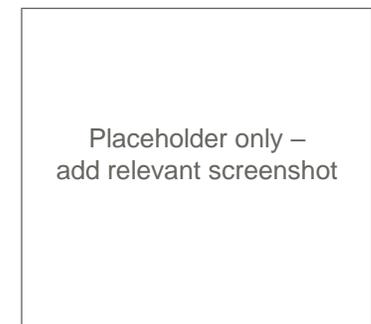
4. Caption

Preparing for the Day

GUIDE FOR:

- Staff Lead
- Staff Check-In

PURPOSE:

Staff Leads will use these procedures to support preparing to receive staff for an upcoming shift and identifying gaps in scheduling and next steps.

Step 1.	• Prior to shift, Staff Lead will run full list of staff for the upcoming shift for backup/reference. **Note**: If internet access is down, check-in will occur manually by checking off names on list. Keep list for reconciliation into database.
Step 2.	• Reviews **[Insert text – e.g., logs in and opens database to access staff list]** for the upcoming shift. • Reviews and ensures there are no gaps in the schedule. • If gaps in the schedule are identified, Staff Lead will troubleshoot to determine what help is needed; coordinates with Clinic Lead if a Vaccinator role is needed. **Note:** If site has waiting list, staff may need to be pulled from there.
Step 3.	• Runs and prints list of individuals who need a background check run at the event, • [Insert text – e.g., steps for background check.]
Step 4.	• **End of check-in:** Identifies who is missing and informs their Lead of the shortage. • Lead can draw from anyone who has arrived/in waiting area to fill the gap.

How to Check-In Staff
(1 of 2)

G U I D E   F O R :

- Staff Lead
- Staff Check-In

P U R P O S E :

Use these station procedures to navigate the staff check-in process and inform staff if they do not have an assignment for the day.

Staff **with** an assignment

1. Ensures that staff follow the Entry Control Point process.
   - [Insert text – e.g., Asks person for the name and ID (government issued ID and/employee ID).]

2. [Insert text – e.g., **Types name in field**]
   - Name/assignment will appear if they are scheduled schedule (Insert screen image if applicable).
   - Confirms their name/check ID.
   - Checks staff into the system (screen image if applicable).
   - Confirms role, provides gear (e.g., colored vests, name tags).

3. [Insert text – e.g., Checks printed list provided by Staff Lead to see if they need a background check.]
   - [Insert text] e.g., Say: "We require everyone to be vetted prior to your shift and I see we still need a background check for you today. Do you approve us running a background check on you?"
     - Yes: "Thank you – please complete this form and head over to the vetting station."
     - No: "I'm sorry, but you will not be able to work at our event." – **Request support from Lead if you need assistance.**

4. [Insert text – e.g., Asks if they want a COVID-19 vaccine at the end of their shift.]
   - [Insert text – e.g., If yes: red mark on sticker.]
   - [Insert text – e.g., Scan QR code: Scan this and you will be taken to a site for you to make an appointment for staff.]

5. [Insert text – e.g., Sends to background check (vetting station or direct to location to procced to assignment.)]

Placeholder only – add relevant screenshot

1. Caption

Placeholder only – add relevant screenshot

2. Caption

Placeholder only – add relevant screenshot

3. Caption

Placeholder only – add relevant screenshot
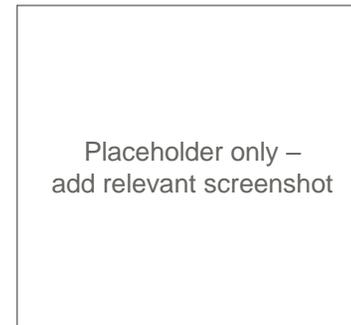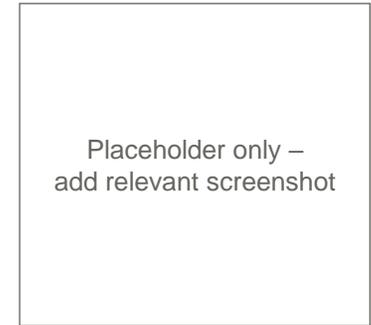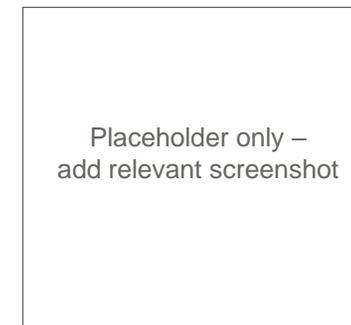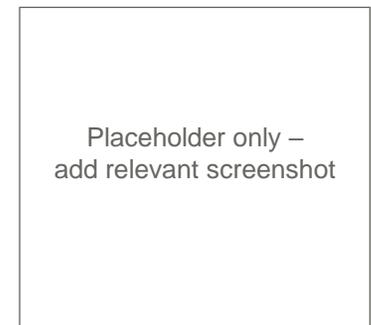
4. Caption

STATION PROCEDURE

How to Check-In Staff
(2 of 2)

- Staff Lead
- Staff Check-In

Use these station procedures to navigate the staff check-in process and inform staff if they do not have an assignment for the day.

Staff *with **NO*** *assignment*

1. [Insert text – e.g., Asks person for confirmation barcode and ID (government issued ID and/employee ID if possible).]

2. [Insert text – e.g., Types name in field]
   - If no assignment appears, troubleshoots by reviewing if they are scheduled for another date. Ask Lead for help if needed. (Insert screen image if applicable.)
   - Confirms their name/check ID.
   - Checks staff into the system (screen image if applicable).
   - Confirms their role and provides necessary supplies to identify position e.g., colored vests, name tags, etc.

3. [Insert text – e.g., If no assignment appears after troubleshooting:]
Let them know: "Apologies, we do not have you scheduled today. You may wait in the designated area **XX** to find out if we need extra staff today. Put your name on the sign-in sheet and we will make assignment by **XX** time if we need you today."

   Note: **Staff Lead** determines needs, makes assignments; confirms with Clinical Supervisor before dismissing extra staff.
4. Additional Information
   - [Insert text – e.g., If at any time an individual becomes upset, please attempt to de-escalate and ask them to step aside for a Lead to speak with them.]
   - [Insert text – e.g., Background checker will sit nearby and partner with you – this role is not responsible for running a background check.]
   - [Insert text – e.g. **At XX time**, team will close down the (insert text) area, and relocate a few people to (insert text) for a latecomer check in.]

Placeholder only – add relevant screenshot

1. Caption

Placeholder only – add relevant screenshot

2. Caption

Placeholder only – add relevant screenshot

3. Caption

Placeholder only – add relevant screenshot

4. Caption

STATION PROCEDURE
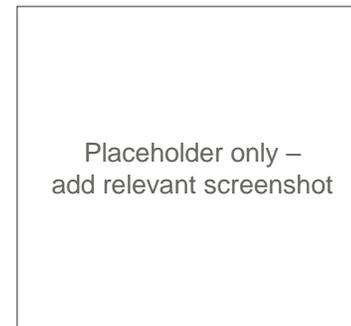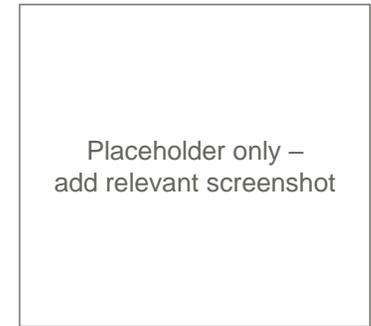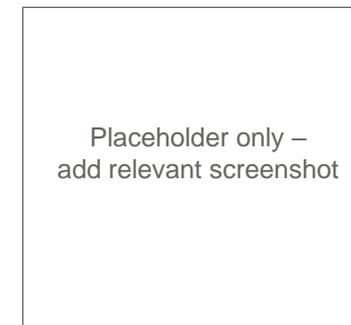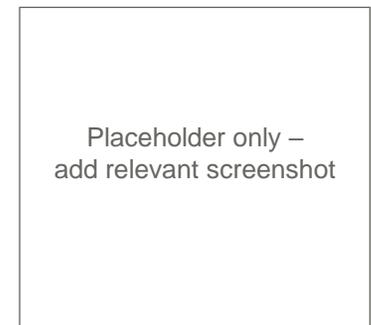
COVID-19 Symptoms List

GUIDE FOR:

• ECP (Entry Control Point)

PURPOSE:

Use this list for entry health screening. All entering the vaccination site should be symptom- free.

COVID-19 Symptoms	- Fever over 100°F - Chills - New cough - Sore throat - Shortness of breath/difficulty breathing - Muscle or body aches (myalgias) - Fatigue/feeling ill/malaise - New loss of smell or taste - New or unusual congestion/runny nose - Nausea/diarrhea/vomiting - New or unusual headache
Notes:	All persons are required to follow universal masking, hand hygiene and physical distancing protocol. All persons are required to follow the screening process, which is subject to change. All persons are required to attest they are free of the above listed COVID-19 symptoms in the last 24 hours, have their temperature taken (symptoms subject to change), and declare they have not been exposed to a person who is COVID-19 positive within the last 14 days.

STATION PROCEDURE

Entry Control Point

GUIDE FOR:

- ECP (Entry Control Point)

PURPOSE:

Use these station procedures to support the health screening process upon entering the vaccination site.

Step 1.

Ensure your station has the following supplies:
- No-touch thermometer
- Hand sanitizer
- Masks
- COVID-19 vaccine clinic sticker

Step 2.

Asks all persons entering (patient or staff) to step forward and have their temperature taken with a no-touch thermometer.
- If temperature greater than 100°F, individual may not enter due to risk of COVID-19 transmission.
- Temperatures can be wide ranging and inaccurate. If patients have symptoms the day of their appointment, consider a prcess to call ahead for rescheduling.
- Escalates to Clinical Operations Director, if needed.

Step 3.

Asks patient to review list and share if they are experiencing any of the listed symptoms.
- Once patient information is found, click on their info to open profile.
- If individual has any symptoms, individual may not enter due to risk of COVID-19 transmission.
- Escalates to Clinical Operations Director, if needed.

Notes:

If at any point a patient requires assistance beyond basic Entry Control Point (ECP) procedures stated here, immediately escalate to Non-Clinical Lead or other lead role.

All persons are required to follow universal masking, hand hygiene and physical distancing. All persons are required to follow the screening process, which is subject to change. All persons are required to attest they are free of any symptoms listed on the **COVID-19 Symptoms List** in the last 24 hours, have their temperature taken, and declare they have not been exposed to a person who is COVID-19 positive within the last 14 days.

Way Finder Location & Routines

GUIDE FOR:

- Way Finder Lead
- Way Finder

PURPOSE:

Use these procedures to identify locations to deploy Way Finder Staff and communicate required routines per location.

Location	Routines
Clinical	
Patient Line – Front Entry • RN or overflow vaccinator staff	**This role is ideally an RN (resource RN or overflow vaccinator staff).** • Welcomes patients to the clinic. • [Insert text – e.g., Encourages patients to use QR code to access EUA/Fact Sheet. Distributes Fact Sheets as needed.] • [Insert text – e.g., Completes initial screening for exclusion criteria. Formal screening occurs at vaccination station.] • Answers clinical questions and escalates to LIP as needed.
Non-clinical	
Patient Line – Front Entry	Offers a friendly greeting and welcomes arriving patients.
Pre-Registration	• Distributes clipboards and pens with DOH Intake Form. • Instructs patients to complete form in line prior to vaccination (**Note:** These actions may be completed before ECP depending on the site layout.) • Assists with cleaning clipboards and pens as needed. • Directs patients to registration stations.
Post-Registration	• Monitors patient flow. • Ensures social distancing. • Directs patients to vaccination stations.
Vaccination Supply Collection	• Collects clipboards and pens with DOH Intake Form. • Maintains clean/dirty cart with supplies. • Cleans and sanitizes clipboards, pens and surfaces after each use. • Returns supplies to designated location (e.g., pre-registration area).
Vaccination Area (Traffic Direction)	Directs patients to vaccination stations.
Post-Vaccination, Pre-Observation	Directs patients to observation area [Insert text – for a minimum of 15 minutes and informs them to notify observation RN/EMS if not feeling well.]
Closed Entry	Directs persons to correct entry.
Parking Areas (if needed)	Directs persons to correct parking locations and monitors parking space for capacity limits.
Restrooms	Assists with direction to restrooms and ensures patients do not wander into secured locations.
High Patient-Traffic Flow Areas	Controls patient traffic as needed.

Technology Specifications

Overview

The technology solution is responsible for managing the end-to-end flow of the site, from booking appointments to administering vaccines to managing inventory and reporting. The technology needs of a site may differ depending on the specifics of location, staffing, population served, existing capabilities of the organization(s) running the site, etc. The specific needs of the site will determine the best solution.

These pages lay out key considerations in determining technology needs and a set of minimum capabilities the solution should have to ensure effective site operation.

Critical Considerations

- **Personas**
  The solution will need to serve multiple personas, controlling access and capabilities for each. For example, the solution must provide experiences appropriate for individual patients managing their appointments, call center staff, clinical staff, non-medical site staff, and any other personas at the site.

- **Devices**
  A range of on-site devices will be necessary, e.g., tablets or PCs for managing appointment information, printers (for, e.g., QR codes, appointment reminders), displays for monitoring data. The operational flow of the site will determine the devices needed, and software should be selected that can support this hardware.

- **Privacy, Compliance, Security, and Accessibility**
  The solution needs to meet applicable standards for maintaining data as well as supporting access by users with a range of needs

- **Reporting**
  The solution should be capable of seamlessly and reliably outputting data for mandated reporting, as well as supporting real-time monitoring for on-site staff

- **Support**
  The solution will need technical support for the general public, call center users and site staff, ideally available on-site as well as remotely. The software will need the ability to provide support staff appropriate access and capabilities.

Required Capabilities

Below are the capabilities likely needed from a technology solution, though a particular site may not need all of these or may need additional capabilities.

General	• Privacy (incl. HIPAA) compliant • Security • Accessibility • Multiple language support, including live and on-demand translation services for critical languages • Cross-platform support (e.g., web, PC, Android) for patients and clinical staff • Printing and scanning ability • Security to data by different personas
Booking	• Check eligibility • Notify when resident become eligible • Screen for adverse effects • Register and book appointments (self-serve) • Register and book appointments (assisted) • Track first vs. second dose appointments • Cancel/change appointments • Choose location (if applicable) • Notification/confirmation in email/text • Print/email vaccination information • Bulk appointment changes

Required Capabilities (continued)

On-site	• Check-in/registration • Review prior vaccine/dose info • View/edit patient information • Record vaccination • Support for multiple vaccines per site • Print confirmation code and/or reminders onsite
Reporting	• Track vaccine inventory • Review data in real time • Upload/download state data
Support	• Self-serve resources (e.g., tutorial, troubleshooting) • Access rights for support team

Process Flow
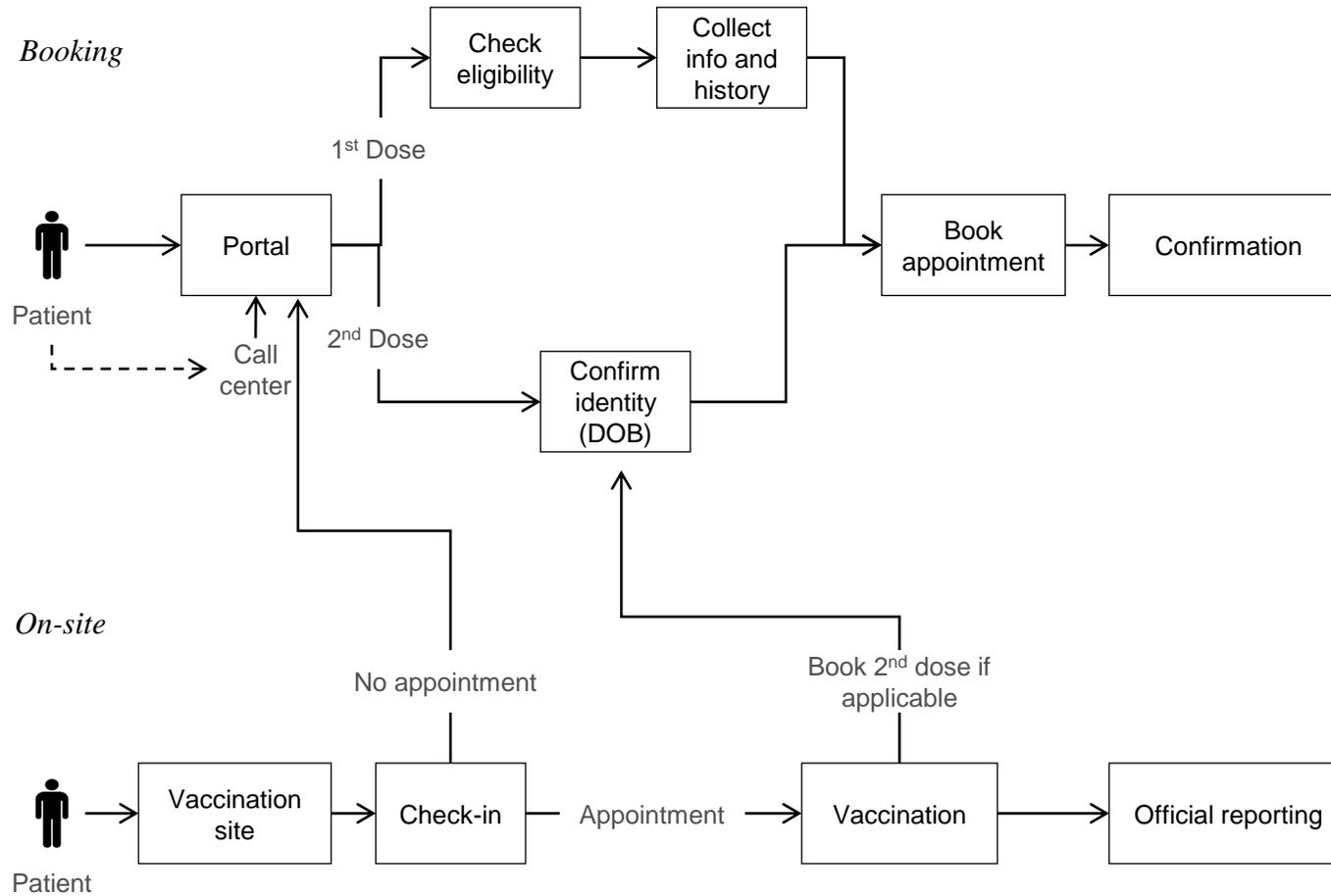
Booking

Check eligibility → Collect info and history

1st Dose

Patient → Portal

Call center

2nd Dose → Confirm identity (DOB)

Book appointment → Confirmation

On-site

No appointment

Book 2nd dose if applicable

Patient → Vaccination site → Check-in → Appointment → Vaccination → Official reporting

Communications Principles

Critical
Considerations

- **Clear, Consistent Information**
  All organizations should direct audiences to a central source of truth, such as a Health Department website or other central information hub, in order to combat miscommunication and confusion.

- **Prioritize Equity**
  What is communicated must be informed by and targeted to efforts to promote trust among historically underserved communities.

- **Communicate Through Trusted Sources**
  The past year has eroded trust in traditional information sources, including journalists, government, and religious leaders. Trust in business, "my employer," scientists, and "people in my local community" remains high. It is critical to leverage trusted sources to combat disinformation.

- **Design the Patient Experience**
  Who are the patients – their perceptions, mindset, hopes & fears – and what are the moments that will influence their attitude toward the vaccine?

Visual Language

Overview

The visual language is bold, simple and user-friendly –
utilizing legible and universal typography, bold and
calming colors, easily recognizable iconography, along
with a color block design that is inspired by a community
coming together.
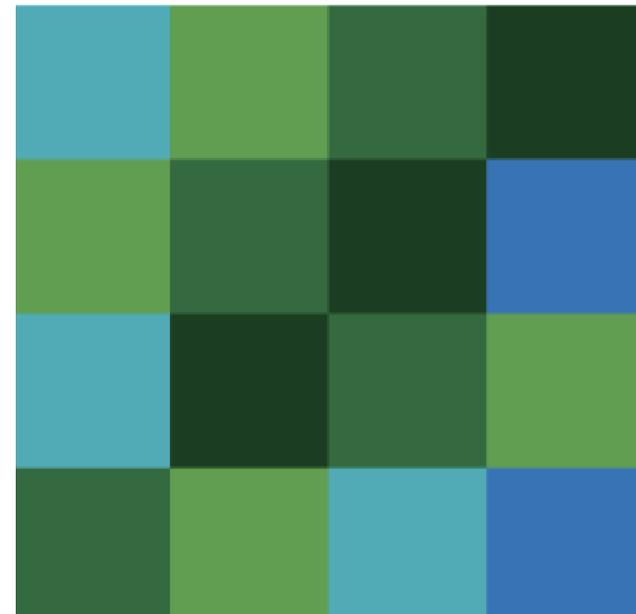
FONT CHOICE:

Arial

(Universal Font Family)

Aa Bb Cc Dd Ee Ff Gg Hh Ii Jj Kk Ll Mm Nn Oo Pp
Qq Rr Ss Tt Uu Vv Ww Xx Yy Zz 0123456789

Aa Bb Cc Dd Ee Ff Gg Hh Ii Jj Kk Ll Mm Nn Oo Pp
Qq Rr Ss Tt Uu Vv Ww Xx Yy Zz 0123456789

Aa Bb Cc Dd Ee Ff Gg Hh Ii Jj Kk Ll Mm Nn Oo Pp
Qq Rr Ss Tt Uu Vv Ww Xx Yy Zz 0123456789

Aa Bb Cc Dd Ee Ff Gg Hh Ii Jj Kk Ll Mm Nn Oo Pp
Qq Rr Ss Tt Uu Vv Ww Xx Yy Zz 0123456789

Aa Bb Cc Dd Ee Ff Gg Hh Ii Jj Kk Ll Mm Nn Oo Pp
Qq Rr Ss Tt Uu Vv Ww Xx Yy Zz 0123456789

ICONOGRAPHY:
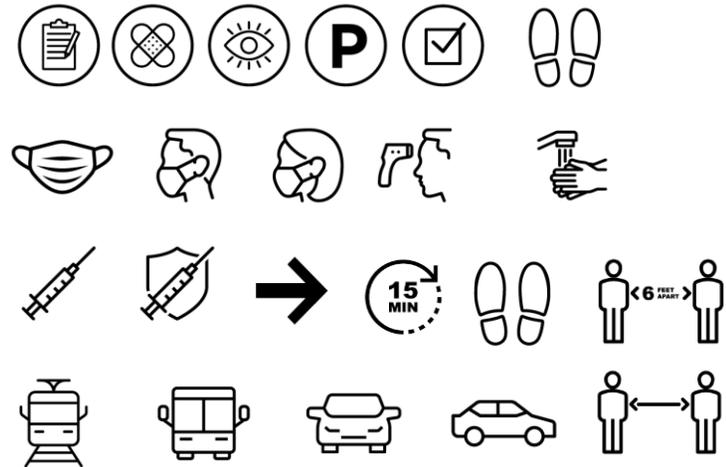
COLORS:

CMYK: 85 | 50 | 0 | 0	CMYK: 74 | 8 | 28 | 0	CMYK: 74 | 13 | 100 | 2	CMYK: 87 | 33 | 95 | 25	CMYK: 87 | 45 | 95 | 56
RGB: 28 | 117 | 188	RGB: 27 | 175 | 186	RGB: 74 | 160 | 70	RGB: 28 | 107 | 59	RGB: 11 | 63 | 32
HEX: 1B76BC	HEX: 1BAFBA	HEX: 4AA046	HEX: 1C6B3B	HEX: 0B3F20

Patient Journey

Consider the patient experience through all the steps of their visit to the vaccination clinic. Use signage to help support an end-to-end experience that is clear, calming, and confidently reassuring at every step. Consider adequate font size and contrast ratio for legibility as well as multiple language, including ASL, translation.

STEP 1 / ARRIVAL	STEP 2 / SCREENING	STEP 3 / REGISTRATION	STEP 4 / VACCINATION	STEP 5 / OBSERVATION + DEPARTURE
Arrival to the vaccination site should be clearly marked, welcoming patients to the site.	Efficient screening will help patients know what to expect and help the process progress smoothly.	Registering for the vaccine should be clear and easy for patients. Anticipate patient questions and consider activating time waiting in line to address broader questions via signage.	Receiving the vaccine should instill confidence and a satisfied sense of personal and community well-being.	Use the 15-minute observation period to calm, reassure and inspire patients. Let this be a moment of gratitude and well-being prior to departure.

Note: Use the appropriate color for each given area to help organize and sequence the patient journey.

Step 1
Parking/Mass Transit to Screening/Arrival

SIZE	SIZE	SIZE	SIZE	SIZE	→
Sign 1	Sign 1	Sign 1	Sign 1	Sign 1	Sign 1

Step 2
Screening Stations

SIZE	SIZE	SIZE	SIZE	→
Sign 1	Sign 1	Sign 1	Sign 1	Sign 1

Step 3
Registration Stations

SIZE	SIZE	SIZE	SIZE	SIZE	→
Sign 1	Sign 1	Sign 1	Sign 1	Sign 1	Sign 1

Step 3
Vaccination Stations
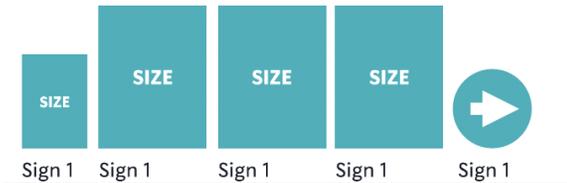
SIZE	SIZE	SIZE	SIZE	SIZE
Sign 1	Sign 1	Sign 1	Sign 1	Sign 1
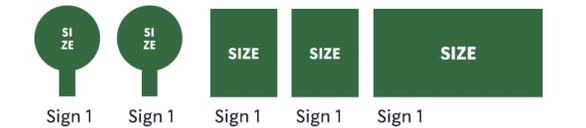
Step 4
Observation and Exit

SIZE	SIZE	SIZE
Sign 1	Sign 1	Sign 1

Signage Applications

The wayfinding signage system is scalable for a variety of site sizes and formats — mobile vans to parking lots to mass vaccination sites. The system is customizable and scalable for a variety of production methods and includes adequate space for additional languages and partner or sponsor logos. Color bands across the top help indicate sequential progression along the onsite patient journey. See appendix for link to full customizable materials.
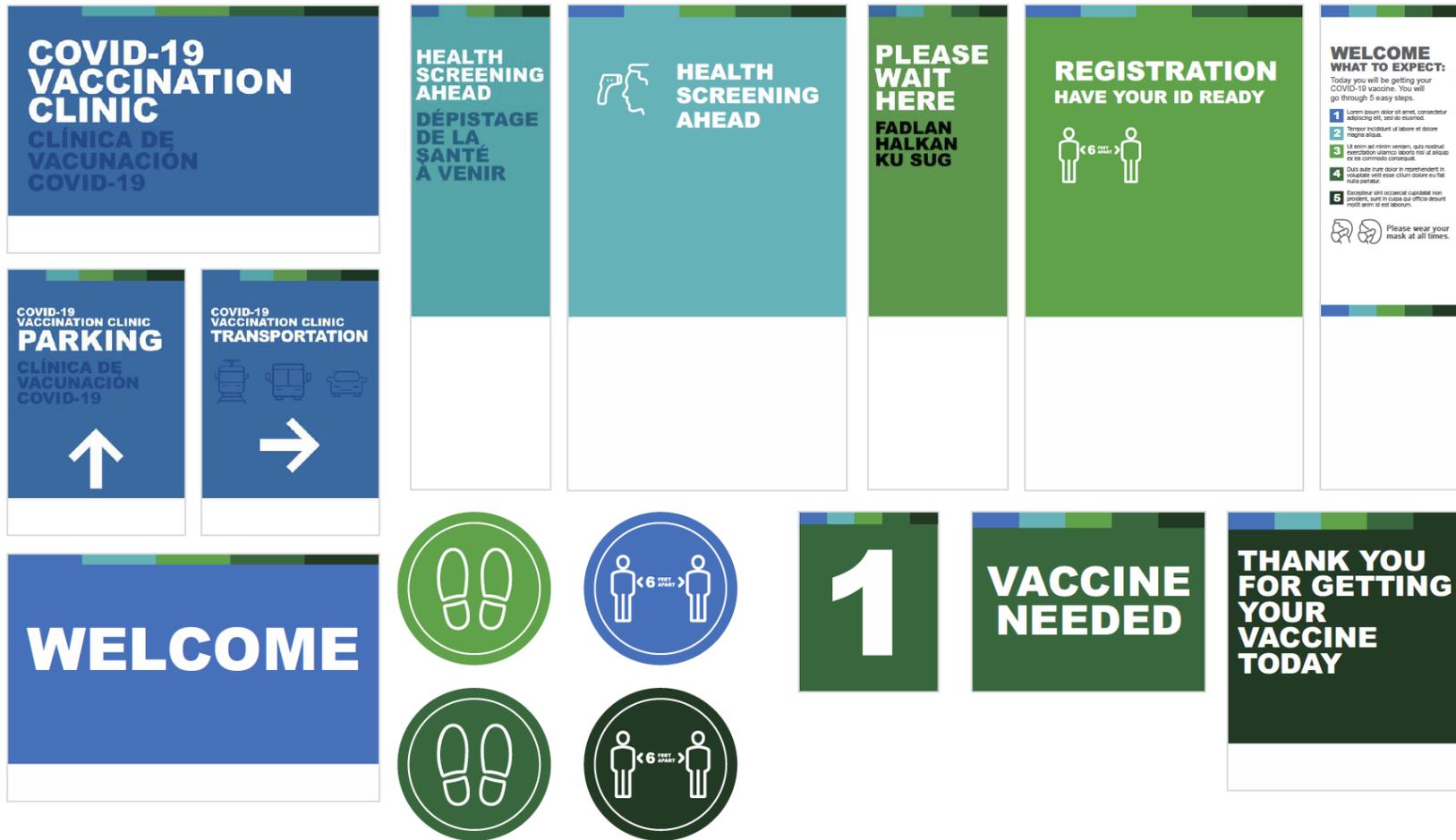
Observation Area:
Style frames for looping PowerPoint

A 15-minute, looping PowerPoint animation in the Observation Area helps create a calming experience for patients while they wait. Beautiful regional nature imagery as well as key informational messages, in multiple languages as appropriate for the site, help time pass efficiently and restoratively. Loop can be easily customized with site-specific or community-specific messages as well.
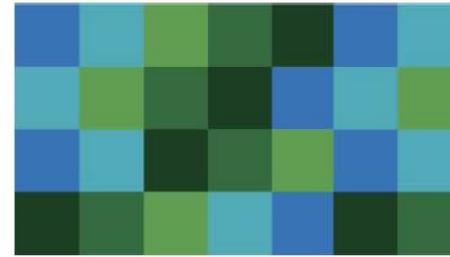
Train the Trainer

Disclaimer

This Train The Trainer (TTT) is focused on how to train Station Leads, who in turn will train staff in providing the best possible experience to people who are being vaccinated. It uses the *Vaccine Playbook* as the main resource for the training. It does not include training on facilities, emergency procedures, specific signage, etc. as these type of topics will be addressed in general training for your vaccination site.

Training Guide Overview	
Trainer Roles	3
Training Flow	4
Before the Training	5
Welcome / Introduction	6
Tour of the Facility	7
Utilizing the Playbook	8
Roles & Responsibilities	9
Station Procedures	10
Summary	11
Teaching Model for Leads	12
Facilitation Tips	14

Trainer Roles

Review the information below to learn about the responsibilities for training

Training Facilitator	• Open session with enthusiasm and gratitude. • Understand and explain importance of following procedures as outlined in *Vaccine Playbook.*
Breakout Group Trainers	• Train Station Leads (clinical or non-clinical) using the *Vaccine Playbook* and other site resources as a guide. • Engage the Station Leads and excite them for their role as a leaders and trainers for staff. • Ensure all applicable content is trained so Station Leads can be confident they can train staff. • Keep track of time and schedule. • Be a resource for questions and concerns.
Station Leads/Staff Trainers	• Train staff (clinical or non-clinical) using the *Vaccine Playbook* as a guide. • Complete the training for their (clinical or non-clinical) station. • Ask questions to ensure having the right information to share. • Become an expert in the roles & responsibilities as well as the station procedures for their station. • Practice the roleplays to be able to explain and facilitate them. • Be confident to successfully train the staff.
Tips & Recommendations	• Review the *Before the Training* and *Facilitation Tips* in this guide for successful sharing of information.

Training Flow

Use the chart below to determine which sections of this guide to use

Trainer Role	**Training Session**

Trainer Role

▲ *TTT Training Facilitator*

■ *Breakout Group Trainer*
(trains Clinical Station Leads

■ *Breakout Group Trainer*
(trains Non-clinical Station Leads)

● *Station Leads*
(trains Clinical Staff)

● *Station Leads*
(trains Non-clinical Staff)

Training Session

▲ Welcome / Introduction

▲ Tour The Facility

▲ ■ ● Utilizing the Playbook

■ ● Roles & Responsibilities

■ ● Station Procedures

▲ ■ Summary

● Teaching Model for Leads

Before the Training

- Read this training guide.

- Familiarize yourself with the *Vaccine Playbook* and identify the materials you need to train on. Highlight anything that

  particularly needs to be addressed, and write in any personal notes, especially in sections where you can share a personal

  story or an example of something you want to highlight.
  NOTE: Ensure that all applicable materials for your site have been created and are available.

- Ensure you have Breakout Group Trainers to support the clinical and non-clinical breakouts and prepare them for their

  role.

- Familiarize yourself with the flow and the manner in which material and activities are designed and should be facilitated.

- Ensure that Station Leads have everything they need to complete applicable activities.

- Check if you have the following training materials available at the right stations:

  - Roles and Responsibilities

  - Station Procedures

  - (If applicable) Scenario cards for role play

Welcome / Introduction

Why we are here:	Your role is important as it supports the overall goals: • Facilitate fast and efficient throughput while also providing a safe and caring environment for both patients and staff. • Reduce patient anxiety and increase confidence in the process. • Support a high-quality and efficient experience that creates positive expectations for second dose vaccinations (repeat visits) and positive word of mouth to encourage others who are on the fence to get vaccinated. • Vaccinate 70% of eligible population in 7 months.

How we got here:	• Applied Human Centered Design principles to Modular Design.
	    • Built a physical prototype of station/system layouts.
	• Developed Repeatable Routines to maximize value of Human Resources.
	    • Identified staffing requirements to support operations at the POD level (leveraging simulation model).
	    • Developed role descriptions and station procedures to standardize non-clinical support roles.
	• Leveraged Computer Simulation Modeling to Determine Capacity Thresholds.
	    • Optimized for total wait time, queue, distance travelled and overall utilization.

Overview of operational flow:	Health Check > Registration > Vaccination > Observation
Tips & Recommendations	Consider to have as the presenter of the Welcome / Introduction a director or other high-level staff to emphasize the importance of the roles and procedures in accomplishing the goals.

Tour of the Facility

Take all trainers through entire workstream so they are familiar
with what happens at all stations.

Focus on:	- Wayfinding information and signage - Station identification and signage - Main focus of the roles at each station *Roles & Responsibilities by Station* and *Station Procedures* from the Playbook at each station - Experience of the patient to be vaccinated - Transition/hand-off to next station - Visible facility signs, such as emergency exits, etc.
Tips & Recommendations	If a tour is conducted with new Station Leads after the site is already open, ensure they are not compromising the flow during their tour.

Utilizing the Playbook

Utilize Vaccine Playbook:	• Review overall site setup and flow pages. • Review org chart and requirements for needed roles and role requirements for proper staffing. • *Roles & Responsibilities by Station* and *Station Procedures* are organized in order of environmental flow and by station. • *Roles & Responsibilities* include all details for each individual role's responsibilities. • *Station Procedures* list the specific duties for each role and are linked in the individual *Roles & Responsibilities* pages. They can be found in their own chapter of the Playbook.

Preparing Roles & Responsibilities and Station Procedures Pages:	• Slides with RED text are areas for customization and will need to be edited prior to use for:
	   - Site specific information
	   - System specific information
	   - Adding reference images
	• Templates for additional *Roles & Responsibilities* and *Station Procedures* can be found at the beginning of the Toolkit chapter of the Playbook.
	• Use these templates to create any missing roles or station procedures you may need specific to your site.

Tips & Recommendations	• Printed *Roles & Responsibilities* and *Station Procedures* should be available at each station, preferably in a no-contact fashion. • A PDF version of the Playbook can be used on a tablet or other device.

Roles & Responsibilities

Break out into groups for training clinical and non-clinical leads

Clinical Roles	The Playbook lists all clinical roles. Ensure that the Breakout Group Trainers for the clinical roles: • Review and familiarize themselves with the roles and responsibilities in the Playbook. • Review and familiarize themselves with the station procedures in the Playbook. • Are aware they need to tell staff to adhere to the station procedures as described to ensure a safe, replicable, consistent and efficient vaccination experience for patients. • Roleplay applicable station scenarios.
Non-clinical Roles	The Playbook lists all non-clinical roles. Ensure that the Breakout Group Trainers for the non-clinical roles: • Review and familiarize themselves with the roles and responsibilities for each station in the Playbook. • Review and familiarize themselves with the non-clinical station procedures in the Playbook. • Are aware of the entire flow through with all hand-off points to ensure a safe, replicable, consistent and efficient experience for patients. • Roleplay applicable station scenarios.
Tips & Recommendations	• Ensure you oversee the training for clinical and non-clinical stations. • Provide recognition to the Breakout Group Trainers and the Station Leads. • Provide constructive feedback as needed after the training session for future improvement.

Station Procedures

Process and role play for training clinical and non-clinical Station Leads

Station Procedures	Station procedures are strict guidelines that need to be followed meticulously. Breakout Group Trainers need to emphasize the importance of following these procedures for reasons of safety and patient experience. For each station Breakout Group Trainers should: • Show Station Leads what station procedures should be followed by each role. • Point out the location of the procedures at the station and in the Playbook. • Review the procedures with the Station Leads. • Ask Station Leads to repeat the learnings back to them. • Ask for and answer questions.
Roleplay	The station procedures in the Playbook provide opportunities to practice the skills needed for each role/station. To show Station Leads how to conduct these roleplays, Breakout Group Trainers can practice these with the Leads. The Breakout Group Trainers: • Explain the expectations of the roleplay. • Select a couple of Station Leads for the roleplay and assign them their roles. • Ask the selected Station Leads to complete the roleplay. • Answer questions, provide feedback and recommendations on performance and tips on how to best facilitate the roleplay.
Tips & Recommendations	• Visit the training at the different stations. • Provide recognition to the Breakout Group Trainers and the Station Leads. • Provide constructive feedback as needed after the training session for future improvement.

Teaching Model for Station Leads (1 of 2)

Follow the steps below to teach station specific roles and routines. The goal is that all staff (clinical and non-clinical) receive a consistent training experience, enabling them to recognize that the details matter to ensure an exceptional experience in the vaccination site.

Prepare	• Familiarize yourself with the materials and any additional items needed or discussed for a specific station. • Put the staff at ease, thank them for their support and encourage them to ask questions at the end of the training. • Assess prior knowledge and experience of the staff with the station you are about to train by asking open-ended questions. • Explain what you will be teaching, why it is important and how.

Present	• Share the associated responsibilities and procedures for each role. When teaching a new process or routine explain:
	
	    - Responsibilities – what are the expectations?
	
	    - Station Procedures – detailed steps to successfully complete the work at the station.
	
	 • Provide enough information and space for questions without overwhelming the staff - be as concise as possible.
	
	 • Provide additional context or a copy of the *Roles & Responsibilities* and *Station Procedures* resources as needed to support different learning styles.
	
	 • Always offer to repeat the information. Some staff members may need a point repeated on their responsibilities and that is okay.

Teaching Model for Station Leads (2 of 2)

Practice	• Ask one of the staff members to present to the group. When sharing the information, ask another staff member to roleplay any processes that the station may require while they are sharing the responsibilities at the station. • Ask the staff member if they are comfortable with presenting and if time permits, have the two staff members switch roles and repeat the process. • Provide coaching and recognition as they are practicing the presentation and/or process.
Q & A	• Ask the group for any remaining questions and provide answers. • Encourage open-ended questions. • Tell the staff where to find additional support and resources. • Encourage the group of future staff (if possible) to check in with the Station Leads of each station during their shifts. Make sure they know you are available to help.
Close	• Thank the learners for their time, support and contributions to these amazing efforts.

Facilitation Tips

- Prepare and possibly practice in advance.

- Speak clearly and not too fast.

- Listen actively.

- Ask and answer questions to ensure understanding.

- Watch for body language, it can sometimes speak louder than words.

- Keep time to ensure there is room for all important information to be shared.

- Treat everyone as equals, they are all spending their time for a good cause.

- Thank the everyone for their time, support and contributions to these amazing efforts.

- Practicing in front of family, friends or even the mirror will give you great feedback on how you come across.

- Prepping the Breakout Group Trainers in advance will provide a smooth transition between sections of the training.

Lanyards

Overview

- Lanyards are condensed versions of the Roles & Responsibilities.
- They function as a quick reminder of a staff member's tasks.
- Pre-populated versions on standard horizontal size have been created with the corresponding station icon.
- Templates for both horizontal and vertical standard lanyard sizes are also available.

Best Practices

- A single 8.5 x 11 sheet can fit up to 6 cards and will need to be individually trimmed to fit inside a lanyard.

ECP & Way Finder Lead

Responsibilities:
- Ensures patients' ease and safety navigating the site, including social distancing and sanitization.
- Escalates patient issues to Non-Clinical Supervisor.
- Ensures all stations are set up with necessary supplies, assisting Non-Clinical Lead if needed.
- Ensures ECP staff understand procedures.

Station Procedures: Entry Control Point, Way Finder Location & Routines

Entry Control Point Staff

Responsibilities:
- Ensures patients' ease and safety navigating the site.
- Screens all persons entering to ensure they are free of COVID-19 symptoms (including taking temperature with a no-touch thermometer) and provides masks if needed.
- Escalates issues to ECP & Way Finder Lead or Non-Clinical Lead.

Station Procedures: Entry Control Point

Way Finder

Responsibilities:
- Ensures patients have a safe and easy experience navigating the site.
- Restocks supplies.
- Directs patients to communication assistance as needed.
- Social distancing and sanitization.
- Distributes clipboards and pens with DOH Intake Form to patients and instructs them to complete while waiting in line.

Station Procedures: Way Finder

Registration Lead

Responsibilities:
- Ensures stations are set up with laptops for each Registration Staff, and sanitization items including disinfectant wipes, hand sanitizer and goggles.
- Checks and adjusts each station as needed.
- Verifies patient information, supports registration issues and provides next steps in the registration process.

Station Procedures: Registration Lead Roles & Responsibilities

Registration Troubleshooter

Responsibilities:
- Keeps station sanitized and organized throughout shift.
- Ensures disinfectant wipes and hand sanitizer are available.
- Verifies patient information, supports registration issues and provides next steps in the process.
- Provides other technical assistance for Registration Station as needed.

Station Procedures: Registration Troubleshooter Roles & Responsibilities

Registration Staff

Responsibilities:
- Keeps station sanitized and organized throughout shift.
- Ensures disinfectant wipes and hand sanitizer are available.
- Ensures station has Vaccine FAQ sheets and EUAs available and signals when station is ready for the next patient.
- Verifies patient information, supports registration issues and provides next steps in the process.

Station Procedures: Registration Staff Roles & Responsibilities

Clinical Registration Support ⚙

Responsibilities:
- Works in partnership with Registration Troubleshooters to answer any medical and clinical questions that patients may have at the registration station.

Clinical Operations Director ⚙

Responsibilities:
- Responsible for clinic operations.
- Ensures efficient workflow, making in-the-moment decisions to resolve bottlenecks and pinch points.
- Works closely with Clinical Practice Supervisor to ensure best practices.
- Supervises physical space preparation prior to clinic opening, and clinic cleanup at close.

Clinical Practice Supervisor ⚙

Responsibilities:
- Reports to the Clinical Operations Director.
- Manages and deploys clinical staff to stations.
- Helps with supply management at each station.
- Working knowledge of vaccine inventory management.
- Ensures all goggles, vests and other surfaces are cleaned and sanitized at the end of shift.
- Documents reactions and needle sticks appropriately.

Provider ⚙

Responsibilities:
- Reports to the Clinical Operations Director and the Clinical Practice Supervisor.
- Supports various roles in the clinic as assigned by the Clinical Practice Supervisor.
- Uses Roles & Responsibilities provided for role assigned.
- Responds to provider-level questions, concerns, and issues involving patients and staff.

Non-Clinical Supervisor ⚙

Responsibilities:
- Collaborates with the Clinical Operations Director to ensure optimal operations.
- Oversees technical operational functions and troubleshoots.
- Ensures correct processes are being followed.
- Trains and educates staff, answers questions, resolves and escalates issues as needed.

Clinical Resource ⚙

Responsibilities:
- Under the direction of the Clinical Operations Director and the Clinical Practice Supervisor.
- Flexes to support various roles including, but not limited to, Vaccinator and/or Observer as needed.
- Ensures staff are provided breaks and lunches as needed.
- Performs any additional duties as assigned.
- Serves as a greeter outside as needed.

Facilities Liaison

Responsibilities:
- Collaborates with the Clinical Operations Director to ensure operational success of the clinic.
- Manages physical space.
- Supports Way Finder with parking and traffic control as needed.
- Manages storage and receipt of supplies.
- Supports issues during clinic hours of operation.

Station Procedures: See Facilities Liaison Roles & Responsibilities

Pharmacist

Responsibilities:
- Collaborates with the Clinical Practice Supervisor during clinic hours to ensure optimal vaccination operations.
- Oversees vaccine preparation and management.
- Manages flow of vaccines, supplies needed, and maintains a working knowledge of how many vaccines are on the floor, the amount being made and how many people waiting for the vaccine.

Vaccine Supply Staff

Responsibilities:
- Clinical or non-clinical position.
- Reports to Pharmacist.
- Ensures Vaccine Prep clinical staff have a steady supply of syringe kits.

Vaccine Prep

Responsibilities:
- Prepares vaccine using manufacturer's procedures.
- Distributes vaccine, maintaining appropriate chain of custody.
- Prevents vaccine waste (including expiration), escalates as necessary.
- Assists and supports vaccinator, monitors for supplies, etc.
- May flex to support medication supply prep as needed.

Vaccinator Lead

Responsibilities:
- Reports to the Clinical Practice Supervisor.
- Manages breaks for Vaccinators and IIS Data Entry Staff.
- Provides oversight for Vaccinators' workflow.
- Responsible for the safety of medication preparation.
- Distributes vaccine, maintaining appropriate chain of custody.
- Helps ensure no vaccine is wasted.

Vaccinator

Responsibilities:
- Completes CDC Vaccination Record card legibly.
- Escalates questions or concerns about appropriateness to receive vaccine to Clinical Practice Supervisor or LIP.
- Administers the COVID-19 vaccine using correct intramuscular injection technique (Deltoid).
- Ensures patient has V-Safe information.
- May fill other roles if needed.

Observer Lead

Responsibilities:
- Reports to the Clinical Practice Supervisor.
- Supports and manages EMS and Observers in the Observation Area of the clinic, including when a patient is responding to an adverse reaction.
- Maintains oversight workflow of the observation portion of the clinic and ensures supplies are available.

Observer

Responsibilities:
- Works with EMS to observe and respond to adverse reactions post-vaccination.
- Monitors patients for signs of vaccination reaction including itchiness, angioedema and shortness of breath, and escalates concerns immediately.
- Advises patients to rest for 15 minutes if no history of prior adverse reaction; additional 15 minutes if needed.

EMS & AMR

Responsibilities:
- Works with Observers to observe and respond to adverse reactions post-vaccination.
- Advises patients to rest for 15 minutes if no history of prior adverse reaction; additional 15 minutes if needed.
- Escalates issues to Clinical Operations Director and Observer Lead.

Station Procedures: See EMS & AMR Roles & Responsibilities

Staff Lead

Responsibilities:
- Validates, checks and adjusts staff schedules and collaborates with other leads to support any identified scheduling gaps.
- If gaps in schedule are determined, coordinates with other leads to determine what help is needed. Coordinates with Clinical Practice Supervisor if Vaccinator role needs to be filled.

Station Procedures: Preparing for the Day; How to Check-In

Site Lead

Responsibilities:
- Oversee overall coordination between partners onsite.
- Manage daily schedule for overall site, including establishing daily agenda
- Lead overall site meetings
- Coordinate overall strategy and direction of site
- Customer facing point of escalation
- Track and manage outstanding deliverables/issues for site

Station Procedures: All

Medical Interpreter

Responsibilities:
- Provide medical interpretation (certification required)
- Choose top languages for zip codes
- Facilitate phone or online medical interpretation software for languages not spoken by onsite interpreter
- Assist in observation room when not providing interpretation services

Data Entry Staff

Responsibilities:
- Provides detail-oriented data entry at the vaccination station as well as document control to ensure patient's information is accurately captured and stored securely.
- Collects documents from patient.
- Enters demographic and vaccine administration data.
- Escalates concerns appropriately.

Onsite Appointment Support

Responsibilities:
- Ensure all devices are up and running prior to each shift
- Aid guests that require assistance to schedule dose 2 appointments after receiving dose 1
- Provide operational support for scheduling/patient issues
- Ability to edit and change appointments
- Ensure changes to scheduling tool/technology are functional on first day of new updates
- Train staff on any updates to scheduling tool or onsite technology

Runner

Responsibilities:
- Ensures sufficient supplies at each station
- Coordinates between Pharmacist and Vaccinators, running appropriate vaccination dose between the two stations.

POD Manager

Responsibilities:
- Oversee coordination across partners within POD and serve as primary point of escalation within the POD for issues
- Conduct daily stand-up sessions and coordinate staffing
- Oversee appointments and bookings
- Understand and support dose allocation
- Coordinate with overall Site and Clinical Operations Director
- Track, manage and audit deliverables

Onsite Tech Lead

Responsibilities:
- Ensure access is correctly provisioned based on roles and responsibilities
- Conduct regular checks on data quality
- Troubleshoot issues throughout data
- Identify and flag additional needed functionality in tech solutions
- Coordinate near-term solutions or workarounds in event of tech outages

Templates

Overview

- Use the following templates to customize and create Roles & Responsibilities, Station Procedures and lanyards that will be most helpful for your site.
- All RED text should be edited.
- Station icons are optional.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet.

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet lorem ipsum.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet lorem ipsum.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet lorem ipsum.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet lorem ipsum.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet lorem ipsum.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet

Station Procedures: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet lorem ipsum.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet

Station Procedures : Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet lorem ipsum.

Role Title Here

Responsibilities:
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet
- Lorem ipsum dolor sit amet. Lorem ipum dolor sit. Lorem ipsum dolor sit amet.
- Lorem ipsum dolor sit amet

Quick Reference Guides: Lorem ipsum dolor sit amet, lorem ipsum dolor sit amet, lorem ipsum dolor sit amet lorem ipsum.

One Line Title Here

Schedule	• [Insert example: "On-site, 45 minutes before and after open hours"]
Responsibilities	• [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.]

*Please also refer to [Station Procedure Title] on page # and [Station Procedure Title] on page #

Longer, Two-Line Role Title Goes Here

Schedule	• [Insert example: "On-site 45 minutes before and after open hours."]
Responsibilities	• [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.] • [Insert text – e.g., Responsible for decision-making regarding xyz.]

STATION PROCEDURE

*Please also refer to [Station Procedure Title] on page # and [Station Procedure Title] on page #

STATION PROCEDURE

Title Here
(1 of 2)

GUIDE FOR:

- Roles & Responsibilities Title
- Roles & Responsibilities Title

PURPOSE:

Placeholder for overview of these procedures and how to use them..

Insert Content Header

1. [Insert text – e.g., Step 1 in how to do xyz.]
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.

2. [Insert text – e.g., Step 2 in how to do xyz.]
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.

3. [Insert text – e.g., Step 3 in how to do xyz.]
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.

4. [Insert text – e.g., Step 4 in how to do xyz.]
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.
   - Placeholder for additional instruction or notes.

Placeholder only – add relevant screenshot

1. Caption

Placeholder only – add relevant screenshot

2. Caption

Placeholder only – add relevant screenshot

3. Caption

Placeholder only – add relevant screenshot

4. Caption

Glossary

| Term	Brief Description	Additional Info
Super Site	Mass vaccination center able to administer 7K+ vaccines / day to public.	Targeting 8-10 in WA State.
Point of Dispensing (POD)	Flexible model reflecting one end-to-end vaccination process flow; modularity enables accommodation of variations in space size and layouts at vaccination sites.	Number of PODs based on site specifics with corresponding size designation: • Small (12-35) • Medium (36-59) • Large (60-95) • Mega (96-120)
Throughput	Quantity of vaccinations per specified period (hour, day, POD.)	Super sites targeting 7K+
Way Finding	Information systems that guide people through the physical environment and enhance their understanding and experience of the space.	Can be digital, printed signage, and/or human.
Health Check Station	Where patient / volunteers / staff screened for COVID-19 symptoms (aka ECP – Entry Control Point)	Checks patients for symptoms, contact and temperature. Does not allow patient to pass if they fail the checks.
Registration Station	Where patient appointment and identification verified.	
Vaccination Station	Where vaccination is administered to patient.	IIS data entry occurs concurrent with vaccination.

Glossary (2 of 3)

Jobs with the red asterisk are CLINICAL ROLES

Term	Brief Description	Additional Info
Observation Station	Where patients are monitored after being vaccinated.	Monitored for 15 minutes (30 minutes if patient has a history of an adverse reaction for adverse reactions including anaphylactic shock or fainting.)
Reconstituting Space	Where vaccine is prepared in vial by Vaccine Prep Staff in adherence to manufacturer's specifications.	Specs differ by vaccine manufacturer.
Cold Chain	Represents uninterrupted series of temperature-controlled supply chain covering production, storage and distribution to maintain quality.	Specs differ by vaccine manufacturer.
Vaccinator ✳	Individual who administers vaccination to patient.	Must be medically trained / certified. Includes nurses, medical assistants, nurse practitioners, doctors, students in health professions, physician assistants, pharmacy technicians, select veterinarians, dentists, medics and EMTs.
EMT ✳	Emergency Medical Technician trained to provide emergency medical care in case of adverse vaccine reaction by patient.	AMR (American Medical Response, Inc.) provides medical transportation services.

**Jobs with the red asterisk
are CLINICAL ROLES**

Term	Brief Description	Additional Info
Vaccine Prep Staff ✳	Individual who prepares vaccine per manufacturer's direction.	Must be medically trained / certified; Pharmacy techs, nurses. Need 25% of vaccinator head count to balance prep with administration.
Vaccinator Admin	Assists vaccinator in data verification / entry into IIS.	Background check required given data privacy; training session required.
Runner	Hands and feet of production ensuring sufficient supplies at each station.	
EVS	Environmental Services: Responsible for medical waste disposal and maintaining a sterile environment through cleaning.	
Observer	Individual tasked with monitoring patients after receiving vaccine for adverse reactions.	15 minutes minimum;

Appendix Materials (1 of 3)

Item	Source	Description of Materials
COVID-19 Vaccination Program Interim Playbook for Jurisdiction Operations	Center for Disease Control and Prevention (CDC)	Playbook for state, territorial , tribal, and local public health programs and their partners on how to plan and operationalize a vaccination response to COVID-19 within their jurisdictions. The document's sections cover specific areas of COVID-19 vaccination program planning and implementation and provide key guidance documents and links to resources to assist those efforts.
COVID-19 Vaccination ProgramInterim Playbook for Jurisdictions Operations Annex: Considerations for Increasing COVID-19 Vaccination: Reaching and Increasing Uptake in Priority Populations	Center for Disease Control and Prevention (CDC)	Companion document to the CDC "Playbook" (see above). Provides guidance and considerations to jurisdictions regarding: 1) when and how to transition from vaccinating initial populations of focus to reaching and increasing uptake in additional priority populations; 2) a framework for balancing equitable access, service delivery, and vaccine demand; 3) tools for engaging priority populations and increasing vaccine confidence; 3) strategies to leverage private-public partnerships.
The Advisory Committee on Immunization Practices' Ethical Principles for Allocating Initial Supplies of COVID-19 Vaccine	Center for Disease Control and Prevention (CDC)	Outlines the four ethical principles that will assist ACIP in formulating recommendations for the allocation of COVID-19 vaccine while supply is limited, in addition to scientific data and implementation feasibility.
Community-Based Organizations COVID-19 Vaccine Toolkit	Center for Disease Control and Prevention (CDC)	This toolkit is designed for staff of organizations serving communities affected by COVID-19. These CBOs could include social service organizations, faith-based organizations, YMCAs/YWCAs, fraternities, school organizations (e.g., PTAs/PTOs), meal delivery services, senior centers, and others.

Appendix Materials (2 of 3)

Item	Source	Description of Materials
COVID-19 Vaccine Prioritization Guidance and Interim Allocation Framework	Washington State Department of Health (DoH)	This document shares the Washington State Department of Health's guidance on vaccine allocation and prioritization. Given current information and federal guidance, we are providing guidance on Phase 1a and 1b with tentative future phases that will be updated based on: • Vaccine supply and uptake • New information from clinical trials and local data • New federal guidance and vaccine recommendations • Ongoing feedback from impacted communities, partners, sectors, and industries
Principles for Equitable Vaccine Delivery	Public Health – Seattle & King County	Intentional strategy to ensure equitable access to vaccine. Written by the largest county public health agency in Washington State, Public Health – Seattle & King County.
Vaccine Frequently Asked Questions (FAQ)	Public Health – Seattle & King County	Answers to frequently asked vaccine related questions with links to answers in the following languages: Amharic, Arabic, Chinese (Traditional and Simplified), French, Khmer, Korean, Marshellese, Oromo, Russian, Samoan, Somali, Spanish, Tigrinya, Tongan, Ukrainian and Vietnamese.
COVID-19 Prevention Network Vaccines Education Content	Provided by the Fred Hutch	This document focuses on social media materials created to educate the public on vaccine.

Appendix Materials (3 of 3)

Item	Source	Description of Materials
Communications & Signage	Touch Worldwide	Download and customizable signage
Strategies for equitable COVID-19 vaccine distribution	Washington State Department of Health (DoH)	Details Washington State Department of Health's 8 strategies for equitable COVID-19 vaccine distribution.
Throughput modeling calculator	Starbucks	Site layout throughput modeling calculator based on arrival rate, hours of operation, trip time, and vaccination rate.

To all the community organizations, private businesses, King County Public Health, DOH, and all public health entities, and the Challenge Seattle members who have contributed insights and advised on the creation of this Playbook -

Thank you.

Disclaimer

This document is intended to be a guide for consideration only and does not include legal or regulatory advice or recommendations on how to address the specific COVID-19 situation for your business or employees. This document does not: (i) constitute medical or safety advice, nor be a substitute for the same; nor should it (ii) be seen as a formal endorsement or recommendation of a particular response. As such you are advised to make your own assessment as to the appropriate course of action to take, using this presentation as guidance. Please carefully consider local laws and guidance in your area, particularly the most recent advice issued by your local (and national) health authorities, before making any decision.