

of Health

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Guidance for Facilities, Providers, and Local Health Departments Receiving COVID-19 Vaccine Weeks 1-4 New York State Vaccination Program Phase 1A Only

Limited amounts of COVID-19 vaccine will be available during the first phase of the COVID-19 vaccination program in New York. The amount of vaccine the state receives is based upon the allocation made to New York by the Federal Government. However, the state determines who needs it most. The New York State Department of Health (NYSDOH) continues to expand on its prioritization and allocation framework based on guidance from the Centers for Disease Control and Prevention's (CDC's) Advisory Committee on Immunization Practices (ACIP). As one of a limited number of facilities eligible to receive and administer vaccine it is your obligation to quickly utilize all doses allocated to your facility. Any facility that is unable to utilize vaccine within seven days of receipt will have doses removed and may have limited access to future vaccine doses. New York has implemented a "Use it or Lose it" policy with respect to any facility that receives vaccine.

The total number of healthcare personnel and employees and residents in congregate settings in New York State (including New York City) is estimated at more than 2 million, spanning a diverse group of settings such as hospitals, LTCF, home care, emergency medical services, ambulatory care, and others. In most cases, the facility receiving the vaccine must be prepared for an initial supply of vaccine that will not cover the entire workforce at once. Since there is demand and need for the vaccine across the state, if you received vaccine it is designated only for the population eligible at the time to receive it. The NYSDOH is directing all vaccine providers to follow this guidance for prioritization of their workforce and all eligible populations during the initial period of limited supply.

Table 1 at the end of the document displays prioritization by week. Table 2 displays where priority groups should go to be vaccinated.

This guidance supersedes and replaces previously issued weeks 1 to 4 Phase 1A Guidance.

Summary of key points:

- COVID-19 vaccine must be given according to the prioritization plan established by the NYSDOH.
- All doses of vaccine must be administered within the week received, and facilities must notify NYSDOH if the facility is not on pace to administer all such doses within seven days of receipt. Your allocation is based upon the priority group population at your facility. If there is an expectation that you are unable to complete the administration within that week, NYSDOH may remove remaining vaccine to ensure it is administered to those high-need population groups as soon as possible.
- The first group to be vaccinated at any facility or vaccination site will be health care personnel at high risk for • transmitting or becoming infected with COVID-19, including direct care, administrative staff, and food and housekeeping services staff who have contact with patients or infectious materials.
- After the front-line high-risk staff are vaccinated, facilities must vaccinate the next priority groups.

- The vaccine cannot be used for any other populations or groups other than those determined eligible via NYSDOH guidance.
- Vaccine cannot be redistributed to another facility, provider or department without prior approval and consent of the NYSDOH. Facilities needing to redistribute vaccine must submit a completed redistribution form to <u>COVIDVaccineRedistribution@health.ny.gov</u> and wait for approval.
- A facility may transport vaccine to another location for the purpose of holding a limited duration vaccination clinic without prior approval from the NYSDOH; however, any unused vaccine must be transported back to the original location at the conclusion of the clinic that day. Any facility holding a limited duration vaccination clinic must adhere to all COVID-19 immunization reporting requirements. Such facility must retain possession and control of the vaccine for the duration of the transport and administration.
- Those who are administering the vaccine should be prioritized to receive vaccine as soon as doses are available.
- All facilities are required to track vaccine uptake among their staff and must furnish uptake data to the NYSDOH upon request.
- Facilities that have vaccinated all frontline direct care and patient-facing health care workers and still have vaccine available should proceed to vaccinating the next groups of health care and patient-facing workers, whose job responsibilities require in-person presence, including those health care workers that will be expected to participate in the hospital or health system's surge response for their facility, continuing to prioritize by risk.

Facilities should continue to vaccinate those who were prioritized in Phase 1A in weeks 1-3 (see table below). In addition, add:

Beginning Week 4, January 4, 2021:

- All Outpatient/Ambulatory front-line, high-risk health care workers of any age who provide direct in-person patient care, or other staff in a position in which they have direct contact with patients (i.e., intake staff), will be eligible to receive COVID-19 vaccine.
 - This includes, but is not limited to, individuals who work in private medical practices; hospital-affiliated medical practices; public health clinics; specialty medical practices of all types; dental practices of all types; dialysis workers; diagnostic and treatment centers; occupational therapists; physical therapists; speech therapists; phlebotomists; behavioral health workers; and student health workers.
- All front-line, high-risk public health workers who have direct contact with patients, including those conducting COVID-19 tests, those handling COVID-19 lab specimens and COVID-19 vaccinations, will be eligible to receive COVID-19 vaccine.
- Home care workers and aides, hospice workers, personal care aides, and consumer-directed personal care workers.
- Staff and residents of nursing homes, skilled nursing facilities, and adult care facilities.

Vaccinator Responsibilities

This guidance describes steps that each vaccinating facility must take as a condition to receiving COVID-19 vaccine. Each facility that receives vaccine:

- Will be notified about how much vaccine will be received.
- Must use all vaccine doses in the week it is received by rapidly deploying it to the eligible populations.

- Must prioritize which of their own staff receives vaccination first.
- Must vaccinate those who are administering the vaccine.
- May be allocated vaccine for individuals who do not work at the facility.
- Will need to schedule and accommodate other priority populations for vaccination within the facility.
- Will be provided access to the Department's Countermeasure Data Management System (CDMS), where the priority populations outside the facility will be scheduled for vaccinations at times provided by the facility.
- May not be able to vaccinate their entire Phase 1A staff from the same shipment.

Identify staff prioritized for vaccine within the facility receiving vaccine:

Health care personnel within the facility at high risk for transmitting or becoming infected with COVID-19 are eligible to be vaccinated. This group includes not only clinicians, but any staff who work in settings where transmission is likely, or who are at higher risk of transmitting the virus to patients who are at elevated risk of severe morbidity or mortality. This includes those who are paid and unpaid and who have the potential for direct or indirect exposure to patients or infectious materials.

Identify those staff who work where:

- Patients with COVID-19 are provided with direct care;
- Aerosolizing procedures are performed;
- Exposure to the public occurs in an uncontrolled way (reception areas, cafeterias, elevators etc.); and/or
- There are employed staff, voluntary staff, contractors and volunteers who meet the criteria.

This should include areas where patients are seen in person. This does not include those staff who do telehealth only or those staff who are able to socially distance in an office or at home, without exposure to patients or the public. If there is insufficient vaccine to vaccinate all your front line, high-risk staff, it may be necessary to rank your employees according to age, high-risk medical conditions if known, or by randomly selecting those to be vaccinated.

Plan to accommodate Priority 1A populations outside of facility staff:

Providers will be responsible for vaccinating other priority populations that are part of Phase 1A, including:

- Staff and residents of behavioral and mental health settings and institutions;
- Staff from other health care facilities;
- Staff from public and privately operated COVID-19 testing locations/operations or laboratory settings; and
- Medical examiners, coroners, and funeral workers who are exposed to infectious materials or bodily fluids.

The NYSDOH will clearly communicate to all facilities as to allocation of vaccine (e.g. if a certain vaccine allocation is for the purpose of vaccinating non-facility individuals) and will provide necessary vaccine appointment scheduling support through CDMS. If a facility is unsure as to the intended priority population for any vaccine allocation, they should email the NYSDOH at <u>COVID19Vaccine@health.ny.gov</u>.

All facilities must ensure that those they are vaccinating are eligible to receive the vaccine as part of Priority 1A as required by Executive Order 202.86.

Plan immediately for the second COVID-19 dose:

All providers should immediately make appointments for staff and those from other priority populations to receive the second dose 21 days later (Pfizer vaccine) or 28 days later (Moderna vaccine) at the time the first dose is administered. Those who receive the first vaccine must return to the same location to receive the second dose. It is important to send frequent reminders about when and where to receive the second dose. All vaccinated staff must be tracked to ensure they get the matching second dose on time. Individuals must receive two doses of the same vaccine

(e.g., you must receive two doses of the Pfizer vaccine or two doses of the Moderna vaccine). They are **not** interchangeable. (See Guidance on receiving a second dose.)

Planning for a second dose, including making an appointment for the second dose, will need to occur for all facility staff and those coming from outside the facility. However, please note the initial allocation is for the first dose of the vaccine. **Do not reserve vaccine for the second dose. A second dose allocation will be shipped to your facility separately in time for administration of the second dose at the required interval.**

Vaccine Form

All individuals receiving the COVID-19 vaccination must fill out the NYS DOH COVID-19 Vaccine form pursuant to <u>Executive Order 202.86</u> and attest that they are eligible to be vaccinated.

Proof of Occupation

Individuals being vaccinated who come from outside the facility must bring proof of eligibility to the vaccination site. This may include an employee ID card, a letter from an employer or affiliated organization, or a pay stub, depending on the specific priority status. Alternatively, employers or organizations can provide a list of staff who meet the criteria for vaccination. Do not vaccinate any person who does not have proof of their occupation or priority status. Executive Order 202.86 imposes monetary penalties for any provider vaccinating an individual who has not certified eligibility or for who the provider otherwise has knowledge the individual is not a member of a priority group.

The NYSDOH vaccine form includes a self-attestation regarding eligibility for vaccination, which must be completed prior to vaccination. Vaccination eligibility must be based on current employment status.

Vaccine Safety

Post-vaccination monitoring is an essential part of the COVID-19 vaccination program. The Centers for Disease Control and Prevention (CDC) is promoting and encouraging all those being vaccinated to participate in V-Safe, a smart-phone based application that will allow those vaccinated to enter their symptoms in the days after vaccination using text messaging. V-Safe also provides reminders for the second dose and telephone follow up for anyone who reports medically significant adverse events. V-Safe materials can be found at http://www.cdc.gov/vsafe, including a V-Safe information sheet. Please print out the information sheet and hand to each person vaccinated. You must report any adverse events that occur after vaccination to the Vaccine Adverse Events Reporting System (VAERS) at info@vAERS.org or by calling 1-800-822-7967.

Equity

All workers who meet criteria for vaccination must be included, regardless of job title. For example, in a hospital, doctors, registered nurses, licensed practical nurses, certified nursing assistants, personal care assistants, environmental workers, ward clerks, dietary workers, and others who work on the same floor, ward, clinic or office and who have direct contact with COVID-19 patients must all be eligible for vaccination at the same time.

Communicating the Plan

Please be sure to clearly communicate how prioritization will work to all staff and provide updates. Identify the individuals who meet the prioritization criteria and communicate to them your plan for offering COVID-19 vaccine. Facilities should consider implementing an appointment schedule to make it possible to complete the first dose of the vaccine series for your high-risk personnel as soon as possible after receiving the vaccine.

This guidance is in effect from the date of issuance until it is updated, or additional guidance is issued by NYSDOH. For questions, please contact the New York State Department of Health, Bureau of Immunization at <u>COVID19vaccine@health.ny.gov</u>.

New York State Vaccination Program Guidance Week-By-Week Prioritization and Vaccination Location Phase 1A Only

Table 1: Prioritization				
Week:	Facilities receiving vaccine:	Populations prioritized:		
Week 1-3	 Hospitals FQHCs Urgent Care Centers (UCCs) 	 High-risk hospital and FQHC staff, including OMH psychiatric centers Emergency Medical Services (EMS) Personnel Medical Examiners, and Coroners Funeral workers who have direct contact with infectious material and bodily fluids Agency staff and residents in congregate living situations run by the Office of People with Developmental Disabilities (OPWDD) the Office of Mental Health (OMH) and the Office of Addiction Services and Supports (OASAS) Urgent Care providers Any staff administering COVID-19 Vaccinations 		
Beginning Week 4 (Beginning 1/4/21)	All facilities included in weeks 1-3, and: - Regional Hubs and/or Local Health Departments	 All populations included in weeks 1- 3, and: All Outpatient/Ambulatory front-line, high-risk health care workers of any age who provide direct in-person patient care, or other staff in a position in which they have direct contact with patients (i.e., intake staff), will be eligible to receive COVID-19 vaccine All front-line, high-risk public health workers who have direct contact with patients, including those conducting COVID-19 tests, handling COVID-19 specimens and COVID-19 vaccinations, will 		

	Table 2: Where to Be Vaccinated				
Detailed Vaccine Prioritized Groups & Responsibility for Vaccination					
Vaccine Recipient Group	Who is vaccinating them - NYS	Who is vaccinating them - NYC			
All EMS	- Hospitals or FQHCs - UCCs - Local Health Department PODs	 Hospitals FDNY (only for members of the Department) New York City Department of Health and Mental Hygiene (NYCDOHMH) with NYC REMSCO UCCs 			
All FQHC staff following the clinical risk assessment guidance	- FQHCs	- FQHCs - NYCDOHMH			
OPWDD – staff and residents	- Hospitals or FQHCs - UCCs - LHD PODs	 Hospitals or FQHCs, or Affiliated Physicians, or YAI Premier Health Care UCCs 			
OMH State- Operated — staff and residents	- OMH Psychiatric Centers	- OMH Psychiatric Centers			
OMH Voluntary Operated – staff and residents	- Hospitals or FQHCs - UCCs - LHD PODs	 Hospitals or FQHCs, or Affiliated Physicians, or YAI Premier Health Care UCCs 			
OASAS State- Operated – staff	- OMH Psychiatric Hospitals	- OMH Psychiatric Hospitals			

OASAS Voluntary Operated – staff and residents	- Hospitals or FQHCs - UCCs - LHD PODs	 Hospitals or FQHCs, or Affiliated Physicians, or YAI Premier Health Care, or OMH Psychiatric Hospitals UCCs
All medical examiners and coroners, funeral workers	- Hospitals or FQHCs - UCCs - LHD PODs	- Hospitals and NYCDOHMH
Hospital high-risk staff, following the clinical risk assessment guidance	- Hospitals	- Hospitals
Urgent Care Center Providers	- UCCs	- UCCs
Staff administering the COVID-19 vaccine	- Hospitals or FQHCs - UCCs - LHD PODs	- NYCDOHMH - Hospitals - FQHCs
Outpatient, ambulatory front- line/high-risk healthcare personnel	- Hospitals or FQHCs - UCCs - LHD PODs	- NYCDOHMH - Hospitals - FQHCs - UCCs
All front-line, high- risk public health workers who have direct contact with patients	- Hospitals or FQHCs - UCCs - LHD PODs	- NYCDOHMH - Hospitals

Health care workers at testing sites	- Hospitals or FQHCs - UCCs - LHD PODs	- NYCDOHMH - Hospitals
Home care workers and aides, hospice workers, personal care aides, and consumer-directed personal care workers	- Hospitals or FQHCs - UCCs - LHD PODs	Enrolled vaccination providers, including local PODs
Staff and residents of nursing homes, skilled nursing facilities, and adult care facilities.	- Hospitals or FQHCs - UCCs - LHD PODs	Enrolled vaccination providers, including local PODs