COVID-19 Vaccinations for Children

A joint presentation by the Ohio Chapter, American Academy of Pediatrics and the Ohio Department of Health.
Welcome

Ohio Department of Health

Ohio Chapter
INCORPORATED IN OHIO

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®
<table>
<thead>
<tr>
<th></th>
<th>Total Reported Cases</th>
<th>Last 24 Hour Reported Cases Change</th>
<th>21 Day Reported Case Average</th>
<th>21 Day Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Cases</strong></td>
<td>1,085,733</td>
<td>1,411</td>
<td>1,387</td>
<td></td>
</tr>
<tr>
<td><strong>Hospitalizations</strong></td>
<td>57,545</td>
<td>143</td>
<td>112</td>
<td></td>
</tr>
<tr>
<td><strong>ICU Admissions</strong></td>
<td>7,939</td>
<td>15</td>
<td>13</td>
<td></td>
</tr>
<tr>
<td><strong>Deaths</strong></td>
<td>19,441</td>
<td>13</td>
<td>19</td>
<td></td>
</tr>
</tbody>
</table>

Other states do not send death certificates to ODH’s Bureau of Vital Statistics on a regular schedule and therefore fluctuations will be reflected in reported mortality data. Deaths are assigned to their appropriate date of death.
State of Ohio | COVID-19 Vaccine Dashboard

Statewide: Vaccine Status
By Total and % of Population

<table>
<thead>
<tr>
<th>Vaccine Started*, Change from Last 24 Hours****</th>
<th>Vaccine Started* By Population</th>
<th>Vaccine Started*, Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>18,219</td>
<td>41.75%</td>
<td>4,880,699</td>
</tr>
</tbody>
</table>

Click County to Filter Metrics
Counties are colored by % of Population with Vaccine Started*

Key Metrics
Selected to view key demographic groups

<table>
<thead>
<tr>
<th>Age Group</th>
<th>% of Population</th>
<th>Number of People</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-19</td>
<td>5.97%</td>
<td>172,321</td>
</tr>
<tr>
<td>20-29</td>
<td>32.61%</td>
<td>506,504</td>
</tr>
<tr>
<td>30-39</td>
<td>30.70%</td>
<td>587,768</td>
</tr>
<tr>
<td>40-49</td>
<td>46.46%</td>
<td>644,442</td>
</tr>
<tr>
<td>50-59</td>
<td>55.31%</td>
<td>852,971</td>
</tr>
<tr>
<td>60-64</td>
<td>66.59%</td>
<td>530,372</td>
</tr>
<tr>
<td>65-69</td>
<td>75.60%</td>
<td>505,458</td>
</tr>
<tr>
<td>70-74</td>
<td>86.77%</td>
<td>421,956</td>
</tr>
<tr>
<td>75-79</td>
<td>77.60%</td>
<td>278,190</td>
</tr>
<tr>
<td>80+</td>
<td>76.22%</td>
<td>380,687</td>
</tr>
</tbody>
</table>

View Count By
Selected to view counts by daily or cumulative:
Daily Total

COVID-19

May 12, 2021
Purpose

Expand vaccine providers to include pediatric practices who can best meet the special vaccination needs of youth.

As Ohio prepares for COVID-19 vaccine eligibility to be expanded to include more children, the Ohio Department of Health (ODH) and Ohio chapter of the American Association of Pediatrics (AAP) are asking for your partnership in vaccinating and protecting Ohio’s children and teenagers.
Vaccine eligibility for minors

Ohioans ages 16-17 are currently eligible to receive the COVID-19 vaccine with consent from a parent or guardian, unless emancipated.

That eligibility is being expanded to include ages 12-15. The U.S. Food & Drug Administration has extended its emergency use authorization to include that age group.

Today, the Centers for Disease Control and Prevention is expected to make recommendations for the vaccine’s use for adolescents.

Ohio will expand eligibility to this age group following the required federal action.
More flexible provider expectations

Providers are no longer expected to administer the COVID vaccine to non-patients and can schedule appointments for their own patients only.

Previous vaccination throughput capacity requirements have been modified.

Previous requirements to administer vaccine allocations within seven days of receipt have been eliminated to allow for more flexibility. However, ODH continues to request that providers administer vaccine allocations as quickly as possible.

While every effort to minimize vaccine waste should be taken, practices will not be adversely impacted if they aren’t able to use their entire supply.

Ultra-cold storage capability is not a requirement, even for the Pfizer vaccine.
How to enroll as a provider

Requirements for becoming a COVID-19 vaccination provider and instructions for how to enroll are available on the [ODH Ohio COVID-19 Provider Enrollment webpage](#).

- Please note that only one individual needs to complete the enrollment process per location. That person can be the office manager or another designated staffer.
- All providers at the practice site who are legally authorized to administer vaccines can administer the COVID-19 vaccine.
Currently available COVID-19 vaccines

Three COVID-19 vaccine products have received an emergency use authorization (EUA) from the U.S. Food and Drug Administration (FDA). But only the Pfizer product is authorized for use in people younger than 18.

- **Pfizer-BioNTech**
  Ages 16 and older*
  *Authorization pending for ages 12-15

- **Moderna**
  Ages 18 and older

- **Johnson & Johnson (Janssen)**
  Ages 18 and older
COVID-19 vaccine ordering, shipments

The federal government notifies Ohio about its statewide allocation for the Ohio vaccination program every Tuesday.

The Ohio Department of Health (ODH) then allocates the vaccines to enrolled providers throughout the state.

ODH shares allocation information with providers getting vaccine on Wednesdays.

Weekly shipments are expected to arrive on Mondays, Tuesdays, or Wednesdays the following week.

Ancillary kits are shipped to providers separately.

Most shipments are sent directly from the manufacturer or its shipping partner or the ODH Receipt, Store, and Stage warehouse.
Responsibility for vaccine ordering

Ohio Department of Health
- ODH is assigning doses and placing orders for most providers.
- Providers are notified about their allocations on Wednesdays.

Individual vaccine providers
- A limited number of providers, including local health departments and hospitals, are participating in the first phase of direct vaccine ordering.
- As vaccine is more widely available now, the goal is to gradually transition the responsibility of ordering from ODH to individual providers.
## Planning for vaccination clinics

<table>
<thead>
<tr>
<th>Protect staff and clients from COVID-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Social distancing.</td>
</tr>
<tr>
<td>• Personal protective equipment (PPE) for staff.</td>
</tr>
<tr>
<td>• Face masks for patients.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Ensure adequate staffing and supplies</th>
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<tbody>
<tr>
<td>• Hand-sanitizer.</td>
</tr>
<tr>
<td>• Face coverings.</td>
</tr>
<tr>
<td>• Cleaning supplies.</td>
</tr>
<tr>
<td>• Thermometers.</td>
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<tr>
<td>• Barriers.</td>
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<tr>
<td>• Floor markers, signs, additional PPE supplies, and posters.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Offer options for scheduling, screening</th>
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<tbody>
<tr>
<td>• Consider using online or phone options for scheduling, check-in, and screenings.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Build partnerships</th>
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</thead>
<tbody>
<tr>
<td>• Consider conducting smaller, appointment-only temporary clinics in schools, churches, businesses,</td>
</tr>
<tr>
<td>community organizations, and pharmacies to help reduce exposure risk.</td>
</tr>
</tbody>
</table>
Make clinics convenient, accessible

Curbside and drive-thru clinics may provide the best option for safety.

For walk-thru clinics, maintain separation in lines or ask clients to wait in vehicles or in another location.

Include weather considerations in planning if clients are asked to wait outdoors, especially if you expect them to arrive on foot.

Consider the special needs of the populations you are serving, including children. Make accommodations for those who have disabilities.

CDC resources, checklists: www.cdc.gov/vaccines/hcp/admin/mass-clinic-activities/index.html
Strategies to minimize chances for exposure during vaccination

To ensure safe delivery and minimize chances for exposure during vaccination visits, administrators should implement the following:

1. Prior to and upon arrival, screen individuals for symptoms and/or contact with anyone with confirmed or probable COVID-19. Immediately isolate symptomatic or potentially exposed individuals.

2. Limit entry to people who are pivotal to the visit. Install barriers, such as clear plastic sneeze guards, to limit physical contact upon entry.

3. Require face coverings for people older than 2 years.

4. Provide hand sanitizer stations to assist with adherence to proper hand hygiene.

5. Post signage designating 6-foot distances to allow for adequate social distancing.
Vaccine Administration:
COVID-19 Personal Protective Equipment

- **Face mask**
  - **Recommended**: All healthcare providers (N95 masks not recommended)

- **Eye protection**
  - **Recommended**: Areas of moderate/substantial community transmission
  - **Optional**: Areas of minimal/no community transmission unless otherwise indicated as a part of standard precautions

- **Gloves**
  - **Recommended**: Intranasal or oral vaccines
  - **Optional**: Intramuscular or subcutaneous vaccines
Before vaccine arrives: Responsibility of proper storage and handling

Vaccine management plan

- Outlines primary coordinator responsibilities, which include but are not limited to:
  - Ensuring other staff are trained on the following:
    - How to handle vaccine receipt and storage.
    - What to do and who to call for an emergency power outage.
    - How to safely pack-out vaccines, and where to take them.
  - Establish a working agreement with at least one alternative storage facility for emergency storage in the event of a power outage or equipment malfunction.
  - Monitoring and recording temperatures.
  - Responding to temperature excursions.
  - Inventory management – stock rotation.

Vaccine placement within the unit.

“Do Not Disconnect” signs.
When sites enrolled as providers in the COVID-19 vaccine program, each site had to indicate that they had a temperature monitoring device (TMD) that met the following minimum criteria:

| Temperature probe or sensor. | Active temperature display that can be easily read from outside and shows current, minimum, and maximum temperatures. | Resettable minimum/maximum functionality. | Alarm for out-of-range temperatures. |
Temperatures of storage units containing COVID-19 vaccine must be monitored at all times with a temperature monitoring device (TMD).

Each site is required to adhere to minimum standards for temperature documentation.

Log temperatures on paper logs two times each day your office is open for each unit storing COVID-19 vaccine.
Standards for daily temperature documentation

Each site is required to adhere to the following minimum standards for temperature documentation:

| Log temperatures on paper logs two times each day your office is open for each unit storing COVID-19 vaccine. Use the TMD installed in the storage unit to document the temperatures on the paper logs. | In the morning (opening):  
- Log the current temperature.  
- Log minimum and maximum temperatures.  
- Clear the memory from the temperature monitoring device. | In the evening (closing):  
- Log the current temperature. |
Temperature monitoring: Paper temperature log

<table>
<thead>
<tr>
<th>Day of Month</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
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<th>12</th>
<th>13</th>
<th>14</th>
<th>15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Initials</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exact Time</td>
<td>AM</td>
<td>PM</td>
<td>AM</td>
<td>PM</td>
<td>AM</td>
<td>PM</td>
<td>AM</td>
<td>PM</td>
<td>AM</td>
<td>PM</td>
<td>AM</td>
<td>PM</td>
<td>AM</td>
<td>PM</td>
<td>AM</td>
</tr>
<tr>
<td>Min/Max Temp in Unit (since previous reading)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tbody>
</table>

**Danger! Temperatures above 5°F are too warm!** Write any out-of-range temps and room temp on the lines below and call 1-844-963-4829 immediately!

**Acceptable Temperatures**
- 5°F
- 4°F
- 3°F
- 2°F
- 1°F
- 0°F
- -1°F
- -2°F
- -3°F
- -4°F
- -5°F to -58°F

**Room Temperature**

If you have a vaccine storage issue, also complete “Vaccine Storage Troubleshooting Record” found on page 3.
When vaccines experience a temperature excursion, quarantine the vaccine immediately, and do not administer to patients.

Call ODH at 1-844-963-4829 (8 a.m.-7 p.m. Mondays through Fridays, and 8 a.m.- 5 p.m., Saturdays and Sundays).

ODH staff will review the temperature excursion with you to determine appropriate follow-up steps.

- Documentation needed (temperature logs, other temperature data).
- ODH will determine if a site must contact vaccine manufacturers.
- Determine whether vaccines are cleared for continued use or must be wasted.

COVID-19 Reporting temperature excursions
What to do when your shipment arrives

When you receive a shipment of vaccines, it must be **unpacked right away**.

| Check for damage to boxes. | Unpack the vaccine, and store vaccine appropriately. | Check the temperature monitoring devices to determine if vaccine experienced a temperature excursion during shipment.  
• If so, contact the Provider Call Center immediately at 1-844-963-4829 to report this issue. | Check ImpactSIIS (VOMS) and ensure that your doses show up in your vaccine inventory.  
• You may need to electronically receive your vaccine shipment so lots appear in your inventory, and inventory reduces as doses are administered. |
## Pfizer COVID-19 Vaccine

### Vaccine Temperature Ranges:
- **Ultra-cold**: minus 80 degrees Celsius and minus 60 degrees Celsius (minus 112 degrees Fahrenheit and minus 76 degrees Fahrenheit).
- **Frozen**: minus 25 C and minus 15 C (minus 13 F to 5 F) for up to two weeks.
- **Refrigerated**: 2 C and 8 C (36 F and 46 F) for up to five days (120 hours).

### Vaccine Storage Unit(s):
- Ultra-cold freezer.
- Freezer for up to two weeks.
- Thermal shipping container (if using, CDC recommends providers consider using for temporary storage only).
- Refrigerator for up to five days (120 hours).
Vaccine transport checklist

If off-site clinics are planned:

- Ensure your site has materials to transport the vaccine.
- A temperature monitoring device must be used to monitor temperatures while vaccine is in transport and during clinics.
- Temperatures must be logged on paper logs throughout the transport process and duration of the clinic.
- Vaccine providers are required to transport all vaccine according to manufacturer’s guidance and maintain appropriate storage during vaccination clinics.
Pfizer vaccine dosing

- The Pfizer vaccine is a two-dose product.
  - The first and second dose are the same product given twice, with a recommended interval of 21 days between doses.
  - If it is not feasible to adhere to the recommended interval, you may schedule the second dose up to 6 weeks (42 days) after the first dose; there is limited efficacy data beyond this window, but a dose after this time does not need to be repeated.
  - Doses inadvertently given less than 21 days apart do not need to be repeated.

- The vaccine must be mixed with diluent before administration.
- Pfizer vaccine is packaged in vials that contain up to six doses per vial. Each dose is 0.3 mL.
- Ancillary kits for Pfizer vaccine will provide enough supplies to allow for six doses from each vial.

The FDA says you cannot pool excess vaccine from multiple vials to create one dose.
Questions to ask before vaccination

Build in extra time for data collection, screening, and other paperwork and ask the following:

- Are you feeling sick today?
- Questions about allergies.
- Questions about previous COVID-19 vaccination, diagnosis, or treatment.
- Questions about other vaccines, antibody therapies.
- Questions about immune system disorders, immunosuppressive drugs/therapies, bleeding disorders, or blood thinners.
Who should, shouldn’t get the vaccine?

Do not administer to patients who:

- Are currently infected with COVID-19.
- Have a history of severe or immediate reactions to vaccines, injectable therapy or any ingredients in the COVID-19 vaccines.

Vaccine is NOT contraindicated for:

- People with immunocompromising or other conditions.
- People who are pregnant or breastfeeding.

<table>
<thead>
<tr>
<th>Allergy history</th>
<th>CDC recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>People with a history of severe allergic reactions not related to vaccines or medications (food, pet, venom, environmental, or latex).</td>
<td>Yes, get vaccinated.</td>
</tr>
<tr>
<td>People with a history of allergies to oral medications or a family history of severe allergic reactions.</td>
<td>Yes, get vaccinated.</td>
</tr>
<tr>
<td>People who have had an immediate allergic reaction – even if not severe – to vaccine or injectable therapy for another disease.</td>
<td>⚠ Talk to their doctor first.</td>
</tr>
<tr>
<td>People who have had an immediate allergic reaction – even if it was not severe – to any ingredient in an mRNA COVID-19 vaccine.</td>
<td>Do not get one of the available mRNA COVID-19 vaccines.</td>
</tr>
<tr>
<td>People who had an immediate allergic reaction after getting the first dose of an mRNA COVID-19 vaccine.</td>
<td>Do not get the second dose.</td>
</tr>
</tbody>
</table>

CDC RESOURCES: https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html
Preparing for possible allergic reactions

**Supplies needed**
- While severe reactions are rare, all vaccination providers should have appropriate medications and equipment at all COVID-19 vaccination sites:
  - Epinephrine.
  - Antihistamines.
  - Stethoscopes.
  - Blood pressure cuffs.
  - Timing devices to check pulse.

**Observation standards**
- The process involves an observation period of 15 to 30 minutes.
- People who have had severe allergic reactions or any type of immediate allergic reaction to a vaccine or injectable therapy should be monitored for at least 30 minutes.
- If a patient has had a severe allergic reaction in the past, it is recommended that they get vaccinated at a facility that can treat an allergic reaction.
How to report adverse events

Adverse events that occur in a recipient after receipt of COVID-19 vaccine should be reported to the **Vaccine Adverse Events Reporting System (VAERS)**. An “adverse event” is any health problem or “side effect” that happens after a vaccination. VAERS cannot determine if a vaccine caused an adverse event, but can determine if further investigation is needed. Vaccine providers should report serious reactions to VAERS: [https://vaers.hhs.gov/index.html](https://vaers.hhs.gov/index.html).

**Healthcare providers are required by law to report:**

- Vaccine administration errors.
- Serious adverse events that occur within a specified time period following vaccination, whether or not it is clear that a vaccine caused the adverse event.
- An adverse event listed by the vaccine manufacturer as a contraindication to further doses of the vaccine.
- Additional details are available by calling 800-822-7967 or at [https://vaers.hhs.gov/faq.html](https://vaers.hhs.gov/faq.html).
**Share information about v-safe**

**V-safe** is a smartphone-based tool that vaccine recipients can opt to use. It uses text messaging and web surveys to provide personalized health check-ins after a COVID-19 vaccination.

Through **v-safe**, patients can tell the CDC if they have any side effects after getting the COVID-19 vaccine.

**V-safe** also will remind patients to get the second COVID-19 vaccine dose when it is due.
Data reporting through ImpactSIIS

Vaccine administration doses should be reported in ImpactSIIS within 24 hours.

Target population/occupation data should be reported using the ODH checklist.
Billing and reimbursement for vaccine

There will be no out-of-pocket cost for vaccine recipients.

Enrolled providers may seek appropriate reimbursement from a program or health plan that covers COVID-19 vaccine administration fees for the individual receiving the vaccine (e.g., private insurance, Medicare, Medicaid, CHIP).

For vaccine recipients not covered by insurance, providers may seek reimbursement (at Medicare rates) for administration fees through the Health Resources & Services Administration offered by the U.S. Department of Health and Human Services.
Vaccine transfer

Movement of vaccine is not a recommended practice, but is permitted between enrolled providers with ODH approval. **Process for requesting vaccine transfer:**

<p>| | |</p>
<table>
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</table>
| **1.** Complete a [COVID-19 Vaccine Request of Movement](#) online form, which includes submission of temperature documentation to assure vaccine viability.  
  - Providers can request:  
    - Approval to move vaccine to an enrolled provider they have identified.  
    - ODH assistance in identifying enrolled provider locations where the vaccine can be moved. | **2.** ODH staff review these requests. Reviews are completed Monday through Friday and may take two to three business days.  
  **3.** Request approval will be communicated via email and arrive with instructions for the provider to complete the transfer. |

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COVID-19 May 12, 2021  
Ohio Department of Health
# How to contact the ODH Immunization Program

<table>
<thead>
<tr>
<th>Resources</th>
<th>Contact us</th>
</tr>
</thead>
</table>
| Visit our COVID-19 information hub for vaccine information and resources for providers and consumers. | Do you have COVID-19 questions?  
• Email us: covidvaccine@odh.ohio.gov  
• Contact our Provider Call Center at 1-844-9ODHVAX (1-844-963-4829). |
| [coronavirus.ohio.gov/vaccine](https://coronavirus.ohio.gov/vaccine) | |
| COVID-19 Vaccine Provider page:  
Visit [odh.ohio.gov](https://odh.ohio.gov) and click on Know Our Programs, then search for COVID-19 Vaccine Providers. | |
Ohio AAP COVID-19 Resources
http://ohioaap.org/covid19resources