

HOUSING PROVIDERS: EVEN BETTER VACCINE CLINICS

Advice from the community of LeadingAge members

In Advance – Scheduling and Promoting the Clinic

Communication with Pharmacy Partners

1. When communicating with a pharmacy or other vaccine provider, be clear that you are not a health care setting with medical staff on site.
2. Provide as much detail as possible about your housing community's staffing and building physical / space capacity.
3. Explain any literacy or English proficiency limitations of your residents or staff, and ask pharmacy staff to come prepared with translation or language interpretation options.
4. Decide with the pharmacy partner whether door-to-door or group common area vaccinations are most appropriate for your community.
5. Discuss what kind of equipment you have and need, including a copy machine, internet access, tables and chairs, markings on the floor, and Plexiglas barriers, and be clear about what equipment the pharmacy is bringing, including Epi pens and other medical equipment.
6. Ask for the best way to reach the pharmacy technicians, including cell phone numbers.
7. Secure the whole set of clinic dates at once, including second and third clinics.

8. Preparing Residents

9. Gauge resident interest in vaccine take-up by distributing a [resident vaccine survey or other toolkit materials](#).
10. Be clear that vaccination status does not impact resident or applicant occupancy, rent, or access to services.
11. Promote clinics or vaccines by putting up posters or distributing factsheets and FAQs to residents.
12. Approach resident questions with empathy, and counter vaccine hesitancy issues at the community by recommending residents consult trusted information sources, including the CDC website or their own physician.

13. Coordinating with Staff

14. Make a plan with community staff, including assigning roles and reassigning other tasks for the meantime.
15. Be as clear as possible about what staff can expect.
16. Consult legal counsel before making decisions to require staff vaccination.
17. Be prepared for staff outages during and in the days after getting vaccinated.

18. In Advance – Preparing for the Clinic

19. Paperwork

20. Obtain legal advice and [review HUD input](#) on handling protected resident information.
21. Get started as early as possible with paperwork and other preparation, and make a plan for handling protected resident information in a secure way (for example, using a HIPAA-compliant app or scanning software).
22. Carefully download and read the many pieces of information and forms from the pharmacy or health provider's website. If secure and possible, export data to Excel or auto-populate info to complete staff and resident forms.
23. Complete as much paper in advance as possible; set aside a full day or two for residents to come down to the office or a large common area and fill out paperwork; remind residents to bring their insurance cards.
24. Make copies of the front and back of the insurance card, and sure that questions on the forms are answered in advance, except for day-of questions.
25. Gather resident forms and insurance information by unit/ floor and alphabetize them or organize by unit if the external partners will be door-to-door, making sure information is protected and secure.

26. Make up packets with the employee Consent/Declination Form, V-safe Brochure, Pfizer/Moderna Fact Sheet, and Notice of Privacy for staff and distribute well in advance.
27. Create an alphabetized list of residents and one for staff members so you can check off who has been vaccinated and fulfill any reporting requirements in partnership with the pharmacy.

28. Logistics Planning

29. Get an accurate count of how many people will be vaccinated, so that the pharmacy partner does not bring too much or too little vaccine; be flexible in case there are extra doses.
30. Think through space planning: Where will people queue while maintaining social distancing? Where will people be observed for 15 minutes, who will observe them, and what signage will be helpful?
31. Consider rehearsing a walk-through for mobile residents and for staff.
32. Determine what extra staff/ people to assist will be needed for clinic day to help with logistics, guiding pharmacy partners from unit to unit, copying forms, etc.
33. Round up multiple clipboards for form fill-outs, and plan to have a copy machine within easy reach if you can.
34. Consider limiting activities that day, cancelling meetings, limiting window visits, cancelling what can be cancelled.
35. Plan for water or other support for the pharmacy partners and staff/residents.

36. Setting the Tone and Documenting the Clinic Experience

37. Create positive buzz and plan for ways to make it a celebratory environment.
38. Plan for pictures, videos, social media posts, music, stickers, or other things to mark the day of hope.

39. CLINIC DAY IS HERE

40. Before the Pharmacy Team arrives

41. Communication is vital - make sure staff and residents know the schedule and the plan.
42. Be prepared but flexible – each pharmacy partner will have a different set up and a different rhythm.
43. Set up these things as needed: signs (enter, exit, vaccination station, observation area), consent forms, pharmacy form, pens, tables, chairs, trash bins and biohazard bins, social distancing floor signs, hand sanitizer, disinfecting wipes, vaccination stickers, observation areas.

44. It's Show Time!

45. Make it clear to pharmacy partners where to pull up and unload, and prepare a cart for unloading equipment.
46. Cheer, applaud, and make a fuss when the pharmacy team enters – morale improves immediately!
47. Use the opportunity to record, celebrate, and share this historic day.
48. Build in extra time in the schedule (at least an hour is recommended). Things take longer than you anticipate; residents may take longer than staff to reach the vaccination area or observation area – plan in extra time, be patient and flexible, and give residents reminders as needed.
49. Pharmacy partners don't all always arrive on time and they need to set up. Flex the schedule as needed.
50. A staff member will need to go with the pharmacy partner from door-to-door.
51. Have extra PPE on hand, just in case.

52. Special considerations for Clinic Two

53. Remind residents about the importance of the second dose.
54. Design a system to define or designate who needs dose one and who needs dose two.
55. It is likely that some staff who chose not to be vaccinated in Clinic One will want to receive first doses at Clinic Two, so have a plan in place for other staff roles.
56. Review what you learned from Clinic One and plan for the extra complications likely at this clinic. Communicate clearly about ongoing community policies, regardless of vaccination status, to help fight the spread of the virus, including mask requirements and social distancing.