<table>
<thead>
<tr>
<th>Appendix 1: EUA Fact Sheet for Recipients and Caregivers – Pfizer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix 2: EUA Fact Sheet for Health Care Providers Administering Vaccine – Pfizer</td>
</tr>
<tr>
<td>Appendix 3: FDA Letter of Authorization – Pfizer</td>
</tr>
<tr>
<td>Appendix 4: V-safe Information Sheet</td>
</tr>
<tr>
<td>Appendix 5: V-safe Poster</td>
</tr>
<tr>
<td>Appendix 7: COVID-19 Vaccine Readiness Checklist</td>
</tr>
<tr>
<td>Appendix 8: Pfizer Storage and Handling Checklist</td>
</tr>
<tr>
<td>Appendix 9: Pfizer Storage and Handling Overview</td>
</tr>
<tr>
<td>Appendix 10: Bulk Upload Template</td>
</tr>
<tr>
<td>Appendix 11: EUA Fact Sheet for Recipients and Caregivers – Moderna</td>
</tr>
<tr>
<td>Appendix 12: EUA Fact Sheet for Providers – Moderna</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>EUA Fact Sheet for Providers – Moderna</td>
</tr>
<tr>
<td>Appendix 13: Moderna Storage and Handling Overview</td>
</tr>
<tr>
<td>Moderna Storage and Handling Overview</td>
</tr>
<tr>
<td>Appendix 15: FDA Letter of Authorization for Moderna</td>
</tr>
<tr>
<td>FDA Letter of Authorization – Moderna</td>
</tr>
<tr>
<td>Appendix 16: CDC Moderna Standing Order</td>
</tr>
<tr>
<td>CDC Moderna Standing Order</td>
</tr>
<tr>
<td>Appendix 17: CDC Pfizer Standing Order</td>
</tr>
<tr>
<td>CDC Pfizer Standing Order</td>
</tr>
<tr>
<td>Appendix 18: CDC Pre-Vaccination Checklist English and Spanish Version for COVID-19 Vaccines</td>
</tr>
<tr>
<td>English: CDC Pre-Vaccination Checklist for COVID-19 Vaccines</td>
</tr>
<tr>
<td>Spanish: CDC Pre-Vaccination Checklist for COVID-19 Vaccines</td>
</tr>
<tr>
<td>Appendix 21: COVID-19 Vaccine Temperature Log Celsius</td>
</tr>
<tr>
<td>COVID-19 Vaccine Temperature Log Celsius</td>
</tr>
<tr>
<td>Appendix 22: COVID-19 Vaccine Temperature Log Fahrenheit</td>
</tr>
<tr>
<td>COVID-19 Vaccine Temperature Log Fahrenheit</td>
</tr>
<tr>
<td>Appendix 23: CVMS Recipient Portal Reset Username Job Aid</td>
</tr>
<tr>
<td>CVMS Recipient Portal Reset Username Job Aid</td>
</tr>
<tr>
<td>Appendix 24: CVMS Recipient Portal Reset Password Job Aid</td>
</tr>
<tr>
<td>CVMS Recipient Portal Reset Password Job Aid</td>
</tr>
<tr>
<td>Appendix 25: CVMS Offline Appointment Scheduling User Guide</td>
</tr>
<tr>
<td>-----------------------------------------------------------</td>
</tr>
<tr>
<td>Appendix 28: Medical Management of Vaccine Reactions in Adults in a Community Setting</td>
</tr>
<tr>
<td>Appendix 29: FACT SHEET: Pfizer-BioNTech</td>
</tr>
<tr>
<td>Appendix 30: FACT SHEET: Moderna</td>
</tr>
<tr>
<td>Appendix 36: Tip Sheet for Selfie Video on COVID-19 Vaccination.</td>
</tr>
<tr>
<td>Appendix 38: COVID-19 Community Based Vaccination Events: Best Practices.</td>
</tr>
<tr>
<td>Appendix 39: CDC COVID-19 Vaccination Program Provider Agreement</td>
</tr>
<tr>
<td>Appendix 40: Vaccine Letter to County Leaders</td>
</tr>
<tr>
<td>Appendix 42: EUA Fact Sheet for Recipients and Caregivers for Janssen (Johnson &amp; Johnson) COVID-19 Vaccine</td>
</tr>
<tr>
<td>Appendix 43: EUA Fact Sheet for Health Care Providers Administering Vaccines for Health Care Providers Administering Vaccine for Janssen (Johnson &amp; Johnson) COVID-19 Vaccine</td>
</tr>
<tr>
<td>Appendix 44: NC State Health Director’s Statewide Standing Order for COMIRNATY/ Pfizer mRNA COVID-19 Vaccine Administration</td>
</tr>
<tr>
<td>Appendix 45: CVMS Organization Portal email template for vaccine providers to use to invite organizations</td>
</tr>
<tr>
<td>Appendix 46: CVMS Organization Portal email templates for organizations to use to inform employees</td>
</tr>
<tr>
<td>Appendix 47: Janssen (Johnson &amp; Johnson) Storage and Handling Summary</td>
</tr>
<tr>
<td>Appendix 48: Janssen (Johnson &amp; Johnson) COVID-19 Vaccine</td>
</tr>
<tr>
<td>Appendix 49: Transport Temperature Log When Transporting Vaccine Refrigerated Temperatures</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>Transport Temperature Log When Transporting Vaccine Refrigerated Temperatures</td>
</tr>
<tr>
<td>Appendix 50: NC State Health Director’s Statewide Standing Order for FDA Authorized COVID-19 Vaccine Administration of Janssen (Johnson &amp; Johnson)</td>
</tr>
<tr>
<td>NC State Health Director’s Statewide Standing Order for FDA Authorized COVID-19 Vaccine Administration of Janssen (Johnson &amp; Johnson)</td>
</tr>
<tr>
<td>Appendix 51: Strategies to Fill COVID-19 Vaccine Appointments</td>
</tr>
<tr>
<td>Please see below</td>
</tr>
<tr>
<td>Appendix 52: COVID-19 Vaccines-Pregnancy, Breastfeeding, and Fertility: What You Need to Know</td>
</tr>
<tr>
<td><a href="https://covid19.ncdhhs.gov/media/2567/open">https://covid19.ncdhhs.gov/media/2567/open</a></td>
</tr>
<tr>
<td>Appendix 53: Janssen (Johnson &amp; Johnson) COVID-19 Vaccine Standing Orders (CDC)</td>
</tr>
<tr>
<td>Janssen (Johnson &amp; Johnson) COVID-19 Vaccine Standing Orders (CDC)</td>
</tr>
<tr>
<td>Appendix</td>
</tr>
<tr>
<td>----------</td>
</tr>
<tr>
<td>54</td>
</tr>
<tr>
<td>55</td>
</tr>
<tr>
<td>56</td>
</tr>
<tr>
<td>57</td>
</tr>
<tr>
<td>58</td>
</tr>
<tr>
<td>59</td>
</tr>
<tr>
<td>60</td>
</tr>
<tr>
<td>61</td>
</tr>
</tbody>
</table>

**Appendix 9 – Pfizer Storage and Handling Overview**
Shipping, Handling & Storage Overview

Current as of December 16, 2020

As of 12/6/2020
## Change Log

<table>
<thead>
<tr>
<th>Version</th>
<th>History of Changes</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Initial version</td>
</tr>
</tbody>
</table>
| 02      | - New content includes Overview of Shipping, Storage & Handling, Key Timing Considerations, and Re-icing Thermal Shipper  
- Modified temperature of Thermal shipper from -75±15°C (-103°F to 5°F) to -90°C to -60°C (-130°F to -76°F) |
| 03      | Disclaimer language updated to reflect post-EUA mandatory language |
| 04      | Updated vial tray image |

---

**Breakthroughs that change patients’ lives**

The Pfizer-BioNTech COVID-19 Vaccine has not been approved or licensed by FDA, but has been authorized for emergency use by FDA under an Emergency Use Authorization to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 16 years of age and older. The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner. Please see Emergency Use Authorization (EUA) Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) Including Full EUA Prescribing Information available at [www.pzifer.com](http://www.pzifer.com).
Overview of Shipping, Storage & Handling

1. Thermal Shipper Arrival
   - The thermal shipper that the vaccine arrives in can be used as temporary storage, so long as dry ice is replenished upon receipt and every 5 days (up to 30 days).

2. Storage & Handling
   - Storage options for vials/trays include:
     1. **Ultra Low Temperature Freezer** at -80°C and -60°C (-112 to -76°F) for up to 6 months
     2. **Thermal Shipper** at -20°C to -80°C (-130°F to -76°F) for up to 30 days from delivery, if replenished with dry ice upon receipt and every 5 days
     3. **Refrigerator** at 2 to 8°C (35.6° to 46.4°F) for up to 120 hours (5 days)
   - Vials are glass and should be handled with care. Visual inspection prior to use should be carried out.
   - Vials should be protected from light and kept in the original packaging.
   - Vials should always remain upright in trays during storage.

3. Returning Thermal Shipper
   - The thermal shipping container may be used as temporary storage for up to 30 days from delivery, including temperature data logger.

---

Breakthroughs that change patients’ lives

The Pfizer-BioNTech COVID-19 Vaccine has not been approved or licensed by FDA, but has been authorized for emergency use by FDA under an Emergency Use Authorization to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 16 years of age and older. The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.

Please see Emergency Use Authorization (EUA) Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) including Full EUA Prescribing Information available at [www.cdc.gov](http://www.cdc.gov).
Direct Shipment to Points of Vaccination

Direct Shipments* to Vaccination Center by Transport Courier

Pfizer has designed a distribution model which is built on a flexible just in time system to ship the vaccine from manufacturing site and/or storage facility directly to the points of vaccination.

Temperature & Location Tracking During Transportation

- Each thermal shipper has reusable GPS enabled temperature monitoring device which will be enabled when the shipper is packed.
- All shipments will be tracked via the onboard GPS monitoring device to ensure end-to-end distribution within required temperatures.
- Shipments will be executed under the management of Pfizer Quality processes and controls to ensure that upon ownership transfer, product has arrived under acceptable conditions.
- Temperature records of the shipments can be shared with upon request.

*COVID Vaccine supply chain model is a drop ship direct from Pfizer manufacturing sites to the designated locations by the government.
Markets with no Pfizer commercial legal entity; Product ownership transfer at port of entry for governmental customer importation and in-market distribution.

Breakthroughs that change patients’ lives

The Pfizer-BioNTech COVID-19 Vaccine has not been approved or licensed by FDA, but has been authorized for emergency use by FDA under an Emergency Use Authorization to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 16 years of age and older. The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(a)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.
Product Packaging Overview

**Vials**
- 2 mL type 1 glass preservative free multi-dose vial (MDV)
- MDV has 0.45 mL frozen liquid drug product
- 5 doses per vial after dilution

**Trays**
- Single tray holds 195 vials
- 975 doses per tray
- A smaller tray, containing 25 vials (125 doses) is in development with estimated availability in early 2021

**Thermal Shipper**
- Minimum 1 tray (975 doses) or up to 5 trays (4875 doses) stacked in a payload area of the shipper
- Payload carton submerged in dry ice pellets
- Thermal shipper keeps ULT -90°C to -60°C (-130°F to -76°F) up to 10 days if stored at 15°C to 25°C (59°F to 77°F) temperatures without opening
- Thermal shippers are reusable and designed to be a temporary storage containers by replenishing dry ice.

The Pfizer-BioNTech COVID-19 Vaccine has not been approved or licensed by FDA, but has been authorized for emergency use by FDA under an Emergency Use Authorization to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 16 years of age and older. The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.

Please see Emergency Use Authorization (EUA) Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) including Full EUA Prescribing Information available at [www.cdc.gov/vaccines](http://www.cdc.gov/vaccines).
Key Timing Considerations

**TRAYS**

- **3 MINS**
  - Open-lid vial trays, or vials trays containing less than 195 vials removed from frozen storage (≤ -60°C) may be at room temperature (≤ 25°C) for up to 3 minutes for transfer between ultra low temperature environments or to remove vials for thawing or use.

- **5 MINS**
  - Closed-lid vial trays containing 195 vials removed from frozen storage (≤ -60°C) may be at room temperature (≤ 25°C) for up to 5 minutes for transfer between ultra low temperature environments.

- **2 HRS**
  - After vial trays are returned to frozen storage following room temperature exposure, they must remain in frozen storage for at least 2 hours before they can be removed again.

**VIALS**

- Once an individual vial is removed from a vial tray at room temperature, it should not be returned to frozen storage and should be thawed for use.

---

Breakthroughs that change patients’ lives

The Pfizer-BioNTech COVID-19 Vaccine has not been approved or licensed by FDA but has been authorized for emergency use by FDA under an Emergency Use Authorization to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 16 years of age and older. The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner. Please see Emergency Use Authorization (EUA) Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) including Full EUA Prescribing Information available at www.pfizer.com.
Handling instructions
- Re-ice at a minimum of every 5 days (based on normal use). No restriction to number of re-icing.
- If box is left open for longer than 3 minutes, recommendation is to re-ice more frequently, as needed.
- If re-icing occurs and a holiday or weekend, plan ahead to re-ice the thermal shipping container.
- Thermal shipping container may be used as temporary storage for up to 30 days from delivery.
- Sites are required to maintain temperature monitoring.

**Re-icing Thermal Shipper**

**3 Mins**
Thermal Shipper opening:
*twice daily, max 3 minutes each*

Day 0  Day 1  Day 5  Day 10  Day 15  Day 20  Day 25  Day 30

Shipper arrives with 80% energy
Upon receipt and after opening, the box should be replenished/inspected with dry ice within 24 hours

**SHIPPER ENERGY LEVEL**

Breakthroughs that change patients’ lives
The Pfizer-BioNTech COVID-19 Vaccine has not been approved or licensed by FDA, but has been authorized for emergency use by FDA under an Emergency Use Authorization to prevent Coronavirus Disease 2019 (COVID-19) for use in individuals 16 years of age and older. The emergency use of this product is only authorized for the duration of the declaration that circumstances exist justifying the authorization of emergency use of the medical product under Section 564(b)(1) of the FD&C Act unless the declaration is terminated or authorization revoked sooner.

Please see Emergency Use Authorization (EUA) Fact Sheet for Healthcare Providers Administering Vaccine (Vaccination Providers) including Full EUA Prescribing Information available at www.cdc.gov/vaccines.

* (back to top)
Appendix 38 - COVID-19 Community Based Vaccination Events: Best Practices.

Why Vaccinate in the Community?

Example of a hot spot map to guide testing site location

For North Carolina to successfully meet its goal of vaccinating as many people as quickly as possible given the limited supply of vaccines, we must mobilize community based vaccination events. To meet North Carolina’s equally important goal of ensuring equity to access to the vaccine, intentional actions should be taken in the planning of those mass vaccination events.

Best Practice: Hold vaccination events in settings that will enable prioritized and historically marginalized populations to access vaccination. Well established patterns of COVID-19 infection continue to demonstrate that Black/African American and LatinX/Hispanic populations are disparately impacted by the pandemic.

While there is probably not a wrong place to do community mass vaccinations, there are certainly some locations with more potential to support and protect historically marginalized populations who have disproportionately borne the burden of the COVID-19 pandemic. Use existing data sources to identify specific locations with a high concentration of low-income earners, subsidized housing, concentrations of multiple chronic illness, etc. You can also use the NCDHHS Social Determinants of Health Interactive Map to identify locations where they reside.

Transportation Assistance - Ensuring access to transportation in an important element for equity. Local transit agencies serve all 100 North Carolina counties and funding has been given to local transit agencies to help provide this support. People who need transportation assistance to a COVID-19 vaccine should reach out to their local transit agency which are listed here NC_Public_Transit.pdfOpen PDF (ncdot.gov). As you are planning an vaccination event, publicizing this resources can increase access to those with limited transportation.

No charge to patients/vaccine recipients - To receive free supplies of the COVID-19 vaccine(s), vaccine providers must sign the provider agreement with the U.S. Government. Under the agreement, all providers must vaccinate individuals regardless of whether they have health insurance coverage or what type of coverage they have, and all providers are prohibited from balance billing or otherwise charging vaccine recipients.
Residency requirements - The Centers for Disease Control and Prevention has instructed states that this is a federal vaccine bought with federal funding. Hence, jurisdictions should not put restrictions on administering vaccinations to non-residents, as long as those persons meet the current eligibility criteria. This applies to both county and state residency.

Proof of identification is not required to schedule an appointment or to receive a vaccine. Individuals can self-attest to the criteria (e.g., age, job role, health status, living situation) that they qualify for in eligible priority groups.

Creating the Community Based Vaccination Team

Community based vaccination clinics will be successful if championed by a leadership team that includes the local health department (LHD), health care providers such as community health centers (also known as federally qualified health centers or FQHCs), hospitals, private and hospital-based providers and community partners. The CDC link for full planning information can be found at https://www.cdc.gov/vaccines/hcp/admin/mass-clinic-activities/index.html.

It is important to note that, for many people, their first experience with the public health system may be the vaccine event and creating an environment that instills confidence and inspires trust is crucial. It is essential that partners who are trusted within their communities are part of the leadership team, such as faith, community service organizations and other non-profit leaders.

There are other strategies that can ensure we are vaccinating equitably – partner with local organizations with trusted relationships and help them facilitate sign-up for your events or compile waiting lists for your next clinic or event. Think about how an online-only sign-up method impacts access and consider instead filling first appointments by calling individuals compiled on a waiting list created by a key community partner. Hold vaccine clinics in historically marginalized communities, partnering with the community to organize and bring-on volunteers.

Staffing

A large-scale immunization administration event requires three main types of personnel:

- Healthcare professionals authorized to provide vaccinations and who can respond to medical emergencies, including severe allergic reactions and anaphylaxis.
- Healthcare staff with knowledge about vaccines and experience handling vaccines and preparing vaccine doses.
- Nonmedical personnel to fill a variety of support roles, including check-in and registration, data entry, logistics, traffic flow, safety personnel.

These events can be staffed by your employees or community volunteers.
Training

Train your staff and volunteers with as much lead time as possible by using the online training modules. Trainings can be recorded and then reviewed online as new members are brought onboard:

- CDC COVID-19 Vaccine Training Modules: [https://www2.cdc.gov/vaccines/ed/covid19/](https://www2.cdc.gov/vaccines/ed/covid19/)
  - This is a series of 3 online trainings that your medical professionals need to complete prior to assisting during an event. They will receive continuing education credit for completing the modules.
- Z-Track IM Injection Method: [https://www.youtube.com/watch?v=DBHnd3N-5Ns](https://www.youtube.com/watch?v=DBHnd3N-5Ns)
- Example of a training/welcoming video for volunteers from Orange County. [https://www.youtube.com/watch?v=kenVwQGeDUg&feature=youtu.be](https://www.youtube.com/watch?v=kenVwQGeDUg&feature=youtu.be)
- Many counties are using online portals to coordinate their volunteers. Some portal examples are Calendy, SignUp Genius, chat lines on websites and MyChart. Here is an example of the Orange County Volunteer Portal. [https://www.signupgenius.com/go/10c0d49aaad2aabfac07-covid](https://www.signupgenius.com/go/10c0d49aaad2aabfac07-covid)

Vaccine Guidance

In order for all staff to give consistent answers to any questions related to the vaccines, use the following guidance:


Personal Protective Equipment (PPE)

Personal Protective Equipment (PPE) is needed for the staff vaccinating and in close contact with persons being vaccinated. It is a Best Practice to provide masks to everyone attending an event where individuals are to be vaccinated and emphasize how to correctly use them (i.e., cover the nose and mouth). Gloves and hand sanitizer are other common items that you will need to provide. Organizations should order PPE through their regular supply chains, if possible. Organizations can also request and access PPE through the state-maintained PPE supply site.

Community Mass Vaccination ABCs

Advance Planning

Perhaps the most important part of a successful mass vaccination is the coordination and clear identification of all partners early in the process. A site visit in advance of the vaccination event provides the ability to plan for missing requirements, such as water, Wi-Fi, shelter and to layout the traffic patterns. The CDC has a checklist to take you through each step of the process and can be found here: [https://www.izsummitpartners.org/content/uploads/2019/02/off-site-vaccination-clinic-checklist.pdf](https://www.izsummitpartners.org/content/uploads/2019/02/off-site-vaccination-clinic-checklist.pdf)

Access to the Internet
Accessing Wi-Fi can be crucial for the medical partner to register patients, whether through expanded network near the testing spot or adequately powered hotspot. It is a Best Practice for patients and administered vaccine doses to be entered into CVMS at the time of vaccination to optimize data collection for ongoing follow up and to show real time vaccination data. Using tablets onsite allows you to enter the data in real-time. Allow for extra tablets so that charging can occur on a rotational basis and provide heavy-duty outdoor extension cords for this equipment.

**Basic Needs**

Staff at vaccination sites may be exposed to the elements for long periods depending on the length of time the event is scheduled. There are certain basic needs that should be attended to thoughtfully, to include at a minimum:

- Toilet facilities (portable rentals if indoor facility is not close)
- Handwashing facilities (portable station if indoor facility is not close)
- Eating location with seats and cover away from vaccination or patient locations
- Shelter in the form of several secure, heavy-duty tents to endure heavy wind, rain and sun; cover the medical team, health department educators, vaccinators, etc., and their electronics; and provide adequate space to social distance. You should plan on at least one tent for each workstation including the traffic monitors and patient monitoring stations.
- Basic beverage and food provision (consider coffee/pastries at start up, bottled water all day, lunch delivered to site)

**Clear Identification of Vaccination Site Staff**

Team members need to be easily and clearly identified. Without a standardized identification (could be as simple as a colored sticky name tag on the chest), it is difficult to tell who is there to be vaccinated and who is a volunteer since everyone has different face coverings. Clear identification keeps the environment safe for privacy (if not well identified, others can access areas intended only for staff) and makes it easy for people presenting for vaccination to know who can answer their questions. One thing to consider is that depending on the community you are vaccinating; fear of authorities may deter people from coming to a testing event. Avoiding highly uniformed staff and instead wearing more casual street clothes creates a safer-feeling environment at times.
Clear Incident Command on the Ground

Identify the Incident Commander of the operation before the event begins. This individual should be empowered to make critical decisions in the moment, such as those related to vaccination parameters, complications in logistics, conflicts and environmental threats. This person should have the contact information of the executive leaders from each organization participating in the vaccination event and feel comfortable reaching out immediately for support if needed. Finally, this person needs to make themselves known and available for the entire testing event.

Community Engagement and Promotion

Advanced planning also allows the team to provide promotional material and communication to alert the community about the event. Local media outlets are often willing to assist in promoting an event; additionally, bringing in non-medical partners to volunteer at the event can lead to great attendance and engagement. It is important to provide in advance clearly defined roles for volunteers, schedules, written instructions for safety and a designated point of contact (such as the Incident Commander) to address questions.

- **Anticipatory guidance and health education** should be provided by the patient monitors during the observation period. This allows the individual to ask any questions they may have. The appointment for the second dose should be done at the time of the first vaccination appointment and can be done while you are reviewing the patient information sheet with the individual. [https://files.nc.gov/covid/documents/COVID-19-Vaccine-Update.pdf](https://files.nc.gov/covid/documents/COVID-19-Vaccine-Update.pdf)
- **Media liaisons** on site can be helpful as often the local media becomes interested in the vaccination event, especially if publicity was effective in advance. Identifying one person at the site to monitor for and manage media requests is important. If media can be scheduled in advance to arrive and complete interviews before the event there is less concern of patient privacy compromise or creating discomfort for community members who would like to be vaccinated.

Thoughts from the Field

- Use appointments with block shifts to spread out the volume and shorten wait times. For example, based on your staffing, you could anticipate 20 patients an hour.
- Use carpooling or personal transportation to bring elderly to the mobile site
- Use individuals from your community partner to work the initial greeting station so that individuals see a familiar face
- Flexibility on the ground is key so that you can respond to issues as they arise
- Schedule 2nd appointment while they are in the patient monitoring phase
- Have extra staff or runners available
- Virtual translators
- Allow onsite registration
- EMS on call
- Embrace technology; use apps or online portals to schedule appointments both for patients or your volunteer team
- Paper forms for back-up
• If you have both types of vaccines available on a given day, use the Pfizer types first.
• One way in, one way out traffic pattern
•

If a community is having difficulty executing a community vaccination event, NCDHHS is willing to help connect and direct a vaccination strategy, as well as making connections to forge partnership at the local level. For answers to questions about COVID-19 resources, visit the [North Carolina COVID-19 Information Hub](https://nc.gov/covid-19).

**Appendix 39 - CDC COVID-19 Vaccination Program Provider Agreement (See next page)**
SAMPLE

CDC COVID-19 Vaccination Program
Provider Agreement

Please complete Sections A and B of this form as follows:
The Centers for Disease Control and Prevention (CDC) greatly appreciates your organization’s (Organization) participation in the CDC COVID-19 Vaccination Program. Your Organization’s chief medical officer (or equivalent) and chief executive officer (or chief fiduciary)—collectively, Responsible Officers—must complete and sign the CDC COVID-19 Vaccination Program Provider Requirements and Legal Agreement (Section A). CDC COVID-19 Vaccination Program Provider Profile Information (Section B) must be completed for each vaccination Location covered under the Organization listed in Section A.

Section A. COVID-19 Vaccination Program Provider Requirements and Legal Agreement

<table>
<thead>
<tr>
<th>ORGANIZATION IDENTIFICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization’s legal name:</td>
</tr>
<tr>
<td>Number of affiliated vaccination locations covered by this agreement:</td>
</tr>
<tr>
<td>Organization telephone number:</td>
</tr>
<tr>
<td>Organization address:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RESPONSIBLE OFFICERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>For the purposes of this agreement, in addition to Organization, Responsible Officers named below will also be accountable for compliance with the conditions specified in this agreement. The individuals listed below must provide their signature after reviewing the agreement requirements.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chief Medical Officer (or Equivalent) Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last name</td>
</tr>
<tr>
<td>Title</td>
</tr>
<tr>
<td>Telephone number:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chief Executive Officer (or Chief Fiduciary) Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last name</td>
</tr>
<tr>
<td>Telephone number:</td>
</tr>
<tr>
<td>Address:</td>
</tr>
</tbody>
</table>
## SAMPLE
### CDC COVID-19 Vaccination Program Provider Agreement

**AGREEMENT REQUIREMENTS**

I understand this is an agreement between Organization and CDC. This program is a part of collaboration under the relevant state, local, or territorial immunization’s cooperative agreement with CDC.

To receive one or more of the publicly funded COVID-19 vaccines (COVID-19 Vaccine), constituent products, and ancillary supplies at no cost, Organization agrees that it will adhere to the following requirements:

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Organization must administer COVID-19 Vaccine in accordance with all requirements and recommendations of CDC and CDC’s Advisory Committee on Immunization Practices (ACIP).&lt;sup&gt;1&lt;/sup&gt;</td>
</tr>
<tr>
<td>2.</td>
<td>Within 24 hours of administering a dose of COVID-19 Vaccine and adjuvant (if applicable), Organization must record in the vaccine recipient’s record and report required information to the relevant state, local, or territorial public health authority. Details of required information (collectively, Vaccine-Administration Data) for reporting can be found on CDC’s website.&lt;sup&gt;2&lt;/sup&gt; Organization must submit Vaccine-Administration Data through either (1) the immunization information system (IIS) of the state and local or territorial jurisdiction or (2) another system designated by CDC according to CDC documentation and data requirements.&lt;sup&gt;2&lt;/sup&gt; Organization must preserve the record for at least 3 years following vaccination, or longer if required by state, local, or territorial law. Such records must be made available to any federal, state, local, or territorial public health department to the extent authorized by law.</td>
</tr>
<tr>
<td>3.</td>
<td>Organization must not sell or seek reimbursement for COVID-19 Vaccine and any adjuvant, syringes, needles, or other constituent products and ancillary supplies that the federal government provides without cost to Organization.</td>
</tr>
<tr>
<td>4.</td>
<td>Organization must administer COVID-19 Vaccine regardless of the vaccine recipient’s ability to pay COVID-19 Vaccine administration fees.</td>
</tr>
<tr>
<td>5.</td>
<td>Before administering COVID-19 Vaccine, Organization must provide an approved Emergency Use Authorization (EUA) fact sheet or vaccine information statement (VIS), as required, to each vaccine recipient, the adult caregiver accompanying the recipient, or other legal representative.</td>
</tr>
<tr>
<td>6.</td>
<td>Organization’s COVID-19 vaccination services must be conducted in compliance with CDC’s Guidance for Immunization Services During the COVID-19 Pandemic for safe delivery of vaccines.&lt;sup&gt;3&lt;/sup&gt;</td>
</tr>
<tr>
<td>7.</td>
<td>Organization must comply with CDC requirements for COVID-19 Vaccine management. Those requirements include the following: a) Organization must store and handle COVID-19 Vaccine under proper conditions, including maintaining cold chain conditions and chain of custody at all times in accordance with the manufacturer’s package insert and CDC guidance in CDC’s Vaccine Storage and Handling Toolkit&lt;sup&gt;4&lt;/sup&gt;, which will be updated to include specific information related to COVID-19 Vaccine; b) Organization must monitor vaccine-storage-unit temperatures at all times using equipment and practices that comply with guidance located in CDC’s Vaccine Storage and Handling Toolkit&lt;sup&gt;4&lt;/sup&gt;; c) Organization must comply with each relevant jurisdiction’s immunization program guidance for dealing with temperature excursions;</td>
</tr>
</tbody>
</table>

This agreement expressly incorporates all recommendations, requirements, and other guidance that this agreement specifically identifies through footnoted weblinks. Organization must monitor such identified guidance for updates. Organization must comply with such updates.

---

<sup>1</sup> [https://www.cdc.gov/vaccines/hcp/acip-reccs/index.html](https://www.cdc.gov/vaccines/hcp/acip-reccs/index.html)

<sup>2</sup> [https://www.cdc.gov/vaccines/programs/iis/index.html](https://www.cdc.gov/vaccines/programs/iis/index.html)


<sup>4</sup> [https://www.cdc.gov/vaccines/hcp/admin/storage-handling.html](https://www.cdc.gov/vaccines/hcp/admin/storage-handling.html)
# CDC COVID-19 Vaccination Program Provider Agreement

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
</table>
| **d)** | Organization must monitor and comply with COVID-19 Vaccine expiration dates; and  
| **e)** | Organization must preserve all records related to COVID-19 Vaccine management for a minimum of 3 years, or longer if required by state, local, or territorial law.  
| **8.** | Organization must report the number of doses of COVID-19 Vaccine and adjuvants that were unused, spoiled, expired, or wasted as required by the relevant jurisdiction.  
| **9.** | Organization must comply with all federal instructions and timelines for disposing COVID-19 vaccine and adjuvant, including unused doses.\(^5\)  
| **10.** | Organization must report moderate and severe adverse events following vaccination to the Vaccine Adverse Event Reporting System (VAERS).\(^6\)  
| **11.** | Organization must provide a completed COVID-19 vaccination record card to every COVID-19 Vaccine recipient, the adult caregiver accompanying the recipient, or other legal representative. Each COVID-19 Vaccine shipment will include COVID-19 vaccination record cards.  
| **12.** | a) Organization must comply with all applicable requirements as set forth by the U.S. Food and Drug Administration, including but not limited to requirements in any EUA that covers COVID-19 Vaccine.  
|   | b) Organization must administer COVID-19 Vaccine in compliance with all applicable state and territorial vaccination laws.  

By signing this form, I certify that all relevant officers, directors, employees, and agents of Organization involved in handling COVID-19 Vaccine understand and will comply with the agreement requirements listed above and that the information provided in sections A and B is true.

The above requirements are material conditions of payment for COVID-19 Vaccine-administration claims submitted by Organization to any federal healthcare benefit program, including but not limited to Medicare and Medicaid, or submitted to any HHS-sponsored COVID-19 relief program, including the Health Resources & Services Administration COVID-19 Uninsured Program. Reimbursement for administering COVID-19 Vaccine is not available under any federal healthcare program if Organization fails to comply with these requirements with respect to the administered COVID-19 Vaccine dose. Each time Organization submits a reimbursement claim for COVID-19 Vaccine administration to any federal healthcare program, Organization expressly certifies that it has complied with these requirements with respect to that administered dose.

Non-compliance with the terms of Agreement may result in suspension or termination from the CDC COVID-19 Vaccination Program and criminal and civil penalties under federal law, including but not limited to the False Claims Act, 31 U.S.C. § 3729 et seq., and other related federal laws, 18 U.S.C. §§ 1001, 1035, 1347, 1349.

By entering Agreement, Organization does not become a government contractor under the Federal Acquisition Regulation.

Coverage under the Public Readiness and Emergency Preparedness (PREP) Act extends to Organization if it complies with the PREP Act and the PREP Act Declaration of the Secretary of Health and Human Services.\(^7\)

---

\(^5\) The disposal process for remaining unused COVID-19 Vaccine and adjuvant may be different from the process for other vaccines; unused vaccines must remain under storage and handling conditions noted in Item 7 until CDC provides disposal instructions; website URL will be made available.  
\(^6\) [https://vaers.hhs.gov/reportevent.html](https://vaers.hhs.gov/reportevent.html)  
### SAMPLE

**CDC COVID-19 Vaccination Program Provider Agreement**

<table>
<thead>
<tr>
<th>Chief Medical Officer (or Equivalent)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last name</td>
</tr>
<tr>
<td>Signature:</td>
</tr>
<tr>
<td>Complete in CVMS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Chief Executive Officer (or Chief Fiduciary)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last name</td>
</tr>
<tr>
<td>Signature:</td>
</tr>
<tr>
<td>Complete in CVMS</td>
</tr>
</tbody>
</table>

**For official use only:**

- VTrckS ID for this Organization, if applicable: ______
- Vaccines for Children (VFC) PIN, if applicable: ______
- Other PIN (e.g., state, 317): ______
- IIS ID, if applicable: ______
- Unique COVID-19 Organization ID (Section A)*: ______

*The jurisdiction’s immunization program is required to create a unique COVID-19 ID for the organization named in Section A that includes the awardee jurisdiction abbreviation (e.g., an organization located in Georgia could be assigned “GA123456A”). This ID is needed for CDC to match Organizations (Section A) with one or more Locations (Section B). These unique identifiers are required even if there is only one location associated with an organization.*
SAMPLE

Section B. CDC COVID-19 Vaccination Program Provider Profile Information
Please complete and sign this form for your Organization location. If you are enrolling on behalf of one or more other affiliated Organization vaccination locations, complete and sign this form for each location. Each individual Organization vaccination location must adhere to the requirements listed in Section A.

<table>
<thead>
<tr>
<th>ORGANIZATION IDENTIFICATION FOR INDIVIDUAL LOCATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organization location name:</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTACT INFORMATION FOR LOCATION'S PRIMARY COVID-19 VACCINE COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last name:</td>
</tr>
<tr>
<td>Telephone:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CONTACT INFORMATION FOR LOCATION'S BACK-UP COVID-19 VACCINE COORDINATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last name:</td>
</tr>
<tr>
<td>Telephone:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ORGANIZATION LOCATION ADDRESS FOR RECEIPT OF COVID-19 VACCINE SHIPMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street address 1:</td>
</tr>
<tr>
<td>City:</td>
</tr>
<tr>
<td>Telephone:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ORGANIZATION ADDRESS OF LOCATION WHERE COVID-19 VACCINE WILL BE ADMINISTERED (IF DIFFERENT FROM RECEIVING LOCATION)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street address 1:</td>
</tr>
<tr>
<td>City:</td>
</tr>
<tr>
<td>Telephone:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DAYS AND TIMES VACCINE COORDINATORS ARE AVAILABLE FOR RECEIPT OF COVID-19 VACCINE SHIPMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
</tr>
<tr>
<td>AM:</td>
</tr>
<tr>
<td>PM:</td>
</tr>
</tbody>
</table>

For official use only:
VTrckS ID for this location, if applicable: __________ VFC PIN, if applicable: __________
IIS ID, if applicable: __________ Unique COVID-19 Organization ID (from Section A): __________ Unique Location ID**: __________

**The jurisdiction’s immunization program is required to create an additional unique Location ID for each location completing Section B. The number will include the awardee jurisdiction abbreviation. For example, if an organization (Section A) in Georgia (e.g., GA123456A), has three locations (main location plus two additional) completing section B, they could be numbered as GA12345681, GA12345682, and GA12345683.
## SAMPLE

### CDC COVID-19 Vaccination Program Provider Profile Information

#### COVID-19 VACCINATION PROVIDER TYPE FOR THIS LOCATION (SELECT ONE)

- [ ] Commercial vaccination service provider
- [ ] Corrections/detention health services
- [ ] Health center – community (non-Federally Qualified Health Center/non-Rural Health Clinic)
- [ ] Health center – migrant or refugee
- [ ] Health center – occupational
- [ ] Health center – STD/HIV clinic
- [ ] Health center – student
- [ ] Home health care provider
- [ ] Hospital
- [ ] Indian Health Service
- [ ] Tribal health
- [ ] Medical practice – family medicine
- [ ] Medical practice – pediatrics
- [ ] Medical practice – internal medicine
- [ ] Medical practice – OB/GYN
- [ ] Medical practice – other specialty
- [ ] Pharmacy – chain
- [ ] Pharmacy – independent
- [ ] Public health provider – public health clinic
- [ ] Public health provider – Federally Qualified Health Center
- [ ] Public health provider – Rural Health Clinic
- [ ] Long-term care – nursing home, skilled nursing facility, federally certified
- [ ] Long-term care – nursing home, skilled nursing facility, non-federally certified
- [ ] Long-term care – assisted living
- [ ] Long-term care – intellectual or developmental disability
- [ ] Long-term care – combination (e.g., assisted living and nursing home in same facility)
- [ ] Urgent care
- [ ] Other (Specify: ____)

#### SETTING(S) WHERE THIS LOCATION WILL ADMINISTER COVID-19 VACCINE (SELECT ALL THAT APPLY)

- [ ] Childcare or daycare facility
- [ ] College, technical school, or university
- [ ] Community center
- [ ] Correctional/detention facility
- [ ] Health care provider office, health center, medical practice, or outpatient clinic
- [ ] Hospital (i.e., inpatient facility)
- [ ] In-home
- [ ] Long-term care facility (e.g., nursing home, assisted living, independent living, skilled nursing)
- [ ] Pharmacy
- [ ] Public health clinic (e.g., local health department)
- [ ] School (K – grade 12)
- [ ] Shelter
- [ ] Temporary or off-site vaccination clinic – point of dispensing (POD)
- [ ] Temporary location – mobile clinic
- [ ] Urgent care facility
- [ ] Workplace
- [ ] Other (Specify: ____)

#### APPROXIMATE NUMBER OF PATIENTS/CLIENTS ROUTINELY SERVED BY THIS LOCATION

- Number of children 18 years of age and younger: _________ (Enter "0" if the location does not serve this age group.)
  - [ ] Unknown
- Number of adults 19 – 64 years of age: _________ (Enter "0" if the location does not serve this age group.)
  - [ ] Unknown
- Number of adults 65 years of age and older: _________ (Enter "0" if the location does not serve this age group.)
  - [ ] Unknown
- Number of unique patients/clients seen per week, on average: _________
  - [ ] Unknown
  - [ ] Not applicable (e.g., for commercial vaccination service providers)

#### INFLUENZA VACCINATION CAPACITY FOR THIS LOCATION

- Number of influenza vaccine doses administered during the peak week of the 2019–20 influenza season: _________ (Enter "0" if no influenza vaccine doses were administered by this location in 2019-20)
  - [ ] Unknown
## SAMPLE

### CDC COVID-19 Vaccination Program Provider Profile Information

**POPULATION(S) SERVED BY THIS LOCATION (SELECT ALL THAT APPLY)**

- [ ] General pediatric population
- [ ] General adult population
- [ ] Adults 65 years of age and older
- [ ] Long term care facility residents (nursing home, assisted living, or independent living facility)
- [ ] Health care workers
- [ ] Critical infrastructure/essential workers (e.g., education, law enforcement, food/agricultural workers, fire services)
- [ ] Military – active duty/reserves
- [ ] Military – veteran
- [ ] People experiencing homelessness
- [ ] Pregnant women
- [ ] Racial and ethnic minority groups
- [ ] Tribal communities
- [ ] People who are incarcerated/detained
- [ ] People living in rural communities
- [ ] People who are under-insured or uninsured
- [ ] People with disabilities
- [ ] People with underlying medical conditions* that are risk factors for severe COVID-19 illness
- [ ] Other people at higher-risk for COVID-19 (Specify: ____________)

**DOES YOUR ORGANIZATION CURRENTLY REPORT VACCINE ADMINISTRATION DATA TO THE STATE, LOCAL, OR TERRITORIAL IMMUNIZATION INFORMATION SYSTEM (IIS)?**

- [ ] Yes [List IIS Identifier: _________________________]
- [ ] No
- [ ] Not applicable

If “No,” please explain planned method for reporting vaccine administration data to the jurisdiction’s IIS or other designated system as required:

If “Not applicable,” please explain:

**ESTIMATED NUMBER OF 10-DOSE MULTIDOSE VIALS (MDVs) YOUR LOCATION IS ABLE TO STORE DURING PEAK VACCINATION PERIODS (E.G., DURING BACK-TO-SCHOOL OR INFLUENZA VACCINE SEASON) AT THE FOLLOWING TEMPERATURES:**

<table>
<thead>
<tr>
<th>Temperature</th>
<th>No capacity</th>
<th>Additional 10-dose MDVs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Refrigerated (2°C to 8°C):</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>Frozen (-15° to -25°C):</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>Ultra-frozen (-60° to -80°C):</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

**STORAGE UNIT DETAILS FOR THIS LOCATION**

List brand/model/type of storage units to be used for storing COVID-19 vaccine at this location:

1. Example: CDC & Co/Red series two-door/refrigerator
2. ____________
3. ____________
4. ____________
5. ____________

I attest that each unit listed will maintain the appropriate temperature range indicated above: (please sign and date)

Complete in CVMS

Medical/pharmacy director or location’s vaccine coordinator signature

Complete in CVMS

Date

## SAMPLE

**CDC COVID-19 Vaccination Program Provider Profile Information**

**PROVIDERS PRACTICING AT THIS FACILITY** (additional spaces for providers at end of form)

**Instructions:** List below all licensed healthcare providers at this location who have prescribing authority (i.e., MD, DO, NP, PA, RPh).

<table>
<thead>
<tr>
<th>Provider Name</th>
<th>Title</th>
<th>License No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete in CVMS</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9/14/2020
Appendix 40 – Vaccine Letter to County Leaders

STATE OF NORTH CAROLINA
DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER
GOVERNOR

MANDY COHEN, MD, MPH
SECRETARY

February 12, 2021

Dear County Leaders:

On Wednesday, Governor Cooper and I announced plans for how the state will move to Group 3 for COVID-19 vaccines. Because vaccine supply is still limited and the Group 3 population of frontline essential workers is so large, the state will move to the next group gradually. Therefore, we will begin with anyone working in child care or in PreK – 12 schools starting on February 24th and plan to move to additional frontline essential workers on March 10th. Some vaccine providers may not be ready to open to frontline essential workers on these dates if they are still experiencing high demand for vaccines in Groups 1 and 2.

Beginning on February 24th, those working in child care and schools, such as teachers, bus and van drivers, custodial and maintenance staff, and food service workers, will be eligible for vaccines. This includes staff in child care centers and homes, Head Start Programs, Preschool and PreK programs, traditional public schools, charter schools and private schools. (See Deeper Dive for additional detail.)

While staff in child care settings and PreK-12 schools will be eligible starting February 24th that does not guarantee they will get an appointment or get vaccinated between February 24th and March 10th because of very limited supply. However, the two-week period between February 24th and March 10th will allow for a more measured opening of the frontline essential workforce group.

NCDHHS is developing operational guidance to support child care and school staff in accessing vaccines. However, current prevention measures will not change. Schools can and should be providing in-person instruction. Under robust safety measures, all students can be in classrooms, with middle and high school students also following six-feet social distancing protocols.

North Carolina is currently vaccinating people in Groups 1 and 2, which include health care workers, long-term care staff and residents, and people 65 and older. Many local vaccine providers do not have enough vaccines to meet the needs of the currently eligible Groups. In the coming weeks, some providers will continue to vaccinate only these groups, whereas others may be ready to start vaccinating school and child care staff on February 24th. Whether vaccine providers can vaccinate school and child care staff will depend on vaccine supply and whether they are still experiencing high levels of demand from Groups 1 and 2.

We look forward to working with you to develop operational guidance to support vaccine distribution to child care and school staff. Thank you for your ongoing partnership.

Sincerely,

Mandy K. Cohen, MD, MPH
Secretary
Appendix 45 – CVMS Organization Portal email template for vaccine providers to use to invite organizations

Organization Portal Template Email (Vaccine Providers to Send to Organization Point of Contact).

Details about Template Email:
Sender: Vaccine providers partnering with an Organization/Employer to use the CVMS Organization Portal
Recipient: Organization points of contact (e.g., superintendents and/or their designee, CCR&R point of contact) who are invited by vaccine provider to use the Organization Portal and will be responsible for bulk upload of employee information
Purpose: Explains what to expect in CVMS, common issues/questions that might arise from a user who has not used CVMS before
Instructions before sending: Customize the highlighted information below.

--------------------------------------------------------------------------------------------------------------------
Email Subject: Please use Organization Portal to upload employees to register for vaccination

Hello,

Thank you for your support and patience as we partner to use the COVID-19 Vaccine Management System (CVMS) Organization Portal.

North Carolina has created an Organization Portal so employers and organizations can register employees or members to receive the COVID-19 vaccine at the appropriate time. Employers/organizations can upload an Excel (CSV) file to facilitate registration of eligible employees. Once uploaded, employees will receive a private and secure email to complete the registration process ahead of getting their vaccine – saving time and paperwork. Registration does not guarantee an appointment or that vaccine is available.

[Insert vaccine provider name] will add your organization into CVMS, so you can use the CVMS Organization Portal. We will also add you as the point of contact for your organization. You will receive an email shortly from nccvms@dhhs.nc.gov that provides your login information for the Organization Portal and specific instructions on next steps (see sample email in screenshot below).
What You Should Expect as the Organization Point of Contact

1. [Insert name of vaccine provider] will develop a plan with your organization to vaccinate employees.
2. [Insert name of vaccine provider] will add your organization to CVMS and will add you as the Organization Point of Contact in CVMS.
3. Please check your email and confirm you have received an invitation from nccvms@dhhs.nc.gov to access the CVMS Organization Portal. If you experience a delay in receiving the email, please check your spam folder. If the issue seems to be occurring for other people in your organization as well, your organization’s IT department may be able to help. A link to the NCDHHS Help Desk Portal and a phone number for support can also be found at the bottom of this letter.
4. We strongly recommend you use the email template, Organization Portal Email Template_Organization POC to Employees, in Vaccine Provider Guidance Appendix 46) to communicate with your employees/members prior to completing the bulk upload process in CVMS. The email template covers what employees/members should expect about registration, how to schedule a vaccination appointment, and actions they will need to take. You can customize the template to include information that is specific to your employees, such as details and logistics on the day of the vaccination appointment or event.
5. After you have communicated with your employees/members using the email template above, you can upload your list of employees/members in the CVMS Organization Portal. The bulk upload template can be downloaded directly from the CVMS Organization Portal and is also posted on the NCDHHS website. Step-by-step instructions and tips are outlined in the CVMS Organization Portal User Guide. Please note that you will need the first names, last names, and email addresses (enter in the order shown in the bulk upload template) of all employees/members you wish to upload into the CVMS Organization Portal. We strongly recommend reading the user guide and attending a training before you complete the bulk upload process. Please check the NCDHHS website for a listing of all upcoming trainings, with information on how to join.

6. Once you finish the bulk upload process, all uploaded employees will receive an email notifying them that they can complete COVID-19 vaccine registration in the COVID-19 Vaccine Portal.

7. After completing registration, employees will be able to schedule their vaccine appointments through the method that you have jointly agreed upon. Registration in the COVID-19 Vaccine Portal is not required for vaccination. If an individual does not have an email address, that person can be registered in the COVID-19 Vaccine Portal by the vaccine provider at the time of vaccination.

Please be on the lookout for emails from nccvms@dhhs.nc.gov, which are from the NCDHHS team. These messages contain important guidance and announcements related to NC’s fight against COVID-19 and the use of CVMS.

If you experience any issues using the CVMS Organization Portal to bulk upload employees, please submit a ticket in the CVMS Help Desk Portal. Select “Organization/Employer” and complete all required fields in the Vaccine Organization web form. The Provider and Organization Contact Center is also available Monday-Friday 7:00AM to 7:00PM ET and Saturday-Sunday 10:00AM-6:00PM ET. Call (877) 873-6247 and select option 8.

Thank you for your continued support,
[Vaccine Provider]

Appendix 46 - CVMS Organization Portal email templates for organizations to use to inform employees

Organization Portal Template Email (Organization Point of Contact to Send to Employees).

Details about Template Email:
- **Sender**: Organization Point of Contact (POC) who will be responsible for completing bulk upload of employee names and emails into CVMS Organization Portal
- **Recipient**: Employees/members of an employer/organization whose name and email address will be bulk uploaded in the CVMS Organization Portal and will be invited by email to complete their registration in the COVID-19 Vaccine Portal.
- **Purpose**: What employees should expect in CVMS, completing registration, steps to get a vaccination appointment.
- **Instructions before sending**: Customize the highlighted information below.

---

**Email Subject**: Please complete your COVID-19 vaccine registration

Dear employees:
You’ll soon be able to take a tested, safe and effective COVID-19 vaccine. The vaccines help prevent COVID-19 and are effective in preventing hospitalization and death, with no serious safety concerns noted in the clinical trials. They are free of charge to all North Carolina residents.
[Insert organization/employer name] is working with [Insert vaccine provider name] to get employees pre-registered for the COVID-19 vaccine. As part of registration, a representative from [insert organization/employer name] will upload employees' first names, last names, and email addresses to North Carolina's COVID-19 Vaccine Management System (CVMS). If you haven't already, you will receive an email that will allow you to register for the vaccine before coming in for your vaccination appointment, so that the process is faster when you show up for your vaccination. Please follow the steps below to complete your COVID-19 vaccine registration in the COVID-19 Vaccine Portal.

**COVID-19 Vaccine Portal & COVID-19 Vaccine Registration Instructions**

1. You will receive an email from nccvms@dhhs.nc.gov inviting you to pre-register on the COVID-19 Vaccine Portal. Click the link in the email and follow the instructions to reset your password. You may need to check your spam folder.
2. Follow the instructions to change your COVID-19 Vaccine Portal Password
3. Complete the COVID-19 Vaccination Registration before your appointment to get your first vaccine dose.
   a. Enter your contact and demographic details
   b. Answer a few questions related to vaccine eligibility

To see more detailed registration instructions with screenshots, please visit the [COVID-19 Vaccine Portal User Guide](#).

If you experience a delay in receiving an email invitation to pre-register, check your spam folder. If you still do not see an email, contact [Sender should customize this message based on who uploaded employees/members].

**Important things to know about registration:**

- Your privacy and personal information will be protected at all times.
- If you do not have an email address or did not complete the registration steps, you can still complete registration in-person when you arrive for a vaccine appointment – you do not need to pre-register in order to be able to get a vaccination.
- If you do not wish to get the vaccine at this time, you do not need to take any additional steps.

Follow instructions below to sign up for a vaccination appointment. [Sender should customize this message to include steps for how employees can get vaccinated, based on your plan with your vaccine provider to vaccinate employees.] You will still need to take the additional action of getting an appointment by taking the following steps: [insert steps employee should take to get an appointment or when/where employees should arrive for a scheduled vaccine event] Please note, as vaccine is still limited in supply, registering in the COVID-19 Vaccine Portal does not guarantee immediate vaccination for everyone and you may have to wait.

For other COVID-19 related questions, you may contact the COVID-19 Vaccine Help Center at 888-675-4567 Monday through Friday from 7:00 AM until 7:00 PM ET, and on Saturday and Sunday from 8:00 AM until 4:00 PM ET. The [CVMS Help Desk Portal](#) is also available for submitting questions and requests for support (select Vaccine Recipient).

[Sender's choice of close]

[Name]
Appendix 51 – Strategies to Fill COVID-19 Vaccine Appointments

Developing Partnerships and Planning

1. Develop partnerships with local organizations and employers to help fill appointments. While providers are ultimately responsible for filling appointments quickly and equitably, a community organization can be an important partner in achieving these goals.
   a. See a list of organizations that have already volunteered to help support vaccine events [here](#).
   b. Consider partners with strong ties in your communities such as faith-based organizations, Local NAACP chapters, local HBCUs, Community Health Workers, homeless shelters, partners that serve homebound persons (e.g., homebound health providers, Meals on Wheels, senior living), and other community based organizations (e.g., local United Way, food pantries, etc.), community civic clubs (e.g., Rotary, Kiwanis, Lions clubs), and local colleges or universities.
   c. Work with employers to vaccinate their employees.
      i. Contact a NCDHHS case manager to find out if an employer near you needs vaccinations.
      ii. Reach out directly to local employers, local school systems, charter schools, and private schools. Local chambers of commerce, or organizations serving farmworkers, such as farmworker health clinics in NC, NC Cooperative Extension Offices, AMEXCAN, NC Field, North Carolina Migrant Education Program, East Coast Migrant Head Start.

2. Host vaccination Q&As with community partners or employers to address questions and concerns people may have before booking appointments. Key resource: Vaccine 101.
3. As you plan your vaccine event, consider how to make the site easily accessible. Choose a trusted familiar location and include weekend and evening hours. If the event is accessible through public transportation, publicize those options, use free funding for public transit, and use free rides through Ride United NC.

4. Support language access to your event.

  i. Offer bilingual scheduling. The state scheduling tool is available in both English and Spanish.
  ii. Include bilingual staff or volunteers from partner organizations to help interpret for patients for whom English is not their first language.
  iii. Partner with local organizations who can help promote the event in different languages, and/or provide bilingual staff or volunteers to help with the event.
  iv. Ensure signage is clear and in multiple languages about where to enter, stand in line, etc.
  v. Contact communication.access@dhhs.nc.gov if you need help connecting with language access resources.

Planning: Filling appointments

5. Make it easy for people to find your clinic and schedule appointments

  a. Have an easy way to schedule appointments online. You can use the CVMS Scheduling tool for free, which is available in both English and Spanish. See instructions here.
  b. Give clear instructions on how to sign up for appointments or show up for walk-ins. Include those instructions in all of your communication, outreach, and promotional materials.
  c. Be clear about when you’re scheduling for first doses, and when you’re scheduling for second doses.
  d. Make sure you are listed on the statewide vaccine site locator (Myspot.nc.gov). To add yourself to the site locator or edit any information, see the instructions here.

6. Promote your clinic or event on social media, websites, and via local businesses and media outlets (local news channels, e-newsletters). Use communications resources from the Communications Toolkit to get you started.

  a. You can send a tailored text or email blast out about your event to the DHHS Vaccine ListServ in your county, which is a listserv of people who have signed up for vaccine updates, or through your local health department to promote your event to persons who are already listed in the state contact tracing software.
  b. NCDHHS will make customized materials to promote your event. Request them using this link.

7. Work with Partners to schedule appointments

  a. Work with trusted community partners, particularly among historically marginalized populations to reach out to their networks and book appointments. Partners can:
     i. Schedule appointments – share access to your scheduling tool or create a dedicated scheduling link for partners to use. Tell partners how many slots you are trying to book.
     ii. Promote appointments – ask partner organizations to text, call, or promote the available appointments in-person. You can create flyers, or draft emails or texts for them to distribute to their networks.
  b. Reach out directly to employers that you have partnered with to schedule appointments
  c. Work with the employer to register workers to get vaccinated, as many workers cannot call to make an appointment.
8. Make a Standby list to fill appointments in the case of cancellations or no-shows
   a. If you fill appointments before the date of the event, open up a “standby list” and gather peoples’ contact information. You can use this list to fill appointments if people had to cancel or didn’t show up. Invite individuals, employers, local businesses, or community organizations who were unable to get an appointment or scheduled at a later date to be on the standby list.

Pre-event communication: Filling appointments that are still open

9. Push out information about the vaccine event including the link or phone number to schedule appointments again—let people know that there are available appointments.
   a. Notify local partners and give them a text, flyer, or email they can use to notify their networks that appointments are available.
   b. Contact people registered for appointments and encourage them to bring a friend.
   c. Call radio stations and local newspapers in your area—ask if they will promote the event. Many will be able to promote or even send DJ’s to your vaccine location for free, or minimal cost.
   d. Contact DHHS to send out a text or email blast to their Vaccine ListServ. The listserv has more than 770,000 contacts on it and can be filtered by county. To request an email or text fill out this form

10. Contact people and organizations on the standby waiting list to notify them that there are appointments available to ensure no doses are wasted.

During the Event

11. Ensure people are not turned away
   a. Do not request people show a government-issued ID like a driver’s license. Providers should not turn away individuals who cannot show identification. This can be a barrier to some historically marginalized populations like persons experiencing homelessness, immigrant populations, and older minority populations.
   b. Add people to the standby list if a person comes to the event and does not have an appointment and there are not slots available. Check every hour to see if you have no shows, so you can allow someone without an appointment to get their vaccine.

12. Consider promoting that you are taking walk-ups and be staffed appropriately to handle walk-up traffic.

13. Schedule second dose appointments (if needed) before individual leaves the vaccine clinic.