2016 Program Participation Requirements At A Glance

Requirement	Summary	Resources/Job Aids
Key Clinic Staff	Practices must maintain key program staff contacts in the clinic's profile, and report key personnel changes to the VFC Program in a timely manner. Key clinic staff, include:	Vaccine Coordinator and Backup Vaccine Coordinate job aid (IMM-968)
	Provider of Record (POR) , responsible for the clinic's overall compliance with VFC Program requirements. Usually the clinic's physician-in-chief or medical director. Must be a licensed Medical Doctor, Doctor of Osteopathy, Nurse Practitioner, Physician Assistant, or a Certified Nurse Midwife with prescription-writing privileges in the State of California	VFC Key Practice Staff Change Request Form (IMM-1166)
	Provider of Record Designee , an on-site staff member designated by the POR to act on his/her behalf for VFC Program related matters when the POR is unavailable	
	Vaccine Coordinator, a designated, on-site, and fully trained staff member responsible for all vaccine management activities in the practice	
	Backup Vaccine Coordinator, a designated, on-site, and fully trained staff member responsible for all vaccine management activities in the practice when the Vaccine Coordinator is unavailable	
	Immunization Champion (optional), a staff member who goes above and beyond their normal duties to promote immunizations to patients and in the community	
Vaccine Management Plan	Develop and maintain a Vaccine Management Plan with practice-specific guidelines, protocols, and contact information. Plans must be easily accessible to staff and readily available to VFC program representatives for review.	Vaccine Management Plan (IMM-1122)
Updated!	Update the management plan at least annually, when VFC Program guidelines change, and when staff with vaccine management responsibilities change. Staff with assigned vaccine management responsibilities must review, sign, and date the plans annually and whenever the plans are updated.	
	Names of clinic staff with temperature monitoring responsibilities must be documented on the clinic's Vaccine Management Plan, Training Log page.	
	If a practice develops their plan(s) using something other than the VFC-provided template(s), the plan(s) must include the same content and elements as the VFC template.	

Fraud & Abuse	practices fo of the estab populations and manage policy". Fraud is an deception of	nust operate in a manner intervaccine administration fees olished regional fees, and administration fees olished regional fees, and administration fees of the decording to program required intentional deception or missecould result in some unauthor provider practice inconsistent innecessary costs to the Medi	s, never billing for ninistering VFC e VFC Program uirements. Califereresentation rized benefit to	or the cost of N supplied vaccii must be fully a fornia's VFC Pr made by a pers himself or oth	FC vaccine on the ONLY to end on the ONLY to end on the order of the ONLY to end of the order of the ONLY to end on the order of the ONLY to end on the order of the ONLY to end on the	or billing in exc ligible th each order "NO borrowin knowledge th	ess ; g
Staff Educational Requirements	All key staff must be knowledgeable about VFC Program requirements, VFC eligibility criteria, and be properly trained. All training must be documented. Each practice's VFC Provider of Record, Vaccine Coordinator, and their designees must complete annual EZIZ lessons to meet federal education requirements. New providers cannot enroll and existing providers cannot recertify until training is completed. Employees assigned to monitor and record temperatures must be properly trained on temperature monitoring, use of the clinic's temperature monitoring equipment, and how to respond to out-of-range temperatures. For these staff, document completion of required lessons on the training log.				http://eziz.org/eziz-training or log into MyVFCVaccines to access lessons. ure		
	Legen	d: ✓ = Required Lesson	Vaccine Coordinator	Back-up Vaccine Coordinator	Provider of Record	Provider of Record Designee	
		VFC Program Requirements	✓	✓	✓	✓	
	SUO	Storing Vaccines	✓	~	✓	✓	
	Lessons	Monitoring Storage Unit Temperatures (NEW)	✓	✓	✓	✓	
		Conducting a Vaccine Inventory	✓	✓	Optional	Optional	
	w & wedge	2016 Refrigerator Temperature Log <u>(NEW)</u>	✓	✓	✓	✓	
	Review & Acknowledg	2016 Freezer Temperature Log <u>(NEW)</u>	✓	✓	√	✓	

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Provider Enrollment,	Prospective providers must follow instructions listed EZIZ.org, including	http://eziz.org/vfc/enrollment/
Recertification, &	specify key practice staff,	
Disenrollment	complete necessary training requirements,	
	download and review job aids,	
	comply with storage unit requirements, and	
	complete Provider Enrollment Worksheet	
	Each year the Provider of Record must renew their participation in the VFC Program by updating	
	their information, completing training and signing new requirement agreements.	
	The VFC Program may terminate and disenroll a provider for failure to comply with VFC Program	
	requirements. Providers may voluntarily terminate their agreement with the VFC Program at any	
	time.	
VFC Patient Eligibility &	Follow VFC Program requirements for patient eligibility screening and documentation, including:	VFC Patient Eligibility Screening Record
Screening Requirements		form (IMM-1111)
8 14 1	Screen all patients 0-18 years of age, for VFC eligibility prior to vaccine administration at	
Updated!	every visit	
opaatea.	Document all elements of VFC's Eligibility Screening Record Form, including the screening	
	date, whether the patient is VFC eligible or not; and if the patient is eligible, the criteria	
	they meet	
	Do not deny a VFC-eligible patient because they/their parent is unable to pay the	
	administration fee.	
	Give VFC vaccine only to children who meet VFC eligibility criteria.	
1.00	Keep all VFC eligibility records on file for 3 years	
ACIP Recommendations &	Comply with recommendations from the ACIP about immunization schedules, dosages, and	CDC Recommended Immunization
Current Standards	contraindications. Offer all age-appropriate vaccines according to patient population served.	Schedules
	Give the patient or parent the most current version of the Vaccine Information Statement (VIS).	Instructions for using VIS
	Depart information about each immunication given including	Current Vaccine Information Statements
	Record information about each immunization given, including:	Current vaccine information statements
	the name of vaccine, the data it was given.	VFC Patient Eligibility Screening Record
	the date it was given, the route and administration site.	form (IMM-1111)
	the route and administration site, the let number and reconstructions.	101111 (111111)
	the lot number and manufacturer, the name and title of the name who administered it.	
	the name and title of the person who administered it; the addition are a part address.	
	the clinic's name and address;	
	the VIS publication date and date VIS was provided	

VFC Vaccine Orders	Trained and authorized clinic staff must submit vaccine orders through the practice's account on MyVFCvaccines.org. Place orders according to the practice's VFC-assigned ordering category (very high, high, medium, or low volume) and frequency (monthly, bimonthly, or quarterly). Provide all necessary inventory and usage information. The VFC Program encourages providers to choose one brand's products when multiple vaccine products are available to avoid inadvertent administration errors. The practice should alert the VFC Program of any temporary closures, including vacation and building management issues, which might affect deliveries. Vaccine doses not accounted for or lost due to negligence will be replaced dose for dose by the Provider of Record or the practice organization.	Vaccine Physical Inventory form (IMM-1052) Usage Logs: VFC Daily Usage Log (IMM-1053) Private Daily Usage Log (IMM-1053P) Flu Daily Usage Log (IMM-1053F)
Receiving, Unpacking & Storing Vaccines	Inspect vaccine shipments immediately upon arrival for damage. Verify that the contents match the information on the packing slip, including vaccine, diluent, brands, lot numbers, and expiration dates. Report any discrepancies within two hours. Never reject vaccine orders, even if the order is not intended for the clinic. Store the vaccine and then immediately contact the VFC Program if there are any discrepancies. Once contents are verified, properly store and label them in the appropriate areas. Clearly label and separate VFC-supplied and private vaccine. When possible, store the vaccines on different shelves in the storage unit. Store diluent in the refrigerator or at room temperature. Maintain inventory and invoices and make them available upon request.	Vaccine Receiving Log and Checklist (IMM-1112) Refrigerators: Preparing Refrigerators (IMM-962) Refrigerator Setup for Vaccine Storage (IMM-963) Freezers: Preparing Freezers (IMM-965) Freezer Setup for Vaccine Storage (IMM-966)

Inventory Monitoring & Maintenance	Maintain VFC-supplied vaccine according to VFC Program guidelines, including provider category and ordering frequency.	EZIZ Conducting a Vaccine Inventory lesson
	 Borrowing between VFC-supplied and private stock is prohibited. Store vaccine in its original packaging. Rotate stock so short-dated stock (earliest expiration) is used first. Report all expired, spoiled, wasted, and transferred vaccine doses. Conduct a physical inventory at least once a month and before submitting any vaccine order. 	Inventory: How to Do a Physical Inventory (IMM- 1090) Vaccine Inventory Form (IMM-1052)
		Usage Logs: VFC Daily Usage Log (IMM-1053) Private Daily Usage Log (IMM-1053P) Flu Daily Usage Log (IMM-1053F)
Vaccine Transfers &	Transfers:	Refrigerated vaccines:
Returns	Transfer VFC-supplied vaccines only in limited circumstances, following VFC transporting guidelines,	Transporting Refrigerated Vaccine job aid
	and with prior approval from the VFC Program. Routine re-distribution is not allowed.	(IMM-983)
	Transfer vaccines only to another VFC provider. VFC-supplied vaccine doses may not be transferred to non-VFC providers or sites.	Refrigerated Vaccine Transport Log (IMM-1132)
	The VFC Program discourages transferring varicella-containing vaccines because of sensitive temperature requirements.	Frozen vaccines: Transporting Frozen Vaccines job aid (IMM-1130) Frozen Vaccine Transport Log (IMM-
	Complete a transport log each time vaccines are transported to an alternate or back-up location. Vaccines transported without proper documentation of temperature monitoring may be deemed	1116)
	non-viable.	Transferring vaccines: Return or Transfer of VFC Vaccines
	Returns:	Report (IMM-986)
	In certain circumstances, expired or spoiled vaccine may be returned. Doses must be returned to the vaccine distributor within 3 months.	Vaccine Receiving Log and Checklist (IMM-1112)
	Providers must report expired/spoiled doses on a Return or Transfer of VFC Vaccines Report prior to submitting a new vaccine request.	

Billing for Administration	VFC providers may NOT bill anyone for the cost of VFC-supplied vaccines. Do not deny a VFC-	VFC's Who's Eligible flier (IMM-1088)
of VFC-Supplied Vaccines	eligible patient because they/their parent is unable to pay the administration fee.	
	Providers may charge VFC-eligible children not covered by Medi-Cal (i.e. uninsured, American	
	Indian/Alaska Natives, and underinsured children seen at a FQHC or RHC) up to the <u>current</u> federal	
	maximum regional administration charge of \$26.03 per dose (not antigen) of vaccine.	
	For Medi-Cal children, providers must bill Medi-Cal for vaccine administration fees and accept	
	reimbursement rates set by Medi-Cal or the contracted Medi-Cal health plans.	
	VFC providers may not deny administration of VFC vaccine to an established VFC-eligible patient	
	because the child's parent/guardian is unable to pay the administration fee.	
	Nichter all annuaries and all the managinals NEC against a second and a second and a second and a second and a	
	Note: pharmacies, urgent care and other specialty VFC providers agree to vaccinate all "walk-in"	
	VFC-eligible children and not refuse to vaccinate these children based on a parent's inability to pay	
December that it is a Common of the common o	the administration fee.	VAEDC and VEDD fliam (IMMA 1152)
Documentation & Record	Maintain all paper-based and electronic records related to the VFC Program for a minimum of three	VAERS and VERP flier (IMM-1153)
Retention Requirements	(3) years.	
	Make records available to public health officials, including local health jurisdictions, CA Dept. of	
	Public Health, and Department of Health and Human Services, upon request.	
	Tublic fleatili, and Department of fleatili and fluman services, apon request.	
	Records includes patient screening/eligibility verification, temperature logs, vaccine ordering	
	records, medical records which verify receipt of vaccine, vaccine purchase and accountability	
	records, VFC training records, Routine and Emergency Vaccine Management Plans, Provider	
	Recertification forms, Certificates of Calibration, etc.	
	Maintain vaccine administration records in accordance with the National Childhood Vaccine Injury	
	Compensation Act, which includes reporting clinically significant adverse events to the Vaccine	
	Adverse Event Reporting System (VAERS). Providers also are encouraged to report vaccine	
	administration errors to the Vaccine Error Reporting Program (VERP).	

Vaccine Storage and	Store all vaccines supplied by the California VFC Program under appropriate temperatures at all	Vaccine Storage requirements
Equipment	times. Acceptable temperature ranges for refrigerated vaccines are 35.0° F and 46.0° F (2.0° C and	
	8.0° C) and for frozen vaccines between -58.0° F and +5.0° F (-50.0° C and -15.0° C).	Refrigerators:
		Preparing Refrigerators job aid (IMM-
	Equipment used for the storage of refrigerated and frozen vaccines must meet CA VFC Program	<u>962</u>)
	requirements and maintain acceptable temperature ranges.	Refrigerator Setup for Vaccine Storage
		(IMM-963)
	Providers must have separate refrigerator-only and freezer-only units which must be dedicated to	
	the storage of vaccines.	Freezers:
		Preparing Freezers (IMM-965)
	Various brands and models are acceptable. The California VFC Program does not endorse or	Freezer Setup for Vaccine Storage (IMM-
	recommend specific products.	966)
	Safeguard storage unit's power supply, posting warning labels on both the plug and the circuit	Power Supply:
	breaker associated with all vaccine storage units to prevent accidental disconnection and/or	Safeguard Your Power Supply (IMM-967)
	implementing use of plug guards.	Do Not Unplug Sign (IMM-744)
	Implementing use of plug guarusi	So Not Shiprag Sign (MM1711)
	Ensure the capacity of the storage units have adequate space for inventory, especially during busier	
	periods like during influenza season and back-to-school time.	
	periods like during initiating season and sack to seriod time.	
	It may be necessary to purchase additional storage unit(s) if the size of the practice's current	
	storage units cannot accommodate the practice's inventory.	
Storage & Handling	Take immediate action to prevent spoilage for out-of-range temperatures in the vaccine	SHOTS www.MyVFCvaccines.org
	refrigerator and freezer. A temperature excursion does not automatically mean that exposed	WWW.IVIYVI CVACCITICS.OIS
Incidents	vaccines are non-viable or unusable. However, vaccines exposed to temperature ranges must be	
	marked "do not use" until guidance is received from the VFC Program or the vaccine	
(Temperature Excursions)	manufacturers. Record temperature excursions on SHOTS (Storage and Handling Triage System) on	
	, , , , , , , , , , , , , , , , , , , ,	
New!	MyVFCvaccines.org.	
	Vascinas stored out of range and with inapprepriate temperature monitoring devices may be	
	Vaccines stored out of range and with inappropriate temperature monitoring devices may be	
	deemed non-viable, and may be considered a negligent vaccine loss.	

Thermometers & Data Loggers

Updated!

*Beginning in 2017, all VFC providers will be required to use data loggers. Use a VFC-compliant temperature monitoring device in each vaccine storage unit at all times. Have at least one VFC-compliant back-up device for use when primary devices fail or are being recalibrated.

To meet specifications, temperature monitoring devices must:

- Be accurate within +/-1.0°F (+/-0.5°C);
- Be digital, with the digital display placed outside the unit;
- Have a buffered temperature probe immersed in one of the following: a vial filled with liquid (e.g. glycol, ethanol, glycerin); a vial filled with loose media (e.g. sand, glass beads); or a solid block of material (e.g. Teflon®, aluminum);
- Display current, minimum, and maximum temperatures;
- Have a visual or audible alarm to signal out-of-range temperatures;
- Be calibrated annually (or every other year when the manufacturer recommends calibration done in a period that is longer than two years); and
- Have a valid <u>Certificate of Calibration</u> on file for 3 years and presented upon request.
- Memory stores at least 4,000 readings (specific to data loggers only)

In order to be valid, a Certificate of Calibration must include:

- Model and Serial Number;
- Date of Calibration Testing (Report/Issue Date);
- Measurement results indicate unit passed test and the documented uncertainty is within $+/-1^{\circ}$ F ($+/-0.5^{\circ}$ C); and
- a statement indicating that calibration meets ISO 17025 standards (non-accredited laboratories).

Temperature monitoring devices no longer accurate within +/-1.0°F (+/-0.5°C) as indicated in the calibration measurement results, must be replaced.

Practices with multiple vaccine storage units may need more than one backup device.

All new VFC providers, practices that are open 2 days a week or less, and practices needing to replace their primary or back-up thermometer will be required to purchase and use data loggers to monitor temperatures. Providers conducting mass vaccination clinics also must use data loggers to monitor temperatures during vaccine transport and at the mass vaccination clinic.

Thermometer requirements

<u>Checklist for Thermometer Certificate of</u> <u>Traceability and Calibration(IMM-1119)</u>

Data Logger FAQs

Data Logger Job Aid

Temperature Logs and	Providers must use current VFC Program temperature logs, available from EZIZ, even if using a	Refrigerators:
Recording Temperatures	continuous temperature recording device or a digital data logger. If temperatures are not	Recording Refrigerator Temperatures
	monitored and documented for a prolonged period of time, the affected vaccines will be	(IMM-1029)
	automatically deemed non-viable and this will be considered a negligent vaccine loss.	Refrigerator Temp Log Fahrenheit (IMM-
		<u>1125)</u>
	Twice each day, at the beginning and towards the end of each business day, the Vaccine	Refrigerator Temp Log Celsius (IMM-
	Coordinator must monitor and record the CURRENT, MAX and MIN temperatures in the refrigerator and freezer, date of each reading and the initials of the person who assessed and recorded the	1127)
	readings.	Freezers:
	reduings.	Recording Freezer Temperatures (IMM-
	If temperatures are monitored using a continuous temperature device/data logger, download and	1028)
	review of temperature data should occur every two-week period, or at minimum, monthly.	Freezer Temp Log Fahrenheit (IMM-1126)
	review of temperature data should occur every two-week period, or at minimum, monthly.	Freezer Temp Log Celsius (IMM-1128)
	If other staff are assigned to monitor and record temperatures, they must be trained on the use of	Treezer remp Log ceisius (IIVIIVI-1128)
	the devices used by the practice, and how to respond to out-of-range temperatures.	
	the devices used by the practice, and now to respond to out or range temperatures.	
	When the log is complete, the supervisor must certify that temperatures recorded on that log are	
	correct and that corrective actions were taken.	
	Correct and that corrective actions were taken.	
	Maintain completed temperature logs for three years and make them available upon request.	
Vaccine Storage	Store vaccines within recommended temperatures at all times.	EZIZ Storing Vaccines lesson
Guidelines	• Refrigerated vaccines between 35.0°F and 46.0°F (2.0°C and 8.0°C)	
	• Frozen vaccines between -58.0 °F and 5.0 °F (-50.0 °C and -15.0 °C)	Prevent Vaccine Loss flier (IMM-1113)
	Store VFC-supplied vaccines according to VFC Program guidelines.	
	Set up vaccine storage units properly;	
	Store vaccine is its original packaging;	
	 Position vaccine 2-3 inches from the walls and floor, and allow enough space for air to circulate; 	
	Separate and label VFC and private vaccines;	
	Group and label vaccine by type;	
	Do not store vaccine on the door or in drawers;	
	 Plug storage units into electrical outlets which are not controlled by wall switches. 	
	 Fill vacant refrigerate space, such as the floor, door, and along the walls, with water bottles to 	
	stabilize temperatures;	
	 Fill vacant freezer space with cold packs to stabilize temperatures 	
	1 iii vacant neezer space with colu packs to stabilize temperatures	

Site Visits	Enrolled providers agree to site visits from VFC Program staff, including	N/A
	1) scheduled compliance visits;	
	2) unannounced storage and handling visits; and	
	3) visits for educational and programmatic support	
	Unannounced storage and handling visits serve as spot checks to ensure VFC-supplied vaccines are administered to VFC-eligible children and are managed and stored according to VFC Program requirements. Any active VFC provider may be chosen to receive an unannounced storage and handling visit.	
	Provider of Record or the Designee must sign and acknowledge receipt of site visit findings, and agree to complete required follow up within specified periods.	