**KEEP YOUR MANAGEMENT PLAN IN THE MOBILE UNIT**

Practices using mobile units to administer VFC vaccines must complete this vaccine management plan to itemize equipment and record practice protocols specific to mobile units. This requirement applies to mobile-only clinics and clinics with mobile units.

**Instructions:** Complete this form and make sure key practice staff sign and acknowledge the signature log whenever your plan is revised. Keep it in the mobile unit and available for review by VFC Field Representatives during site visits. (Complete the VFC “[Vaccine Management Plan](http://eziz.org/assets/docs/IMM-1122.docx)” to itemize equipment and record practice protocols specific to stationary clinics, if applicable.)

**Section 1: Key Requirements**

Practices using mobile units to administer VFC vaccines must follow all requirements in the VFC “[Provider Agreement](http://eziz.org/assets/docs/IMM-1241.pdf)” and “[Provider Agreement Addendum](http://eziz.org/assets/docs/IMM-1242.pdf).” Additionally, they agree to these VFC Program requirements for operating mobile units:

1. Review and update this document at least once a year to ensure that all content in each section is up to date.
2. Maintain a copy of this document in an easily accessible place on the mobile unit.
3. Make the mobile unit and all relevant equipment and documentation available when VFC representatives conduct compliance visits.
4. Assign a VFC Vaccine Coordinator to travel with the mobile unit when it goes into the field. The Vaccine Coordinator must complete all EZIZ lessons before traveling in the mobile unit. (The Vaccine Coordinator may be different from the VFC Vaccine Coordinator identified in the “[Vaccine Management Plan](http://eziz.org/assets/docs/IMM-1122.docx).”)
5. Follow VFC [guidelines for transporting refrigerated](http://eziz.org/assets/docs/IMM-983.pdf) (IMM-983) and [frozen vaccines](http://eziz.org/assets/docs/IMM-1130.pdf) (IMM-1130) every time vaccines are transported between the stationary clinic and the mobile unit.
6. Complete VFC [vaccine transport logs for refrigerated vaccines](http://eziz.org/assets/docs/IMM-1132.pdf) (IMM-1132) and [frozen vaccines](http://eziz.org/assets/docs/IMM-1116.pdf) (IMM-1116) every time vaccines are transported between the stationary clinic and the mobile unit.
7. **In the event of a temperature excursion:** Report all out-of-range temperatures to SHOTS at MyVFCvaccines.org as soon as possible and follow the standard requirements for responding to temperature excursions.

**Section 2: Important Contacts**

**KEY PRACTICE STAFF & ROLES**

|  |  |
| --- | --- |
| Mobile Clinic Name | Mobile Unit VFC PIN |
|  |  |
| Stationary Clinic Name (Main VFC PIN) | Stationary Clinic VFC PIN (If different from mobile unit) |
|  |  |
| Address | |
|  | |
| VFC Vaccine Coordinator for Mobile Unit | |
|  | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Role** | **Name** | **Title** | **Phone #** | **Alt Phone #** | **E-mail** |
| Provider of Record |  |  |  |  |  |
| Provider of Record Designee |  |  |  |  |  |
| Vaccine Coordinator |  |  |  |  |  |
| Backup Vaccine Coordinator |  |  |  |  |  |

**USEFUL EMERGENCY NUMBERS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Service** | **Name** | **Phone #** | **Alt Phone #** | **E-mail** |
| VFC Field Representative |  |  |  |  |
| VFC Call Center |  | **1-877-243-8832** |  |  |
| Mobile Van Service/Repair |  |  |  |  |
| Towing Service |  |  |  |  |
| Mobile Van Insurance Company & Policy Number |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Section 3: Equipment Documentation**

**VACCINE STORAGE UNITS AND MAINTENANCE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Maintenance/Repair Company:** |  | **Phone:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Unit Type** | **Brand** | **Model** | **Dates / Types of Service** |
| Refrigerator |  |  |  |
| Freezer |  |  |  |

**DIGITAL DATA LOGGERS**

|  |  |  |  |
| --- | --- | --- | --- |
| **IT/Support Provided By:** |  | **Phone:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Device Location** | **Temperature Monitoring Device Model/Serial Number** | **Calibration Expiration Date** | **Alarm Setting Low** | **Alarm Setting High** |
| **Refrigerator** |  |  |  |  |
| **Freezer** |  |  |  |  |
| **Refrigerated Cooler** |  |  |  |  |
| **Frozen Cooler** |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Calibration Company/Laboratory |  | Contact |  | Phone |  |
| Calibration Company/Laboratory |  | Contact |  | Phone |  |
| Auto-Alert Notifications Sent to Staff Contact |  | Text/  E-mail |  | | |
| Auto-Alert Notifications Sent to Staff Contact |  | Text/ E-mail |  | | |
| Auto-Alert Notifications Sent to Staff Contact |  | Text/ E-mail |  | | |

**Section 3: Equipment Documentation (Continued)**

|  |
| --- |
| **For Devices with Auto-Alerts:** Outline or attach the practice’s protocol for responding to temperature excursions after the mobile event is closed. Consider implementing a phone tree. Ensure staff safety is addressed (e.g., for alerts after dark). |
|  |

**Section 4: Key Documentation for Mobile Unit**

**PRACTICE PROTOCOLS**

Indicate which of the following options applies to your mobile unit.

* Vaccines will be transported back to the stationary clinic (main VFC PIN) at the end of the clinic day.
* Vaccines will be temporarily stored overnight in another stationary clinic with a different VFC PIN. List any VFC PIN(s) used for overnight storage: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Vaccines will be stored in the mobile unit overnight because the mobile unit is connected to a permanent and secure power source.

|  |
| --- |
| Vaccines may not be delivered to personal residences. Outline your practice’s protocol for receiving and storing vaccines when the mobile unit is in the field at the time of delivery: |
|  |

|  |
| --- |
| Vaccines must be kept separate when stored at another stationary VFC PIN. Describe your practice’s protocol for managing and accounting for mobile unit vaccine inventory: |
|  |

**LOCATION OF KEY DOCUMENTATION**

Maintain all documentation for three years and make available to VFC representatives upon request.

|  |  |
| --- | --- |
| Mobile Unit VMP |  |
| Completed VFC Temperature Logs |  |
| Temperature Data Files |  |
| VFC Transport Logs |  |
| Location of Certificates of Calibration |  |

**Section 5: Summary of Key Practice Staff Roles and Responsibilities**

This document highlights key duties of designated vaccine management staff. However, all personnel working with vaccines should be familiar with VFC Program requirements.

|  |  |  |
| --- | --- | --- |
| **PROVIDER OF RECORD** |  | **VACCINE COORDINATOR** |
| * Oversees key practice staff to ensure VFC Program requirements are met. * Completes required EZIZ training lessons. * Designates one provider as the Provider of Record Designee responsible for ensuring all VFC Program requirements are met when the Provider of Record is not available. * Complies with all federal vaccine management requirements, including key areas outlined in this plan. |  | * Completes required EZIZ training lessons. * Meets responsibilities described in the [Vaccine Coordinator job aid.](http://www.eziz.org/assets/docs/IMM-968.pdf) * Oversees the practice’s vaccine management plan for routine and emergency situations. * Monitors vaccine storage units. * Maintains VFC-related documentation in an accessible location. * Participates in VFC Program compliance site visits. |
| * Designates one staff as the Backup Vaccine Coordinator responsible for vaccine management when the primary Vaccine Coordinator is not available. * Authorizes and reports staffing changes regarding the Vaccine Coordinator, Backup Vaccine Coordinator, Provider of Record, and Provider of Record Designee to the VFC Call Center. * Meets and documents required annual training for the practice’s vaccine management staff. * Ensures that vaccine management staff are knowledgeable of VFC Program requirements for temperature monitoring and vaccine storage. * Ensures that the practice’s vaccine inventory management is consistent with VFC Program requirements. * Ensures that the practice’s vaccine storage units and temperature monitoring devices meet VFC Program requirements. * Updates and revises vaccine management plan (and the “[Mobile Unit VMP](http://eziz.org/assets/docs/IMM-1276.docx)” if applicable) at least annually and when necessary. * Reviews VFC Program requirements and management plan with staff at least annually and when necessary. * Participates in VFC Program compliance site visits.   **PROVIDER OF RECORD DESIGNEE** |  | **BACKUP VACCINE COORDINATOR** |
|  | * Completes required EZIZ training lessons. * Meets responsibilities described in the [Vaccine Coordinator job aid](http://www.eziz.org/assets/docs/IMM-968.pdf) when the primary Vaccine Coordinator is not available.   **IMMUNIZATION CHAMPION** |
| Consider assigning the role of Immunization Champion to focus on ensuring providers and staff are knowledgeable about IZ schedules, vaccine products and dosages, and on improving coverage levels. This is not an official role, but practices and clinics that assign an Immunization Champion often have better compliance rates.  The Immunization Champion   * ensures staff know how to and are completing VFC eligibility screening and documentation consistently; * ensures vaccinators are consistently pulling from private or VFC stock as instructed in written orders; * ensures vaccinators are urging parent/guardian to schedule follow-up doses before leaving; * ensures vaccinators are educating patients and their parent/guardian about immunizations; and * researches and collaborates with provider to implement essential immunization strategies practice-wide. |
| * Completes required EZIZ training lessons. * Meets responsibilities listed above for the Provider of Record in his/her absence. |  |

**Section 6: Management Plan during Mobile Unit Events**

**VACCINE TRANSPORT BETWEEN STATIONARY CLINIC AND MOBILE UNIT**

Due to the risk to vaccines of improper packing and transporting, follow these step-by-step instructions when transporting VFC vaccines between the stationary clinic and the mobile unit.

|  |  |
| --- | --- |
| **Step** | **Description** |
| 1. | Verify that the mobile unit’s refrigerator and freezer are within the OK ranges:  **Refrigerator:** Between 36.0°F and 46.0°F (2.0°C and 8.0°C)  **Freezer:** 58.0°F and 5.0°F (- 50.0°C and -15.0°C) |
| 2. | Follow VFC [guidelines for transporting refrigerated vaccines](http://eziz.org/assets/docs/IMM-983.pdf) (IMM-983) and [frozen vaccines](http://eziz.org/assets/docs/IMM-1130.pdf) (IMM-1130) every time vaccines are transported between the stationary clinic and the mobile unit. |
| 3. | Complete [vaccine transport logs for refrigerated vaccines](http://eziz.org/assets/docs/IMM-1132.pdf) (IMM-1132) and [frozen vaccines](http://eziz.org/assets/docs/IMM-1116.pdf) (IMM-1116) every time vaccines are transported between the stationary clinic and the mobile unit. |
|  |  |

**DURING A MOBILE UNIT EVENT**

**Page 7**

Follow these step-by-step instructions during the mobile clinic event.

**Page 8**

|  |  |
| --- | --- |
| **Step** | **Description** |
| 1. | Monitor and record current, minimum, and maximum storage unit temperatures on [VFC temperature logs](http://eziz.org/resources/storage-handling-job-aids/) twice each day: at the beginning and end of each mobile clinic day. |
| 2. | Conduct eligibility screening for all children from birth through 18 years of age to ensure vaccines are pulled from the correct inventory. |
| 3. | Administer all age-appropriate, ACIP-recommended vaccines; recommend non-routine, ACIP-recommended vaccines when indicated or when requested. |
| 4. | Document all VFC vaccine doses administered in the mobile unit using the VFC "[Daily Usage Log](http://eziz.org/assets/docs/IMM-1053.pdf)” (IMM-1053) and "[Flu Usage Log](http://eziz.org/assets/docs/IMM-1053F.pdf)" (IMM-1053F). |
| 5. | In the event of out-of-range temperatures, take immediate action to protect vaccines. (Refer to “In the Event of Temperature Excursions.”) |

**Section 6: Management Plan during Mobile Unit Events (Continued)**

**IN THE EVENT OF TEMPERATURE EXCURSIONS**

Follow these step-by-step instructions to respond to out-of-range temperatures.

**Page 8**

|  |  |
| --- | --- |
| **Step** | **Description** |
|  | **If an alarm went off:** |
| 1. | Stop administering all vaccines until SHOTS or the vaccine manufacturer determines vaccines are okay to administer. |
| 2. | |  |  | | --- | --- | | Clear the MIN/MAX and any alarm symbol.   Tip. This step ensures staff don’t report the same excursion during the next recording; skip this step if your device resets automatically. |  | |
| 3. | Separate and label all vaccines if any vaccines are exposed to out-of-range temperatures during a mobile unit event. |
| 4. | Alert your Vaccine Coordinator and supervisor that vaccines might have been damaged by out-of-range temperatures and may not be used until the incident has been reported and resolved. |
| 5. | As soon as possible, report the temperature excursion to SHOTS at MyVFCvaccines.org and follow all instructions given. (Refer to the procedures for “Taking Action for Temperature Excursions” in the Provider Operations Manual.) |
|  |  |

**Section 7: Management Plan for Routine Situations**Refer to the [Provider Operations Manual](http://eziz.org/assets/docs/IMM-1248.pdf) (POM) for instructions on completing each task.

|  |
| --- |
| **INITIAL EQUIPMENT SETUP** |
| * Use vaccine storage units and digital data loggers that meet VFC Program requirements. (Refer to "Vaccine Storage Unit Specifications" and "Data Logger Specifications.") * Configure all storage units and digital data loggers to meet VFC Program requirements. (Refer to "Configuring Vaccine Storage Units" and "Configuring Data Loggers.") * Post [VFC-supplied temperature logs](http://eziz.org/resources/storage-handling-job-aids/) on vaccine storage unit doors, or nearby in an accessible location. * Do not store vaccines in storage units until temperatures are stable (refrigerators at around 40.0°F and freezers below 0.0°F) for 3–5 days. |

|  |
| --- |
| **DAILY TASKS** |
| **Temperature Monitoring**   * Read CURRENT, MIN, and MAX refrigerator & freezer temperatures twice a day, when the clinic opens and before it closes—even though using digital data loggers. (Refer to “Monitoring Storage Unit Temperatures.”) * Document temperatures on VFC refrigerator ([Fahrenheit](http://eziz.org/assets/docs/IMM-1125.pdf) | [Celsius](http://eziz.org/assets/docs/IMM-1127.pdf)) and freezer ([Fahrenheit](http://eziz.org/assets/docs/IMM-1126.pdf) | [Celsius](http://eziz.org/assets/docs/IMM-1128.pdf)) temperature logs. * Take action for temperature excursions, if any, and take immediate action to protect vaccines. (Refer to "Taking Action for Temperature Excursions.") |
| **BI-WEEKLY TASKS** |
| **Review and Certify Temperature Data**   * Supervisor: Certify and sign that temperatures were recorded twice daily, staff printed names and initials, and corrective actions were taken—for each two-week reporting period. (Refer to "Monitoring Storage Unit Temperatures.") * Download and review data files at the end of every two-week reporting period to look for missed excursions or temperature trends that might indicate performance issues with vaccine storage units. (Refer to "Monitoring Storage Unit Temperatures.") |
| **MONTHLY TASKS** |
| **Physical Vaccine Inventory**   * Conduct a careful and accurate physical vaccine inventory and complete the VFC “[Vaccine Physical Inventory Form](http://eziz.org/assets/docs/IMM-1052.pdf)" or electronic equivalent. (Refer to “Conducting a Physical Vaccine Inventory.”) * Check vaccine expiration dates and rotate stock to place vaccines that will expire soonest in front of those with later expiration dates. * Transfer vaccines that will expire within six months to other VFC providers. (Refer to “Transferring Vaccines between Providers.”) |
| **ANNUAL TASKS** |
| * Allocate time for and complete VFC recertification. * Review and update the practice’s vaccine management plan. (Refer to “Vaccine Management Plan.”) * Review with key practice staff the vaccine management plan’s section on preparing for and responding to vaccine-related emergencies and conduct regular vaccine transport drills to maintain competency. * Calibrate primary and backup temperature monitoring devices annually (or every other year if the manufacturer’s recommendation is for a longer period) following VFC Program requirements. Calibrate primary and backup devices on different schedules to ensure all refrigerators and freezers storing VFC-supplied vaccines are equipped with data loggers at all times. File certificates of calibration in a readily accessible area, keep them for three years, and present them to the VFC Program for review upon request. (Refer to “Configuring Data Loggers” for routine maintenance.) |

**Section 7: Management Plan for Routine Situations (Continued)**

|  |
| --- |
| **Page 4**  **Page 4**  **PER PROVIDER SCHEDULE** |
| **Routine Vaccine Orders**   * Return all spoiled and expired vaccines. (Refer to “Reporting Spoiled, Expired, or Wasted Vaccines.”) * Complete transfers between providers. (Refer to Transferring Vaccines between Providers.”) * Determine total doses administered since previous order using VFC daily usage logs (or electronic equivalent).  (Refer to “Administering Vaccines.”) * Conduct a careful and accurate physical vaccine inventory to determine total doses on hand by vaccine. (Refer to “Conducting a Physical Vaccine Inventory.”) * Submit vaccine orders according to provider category and order frequency. (Refer to “Submitting Routine Vaccine Orders.”)   **Vaccine Deliveries**   * Inspect packages carefully and complete the VFC [“Vaccine Receiving Log and Checklist”](http://eziz.org/assets/docs/IMM-1112.pdf) to report damage or discrepancies immediately. (Refer to "Receiving Vaccine Deliveries.") * Store vaccines and diluents immediately and rotate stock. (Refer to "Storing Vaccines.")   **Routine Maintenance**   * Establish a regular routine for cleaning vaccine storage units. (Refer to “Configuring Vaccine Storage Units” for routine maintenance.) * Replace batteries in temperature monitoring devices every six months. (Refer to “Configuring Data Loggers” for routine maintenance.) |
| **TO MINIMIZE LOSS**   * Transfer to other VFC providers vaccines that will expire within six months.  (Refer to "Transferring Vaccines between Providers.") * Respond to planned or sudden vaccine-related emergencies following the practice‘s vaccine management plan. (Refer to "Responding to Vaccine-Related Emergencies.") * Confirm clinic delivery hours when submitting routine vaccine orders to ensure staff are available to receive vaccines. |
| **AT EACH IMMUNIZATION VISIT**   * Conduct eligibility screening for all children from birth through 18 years of age to ensure vaccines are pulled from the correct inventory. (Refer to "Conducting Eligibility Screening.") * Administer all age-appropriate, ACIP-recommended vaccines and update VFC daily usage logs with doses used. (Refer to "Administering Vaccines.") * Recommend non-routine, ACIP-recommended vaccines when indicated or when requested. |

**Section 7: Management Plan for Routine Situations (Continued)**

**AS NEEDED**

**Spoiled, Expired, and Wasted Vaccines**

* Return spoiled and expired vaccines to McKesson within six months of expiration or spoilage for excise tax credit. (See “Reporting Spoiled, Expired, or Wasted Vaccines.”)
* Properly dispose of wasted vaccines. (See “Reporting Spoiled, Expired, or Wasted Vaccines.”)

**Changes in Staff and Training**

* Anyone acting in VFC roles (Provider of Record and Designee, Vaccine Coordinator and Backup) must complete the required EZIZ lessons when hired and annually thereafter; staff must demonstrate competency in their assigned VFC roles.
* Any clinician who administers VFC-supplied vaccines must be knowledgeable of and familiar with all ACIP-recommended immunizations, including schedules, indications, dosages, and new products.
* All staff who conduct VFC Program eligibility screening, documentation, and billing (e.g., front- or back-office staff) must be knowledgeable of VFC eligibility, documentation, and billing requirements.
* All staff and supervisors who monitor storage unit temperatures or sign off on VFC temperature logs must complete the related EZIZ lesson when hired and annually thereafter; they must be fully trained on use of the practice’s data loggers.
* Train staff who are authorized to accept packages to immediately notify the Vaccine Coordinator when VFC-supplied vaccines are delivered.
* Update the practice’s vaccine management plan to reflect any changes in key practice staff.

**Device Replacement**

* Purchase a new data logger if existing device or probe malfunctions, is damaged, or if device provides repeated, inaccurate temperature readings. (Exception for replacement probes recommended and replaced by the device manufacturer or calibration company.)
* When purchasing new data loggers: New devices must be able to generate a summary report of recorded temperature data since the device was last reset; summary reports must include minimum and maximum temperatures, total time out of range (if any), and alarm settings. Devices that only generate CSV data files or Excel spreadsheets are not acceptable.

**Section 8: Worksheet for Emergency Vaccine Management**

**Page 5**

**The following sections include space for information and necessary actions to take in the event of an emergency, such as unit malfunction, mechanical failure, power outage, natural disaster, or human error.**

In an emergency, contact the following people in the order listed:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Role/Responsibility** | **First & Last Name** | **Phone #** | **Alt Phone #** | **E-mail Address** |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |

|  |  |
| --- | --- |
| Does the clinic have a generator? If so, where is it? |  |

**If the mobile van breaks down or is in an accident, your clinic does not have a generator, or a vaccine storage unit fails:** It might be necessary to transport vaccines to an alternate storage location (e.g., a local hospital or another VFC provider). Identify an alternate location(s) that has vaccine storage units and data loggers that meet VFC Program requirements.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Alternate Vaccine Storage** | **Address & City** | **Phone #** | **Alt Phone #** | **E-mail Address** |
|  |  |  |  |  |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **Location of emergency packing supplies:** |  |

**LOCATION OF OTHER SUPPLIES**

|  |  |
| --- | --- |
| Flashlight |  |
| Spare DDL batteries |  |
| Keys to secured cabinets |  |
| Transport cooler & log |  |
| Packing supplies |  |
|  |  |
|  |  |

**Page 6**

Section 9: Management Plan for Emergencies

***Do not risk staff safety during emergencies.*** Use common sense when attempting to protect vaccines. Use the following guidance for safeguarding vaccines in the event of planned or unplanned power interruptions (e.g., power outages, weather-related circumstances, fires, building maintenance/repairs, etc.).

**CHECKLIST: BEFORE AN EMERGENCY**

Proper preparation for emergencies is essential for protecting the viability of vaccines. Use the following checklist to help ensure practices are ready for planned or unexpected situations that might affect vaccine viability.

|  |  |
| --- | --- |
| **Step** | **Description** |
| 1. | Maintain current emergency contact information for key practice staff in the vaccine management plan. |
| 2. | Maintain current contact information for alternate vaccine storage location(s), including the facility name, address, and telephone number in the vaccine management plan. |
| 3. | Be familiar with backup power sources for commercial- and pharmacy-grade units. |
| 4. | Know the location of the backup data logger used for vaccine transport. |
| 5. | Stock vaccine packing and transport supplies, including a hard-sided cooler, frozen gel packs, and bubble wrap. |
| 6. | Keep copies of the VFC “[Refrigerated Vaccine Transport Log](http://eziz.org/assets/docs/IMM-1132.pdf)” and “[Frozen Vaccine Transport Log](http://eziz.org/assets/docs/IMM-1116.pdf)” and floor plans (when available) for easy access during a vaccine-related emergency. |
| 7. | Review annually the steps key practice staff must take to protect vaccines during short- or long-term outages. |
| 8. | **Vaccine Transport Drill:** Practice packing the transport cooler using packing supplies and materials that simulate vaccine boxes. Do NOT practice with actual vaccines. |

**Section 9: Management Plan for Emergencies (Continued)**

**DURING AN EMERGENCY**

Due to the risk to vaccines of improper packing and transporting, follow these step-by-step instructions during an emergency to determine whether vaccines should be transported or sheltered in place.

|  |  |
| --- | --- |
| **Step** | **Description** |
| 1. | Do not open the unit. |
| 2. | Place a “DO NOT OPEN” sign on vaccine storage unit(s) and leave door(s) shut to conserve cold air mass. |
| 3. | Notify the emergency contacts identified on the vaccine management plan’s “Worksheet for Emergency Vaccine Management.” |
| 4. | Note the time the outage started and storage unit temperatures (CURRENT, MIN and MAX). |
| 5. | Assess to determine the cause of the power failure and estimate the time it will take to restore power. |
| 6. | Take appropriate action.  **In the event of appliance failure:**  Place vaccines in any VFC-approved backup storage unit with a VFC-compliant data logger, or transport vaccines to the designated alternate storage facility. (Refer to “Transporting Vaccines” for instructions.) |
|  | **For power outages after hours:**  Report any excursion to SHOTS the next morning and take appropriate action. (Refer to “Taking action for Temperature Excursions.”) |
|  | **For planned outages expected to be short-term (approximately fewer than 4 hours)\*:**  Monitor storage unit temperature and report any excursions once power has been restored. (Refer to “Taking action for Temperature Excursions.”) |
|  | **For planned/unplanned outages expected to be longer than approximately 4 hours,\* or for any outage that extends beyond the current business day:**  Transport vaccines to the designated alternate storage facility. (Refer to “Transporting Vaccines” for instructions.) If transport or relocation is not feasible (e.g., alternate location is not available or travel conditions are unsafe), keep vaccine storage units closed and notify the VFC Call Center as soon as possible. |
| 7. | Once power has been restored, follow the steps listed in “After an Emergency.” |

\* ***Note:*** Practices using purpose-built (pharmacy-, biologic-, and laboratory-grade) and commercial-grade storage units may need to transport vaccines to an alternate location sooner than **2 hours** as temperatures in these units tend to increase faster during power failures.

Section 9: Management Plan for Emergencies (Continued)

**AFTER AN EMERGENCY**

Follow these step-by-step instructions after vaccine-related emergencies in compliance with VFC Program requirements and best practices.

|  |  |
| --- | --- |
| **Step** | **Description** |
| 1. | Verify storage units are functioning properly. |
| 2. | If vaccine storage units are outside the required temperatures ranges, record the time that power was restored and storage unit temperatures (CURRENT, MIN and MAX) on the temperature log. |
| 3. | Once vaccine storage unit temperatures have stabilized, notify the emergency contacts identified on the vaccine management plan’s “Worksheet for Emergency Vaccine Management.” |
| 4. | If vaccines were transported due to an emergency situation:   1. Follow the same transportation procedures and transfer vaccine back to its original storage unit. (Refer to the “Transporting Vaccines” for instructions.) 2. If vaccines were kept at the proper temperature during the power outage, notify supervisor that the vaccines may be used. |
| 5. | If vaccines were maintained at required temperatures:   1. Remove the “DO NOT OPEN” sign from storage unit(s). 2. Notify supervisor that vaccines may be used. |
| 6. | If vaccines were exposed to out-of-range temperatures:   1. Label affected vaccines “Do Not Use.” 2. Document and report the excursion to SHOTS at MyVFCVaccines.org to receive further guidance. (Refer to the ["Reporting Temperature Excursions"](#_Reporting_Temperature_Excursions) for instructions.) |

Section 10: Training Log for Required VFC EZIZ Lessons

List the VFC Vaccine Coordinator assigned to the mobile unit to acknowledge completion of the required EZIZ lessons. All other key practice staff may sign below, or on the VFC “[Vaccine Management Plan](http://eziz.org/assets/docs/IMM-1122.docx)” for the stationary clinic if applicable.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Staff Name** | **Role** | **EZIZ Lesson Completion Dates** | | | |
| **VFC Program Requirements** | **Storing Vaccines** | **Monitoring Storage Unit Temperatures** | **Conducting a Vaccine Inventory**  (Vaccine Coordinator  & Backup) |
|  |  |  |  |  |  |
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**Section 11: Annual Signature Log**

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Sign and date one signature block each year and when you up update practice-specific information. By signing, staff acknowledge they have reviewed and are familiar with this “Mobile Unit Vaccine Management Plan” and all additional VFC Program requirements for mobile units.

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| Provider of Record |  | Signature/Date |  |
| Provider of Record Designee |  | Signature/Date |  |
| Vaccine Coordinator |  | Signature/Date |  |
| Backup Vaccine Coordinator |  | Signature/Date |  |

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| Provider of Record |  | Signature/Date |  |
| Provider of Record Designee |  | Signature/Date |  |
| Vaccine Coordinator |  | Signature/Date |  |
| Backup Vaccine Coordinator |  | Signature/Date |  |

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| Provider of Record |  | Signature/Date |  |
| Provider of Record Designee |  | Signature/Date |  |
| Vaccine Coordinator |  | Signature/Date |  |
| Backup Vaccine Coordinator |  | Signature/Date |  |

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| Provider of Record |  | Signature/Date |  |
| Provider of Record Designee |  | Signature/Date |  |
| Vaccine Coordinator |  | Signature/Date |  |
| Backup Vaccine Coordinator |  | Signature/Date |  |

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| Provider of Record |  | Signature/Date |  |
| Provider of Record Designee |  | Signature/Date |  |
| Vaccine Coordinator |  | Signature/Date |  |
| Backup Vaccine Coordinator |  | Signature/Date |  |

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