BLAST FAX 2020-112

TO: Connecticut Licensed Home Health Agencies

FROM: Commissioner Deidre S. Gifford, MD, MPH

CC: Deputy Commissioner Heather Aaron, MPH, LNHA
Adelita Orefice, MPM, JD, CHC, Senior Advisor to the Commissioner
Barbara Cass, RN., Branch Chief, Healthcare Quality and Safety Branch
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DATE: December 1, 2020

RE: Survey on Mass Vaccination for COVID-19

The state of Connecticut is developing plans for early and ongoing vaccination of the healthcare sector, other critical workforce members, at risk populations and the general public. In alignment with federal guidelines, a workgroup convened by the Department of Public Health (DPH) has developed a list of critical workforce sectors and subgroups that will be considered for Phase 1 (early vaccination) efforts.

You are receiving this correspondence because Home Health Agencies may be eligible for early vaccination. In order to assist DPH in its vaccination planning efforts, we request that you disseminate the following survey to your membership. The survey can be found at:

https://www.surveymonkey.com/r/9Y7LDPW
The information collected in the survey will be used to inform the state’s planning efforts. Organizational entities that respond to this survey will receive additional communications through the DPH Immunizations Program or Office of Public Health Preparedness and Response.

Prior to completing the survey, please review the following COVID-19 vaccination planning assumptions to better inform your response.

Planning assumptions:

(1) There are likely to be three phases to population mass vaccination:

**Phase 1a** – In this phase, vaccine will be targeted to paid and unpaid people serving in healthcare settings who have the potential for direct or indirect exposure to patients or infectious materials and are unable to work from home.

**Phase 1b** - In this phase, vaccine will be targeted to people who play a key role in keeping essential functions of society running and cannot socially distance in the workplace, and people at increased risk for severe COVID-19 illness, including people 65 years of age or older; and

**Phase 2** – In this phase, vaccine will be available to the general public and others who did not get the vaccine during Phase 1a and Phase 1b. A large number of doses are available, and supply is likely to meet demand. In this phase, people should be able to get vaccinated through their primary care physicians or at pharmacies and other locations.

(2) Critical workforce members should be defined as those employees who play a key role in keeping essential functions of your organization running, and who cannot work from home or socially distance in the workplace. All employees of your organization are not likely to fall into this category. When considering your workforce numbers, please keep this definition in mind.

(3) The planning and coordination of workplace health clinics for employee health and safety is often carried out by employers. We recognize that administration of vaccines to your employees are often carried out by hired medical professionals.

(4) The federal government has informed states that vaccine orders will be fulfilled in minimum quantities of 100 doses, or 1,000 doses. If you are not directly vaccinating your own workforce (many major employers outside of healthcare do not), then you may be directed to an area clinician who is a mass vaccinator. This is likely if you are a small employer.

(5) Two doses of COVID-19 vaccine, separated by ≥21 or ≥28 days will be needed for some vaccine candidates; both doses will need to be with the same product.
(6) COVID-19 vaccine providers must sign a Federal COVID-19 vaccination agreement and enroll with the DPH Immunization Program to receive vaccine.

(7) Enrolled vaccination providers will order and receive COVID-19 vaccine from the DPH Immunization Program. Vaccine will not be available for purchase during phases 1 and 2.

(8) COVID-19 vaccine and ancillary supplies (including needles and syringes for vaccine reconstitution and administration and limited masks and face shields) will be distributed at no cost to enrolled COVID-19 vaccination providers.

(9) Insurance reimbursement for vaccine and administration costs are under consideration.

Given these planning assumptions, please ask your membership to complete the attached survey to the best of their knowledge. If you have additional questions, please contact (860) 936-6465 or via email (virginia.rzesutock@ct.gov). We request that you collect and submit the results of this survey by December 8, 2020.

Thank you for your participation in the state’s COVID-19 mass vaccination efforts.