Maryland Vaccines for Children Program
VACCINE MANAGEMENT PLAN

Site: _____ VFC#: _____

Date of this Management Plan:_____/_____/_____(please update annually)

This document identifies the key elements of vaccine storage and handling as well as steps to follow when your refrigerator or freezer malfunctions due to mechanical failure or natural disaster.

Primary Vaccine Coordinator and Back-up:

	NAME	TITLE	CELL PHONE
Primary			
Back-up			

I. PRIMARY VACCINE COORDINATOR

The Primary Vaccine Coordinator is responsible for all vaccine management activities including the completion of the required VFC Program trainings. Below is a list of essential responsibilities related to the receiving and maintaining of vaccines

- Overseeing proper receipt and storage of vaccine deliveries
- Ensures acceptable temperature ranges have been maintained.
- Organizing vaccines within storage units
- Setting up temperature monitoring devices
- Reading and recording storage unit temperatures a minimum of 2 times each workday
- Reading and recording minimum/maximum temperatures from a digital data logger 1 time each workday, preferably each morning
- Downloading DDL temperature data 1 time a week (Monday)
- Rotating stock at least weekly so vaccines with the earliest expiration dates are used first
- Removing expired vaccine from storage units
- Responding to out-of-range temperatures (temperature excursion)
- Maintaining all documentation, such as inventory and temperature logs for 3 years

BACK-UP VACCINE COORDINATOR:

- Meet responsibilities described above when the primary Vaccine Coordinator is not available.
- Complete required VFC Program trainings.

II. VACCINE SHIPPING (RECEIVING AND TRANSPORT)

a. Receiving: Ensure that vaccines are stored **IMMEDIATELY** after arrival. Compare the vaccine received with the vaccine invoice. Alert the VFC Contact Center if the vaccine is warm, the temperature indicator in the box has been activated or the number of doses is different than what is on the invoice.

b. Transport: If you ever have to move vaccines, you must pack them in an appropriate Stryofoam or other vaccine cooler. Place vaccines in the bottom of the cooler. Place a thermometer in with the vaccine. Layer insulation (bubble wrap, Styrofoam or other) over the vaccines, then place frozen ice packs on top of the insulation. Call the VFC Contact Center for prior approval before moving vaccines.

III. VACCINE STORAGE AND HANDLING

a. Place "Do-Not-Unplug" Signs on the Refrigerator, circuit breaker and on the electrical outlet.

b. **Ensure that vaccines with the most current expiration dates are used first** and are organized in front of vaccines with longer expiration dates. Check and rotate your stock weekly.

c. **Check and record your refrigerator and freezer temperature at least <u>twice</u> daily**. Refrigerator temperatures should be between 36^{O} F. – 46^{O}. Freezer temperature must be 5^{O} F or lower.

d. Use current and valid certified calibrated Digital Data Loggers (DDL) to review temperatures.

- Continuous temperature monitoring with the capacity to record and routinely download data;
- Active temperature display that can be easily read from the outside of the unit;
- The device must be able to store a minimum of 4,000 readings;
- DDL has a biosafe glycol-encased probe placed in the center of the storage unit;
- The practice has a minimum of one back-up DDL which meets VFC Program requirements for use when primary data loggers fail or are being re-calibrated.

e. Providers are required to assess and record minimum and maximum temperatures at the start of each clinic day from the DDL.

The minimum and maximum temperatures for the last 24 hours are reviewed and recorded each morning and then reset. If your DDL automatically resets at 12 AM, then you will need to manually review the previous 24 hours for min/max temperatures.

f. **Never store vaccines on the doors of a refrigerator or in the bottom bins.** Keep vaccines as much as possible in the middle of the unit away from walls, floors, and other vaccines.

g. Organize vaccines based on type.

h. Do not keep food or drinks in the same unit with vaccines.

i. **Keep ice packs in the freezer and defrosted ice packs or water bottle in the refrigerator**. In the event of a power outage this will prevent the temperature from rising too quickly in the unit.

j. **Do not draw up doses of vaccine until you are ready to administer it.** Check VFC eligibility prior to drawing up vaccine. Some vaccines need to be reconstituted; letting the reconstituted vaccine sit around may affect the solution. Other vaccines must be administered fairly soon after reconstitution.

k. **Store VFC supplied vaccines separately from private purchase vaccines** and label accordingly.

IV. VACCINE EMERGENCY RELOCATION PLAN

a. Identify another practice, hospital or other location to move vaccine to in times of disaster. One back-up location is mandatory and two locations are recommended. Complete the information below:

PRACTICE NAME	TELEPHONE	PRIMARY AND BACKUP CONTACT	SECONDARY TELEPHONE

b. Preparations for Power Outages

i. The Vaccine Contact person(s) should track weather conditions. Make pre-arrangements with the emergency site identified above to store your vaccine there when weather predictions call for severe inclement conditions (tornadoes, hurricanes, ice, snow, lightning and windstorms, etc.) or when your vaccine storage equipment cannot be fixed or the power cannot be restored within four hours.

ii. Before moving your vaccine, call the location to notify them of the situation and the need to store vaccine at their location.

iii. Conduct an inventory before you transport the vaccine and after the vaccine is returned to your practice.

c. In the event of a power outage and/or temperature excursion contact the vaccine manufacturer to discuss the viability of the vaccine for additional guidance. Maryland VFC contact center must also be notified of the temperature excursion.

V. VACCINE ORDERING

a. Inventory Submission

i. The Maryland VFC Program requires that providers submit a vaccine inventory once every two months.

ii. The inventory is subtracted from the provider's vaccine allowance and the difference is sent to the provider as the routine bi-monthly vaccine shipment.

iii. Inventories should be submitted when vaccine supply is LOW, NOT OUT.

VI. EXPIRED OR WASTED VACCINES

a. Every effort should be made to prevent vaccines from expiring.

b. Returning Expired or Wasted Vaccine

i. Expired and wasted vaccine must be accounted for and returned to the VFC program.

ii. Vaccine loss requires a manufacture report regarding the viability of the vaccine. A copy of the manufacturers report must be faxed with the VFC Return Form.

iii. Complete Vaccine Return Form and fax to (410)333-5893. A return label and return receipt will be e-mailed. A copy of the return receipt must be included in the package being returned. Attach the return label to the package and give the container to UPS the next time they come by your office.

VII. INVENTORY CONTROL

a. Compare VFC vaccine inventory to scheduled appointments.

b. Accurate reporting of VFC inventory on hand is very important to ensure proper amount of doses are shipped

i. Maryland VFC has a "dose replacement" program

ii. Routine vaccine shipments take 10 days to 2 weeks from inventory submission

c. Vaccines should be stored under proper storage conditions at ALL TIMES with certified, calibrated thermometers

i. Required to have a back-up certified, calibrated thermometer

d. Rotate vaccine stock based on expiration date.

VIII. STAFF TRAINING

a. VFC providers must complete annual training before November 30.

b. Training must be complete in order to re-enroll for VFC next year.

c. Maryland VFC strongly recommends that BOTH the Responsible Medical Provider and VFC Vaccine Supply Contact complete educational training

d. Go to www.marylandvfc.org to register and complete training

V. SIGNATURE OF PREPARER
(INDIVIDUAL RESPONSIBLE FOR UPDATING VFC MANAGEMENT PLAN)

_____

Name

_____ _____

Signature **Date**