The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Department of Public Health

Bureau of Infectious Disease and Laboratory Sciences

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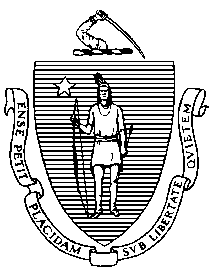
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**Massachusetts COVID Vaccine Program (MCVP) for Residential Congregate Care and Shelter Programs**

**Frequently Asked Questions**

**January 11, 2021**

This guidance answers commonly asked questions we have received from Residential Congregate Care and Shelter programs to support COVID-19 vaccine clinics for their staff and residents. Topics covered in this guidance include:

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Vaccine providers can also refer to [www.mass.gov/CovidVaccineProviders](http://www.mass.gov/CovidVaccineProviders) for additional information, including detailed [Guidance on COVID-19 Vaccine Management and Administration for Healthcare Providers and Organizations](https://www.mass.gov/info-details/massachusetts-covid-19-vaccine-program-mcvp-guidance-for-healthcare-providers-and#guidance-on-covid-19-vaccine-management-and-administration-for-healthcare-providers-&-organizations-) and and [frequently asked questions from vaccine providers](https://www.mass.gov/info-details/covid-19-vaccine-frequently-asked-questions-vaccine-providers).

# Timing and Populations to be Vaccinated

**When can we begin COVID-19 vaccination?**

Based upon current expectations of vaccine availability, vaccination clinics for residential congregate care and shelter providers can start the week of January 18, 2021.

### **What programs are eligible to be vaccinated?**

This guidance document is applicable to organizations that operate residential congregate care programs, which includes but is not limited to: group homes, residential treatment programs, community-based acute residential treatment programs, and clinical stabilization service programs funded, operated, licensed, and/or regulated by the Department of Early Education and Care (EEC), the Department of Children and Families (DCF), the Department of Youth Services (DYS), the Department of Mental Health (DMH), the Department of Public Health (DPH), the Department of Developmental Services (DDS), the Department of Veterans' Services (DVS), the Massachusetts Commission for the Blind (MCB), and the Massachusetts Rehabilitation Commission (MRC. Additionally, this guidance applies to emergency shelter programs, including individual and family congregate shelters funded by the Department of Housing and Community Development (DHCD), domestic violence and sexual assault shelters, Veterans’ shelters, and approved private special education schools which offer residential services and are approved by the Department of Elementary and Secondary Education.

**What staff are eligible to be vaccinated?**

Staff include paid or unpaid persons who have the potential for direct or indirect exposure to people with COVID-19 or infections materials.  They do not have to be a clinician to fall into the category of personnel in Phase I. DPH encourages sites to consider all employees and volunteers who may have exposure to people or materials infected with COVID-19 when prioritizing for vaccination.  This includes visiting nurses.

**Will staff families be included in the vaccination?**

No. Vaccines will be available to general public in Phase III. For more details on when you can get vaccinated please visit <https://www.mass.gov/info-details/when-can-i-get-the-covid-19-vaccine>.

**May we vaccinate the vaccinators and administrative staff who will support clinic operations?**

Yes, clinical staff who will be administering vaccine and support staff who will be vaccine patient-facing may be vaccinated. Staff who are assigned to positions in which they will not have direct contact with individuals receiving vaccine are not eligible. Please note that after vaccine patient -facing staff receive the initial dose of vaccine, they must continue to use appropriate personal protective equipment (PPE) at all times and practice hand hygiene and other health precautions.

**Is vaccination mandatory for residents and staff?**

No, the Massachusetts Vaccination Program is a voluntary program.

# Vaccine Deployment Options

**What are my options for vaccinating the staff and residents of my program?**

***Option 1: Program “Self-Administration”***

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# *Administrative Considerations*

**What requirements must the organization meet in order to offer a COVID-19 vaccination program?**

1. All organizations or providers receiving COVID-19 vaccine must execute the [Massachusetts COVID-19 Vaccine Program (MCVP) Agreement](https://www.mass.gov/info-details/massachusetts-covid-19-vaccine-program-mcvp-guidance-for-healthcare-providers-and). Among other things, this Agreement obligates providers to administer COVID-19 vaccine in accordance with the terms of the United States Food and Drug Administration (FDA) Emergency Use Authorization (EUA) applicable to the vaccine that will be administered. The MCVP Agreement is emailed as a link to contacts associated with the Massachusetts Immunization Information System (MIIS) and State Vaccine Program.
2. Sites enrolling in the MCVP must already be registered with the MIIS. Pursuant to G.L. c. 111 s. 24M and 105 CMR 222, licensed healthcare providers who administer immunizations are required to report certain information to the Department’s MIIS. COVID-19 vaccine providers must meet this reporting requirement by registering with the MIIS, which will include executing the MIIS Site and User Agreements.
3. You must have the capacity to fully organize and staff the clinics to meet the vaccination needs of at least 200 individuals to qualify. This includes local capacity to fully organize and staff the clinics, to safely store vaccine, and to bill insurance for administration-related costs if other local financial resources are not available. At this time, no funding for administration related costs is available through the federal government or from the state. The Commonwealth will allocate COVID-19 vaccine and selected ancillary supplies, including syringes and needles, to approved sites, subject to available supply, but each location must be able to provide its own refrigeration/freezer capacity, PPE, clinical and non-clinical staffing, and any other resources needed to support clinic operations.

You must have the ability to schedule vaccination appointments and ensure that individuals will receive their second dose of vaccine within the prescribed time frame.

### **Is there a cost to providers to receive and administer the vaccine?**

There is no cost for the vaccine or ancillary kits. The U.S. Centers for Medicare and Medicaid Services (CMS) has approved reimbursement for the administration of the vaccine. While vaccine providers may not bill for the COVID-19 vaccine itself, many vaccine providers in the state have contracted with outside entities, such as Commonwealth Medicine, to assist with insurance billing for the costs of administering the vaccine.  The Department is not a party to these agreements, but if your site has such an agreement you may wish to familiarize yourself with its terms.

### **Is there a cost to vaccine recipients?**

Providers may seek appropriate reimbursement from a program or insurance plan that covers COVID-19 Vaccine administration fees for the vaccine recipient. Providers may not seek co-payment, reimbursement or any form of cost sharing, including through balance billing, from the vaccine recipient.

**Is written consent needed for COVID-19 vaccination?**

Informed consent must be obtained prior to the administration of a vaccine. DPH does not require a written informed consent form from vaccine recipients. Providers should follow existing program practices regarding informed consent.

**What information do we need to provide to individuals about the US FDA Emergency Use Authorization (EUA) of the Moderna COVID-19 Vaccine?**

The Department plans to make Moderna’s COVID-19 vaccine available to sites holding vaccination clinics for their residents and staff. You must make the recipient fact sheet available to each individual receiving the vaccine.

The Moderna COVID-19 Vaccine Letter of Authorization (Letter) which describes the terms of the EUA, Fact Sheet for Healthcare Providers Administering Vaccine (provider fact sheet), and Fact Sheet for Recipients and Care Givers (recipient fact sheet)  in addition to other related documents and translations of the fact sheet are available here: [Moderna COVID-19 Vaccine | FDA](https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/moderna-covid-19-vaccine).

It is important to review the documents from the linked FDA site so that you have access to any updates or amendments.

# *Site Considerations*

What capacity does our site need to safely carry out COVID-19 vaccination best practices?

* Properly screen patients before and during the visit. Screening questions can be found on the [CDC website](https://www.cdc.gov/screening/index.html).
* Maintain physical distance (at least 6 feet apart, where possible).
* Limit and monitor facility points of entry and install barriers to limit physical contact with patients at triage.
* Observe respiratory hygiene (surgical facemasks for staff and face coverings for patients over 2 years of age, if tolerated) and cough etiquette.
* Observe hand hygiene (including providing at least 60% alcohol hand sanitizer for patients).
* Monitor individuals for possible adverse reactions. [CDC recommends](https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/anaphylaxis-management.html/) that persons without contraindications to vaccination who receive an mRNA COVID-19 vaccine be observed after vaccination for the following time periods:
  + 30 minutes: Persons with a history of an immediate allergic reaction of any severity to a vaccine or injectable therapy and persons with a history of anaphylaxis due to any cause.
  + 15 minutes: All other persons.
* Perform enhanced surface decontamination. Detailed guidance for cleaning surfaces can found at this CDC site: <https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>​
* Refer to [CDC guidance](https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control.html) to prevent the spread of COVID-19 in health care settings, including outpatient and ambulatory care settings.
* Ensure there is an adequate location to safely store the vaccine. Detailed information on safe storage and handling guidelines can be found [here.](https://www.mass.gov/info-details/covid-19-vaccine-information-for-providers#storage-and-handling-)

**What type of refrigeration will we need?**

The Moderna vaccine can be stored at -15 to -25C for 6 months and at 2-8C for 30 days. DPH strongly [encourages](https://www.mass.gov/doc/guidance-for-healthcare-providers-and-organizations/download?_ga=2.134310836.45034236.1609708509-382839405.1556838379) sites to store their Moderna vaccine frozen. Pharmaceutical and purpose-built refrigerators are a vaccine storage and handling best practice but are not required for the storage of COVID-19 vaccine. Standalone freezers are strong recommended, as the freezer portion of a household combination unit does not reliably maintain temperatures. If that is not possible for your site, please contact the Vaccine Unit at [DPH-Vaccine-Management@massmail.state.ma.us](mailto:DPH-Vaccine-Management@massmail.state.ma.us) for further guidance to ensure maintenance of appropriate temperatures. All storage units must be monitored continuously. The best practice for monitoring temperatures is to use a digital data logger available from DPH.

# *Operational Considerations*

**How should we set up our clinic?**

Please refer to this MCVP guidance document for information on how to plan for a clinic: <https://www.mass.gov/doc/vaccine-administration-guidance/download> for an overview; this CDC [Guidance for Planning Vaccination Clinics Held at Satellite, Temporary, or Off-Site Locations](https://www.cdc.gov/vaccines/hcp/admin/mass-clinic-activities/index.html) should be a foundation for your planning.

Please also note that the [Interim Clinical Considerations for Use of mRNA COVID-19 Vaccine | CDC](https://urldefense.proofpoint.com/v2/url?u=https-3A__www.cdc.gov_vaccines_covid-2D19_info-2Dby-2Dproduct_clinical-2Dconsiderations.html-3FCDC-5FAA-5FrefVal-3Dhttps-253A-252F-252Fwww.cdc.gov-252Fvaccines-252Fcovid-2D19-252Finfo-2Dby-2Dproduct-252Fpfizer-252Fclinical-2Dconsiderations.html&d=DwMF-g&c=lDF7oMaPKXpkYvev9V-fVahWL0QWnGCCAfCDz1Bns_w&r=5Fyw0TWQD8t6X2LVqctYhPS7EpOS33sK8Ph8DVTp2s4&m=Fg8t902t4vfKmQDhTs6eF5QWKm_Cj_jDhPGAlurUY7Q&s=H4Sm1DmuDr2pkqm4UizVLwox6pohj7velV5CIp8Pm5A&e=) also state that for people with a history of any immediate allergic reaction to any other vaccine or injectable therapy, there should be an ability of the person to be vaccinated in a setting where [appropriate medical care](https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/anaphylaxis-management.html) is immediately available for anaphylaxis.

**How do** **sites that are holding COVID-19 vaccination clinics order vaccine?**

In Phase 1 of the Commonwealth’s COVID-19 Vaccine Plan, vaccine allocations will be determined by the MCVP; sites will not place orders. DPH will allocate vaccine to the site based on the availability of vaccine allocated by the federal government to Massachusetts, the information that the site provided in the MCVP Agreement, and information about the number of appointments scheduled. Once sites are able to place orders for vaccine directly, ordering will be done in the MIIS. If you have questions you can reach out to your [agency point of contact](https://www.mass.gov/media/2231691/download).

**How do sites ask for more COVID-19 vaccine?**  
On a weekly basis, all provider sites will receive a link to an MCVP survey. Completing this survey will ensure that DPH understands providers’ vaccine needs, the phase they are currently vaccinating in, as well as other information. Additionally, there is an option for the provider to also request additional doses as part of this survey process.  If you have not received the weekly survey or need additional vaccine before the next survey is issued please email [DPH-Vaccine-Management@massmail.state.ma.us](mailto:DPH-Vaccine-Management@massmail.state.ma.us) and notify your [agency point of contact](https://www.mass.gov/media/2231691/download).

**How will sites that are holding COVID-19 vaccination clinics receive the vaccine?**

The Moderna COVID-19 vaccine will be delivered by UPS or FedEx to the site you have identified to the MCVP enrollment form. Any organization that will be receiving the vaccine either directly from UPS or FedEx or re-distributed through another community must be registered in the MIIS and have completed an MCVP Provider Agreement. In the MCVP Provider Agreement, ensure that you enter an accurate shipping address and shipping hours so that staff are on site to receive the vaccine shipment. We cannot guarantee that you will receive a phone call from the delivery driver when the shipment arrives.

To update your shipping address or hours, contact the Vaccine Unit at [DPH-Vaccine-Management@massmail.state.ma.us](mailto:DPH-Vaccine-Management@massmail.state.ma.us) Include your PIN and the contact email of who will update the Agreement. We will send out a link that will allow you to update the Agreement.

**Will we need a standing order for the COVID-19 vaccination clinics?**

Yes. You will need to obtain a standing order for your program from a medical professional, such as a physician.

* + State law, M.G.L. c. 94C, section 8 (7), requires a licensed provider with prescribing authority to issue an order for administration of a vaccine such as the COVID-19 vaccine.
* Authorized ordering providers include, a: physician, chiropractor, surgeon, podiatrist, osteopath, nurse practitioner, dentist, or physician’s assistant. *See* MGL Ch. 94C; 105 CMR 700.00.
* A standing order is an order issued by a licensed provider, which is not specific to one person, and enables assessment and vaccination of residents without the need for clinician examination or direct order from the attending provider at the time of the interaction.
* The standing order should be specific about which clinics and what dates or periods of time are covered, e.g., “COVID-19 vaccination clinics operated by (name of organization, LBOH, coalition, etc.) from January 4, 2021 through February 28, 2021.”
* Any individual who meets the criteria included in a standing order may receive the vaccine consistent with the terms of the order.
  + A model standing order developed by CDC for the Moderna COVID-19 vaccine can be found [here](https://www.cdc.gov/vaccines/covid-19/info-by-product/moderna/downloads/standing-orders.pdf).
  + Other Emergency Treatment Standing order templates are available from the Immunization Action Coalition:
    - [Medical Management of Vaccine Reactions of Adults in a Community Setting](https://www.immunize.org/catg.d/p3082.pdf)
    - [Medical Management of Vaccine Reactions in Children and Teens in a Community Setting](https://www.immunize.org/catg.d/p3082a.pdf)

# **Do we need to have 200 confirmed appointments to receive vaccine?**

You must have identified at least 200 individuals eligible for vaccination and have the capacity to vaccinate at least 200 individuals, but you do not have to have 200 confirmed appointments to receive vaccine. You may partner with other provider organizations or sites to meet this volume.

**Where will people receive their second dose?**

You must receive your second dose from the same clinic you received your first dose. It is strongly recommended that the appointment for the second dose is made at the time the first dose is administered.

**How will people know which vaccine product they receive and when they need the second dose?**

The vaccine ancillary supply kits will come with vaccine record cards that can be given to the recipients indicating what vaccine they received and that they need a second dose. Vaccine record cards may be reproduced, if necessary. In addition, there are electronic reminder/recall systems in the MIIS that providers could use in addition to their own EHR systems to send reminders to recipients about their second dose. More information about the federal V-safe app, which also includes a reminder recall functionality, can be found at [V-safe After Vaccination Health Checker | CDC](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafe.html). Providers should schedule the 2nd dose at the time the 1st dose is administered.

**What vaccine and ancillary supplies will sites that are holding COVID-19 vaccination clinics receive?**

The COVID-19 vaccination clinics will receive the Moderna COVID-19 vaccine. The Standard COVID-19 Vaccine Adult Ancillary Kit supports administration of 100 doses and includes needles, syringes, alcohol pads, vaccination record cards, needle guide, face shields, and face masks. Additional details about these supplies can be found at [Massachusetts COVID-19 Vaccine Program (MCVP) – Guidance for Healthcare Providers and Organizations | Mass.gov](https://www.mass.gov/info-details/massachusetts-covid-19-vaccine-program-mcvp-guidance-for-healthcare-providers-and#guidance-on-covid-19-vaccine-management-and-administration-for-healthcare-providers-&-organizations-).

**Are we responsible for printing and making available information on V-safe?**

Yes.V-safe is a new voluntary, smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins for COVID-19 vaccine recipients. V-safe allows people to report any side effects after COVID-19 vaccination to CDC in almost real time. It also gives them a convenient reminder to get their second COVID-19 vaccine dose if they need one. Provide the v-safe Information Sheet or QR code to every vaccine recipient and encourage them to enroll and complete the surveys when prompted to do so. For more information, or to register for v-safe, visit: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafe.html>

# *Staffing Considerations*

**Who can administer vaccine?**

This [COVID-19 Vaccinators chart](https://www.mass.gov/doc/covid-19-vaccinators/download) lists the categories of health professionals who can possess and administer COVID-19 vaccines. EMTs and paramedics supporting vaccine clinics must be employed by a licensed ambulance service and be trained and operating with the approval of their Affiliate Hospital Medical Director. Please review the [Office of Emergency Medical Services advisories and protocols](https://www.mass.gov/lists/advisories-memos-and-notices-for-oems#flu-and-covid-19-vaccination-by-ems-personnel-under-commissioner%E2%80%99s-order-12/18/2020-).

**What qualifications do individuals need to operate the program and administer the vaccine?**

All individuals who receive vaccine deliveries, handle, or administer vaccines must be trained in vaccine related practices and procedures. They should be able to ensure the safety and efficacy of vaccines through proper:

* Benefit and risk communication
* Vaccine storage/handling and administration
* Timing and spacing of vaccine doses
* Screening for contraindications and precautions
* Management of adverse reactions
* Being able to access and use emergency equipment
* Current CPR certification
* Reporting to VAERS (and any additional COVID specific databases)
* Documentation

If you will be using volunteer vaccinators for your clinics, make sure that everyone is up-to-date with their vaccinating skills. You can use the checklist below and, if needed, have the volunteers watch the training video.

* [CDC training video on vaccine administration](https://www2.cdc.gov/vaccines/ed/vaxadmin/va/ce.asp) (with CEUs)
* [Skills Checklist for Vaccine Administration](https://www.immunize.org/catg.d/p7010.pdf)

**Do sites that are holding COVID-19 vaccination clinics always have to have one Vaccine Coordinator and one Backup Vaccine Coordinator on site for the duration of a clinic?**

Yes, at least one of these individuals should be on site at all times during the clinic.

**Is there a training for vaccinators?**

The primary and back-up vaccine coordinators at each site and providers administering COVID-19 vaccine are encouraged to complete the Introduction to COVID-19 Vaccine Storage & Handling and Administration Training, which has a focus on the Pfizer-BioNTech COVID-19 vaccine. Recording and slides from the training are below:

* [Access the recorded training](https://register.gotowebinar.com/recording/7634552857599743233)
* [COVID-19 Storage and Handling Training PDF Slides](https://www.mass.gov/doc/covid-19-storage-and-handling-training/download) | [(Accessible)](https://www.mass.gov/doc/covid-19-storage-and-handling-training-accessible/download)
* [COVID-19 Vaccine Administration Training PDF Slides](https://www.mass.gov/doc/covid-19-vaccine-administration-training/download) | [(Accessible)](https://www.mass.gov/doc/covid-19-vaccine-administration-training-accessible/download)

Vaccine coordinators and providers are also strongly encouraged to complete the COVID-19 Vaccine Training: The Moderna Supplement. This training is designed as supplemental training to the COVID-19 Vaccine Storage & Handling and Administration training listed above. It includes updates and is designed for health care providers, vaccine coordinators, and all health care personnel who handle and/or administer vaccines. Recording and slides from the training are below:

* [Access the recorded training](https://register.gotowebinar.com/recording/4012809934582182926)
* [COVID-19 Vaccine Training: The Moderna Supplement (PDF Slides)](http://www.maventrainingsite.com/maven-help/pdf/December%2031_COVID%2019%20Vaccine%20Training%20-%20The%20Moderna%20Supplement.pdf)

**What personal protective equipment (PPE) is needed?**

Each site must provide its own PPE for clinic sites and ensure an adequate supply including:

* Surgical Masks
  + Required: All health care providers (N95 masks not recommended)
* Eye protection
  + Required: Areas of moderate/substantial community transmission or if ultra-cold/dry ice is being handled
  + Optional: Areas of minimal/no community transmission
* Gloves
  + Required: Latex or similar gloves needed to administer intramuscular or subcutaneous vaccine
  + Required: If ultra-cold or dry ice are being handled, special insulating gloves are needed

# *Clinical Considerations*

**What are the potential side effects of the vaccine?**

Generally, based on current information, systemic signs and symptoms, such as fever, fatigue, headache, chills, myalgia, and arthralgia, can occur following COVID-19 vaccination. Preliminary data from mRNA COVID-19 vaccine trials indicate that most systemic post-vaccination signs and symptoms are mild to moderate in severity, occur within the first three days of vaccination (the day of vaccination and following two days, with most occurring the day after vaccination), resolve within 1-2 days of onset, and are more frequent and severe following the second dose and among younger persons compared to those who are older (>55 years). Cough, shortness of breath, rhinorrhea, sore throat, or loss of taste or smell are **not** consistent with post-vaccination symptoms, and instead may be symptoms of SARS-CoV-2 or another infection.

Staff and residents should be provided fact sheets, which are available in multiple languages from the FDA; the EUA factsheets can be found at [Pfizer-BioNTech COVID-19 Vaccine EUA Fact Sheet for Recipients and Caregivers (fda.gov)](https://www.fda.gov/media/144414/download) and [Moderna COVID-19 Vaccine EUA Fact Sheet for Recipients and Caregivers (fda.gov)](https://www.fda.gov/media/144638/download).

**Should someone who is COVID-positive receive the vaccine?**

No, vaccination of persons with known current SARS-CoV-2 infection should be deferred until the person has recovered from the acute illness (if the person had symptoms) and [criteria](https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html) have been met for them to discontinue isolation. While there is otherwise no recommended minimum interval between infection and vaccination, [current evidence](https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html) suggests that reinfection is uncommon in the 90 days after initial infection. Thus, persons with documented acute SARS-CoV-2 infection in the preceding 90 days may delay vaccination until near the end of this period, if desired.

**Should people who have had COVID-19 be vaccinated?**

Yes, people who have previously had COVID-19 should be vaccinated. Though it is uncommon to be re-infected in the [90 days after initial infection](https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html), people may choose to delay vaccination until the end of this period.

**Can the vaccine be given to people who are pregnant?**

* There are no data on the safety of COVID-19 vaccines in people who are pregnant. Animal developmental and reproductive toxicity (DART) studies are ongoing. Studies in humans are also ongoing and more are planned.
* If a person is part of a group (e.g., healthcare personnel) who is recommended to receive a COVID-19 vaccine and is pregnant, that person may choose to be vaccinated and may wish to discuss with their healthcare provider.
* mRNA vaccines are not live vaccines. They are degraded quickly by normal cellular processes and don’t enter the nucleus of the cell.
* COVID-19 infection during pregnancy can result in an increased risk of severe illness (ICU admission, mechanical ventilation and death) and might result in an increased risk of adverse pregnancy outcomes, such as preterm birth.
* Consider the following when discussing COVID-19 vaccination with people who are pregnant:
* Level of COVID-19 community transmission, (risk of acquisition)
* Personal risk of contracting COVID-19, (by occupation or other activities)
* The risks of COVID-19 to the person who is pregnant and potential risks to the fetus
* The efficacy of the vaccine
* The known side effects of the vaccine
* The lack of data about the vaccine during pregnancy
* Pregnant people who experience fever following vaccination should be counseled to take acetaminophen as fever has been associated with adverse pregnancy outcomes.
* Routine testing for pregnancy prior to receipt of a COVID-19 vaccine is not recommended.

# ***Option 2: Leveraging an Existing Pharmacy or other Health Care Partnership***

**What if a residential congregate care or shelter program does not have an established relationship with a health care facility for the vaccinations?**

Additional avenues for local vaccine clinics and/or mobile vaccine distribution are actively being explored to support providers whose needs are not met with the options above. Additional information will be shared as it is available. Vaccination locations will be posted on the mass.gov/covid-19-vaccine-in-massachusetts website which will be updated regularly.

Please contact your [agency point of contact](https://www.mass.gov/media/2231691/download) for support. **Your agency point of contact will work with you to find a partner for vaccination during phase 1.**

**Will those unable to find a partner match still be included in Phase I - if not, what is the timeline?**

The congregate care and shelter vaccination roll-out begins January 18 and will continue over several weeks. Your [agency point of contact](https://www.mass.gov/media/2231691/download) will work with you to find a partner for vaccination during Phase I and for ongoing COVID-19 vaccination needs.

**If I am part of the FPPP, will CVS and Walgreens administer the vaccine or simply drop off doses?**

CVS and Walgreens, as part of the FPPP, will bring vaccine to your site and administer the vaccine. You will need to coordinate with the vaccinating organization to prepare for your clinic. This may include communicating with your staff and residents, scheduling, gaining consent, filling out paperwork, and setting up space appropriately to support a safe vaccine clinic.

**Are pharmacies required to respond to requests from local programs or do they have discretion to respond to requests?**

Pharmacies are responding to requests as their own workflow and capacity allows. If you have difficulty connecting with a pharmacy provider, please reach out to your [agency point of contact](https://www.mass.gov/media/2231691/download).

# ***Option 3: Mass Vaccination Site***

***Identification and Documentation***

**What identification is needed for staff and residents receiving vaccination at a mass vaccination site, provider site, or pharmacy site?**

Organizations should provide staff and residents with a letter verifying that the individual meets Phase 1 Residential Congregate Care and Shelter eligibility guidelines as specified by the Commonwealth of Massachusetts. The eligibility letters should:

Be on organizational letterhead

Identify the individual by name

Identify vaccine locations and direct the individual to additional information on the mass.gov/covid-19-vaccine-in-massachusetts website

Remind staff to bring employee identification or state or federal issued identification to the site

**How will congregate programs and shelters transport guests to an off-site location to obtain the vaccine?**

More information on transportation will be available in weeks to come on transportation options. Sites are encouraged to connect with partners in the area to coordinate transportation strategies for clients. If you need help organizing transportation, please reach out to your [agency point of contact](https://www.mass.gov/media/2231691/download) for support.

**Will vaccine recipients need to pay to receive the vaccine at Mass Vaccination Sites?**

No. [The vaccine is being provided free of charge](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/faq.html#planning) to all individuals by the federal government.  Insurance companies are also committed to not charging any out-of-pocket fees or co-payments related to COVID-19 vaccine administration, and all health care provider sites that receive COVID-19 vaccine must agree to not charge patients any out-of-pocket fees or deny anyone vaccination services. Individuals may need to present insurance information as administrative costs may be billed to insurers.

**Will new staff or residents be prioritized for the vaccine, if they are hired or enter post the date that the shelter is vaccinated?**

Yes. Additional coordination may be required if clients are not available for clinics scheduled at your site. Alternatively, these individuals may use a mass vaccination site at any time; provided, that you have given the staff or resident a letter verifying that the individual meets Phase 1 Residential Congregate Care and Shelter eligibility guidelines.