1. Selecting a site location

Consider the following requirements when selecting a site location for your outdoor walk-through flu clinic.

Clinic Flow	Proximity to regular clinic (closer is preferred)	
	Space for parking	
	Space for vehicle traffic flow into/out of location	
	Ability to accommodate weather:	
	Shelter for the immunization team	
	Shelter for patients while waiting	
	Space to enable one-way foot traffic:	
	Separate entry and exit points	
	Space for clinic functions:	
	Screening and registration	
	Vaccine storage and preparation	
	Vaccination administration	
	Waiting areas for post-vaccination observation	
	Emergency care	
	Easy access to refrigerators/insulated containers for vaccine storage	
Utilities	Adequate lighting	
	Internet access	
	Power outlets (for portable vaccine refrigerators, etc.)	
Accessibility	Public spaces must comply with the AODA standards for Accessible Public Spaces.	
	Accessible paths and walkways	
	Accessible entry/exit	
	Accessible restrooms	
	Accessible waiting areas	
	Proximity to population centers and mass transit	

2. Setting up the	clinic
Flow and layout	 Designate and set up spaces for staff: Vaccine preparation area Vaccination stations (at least 6 feet apart, designated stations for each vaccine type offered, if applicable) Privacy screens (for at least one of the stations) Table and two chairs (per station) Area for evaluation/treatment of patients with adverse events or other medical needs Secure area for staff to leave personal items Area for administrative work and documentation Put up signage: Screening signage at entrance Signs, banners, and floor markers to guide traffic
Data management	Develop a data collection and management strategy based on site capability (manual processes must be planned for temporary sites lacking specific infrastructure). Consider: Access to vaccination history (if applicable) Reporting to EMR Reporting to patient's primary care provider

2. Setting up the	clinic (continued)	
Supplies	Alcohol-based hand sanitizer (at least 70% alcohol) Hand soap Cleaning supplies PPE for staff (masks, eye protection, gloves) Masks for patients who come without Thermometers (if performing temperature checks at screening station) Tissues Adhesive bandages or tape/cotton balls for injection site Screening and documentation forms Vaccines and diluents (if needed) Prep pads Sterile alcohol wipes (individually packaged) Syringes Needles (varying lengths appropriate for the expected patient population) Weights to keep wastebaskets, garbage bags, and empty sharps containers from blowing away.	Sharps containers (closable, puncture- resistant, and leakproof) Emergency medical kit with epinephrine with signed medical orders First aid kit Disposable table covers that can be changed if soiled Technology (if using): Computers / tablets Printers 2D barcode readers Internet access or hotspots Outlet strips (multi-plug) and extension cords Office supplies (including pens, printer paper, etc.) Wastebaskets Temporary shelters Privacy screens (for at least one) One table and two chairs per vaccination station

3. Operating the clinic	
Scheduling and booking appointments	 Stagger appointment times to allow for the immunization encounter and post-vaccination observation Screen patients over the phone to ensure they are suitable candidates for the mobile clinic. Those NOT suitable include: Patients with previous history of anaphylaxis or allergy to influenza vaccination and Patients with an unknown history of anaphylaxis (receiving the influenza vaccine for the first time) Provide patients with pre-visit instructions: Do not arrive in advance of appointment Review criteria for shortened post-vaccination observation period (provide criteria) Wear loose-fitting clothes to allow easy access and expose entire upper arm (or leg for infants)
Staffing	Schedule extra clinic staff and volunteers for: Monitoring traffic flow and waiting areas Screening Registration and consent processes Cleaning
Cleaning	Clean surfaces and equipment (including the rolling carts) between patients, and at the beginning and end of every shift. Follow COVID-19 environmental cleaning protocols for clinic settings (<u>BCCDC, 2020</u>)
Screening	Implement passive screening procedures at entry with signage Implement active screening procedures at entry. See Ontario COVID-19 Screening Document for screening checklist. (MOH, June 11, 2020) Divert screen-positive patients to seek testing at an assessment centre or emergency room as appropriate: Ask the patient to perform hand hygiene Provide the patient with a medical mask Make efforts to ensure the patient has a method of travel that maintains physical distancing

3. Operating the clinic (continued)

Vaccine Administration Do not prepare large quantities of vaccine in advance (there may be low attendance) Use extra caution when handling sharps

4. Maintaining the cold chain

Adapted from Vaccine Storage and Handling Guidelines (Government of Ontario, 2018)

The "cold chain" includes all materials, equipment and procedures used to maintain vaccines in the required temperature range of +2°C to +8°C from the time of manufacture until the vaccines are administered to individuals. Most vaccines are considered to be damaged at 0°C. The loss of vaccine effectiveness due to exposures to adverse conditions is cumulative, permanent and irreversible.

Setup	
Staff	Designate one person as the lead to monitor vaccine storage and handling practices. Designate one person as back-up to monitor vaccine storage and handling practices. Ensure designated staff understand rationale for correct vaccine storage and handling.
Equipment	Temperature Log Book to track: Day Time of each temperature check Current temperature Maximum temperature Minimum temperature Name of staff member performing temperature check Refrigerator: Purpose-built refrigerators are recommended for storing large inventories of vaccines. They ensure maintenance of +2°C to +8°C internal temperature; ongoing air circulation ensures; evaporator to prevent vaccine from freezing; temperature recovery system. Domestic or bar refrigerators are not recommended for vaccine storage. It is complicated to manage their temperatures, which makes them unsuitable for vaccine storage unless excellent vaccine storage and handling practices are followed. If using a domestic/bar fridge: contact your public health unit for assistance on required modifications prior to vaccine storage in order to ensure that vaccines will be safely stored. Temperature monitoring device for each vaccine refrigerator and insulated container. Insulated containers for temporary storage in case of power outage.
Refrigerator setup	Stabilize the temperature of the vaccine refrigerator before stocking vaccine. Place the maximum-minimum thermometer probe on the middle refrigerator shelf inside an empty vaccine box. Place the refrigerator out of direct sunlight. Mark the plug clearly so the refrigerator is not unplugged or turned off accidentally. Keep icepacks/gel packs in your freezer
Receiving and returning vaccines	When you receive your order, check that you received your full order and ensure that the order matches the packing slip. Place vaccines in the refrigerator immediately. Store vaccines in their original packaging. DO NOT store vaccines in the door of the refrigerator. If you did not receive everything you ordered, or your order does not match the packing slip, notify your vaccine supply source (i.e., public health units or OGPMSS) immediately. Always return expired or spoiled vaccine to your vaccine supply source for disposal. The Ministry may be reimbursed by manufacturers for returned vaccines.

Cold chain manag	ement
Daily tasks	Ensure your refrigerator is in good working order. Aim to maintain vaccine refrigerator temperature at +5°C, as this gives a greater leeway for protection from temperature fluctuation. Keep your refrigerator door openings to a minimum. Check temperatures. Temperature monitoring and recording devices do not guarantee safety of vaccines and are not to be considered a substitute for the manual recording of minimum, maximum and current temperatures twice daily. If using refrigerators, check and record the maximum, minimum and current temperatures twice daily in the Temperature Log Book at the beginning and end of each day. If using insulated containers as temporary storage, see "Management of insulated containers" below for temperature check schedule. Reset maximum-minimum thermometer after recording the temperature readings. When using a data logger, the minimum, maximum and current temperatures still need to be recorded manually as a timely alert to any breach in the cold chain. Do not store food, beverages or medical/laboratory specimens in the vaccine refrigerator. Fill the lower drawers and the door with water bottles. Do not overstock your refrigerator with vaccines. Rotate stock so vaccines with the shortest expiry date are used first. If vaccines have been exposed to temperatures below +2°C or above +8°C, contact your public health unit immediately.
Power outage	Always have an alternative means of vaccine storage available. In the Temperature Log Book, document the time and the maximum, minimum and current temperature inside of the non-functioning refrigerator. Do not allow the vaccine to remain in a non-functioning unit for an extended period of time. Record the time and refrigerator temperature when the electricity supply is restored, and again when the thermometer reading is within +2°C to +8°C. Call your public health unit immediately to report any exposures to temperatures below +2°C and/or above +8°C. Segregate the exposed vaccines in the refrigerator by placing these vaccines in a labelled container (or bag), marked with the date and time and "DO NOT USE." Never use or discard the vaccine until your public health unit has assessed the situation.

Temporary storage: insulated containers

Properly packed insulated containers (coolers) can maintain the required temperature for 3-4 hours, subject to environmental and physical conditions. Use insulated containers for:

- Transporting vaccine
- Temporary storage of vaccine (during clinics or when cleaning the refrigerator)
- Emergency storage (power outage)

Upon arrival back to office	Management of insulated containers	Experiment to find the correct combination of icepack(s) and/or gel pack(s) to ensure each insulated container is able to maintain the required temperatures. See below for instructions on how to properly pack an insulated container. Do not place insulated containers with vaccines in the trunk of a car. Visually inspect the temperature every time the insulated container is opened. Record temperature in the insulated container: Before leaving office After 1 hour of travel Upon arrival at clinic Every hour during the session Upon completion of the session at the clinic Upon arrival back to office
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Packing insulated containers

• Ice/gel packs must be correctly conditioned before use. See Preparation instructions below. The risk of freezing vaccines increases if the icepacks/gel packs are not correctly conditioned.

- Incorrect use of gel packs is riskier than icepacks because gel packs remain colder than 0°C for longer.
- Freezing episodes happen very easily in all coolers, usually in the first 2 hours after packing.

ltem	Preparation	Use Instructions
Insulated hard sided container	Pre-chill insulated container until a temperature between +2°C to +8°C is reached prior to placing vaccines into the container. Use frozen gel packs or place the container in a refrigerator.	Check container for damage. Ensure container can close fully and maintain its seal.
Vaccine and temperature monitoring device	Check the accuracy of devices once annually and change the battery every 6 months.	Position maximum-minimum thermometer sensor inside vaccine box.
Inner flexible ice blanket	Condition in refrigerator at +2°C to +8°C	Wrap inner flexible ice blanket around vaccines.
Gel packs	Condition gel packs in freezer to appropriate temperature for season: • Winter transport: +2°C to +8°C. • Summer transport: -10°C to -20°C.	Place gel packs on top of outer flexible ice blanket. Additional icepacks may be required depending on cold-life needed for the length of transport.
Outer flexible ice blanket	Condition in refrigerator at +2°C to +8°C	Wrap outer flexible ice blanket around vaccines and inner flexible ice blanket.
Additional insulating material	N/A	Bubble wrap, Styrofoam chips, crumpled or shredded newspaper should be placed inside (bottom, top and sides) the insulated container to allow for cool air circulation.



Outdoor Walk-Through Clinic is adapted from: <u>Guidance on seasonal influenza and antiviral drug use in Canada for the 2020-2021 influenza season in the context of COVID-19 (NCCID, Sept 2020)</u>; <u>Guidance on the use of influenza vaccine in the presence of COVID-19 (NACI, Sept 29, 2020)</u>; <u>Guidance for influenza vaccine delivery in the presence of COVID-19 (NACI, August 5, 2020)</u>; <u>Considerations for Planning Curbside/</u> <u>Drive-Through Vaccination Clinics (CDC, July 27, 2020)</u>



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