

SIGNIFICANT FINDINGS FROM COVID-19 VACCINATION QUALITY ASSURANCE SITE VISITS

Taylor King, MPH; Christie Jackson, MPH; Isabel Stock



WHO WE ARE:

Oregon Rural Practice-based Research Network (ORPRN) at Oregon Health & Science University (OHSU) has contracted with Oregon Health Authority (OHA) to conduct over 500 quality assurance (QA) visits across Oregon.

PURPOSE

To ensure that COVID-19 Vaccine providers in Oregon have the support they need to provide COVID-19 vaccines to Oregonians, and meeting the COVID-19 Vaccine Provider Program requirements



About Our Team

Project Director

- Caitlin Dickinson

Project Coordinator

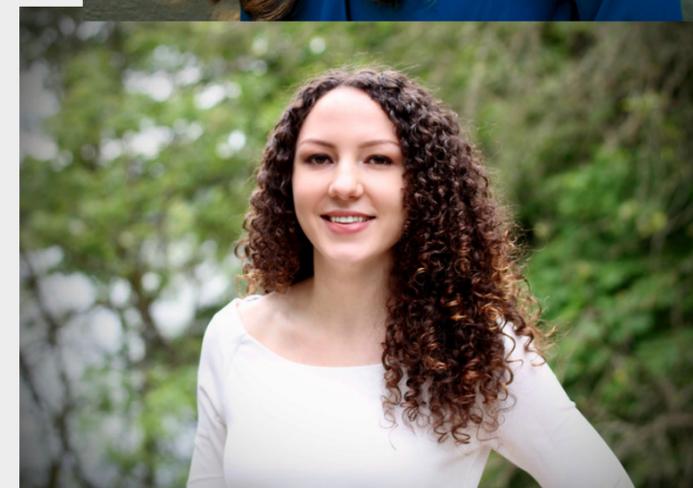
- Isabel Stock

Senior Research Assistant

- Jessica Leroux

Site Visitors

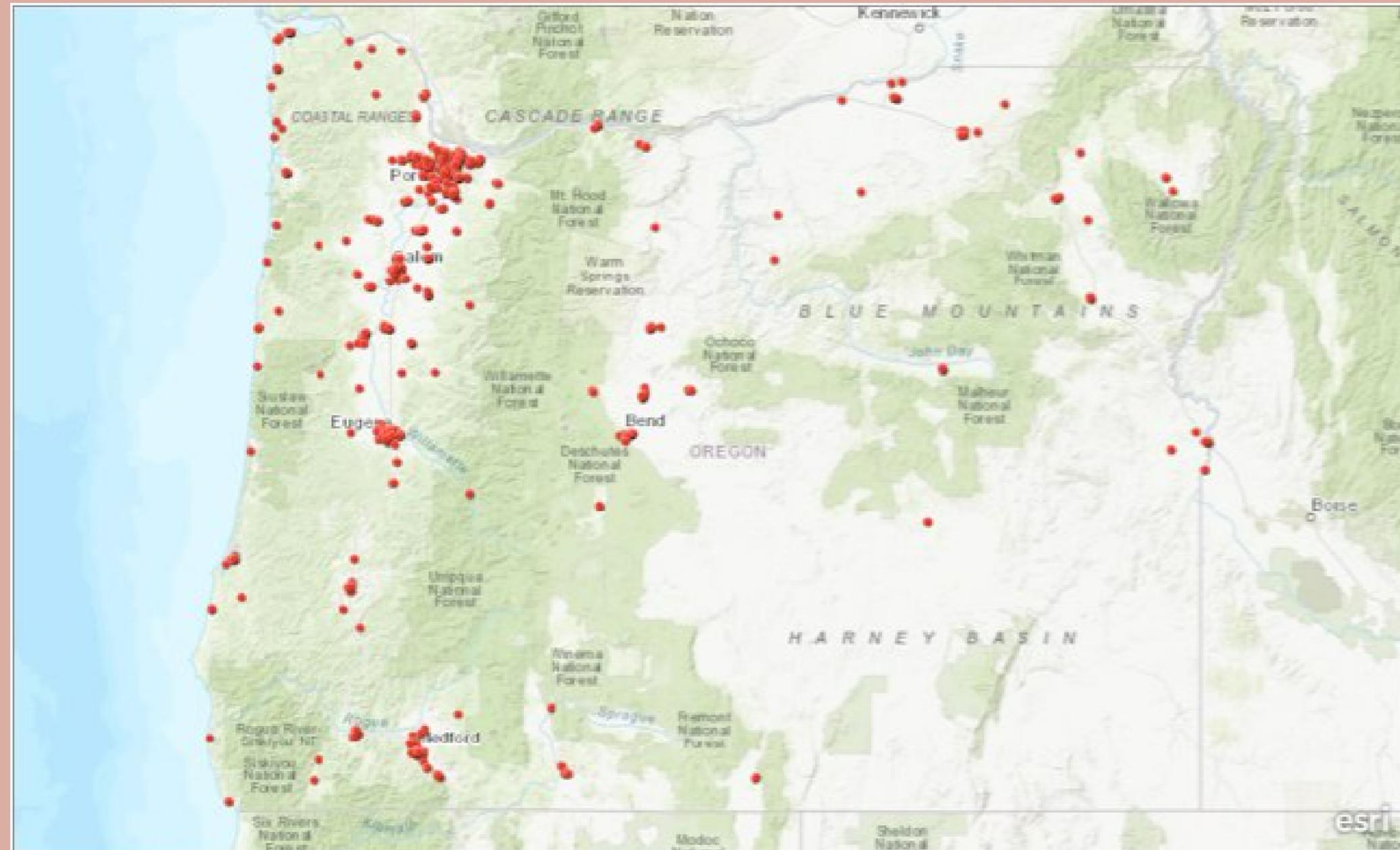
- Cort Cox – Medford-based
- Kylie Lanman – La Grande-based
- Meg Giddings – Portland-based
- Taylor King – Portland-based
- Christie Jackson – Portland-based



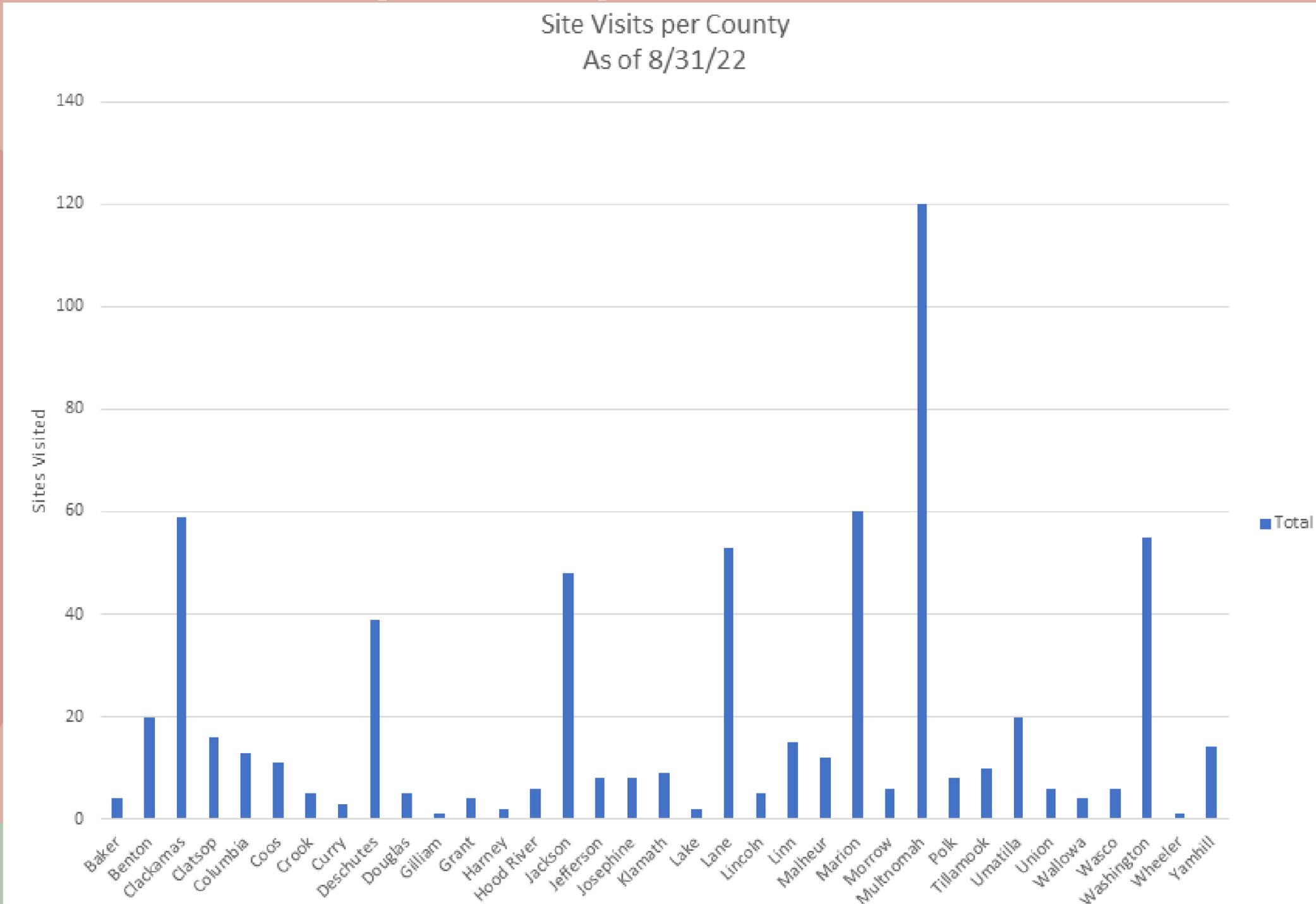
Site Visit Distribution

Oregon Site Visit Stats as of 9/26/22

CDC Staff: 4
ORPRN Staff: 673
County Staff: 22
Total: 691



Site Visits by County:



COVID-19 VACCINATION QUALITY ASSURANCE SITE VISITS IN OREGON

Site visits include review of:

- 1 COVID vaccine storage and handling
- 2 Billing and recordkeeping
- 3 Preparation and administration of the vaccine
- 4 Emergency procedures
- 5 Reporting patient data and waste logs
- 6 Vaccine prep station and transfer materials
- 7 Educational materials provided to patients
- 8 Training for staff

Significant Findings from Site Visits:

Significant Findings: Findings during the site visit that would/did lead to the pause in administering COVID-19 vaccines on site.

01 Improper storage units

02 Temperature logs and excursions

03 The lack of or improper temperature monitoring devices



SHARED CHARACTERISTICS FROM SITES WITH SIGNIFICANT FINDINGS



Naturopath
Practices



Fire
Departments/
Sheriff's Office



Medical workers
who do not have
direct patient
care
responsibilities
(dentist offices)



Wellness
Centers



Treatment and
recovery
centers

Sites with at least
1 significant
finding

Sites with multiple
significant
findings

Most common
significant finding:
No DDL

6.7%

46 sites

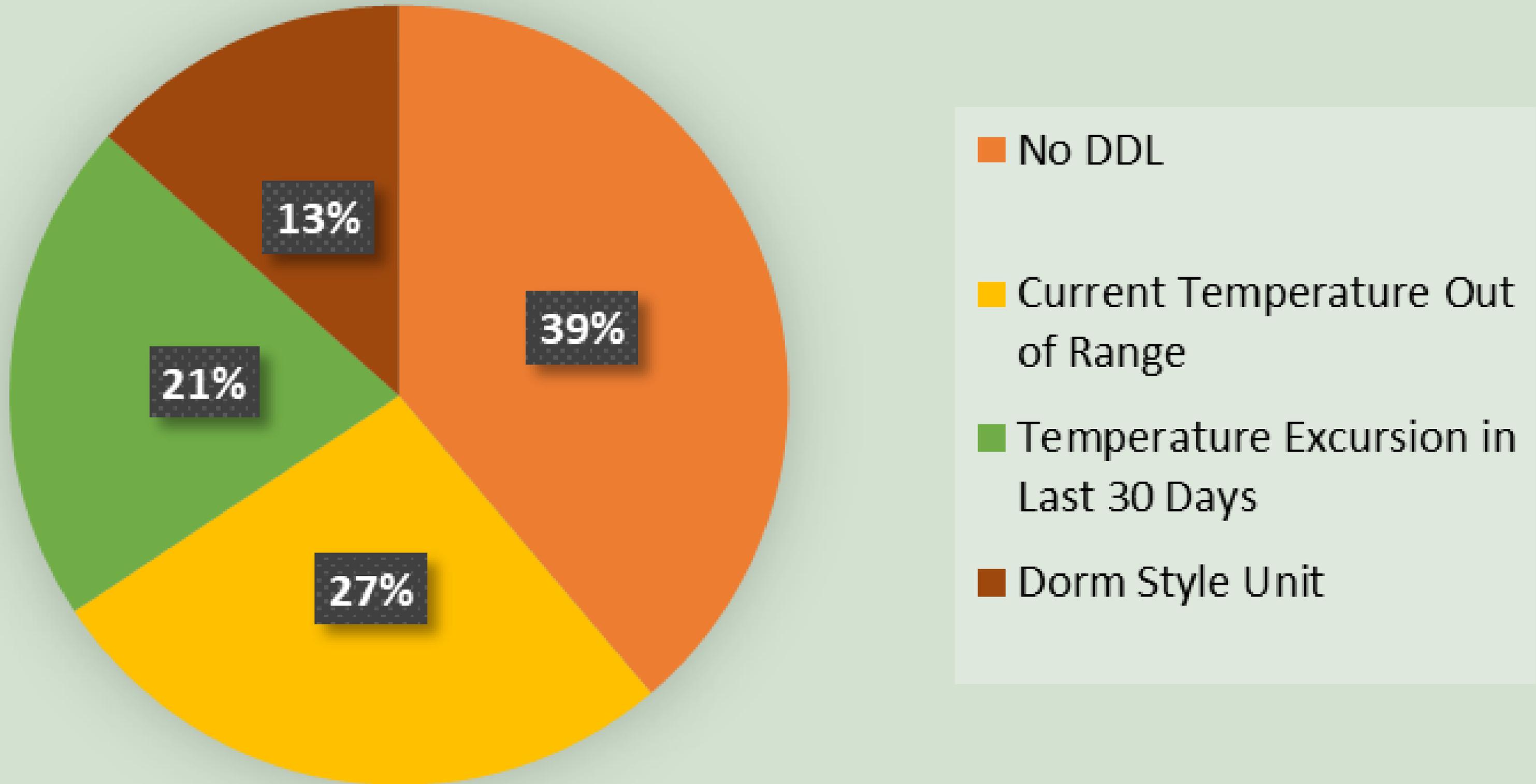
35.7%

15 sites

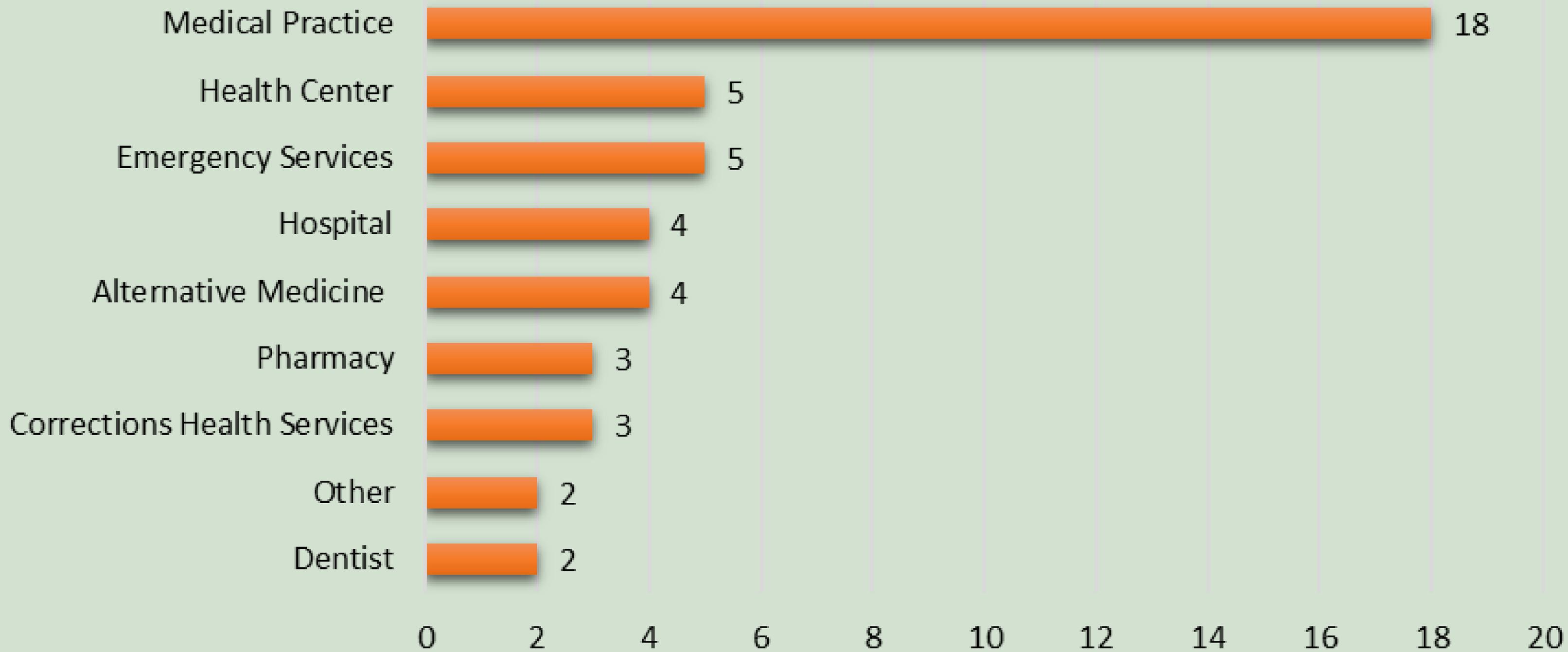
56.5%

26 sites

Distribution of Significant Findings



Distribution of Significant Findings by Provider



Follow-up for sites:

- 1) Quarantine vaccine and label "Do not use"
- 2) Pending finding – collect as much information as we can
- 3) Send information to the state to conduct internal review between OHA and OPRRN team
- 4) Elevate to OIP Medical Director



Follow-up for sites:

- 5) Communicate analysis to site and provide instructions for next steps
- 6) Contact patients if vaccine is believed to be compromised
- 7) Mark doses sub potent in ALERT and/or waste vaccine



Lessons Learned

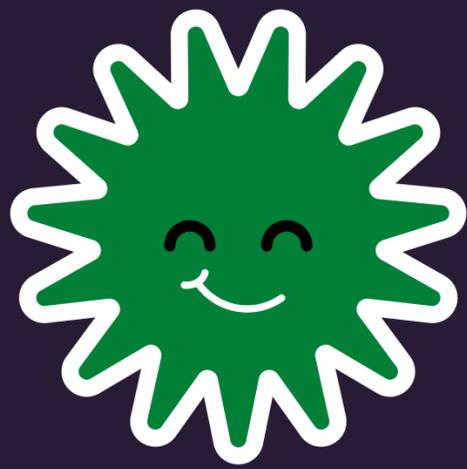
- Lesson 1: A required enrollment visit. There should be a formal site review for practices who had not administered vaccine before.
 - Require site to submit pictures of their units, thermometers, and temperature logs prior to vaccine arrival
- Lesson 2: Require live training (ALERT IIS) review of vaccine program requirements
- Lesson 3: Resources need to be easier to find and navigate
- Lesson 4: Resources and support for sites who have vaccine hesitant populations
- Lesson 5: Communication between state and sites. Providing an explanation for the “Why”



Where we are now Moving Forward:

Site visits

- We don't know how many site visits we have left given people are still enrolling and unenrolling
- Contract runs through November 2023



Final thoughts:

- Willingness to take recommendations
- Vaccine hesitancy
- Information overload
- Staffing issues/ understaffed / transition staff
- This type of contract strengthened the relationship between public health and healthcare systems specifically in rural areas

Get your booster!





Thank you!

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