In collaboration and partnership with the Colorado Rockies and Coors Field, the Denver Police Department, the Colorado Department of Public Health and Environment, the City and County of Denver and Verizon, UCHealth was able to successfully vaccinate nearly 10,000 Coloradans in one weekend.

As vaccinating as many people as possible is a core component of ending the pandemic, we respectfully present our experience and lessons learned in the format of a COVID-19 Mass Vaccination Drive-Through Playbook. By sharing the details of our experience, including what went well, what we changed and what we would have changed, we hope that others can use any part of this playbook to inform future events.

We have identified a process that maximizes the safety, convenience and efficiency of administering a large number of vaccines to a large and diverse number of people in a relatively short period.

Key statistics from the event:
- Two, 6-hour days
- 10,000 vaccines administered
- 834 cars per hour
- 22.4 minutes per car, including the 15-minute observation period
- Zero unused doses
- 0.9% patient no-show rate
- All appointments filled within 72 hours

Our goal is to help organizations everywhere have an understanding of the tools and resources they need to deliver the COVID-19 vaccine to their communities as quickly as possible so we can put this virus behind us.

Onward.

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Organizational Structure and Partner Involvement
Organizational Structure and Partner Involvement

Planning and Coordination Team (internal).

Your Planning and Coordination team will coordinate, prepare, oversee and execute your Incident Action Plan (IAP). Your IAP determines incident goals, operational objectives and the response strategy defined by Unified Command during response planning and operational periods. It contains general guidance to achieve goals and objectives within the overall strategy while providing important information on event and response parameters. Equally important, the IAP facilitates dissemination of critical information about the status of response assets themselves. Because incident parameters evolve, action plans must be revised on a continual basis.

Your internal Planning and Coordination team should include:

- Project Management
- Event Planning
- Emergency Medical Services (EMS)
- Emergency Services
- Medical Director
- Nursing
- Operations/Logistics
- Marketing & Communications
- IT
- Finance
- Facilities
- Pharmacy
- Patient Line (call center)
- Safety
- Security and Law Enforcement
- Supply Chain

Coordinating with State and Government Agencies (external).

The following partners and their associated responsibilities are critical to the success of this effort:

- **State Department of Public Health and Environment**
  - Acquiring vaccine doses, coordination of state vaccine efforts
- **City and County government**
  - Ancillary resources, IT infrastructure and network support (e.g., use of public safety cell signal, generators), ad-hoc site maintenance (e.g., snow removal)
- **Local police department**
  - Traffic management, police presence, additional security, preparation for potential demonstrations/protests, FCC temporary license (if AM frequency is used to communicate to patients on-site, as they are in their vehicles)
- **Local sports partners**
  - Physical set-up, logistical support, site maintenance, security, IT infrastructure support, food and water, signage, traffic flaggers
- **Your organization (e.g., UCHealth)**
  - IT registration and scheduling platform, vaccine administration and documentation, IT infrastructure support, clinical and support staff
- **Public Safety Communications**
  - The Verizon Public Safety Network’s continuity solutions provide secure connections on mission-critical operations in the public sector to ensure seamless communication throughout the event

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[Images of logos from Colorado Department of Public Health & Environment, Denver, Colorado Rockies, and Verizon, with UCHealth logo at the bottom right.]
Pre-Event Planning
Pre-Event Planning

Once the Planning and Coordination team has been assembled and your local partnerships have been established, your internal Planning and Coordination team should perform a site walkthrough at your mass vaccine distribution site. You should also determine the flow of the event and prepare signage and supplies for the event.

Pre-event site walkthrough.

Conduct a large-scale walkthrough with all key partners including marketing, IT, facilities, event rental companies and Incident Commander(s). The duration of the walkthrough will be dependent on how large the event site is. Allow enough time for a complete walkthrough with all partners involved. For UCHealth, we allowed for four hours to complete the entire walkthrough.

Designate your on-site Points of Contact (POCs):

- Incident Commander
- Deputy Incident Commander
- Safety
- Public Information Officer
- Liaison
- Ops Section Chief
- Incident Command Planning Chief
- Logistics Section Chief
- EMS
- Security
- Medical
- Pharmacy
- Site Control (traffic control)
- Situation Unit
- Law Enforcement

Mapping the drive-through flow.

- Key considerations for your unique site:
  - Ingress and egress
  - Traffic disturbances
  - Number of vaccination lanes
  - Post-vaccine observation area
  - Event facilities (bathrooms, volunteer tent, command post, Incident Command, pharmacy)
  - Supply storage
  - Technical Infrastructure Capabilities related to Site Location (e.g., local cell tower or network access)
  - Possible security issues (e.g., protestors, solicitors, etc.)

  See example map of UCHealth flow.

  Measure traffic throughput

  To enhance planning, we utilized a customized version of a drive-through vaccination model through a simulation tool*. The goal of using this tool was to determine feasibility, troubleshoot operational issues and further enhance the planning process. The simulation outputs visually and numerically showed the average processing and waiting times, as well as the number of cars and people that can be served (throughput values) under different numbers of staff, service lanes, screening, registration, immunization and recovery times.

  A basic drive-through model that can be easily adapted is available here:
  https://cloud.anylogic.com/model/583c2075-6a8b-41be-8a03-d692eba71683?mode=SETTINGS

  - Identify volunteers to track cars entering and exiting each station.
  - Create a tracking tool (e.g., Google Sheets) and dashboard for Incident Command to monitor throughput metrics in real-time.

*The simulation tool was built by Dr. Ali Asgary and Mahdi M. Najafabadi from Advanced Disaster, Emergency and Rapid Response Simulation (ADERSIM), York University, Toronto.
Pre-Event Planning

Signage.
- Determine necessary signage during your walkthrough.
- The more signage, and the fewer the words and the larger the font on each sign, the better. Include a Spanish translation if needed. In many cases we found simple arrows are better than words to communicate expected flow and direction.
- Site map with signage locations.
- Sample event signage.
- Clinical workflow.

Rentals, food and water.
- Coordinate with your local event planning agencies for tables, chairs, traffic cones, signs and sign holders, tents, heaters, generators, power cords, bathrooms, waste removal, etc.
- Plan to have food and beverages for your entire team. Amount will depend on time of day and duration of event(s).

IT support.
We have found this networking process to be the most efficient at helping mitigate any issues that can come with creating a sustainable network at large, outdoor/parking lot events.
- Have an electronic registration, scheduling and vaccination platform to ensure proper documentation of the event. Consider a phone-based registration and scheduling process with translation services available for those who do not have the technical means or skillset.
- Your IT lead should coordinate with your partners’/host’s IT teams as soon as possible to begin planning your network infrastructure, power capabilities and to help advise operations of technical possibilities.
- Identify network capabilities at the venue and your ability to utilize that network infrastructure to create your own internal network access or local cell-signal strengths. Consider bringing in a representative from your cell vendor to work with you and your host site IT teams.
- Complete an IT technical end-to-end dry run at least five to seven days prior to the event with all IT and key operational partners, and have a plan for IT downtime (see Contingency Planning).
  - Repeat as needed if adjustments are made with infrastructure, technical devices, workflows, etc.
- Perform a technical equipment needs assessment, from network infrastructure to device placement, in collaboration with host and operational leaders. Map out on a technical placement plan to allow for quick setup on the day of event.
- On the day of the event, allow time for the network to be up prior to device placement and activation. IT placement should be completed at least 30 minutes before staff access, or one hour prior to the first vaccination. This allows the staff enough time to log in and to address any access issues.
- Working with your facilities team, consider power needs for all technical devices. Battery-operated devices such as laptops lose charge quickly and that loss is enhanced in cold weather. Have a recharging strategy if unable to keep devices powered during the event. Utilize generators or long-lasting battery packs to avoid power constraints.
- Consider having secure, temperature-controlled storage for all onsite technical devices.
Pre-Event Planning

Networking.
When possible, consider a hard-wired network handoff from your host site. Creating a WiFi network utilizing a hard-wired connection or Public Safety Cellular allows you to create your local network onsite and allows staff to connect configured devices. For UCHealth, this allowed us to utilize our electronic medical record (EMR) for the purposes of validating and checking in scheduled patients, adding on more eligible patients in order to avoid vaccine waste, and for accurate documentation of vaccination administration, adverse reactions and any medical care needed during the post-vaccine observation period.

Electronic tracking.
Paper processes proved to be very time-consuming and difficult to manage in a mass vaccination event when hosting 1,000+ patients. Paper processes also make it difficult to manage vaccines real time on site. Tracking patients who have been vaccinated in real time allows for management of vaccine doses and recipient tracking. Consider having your Incident Command Planning Chief also be your IT Lead Resource. This person will be responsible for informing Incident Command of how many people have arrived each hour, how many vaccines have been given and helping to assess how much vaccine will be needed as the day progresses. This information is used by the pharmacy to determine thawing and drawing of the vaccine. Knowing how many patients have cancelled or who have not shown up for their appointments also allows for the ability to add on others who were accompanying already-scheduled patients and who also met the current vaccination criteria for the mass vaccination event.

Technical devices.
UCHealth converted to mostly hand-held devices for vaccination with a triple-connectivity contingency plan:
1. Running on WiFi on the UCHealth Network setup with Wireless Lan and mesh antennas.
2. Running on cell signal via Jetpacks on the Verizon Public Safety Network.
3. Running on device’s sim card on the Verizon Public Safety Network.

Laptops on carts were provided initially for patient check-in and in our registration complexity (SNAFU) tents for patients who had issues with their appointments or consent processing, or for cars containing multiple people who were scheduled for their vaccinations. Vaccinations were also completed in these specialized tents to protect patient throughput by avoiding disruption of the traffic patterns.

The UCHealth Pit-Crew model went to all handheld (iPhone) devices for both check-in and vaccination documentation utilized by a single staff member with the help of a volunteer to manage bandages and vaccination cards. The handheld devices should have backup-battery options to ensure the device does not lose power during the process. Laptops will be onsite for backup and for registration complexity stations.

Support.
Be prepared to provide network, technical and application support during the event. Communication with support staff and operations is necessary to address any technical concerns immediately as to not impact the flow of traffic. The Incident Command Planning Chief (IT lead) in collaboration with Operational Leadership and Incident Command is responsible for communicating and implementing any necessary change in operation or contingency plan in the case of unexpected technical slowness or failures.

Supply lists.
- Confirm all clinical and non-clinical supplies are ready for the event.
- Determine what supplies are needed at:
  - Registration
  - Vaccination
  - Observation
Contingency Planning
Contingency Planning

Contingency planning is the action of planning ahead for multiple possible scenarios and is crucial to the success of an event like a mass vaccination drive-through. It is important to discuss all possible scenarios, including ones that are specific to your city and region, with your internal Planning and Coordination team and your external partners.

Anticipate and plan for the following scenarios:

Vaccine contingency planning.
- If vaccine allocation is less than X,000 on DATE:
  - No-go or move to smaller location if >X,000 and <X,000.

IT downtime contingency planning.
- Patient schedules will be loaded onto desktops of registration and documentation laptops.
- Documentation will be on paper; entered electronically when systems are available.

Weather downtime contingency planning.
- Based on weather forecasting before scheduling patients (DATE):
  - Consider moving X,000 pilot doses to a smaller, indoor vaccination site.
- Unexpected weather after scheduling patients (DATE):
  - Consider moving X,000 pilot doses to a smaller, indoor vaccination site (rescheduling required) and/or move to new date.

- Safety and Mitigation Plan Rockies/UCHealth Mass Vaccination Site (RMVS).
## Contingency Planning

Use a contingency-mitigation chart to plan ahead for possible scenarios that could happen in your region. For certain tasks, ensure you know which team/partner is responsible for that specific duty ahead of time.

<table>
<thead>
<tr>
<th><strong>Hazard</strong></th>
<th><strong>Mitigation</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Infectious disease - COVID-19</td>
<td>Symptom/risk pre-screening at e-check-in, masks/eye protection provided for staff, masks provided for visitors if none, signage and pre-messaging indicating mask requirement, visitors remain in cars to maintain social distancing between them, outdoor location, social distancing in tents, hand sanitizer provided, gloves provided</td>
</tr>
<tr>
<td>Cold weather</td>
<td>Heaters, tents, protective clothing, staff rotation with breaks</td>
</tr>
<tr>
<td>Ice (slips, trips, falls)</td>
<td>De-icing</td>
</tr>
<tr>
<td>Snow</td>
<td>Snow plow</td>
</tr>
<tr>
<td>Heavy snow, extreme cold</td>
<td>Alerts from National Oceanic and Atmospheric Administration (NOAA), written criteria for closure, communications and rescheduling plan</td>
</tr>
<tr>
<td>High winds</td>
<td>Tents anchored, alerts from NOAA</td>
</tr>
<tr>
<td>IT downtime</td>
<td>Downtime continuity plan</td>
</tr>
<tr>
<td>Traffic accidents, including vehicle and pedestrian</td>
<td>Onsite security, support from local police department, onsite Emergency Medical Services (EMS), signage instructing to place vehicle in park, safety briefing for staff</td>
</tr>
<tr>
<td>Security</td>
<td>Identification (ID) required for staff entry, controlled ingress and egress, separate entrance for staff, onsite security</td>
</tr>
<tr>
<td>Delays leading to backup of traffic flow</td>
<td>Bailout lane, designated areas for more complex visitors (multiple recipients in one car, difficult registration), separate area for 30-minute observation, time studies completed, pilot run was comprised of 1,000 patients to test the efficacy of our work flow</td>
</tr>
<tr>
<td>Delays due to IT issues</td>
<td>Onsite IT support</td>
</tr>
<tr>
<td>Medical emergency</td>
<td>Onsite EMS support</td>
</tr>
</tbody>
</table>
Supplies
Supplies

Mass clinic supplies.

Once the workflow and staffing are finalized, create a master list of supplies needed for your event. Supplies should be shipped directly onsite or couriered. Pre-box supplies needed for each station prior to the event. The morning of your event, deliver a box of supplies to each registration or vaccination staff member so they can set up their station.

Supply Lead and Logistics Section Chief.

The Logistics Section Chief manages logistical needs and provides facilities, services, people and materials in support of the incident.

**Logistics Section Chief responsibilities:**

- Coordinate all facilities, transportation, communications, supplies, equipment maintenance and fueling, food and medical services for incident personnel and resources.
- Manage all incident logistics.
- Provide logistical input to the Incident Commander.
- Brief Logistics Staff as needed.
- Identify anticipated and known incident service and support requirements.
- Request additional resources as needed.
- Ensure and oversee the development of the Communications, Medical and Traffic Plans as required.
- Oversee demobilization of the Logistics Section and associated resources.

The Supply Lead is responsible for ordering personnel, equipment and supplies; receiving and storing all supplies for the incident; maintaining an inventory of supplies; and servicing nonexpendable supplies and equipment.

**Supply Lead responsibilities:**

- Stock vaccine locations (primarily tents) to par levels to initiate the vaccine clinic.
- Keep a ready reserve of product available for ongoing distribution.
- Run the supply cart(s) and transport supplies as needed.
- Periodic check-ins with tent personnel for any supply needs.
- Support supply needs with on-demand product needs.
- Assist with tear down and re-inventory of product in preparation for the next day’s event.
- Other duties as assigned at the direction of the Logistics Section Chief.

Lead opening and closing checklists.

To ensure a smooth set up and tear down of the event, we created detailed opening and closing checklists for all supplies and storage overseen by our leads.

- [Supplies and Staff Checklist](#)
Patient Communication
Patient Communication

Patient scheduling.

1. Existing patients and/or the general public were put on a registry where pertinent information was collected (e.g., name/DOB/contact information). Patients could access the registry by creating a new patient portal account (UCHealth uses My Health Connection—accessed via website or smartphone app) or by calling the UCHealth COVID-19 Support Line.
2. Once on the registry, patients were electronically and randomly selected based on current state guidelines (i.e., people 70+) and sent invitations to schedule their appointments. These invitations were sent to their patient portal account or were sent via robocall should the patient on the registry request a phone call notification. Those who received the invitation had the opportunity to schedule via their patient portal account, select “schedule now” when answering the robocall or by calling the COVID-19 Support Line. Patients had 48 hours to respond to the invitation to schedule. Once the invitation expired, patients were put back on the registry and are now eligible for future invitations once everyone else who meets the criteria has received their first opportunity to schedule a vaccination.

The UCHealth electronic medical record (EMR) is configured to use panel scheduling whereby the second vaccination is automatically scheduled at the time of the first vaccination. The time frame between the two doses is electronically calculated based on the specific vaccination being administered (i.e., 21 days for Pfizer and 28 days for Moderna). Patients are discouraged from cancelling their vaccination appointments.

Pre-event communication.

• Encourage a pre-appointment eCheck-in process to reduce the need to review consents and other paperwork with patients and to increase throughput of patients the day of the event. UCHealth used its EMR patient portal for this process and experienced an 80% or better eCheck-in rate for our event. This included patients new to the UCHealth patient portal platform who set up accounts during the registration process.
• Provide clear directions to the event location to ensure patients arrive at the appropriate entrance. This communication was sent via email, patient portal or discussed during scheduling via phone.
• Contact non-English speaking individuals before the event to make sure they are clear on what to do, what they need and where to go. Be prepared to provide interpreter services either electronically or in person at the event.
• Encourage patients to wear clothing that makes it easy to access their upper arm. It is difficult to remove layers of clothing in the car.
• Instruct that all people in the car must be wearing masks at all times while at the event.
• Explain the observation-period process and the length of time a patient may be required to stay.
• On the day of the event, when administering vaccination cards, explain the importance of obtaining the second dose. Provide take-home information per the specific vaccine administered, which should include potential side-effects and information on reporting severe and/or adverse reactions.

Second-dose reminders.

Schedule all patients for their first and second dose at the same time.

Sample message:
“When invited to register for the vaccine or vaccine event, you will be invited to register for the first and second dose at the same time. Patients will be reminded of each appointment in their My Health Connection account.”

Patient surveying.

We utilized our existing patient surveying platform, NRC, and developed a three-question survey that was sent to patients the following day via email:
• Did the staff treat you with courtesy and respect?
• How likely would you be to recommend this facility to your family and friends?
• What can you tell us about what we did well or how we could have improved your experience?”
Staff, Provider and Agency Recruitment
Staff, Provider and Agency Recruitment

To staff the event, we emailed volunteer sign-up links to our internal staff and external partners.

**Staffing.**

- Clinical (vaccine administrators)
- Clinical Support (registration, patient charting)
- Volunteers (flaggers, line attendants)
- Police, Medical Reserve Corps, EMS

<table>
<thead>
<tr>
<th>Role</th>
<th>Required per day for mass event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Line Attendants</td>
<td>6</td>
</tr>
<tr>
<td>Overnight Security</td>
<td>2</td>
</tr>
<tr>
<td>Police</td>
<td>Determined by site needs</td>
</tr>
<tr>
<td>North Traffic Flaggers</td>
<td>6</td>
</tr>
<tr>
<td>PARS/Registration</td>
<td>20 (6 lines of 3 w/2 SNAFU areas) + 5 breaks = 25 total</td>
</tr>
<tr>
<td>Interpreter Services</td>
<td>3</td>
</tr>
<tr>
<td>IT Clinical Informatics Support</td>
<td>8</td>
</tr>
<tr>
<td>Vaccinators</td>
<td>30 + 10 for breaks = 40 total</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>4</td>
</tr>
<tr>
<td>Pharmacy Techs</td>
<td>14</td>
</tr>
<tr>
<td>Pharmacy Assistants</td>
<td>1</td>
</tr>
<tr>
<td>Pharmacy Coordinators</td>
<td>2</td>
</tr>
<tr>
<td>Runners (golf cart x 2)</td>
<td>4</td>
</tr>
<tr>
<td>Observers</td>
<td>20</td>
</tr>
<tr>
<td>South Traffic Flaggers</td>
<td>10</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Role</th>
<th>Required per day for mass event</th>
</tr>
</thead>
<tbody>
<tr>
<td>Couriers – to/from main hospital campus</td>
<td>2 EMS for vaccines</td>
</tr>
<tr>
<td>Adverse-reaction documentation/ assessment</td>
<td>1 for IT</td>
</tr>
<tr>
<td>Leads</td>
<td>Lead Line Attendant x 1</td>
</tr>
<tr>
<td></td>
<td>Registration Lead (PARS) x 1</td>
</tr>
<tr>
<td></td>
<td>Vaccination Lead (Nurse &amp; Pharmacy) x 2</td>
</tr>
<tr>
<td></td>
<td>Observation Lead (UCHealth RN/ APP/MD) x 2</td>
</tr>
<tr>
<td></td>
<td>Supply Lead x 1</td>
</tr>
<tr>
<td>Floats</td>
<td>2</td>
</tr>
<tr>
<td>Incident Command</td>
<td>6</td>
</tr>
<tr>
<td>IT Support</td>
<td>28</td>
</tr>
<tr>
<td>Onsite EMS transport</td>
<td>2</td>
</tr>
<tr>
<td>Biomedical waste disposal</td>
<td>Contracted</td>
</tr>
<tr>
<td>Waste disposal</td>
<td>Contracted</td>
</tr>
<tr>
<td>Food distribution</td>
<td>Contracted</td>
</tr>
<tr>
<td>Researchers</td>
<td>30</td>
</tr>
<tr>
<td>Media Relations</td>
<td>As needed (enough to escort media if you allow them in clinical or restricted areas)</td>
</tr>
</tbody>
</table>

**Staff and partner surveying.**

After the event, we sent surveys to UCHealth staff and to our external partners to help identify opportunities for improvement.
Vaccine Storage
and Handling
**Vaccine Management**

**Vaccine transportation.**
- Portable freezers and refrigerated cold storage units are to be handled by pharmacists who will travel with these units to the mass vaccination site by emergency management vehicles. Secure transportation of the product to and from the event site is coordinated with police to ensure a safe and timely arrival.
- Repackage thawed Pfizer full 195 vial-tray units into incremental storage containers to enable fewer touch points at preparation site (removal time from refrigerated unit), keep vials upright (minimize drug contact with stopper) and enable quick vial counts (e.g., tackle box that fits 50 vials).

**On-site vaccine storage.**
- All units will be in the designated vaccine tents with designated pharmacy staff.
- Cold storage units are powered by generators, with three additional back-up power sources.
- Temperature-monitoring devices should be set to an audible alarm with hourly temperature validations.
- Bring backup ultra-low freezers and refrigerated cold storage units.

**Administration and management.**
- We have a zero-waste policy across UCHealth.
  - **Dilution management:**
    - One person per table dilutes.
    - Use saline syringes (1.8 ml) prepared in clean room (48-hour room temperature expiration date. Label each syringe).
    - Keep undiluted vials in a single red bin with lid per table. Clearly label undiluted vials.
    - Keep diluted vials in a few green bins. Clearly labeled diluted vials for staff to pull from.
- Bring a small supply of the thawed drug with setup pharmacists to enable syringe prep as soon as staff arrive (before mass drug arrives).
- Use VanishPoint® or SOL-CARE™ syringe/needle combo if available.
- Color code vaccine syringe labels.
  - Enables staff in the field to readily determine which syringes will expire sooner and need to be used first.
  - Forces syringe redistribution in field.
  - For 7:30 am - 2 pm clinics, change at 0900, 1100, 1300.
  - Bring extra labels.
- **Syringe batching:**
  - Bags placed in batched bin.
    - 0530 - 0900: place in ziplock bags in increments of 25.
    - 0900 - 1200: place in ziplock bags in increments of 50.
    - 1200 - 1300: place in ziplock bags in increments of 25.
    - 1300 - 1400: place in ziplock bags in increments of 10.
Vaccine Storage and Handling

Clinical staff roles.

Pharmacy runner coordinator:
- Only dispense drug to pharmacy runner coordinators (not pharmacy runners), otherwise there are too many people in tent asking for drug and there will be a lack of coordination.

Pharmacy runners:
- Assign pharmacy runners to specific tents.
  - Pharmacy runner coordinators allocate drug to pharmacy runners.
  - Responsible for distributing drug to vaccination tents, ensuring drug that is expiring first is used first, and redistributing drug to other tents that have quicker throughput. This is why having accurately colored labels is crucial.
    - Counting syringes in tents when called for by pharmacist branch lead.
- Initial distribution to tents = one 25-count bag each.
- One pharmacist per four technicians at each table.
  - Pharmacist serving role could also be syringe inventory coordinator and/or syringe pooler.

Pharmacist vial coordinator:
- Brings drug to mass vaccination event from hospital with EMS in Stirling Ultracold portable freezers and VeriCor Cool Cubes™.
- Documents and monitors vial storage temperatures.
- Thaws vials.
- Dispenses vials to red bins on table.
- Tracks syringes prepared cumulatively and has each table document vials that produce more or less than designated amount (Pfizer = 6 doses/vial; Moderna = 11 doses/vial). Calculates syringes prepared for each group of vials issued (and sums cumulative value).
  - Documents on large dry-erase board: vials dispensed, vials thawed, syringes prepared.
- Keeps tables stocked with saline syringes and syringes.
- Actively communicates with syringe inventory coordinator and pharmacist branch lead to determine pace and number of vials needed as clinic winds down.

Syringe inventory coordinator:
- Assists with morning setup.
- Unwraps VanishPoint®/SOL-CARE™ syringes/needles.
- Transfers bags from batched bin to dispense bin.
- Documents number of syringes and time prepared as they are placed from batched bin to ready-to-dispense bin.
  - Easiest to move in batches of 100 for running count/sum simplicity.
- Assists pharmacist branch lead with documenting syringe count dispensed from ready-to-dispense bin to the pharmacy runner coordinators.
- Assists with labeling syringes at tables and packaging drug in ziplock bags.
Vaccine Storage and Handling

- Decision-maker for determining number of vials to dispense for syringe preparation (alters syringe prep plan to keep pace with clinic demand).
  - Partners with IT branch lead to determine target number of syringes for scheduled visits minus expected no-shows, plus any add-ons.
    - At clinic start
    - At 0900
    - At 1100
    - At 1300
    - At 1330
  - Partners with pharmacist branch lead out in field for final vial release(s) will be in increments of 1-2 at end of clinic.
- Partners with Incident Command Chief to determine number of allowable add-ons.
- Communicates final syringe surplus to Incident Command for standby patient call-down list.

Pharmacist syringe pooler:
- Assists with morning setup.
- Unwraps VanishPoint®/SOL-CARE™ syringes/needles.
- Collates labeled syringes into designated ziplock bag increments and places into batched bin.
- Covers tables for breaks/lunch.
- Prepares syringes if falling behind.
## Vaccine Storage and Handling

**Vaccine preparation schedule.**

<table>
<thead>
<tr>
<th>Scheduled visits</th>
<th>Plan for visits</th>
<th>Time</th>
<th>Syringe prep/draw</th>
<th>Vials needed (6 dose/vial)</th>
<th>Thaw</th>
</tr>
</thead>
<tbody>
<tr>
<td>N = 5,000</td>
<td></td>
<td></td>
<td></td>
<td>585 vials (3 trays) thawed day before plus 60</td>
<td></td>
</tr>
</tbody>
</table>

5 am

5:30 am 300 (60)

6 am 720 Total = 1,020 +585 (120) Vials remaining: 465

7 am 720 Total = 1,740 (120) Vials remaining: 345

8 am 9 am 720 Total = 2,460 (120) Vials remaining: 225 + 195 = 420

n = 840 n = 1,500 8 am 720 Total = 3,180 (120) Vials remaining: 300

n = 840 n = 1,000 Total = 2,500

9 am 10 am 720 Total = 3,900 (120) Vials remaining: 180 + 40 add = 220

n = 840 Total = 2,520 n = 1,000Total = 3,500 11 am 12 noon 720 Total = 4,620 (120) Vials remaining: 100

n = 840 Total = 3,360 n = 750 Total = 4,250 12 noon 12:30 pm 150 Total = 4,770 (25) Vials remaining: 75

n = 840 Total = 4,200 n = 500 Total = 4,750 12:30 pm 1 pm 96 Total = 4,866 (16) Vials remaining: 59

n = 799 Total = 4,999 n = 249 Total = 4,999 1 pm 48 Total = 4,948 (8) Vials remaining: 51

1:30 pm 24 Total = 4,972 (4) Vials remaining: 47

1:45 pm 18 (3) Vials remaining: 44

2 pm 10 (2) Vials remaining: 42

---

24
Media and Communications
Plan and Considerations
Media and Communications Plan and Considerations

Patient communication.

We were able to schedule patients for their vaccinations through our patient portal and app, My Health Connection (MHC), or via phone through our call center, Patient Line.

On-site communication.

- **Patient welcome packets:**
  - Print and deliver to the event location prior to event. Line attendants should provide these packets to patients as they move from “Appointment Verification” toward “Registration.”
  - [Sample Welcome Packet](#)

- **Public Relations and media:**
  - Engage in proactive outreach prior to the event start. Communicate where and to whom media inquiries should be directed.
  - Designate a day and location for patient interviews.
  - Ensure you have a minimum of three onsite contacts to handle media requests, interviews, etc.
  - Designate media-only areas with media-specific signage.

- **Key talking points and FAQs for leaders:**
  - HIPAA compliance is paramount. Media should be escorted if in close proximity of patients.
  - Key Talking Points
  - FAQs for Leaders

- **Signage:**
  - Signage should help guide patients through the event flow and communicate important reminders along the way.
    - [Signage Map](#)
    - [Comprehensive Signage List](#)

- **AM radio station**
  - This was an additional opportunity to communicate with patients on the day of the event to help walk them through the process.
  - Secure a temporary FCC license for implementing a relatively low-wattage AM frequency that is geo-contained to the immediate vaccination area.
  - Signage at the entrance to the event encourages people to tune in to listen to instructions as they flow through the vaccination clinic.
  - Message is pre-recorded and looped. Multiple languages may be needed depending on your demographics.
  - [AM Radio Script (Spanish version included)](#)
Alternate Flow Considerations
Alternate Flow Considerations

We had originally planned to have a Greeters station where staff would confirm whether or not the person had an appointment. We found through our traffic modeling that a simple Yes/No question at the main entrance would have caused immense traffic backups into the city. We eliminated the Greeters station at the risk of having a high volume of people without appointments to enter our event area. This turned out to be the right decision for two reasons.

1. Very few people arrived without an appointment.
2. More than 200 cars arrived very early and we needed space in the lot for them to queue. Having a Greeters station in place would have caused a long delay.

- Alternate Flow Map
Financials
Financials

Funding Considerations

- Ratio of exempt and non-exempt staff.
- Whether or not you will bill a patient’s insurance for the vaccine. UCHealth chose not to bill and did not collect insurance information.
- The cost estimates will change as design changes are made to the vaccination model and throughput calculations.
- Technology owned versus technology purchased specifically for this event.
- Donations versus contributions.
- Monthly rental fees versus one-time equipment rentals (e.g., tents, generators, etc.).

Costs to UCHealth (excluding partner contributions and police traffic support) for the four-day event are estimated at $550,000 (20,000 total doses administered at $27.50 per vaccine). Costs will vary based on the considerations above and other variables such as number of vaccines administered and hours per event.

UCHealth Partner Contributions Examples:

The Colorado Rockies
Parking lots A, B and C at Coors Field, site maintenance, including snow removal, 24/7 site security, IT infrastructure support, meals and snacks for staff throughout event, crackers and juice for patients in need, bathrooms, signage, traffic flaggers.

State of Colorado and CDPHE
1,000 vaccine doses for pilot and 10,000 vaccine doses for Mass Vaccination Clinic, coordination of state vaccine efforts, Medical Reserve Corps (MRC) to support observation.

City and County of Denver
Coordination across city resourcing and requirements (e.g., help with snow removal from the Colorado Department of Transportation (CDOT) and City have the same service vendor, street signage on Park and Blake Street, permitting support to assure compliance with City code).

Denver Police Department
Have enough officers the day of the event for traffic management (including ingress and egress), security within and around the event, additional security and vaccine escort. Local law enforcement is encouraged to reach out to Denver Police for additional information related to our involvement in this operation. 720.337.1030 or DPDSpecialEvents@denvergov.org
Appendix
Entry

Key

1. Vaccine team shelter with heat source
2. Pharmacy located on ground floor of garage
3. Greeters to help steer traffic to the correct lanes
4. Flaggers to direct queued cars to specific vaccination stations
5. Person or team to address those who arrive without appointment
6. Incident Command
7. Variable message board
8. IT Equipment
9. Staff break area
10. Bailout traffic. There are two bailouts. Bailout A exits on Blake and Bailout B exits on Park Ave

Pharmacy located on ground floor of garage
Staff break area
Vaccine tent: 1 laptop and high-top tables in each tent, power strips, generators, 2 Rover devices in each tent

Snafu: 2 Rovers and 2 laptops and carts in each tent; need to have IT capability to do vax here

(1-15): Laptops and carts, power strips and extension cords to each cart

Row F (16, 17, 18, 19): 4 Rovers or 4 more laptops on high-top tables for documentation, 4 laptops on cart for registration
UCHealth Event Site Flow Egress Map
Page 1/1

Key

15-minute Observation Lot 1
187 spaces

Med Obs

Medical observation tent

15-minute Observation Lot 2
308 spaces

Egress Control

Flagger to direct queued cars to specific vaccination stations

EMS

Emergency Medical Services Personnel

Bailout Traffic

Flagger will direct bailout traffic to Park Avenue exit

Flagger

Medical observation tent
Zone 1

Zone 2
Zone 5

Observation Area Parking (215 spaces)
Observation Area Parking (271 spaces)
EMS
EXIT
Sample Event Signage

All occupants must wear a mask.
Todos los ocupantes deben usar una mascarilla.

Drive slowly.
Maneje despacio.

Exit Thank you for coming.
Salida Gracias por venir.

By appointment only.
Solamente con cita previa.

Roll up your sleeve and expose your arm.
Súbase la manga y descubra el brazo.

Follow flaggers ahead.
Preste atención al personal dando señales.

Tune in to AM 1630 for important details.
Para obtener detalles importantes, sintonice la estación 1630 AM.

Put your car in park.
Ponga el automóvil en posición P.
### Clinic Workflow - Patient

#### MASS VACCINATION EVENT PATIENT WORKFLOW

<table>
<thead>
<tr>
<th>Event</th>
<th>Steps</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient arrives at 33rd and Blake</td>
<td>2 officers direct traffic into one of two lanes entering Lot A</td>
<td>2</td>
</tr>
<tr>
<td>Line attendant gives a handout and places a green placard on windshield</td>
<td>3 Traffic flaggers direct cars into queues A - F</td>
<td>6</td>
</tr>
<tr>
<td>Line attendants confirm appointments</td>
<td>6 Line attendants confirm appointments</td>
<td>2</td>
</tr>
<tr>
<td>High risk marker affixed to car</td>
<td>2 Traffic flaggers direct cars toward the exit, 15-minute observation area, or 30-minute observation area in the east or west lot</td>
<td>20</td>
</tr>
<tr>
<td>West exit Park Ave</td>
<td>2 officers at each ingress site</td>
<td>2</td>
</tr>
<tr>
<td>Line attendant hands patient prompt e-check-in, jacket removal, masking</td>
<td>18 PAR: Complete registration (see sub-process for Reg and Administration)</td>
<td>15</td>
</tr>
<tr>
<td>Recoverable?</td>
<td>Registration successful?</td>
<td>Yes</td>
</tr>
<tr>
<td>Vaccinations confirm identifiers for name and DOB, and ask screening questions. Vaccinator will document vaccine lot number in Epic using flower or a laptop. Vaccine is administered and the patient receives a paper vaccination card with lot number. The vaccinator places a flag on the car depicting high-risk observation time, if necessary. A medical/volunteer will support vaccinators by providing supplies. Runners on golf carts will replenish vaccine supplies. If vaccine administration and documentation times begin to cause delays, a vaccinator will be added to the tent to complete real-time documentation. If delays continue, teams will revert back to a paper process.</td>
<td>Traffic flaggers direct cars to the registration Snaku area</td>
<td></td>
</tr>
<tr>
<td>History of anaphylaxis?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>20 observers watch patients during the observation period</td>
<td>Observer activates 1 of 2 response teams (see sub-process)</td>
<td></td>
</tr>
<tr>
<td>Requires intervention?</td>
<td>EMS Transport to ED</td>
<td></td>
</tr>
<tr>
<td>West exit Park Ave</td>
<td>2 officers direct traffic exiting lot; Cabo Park Av</td>
<td></td>
</tr>
</tbody>
</table>

### REQUIREMENTS

- Owners: Operations, Marketing, Police
- Tech: none
- Equipment: warming tent for flaggers, traffic cones, signage, table and 2 chairs
- Supplies: earloop masks, visitor masks, pins, band aids, gloves/paper tape, hand sanitizers, trash
- Patient material: paper packets, handout on how to schedule an appointment

### DESCRIPTION AND REQUIREMENTS

- Owners: Operations, Pharmacy, Traffic Lead
- Tech: ipads, laptops, printer for Pharmacy, connectivity
- Equipment: cabana tents, traffic cones, heaters, tent for pharmacy, tables and chairs, wire racks, direct power or generator in garage
- Supplies: gloves, alcohol prep pads/office wipes, band aids, gauze/paper tape, earloop masks, pens, purple top wipers, eye protection, hand sanitizers, sharps, trash, colored cards, flagger tape, extra syringes/wedding
- Patient material: Paper vaccination cards

### SUB-PROCESS

- Owners: Operations, Medical Directors, EMS response
- Tech: laptops, Verizon tower
- Equipment: radios, medical response tents, heaters
- Supplies: earloop masks, adverse reaction kits, gloves, sharps, pulse ox, manual blood-pressure cuffs, stethoscopes, trash, stretcher, hand sanitizers
- Patient material: jaw/trackers for glycerin events

### TIME OUTLINES

- Total process duration (from entrance to exit) = 20 min
- 20 min
- 30 min
- 60 min
- 60 min
- 10 min
- 10 min
- 1 min

---

**Owners:** Incident Commanders
**Tech:** IC members will bring their own laptops
**Equipment:** tents on 4th floor of the garage, radios, tables, chairs, heat, generator power, vents
**Supplies:** folders, masks, back-up supplies, trash, hand sanitizers
**Patient material:** none

---

**UCHEALTH**

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**THE ROCKIES**

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**Sub-processes**

---

**DESCRIPTION AND REQUIREMENTS**

---
MASS VACCINATION EVENT – LINE ATTENDANT WORKFLOW

40

Clinic Workflow-Line Attendant

- Patient arrives at 33rd and Blake
- Traffic flaggers direct cars into one of two lanes entering Lot A
- Line Attendant gives patient a handout on how to make an appointment
- Line Attendant places a green placard under the windshield wipers
- Line Attendant hands patient a packet, prompts to check in, jacket removal, and masking
- On orders for registration tent

Sub-processes:

1. START/END POINTS
2. UCHRAIL
3. UCDHPI
4. START/END POINTS, OPERATIONS
5. DESCRIPTION AND REQUIREMENTS
Clinic Workflow-Registration

MASS VACCINATION EVENT – REGISTRATION WORKFLOW

- Patient arrives in the registration parking stall
- Patient does not have an appointment. PAR should keep the patient in the parking lot.
- Registration successful?
  - Yes
    - Traffic flaggers direct cars into vaccination tents
  - No
    - Registration Snafu area

- PAR asks for name and DOB
- PAR locates patient on the scheduling report in Epic (see Epic tip sheet)
- Patient e-checked-in?
  - Yes
    - Click "Check-in"
    - Verbally obtain consent and document it
  - No
    - PAR directs car to move to the Registration Snafu area

- West exit Park Ave
- 2 officers at each egress site

- PAR at Reg Snafu area investigates issue
- Does car have a green placard?
  - No
    - Patient does not have an appointment. PAR should direct the car to pull out of the tent.
    - Descalation required?
      - Yes
        - 2 police officers support de-escalation
      - No
        - 6 Traffic flaggers direct cars into vaccination tents
  - Yes
    - Ambassador at Reg Snafu tent supports those who don't have an appointment
    - 2 police officers support de-escalation

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- West exit Park Ave
- 2 officers at each egress site

- PAR at Reg Snafu area investigates issue
- Does car have a green placard?
  - No
    - Patient does not have an appointment. PAR should direct the car to pull out of the tent.
    - Descalation required?
      - Yes
        - 2 police officers support de-escalation
      - No
        - 6 Traffic flaggers direct cars into vaccination tents
  - Yes
    - Ambassador at Reg Snafu tent supports those who don't have an appointment
    - 2 police officers support de-escalation
**Clinic Workflow-Administration**

**MASS VACCINATION EVENT – VACCINATION ADMINISTRATION WORKFLOW**

1. Traffic flaggers direct cars into vaccination tents 1-2
2. Vaccinators approach 8 cars directly

Vaccinator asks patient to review name and ID identifiers and validates their open encounter in Epic (see below

Vaccinators screen patients and document responses

Vaccinator administers vaccine and documents after receipt

Vaccinator hands patient their vaccine card with the lot# sticker

Vaccinator asks for patient to confirm name and DOB identifiers and locates their open encounter in Epic (see Overview)

Vaccinator administers vaccine and documents after receipt

Traffic flaggers direct cars into vaccination tents 1-16

Vaccinator administers vaccine and documents after receipt

Patient enters tent

Traffic flaggers direct cars into vaccination tents 1-2

Vaccinator administers vaccine and documents after receipt

Traffic flaggers direct cars into vaccination tents 1-2

Vaccinator administers vaccine and documents after receipt

Traffic flaggers direct cars into vaccination tents 1-2

Patient hands patient their vaccine card with the lot# sticker

Vaccinator hands patient their vaccine card with the lot# sticker

Traffic flaggers direct cars into vaccination tents 1-2

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Vaccinator administers vaccine and documents after receipt

Traffic flaggers direct cars into vaccination tents 1-2
Rockies Safety and Mitigation Plan

Overview.
We recognize the importance of protecting staff from hazards while balancing the needs and experience of patients receiving COVID-19 vaccinations. Providing mass vaccinations is complex, requiring accurate timing of dose preparation and cannot be easily changed. Because of this, we will make every attempt to mitigate known hazards to staff and patients.

Authority to initiate actions.
The decision to delay opening, close or modify operations of the Rockies/UCHealth Mass Vaccination Site (RMVS) may be made by the Incident Commander, Deputy Incident Commander or Safety Officer.

In the absence of criteria indicating immediate closure, the decision to close the site due to weather or safety concerns will be made by 5 pm the previous day to allow for appropriate notification.

General safety considerations.
Participant safety takes priority over all activities.

The Safety Officer is responsible for ensuring that the event is conducted in a safe environment; any safety concerns must be immediately reported to the Safety Officer. The Safety Officer and Incident Commander will determine if operations need to be modified based on the concern.

Personal protective equipment (PPE) will be worn at all times. This includes, at a minimum, a surgical or procedure mask and eye protection for all staff providing patient care, and a cloth mask for all others, including support staff, patients and visitors.

Security.
Site access and entry control is provided by the Rockies and the Denver Police Department (DPD). Access to the site is limited to staff, those with vaccination appointments and their companions. Badge identification is required of all UCHealth staff.

Incidents involving violence or threats of violence will be managed by the DPD.

Traffic incidents.
Motor vehicle crashes and other traffic incidents will be managed by the DPD with assistance from Denver Health (DH) Emergency Medical Services (EMS) as appropriate.

The site will consider closure for the following criteria:

• Temperatures and conditions that fall within the recommendation to cease non-emergency work per the American Conference of Governmental Industrial Hygienists chart below.
• National Weather Service issues alerts in Denver County for any of the following:
  - High wind warning or advisory (sustained strong winds and even higher gusts)
  - Severe thunderstorm warning (wind 58 mph or higher and/or hail 1 inch diameter or larger)
# Rockies Safety and Mitigation Plan

Medical emergencies. Refer to your Incident Action Plan.

## Medical Plan (ICS 206)

**1. Incident Name:** Mass Vaccination Pilot - Dose #1  
**2. Operational Period:** Date From: 1/24/21 Date To: 1/24/21  
Time From: 0700 Time To: 1200

### 3. Medical Aid Stations:

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Contact Number/Freq</th>
<th>Paramedics</th>
</tr>
</thead>
<tbody>
<tr>
<td>UHealth Response Team</td>
<td>Between Medical Observation Lots</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4. Transportation (Indicate air or ground):

<table>
<thead>
<tr>
<th>Ambulance Service</th>
<th>Location</th>
<th>Contact Number</th>
<th>Level of Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Denver Paramedics</td>
<td>On-site</td>
<td></td>
<td>ALS</td>
</tr>
<tr>
<td>Stadium Medical</td>
<td>On-site</td>
<td></td>
<td>ALS</td>
</tr>
</tbody>
</table>

### 5. Hospitals:

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>Address, Lat &amp; Long, Helipad</th>
<th>Contact Number(s)/Frequency</th>
<th>Travel Time</th>
<th>Trauma Center</th>
<th>Burn Center</th>
<th>Helipad</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saint Joseph Hospital</td>
<td>1375 East 19th Ave. 09:09</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Presbyterian St Lukes Medical</td>
<td>1719 East 19th Ave. 00:10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Denver Health Medical Center</td>
<td>777 Bannock Street 00:10</td>
<td>Level 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University Of Colorado Hospital</td>
<td>12605 East 10th Ave. 00:20</td>
<td>Level 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 6. Special Medical Emergency Procedures

**Line Emergency**
- Crew Supervisor will contact Division Supervisor with patient complaint/condition and location.
- Division Group Supervisor Contacts:
  - Division Group Supervisor Contacts:
    - EMS resource
    - Communications Unit
  - Communications Unit Contacts:
    - Ground or Air ambulance as requested.
    - Operations
  - Safety
  - Medical Unit
  - Division Supervisor or designee will serve as point of contact and run medical emergency on assigned channel.
  - Communications Unit will clear the Command channel for emergency traffic as needed for duration of the need.

**Camp Emergency**
- Contact Medical Unit with patient complaint/condition and location. Medical staff will respond to stabilize the patient.
- Medical Unit contacts:
  - Communications
  - Safety
  - Logistics
  - Operations
  - Crew Supervisor
  - Comp/Claims

**Injury Reporting Procedures**

- Nature of Injury: 
- Location of Patient: 
- Point of Contact: 
- Transportation Requested by: Air Ground Lat: Long: 
- Patient Unit ID: 
- Is an EMT with Patient: Yes No 
- Age: Sex: Male Female

All Emergencies - Secure the area and identified witnesses for later investigation. Keep accurate log of events.

- Check box if aviation assets are utilized for rescue. If assets are used, coordinate with Air Operations.

**7. Prepared by (Medical Unit Leader):** 
**Signature:**

**8. Approved by (Safety Officer):** 
Robert Sparks 
**Signature:**

**ICS 206**

**NMS IAF**

**Date/Time:**

[Logo: uchealth]
Inclement Weather.

The site will consider closure for the following criteria:

- Temperatures and conditions that fall within the recommendation to cease non-emergency work per the American Conference of Governmental Industrial Hygienists chart below.
- National Weather Service issues alerts in Denver County for any of the following:
  - Blizzard, winter storm, or ice storm warning
  - Wind chill advisory
  - Tornado watch
  - Civil emergency
- At the discretion of the Safety Officer or Incident Commander.

The site will immediately close and seek shelter for the following criteria:

- National Weather Service issues alerts in Denver County for any of the following:
  - Tornado warning.
  - Other severe weather alerts recommending take shelter (e.g., flash flood warning).
  - At the discretion of the Safety Officer or Incident Commander.

Awareness.

- Alerts via iNWS: https://inws.ncep.noaa.gov/
  - Command Staff, including the Incident Commander, Deputy Incident Commander, Operations Section Chief, and Safety Officer will be required to sign up for the following:
    - Severe weather
    - Winter weather
    - Hydrology
    - Non-precipitation
    - Civil emergencies
- Denver Outdoor Warning Sirens.
- Alerts via the Emergency Alert System (KOA 850 AM and Wireless Emergency Alerts).
Communications.

See the Incident Communications Plan (ICS 205) for full radio communications details. This section outlines critical communications due to safety concerns.

- **Immediate/critical notifications:**
  - On-site communications to staff will occur via radio.
  - Communications to patients will occur via My Health Connection email and automated phone calls.
  - Critical communications to patients and staff can also be made via Everbridge Mass Notification System as text or phone call.

- **Non-immediate/urgent notifications**
  - Communications to staff will be made via email.
  - Communications to patients will be made via My Health Connection.

---

### ICS 205 - INCIDENT RADIO COMMUNICATIONS PLAN

<table>
<thead>
<tr>
<th>Ch#</th>
<th>Function</th>
<th>Name</th>
<th>Assigned To</th>
<th>Rx Freq</th>
<th>Rx Tone</th>
<th>Tx Freq</th>
<th>Tx Tone</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Command/Logistics</td>
<td>Command/Logistics</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>All logistics requests except for pharmacy</td>
</tr>
<tr>
<td>6</td>
<td>Security/EMS</td>
<td>Security/EMS</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Observation</td>
<td>Observation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Vaccine reaction monitoring</td>
</tr>
<tr>
<td>10</td>
<td>Site Control</td>
<td>Site Control</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Traffic operations</td>
</tr>
<tr>
<td>12</td>
<td>Pharmacy Support</td>
<td>Pharmacy Support</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Pharmacy support to vaccination stations</td>
</tr>
<tr>
<td>N/A</td>
<td>Denver PD</td>
<td>Denver 800</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
<td>Denver EMS</td>
<td>Denver 800</td>
<td></td>
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<td></td>
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<td>8</td>
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<td>10</td>
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<tr>
<td>12</td>
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<tr>
<td>13</td>
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<td></td>
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<td></td>
<td></td>
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<tr>
<td>14</td>
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<td></td>
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<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. **Special Instructions**

Denver PD and Denver Health Paramedics will operate on existing City of Denver talkgroups. Command and/or Operations will be issued a Denver radio.

---

6. **Prepared by (Communications Unit Leader):** Name: [Signature]

ICCS 205 - CONTROLLED UNCLASSIFIED INFORMATION/BASIC
Weather mitigation.

General:
- Rockies Site Services to provide snow plowing and de-icing as needed.
- Educate workers to the symptoms of cold and heat stress, how to prevent cold and heat stress and what to do to help those who are affected.
- Encourage and educate workers select proper clothing for hot, cold, wet or windy conditions.
- Encourage and support frequent breaks where they may change clothing, hydrate and provide self-care.
- Provide additional canopies for shelter.

Cold conditions:
- Provide tent shelter at designated locations.
- Provide heater in tents.
- Provide hats or beanies.
- Encourage appropriate moisture-wicking clothing in layers.
- Consider a 10-minute break every hour at temperatures less than 0°C.

Wet conditions in outdoor, uncovered locations:
- Provide single-use rain ponchos to be worn over other PPE.
- Encourage wearing insulated and waterproof boots.
- Provide water-resistant booties as needed.

### Work/Warm-up Schedule for a 4-hour Shift

<table>
<thead>
<tr>
<th>Air Temp.--Sunny sky</th>
<th>No Noticeable Wind</th>
<th>5 mph Wind</th>
<th>10 mph Wind</th>
<th>15 mph Wind</th>
<th>20 mph Wind</th>
</tr>
</thead>
<tbody>
<tr>
<td>°C (approximate)</td>
<td>°F (approximate)</td>
<td>Maximum Work Period</td>
<td>Number of Breaks</td>
<td>Maximum Work Period</td>
<td>Number of Breaks</td>
</tr>
<tr>
<td>-26 to -28</td>
<td>-15 to -19</td>
<td>(Normal Breaks) 1</td>
<td>75 min.</td>
<td>55 min.</td>
<td>40 min.</td>
</tr>
<tr>
<td>-29 to -31</td>
<td>-20 to -24</td>
<td>(Normal Breaks) 1</td>
<td>75 min.</td>
<td>55 min.</td>
<td>40 min.</td>
</tr>
<tr>
<td>-32 to -34</td>
<td>-25 to -29</td>
<td>75 min.</td>
<td>2</td>
<td>55 min.</td>
<td>3</td>
</tr>
<tr>
<td>-35 to -37</td>
<td>-30 to -34</td>
<td>55 min.</td>
<td>3</td>
<td>40 min.</td>
<td>4</td>
</tr>
<tr>
<td>-38 to -39</td>
<td>-35 to -39</td>
<td>40 min.</td>
<td>4</td>
<td>30 min.</td>
<td>5</td>
</tr>
<tr>
<td>-40 to -42</td>
<td>-40 to -44</td>
<td>30 min.</td>
<td>5</td>
<td>Non-emergency work should cease</td>
<td></td>
</tr>
<tr>
<td>-43 &amp; below</td>
<td>-45 &amp; below</td>
<td>Non-emergency work should cease</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule applies to any 4-hour work period with moderate to heavy work activity; with warm-up periods of ten (10) minutes in a warm location and with an extended break (e.g., lunch) at the end of the 4-hour work period in a warm location.
# Clinical Supplies

<table>
<thead>
<tr>
<th>Supply</th>
<th>Quantity for Mass Event</th>
<th>Category</th>
<th>Station</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mini-storage for overnight storage (full weekend clinic)</td>
<td>1</td>
<td>Equipment</td>
<td>Other</td>
</tr>
<tr>
<td>Vital Tower</td>
<td>5</td>
<td>Equipment</td>
<td>Response team</td>
</tr>
<tr>
<td>AED</td>
<td>5</td>
<td>Equipment</td>
<td>Response team</td>
</tr>
<tr>
<td>Wheel Chair</td>
<td>2</td>
<td>Equipment</td>
<td>Response team</td>
</tr>
<tr>
<td>Generators</td>
<td>3</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Tents for flaggers</td>
<td>1</td>
<td>Equipment</td>
<td>Pre-registration</td>
</tr>
<tr>
<td>Tent (100x40) for registration area</td>
<td>1</td>
<td>Equipment</td>
<td>Registration</td>
</tr>
<tr>
<td>Tents for vaccination area (10x10)</td>
<td>16</td>
<td>Equipment</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Tent for registration Snafu area (10x10)</td>
<td>1</td>
<td>Equipment</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Tents for observation area (10x20)</td>
<td>2</td>
<td>Equipment</td>
<td>Observation</td>
</tr>
<tr>
<td>Tents for staff break area (15x25)</td>
<td>2</td>
<td>Equipment</td>
<td>Other</td>
</tr>
<tr>
<td>Tent for pharmacy (15x25)</td>
<td>1</td>
<td>Equipment</td>
<td>Other</td>
</tr>
<tr>
<td>Tent for incident command (15x25)</td>
<td>1</td>
<td>Equipment</td>
<td>Other</td>
</tr>
<tr>
<td>Tent for media (10x10)</td>
<td>1</td>
<td>Equipment</td>
<td>Other</td>
</tr>
<tr>
<td>Extension Cord</td>
<td>10</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Storage for overnight storage (full weekend clinic)</td>
<td>1</td>
<td>Equipment</td>
<td>Other</td>
</tr>
<tr>
<td>Surge Protector</td>
<td>40</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Traffic Cones</td>
<td>300</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Traffic Cones</td>
<td>300</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>LED Trailer-held light signs</td>
<td>3</td>
<td>Equipment</td>
<td>Other</td>
</tr>
<tr>
<td>Generators</td>
<td>4</td>
<td>Equipment</td>
<td>TBD</td>
</tr>
</tbody>
</table>
## Clinical Supplies

<table>
<thead>
<tr>
<th>Supply</th>
<th>Quantity for Mass Event</th>
<th>Category</th>
<th>Station</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clipboards</td>
<td>30</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Radios</td>
<td>50</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Portable Heaters</td>
<td>36</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Tables (High and Low)</td>
<td>35</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Chairs (High and Low)</td>
<td>130</td>
<td>Equipment</td>
<td>All</td>
</tr>
<tr>
<td>Shredder Receptacles</td>
<td>2</td>
<td>Equipment</td>
<td>Documentation</td>
</tr>
<tr>
<td>Meals and snacks for staff</td>
<td>300</td>
<td>Food and nutrition</td>
<td>Other</td>
</tr>
<tr>
<td>Snacks for patients</td>
<td>100</td>
<td>Food and nutrition</td>
<td>Response team</td>
</tr>
<tr>
<td>Laptops</td>
<td>50</td>
<td>IT</td>
<td>All areas</td>
</tr>
<tr>
<td>Carts</td>
<td>20</td>
<td>IT</td>
<td>Registration</td>
</tr>
<tr>
<td>iPad</td>
<td>4</td>
<td>IT</td>
<td>Test documentation options for registration and vaccine</td>
</tr>
<tr>
<td>Cisco Meraki</td>
<td>4</td>
<td>IT</td>
<td>Registration, Vaccination, Incident Command/Pharmacy, Observation</td>
</tr>
<tr>
<td>Power Strips/Surge</td>
<td>40</td>
<td>IT</td>
<td>For non-cart areas (IC, Obs, Vaccination, Pharmacy)</td>
</tr>
<tr>
<td>Verizon Cell Solution</td>
<td>2</td>
<td>IT</td>
<td>All</td>
</tr>
<tr>
<td>Snow Removal</td>
<td>n/a</td>
<td>Other</td>
<td>N/A</td>
</tr>
<tr>
<td>Safety Vests</td>
<td>300</td>
<td>Other</td>
<td>All</td>
</tr>
<tr>
<td>Bathrooms</td>
<td>8</td>
<td>Other</td>
<td>N/A</td>
</tr>
<tr>
<td>Golf Carts</td>
<td>9</td>
<td>Other</td>
<td>Rx, IT, documentation</td>
</tr>
<tr>
<td>Garbage Collection/Waste Disposal</td>
<td>N/A</td>
<td>Other</td>
<td>All</td>
</tr>
<tr>
<td>Pfizer vaccines</td>
<td>10,000</td>
<td>Pharmaceutical</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Ancillary Kit and Supplies</td>
<td>As provided</td>
<td>Pharmaceutical</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Cool cubes</td>
<td>3</td>
<td>Pharmaceutical</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Refrigerator/Freezer</td>
<td>As provided</td>
<td>Pharmaceutical</td>
<td>Rx</td>
</tr>
<tr>
<td>Transportation of vaccine</td>
<td>As provided</td>
<td>Pharmaceutical</td>
<td>Rx</td>
</tr>
<tr>
<td>Hypersensitivity Box</td>
<td>5</td>
<td>Pharmaceutical</td>
<td>Rx</td>
</tr>
<tr>
<td>Alcohol Spray bottles</td>
<td>5</td>
<td>Pharmaceutical</td>
<td>Rx</td>
</tr>
<tr>
<td>3 mL Luer Lock Syringe (NS Batch Syringes)</td>
<td>2,100</td>
<td>Pharmaceutical</td>
<td>Rx</td>
</tr>
<tr>
<td>23G IV Needles (NS Batch Syringes)</td>
<td>2,100</td>
<td>Pharmaceutical</td>
<td>Rx</td>
</tr>
<tr>
<td>Way Finding Signage</td>
<td>1</td>
<td>Signage</td>
<td>All</td>
</tr>
<tr>
<td>Exterior Signage</td>
<td>1</td>
<td>Signage</td>
<td>All</td>
</tr>
<tr>
<td>Patient packets (printing)</td>
<td>10,000</td>
<td>Signage</td>
<td>Pre-registration</td>
</tr>
<tr>
<td>Sharps Container- large mouth, S64</td>
<td>4</td>
<td>Supplies</td>
<td>Rx</td>
</tr>
<tr>
<td>Biogel gloves (6) - Box Count</td>
<td>5</td>
<td>Supplies</td>
<td>Rx</td>
</tr>
</tbody>
</table>
## Clinical Supplies

<table>
<thead>
<tr>
<th>Supply</th>
<th>Quantity for Mass Event</th>
<th>Category</th>
<th>Station</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biogel gloves (7) - Box Count</td>
<td>5</td>
<td>Supplies Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>Biogel gloves (8) - Box Count</td>
<td>5</td>
<td>Supplies Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>Covidien Chemo Mats</td>
<td>5</td>
<td>Supplies Rx</td>
<td>Rx</td>
</tr>
<tr>
<td>Needles (Additional Doses) - Case count</td>
<td>3</td>
<td>Supplies Rx</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Syringes (Additional Doses) - Case count</td>
<td>3</td>
<td>Supplies Rx</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Purple top Wipes -- Case count</td>
<td>11</td>
<td>Supplies Rx</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Gloves (L) -- Box count</td>
<td>27</td>
<td>Supplies Vaccination</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Gloves (M) -- Box count</td>
<td>40</td>
<td>Supplies Vaccination</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Gloves (S) -- Box count</td>
<td>17</td>
<td>Supplies Vaccination</td>
<td>Vaccination</td>
</tr>
<tr>
<td>X-Large Gloves -- box count</td>
<td>6</td>
<td>Supplies Vaccination</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Band-Aid -- Case count</td>
<td>3</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>2x2 Gauze -- Pack count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Alcohol Prep Pads -- Case count</td>
<td>7</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Paper tape -- Box count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Hand Sanitizer Pump -- Case count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Isolation Gown -- Case count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>N95 - Box count</td>
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<td>Supplies Vaccination</td>
<td>Vaccination</td>
</tr>
<tr>
<td>N95s - Box count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Glasses -- Each count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Face Shield -- Each count</td>
<td>160</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Interpreter Mask -- Each count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Visitor Masks -- Each count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Face Mask -- Box count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Sharps Container Services/ Biomedical Waste</td>
<td>25</td>
<td>Supplies Vaccination</td>
<td>Vaccination</td>
</tr>
<tr>
<td>Sticky notes - Box count</td>
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<td>Vaccination</td>
</tr>
<tr>
<td>Insta-hot Hand warmers</td>
<td>1,000</td>
<td>Supplies Vaccination</td>
<td>Registration, Vaccination, Incident Command</td>
</tr>
<tr>
<td>Writing pens - Box count</td>
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<td>Registration, Vaccination, Incident Command</td>
</tr>
<tr>
<td>Documentation folders</td>
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<td>Registration, Vaccination, Incident Command</td>
</tr>
<tr>
<td>Wire Racks for storage</td>
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<td>UCH Health Storage</td>
<td>Storage</td>
</tr>
<tr>
<td>Translators iPad</td>
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<td>UCH Health Registration</td>
<td>Registration</td>
</tr>
<tr>
<td>Plastic pallet</td>
<td>4</td>
<td>UCH Health Storage</td>
<td>Storage</td>
</tr>
</tbody>
</table>
Staff Checklists

Opening Checklist—Logistics Chief:
- Arrive on-site at 27th and Blake Street.
- Unlock key box from storage unit (combination XXXXX).
- Confirm storage unit keys.
- Confirm golf cart and utility cart keys.
- Unlock storage unit.
- Move empty pharmacy storage wire racks to pharmacy tent.
- Check in with Incident Commander.
- Check in with Section Chiefs for any additional items.
- Get radios and vests from incident command.
- Greet Supply Leads and begin any briefing.
- Help pull supply totes for distribution, check for completeness.
- Attend any IC meetings throughout.

Closing Checklist—Logistics Chief:
- Direct Supply Leads to help break down supplies at vaccine tents.
- Gather totes at storage unit.
- Inventory and reset totes for next shift/day.
- Gather any remaining supplies/equipment to storage unit.
- Collect keys to rental carts.
- Collect radios.
- Drive carts to parking garage for storage (carts are gas powered, so no charge needed).
- Attend event debrief.
- Return Section Chief vest/radios.
- Lock storage unit.
- Return key to lock box.

Opening Checklist—Supply Lead:
- Arrive on-site at 27th and Blake Street.
- Check in with Logistics Chief for briefing.
- Get radios and vests from Logistics Chief.
- Help pull supply totes for distribution, check for completeness.
- Distribute supply totes to vaccine tents.
- Restock supply cart with outlined supplies.
- Grab ad hoc supplies from storage unit as needed.

Closing Checklist—Supply Lead:
- Gather up and break down supplies at vaccine tents.
- Gather totes at storage unit.
- Inventory and reset totes for next shift/day.
- Gather any remaining supplies/equipment in storage unit.
- Turn in keys to rental carts.
UCHealth is pleased to offer you the first of two doses of the COVID-19 vaccine today. Thank you for taking a moment to read through these documents. They outline the important steps you need to follow.

When you arrive:
• Please wear a mask the entire time. Everyone in your vehicle also needs to wear a mask the entire time.
• Please remain in your vehicle the entire time.
• Please drive slowly and carefully and follow the signs.
• The vaccine is administered to your upper arm. If you have chosen to receive the vaccine in your left arm, please sit on the driver’s side of the vehicle. If you have chosen your right arm, sit on the passenger side.

At your appointment, you will go through four stations:

1) Appointment verification:
• A UCH eHealth staff member will confirm your scheduled appointment.
• Please remove any jackets, sweaters or other bulky clothing items that cover your arm.
• You will be directed to one of six lanes (A, B, C, D, E or F). Drive slowly until you are asked to stop, and then put your car into park.

2) Registration:
• A UCH eHealth patient representative will confirm you have completed your eCheck-in through your My Health Connection account. If you have not done this, please do so. If you need help, a staff member will assist you.

3) Vaccine administration:
• A UCH eHealth clinician will administer the shot and give you your CDC COVID-19 vaccination record card.
• Please bring your COVID-19 vaccination record card with you to your second dose appointment.

4) Well-being and discharge:
• You will be directed to the observation area where you will park your car and remain for 15 minutes. Clinicians will monitor you for any adverse reactions.
• You will be directed when to leave.

During your 15-minute well-being period:
• Keep your doors unlocked in case of an emergency.
• You may keep your car running, but put it in park.
• If you have shortness of breath, wheezing, itching, lightheadedness or dizziness, or tongue or lip swelling, honk your vehicle’s horn and turn on your flashers/hazard lights to indicate you need medical help.
• Read through the CDC document provided to you. This document outlines what to expect after you receive the COVID-19 vaccine, including common side effects.

After you receive a COVID-19 vaccine and you think you might be having a severe allergic reaction after leaving the vaccination site, seek immediate medical care by calling 911.

We look forward to seeing you in 21 days for your second COVID-19 vaccine dose. You are already scheduled for your appointment and details are in your My Health Connection account.

Currently, only those with appointments can receive the vaccine. Please visit UCH eHealth.org/covidvaccine for information on how to receive a vaccine.
A UCHealth le complace hoy ofrecerle las dos primeras dosis de la vacuna contra el COVID-19. Gracias por tomarse un momento para leer estos documentos. Estos describen los pasos importantes que debe seguir.

Al llegar:
• Por favor, use una mascarilla todo el tiempo. Todos los ocupantes de su vehículo deben usar una mascarilla todo el tiempo.
• Por favor, permanezca en su vehículo todo el tiempo.
• Conduzca lenta y cuidadosamente y siga todas las señales de tránsito.
• La vacuna se le administrará en el brazo superior. Si elige recibir la vacuna en el brazo izquierdo, por favor, siéntese en el lado del conductor del vehículo. Si ha elegido el brazo derecho, siéntese en el lado del pasajero.

Al llegar a su cita, pasará por cuatro estaciones:

1) Verificación de la cita:
• Un miembro del personal de UCHealth confirmará su cita programada.
• Por favor, quitese cualquier abrigo, suéter o prenda de vestir abultada que le cubra el brazo.
• Se le dirigirá a una de seis vías (A, B, C, D, E ó F). Conduzca lentamente hasta que se le pida que se detenga y seguidamente estacione su automóvil.

2) Registro:
• Un representante de pacientes de UCHealth confirmará que haya completado su registro electrónico a través de su cuenta de MyHealth Connection. Si no lo ha hecho, por favor, hágalo. Si necesita ayuda, un miembro del personal le ayudará.

3) Administración de la vacuna:
• Un médico clínico de UCHealth le administrará la inyección y le proporcionará su tarjeta de registro de vacunación contra el COVID-19 del CDC.
• Por favor, traiga su tarjeta de registro de vacunación contra el COVID-19 para su cita de segunda dosis.

4) Bienestar y alta:
• Se le dirigirá al área de observación donde estacionará su automóvil y permanecerá durante 15 minutos. Los médicos clínicos le monitorearán para detectar cualquier reacción adversa.
• Se le indicará cuándo puede partir.

Durante su período de espera de 15 minutos para controlar su bienestar:
• Mantenga sus puertas sin seguro en caso de una emergencia.
• Puede mantener su automóvil en funcionamiento, pero dentro del estacionamiento.
• Si le falta el aire, tiene resuello, comezón, aturdimiento o mareo, o se le inflama la lengua o los labios, suene su bocina y encienda las luces de emergencia de su automóvil para indicar que necesita ayuda médica.
• Lea todo el documento del CDC que se le proporcionó. Este documento describe qué es lo que puede esperar después de recibir la vacuna contra el COVID-19, e incluye los efectos secundarios comunes.

Después de que reciba su vacuna contra el COVID-19, si considera que está teniendo una reacción alérgica severa después de dejar el centro de vacunación, busque ayuda médica inmediata, llamando al 911.

Esperamos verle en 21 días para su segunda dosis de la vacuna COVID-19. Ya tiene su cita programada y los detalles se encuentran en su cuenta de MyHealth Connection. Actualmente, sólo las personas que tengan cita pueden recibir la vacuna. Visite UCHealth.org/covidvaccine para obtener información sobre cómo recibir la vacuna.
## Comprehensive List of Signage

### Event/Rental Vendor

<table>
<thead>
<tr>
<th>Sign</th>
<th>Quantity</th>
<th>Specs</th>
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<tbody>
<tr>
<td>Weighted sign holders</td>
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<td>28 x 44</td>
</tr>
<tr>
<td>A-Frames</td>
<td>29</td>
<td>22 x 28</td>
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### Rockies

<table>
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<th>Specs</th>
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</thead>
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<tr>
<td>A-Frames</td>
<td>16</td>
<td>24 x 36</td>
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<tr>
<td>Street Signs</td>
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<td>12 x 14</td>
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### FedEx

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<tbody>
<tr>
<td>A-Frames</td>
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### Owned Signage

<table>
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<tr>
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<tbody>
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<td>A-Frames</td>
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</table>

### Outstanding

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<tbody>
<tr>
<td>Row Signage</td>
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</table>
Sample AM Radio Script

Welcome to the UCHealth, Colorado Rockies COVID-19 vaccine clinic. This clinic is appointment-only. Please drive slowly and wear your mask at all times. You will be guided through 4 stations during your visit:

- At the first station, UCHealth personnel will confirm your appointment. As you are waiting your turn, please prepare for your shot by removing any clothing that is covering your shoulder and upper arm.
- At station 2, a UCHealth patient representative will confirm you have completed your echeck-in through your My Health Connection account and can assist you if you need support.
- Once checked in, you will be guided to a vaccine station where a UCHealth clinician will administer your shot. Please make sure you put your car in park during vaccination. You will receive your CDC COVID-19 vaccination record card. Hang on to it and bring it with you to your second vaccination appointment.
- Next, you will have the option to exit the clinic or wait in the well-being and discharge area where we will have medically trained personnel onsite. If you would like to exit, stay in the roadway and follow exit signs. If you would like to be observed, follow flaggers into the parking lot. If you decide to be observed, please make sure your doors are unlocked. If you are having shortness of breath, wheezing, itching, lightheadedness or dizziness, tongue or lip swelling, please honk your horn and turn on your hazard lights to alert our onsite staff. Once 15 minutes has passed since your vaccination, parking lot staff will flag you toward the exit.

Even after you get your vaccine, please remember to wear a mask, wash your hands regularly and stay socially distant from others. Together, we can fight COVID-19. And congratulations on getting your vaccine. We appreciate you doing your part to fight this pandemic!

There are additional instructions in Spanish coming up. Please stay tuned to AM 1630.
Bienvenido a la clínica Colorado Rockies de UCHealth para la vacunación de COVID 19.
Esta clínica funciona solamente con cita previa. Por favor, conduzca despacio y lleve la mascarilla puesta en todo momento.

Durante su visita, lo van a guiar por 4 puntos de parada:

- En el primer punto de parada, miembros del personal de UCHealth van a confirmar su cita. Mientras espera, prepárese para la inyección quitándose o retirando cualquier prenda de ropa que le cobra el hombro y la parte de arriba del brazo.
- En el punto número 2, un representante del paciente de UCHealth confirmará que haya completado el registro electrónico a través de su cuenta de My Health Connection y podrá ayudarlo en caso de que sea necesario.
- Una vez registrado, lo dirigirán a un punto de vacunación donde el personal clínico de UCHealth le administrará la inyección. Asegúrese de colocar su vehículo automático en posición de estacionamiento (park, en inglés) mientras le ponen la vacuna. Le van a dar la tarjeta de registro de vacunación del CDC. Guárdela y tráigala cuando venga a la cita de la segunda dosis.
- A continuación, tendrá la opción de irse de la clínica o esperar en la zona donde el personal con formación médica estará presente y para asegurarse de que se encuentra bien y darle el alta. Si prefiere irse, permanezca en la carretera y siga las indicaciones hacia la salida. Si decide que lo observen, siga las banderillas hasta llegar al estacionamiento y no olvide dejar el seguro de las puertas abierto. Si tiene dificultad para respirar, sibilancias, comezón, está aturdido o mareo, se le hinchan la lengua o los labios, toque la bocina y prenda las luces de avería para alertar al personal presencial. Una vez que hayan pasado 15 minutos desde la vacunación, el personal del estacionamiento lo dirigirá a la salida.

Incluso después de haber recibido la vacuna, acuérdate de llevar mascarilla, lavarse las manos con frecuencia y mantener la distancia social. Juntos podemos hacerle frente al COVID 19 y le damos la enhorabuena por haberse vacunado ¡Aplicamos muchísimo su colaboración en la lucha contra la pandemia!

Pronto vendrán más instrucciones en inglés. Por favor, siga en la sintonía de AM 1630.
<table>
<thead>
<tr>
<th>Event Type</th>
<th>Duration</th>
<th>Details</th>
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</thead>
<tbody>
<tr>
<td>1,000-person pilot</td>
<td>1 day</td>
<td>Order vaccines, Vaccines delivered, Go/no-go decision, Patient schedules open, Staff assigned, Staff training, Setup tents, equipment, signage, cones</td>
</tr>
<tr>
<td>10,000-person mass event</td>
<td>2 days</td>
<td>Order vaccines, Implement optimizations, Vaccines delivered, Go/no-go decision, Patient schedules open, Staff assigned, Staff training, Setup tents, equipment, signage, cones</td>
</tr>
</tbody>
</table>

**UCHealth COVID-19 Vaccinations at Coors Field**

1/12 1/13 1/14 1/15 1/16 1/17 1/18 1/19 1/20 1/21 1/22 1/23 1/24 1/25 1/26 1/27 1/28 1/29 1/30 1/31 2/1 2/2
Mass Vaccination Staffing Sign-Up

This event will be held at one of the parking lots at Coors Field. The event will be held outdoors. Please plan accordingly with warm clothing and comfortable walking shoes. Once you have completed this form you will automatically be added to the UCHMG Labor Pool Microsoft Team so that you can sign up for shifts through Teams Shifts. Please ensure you have read the role requirements and descriptions prior to signing up for any shifts. All roles will require working outdoors. Some roles will require standing and walking most of the day.

Hi Kyle, when you submit this form, the owner will be able to see your name and email address.

* Required

1. Please enter your current role.
   (RN, MA, PAR, etc)

   Enter your answer

2. Please provide your mobile phone number. *

   Enter your answer

3. Please provide your manager/leader's name. *

   Enter your answer

   ☐ Send me an email receipt of my responses

   Submit

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