

VFC REVIEWER CHECKLIST: PRE, DURING, AND POST-VISIT

VFC PIN: _____ Format of visit: In-Person: _____ Virtual: _____ Hybrid: _____

Date of In-Person or Virtual Visit: _____ If Hybrid*, date of virtual portion: _____

*For hybrid visits, perform virtual portion PRIOR to the in-person portion & both must occur within 10 business days. In PEAR, document the date as the date scheduled for the IN-PERSON portion to occur.

Verify Visit Eligibility & Contact Provider

1. Does this provider have vaccine on-site? YES ___ NO ___ If "No", provider is not eligible for a visit
2. Date of last visit: _____ (this is also needed to identify how far back to review borrows)
3. Has the appropriate time-frame been met (11 months minimum since last visit)? YES ___ NO ___
4. Verify provider key staff below: Compare between databases
5. Send provider MI Site Visit Confirmation letter which includes the [Site Visit Preparation Checklist](#)

What Do I Need to Know?

6. Names and emails of key staff*

Primary: _____

Backup: _____

Medical director: _____

*Compare contact info among VFC Enrollment Tab, PEAR, and verify at visit in Q 1.2

7. Review previous visit(s): Be prepared to identify recurring issues to develop custom follow-up actions
8. Does provider have Annual Training documented in PEAR in the past 12 months? YES ___ NO ___
9. What is your state/territory vaccine administration fee cap? [Q2.3] **\$23.03**
10. **Total cost of vaccine shipped** to the provider in the last calendar year [Q 5.1]? This appears in PEAR when you search the PIN. If new provider, either request shipment data from MDHHS VFC staff or use the cost of 10 VFC doses of each of the ACIP-recommended vaccines (approximately \$7,000).

Number of doses: _____ Cost: \$ _____

11. Review vaccine returns and/or wastage over the last 12 months (recommended) [Q 5.1]
12. Review vaccine orders over the last 12 months (recommended) [Q 5.1]

Notes: _____

MCIR Reports to Generate & Review

Provider Profile

From the provider's MCIR site, do one of the following:

- "Reports" → "Vaccine" → "Provider Profile Data" – 12 months
- Page 6 of the Provider Enrollment PDF

Doses Administered

From the provider's MCIR: "Reports" → "Vaccine" → "Doses Administered Report" – 12 months

- May also choose to generate a shorter timeframe (such as 1 month)

Physical Inventory Report


From the provider's MCIR: "Reports" → "Inv" → "Physical Inventory Report" (generate as close to date of visit as possible)

Chart Pull

From the LHD MCIR: "Reports" → "VFC Site Visit Chart Pull" (keep default setting)

13. Is this a provider an approved **specialty provider**? YES* ____ NO ____

a. In Provider's Enrollment PDF, or from provider's site: "Edit my Site" → "VFC" tab → "Enrollment"

E Ordering	Shipping	Storage	Enrollment
Enroll Date 02/23/1999	Renewal Date 02/04/2019	<input type="checkbox"/> Check, if considered a Specialty Provider	

***Specialty Providers** either (1) serve a defined population based on specialization (Ex: OB/GYN, STD clinic, etc.); (2) serve a specific age group within the general population of children 0-18; or (3) are a pharmacy or mass vaccinator that offers only influenza vaccine.

*If "Yes", indicate any notes about specialty provider (i.e. which vaccines they do or do not stock):

14. Does the DAR and PIR reflect populations identified on the Provider Profile? [Q 5.1] YES ____ NO ____

What Do I Need to Bring*?

* = **Necessary to bring. Other items are optional. Ensure provider is aware of how to locate materials online at www.michigan.gov/vfc. Additionally, the below links are provided in the template for follow-up letters to providers.**

- *Technology: computer, wi-fi device, charger, site reviewer data logger, etc.
- *PEAR Site Visit Reviewer Guide: generated from PEAR "documents" tab
 - *If the visit is being done on a provider that is NOT in PEAR—print a paper Follow-up Plan as well
- *Acknowledgment of Receipt form: generated from PEAR "documents" tab (print 2 if preferable)
- *MCIR Reports generated above
- *MCIR VFC Provider Enrollment PDF
- *MDHHS Site Visit Reviewer "Documentation Companion" (number 4 in toolkit)
- *MDHHS Section 7 Supplement for Awardee-Specific Requirements (number 5 in toolkit)
- *Master list of *Michigan-specific* VIS [publication dates](#) [Q3.7]
- [MDHHS Vaccine Borrowing Log](#) [Q3.4]
- Labels for electric outlets/circuit breakers: "[Do Not Unplug](#)" signs [Q4.10]
- Any informative handouts: provider meeting upcoming, [INE brochure](#), business cards

During Visit Reminders

- Don't forget! Sign acknowledgement of receipt—2 copies if preferable
- Remind provider of PEAR due dates & follow-up phone calls for IQIP check-ins (2, 6, and 12 months)

Post-Visit Reminders

- PEAR: Complete & submit VFC PEAR charting same day. Save pdf **follow-up plan** to email provider
- PEAR: Scan Acknowledgement of Receipt, Upload into VFC PEAR (prompted after you "submit")
- PEAR: If the visit can be counted as annual training—designate this under "Configuration"
- Email Provider: Site Visit Follow-up Plan exported from PEAR and Follow-up Letter
 - If one copy of Acknowledgement of Receipt signed, attach to follow-up email for provider copy