

Tip Sheet for Documenting Private Inventory Concerns Related to COVID-19 Vaccine and RSV Inventory in PEAR

Purpose: This tip sheet is intended to provide guidance to Local Health Department (LHD) VFC Site Reviewers on documenting COVID-19 vaccine and RSV inventory concerns within the PEAR module during a VFC Compliance Visit. This tip sheet is for LHD use only.

Pear Question 6.1 – Inventory: Inventory Comparison

If a provider office does not carry private COVID-19 vaccine, private RSV monoclonal antibody, or private Maternal RSV vaccine the VFC Site Reviewer will select the best response related to private vaccine inventory concerns.

6.1 INVENTORY COMPARISON

Note to the Reviewer: (Collapse...)

Underlined questions are directed toward the provider and meant to be asked verbatim to the provider or their staff. Asking questions verbatim will assist in avoiding leading questions. Questions in plain font are directed to the reviewer and are meant to be assessed and answered by the reviewer based on their observations at the time of the visit.

- CDC recommends that providers maintain a minimum four-week supply of inventory.
- **For COVID-19 and nirsevimab vaccines only:** In locations where providers report that demand for COVID-19 and nirsevimab vaccines are low, awardees are to allow providers to order the minimum packaging of these vaccines as feasible. In these cases, site visit reviewers may observe that COVID-19 and nirsevimab inventory is a much lower quantity than other ACIP-recommended vaccines.
- If a doorless/vending style unit is in use, ask provider to print out a vaccine inventory report to verify existing supply of vaccines.
- For this question, do not take into account vaccine types the provider does not order. Make sure overall the vaccines in the provider's storage units are available in sufficient amounts (by fund source) to serve the patient populations reported on the Provider Profile.
- Universal awardees: Reviewers should select the first response option if the provider inventory is sufficient to serve the provider's patient population.

Inspect storage units to determine if existing supply of vaccines proportionately mirrors populations served as identified on the provider profile. Choose the most accurate statement below.

The current vaccine inventory proportionately reflects the populations identified on the current provider profile

Only public stock is insufficient

Only private stock is insufficient

Both public and private stock are insufficient

Other

Review CDC Requirement:

VFC Providers must order and stock routine vaccines in accordance with their most recent provider profile in order to prevent missed vaccination opportunities. Having sufficient amounts of all stocks prevents the inadvertent use of VFC vaccines for non-VFC-eligible patients and vice versa.

SUBMIT

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SUBMIT

Pear Question 6.1A - Problem Analysis

If noncompliance has been identified for private COVID-19 vaccine, private RSV monoclonal antibody, or private Maternal RSV vaccine the VFC Site Reviewer will complete the following fields in PEAR:

- a.) Mark the required immediate action (Step 2 in picture below) regarding discussion with the provider office on resolving stock shortage and inventory maintenance.
- b.) Select the most applicable reasons for inventory noncompliance.
- c.) Must select "Other (Explain)" and enter the following statement: MDHHS has allowed VFC providers to temporarily suspend ordering of [indicate COVID-19 vaccine, Nirsevimab RSV monoclonal antibody, Maternal RSV vaccine] for private inventory due to [indicate reason(s)]...

Note: reasons may include but not limited to:

- Decreasing demand.
- Minimum ordering quantities too large for demand.
- Health system policy prohibiting product availability.

6.1 INVENTORY COMPARISON				
STEPS TO TAKE ON-SITE				
STEP 1: MAKE SURE THE PROVIDER UNDERSTANDS THE REQUIREMENT AND ITS IMPACT ON THE PROGRAM				
VFC Providers must order and stock routine vaccines in accordance with their most recent provider profile in order to prevent missed vaccination opportunities. Having sufficient amounts of all stocks prevents the inadvertent use of VFC vaccines for non-VFC-eligible patients and vice versa.				
STEP 2: COMPLETE ALL REQUIRED ON-SITE ACTIONS				
<input checked="" type="checkbox"/> Discuss with the provider alternatives for resolving the stock shortage and maintaining proper inventory. Determine whether the provider should change the provider profile or adjust ordering				
STEP 3: CONDUCT PROBLEM ANALYSIS				
As part of the site visit, reviewers may be required to conduct a "problem analysis" to assess and understand the reason(s) why a provider office is noncompliant with VFC program requirements. Reviewers can select up to three reasons they believe most contribute to the noncompliance issue; at least one option must be selected. Please review all options carefully and only select "Other" if it is determined that the identified reason does not fit into one of the 10 pre-defined reasons; then, provide a succinct label for the "Other" reason for the observed compliance issue.				
Non-compliant sub-questions				
Q6.1A Inspect storage units to determine if existing supply of vaccines proportionately mirrors populations served as identified on the provider profile.	<input type="checkbox"/> Does not understand rationale of requirement <input type="checkbox"/> Competing job assignments/workload <input type="checkbox"/> Culture of apathy regarding requirements from provider location/organization <input type="checkbox"/> Lack of (or insufficient) training of staff <input type="checkbox"/> Staff turnover and/or inexperienced staff	<input type="checkbox"/> Lack of <u>employee</u> concern for compliance <input type="checkbox"/> Lack of (or insufficient) staff to perform required duties <input type="checkbox"/> Budget limitations (e.g., for purchase of required equipment) <input type="checkbox"/> Lack of (or insufficient) processes/protocols <input type="checkbox"/> Simple mistakes/human error		
	<input checked="" type="checkbox"/> Other (Explain)	MDHHS has allowed VFC providers to temporarily suspend ordering of (indicate COVID-19 vaccine and/or Nirsevimab monoclonal antibody) for private inventory due to...		
OPTIONAL: Provide a clear explanation of the findings associated with the reason(s) selected above				
STEP 4: REVIEW AND/OR ADD FUTURE FOLLOW-UP				
Upon completing on-site follow-up and determining the issues, review future actions and add follow-up as necessary to address recurring or severe issues.				
Due Date	Follow-up Type	Action Details	Source	Additional Instruction
04/03/2024	Document Review	Provider - Two weeks: Submit an updated Provider Profile AND/OR documentation verifying there is sufficient public and private inventory (as applicable).	CDC	Add Additional Instruction
04/03/2024	Other Contact	Reviewer - Within two weeks: Notify the immunization program to monitor provider orders to ensure there is sufficient public and private inventory (as applicable [i.e., per provider profile]).	CDC	N/A
<input type="button" value="ADD CUSTOM FOLLOW-UP"/>				

Note: PEAR Question 6.2 strictly relates to VFC, not private, inventory concerns for Routine and Non-Routine vaccine.

Once the VFC Compliance Visit has been submitted, the completed questionnaire will display the Follow-Up Action List Table with Corrective Actions (CA) associated to private inventory concerns. Examples of CAs related to private inventory are displayed below. VFC Site Reviewers will document the date the CA was completed.

FOLLOW-UP ACTION LIST TABLE									SAVE
Due Date	Content Area	Follow-up Type	Action Details	Source	Provider Action Completed on:	Reviewer Action Completed on:	Add or Edit Follow-up	Add or View Attachment	
03/20/2024	INVENTORY COMPARISON	Immediate Action	Discuss with the provider alternatives for resolving the stock shortage and maintaining proper inventory. Determine whether the provider should change the provider profile or adjust ordering	CDC	N/A	3/20/2024	Add follow-up	Add Attachment	
04/03/2024	INVENTORY COMPARISON	Document Review	Provider - Two weeks: Submit an updated Provider Profile AND/OR documentation verifying there is sufficient public and private inventory (as applicable). Add Additional Instruction	CDC	Select Complete Date	Select Complete Date	Add follow-up	Add Attachment	
04/03/2024	INVENTORY COMPARISON	Other Contact	Reviewer - Within two weeks: Notify the immunization program to monitor provider orders to ensure there is sufficient public and private inventory (as applicable [i.e., per provider profile]).	CDC	N/A	Select Complete Date	Add follow-up	Add Attachment	

Once the CAs related to private inventory are resolved, the VFC Site Reviewer will update the Issue Resolution Status to “Resolved” and enter the comment: MDHHS has given provider allowance to postpone adding [indicate COVID-19 vaccine, Nirsevimab RSV monoclonal antibody, Maternal RSV vaccine] to their private inventory.

FOLLOW-UP SUMMARY					SAVE
Question	Content Area (Click link to view requirement)	Follow-up Status	Issue Resolution Status	Comment: (Only required if escalated)	
6.1	INVENTORY COMPARISON	Incomplete	Select		



6.1	INVENTORY COMPARISON	Completed	Resolved	MDHHS has given provider allowance to postpone adding [indicate COVID-19 vaccine, Nirsevimab RSV monoclonal antibody, Maternal RSV vaccine] to their private inventory.	
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