Providing Vaccinations to Homebound Residents
A RESOURCE FOR PARTNERS
Ohio’s older adults and individuals with disabilities have experienced major disruptions in service during the COVID-19 pandemic. The Regional Rapid Response Assistance Program (R³AP) builds upon existing service delivery structures by committing teams of regional experts to provide vaccine access. The program leverages partnerships with local Aging and Disability Resource Network (ADRN) entities that identify and connect with homebound individuals.

The R³AP assembles teams of experts located in each of the eight Emergency Preparedness Regions designated by the Ohio Department of Health. These experts use a multidisciplinary approach to respond to referrals from ADRN agencies that have identified homebound individuals in need of support. The ADRN agencies analyze issues specific to the populations they serve to understand challenges and identify solutions specific to the individual. The R³AP teams will work with local health experts to mobilize and deploy personnel to vaccinate aging and disabled individuals who are screened and determined to be homebound.

In pursuit of fairness and equity in the distribution of the vaccines, R³AP will deliver vaccines directly to homebound individuals where efficient and equitable access to care has been a challenge. These individuals consistently struggle to access necessary care and services due to a variety of complications including access to transportation, limited mobility, and fragile medical conditions. The ability for the R³AP team to vaccinate individuals in their homes removes these barriers to necessary preventive care.

The Ohio Department of Aging, Ohio National Guard, and Ohio Department of Health will work with local ADRN partners to offer assistance through homebound vaccination visits. This support will help ease the burden for many older adults and individuals with disabilities face challenges registering or obtaining transportation, or who are unable to leave their residence for appointments because of medical conditions. Meeting the vaccination needs of these homebound individuals is essential. The R³AP is founded on the principles of equity, efficiency, experience, engagement, and execution.

Please utilize Ohio’s Homebound Vaccination Playbook to plan vaccinations for those who need additional support. We are on the road back after a difficult year for all Americans. Your dedication and passion are saving lives.
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03  Considerations for COVID-19 Vaccination
04  Homebound Overview
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08  Roles and Responsibilities
14  Appendix and Printable Documents
Considerations for Priority Populations COVID-19 Vaccination

<table>
<thead>
<tr>
<th>EQUITY</th>
<th>Ensure that vaccine allocation does not discriminate against any particular group (e.g., homebound population that may be difficult to reach).</th>
</tr>
</thead>
<tbody>
<tr>
<td>EFFICIENCY</td>
<td>Ensure that vaccines are administered to as many people as possible, in the least time possible, as supply allows.</td>
</tr>
<tr>
<td>EXPERIENCE</td>
<td>Ensure that Ohioans interacting with the vaccine system have a positive experience, both in learning about vaccination and in the actual vaccination process.</td>
</tr>
<tr>
<td>ENGAGEMENT</td>
<td>Address vaccine concerns among priority populations, identifying, tailoring messaging for, reaching, and ultimately influencing those that are not yet committed to receiving a vaccine.</td>
</tr>
<tr>
<td>EXECUTION</td>
<td>Coordinate and make available resources for providers to plan and execute vaccination effectively.</td>
</tr>
</tbody>
</table>
Overview

Homebound individuals are a vulnerable population that may require tailored efforts to special planning and accommodations to support in-home vaccinations. This document offers suggestions for operational planning based on best practices being implemented across Ohio. This is not an exhaustive list.

PLANNING PROCESS

Identify Homebound Individuals

- Compile lists of individuals who may be homebound from local organizations and community-based providers (e.g., local office on aging, home-delivered meal providers, Medicaid waiver programs) and direct consumer inquiries.
- Perform screening (see Appendix A) to determine if individuals will need an in-home vaccination or transportation support to a vaccination location.

Schedule Vaccinations

- Group identified individuals based on geography to minimize travel time.
- Schedule appointments and collect information regarding other members in the household who would like to receive a vaccination (e.g., caregiver, family member).

Administer Vaccination

- Perform in-home vaccine administration, and complete required reporting.
- Refer to Ohio Department of Health and CDC’s published guidance related to in-home vaccination and vaccine handling:
  - https://www.cdc.gov/vaccines/hcp/admin/storage/toolkit/storage-handling-toolkit.pdf
Overview

**KEY STAKEHOLDERS AND ROLES**

*Roles may change in each area based on local needs and resources*

**LOCAL HEALTH DEPARTMENTS**
- Coordinate with partners to prioritize in-home vaccinations.
- Schedule and complete vaccination.

**AREA AGENCIES ON AGING OR LOCAL COUNCILS ON AGING**
- Contribute to or lead identification and screening of homebound individuals.
- Coordinate transportation or other accessibility services for those who can go to an existing clinic site.

**HEALTH SYSTEMS**
- Coordinate or lead end-to-end vaccination process.
- Provide clinicians to perform in-home vaccination.

**EMERGENCY MEDICAL SERVICES**
- Provide vaccination assistance in counties where LHD or health system clinicians need additional support in performing in-home vaccinations.

**HOME HEALTH PROVIDERS**
- Identify homebound individuals among their existing consumers.
- Perform in-home vaccinations in counties where LHD or health system clinicians need additional support.

**VACCINE PRODUCT CONSIDERATIONS**

Ohio providers have used all three vaccine products for in-home vaccinations, and providers are encouraged to select a product that best matches or enables operational planning.

<table>
<thead>
<tr>
<th>Vaccine Product</th>
<th>Dose Vial</th>
<th>Post-Puncture Storage</th>
</tr>
</thead>
</table>
| **PFIZER-BIONTECH**
2-dose series | 6-dose vial | Store between 2 and 25 degrees Celsius (36 and 77 degrees Fahrenheit) up to 6 hours. |
| **MODERNA**
2-dose series | 10-dose vial | Store between 2 and 25 degrees Celsius (36 and 77 degrees Fahrenheit) up to 12 hours. |
| **JOHNSON & JOHNSON**
(Janssen)
Single dose | 5-dose vial | Keep the vaccine between 2 and 8 degrees Celsius (36 and 46 degrees Fahrenheit) for up to 6 hours or at room temperature (up to 25 degrees C or 77 degrees F) for 2 hours. |
Overview

**SCREENING TOOL**

Homebound persons include those who need the help of another person or medical equipment such as crutches, a walker, or a wheelchair to leave their home, or their medical provider believes that their health or illness could get worse if they leave their home, therefore they typically do not leave their home.

Homebound vaccines are reserved for residents with no other resource options. Use this flowchart to determine if an individual needs in-home vaccination or can attend a clinic.

**Questionnaire**

- **Do you need the help of another person or medical equipment (e.g., crutches, a walker, or a wheelchair) to leave the home?**
  - **NO**
  - **YES**
    - **Do you have a family member and/or caretaker that can help you visit an existing clinic to get the vaccine?**
      - **NO**
      - **YES**
        - **Do you need an ambulance (compared to an ambulette) to get to a clinic?**
          - **NO**
          - **YES**
            - **Ask about need for transportation support**
        - **In-home vaccination candidate**
      - **NO**
    - **YES**
      - **Does your medical provider believe that your health or illness could get worse if you leave your home?**
        - **NO**
        - **YES**
          - **Ask about need for transportation support**
Individual (Ohio resident) contacts agency for assistance with locating a vaccination site OR agency initiates direct outreach, based on their knowledge of the individual through other programs/community resources.

If vaccination is desired, agency uses the screening tool to determine if the individual can attend a community clinic or is homebound and needs an in-home vaccination.

If individual is able to attend a community clinic, agency helps schedule the appointment and coordinate transportation, if needed.

If agency identifies the individual is homebound and wants to receive a vaccine, agency contacts Local Health District (LHD) and any other providers in the area offering vaccinations for homebound individuals.

If a local partner has home visit capacity, agency provides contact information for the individual.

If local partners are unable to provide a home visit, Area Agency on Aging (AAA) is engaged to coordinate home visit vaccination arrangements through the R³AP team.

AAA identifies R³AP referrals throughout the week and submits to the R³AP team daily.

R³AP team receives AAA referrals on a daily basis and schedules home visit appointments based on individual’s location and proximity to existing community vaccination offerings.

R³AP team contacts the individual or authorized representative with information about home visit vaccination appointment.

R³AP team communicates vaccine dose order to Ohio Department of Aging (ODA).

ODA in partnership with the Ohio Department of Health allocates vaccine doses to healthcare provider, based on upcoming scheduled vaccinations.

Ohio National Guard Task Force Med (TF Med)/R³AP team vaccinates the individual.
Team Roles and Responsibilities
Roles and Responsibilities

- Aging and Disability Resource Network Partners
- Area Agency on Aging
- R³AP Team
- Ohio National Guard Task Force MED
# Roles and Responsibilities

## AGING AND DISABILITY RESOURCE NETWORK PARTNERS

- Use screening tool provided to identify individuals who can be referred to the AAA for coordination of a vaccine home visit:
  - Incorporate screening into conversation with individuals calling into your agency.
  - Initiate outreach and screening for individuals known to your agency through the course of routine business.

- Refer to Area Agency on Aging roles and responsibilities on the next page for ideas on how your agency can work collaboratively to identify individuals in need of a vaccine home visit.

- Partner with your AAA to coordinate and support outreach and screening efforts.
## Roles and Responsibilities

### AREA AGENCY ON AGING

- Use screening tool provided to determine appropriate setting for vaccination based on needs.

- Initiate process for homebound identification and outreach in collaboration with local levy programs in your region; levy programs may refer individuals who need home visit to AAA for additional coordination.

- Develop a collaborative process with in-home service and support providers to identify individuals in need of vaccine access; service providers may link recipients back to AAA for vaccination coordination.

- Continually re-evaluate individuals who previously did not meet criteria for other home visiting vaccine programs using the attached screening tool; determine appropriateness of referral to LHD or R³AP.

- Evaluate individuals receiving services through Older Americans Act, local levy dollars or other non-Medicaid funding, consider individuals receiving the following services:
  - Home delivered meals
  - Home modifications
  - Personal care
  - Care coordination

- Evaluate individuals receiving services through Older Americans Act, local levy dollars or other non-Medicaid funding, consider individuals receiving the following services:
  - Primary care providers
  - Community centers
  - Faith-based institutions
  - Cultural organizations

- Ensure all local resources have been exhausted prior to referring on for R³AP support.

- Provide R³AP team with referrals as needs are identified.

- Provide AAA educational resources (Staying Connected) to FEMA, Ohio National Guard, and R3AP teams for vaccination events and visits.
### Roles and Responsibilities

**R³AP TEAM**

- R³AP team conducts weekly status updates for scheduling homebound individuals and vaccine administration.

- Team provides logistical planning, reviews affordable senior housing sites and plugs in homebound visits based on proximity to existing affordable housing and sprinter van schedules.

- Team maps out and schedules van team route.

- Regional coordinator provides call center with schedule.

- R³AP team schedules first and second dose, if needed, with individuals or their authorized representatives.

- Call center schedules second dose, if needed.

- Call center calls individual or their authorized representative with reminder prior to second-dose appointment.
## Roles and Responsibilities

**OHIO NATIONAL GUARD TASK FORCE MED**

- Administers vaccinations.
- Manages supply procurement, including temperature-monitoring devices, medical supplies, medical waste container, epinephrine.
- Enters IMPACTSIIS data.
- Reviews educational materials with vaccine recipients.
Appendix
Vaccination Documents

COVID-19 VACCINE REGISTRATION FORM
(8.5x11 - 1 side)

EMERGENCY USE AUTHORIZATION
(8.5x11 - 2 sides)

HOMEBOUND SCREENING TOOL
(8.5x11 - 1 side)
**COVID-19 VACCINE REGISTRATION FORM**

**FIRST NAME** | **MIDDLE NAME** | **LAST NAME** | **SUFFIX (Optional)** | **CVX CODE** | **CPT CODE**
---|---|---|---|---|---

**BIRTH DATE MM/DD/YYYY**

**AGE** | **17 OR UNDER?** | **MISSING APPT** | **REFUSAL** | **RACE** | **ETHNICITY**
---|---|---|---|---|---

** PHONE NUMBER (Optional)** | **OK TO TEXT?** | **EMAIL** | **OK TO EMAIL?** | **OK TO TEXT?** | **EMAIL** | **OK TO EMAIL?** | **OK TO TEXT?** | **EMAIL** | **OK TO EMAIL?** | **OK TO TEXT?** | **EMAIL** | **OK TO EMAIL?**
---|---|---|---|---|---|---|---|---|---|---|---|---|---

**STREET ADDRESS** | **APT #** | **CITY** | **STATE** | **ZIP** | **COUNTY OF RESIDENCE** | **SOCIAL SECURITY NO. (Optional)**
---|---|---|---|---|---|---

**PATIENT QUESTIONS – ANSWER THE DAY OF VACCINATION**

- Have you had any type of vaccine in the last two weeks?
- Have you ever had a severe allergic reaction to a vaccine or any injection in the past?
- Have you ever tested positive for COVID-19 or had a doctor tell you that you had COVID-19?
- Have you been identified as either a probable or confirmed case of COVID-19 in the last two weeks?
- Have you received antibody therapy (monoclonal or convalescent plasma) for COVID-19 in the last 3 months?
- Do you have any serious health conditions (often called co-morbidities)?
- Do you have a weakened immune system (ie, from HIV or cancer) or are you on immunosuppressive drugs?
- Do you have a bleeding disorder or are you taking a blood thinner?
- Are you pregnant or breastfeeding?
- Do you feel sick today?
- Is this your first or second dose in the last month?

**What group are you in? (select only one)**

- **TPV80** PHASE 1B Individuals over 80 years of age
- **TPV75** PHASE 1B Individuals ages 75 to 79 years of age
- **TPV70** PHASE 1B Individuals age 70 to 74 years of age
- **TPV65** PHASE 1B Individuals age 65 to 69 years of age
- **TPV60** PHASE 2A Individuals age 60 to 64 years of age
- **TPV50** PHASE 2A Individuals age 50 to 59 years of age
- **TPV40** PHASE 2C Individuals age 40 to 49 years of age
- **TPVALL** PHASE 2D Individuals age 16 to 39 years of age

**INSURANCE INFORMATION**

**Medicare #:** | **Group #:**
---|---

**Insurance Provider Name:**

**ID #:** | **BIN #:**
---|---

**PCN #:**

**PATIENT CONSENT/SIGNATURE (or parent/guardian if patient is age 17 or under)**

**DATE OF CONSENT**

**OFFICE USE ONLY**

**VACCINE NAME**

**COVID-19**

**LOT NUMBER** | **EXPIRATION DATE** | **DOSE SIZE** | **MANUFACTURER** | **MANUFACTURER**
---|---|---|---|---

**ROUTE OF ADMIN**

- IM
- TD
- IV
- NS
- SC
- ID
- O
- Other

**SITE OF INJECTION**

- RA
- RD
- RT
- Other
- LA
- LD
- LT

**DOSE IN SERIES**

- First
- Second

**SERIES COMPLETE?**

- Yes
- No

**VACCINATOR**

**NOTES**

**DATE OF VACCINATION**

**CLINIC LOCATION**

**CLINIC TYPE** | **CLINIC ADDRESS** | **STATE VACCINE SYSTEM DATA ENTRY**
---|---|---

**HISTORICAL (Optional)**

- Yes, provider is submitting a record to indicate vaccine was administered elsewhere in the past according to the patient’s medical record.
- No, provider is submitting a record about a current vaccination administered at their facility.
Modern COVID-19 Vaccine Facts

FACT SHEET FOR RECIPIENTS AND CAREGIVERS EMERGENCY USE AUTHORIZATION (EUA) OF THE MODERNA COVID-19 VACCINE TO PREVENT CORONAVIRUS DISEASE 2019 (COVID-19) IN INDIVIDUALS 18 YEARS OF AGE AND OLDER

You are being offered the Moderna COVID-19 Vaccine to prevent Coronavirus Disease 2019 (COVID-19) caused by SARS-CoV-2. This Fact Sheet contains information to help you understand the risks and benefits of the Moderna COVID-19 Vaccine, which you may receive because there is currently a pandemic of COVID-19. The Moderna COVID-19 Vaccine is a vaccine and may prevent you from getting COVID-19. There is no U.S. Food and Drug Administration (FDA) approved vaccine to prevent COVID-19.

Read this Fact Sheet for information about the Moderna COVID-19 Vaccine. Talk to the vaccination provider if you have questions. It is your choice to receive the Moderna COVID-19 Vaccine.

• The Moderna COVID-19 Vaccine is administered as a 2-dose series, 1 month apart, into the muscle.
• The Moderna COVID-19 Vaccine may not protect everyone.
• For the most recent Fact Sheet, please visit www.modernatx.com/covid19vaccine-eua.

WHAT YOU NEED TO KNOW BEFORE YOU GET THIS VACCINE

WHAT IS COVID-19? COVID-19 is caused by a coronavirus called SARS-CoV-2. This type of coronavirus has not been seen before. You can get COVID-19 through contact with another person who has the virus. It is predominantly a respiratory illness that can affect other organs. People with COVID-19 have had a wide range of symptoms reported, ranging from mild symptoms to severe illness. Symptoms may appear 2 to 14 days after exposure to the virus. Symptoms may include: fever or chills; cough; shortness of breath; fatigue; muscle or body aches; headache; new loss of taste or smell; sore throat; congestion or runny nose; nausea or vomiting; diarrhea.


For more information on EUA, see the “What is an Emergency Use Authorization (EUA)?” section at the end of this Fact Sheet.

WHO SHOULD NOT GET THE MODERNA COVID-19 VACCINE? FDA has authorized the emergency use of the Moderna COVID-19 Vaccine in individuals 18 years of age and older.

WHO SHOULD NOT GET THE MODERNA COVID-19 VACCINE?
You should not get the Moderna COVID-19 Vaccine if you:
• have a severe allergic reaction after a previous dose of this vaccine
• have a severe allergic reaction to any ingredient of this vaccine

WHAT ARE THE INGREDIENTS IN THE MODERNA COVID-19 VACCINE? The Moderna COVID-19 Vaccine contains the following ingredients:
- messenger ribonucleic acid (mRNA), lipids (SM-102, polyethylene glycol [PEG] 2000 dimyrirsoyl glycerol [DMG], cholesterol, and 1,2-distearoyl-sn-glycero-3-phosphocholine [DSPC]), tromethamine, tromethamine hydrochloride, acetic acid, sodium acetate trihydrate, and sucrose.

HOW IS THE MODERNA COVID-19 VACCINE GIVEN? The Moderna COVID-19 Vaccine will be given to you as an injection into the muscle. The Moderna COVID-19 Vaccine vaccination series is 2 doses given 1 month apart. If you receive one dose of the Moderna COVID-19 Vaccine, you should receive a second dose of the same vaccine 1 month later to complete the vaccination series.

HAS THE MODERNA COVID-19 VACCINE BEEN USED BEFORE? The Moderna COVID-19 Vaccine is an unapproved vaccine. In clinical trials, approximately 15,400 individuals 18 years of age and older have received at least 1 dose of the Moderna COVID-19 Vaccine.

WHAT ARE THE BENEFITS OF THE MODERNA COVID-19 VACCINE? In an ongoing clinical trial, the Moderna COVID-19 Vaccine has been shown to prevent COVID-19 following 2 doses given 1 month apart. The duration of protection against COVID-19 is currently unknown.

WHAT ARE THE RISKS OF THE MODERNA COVID-19 VACCINE? There is a remote chance that the Moderna COVID-19 Vaccine could cause a severe allergic reaction. A severe allergic reaction would usually occur within a few minutes to one hour after getting a dose of the Moderna COVID-19 Vaccine. For this reason, your vaccination provider may ask you to stay at the place where you received your vaccine for monitoring after vaccination.

Signs of a severe allergic reaction can include:
• Difficulty breathing
• Swelling of your face and throat
• Dizziness and weakness
• A fast heartbeat
• A bad rash all over your body

Side effects that have been reported in a clinical trial with the Moderna COVID-19 Vaccine include:
• Injection site reactions: pain, tenderness and swelling of the lymph nodes in the same arm of the injection, swelling (hardness), and redness
• General side effects: fatigue, headache, muscle pain, joint pain, chills, nausea and vomiting, and fever

Side effects that have been reported during post-authorization use of the Moderna COVID-19 Vaccine include:
• Severe allergic reactions

These may not be all the possible side effects of the Moderna COVID-19 Vaccine. Serious and unexpected side effects may occur. The Moderna COVID-19 Vaccine is still being studied in clinical trials.

Modern EU Page 1/2
Revised: 3/26/2021
WHAT SHOULD I DO ABOUT SIDE EFFECTS? Call the vaccination provider or your healthcare provider if you have any side effects that bother you or do not go away. Report vaccine side effects to FDA/CDC Vaccine Adverse Event Reporting System (VAERS). The VAERS toll-free number is 1-800-822-7967 or report online to https://vaers.hhs.gov/reportevent.html. Please include “Moderna COVID-19 Vaccine EUA” in the first line of box #18 of the report form.

In addition, you can report side effects to ModernaTX, Inc. at 1-866-MODERNA (1-866-663-3762). You may also be given an option to enroll in v-safe. V-safe is a new voluntary smartphone-based tool that uses text messaging and web surveys to check in with people who have been vaccinated to identify potential side effects after COVID-19 vaccination. V-safe asks questions that help CDC monitor the safety of COVID-19 vaccines. V-safe also provides second-dose reminders if needed and live telephone follow-up by CDC if participants report a significant health impact following COVID-19 vaccination. For more information on how to sign up, visit: www.cdc.gov/vsafe.

WHAT IF I DECIDE NOT TO GET THE MODERNA COVID-19 VACCINE? It is your choice to receive or not receive the Moderna COVID-19 Vaccine. Should you decide not to receive it, it will not change your standard medical care.


CAN I RECEIVE THE MODERNA COVID-19 VACCINE WITH OTHER VACCINES? There is no information on the use of the Moderna COVID-19 Vaccine with other vaccines.

WHAT IF I AM PREGNANT OR BREASTFEEDING? If you are pregnant or breastfeeding, discuss your options with your healthcare provider.


KEEP YOUR VACCINATION CARD When you receive your first dose, you will get a vaccination card to show you when to return for your second dose of the Moderna COVID-19 Vaccine. Remember to bring your card when you return.

ADDITIONAL INFORMATION If you have questions, visit the website or call the telephone number provided below. To access the most recent Fact Sheets, please scan the QR code provided below.

HOW CAN I LEARN MORE?
• Ask the vaccination provider
• Contact your state or local public health department

WHERE WILL MY VACCINATION INFORMATION BE RECORDED? The vaccination provider may include your vaccination information in your state/local jurisdiction’s Immunization Information System (IIS) or other designated system. This will ensure that you receive the same vaccine when you return for the second dose. For more information about IISs, visit: https://www.cdc.gov/vaccines/programs/iis/about.html.

CAN I BE CHARGED AN ADMINISTRATION FEE FOR RECEIPT OF THE COVID-19 VACCINE? No. At this time, the provider cannot charge you for a vaccine dose and you cannot be charged an out-of-pocket vaccine administration fee or any other fee if only receiving a COVID-19 vaccination. However, vaccination providers may seek appropriate reimbursement from a program or plan that covers COVID-19 vaccine administration fees for the vaccine recipient (private insurance, Medicare, Medicaid, HRSA COVID-19 Uninsured Program for non-insured recipients).

WHERE CAN I REPORT CASES OF SUSPECTED FRAUD? Individuals becoming aware of any potential violations of the CDC COVID-19 Vaccination Program requirements are encouraged to report them to the Office of the Inspector General, U.S. Department of Health and Human Services, at 1-800-HHS-TIPS or TIPS.HHS.GOV.

WHAT IS THE COUNTERMEASURES INJURY COMPENSATION PROGRAM? The Countermeasures Injury Compensation Program (CICP) is a federal program that may help pay for costs of medical care and other specific expenses of certain people who have been seriously injured by certain medicines or vaccines, including this vaccine. Generally, a claim must be submitted to the CICP within one (1) year from the date of receiving the vaccine. To learn more about this program, visit www.hrsa.gov/cicp/ or call 1-855-266-2427.

WHAT IS AN EMERGENCY USE AUTHORIZATION (EUA)? The United States FDA has made the Moderna COVID-19 Vaccine available under an emergency access mechanism called an EUA. The EUA is supported by a Secretary of Health and Human Services (HHS) declaration that circumstances exist to justify the emergency use of drugs and biological products during the COVID-19 pandemic. The Moderna COVID-19 Vaccine has not undergone the same type of review as an FDA-approved or cleared product.

FDA may issue an EUA when certain criteria are met, which includes that there are no adequate, approved, and available alternatives. In addition, the FDA decision is based on the totality of the scientific evidence available showing that the product may be effective to prevent COVID-19 during the COVID-19 pandemic and that the known and potential benefits of the product outweigh the known and potential risks of the product. All of these criteria must be met to allow for the product to be used during the COVID-19 pandemic. The EUA for the Moderna COVID-19 Vaccine is in effect for the duration of the COVID-19 EUA declaration justifying emergency use of these products, unless terminated or revoked (after which the products may no longer be used).
Overview

SCREENING TOOL

Homebound persons include those who need the help of another person or medical equipment such as crutches, a walker, or a wheelchair to leave their home, or their medical provider believes that their health or illness could get worse if they leave their home, therefore they typically do not leave their home.

Homebound vaccines are reserved for residents with no other resource options. Use this flowchart to determine if an individual needs in-home vaccination or can attend a clinic.

Questionnaire

- Do you need the help of another person or medical equipment (e.g., crutches, a walker, or a wheelchair) to leave the home?
- Does your medical provider believe that your health or illness could get worse if you leave your home?
- Do you have a family member and/or caretaker that can help you visit an existing clinic to get the vaccine?
- Do you need an ambulance (compared to an ambulette) to get to a clinic?

Flowchart:

1. **Yes** to help to leave the home?
   - **Yes** to medical provider's concern?
     - **Yes** to need for transportation support.
     - **No** to need for transportation support.
   - **No** to need for transportation support.

2. **Yes** to family member/caretaker help?
   - **Yes** to ambulance needed?
     - **Yes** to vaccine candidate.
     - **No** to vaccine candidate.
   - **No** to vaccine candidate.

3. **No** to help to leave the home?
   - **Yes** to medical provider's concern?
     - **Yes** to vaccine candidate.
     - **No** to vaccine candidate.
   - **No** to vaccine candidate.
What to Expect After Your Vaccine/V-Safe
(8.5x11 - 2 sided)

FAQ About COVID-19 Vaccines
(11x17)

AAA Homebound / Ombudsman Support
(8.5x11 - 1 side)

Staying Connected Booklet for Seniors*
*(Copies available through Area Agency on Aging)
What to Expect After Your COVID-19 Vaccine

COVID-19 vaccination will help protect you from getting COVID-19. You may have some side effects, which are normal signs that your body is building protection. These side effects may feel like flu and may even affect your ability to do daily activities, but they should go away in a few days.

Common Side Effects

ON THE ARM WHERE YOU GOT THE SHOT:
- PAIN
- SWELLING
- REDNESS

THROUGHOUT THE REST OF YOUR BODY:
- FEVER
- TIREDNESS
- CHILLS
- HEADACHE
- NAUSEA
- MUSCLE PAIN

When To Call The Doctor

In most cases, discomfort from fever or pain is normal. Contact your doctor or healthcare provider:

- If the redness or tenderness where you got the shot increases after 24 hours.
- If your side effects are worrying you or do not seem to be going away after a few days.
- If you get a COVID-19 vaccine and you think you might be having a severe allergic reaction after leaving the vaccination site, seek immediate medical care.

A rare adverse event, blood clots with low platelets, has been linked to the Johnson & Johnson vaccine. For three weeks after receiving the vaccine, you should be on the lookout for possible symptoms and seek immediate medical treatment:

- Severe or persistent headaches or blurred vision
- Shortness of breath
- Chest pain
- Leg swelling
- Persistent abdominal pain
- Easy bruising or tiny blood spots under the skin beyond the injection site

MY HEALTHCARE PROVIDER’S CONTACT INFORMATION:

Provider’s phone number:

Helpful Tips

If you have pain or discomfort, talk to your healthcare provider about taking an over-the-counter medicine, such as ibuprofen or acetaminophen.

TO REDUCE PAIN AND DISCOMFORT WHERE YOU GOT THE SHOT:
- Apply a clean, cool, wet washcloth over the area.
- Use or exercise your arm.

TO REDUCE DISCOMFORT FROM FEVER:
- Drink plenty of fluids.
- Dress lightly.

Remember

Side effects may feel like flu and even affect your ability to do daily activities, but they should go away in a few days.

The Pfizer and Moderna vaccines require two doses for full protection. Get the second shot even if you have side effects after the first one, unless a vaccination provider or your doctor tells you not to get a second dose.

It takes time for your body to build protection after any vaccination. People are considered fully vaccinated two weeks after their second dose of Pfizer or Moderna or two weeks after the single-dose Johnson & Johnson vaccine.

After you’ve been fully vaccinated against COVID-19, you should keep taking precautions in public places like wearing a mask, staying 6 feet apart from others, avoiding crowds and poorly ventilated spaces, and washing your hands often.

coronavirus.ohio.gov
Get vaccinated.  
Get your smartphone.  
Get started with v-safe.

Use your smartphone to tell CDC about any side effects after getting the COVID-19 vaccine. You’ll also get reminders if you need a second vaccine dose.

V-safe is a smartphone-based tool that uses text messaging and web surveys to provide personalized health check-ins after you receive a COVID-19 vaccine. Through v-safe, you can quickly tell CDC if you have any side effects after getting the COVID-19 vaccine. Depending on your answers, someone from CDC may call to check on you and get more information. V-safe will also remind you to get your second COVID-19 vaccine dose if you need one.

Note: V-safe cannot schedule vaccine appointments, including second doses of COVID-19 vaccines. If you need to schedule, reschedule, or cancel a COVID-19 vaccination appointment, contact the location that set up your appointment or a vaccine provider in your area. This may be your state or local health department, employer, or vaccine provider.
A: Safety has been a top priority throughout the vaccine development and approval process. COVID-19 vaccine development processes involved several steps comparable with those used to develop other vaccines, such as the flu or measles vaccine. Clinical trials study the safety and effectiveness of a vaccine in thousands of study participants. There were more than 116,000 participants between the three clinical studies. The FDA uses rigorous standards and insights from independent medical professionals to evaluate trial data to ensure that a vaccine is safe and effective and the benefits outweigh the risks. After an FDA decision, the CDC also reviews available data before making final recommendations for vaccine use. Safety continues to be a top priority, as vaccine administration is under way, through continuous safety monitoring measures. The CDC and other federal partners continue to monitor the new vaccines for side effects and adverse events, using many vaccine safety monitoring systems.

Q: Will the vaccine protect against the new COVID-19 variant now confirmed in the United States?
A: Viruses frequently change through mutation, and new variants of a virus are expected to occur over time. Multiple variants of the virus that causes COVID-19 have been documented in the United States and globally during this pandemic, including strains in the United Kingdom, South Africa, and Brazil. Most variants do not change how the virus behaves, and many disappear. Some of the variants can spread more easily from person to person. The variant called B.1.1.7, which was first identified in Britain, is now the most common source of new infections in the United States. All three vaccines have been shown to be effective against B.1.1.7. According to the CDC, scientists are continuing to study how easily this variant and other variants might spread, whether they could cause more severe illness, and whether all of the currently authorized vaccines and treatments will protect people against them. The Johnson & Johnson (Janssen) clinical trials were studied globally, and in areas where some of the strains were prevalent, Pfizer and Moderna clinical trials were complete before the strains emerged; however, both manufacturers are conducting clinical studies of booster doses that would target variant strains of the virus. The CDC’s recommendations for slowing the spread — wearing masks, staying at least 6 feet apart from others, avoiding crowds, ventilating indoor spaces, and washing hands often — will also help prevent the spread of variants.

Q: Why is a COVID-19 vaccine needed if social distancing and wearing masks prevent the COVID-19 virus from spreading?
A: Vaccines boost your immune system, so it will be ready to fight the virus if you are exposed. Vaccination combined with ongoing prevention efforts including wearing face masks that cover the mouth and nose, frequent hand washing and staying at least 6 feet away from those others offer the best protection against COVID-19.

Q: Is there a COVID-19 vaccine?
A: In the United States, two COVID-19 vaccines have been granted emergency use authorization (EUA) from the Food and Drug Administration (FDA). These vaccines, manufactured by Pfizer-BioNTech and Moderna, began arriving in Ohio in December 2020.

Q: Will CDC continue to watch for problems with these new vaccines?
A: Yes. COVID-19 vaccine safety is a top priority for the federal government, and reports of health problems following COVID-19 vaccination are taken very seriously. CDC and other federal partners continue to monitor the new vaccines for serious side effects (known as adverse events), using many vaccine safety monitoring systems. This continued monitoring can reveal side effects that may not have been seen in clinical trials. If there is an unexpected side effect with the new COVID-19 vaccines, experts can quickly study it further to determine if it is a true safety concern. Existing data systems can rapidly detect if a vaccine has any possible safety problems, and additional systems and data sources are being developed. Detecting rare adverse events, as was the case with the Johnson & Johnson vaccine link to thrombosis with thrombocytopenia syndrome (TTS), is an indicator that systems in place to monitor the safety of these vaccines are working. The TTS reports were detected early, and the 10-day pause reflected the federal government’s commitment to transparency and safety as CDC and FDA gathered and reviewed additional data. COVID-19 vaccines have undergone and will continue to undergo the most intensive safety monitoring in U.S. history.

Q: How will I know that the COVID-19 vaccine is safe?
A: In the United States, two COVID-19 vaccines have been granted emergency use authorization (EUA) from the Food and Drug Administration (FDA). These vaccines, manufactured by Pfizer-BioNTech and Moderna, began arriving in Ohio in December 2020.

Q: Will Ohio make COVID-19 vaccination mandatory?
A: No. The vaccine will be available, as supplies allow, to all Ohioans who choose to receive the vaccine.
Q: Are COVID-19 vaccines effective?
A: Yes. COVID-19 vaccines from Pfizer, Moderna and Johnson & Johnson (Janssen) have been approved for emergency use by the FDA, and recommended for use by the CDC after a rigorous analysis proved their effectiveness. During studies, all the vaccines were shown to prevent serious illness from COVID-19 at high effectiveness rates. Leading national experts say there are challenges comparing efficacy rates from the clinical studies between the three products because the vaccines were not tested against one another, or under the same conditions or timelines. They are not apples-to-apples comparisons.

Vaccine efficacy is the percentage reduction in a disease in a group of people who received a vaccine in a clinical trial, compared with those who did not. It tells us how well the vaccine does its job. A summary of the clinical trials efficacy:

- Pfizer-BioNTech: 95% effective at preventing laboratory-confirmed COVID-19 illness in people who received two doses.
- Moderna: 94% effective at preventing laboratory-confirmed COVID-19 illness in people who received two doses.
- Johnson & Johnson (Janssen): Full (100%) protection against hospitalization and death, 85% effective in preventing severe COVID-19, 72% effective in the U.S. (66% overall) at preventing moderate to severe COVID-19.

The bottom line is all of the vaccines are effective at preventing serious illness, hospitalization, and death from COVID-19 disease, and the CDC recommends getting the first vaccine available to you for protection from COVID-19.

Q: What are normal side effects from the COVID-19 vaccine?
A: When you get a COVID-19 vaccine, you can expect mild side effects, including soreness, swelling or redness at the injection site. Other common side effects are fever, chills, headache, tiredness, and muscle or joint pain. These side effects are normal as your body creates an immune response to protect you from COVID-19, and may increase with the second dose for the two-dose vaccines. Learn more about what to expect in this video from the CDC (https://www.youtube.com/watch?v=EILCpte7GSw).

Q: I’ve seen a lot of rumors on social media about vaccines. How can I tell what is true?
A: The internet is rife with dangerous misinformation about COVID-19 vaccines, and it can be difficult to know what to trust. The best thing you can do is educate yourself about the vaccines with information from trustworthy sources. Learn more about finding credible vaccine information in this article from the CDC, and separate myths from facts on this page from the Ohio Department of Health (https://ohio.gov/PublicHealth/CDC/9https://www.youtube.com/watch?v=EILCpte7GSw).

Q: How were COVID-19 vaccines developed so quickly?
A: The process has been quicker as a result of efforts to run concurrent trial phases, as well as a commitment to help condense timelines and reduce or eliminate months-long waiting periods during which documents would be prepared or be waiting for review. There were no shortcuts in the testing of the vaccines. In addition, manufacturing began while testing was being completed, allowing many doses to be ready to distribute immediately upon authorization. Years of research laid the groundwork for development of COVID-19 vaccines. The approved vaccines use different methods to achieve the same end result, which is to teach our bodies how to recognize COVID-19’s spike protein and create antibodies against it. Messenger RNA (mRNA), used by two of the authorized vaccines (Pfizer-BioNTech and Moderna), has been studied for years and was being developed for other infectious diseases.

Recent technological advancements in RNA biology and chemistry, as well as delivery systems, have allowed these COVID-19 vaccines using mRNA to be developed as safe and effective vaccines. Adenovirus/viral vector vaccines, the method used by Johnson & Johnson, are common. Read more about how the different COVID-19 vaccines work at coronavirus.ohio.gov.

Q: Should I alter the FDA recommended dosing of COVID-19 vaccines in any way (such as taking only a single dose, having half doses administered, extending the length of time between doses, or mixing and matching COVID-19 vaccines)?
A: If you receive the Pfizer or Moderna vaccines, a second dose is required to achieve full effectiveness and protection. Full doses should be administered as directed, and the second dose should be from the same manufacturer as the first dose, and should follow the FDA-recommended intervals (21 days between doses for the Pfizer-BioNTech vaccine, and 28 days between doses for the Moderna vaccine). Read the FDA’s statement about the importance of following the authorized dosing schedules for the vaccines. The Johnson & Johnson (Janssen) vaccine is a single-dose product.

Q: Can other vaccines help prevent me from getting COVID-19?
A: Other vaccines, such as those for flu, measles, or other diseases, will not protect you from COVID-19. Only the vaccines designed specifically to protect you from COVID-19, once approved for use by the FDA, can prevent COVID-19. While a flu vaccine will not prevent you from getting COVID-19, it can prevent you from getting influenza (flu) at the same time as COVID-19. Because the flu viruses and the virus that causes COVID-19 will both be spreading during this time, getting a flu vaccine is more crucial than ever.

Q: Were minorities or people with high-risk health conditions included in the clinical studies?
A: Yes. During the clinical studies for all three FDA approved COVID-19 vaccines, minorities or people with high-risk health conditions were included. The Phase 3 clinical trials for the Pfizer-BioTech (more than 43,000 participants), Johnson & Johnson (Janssen) vaccines (more than 43,000 participants) and Moderna vaccines (more than 30,000 participants) included communities that have historically been under-represented in clinical research and have been disproportionately impacted by COVID-19. The clinical studies included participants:

- From communities of color (42% of Pfizer-BioNTech’s participants, 37% of the Moderna participants, 35% of U.S. Janssen participants).
- Older than age 65 (21% of Pfizer-BioNTech participants; 23% of Moderna participants; older than 60 (34% of Janssen participants).
- With high-risk chronic diseases that put them at increased risk of severe COVID-19, such as diabetes, severe obesity, and cardiac disease (46% of Pfizer-BioNTech participants; 42% of Moderna participants, 40% of Janssen participants).

Q: How many doses of COVID-19 vaccine will be needed? When is the second dose due?
A: Both the Pfizer-BioNTech vaccine and the Moderna vaccine require two doses. The Johnson & Johnson (Janssen) vaccine is a single-dose product. Individuals who receive a dose of a particular vaccine must receive a second dose of the vaccine from the same manufacturer, as they are not interchangeable. For example, if you receive a first dose of the Pfizer-BioNTech vaccine, your second dose must be the Pfizer-BioNTech vaccine administered 21 days after the first dose. If you receive a first dose of the Moderna vaccine, your second dose must be the Moderna vaccine, administered 28 days after the first dose. These recommended intervals, with a standard four-day grace period, should be followed as closely as possible to receive full protection. If the intervals are exceeded, the second dose should be scheduled for administration up to six weeks (42 days) after the first dose, regardless of manufacturer. If the second dose is administered beyond these intervals, there is no need to restart the series, according to Centers for Disease Control and Prevention (CDC) guidance.

Q: Who is paying for the COVID-19 vaccine?
A: If you choose to get a COVID-19 vaccine, you will not have to pay. Vaccine doses purchased with taxpayer dollars will be given to Ohioans who choose to receive them at no out-pocket cost. Vaccine providers will be able to charge an administration fee for giving the shot to someone. Providers can get this fee reimbursed by the patient’s public or private insurance company or, for uninsured patients, by the federal Health Resources & Services Administration’s Provider Relief Fund.

Q: Where can I find credible COVID-19 vaccine information?
A: The internet is rife with dangerous misinformation about COVID-19 vaccines, and it can be difficult to know what to trust. The best thing you can do is educate yourself about the vaccines with information from trustworthy sources. Learn more about finding credible vaccine information in this article from the CDC, and separate myths from facts on this page from the Ohio Department of Health (https://ohio.gov/PublicHealth/CDC/9https://www.youtube.com/watch?v=EILCpte7GSw).
You may be eligible to receive the vaccine right in your own home!

Area Agency on Aging can help you...

- Find out if you qualify for Ohio’s homebound vaccination program
- Arrange transportation to a community vaccine clinic
- Connect with other services such as meal delivery

TO BE CONNECTED YOUR AREA AGENCY ON AGING
Call: 1-866-243-5678
Visit website: aging.ohio.gov/FindServices

Why should you get the COVID-19 vaccine if you’re not going out?

Even if you don’t leave your home often, it is still important to consider getting the COVID-19 vaccine. Many homebound individuals have:

- Medical conditions that can make them more susceptible to severe COVID-19 illness
- Caregivers coming into their home. These helpers often visit others and could unknowingly spread the virus from one homebound patient to the next.
- Loved ones who want to come visit but don’t want to put their unvaccinated friends and family at risk.

Need Help with Your Long-Term Care Concerns?

Ask an Ombudsman.

The Long-Term Care Ombudsman Program advocates for excellence in long-term services and supports, wherever consumers live. Ombudsmen work to resolve problems and uphold rights of individuals receiving services in their home or elsewhere in the community to help you maintain your independence, as well as concerns about long-term care facility services.

You can reach an ombudsman at 1-800-282-1206
STAYING CONNECTED BOOKLET

This 28 page booklet helps seniors identify isolation and lonelines and provides self help strategies as well as Ohio Department of Aging resources to support senior care.

Please request copies through your regional Area Agency of Aging - 1-866-243-5678
The Ohio CareLine is a toll-free emotional support call service created by the Ohio Department of Mental Health and Addiction Services and administered in community settings. Behavioral health professionals staff the CareLine 24 hours a day, 7 days/week. They offer confidential support in times of personal or family crisis when individuals may be struggling to cope with challenges in their lives. When callers need additional services, they will receive assistance and connection to local providers.

Ohio’s CareLine is available 24/7 and is staffed with licensed behavioral health professionals. 

1-800-720-9616