

**NYS DOH Bureau of EMS & Trauma Services**  
**EMS Vaccination Plan Briefing for Agency Leadership and Providers**  
**Monday 12/21/20, 5:06 PM to 6:16 PM**

Unofficial Notes

This is not verbatim transcript of the call. Notes were typed during the call and reviewed and added to afterward. There was no prepared agenda distributed before the call. Questions and/or comments from providers were submitted before and during the call.

At the beginning of the briefing there was an automatic message that it was being recorded, however, there was no mention if the recording would be posted for public access.

**NYS DOH BEMS&TS Panelists:**

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Ryan Greenberg began the presentation indicating the call is about the recently issued Guidance for Emergency Medical Services Personnel to Receive COVID-19 Vaccinations. It is on the NYS DOH BEMS&TS web site as Policy Statement 20-08

Plan is to go over sections of the guidance and then respond to questions submitted before and during the call.

Towards the end of the call it was mentioned that there were about 1,000 logged in.

**Prioritization for the Second Week of COVID-19 Vaccinations**

Several occupations are included as part of Tier 1A eligibility.

Commented on importance of jobs being done.

NYS guidance documents are on-line.

There are about 2 million healthcare providers in New York State. There are about 500,000 healthcare providers eligible for vaccination Tier 1A. This includes all EMS types – volunteers and paid as well as all sectors – municipal, volunteer, commercial, hospital and college.

Vaccine distribution during 1<sup>st</sup> week went to a limited number of hospitals. Some EMS providers have received vaccine. By day 10 in NYS really serious numbers will be vaccinated as there is a giant push for EMS this week.

Vaccine receipts by manufacturer:

- 175,000 Pfizer doses last week
- 120,000 Pfizer doses this week
- 350 Moderna doses this week

Distribution varies by region.

There are about 60,000 certified EMS providers from CFR to EMT-P in NYS.

Hospitals will encompass the bulk of distribution points due to vaccine packaging and storage requirements. There are limits on where the Pfizer vaccine can go. This may expand in the future.

This week they are pushing out vaccines. Expect deliveries now through Wednesday.

There is no list of hospital PODs out yet. Information on assignment of agencies to PODs will be coming out.

NYC plan is different. Voluntary hospital EMS personnel will be vaccinated through their hospital. FDNY EMS will have its own sites. NYC REMSCO and NYC Department of Health & Mental Hygiene will cover volunteer and commercial EMS agencies.

There are very specific amounts allocated for hospital staff and others including EMS, Office of Mental Health (OMH) and Office of Addiction Services and Supports (OASAS).

There is no difference in prioritization of paid vs. volunteer providers.

Agencies will be responsible for entry of information into the data system and will have to attest that people meet eligibility guidelines – direct patient care providers on ambulances and 1<sup>st</sup> response vehicles including “ambulance emergency vehicle operators”.

Dispatchers, firefighters and police will be in Phase 2.

Providers entered by agencies into scheduling database will be monitored to ensure compliance with eligibility guidelines.

CDMS system info will be out tomorrow.

Ensure agency contact information is up to date. [[DOH-2936 Certified EMS Agency Information Update Form](#)]

Identify direct patient care staff prioritized for vaccine. This could include non-certified ambulance assistants and EMS students. It does not include office and billing staff and mechanics.

Need to prioritize agency list. May not want everyone to go at once but in waves separated by days. Wave 1 = higher risk people who are answering most calls, older responders and those with co-morbidities. There could be side effects after vaccinations such as tiredness, aches, etc. that could affect sustainability of operations.

Blend buckets such as including full time, part time, high performers (hours), etc. in coming up with scheduling plan.

### **Responsibilities of EMS Employers or Organizations**

Agencies will be responsible for scheduling their personnel into the NYS DOH Countermeasure Data Management System (CDMS). Information is expected to come out tomorrow.

Consideration may have to be given for need to drive to a central location, travel time, and possible processing time of 2-3 hours to get through the vaccination process.

### **Identify Staff Prioritized for Vaccine**

While all personnel who provide direct patient care will be vaccinated over time, those who have higher patient contact numbers or have other risk factors or co-morbidities may need to be scheduled earlier in the process.

### **Plan Immediately for Second Dose**

Personnel need to know what type of vaccine they are receiving as scheduling for the second dose may be in either 21 or 28 days. Second dose needs to come from same lot and be administered at same POD location. Consideration may have to include work and vacation schedules and personal responsibilities.

### **Proof of Occupation**

Must be with an EMS ambulance or recognized EMS 1<sup>st</sup> response organization in New York State.

Bring proof such as DOH certification card or Health Commerce System printout. Bring agency ID card or verification of active EMS provider status on agency letterhead.

Someone with an agency ID that shows firefighter status but also is involved with EMS patient care would need to bring supplemental agency letter verifying EMS role with the department.

### **Vaccine Safety**

See <https://www.cdc.gov/vsafe>

### **Equity**

Vaccination eligibility in Tier 1A is for EMS and 1<sup>st</sup> responders only who have direct patient care responsibilities.

Spouse of EMS provider is not eligible unless they are separately eligible as EMS direct patient care provider with an EMS or 1<sup>st</sup> responder agency.

### **Communicating the Plan**

Information will go to agencies who should keep their members/employees informed.

Regional EMS Program Agencies and representative of the governor's office were on a call this morning.

### **Responses to Questions & Comments Submitted Before the Call**

Non EMS responders will get vaccinations in Phase 2

Regional EMS Program Agencies and Regional EMS Councils will not do scheduling. County EMS Coordinators may or may not be involved.

There are no agency specific vaccination allotments. There are guideline for hospitals on allocations for hospital staff vs. others in Tier 1A.

Scheduling information may be out in next day.

If after 12/31/20 an EMS provider who initially had issues with vaccination changes mind they would still be eligible later.

Next BEMS&TS briefing call will be Wednesday 12/30/20 at 4:00 PM.

NYS DOH vaccination plan for EMS is at

[https://coronavirus.health.ny.gov/system/files/documents/2020/12/guidance\\_for\\_ems\\_12202020.pdf](https://coronavirus.health.ny.gov/system/files/documents/2020/12/guidance_for_ems_12202020.pdf)

There is no need for an agency to submit its prioritization plan to BEMS&TS although it may be asked later to see what is being done.

Information on who is responsible for vaccination plan will go out this week.

There will be a need to travel for vaccinations whether it is 10 minutes or an hour. Vaccination sites will be limited initially but there may be more later on. Even in hospital systems doctors and nurses may have to travel to 1 central system hospital for vaccinations.

90 page NYS vaccination plan October 2020 version is online at:

[https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/NYS\\_COVID\\_Vaccination\\_Program\\_Book\\_10.16.20\\_FINAL.pdf](https://www.governor.ny.gov/sites/governor.ny.gov/files/atoms/files/NYS_COVID_Vaccination_Program_Book_10.16.20_FINAL.pdf)

Working on assigning agencies to hospitals. May be per agency or county based. May be geographic barriers to consider in the North Country.

College units should be scheduling their providers for vaccinations based on where they provide service rather than out of area. There may be some wiggle room later.

Hospitals cannot move their vaccination POD locations around in week 2 distributions.

There is no requirement for hub hospitals to do their PODs on premises or off site.

Information on the number of vaccinations per agency and scheduling will be coming out.

Firefighters may be involved in direct patient care if spending significant time with patients. 45 minutes with patient was mentioned.

### **Responses to Questions & Comments Submitted During the Call**

There is no specific fact sheet on vaccines from BEMS&TS, however, some regions such as MLREMS have information they may share. Later in call a link to a fact sheet was posted for: <https://forward.ny.gov/covid-19-vaccine-distribution>

At PODs there is no choice in vaccine manufacturer between Pfizer or Moderna. Agencies will be assigned to a POD location. Cannot mix vaccine manufacturers between 1<sup>st</sup> and 2<sup>nd</sup> doses.

Hospitals may need to use CDMS to call providers for confirmation of information.

If EMS provider works and/or volunteers with multiple EMS agencies it does not matter which is used for vaccination scheduling. Provider can use whatever is convenient.

Firefighters who do direct patient care in addition to fire duties would be in Tier 1A.

COVID-19 positive provider eligibility for vaccination has no guidance right now and will have to get back with an answer.

Providers should be getting a card showing vaccine information as well as information on scheduling a second dose and possible side effects.

ID from agency should be an ID card or confirmation on agency letterhead with phone number to verify. There will be flexibility.

Vaccinations for EMS will be this week and next.

For those who have had flu vaccination there is no known contradiction for COVID-19 vaccination within a close time frame.

Epidemiologist guidance will be sought for question on vaccination for provider who recently tested positive for COVID-19.

EMS providers are not required to be vaccinated. There is no specific NYS declination form. Agencies, however, may say they want a signed declination. BEMS&TS may be asking for information on declinations.

Air medical agency personnel such as flight nurses and pilots would qualify in Tier 1A. Mechanics would not be in Tier 1A.

Air medical agency with a HQ in one region and bases in other regions should coordinate with the counties where the bases are and can also reach out to BEMS&TS.

Providers who have had anaphylactic reactions after previous vaccinations should check with their agency Medical Director and/or personal primary care physician before going to a POD. There are questions and precautions related to that. It could be a contraindication.

Scheduling software for NYC's volunteer and commercial providers is being handled by NYC Regional EMS Council and NYC Department of Health & Mental Hygiene. It will be a web based system. Information will be coming from NYC REMSCO.

Consent signoff will not be on CDMS as that is used for scheduling providers by agencies. Consent for vaccination form will be signed by individuals at POD site.

How upcoming holidays effect distribution is up to the POD site.

Youth Squad members ride on the ambulance but there may be age restriction on administration of the vaccines.

No information on where Adult Protective Services personnel fall in vaccination plan.

If an EMS agency does not want to be involved in scheduling its personnel for vaccinations but its providers want vaccinations they should contact their County EMS Coordinator. This was noted as an unexpected question to come up.

Hospitals in western NY will be receiving guidance on where PODs will be and what agencies are assigned to PODs.

EMTs all the way through EMT-Ps can administer vaccine under Executive Order but it is not something that will be available right away. Some larger areas may be on board earlier. Expect EMS to be a big component of mass vaccination rollout at the county level. There needs to be DOH permission and training and reporting requirements met. Information will come out.

EMS providers can do COVID-19 testing with prior approval of BEMS&TS. It is being used at swabbing and testing sites around state.

High risk providers who stopped riding on an ambulance awaiting a COVID-19 vaccine would probably would qualify as an active provider if it allows them to get back into responding.

Ultimate notice for agency registration of providers will go from BEMS&TS to Regional EMS Program Agencies and then to local EMS agencies.

EMS agencies may be contacted by local hospitals for initial information to help in their POD preparations.

SUNY requirement for bi-weekly COVID-19 testing to remain on campus for face to face classes and continuation of that requirement for students who receive vaccinations is an excellent question for school to answer.

FD responders to motor vehicle accidents and industrial accidents but do not transport could be in Tier 1 or 2 depending on EMS certification and direct involvement in primary patient care.

It is hoped that COVID-19 vaccination will not be an annual event.

It is unknown if there is a plan or if Workers Compensation will pay for care of adverse reactions to COVID-19 vaccination.

If provider tests positive for COVID-19 antibodies they may want to speak to their agency Medical Director and/or personal primary care physician about receiving COVID-19 vaccination.

Flexibility of 21 or 28 day requirement for 2<sup>nd</sup> dose of vaccine is a question for agency Medical Director or person's personal primary care physician. POD site may have information.

It is uncertain if/how state will pass on status reports of vaccination counts of EMS providers to County EMS Coordinators.

For information on process of establishing a POD contact county health department.

EMS students who have not completed their clinicals are eligible for Tier 1A vaccinations if they are actively providing patient care with an EMS agency.

Quarantined providers may need to get consent before they can go out to a POD.

There is no DOH requirement to be tested to get the vaccine.

There is no official DOH template for an agency vaccination prioritization plan.

Community Paramedic providers can administer vaccinations under Executive Order.

If a provider declines now but later wants vaccination they should be able to get one.

### **Closing Comments**

Watch out for staff and ensure providers are OK and can balance life responsibilities.

Avoid working multiple jobs back-to-back if you can.

Random phone call or text to providers might be helpful.

Stay safe - Wear mask - Stay in small groups - Happy holidays - Hopefully back to old norms by the summer.