RECOMMENDATIONS ON VFC SEASONAL INFLUENZA VACCINE DISTRIBUTION

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AIM BACKGROUND

- Membership association formed in 1999
- Members are “Awardees” who receive federal immunization funding from CDC (Section 317 funds)
- 50 States, 8 Territories, 6 Cities
**CHALLENGE: TIMING OF VFC INFLUENZA VACCINE DELIVERY VARY**

- The timing of VFC influenza vaccine delivery does not necessarily coincide with the timing of private sector vaccine delivery.

- According to AAP, some providers report receiving VFC vaccine 2 weeks to a month later than private sector vaccine. Delays in receipt of VFC seasonal influenza vaccine can cause missed opportunities to vaccinate children and can also cause a disparity in care due to one group of children not receiving vaccine.

- AAP, CDC and AIM continue to work to improve VFC influenza vaccine delivery.

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**ACTIONS TAKEN: IMPROVING VFC INFLUENZA VACCINE DELIVERY**

- Best practices discussed and shared on AIM General Membership Webinar, Presentations by CA and TN (Aug 2015)

- AIM Annual Survey question added re: VFC influenza vaccine policy (Summer 2016)

- Development of AIM Recommendations; distributed and reviewed with AIM members (August 2016)

- Outreach to awardees where delays reported. Communication with medical societies encouraged (Fall 2016)

- CDC webinar for all awardees featuring best practice presentations from Oregon, Georgia, and Montana (Jan 2017)
AIM RECOMMENDATIONS ON VFC SEASONAL INFLUENZA VACCINE DISTRIBUTION

AIM RECOMMENDATIONS

AIM encourages consideration of the following practices to help distribute VFC seasonal influenza vaccine to VFC providers early in the season and provide information to providers as the influenza season progresses:

- Send providers smaller/partial shipments of influenza vaccine throughout the flu season.
- Simplify the brands and presentations of seasonal influenza vaccine available to providers to order. Careful consideration should be given when limiting brand and presentation choice as there is a risk of supply shortages which can be exacerbated if dependent on only one brand of vaccine.
- Regularly communicate with providers regarding the status of influenza vaccine distribution throughout the influenza season.
- Partner with state and local chapters of professional medical organizations.

Created to provide awardees with recommendations to decrease the amount of time it takes to get VFC seasonal influenza vaccine to provider offices.

AIM Recommendations on VFC Seasonal Influenza Vaccine Distribution

Influenza vaccine distribution in the Vaccines for Children (VFC) program is dependent upon the availability of vaccine at the Centers for Disease Control and Prevention distribution centers. Unlike distribution of other vaccines, influenza vaccine is seasonal. Providers cannot stock vaccine ahead of demand and may not receive VFC influenza vaccine at the same time they receive privately purchased influenza vaccine. There are many factors impacting the availability of influenza vaccine and the timing of distribution to VFC providers, including the brand and product presentations desired by the provider, the allocation policy of the awardee, the production and shipment schedule of the vaccine, and the tracking of vaccine by both CDC and its distributor McKesson. The timing of VFC seasonal influenza vaccine distribution is slightly different from the timing of private vaccine distribution due to centralized VFC vaccine ordering and distribution and the processes used by CDC to ensure that each awardee receives vaccine equitably. These recommendations are meant to address steps awardees can take to ensure VFC seasonal flu vaccine doses are available to their VFC providers as quickly as possible.

The American Academy of Pediatrics (AAP) has received feedback from pediatricians expressing concern about the timing of influenza vaccine distribution in the VFC program. Pediatricians want to be able to serve both privately and publicly insured children as soon as vaccine is available, and to provide protection from influenza for every child regardless of health insurance status. Ideally, pediatrics want to have both VFC and privately purchased influenza vaccine in stock as soon as vaccine is available on the market.

The Association of Immunization Managers (AIM) recognizes that the availability of influenza vaccine and other factors outside the immunization program’s control will vary from season to season, but offers the following recommendations and guidance to awardees to distribute VFC seasonal influenza vaccine to provider offices early in the influenza season and to reduce missed opportunities for VFC providers to vaccinate seasonal influenza.
2016 AIM ANNUAL SURVEY

How does the program decide when seasonal influenza vaccine is distributed to providers?

- As soon as it is available, regardless of how small...
- Once a specific amount or % is available in depot
- Other (please specify)

2016 AIM ANNUAL SURVEY

- 47% of respondents (28/60) distribute vaccine as soon as it is available
- 33% distribute vaccine once a threshold minimum is received
  - Minimums ranged from 3% - 50%
  - Larger minimums in territories/Pacific Islands
- “Other” distribution policies include:
  - school clinics first
  - VTrckS order date
  - orders placed in IIS
  - apportionment according to need
WASHINGTON STATE EXPERIENCE

- Prep work to get vaccine out ASAP:
  - Plan allocations and messages ready before we get official notice of vaccine being available to order
  - Make changes in our ordering system ahead of time to be ready to open ordering as soon as vaccine is available

- Lessons learned:
  - Be nimble in making allocation adjustments at the first sign of a delay
  - Work to try and get clear info and share that broadly

CONCLUSION AND NEXT STEPS

- Complex issue
- Every flu season is different
- Communication is key
- AIM continue to track policies and practices through annual survey, share best practices, and outreach to programs as needed