

From: [Bell, Linda J.](#)
To: [Taylor, W. Marshall](#)
[Traxler, Brannon](#)
CC: [White, Stephen M.](#)
[Hayes, Alexandra](#)
Date: 10/23/2020 2:41:22 PM
Subject: Follow up re: VAMS

Marshall and Brannon,
I spoke with Stephen about the feedback we received from Dana Gurley, Upstate immunization program manager during our visit. I shared her concerns about the impact the SIMON training and implementation was having on private providers. I'm concerned that VAMS will create an additional burden for providers.

I have reservations about DHEC agreeing with CDC to use VAMS. By copy here I am asking Alexandra to forward a document outlining the Pros and Cons of our options.

My understanding of VAMS is that it will have short-lived use during the early phase of vaccine allocation. We have the option to use SIMON, complemented by ReadyOp for a scheduling feature, to use throughout the vaccine allocation process. This will require a modification to ReadyOp that I think PHP or IT will have to make.

We are very close to the need for a final decision about VAMS. Going with SIMON and ReadyOp will put an additional burden on DHEC but I think we should plan to absorb that rather than place the burden of training on yet another system on providers many of whom we are asking to scale up for reporting. This won't be ideal as we move into flu season and a possible upsurge in COVID.

Can we set a time early next week to discuss the Pros and Cons of our options once you've had a chance to review the document?

Linda J. Bell, M.D.
State Epidemiologist
Director, Bureau of Communicable Disease Prevention and Control
Public Health
S.C. Dept. of Health & Environmental Control
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From: [Traxler, Brannon](#)
To: [Taylor, W. Marshall](#)
[Bell, Linda J.](#)
CC: [White, Stephen M.](#)
[Hayes, Alexandra](#)
Date: 10/23/2020 3:34:26 PM
Subject: Re: Follow up re: VAMS

Absolutely, as I share some of your concerns after learning what we did from Dana. I am also very interested in seeing the info on the pros and cons. Thanks! Brannon

L. Brannon Traxler, MD, MPH
Public Health Director - Interim
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From: Taylor, W. Marshall <taylorwm@dhec.sc.gov>
Sent: Friday, October 23, 2020 14:56
To: Bell, Linda J. <BELLW@dhec.sc.gov>; Traxler, Brannon <traxlelb@dhec.sc.gov>
Cc: White, Stephen M. <WhiteS2@dhec.sc.gov>; Hayes, Alexandra <hayesaf@dhec.sc.gov>
Subject: Re: Follow up re: VAMS

Certainly - please reach out to Teresa to schedule some time early next week. Marshall

W. Marshall Taylor, Jr.
Acting Director
S.C. Dept. of Health & Environmental Control
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From: Bell, Linda J. <BELLW@dhec.sc.gov>
Sent: Friday, October 23, 2020 2:41 PM
To: Taylor, W. Marshall <taylorwm@dhec.sc.gov>; Traxler, Brannon <traxlelb@dhec.sc.gov>
Cc: White, Stephen M. <WhiteS2@dhec.sc.gov>; Hayes, Alexandra <hayesaf@dhec.sc.gov>
Subject: Follow up re: VAMS

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From: [Hayes, Alexandra](#)
To: [Bell, Linda J.](#)
[Taylor, W. Marshall](#)
[Traxler, Brannon](#)
CC: [White, Stephen M.](#)
Date: 10/23/2020 4:41:57 PM
Subject: RE: Follow up re: VAMS
Attachments: Systems Comparison Tool.pdf

Good afternoon-

I have attached the Systems Comparison Tool for reference, including some funding impact information for one of the SIMON features we learned of today.

Additionally, it is important to note that in addition to any system(s) a jurisdiction uses for its COVID-19 Vaccination Program, Operation Warp Speed (OWS) is requiring enrolled COVID-19 vaccine providers to create and/or update their profile in [VaccineFinder](#) and report their daily COVID-19 vaccine inventory. COVID-19 vaccine availability and associated clinic information will not be public-facing until phase 2. We just learned about this reporting requirement for providers and we can share more about this when we meet.

Best,
Alexandra

Alexandra Hayes
Mobile: (803) 830-0571
Email: hayesaf@dhec.sc.gov

From: Bell, Linda J. <BELLW@dhec.sc.gov>
Sent: Friday, October 23, 2020 2:41 PM
To: Taylor, W. Marshall <taylorwm@dhec.sc.gov>; Traxler, Brannon <traxlelb@dhec.sc.gov>
Cc: White, Stephen M. <WhiteS2@dhec.sc.gov>; Hayes, Alexandra <hayesaf@dhec.sc.gov>
Subject: Follow up re: VAMS
Importance: High

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Vaccine Administration and Reporting Tool/Systems Review

Fall 2020

COVID-19 vaccination program will require end-to-end oversight, management, and near real-time reporting for all COVID-19 vaccine administration data, including inventory tracking, vaccine administration site tracking, and patient receipt.

Pros/Highlights

VAMS: Vaccine Administration Management System	SIMON (IIS): Statewide Immunization Online Network Immunization Information System	ReadyOp	Microsoft Forms
<ul style="list-style-type: none"> • No cost • Secure, web-based application • Meets all CDC reporting requirements • 4 separate modules (Jurisdiction/Employer/Clinic/Patient) that perform functions associated with: <ul style="list-style-type: none"> ○ Priority population identification ○ Vaccine inventory and administration tracking data (2D Barcode scanning) ○ Patient scheduling ○ Patient 2nd dose reminders ○ Clinic vaccination schedules ○ Reporting and analysis functions • Can transmit data to CDC and IZ Data Lake via IZ Gateway • CDC-developed training materials for all user roles • Dedicated CDC/VAMS Support and Subject Matter Expert (SME) staff • Dedicated VAMS helpdesk • Different user and access levels can be assigned • Flat file import/export function for VTrckS (in progress) 	<ul style="list-style-type: none"> • Secure, web-based application • Launched Sept 14, 2020 • Network of 10,000+ users • Utilized by SC vaccinators/state & federal vaccine program participants • Dedicated DHEC SME Staff and training material developer/coordinator • Dedicated user helpdesk • Existing training library can be built upon • Existing mass vaccination module using clinic paperwork • 2D Barcode Scanning capabilities • Reminder/recall function available • Provides dose-level accountability functions • Upgrades currently underway to ensure platform can meet CDC reporting requirements • Can transmit data to CDC and IZ Data Lake via IZ Gateway (or separate functionality that Envision is building) • Maintenance costs are included in current vendor contract • Can be leveraged for all phases of COVID-19 vaccination • Different user and access levels can be assigned • Flat file import/export function for VTrckS • New info: Mobile WebIZ module has offline access capabilities and integration into mass vaccination clinic processes for e-documentation of patient assessment and vaccine administration 	<ul style="list-style-type: none"> • Web-based access via publishable links for community • Database access for licensed users • Dedicated DHEC SME staff • Currently utilized for inventory management for DHEC warehouse • Can provide patient scheduling feature • Can capture vaccine administration data (and serve as “patient record”) • 2D Barcode Scanning Available • Different user and access levels can be assigned • Can export data in flat file (csv) or XML format (e.g. excel) • Flat file import to SIMON capability 	<ul style="list-style-type: none"> • Web-based access via publishable links • Dedicated DHEC SME Staff • Automated workflows for communication and productivity • Existing projects have used Forms to decrement resources • Automated reminders (e.g. reminder/recall function) • Can export data in flat file (csv) or XML format (e.g. excel) • Real-time data capture based on form submission • Reporting and analysis data functions can be automated, aggregated, and displayed in dashboard format • Different user and access levels can be assigned • Can automate data entry from Forms into SIMON • Can produce vaccination certificate • Agile system and upgrades can happen with minimal turnaround • Need Premium license to be able to create PDF exports

Vaccine Administration and Reporting Tool/Systems Review

Fall 2020

COVID-19 vaccination program will require end-to-end oversight, management, and near real-time reporting for all COVID-19 vaccine administration data, including inventory tracking, vaccine administration site tracking, and patient receipt.

Cons/Additional Considerations

VAMS: Vaccine Administration Management System	SIMON (IIS): Statewide Immunization Online Network Immunization Information System	ReadyOp	Microsoft Forms
<ul style="list-style-type: none"> • New tool- will require user training at all levels • Jurisdictions will have to appoint points of contact (POCs) to become local SMEs • May be best suited for Phase 1 efforts only; we may be able to expand into other phases 	<ul style="list-style-type: none"> • Enhancements/upgrade timelines to meet evolving CDC requirements is a challenge • Requires additional funding to support product enhancements • Will require training material development and associated training for COVID-19 vaccine considerations and mass vaccination module • Mass vaccination module is designed for post-clinic data entry using paperwork • Requires user account to access • Lacks a vaccine administration site and patient scheduling feature • New info: 10/23 Mobile WebIZ software and 2D Barcode scanner equipment and configuration is \$5,000 per set. For the planned 300 sets to support DHEC vaccination efforts in phase 1, this price tag is \$1.5 million 	<ul style="list-style-type: none"> • High workload burden with 1 DHEC committed staff • Scheduling capability in progress • Additional licenses need to be acquired (some cost associated) • Must be used in conjunction with another system that provides dose-level accountability (SIMON) • Will require training and associated material development • Reporting and analysis may require manual process to aggregate and report data • Interoperability challenges but can address with file extracts 	<ul style="list-style-type: none"> • High workload burden with 1 DHEC committed staff • Depending on available functions, this will be a new tool for users- will require training and associated material development • Need Premium license to be able to create PDF exports, which will prompt cost and timeline considerations • May need to address compliance consideration with Rebecca Morrison (previous precedent decision to use excel as a “record” per previous Nursing Director)

From: [Cofield, Whitney G.](#)

To: [White, Stephen M.](#)
[Hayes, Alexandra](#)
[Bevins, Marie A.](#)
[Salehi, McColloch S.](#)
[McNeil, Donna S.](#)
[Gulledge, Wendell K.](#)
[Green, Shanetra N.](#)
[Devine, Lori M.](#)
[Banks, John R.](#)

Date: 10/26/2020 9:27:25 AM

Subject: RE: VaccinePlanning_Region Update 10_26.pptx

Roger.

From: White, Stephen M. <WhiteS2@dhec.sc.gov>
Sent: Monday, October 26, 2020 8:52 AM
To: Cofield, Whitney G. <COFIELWG@dhec.sc.gov>; Hayes, Alexandra <hayesaf@dhec.sc.gov>; Bevins, Marie A. <bevinsma@dhec.sc.gov>; Salehi, McColloch S. <salehims@dhec.sc.gov>; McNeil, Donna S. <mcneilds@dhec.sc.gov>; Gulledge, Wendell K. <GULLEDWK@dhec.sc.gov>; Green, Shanetra N. <greensn@dhec.sc.gov>; Devine, Lori M. <devinelm@dhec.sc.gov>; Banks, John R. <banksjr@dhec.sc.gov>
Subject: Re: VaccinePlanning_Region Update 10_26.pptx

Depending on the conversation that happens today about VAMS vs SIMON, we may need to change the one bullet about VAMS

Stephen White, MHA
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S.C. Dept. of Health & Environmental Control
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From: Cofield, Whitney G. <COFIELWG@dhec.sc.gov>
Sent: Monday, October 26, 2020 8:35 AM
To: White, Stephen M. <WhiteS2@dhec.sc.gov>; Hayes, Alexandra <hayesaf@dhec.sc.gov>; Bevins, Marie A. <bevinsma@dhec.sc.gov>; Salehi, McColloch S. <salehims@dhec.sc.gov>; McNeil, Donna S. <mcneilds@dhec.sc.gov>; Gulledge, Wendell K. <GULLEDWK@dhec.sc.gov>; Green, Shanetra N. <greensn@dhec.sc.gov>; Devine, Lori M. <devinelm@dhec.sc.gov>; Banks, John R. <banksjr@dhec.sc.gov>
Subject: VaccinePlanning_Region Update 10_26.pptx

Hi guys,

Here's the presentation for today's meeting. Let me now if y'all have any edits before noon.

Whitney

Whitney G. Cofield
COVID-19 Incident Command – SEOC Liaison
External Plans and Operations Manager
Bureau of Public Health Preparedness
S.C. Dept. of Health & Environmental Control
Mobile: (803) 429-0315
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From: [White, Stephen M.](#)

To: [Moore, Davis Q.](#)

CC: [Hayes, Alexandra](#)

[Tallon, Ashley](#)

[Gulledge, Wendell K.](#)

[McNeil, Donna S.](#)

[Bevins, Marie A.](#)

[Cofield, Whitney G.](#)

[Parks, Laura N.](#)

Date: 10/26/2020 1:44:44 PM

Subject: ReadyOp

Hey Davis,

We decided today with Dr. Traxler, Dr. Bell and Director Taylor that the best way to move forward is with VAMS. Please let Mark know we appreciate his efforts. We also appreciate your efforts.

However, I'm curious if we still might be able to utilize the ReadyOp patient scheduler for our Flu/hep A clinics. Do you know where Mark is at with the Patient Scheduler?

Thanks,

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