Vaccine Navigator

Vaccine Patient Registration Survey

<table>
<thead>
<tr>
<th>Survey Link</th>
<th><a href="https://modhss.iad1.qualtrics.com/jfe/form/SV_231d5TxZxkGedCt">https://modhss.iad1.qualtrics.com/jfe/form/SV_231d5TxZxkGedCt</a></th>
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**Purpose**
To record all information for Missouri residents who wish to be vaccinated, and place them into phases and/or tiers based on their priority status

**Users**
This form is filled out by Vaccine Patients in advance of the vaccine (can be accessed on day of vaccine as well). The patient information is recorded, and they will be contacted later to schedule

**Notes**
Each submission of this survey will create a contact in our database. When a resident is eligible to schedule, a link will be sent via email allowing them to schedule their first (and later second) vaccine appointment
Welcome resident to the survey and explain the vaccination assessment process.

1. Click the arrow to proceed.

Vaccinated by other means:

- Determines if resident has previously been vaccinated (at a primary healthcare provider, pharmacy, hospital, etc.).

1. Indicate whether or not you have previously received a dose of the COVID-19 vaccine:
   - If “No” is selected, residents will proceed to next section.
   - If “Yes” is selected, they will proceed to the page 2.1 warning.

2. Click the arrow to proceed.
Page 2.1: Previously Vaccinated Warning
- If the resident indicates that they have been previously vaccinated, they will see this warning.
- It is strongly advised that residents get their second vaccination in the same manner that they got their first (i.e., primary care provider, pharmacy, etc.).
- Residents will not be prevented from scheduling and getting their second dose via the Vaccine Navigator.

Page 3: Patient Contact Information
- Records all of the individual's contact information.
- Validation is in place to ensure that the phone number and email fields are valid, and all fields are filled out.

1. **Fill out the Patient Contact Information** in the form:
   - First Name
   - Last Name
   - Date of Birth (mm/dd/yyyy)
   - Email
     - If a resident chooses not to input an email address, they will be promoted on the following page to enter a landline.
   - Cell Phone Number
2. **Click the arrow** to proceed.
Page 3.1: Patient Landline
(no email or cell phone option)

- Displays if the resident does not enter an email address or phone number
- Resident can choose to return to the previous page and input an email and cell phone if they do not wish to provide a landline

1. **Enter Landline**
2. **Click the arrow** to proceed

Page 3.2: Patient Contact – Address Information

1. **Enter Address**
2. **Enter City**
3. **Choose County** from the dropdown
4. **Confirm state is MO.** This is prepopulated
5. **Enter Zip Code**
6. **Click the arrow** to proceed
Page 4: Race/Ethnicity Questions

- Collects Demographic information for reporting purposes

1. Select your **ethnicity** and identify whether you are **Hispanic or Latino**

2. **Click the arrow** to proceed

Page 4.1: Gender Questions

1. Select your **gender**

2. **Click the arrow** to proceed
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Vaccine Assessment Scheduling & Follow-up Survey  

**Employment Status**

- Determines if residents will have their eligibility assessed based on employment. If “Yes” (currently employed), then they will proceed to answer additional questions.

1. Indicate whether or not you are **currently employed**
2. **Click the arrow** to proceed

**Private Code**

- Asks if resident is being vaccinated through an employer or private event.

1. **Select** whether or not you have a private event code
   - If ‘Yes’ is selected, the resident will be directed to a page where they type in their private code.
   - If ‘No’ is selected, they will move into Phase/Tier employment eligibility questions.
2. **Click the arrow** to proceed

**Enter Private Code**

- After the code is entered, residents are asked to confirm and re-enter the code once. If the codes match, the resident is allowed to proceed and will be able to later schedule at the private event.
- If their codes do not match, residents will be asked to re-enter their codes.

1. **Enter your private code**, if applicable
2. **Click the arrow** to proceed
Page 5.2: Employment Phase 1a Questions

- Assesses if resident is currently employed in a Phase 1a field/occupation
  - Selecting any of these options will place you in Phase 1a

1. Select what describes your employment type or living situation, if any
2. Click the arrow to proceed
Page 5.4: Employment Phase 1b, Tier 3 Questions

- Assesses if resident is currently employed in a Phase 1b, Tier 3 field/occupation
  - Selecting any of these options will place you in **Phase 1b, Tier 3**
- Residents who qualify for Phase 1a or Phase 1b, Tier 1 based on their answers to the previous questions will NOT see this question

1. Select what **best describes your employment type, if any**
2. **Click the arrow** to proceed
Page 6: High Risk Phase 1b, Tier 2 Question
- Assesses if resident is deemed as “High Risk” and qualifies for Phase 1b, Tier 2
  - Age >=65
  - Selects “Yes” to the following medical conditions
- All residents will answer this question for reporting purposes

1. Indicate whether you have any of the following medical conditions
2. Click the arrow to proceed

Page 6.1: Phase 2 Question
- Assesses if resident is part of Phase 2
- Residents who qualify for Phase 1a or 1b based on their answers to the previous questions will not see this question
- If any of the fields are selected, they will be grouped as Phase 2

1. Select what best describes your employment type, if any
2. Click the arrow to proceed
Page 7: Insurance Status Question

- Collects resident’s insurance information for reporting purposes

1. Select your **Insurance Status**
2. **Click the arrow** to proceed

Page 8: Additional Health Screening Questions

- Collects resident’s allergies and/or additional health condition information for safety and reporting purposes

1. Indicate your **additional health conditions**
   o Selecting yes to any of the following will prompt you to provide more details in the following questions
2. **Click the arrow** to proceed
Page 8.1: Follow-up Example

- For “Yes” answers to a food, vaccine, and medication allergy, resident will be asked to provide more detail

Page 8.2: Follow up Example (Date)

- For “Yes” answers to receiving a vaccine other than Covid recently and having received passive antibody therapy, resident will be asked to provide more detail
**Page 9: Privacy Consent Form**

- Provides residents with information on Missouri’s Privacy Practices

1. **Select whether or not you agree to the statement of consent**
   - If you select “I do not agree”, you will be sent to another page with additional information

2. **Click the arrow** to proceed

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**Page 9.1: Disagree to Consent Caution Message**

- If they do not consent, they will see the following message: “You must agree to schedule a vaccination. Please go back to change your answer. If you do not agree to privacy practices, continue forward to end the survey.” If they then continue forward, their survey will end, and their record will not be collected
Page 10: COVID Consent Form

- Provides residents with information on the COVID-19 Vaccine
- Certifies that residents answer all the questions truthfully

1. Select **whether or not you agree accept the statement of consent**
   - If you select “I decline”, you will be sent to another page with additional information

2. **Click the arrow** to proceed

Page 10.1: Disagree to Consent Caution Message

- If they do not consent, they will see the following message: “You must agree to schedule a vaccination. Please go back to change your answer. If you do not agree to privacy practices, continue forward to end the survey.” If they then continue forward, their survey will end and their record will not be collected.
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Page 11: Tier and/or Phase Assignment

- Displays which phase/tier the resident has been placed in
- Residents who qualify to be vaccinated will receive an email that will provide them with a link to schedule their appointment

1. **Click the arrow** to proceed

Page 12: Survey End

- Thanks residents for taking the survey
- Residents will also receive an email and a text message with follow-up information