

FACILITY NAME: _____
 COVID-19 VACCINATION PLAN & TIMELINE
 FALL 2024



	Responsible Person	Complete by	Complete Y/N	Notes
Step 1: Screen for eligibility Timeline: June/July				
Step 2: Provide Vaccine Education Timeline: June-August				
Step 3: Gathering Consent Timeline: July/August				
Step 4a: Schedule Vaccine Clinic Timeline: July/August				
Step 4b: (for SNFs only) Obtain Vaccine Supply* Timeline: July/August				Pharmacy Name/Rep: Contact Information: *Ensure adequate refrigeration storage.
Step 5: Create a Plan for Ongoing Vaccinations				