

2014-2015

Flu Outreach Campaign

Service Planning Areas 1-8



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Flu Outreach Campaign 2014-2015 Report

Introduction

Every year, the Los Angeles County (LAC) Department of Public Health (DPH) partners with community-based organizations across the County, such as churches and senior centers, to offer flu vaccines at no charge for individuals who either do not have health insurance or do not have access to flu vaccinations through their regular healthcare provider. From October 2014 through February 2015, DPH administered 20,953 vaccines at 152 outreach clinics in Service Planning Areas 1-8. Community Health Services (CHS) partnered with the Immunization Program and the Office of Health Assessment and Epidemiology (OHAE) to complete this monumental task utilizing 381 vaccinators, 26 flu coordinators, and 8 data entry staff.

Methods

Outreach Planning

The influenza virus can adversely affect certain populations more than others. For this reason, it is of the utmost importance that these at-risk groups are targeted to receive the influenza vaccination. Groups targeted include pregnant women, children, adults 50 years of age or older, persons who are immunocompromised due to a disease or medical condition, persons who have chronic medical conditions (such as heart disease, diabetes or who are overweight or obese), persons who work or live in a nursing home or long-term care facility and healthcare and day care workers. Flu prevention for these groups is a high public health priority. To this end, the CHS flu coordinators specifically selected community venues for the 2014-2015 flu season to target these high-risk groups, which included schools, churches, civic and community centers, cold weather and homeless shelters, health fairs, libraries and skilled nursing facilities.

Outreach Tracking

In June 2014, the Vaccine Consent Form (see Attachment A2) was developed. All questions from the previous flu season's consent form were retained. In addition, the option for vaccine manufacturer "Glaxo Smith Kline (GSK)" and a required California Immunization Registry (CAIR) disclosure question were added to the form.

After the Consent Form was prepared, the 12 health centers in the eight Service Planning Areas (SPAs) participating in the outreach clinics developed schedules (see Attachment A3) with the following information:

- Date of outreach
- Outreach start and end times
- Outreach, school, or POD designation
- Venue Type: community or civic centers, health fair, library, outreach, school, senior center, shelter
- Target population (children, seniors, homeless, immunocompromised adults, etc.)
- Name of outreach venue

- Address of outreach venue
- Supervisorial district of outreach venue
- Doses administered in previous year (if the venue hosted an outreach the previous year)
- Number of doses requested

Outreach information from the schedules was compiled in the Flu Vaccination Inventory Log (Attachment A4) by data entry staff. This log had multiple intended uses, including documenting the receipt of cover sheets, documenting the receipt of outreach batches, assigning batches for data entry and summing the number of forms received and entered. Additionally, data entry staff enumerated each outreach with a unique identification number, or “Site Number,” for tracking and analysis purposes (Attachment A5).

The 2013-2014 Cover Sheet was updated (Attachment A6) to reflect the different vaccine manufacturers and added fields. At the end of each outreach session, consent forms were collected, the number of vaccines administered recorded on the Cover Sheet and were then reviewed by the nurse-in-charge, according to protocols in the Flu Form Procedures (Attachment A7). The completed Cover Sheet was then faxed or e-mailed to data entry staff within three business days of the outreach. Once received by the data entry staff, information from the Cover Sheet was used to update the Vaccination Inventory Log and to update the codebook (Attachment A8) with any new vaccinator initials or vaccine lot numbers.

Consent forms were hand-delivered by CHS staff to OHAE staff for data entry. Upon arrival at OHAE, the date of receipt and name of the staff member delivering the forms were recorded in the Vaccine Inventory Log. Batches were then stored in a locked cabinet in OHAE by date.

Weekly Flu Update

Every week, the Flu Vaccine Inventory Log was e-mailed to the CHS Flu Coordinator with the most recent status of all the flu outreaches, highlighting which Cover Sheets and batches were received. Beginning in December 2014, a summary of the data entry was included in the email with the following information:

- Total number of outreach batches received
- Number of outreaches entered
- Percentage of outreaches entered
- Number of forms entered
- Percentage of forms entered
- Number of forms not entered
- Percentage of forms not entered
- Reasons forms were not entered

Data Entry

In preparation for data entry, coded intake forms (Attachment A9), a codebook (Attachment A8) and password-protected single-user Microsoft Access databases (Attachment A10) were developed by data entry staff. The codebook was updated weekly as needed with new lot numbers, vaccinator initials and outreach site numbers from the Cover Sheets. A data entry

protocol (Attachment A11) was also developed with instructions for handling the consent forms and completing data entry.

Once batches were received in OHAE, data entry assignments were made. Data entry staff received Data Entry Completion Logs (Attachment A12) to record their completed assignments and any problems encountered during data entry. Upon completion of data entry, the Completion Log was submitted and the Flu Vaccine Inventory Log updated with the number of forms entered and the completion date.

Bi-Monthly Flu Vaccine Update

As data entry progressed, three preliminary Flu Vaccine Accountability spreadsheets were emailed twice a month to the CDC Public Health Advisor (Attachment 13: Tables A2-A4). Table A2 includes the number of doses given by age group (6 months-2 years, 3-18 years, 19-49 years, 50-59 years, 60-64 years and 65 years and over) and lot number for each date the health center hosted an outreach. Table A3 shows the number of doses given by age group and lot number for each health center, regardless of the date administered. Table A4 displays the number of doses given by age group for each lot number. Forty-nine records with missing date of birth and three with ages less than 6 months old were excluded from analysis. The final sample for analysis consisted of 20,953 clients.

Data Cleaning

Rigorous data cleaning techniques were used to check for possible errors in data entry. Password-protected Microsoft Access databases were imported via a secured network drive into SAS 9.3 software; a SAS program was created using the codebook and Cover Sheets as a reference. After completing data entry batches, data entry staff received data cleaning sheets to double-check possible entry errors against the original flu forms. Further data cleaning ensured that patient responses were consistent with other related fields. Due to a high percentage of missing information on gender, analysts used data imputation methods to improve data quality.

In addition, routine checks were performed to make sure that the information on the cover sheets (such as vaccinators and lot numbers) correctly reflected the hardcopies and in turn, the database. If any inconsistencies were found, an OHAE Epidemiology Analyst and the Nurse-in-charge at the outreach site assisted in rectifying the cover sheets.

Key Findings

Participation

DPH conducted flu outreaches from September 11, 2014 to February 3, 2015. During this time, 20,953 persons received the influenza vaccine. Clients completed a consent form, self-reporting their current or permanent address, city and their ZIP code of residence. Most participants were located throughout Los Angeles County and attended outreaches close to their residence.

Characteristics Profile (Table 1)

Gender: Overall, more females than males received the influenza vaccine at the DPH outreaches (57% versus 39%, respectively). This was also true when looking at the gender distribution for outreaches by the managing health center, with North Hollywood having the highest percentage of females (64%) and Hollywood Wilshire (54%) as well as Central (54%) the lowest.

Age group: Persons receiving the flu vaccine ranged in age from 6 months to 112 years old (mean = 45, SD = 22; data not shown). Many clients were in the targeted older age groups – age 55-64 years (22%) or 65+ (17%) – and an additional 16% were children between 6 months and 17 years of age. Outreach events run by Pacoima Health Center had the highest percentage of persons 6 months to 17 years of age (30%), whereas Curtis Tucker events had the highest percentage of persons aged 65 or older (28%). According to consent forms received, three persons less than 6 months of age were vaccinated and excluded from analyses.

Race/Ethnicity: Overall, Hispanic and Asian clients accounted for the largest proportions of clients receiving influenza vaccines (39% and 36%, respectively), followed by Whites at 15%. Only 5% of persons receiving the flu vaccine at outreach sites identified as Black or African American. However, the race/ethnicities represented varied by health center-operated outreach site. Asian clients accounted for the majority of persons receiving flu vaccine at Central (58%), Hollywood Wilshire (81%), Monrovia (66%), and Simms Mann Burke (67%) health centers. In contrast, Hispanic clients represented the majority of persons at outreaches for Martin Luther King Jr. Center for Public Health (67%), North Hollywood (72%), Pacoima (69%) and Whittier (58%).

Language of the Survey: Overall, most clients who received the influenza vaccination opted to fill out the consent form in English (64%), while 22% clients used the Spanish, 11% used the Korean form and 3% completed the Chinese form. The distribution of consent form languages varied across managing health centers.

Insurance Status: Many outreach clients indicated they were uninsured (35%), while 27% indicated that they had private insurance. Insurance status varied across managing health centers; outreach events managed by North Hollywood Health Center had the highest percentage of uninsured clients (55%), while those managed by Simms Mann had the lowest (21%).

Vaccines for Children (VFC) Eligibility: clients Only 7% of clients were VFC eligible at these outreach events. (See Technical Notes section.)

Pregnant: Less than 1% of female clients indicated that they were pregnant at the time of vaccination.

Vaccine Type: Overall, more inactivated vaccine was administered than live attenuated vaccine (76% versus 23%). Pacoima and Antelope Valley-managed outreaches utilized the lowest proportion of inactivated vaccine (55% each), while Monrovia and Simms Mann Burke utilized the highest (88% each).

Manufacturer: The majority of vaccines administered were from the manufacturer Sanofi-Pasteur (55%), followed by MedImmune (23%), Novartis (12%), Glaxo Smith Kline (7%) and BIOCSL (1%).

Site of Injection: At DPH health center-managed influenza outreaches, the majority of clients received the vaccination in their left deltoid (64%). The remainder received the vaccine intranasally (23%), in the right deltoid (12%), in the left thigh (<1%) or the right thigh (<1%).

Service Planning Areas (Table 2)

Gender: The gender distribution of vaccine recipients was similar across Service Planning Areas. Approximately 57% of all clients were female and 39% male. SPA 8 had the highest percentage of females (63%) and SPA 4 had the lowest (54%).

Age group: The age distribution of clients varied greatly by SPA. SPA 1 vaccinated the largest proportion of 6-month to 17-year-old clients (29%, 247/849), while SPA 8 vaccinated the largest proportion of persons aged 65 and older (30%, 455/1,501).

Race/Ethnicity: Asians represented the majority of clients in SPA 4 and SPA 5 (65% and 67%, respectively); SPA 6 vaccinated the largest proportion of African Americans (16%) and the largest proportion of Hispanics (67%). Hispanics represented the majority of clients in SPA 2 (60%) and SPA 7 (58%) as well.

Language of the Survey: Survey languages varied greatly throughout the county: SPA 8 utilized the largest proportion of English surveys (87%); SPA 6 utilized the largest proportion of Spanish surveys (44%); SPA 3 utilized the largest proportion of Chinese surveys (11%); and SPA 5 utilized the largest proportion of Korean surveys (49%).

Insurance Status: SPA 8 had the largest proportion of Medicare recipients (25%), while SPA 1 had the largest proportion of Medicaid recipients (17%). The largest proportion of privately insured individuals vaccinated was in SPA 5 (37%). In contrast, SPA 6 had the largest proportion of uninsured clients (49%), followed by SPA 7 (42%). SPA 5 had the largest proportion of respondents who did not know their insurance status (8%).

Vaccine Type: SPA 5 administered the largest proportion of inactivated vaccine (88%), while SPA 1 administered the largest proportion of live vaccine (44%).

Manufacturer: SPA 8 administered the largest proportion of Sanofi-Pasteur vaccine (81%), while SPA 5 administered the largest proportion of Novartis vaccine (87%) and SPA 1 administered the largest proportion of MedImmune vaccine (43%). The largest proportion of Glaxo Smith Kline vaccine was administered by SPA 7 (24%). All doses of BioCSL (manufacturer of the Afluria vaccine) were administered in SPA 6.

Characteristics by insurance type (Table 3)

The Department of Public Health vaccinated 20,953 clients, most of whom were uninsured (n=7,371; 35%), followed by clients with private insurance (n=5,663; 27%) and those with Medicare (n=3,149; 15%).

Gender: When stratifying by gender, it appears that females and males follow similar patterns of health insurance coverage, although additional analyses would be necessary to confirm this.

Age: The majority of clients who had Medicare were 65 or older (65%). Clients aged 55-64 years accounted for a large proportion of those using Medicaid and private insurance (25% each). The majority of those who were uninsured or who did not know their insurance status were aged 18-54 years old (58% and 49%, respectively).

Race/Ethnicity: Asian clients (35%) constituted the highest percentage of those insured by Medicare, followed by Whites (28%). Medicaid clients were largely Hispanic (42%), followed by Asians (35%). Asians made up the largest percentage of those who were privately insured (45%). The majority of the uninsured were Hispanic/Latino (56%).

Language of the Survey: Overall, English speakers made up the majority of respondents (64%) and a higher percentage of those with private insurance and those with other types of health insurance (80% and 86%, respectively). Additionally, a majority of those who indicated they had Medicare (75%) or Medicaid (58%) were also English speakers. Spanish surveys were used by 22% of respondents. However, over a third of uninsured clients were Spanish-speakers (35%).

Manufacturer: The Sanofi-Pasteur vaccine was the most frequently utilized vaccine for all insurance types, including 69% of Medicare clients, 59% of Medicaid clients, 57% of clients with private insurance, and 54% of clients with no insurance.

Insurance types (Tables 3a and 3b)

Tables 3a and 3b displays characteristics of people with and without private insurance, stratified by co-insurance options (clients were able to choose more than one insurance type for the survey). Twenty seven percent of clients (n=5,663) reported having private insurance (private only or some combination of private insurance and Medicare, Medicaid and/or other insurance). Of the 20,953 clients vaccinated, most (63%) were without private insurance (that is they had some combination of Medicare, Medicaid and/or other insurance; n=13,153), 35% had no insurance (n=7,371).

Note: In Table 3a the category for private insurance plus Medicare and Medicaid overlaps with categories for private insurance plus Medicare or private insurance plus Medicaid, while in Table 3b there is no overlap. More detailed frequency counts for insurance categories and their cross-tabulations are presented in Attachment Table A1.

Target Populations (Table 4)

The outreaches were implemented to reach certain high-risk populations to ensure that they were receiving the vaccine. The outreaches targeted these populations in particular: children (7%), seniors (5%), and homeless (14%). The remainder of the outreaches had multiple targeted populations. In fact, 63% of outreaches targeted all specified groups.

Number of outreach events (Figure 1)

Overall, the public health department offered 152 flu outreach events throughout Los Angeles County. On average, DPH vaccinated 138 clients per event (20,953/152). All LAC Service Planning Areas participated in this flu outreach campaign. SPA 6 managed the most events (n=38), while the largest average number of clients per outreach were seen in SPA 2 (183 clients per event).

Percent of clients vaccinated by venue (Figure 2)

Throughout Los Angeles County, the highest percentage of clients was vaccinated at churches (36%; n=7,527), followed by community centers (16%; n=3,253), senior centers (12%; n=2,550) and libraries (10%; n=2,068).

Number of clients vaccinated by venue and by SPA (Figures 3-10)

As previously stated, most clients were vaccinated at churches. Antelope Valley (SPA 1), San Gabriel Valley (SPA 3), Metro (SPA 4), West (SPA 5) and South (SPA 6) had the highest number of clients vaccinated at their church-based outreaches, with the highest number in SPA 3 (n=2,040). The highest number of clients vaccinated at San Fernando Valley (SPA 2) and South Bay (SPA 8) outreaches was at community centers (n=736 and n=726, respectively). The highest number of clients vaccinated at East LA (SPA 7) outreaches was at senior centers (n=677).

Number of clients vaccinated by venue and by race group (Figures 10a1-10a6)

The majority of Asian, Black/African American, Hispanic/Latino, Native Hawaiian/Pacific Islander clients were vaccinated at churches. The highest number of White/Non-Hispanic clients was vaccinated at community centers (n=1,011), followed by senior centers (n=553). Among American Indians/Native Alaskans clients vaccinated, the highest number of clients was vaccinated at schools (n=8), then at community centers and libraries (n=7 each).

Number of clients vaccinated by venue and by age group (Figures 10b1-10b9)

The venue where the highest number of clients in all age groups (except the group 75 years and older) was churches, especially in the 55-64 years old age group (n=1,619). The highest number of clients in age group 75 years and older was vaccinated at senior centers (n=515) and community centers (n=499).

Maps (Figures 11-21)

Flu outreach sites were operated throughout Los Angeles County. A majority of persons receiving the flu vaccine appear to be located in ZIP codes that were close to one of the outreach locations (Figure 11). SPA 2 (San Fernando) and SPA 3 (San Gabriel) had the most Los Angeles County residents vaccinated (Figure 12). By Supervisorial District, districts 1 and 4 had the highest number of persons vaccinated (Figure 13). Though most clients were located near the outreach sites, many who resided in a ZIP code that was not close to the outreach that they attended (Figures 14-21).

What We Learned

One of the goals of the annual flu campaign is to vaccinate the uninsured. This year was no exception, with over 7,000 vaccinated clients (35%) reporting that they had no health insurance.

It is also important to note that over 10,000 people with private and public (Medicare and Medicaid) insurance received a flu shot. These results demonstrate that these free flu clinics serve both as a “safety net” for the uninsured and as a preferred provider for some who are insured.

We also realized that more efforts should continue to be allocated to immunize targeted populations such as children, seniors, homeless and immunocompromised adults and outreaches were conducted in a variety of venues to reach these groups.

We learned that it is important to offer the consent form in multiple languages as only 64% of clients completed the English consent form.

Finally, tracking and entering approximately 21,000 outreach forms was a tremendous task and truly required the work of the hundreds of staff members and volunteers to be successful.

Limitations

Results from the Influenza Outreach Campaign are subject to several limitations. First, results may be subject to recall bias because analysis relied on self-reported data. Because the first half of the Vaccine Consent Form, including socio-demographic characteristics, was filled out by the patient and the nursing staff completed the vaccine information in the second half, misclassification may occur and some measures may be under- or over-reported.

Second, missing data is a pervasive problem with assessment surveys, so checking for completed forms before the patient leaves is essential to maintain data integrity and its usefulness.

Third, the results of this survey may not be generalizable to the general population because data was collected from specific outreach sites in Los Angeles County not chosen in a random fashion.

Finally, this is not a longitudinal study and the results should not be interpreted or be used in this manner.

Technical Notes

Vaccines for Children (VFC) Eligibility

In the fall of each year, the Los Angeles County Department of Public Health Immunization Program (LACIP) receives an allocation of seasonal flu vaccine from the California Department of Public Health (CDPH) Immunization Branch for enhancing vaccine availability in the county. The vaccine doses received are distributed to community partners in addition to being used for DPH outreaches and in-house clinics.

In previous years, the LACIP received two different sources of seasonal flu vaccine. The first source was State-purchased flu vaccine for adults. The California Health and Safety Code Section 120392.3 that governs the State flu program only allowed for the use of the State-supplied flu vaccine on adults 19 years of age and older with priority towards persons 60 years and older. The second source was seasonal flu vaccine supplied by the Vaccines for Children (VFC) Program for use on VFC eligible children 6 months through 18 years of age. Because LACIP received a combination of State-supplied and VFC-supplied flu vaccines, LACIP was required to screen for VFC eligibility.

Due to a change in the law governing the flu program, use of State-supplied flu vaccine is now based solely on The Advisory Committee on Immunization Practices (ACIP) recommendations for all persons at least 6 months of age and up. With this change, all of the flu vaccine the LACIP received for the 2014-2015 flu season is State-supplied.

The consent form CHS uses for these outreach clinics still has the categories for VFC eligibility screening to ensure the appropriate use of VFC-supplied flu vaccine in the event that use of VFC-supplied flu vaccine resumes.

Table 1. Characteristics of vaccinated flu clients (n=20,953) by Health Center Managing the Outreach, 2014-2015 Flu Outreach Campaign (Preliminary Data).

	Total		Health Center Managing the Outreach											
			Antelope Valley		Central		Curtis Tucker		Glendale		Hollywood Wilshire		MLK Jr. Center for Public Health	
Characteristics ^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Number of Outreaches	152	100	7	4	18	10	13	8	3	3	5	5	37	17
Total	20,953	100	849	100	2,135	100	1,633	100	554	100	1,054	100	3,548	100
Gender														
Male	8,275	39	347	41	906	42	583	36	230	42	473	45	1,260	36
Female	11,908	57	468	55	1,147	54	999	61	307	55	573	54	2,077	59
Age (Years)														
under 5	424	2	31	4	44	2	24	1	10	2	13	1	48	1
5-17	2,978	14	216	25	274	13	148	9	66	12	82	8	463	13
18-24	1,135	5	61	7	80	4	46	3	15	3	57	5	357	10
25-34	1,778	8	83	10	178	8	118	7	33	6	88	8	431	12
35-44	2,948	14	125	15	415	19	180	11	64	12	127	12	604	17
45-54	3,544	17	120	14	422	20	260	16	98	18	166	16	667	19
55-64	4,504	22	138	16	444	21	401	25	119	21	348	33	603	17
65-74	2,101	10	44	5	164	8	218	13	78	14	129	12	244	7
75+	1,541	7	31	4	114	5	238	15	71	13	44	4	131	4
Race/Ethnicity														
Asian	7,620	36	77	9	1,235	58	377	23	175	31	850	81	264	7
Black/African American	1,032	5	65	8	97	5	77	5	9	2	10	1	566	16
Hispanic/Latino	8,219	39	411	48	626	30	548	34	101	18	63	6	2,368	67
White/Non-Hispanic	3,206	15	230	27	104	5	548	34	230	42	107	10	203	6
Other	187	1	8	1	11	1	24	1	23	4	3	<1	18	1
Native Hawaiian/Pacific Islander	95	<1	5	1	9	<1	15	1	2	<1	2	<1	5	<1
American Indian/Alaskan Native	47	<1	5	1	2	<1	7	<1	2	<1	0	-	7	<1
Mixed/Multiethnic	365	2	47	6	34	2	28	2	11	2	19	2	51	1
Language of Survey														
English	13,449	64	693	82	1,128	53	1,356	83	531	96	539	51	2,020	57
Spanish	4,612	22	156	18	369	17	277	17	22	4	28	3	1,526	43
Chinese	630	3	0	-	87	4	0	-	1	<1	1	<1	1	<1
Korean	2,262	11	0	-	551	26	0	-	0	-	486	46	1	<1
Insurance Status														
Medicare	3,149	15	119	14	259	12	385	24	114	20	129	12	320	9
Medicaid/Medi-Cal	1,845	9	148	17	218	10	119	7	69	12	112	11	191	5

Table 1. Characteristics of vaccinated flu clients (n=20,953) by Health Center Managing the Outreach, 2014-2015 Flu Outreach Campaign (Preliminary Data).

	Total		Health Center Managing the Outreach											
			Antelope Valley		Central		Curtis Tucker		Glendale		Hollywood Wilshire		MLK Jr. Center for Public Health	
Characteristics ^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Number of Outreaches	152	100	7	4	18	10	13	8	3	3	5	5	37	17
Total	20,953	100	849	100	2,135	100	1,633	100	554	100	1,054	100	3,548	100
Private insurance	5,663	27	189	22	501	23	538	33	196	35	319	30	621	17
Uninsured	7,371	35	280	33	824	39	457	28	168	30	441	42	1,723	49
Don't Know	1,287	6	45	5	147	7	102	6	21	4	38	4	235	7
Other	7	<1	0	-	3	<1	0	-	0	-	1	<1	1	<1
Vaccines for Children (VFC) Eligibility														
Uninsured	834	4	53	6	86	4	37	2	26	5	21	2	193	5
Medi-Cal/CHDP	635	3	84	10	56	3	32	2	14	3	26	2	70	2
American Indian/Alaskan Native	6	<1	0	-	0	-	3	<1	1	<1	0	-	0	-
Not VFC eligible	19,478	93	712	84	1,993	93	1,561	96	513	93	1,007	96	3,285	93
Pregnant	61	<1	1	<1	7	<1	4	<1	2	<1	2	<1	10	<1
Vaccine Type³														
Inactivated	15,854	76	468	55	1,658	78	1,370	84	430	78	839	80	2,470	70
Live	4,880	23	376	44	459	22	248	15	122	22	214	20	965	27
Manufacturer³														
Sanofi-Pasteur	11,430	55	453	53	1,628	76	1,224	75	429	77	827	78	1,487	42
Novartis	2,548	12	7	1	37	2	112	7	2	<1	8	1	244	7
MedImmune	4,912	23	372	44	462	22	242	15	123	22	213	20	1,013	29
Glaxo Smith Kline	1,485	7	0	-	0	-	0	-	0	-	0	-	463	13
BIOCSL	261	1	0	-	0	-	0	-	0	-	0	-	261	7
Site of Injection³														
Left deltoid	13,312	64	317	37	1,458	69	1,134	69	378	68	713	68	1,825	51
Right deltoid	2,421	12	140	16	183	9	224	14	47	8	115	11	687	19
Left thigh	100	<1	4	<1	14	1	5	<1	2	<1	8	1	5	<1
Right thigh	34	<1	2	<1	2	<1	0	-	2	<1	0	-	2	<1
Intranasal	4,912	23	380	45	458	21	246	15	122	22	213	20	1,012	29

¹Missing values not shown.

²Numbers and percentages may exceed 100% due to multiple responses and/or rounding.

³Raw data presented for vaccine type, manufacturer, and site of injection; numbers may be inconsistent.

Table 1. Characteristics of vaccinated flu clients (n=20,953) by Health Center Managing the Outreach, 2014-2015 Flu Outreach Campaign (Preliminary Data).

	Total		Health Center Managing the Outreach											
			Monrovia		North Hollywood		Pacoima		Pomona		Simms Mann Burke		Whittier	
Characteristics ^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Number of Outreaches	152	100	11	7	3	2	10	9	20	17	11	8	14	10
Total	20,953	100	1,491	100	498	100	1,879	100	3,579	100	1,660	100	2,073	100
Gender														
Male	8,275	39	608	41	142	29	713	38	1,494	42	704	42	815	39
Female	11,908	57	836	56	318	64	1,078	57	1,964	55	928	56	1,213	59
Age (Years)														
under 5	424	2	25	2	29	6	64	3	54	2	42	3	40	2
5-17	2,978	14	168	11	73	15	505	27	545	15	199	12	239	12
18-24	1,135	5	57	4	28	6	117	6	157	4	69	4	91	4
25-34	1,778	8	133	9	75	15	174	9	199	6	121	7	145	7
35-44	2,948	14	170	11	69	14	328	17	396	11	212	13	258	12
45-54	3,544	17	253	17	84	17	310	16	556	16	260	16	348	17
55-64	4,504	22	385	26	95	19	265	14	799	22	376	23	531	26
65-74	2,101	10	156	10	32	6	82	4	520	15	202	12	232	11
75+	1,541	7	144	10	13	3	34	2	353	10	179	11	189	9
Race/Ethnicity														
Asian	7,620	36	977	66	71	14	247	13	1,792	50	1,107	67	449	22
Black/African American	1,032	5	18	1	4	1	20	1	70	2	74	5	22	1
Hispanic/Latino	8,219	39	331	22	361	72	1,303	69	824	23	86	5	1,197	58
White/Non-Hispanic	3,206	15	113	8	53	11	226	12	737	21	339	21	316	15
Other	187	1	9	1	2	<1	19	1	36	1	15	1	19	1
Native Hawaiian/Pacific Islander	95	<1	12	1	0	-	1	<1	19	1	3	<1	22	1
American Indian/Alaskan Native	47	<1	2	<1	1	<1	0	-	10	<1	2	<1	9	<1
Mixed/Multiethnic	365	2	17	1	0	-	38	2	70	2	15	1	35	2
Language of Survey														
English	13,449	64	1,037	70	196	39	948	50	2,686	75	834	50	1,481	71
Spanish	4,612	22	113	8	302	61	930	49	288	8	13	1	588	28
Chinese	630	3	333	22	0	-	1	<1	202	6	0	-	4	<1
Korean	2,262	11	8	1	0	-	0	-	403	11	813	49	0	-
Insurance Status														
Medicare	3,149	15	250	17	51	10	146	8	710	20	330	20	336	16
Medicaid/Medi-Cal	1,845	9	184	12	61	12	248	13	234	7	71	4	190	9

Table 1. Characteristics of vaccinated flu clients (n=20,953) by Health Center Managing the Outreach, 2014-2015 Flu Outreach Campaign (Preliminary Data).

	Total		Health Center Managing the Outreach											
			Monrovia		North Hollywood		Pacoima		Pomona		Simms Mann Burke		Whittier	
Characteristics ^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Number of Outreaches	152	100	11	7	3	2	10	9	20	17	11	8	14	10
Total	20,953	100	1,491	100	498	100	1,879	100	3,579	100	1,660	100	2,073	100
Private insurance	5,663	27	381	26	54	11	298	16	1,401	39	612	37	550	27
Uninsured	7,371	35	480	32	276	55	730	39	780	22	345	21	867	42
Don't Know	1,287	6	106	7	35	7	123	7	192	5	138	8	105	5
Other	7	<1	0	-	0	-	0	-	0	-	1	<1	1	<1
Vaccines for Children (VFC) Eligibility														
Uninsured	834	4	51	3	31	6	115	6	113	3	25	2	83	4
Medi-Cal/CHDP	635	3	43	3	46	9	135	7	64	2	18	1	47	2
American Indian/Alaskan Native	6	<1	0	-	0	-	0	-	2	<1	0	-	0	-
Not VFC eligible	19,478	93	1,397	94	421	85	1,629	87	3,400	95	1,617	97	1,943	94
Pregnant	61	<1	9	1	5	1	4	<1	9	<1	2	<1	6	<1
Vaccine Type³														
Inactivated	15,854	76	1,305	88	354	71	1,026	55	2,729	76	1,454	88	1,751	84
Live	4,880	23	180	12	143	29	848	45	815	23	200	12	310	15
Manufacturer³														
Sanofi-Pasteur	11,430	55	1,134	76	345	69	668	36	2,350	66	2	<1	883	43
Novartis	2,548	12	20	1	4	1	54	3	256	7	1,444	87	360	17
MedImmune	4,912	23	181	12	145	29	826	44	817	23	201	12	317	15
Glaxo Smith Kline	1,485	7	131	9	0	-	290	15	95	3	0	-	506	24
BIOCSL	261	1	0	-	0	-	0	-	0	-	0	-	0	-
Site of Injection³														
Left deltoid	13,312	64	1,115	75	312	63	789	42	2,389	67	1,322	80	1,560	75
Right deltoid	2,421	12	181	12	26	5	204	11	318	9	119	7	177	9
Left thigh	100	<1	4	<1	8	2	14	1	24	1	4	<1	8	<1
Right thigh	34	<1	3	<1	4	1	6	<1	5	<1	5	<1	3	<1
Intranasal	4,912	23	178	12	145	29	845	45	808	23	198	12	307	15

¹Missing values not shown.

²Numbers and percentages may exceed 100% due to multiple responses and/or rounding.

³Raw data presented for vaccine type, manufacturer, and site of injection; numbers may be inconsi

Table 2. Characteristics of vaccinated flu clients (n=20,953) by Service Planning Area (SPA), 2014-2015 Flu Outreach Campaign (Preliminary Data).

	Total		Service Planning Areas															
			SPA 1 Antelope Valley		SPA 2 San Fernando		SPA 3 San Gabriel		SPA 4 Metro		SPA 5 West		SPA 6 South		SPA 7 East		SPA 8 South Bay	
Characteristics ^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Number of Outreaches	152	100	7	4	16	11	31	20	23	15	11	7	38	25	14	9	12	8
Total	20,953	100	849	100	2,931	100	5,070	100	3,189	100	1,660	100	3,680	100	2,073	100	1,501	100
Gender																		
Male	8,275	39	347	41	1,085	37	2,102	41	1,379	43	704	42	1,306	35	815	39	537	36
Female	11,908	57	468	55	1,703	58	2,800	55	1,720	54	928	56	2,160	59	1,213	59	916	63
Age (Years)																		
under 5	424	2	31	4	103	4	79	2	57	2	42	3	58	2	40	2	14	1
5-17	2,978	14	216	25	644	22	713	14	356	11	199	12	507	14	239	12	104	7
18-24	1,135	5	61	7	160	5	214	4	137	4	69	4	363	10	91	4	40	3
25-34	1,778	8	83	10	282	10	322	7	266	8	121	7	449	12	145	7	100	7
35-44	2,948	14	125	15	461	16	566	11	542	17	212	13	639	17	258	12	145	10
45-54	3,544	17	120	14	492	17	809	16	588	18	260	16	680	18	348	17	247	16
55-64	4,504	22	138	16	479	16	1,184	23	792	25	376	23	608	17	531	26	396	26
65-74	2,101	10	44	5	192	7	676	13	293	9	202	12	244	7	232	11	218	14
75+	1,541	7	31	4	118	4	497	10	158	5	179	11	132	4	189	9	237	16
Race/Ethnicity																		
Asian	7,620	36	77	9	492	17	2,769	55	2,085	65	1,107	67	264	7	449	22	377	25
African American/Black	1,032	5	65	8	33	1	88	2	107	3	74	4	574	16	22	1	69	5
Hispanic/Latino	8,219	39	411	48	1,765	60	1,155	23	689	22	86	5	2,480	67	1,197	58	436	29
White/Non-Hispanic	3,206	15	230	27	509	17	850	17	211	7	339	20	205	6	316	15	546	36
Other	187	1	8	1	44	2	45	1	14	<1	15	1	21	1	19	1	21	1
Native Hawaiian/Pacific Islander	95	<1	5	1	3	<1	31	1	11	<1	3	<1	5	<1	22	1	15	1
American Indian/Alaskan Native	47	<1	5	1	3	<1	12	<1	2	<1	2	<1	7	<1	9	<1	7	<1
Mixed/Multiethnic	365	2	47	6	49	2	87	2	53	2	15	1	57	2	35	2	22	1

Table 2. Characteristics of vaccinated flu clients (n=20,953) by Service Planning Area (SPA), 2014-2015 Flu Outreach Campaign (Preliminary Data).

	Total		Service Planning Areas															
			SPA 1 Antelope Valley		SPA 2 San Fernando		SPA 3 San Gabriel		SPA 4 Metro		SPA 5 West		SPA 6 South		SPA 7 East		SPA 8 South Bay	
Characteristics^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Number of Outreaches	152	100	7	4	16	11	31	20	23	15	11	7	38	25	14	9	12	8
Total	20,953	100	849	100	2,931	100	5,070	100	3,189	100	1,660	100	3,680	100	2,073	100	1,501	100
Language of Survey																		
English	13,449	64	693	82	1,657	57	3,723	73	1,667	52	834	50	2,063	56	1,481	71	1,313	87
Spanish	4,612	22	156	18	1,254	43	401	8	397	12	13	1	1,615	44	588	28	188	13
Chinese	630	3	0	-	2	<1	535	11	88	3	0	-	1	<1	4	<1	0	-
Korean	2,262	11	0	-	0	-	411	8	1,037	33	813	49	1	<1	0	-	0	-
Insurance Status																		
Medicare	3,149	15	119	14	311	11	960	19	388	12	330	20	328	9	336	16	377	25
Medicaid/Medi-Cal	1,845	9	148	17	378	13	418	8	330	10	71	4	213	6	190	9	97	6
Private	5,663	27	189	22	548	19	1,782	35	820	26	612	37	632	17	550	26	530	35
Uninsured	7,371	35	280	33	1,174	40	1,260	25	1,265	40	345	21	1,790	49	867	42	390	26
Don't Know	1,287	6	45	5	179	6	298	6	185	6	138	8	252	7	105	5	85	6
Other	7	<1	0	-	0	-	0	-	4	<1	1	<1	1	<1	1	<1	0	-
Vaccines for Children (VFC) Eligibility																		
Uninsured	834	4	53	6	172	6	164	3	107	3	25	2	211	6	83	4	19	1
Medi-Cal/CHDP	635	3	84	10	195	7	107	2	82	3	18	1	87	2	47	2	15	1
American Indian/Alaskan Native	6	<1	0	-	1	<1	2	<1	0	-	0	-	0	-	0	-	3	<1
Not VFC Eligible	19,478	93	712	84	2,563	87	4,797	95	3,000	94	1,617	97	3,382	92	1,943	94	1,464	98
Pregnant																		
Yes	61	<1	1	<1	11	<1	18	<1	9	<1	2	<1	11	<1	6	<1	3	<1
Vaccine Type³																		
Inactivated	15,854	76	468	55	1,810	62	4,034	80	2,497	78	1,454	88	2,572	70	1,751	84	1,268	84
Live	4,880	23	376	44	1,113	38	995	20	673	21	200	12	995	27	310	15	218	15

Table 2. Characteristics of vaccinated flu clients (n=20,953) by Service Planning Area (SPA), 2014-2015 Flu Outreach Campaign (Preliminary Data).

	Total		Service Planning Areas															
			SPA 1 Antelope Valley		SPA 2 San Fernando		SPA 3 San Gabriel		SPA 4 Metro		SPA 5 West		SPA 6 South		SPA 7 East		SPA 8 South Bay	
Characteristics^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Number of Outreaches	152	100	7	4	16	11	31	20	23	15	11	7	38	25	14	9	12	8
Total	20,953	100	849	100	2,931	100	5,070	100	3,189	100	1,660	100	3,680	100	2,073	100	1,501	100
Manufacturer³																		
Sanofi-Pasteur	11,430	55	453	53	1,442	49	3,484	69	2,455	77	2	<1	1,490	40	883	43	1,221	81
Novartis	2,548	12	7	1	60	2	276	5	45	1	1,444	87	343	10	360	17	13	1
MedImmune	4,912	23	372	43	1,094	37	998	20	675	21	201	12	1,043	28	317	15	212	14
Glaxo Smith Kline	1,485	7	0	-	290	10	226	4	0	-	0	-	463	13	506	24	0	-
BIOCSL	261	1	0	-	0	-	0	-	0	-	0	-	261	7	0	-	0	-
Site of Injection³																		
Left deltoid	13,312	64	317	37	1,479	50	3,504	69	2,171	68	1,322	80	1,870	51	1,560	75	1,089	73
Right deltoid	2,421	12	140	16	277	9	499	10	298	9	119	7	743	20	177	9	168	11
Left thigh	100	<1	4	<1	24	1	28	1	22	1	4	<1	6	<1	8	<1	4	<1
Right thigh	34	<1	2	<1	12	<1	8	<1	2	<1	5	<1	2	<1	3	<1	0	-
Intranasal	4,912	23	380	45	1,112	38	986	19	671	21	198	12	1,042	28	307	15	216	14

¹ Missing values not shown.

² Numbers and percentages may exceed 100% due to multiple responses and/or rounding

³ Raw data presented for vaccine type, manufacturer, and site of injection; numbers may be inconsistent

Table 3. Characteristics of vaccinated flu clients (n=20,953) by Insurance Type, 2014-2015 Flu Outreach Campaign. (Preliminary Data)

	Total		Type of Insurance											
			Medicare		Medicaid		Private		Not Insured		Does Not Know		Other Insurance	
Characteristics ^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Total	20,953	100	3,149	15	1,845	9	5,663	27	7,371	35	1,287	6	7	<1
Gender														
Male	8,275	41	1,318	42	703	38	2,340	41	2,738	38	526	41	3	43
Female	11,908	59	1,736	58	1,062	58	3,196	56	4,343	59	703	55	4	53
Age (Years)														
under 5	424	2	23	1	77	4	78	1	101	1	26	2	0	-
5-17	2,978	14	206	7	317	17	678	12	689	9	238	18	0	-
18-24	1,135	5	83	3	58	3	420	7	355	5	172	13	1	14
25-34	1,778	8	117	4	119	6	477	8	842	11	112	9	0	-
35-44	2,948	14	115	4	180	10	799	14	1,513	21	146	11	1	14
45-54	3,544	17	215	7	274	15	1,066	19	1,556	21	209	16	3	43
55-64	4,504	21	343	11	459	25	1,409	25	1,747	24	256	20	2	29
65-74	2,101	10	1,101	35	193	11	381	7	409	6	74	6	0	-
75+	1,541	7	946	30	168	9	355	6	159	2	54	4	0	-
Race/Ethnicity														
Asian	7,620	37	1,113	35	649	35	2,567	45	2,250	31	476	37	2	29
African American/Black	1,032	5	222	7	114	6	275	5	263	4	60	5	2	29
Hispanic/Latino	8,219	40	826	26	779	42	1,076	19	4,114	56	584	46	1	14
White/Non-Hispanic	3,206	15	874	28	209	11	1,479	26	539	7	117	9	1	14
Other	187	1	34	1	30	2	57	1	47	1	19	1	0	-
Native Hawaiian/Pacific Islander	95	<1	20	1	6	<1	46	1	18	<1	7	1	0	-
American Indian/Alaskan Native	47	<1	8	<1	9	<1	8	<1	11	<1	6	<1	0	-
Mixed/Multiethnic	365	2	29	1	34	2	121	2	90	1	13	1	1	14
Language of Survey														
English	13,449	64	2,352	75	1,069	58	4,539	80	3,827	52	781	61	6	86
Spanish	4,612	22	403	13	487	27	334	6	2,569	35	298	23	1	14
Chinese	630	3	98	3	144	8	74	1	168	2	87	7	0	-
Korean	2,262	11	296	9	145	8	716	13	807	11	121	9	0	-

Table 3. Characteristics of vaccinated flu clients (n=20,953) by Insurance Type, 2014-2015 Flu Outreach Campaign. (Preliminary Data)

	Total		Type of Insurance											
			Medicare		Medicaid		Private		Not Insured		Does Not Know		Other Insurance	
Characteristics ^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Total	20,953	100	3,149	15	1,845	9	5,663	27	7,371	35	1,287	6	7	<1
Vaccines for Children (VFC) Eligibility														
Uninsured	834	4	0	-	0	-	0	-	834	11	0	-	0	-
Medi-Cal/CHDP	635	3	239	8	398	22	4	<1	0	-	0	-	0	-
American Indian/Alaskan Native	6	<1	0	-	1	<1	1	<1	0	-	0	-	0	-
Not VFC Eligible	19,478	93	2,910	92	1,446	78	5,658	100	6,537	89	1,287	100	7	100
Pregnant														
Yes	61	<1	9	<1	12	1	13	<1	15	<1	6	<1	0	-
Vaccine Type³														
Inactivated	15,854	76	2,837	91	1,407	77	4,402	78	5,498	75	914	71	7	100
Live	4,880	24	285	9	427	23	1,221	22	1,772	24	357	28	0	-
Manufacturer³														
Sanofi-Pasteur	11,430	55	2,162	69	1,074	59	3,182	57	3,960	54	630	49	5	71
Novartis	2,548	12	473	15	172	9	788	14	732	10	179	14	2	29
MedImmune	4,912	24	290	9	414	23	1,233	22	1,792	24	358	28	0	-
Glaxo Smith Kline	1,485	7	163	5	120	7	373	7	607	8	88	7	0	-
BIOCSL	261	1	20	1	28	2	19	<1	163	2	17	1	0	-
Site of injection³														
Left deltoid	13,312	64	2,419	77	1,128	62	3,787	67	4,547	62	749	58	7	100
Right deltoid	2,421	12	409	13	253	14	576	10	930	13	161	13	0	-
Left thigh	100	<1	6	<1	17	1	20	<1	32	<1	9	1	0	-
Right thigh	34	<1	1	<1	8	<1	8	<1	6	<1	6	<1	0	-
Intranasal	4,912	24	282	9	425	23	1,216	22	1,800	25	358	28	0	-

¹Missing values not shown.

²Numbers and percentages may exceed 100% due to multiple responses and/or rounding.

³Raw data presented for vaccine type, manufacturer and site of injection; numbers may be inconsistent

Table 3a. Characteristics of vaccinated flu clients (n=5,657) with private insurance by types of insurance, 2014-2015 Flu Outreach Campaign. (Preliminary Data).

	With private insurance											
	Total		Private only		Plus Medicare & Medicaid		Plus Medicare		Plus Medicaid		Plus other	
Characteristics	n	%	n	%	n	%	n	%	n	%	n	%
Total^{1, 2}	5,663	100	5,385	100	7	100	267	100	17	100	1	100
Gender												
Male	2,340	41	2,246	42	3	43	92	35	5	29	2	67
Female	3,196	56	3,019	56	3	43	169	65	10	59	–	–
Age (Years)												
under 5	78	1	77	1	–	–	1	<1	–	–	–	–
5-17	678	12	675	13	–	–	2	<1	1	6	1	33
18-24	420	7	418	8	–	–	2	1	–	–	–	–
25-34	477	8	474	9	–	–	2	1	1	6	–	–
35-44	799	14	791	15	–	–	6	2	2	12	–	–
45-54	1,066	19	1,061	20	–	–	2	1	2	12	1	33
55-64	1,409	25	1,400	26	–	–	8	3	1	6	1	33
65-74	381	7	266	5	4	57	109	42	6	35	–	–
75+	355	6	223	4	3	43	128	49	4	24	–	–
Race/Ethnicity												
Asian	2,567	45	2,505	47	1	14	59	23	4	24	–	–
Black/African American	275	5	264	5	–	–	11	4	–	–	–	–
Hispanic/Latino	1,076	19	1,043	19	–	–	30	11	3	18	2	67
White/Non-Hispanic	1,479	26	1,321	25	6	86	155	58	9	53	–	–
Native Hawaiian/Pacific	46	1	41	1	–	–	5	2	–	–	–	–
American Indian/Alaskan	8	<1	8	<1	–	–	–	–	–	–	–	–
Mixed/Multiethnic	121	2	118	2	–	–	1	<1	1	6	1	33
Other	57	1	55	1	–	–	2	1	–	–	–	–
Language of Survey												
English	4,539	80	4,279	80	7	100	253	95	13	76	1	33
Spanish	334	6	327	6	–	–	5	2	2	12	2	67
Chinese	74	1	69	1	–	–	4	2	1	6	–	–
Korean	716	13	710	13	–	–	5	2	1	6	–	–
Vaccines for Children (VFC)												
Uninsured	–	–	–	–	–	–	–	–	–	–	–	–
Medi-Cal/CHDP	4	<1	–	–	–	–	3	1	1	6	–	–
American Indian/Alaskan	1	<1	1	<1	–	–	–	–	–	–	–	–
Not VFC eligible	5,658	100	5,384	100	7	100	264	99	16	94	3	100
Pregnant												
Yes	13	<1	12	<1	–	–	1	<1	–	–	–	–
No	5,638	100	5,361	100	7	100	266	100	17	100	3	100
Type of vaccine³												
Inactivated	4,402	78	4,139	77	7	100	254	95	6	75	3	100
Live	1,221	22	1,210	23	–	–	9	3	2	25	–	–

Table 3a. Characteristics of vaccinated flu clients (n=5,657) with private insurance by types of insurance, 2014-2015 Flu Outreach Campaign. (Preliminary Data).

	With private insurance											
	Total		Private only		Plus Medicare & Medicaid		Plus Medicare		Plus Medicaid		Plus other	
Manufacturer³												
Sanofi-Pasteur	3,182	56	2,969	55	5	71	207	78	11	65	2	67
Novartis	788	14	747	14	1	14	39	15	2	12	1	33
MedImmune	1,233	22	1,222	23	–	–	9	3	2	12	–	–
Glaxo Smith Kline	373	7	363	7	1	14	9	3	2	12	–	–
BIOCSL	19	<1	19	<1	–	–	–	–	–	–	–	–
Site of injection³												
Left deltoid	3,787	67	3,561	66	6	86	218	82	13	76	3	100
Right deltoid	576	10	538	10	–	–	37	14	1	6	–	–
Left thigh	20	<1	20	<1	–	–	–	–	–	–	–	–
Right thigh	8	<1	8	<1	–	–	–	–	–	–	–	–
Intranasal	1,216	22	1,205	22	–	–	9	3	2	12	–	–

¹ Missing values not shown.

² Numbers and percentages may exceed 100% due to multiple responses and/or rounding.

³ Numbers for vaccine type, manufacturer, and site of injection may be inconsistent due to written error.

Table 3b. Characteristics of vaccinated flu clients (n=13,231) without private insurance by types of insurance, 2014-2015 Flu Outreach Campaign. (Preliminary Data).

	Without private insurance														Uninsured	Does not know		
	Total		Medicare only		Medicaid only		Medicare & Medicaid		Medicare & other		Medicaid & other		Other only					
Characteristics	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%		
Total^{1,2}	13,153	100	2,661	100	1,607	100	221	100	–	–	–	–	6	100	7,371	100	1,287	100
Gender																		
Male	5,087	39	1,122	42	594	37	104	47	–	–	–	–	3	50	2,738	37	526	41
Female	7,564	58	1,463	55	948	59	104	47	–	–	–	–	3	50	4,343	59	703	55
Age (Years)																		
under 5	226	2	22	1	77	5	–	–	–	–	–	–	–	–	101	1	26	2
5-17	1,445	11	202	8	314	20	2	1	–	–	–	–	–	–	689	9	238	18
18-24	667	5	81	3	58	4	–	–	–	–	–	–	1	17	355	5	172	13
25-34	1,184	9	112	4	115	7	3	1	–	–	–	–	–	–	842	12	112	9
35-44	1,940	15	102	4	171	11	7	3	–	–	–	–	1	17	1,513	21	146	11
45-54	2,234	17	195	7	254	16	18	8	–	–	–	–	2	33	1,556	21	209	16
55-64	2,776	21	313	12	436	27	22	10	–	–	–	–	2	33	1,747	24	256	20
65-74	1,587	12	917	34	116	7	71	32	–	–	–	–	–	–	409	6	74	6
75+	1,094	8	717	27	66	4	98	44	–	–	–	–	–	–	159	2	54	4
Race/Ethnicity																		
Asian	4,338	33	965	36	556	35	89	40	–	–	–	–	2	33	2,250	31	476	37
Black/African American	629	5	190	7	93	6	21	10	–	–	–	–	2	33	263	4	60	5
Hispanic/Latino	6,213	47	738	28	718	45	58	26	–	–	–	–	1	17	4,114	56	584	45
White/Non-Hispanic	1,537	12	680	26	161	10	39	18	–	–	–	–	1	17	539	7	117	9
Native Hawaiian/Pacific	42	<1	11	<1	2	0	4	2	–	–	–	–	–	–	18	<1	7	1
American Indian/Alaskan	34	<1	8	<1	9	1	–	–	–	–	–	–	–	–	11	<1	6	<1
Mixed/Multiethnic	162	1	26	1	31	2	2	1	–	–	–	–	–	–	90	1	13	1
Other	122	1	26	1	24	1	6	3	–	–	–	–	–	–	47	1	19	1
Language of Survey																		
English	7,627	58	1,958	74	915	57	141	64	–	–	–	–	5	83	3,827	52	781	61
Spanish	3,716	28	363	14	450	28	35	16	–	–	–	–	1	17	2,569	35	298	23
Chinese	474	4	76	3	125	8	18	8	–	–	–	–	–	–	168	2	87	7
Korean	1,336	10	264	10	117	7	27	12	–	–	–	–	–	–	807	11	121	9

Table 3b. Characteristics of vaccinated flu clients (n=13,231) without private insurance by types of insurance, 2014-2015 Flu Outreach Campaign. (Preliminary Data).

	Without private insurance														Uninsured		Does not know		
	Total		Medicare only		Medicaid only		Medicare & Medicaid		Medicare & other		Medicaid & other		Other only						
Vaccines for Children (VFC)																			
Uninsured	834	6	–	–	–	–	–	–	–	–	–	–	–	–	834	11	–	–	
Medical/CHDP	631	5	234	9	395	25	2	1	–	–	–	–	–	–	–	–	–	–	
American Indian/Alaskan	1	<1	–	–	1	<1	–	–	–	–	–	–	–	–	–	–	–	–	
Not VFC eligible	11,687	89	2,427	91	1,211	75	219	99	–	–	–	–	6	100	6,537	89	1,287	100	
Pregnant																			
Yes	41	<1	8	<1	12	1	–	–	–	–	–	–	–	–	15	<1	6	<1	
No	13,080	99	2,650	100	1,591	99	221	100	–	–	–	–	6	100	7,332	100	1,280	100	
Type of vaccine³																			
Inactivated	10,179	77	2,369	89	1,178	73	214	97	–	–	–	–	6	100	5,498	76	914	71	
Live	2,825	21	271	10	420	26	5	2	–	–	–	–	–	–	1,772	24	357	28	
Manufacturer³																			
Sanofi-Pasteur	7,442	57	1,784	68	892	56	171	77	–	–	–	–	5	83	3,960	54	630	49	
Novartis	1,491	11	409	15	145	9	25	11	–	–	–	–	1	16	732	10	179	14	
MedImmune	2,846	22	275	10	415	26	6	3	–	–	–	–	–	–	1,792	24	358	28	
Glaxo Smith Kline	955	7	142	5	106	7	12	5	–	–	–	–	–	–	607	8	88	7	
BIOCSL	222	2	14	1	22	1	6	3	–	–	–	–	–	–	163	2	17	1	
Site of injection³																			
Left deltoid	8,448	64	2,031	76	945	59	170	77	–	–	–	–	6	100	4,547	62	749	58	
Right deltoid	1,673	13	330	12	210	13	42	19	–	–	–	–	–	–	930	13	161	13	
Left thigh	64	<1	6	<1	17	1	–	–	–	–	–	–	–	–	32	<1	9	1	
Right thigh	21	<1	1	<1	8	1	–	–	–	–	–	–	–	–	6	<1	6	<1	
Intranasal	2,849	22	268	10	418	26	5	2	–	–	–	–	–	–	1,800	24	358	28	

¹ Missing values not shown.

⁴ Numbers and percentages may exceed 100% due to multiple responses and/or rounding.

³ Numbers for vaccine type, manufacturer, and site of injection may be inconsistent due to written error.

Table 4. Number of flu outreaches by target population and Service Planning Area, September 11, 2014 - February 3, 2015. (Preliminary Data)

	Total		Service Planning Areas															
			SPA 1 Antelope		SPA 2 San Fernando		SPA 3 San Gabriel		SPA 4 Metro		SPA 5 West		SPA 6 South		SPA 7 East		SPA 8 South Bay	
Target Populations^{1,2}	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Number of Outreaches	152	100	7	100	16	100	31	100	23	100	11	100	38	100	14	100	12	100
All	95	63	6	86	7	44	16	52	16	70	4	36	30	79	7	50	9	75
Children	11	7	-	-	3	19	1	3	-	-	-	-	2	5	3	21	2	17
Children, Seniors	9	6	-	-	1	6	5	16	-	-	-	-	-	-	3	21	-	-
Children, Seniors, Immune Compromised	1	1	-	-	1	6	-	-	-	-	-	-	-	-	-	-	-	-
Community Center	1	1	-	-	-	-	1	3	-	-	-	-	-	-	-	-	-	-
Homeless	22	14	1	14	2	13	8	26	1	4	5	45	6	16	1	7	-	-
Homeless, Immune Compromised Adults	2	1	-	-	-	-	-	-	2	9	-	-	-	-	-	-	-	-
Seniors	7	5	-	-	2	13	-	-	-	-	2	18	-	-	-	-	1	8
Seniors, Immune Compromised Adults	4	3	-	-	-	-	-	-	4	17	-	-	-	-	-	-	-	-

¹ Percentages may exceed 100% due to rounding.

² Target populations are defined by CHS administration.

Figure 1. Number of outreaches and average number of clients per outreach, by Service Planning Area (SPA), 2014-2015 Flu Outreach Campaign. (Preliminary Data)

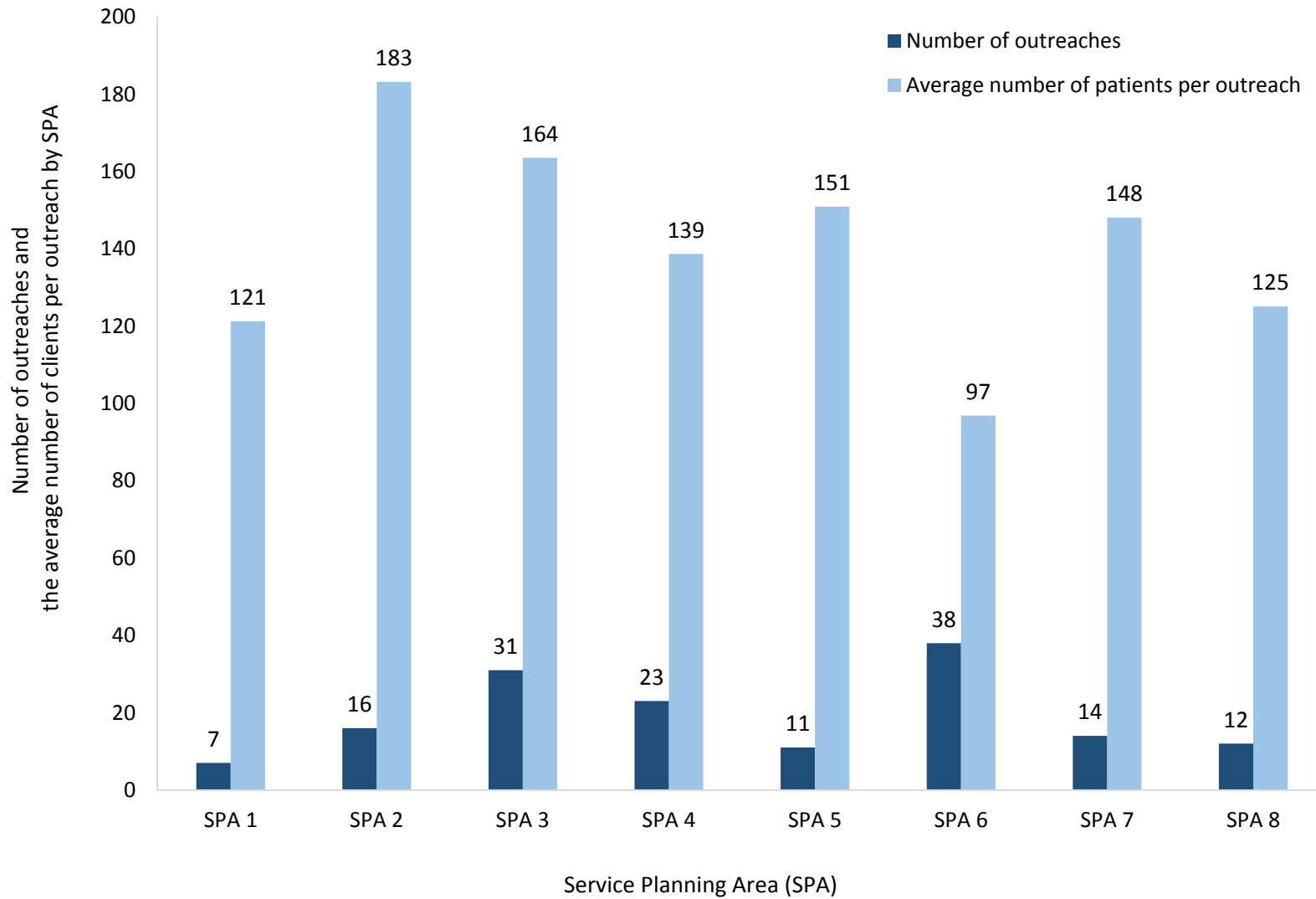


Figure 2. Percent of clients vaccinated by venue type for the 2014-2015 Flu Vaccination Campaign. (Preliminary Data)

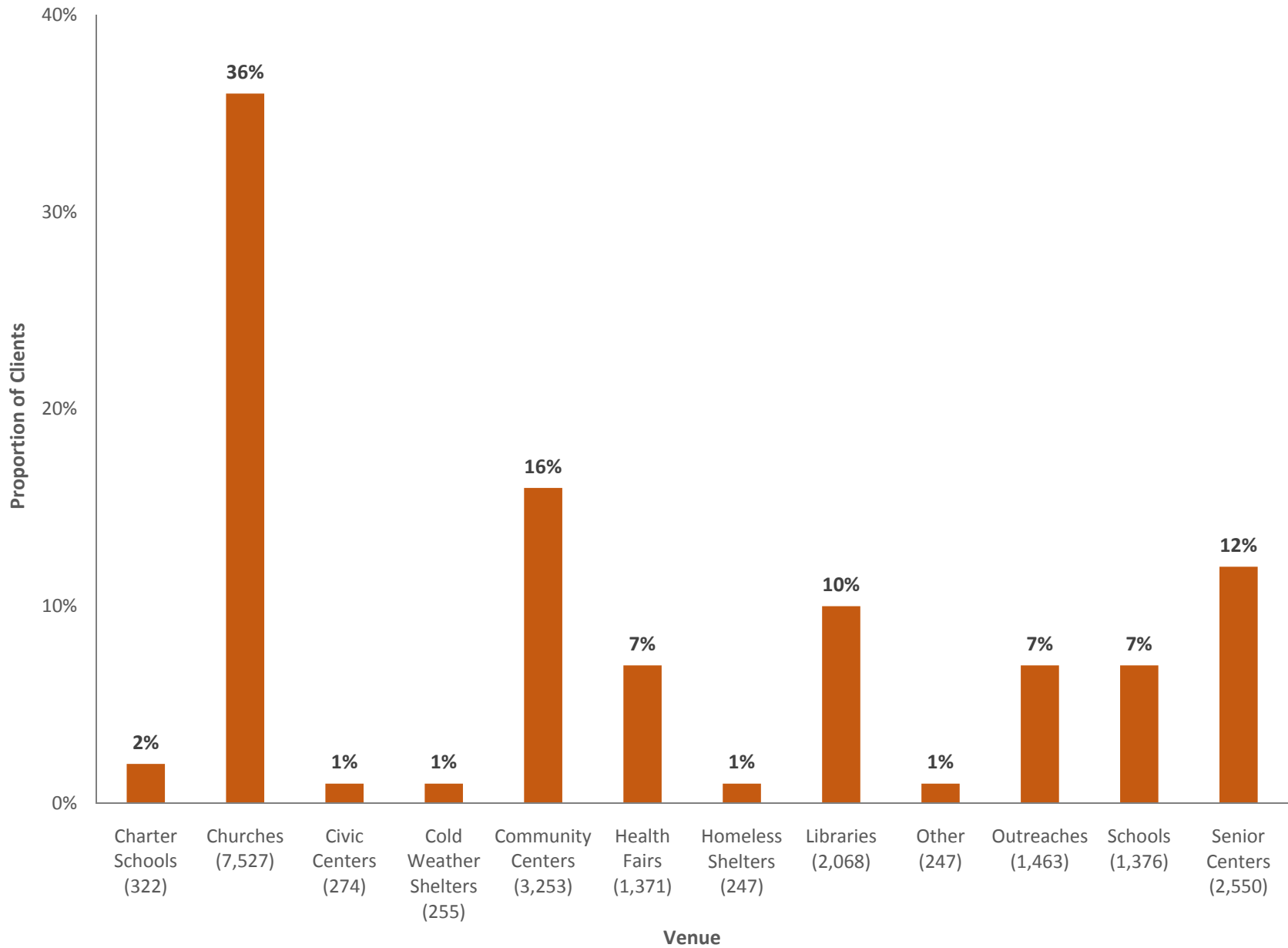


Figure 3. Number of clients vaccinated at flu outreach sites in Service Planning Area 1 (Antelope Valley) by venue type (n=7), 2014-2015 Flu Outreach Campaign. (Preliminary data)

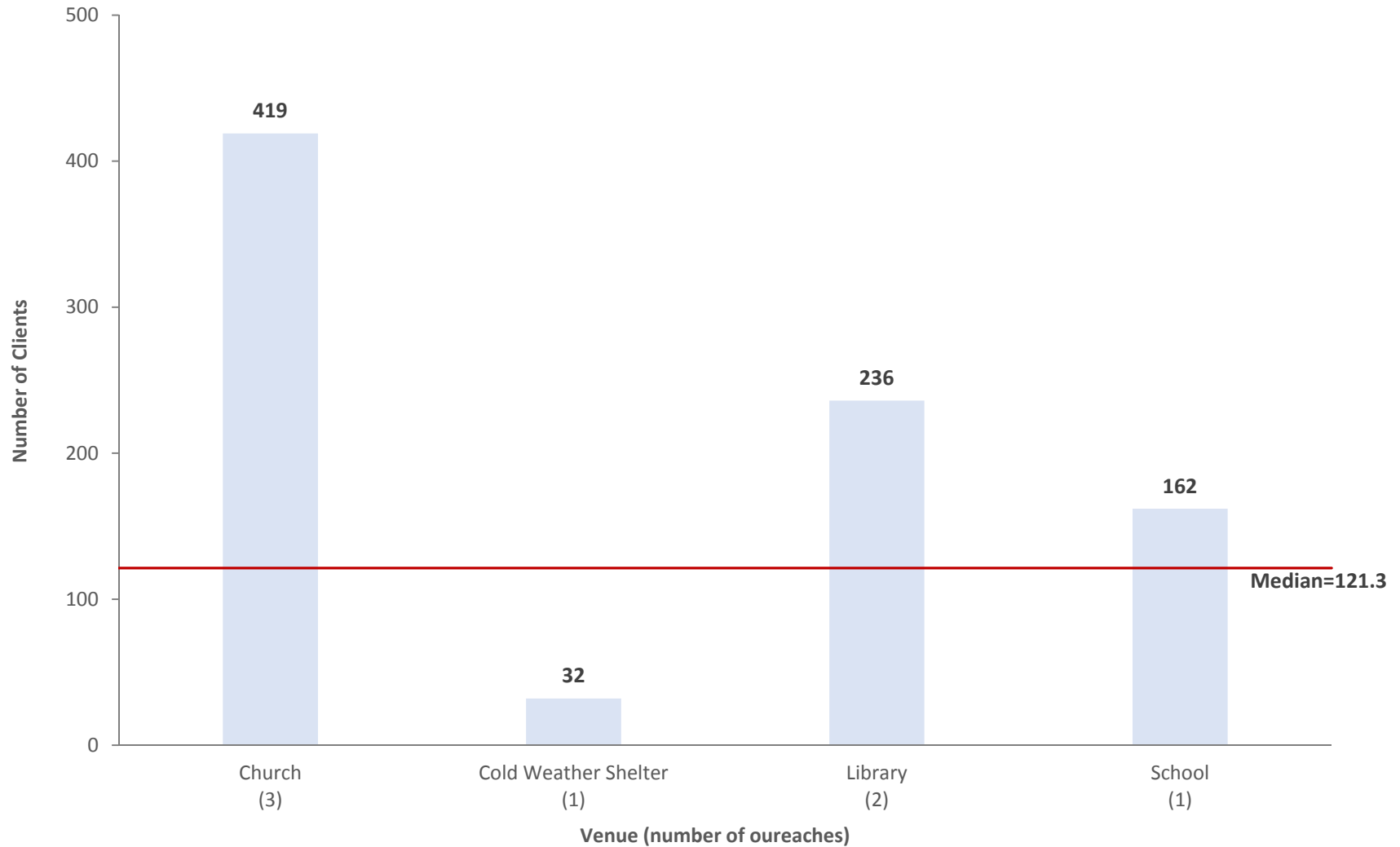


Figure 4. Number of clients vaccinated at flu outreach sites in Service Planning Area 2 (San Fernando) by venue type (n=16), 2014-2015 Flu Outreach Campaign. (Preliminary data)

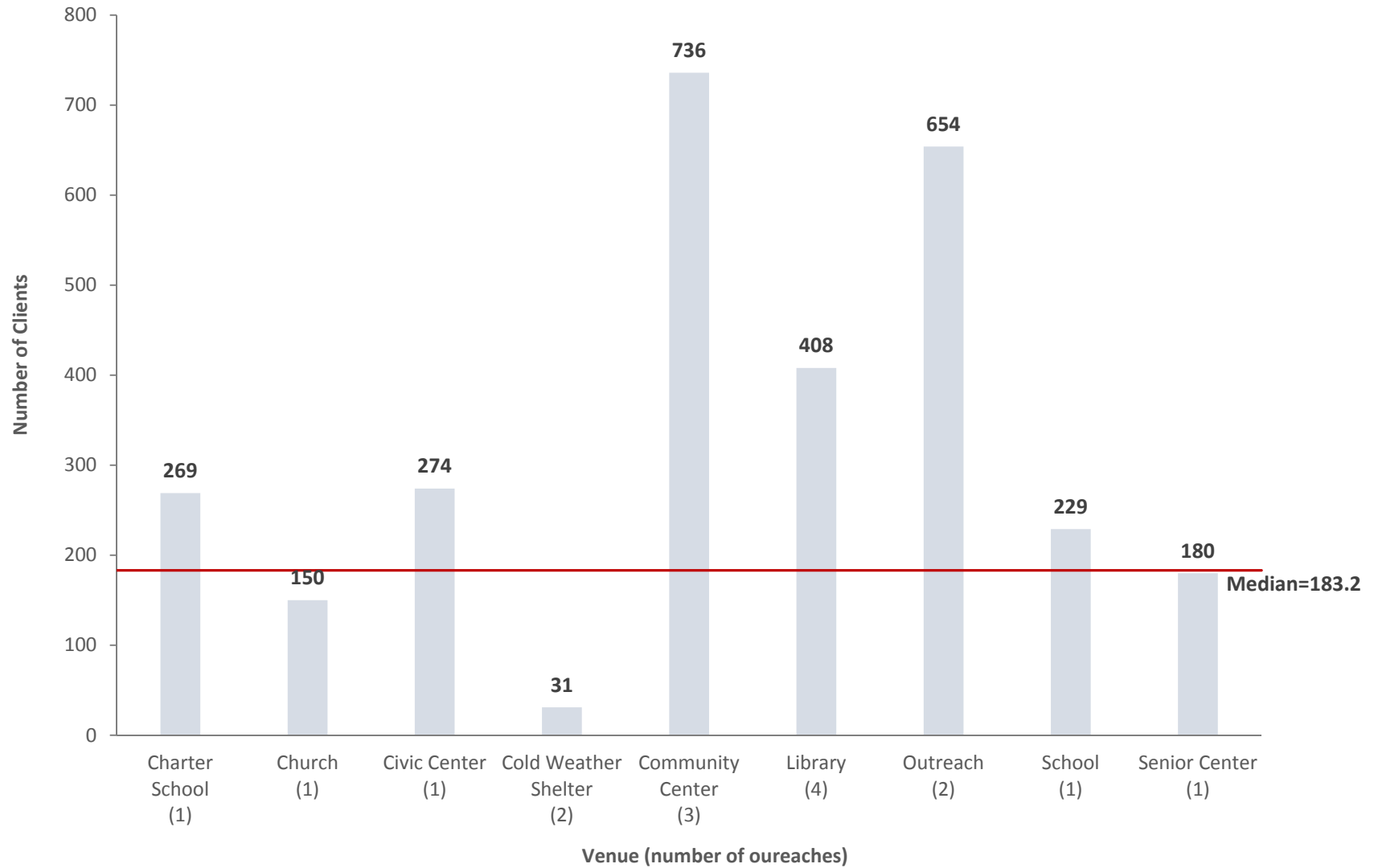


Figure 5. Number of clients vaccinated at flu outreach sites in Service Planning Area 3 (San Gabriel) by venue type (n=31), 2014-2015 Flu Outreach Campaign. (Preliminary data)

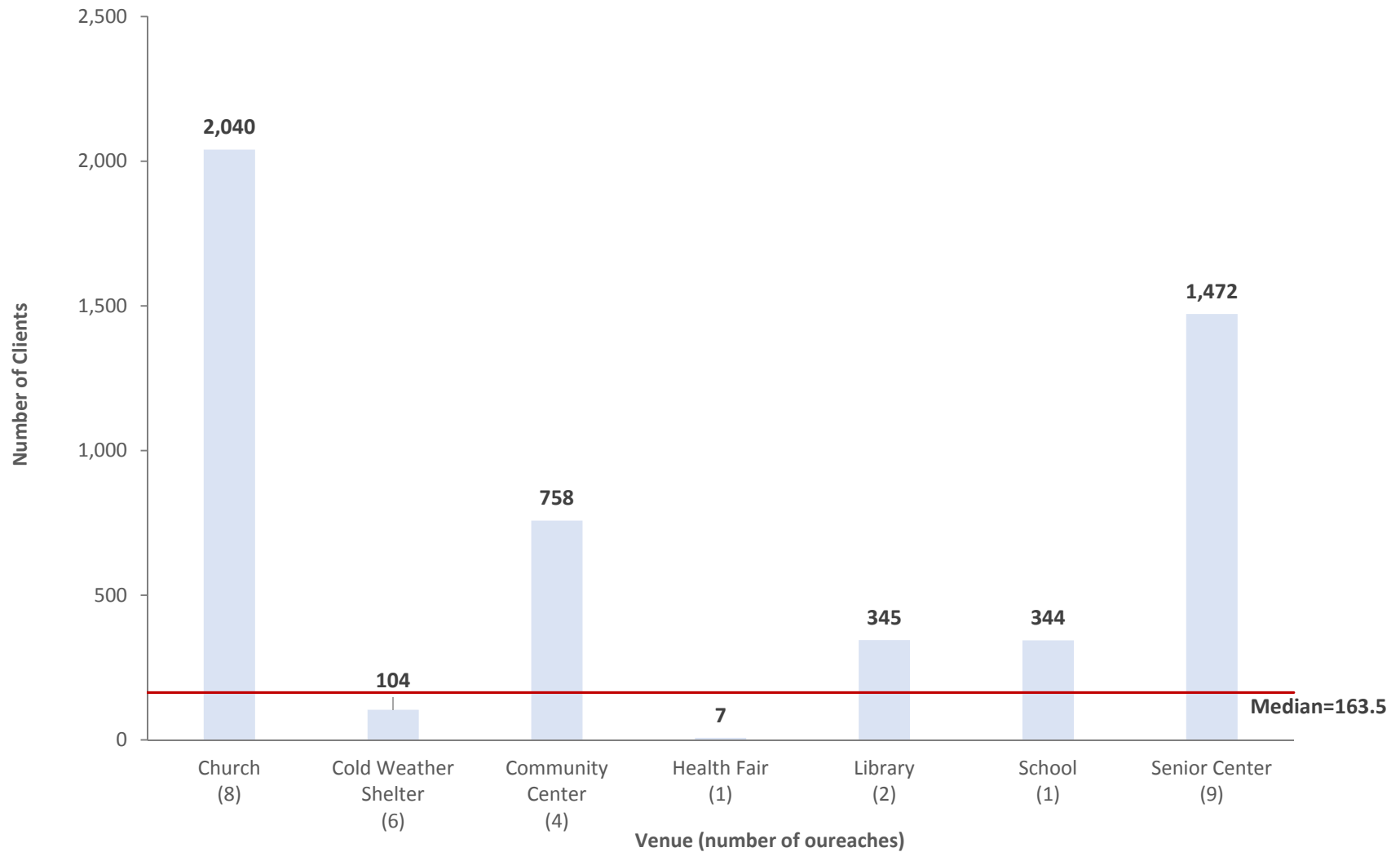


Figure 6. Number of clients vaccinated at flu outreach sites in Service Planning Area 4 (Metro LA) by venue type (n=23), 2014-2015 Flu Outreach Campaign. (Preliminary data)

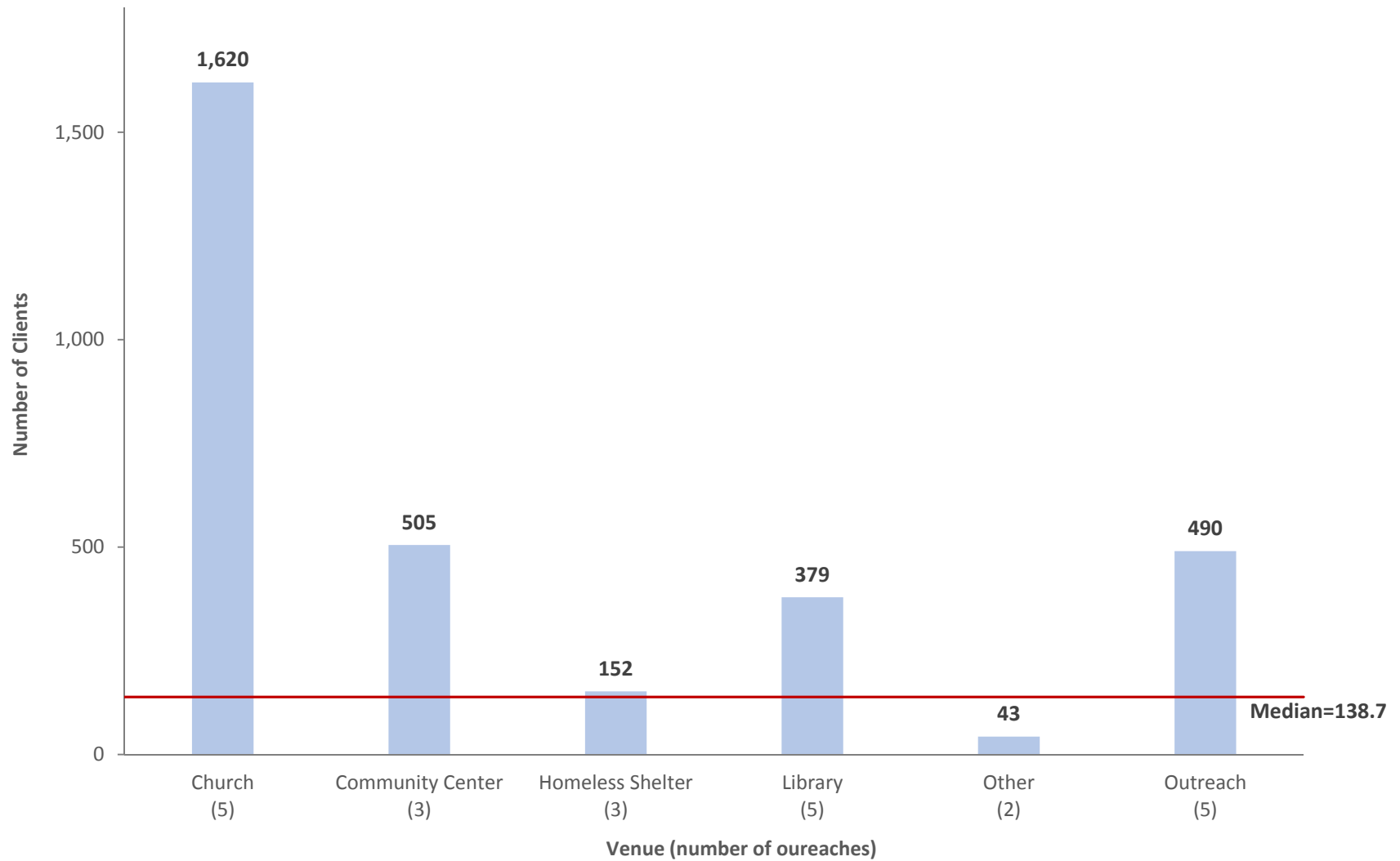


Figure 7. Number of clients vaccinated at flu outreach sites in Service Planning Area 5 (West) by venue type (n=11), 2014-2015 Flu Outreach Campaign. (Preliminary data)

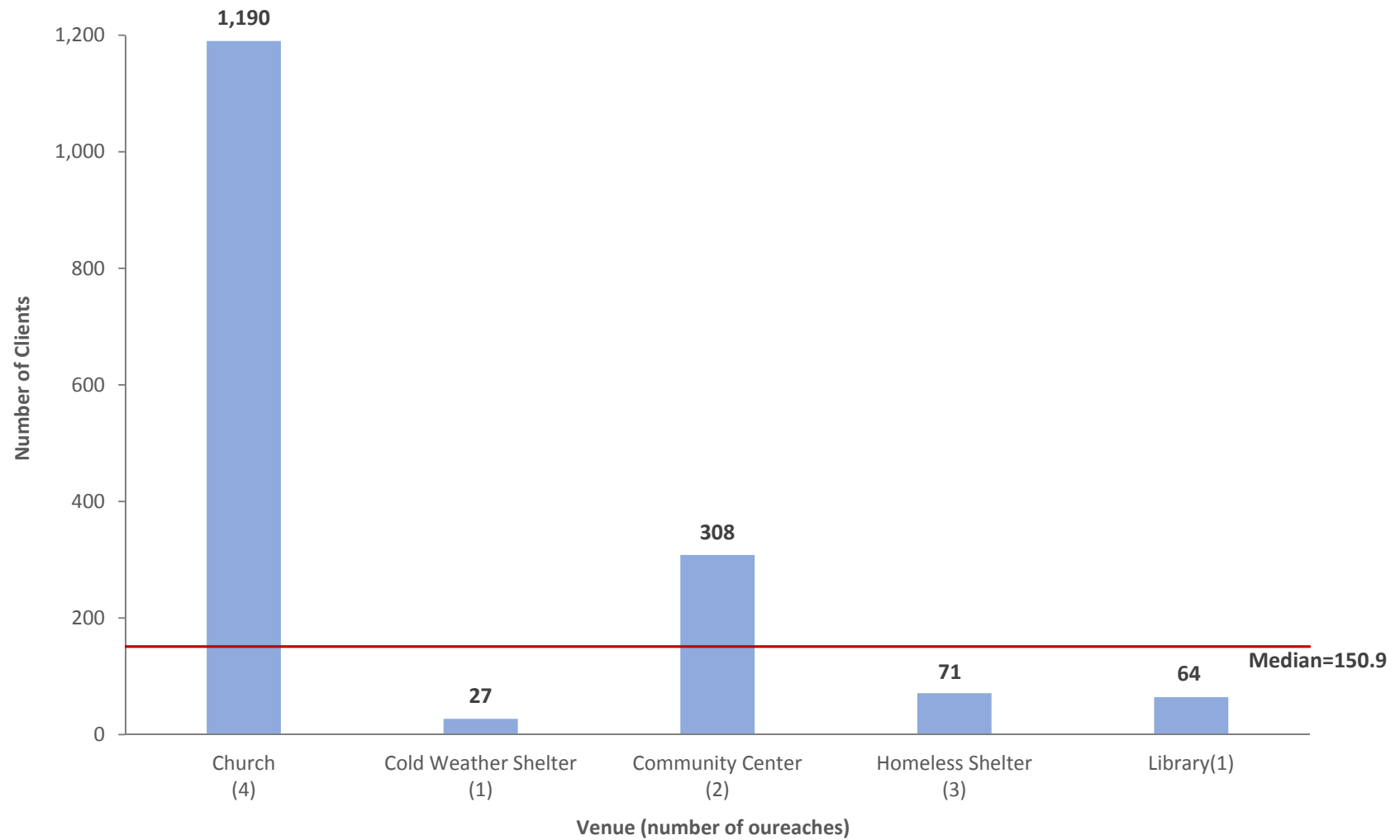


Figure 8. Number of clients vaccinated at flu outreach sites in Service Planning Area 6 (South) by venue type (n=38), 2014-2015 Flu Outreach Campaign. (Preliminary data)

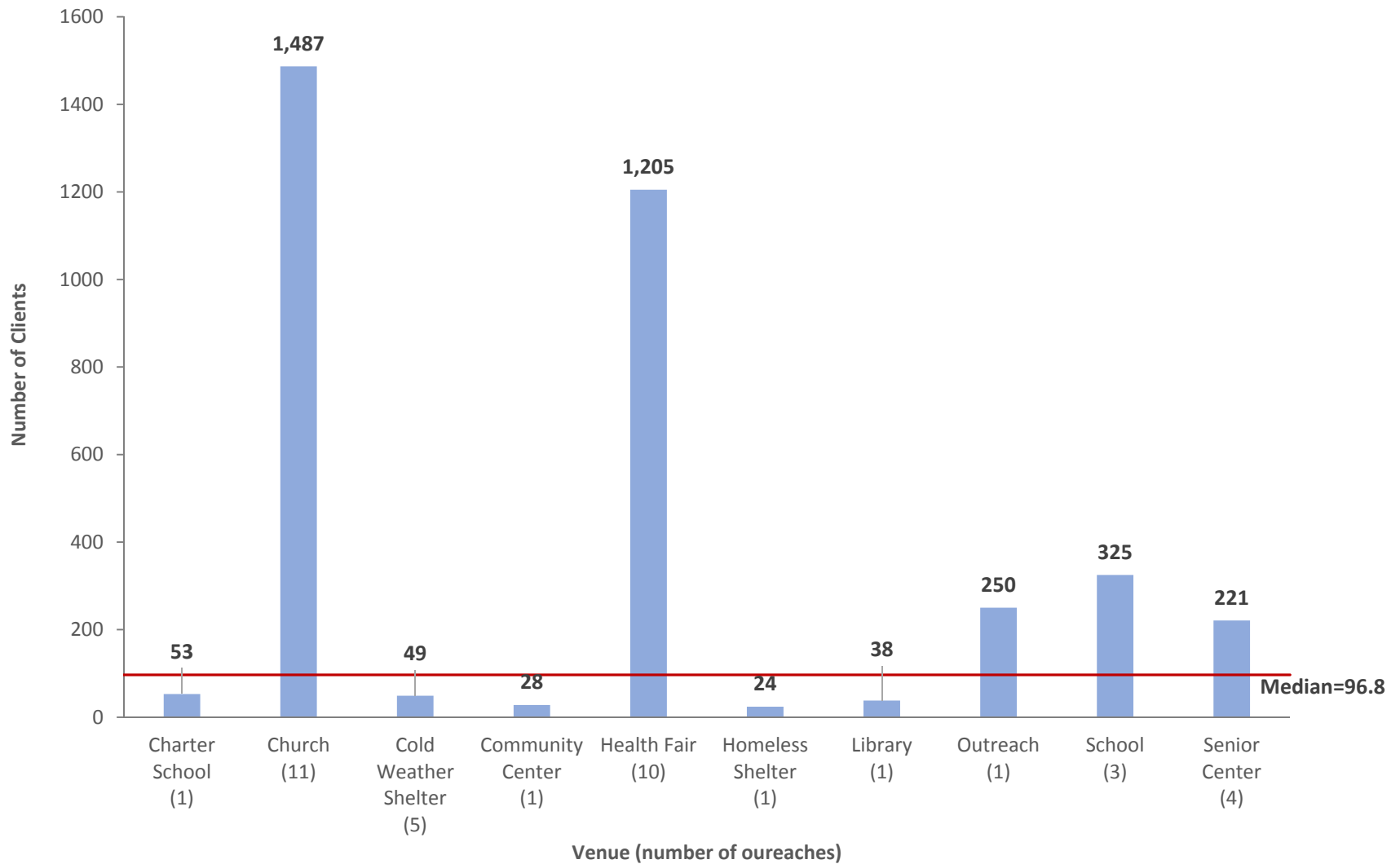


Figure 9. Number of clients vaccinated at flu outreach sites in Service Planning Area 7 (East) by venue type (n=14), 2014-2015 Flu Outreach Campaign. (Preliminary data)

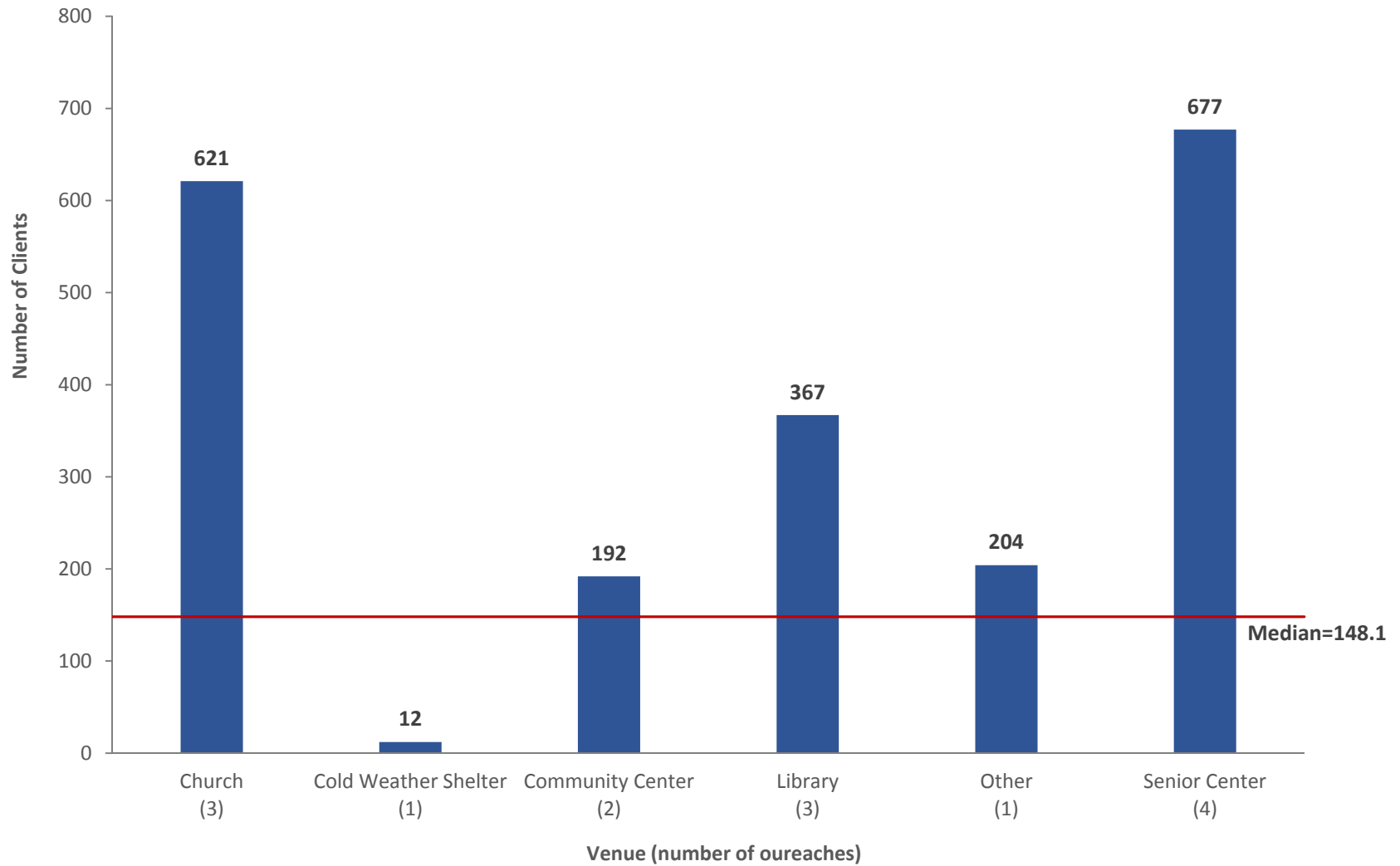


Figure 10. Number of clients vaccinated at flu outreach sites in Service Planning Area 8 (South Bay) by venue type (n=12), 2014-2015 Flu Outreach Campaign. (Preliminary data)

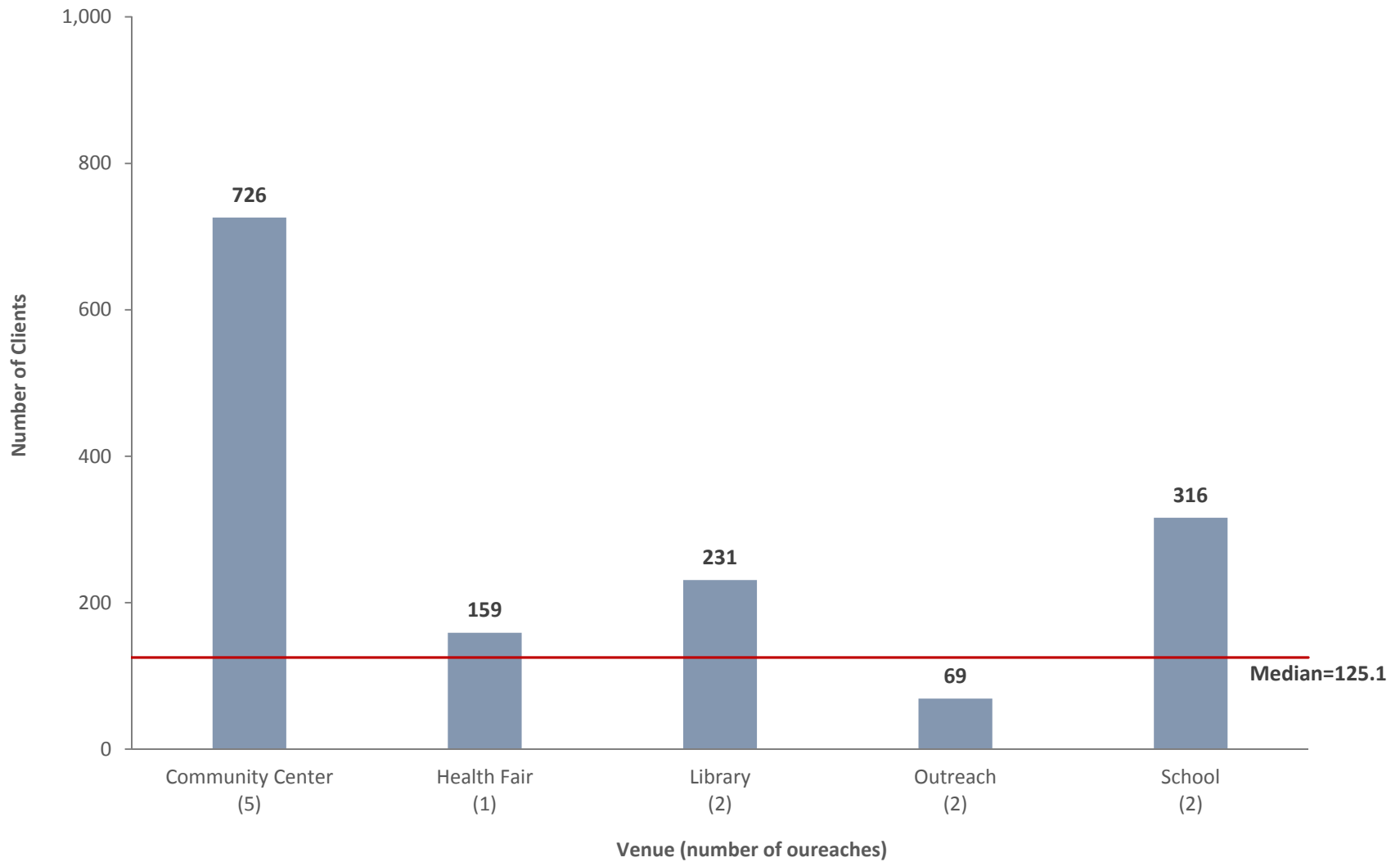


Figure 10a1. Number of Asian clients (n=7,620) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

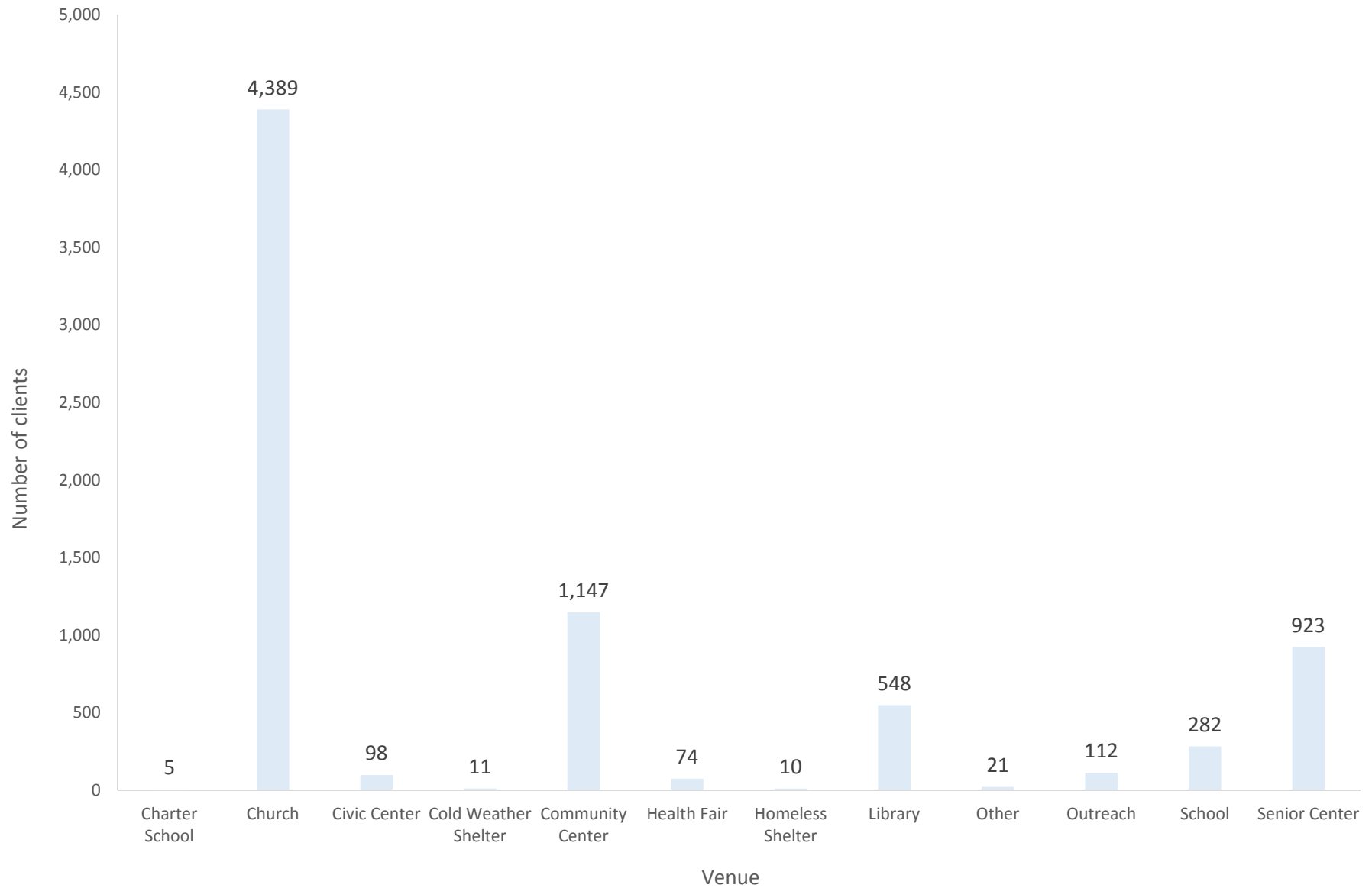


Figure 10a2. Number of Black/African American clients (n=1,032) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

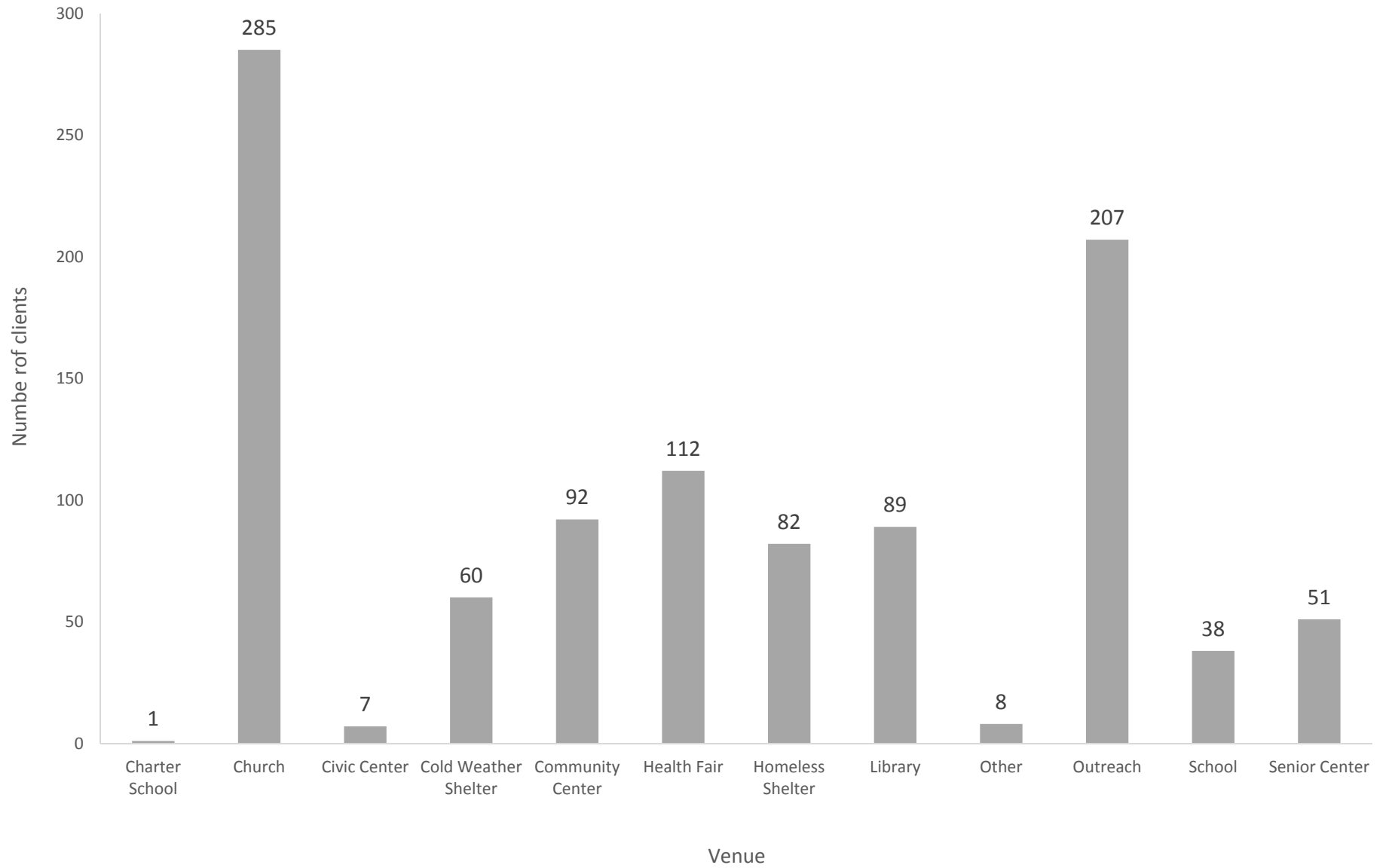


Figure 10a3. Number of Hispanic/Latino clients (n=8,219) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

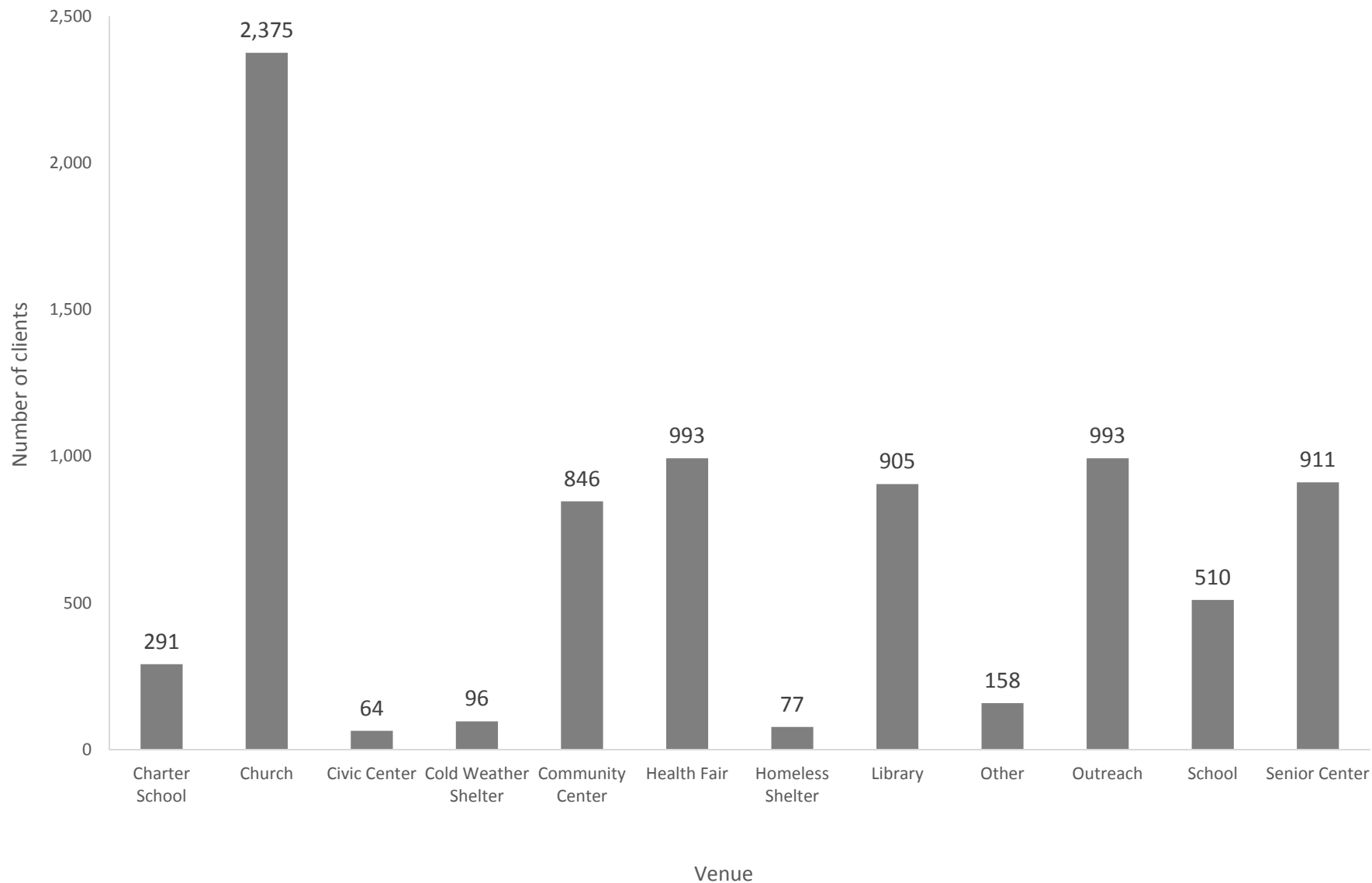


Figure 10a4. Number of White/Non-Hispanic clients (n=3,206) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

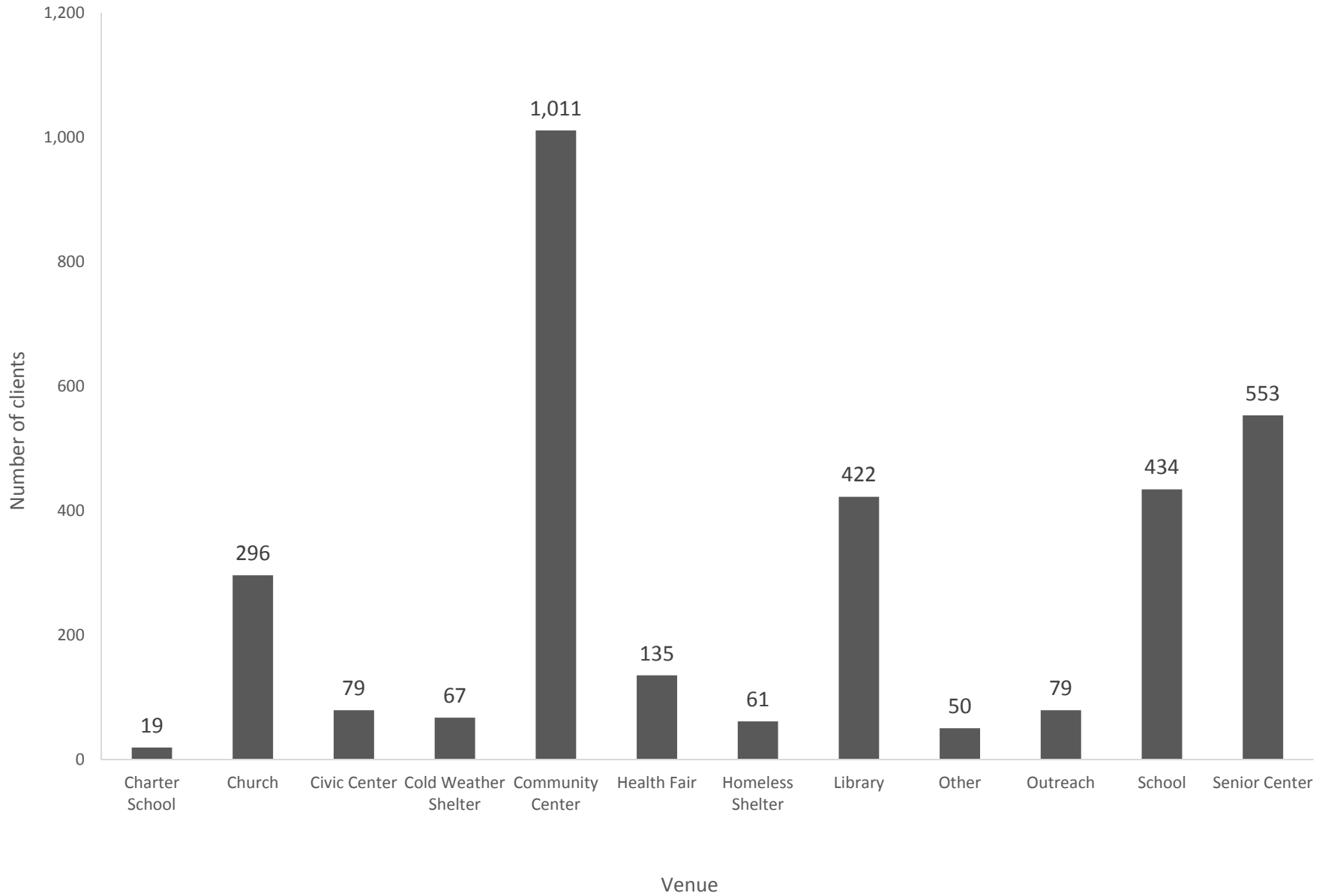


Figure 10a5. Number of Native Hawaiian/Pacific Islander clients (n=95) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

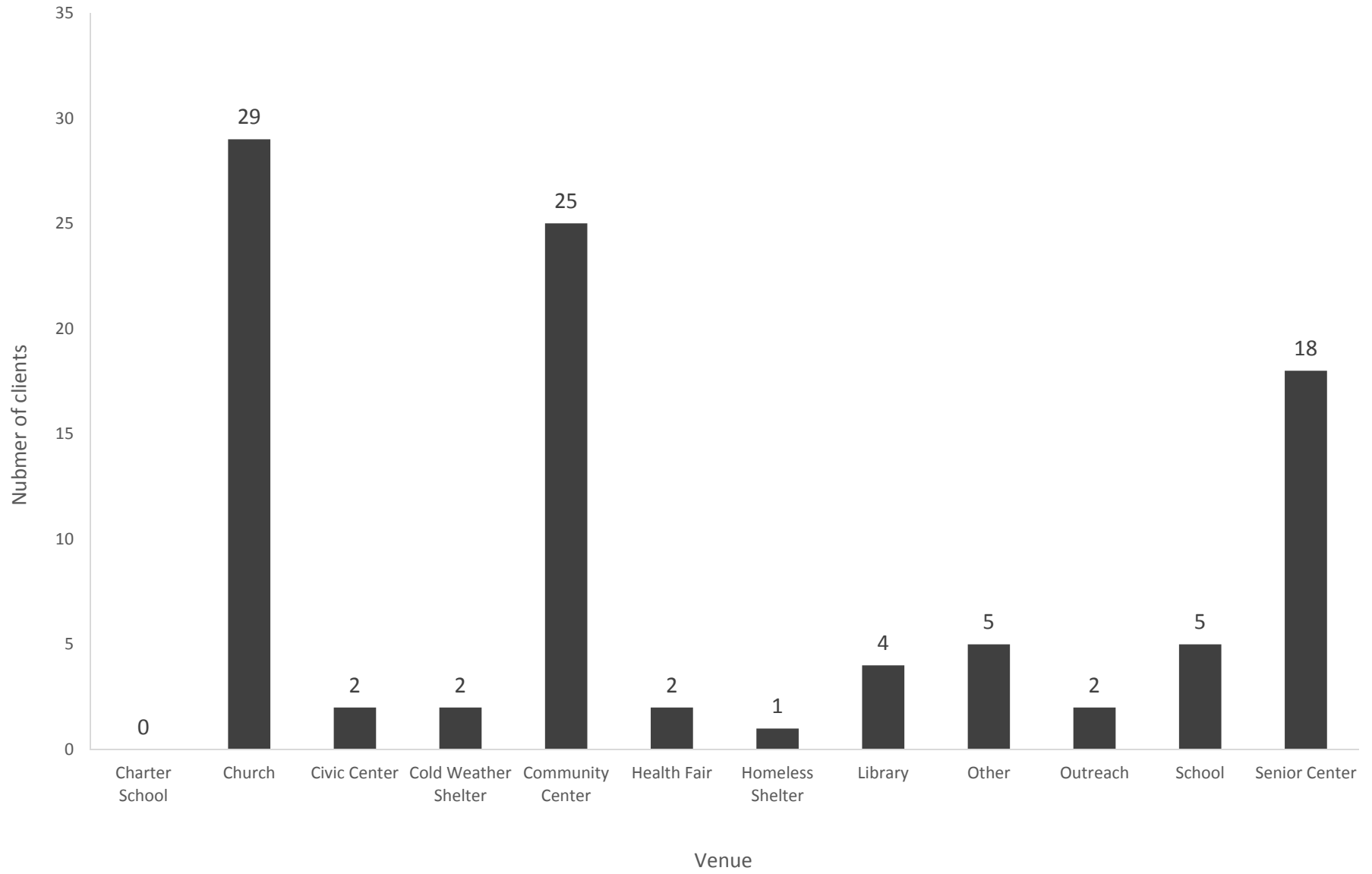


Figure 10a6. Number of American Indian/Alaskan Native clients (n=47) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

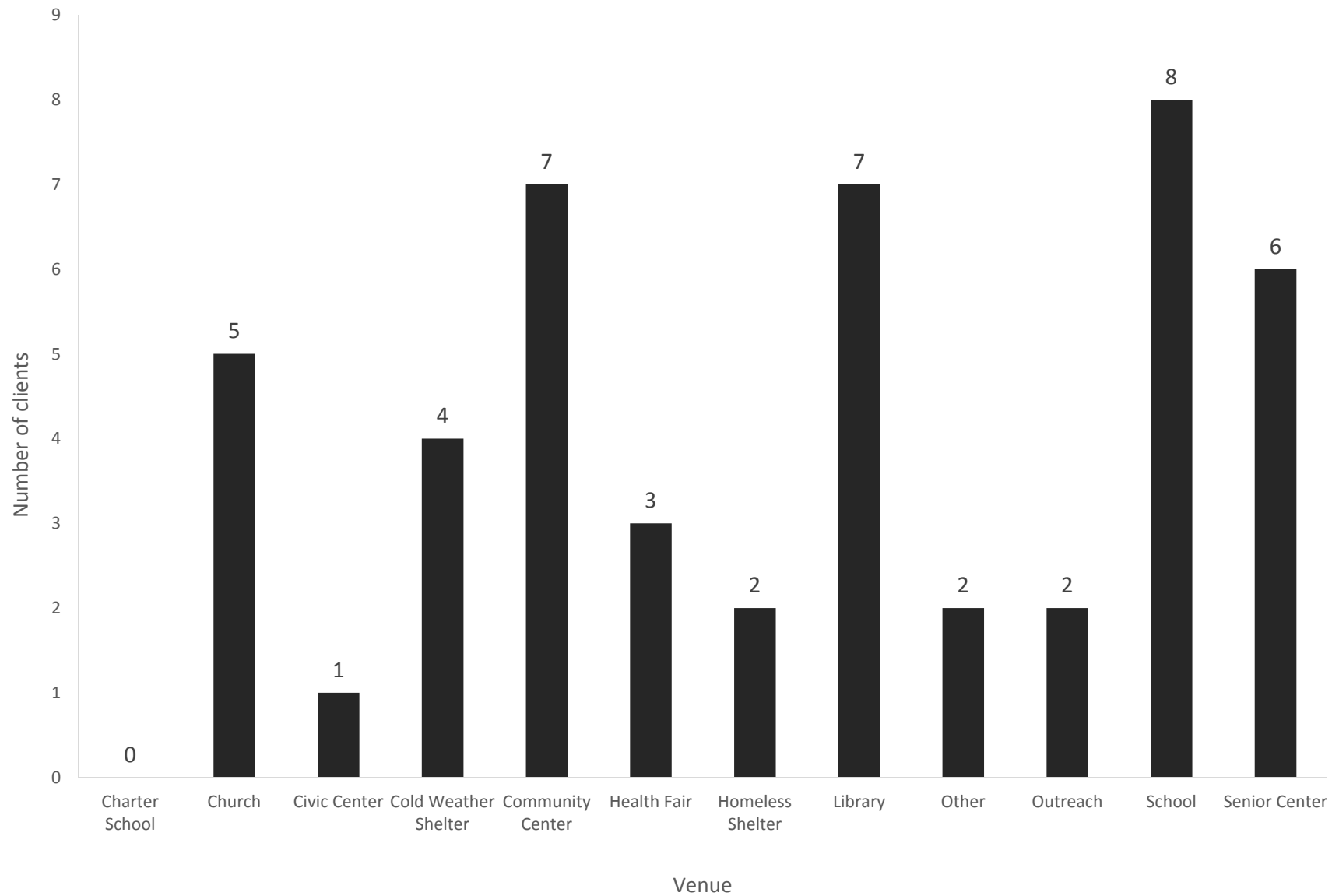


Figure 10b1. Number of clients under age 5 (n=424) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

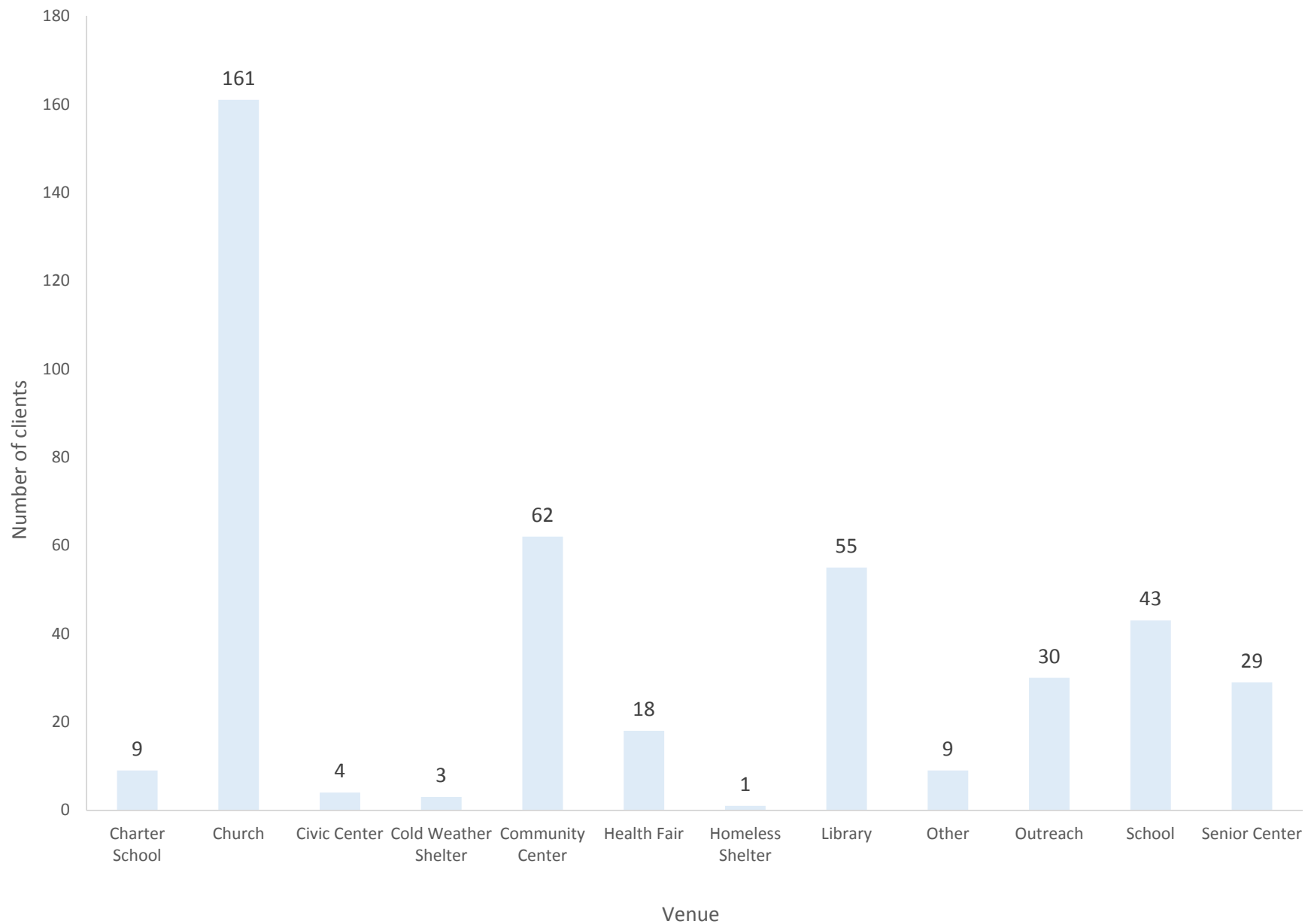


Figure 10b2. Number of 5-17 years old clients (n=2,978) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

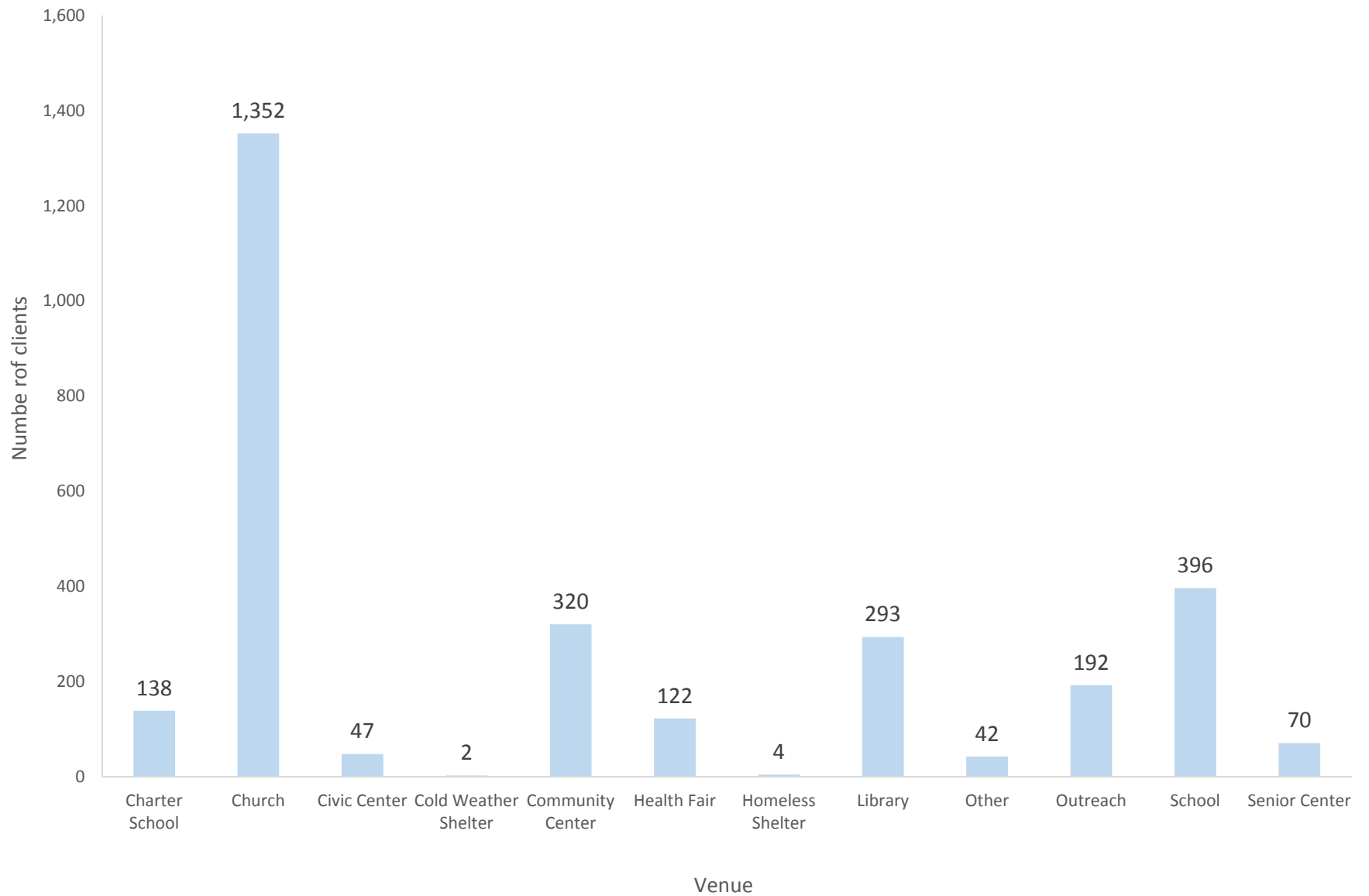


Figure 10b3. Number of 18-24 years old clients (n=1,135) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

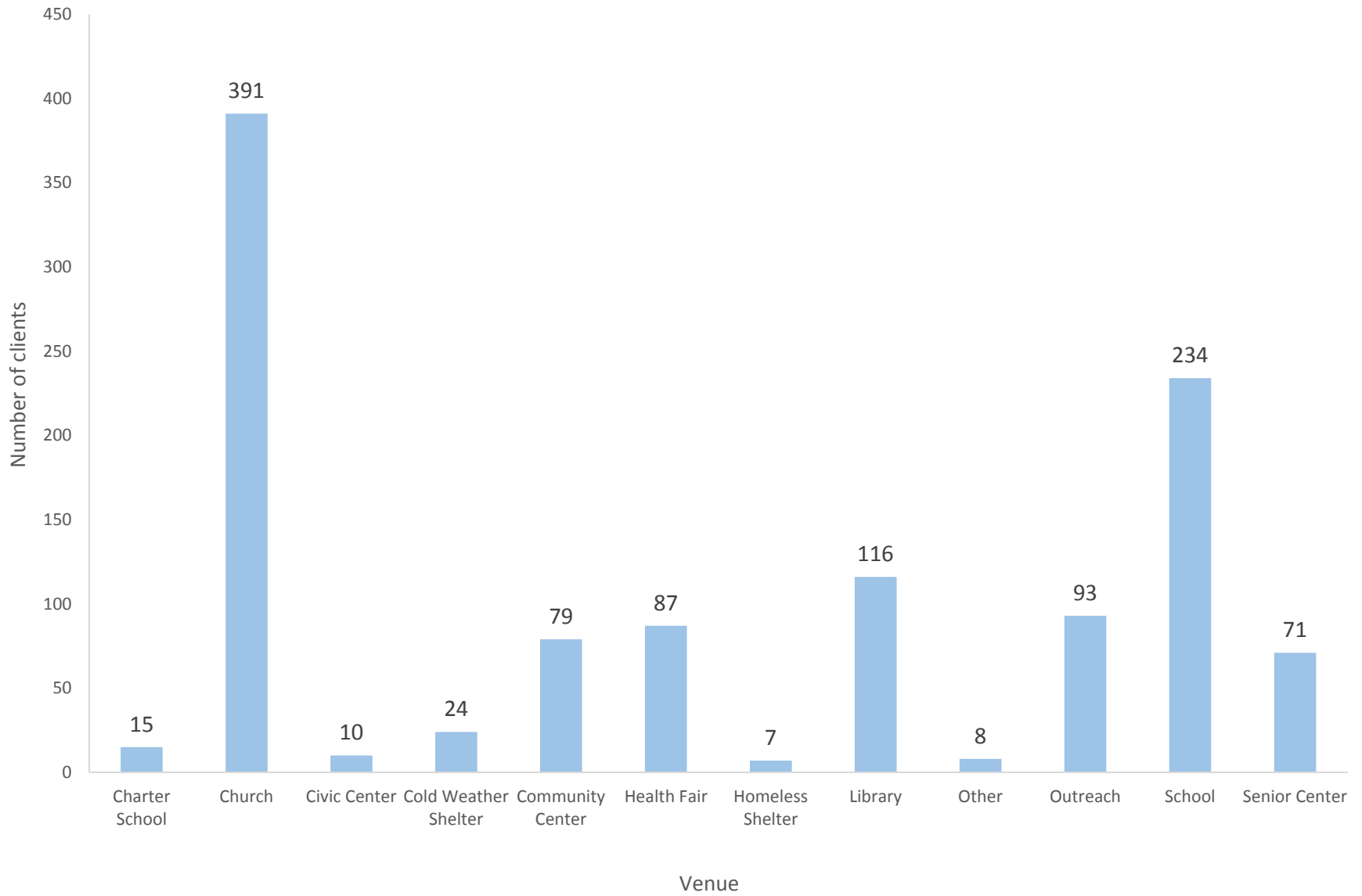


Figure 10b4. Number of 25-34 years old clients (n=1,778) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

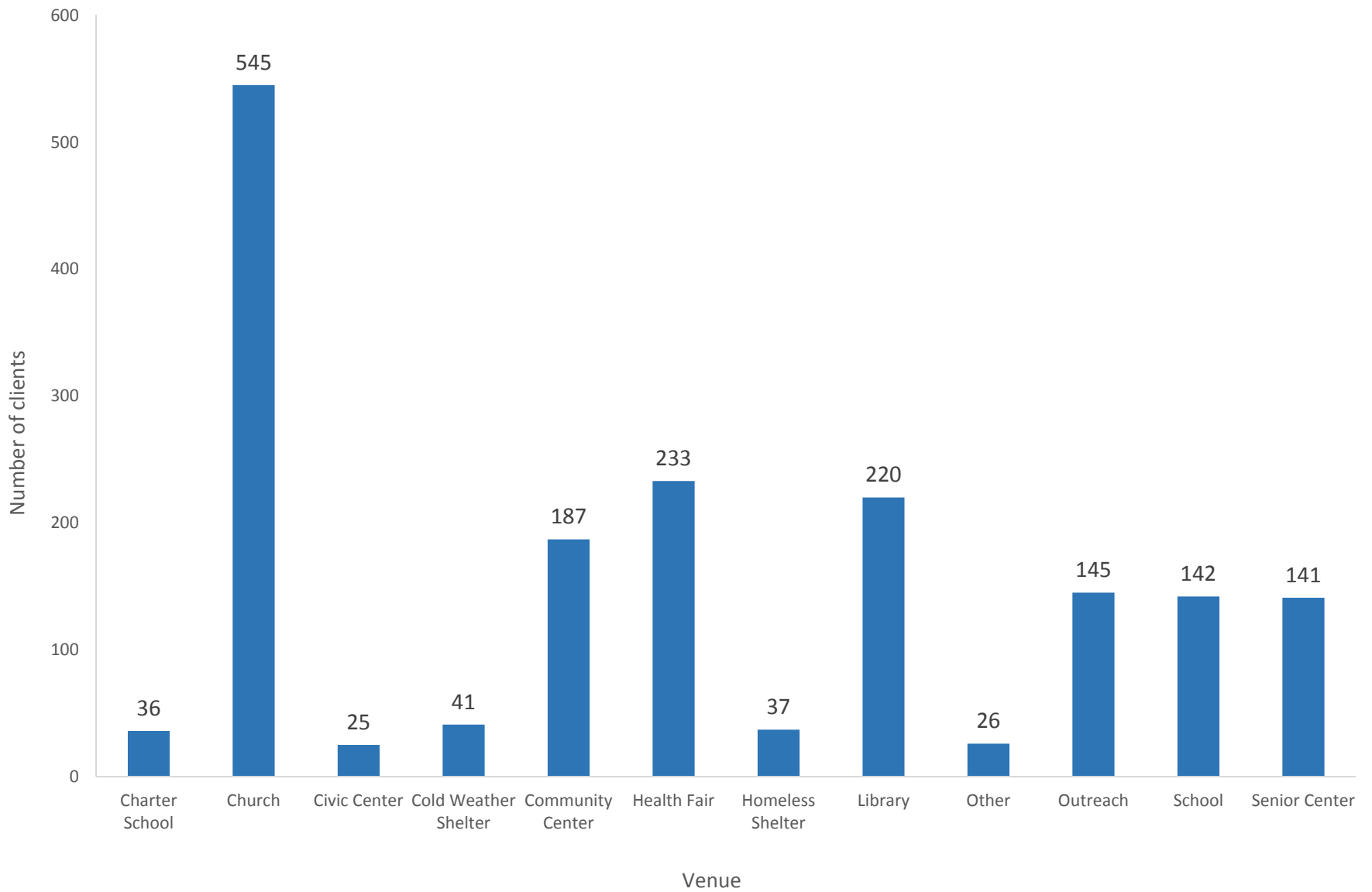


Figure 10b5. Number of 35-44 years old clients (n=2,948) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

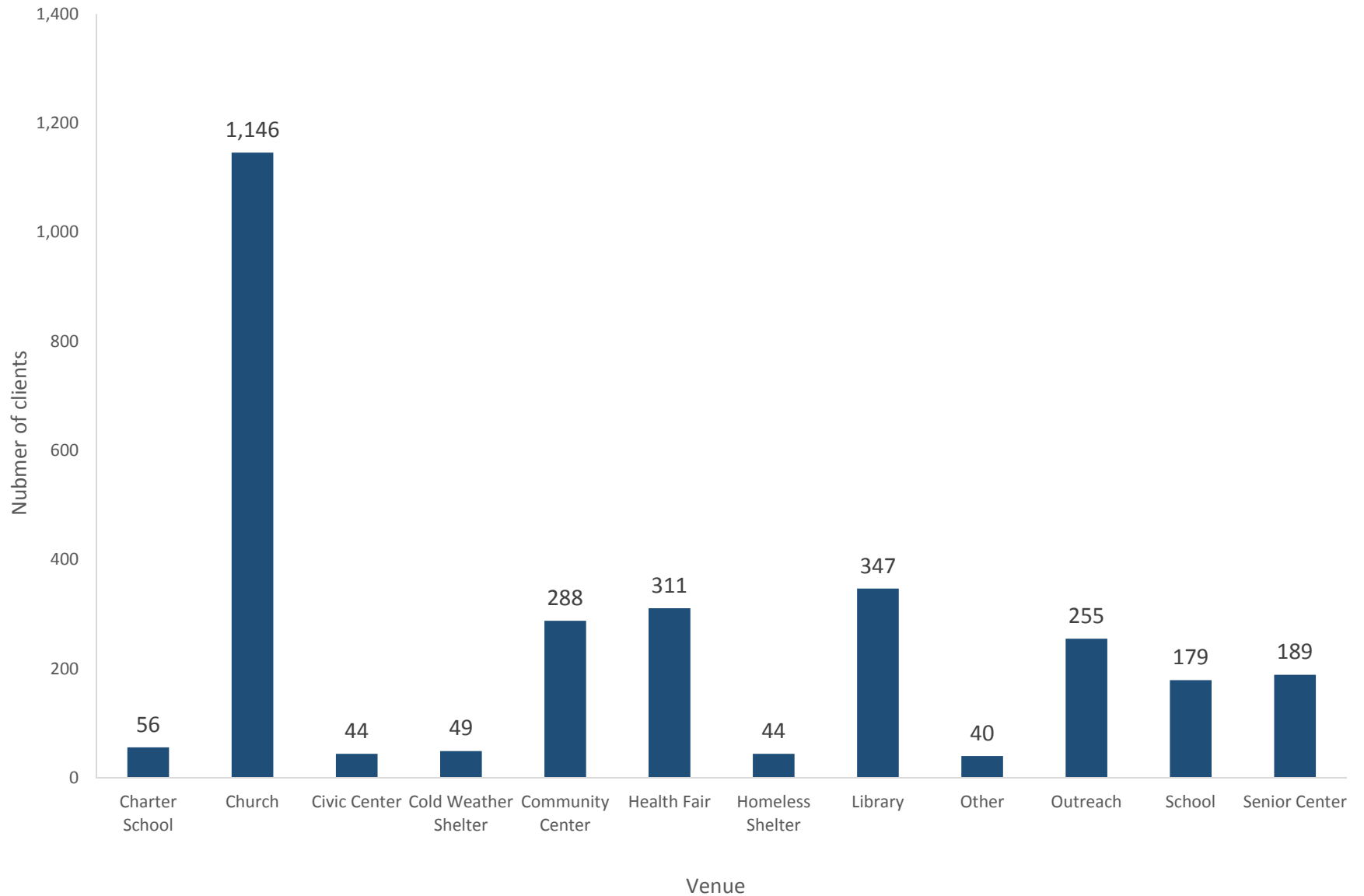


Figure 10b6. Number of 45-54 years old clients (n=3,544) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

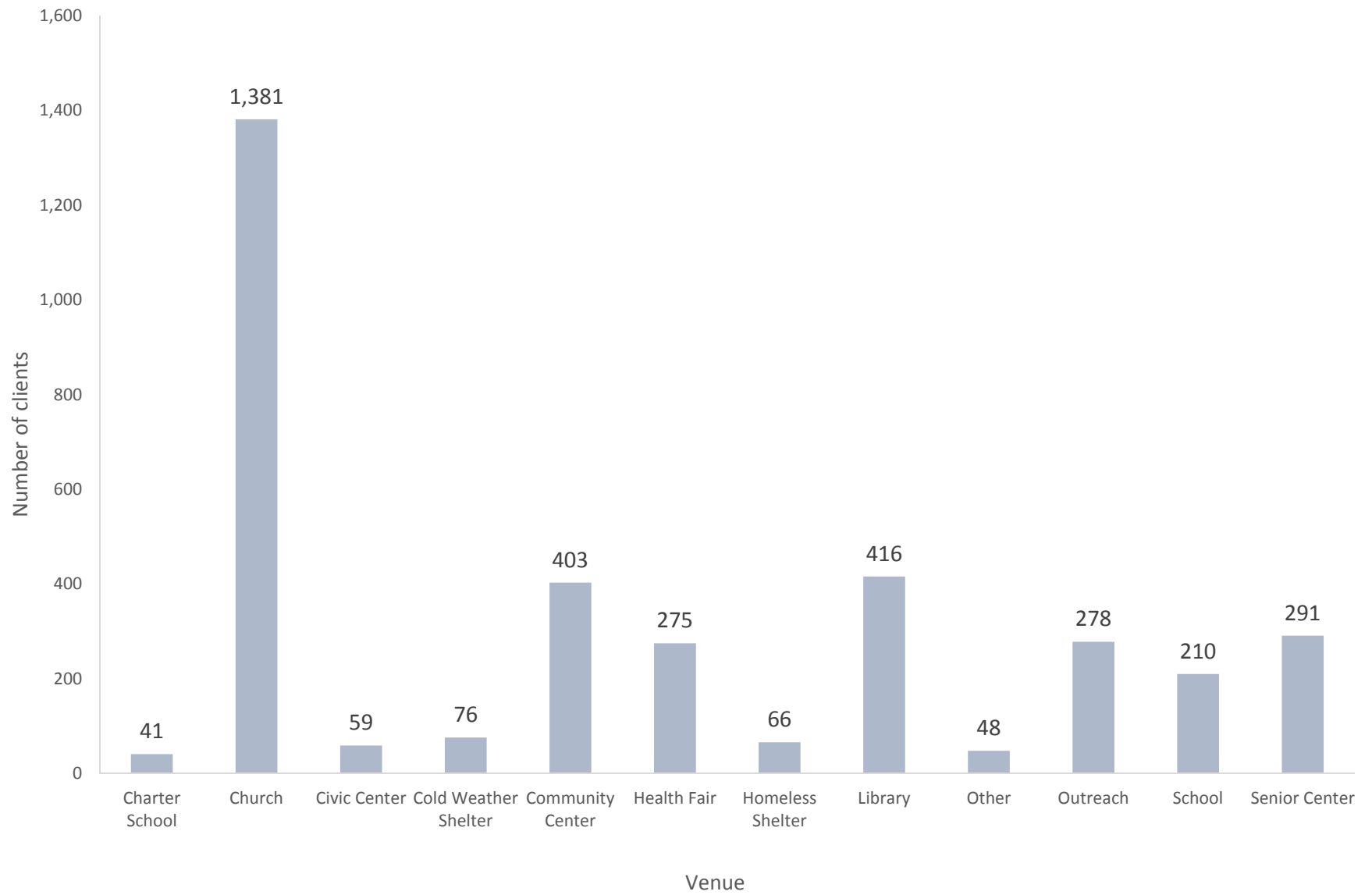


Figure 10b7. Number of 55-64 years old clients (n=4,504) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

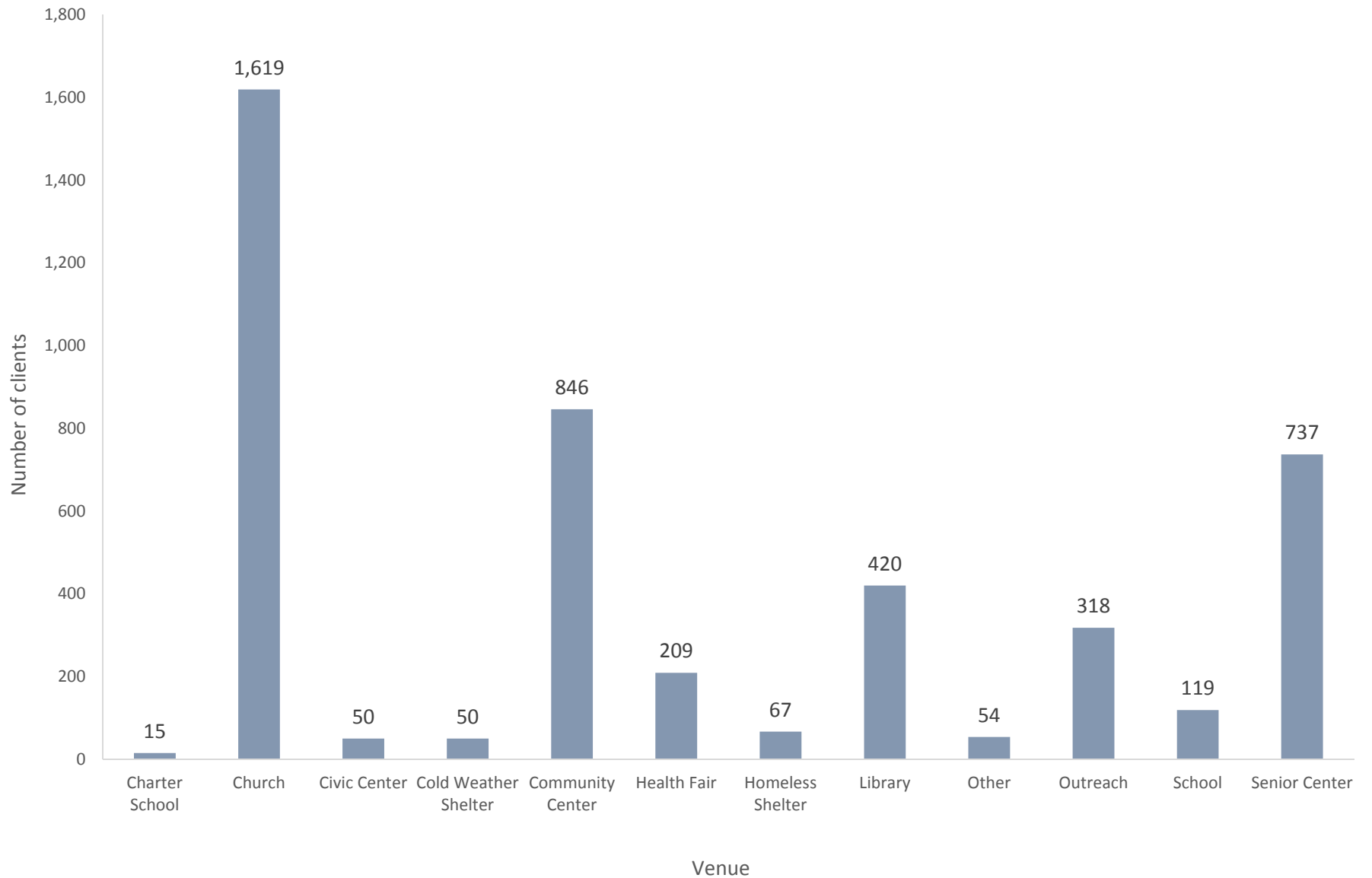


Figure 10b8. Number of 65-74 years old clients (n=2,101) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

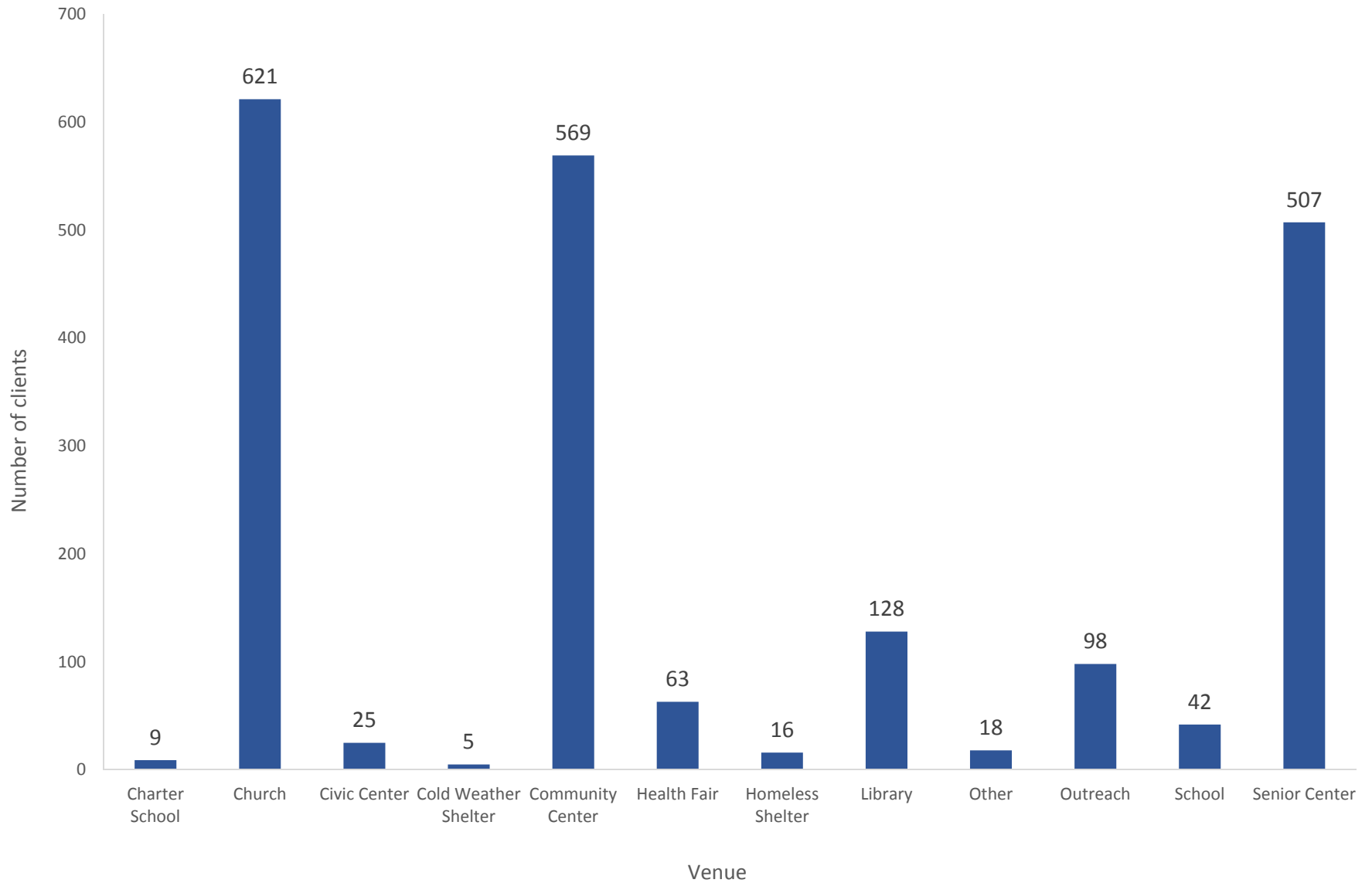


Figure 10b9. Number of clients 75 years old or older (n=1,541) vaccinated at flu outreach sites by venue type, 2014-2015 Flu Outreach Campaign. (Preliminary data)

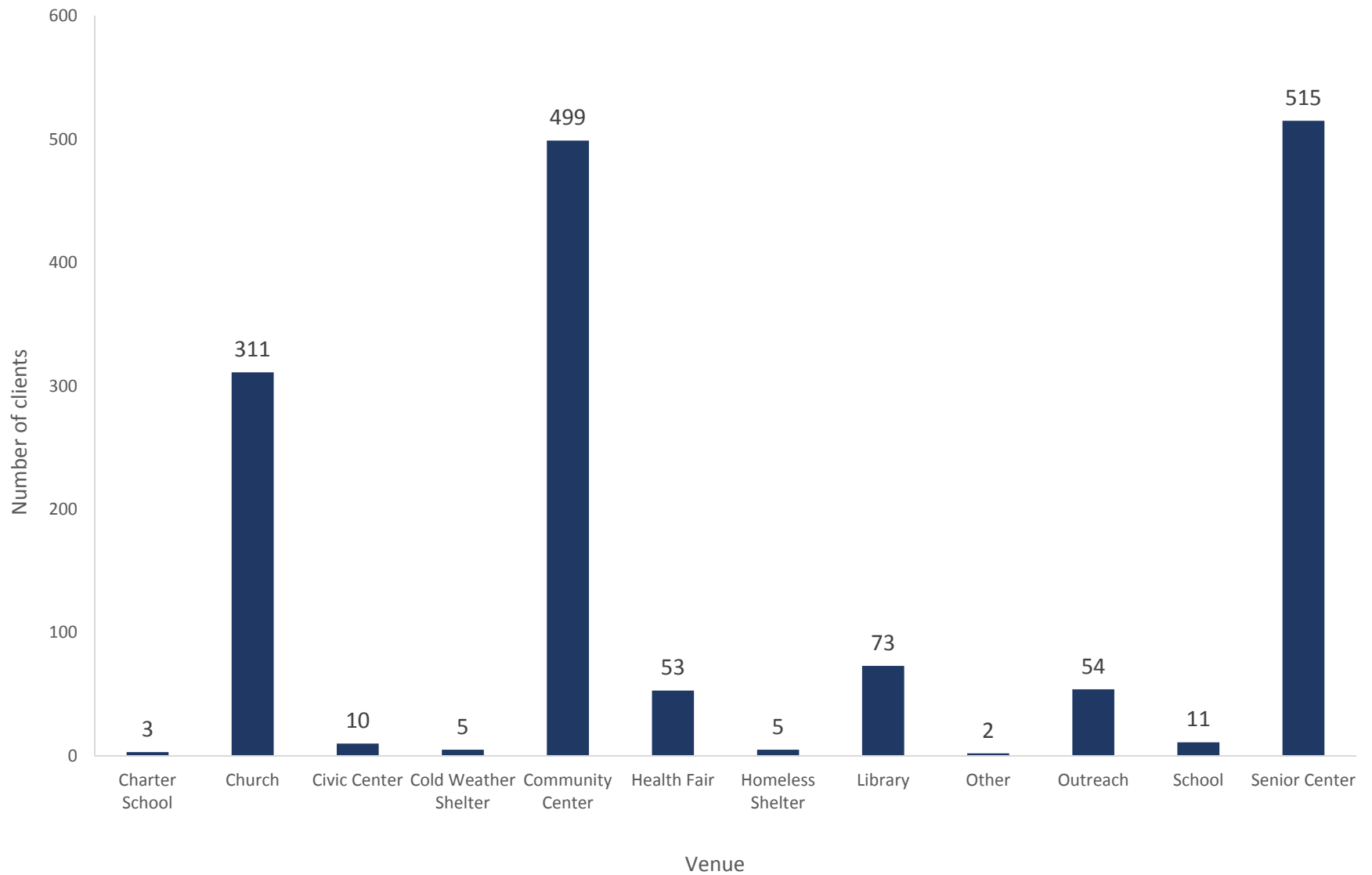
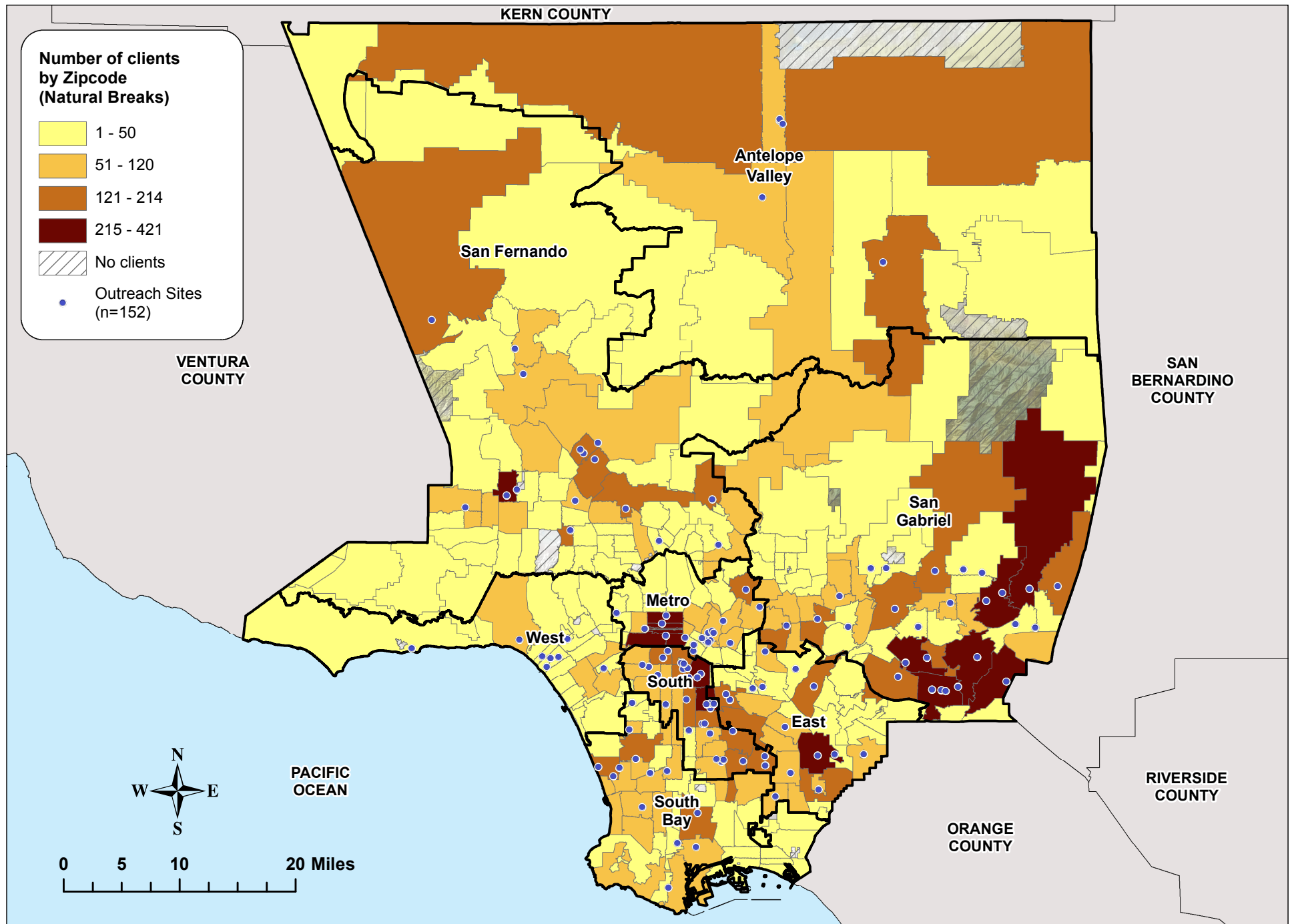


Figure 11. Number of clients by zipcode (n=19,321), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



Note: Excludes homeless (n=26), missing (n=660), and non-residential, and/or invalid zipcodes outside of Los Angeles County (n=1,632).

Figure 12. Number of clients by Service Planning Area (SPA) (n=20,953), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)

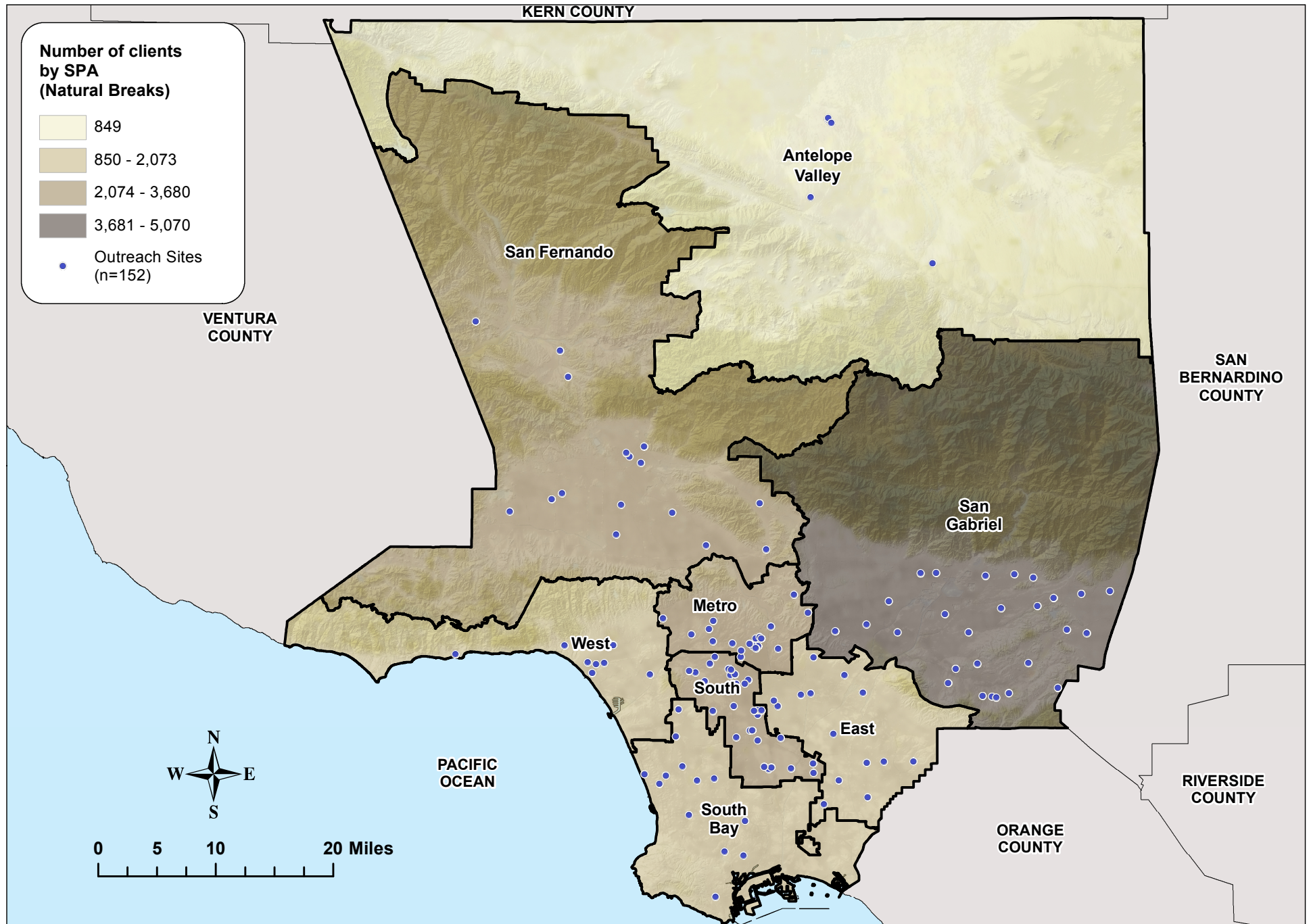


Figure 13. Number of clients by Supervisorial District (SD) (n=20,953), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)

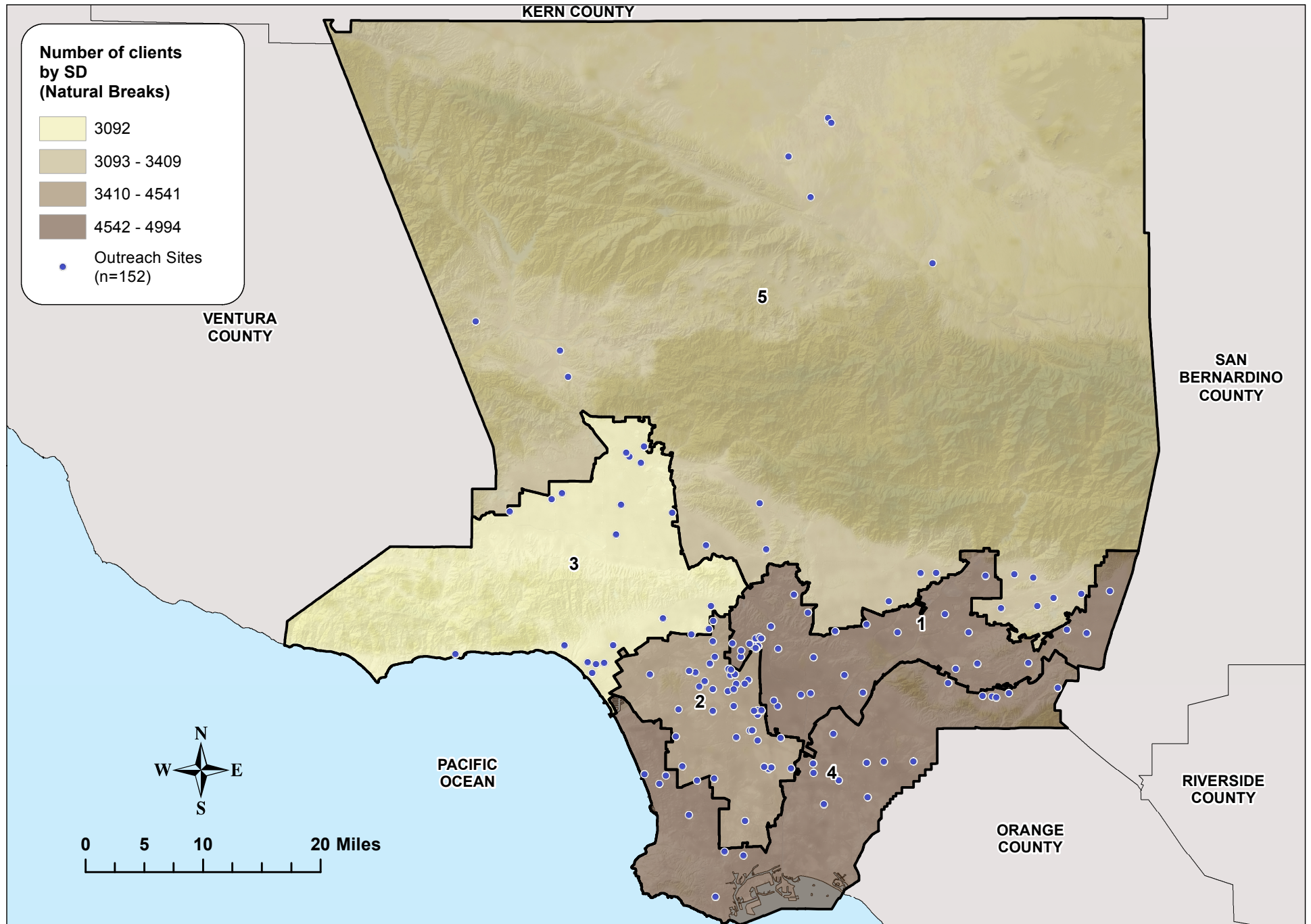
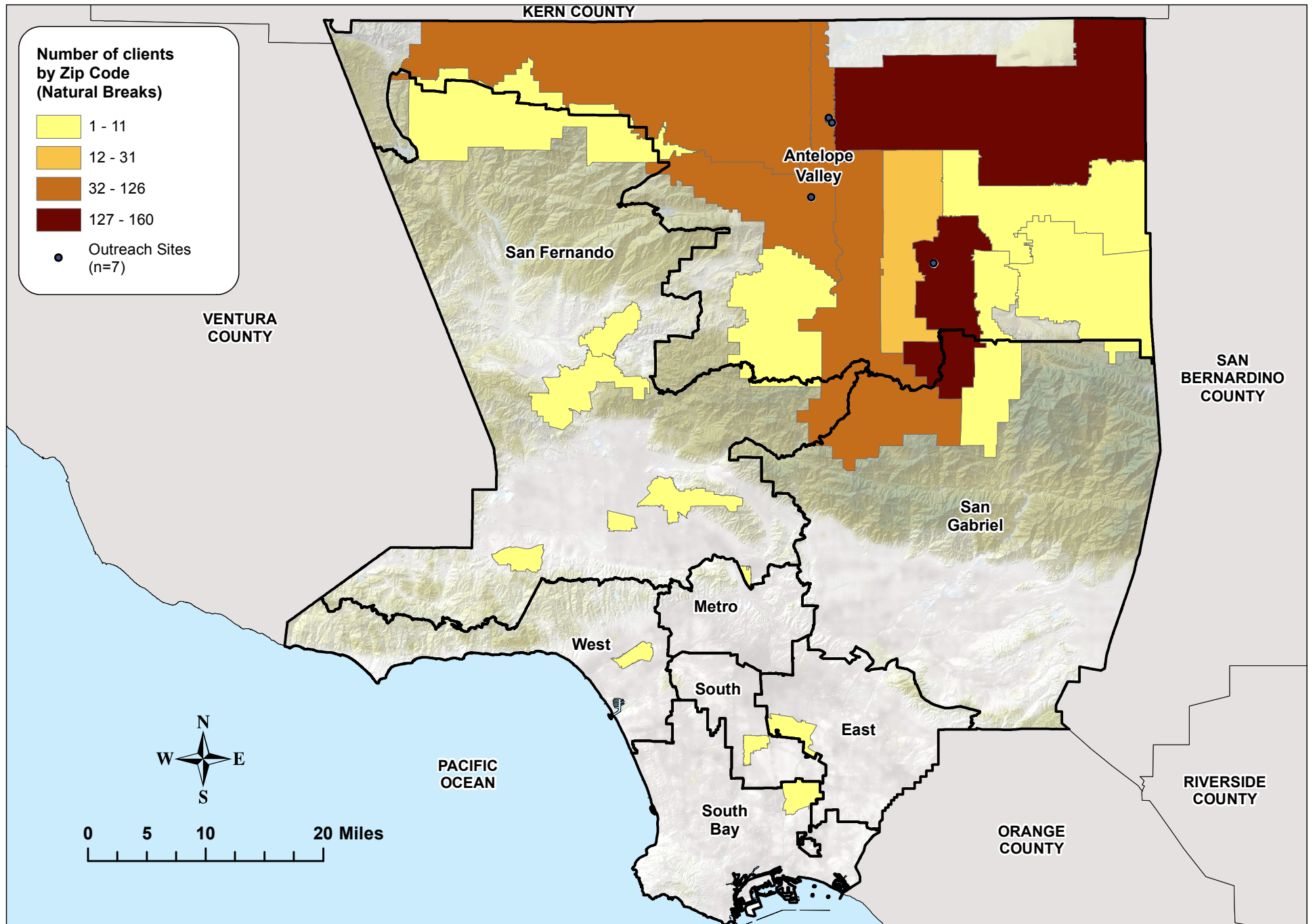
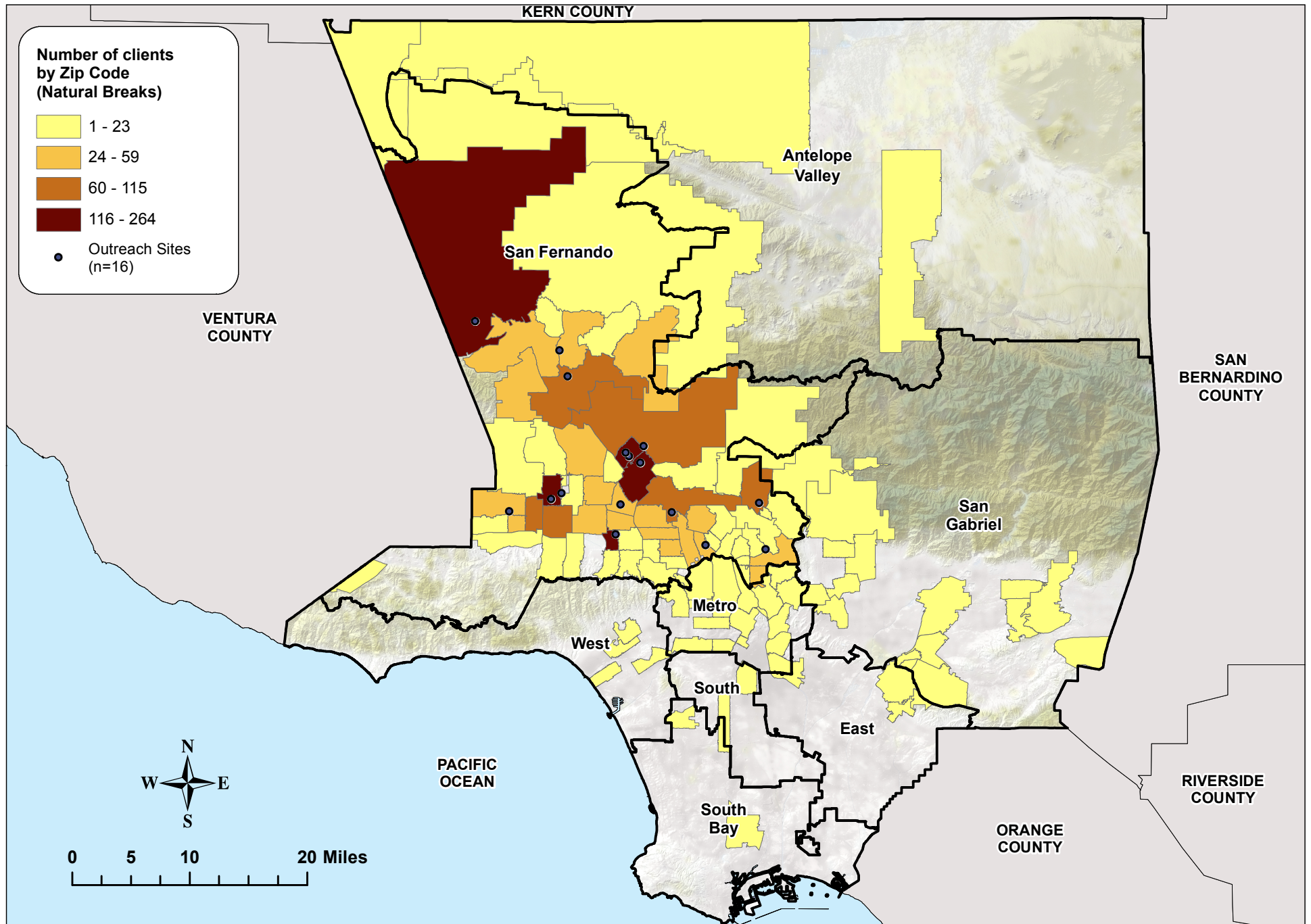


Figure 14. Number of clients by zip code for SPA 1 outreaches (n=817), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



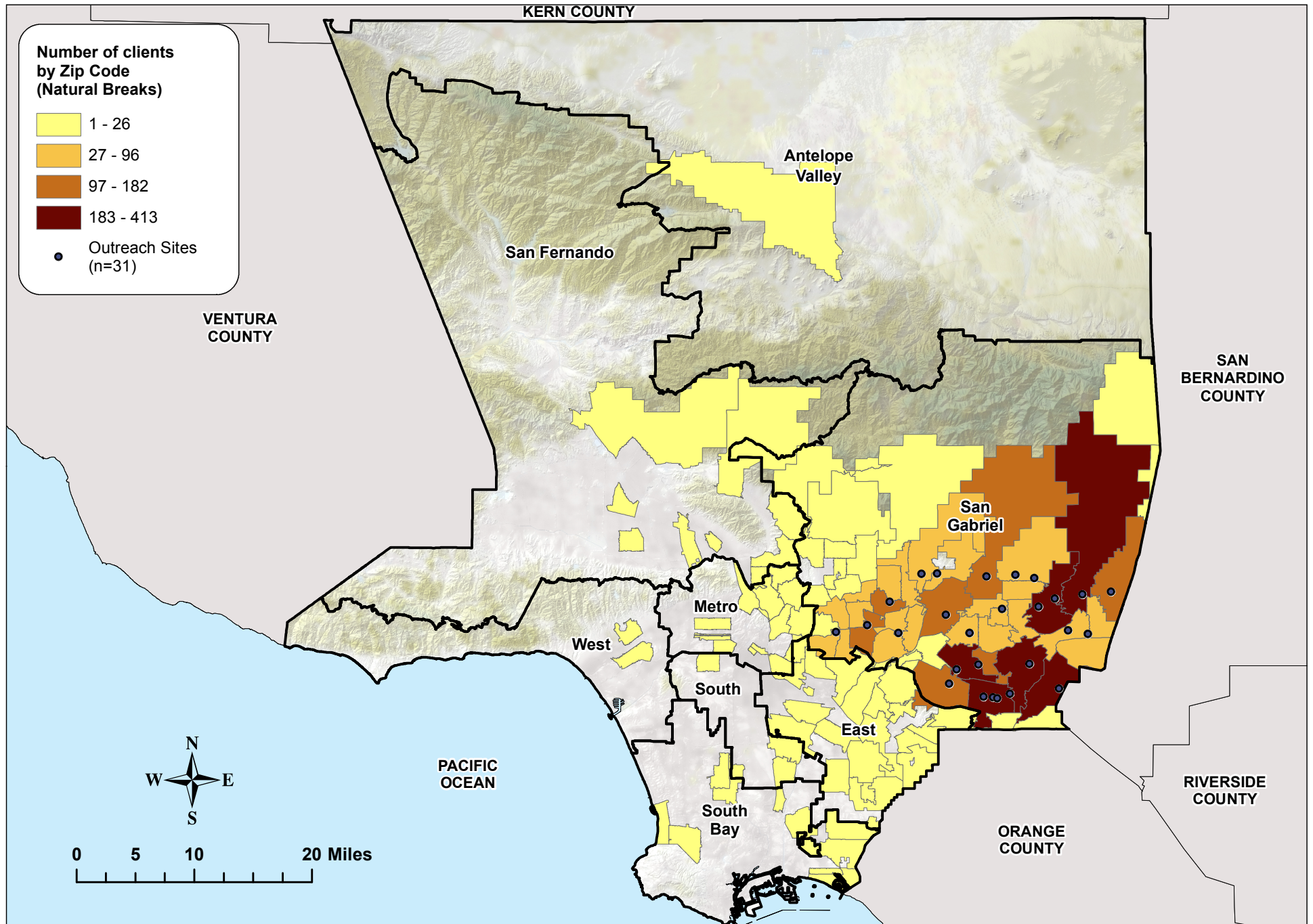
Note: Excludes homeless (n=3), missing zipcodes (n=9), and non-residential and/or invalid zipcodes outside of Los Angeles County (n=20)

Figure 15. Number of clients by zip code for SPA 2 outreaches (n=2,776), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



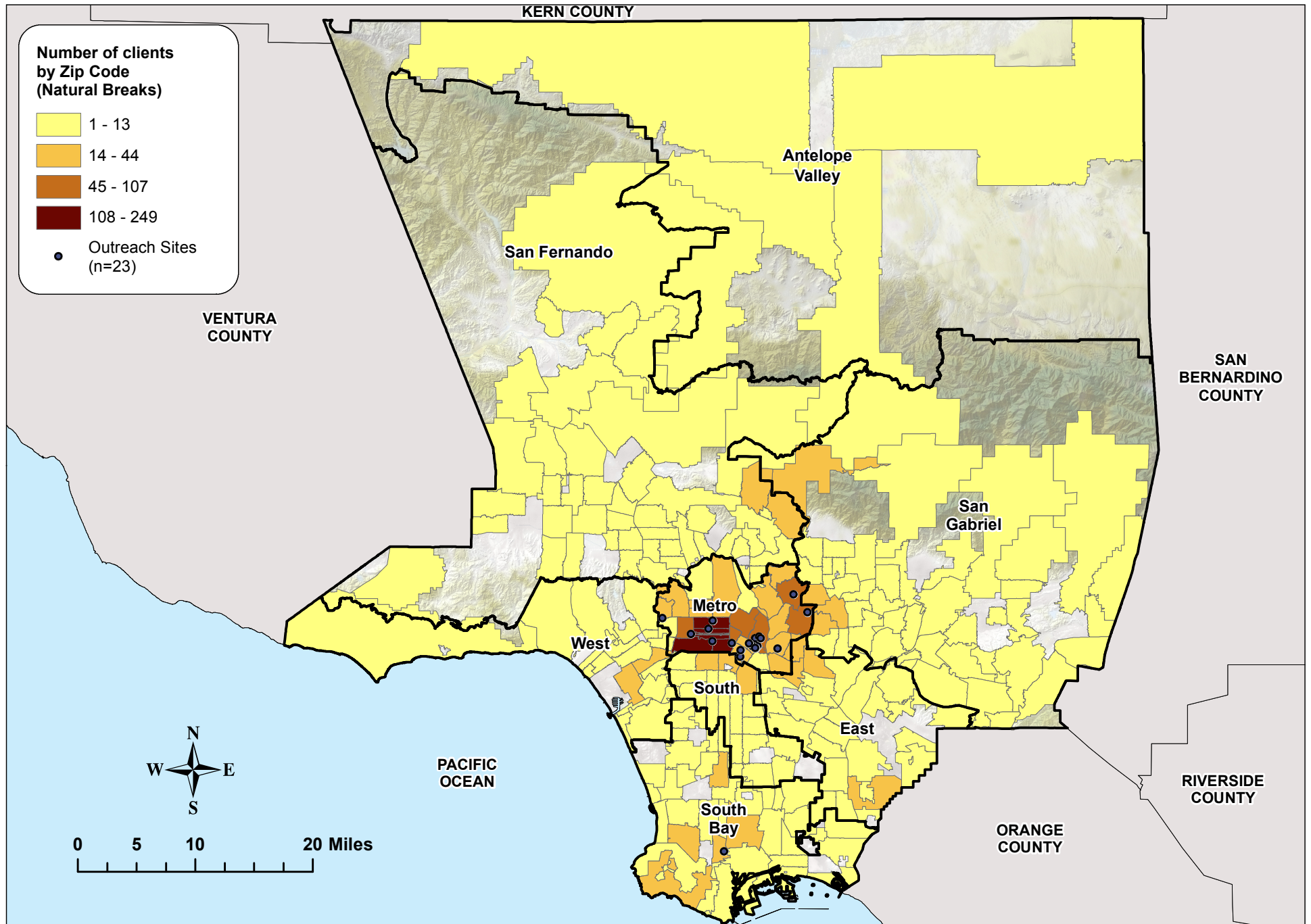
Note: Excludes missing zipcodes (n=108), and non-residential and/or invalid zipcodes outside of Los Angeles County (n=47)

Figure 16. Number of clients by zip code for SPA 3 outreaches (n=4,452), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



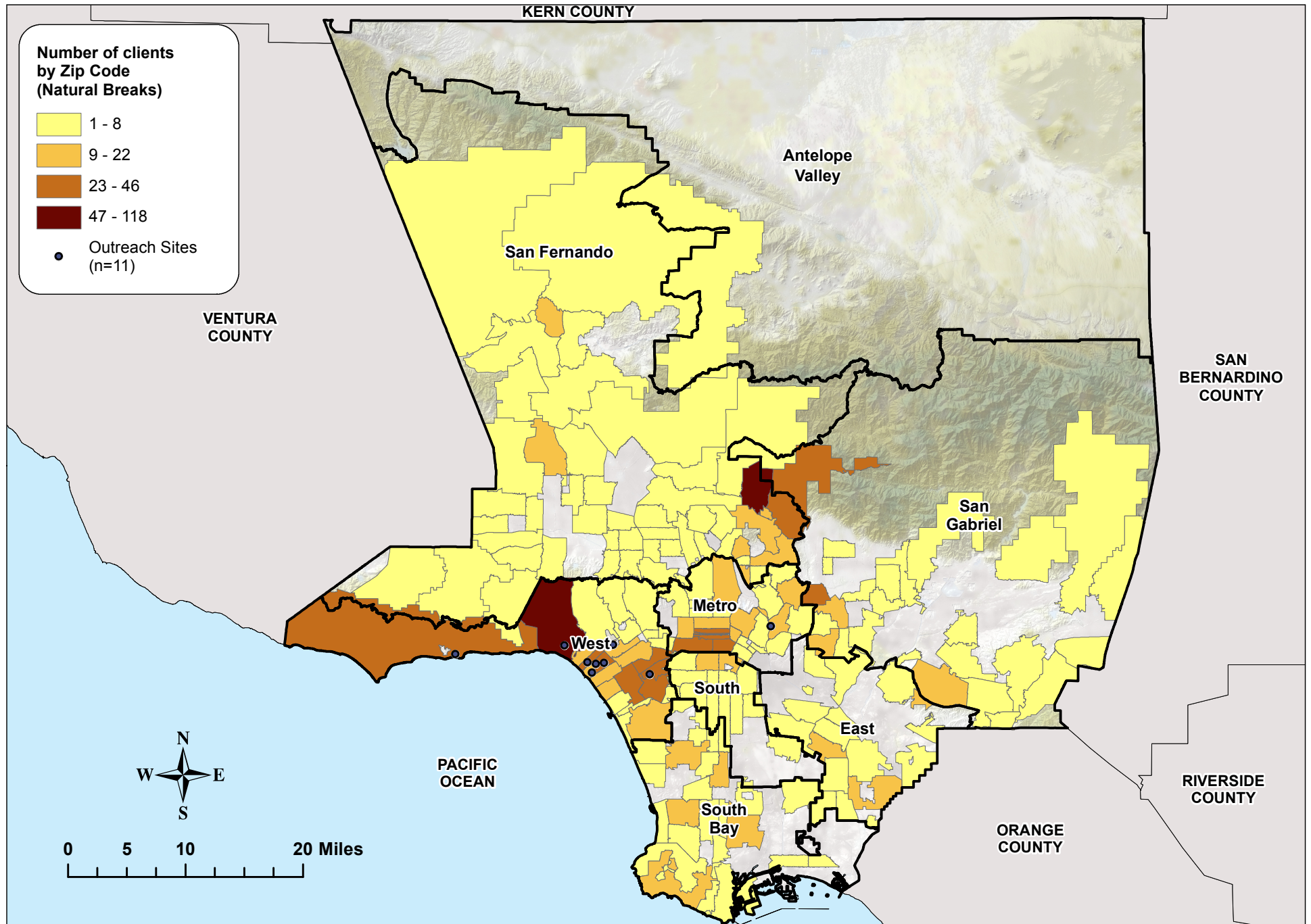
Note: Excludes homeless (n=9), missing zipcodes (n=164), and non-residential and/or invalid zipcodes outside of Los Angeles County (n=445)

Figure 17. Number of clients by zip code for SPA 4 outreaches (n=2,918), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



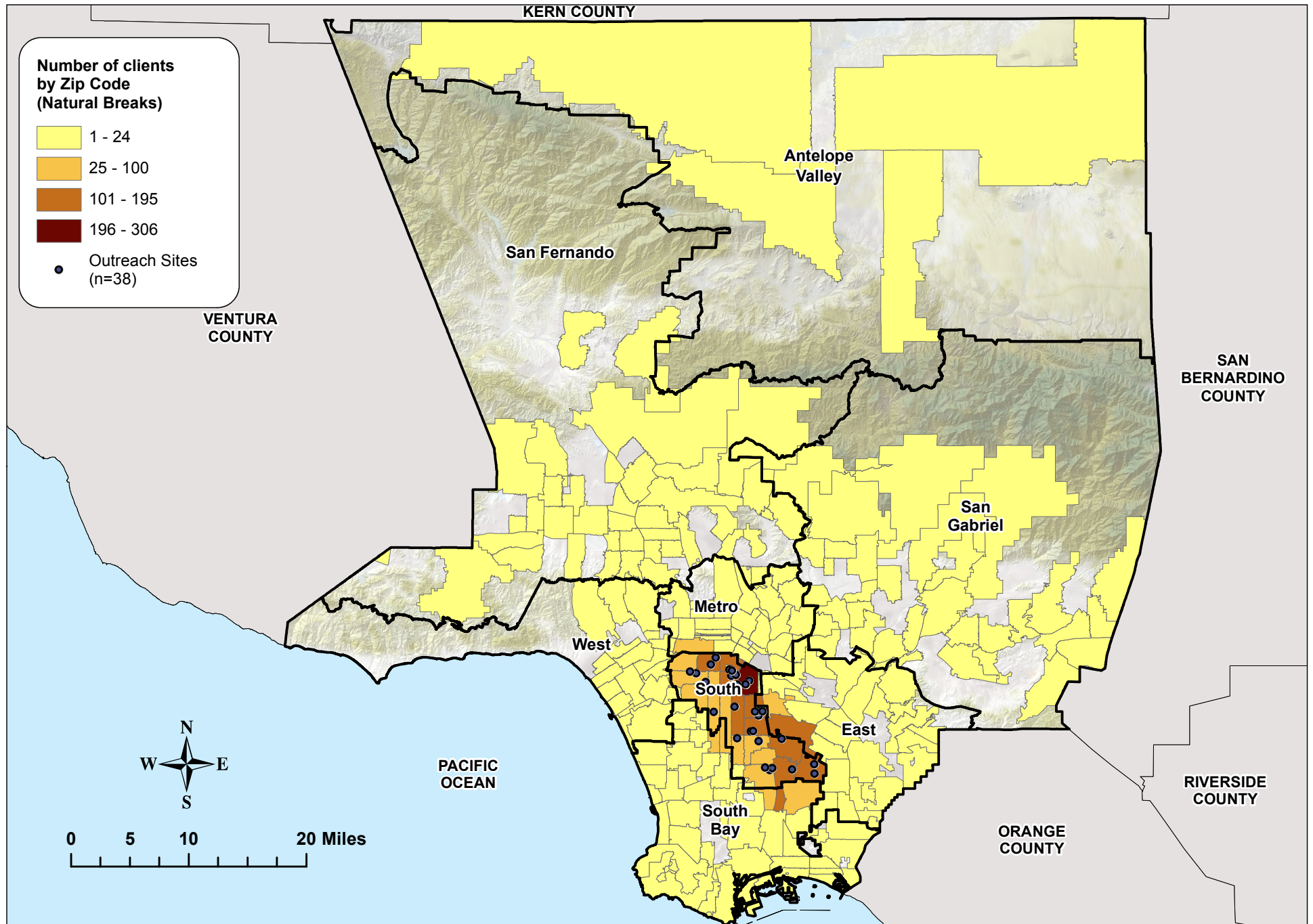
Note: Excludes homeless (n=10), missing zipcodes (n=161), and non-residential and/or invalid zipcodes outside of Los Angeles County (n=100)

Figure 18. Number of clients by zip code for SPA 5 outreaches (n=1,553), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



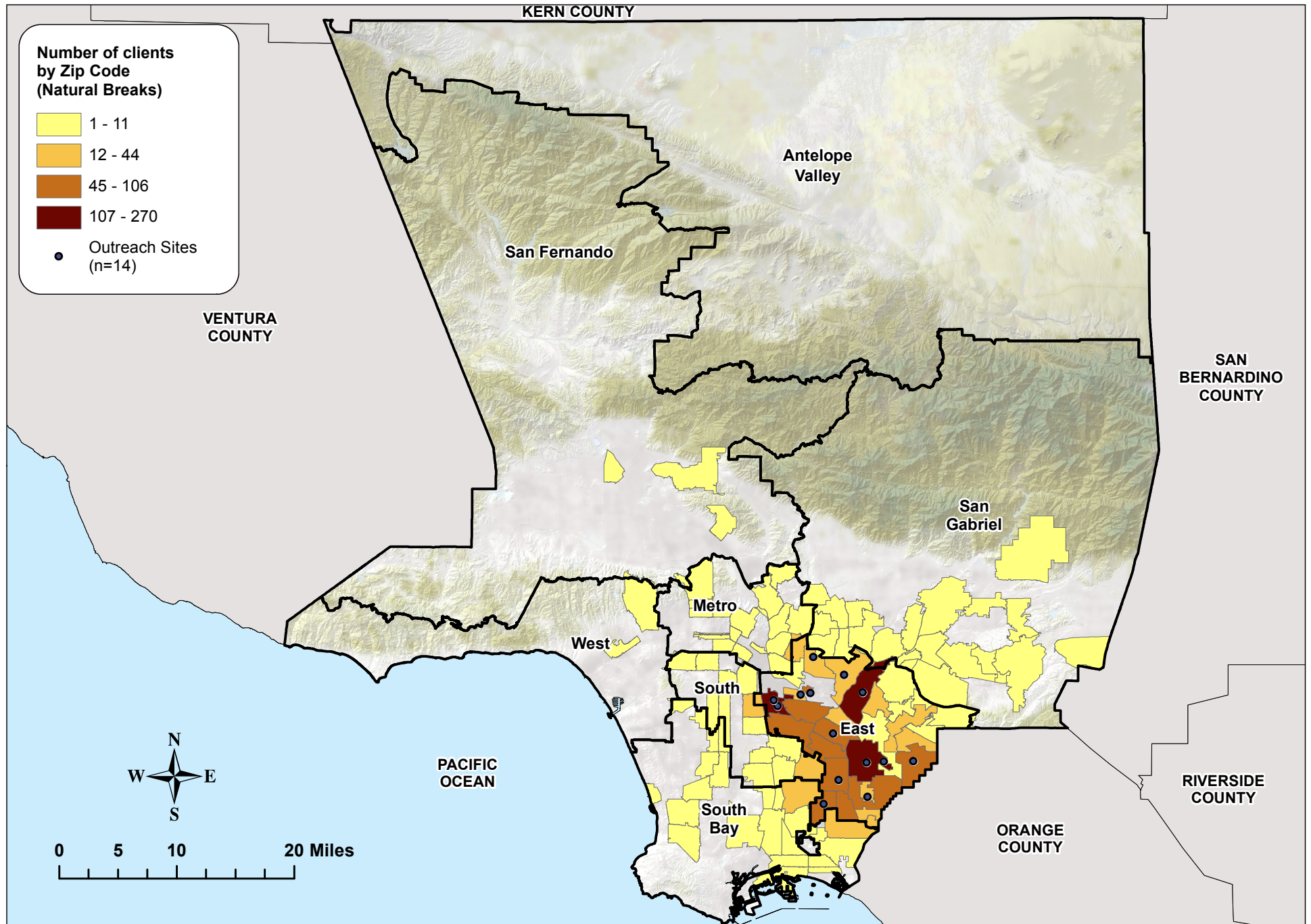
Note: Excludes missing zipcodes (n=30), and non-residential and/or invalid zipcodes outside of Los Angeles County (n=77)

Figure 19. Number of clients by zip code for SPA 6 outreaches (n=3,401), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



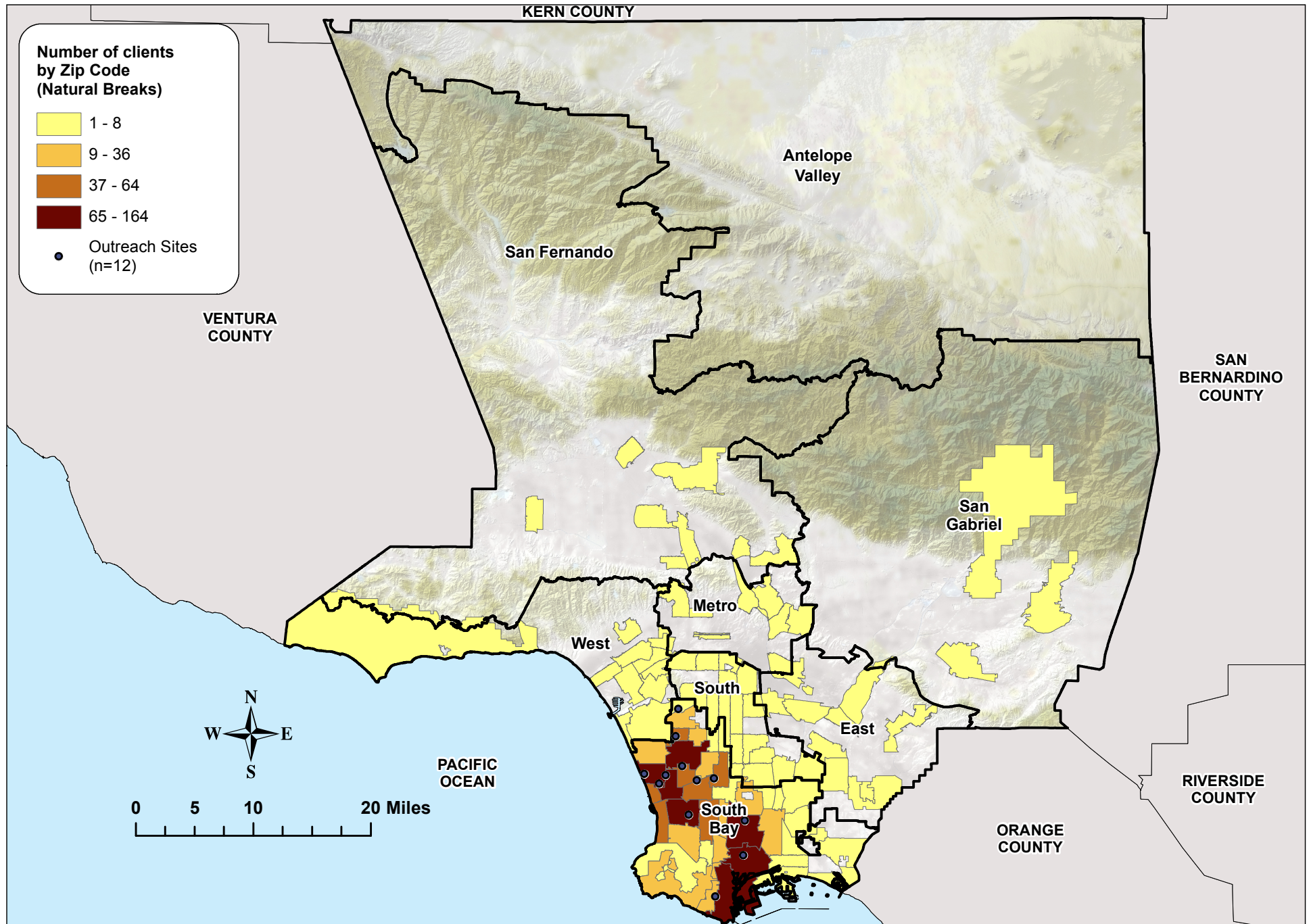
Note: Excludes homeless (n=4), missing zipcodes (n=116), and non-residential and/or invalid zipcodes outside of Los Angeles County (n=159)

Figure 20. Number of clients by zip code for SPA 7 outreaches (n=1,950), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



Note: Excludes missing zipcodes (n=42), and non-residential and/or invalid zipcodes outside of Los Angeles County (n=81)

Figure 21. Number of clients by zip code for SPA 8 outreaches (n=1,454), 2014-2015 Flu Outreach Campaign, September 2014 - February 2015. (Preliminary Data)



Note: Excludes missing zipcodes (n=30), and non-residential and/or invalid zipcodes outside of Los Angeles County (n=17)

Table A1. Frequency counts for insurance categories for Tables 3, 3a and 3b, 2014-2015 Flu Outreach Campaign. (Preliminary Data).

	Grand total ¹	With private insurance						Without private insurance								
		Total	Private only	Plus Medicare & Medicaid	Plus Medicare	Plus Medicaid	Plus other	Total	Medicare only	Medicaid only	Medicare & Medicaid	Medicare & Other	Medicaid & Other	Other only	Uninsured	Does not know
Medicare	3,149	267	267	7	260	7	0	2,882	2,661	0	221	0	0	0	0	0
Medicaid	1,845	17	7	7	7	10	0	1,828	0	1,607	221	0	0	0	0	0
Private	5,663	5,663	5,385	7	267	17	1	0	0	0	0	0	0	0	0	0
Not Insured	7,371	0	0	0	0	0	0	7,371	0	0	0	0	0	0	7,371	0
Doesn't know	1,287	0	0	0	0	0	0	1,287	0	0	0	0	0	0	0	1,287
Other	7	1	1	0	0	0	1	6	0	0	0	0	0	0	6	0

¹ Missing values not shown.² Cells with overlap are highlighted in red.



2014 - 2015 Flu Vaccination Consent Form

Apellido										Primer Nombre										Inicial de 2 ^{do} Nombre	
Domicilio de Casa (número de casa y nombre de calle)										Número de Apartamento											
Ciudad										Código Postal				Género: <input type="radio"/> Masculino <input type="radio"/> Femenino							

Área					Número de Teléfono					Fecha de Nacimiento (ejemplo 05/18/1980)		
Primer Nombre de su Mamá					Mes			Día		Año		

Raza/Origen Étnico: Asiático Negro / Afroamericano Hispano / Latino Blanco Otro
Escoja Uno Nativo de Hawai / Isleño del Pacífico Indio Americano / Nativo de Alaska Multiracial

Para las personas de 18 años de edad o mayores, ¿qué tipo de seguro médico tiene?
 Medicare Medicaid Privado (ej. Anthem Blue Cross, Kaiser Permanente) Ninguno No sé

1) ¿Tiene fiebre o está enfermo hoy? Sí No

2) ¿Está embarazada o piensa que puede estar embarazada? Sí No

3) ¿Ha tenido una reacción grave a la vacuna contra la gripe que requirió ayuda médica? Sí No

DOY MI CONSENTIMIENTO PARA LA VACUNA PROVEÍDA.	Si es menor de 18 años de edad, escriba el nombre del padre o del guardián legal en letra de molde
Firma	

ALTO - NO ESCRIBA A PARTIR DE ESTA LÍNEA SCREENER INITIALS

4) REQUIRED: CAIR disclosure form reviewed with client? Yes

5) Do you have a severe allergy to eggs? [If YES, See Egg Allergy Guidelines] Yes No

6) Do you have an allergy to thimerosal? Yes No

7) Have you ever had Guillain-Barré Syndrome (GBS)? Yes No

8) Have you received any of these vaccines in the last 4 weeks? [MMR, Varicella, LAIV, Shingles] Yes No

9) Do you have any of the following medical conditions? [If YES, Administer IIV ONLY] Yes No
 Heart, Lung, Kidney, or Liver Disease; Asthma; Cancer; Metabolic disease (i.e. diabetes);
 Blood Disorders (i.e. leukemia, lymphoma, sickle cell disease); Immune System Disorder (i.e. HIV / AIDS, steroid therapy)

10) Is the person to be vaccinated between 2-49 years old? (Verify Age) * [If NO, Administer IIV] Yes No

If the vaccination is for a child, ask these questions: [If YES to either, Administer IIV ONLY]

11) If child is < 5 years, have they been diagnosed with wheezing in the last 12 months? Yes No N/A

12) Is child taking long term medicine therapy containing ASPIRIN? Yes No N/A

13) For persons under 19 years, select VFC eligibility. (choose one)
 Uninsured Medi-Cal / CHDP
 American Indian / Alaskan Native Not VFC eligible

Flu Vaccine VIS Date: 08/19/2014		Manufacturer and Lot Number				Dosage		Site		Initials	
<input type="radio"/> INACTIVATED Flu Shot	<input type="radio"/> LIVE Nasal Spray	Manufacturer	<input type="radio"/> GSK	<input type="radio"/> MI	<input type="radio"/> NOV	<input type="radio"/> SP	<input type="radio"/> 0.25 mL	<input type="radio"/> LD	<input type="radio"/> RD	Admin. by	
DOSE #	<input type="radio"/> 1 <input type="radio"/> 2	Lot Number					<input type="radio"/> 0.50 mL	<input type="radio"/> LT	<input type="radio"/> RT		
							<input type="radio"/> 0.20 mL	<input type="radio"/> Intranasal			

Date Administered (ex. 10/30/2014)	* REMINDER LAIV Is Only For Healthy Clients 2 Thru 49 Years Of Age, Who Are NOT Pregnant
Month / Day / Year	

Language Interpreter Signature:	Nurse Instructor Signature:
Spanish	



2014 - 2015 Flu Vaccination Consent Form



姓	名	中間名的字母

住址 (家號碼和街名)	公寓(房間)號碼

城市	郵政編碼	性別 <input type="radio"/> 男 <input type="radio"/> 女

區號	電話號碼	出生日期	(例如 05/18/1980)

母親的名子	月 / 日 / 年

人種 / 種族 亞洲人 黑人 / 非洲美國人 拉美裔/拉丁美洲人 白種人 其它
 選擇其中之一 夏威夷原住民 / 亞太 美國印第安人 / 阿拉斯加原住民 多種 - 種族

在十八歲和十八歲以上的人, 你是用那一種健康醫療保險? 沒有健康醫療保險
 聯邦醫療保險 加州補助醫療保險 私人健康保險公司 (例如: Anthem 藍十字, Kaiser Permanente) 我不曉得

1) 您今天是否有發高燒或身體不舒服? 是 否

2) 您是否也許或正在懷孕當中? 是 否

3) 您是否對流感疫苗有嚴重的過敏反應而需要藥物來控制? 是 否

我同意接種疫苗 簽名	十八歲以下須填寫父母或監護人姓名

停止 - 禁止在此線以下填寫 SCREENER INITIALS

4) REQUIRED: CAIR disclosure form reviewed with client? Yes

5) Do you have a severe allergy to eggs? [If YES, See Egg Allergy Guidelines] Yes No

6) Do you have an allergy to thimerosal? Yes No

7) Have you ever had Guillain-Barré Syndrome (GBS)? Yes No

8) Have you received any of these vaccines in the last 4 weeks? [MMR, Varicella, LAIV, Shingles] Yes No

9) Do you have any of the following medical conditions? [If YES, Administer IIV ONLY] Yes No
 Heart, Lung, Kidney, or Liver Disease; Asthma; Cancer; Metabolic disease (i.e. diabetes);
 Blood Disorders (i.e. leukemia, lymphoma, sickle cell disease); Immune System Disorder (i.e. HIV / AIDS, steroid therapy)

10) Is the person to be vaccinated between 2-49 years old? (Verify Age) * [If NO, Administer IIV] Yes No

If the vaccination is for a child, ask these questions: [If YES to either, Administer IIV ONLY]

11) If child is < 5 years, have they been diagnosed with wheezing in the last 12 months? Yes No N/A

12) Is child taking long term medicine therapy containing ASPIRIN? Yes No N/A

13) For persons under 19 years, select VFC eligibility. (choose one) Uninsured Medi-Cal / CHDP
 American Indian / Alaskan Native Not VFC eligible

Flu Vaccine VIS Date: 08/19/2014	Manufacturer and Lot Number	Dosage	Site	Initials
<input type="radio"/> INACTIVATED Flu Shot <input type="radio"/> LIVE Nasal Spray	Manufacturer <input type="radio"/> GSK <input type="radio"/> MI <input type="radio"/> NOV <input type="radio"/> SP Lot Number 	<input type="radio"/> 0.25 mL <input type="radio"/> 0.50 mL <input type="radio"/> 0.20 mL	<input type="radio"/> LD <input type="radio"/> RD <input type="radio"/> LT <input type="radio"/> RT <input type="radio"/> Intranasal	Admin. by
DOSE # <input type="radio"/> 1 <input type="radio"/> 2				

Date Administered (ex. 10/30/2014) / / Month / Day / Year	* REMINDER LAIV Is Only For Healthy Clients 2 Thru 49 Years Of Age, Who Are NOT Pregnant
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Language Interpreter Signature: Chinese	Nurse Instructor Signature:



2014 - 2015 Flu Vaccination Consent Form

성	이름	중간이름
<input type="text"/>	<input type="text"/>	<input type="text"/>

집 주소 (집 번호와 거리 이름)	아파트 번호
<input type="text"/>	<input type="text"/>

도시	우편번호	성별
<input type="text"/>	<input type="text"/>	<input type="radio"/> 남성 <input type="radio"/> 여성

지역번호	전화번호	생년월일	(예 05/18/1980)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

어머니의 이름	월	일	년도
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

인종 / 민족 아시아인 흑인 / 아프리카인 히스피닉 / 라티노 백인 다른 민족
 하나만 선택 하세요 하와이 원주민 / 태평양 군도 원주민 아메리칸 인디언 / 알래스칸 원주민 다인종

18세 이거나 18세 이상인 사람에게 대해서, 당신은 어떤 종류의 건강보험을 갖고 있습니까?
 메디케어 메디케이드 개인보험(예: 엔덤 블루크로스, 카이저 보험) 없음 모르겠음

1) 오늘 열이 있거나 아프십니까? 예 아니오

2) 임신 중이거나 혹은 임신일 거라고 생각하십니까? 예 아니오

3) 독감 백신에 대해서 의료 도움이 요구되는 심각한 반응을 보인 적이 있습니까? 예 아니오

본인은 제공되는 예방접종을 동의합니다 18세 이하인 경우, 부모 혹은 법적 보호자의 이름을 쓰십시오
 서명

멈춤 - 아래 부분은 작성하지 마십시오 **SCREENER INITIALS**

4) REQUIRED: CAIR disclosure form reviewed with client? Yes

5) Do you have a severe allergy to eggs? [If YES, See Egg Allergy Guidelines] Yes No

6) Do you have an allergy to thimerosal? Yes No

7) Have you ever had Guillain-Barré Syndrome (GBS)? Yes No

8) Have you received any of these vaccines in the last 4 weeks? [MMR, Varicella, LAIV, Shingles] Yes No

9) Do you have any of the following medical conditions? [If YES, Administer IIV ONLY] Yes No
 Heart, Lung, Kidney, or Liver Disease; Asthma; Cancer; Metabolic disease (i.e. diabetes);
 Blood Disorders (i.e. leukemia, lymphoma, sickle cell disease); Immune System Disorder (i.e. HIV / AIDS, steroid therapy)

10) Is the person to be vaccinated between 2-49 years old? (Verify Age) * [If NO, Administer IIV] Yes No

If the vaccination is for a child, ask these questions: [If YES to either, Administer IIV ONLY]

11) If child is < 5 years, have they been diagnosed with wheezing in the last 12 months? Yes No N/A

12) Is child taking long term medicine therapy containing ASPIRIN? Yes No N/A

13) For persons under 19 years, select VFC eligibility. (choose one) Uninsured Medi-Cal / CHDP
 American Indian / Alaskan Native Not VFC eligible

Flu Vaccine	VIS Date: 08/19/2014	Manufacturer and Lot Number	Dosage	Site	Initials
<input type="radio"/> INACTIVATED Flu Shot	<input type="radio"/> LIVE Nasal Spray	Manufacturer <input type="radio"/> GSK <input type="radio"/> MI <input type="radio"/> NOV <input type="radio"/> SP	<input type="radio"/> 0.25 mL	<input type="radio"/> LD <input type="radio"/> RD	Admin. by <input type="text"/>
DOSE # <input type="radio"/> 1 <input type="radio"/> 2	Lot Number <input type="text"/>	<input type="radio"/> 0.50 mL	<input type="radio"/> LT <input type="radio"/> RT		
		<input type="radio"/> 0.20 mL	<input type="radio"/> Intranasal		

Date Administered (ex. 10/30/2014)
 / /
 Month Day Year

*** REMINDER**
LAIV Is Only For Healthy Clients 2 Thru 49 Years Of Age, Who Are NOT Pregnant

Language Interpreter Signature: **Nurse Instructor Signature:**
 Korean

Flu Schedule Template (SAMPLE)

County of Los Angeles - Department of Public Health
www.publichealth.lacounty.gov/ip

Date emailed:

TO: Jane Doe, RN,

FROM:
 Public Health Center & SPA

Flu Coordinator's Name, Title, and direct Telephone Number

SUBJECT: 2014-2015 SEASONAL INFLUENZA OUTREACH CLINIC SCHEDULE

Beginning In-House Flu Clinic Date:
 Name of District:
 SPA #:

DIRECTIONS: Please use a separate line/row to add clinic sessions for the same date and site.

Please do not print out spreadsheet and complete by hand. All information must be entered in this spreadsheet.

Date of Clinic Session	TIME of Clinic Session				Venue Type	Target Population	Clinic Session Name	Address of Clinic Session				Vaccine Doses	
	Date (MM/DD/YYYY)	Start Time (##:##)	Start Time AM or PM	End Time (##:##)				End Time AM or PM	Outreach, School, Shelter etc	Children, Seniors, Homeless, or Immune Compromised Adults	Site Name	Street Address (DO NOT use any periods)	City
10/24/2014	10:30	AM	5:30	PM	Outreach	Children	HIS Senior Center	333333 S Main Blvd	Los Angeles	90000	4	325	325

2014-2015 Flu Vaccination Fax/Email Log for Service Planning Areas 1-8 (1/23/15)

(2014-2015 Influenza Campaign Data Entry Completion Logs sent to the attention of Nirvi Shah and Stephanie Hunter)

Date log + scanned Completion Log were emailed to Dulmini Wilson at the Immunization Program: ____/____/____

[(new*) = site not on original outreach list]

Clinic Session Date	Site Name	Venue	Target Population	Address	City	ZIP	Start Time	End Time	SPA	Sup Dist	Data Entry Assigned	Health Center	Site Number	Person Making Drop-off	No. of People Vaccinated (cover sheet)	No. of Forms Received by Data Entry Tech	No. of Forms Entered by Data Entry Tech	Data Entry Tech Assigned	Data Entry Complete Date
9/11/2014		Health Fair	All				8:00AM	5:00PM	6	2	Yes	PH		Angela Austin	201	202	201	Shelly Hsu	10/31/2014
9/12/2014		Health Fair	All				8:00AM	5:00PM	6	2	Yes	PH		Angela Austin	298	299	299	Shelly Hsu	11/12/2014
9/13/2014		Health Fair	All				8:00AM	5:00PM	6	2	Yes	PH		Angela Austin	218	218	218	Shelly Hsu	11/18/2014
9/14/2014		Health Fair	All				8:00AM	5:00PM	6	2	Yes	PH		Angela Austin	84	83	83	Shelly Hsu	11/18/2014
9/17/2014		Charter School	Children				8:00AM	12:00PM	6	2	Yes	PH		Angela Austin	79	53	53	Jeremy Huang	11/4/2014
9/24/2014		School	Children				1:00PM	4:00PM	6	2	Yes	PH		Angela Austin	17	17	17	Stephanie Hunter	11/13/2014
10/10/2014		Outreach	Seniors				9:00AM	2:00PM	8	2	Yes	CT		Nicole Henderson	54	54	54	Sandra Kelly	10/29/2014
10/16/2014		Health Fair	All				10:00AM	2:00PM	6	2	Yes	PH		Angela Austin	115	115	115	Natalia Sejbuk	11/5/2014
10/18/2014		Outreach	All				8:00AM	5:00PM	6	2	Yes	PH		Helen Obih	248	248	251	Jeremy Huang	11/12/2014
10/19/2014		Church	All				8:30AM	12:30PM	5	1	Yes	SM		Helen Obih	981	984	983	Shelly Hsu	12/1/2014
10/21/2014		Senior Center	Seniors, Children				9:00AM	11:30AM	3	4	Yes	PO		Michael Jordan	162	164	164	Jeremy Huang	11/13/2014
10/22/2014		Senior Center	Seniors, Children				9:00AM	11:30AM	3	5	Yes	PO		Michael Jordan	222	222	222	Sandra Kelly	11/5/2014
10/22/2014		Senior Center	Children, Seniors				9:00AM	11:00AM	7	1	Yes	WH		Armando Maldonado	214	214	214	Jeremy Huang	11/17/2014
10/22/2014		Community Center	Children				4:30PM	7:00PM	2	5	Yes	PA		Mario Baguiao	223	224	224	Stephanie Hunter	11/25/2014
10/22/2014		Community Center	Seniors, Immune Compromised Adults				9:00AM	12:00PM	4	1	Yes	CE		M Niedjelski	118	117	117	Nirvi Shah	12/4/2014

Health Center	SPA	Number of Outreaches (as of 3/4/15)	Health Center ID	Site Number
Antelope Valley	1	7	AV	101-107
Glendale	2	3	GL	201-203
North Hollywood	2	3	NH	231-233
Pacoima	2	10	PA	261-270
Monrovia	3	11	MO	302-312
Pomona	3	20	PO	351-370
Central	4	18	CE	401-402; 404-413; 415-420
Hollywood/Wilshire	4	5	HW	451-455
Simms/Mann	5	11	SM	501-506; 508-511; 513;
MLK, Jr	6	38	PH	601-632; 634-639
Whittier	7	14	WH	701-714
Curtis Tucker	8	12	CT	801-810; 812-813
Total		152		

Cover Sheet for CHS Flu Outreach Clinics, 2014-2015

Return this Cover Sheet to the Office of Health Assessment & Epidemiology
 within 3 BUSINESS DAYS after each outreach ends
 Email to, nshah@ph.lacounty.gov or FAX to (213) 250-2594.

All outreach staff must write in their own name, print initials, and flu form initials (i.e., initials as they appear on the flu forms)

Cover Sheet Submitted by:

Date ____/____/____ First Name: _____ Last Name: _____

Phone# (____) _____ - _____ Email _____@ph.lacounty.gov

PLEASE PRINT NEATLY

Outreach Date:		Number of People Vaccinated:	#
Clinic Site Name:			
Clinic Site Address:			
DPH Public Health Center Conducting Outreach Clinic:			SPA Conducting Outreach:
Vaccine Information* (See manufacturer abbreviations below)	Manufacturer:	Manufacturer:	Manufacturer:
	Lot #:	Lot #:	Lot #:
*SP-Sanofi Pasteur, MI-MedImmune, NOV-Novartis, GSK-GlaxoSmithKline			

	Please Print Name (Example: Susan R. Smith, RN)	Check if you served in any of the following roles at this outreach clinic	Printed Initials (Ex: SRS)	Flu Form Initials (Ex: Srs)
1.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
2.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
3.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
4.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
5.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
6.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
7.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
8.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
9.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
10.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
11.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		
12.		<input type="checkbox"/> Vaccinator <input type="checkbox"/> Screener <input type="checkbox"/> Volunteer		

CHS Influenza Form Procedures

Purpose: To have a procedure in place to ensure that the influenza (flu) consent forms and cover sheets, are accurately completed, and promptly transported to the Office of Health Assessment and Epidemiology (OHAE) for data entry purposes. Outreach clinics are defined as any flu clinic conducted outside of the Department of Public Health (DPH) in-house immunization clinic.

Influenza Outreach Forms

The following forms shall be provided to patients receiving an influenza vaccination:

- Vaccine Information Sheet
- 2014-2015 Influenza Consent Form

During the outreach

- The nurse in-charge of the outreach clinic must review and complete the CHS Influenza Coversheet. Indicate if each participant is a vaccinator or screener.
- Each person participating in the outreach should sign his/her own name and initials on the Coversheet.
 - Initials should be signed the same was as they are signed on the *Flu Vaccination Form 2014-2015*.
- All flu doses administered at outreach clinics conducted by CHS staff will utilize the *Flu Vaccination Form 2014 -2015*.
- Screeners must review each vaccination form to ensure the following fields are complete, accurate, and legible:
 - Last Name
 - First Name
 - Date of Birth
 - Zip Code
 - Phone Number
 - Gender
 - Mother's First Name
 - Race/ethnicity
 - Pregnancy Status
 - CAIR system
 - Type of flu vaccine administered (LAIV or TIV)
 - Manufacturer
 - Lot Number
 - Site of Administration
 - Staff Initials
 - Date of Administration
 - Vaccine for Children (VFC) eligibility questions
 - Insurance Coverage

CHS Influenza Form Procedures

Checklist to Prepare Forms for Data Entry

After the outreach:

- The nurse in-charge must review and complete the Cover Sheet for CHS Flu Outreach Clinics, 2014-2015 and attach to the vaccination consent forms. All of the information on the cover sheet must be completed.
- Check to make sure all of the names and initials of the screeners and vaccinators are listed on the Cover Sheet for CHS Flu Outreach Clinics, 2014-2015.
- Sort the “2014-2015 Flu Vaccination Consent Forms” by the vaccinator’s initials. For example, all forms signed by Susan R. Smith with the initials SRS should be paper clipped together.
- Review the vaccination forms for completeness. Correct forms missing the following information:
 - Type of vaccine
 - Lot numbers should match those listed on the cover sheet
 - Date vaccine administered

CHS Flu Outreach Cover Sheets

After the outreach clinic:

- Within 3 business days of the flu outreach, the flu coordinator (or designee) shall fax or email the CHS Flu Outreach Cover Sheets to the OHAE. Faxed forms should be sent to: 213-250-2594. Forms sent via email should be sent to the attention of Nirvi Shah, Epi Analyst at: nshah@ph.lacounty.gov.
- The flu coordinator (or designee) shall ensure all consent forms are properly batched with the CHS Flu Outreach cover sheet on top and delivered to the OHAE on the Monday following the outreach. Forms should be delivered to:
 - Office of Health Assessment and Epidemiology
313 N. Figueroa St. Room #127
Los Angeles, CA 90012
***Sign in with Jeremy Huang**
- Once all forms are entered, the OHAE will send all batched forms to CHS Administration, to the attention of Angela Austin, CHS Flu Coordinator.
- The CHS Flu Coordinator will work with the Area Nurse Managers to ensure that these batched forms are returned to the appropriate health center.

Codebook for Flu Vaccination 2014-2015
Created 10.27.2014 / Updated 10.1.2015
Community Health Services/Epidemiology Unit

Pos	Variable Name	Variable Label	Type	Coded Values	Data Entry Guidelines
1	sdist	Supervisory District of the Outreach	Numeric	1 = Supervisory District 1 2 = Supervisory District 2 3 = Supervisory District 3 4 = Supervisory District 4 5 = Supervisory District 5	N/A
2	spa	SPA by Health Center that is managing the Outreach	Numeric	1 = SPA 1 2 = SPA 2 3 = SPA 3 4 = SPA 4 5 = SPA 5 6 = SPA 6 7 = SPA 7 8 = SPA 8	N/A
3	center	Health Center managing the Outreach	Character	AV = Antelope Valley CE = Central CT = Curtis Tucker GL = Glendale HW = Hollywood Wilshire MO = Monrovia NH = North Hollywood PA = Pacoima PH = Center for Public Health (MLK) PO = Pomona SM = Simms Mann Burke WH = Whittier	N/A
4	outside	Site Number of the Outreach	Numeric		N/A
5	id	Patient's ID form	Numeric	N/A	ID auto-generated from the access database

Pos	Variable Name	Variable Label	Type	Coded Values	Data Entry Guidelines
6	lang	Language of the form	Numeric	1 = English 2 = Spanish 3 = Chinese 4 = Korean	
7	pt_lname	Patient's last name	Character	N/A	If last name is left blank, leave blank.
8	pt_fname	Patient's first name	Character	N/A	If first name is left blank, leave blank.
9	pt_mname	Patient's middle initial	Character	N/A	If middle initial is left blank, leave blank.
10	city	Patient's city of residence	Character	N/A 9 = Missing	If field is left blank, enter '9'.
11	zipcode	Patient's zip code of residence	Numeric	N/A 88888 = Homeless 99999 = Missing	If patient wrote homeless, enter '88888'; If zipcode is left blank, enter '99999'.
12	sex	Patient's gender	Numeric	1 = Male 2 = Female 9 = Missing	If gender is left blank, enter '9'.
13	phone	Patient's phone number	Character	N/A	If phone number is missing, leave blank.
14	dob	Patient's date of birth	Date	MM/DD/YYYY	If date of birth is missing, leave blank.
15	birth_mom_fname	Mother's first name	Character	N/A	If mother's first name is blank, leave blank
16	race	Patient's race/ethnicity	Numeric	1 = Asian 2 = Black/African American 3 = Hispanic/Latino 4 = White 5 = Other 6 = Native Hawaiian/Pacific Islander 7 = American Indian/Alaskan Native 8 = Multi-race 9 = Missing	If Hispanic is bubbled along with another race, select only '3'. If more than one bubble, other than Hispanic is filled out, select '8'. If the race is left blank, select '9'
17	medicare	Patient has medicare	Numeric	1 = Yes 2 = No	

Pos	Variable Name	Variable Label	Type	Coded Values	Data Entry Guidelines
18	medicaid	Patient has medicaid	Numeric	1 = Yes 2 = No	
19	private	Patient has private	Numeric	1 = Yes 2 = No	
20	none	Patient has no insurance	Numeric	1 = Yes 2 = No	
21	dk	Patient does not know insurance status	Numeric	1 = Yes 2 = No	
22	other	Patient has other insurance	Numeric	1 = Yes 2 = No	If patient has written in a type of insurance on the consent form, enter '1'
23	othersp	Specify other insurance	Character	N/A	Enter the type of insurance patient wrote on the consent form
24	insure_miss	Patient's insurance is missing	Numeric	1 = Yes 2 = No	If insurance status is left blank, choose '1'
25	risk	Patient is pregnant	Numeric	1 = Yes 2 = No 9 = Missing	
26	cair	Consent to enter into CAIR	Numeric	1 = Yes 9 = Missing	If unmarked enter '9'
27	vfc_eli	Person VFC status	Numeric	1 = Uninsured 2 = Medical/CHDP 3 = American Indian/Alaskan Native 4 = Not VFC eligible 9 = Missing	Enter as is.
28	vac_code	Type of vaccine	Numeric	1 = Inactivated 2 = Live 9 = Missing	If unmarked enter '9'
29	vac_dose	Dose 1 or 2	Numeric	1 = Dose 1 2 = Dose 2 9 = Missing	If unmarked enter '9'

Pos	Variable Name	Variable Label	Type	Coded Values	Data Entry Guidelines
30	manu	Manufacturer	Numeric	1 = Glaxo Smith Kline (GSK) 2 = Medimmune (MI) 3 = Novartis (NOV) 4 = Sanofi Pasteur (SP) 5 = BIOCSL (CSL) 9 = Missing	If unmarked enter '9'
31	lot_num	Lot Number	Numeric	1 = C4690BA (SP) 2 = CF2251 (MI) 3 = LZ4S2 (GSK) 4 = 10349211A (BIOCSL) 5 = C4432AB (SP) 6 = UI189AC (SP) 7 = U499OCA (SP) 8 = UI189AD (SP) 9 = CJ2003 (MI) 10 = 145004 (NOV) 11 = CH2061 (MI) 12 = UI189AB (SP) 13 = G44A3 (GSK) 14 = G34A4 (GSK) 15 = 3E532 (GSK) 16 = 2G3J4 (GSK) 17 = UJ189AD (SP) 18 = UI190AA (SP) 999 = Missing	If lot number is left blank, enter '999'
32	dose	Dosage	Numeric	1 = 0.25mL 2 = 0.50mL 3 = 0.20mL 9 = Missing	if dosage is left blank, enter '9'

Pos	Variable Name	Variable Label	Type	Coded Values	Data Entry Guidelines
33	bsite_code	Site of injection	Numeric	1 = Left deltoid (LD) 2 = Right deltoid (RD) 3 = Left thigh (LT) 4 = Right thigh (RT) 5 = Intranasal 9 = Missing	If bsite_code is left blank, enter '9'
34	vac_date	Date administered	Date	MM/DD/YYYY	
35	inj_by	Vaccinator	Numeric	999 = Missing	If inj_by is left blank, enter '999'
36	dateent	Date form entered into Access database	Date	MM/DD/YYYY	
37	entby	Initials of person completing data entry	Character	SCH= Stephanie Hunter SH = Shelly Hsu JH = Jeremy Huang SK = Sandra Kelly NES = Natalia Sejbuk NS = Nirvi Shah AS = Ashley Stegall GZ = Guili Zheng	
38	venue	Location of outreach	Character	Charter school Church Civic center Cold weather shelter Community center Health fair Homeless shelter Library Other Outreach School Senior center	
39	age	Calculated age of respondent at time of vaccination	Numeric	N/A	
40	discrepancy	Discrepancy of variables associated with the vaccine	Numeric	1 = Yes 2 = No	
41	mdiscrepancy	Discrepancy between vaccine lot number and manufacturer	Numeric	1 = Yes 2 = No	



2014 - 2015 Flu Vaccination Consent Form

pt_mname

Last Name **pt_lname** First Name **pt_fname** MI

Home Address (House Number And Street Name) Apt. Number

City **city** ZIP Code **zipcode** Gender: Male Female **sex**

Area Code Phone Number **phone** Date Of Birth **dob** (example 05/18/1980)

Mother's First Name **birth_mom_fname** Month Day Year

Race / Ethnicity Asian Black / African American Hispanic / Latino White Other
 Choose One **race** Native Hawaiian / Pacific Islander American Indian / Alaskan Native Multi - Race

For persons 18 years of age and older, what type of health insurance do you have? **insure_miss**
 Medicare **medicare** Medicaid **medicaid** Private (ex. Anthem Blue Cross, Kaiser Permanente) **Private** None **None** I Don't Know **dk**

1) Do you have a fever or are you sick today? **None** Yes No

2) Are you pregnant or do you think you may be pregnant? **risk** Yes No

3) Have you had a serious reaction to flu vaccine requiring medical help? Yes No

I CONSENT TO THE VACCINATION PROVIDED. Signature _____ If under 18 years of age, PRINT name of parent or legal guardian _____

STOP - DO NOT WRITE BELOW THIS LINE SCREENER INITIALS

4) REQUIRED: CAIR disclosure form reviewed with client? **cair** Yes

5) Do you have a severe allergy to eggs? **[If YES, See Egg Allergy Guidelines]** Yes No

6) Do you have an allergy to thimerosal? Yes No

7) Have you ever had Guillain-Barré Syndrome (GBS)? Yes No

8) Have you received any of these vaccines in the last 4 weeks? **[MMR, Varicella, LAIV, Shingles]** Yes No

9) Do you have any of the following medical conditions? **[If YES, Administer IIV ONLY]** Yes No
 Heart, Lung, Kidney, or Liver Disease; Asthma; Cancer; Metabolic disease (i.e. diabetes);
 Blood Disorders (i.e. leukemia, lymphoma, sickle cell disease); Immune System Disorder (i.e. HIV / AIDS, steroid therapy)

10) Is the person to be vaccinated between 2-49 years old? (Verify Age) * **[If NO, Administer IIV]** Yes No

If the vaccination is for a child, ask these questions: **[If YES to either, Administer IIV ONLY]**

11) If child is < 5 years, have they been diagnosed with wheezing in the last 12 months? Yes No N/A

12) Is child taking long term medicine therapy containing ASPIRIN? Yes No N/A

13) For persons under 19 years, **vfc_eli** Uninsured Medi-Cal / CHDP
 select VFC eligibility. (choose one) American Indian / Alaskan Native Not VFC eligible

Flu Vaccine VIS Date: 08/19/2014 **manu** manufacturer and Lot Number **dose** Dosage **site** Site **initials** Initials

INACTIVATED Flu Shot **vac_code** LIVE Nasal Spray **vac_dose** **lot_num** Lot Number **lot_num** GSK MI NOV SP 0.25 mL 0.50 mL 0.20 mL LD RD LT RT Intranasal **inj_by** Admin. by

Date Administered (ex. 10/30/2014) **vac_date** *** REMINDER** **bsite_code** **inj_by**
 LAIV Is Only For Healthy Clients 2 Thru 49 Years Of Age, Who Are NOT Pregnant

Language Interpreter Signature: _____ Nurse Instructor Signature: _____

ID

1

Supervisorial District

2014 - 2015 Flu Vaccination Consent Form

Health Center

Language

Outreach Site

SPA

Last Name

First Name

MI

City

Zipcode

Gender

Phone

Date of Birth

Mother's Name

Race

Medicare

Medicaid

Private

None

Don't know

Other

Specify

N/A

Missing

Pregnant

CAIR

VFC

Vaccine Type

Manufacturer

Dosage (mL)

Vaccine Dose

Lot Number

Injection Site

Admin Initials

Date Administered

Date Entered

Entered by

2014-2015 CHS Flu Campaign Data Entry Protocol

Please use this protocol and the codebook to guide you through entering Flu Vaccination Consent Forms into your Access Database.

If you have questions about data entry, you may contact Ashley, Nirvi, or Guili.

Community Health Services Contacts:

Angela Austin 241 N Figueroa St. Room 306	Phone: 213-250-8519 Email: aaustin@ph.lacounty.gov
Shelly Hsu 313 N Figueroa St. Room 117	Phone: 213-240-7785 Email: Shsu@ph.lacounty.gov
Nirvi Shah 313 N Figueroa St. Room 117	Phone: 213-240-8429 Email: nshah@ph.lacounty.gov
Ashley Stegall 313 N Figueroa St. Room 117	Phone: 213-989-7042 Email: astegall@ph.lacounty.gov
Guili Zheng 313 N Figueroa St. Room 117	Phone: 213-240-8088 Email: gzheng@ph.lacounty.gov

Office of Health Assessment Contact:

Lisa V. Smith 313 N Figueroa St. Room 127	Phone: 323-231-7640 Email: lismith@ph.lacounty.gov
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Receiving Your Data Entry Assignment

CHS will deliver forms to Nirvi Shah weekly. Once these batches are recorded, you will receive an email stating which of your batches are available. Once you receive the Data Entry Completion Log from Nirvi, you may pick up your batch from the locked cabinet in Room 127.

Receiving Your Batch

- 1) After obtaining the batch, record the date you received the forms on the Data Entry Completion Log.
- 2) Check that the outreach date on the Cover Sheet matches the Date Administered field on the forms.

Sorting and Counting the Forms

- 1) Sort the Flu Vaccination Consent Forms by the vaccinator's initials (group all the forms with the same vaccinator together).
- 2) Match the vaccinator's initials on the forms to the initials on the Cover Sheet. If the vaccinator's initials are on the form, but missing from the Cover Sheet, scan and email the consent form (bottom half only) and the cover sheet to Nirvi Shah. Do not enter the form until a response from Nirvi Shah is received. Nirvi Shah will forward to Angela or Nurse Manager. Please wait for response from Nirvi, and wait for the updated codebook to proceed with data entry.

- 3) If there are duplicate forms/carbon copies, do not enter the duplicate. Count the duplicate form as one of the forms received, and document the number of duplicate forms received in the "Problems Encountered" section of the completion log.
- 4) Count the number of Vaccination Consent Forms and record that number on the Data Entry Completion Log.

The Database

The Access databases will be stored on the shared drive **chs-epi (H Drive)**. A file folder with your name will house all databases assigned to you. You will receive a separate email with the password for the databases.

Begin Data Entry

The screenshot shows a data entry form with the following fields:

- ID**:
- Language**:
- Supervisory District**:
- Health Center**:
- Outreach Site**:
- SPA**:
- 2014 - 2015 Flu Vaccination Consent Form** (Title)
- Last Name**:
- First Name**:
- MI**:
- City**:
- Zipcode**:
- Gender**:
- Phone**:
- Date of Birth**:
- Mother's Name**:
- Race**:
- Medicare**:
- Medicaid**:
- Private**:
- None**:
- Don't know**:
- Other**:
- Specify**:
- Missing**:
- Pregnant**:
- CAIR**:
- VFC**:
- Vaccine Type**:
- Manufacturer**:
- Dosage (mL)**:
- Vaccine Dose**:
- Lot Number**:
- Injection Site**:
- Admin Initials**:
- Date Administered**:
- Date Entered**:
- Entered by**:

- Enter the information as best as you can read it on the Flu Vaccination Consent Form.
- Enter exactly what is documented on the form.
- Do not fill in missing information or write on the forms in any way.
- Refer to the codebook for all additional data entry instructions.
- If you are in the middle of a batch at the end of your shift:
 - In Room 117, lock the batch in your desk drawer.
 - In Room 127, return the forms to the cabinet or Nirvi Shah in Room 117.

What to do after a batch is entered

- 1) Complete the Data Entry Completion Log, including documenting any problems.
- 2) Email Ashley to notify her that data entry is complete.
- 3) Scan and send a copy of the Data Entry Completion Log to Nirvi and Ashley.
- 4) Return the forms to the cabinet, Jeremy, or Nirvi.

2014-2015 Flu Campaign Data Entry Completion Log

Outreach Site Name:

Outreach Site Number:

Outreach Date/Date Administered:

Number of People Vaccinated:

Data Entry Staff Name:

Date Forms Received: <div style="text-align: center;">_____ / _____ / _____</div>	Number of Forms Received: <div style="text-align: center;">_____</div>
Date Forms Returned: <div style="text-align: center;">_____ / _____ / _____</div>	Number of Forms Entered: <div style="text-align: center;">_____</div>

Name of Person Forms Returned to: _____

Database Name: _____

Problems Encountered: _____

Table A2. Influenza Vaccine Accountability (n=21,005) for 2014-2015 Influenza Outreaches by Health Center, Date Administered, Lot Number, and Doses Given by Patient's Age (Preliminary data).^{1,2}

Health Center	Date Administered	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Antelope Valley	10/23/2014	U499OCA (SP)	1	0	0	0	0	0	1
		145004 (NOV)	0	0	0	1	0	0	1
		CH2061 (MI)	2	14	28	34	1	0	79
	11/01/2014	UI189AB (SP)	0	3	11	32	24	11	81
		U499OCA (SP)	0	0	0	0	0	1	1
		CH2061 (MI)	0	5	24	36	0	0	65
	11/05/2014	UI189AB (SP)	0	1	6	11	32	9	59
		U499OCA (SP)	1	0	0	0	0	0	1
		145004 (NOV)	0	0	0	1	0	0	1
	11/09/2014	CH2061 (MI)	2	2	36	27	0	0	67
		UI189AB (SP)	0	0	14	25	26	7	72
		U499OCA (SP)	1	0	0	0	0	0	1
	11/14/2014	145004 (NOV)	0	0	0	1	0	0	1
		CH2061 (MI)	1	8	27	31	0	0	67
		UI189AB (SP)	0	0	9	18	42	9	78
	11/16/2014	CH2061 (MI)	0	1	4	30	0	0	35
		UI189AB (SP)	0	0	0	17	36	23	76
		U499OCA (SP)	2	0	0	1	0	0	3
	12/09/2014	CH2061 (MI)	0	8	32	23	0	0	63
		UI189AB (SP)	0	3	4	19	27	12	65
		U499OCA (SP)	1	0	0	0	0	0	1
	10/16/2014	145004 (NOV)	0	0	0	3	0	1	4
		CH2061 (MI)	0	1	0	4	0	0	5
UI189AB (SP)		0	0	2	13	5	2	22	
10/17/2014	UI190AA (SP)	0	0	0	0	1	1	2	
	CF2251 (MI)	0	0	0	7	0	0	7	
	UI190AA (SP)	0	0	0	19	12	3	34	
10/22/2014	CH2061 (MI)	0	1	2	0	0	0	3	
	UI189AB (SP)	0	0	3	3	50	56	112	
	Missing	0	1	0	0	0	0	1	
10/23/2014	CH2061 (MI)	0	0	0	23	0	0	23	
	UI189AB (SP)	1	0	9	91	83	32	216	
	145004 (NOV)	0	0	0	2	0	0	2	
10/27/2014	CH2061 (MI)	0	5	12	1	0	0	18	
	UI189AB (SP)	0	1	3	28	13	12	57	
	145004 (NOV)	0	0	1	0	0	0	1	
11/01/2014	CH2061 (MI)	0	1	3	4	0	0	8	
	UI189AB (SP)	0	0	2	17	25	46	90	
	U499OCA (SP)	0	0	0	0	0	0	0	

Table A2. Influenza Vaccine Accountability (n=21,005) for 2014-2015 Influenza Outreaches by Health Center, Date Administered, Lot Number, and Doses Given by Patient's Age (Preliminary data).^{1,2}

Health Center	Date Administered	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Central	11/02/2014	U499OCA (SP)	3	0	0	0	0	0	3
		UI189AD (SP)	0	0	0	1	1	0	2
		145004 (NOV)	0	1	0	6	3	0	10
		CH2061 (MI)	1	26	65	84	0	0	176
		UI189AB (SP)	0	8	52	212	212	55	539
	11/04/2014	145004 (NOV)	0	0	0	2	1	0	3
		CH2061 (MI)	0	4	10	1	0	0	15
		UI189AB (SP)	0	0	4	44	15	9	72
	11/09/2014	U499OCA (SP)	2	0	0	0	0	0	2
		145004 (NOV)	0	0	0	6	0	0	6
		CH2061 (MI)	2	20	53	74	1	0	150
		UI189AB (SP)	1	1	12	113	164	42	333
	11/13/2014	CH2061 (MI)	0	0	0	4	0	0	4
		UI189AB (SP)	0	0	0	14	23	8	45
	11/14/2014	UI189AB (SP)	0	0	0	4	1	2	7
	11/19/2014	CF2251 (MI)	0	3	6	10	0	0	19
		145004 (NOV)	0	0	0	1	0	1	2
		UI189AB (SP)	1	0	0	5	5	3	14
	11/26/2014	145004 (NOV)	0	1	0	1	0	0	2
		CH2061 (MI)	0	0	2	20	0	0	22
		UI189AB (SP)	0	0	0	26	39	7	72
	12/02/2014	CH2061 (MI)	0	2	0	14	0	0	16
		UI189AB (SP)	0	0	0	12	16	0	28
	12/20/2014	145004 (NOV)	0	0	0	5	6	0	11
		UI189AB (SP)	0	0	0	1	1	0	2
	12/21/2014	UI189AB (SP)	0	0	0	2	3	1	6
	Curtis Tucker	10/10/2014	UI189AD (SP)	0	0	0	5	27	19
CJ2003 (MI)			0	0	0	3	0	0	3
10/24/2014		UI189AD (SP)	0	0	1	19	87	98	205
		CJ2003 (MI)	0	1	1	11	0	0	13
		145004 (NOV)	0	0	0	1	0	0	1
10/25/2014	Missing	0	0	0	0	1	0	1	
	UI189AD (SP)	0	1	3	31	60	63	158	
10/27/2014	CJ2003 (MI)	0	0	0	1	0	0	1	
	UI189AD (SP)	0	0	1	7	34	75	117	
	CJ2003 (MI)	0	0	1	7	0	0	8	
	145004 (NOV)	0	0	0	1	0	0	1	

Table A2. Influenza Vaccine Accountability (n=21,005) for 2014-2015 Influenza Outreaches by Health Center, Date Administered, Lot Number, and Doses Given by Patient's Age (Preliminary data).^{1,2}

Health Center	Date Administered	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Curtis Tucker	10/29/2014	UI189AD (SP)	0	0	0	14	42	32	88
		CJ2003 (MI)	0	0	0	5	0	0	5
		145004 (NOV)	0	0	0	0	0	1	1
	11/03/2014	UI189AD (SP)	0	0	0	25	78	75	178
		CJ2003 (MI)	0	1	0	19	0	1	21
		145004 (NOV)	0	0	0	3	0	0	3
	11/05/2014	UI189AD (SP)	0	0	0	25	32	11	68
		CJ2003 (MI)	1	1	1	36	0	0	39
		145004 (NOV)	0	0	0	3	1	0	4
	11/06/2014	CJ2003 (MI)	0	0	3	16	1	0	20
		145004 (NOV)	0	0	0	1	1	0	2
		UJ189AD (SP)	0	0	0	27	49	22	98
	11/13/2014	U499OCA (SP)	1	0	0	0	0	0	1
		CJ2003 (MI)	0	7	26	20	0	0	53
		UJ189AD (SP)	0	1	27	41	68	6	143
	11/15/2014	CJ2003 (MI)	0	1	1	0	0	0	2
		UJ189AD (SP)	0	0	3	4	4	2	13
	11/21/2014	CJ2003 (MI)	0	0	1	0	0	0	1
		UJ189AD (SP)	0	0	0	8	29	46	83
	11/22/2014	U499OCA (SP)	3	0	0	0	0	0	3
UI189AD (SP)		0	1	8	28	24	4	65	
CJ2003 (MI)		0	18	32	34	0	0	84	
145004 (NOV)		0	4	26	57	11	1	99	
Glendale	10/24/2014	145004 (NOV)	0	0	0	2	0	0	2
		CH2061 (MI)	0	10	12	20	0	0	42
		UI189AB (SP)	0	1	1	12	30	12	56
11/05/2014	CH2061 (MI)	0	1	1	4	0	0	6	
	UI189AB (SP)	0	0	0	15	57	102	174	
11/15/2014	U499OCA (SP)	1	0	1	0	0	0	2	
	CH2061 (MI)	2	1	22	47	0	1	73	
	UI189AB (SP)	0	3	22	63	77	34	199	
Hollywood Wilshire	10/23/2014	CH2061 (MI)	0	0	0	7	0	0	7
		UI189AB (SP)	0	0	0	15	167	64	246
	10/26/2014	U499OCA (SP)	0	1	0	0	0	0	1
		145004 (NOV)	0	1	0	1	0	0	2
		CH2061 (MI)	1	2	18	22	0	0	43
		UI189AB (SP)	0	1	22	99	122	50	294

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Health Center	Date Administered	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Hollywood Wilshire	11/02/2014	UI189AD (SP)	0	0	0	0	1	3	4
		145004 (NOV)	0	1	0	0	3	1	5
		CH2061 (MI)	3	5	30	59	0	1	98
	11/22/2014	UI189AB (SP)	0	0	8	38	111	40	197
		CF2251 (MI)	0	5	8	52	0	0	65
		U499OCA (SP)	3	0	0	0	0	0	3
		UI189AD (SP)	0	0	0	2	7	2	11
		145004 (NOV)	0	0	0	1	0	0	1
		CH2061 (MI)	0	0	0	1	0	0	1
		UI189AB (SP)	0	0	0	9	33	10	52
02/03/2015	UI189AB (SP)	0	0	0	20	2	2	24	
Monrovia	10/30/2014	UI189AD (SP)	0	0	1	27	54	50	132
		CJ2003 (MI)	0	0	0	11	0	0	11
		145004 (NOV)	0	0	0	1	0	0	1
	11/01/2014	U499OCA (SP)	3	0	0	0	0	0	3
		UI189AD (SP)	0	4	65	119	157	40	385
		CJ2003 (MI)	0	14	22	7	0	0	43
		145004 (NOV)	0	0	0	2	0	0	2
	11/03/2014	Missing	0	0	0	0	0	1	1
		U499OCA (SP)	1	0	0	0	0	0	1
		UI189AD (SP)	0	0	1	60	76	50	187
CJ2003 (MI)		1	2	8	25	0	0	36	
145004 (NOV)		0	0	0	3	0	0	3	
11/06/2014	UI189AD (SP)	0	0	0	30	90	88	208	
	CJ2003 (MI)	2	3	7	14	0	0	26	
	145004 (NOV)	0	0	0	7	0	0	7	
11/08/2014	UI189AD (SP)	0	2	15	44	36	10	107	
	CJ2003 (MI)	0	5	11	7	0	0	23	
	145004 (NOV)	0	1	3	0	0	0	4	
11/13/2014	U499OCA (SP)	1	0	0	0	0	0	1	
	UI189AD (SP)	0	0	2	25	68	33	128	
	CJ2003 (MI)	1	6	1	7	0	0	15	
	145004 (NOV)	0	0	0	1	0	0	1	
11/15/2014	145004 (NOV)	0	0	0	1	0	0	1	
	CH2061 (MI)	1	1	12	1	0	0	15	
	3E532 (GSK)	0	0	6	36	21	5	68	
11/18/2014	CJ2003 (MI)	0	0	0	12	0	0	12	
	3E532 (GSK)	0	0	0	8	25	19	52	

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Monrovia	01/08/2015	145004 (NOV)	0	0	0	1	0	0	1
		3E532 (GSK)	0	0	0	6	1	1	8
North Hollywood	01/12/2015	3E532 (GSK)	0	0	0	0	2	0	2
	01/22/2015	3E532 (GSK)	0	0	0	0	4	3	7
	10/25/2014	U499OCA (SP)	9	0	0	0	0	0	9
		145004 (NOV)	0	0	0	2	0	0	2
		CH2061 (MI)	5	24	35	56	0	0	120
		UI189AB (SP)	0	5	16	57	42	13	133
	11/05/2014	145004 (NOV)	0	0	0	2	0	0	2
		CH2061 (MI)	0	0	0	12	0	0	12
		UI189AB (SP)	0	0	1	45	64	26	136
	11/07/2014	U499OCA (SP)	2	0	0	0	0	0	2
	CH2061 (MI)	1	2	0	9	0	0	12	
	UI189AB (SP)	0	0	4	29	31	6	70	
Pacoima	10/22/2014	U499OCA (SP)	1	0	0	0	0	0	1
		145004 (NOV)	0	1	1	2	1	1	6
		CH2061 (MI)	1	17	43	38	0	0	99
		UI189AB (SP)	0	2	20	25	59	12	118
	10/28/2014	U499OCA (SP)	3	0	0	0	0	0	3
		145004 (NOV)	0	0	0	1	1	2	4
		CH2061 (MI)	0	10	46	52	1	0	109
		UI189AB (SP)	0	3	15	45	37	13	113
	10/29/2014	U499OCA (SP)	2	0	0	0	0	0	2
		145004 (NOV)	0	0	4	4	2	0	10
		CH2061 (MI)	1	14	64	68	1	0	148
		UI189AB (SP)	0	5	23	38	31	12	109
	10/30/2014	U499OCA (SP)	4	0	0	0	0	0	4
		145004 (NOV)	0	0	1	5	2	0	8
		CH2061 (MI)	3	20	52	94	1	0	170
		UI189AB (SP)	0	8	30	122	97	28	285
		Missing	0	0	0	1	1	0	2
11/04/2014	U499OCA (SP)	2	0	0	0	0	0	2	
	145004 (NOV)	0	0	1	1	0	0	2	
	CH2061 (MI)	2	11	59	60	0	0	132	
	3E532 (GSK)	0	2	14	27	52	17	112	

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Health Center	Date Administered	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Pacoima	11/05/2014	U499OCA (SP)	1	0	0	0	0	0	1
		145004 (NOV)	0	0	0	2	2	0	4
		CH2061 (MI)	0	1	2	16	0	0	19
		UI189AB (SP)	0	0	1	14	27	5	47
	11/08/2014	U499OCA (SP)	1	0	0	0	0	0	1
		CJ2003 (MI)	0	4	6	23	0	0	33
		145004 (NOV)	0	0	0	0	1	3	4
		CH2061 (MI)	1	8	15	35	0	0	59
	11/15/2014	3E532 (GSK)	0	4	7	15	47	15	88
		CJ2003 (MI)	2	6	27	42	0	0	77
		145004 (NOV)	0	0	0	1	0	2	3
	12/17/2014	3E532 (GSK)	0	1	13	16	38	5	73
3E532 (GSK)		0	0	0	9	8	0	17	
12/18/2014	145004 (NOV)	0	0	0	8	5	1	14	
Martin Luther King, Jr. Center for Public Health	09/11/2014	CF2251 (MI)	0	0	12	58	1	0	71
		LZ4S2 (GSK)	0	0	1	7	19	6	33
		10349211A (BIOCSL)	0	0	2	37	50	7	96
	09/12/2014	CF2251 (MI)	0	0	8	125	0	1	134
		LZ4S2 (GSK)	0	0	1	2	1	1	5
		10349211A (BIOCSL)	0	0	0	87	57	14	158
	09/13/2014	CF2251 (MI)	0	2	11	117	1	0	131
		LZ4S2 (GSK)	0	0	0	15	37	7	59
		10349211A (BIOCSL)	0	0	0	7	18	3	28
	09/14/2014	CF2251 (MI)	0	1	7	75	0	0	83
	09/17/2014	CF2251 (MI)	0	0	37	16	0	0	53
	09/24/2014	CF2251 (MI)	0	1	4	3	0	0	8
		UI189AC (SP)	0	0	0	1	4	4	9
	10/16/2014	CF2251 (MI)	1	2	3	9	0	0	15
		UI189AC (SP)	0	1	2	64	29	4	100
	10/18/2014	CF2251 (MI)	0	4	21	21	0	0	46
		2G3J4 (GSK)	0	1	2	73	110	18	204
	10/25/2014	CF2251 (MI)	1	4	10	8	0	0	23
		U499OCA (SP)	2	0	0	0	0	0	2
		UI189AD (SP)	0	0	4	63	28	6	101
		CJ2003 (MI)	1	12	25	12	0	0	50
		145004 (NOV)	0	0	0	1	2	0	3
2G3J4 (GSK)		0	2	2	22	12	2	40	

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Martin Luther King, Jr. Center for Public Health	10/26/2014	U499OCA (SP)	1	0	0	0	0	0	1
		UI189AD (SP)	0	0	9	45	66	34	154
		CJ2003 (MI)	1	7	40	26	3	1	78
		145004 (NOV)	0	0	0	2	1	1	4
	10/27/2014	UI189AD (SP)	0	1	1	8	10	2	22
		10/28/2014	U499OCA (SP)	1	0	0	0	0	0
	UI189AD (SP)		0	0	0	9	17	21	47
	145004 (NOV)		0	0	0	1	0	0	1
	10/29/2014	UI189AD (SP)	0	0	2	4	13	18	37
		145004 (NOV)	0	0	0	0	1	0	1
	10/30/2014	UI189AD (SP)	0	0	0	5	12	63	80
	11/02/2014	CF2251 (MI)	0	2	15	3	0	0	20
		UI189AD (SP)	0	0	2	5	11	2	20
		2G3J4 (GSK)	0	0	4	13	36	22	75
	11/04/2014	UI189AD (SP)	0	0	0	14	13	2	29
		CJ2003 (MI)	0	0	0	9	0	0	9
	11/05/2014	CF2251 (MI)	0	0	1	23	0	1	25
		UI189AD (SP)	0	0	27	158	27	17	229
		CJ2003 (MI)	1	3	14	63	0	0	81
		145004 (NOV)	0	0	0	2	2	1	5
	11/06/2014	UI189AD (SP)	0	0	0	6	13	9	28
	11/09/2014	U499OCA (SP)	2	0	0	0	0	0	2
		UI189AD (SP)	0	2	30	114	128	57	331
		CJ2003 (MI)	0	13	47	30	0	1	91
		145004 (NOV)	0	0	5	12	10	1	28
		2G3J4 (GSK)	0	2	5	24	20	4	55
		11/16/2014	U499OCA (SP)	0	0	0	0	1	0
	UI189AD (SP)		0	4	29	126	99	31	289
	CJ2003 (MI)		2	13	55	21	0	0	91
	145004 (NOV)		0	1	11	31	18	5	66
	11/22/2014	CJ2003 (MI)	0	3	4	4	0	0	11
		145004 (NOV)	0	0	0	5	6	2	13
	11/25/2014	UI189AD (SP)	0	2	0	10	7	0	19
		145004 (NOV)	0	0	0	2	3	0	5
	12/16/2014	145004 (NOV)	0	0	0	3	4	1	8
	12/17/2014	UI189AD (SP)	0	0	0	9	6	0	15
		145004 (NOV)	0	0	0	9	6	0	15

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Martin Luther King, Jr. Center for Public Health	12/18/2014	UI189AD (SP)	0	0	0	6	5	0	11
	01/17/2015	145004 (NOV)	0	0	1	8	2	2	13
	01/24/2015	UI189AD (SP)	0	0	0	1	0	1	2
Pomona	01/31/2015	145004 (NOV)	0	2	10	47	21	3	83
	10/21/2014	UI189AD (SP)	0	0	0	17	45	94	156
		CJ2003 (MI)	0	2	5	0	0	0	7
	10/22/2014	UI189AD (SP)	0	0	1	18	69	105	193
		CJ2003 (MI)	0	0	1	24	0	0	25
		145004 (NOV)	0	0	0	2	1	0	3
	10/23/2014	U499OCA (SP)	1	0	0	0	0	0	1
		UI189AD (SP)	0	0	1	19	41	59	120
		CJ2003 (MI)	1	0	6	8	0	0	15
		145004 (NOV)	0	0	0	0	2	0	2
	10/26/2014	U499OCA (SP)	1	0	0	0	0	0	1
		UI189AD (SP)	0	1	45	70	68	19	203
		CJ2003 (MI)	1	6	25	10	0	0	42
		145004 (NOV)	0	0	0	3	0	0	3
	10/29/2014	UI189AD (SP)	0	0	0	19	97	86	202
		CJ2003 (MI)	0	0	0	11	0	0	11
		145004 (NOV)	0	0	0	0	1	1	2
	10/30/2014	UI189AD (SP)	0	0	0	18	42	98	158
		CJ2003 (MI)	0	0	0	11	0	0	11
		145004 (NOV)	0	0	3	0	0	0	3
	11/02/2014	U499OCA (SP)	1	0	0	0	0	0	1
		UI189AD (SP)	1	1	13	50	84	49	198
		CJ2003 (MI)	0	4	35	40	0	0	79
		145004 (NOV)	0	0	0	1	1	0	2
	11/04/2014	UI189AD (SP)	0	0	1	19	102	107	229
		CJ2003 (MI)	1	1	4	18	0	0	24
		145004 (NOV)	0	0	1	0	2	0	3
	11/05/2014	UI189AD (SP)	0	0	0	6	24	39	69
CJ2003 (MI)		0	0	0	3	0	1	4	
11/06/2014	U499OCA (SP)	1	0	0	0	0	0	1	
	UI189AD (SP)	0	1	1	30	72	105	209	
	CJ2003 (MI)	0	2	6	11	0	0	19	
	145004 (NOV)	0	0	1	2	1	0	4	

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Health Center	Date Administered	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total	
Pomona	11/09/2014	U499OCA (SP)	1	0	0	0	0	0	1	
		UI189AD (SP)	0	0	13	57	108	23	201	
		CJ2003 (MI)	1	2	24	28	0	0	55	
		145004 (NOV)	0	0	1	1	0	0	2	
	11/15/2014	U499OCA (SP)	4	0	0	0	0	0	4	
		UI189AD (SP)	0	3	13	47	48	24	135	
		CJ2003 (MI)	1	9	26	30	0	0	66	
		145004 (NOV)	0	2	1	3	0	0	6	
	11/16/2014	U499OCA (SP)	2	0	0	0	0	0	2	
		UI189AD (SP)	0	1	20	79	139	28	267	
		CJ2003 (MI)	1	9	42	55	0	0	107	
		145004 (NOV)	0	2	23	19	5	1	50	
	11/19/2014	U499OCA (SP)	5	0	0	0	0	0	5	
		UI189AD (SP)	0	0	0	11	4	1	16	
		CJ2003 (MI)	4	30	127	56	0	0	217	
		145004 (NOV)	0	0	0	2	3	0	5	
	12/02/2014	G44A3 (GSK)	0	3	36	24	31	7	101	
		UI189AD (SP)	0	0	0	10	13	2	25	
	12/04/2014	CJ2003 (MI)	0	1	0	0	0	0	1	
		145004 (NOV)	0	0	0	3	0	1	4	
	12/07/2014	CJ2003 (MI)	0	5	39	92	3	0	139	
		145004 (NOV)	0	0	1	16	66	22	105	
	12/11/2014	145004 (NOV)	0	0	0	21	12	0	33	
	12/30/2014	145004 (NOV)	0	0	0	15	7	1	23	
	01/06/2015	145004 (NOV)	0	0	0	7	2	0	9	
	Simms Mann Burke	10/19/2014	U499OCA (SP)	1	0	0	0	0	0	1
			CJ2003 (MI)	8	39	72	31	0	0	150
145004 (NOV)			3	10	81	291	295	149	829	
10/26/2014		CJ2003 (MI)	1	8	1	5	0	0	15	
		145004 (NOV)	0	6	3	28	31	23	91	
10/29/2014		CJ2003 (MI)	0	1	2	2	0	0	5	
		145004 (NOV)	0	0	0	6	58	84	148	
10/30/2014		CJ2003 (MI)	0	0	0	8	0	0	8	
		145004 (NOV)	0	0	0	31	28	4	63	
11/02/2014		145004 (NOV)	0	0	3	4	5	4	16	
11/05/2014		U499OCA (SP)	1	0	0	0	0	0	1	
		CJ2003 (MI)	0	1	0	10	0	0	11	
		145004 (NOV)	0	0	0	22	50	71	143	

Table A2. Influenza Vaccine Accountability (n=21,005) for 2014-2015 Influenza Outreaches by Health Center, Date Administered, Lot Number, and Doses Given by Patient's Age (Preliminary data).^{1,2}

Health Center	Date Administered	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Simms Mann Burke	11/12/2014	CJ2003 (MI)	0	0	0	3	0	0	3
		145004 (NOV)	0	0	5	18	26	36	85
Whittier	11/13/2014	CJ2003 (MI)	0	2	1	5	0	0	8
		145004 (NOV)	0	0	0	16	30	10	56
	12/16/2014	145004 (NOV)	0	0	0	19	8	0	27
	10/22/2014	U499OCA (SP)	1	0	0	0	0	0	1
		CJ2003 (MI)	2	3	3	12	0	0	20
	10/26/2014	UI189AB (SP)	0	0	2	41	89	61	193
		U499OCA (SP)	2	0	0	0	0	0	2
	10/28/2014	CJ2003 (MI)	1	7	33	28	0	0	69
		145004 (NOV)	0	0	0	1	0	0	1
		UI189AB (SP)	0	1	20	86	170	79	356
		Missing	0	0	0	1	0	0	1
	11/01/2014	UI189AD (SP)	0	0	0	18	69	76	163
		CJ2003 (MI)	0	4	10	15	0	1	30
		UI189AB (SP)	0	0	3	11	32	44	90
	11/04/2014	U499OCA (SP)	2	0	0	0	0	0	2
		CJ2003 (MI)	0	6	9	14	0	0	29
		145004 (NOV)	0	1	16	36	46	6	105
	11/05/2014	CJ2003 (MI)	0	2	6	7	0	0	15
		145004 (NOV)	0	0	7	35	111	90	243
		UI189AB (SP)	0	0	0	0	2	0	2
		U499OCA (SP)	2	0	0	0	0	0	2
	11/08/2014	CJ2003 (MI)	1	2	9	13	0	0	25
		145004 (NOV)	0	1	0	0	1	0	2
		3E532 (GSK)	0	0	1	51	37	11	100
		U499OCA (SP)	1	0	0	0	0	0	1
		UI189AD (SP)	0	0	1	9	6	2	18
		CJ2003 (MI)	0	12	20	16	0	0	48
	11/09/2014	145004 (NOV)	0	0	1	1	0	0	2
CH2061 (MI)		0	2	0	1	0	0	3	
3E532 (GSK)		0	2	14	44	58	14	132	
U499OCA (SP)		0	1	0	0	0	0	1	
CJ2003 (MI)		0	4	16	10	0	0	30	
145004 (NOV)		0	0	0	2	1	0	3	
3E532 (GSK)		0	4	23	48	58	25	158	

Table A2. Influenza Vaccine Accountability (n=21,005) for 2014-2015 Influenza Outreaches by Health Center, Date Administered, Lot Number, and Doses Given by Patient's Age (Preliminary data).^{1,2}

Health Center	Date Administered	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Whittier	11/12/2014	CJ2003 (MI)	0	4	4	5	0	0	13
		145004 (NOV)	0	0	0	2	0	0	2
		UI189AB (SP)	0	0	0	5	3	7	15
	11/13/2014	U499OCA (SP)	2	0	0	0	0	0	2
		CJ2003 (MI)	0	0	0	7	0	0	7
		145004 (NOV)	0	0	0	1	0	0	1
		CH2061 (MI)	1	1	6	15	0	0	23
		UI189AB (SP)	0	0	0	14	27	3	44
		3E532 (GSK)	0	0	1	13	9	2	25
	11/15/2014	3E532 (GSK)	0	4	16	41	21	0	82
	12/10/2014	145004 (NOV)	0	0	0	1	0	0	1
		3E532 (GSK)	0	0	0	8	3	0	11
	Total			157	673	2,738	7,334	6,409	3,642
Total (%)			0.75	3	13	35	31	17	100

¹Completed Data Entry as of 3/3/2015 (n=21,005). The total entered should be 21,005.

²Excludes 49 records with missing age and 3 records with less than six months of age.

Table A3. Influenza Vaccine Accountability (n=21,005) for 2014-2015 Influenza Outreaches by Health Center, Lot Number, and Doses Given by Patient's Age (Preliminary data).^{1,2}

Health Center	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Antelope Valley	U499OCA (SP)	6	0	0	1	0	1	8
	145004 (NOV)	0	0	0	6	0	1	7
	CH2061 (MI)	5	39	151	185	1	0	381
	UI189AB (SP)	0	7	46	135	192	73	453
Central	CF2251 (MI)	0	3	6	17	0	0	26
	U499OCA (SP)	5	0	0	0	0	0	5
	UI189AD (SP)	0	0	0	1	1	0	2
	145004 (NOV)	0	2	1	23	10	1	37
	CH2061 (MI)	3	59	147	225	1	0	435
	UI189AB (SP)	3	10	85	572	650	273	1,593
	UI190AA (SP)	0	0	0	19	13	4	36
	Missing	0	1	0	0	0	0	1
Curtis Tucker	U499OCA (SP)	4	0	0	0	0	0	4
	UI189AD (SP)	0	2	13	154	384	377	930
	CJ2003 (MI)	1	29	66	152	1	1	250
	145004 (NOV)	0	4	26	66	13	2	111
	UI189AD (SP)	0	1	30	80	150	76	337
	Missing	0	0	0	0	1	0	1
Glendale	U499OCA (SP)	1	0	1	0	0	0	2
	145004 (NOV)	0	0	0	2	0	0	2
	CH2061 (MI)	2	12	35	71	0	1	121
	UI189AB (SP)	0	4	23	90	164	148	429
Hollywood Wilshire	CF2251 (MI)	0	5	8	52	0	0	65
	U499OCA (SP)	3	1	0	0	0	0	4
	UI189AD (SP)	0	0	0	2	8	5	15
	145004 (NOV)	0	2	0	2	3	1	8
	CH2061 (MI)	4	7	48	89	0	1	149
	UI189AB (SP)	0	1	30	181	435	166	813
	U499OCA (SP)	5	0	0	0	0	0	5
Monrovia	UI189AD (SP)	0	6	84	305	481	271	1,147
	CJ2003 (MI)	4	30	49	83	0	0	166
	145004 (NOV)	0	1	3	16	0	0	20
	CH2061 (MI)	1	1	12	1	0	0	15
	3E532 (GSK)	0	0	6	50	53	28	137
	Missing	0	0	0	0	0	1	1
	U499OCA (SP)	11	0	0	0	0	0	11
	145004 (NOV)	0	0	0	4	0	0	4
North Hollywood	CH2061 (MI)	6	26	35	77	0	0	144
	UI189AB (SP)	0	5	21	131	137	45	339

Table A3. Influenza Vaccine Accountability (n=21,005) for 2014-2015 Influenza Outreaches by Health Center, Lot Number, and Doses Given by Patient's Age (Preliminary data).^{1,2}

Health Center	Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
Pacoima	U499OCA (SP)	14	0	0	0	0	0	14
	CJ2003 (MI)	2	10	33	65	0	0	110
	145004 (NOV)	0	1	7	24	14	9	55
	CH2061 (MI)	8	81	281	363	3	0	736
	UI189AB (SP)	0	18	89	244	251	70	672
	3E532 (GSK)	0	7	34	67	145	37	290
	Missing	0	0	0	1	1	0	2
Martin Luther King, Jr. Center for Public Health	CF2251 (MI)	2	16	129	458	2	2	609
	LZ4S2 (GSK)	0	0	2	24	57	14	97
	10349211A (BIOCSL)	0	0	2	131	125	24	282
	UI189AC (SP)	0	1	2	65	33	8	109
	U499OCA (SP)	6	0	0	0	1	0	7
	UI189AD (SP)	0	9	104	583	455	263	1,414
	CJ2003 (MI)	5	51	185	165	3	2	411
	145004 (NOV)	0	3	27	123	76	16	245
	2G3J4 (GSK)	0	5	13	132	178	46	374
	U499OCA (SP)	16	0	0	0	0	0	16
	UI189AD (SP)	1	7	108	470	956	839	2,381
Pomona	CJ2003 (MI)	10	71	340	397	3	1	822
	145004 (NOV)	0	4	31	95	103	26	259
	G44A3 (GSK)	0	3	36	24	31	7	101
	U499OCA (SP)	2	0	0	0	0	0	2
Simms Mann Burke	CJ2003 (MI)	9	51	76	64	0	0	200
	145004 (NOV)	3	16	92	435	531	381	1,458
	U499OCA (SP)	10	1	0	0	0	0	11
Whittier	UI189AD (SP)	0	0	1	27	75	78	181
	CJ2003 (MI)	4	44	110	127	0	1	286
	145004 (NOV)	0	2	24	79	159	96	360
	CH2061 (MI)	1	3	6	16	0	0	26
	UI189AB (SP)	0	1	25	157	323	194	700
	3E532 (GSK)	0	10	55	205	186	52	508
	Missing	0	0	0	1	0	0	1
	Total		157	673	2,738	7,334	6,409	3,642
Total (%)		0.75	3	13	35	31	17	100

¹Completed Data Entry as of 3/3/2015 (n=21,005). The total entered should be 21,005.

²Excludes 49 records with missing age and 3 records with less than six months of age.

Table A4. Influenza Vaccine Accountability (n=21,005) for 2014-2015 Influenza Outreaches by Lot Number and Doses Given by Patient's Age (Preliminary data).^{1,2}

Lot Number	Doses Given to 6 months to 2 Years	Doses Given to 3 Years to 6 Years	Doses Given to 7 Years to 18 Years	Doses Given to 19 Years to 49 Years	Doses Given to 50 Years to 64 Years	Doses Given to 65 Years and Older	Total
CF2251 (MI)	2	24	143	527	2	2	700
LZ4S2 (GSK)	0	0	2	24	57	14	97
10349211A (BIOCSL)	0	0	2	131	125	24	282
UI189AC (SP)	0	1	2	65	33	8	109
U499OCA (SP)	83	2	1	1	1	1	89
UI189AD (SP)	1	24	310	1542	2360	1833	6,070
CJ2003 (MI)	35	286	859	1053	7	5	2,245
145004 (NOV)	3	35	211	875	909	533	2,566
CH2061 (MI)	30	228	715	1027	5	2	2,007
UI189AB (SP)	3	46	319	1510	2152	969	4,999
G44A3 (GSK)	0	3	36	24	31	7	101
3E532 (GSK)	0	17	95	322	384	117	935
2G3J4 (GSK)	0	5	13	132	178	46	374
UJ189AD (SP)	0	1	30	80	150	76	337
UI190AA (SP)	0	0	0	19	13	4	36
Missing	0	1	0	2	2	1	6
Total	157	673	2,738	7,334	6,409	3,642	20,953
Total (%)	0.75	3	13	35	31	17	100

¹Completed Data Entry as of 3/3/2015 (n=21,005). The total entered should be 21,005.

²Excludes 49 records with missing age and 3 records with less than six months of age.

