

## Coronavirus Disease 2019 (COVID-19):

# Department of Human Services (DHS) COVID-19 Vaccine Administration Tracker Now Available for Immediate Use

## ODP Announcement 21-022

### AUDIENCE:

- Licensed Community Homes for Individuals with an Intellectual Disability or Autism
- Private Intermediate Care Facilities for Individuals with an Intellectual Disability (ICF/IDs)

### PURPOSE:

To announce the release of the Department of Human Services Vaccine Administration Tracker and provide instructions for its use.

### DISCUSSION:

The Department of Human Services is tracking when vaccines have been administered to individuals and direct support staff in licensed Community Homes and Private ICFs/ID. This information will be tracked using a web-based Vaccine Administration Tracker.

**It is very important that providers use the Vaccine Administration Tracker.** This information is essential to implementing the Commonwealth's vaccine planning and administration plan and to help ensure that vaccines are being administered as soon as can be accomplished. Completing this form is a major component to stopping the spread of COVID-19 in the Commonwealth.

### SUBMITTING INFORMATION:

Community Home and Private ICF/ID providers will submit vaccination information by service location. Information will be submitted when the vaccine administration process is completed at the service location. In general, the vaccine administration process is "completed" when the people served in the location and the direct support staff who work in the location have been vaccinated or have chosen not to be vaccinated.

This is a one-time data collection initiative. Providers will only enter this information when the service location has completed the vaccination process. Providers are not required to update the information or submit a new form if information changes.

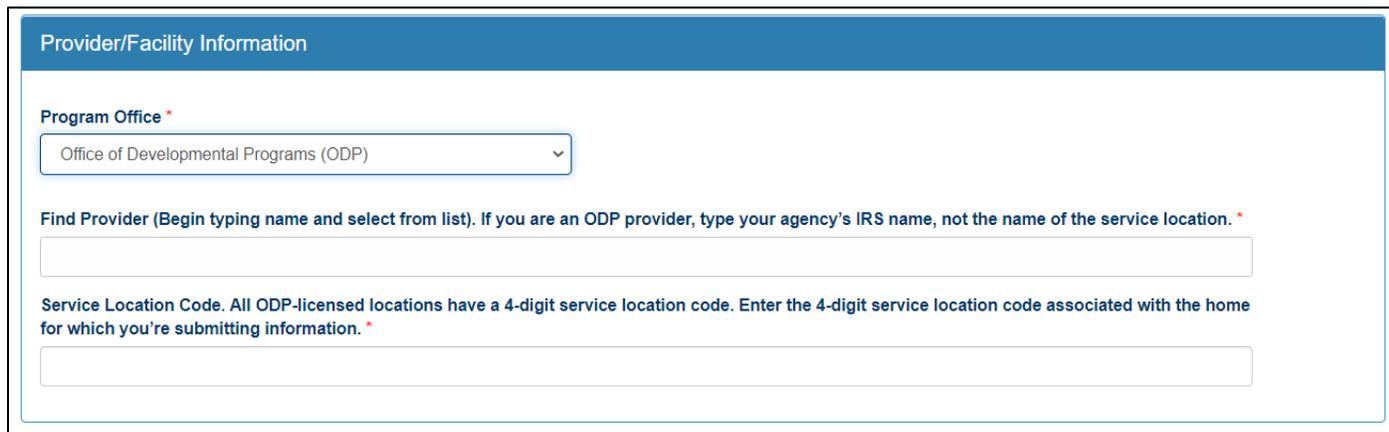
### INSTRUCTIONS FOR COMPLETING THE FORM:

**Step 1:** When you are ready to complete the form for a service location, go to <https://www.humanservices.state.pa.us/CovidVaccineTracker>.

**Step 2:** In the “Program Office” box, select “Office of Developmental Programs (ODP).”



The screenshot shows the top portion of the 'Department of Human Services Vaccine Tracking Form'. It features a blue header with the title. Below the header is a section titled 'Provider/Facility Information' with a blue background. Underneath, there is a dropdown menu labeled 'Program Office \*' with the text 'Select Program Office' and a downward arrow.



This screenshot shows the lower portion of the form. It includes the 'Program Office \*' dropdown menu with 'Office of Developmental Programs (ODP)' selected. Below this is a text input field labeled 'Find Provider (Begin typing name and select from list). If you are an ODP provider, type your agency’s IRS name, not the name of the service location. \*'. Underneath that is another text input field labeled 'Service Location Code. All ODP-licensed locations have a 4-digit service location code. Enter the 4-digit service location code associated with the home for which you’re submitting information. \*'.

**Step 3:** In the “Find Provider” box, begin typing your agency’s IRS name and choose the appropriate selection. Note that the IRS name is the name associated with the agency’s FEIN number, not the name of the service location. If your provider name does not appear on the list, please contact ODP at [RA-PW6100REGADMIN@pa.gov](mailto:RA-PW6100REGADMIN@pa.gov) for assistance.

**Step 4:** In the Service Location Code box, enter the 4-digit service location code associated with the service location information you are entering. If you receive an error message indicating that the location you entered is invalid, please check to make sure that you selected the correct agency name and that you entered the correct service location code. If you still receive an error message, please contact ODP at [RA-PW6100REGADMIN@pa.gov](mailto:RA-PW6100REGADMIN@pa.gov) for assistance.

You will now see a screen that looks like this:

**Statistic Information**

When entering the information below:

- Questions 2, 3, 4, and 5 should equal the number entered in Question 1 when added together.
- Questions 7, 8, and 9 should equal the number entered in Question 6 when added together.

If you have any questions about how to complete this form, or if you receive an error message when completing this form, please reference the instruction accompanying the survey weblink or contact your regional licensing office.

<p><b>Question 1:</b> Total number of staff working at this location when form submitted. If staff work at multiple locations, you may "assign" them to a single location for purposes of completing this form. *</p> <input type="text"/>	<p><b>Question 6:</b> Total number of residents/patients at this location when form is submitted. *</p> <input type="text"/>
<p><b>Question 2:</b> Total number of staff who received only 1 dose of a COVID-19 vaccine. *</p> <input type="text"/>	<p><b>Question 7:</b> Number of residents who received 1 dose of a COVID-19 vaccine. *</p> <input type="text"/>
<p><b>Question 3:</b> Total number of staff who received 2 doses of a COVID-19 vaccine. *</p> <input type="text"/>	<p><b>Question 8:</b> Number of residents who received 2 doses of a COVID-19 vaccine. *</p> <input type="text"/>
<p><b>Question 4:</b> Total number of staff who did not disclose if they received any doses of the vaccine. *</p> <input type="text"/>	<p><b>Question 9:</b> Number of residents who chose not to be vaccinated. *</p> <input type="text"/>
<p><b>Question 5:</b> Number of staff who chose not to be vaccinated. *</p> <input type="text"/>	

### Captcha

Please Complete the Captcha \*

I'm not a robot  [Privacy](#) [Terms](#)

**Step 5:** Answer each question.

- Question 1 - Enter the total number of direct support staff working at the location when the form is submitted. If staff work at multiple locations, you may “assign” them to a single location for purposes of completing this form.
- For Question 2 - Enter the total number of direct support staff who received only 1 dose of a COVID-19 vaccine. Reasons why staff may have only received 1 dose of the vaccine generally include:
  - The vaccine administered did not require a second dose.
  - The staff person elected not to receive a second dose.
  - The staff person stopped working at the service location before the second dose was administered.
- Question 3 - Enter the total number of direct support staff who received 2 doses of a COVID-19 vaccine.
- Question 4 - Enter the total number of direct support staff who did not disclose whether they received any doses of the vaccine.
- Question 5 - Enter the total number of direct support staff who chose not to be vaccinated.
- Question 6 - Enter the total number of individuals who reside at the location when the form is submitted.
- Question 7 - Enter the total number of individuals who received only 1 dose of a COVID-19 vaccine. Reasons why individuals may have only received 1 dose of the vaccine generally include:
  - The vaccine administered did not require a second dose.
  - The individual elected not to receive a second dose.
  - The individual moved out of the location before the second dose was administered.
- Question 8 - Enter the total number of individuals who received 2 doses of a COVID-19 vaccine.
- Question 9 - Enter the total number of individuals who chose not to be vaccinated.

**Step 6:** Click the “I’m not a robot” checkbox.

**Step 7:** Click “Submit Stats.”

- If you receive an error message indicating that data has already been submitted for the service location you entered, please check to make sure that you selected the correct agency name and that you entered the correct service location code. If you still receive an error message, please contact ODP at [RA-PW6100REGADMIN@pa.gov](mailto:RA-PW6100REGADMIN@pa.gov) for assistance.

## CONTACT INFORMATION

Providers are encouraged to contact ODP at [RA-PW6100REGADMIN@pa.gov](mailto:RA-PW6100REGADMIN@pa.gov) with questions or to request guidance with any part of this process.