

HEALTH MANAGEMENT ASSOCIATES

Preparing for a COVID-19 Vaccine- Challenges & Important Considerations

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W W W . H E A L T H M A N A G E M E N T . C O M

OUR SPEAKERS



Lori Weiselberg, MPH, Principal (Chicago)

- **Lori is a career public health professional with 30+ years experience supporting public health initiatives and health system development. A native New Yorker, before moving to Chicago, she worked for the NYC Dept of Health and Mental Hygiene on the NYC Childhood Asthma Initiative.**



Margaret Kirkegaard, MD, MPH, Principal (Chicago)

- **Margaret is Board Certified in Family Medicine with expertise in integration of public health and healthcare delivery systems and population-based health care delivery for vulnerable and underserved groups. Since March, She has been assisting local health departments with their COVID response.**

■ WEBINAR OVERVIEW

PURPOSE

To gain a comprehensive understanding of what is needed to prepare for managing a COVID-19 vaccination effort from acquisition to effective and equitable administration

Learning Objectives

- + Describe the context and challenges for mass vaccination for COVID-19
- + Understand how to ensure an equity lens in determining priority populations for distribution
- + Identify the roles of various stakeholders in participating in vaccine delivery
- + Learn practical insights for planning and preparing for a mass vaccination event on a local level

COVID-19 VACCINATION IS THE MOST SIGNIFICANT PREVENTIVE HEALTH INTERVENTION OF OUR LIFETIME



“Immunizing the U.S. population against COVID-19 will likely require the single largest vaccination campaign ever undertaken and governors will play a key role in bringing together leaders from their state public health, immunization, and emergency management systems to design and execute the operation.

As with many COVID-19 activities, a ‘whole of government’ response, with broad participation by health and human services, economic development, education, and public safety agencies, as well as private sector partners and the public, will be critical to its success.”



Letter from the National Governor’s Association

Question #1

What type of organization do you represent?

- ☐ Community-Based Organization
- ☐ Healthcare Provider
- ☐ Managed Care Organization
- ☐ Advocacy Organization/Association
- ☐ Other

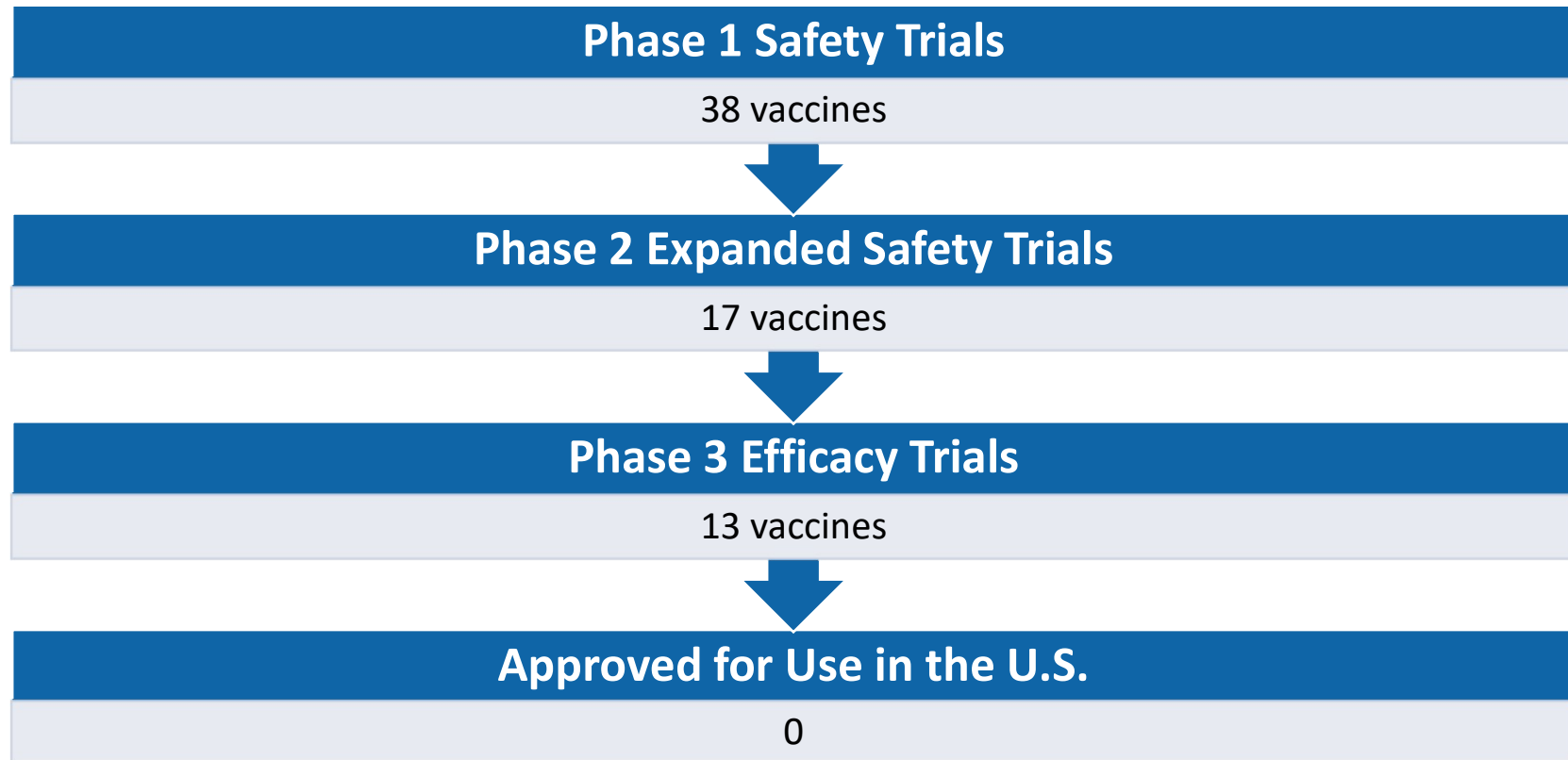
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The background of the slide is a solid blue color. Overlaid on this is a faint, semi-transparent image of two hands, one from the left and one from the right, each holding a puzzle piece. The puzzle pieces are interlocking, and the hands are positioned as if they are about to place the pieces together. The overall tone is professional and collaborative.

Distribution & Administration

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THE RACE TO DEVELOP AN EFFECTIVE VACCINE



Some Reasons for Swift Development

- ✓ Global race
- ✓ Financial investment in research and development
- ✓ While FDA processes are the same as other vaccines; some steps were done in parallel as opposed to sequential, e.g., manufacturing

■ LIKELY TO BE FIRST OUT OF THE GATE

	Pfizer	Moderna
Technology used	mRNA	mRNA
Efficacy	Approx. 95% efficacy in Phase 3 trials to date	Approx. 95% efficacy in Phase 3 trials to date
EUA	Pfizer requested EUA on Nov 20.	Moderna plans to apply for EUA this month
Challenges	<ul style="list-style-type: none">• Store at -70 degrees C• 2 doses, 21 days apart	<ul style="list-style-type: none">• Store at -20 degrees C• 2 doses, 28 days apart

VACCINE DISTRIBUTION

COVID-19 vaccine will be procured by the federal government and distributed to States and directly to providers through state and local public health departments using an established federal distribution system.



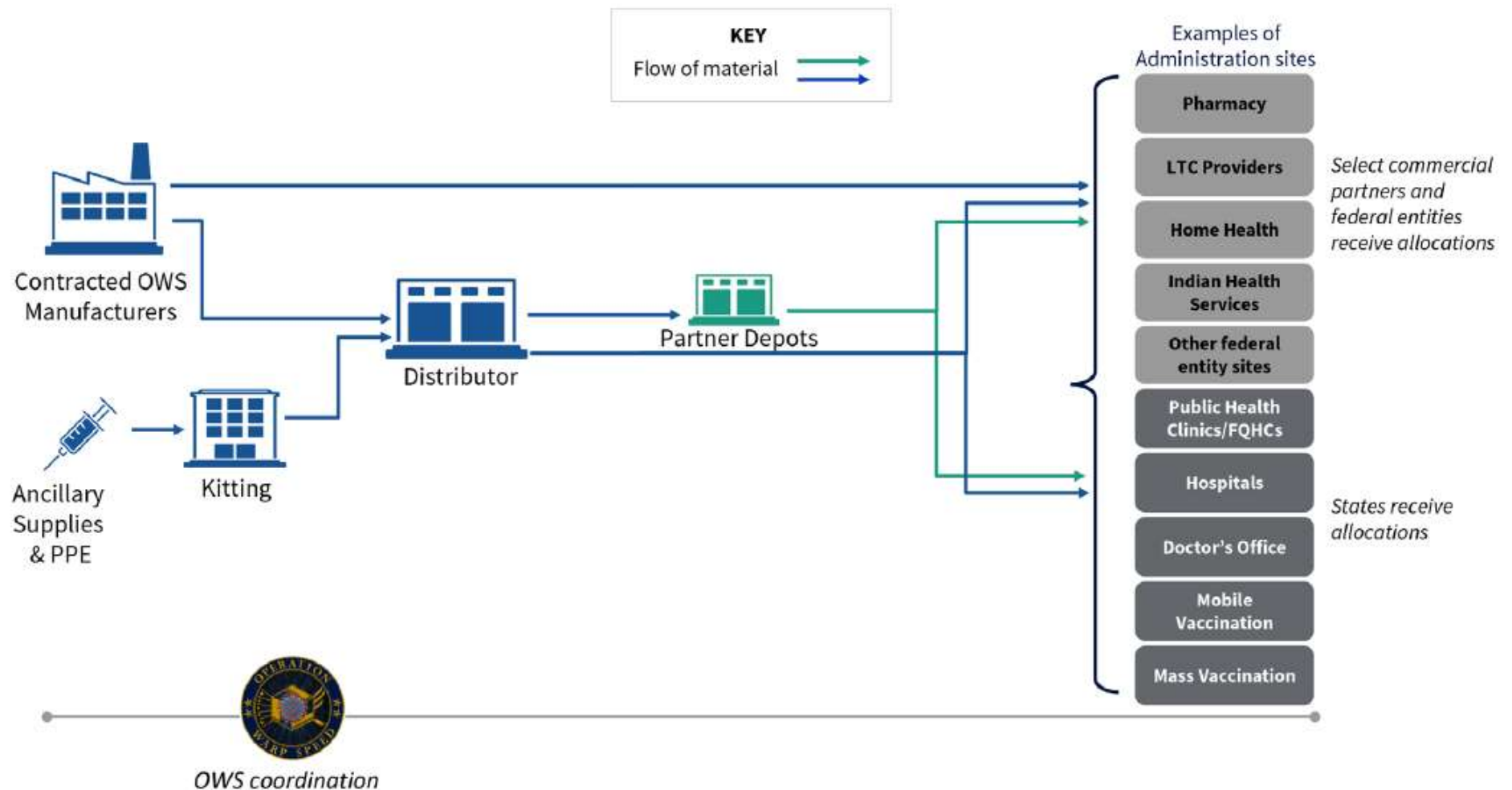
Each state and local health department's vaccine will be allocated by the federal government on a per capita basis. During ramp up phases of limited vaccine, rationale and designation of doses by priority & risk groups may be required.



Public and private providers requesting vaccine will likely be required to use the ordering and delivery system established by the federal government, overseen by the states, and administered by local public health departments.



OPERATION WARP SPEED: OVERVIEW OF DISTRIBUTION AND ADMINISTRATION





Key Factors in Planning



Partnerships

- ✓ City Partnerships
- ✓ Medical Reserve Corp Participation
- ✓ Health Plans and Healthcare provider groups
- ✓ School Partnerships



Communication

- ✓ Media Communication
- ✓ Community Education
- ✓ Health Alert Network



Analytical

- ✓ Flu Modeling
- ✓ Population Surveys
- ✓ Vaccine Data Collection & Reporting



Training

- ✓ Just In Time Training (JIT)
- ✓ Vaccine Products
- ✓ Vaccine Storage & Handling
- ✓ Forms & Data Collection



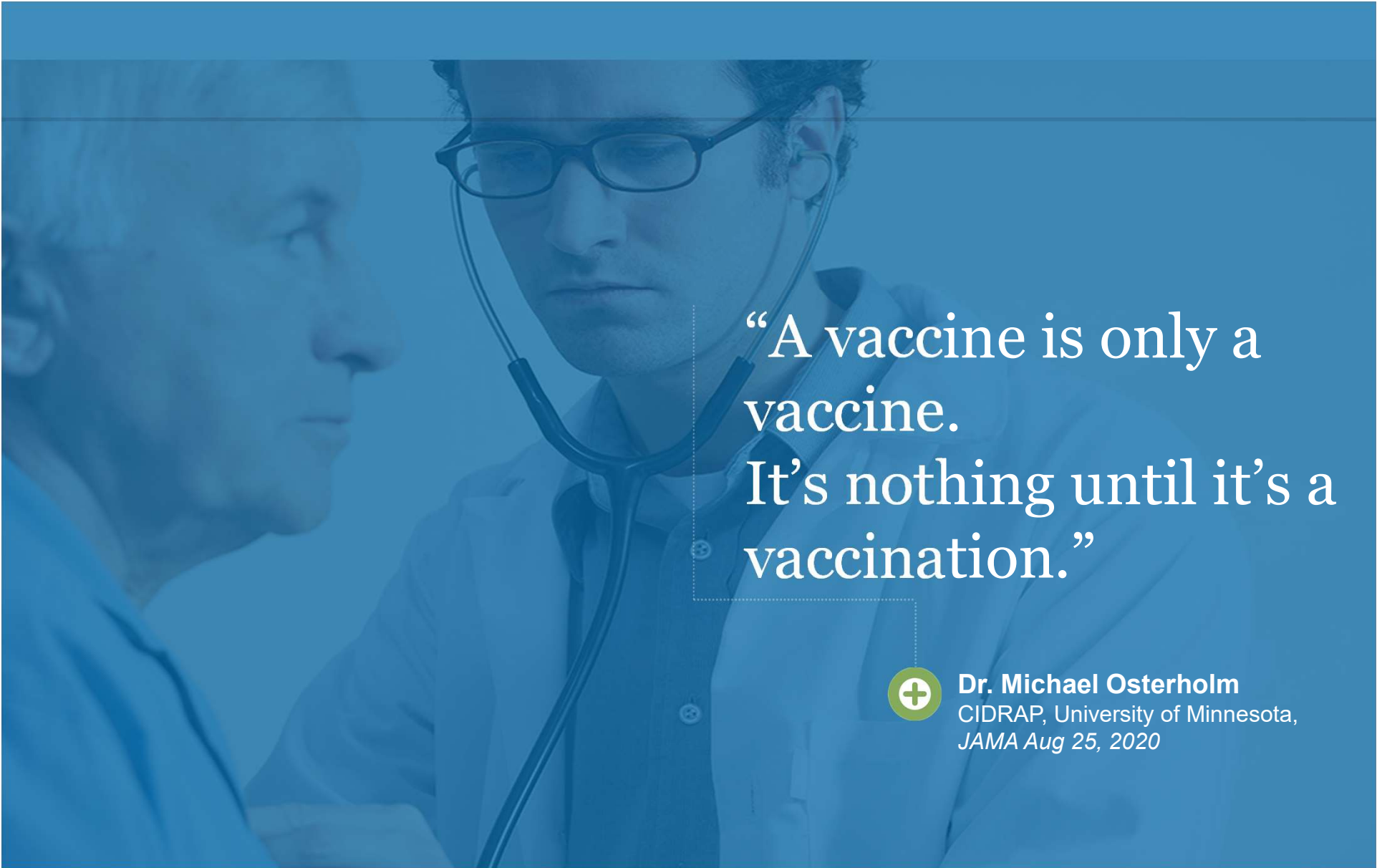
Department Operation and Deployment

- ✓ Incident Command Structure
- ✓ Engaging Safety Partners
- ✓ Potential Need for Contracted Staff

DISTRIBUTION CHALLENGES



- ! How do we reach large and geographically diverse populations in any given geographical area?
- ! How do we equitably distribute vaccine to providers, particularly those serving vulnerable populations?
- ! How do we quickly reach the groups known from extant information on morbidity and mortality of COVID-19 to date?

A photograph of a doctor with glasses and a stethoscope around his neck, looking down at an elderly patient. The image is overlaid with a blue semi-transparent filter.

“A vaccine is only a
vaccine.
It’s nothing until it’s a
vaccination.”



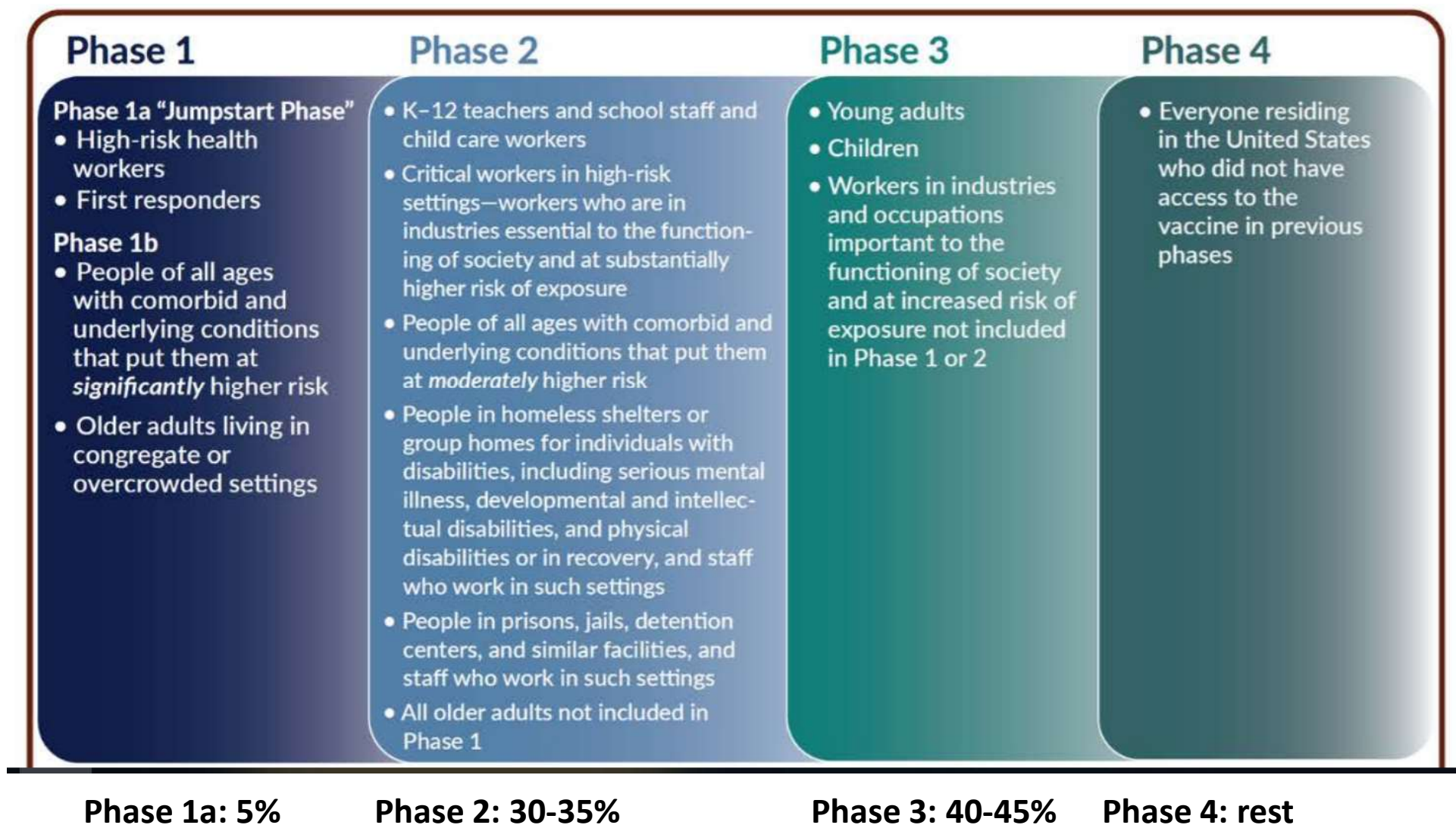
Dr. Michael Osterholm
CIDRAP, University of Minnesota,
JAMA Aug 25, 2020

■ FRAMEWORK FOR EQUITABLE ALLOCATION OF COVID-19 VACCINE (2020)



An ad hoc committee of the National Academies of Sciences, Engineering, and Medicine will develop an overarching framework for vaccine allocation to assist policy makers in the domestic and global health communities in planning for equitable allocation of vaccines against severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).


NATIONAL ACADEMY OF MEDICINE DISTRIBUTION FRAMEWORK



Question #2

What do you think will be the greatest challenge for mass vaccination?

- ☐ Vaccine hesitancy
- ☐ Inability to reach high-risk populations
- ☐ Immunization supply chain and distribution logistics
- ☐ Provider engagement in vaccine administration
- ☐ Tracking, reporting of vaccinations and coordination of second dose (if needed)



Vaccine Hesitancy: Challenges Moving from Vaccines to Vaccination

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SIGNIFICANT HEALTH DISPARITIES IN COVID-19 MORBIDITY AND MORTALITY

Figure 5

COVID-19 Hospitalization and Death Rates among Active Epic Patients by Race/Ethnicity, as of July 2020

Share of active Epic patients who were hospitalized and share who died, per 10,000:

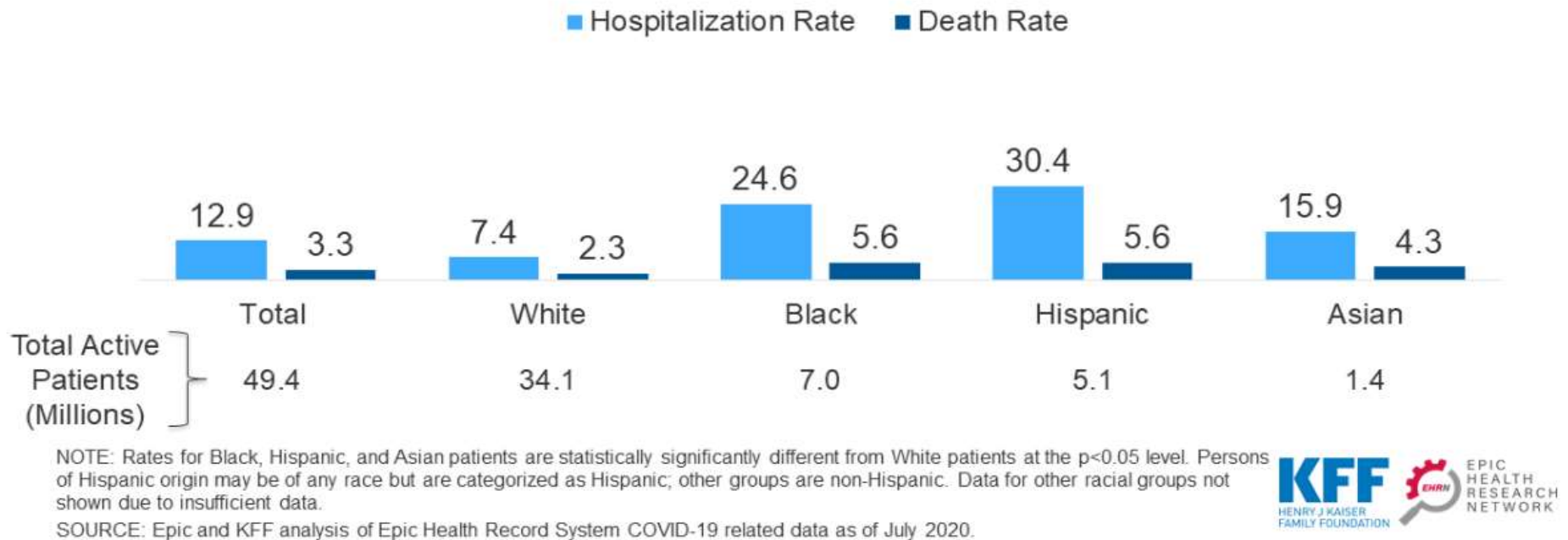
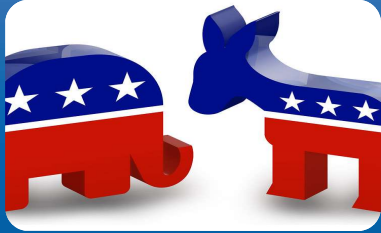


Figure 5: COVID-19 Hospitalization and Death Rates among Active Epic Patients by Race/Ethnicity, as of July 2020

<https://www.kff.org/report-section/covid-19-racial-disparities-in-testing-infection-hospitalization-and-death-analysis-of-epic-patient-data-issue-brief/>

COVID-19 ATTITUDES



Political polarization:

- 85% of Democrats say that COVID-19 is a major threat
- 46% of Republicans say that COVID-19 is a major threat
- 62% of adults in the US worry that "political pressure from the Trump administration will lead the FDA to rush to approve a coronavirus vaccine without making sure that it is safe and effective."



"Plandemic": *"Truth that coronavirus was planned by powerful people."*

- **Definitely** true: 8%
- **Probably** true: 28%
- **Probably NOT** true: 28%
- **Definitely NOT** true: 23%
- Not sure: 13%



Difficult to determine truth: *"When they get news and information about the coronavirus outbreak, they generally find it ..."*

- **Difficult** to determine what is true and what is not: 53%
- **Easy** to determine what is true and what is not: 45%
- Refused to answer: 2%

Pew Research Center, July 2020
Kaiser Family Foundation

■ ESTIMATING INFLUENZA A (H1N1) 2009: VACCINATION COVERAGE AMONG CHILDREN AND ADULTS (Oct 2009–May 2010)

Group	Vaccination Rate
Persons aged ≥6 mos	27.0
Children, 6 mos to 17 yrs	40.2
Persons ≥18 yrs	22.7
Persons in initial target groups**	34.2
Persons 25–64 yrs, at high risk††	28.6
Persons 25–64 yrs, not in initial target groups	16.7
Persons aged ≥65 yrs	28.8

** Pregnant women, persons who live with or provide care for infants aged <6 months, health-care and emergency medical services personnel, children and young adults aged 6 months–24 years, and persons aged 25–64 years who have medical conditions that put them at higher risk for influenza-related complication

†† High risk includes asthma, other lung problems, diabetes, heart disease, kidney problems, anemia, weakened immune system caused by a chronic illness or by medicines taken for a chronic illness.

[CDC Flu Vax Coverage](#)

■ FLU VACCINATION COVERAGE

AMONG ADULTS ≥18 YRS, BY RACE/ETHNICITY, 2018–19 SEASON

Race/Ethnicity	Vaccination Rate
Overall	45.3
White only, non-Hispanic	48.7
Black only, non-Hispanic	39.4
Hispanic	37.1
Other, non-Hispanic Overall	41.2
Asian	44.0
American Indian/Alaska Native (AI/AN)	37.6
Other or multiple races	39.7

[CDC Flu Vax Coverage](#)

COVID-19 VACCINE HESITANCY

Would you accept a COVID-19 vaccine if it is recommended for you?

LANCET STUDY PUBLISHED Aug 2020,
Data collected May 2020

Of the 672 participants surveyed:

- ✓ 67% said they would (n=450)
- ✓ But Black Americans reported a lower acceptance (40%, n=27)

What percent of Americans plan to get vaccinated?

NORC Study May 2020

Will- 49%

- ✓ 60 yrs. and older- 67%
- ✓ 59 yrs. and under- 40%

Will not - 30%

Unsure- 21%

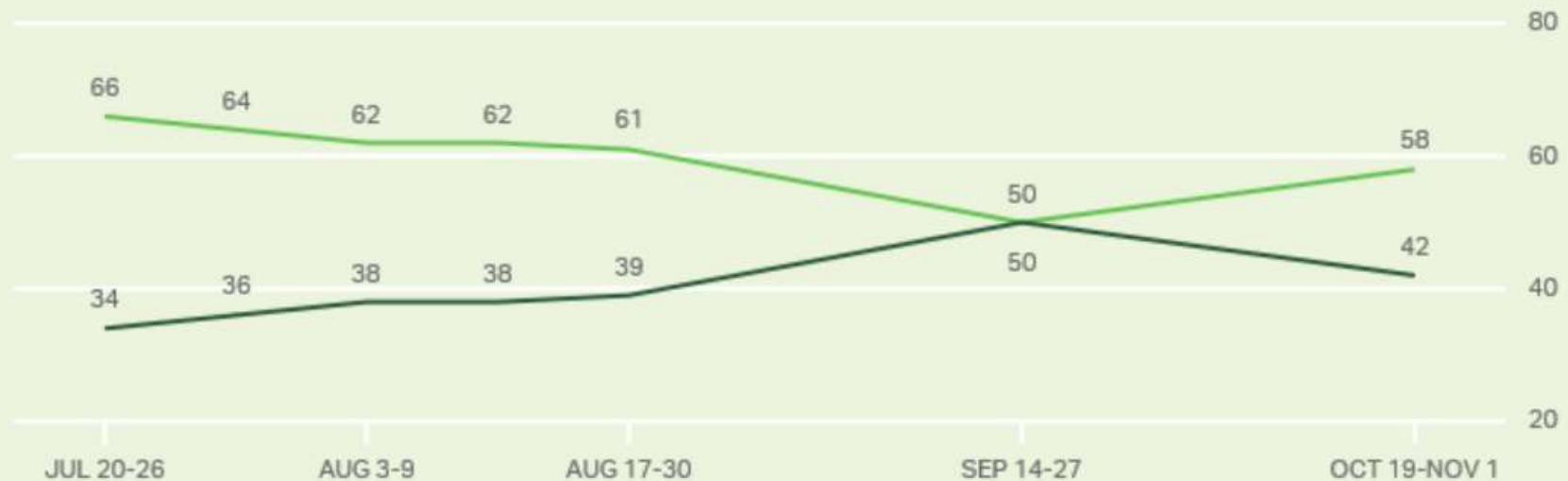
- ✓ White- 56%
- ✓ Black- 25%
- ✓ Hispanic- 37%

COVID-19 VACCINE HESITANCY: GALLUP POLLS

Roughly Six in 10 Americans Would Agree to Be Vaccinated Against COVID-19

If an FDA-approved vaccine to prevent coronavirus/COVID-19 was available right now at no cost, would you agree to be vaccinated?

■ % Yes ■ % No



GALLUP PANEL, 2020

<https://news.gallup.com/poll/325208/americans-willing-covid-vaccine.aspx>

COVID-19 VACCINE HESITANCY: GALLUP POLLS

	Sep 14-27	Oct 19-Nov 1	Change
	%	%	pct. pts.
Gender			
Men	56	61	+5
Women	44	54	+10
Age			
18-44	60	62	+2
45-64	36	49	+13
65+	54	63	+9
Education			
No college degree	45	55	+10
College degree	60	63	+3
Party			
Democrats	53	69	+16
Independents	47	49	+2
Republicans	49	49	0
Race/Ethnicity			
White adults	54	61	+7
Non-White adults	40	48	+8

<https://news.gallup.com/poll/325208/americans-willing-covid-vaccine.aspx>

COVID-19 VACCINE HESITANCY: GALLUP POLLS

Reasons for Choosing to Not Be Vaccinated Against COVID-19

What is the main reason that you would not agree to receive a coronavirus/COVID-19 vaccine, if one was available now?

	Concerns about rushed timeline	Want to wait to confirm it is safe	Don't trust vaccines generally	Want to wait to see how effective it is	Other reason
	%	%	%	%	%
Overall	37	26	12	10	15

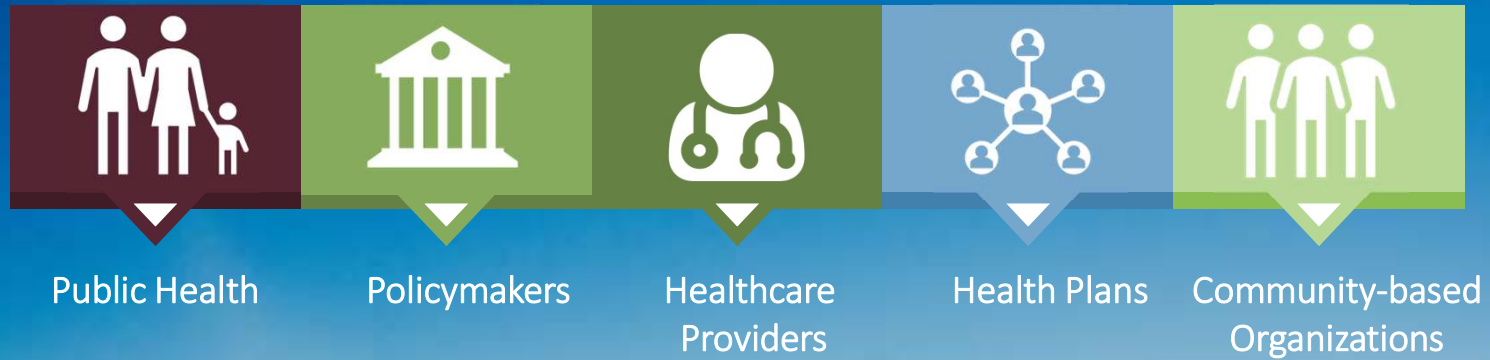
<https://news.gallup.com/poll/325208/americans-willing-covid-vaccine.aspx>



Stakeholder Roles in Vaccination

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ROLES FOR STAKEHOLDERS



COVID-19 VACCINATION: STAKEHOLDER ROLES



- + **Public Health:**
 - + Owner, convener, mass vax sponsor
- + **Providers:**
 - + Vaccinators, educators
- + **Health plans:**
 - + Data Analysis, educators, payers
- + **Policymakers:**
 - + Ensure equitable distribution, remove barriers (e.g. change regulations to allow new provider types to administer vaccines)



Roles for CBOs

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FAMILIARIZE YOURSELF WITH HEALTH DEPARTMENT PLANS



- Executive Summary for NYC Vaccine Distribution Plan

<https://www.cdc.gov/vaccines/covid-19/downloads/new-york-city-jurisdiction-executive-summary.pdf>

- Draft New York State COVID-19 Vaccination Administration Program Available [Here](#)

COMMUNITY-BASED ORGANIZATIONS



- + Review ability to participate in vaccine administration
 - Previous experience, potential collaborators, vaccinators, ability to report
- + Identify hard-to-reach populations
- + Develop collaborations with vaccination providers
- + Assess and develop marketing and community education pathways, build on current messaging related to testing, mask-wearing, and social distancing
- + Build public confidence now; engage community leaders and spokespersons
- + Organize like-minded or regional CBOs
- + Helpful to have a back-bone organization to provide structure and interface with public health

■ ADDRESSING VACCINE HESITANCY



Literature related to vaccine hesitancy points to overarching distrust of government systems, particularly in AA communities.



“Familiarity and trust with the messenger seems to be a key feature” in effective vaccine education and social marketing campaigns.

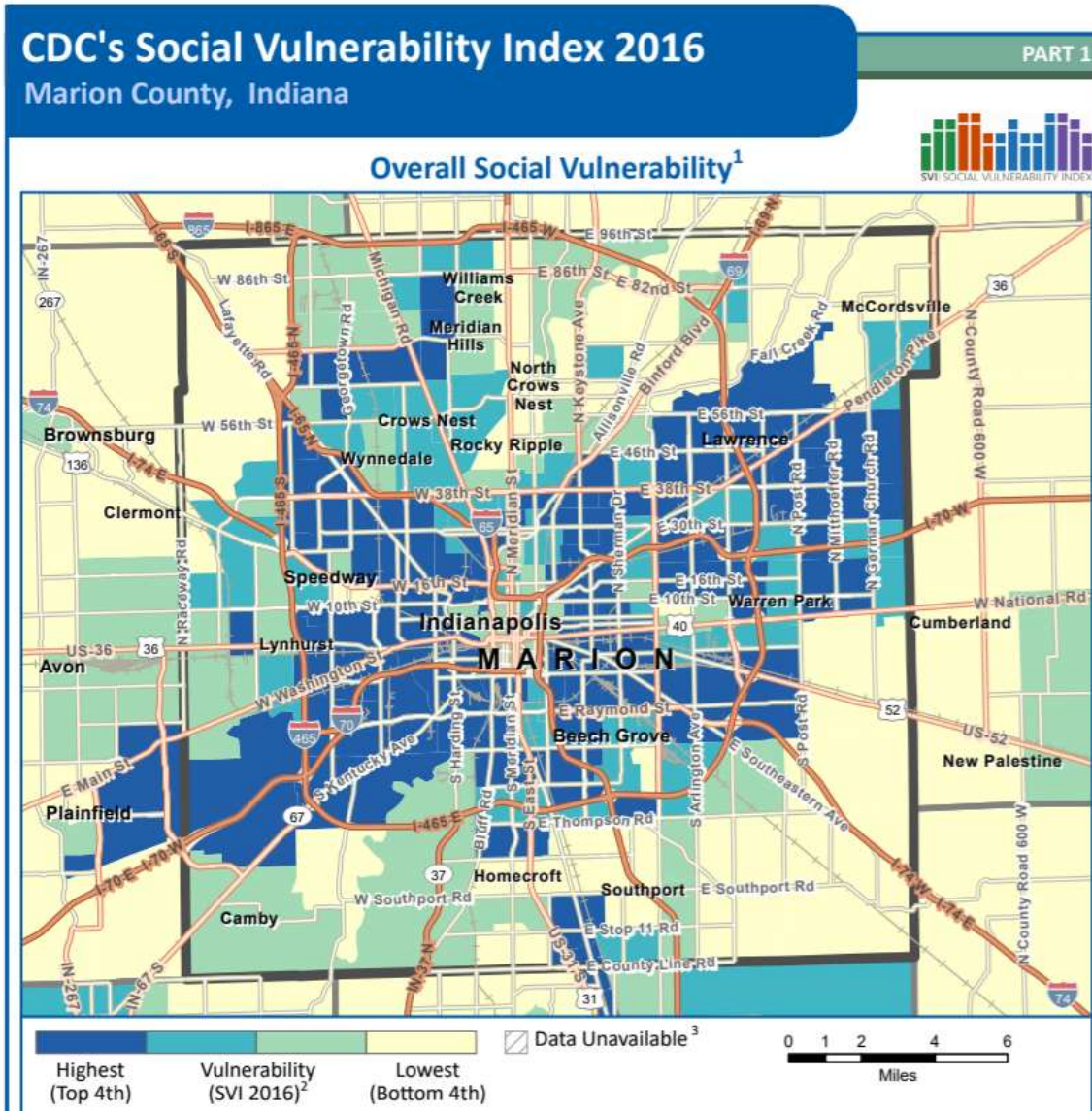
Culturally sensitive, linguistically appropriate messages tailored to sub-populations that come from trusted community members, e.g., CBOs, faith-based groups, neighborhood pharmacists tend to be effective.

Example:

Cook County (Chicago) engaged two young community leaders (“influencers”) to film health education videos for COVID-19 infection control

- + Tanya Lozano, founder of Healthy Hood Chicago, and McKinley Nelson, founder of Project Swish

DATA ANALYSIS



Mapping to help Target Communities

- ☐ CDC Social Vulnerability Index points to “hot spots”
- ☐ Identify and leverage key providers and partners in these communities
- ☐ Where are CBO sites and clients located?

EFFECTIVE STRATEGIES FOR COMMUNITY ENGAGEMENT: MOBILIZATION OF LOW-INCOME HOUSING CBOs TO PREVENT COVID-19

A network of Ohio CBOs mobilized to prevent COVID and meet social needs of 2,000 socially isolated elderly in low-income housing developments. They provided -

- **Health Monitoring and Care Coordination** – Telephonic/virtual health assessments, service coordination, case management, providing COVID Amazon Echo App to track health changes, providing long-term services & home supports
- **Food and Supply Delivery**
- **Community and Volunteer Mobilization**
- **Transportation Services**
- **Communications** – Communication plans, hotlines, providing the latest Covid-19 facts and sending daily updates
- **Infection Control** – Sanitation of common spaces; Making PPE and ensuring residents and staff have masks and sanitizers
- **Social Connections** - Providing iPads for FaceTime meetings with family and friends

Results show that high risk, socially isolated seniors trust affordable housing development service coordinators as health and safety messengers and navigators. CBOs are a critical partner in ensuring equitable vaccination.

■ PLANNING and EXECUTING on VACCINE POINTS OF DISTRIBUTION (PODs)



Use multiple forms of media to communicate key messages about the vaccine, e.g., no cost, effective, where they can get it.

Partner with Health Department or Providers to plan and conduct vaccine PODs in community locations.

At PODs in community, assist with security, ensuring safe distancing, provide SDOH supports (e.g., food distribution).

Conduct outreach, assist with transportation to ensure PODs are well utilized.

Question #3

**How prepared do you think that
your regional healthcare
ecosystem is for distribution and
administration of a COVID-19
vaccine?**

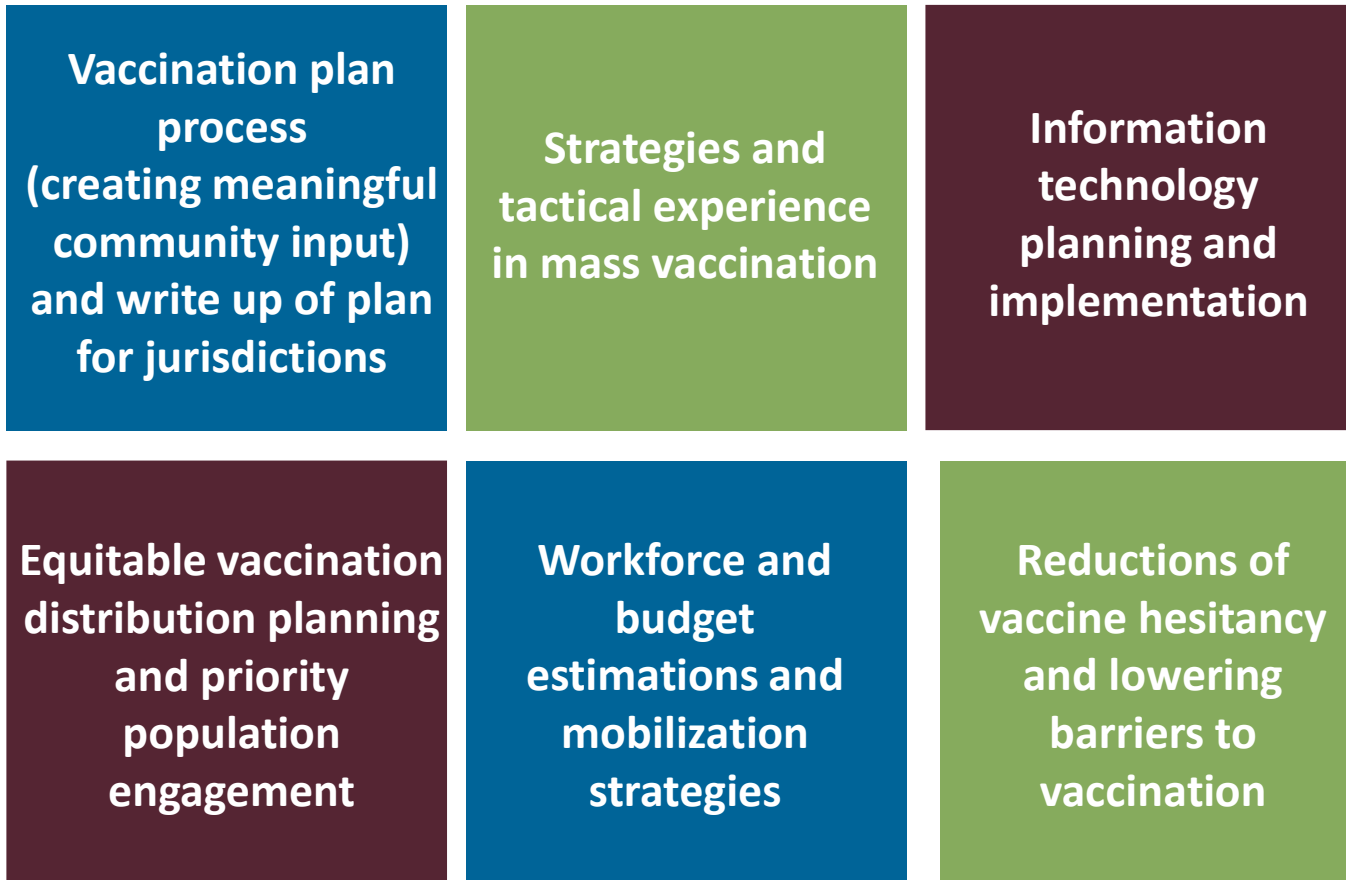
- ☐ Not prepared at all
- ☐ Minimally prepare
- ☐ Moderately prepared
- ☐ Very prepared



Questions...

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■ HMA IS READY TO HELP IN THIS CRITICAL TIME



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