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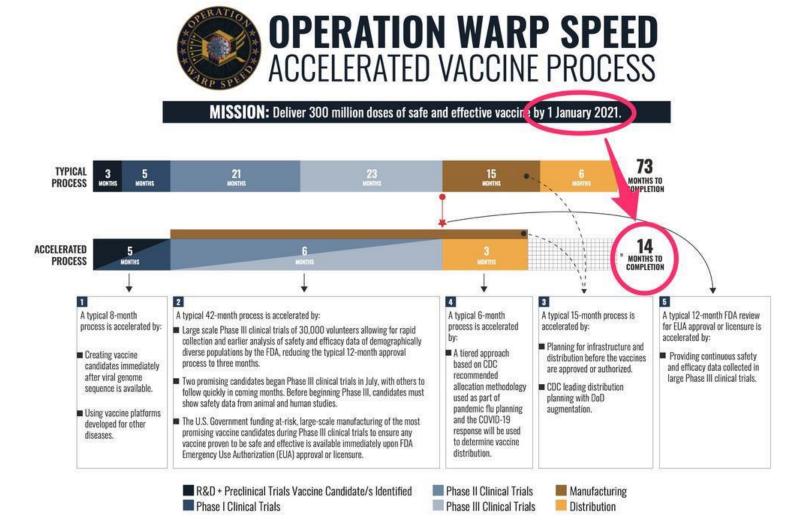
# COVID-19 Vaccination Preparations for Rhode Island

#### Tricia Washburn

Chief, Center for Preventive Services

## Operation Warp Speed





# CDC Issued Planning Assumptions and Scenarios



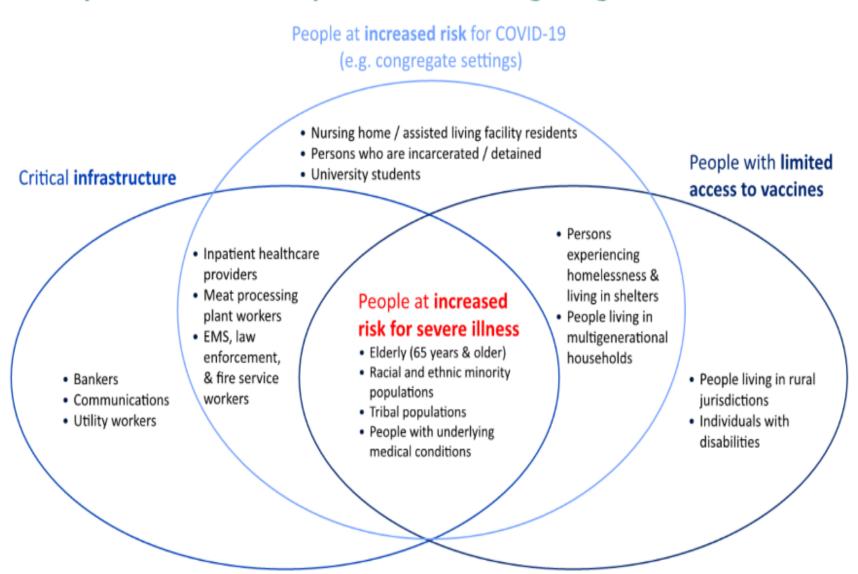
#### **Key Planning Assumptions**

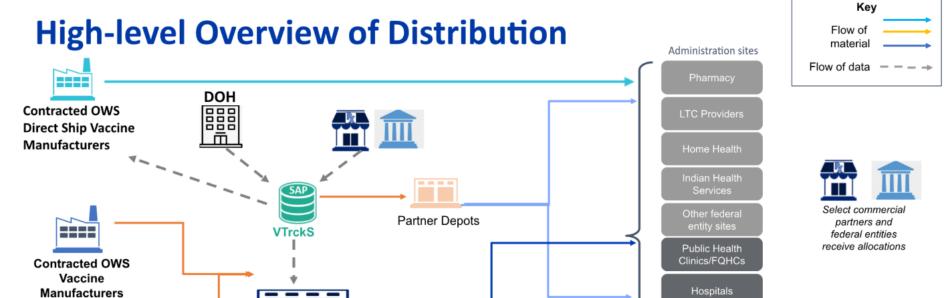
- Limited COVID-19 vaccine doses may be available by early November 2020, but COVID-19 vaccine supply will increase substantially in 2021.
- Initial supply of COVID-19 vaccines will made available under an Emergency Use Authorization issued by the FDA
- Cold chain storage and handling requirements for each COVID-19 vaccine product will vary from refrigerated (2 ° to 8°C) to frozen (-20°C) to ultra-cold (-60° to -80°C) for the vaccine. Stability testing is ongoing that may impact requirements.
- Two doses of COVID-19 vaccine, separated by ≥21 or ≥28 days, will be needed for immunity for most vaccine. Second-dose reminders for patients will be necessary. Both doses will need to be with the same product, which will require strategies to ensure the correct match of COVID-19 vaccine products and dosing intervals.
- May require reconstitution with diluent or adjuvant for some vaccines at the point of administration
- The federal government will issue guidance on groups to target for initial COVID-19 vaccination. For planning jurisdictions should focus on critical workforce that provides health care and maintains essential functions of society, Staff and residents in longterm care and assisted living facilities
- Allocation of COVID-19 vaccine to jurisdictions will be based on multiple factors, including:
  - Populations recommended by the Advisory Committee on Immunization Practices (with input from the National Academy of Medicine)
  - Current epidemiology of COVID-19



COVID-19 vaccine production and availability

#### **Examples of Critical Populations for Targeting Vaccination**





States receive allocations





Kitting

**Ancillary Supplies** 

& PPE

OWS coordination cell

Centralized

Distributor

#### System needs to allow for:

Doctor's Office

Mobile Vx

Mass Vx

- ✓ Control: Targeted populations
- ✓ Tracking: Where the vaccine is (End-to-End visibility)
- ✓ Uptake: Know when shots are administered

#### Focus on Seasonal Flu



- Promoting expanded seasonal flu vaccination
  - Reduce illness
  - Preserve healthcare resources
  - Preserve PPE
  - Test new modalities we plan to utilize for COVID vaccine
- 700,000 doses this season



# Typical Vaccine Opportunities



- SSV program enrolls over 600 locations for flu vaccine:
  - Hospitals
  - Urgent cares
  - FQHCs
  - Colleges/universities
  - Provider offices
  - Pharmacies (grocery stores)
  - School-located clinics
  - Nursing homes/assisted living communities
  - Employer-sponsored clinics
  - Public Clinics



# New or Enhanced Opportunities



- Municipal-sponsored clinics
  - MEDS-PODs
- COVID-19 Testing Site co-location
  - Rhode Island Convention Center
  - Stop & Shop (Stop & Shop pharmacies + Alert Ambulance)
  - Dexter Street Walk-up
- Rhode Island Blood Center
  - Largest annual blood drive at Crowne Plaza
     December 21

# New or Enhanced Opportunities



- New public clinics:
  - Most HEZs sites
  - AIDS Care Ocean State
  - Project Weber/RENEW
  - Rhode Island Coalition for the Homeless
  - Hospitality Association
- Mobile clinics
  - BCBSRI (senior housing and shopping centers), Gloria Gemma Foundation,

## Mass Vaccination Support



 Enhanced flu vaccination funds, as well as COVID vaccination funds will support The Wellness Company and RI DMAT/MRC to support new vaccination efforts





## Targeted Outreach



- Those who:
  - Live in high-density communities
  - Speak languages other than English
  - Lack digital access
  - Lack of transportation



## Communications Campaigns



- Flu vaccine communications campaign underway
  - Large-scale media campaign vendors
    - Nail conducting formative research and developing the creative
    - RDW is placing the media buy
  - Conduct key informant interviews to build strong communications campaign
  - Work with community partners to amplify message
  - Modeling for development of COVID-19 vaccine campaign
  - Implementation science to assist in understanding barriers and facilitators of vaccine uptake specific to COVID-19 vaccination (K. Danko, Brown University)
  - Building campaigns to address vaccine confidence

# End-to-End Management System

- Registration
- Patient history/consent form
- Forms review
- Virtual check-in when arriving at site
- Priority access codes
- Real-time data recording
- Registry reporting



#### What's Next



- Develop C-19 vaccine implementation group
- Informed by federal guidance, finalize RI operating model and micro-plan
- Finalize budget; issue contract and onboard partners
- Conduct research and key informant interviews for both vaccines to build strong communications campaign
- Use GIS to ensure saturation of vaccination sites statewide
- Evaluate flu vaccination operations and adjust, as necessary, for COVID vaccination

## Challenges



- Political pressure to vaccinate quickly vs. safely
  - Likelihood of first vaccines becoming available under EUA (not the end state, likely an interim step)
- Overcoming vaccine hesitancy
- Getting people to the right locations for the correct second dose vaccine
- Keeping up with data demands (e.g., how many people get vaccinated each day)
- Push for new providers to vaccinate (e.g., dentists, veterinarians, EMTs); PREP Act
- Communicating about policy decisions that differ from neighboring states
- Funding is unknown

# Field of Dreams or Mob of Madness?









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