

**Barriers to Vaccination Sub-Work Group**  
**VDH Advisory COVID-19 Workgroup**  
**Co-Chairs: Carolyn Moneymaker MD and Stuart Henochowicz MD**  
**December 16, 2020**

*Location: Virtual, via WebEx*

**Overarching goals / direction for the Barriers sub-workgroup:**

- Identify strategies, needs, and obstacles for public and private providers, in order to assist and administer the COVID-19 vaccine
- Identify populations outside of the CDC critical populations that need to be considered within the Commonwealth of Virginia

**Barriers Discussion:**

- Updates from Vaccine Unit:
  - Pharmacies:
    - VDH is looking at ways to partner with pharmacies via statewide partnership to help administer vaccine to targeted groups based on the prioritization
    - VDH sent out to a survey to ask for interest from pharmacies and is working to get an agreement signed
    - VDH is planning to host 2 one-hour sessions this week to help answer questions from the pharmacies
  - Hospitals:
    - VDH continues to partner with VHHA and work to make sure that hospitals and we host weekly calls
    - All 72,150 initial doses were distributed to geographically diverse health systems and received on Monday and Tuesday as the pre-planning for these doses had to be made based on which sites had ultracold storage capacity. The doses will go to Healthcare personnel (HCP)
  - Non-health system health care workers:
    - VDH local health districts are identifying vaccination needs of providers in their communities and working with community partners to ensure timely vaccination
    - VDH is advising providers to contact their health districts to ensure that their healthcare personnel are engaged in these opportunities within their area
  - Preparation for other priority groups (essential employees/critical infrastructure):
    - The Virginia Unified Command has developed the following process for Virginia to follow related to COVID-19 vaccine distribution: The FDA must first approve the vaccine, which has been completed for the Pfizer vaccine. The Centers for Disease Control and Prevention (CDC) will then allocate vaccine to states on a population basis. Virginia plans to adopt CDC's Advisory Committee on Immunization Practices' (ACIP) recommendations. If there is sufficient amount of vaccine to cover an entire priority group, it will be shipped directly to the designated vaccinators to administer. If there is not, the Vaccine Unit will draft a protocol, elicit comments from the COVID-19 Vaccine

Advisory Committee, and provide both to Virginia's COVID-19 Unified Command's Virginia Disaster Medical Advisory Committee (VDMAC). This group was established in the spring to make decisions about scarce resources, and includes public health, healthcare, an ethicist, and a representative of the Health Equity Workgroup. VDMAC will provide their recommendations to the Unified Command Leadership. VDH is awaiting a decision by ACIP regarding prioritization recommendations for Phase 1b. Throughout this outlined process, we will make sure that your input receives proper consideration. VDH continues to work with federal and community partners to develop COVID-19 vaccine distribution plans and will ensure that all eligible priority groups receive clear communication regarding how to receive the vaccine in a timely manner.

- Communications Update:
  - Community Conversations have occurred last week and this week (one tonight and tomorrow) and info is on the website for these as well as they have been recorded
  - Training: VDH has a training branch that is building out all the material under the HCPs section of the website, and CDC/Pfizer has provided many training opportunities for this vaccine that started over the weekend and are ongoing through this week (info on our website). We expect Moderna will do the same
  - Expert Panels for HCPs are being moderated with panelists that are well-respected subject matter experts/providers - the first one was last night
  - Virtual town hall is happening tonight – it is being live broadcast and streaming in 7 stations across the state
  - Satellite media tour is planned for 12/18
  - The Communications team is putting together a toolkit for Local Health Districts to ensure they all have access to the most up-to-date information
    - Plan to include photos and visuals that demonstrate the communication visually
- Discussion:
  - There are questions around whether individuals with developmental disabilities in LTCFs will be included in the federal program
    - VDH is are unaware of exclusion of individual with developmental disabilities as long a consent has been signed.
  - When will we have an idea about vaccinating someone who has tested positive before?
    - CDC has indicated to wait 90 days due to the antibodies from the virus
  - There are question about eligibility under Phase 1a
    - Healthcare Workers under Health Systems column: Residential Care staff (DBHDS, private psychiatric facilities, rehabilitation hospitals) includes healthcare workers working in DBHDS licensed congregate settings
    - Residential Care Communities include individuals living in DBHDS licensed congregate settings
  - Ideas for communications, messaging, and reducing barriers:
    - Consider reaching out to agencies that send licensed staff out to ensure we are reaching as many caregiving staff as possible and ensure the agencies are all providing consistent messaging about the vaccine

- If there are leaders in geographically strategic areas who can get the vaccine early, that would be good for messaging
- Ensure that people are being provided clear guidance about two doses
- Some individuals are misconstruing vaccine side effects as long-term side effects. Ensure broad-scale education about what these side effects mean
- Consider including adverse reaction rate for adverse group and placebo group in testing – that may alleviate concerns about the side effects
- LTCF consent with regards to individuals who may not have active guardian relationships:
  - VDH is waiting on LTCF toolkit from CDC and has asked for guidance
  - VDH LTCF task force is meeting regularly, including tomorrow
- A possible way to identify people who are at risk and not mobile – health plans may be a good avenue to look into. Health plans provide care coordination and in the early stages of the pandemic, care coordinators were able to identify who were most vulnerable

**Next steps:**

- Next Barriers meeting will be planned for 1/6/2021
- Bring the LTCF conversation to the larger Vaccine Advisory Workgroup

