

NICK MACCHIONE, FACHE
AGENCY DIRECTOR

## **HEALTH AND HUMAN SERVICES AGENCY**

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## County COVID-19 Vaccine Clinical Advisory Group Tuesday, April 6, 2021 | 4:00 p.m. – 6:00 p.m. Microsoft Teams

Members Present: Wilma Wooten, Ankita Kadakia, Gail Knight, Merlie Ramira, Liza Marcial, Ruth Kirby, Kristi Koenig, Emily Do, Samantha Williams, Seema Shah, Sayone Thihalolipavan, Nikos Gurfield, Jeffrey Norris, Nicole Esposito, Kelly Motadel, Christian Ramers, Denise Foster, Daniel Calac, Jeannette Aldous, Mark Sawyer, Denise Lozares, Karl Steinberg, John Malone, Haruna Feldman

**Members Absent:** Carl Medina, Laura Chechel, Nick Macchione, Eric McDonald, Jon Montgomery, Rodney Hood, Austin Brett, Jennifer Bransford-Koons, Carey Riccitelli, Robert Sills, Anita Walia, Jennifer Wheeler

Agenda Item/Topic	Discussion	Action Plan	Lead	Date
I. Roll call	<ul> <li>County COVID-19 Vaccine Clinical Advisory Group called to order by Dr. Kadakia at 4:00 PM on Tuesday, April 6, 2021</li> </ul>			

Agenda Item/Topic	Discussion	Action Plan	Lead	Date
II. Approval of Minutes	Approval of the final meeting minutes for March 16, 2021.     Motion for approval seconded, passed unanimously			
III. County/CDPH Updates	Phase 1A, 1B, 1C     Phase 2: Beginning April 1st general population 50+     April 15th general population 16+  Vaccination PODs and Special Groups      Mobile PODs at 2 San Diego Regional Centers that will focus on disabled clients, disability friendly sites     Northgate mobile POD for 92105 residents     Childcare providers will have closed PODs available requiring a code     Mobile foot PODs (2 PHNs) vaccinating unsheltered individuals and at shelters, FQHCs vaccinating homeless     Hospital discharge vaccination discussed with HASDIC for LTC/SNF residents. Dr. Wooten spoke with hospital CEOs.     ○ Scripps has been testing vaccination at ER discharge     ○ County LTC taskforce also collaborating on LTC/SNF vaccination plans     Homebound vaccinations now include all homebound individuals and now called Homebound San Diegans     LiveWoW (Live Well on Wheels) mobile vaccination bus has a rotating site schedule with a health equity focus     ○ LiveWoW location can be found on Twitter @LiveWowBus  Volunteer Vaccinators  Health Impact has a volunteer connection site for volunteer vaccinators, requests for volunteers at community clinics, non-county vaccination sites can requested through this site.  Health Equity Zip Codes			

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	<ul> <li>39 health equity zones identified, 12 by CDPH and 27 by the County or 32.3% of total San Diego residents identified for vaccine focus.</li> <li>30% of Latinos that live in these zip codes have received at least one dose of vaccine</li> <li>More work needed for other races/ethnicities</li> <li>Zip codes near the border have the highest vaccination rates</li> </ul>			
	MyTurn Vaccine Clinic Translation Line			
	<ul> <li>Enables myTurn clinic providers to communicate with residents who need translation services.</li> <li>No cost to providers or vaccine recipients</li> <li>150+ languages available</li> <li>Translation services M-F 8AM – 8PM, Sat-Sun 8AM – 5PM at (833) 980-3933</li> </ul>			
	TPA Updates			
	<ul> <li>County has signed an MOU with the state</li> <li>Asked to retain ability to distribute vaccine given to County to health equity areas using the operational plans we have in place and building new ones for mobile sites, pop-up events, partnering with organizations, etc.</li> <li>A few select entities are allowed to stay under the County umbrella; County will retain allocation power over those entities</li> <li>Providers/Organizations that have signed up with the TPA network are receiving allocations directly, the county is no longer involved in those allocations</li> <li>State determines where vaccine goes and TPA ships directly to the site.</li> <li>TPA is conferring with County allocation-wise through the transition period</li> </ul>			
	County maintains consultative role, with weekly meetings with TPA to confirm allocation is appropriate based off of historical data  County will not know what is ultimately allocated to providers			
	<ul> <li>All providers should be outreaching to vulnerable populations, communities of color, rural communities, etc.</li> </ul>			

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IV. Subcommittee Updates	<ul> <li>Per TPA beginning April 15, the state will begin prioritizing dose allocation to entities with the majority of their clinic appointments booked on myTurn         <ul> <li>Encouraging providers/organizations to use myTurn</li> <li>FQHC providers want to ensure booking will not affect allocation</li> <li>Concerns about effect on real time vaccinations</li> </ul> </li> <li>COVID-19 Vaccination Goal</li> <li>CDPH goal to vaccinate 75% or 2,017,011 San Diego residents         <ul> <li>51.3% of the goal population have at least one dose (as of 4.5.21)</li> <li>30.3% of the goal population are fully vaccinated (as of 4.5.21)</li> </ul> </li> <li>Data and Quality Assurance</li> <li>Want to present specific community data by census tract, if county can provide census tract vaccine data dashboard         <ul> <li>Confidentiality concerns discussed; however, proposed dashboard would use data already available on County Open Data Portal</li> <li>Zip code data available for 39 health equity zones, census tract data preferred because of health equity quartile diversity within zip codes</li> <li>Would like to provide community health workers an easily interfaced vaccine dashboard/data and feedback on what strategies are working by tract area.</li> </ul> </li> <li>Equitable Distribution</li> </ul>	Idea will be presented to County Counsel, Data and Compliance teams to ensure this is possible without violating confidentiality	Lead	Date
	<ul> <li>Based off health equity zip codes, and vaccination rates in those zip codes, group needs to investigate why people are hesitant and adjust tactics in those locations</li> <li>Motion: The committee reiterates that an appropriate COVID-19 response is one that is <i>equitable</i>.</li> </ul>			

Agenda Item/Topic	Discussion	Action Plan	Lead	Date
	1. For the purposes of this committee and the work of county-led			
	programs, vaccine equity is defined as the intentional prioritization of the			
	populations most heavily impacted by COVID-19.			
	2. Equitable allocation of vaccine and resources includes			
	proportionally higher distribution to communities most heavily			
	impacted. And, in times of vaccine scarcity, may require redistribution of			
	vaccine doses from less impacted areas in order to preserve full capacity			
	in those most impacted.			
	in those most impacted.			
	a. This equity approach will allow heavily impacted communities to			
	return to pre-pandemic normalcy at the same rate as other less impacted			
	communities (thereby achieving equality)			
	3. The committee recommends continued transparency and			
	granularity in collecting and reporting race/ethnicity and geographical			
	data of COVID-19 vaccination for the purpose of informing and directing			
	vaccine equity efforts.			
	4. Current data shows continued significant county-wide disparities			
	in vaccination for heavily impacted communities. However, equity			
	focused vaccination efforts including Project SAVE, the Black Nurses			
	Association, Appointment assistance efforts (e.g. Vaccine Hunters, San			
	Diego Vaccine angels), FQHC and community clinic programs, and other			
	proactive efforts targeting lowest quartile healthy places index			
	neighborhoods and underrepresented populations have demonstrated			
	efficacy in reaching underrepresented populations. The committee			
	applauds the County's strong commitment to vaccine equity, as evidenced			
	by their development and support for these programs, and strongly			
	recommends the County preserve, promote and expand such programs.			
	Motion seconded, approved unanimously			
	Outreach and Education			
	<ul> <li>Media communication campaigns in 6 newspaper ads, 294 radio spots,</li> </ul>			
	158 television ads, door hangers, in-store ads.			
	28 community conversation requests have come in, 12 have been			
	presented by Advisory group members and 16 by Champions for			
	Health			
	Materials in the Community Toolbox are continuously updated.			

Agenda Item/Topic	Discussion	Action Plan	Lead	Date
	BHS			
	<ul> <li>Reaffirmation dedicated/targeted outreach can be done for behavioral health clients regardless of ambulation status.</li> <li>Propose there be a dedicated day for behavioral health clients</li> </ul>			
	Solo/Independent Practice			
	Will be joining other subcommittee to make more impact for advisory group			
	Workforce			
	Members continue to collaborate and staff various PODs throughout the community.			
	Pharmacy			
	<ul> <li>Discussed TPA and vaccine allocation</li> <li>Pharmacists trying to move forward with public health focus, and making permanent changes to pharmacists' role in the community</li> </ul>			
V. Roundtable	Vaccinators			
	<ul> <li>Through County limiting factor is vaccines, FQHC limiting factor is vaccinators.</li> <li>Health Impact can be a source of vaccinators for non-County sites</li> <li>Veterinarians are now able to vaccinate, limiting factor is liability</li> <li>Meeting Frequency</li> </ul>	Dr. Kadakia will provide information to those interested		
	<ul> <li>Dr. Thihalolipavan will be taking over as tri-chair for Dr. Kadakia May 17</li> <li>Meetings will continue to be held 1<sup>st</sup> and 3<sup>rd</sup> Tuesdays of the month</li> <li>Advisory group should meet after Astra Zeneca and Novavax are presented to VRBPAC</li> </ul>			
	Agenda item for next meeting     Radys has a committee who has focused on this population, presentation can be made on findings and progress			

Agenda Item/Topic	Discussion	Action Plan	Lead	Date
	<ul> <li>Advisory group members can join Radys committee and report to</li> </ul>			
	advisory group			
Next Meeting	Tuesday, April 20, 2021 at 4:00 p.m.			
Meeting Adjourned	Meeting adjourned at 5:59 p.m.			
Submitted by				

