

Welcome!

Thanks for joining us today. We will get started at 12noon.

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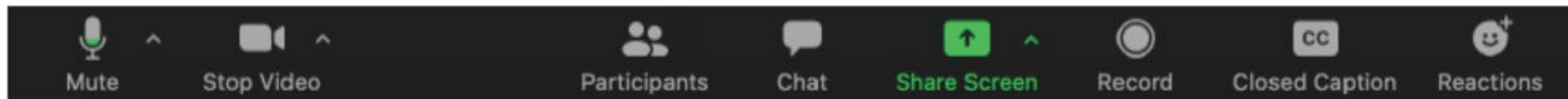
Vaccine Small Talks Series

- Topics for today:
 - Health disparities related to vaccine access and acceptance
 - Unmet social determinants of health and their impact on vaccine access
 - Services/solutions available to address SDoH needs
 - Resources

Use Chat to Introduce Yourself & Ask Questions

How to use Zoom

At the bottom of your screen, you will see a black bar with icons:



Chat **Everyone** for general comments or questions

Welcome!

- Today's session is being recorded.
- Although we want active participation, we ask that you please keep yourself on “mute” during the presentation.
- Please introduce yourself (name, organization & role, location) using the Chat feature.

The IPRO QIN-QIO

The IPRO QIN-QIO

- A federally-funded Medicare Quality Innovation Network – Quality Improvement Organization (QIN-QIO) in contract with the Centers for Medicare & Medicaid Services (CMS)
- 12 regional CMS QIN-QIOs nationally

IPRO:

New York, New Jersey, and Ohio

Healthcentric Advisors:

Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

Qlarant:

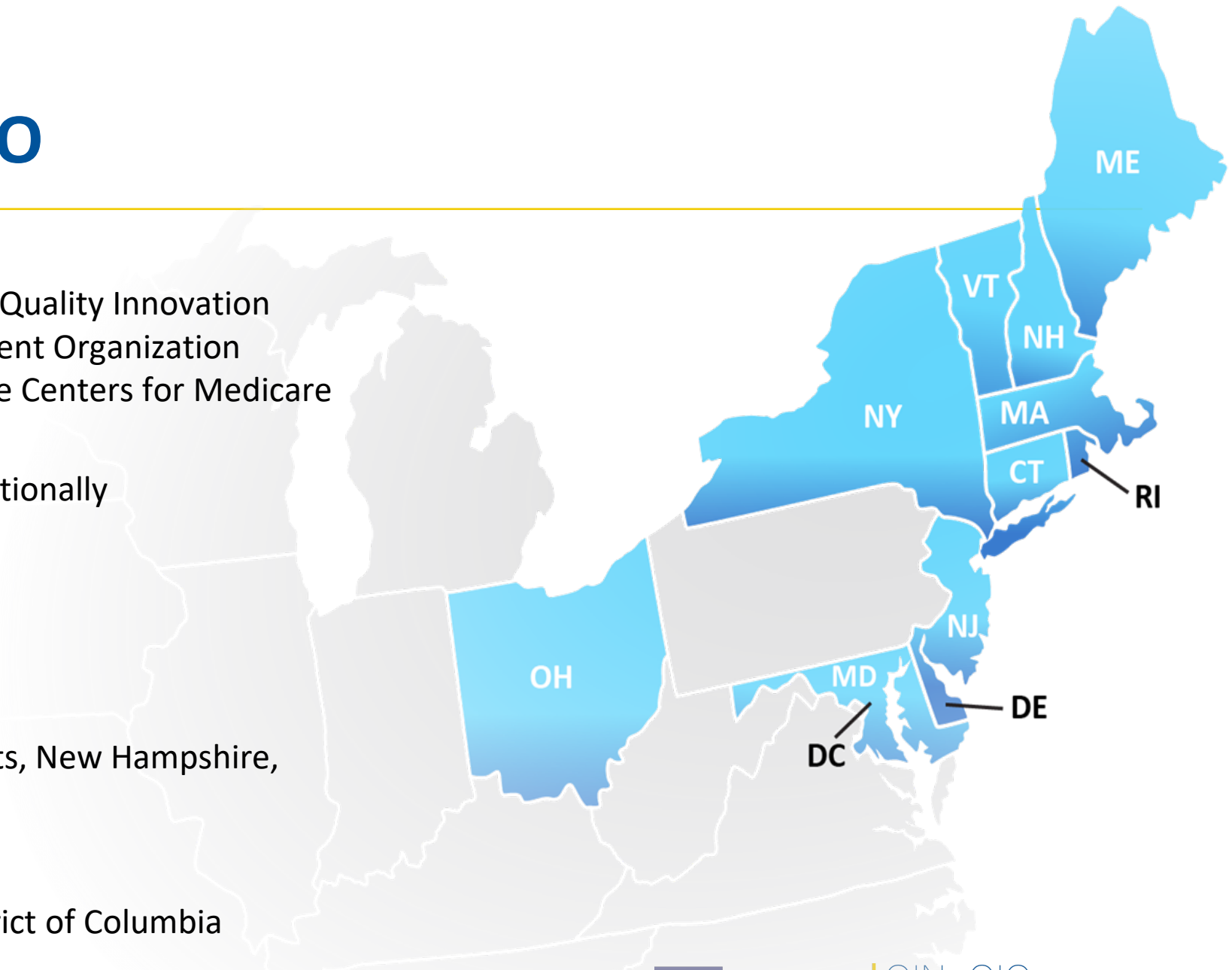
Maryland, Delaware, and the District of Columbia

Working to ensure high-quality, safe healthcare for
20% of the nation's Medicare FFS beneficiaries



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Health Equity and SDoH for Vaccines

Laura Benzel & Laura Vanderhill

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Disparities in U.S. Vaccination Rate

- Race and ethnicity
- Age
- Geography
- Socioeconomic status
- LGBTQ+ community
- Individuals with disabilities



COVID-19 Highlights Persistent Disparities



Data as of December 28, 2022

Rate ratios compared to White, Non-Hispanic persons	American Indian or Alaska Native, Non-Hispanic persons	Asian, Non-Hispanic persons	Black or African American, Non-Hispanic persons	Hispanic or Latino persons
Cases ¹	1.5x	0.8x	1.1x	1.5x
Hospitalization ²	2.5x	0.7x	2.1x	1.9x
Death ^{3, 4}	2.1x	0.8x	1.6x	1.7x

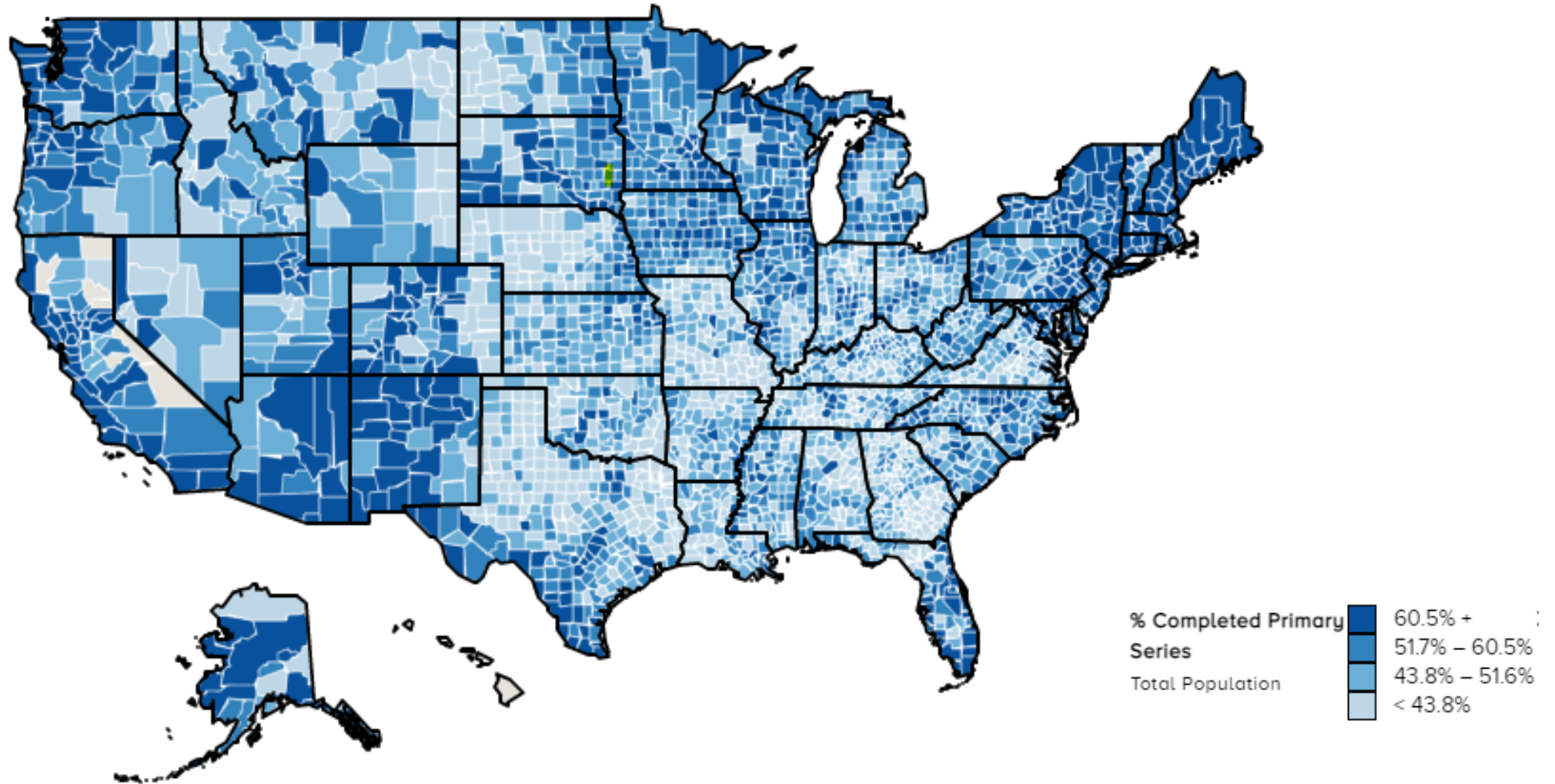
<https://www.cdc.gov/coronavirus/2019-ncov/covid-data/investigations-discovery/hospitalization-death-by-race-ethnicity.html>



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COVID-19 Vaccination Rate Urban vs Rural



As of January 9, 2023

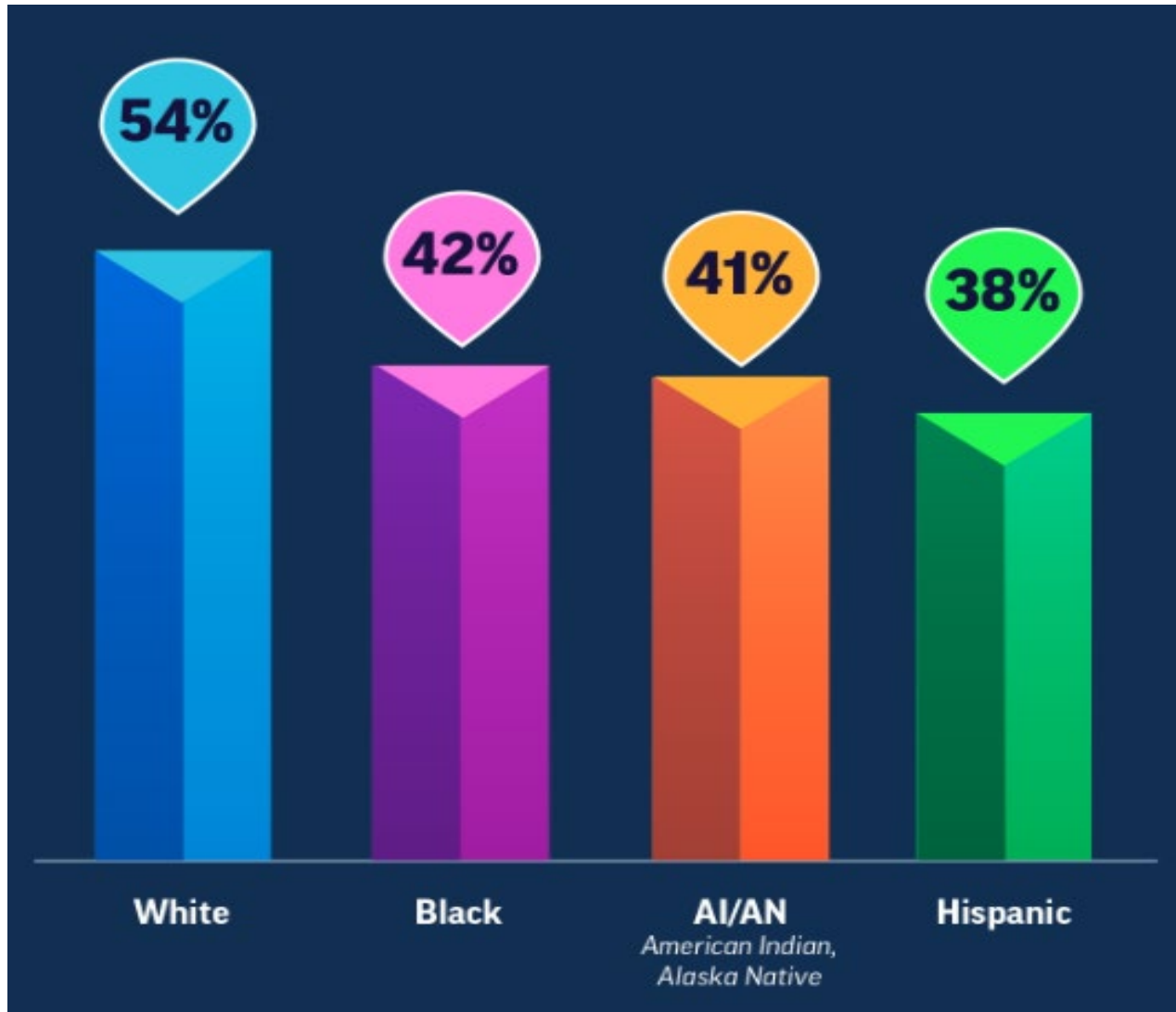
COVID-19 Vaccine Uptake

Percent People Receiving COVID-19 Vaccine by Race/Ethnicity in U.S.

December 14, 2020 – January 04, 2023

	AI/AN, NH	Asian, NH	Black, NH	Hispanic/Latino	Multiracial, NH	NHOPI, NH	White, NH
At Least One Dose	77.7%	72.9%	50.9%	66.7%	61.0%	70.9%	56.7%
Completed Primary Series	64.7%	65.8%	44.6%	56.9%	61.1%	63.8%	51.7%
Updated (Bivalent) Booster Dose	13.2%	19.3%	8.1%	7.5%	23.8%	10.5%	15.5%

Disparities in Flu Vaccination Coverage



- Lack of access to healthcare
- Lack of access to insurance
- No sick leave for medical appointments
- Misinformation & mistrust
- Low health literacy

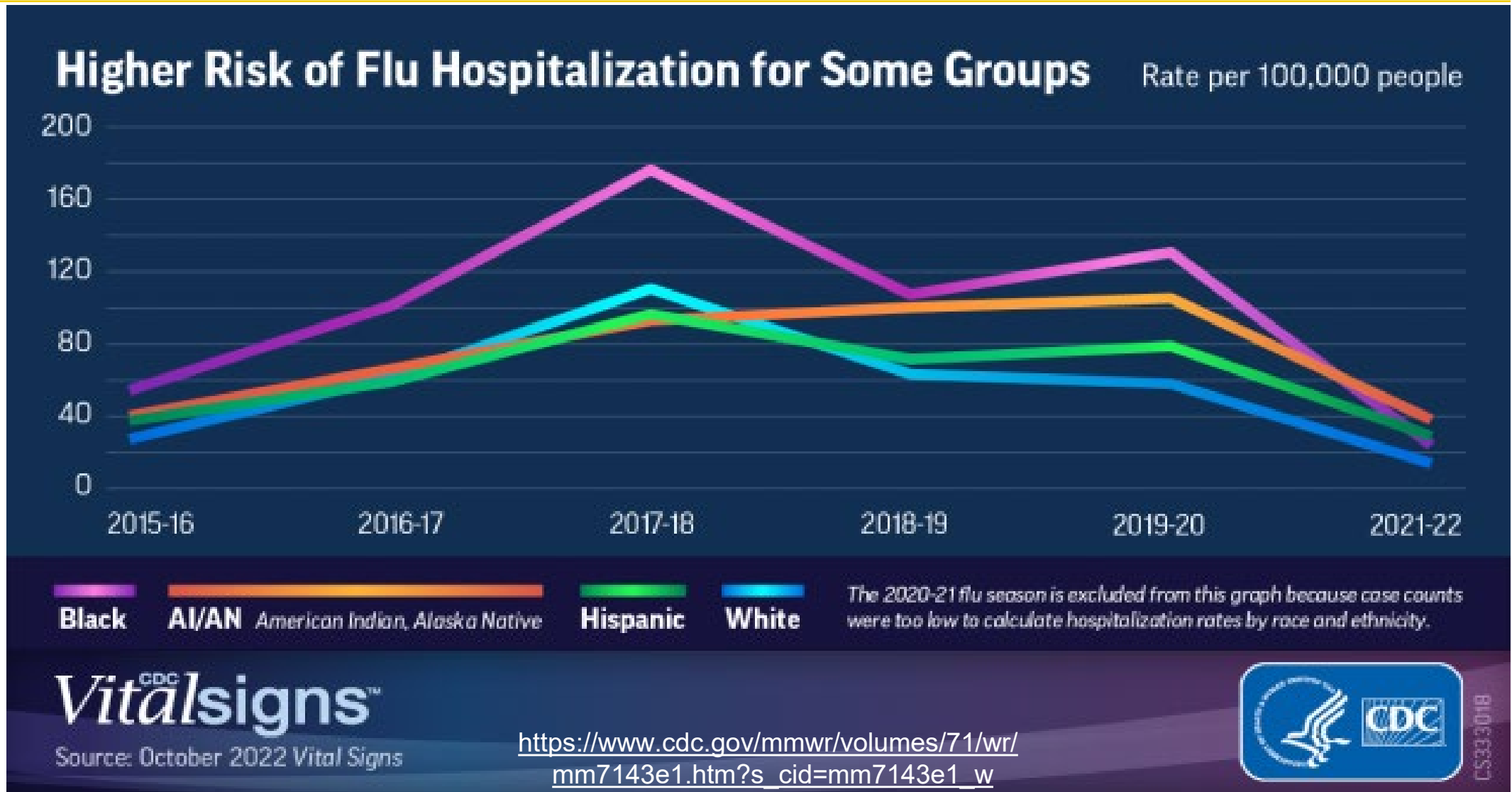
<https://www.cdc.gov/vitalsigns/flu-inequities/index.html#challenge>



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Risk of Flu Hospitalization



What are the Social Determinants of Health (SDoH)?

Social Determinants of Health



Healthy People 2030

- SDoH are the conditions in which people are born, live, learn, work, play, and age that affect health, functioning, and quality of life.
- [Social Determinants of Health - Healthy People 2030 | health.gov](https://www.health.gov/social-determinants-of-health/)

Social Determinants of Health

Economic Stability	Neighborhood & Physical Environment	Education Access & Quality	Community & Social Context	Healthcare Access & Quality
<ul style="list-style-type: none"> • Employment • Income • Expenses • Debt • Medical bills 	<ul style="list-style-type: none"> • Housing • Transportation • Safety • Parks • Playgrounds • Walkability • Zip code/geography 	<ul style="list-style-type: none"> • Literacy • Language (LEP) • Early childhood education • Vocational training • Higher education 	<ul style="list-style-type: none"> • Social integration • Support systems • Community engagement • Discrimination • Stress 	<ul style="list-style-type: none"> • Health coverage • Healthcare access • Provider linguistic & cultural competency • Quality of care

Health Outcomes

Mortality, Morbidity, Life Expectancy, Health Care Expenditures, Health Status, Functional Limitations

Adapted from Henry J. Kaiser Family Foundation, Beyond Health Care: The Role of Social Determinants of Health in Promoting Health and Health Equity

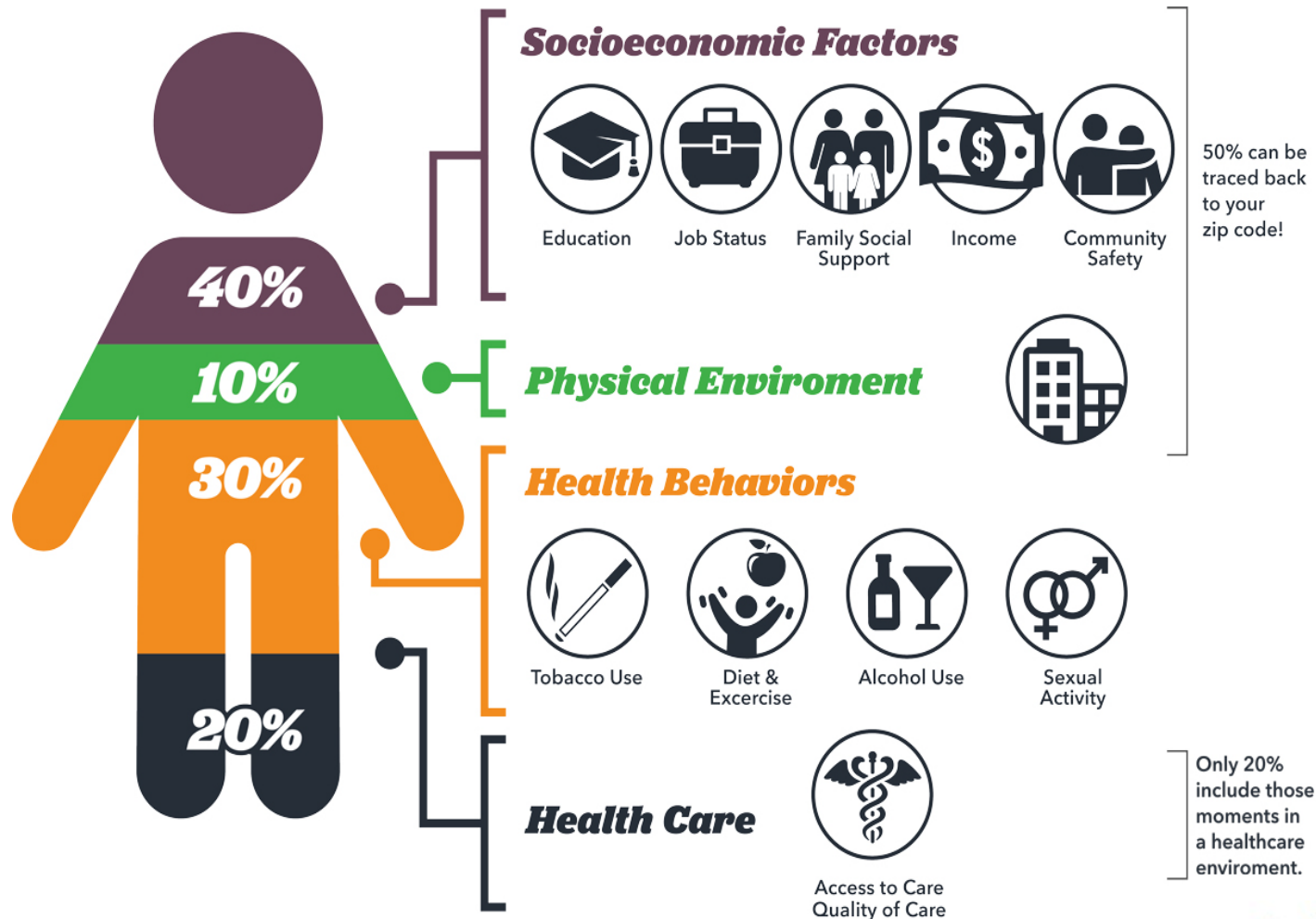
<https://risk.lexisnexis.com/insights-resources/white-paper/mitigate-hospital-readmission-risk>



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Why Social Determinants are Important



- **20%** of a health outcomes attributable to clinical care
- **80%** of health outcomes influenced by **physical environment, social determinants, and behavioral factors**
- **15-year** life expectancy gap between **advantaged** and **disadvantaged** individuals

Source: Institute for Clinical Systems Improvement, Going Beyond Clinical Walls: Solving Complex Problems (October 2014)

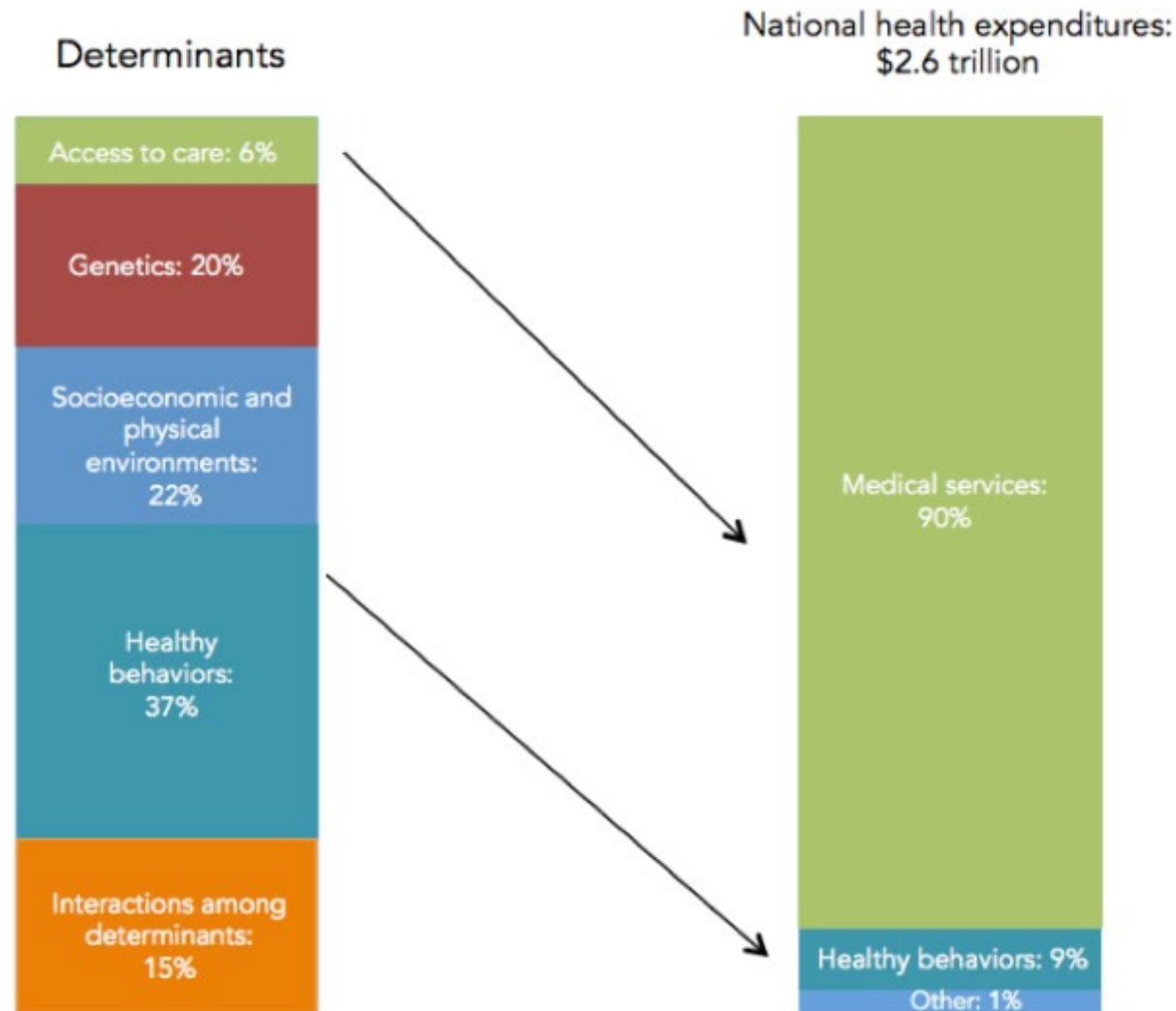
<https://health.gov/healthypeople/priority-areas/social-determinants-health/literature-summaries>



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Why This Matters from a Financial Perspective



Better outcomes, lower costs

- Addressing SDoH helps reduce utilization of expensive medical care
- Met social needs can lead to better quality of life

<https://www.publichealthpost.org/databyte/public-health-spending-mismatch>



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SDoH Examples and Impact on Vaccine Access

- Access to Internet and reliable information
- Stable housing
- Safe neighborhood/local environment, rural vs urban
- Transportation options
- Employment and income
- Language, literacy, immigration status
- Insurance coverage
- Access to healthcare
- Medical mistrust due to history of discrimination



Barriers to COVID-19 Vaccination in the US

- Underinsurance or lack of health insurance
- Lack of primary care access
- Provider reimbursement concerns
- Inadequate immunization information
- Limited access in rural settings
- Inadequate transportation
- Technology-related barriers (issues with scheduling online)
- Work or caregiving requirements
- Unfamiliar vaccination sites outside the community
- Medical mistrust
- Lack of eligibility awareness, or lack of familiarity with vaccines
- Limited awareness of healthcare system and/or delivery points
- Language barriers
- Concerns about underrepresentation of minorities in COVID-19 vaccine clinical trials

[Assessing barriers to access and equity for COVID-19 vaccination in the US | BMC Public Health | Full Text \(biomedcentral.com\)](#)



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Strategies and Possible Solutions

- Community Health centers – using local providers vs mass vaccination sites
- Mobile vaccination clinics, in-home visits
- Faith-based organizations as trusted, reliable sources of information
- Partnering with community-based leaders and organizations to help w/ benefits/insurance, transportation, housing, & more
 - Community Centers
 - Cultural Centers
 - Area Agencies on Aging



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Case example: Aroostook Agency on Aging (Maine)

- Spread COVID vaccine information & to those who were isolated and home-bound
- Assisted with scheduling vaccinations
- Assisted with arranging transportation to get to vaccine appointments
- Partnered with Public Health Council to have the latest information available about vaccines, clinic locations, etc.
- <https://www.wagmtv.com/2021/01/28/aroostook-agency-on-aging-working-hard-to-provide-resources-for-those-interested-in-covid-19-vaccine/>



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Ways to Improve Vaccine Access and Confidence

Show Up Where People Are

Partner with Trusted Messengers

Promote Community-Based Vaccination

Be Consistent and Accurate with Messaging

Use Culturally & Linguistically Appropriate Messages

MD Department of Health “Flooster” Campaign



- Promote safety of getting flu and COVID-19 booster together
- “Two shots, one visit”
- Offers information in multiple languages

<https://covidlink.maryland.gov/content/vaccine/flooster/>



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Join Us: IPRO CLAS Series



CLAS = Culturally and Linguistically Appropriate Services

Helps make healthcare services

Understandable | Respectful | Effective | Equitable

How Can You Start Implementing CLAS?

Complete the IPRO CLAS Assessment

[IPRO Assessment of Cultural and Linguistic Services](#)

Learn where your organization is implementing CLAS

Join IPRO for its CLAS [educational series](#) starting January 25th



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IPRO Immunizations Resources

COVID-19 Vaccine: What You Need to Know

COVID-19 is a disease caused by the virus SARS-CoV-2. It is highly contagious and can cause respiratory symptoms that can feel much like a cold, the flu, or pneumonia. COVID-19 disease can also affect other parts of the body. The best way to avoid serious COVID-19 complications and/or hospitalization is to receive the COVID-19 vaccine series.

Type of COVID Vaccines

There are three types of COVID-19 vaccines in the U.S.:

- mRNA: (ex. Pfizer and Moderna)
- Viral vector (ex. Johnson and Johnson's Janssen)
- Protein subunit (ex. Novavax)

The Centers for Disease Control and Prevention (CDC) recommends the following vaccination guidelines:

- COVID-19 vaccination is recommended for everyone ages 6 months and older
- People can stay up to date by completing a primary series and receiving the most recent booster dose recommended to them by the CDC
- The new bivalent booster can be given 2 months after last vaccine dose

To ensure individuals receive the most up to date COVID-19 vaccine, it is important to collect and record all vaccines in their electronic medical record. Currently, no national database maintains vaccination records; the U.S. encourages patients to record all vaccines they receive outside of their primary care provider's office so they can inform the provider at their next visit.

Resources

- [Benefits of Getting A COVID-19 Vaccine | CDC](#)
- [Centers for Disease Control and Prevention \(CDC\)](#)
- [Coronavirus Disease 2019 \(COVID-19\) | CDC](#)
- [Centers for Disease Control and Prevention \(CDC\)](#)
- [Understanding How COVID-19 Vaccines Work | CDC](#)
- [Centers for Disease Control and Prevention \(CDC\)](#)
- [Safety of COVID-19 Vaccines | CDC](#)
- [Centers for Disease Control and Prevention \(CDC\)](#)

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Influenza Vaccine: What You Need to Know

Influenza, also known as the flu, is a respiratory illness that infects the nose, throat and sometimes the lungs. Influenza may lead to hospitalization or death. Infants, young children, pregnant women, older adults and people living with certain chronic conditions are at greater risk of developing serious complications. The Centers for Disease Control and Prevention (CDC) estimates that 70%-85% of seasonal influenza deaths and 50-70% of seasonal influenza-related hospitalizations occur in those aged 65 and older.

<https://www.cdc.gov/flu/highrisk/65over.htm>

<https://www.cdc.gov/flu/pdf/professionals/vaccination/get-the-facts.pdf>

The best way to prevent influenza, and prevent serious illness and hospitalization, is to receive an annual flu vaccination. The flu vaccine protects against the four most common flu viruses. In recent years, the flu vaccine reduced the risk of illness by between 40% and 60%. **High-dose flu vaccines are now recommended for adults 65 and older.**

[Flu shot information and common myths & misconceptions](#)

The CDC recommends the following flu vaccination:

- Fluzone **High-Dose** Quadrivalent or Fludac Quadrivalent vaccine
 - Only approved for people 65 and older
 - Older adults should get one of the higher dose influenza vaccines, if available, because they are potentially more effective (if unavailable, get any other age-appropriate flu vaccine)
- Standard dose Quadrivalent flu vaccine
 - Approved for people 6 months and older
- Cell-based Quadrivalent flu vaccine
 - Approved for people 6 months and older
 - Completely egg-free
- Recombinant Quadrivalent flu vaccine
 - Approved for people 18 and older
 - Contains three times the antigen (the part of the vaccine that helps build up protection from flu viruses) than other standard-dose inactivated influenza vaccines
 - Completely egg-free
- FluMist
 - Only approved for people 2 years old through 49 years old
 - NOT recommended for use those who are pregnant, immunocompromised or who have certain medical conditions

Additional Resource:

- [Influenza Vaccine Information Sheets for Patients](#)

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Preparing for a Community Vaccine Clinic

Checklist

A community vaccine clinic for friends and families of your residents and staff can support your community vaccination rates and protect your residents from potential COVID-19 exposure. This toolkit walks you through the steps of partnering with your local pharmacy and/or local Department of Health to offer a vaccine clinic.

Initial Planning

Identify the vaccine provider. You can partner with your local health department, pharmacist, a health system, or other medical providers. Visit [Vaccines.gov](#) and find COVID-19 vaccine locations near you to find a vaccine provider.

Establish roles for all facility leaders and participating community partners:

- Facility leadership team
- Pharmacy partner
- Local state/county department of health
- Local emergency preparedness agency
- Emergency medical services
- Local health systems (example: local hospital)

Identify a location, date and times. Consider indoor as well as outdoor locations that allow for easy access, high visibility, safe flow of participants and appropriate social distancing. Can you offer the clinic outside in the parking lot? Do you have an available space within your building?

Establish clinic parameters:

- What parameters will you place around eligibility?
- Will you limit participation by age?
- Will you start a primary vaccine series?
- How will you refer people who do not meet your clinic's criteria?

Toolkit

In the communications section we offer:

- Cover letter describing the vaccine clinic
- Template of a letter to invite friends and families to the event
- Opportunity for IPRO QIN-QIO experts to host virtual educational event with your resident and family councils on COVID-19 vaccination
- Sample social media posts
- Two flier flyers to promote the clinic
- Newsletter blurb, media alert, and news release to advertise the clinic and demonstrate facility commitment to protecting your community

In the clinic coordinator section we offer:

- **Preparing for the clinic**
 - [Checklist of Current Versions of U.S. COVID-19 Vaccination Guidance and Clinic Support Tools \(January 2022\)](#) This regularly updated checklist provides links to key COVID-19 vaccination resources.
 - [Checklist of Best Practices for Vaccination Clinics Held at Small, Busy, Temporary, or On-Site Locations \(January 2022\)](#) This checklist is a step-by-step guide to help clinic coordinators/supervisors overseeing vaccination clinics.
 - [COVID-19 Vaccine-Patient Safety Checklist for Vaccination Clinics \(February 22, 2021\) \(pdf.gov\)](#) This checklist is an assessment tool to help clinic coordinators/supervisors prepare for COVID-19 vaccination clinic.
- **Screening tool to administer vaccine**
 - [Pre-vaccination Checklist for COVID-19 Vaccines Information for Healthcare Professionals \(pdf.gov\)](#) Print this checklist for recipients to fill out prior to administering vaccine.
 - [Pre-vaccination Guidance for COVID-19 Vaccines Information for Healthcare Professionals \(pdf.gov\)](#) This guidance should be used to determine if COVID-19 vaccine can be administered or not, based on recipients' answers to the checklist questions. Laminate this tool and give to those who are administering vaccine.
- **Standing orders**
 - [Moderna COVID-19 Vaccine: Standing Orders for Administering Vaccine to Persons 18 Years of Age and Older \(pdf.gov\)](#) Standing orders for Moderna
 - [Pfizer-BioNTech COVID-19 Vaccine: 12 Years of Age and Older \(Purple Card\) - Administering Vaccine to Persons 18 Years of Age and Older \(pdf.gov\)](#) Standing orders for Pfizer-BioNTech
 - [Johnson COVID-19 Vaccine \(Johnson & Johnson\): Standing Orders for Administering Vaccine to Persons 18 Years of Age and Older \(pdf.gov\)](#) Standing orders for Johnson, not recommended for booster vaccines: COVID-19 Vaccine Boosters | CDC

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Resources

- IPRO QIN-QIO: [It's Worth A Shot](#)
- Vital Talk
<https://www.vitaltalk.org/guides/communication-skills-for-the-covid-vaccine/>
<https://www.vitaltalk.org/guides/bridging-inequity/>
- SDoH Getting Started Guide
<https://qi-library.ipro.org/2022/07/07/social-determinants-of-health-sdoh-a-guide-for-getting-started-for-getting-started/>
- CDC Partnering for Vaccine Equity
<https://www.cdc.gov/vitalsigns/flu-inequities/index.html#equity>
- US Surgeon General's Misinformation Toolkit
<https://oes.gsa.gov/assets/publications/2120-health-misinformation-toolkit.pdf>
- Medicare Information in 18 Languages
<https://www.cms.gov/About-CMS/Agency-Information/OMH/resource-center/resources-by-language>
- CDC'S Health Equity Guiding Principles for Inclusive Communication
<https://www.cdc.gov/healthcommunication/HealthEquityGuidingPrinciples.pdf>



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Articles

- Vaccine campaigns that integrate CBOs
<https://www.whitehouse.gov/briefing-room/statements-releases/2022/11/22/fact-sheet-biden-administration-announces-six-week-campaign-to-get-more-americans-their-updated-covid-19-vaccine-before-end-of-the-year/>
- Annual Influenza Vaccination Disparities in Medicare Beneficiaries
<https://www.cms.gov/files/document/data-snapshot-annual-influenza-vaccination.pdf>
- Assessing barriers to access and equity for COVID-19 vaccination in the US
<https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-022-14636-1>
- *CDC Vital Signs: Influenza Hospitalizations and Vaccination Coverage by Race and Ethnicity—United States, 2009–10 Through 2021–22 Influenza Seasons*
https://www.cdc.gov/mmwr/volumes/71/wr/mm7143e1.htm?s_cid=mm7143e1_w



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Chat In

Please unmute yourself or use the chat feature to share questions, ideas, success strategies, and/or lessons learned.



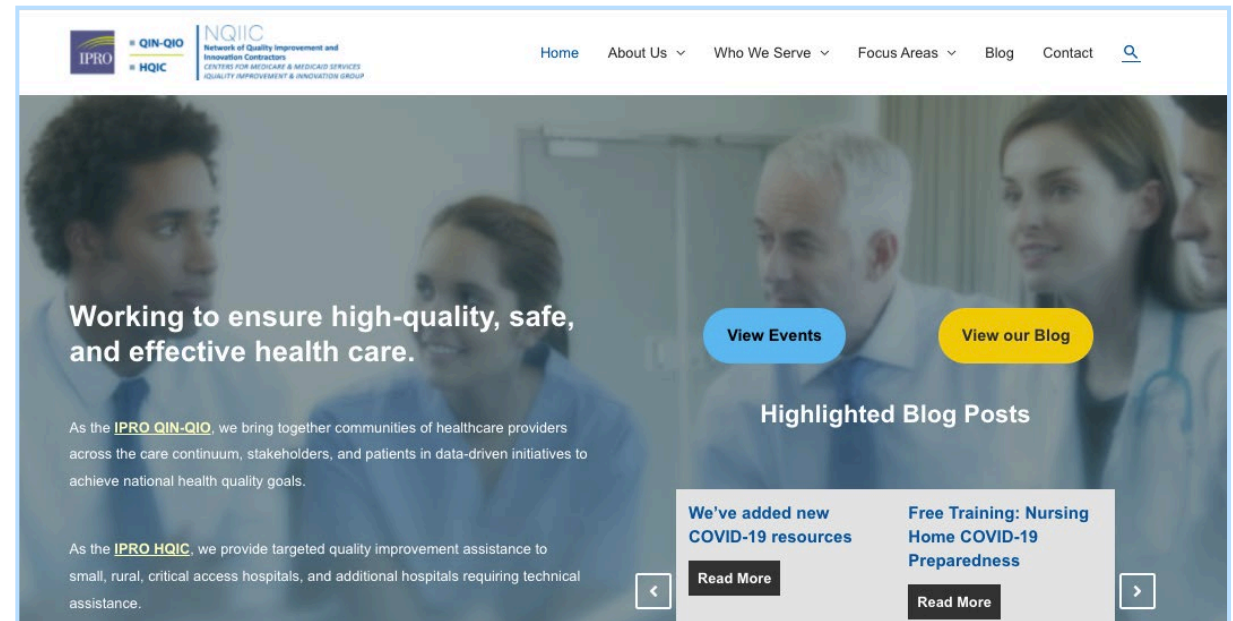
Improvement is a Team Sport



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Mark Your Calendar for Upcoming Sessions



Access our calendar of events to view upcoming sessions:

<https://qi.ipro.org/upcoming-events/>

- **Wednesdays Noon -12:30 PM**
- **January 18**: Vaccine Myths, Misinformation & Fatigue
- **January 25**: Motivational Interviewing to Support Vaccine Acceptance
- **February 1**: Immunization's Role in Chronic Disease Management



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Thank You

Thank you for your continued partnership and commitment to quality improvement and health equity.

