Welcome to the Community Vaccine Advisory Committee

Nadine Burke Harris, MD, MPH,
California Surgeon General, Co-Chair

Erica Pan, MD, MPH,
State Epidemiologist, Co-Chair
Meeting Process

- All meetings will be virtual and interactive; cameras on; mute until ready to speak
- Use hand raise icon when you are ready to make comments/ask questions
- Consistent attendance by members; no delegates or substitutes
- Today we will be having ASL Interpreter and closed captioning for members
- Website - https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Community-Vaccine-Advisory-Committee.aspx
- Public listen-in mode via telephone at each meeting in English and Spanish
- Meeting will now be live-streamed on YouTube – https://www.youtube.com/channel/UCkNEUkIwtIc_kPenEZMUI0w
- Public comment via written comments COVID19VaccineOutreach@cdph.ca.gov; will be discussed with Committee at subsequent meetings; all public comments received will be posted weekly on the CDPH website
- Technical issues with Zoom – put questions in chat
Summary of Public Comments Since Meeting #11
Opening Comments

Nadine Burke Harris, MD, MPH,
California Surgeon General, Co-Chair

Erica Pan, MD, MPH,
State Epidemiologist, Co-Chair
Update on Vaccine Supply, Allocation Guidelines and Implementation of Accessibility and Federal Partnerships

Erica Pan, MD, MPH, State Epidemiologist, Co-Chair
Nancy Bargmann, Department of Developmental Services
COVID-19 Overview

As of March 16, California has 3,530,055 confirmed cases of COVID-19, resulting in 55,372 deaths.

<table>
<thead>
<tr>
<th>Cases</th>
<th>Deaths</th>
<th>Tests</th>
<th>Vaccines Administered</th>
</tr>
</thead>
<tbody>
<tr>
<td>3,530,055 Total</td>
<td>55,372 Total</td>
<td>51,351,366 Total</td>
<td>12,637,197 Total</td>
</tr>
<tr>
<td>1,260 Today</td>
<td>42 Today</td>
<td>167,229 Today</td>
<td>1.8% Test positivity</td>
</tr>
<tr>
<td>6.1 New cases per 100K</td>
<td>0.1 New deaths per 100K</td>
<td>Updated March 16, 2021 at 10:00 AM with data from March 15, 2021</td>
<td></td>
</tr>
</tbody>
</table>

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019.aspx
7-Day Average of Cases by Episode Date, Total Hospitalizations, Total ICU Admissions, and Deaths by Date of Death Associated with COVID-19 per Day

*3/19: Statewide Stay-At-Home Order
**3/18: Statewide Mask Order
***7/13: Statewide Re-Closure of Bars
****11/16: Emergency Brake
*****1/19: Limited SAHD

# peak1: 60,073 cases (2021-01-04); # peak2: 58,979 cases (2020-12-29);
++++ 12/3 regional stay at home order: 2021-03-16 16:56:45
Vaccine Doses Administered by Day

As of March 16, 2021

Total Doses Administered: 12,637,197
Vaccine Equity Metric

This graph compares COVID-19 vaccinations among four different levels of community health.

It uses **Healthy Places Index** (HPI) measures in a zip code area that can impact health, like income, education, and access to health care. Areas are then given a score, ranging from least healthy community conditions (Quartile 1) to most healthy community conditions (Quartile 4).

The Vaccine Equity Metric also creates scores for areas that don’t have an HPI score.
Another vaccine is great news!

Like Pfizer and Moderna, the J&J vaccine is safe and highly effective against preventing death and severe COVID.

The new vaccine is just one dose and easier to transport and store, so it’s an important tool for helping to end the pandemic.

Some evidence re decreasing transmission & vs variants.

The best vaccine is the one you can get (when you’re eligible).
Doses Administered in California

As of March 16, 2021

Individuals with 2 doses: 4,344,182
(13.4% of Californians over 16 years old)

See Data Dictionary for Details.

https://covid19.ca.gov/vaccines/
Who Can Get Vaccinated?

- **Eligible groups**
  - Health care workers
  - Long term care and skilled nursing facility residents
  - Californians 65 years and older
  - Food and agriculture
  - Childcare and education
  - Emergency responders

- **New:**
  - Those in high-risk congregate living spaces
  - Certain public transit workers

- As of **March 15**, healthcare providers may use their clinical judgement to vaccinate individuals aged 16-64 who are deemed to be at the very highest risk to get very sick from COVID-19:
  - Severe health conditions
  - Disabilities or illness

https://covid19.ca.gov/vaccines/
The Disability Community

- Regional Centers (RC) are making contact with all consumers ages 16 and up who are not already known to be vaccinated, to provide and collect information and offer assistance

- RC and Independent Living Centers (ILC) are collaborating wherever possible to increase vaccination access

- Blue Shield assisted in connecting County public health departments and RC/ILCs this morning, for addressing HPI quartile zip code-level vaccination efforts

- Vaccination data will be posted by the Department
  - Data has limitation, such as comfort of reporting by families, data entry lags
  - The Department is encouraged by the pace of what is reported

- Examples of targeted efforts:
  - San Andreas RC = 600 doses today and tomorrow in Watsonville
  - CVRC = 300 in Coalinga and 400 at Tulare Ag Center
  - Golden Gate = 800 last weekend
  - LA County Public Health coordinating with all seven RCs
Blueprint for a Safer Economy

- Updated on March 12, 2021
- Incorporates vaccination rates to open California

Current: Because CA has 2 million people vaccinated in HPI quartile 1

The case rate, test positivity, and health equity metric thresholds must be met to move forward toward more reopening.

If both the test positivity and health equity metric are especially low, and the case rate is declining but does not yet meet less restrictive tier's level, a county can still move forward towards more reopening. See rules on accelerated progression.

Vaccinations by doses administered

Number of vaccine doses given in California

% of total and number of doses administered

https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID19CountyMonitoringOverview.aspx
Federal Retail Pharmacy Program (FRPP)

Overview

• Cumulative dose administered at retail stores as of 3/8/21:
  o CVS: 313,150
  o Rite Aid: 189,976
  o Walgreens: 124,266
  o Albertsons: 205,692

• Current eligible groups: 65+, healthcare workers, LTC residents and staff, food and agriculture, education and childcare, and emergency services
  o A directive issued by HHS for all pharmacy partners to prioritize pre-K-12 teachers, school staff, and childcare workers during the month of March

• Effective 3/15, group 16-64 with comorbidity will be eligible
Federal Retail Pharmacy Program (FRPP)

- An additional **36,270 doses** of Pfizer were allocated for the week of 3/7/21
- CVS expanded additional **119 store locations**; as program expands with more supply, pharmacy partners will continue to expand locations
- **Total 286,610 doses allocated for the week of 3/7/21** (see Table 1)

**Entering the week of 3/14/21 allocation, there will be**
- Janssen doses as well as an increase in Pfizer doses
- With the expansion of Janssen doses, four LTC pharmacy partners will be activated this week:
  - MHA, Innovatix, GeriMed and Cardinal
  - PharMerica is under Innovatix network

<table>
<thead>
<tr>
<th>Pharmacy Partner</th>
<th>Pfizer</th>
<th>Moderna</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>CVS</td>
<td>64,350</td>
<td>81,900</td>
<td>146,250</td>
</tr>
<tr>
<td>Rite Aid</td>
<td>21,060</td>
<td>37,400</td>
<td>58,460</td>
</tr>
<tr>
<td>Walgreens</td>
<td>64,350</td>
<td></td>
<td>64,350</td>
</tr>
<tr>
<td>Albertsons</td>
<td>17,550</td>
<td></td>
<td>17,550</td>
</tr>
</tbody>
</table>
Federal Long Term Care Facility Partnership

- CVS and Walgreens are conducting 3 vaccination clinics on-site - program ending March 31st
- Skilled Nursing Facilities (SNFs) started first 12/28/2020
- Assisted Living Facilities (ALFs) and other facilities started 1/11/2021

As of 3/12/21 CDC data:

- **849,168** total doses administered
  - 477,254 first doses
  - 371,914 second doses
  - 433,889 resident doses
  - 415,279 staff doses
Federally Qualified Health Center (FQHC) Initiative

- Health Resources and Services Administration (HRSA) and CDC partnership to directly allocate limited supply of COVID-19 vaccine – this separate federal allocation is deployed in coordination with states
- Incrementally started at select HRSA-funded health centers that specialize in caring for hard-to-reach and disproportionately affected populations including
  - Individuals experiencing homelessness
  - Public housing residents
  - Migrant/seasonal agricultural workers
  - Patients with limited English proficiency
- Phase 1 increases access to vaccines for 250 health centers nationwide
- Through a phased, 4-week rollout, CA now has ~40 FQHC organizations participating that serve close to 200 individual sites.
- Cumulatively, CA has received close to 185,000 doses over the last four weeks.
- FAQs, list of participating sites and additional information available at HRSA website.
Achieving and Monitoring Equity

Nadine Burke Harris, MD, MPH, California Surgeon General, Co-Chair
Peter Long, Blue Shield of California
Kimberley Goode, Blue Shield of California
Equitably Accelerating Vaccine Distribution and Administration for Californians

Third-Party Administrator Update
## The TPA Supports California’s 5-Point Plan for Vaccination Equity

<table>
<thead>
<tr>
<th>Allocation</th>
<th>State’s five-point plan on equity</th>
<th>How the TPA will support</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Provide ultimate determination and approval of all vaccine allocation with a focus on equity</td>
<td>Develop and recommend for adoption by the state an appointment prioritization approach for State Vaccine Network sites</td>
</tr>
</tbody>
</table>

| Network | Ensure that the State Vaccine Network includes appropriate access in disproportionately impacted communities (may include extended hours, translation and / or transportation services) | Provide reports to the State on performance of the network overall and by provider |

| Community Partners | Invest in special programs to support community-based organizations that are critical to reaching target communities | Support state efforts, including promoting outreach to disproportionately affected groups |

| Data analytics | Use real-time data analytics to adjust and intensify targeted efforts and resource allocation to meet equity goals | Perform timely data analytics to adjust and intensify targeted efforts and resource allocation to meet equity goals |
|                | Provide weekly Vaccine Allocation Reports to the state, which include identifying high performing geographies and providers |

| Public Education | Provide consistent messaging and meet Californians where they are in order to reach California’s diverse populations | Support state initiatives on public education |

Source: TPA equity workstream
The TPA is Supporting Allocation Recommendations and an Enhanced Network

**Increased allocation**

- Use data to recommend where to allocate doses to the first quartile Healthy Places Index zip codes to ensure distribution of the vaccine meets the disease burden as defined by the state

- Recommend prioritized appointments for coded clinics to meet equity goals or labor groups as determined by the state

- Work with the state to ensure operational readiness to support allocation eligible groups as defined by the state
  - Comorbidities and those with disabilities
  - Eligibility does not mean immediate access due to supply

**Enhanced network**

- Proximity to providers in every community

- Increased access through MCEs that have agreed to vaccinating community members, not just their own members

- FQHCs and other community clinics as trusted providers

- Local independent pharmacies in hard hit areas with limited access,

- Mobile solutions

- Enhanced overage in first HPI quartile zip codes

- Extended hours and onsite solutions for some groups
We are Developing Clear Ways to Measure Our Progress

Who is receiving doses?

Distribution of eligibility, willingness, and dose administration as of 3/16, by HPI quartile, M

<table>
<thead>
<tr>
<th>HPI Quartile 1</th>
<th>HPI Quartile 2</th>
<th>HPI Quartile 3</th>
<th>HPI Quartile 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population willing to be vaccinated as of 3/16, %</td>
<td>59.1</td>
<td>56.5</td>
<td>58.5</td>
</tr>
<tr>
<td>Population willing to be vaccinated as of 1/25, %</td>
<td>38.4</td>
<td>46.9</td>
<td>46.9</td>
</tr>
</tbody>
</table>

Most healthy community conditions

Age distribution of California population, by race/ethnicity, M

- White
- Asian
- Multi-race
- AI/AN
- Latino
- Black
- NHPI

% of total vaccines administered

Total vaccines administered, by race/ethnicity, %

- % of California population
- % of vaccine administered

1. Native Hawaiian and other Pacific Islander
2. American Indian / Alaskan Native

Data Will Also Inform Where We Add Supports to Ensure Equitable Access

Where are doses being allocated?

<table>
<thead>
<tr>
<th>Number of doses allocated by HPI quartile, thousands</th>
<th>Quartile 1</th>
<th>Quartile 2</th>
<th>Quartile 3</th>
<th>Quartile 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>100% =</td>
<td>XX</td>
<td>XX</td>
<td>XX</td>
<td>XX</td>
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</table>

Illustrative – data TBD

<table>
<thead>
<tr>
<th>03/22</th>
<th>03/29</th>
<th>04/05</th>
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<tbody>
<tr>
<td>XX%</td>
<td>XX%</td>
<td>XX%</td>
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<td>XX%</td>
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</tbody>
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In which HPI quartiles are different types of provider sites located?

Contracted provider sites, by HPI quartile of site location

- CHC/FQHC
- Local provider + Medical group
- MCE
- Pharmacy

Illustrative – data TBD

To which HPI residents are providers located in HPI quartile 1 serving vaccine?

<table>
<thead>
<tr>
<th>HPI quartile of individuals receiving doses from HPI Quartile 1 providers, by provider type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quartile 1 Residents</td>
</tr>
</tbody>
</table>

Illustrative – data TBD

1. Includes Core, Wave 1, Wave 2, Wave 3 providers who have completed or are ready for onboarding. Excludes Optum sites and correctional services where information hours was incomplete or missing. Source: TPA contracting team, IIS data as of 3/15/2021, Master Provider List.
We are Collaborating to Meet the Needs of Communities

State Equity Goals
- Eligibility
- Equity Framework
- Allocation
- Methodology

Local Health Jurisdiction Equity Plans
- Equity plans
- Local provider network insight
- Community partnership

Third Party Administrator
- Allocation recommendations
- Network adequacy
- Data and reporting

Access Supports
- Navigators
- Language
- Extended Hours
Update on Community Engagement and Outreach Efforts

Marcela Ruiz, CDSS
Martha Dominguez, CDPH
Martha E. Dominguez MPH, PhD, MCHES, CLC
California Department of Public Health
Research Framework: Attitudes and Beliefs

Qualitative

- Literature Review
- Stakeholder In-Depth Information Interviews (15)
- Dyad & Triad Generation Online Sessions (12)
- Online Discussion Boards (105 individuals)
- Multi-ethnic Focus Groups (7 groups)

Quantitative

- Monthly Tracking Survey (12 monthly waves)
Quantitative: Tracking Survey

- The tracking survey: (1) Pre-Campaign Benchmark (Wave 0) followed by twelve (12) monthly waves

**The type of survey questions:**
- Direct question on likelihood of getting vaccinated.
- Indirect questions about COVID-19 and vaccines, to gauge truthfulness of answer to direct question on likelihood of getting vaccinated.

- Surveys are conducted online and via telephone to ensure coverage of harder-to-reach residents.
- A minimum sample size of 1200 participants in primary three regions in California: northern, central, and southern.

**What we learned:**
- Measures will allow us to track shifts in vaccine hesitancy throughout the year.
- Measures will be provided for 1) the California population as a whole and 2) for specific sub-populations. The sub-populations were selected based on findings from general studies of vaccine hesitancy and studies specific to the COVID-19 vaccines. The sub-populations are:
  - Black / African American
  - Asian / Pacific Islander
  - English-dominant and bilingual Hispanic
  - Spanish-dominant Hispanic
Research: Factors Empowering Communities to Get Vaccine

- Trust
- Have The Right Messenger
- Disseminate Information
- Humanize Lived Experiences
"Let's Get to ImmUnity" will meet people where they are and offer answers (and reassurance) in relevant, digestible forms.

Creative testing results

- In a survey that included in-language and priority audiences, we found that “Let’s Get to Immunity” performed very well against key success metrics.
- Survey respondents clearly took away that the vaccine is safe and effective, and perhaps even more promising, they reported feeling understood, informed, and ultimately motivated to get the vaccine.
- The findings validated the insights that informed the work, including how important it is for each audience group to see themselves and people like them represented in the vaccine development and rollout process.
Multicultural. Latino, API Creatives

Digital, OOH, Print Etc.
Anthem Radio

It’s okay to have hope

-Multicultural airing statewide
Farmworker Testimonial

Right now I only feel a little pressure in my arm but everything else is good.
Johnson & Johnson Vaccine Coverage

Outreach to all multiethnic primary and secondary media markets in California, including Black/African American, Asian American and Pacific Islander, and Spanish-language media outlets.

Vaccine Q & A: FOX26 News asks a local doctor your questions about COVID-19 Vaccines
Fox 26 Fresno
March 8, 2021
Dr. Trinidad Solis
Dr. Trinidad Solis, Fresno County Department of Public Health, is supporting state efforts to get the word out that all three vaccines are safe and highly effective, and Californians should get the one available to them as soon as they’re eligible.

Sac State’s chair of nursing: Get whatever COVID-19 vaccine is offered to you
Fox 40 Sacramento
March 5, 2021
Dr. Tanya Altmann
“The real key point that we want to point out is whatever vaccine is offered to you, is to take it and to get it,” said Dr. Tanya Altmann. “All three of them are very highly looked at and very highly vetted for their efficacy. And no matter which one you can get, you should be getting it when you can get it.”

Johnson & Johnson Vaccine
Faith 4
March 4, 2021
Language: Korean

Distribucion De Vacunas Johnson & Johnson En El Estado De California
Univision 14
March 3, 2021
Yurina Melara
Language: Spanish
Johnson & Johnson vaccine distribution in California.
Earned Media

Johnson & Johnson Vaccine Coverage: #OneAndDone Media Tour
Last week, more than 30 media outlets across California covered the vaccinations of Dr. Erica Pan, Dr. Nadine Burke Harris, Dr. Mark Ghaly, Dr. Tomas Aragon, Dr. Diana Ramos, and Dr. James Watt during press events in Oakland and Los Angeles. The doctors got the Johnson & Johnson vaccine in a coordinated effort designed to help educate the public that this newer vaccine is safe and effective at preventing severe COVID disease, hospitalization, and death.
On The Record with Governor Gavin Newsom: A Shot in the Arm Against COVID-19 was also placed in 43 ethnic media outlets (African American, AAPI, Native American and Latino) in Sri Lankan, Arabic, Spanish, Vietnamese, Korean, Punjabi, Tagalog and English.
Earned Media

Statewide Ethnic Media Briefings Coverage
A total of 117 confirmed outlets and organizations attended the statewide virtual ethnic media briefings for Black/African American, Asian American Pacific Islander, Latino/Hispanic and Tribal & American Indian/Alaska Native media, held on March 8 – 10, 2021. Another Tribal & American/Alaska Native briefing was held on February 22, 2021.

Doctors urge Asians to get the new coronavirus vaccine as soon as possible
Sing Tao USA
March 10, 2021
Secretary Yolanda Richardson
Language: Chinese
State Government Operations Director Yolanda Richardson attended the Minority Media Services (EMS) Cloud Conference on Tuesday to introduce the state's progress in promoting vaccination to the Asian-Pacific community.

COVID-19 Hospitalizations Decrease as Vaccinations Increase
Los Angeles Sentinel
March 11, 2021
Secretary Yolanda Richardson
“We can see that the case rates [and] hospitalization rates are definitely decreasing as vaccines continue to increase, and we definitely want to see that continue.”

AAPI Ethnic Media Briefing
Chosun Daily
March 9, 2021
Language: Korean
Coverage of the AAPI Ethnic Media Briefing held on March 8, 2021.

Indian health providers continue to combat COVID-19 a year into pandemic
indianz.com
February 23, 2021
During a conference call Monday, representatives from the California Department of Public Health, tribal health advocates and a state epidemiologist described their efforts to curb coronavirus infection rates within tribal communities.
To sign up, email us:
VA58@cdph.ca.gov
Community Outreach Update

- 49 partners through the California Community Foundation announced on February 26th
  - Total State-funded partners: 157
  - List of funded partners can be found at:
    - California COVID-19 Community-Based Outreach Campaign: Community-Based Organizations funded by The Center at Sierra Health Foundation
    - California COVID-19 Community-Based Outreach Campaign: Community-Based Organizations funded by California Community Foundation
    - https://www.shfcenter.org/assets/LWDA_Funding_Awards_020321.pdf

- On-boarding for Cohort #2 partners March 17-19

- As of mid February 180+ organizations funded through public-private partnership with Public Health Institute, and grants continue to be made on a rolling basis

- Collectively $52.7 million in public-private partnership with the California Community Foundation, the Center at Sierra Health Foundation, the Public Health Institute and the State of California has supported 337 CBOs for COVID outreach and education statewide
# Community Outreach Activities

<table>
<thead>
<tr>
<th>Reported Activity</th>
<th>Total People Reached</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone Banking</td>
<td>20,029</td>
</tr>
<tr>
<td>Door-to-Door Outreach</td>
<td>8,284</td>
</tr>
<tr>
<td>Text Banking</td>
<td>1,300</td>
</tr>
<tr>
<td>One-to-One Messaging</td>
<td>3,382</td>
</tr>
<tr>
<td>One-to-One Email</td>
<td>1,006</td>
</tr>
<tr>
<td>Email Newsletter</td>
<td>9,169</td>
</tr>
<tr>
<td>Booths and Tabling</td>
<td>7,007</td>
</tr>
<tr>
<td>Community Canvassing</td>
<td>18,705</td>
</tr>
<tr>
<td>Trainings (digital or in-person)</td>
<td>850</td>
</tr>
<tr>
<td>Events / Meetings (digital or in-person)</td>
<td>12,052</td>
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<table>
<thead>
<tr>
<th>Reported Activity</th>
<th>Total Activities/Posts/Events</th>
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</thead>
<tbody>
<tr>
<td>Booths and Tabling</td>
<td>154</td>
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<tr>
<td>Community Canvassing</td>
<td>195</td>
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<tr>
<td>Trainings (digital or in-person)</td>
<td>29</td>
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<tr>
<td>Events / Meetings (digital or in-person)</td>
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<td>Social Media Posts</td>
<td>363</td>
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<td>Mass Text / WhatsApp Message</td>
<td>102,443</td>
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<tr>
<td>Radio</td>
<td>10</td>
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<tr>
<td>Other Media Appearance</td>
<td>20</td>
</tr>
<tr>
<td>Mailers</td>
<td>36,298</td>
</tr>
<tr>
<td>Door-to-Door Outreach</td>
<td>5,016</td>
</tr>
</tbody>
</table>
Community Outreach - Vaccine

In collaboration with the State, County, and clinics:

- **Hosting** vaccine sites
- Supporting **enrollment** through My Turn or other processes
- Supporting with **wrap around services** including transportation, on-site registration, interpretation
- **Referring** individuals to vaccine sites
Share Your Insights

- What are the most effective strategies you have identified to connect individuals with the vaccine?

- What supports are most necessary to make sure someone who receives an appointment shows up for the vaccine?
Closing Comments

• Next Meetings
  • April 14, 2021 from 3:00 – 5:00/6:00pm TBD
  • May 12, 2021 from 3:00 – 5:00/6:00pm TBD

• Agenda for Next Meeting

• How to Make Public Comment: COVID19VaccineOutreach@cdph.ca.gov

• Adjourn