



COVID-19 Special Edition: Revisiting Vaccinations – Are We There Yet?

This meeting will be recorded and will be available at www.fmda.org/journalclub.php



FMDA Journal Club

March 3, 2021

Leslie Beth Eber, MD, CMD – Special Guest

Diane Sanders-Cepeda, DO, CMD – Host

Agenda

- COVID-19 State of the State
- Revisiting Vaccinations – Are We There Yet?
- Open Discussion

COVID-19 Dashboard by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University (JHU)



Global Cases
28,719,998

Cases by Country/Region/Sovereignty

28,719,998 US

11,139,516 India

10,646,926 Brazil

4,230,707 Russia

4,200,717 United Kingdom

3,843,241 France

3,130,184 Spain

2,955,434 Italy

2,723,316 Turkey

2,466,447 Germany

2,259,599 Colombia

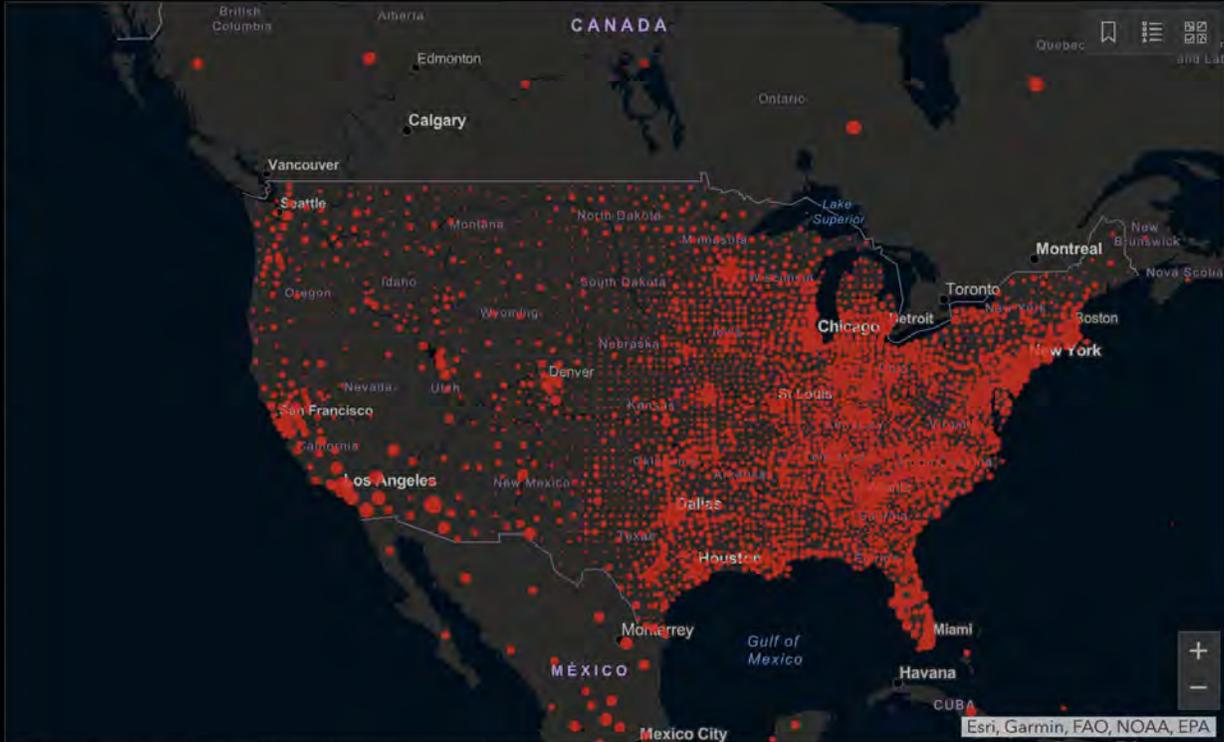
2,118,676 Argentina

2,097,194 Mexico

1,735,406 Poland

Admin0 Admin1 Admin2

Last Updated at (M/D/YYYY)
3/3/2021, 8:24 AM



Cumulative Cases Active Cases Incidence Rate Case-Fatality Ratio Testing Rate

192
countries/regions

Lancet Inf Dis Article: [Here](#). Mobile Version: [Here](#). Data sources: [Full list](#). Downloadable database: [GitHub](#), [Feature Layer](#).
Lead by JHU CSSE. Technical Support: [Esri Living Atlas team](#) and [JHU APL](#). Financial Support: [JHU](#), [NSF](#), [Bloomberg Philanthropies](#) and [Stavros Niarchos Foundation](#). Resource support: [Slack](#), [Github](#) and [AWS](#).

Global Deaths
516,618

516,618 deaths US

US State Level
Deaths, Recovered

52,798 deaths, **recovered**
California US

47,818 deaths, **recovered**
New York US

44,186 deaths, **2,441,822 recovered**
Texas US

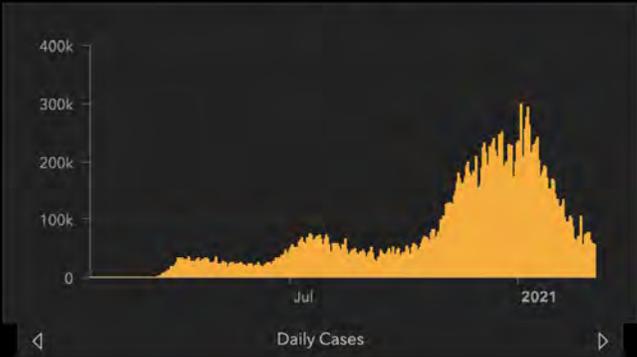
31,135 deaths, **recovered**
Florida US

24,062 deaths, **851,608 recovered**
Pennsylvania US

23,321 deaths, **recovered**

Global Deaths

US Deaths, Recovered



Daily Cases



Florida's COVID-19 Data and Surveillance Dashboard

Florida Department of Health, Division of Disease Control and Health Protection

Select a County



Total Cases

1,918,100

Cumulative Data for Florida Residents:

Positive Residents

1,882,865

Resident Hospitalizations

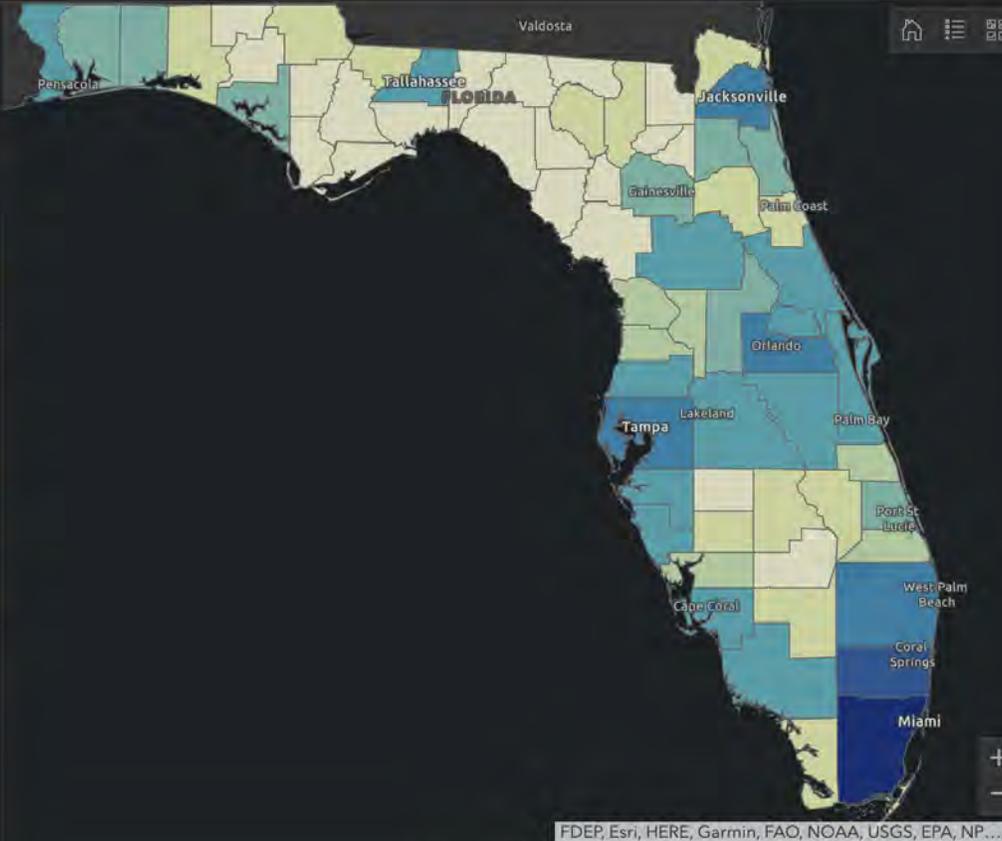
79,731

Florida Resident Deaths

31,135

Non-Resident Deaths

561



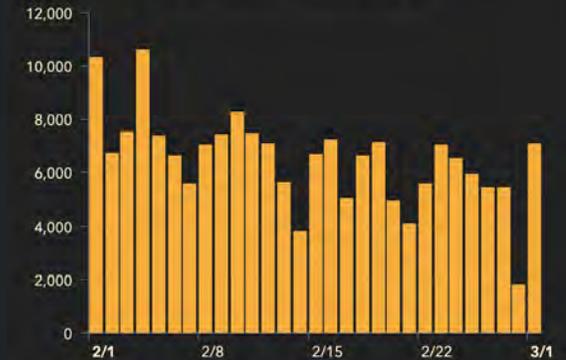
Data updated Daily

Comparison of counties is not possible because case data are not adjusted by population.

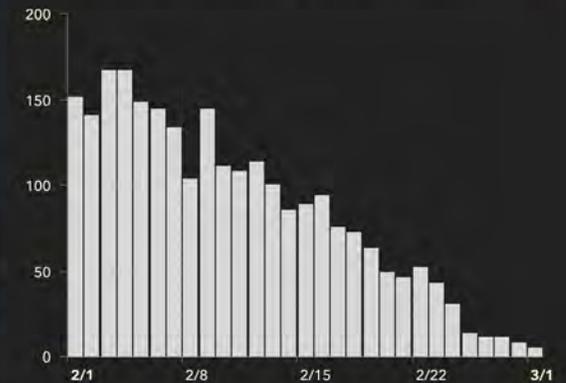
[Click here to access and download data](#)

Recent Data for Florida Residents (Last 30 Days):

New Cases of Residents by Day



Resident Deaths by Date of Death



The Deaths by Day chart shows the total number of Florida residents with confirmed COVID-19 that died on each calendar day (12:00 AM - 11:59 PM). Death data often has significant delays in reporting, so data within the past two weeks will be updated

- Florida Cases
- Florida Testing
- Cases by County
- Rates Map
- Case Maps
- Cases by Zip Code
- Health Metrics
- USA and World



COVID-19 Vaccinations in the United States

Overall US COVID-19 Vaccine | Deliveries and Administration; Maps, charts, and data provided by the CDC, updated daily by 8 pm ET[†]
 Represents all vaccine partners including jurisdictional partner clinics, retail pharmacies, long-term care facilities, Federal Emergency Management Agency and Health Resources and Services Administration partner sites, and federal entity facilities.

Total Vaccine Doses		People Vaccinated		
			Receiving 1 or More Doses	Receiving 2 Doses
Delivered	102,353,940	Total	51,755,447	26,162,122
Administered	78,631,601	% of Total Population	15.6%	7.9%
Learn more about the distribution of vaccines.		Population ≥ 18 Years of Age	51,708,435	26,144,667
		% of Population ≥ 18 Years of Age	20.3%	10.2%
Read more about how these data are reported.				

CDC | Data as of: Mar 02 2021 6:00am ET | Posted: Mar 2 2021 12:26PM ET

- View:** Total Doses People
- Show:** Administered Delivered
- Metric:** Count Rate per 100,000
- Population:** Total Population Population ≥ 18 Years Of Age

This shows the number of doses administered within the state or territory for every 100,000 people of the total population. It does not reflect the residency of the person receiving the vaccine, but where they received it.

Total Doses Administered Reported to the CDC by State/Territory and for Select Federal Entities per 100,000 of the Total Population

Janssen COVID-19 Vaccine

[f Share](#)[t Tweet](#)[in LinkedIn](#)[✉ Email](#)[🖨 Print](#)

On February 27, 2021, the U.S. Food and Drug Administration issued an emergency use authorization (EUA) for the third vaccine for the prevention of coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The EUA allows the Janssen COVID-19 Vaccine to be distributed in the U.S. for use in individuals 18 years of age and older.

[Fact Sheets and Additional Information](#)

[Coronavirus](#) [U.S. map](#) [World map](#) [Vaccine tracker](#) [Vaccine FAQ](#) [Variants FAQ](#) [Coronavirus Living](#) [Symptoms](#)

Health

Merck will help make Johnson & Johnson coronavirus vaccine as rivals team up to help Biden accelerate shots

The administration also brokered a commitment to round-the-clock production of the vaccine to speed manufacturing.



The bridge to possible

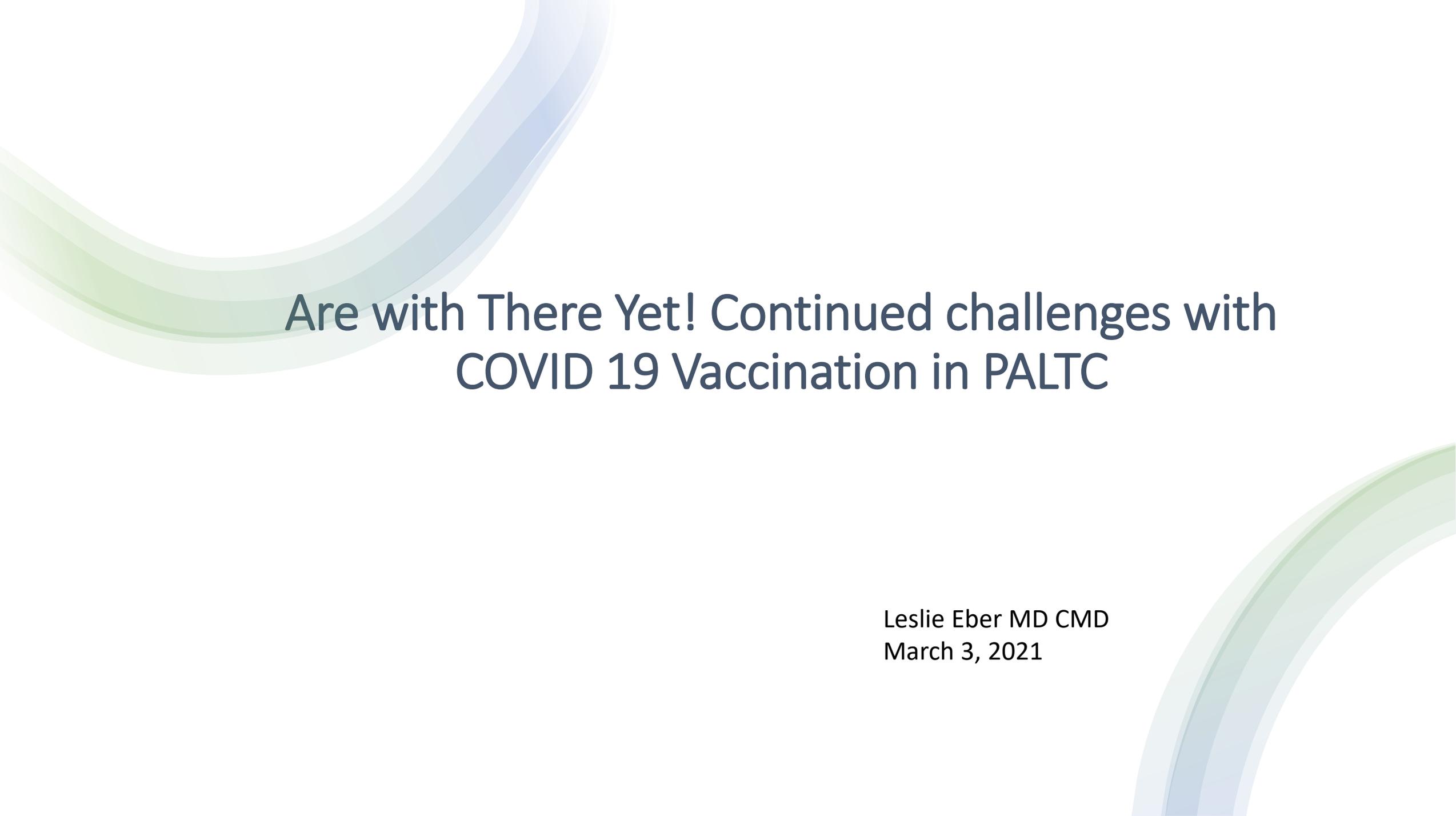
Cisco Intersight
Rethink cloud operations

Take control of your always-on, hybrid environment.

[Learn more](#)

Revisiting Vaccinations – Are We There Yet?





Are with There Yet! Continued challenges with COVID 19 Vaccination in PALTC

Leslie Eber MD CMD
March 3, 2021

COVID-19 Vaccine Education in Post-Acute and Long-Term Care: Next steps

- Many people now know others who have had the COVID- 19 vaccine and are hearing about their experiences
- MMWR published on February 5th, reported a median of 37.5% of Staff in PALTC who were offered the COVID 19 vaccine in the first month of the federal program chose to receive it
- COVID-19 vaccine education needs to be relevant, up-to-date and address current concerns:
 - The COVID-19 variants
 - Anaphylaxis
 - Intervals between doses

The Key ingredient is Trust

- It is the day to day lived experience that engenders trust
- People are not only looking for information, they are also looking for affirmation
- People want to feel that they are seen, heard and respected
- Who are the trusted messengers?
- “Maybe they do not have my best interests at heart?”
- Demonstrate that you care about the person and their concerns

What Hinders Trust?

- **Previous inconsistencies in COVID-19 information**
 - Masks, Hydroxychloroquine
- **News/Social Media giving equal weight to different opinions**
- **Lack of transparency during the pandemic—at a local and national level**
- **The wrong message**
 - One personal story about a negative experience may resonate more than the positive experiences of millions
- **Abstraction**
 - If specific questions and details are not shared, people will fill in the gaps with information found elsewhere, leading to inaccurate messages that cause and spread confusion
- **Facility Culture**
 - Having an open and transparent culture at the facility level is key in order to build trust. Without this, trust will be limited.



Principals to Increase Trust and Acceptance of the COVID-19 Vaccine

Work within people's identities and moral values

- People are unlikely to do something unless it is consistent with their values
- Find the **common ground** between what you hope to achieve and what matters to them
- Rather than investing time into messages to try to convince people otherwise, it's worthwhile to understand what others see as right and wrong and to connect with what's most important to them

Guide to COVID-19 vaccine communications,
https://covid19vaccinescommunicationprinciples.org/wp-content/uploads/2020/11/vaccine-principles_v16.pdf

Timing Matters

- People tend to believe the ideas they hear first
- Sharing new content about the COVID-19 vaccines is helpful and can lead to credibility
 - Is the vaccine effective against all the new variants?
- What is the current local reality?
 - We know variants are in many other states
 - What are the current COVID-19 positivity trends?
- Repetition is also important
- Repetition is also important (see?).
 - It may take 3-4 separate conversations with someone before they feel comfortable about getting the vaccine. Never give up!



Let's Talk about the Messenger

- Messengers need to have a history of trust within the facility
- Trusted lay leaders
 - CNAs, Nurses
 - Role Models
- Who are your influencers?
- Community leaders, such as local faith and spiritual leaders, community advocacy groups, etc.
 - An opportunity to protect each other
- Most people want to receive their information about COVID-19 vaccine from people in their community, people they know and trust

Let's Talk about the Message



- Provide concrete, valuable information
- Avoid underestimating what people can understand
- Build your message around specific and common questions
- Flip the message from “Negative” to “Positive”
 - Control
 - Choice – It is an opportunity
 - Regret
- Provide specific details
- Open the communication with a question: “What would you like to know more about?”

Guide to COVID-19 vaccine communications,
https://covid19vaccinescommunicationprinciples.org/wp-content/uploads/2020/11/vaccine-principles_v16.pdf

Most common questions:



- **Always review:** How do we know the vaccine is effective and safe? Was it developed too quickly?
- Why should we trust the vaccine?
- Can the mRNA vaccine be dangerous to me? Can it change my DNA?
- When and how long will I be protected?
- Will I still need to wear a mask?
- What are the expected side effects? What about anaphylaxis?
- What if I've already had COVID-19?
- Does the vaccine cause sterility?
- What about the new variant strains of COVID-19?
- When do I need to get the second dose? Do I need to get the second dose?

It's not only what you say, but how you say it

- It is important to humanize the people you are talking to: it is not a script.
- Meet people where they are. Think about what beliefs and past experiences they are bringing to the table (autism, Guillain-Barré syndrome)
- As Dr. Kimberly Manning says: “Don’t just wag your finger!”
- You don’t have to “seal the deal” (you are not a used car salesman)
- Take your time—it shows you care
 - Practice compassionate listening. True listening is palpable.
 - Don’t be afraid to be quiet. Planned silence allows time for the person to process what you have said and then respond.
- People respond to what they feel - Demonstrate that you care about the person AND their concerns
- Always show respect. These are frontline workers who have risked their lives to do their job
- Build a narrative combining both facts and personal stories
 - Tell your own vaccine story, make it relatable



Community Relationships with Vaccines



- Different communities have different relationships with vaccines
 - Tuskegee
- Decades of mistreatment and exploitation have led to fear and a profound lack of trust
- Talk with the individual—not at them
- Validate their past experience and respect their emotions
- Community leaders and role models can be very influential
- The clinical trials were both racially and ethnically diverse
 - Pfizer: 10% black, 13% Hispanic
 - Moderna: 10% black, 20% Hispanic

Guide to COVID-19 vaccine communications,
https://covid19vaccinescommunicationprinciples.org/wp-content/uploads/2020/11/vaccine-principles_v16.pdf

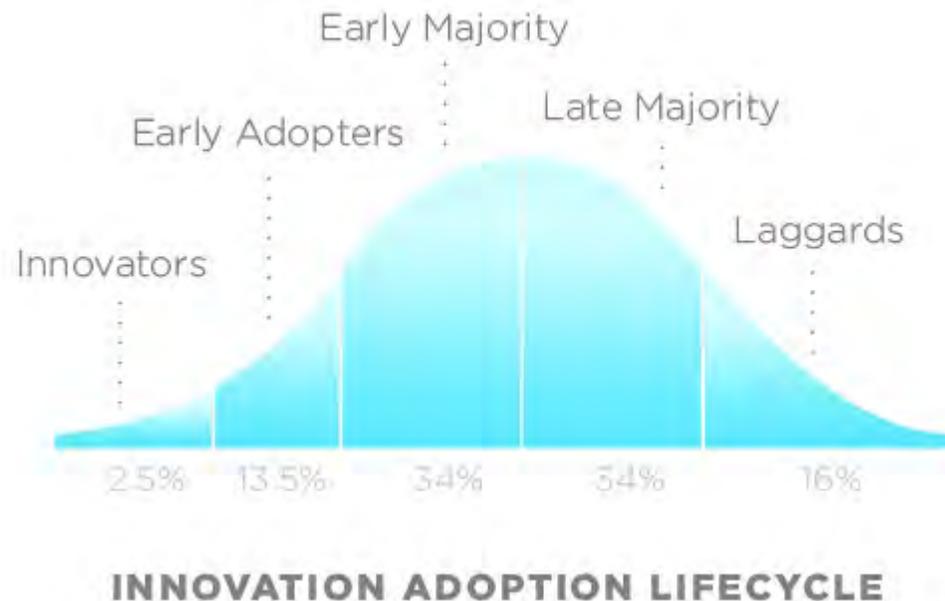
Addressing Social Norms



- Social norms influence human behavior
 - Peer group influence matters
 - Use FOMO (fear of missing out) to your advantage!
- Highlight influencers and role models who are getting the vaccine or have received the vaccine
- Reinforce positive behavior

The Innovation Diffusion Curve

- A fancy way of saying that the more vaccinations that are given to residents and staff, the more people will change their minds about the vaccine.
- Many pragmatists and skeptics will accept vaccine after they see early adopters-change agents - give them a chance. It's a dynamic process!



Addressing Social Media and Medical Misinformation



- Social Media is profoundly influential and has had a significant effect on COVID-19 vaccine hesitancy
- **Strategies to address social media misinformation:**
 - Don't take the misinformation personally
 - Listen first. People want to be heard
 - Show respect
 - Celebrate the fact that the person trusts you enough to have a conversation
 - The goal is not to prove them wrong

How to Address Social Media Misinformation

- Try to assess why the information is speaking to the person
- Take the opportunity to redirect them to more trustworthy information sources and explain to them what we know medically
- Ask them to consider:
 - Where is this information coming from?
 - Is it gaining popularity because it is sensationalized?
 - Is it a fact? Has it been proven?



“Don’t believe everything you read on the Internet just because there’s a picture with a quote next to it.”

—Abraham Lincoln

We Know Films

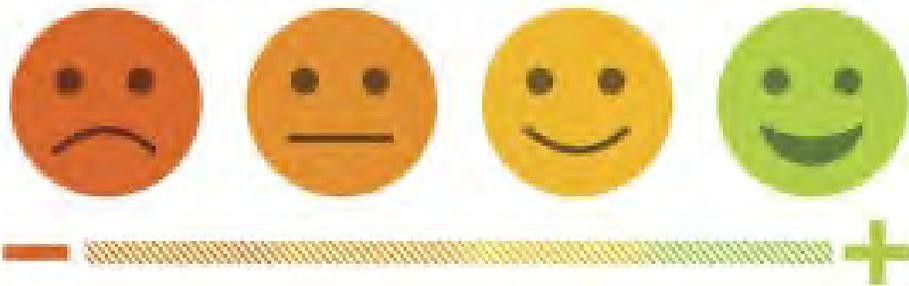
Leading a conversation about what's on social media regarding the COVID-19 vaccine...

- Acknowledge the concern
 - “I see you have been thinking about this a lot”
 - Encourage discussion. Don't shut them down
- Ask Questions
 - “Tell me where you heard about this information”
 - “Do you trust the source?”
- Never be condescending, this is a person who is trusting you to have a conversation. Avoid using strongly negative words like “No” or judgmental responses like “That's crazy!”
- Offer to trade sources. “This is where I get my information...”
- Explain what you know medically and where you found the information
 - “That is a good question, let's talk that through.”
- Again, the point is not to prove them wrong



Evoking Positive Emotions

- Fear immobilizes people, and shame is ineffective
 - No one wants to feel this way, not a pathway to vaccination
- Emotions of Pride, Hope, Parental Love can inspire action
 - Research shows these emotions more predictably lead to action
- A message of Hope
- Positive sense of Self
 - Helping the community
 - Keeping family, residents and coworkers safe
 - Doing our part to end the pandemic
- A pathway to get our lives back
 - Going out for coffee with a friend in the future



Motives Matter



- **The motives of the information seeker**
 - Fear often leads to actively seeking information
 - Fear of repercussions (health, immigration)
- **The motives of the information sharer**
 - Be transparent and honest about your motives
 - “I hope you get the vaccine because I care about you.”
 - Honesty builds trust
 - Name the issue (such as fear) and don’t ignore it. If you don’t name the issue at hand then you can never move forward in the conversation.

Spread the Word and Make it Fun!!!

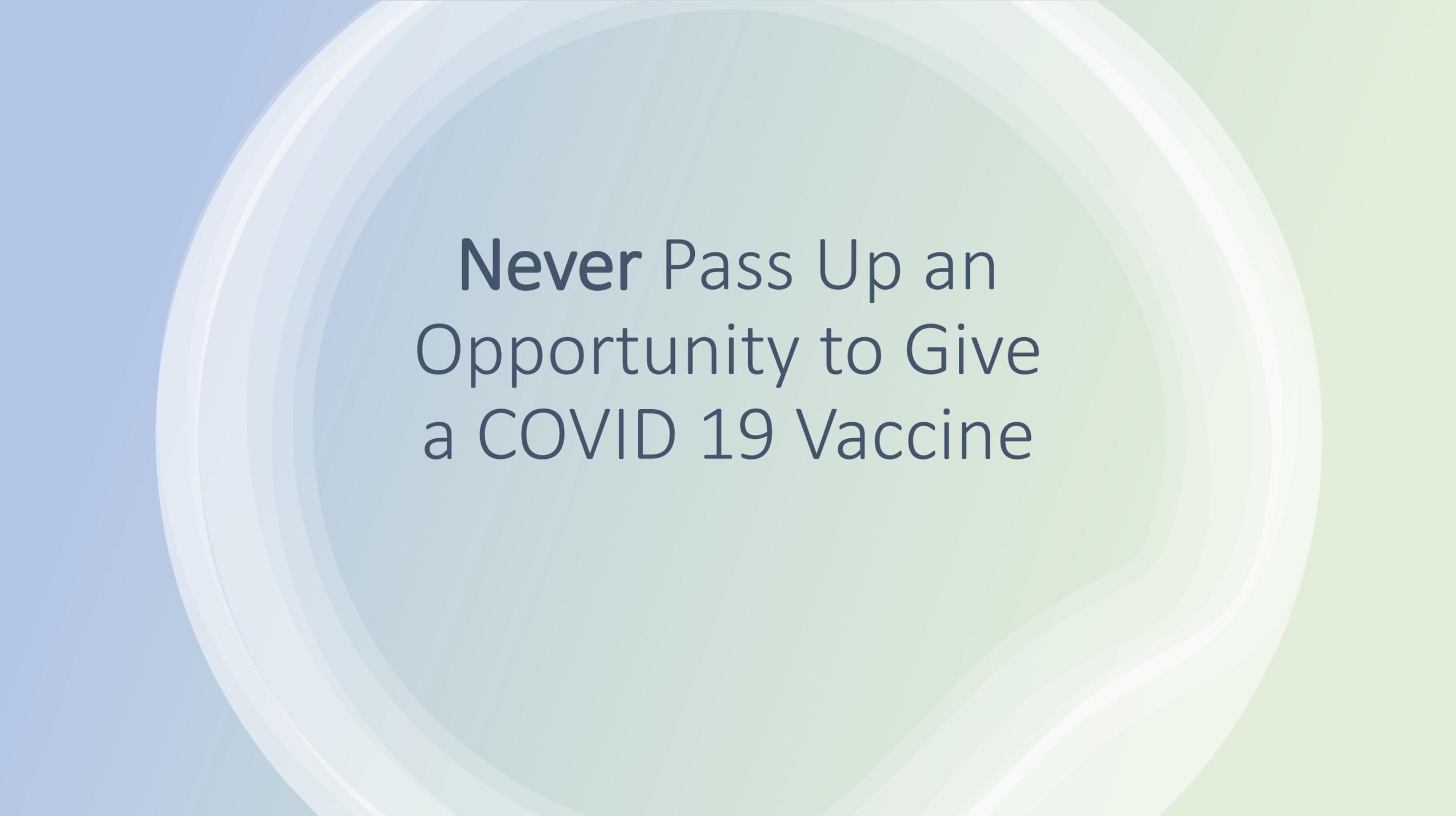
- Encourage role modeling by medical directors, administrators, DON, etc. Post videos of them getting the vaccine on your facility's web page, intranet or on social media; have members of your leadership team get vaccinated during an all-staff meeting.
- Create a celebratory atmosphere around getting the vaccine—hold the vaccine clinics outside if possible, with music, snacks and other giveaways.
- Hand out stickers or buttons that say "I got the COVID-19 Vaccine"
- Create a "Vaccine Wall of Fame" with pictures of staff getting the vaccine and captions that say, "I'm getting vaccinated for...." (my community? my family? my health? my residents?) and ask staff to fill in their reasons.

**I GOT
MY COVID-19
VACCINE!**

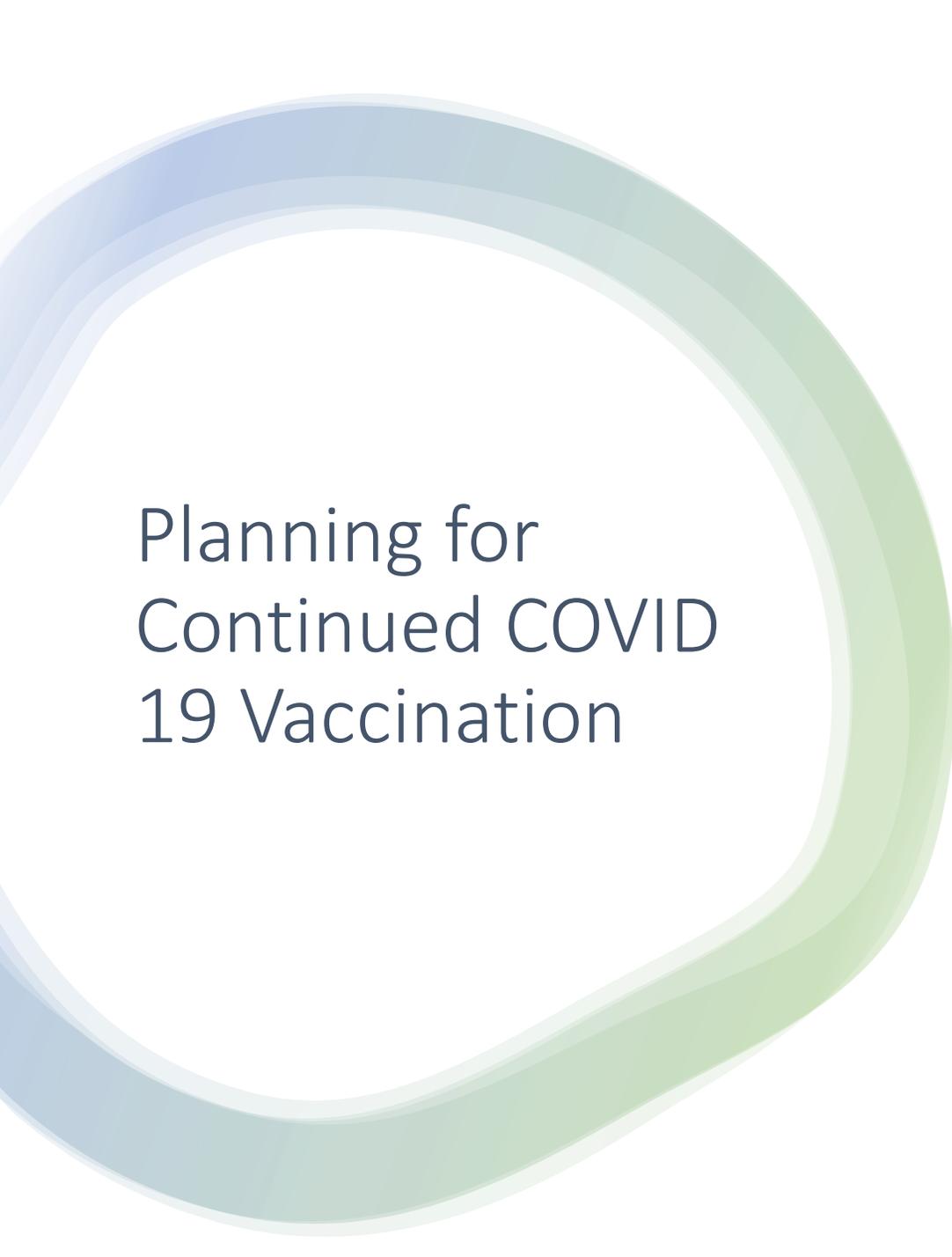


Let's Talk about Continuing COVID 19 Vaccination in PALTC

- AMDA Strategy paper on continued COVID 19 vaccination in PALTC
- CDC reviews 3 Options for PALTC to continue COVID 19 vaccination
 - Partner with a LTC pharmacy that is enrolled as a COVID-19 vaccine provider with their state
 - Partner with a LTC pharmacy that is enrolled as a COVID-19 vaccine provider through the Federal Retail Pharmacy Program for COVID-19 Vaccination.
 - The facility can enroll directly with their state as a COVID-19 vaccine provider.
- Connect with your current LTC Pharmacy and ask questions
- A Bridge Plan for 2nd vaccine inoculations if you have residents/Staff who received a 1st shot during a 3rd clinic



Never Pass Up an
Opportunity to Give
a COVID 19 Vaccine



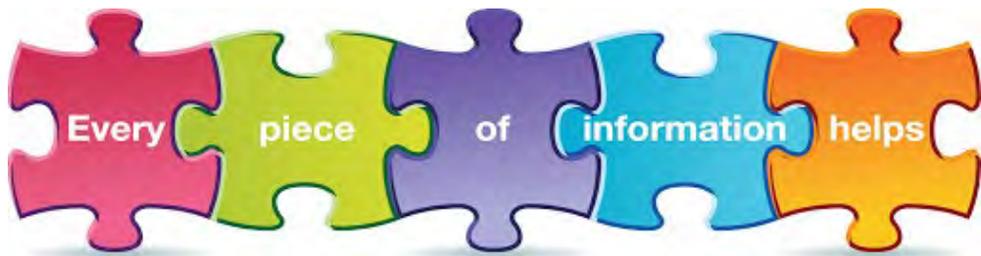
Planning for Continued COVID 19 Vaccination

- Who will give the Vaccination (pharmacist or PALTC Staff)
 - will you be receiving a vial or prefilled syringes
 - 6-hour window for use from first puncture. This will include travel time for Prefilled syringes
- Who will do the reporting?
- Can your new admission get their first vaccine shot in the hospital? Which vaccine, who will oversee and collect this information/Date of vaccine administration
- 1-2 main Vaccination Coordinators to understand the storage/handling/Administration and Reporting Elements
- Obtain Legal Guardian /MDPOA approval before requesting vaccine

What Data is needed for Continued COVID 19 Vaccination

- The below data set will be required by LTC pharmacies providing the COVID 19 vaccine for facility administration.
 - Date/and time administered
 - Race/Ethnicity of recipient (if not collected during consent)
 - Site of Administration (L/R)
 - Area of Administration (Deltoid)
 - Immunizer
 - lot/exp

The Good Stuff: Trusted Tools and Information



- AMDA COVID 19 Vaccine Education Toolkit
https://profile.paltc.org/COVID19-Toolkit?&_ga=2.5424695.560140376.1611562063-1063516187.1604256881&redirected=1
- CDC's Long-Term Care Facility Toolkit: Preparing for COVID-19 Vaccination at Your Facility
<https://www.cdc.gov/vaccines/covid-19/toolkits/long-term-care/index.html>
- AHCA/NCAL Communications Toolkit # GetVaccinated
<https://www.ahcancal.org/News-and-Communications/Pages/GetVaccinated.aspx>

Thank You





Open Discussion





THE FLORIDA SOCIETY
FOR POST-ACUTE AND
LONG-TERM
CARE MEDICINE

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www.fmda.org; www.bestcarepractices.org



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