THE COMMUNITY Collaborative



COMMUNITY COLLABORATIVE SESSION 10/18/2023

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- Please message Temp Tom Dineen, KAI if you have any questions!

Zoom Navigation and Accessibility



English/Spanish Translations



English/Spanish Translations (cont.)



Washington State Department of Health | 5

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WELCOME & INTRODUCTIONS

Agenda

Time Agenda		Speaker/Lead		
3:30– 3:40pm	Welcome & Introductions	Todd Holloway, Senior Independent Living Advocate for the Center for Independence, Thought Partner for the Community Collaborative		
	KAI Accessibility Slides	Tom Dineen, KAI Tech Support		
3:40- 3:45pm	Land Acknowledgement	Todd Holloway, Senior Independent Living Advocate for the Center for Independence, Thought Partner for the Community Collaborative		
3:45-4:35pm	Respiratory Virus Season and Immunizations: Updates from DOH	Jamilia Sherls-Jones, Director Office of Immunizations DOH Heather Drummond, COVID-19 Vaccine Director DOH		
4:35-4:55pm	Defining Disability– Access Functional Needs	Todd Holloway, Senior Independent Living Advocate for the Center for Independence, Thought Partner for the Community Collaborative		
4:55 – 5:00pm	Close out & Next Steps	Todd Holloway, Senior Independent Living Advocate for the Center for Independence, Thought Partner for the Community Collaborative		

Land & Labor Acknowledgement Part 1

The Community Collaborative would like to acknowledge that we are currently living on the traditional territories of Coast Salish people and other Native peoples who have lived here for many generations and who continue to be systematically erased by policies and practices that remove their histories from this place. We acknowledge and honor the sovereignty of Indigenous peoples in the US continent and in the U.S. Island Territories over their languages, cultures and lands and will collectively labor to center Indigenous humanity and their continued struggles for justice in stewarding the health and wellness of their communities.

Land & Labor Acknowledgement Part 2

We also would like to acknowledge this country has been made possible by the labor of enslaved African peoples and their descendants who suffered the horror of trafficking, slavery, Jim Crow, imprisonment, police brutalities and many other harms we continue to see today through anti-Black sentiment. We recognize the history of Washington State as complicit with the racist ideology of white supremacy. They persist in present-day racial realities privileging Whites while oppressing BIPOC communities. We are committed to uplifting the voices, experiences and histories of Indigenous and descendants of enslaved people's contributions.





RESPIRATORY VIRUS SEASON AND IMMUNIZATION UPDATES

JAMILIA SHERLS-JONES, DNP, MPH, RN, CPN, CDP HEATHER DRUMMOND, MPH

Office of Immunization & COVID-19 Vaccine Program

October 18, 2023



- Flu vaccine
- RSV vaccine for adults <u>>60 y/o & for pregnant persons</u>
- RSV nirsevimab immunization for infants
- COVID-19 vaccine
- Discussion

FLU VACCINE UPDATES

Age-adjusted Influenza-associated hospitalization rates* among adults aged \geq 18 years, by race and ethnicity – Influenza-Associated Hospitalization Surveillance Network, **United States**, 2009-10 through 2021-22**





Source: Black CL, O'Halloran A, Hung M, et al. *Vital Signs*: Influenza Hospitalizations and Vaccination Coverage by Race and Ethnicity—United States, 2009–10 Through 2021–22 Influenza Seasons. MMWR Morb Mortal Wkly Rep 2022;71:1366–1373. DOI: <u>http://dx.doi.org/10.15585/mmwr.mm7143e1</u>

Influenza (Flu)

- Contagious respiratory illness caused by the influenza virus
- Can be mild or severe and even lead to death
- Common symptoms: fever/chills, cough, sore throat, runny nose, body aches, fatigue
- A number of tests are available to diagnose flu
- Flu is different from COVID-19
 - Caused by different viruses
 - Less contagious than COVID
 - Less likely to cause severe illness (though both can!)
 - Treatments & vaccines are different

Flu Symptoms & Diagnosis | CDC

Similarities and Differences between Flu and COVID-19 | CDC

Vaccinated with at least one Flu Dose

among Washington state residents during the 2022-2023 flu season



Data Source: WA State Immunization Information System

This graph shows Washington IIS data which could differ from other reported flu coverage estimates, including those produced by CDC.

Flu Vaccines at a Glance (wa.gov)

2023-2024 STATE SUPPLIED CHILDHOOD FLU VACCINES AT-A-GLANCE					
Characteristic	Fluzone Quad	Fluzone Quad, PF	FluLaval Quad, PF	Flucelvax Quad, PF	FluMist Quad, PF
Product Name	Fluzone [®] 5.0mL MDV (ages 3+ years) '23-24	Fluzone® 0.5mL PFS (ages 6+ months) '23-24	FluLaval® 0.5mL PFS (6+ months) '23-24	Flucelvax [®] 0.5mL PFS (ages 6+ months) '23-24	FluMist [®] 0.2mL sprayer (ages 2-49 years) '23-24
Vaccine Name	influenza, injectable, quadrivalent	Influenza, injectable, quadrivalent, preservative free	influenza, injectable, quadrivalent, preservative free	Influenza, injectable, MDCK, preservative free, quadrivalent	influenza, live, intranasal, quadrivalent
Formulation	5.0mL multi-dose vial, contains preservative	0.5mL single dose, pre-filled syringe, preservative free	0.5mL single dose, pre-filled syringe, preservative free	0.5mL single dose, pre-filled syringe, preservative free	0.2ml single dose sprayer, preservative free
Manufacturer	Sanofi	Sanofi	GlaxoSmithKline	Seqirus	MedImmune
CPT/CVX Codes	90688/158	90686/150	90686/150	90674/171	90672/149
NDC Number	49281-0639-15	49281-0423-50	19515-0814-52	70461-0323-03	66019-0310-10
Age – Licensure	6+ mos	6+ mos	6+ mos	6+ mos	2-49 years
State Eligibility	3-18 years	6 mos-18 years	6 mos-18 years	6 mos-18 years	2-18 years
Storage	Refrigerated, 36°F - 46°F (2°C - 8°C)	Refrigerated, 36°F - 46°F (2°C - 8°C)	Refrigerated, 36°F - 46°F (2°C - 8°C)	Refrigerated, 36°F - 46°F (2°C - 8°C)	Refrigerated, 36°F - 46°F (2°C - 8°C)

Egg Allergy—Update for 2023–2024

- All people aged ≥6 months with egg allergy should receive influenza vaccine.
- Any influenza vaccine (egg based or non-egg based) that is otherwise appropriate for the recipient's age and health status can be used.
- No recommendations for specific vaccines or vaccination setting.
- Egg allergy in and of itself necessitates no additional safety measures for influenza vaccination beyond those recommended for any recipient of any vaccine, regardless of severity of previous reaction to egg.
 - All vaccines should be administered in settings in which personnel and equipment needed for rapid recognition and treatment of acute hypersensitivity reactions are available.

Clinical Outreach and Communication Activity Webinar Preparing for the Upcoming Respiratory Virus Season: Recommendations for Influenza, COVID-19, and RSV Vaccines

Influenza Vaccination of Persons Aged ≥65 Years

- Adults aged ≥65 years should preferentially receive any one of the following higher dose or adjuvanted influenza vaccines:
 - Quadrivalent high-dose inactivated influenza vaccine (HD-IIV4),
 - Quadrivalent recombinant influenza vaccine (RIV4), or
 - Quadrivalent adjuvanted inactivated influenza vaccine (aIIV4).
- If none of these three vaccines is available at an opportunity for vaccine administration, then any other age-appropriate influenza vaccine should be used.
- Vaccination of older adults in July and August should be avoided unless later vaccination might not be possible.
 - Due to potential waning of immunity.

<u>Clinical Outreach and Communication Activity Webinar Preparing for the Upcoming</u> <u>Respiratory Virus Season: Recommendations for Influenza, COVID-19, and RSV Vaccines</u>

- Fall Flu Media Campaign "Flu Free Washington" (<u>http://flufreewa.org</u>)
- Respiratory Illness Data Dashboard: <u>Respiratory Illness Data Dashboard</u>
 <u>Washington State Department of</u> <u>Health</u>
- Influenza Vaccination Data | Washington State Department of Health

Washington State Department of Health @

It's time to get your yearly flu vaccine!

The flu vaccine is the best option for keeping your family, workplace, and community flu-free. We recommend a yearly flu vaccination for everyone six months and older, including pregnant and lactating people and people at higher risk for flu-related complications.

The flu vaccine takes 2 weeks to be effective. It is best to get yours before the end of October, when flu activity usually starts to increase.

Most insurance plans, including Apple Health and Medicare part B, cover the cost of flu vaccine for adults. In Washington, all children under age 19 get flu vaccines at no cost. Learn more at https://FluFreeWA.org



Resources

- <u>ACIP Influenza Vaccine Recommendations | CDC</u>
- <u>CDC webinar Preparing for the Upcoming Respiratory Virus Season:</u> <u>Recommendations for Influenza, COVID-19, and RSV Vaccines for</u> <u>Older Adults</u>
- Immunization Schedules for Healthcare Professionals | CDC
- Flu Vaccines at a Glance (wa.gov)
- Ask the Experts: Influenza Vaccines (immunize.org)
- Flu Overview | Washington State Department of Health
- <u>2023-24 Flu Updates Webinar | Washington State Department of Health</u>

RSV VACCINE F<u>OR</u> OLDER ADULTS

Respiratory Syncytial Virus (RSV)

- Common respiratory virus that usually causes mild, cold-like symptoms
- Symptoms: runny nose, decrease in appetite, coughing, sneezing, fever, wheezing
- Spread by close contact with others and touching infected surfaces
- Infants and older adults more likely to develop severe RSV and need hospitalization



RSV (Respiratory Syncytial Virus) | CDC

New Immunizations to Protect Against Severe RSV

6

	Who Does It Protect?	Type of Product	Is It for Everyone in Group?			
B	Adults 60 and over	RSV vaccine	Talk to your doctor first			
	Babies	RSV antibody given to baby	All infants entering or born during RSV season. Small group of older babies for second season.			
E.	Babies	OR RSV vaccine given during pregnancy	Can get if you are 32–36 weeks pregnant during September–January			
www.cdc.gov/rsv						

Update on RSV and New Vaccine Recommendation | CDC

RSV Vaccination Recommendations

 ACIP and CDC recommend that adults ages 60 years and older may receive a single dose of RSV vaccine using shared clinical decision making.



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https://www.cdc.gov/mmwr/volumes/72/wr/mm7229a4.htm
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RSV Vaccination in Adults 60 years and Older (cdc.gov)

Chronic Underlying Medical Conditions Associated with Increased Risk of Severe RSV Disease





RSV Vaccination in Adults 60 years and Older (cdc.gov)



- New version of V-safe developed starting Summer 2023
 - Leverages existing CDC IT infrastructure
 - Includes email and text messaging options
 - First use for RSV vaccines received by persons aged 60 and older
 - Use for maternal RSV vaccines planned for later this fall

V-safe objectives:

- 1. Characterize local and systemic reactogenicity during days 0-7 after vaccination
- 2. Characterize health impacts during a 6-week post-vaccination follow-up period
- 3. Identify participants who report medically attended events after vaccination and encourage completion of a VAERS report

Resources

- <u>RSV Vaccination: What Older Adults 60 Years of Age and Over</u> <u>Should Know | CDC</u>
- Frequently Asked Questions About RSV Vaccine for Adults | CDC
- <u>Healthcare Providers: RSV Vaccination for Adults 60 Years of</u> <u>Age and Over | CDC</u>
- <u>ACIP Shared Clinical Decision-Making Recommendations</u>
 <u>CDC</u>
- <u>Respiratory Syncytial Virus | Washington State Department of</u> <u>Health</u>
- <u>CDC webinar RSV Vaccination in Adults 60 years and Older</u>

RSV VACCINE FOR PREGNANT PERSONS AND NIRSEVIMAB FOR INFANTS

Proposed clinical considerations for use of maternal RSV vaccine

- Maternal vaccine recommended for pregnant people during 32 through 36 weeks gestation, with seasonal administration
 - During September through January in most of the continental United States
 - In jurisdictions with seasonality that differs from most of the continental United States (e.g., Alaska, jurisdictions with tropical climates), providers should follow state, local, or territorial guidance on timing of administration
- Maternal RSVpreF vaccine may be simultaneously administered with other indicated vaccinations 1

¹ https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html.

RSVpreF vaccine brand name=ABRYSVO (Pfizer)

Nirsevimab is a passive immunization

- Active immunity results from infection or vaccination, which triggers an immune response
- Passive immunity is when a person receives antibodies from an external source
 - From mother to baby through transplacental or breastmilk transfer
 - Direct administration of antibodies, such as IVIG or monoclonal antibodies

Nirsevimab (brand name Beyfortus), a long-acting monoclonal antibody, is given by injection. The antibody boosts the immune system, adding an extra layer of defense against severe illness from respiratory syncytial virus <u>Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus</u> <u>Disease Among Infants and Young Children: Recommendations of the</u> <u>Advisory Committee on Immunization Practices — United States,</u> <u>2023 | MMWR (cdc.gov)</u>

- Infants aged <8 months born during or entering their first RSV season are recommended to receive one dose of nirsevimab (50 mg for infants <5 kg and 100 mg for infants ≥5 kg)
- Children aged 8–19 months who are at increased risk of severe RSV disease and entering their second RSV season are recommended to receive one dose of nirsevimab (200 mg)

ACIP Meeting Nirsevimab

<u>Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus</u> <u>Disease Among Infants and Young Children: Recommendations of the</u> <u>Advisory Committee on Immunization Practices — United States, 2023 |</u> <u>MMWR (cdc.gov)</u>

Children aged 8–19 months recommended to receive nirsevimab when entering their second RSV season because of increased risk of severe disease

- Children with chronic lung disease of prematurity who required medical support (chronic corticosteroid therapy, diuretic therapy, or supplemental oxygen) any time during the 6-month period before the start of the second RSV season
- Children with severe immunocompromise
- Children with cystic fibrosis who have manifestations of severe lung disease (previous hospitalization for pulmonary exacerbation in the first year of life or abnormalities on chest imaging that persist when stable) or weight-for-length <10th percentile
- American Indian and Alaska Native children

ACIP Meeting Nirsevimab

<u>Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus</u> <u>Disease Among Infants and Young Children: Recommendations of the</u> <u>Advisory Committee on Immunization Practices — United States,</u> <u>2023 | MMWR (cdc.gov)</u>

Timing of nirsevimab for infants born shortly before or during RSV season

- Nirsevimab should be administered within 1 week of birth.
 - Administration can be during the birth hospitalization or in the outpatient setting
- Infants with prolonged birth hospitalizations due to prematurity or other causes should receive nirsevimab shortly before or promptly after discharge

ACIP Meeting Nirsevimab

Proposed recommendations for use of nirsevimab in setting of an available maternal RSV vaccine

- Nirsevimab is recommended for infants aged <8 months born during or entering their first RSV season if
 - Mother did not receive RSV vaccine or unknown if mother received RSV vaccine
 - Mother vaccinated but infant born <14 days after vaccination
- Nirsevimab is not needed for most infants born ≥14 days after maternal vaccination

Circumstances for which nirsevimab can be considered when mother has received RSV vaccine ≥14 days prior to birth

- Nirsevimab can be considered in rare circumstances when, per the clinical judgment of the healthcare provider, the potential incremental benefit of administration is warranted
 - Infants born to pregnant people who may not mount an adequate immune response to vaccination (e.g., people with immunocompromising conditions) or have conditions associated with reduced transplacental antibody transfer (e.g., people living with HIV infection)¹
 - Infants who have undergone cardiopulmonary bypass, leading to loss of maternal antibodies²
 - Infants with substantial increased risk for severe RSV disease (e.g., hemodynamically significant congenital heart disease, intensive care admission and requiring oxygen at discharge)

¹ <u>Palmerira Clin Dev Immunol 2012</u>.² <u>Feltes J Pediatr 2003</u>.
Nirsevimab Implementation in WA

- Washington Vaccine Association has agreed to fund nirsevimab as part of the Childhood Vaccine Program (CVP).
- Participating health care providers will be able to order and administer nirsevimab at no cost to all babies at risk for severe RSV illness.
- Ordering paused due to high demand of nirsevimab
- When ordering resumes:
 - Ordering will be completed in the Washington Immunization Information System (WAIIS).
 - Product should be available in clinics in 1-2 weeks
- Rule change required due to definition of "vaccine" in state law governing the Washington Vaccine Association and universal Childhood Vaccine Program.
- <u>Respiratory Syncytial Virus | Washington State Department of Health</u>

Resources

- <u>ACIP September 22, 2023 Presentation Slides | Immunization</u>
 <u>Practices | CDC</u>
- <u>ACIP Vaccine Recommendations and Schedules | CDC</u>
- Update on RSV and New Vaccine Recommendation | CDC
- <u>CDC Webinar Clinical Guidance for Use of Products to Prevent RSV</u> <u>Disease in Infants</u>
- <u>Use of Nirsevimab for the Prevention of Respiratory Syncytial Virus</u> <u>Disease Among Infants and Young Children: Recommendations of</u> <u>the Advisory Committee on Immunization Practices — United</u> <u>States, 2023 | MMWR (cdc.gov)</u>
- Healthcare Providers: RSV Immunization for Children 19 Months and Younger | CDC





COVID-19 Vaccine Program Update October 18, 2023



Weekly Doses Administered Comparing Past and 2023-2024 COVID-19 Seasons

<u>Respiratory Illness Data Dashboard</u> Washington State Department of Health

Completed Primary COVID-19 Vaccination Series

Up to Date on CDC-Recommended COVID-19 Vaccine Doses

among Washington state residents as of June 30, 2023

among Washington state residents as of June 30, 2023



Data Source: WA State Immunization Information System

Note: Following changes to the CDC vaccine recommendations in April 2023, most individuals 5 years and older no longer need to complete a primary series to be up to date.

COVID-19 Vaccinations in Washington



<u>Respiratory Illness Data Dashboard</u> <u>Washington State Department of Health</u>

Changing Landscape of COVID-19 Vaccines

	Past: Dec 2020 – Sept 2023	Present & future: September 12, 2023
Overview	 Federal government purchased and distributed COVID-19 vaccines for free to any enrolled provider. 	 COVID-19 vaccines are a commercial product. Public health programs obtain and distribute similarly to flu and other vaccines.
Supply Line	Free to any enrolled provider	 Providers can purchase vaccine directly from manufacturers and distributors. Federal government supplies vaccines at no cost for all children (under age 19) via CVP Program, and all under- and uninsured adults (age 19+) via the AVP (Bridge) Programs.
Mobile Services	 Mobile vaccination services (including DOH's Care-A-Van) Mass vaccination pop-up sites across US 	 DOH's Care-A-Van is still operational. Mass Vaccination sites have ended.

New 2023-24 COVID-19 mRNA Vaccines

- Updated Moderna and Pfizer 2023-24 COVID-19 vaccines were approved 9/12.
- Formulated to more closely target currently circulating variants, and to provide better protection against serious consequences of COVID-19, including hospitalization and death.
- Everyone ages 6 months+ are eligible for the updated COVID-19 mRNA vaccines.
- "Up to Date" vaccination status means getting all recommended doses considering patient age and health history, with at least 1 dose of the 2023-24 COVID-19 vaccines.
- Updated CDC vaccination resources:
 - Interim COVID-19 Immunization Schedule (Updated 9/22/2023)
 - COVID-19 Vaccination Recommendations Infographic (Updated 9/20/2023)
 - COVID-19 Vaccination Recommendations Infographic (Immunocompromised) (Updated 9/20/2023)
 - <u>COVID-19 Vaccine Product Information</u> (Updated 9/25/2023)

Novavax, Adjuvanted 2023-24 COVID-19 Vaccine

- Authorized for use in individuals 12 years of age and older
- Dosage:
 - Previously vaccinated: 1 dose of updated Novavax at least 2 months after the last dose of COVID-19 vaccine.
 - Not previously vaccinated: 2 doses of updated Novavax, administered 3 weeks apart.
 - Immunocompromised individuals: Additional doses of updated Novavax may be administered at least 2 months following the last dose of a 2023-24 COVID-19 vaccine, at the discretion of the healthcare provider.
- Only CVS will offer Novavax in the pharmacy arm of Bridge Access Program.
- Fact sheets can be found here:
 - Novavax Fact Sheet for Healthcare Providers
 - Novavax Fact Sheet for Recipients and Caregivers
- Novavax NDC # 80631-0105-02



Simultaneous Administration of COVID-19 and other vaccines

Providers may simultaneously administer COVID-19, influenza, and respiratory syncytial virus (RSV) vaccines to eligible patients.

- <u>The Health Alert Network (HAN) published on September 5, 2023</u> may be consulted for additional information about simultaneous administration of these vaccines.
- There are additional considerations if administering an Ortho poxvirus vaccine and COVID-19 vaccine.
- In accordance with <u>General Best Practice Guidelines for Immunization</u>, routine administration of all age-appropriate doses of vaccines simultaneously is recommended for children, adolescents, and adults if there are no contraindications at the time of the healthcare visit.

Vaccine Delays

- Limited vaccine availability from manufacturers and supply chain constraints are causing significant delays during 2023-24 COVID-19 vaccine and RSV Nirsevimab vaccine rollout.
- As a result, ordering for COVID-19 vaccine and RSV Nirsevimab vaccine products in the WA IIS may only be intermittently available over the next few weeks.
- What this means:
 - Submitted vaccine order requests are subject to reduction or denial until adequate supply is available.
 - We recommend providers to place smaller orders rather than larger ones.
- We anticipate these delays will be over in the next few weeks and greatly appreciate your patience while manufacturers and delivery systems ramp up to full capacity.
- We will continue to share updates about supply in the coming weeks to support our partners and providers.

COVID-19 Vaccine Cost

- Most people will not have out-of-pocket costs for COVID-19 vaccines due to their insurance coverage.
 - Following past vaccine approvals, insurance coverage could take months. However, with COVID-19 vaccines this is NOT the case.
 - "<u>Per CARES Act Section 3203</u> insurance companies are required to provide coverage of COVID-19 vaccines. However, some insurance plans require cost sharing or co-pays. In those cases, the Bridge Access Program covers the cost of COVID-19 vaccination."
 - July 2023, <u>HHS issued guidance</u> to payors to cover COVID-19 vaccination with the onset of commercialization.
- **Children**: All recommended vaccines are available at no cost for children through age 18 via the Childhood Vaccine Program of Washington.
- Uninsured Adult COVID-19 vaccines: Adult Vaccine Program Providers and pharmacies in the Federal Bridge Access Program will provide vaccines at no cost to uninsured and underinsured adults.

How Can the Public Find the Vaccines?

- 1. Health care providers: Most Primary Care Providers and pharmacists can administer all respiratory disease vaccines.
- 2. CVS, <u>Walgreens</u>, and eTrueNorth pharmacy partners.
 - Register for CVS appointments <u>here</u>, and eTrueNorth pharmacy appointments <u>here</u>. They will work with insurance providers to cover the cost of the vaccine.
 - Those who are <u>uninsured or under-insured</u> may qualify for a free vaccination, and the pharmacy team will inform them of this opportunity when they request vaccination.
- **3. CDC website**: Find flu and COVID-19 vaccines on <u>https://www.vaccines.gov/</u> or text ZIP code to GETVAX (438829).
- 4. Federally Qualified Health Centers
- 5. Newly updated <u>Provider Map</u> to find a clinic enrolled in the Childhood Vaccine Program and/or the Adult Vaccine program.
- 6. <u>Care-A-Van Mobile Vaccine Clinic Locations</u>

Find Flu & COVID-19 Vaccines Near You





Care-a-Van

The Care-a-Van is a mobile health clinic that serves people across Washington state.

- Care-a-Van offers
 - All ACIP vaccines for children up to age 19, at no cost.
 - COVID-19, Flu, and Mpox for adults (19+ years of age), currently for under- and uninsured and working to support folks with insurance.
 - Blood pressure testing and blood glucose screening.
 - Naloxone, free of charge.
- Request a DOH Care-a-Van event here: <u>Care-a-Van</u>



Updated COVID-19 Vaccine Resources

Newly Updated General Public Resources:

- <u>Getting Vaccinated to Protect Against COVID-19 Illness</u>
- Pediatric COVID-19 Vaccines What Parents/Guardians Should Know

Newly Updated Resources for Providers and Community Health Workers:

- Health Care Provider Discussion Guide: Novavax
- <u>COVID-19 Vaccines: Pediatric Vaccine Toolkit for Providers</u>
- Provider Discussion Guide
- Discussion Guide for People Experiencing Homelessness
- Discussion Guide for Immigrants and Refugees
- Pregnancy and COVID-19 Vaccine Toolkit
- 2023-2024 COVID-19 Vaccine Product Chart
- <u>COVID-19 Vaccines: Toolkit for Schools</u>





2023-2024 COVID-19 Vaccine Product Characteristics and Information

SEPTEMBER 2023 DOH 349-782

Health Care Provider Peer-to-Peer Webinars

October 18: COVID-19 Disaster Cascade Recovery Updates

November 3: Vaccine Fatigue- Addressing the Elephant in the Room

• Gretchen LaSalle, MD, FAAFP is a board-certified family physician who practices in Spokane.

November 17: <u>Beyond Burnout & Resilience: Purpose and Adaptability for</u> Health Care Providers

December 8: <u>Beyond Burnout & Resilience: Connection and Hope for Health</u> <u>Care Providers</u>

• Kira Mauseth, PhD is a clinical psychologist, senior instructor, and consultant.

All webinars are from 12 to 1PT. Visit POP's webinar page for details on CE credits.







Send additional questions and requests for information to: <u>COVID.Vaccine@doh.wa.gov</u>

Additional Resources

Conference Outreach

Visit POP's table at these upcoming events-



- American Physical Therapy Association
 - October 13 15
- <u>School Nurse Organization of WA</u>
 - October 13 14
- WA State Board of Nursing
 - October 19 20
- ARNP's United
 - October 20 21
- WA State Pharmacy Association
 - November 3 4

COVID-19 Vaccine Newsletter

• The COVID-19 Vaccine Newsletter is a topic people can subscribe to on GovDelivery.

- People can manage their subscriptions by going to the following <u>link</u>.
 - From there, click on 'add subscriptions' at the bottom of the page.

Add Subscriptions

• On the next page, expand the 'Immunizations' tab and check the box for "COVID-19 Vaccine Partner Newsletter."

🖻 🗌 Immunization 🥖

School Nurses and Immunizations ᡝ

COVID-19 Vaccine Partner Newsletter 🕖

Standing Order Templates



SOURCE: https://www.cdc.gov/vaccines/covid-19/info-by-product/index.html

Questions and Discussion

1) What have you been hearing about vaccines in your community? Are people in your communities planning to get COVID, flu and/or RSV vaccines this season? Nirsevimab for infants?

2) What barriers prevent people from accessing vaccines? For which vaccines?

3) Do you feel vaccine hesitancy is present in your community? How prevalent and for which vaccines?

4) Do you feel vaccine hesitancy is more of an issue than access in your community? Vice versa? Are they both concerning?

5) What work has your organization done to promote vaccine equity?

6) How can DOH continue to support members of the Community Collaborative around vaccine work?

Contact



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Heather Drummond

Director, COVID-19 Vaccine Program Heather.Drummond@doh.wa.gov



@WADeptHealth



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Defining Disability– Access Functional Needs

Todd HollowaySenior Independent Living Advocate for the Center for IndependenceThought Partner for the Community Collaborative

50 years of the Rehabilitation Act

• The Americans with Disabilities Act

• Civil Rights and Civil Liberties

• <u>Disability Community Letter to Federal Colleagues – The</u> <u>Partnership for Inclusive Disaster Strategies</u>

• <u>https://disasterstrategies.org/update-letter-to-federal-</u> <u>colleagues/</u>

Close Out & Next Steps

Community Collaborative Contact Information

For more questions, comments or considerations please contact: <u>community.collaborative@doh.wa.gov</u>

Contacts:

Juliet Kwakye, Health Equity Communications Outreach Coordinator at <u>Juliet.Kwakye@doh.wa.gov</u> Frances Limtiaco, Community Investments and Engagement Manager at <u>Frances.Limtiaco@doh.wa.gov</u>

For calendar and more on the Community Collaborative Community Collaborative



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