



County of San Diego

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County COVID-19 Vaccine Clinical Advisory Group Tuesday, February 16, 2021 | 4:00 p.m. – 6:00 p.m. Microsoft Teams

Members Present: Denise Lozares, Rodney Hood, Liza Marcial, Merlie Ramira, Kristi Koenig, Eric McDonald, Mark Sawyer, Seema Shah, Betial Asmerom, Emily Do, Ankita Kadakia, Happy Araneta, Marie Russell, Nikos Gurfield, Jennifer Wheeler, Nette Aldous, Denise Foster, Kelly Motadel, Gail Knight, Karl Steinberg, Christian Ramers, Sayone Thihalolipavan, Daniel Calac, Ruth Kirby, Wilma Wooten, Carey Riccitelli, Nicole Esposito, John Malone, Jeffrey Norris

Members Absent: Carl Medina, Laura Chechel, Nick Macchione, Jon Montgomery, Samantha Williams, Brett Austin, Jennifer Bransford-Koons, Haruna Feldman, Elizabeth Hernandez, Robert Sills, Anita Walia

Agenda Item/Topic	Discussion	Action Plan	Lead	Date
I. Roll call	<ul style="list-style-type: none"> County COVID-19 Vaccine Clinical Advisory Group called to order by Dr. Kadakia at 4:00 PM on Tuesday, February 16, 2021 			
II. Approval of Minutes	<ul style="list-style-type: none"> Approval of the final meeting minutes for February 2, 2021. Motion seconded, passed unanimously 			

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<p>III. Presentation</p>	<p>A Race Conscious Approach to Equitable COVID 19 Vaccination in San Diego</p> <ul style="list-style-type: none"> • Phase 1B Tier 2 and Phase 1C 50-64 focus • Regionally high hospitalization rates but low vaccination rates among Latinos, Blacks, native Hawaiians and American Indians • Rationale of vaccinating persons over 65 does not align with deaths <ul style="list-style-type: none"> ○ Over 1/3 of deaths under 65 are Latino and native Hawaiian persons ○ Over ¼ of deaths under 65 are Black and American Indian persons • In order to mitigate this inequity we can: <ul style="list-style-type: none"> ○ Systemically reserve appointments for residents of low HPI areas – even when utilizing 211 appointments are difficult to find ○ Establish a COVID vaccination health equity metric, i.e. not opening up subsequent tiers until the vaccination rate is at a predetermined level ○ Increase vaccination rates in areas with high death rates • Project SAVE (Scheduling Assistance for Vaccine Equity) reserves appointments for low HPI(Healthy Places Index) areas <ul style="list-style-type: none"> ○ Being piloted in South region with seven trusted messenger “Community Health Worker” partner organizations including Chicano Federation • Committee has focused on equitable distribution with all motions passed <ul style="list-style-type: none"> ○ Quick vaccine distribution has diminished equitable distribution, HPI approach will be intentional in distributing vaccine to those areas ○ Advocate for space in locations where these populations congregate – send vaccine to facilities that reflect populations being vaccinated i.e. FQHCs with a 60% Latino vaccination rate • Race along with other indicators including age should be considered for vaccine administration 			
<p>IV. County/CDPH Updates</p>	<p>Vaccinating Now</p> <ul style="list-style-type: none"> • County and non-County sites continue to vaccinate Phase 1A and persons 65+ 			

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	<ul style="list-style-type: none"> • State would like to move to vaccinate persons 16-64 with comorbidities/disabilities by March 15th • County is meeting with 3rd party administrator Blue Cross Blue Shield <p>Vaccination Sites</p> <ul style="list-style-type: none"> • 5 regional vaccine superstations located in Chula Vista, La Mesa, San Marcos, Downtown/Petco Park, Del Mar Fairgrounds – Petco and Del Mar being drive-up sites • Palomar Hospital now operating vaccine site • POD for seniors open in San Marcos, collaboration between West Pace, Gary and Mary West Foundation, 211 – appointments made through 211 • National Guard assisting at various sites in San Diego • Promotora outreach in South Bay part of Project SAVE • Community Conversation Toolbox now has a more convenient link <p>Myturn Update</p> <ul style="list-style-type: none"> • State requiring all providers registered in CalVax to administer vaccines via the My Turn scheduling system or an electronic health record with an automatic data feed into the state’s system <ul style="list-style-type: none"> ○ Concerns about having to establish new system when current scheduling methods are working ○ More guidance expected from state <p>State Public Health Officer Letter</p> <ul style="list-style-type: none"> • All vaccine providers need to zero out their doses within 7 days of receipt – state will be tracking administration rate • No distinction between 1st and 2nd doses • Future allocations will be based on vaccine administration <ul style="list-style-type: none"> ○ Timely input into SDIR ○ Input accurate vaccine inventory in vaccine finder daily <p>CDC Quarantine Guidance for Vaccinated</p>			

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	<ul style="list-style-type: none"> • Vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required to quarantine if the following 3 criteria are met: <ul style="list-style-type: none"> ○ Are fully vaccinated (more than 2 weeks following receipt of 2nd dose in a 2-dose series or more than 2 weeks following administration of a single dose vaccine) ○ Are within 3 months following receipt of the last dose in the series ○ Have remained asymptomatic since the current COVID-19 exposure. ○ Persons who do not meet all 3 of the above criteria should continue to follow current quarantine guidance after exposure to someone with suspected or confirmed COVID-19 <p>HRSA Direct Shipment to FQHCs</p> <ul style="list-style-type: none"> • Pilot program shipping vaccine directly to FQHCs to target vulnerable populations beginning week of February 15th • Target populations include individuals experiencing homelessness, public housing residents, migrant/seasonal agriculture workers, patients with limited English proficiency <p>Motion: Since best practices and anticipated challenges may be different for different types of vaccinators (for example large or small vaccine programs and those serving unique populations), and Advisory Committee recommendations may be targeted to different groups of vaccinators, the advisory committee has agreed upon the following terms to ensure clarity in our guidance:</p> <p>The term “County vaccine site” will be used to refer to the county run and county partnership vaccine sites. These are primarily vaccinating large portions of the general population.</p> <p>The term “Community vaccinator” will be used to refer to non-county vaccinators serving the community. Examples include federally qualified health centers, private practices, community-based organizations and faith based partnerships.</p> <p>“Hospital systems” may fall into either category, depending on the context, and will be specified as needed for clarity</p>			

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	Motion seconded, passed unanimously			
<p>V. Subcommittee Updates</p>	<p>Pharmacy</p> <ul style="list-style-type: none"> • Need guidance on verification of eligibility for individuals 16-64 with comorbidities/disabilities who want to be vaccinated at the pharmacy – suggested verification methods include looking at the medication profile or recent medication container, claims data through insurance company, after visit summary including medication and medical history <ul style="list-style-type: none"> ○ Don't want to create barriers for patients ○ Empower pharmacist with established guidelines • Education material needed with emphasis on the differences between viral vector DNA and current mRNA vaccines, the difference in efficacy and why vaccinations need to occur as soon as possible <p>Outreach and Education</p> <ul style="list-style-type: none"> • Continue to identify and refine tools for Education Toolbox • Piloting Community Conversation Speakers Bureau <ul style="list-style-type: none"> ○ For Community Conversations speakers bureau, as discussed we'll make it "opt out." So you'll get emails periodically from "Admin via Smartsheet" with the presentation details, including instructions for volunteering for that talk. Otherwise, do nothing and it will default to our other speakers. We will consider flagging those for prioritization for this group. If you would like to "opt out" in receiving these, just send an email to Outreach and Education co-leads. <p>Data and Quality Assurance</p> <ul style="list-style-type: none"> • Working to acquire census tract level data – census tract is an area that the census bureau has designated typically 4,000 people per tract <ul style="list-style-type: none"> ○ Allows targeted messaging and vaccine delivery to areas of highest need by: <ul style="list-style-type: none"> ▪ Routing vaccine to local pharmacies in census tracts of greatest need 			

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	<ul style="list-style-type: none"> ▪ Enlisting community leaders including faith-based leaders ▪ Geotargeting messaging to most affected communities ○ Supports economies of economically-depressed areas (reduce absences/closures due to quarantine and illness) <p>Equitable Distribution</p> <ul style="list-style-type: none"> • Troubled by the vaccination numbers • Committee has a list of strategies involving community clinics that are vaccinating people of color to increase equity • Race represents socio-economic issues and needs to be taken into consideration in addition to other eligibility parameters <p>BHS</p> <p>Motion: The Advisory recognizes that clients in behavioral health facilities have complex and serious health conditions just like RESIDENTS OF other long-term care facilities where residents have been deemed eligible for Phase 1a vaccines. Thus residents of BH facilities should be included in Phase 1a if the facility has the same license or certification type as other CA care facilities deemed eligible under Phase 1A and the federal pharmacy partnership program for long term care facilities.</p> <p>Seconded, 1 abstention, motion passed.</p>			
<p>VI. Discussion: Intermittent Vaccine Shortage, Upcoming Phases/Tiers</p>	<p>Not discussed</p>			
<p>VII. Discussion: Johnson and Johnson Vaccine and Equity</p>	<p>Not discussed</p>			

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<p>VIII. Roundtable</p>	<p>Prioritization of School Employees</p> <ul style="list-style-type: none"> • Opening Phase 1B Education component including pre-K through high school • Sector over 100K eligible only in education • Larger School systems would like focus to be closed PODs for their employees • County proposes allocation based on percentage to account for equity • Special topic meeting to discuss prioritization of school employees scheduled for Tuesday, February 23, 2021 at 4 PM <ul style="list-style-type: none"> ○ Would like Outreach and Education and Equitable allocation members to attend <p>Motion: Support the County in using a percentage-based approach with a focus on equity for allocation of vaccine for the various industry sectors.</p> <p>Seconded, passed unanimously</p>			
<p>Next Meeting</p>	<p>Tuesday, February 23rd at 4:00 p.m.</p>			
<p>Meeting Adjourned</p>	<p>Meeting adjourned at 6:24 p.m.</p>			
<p>Submitted by</p>				