

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



Inter-agency Staff on the Webinar

- Jana Ferguson, Assistant Commissioner, DPH
- Ron O'Connor, Office of Local and Regional Health, DPH
- Dr. Catherine Brown, Glynnis LaRosa, and Laurie A. Courtney, Bureau of Infectious Disease and Laboratory Sciences, DPH
- Donna Quinn and Mary Clark, Office of Preparedness and Emergency Management, DPH
- Michael Flanagan and Adam Kinney, Department of Labor Standards
- Helene Bettencourt and Anne Gilligan, Department of Elementary and Secondary Education
- Cheryl Sbarra, Massachusetts Association of Health Boards
- Jeff Farnsworth, Executive Office of Public Safety and Security
- Chief Edward Dunne, Massachusetts Chiefs of Police Association

Announcements:

J&J/Janssen vaccine: ACIP states no preference for any of the three authorized vaccines. “The vaccine to get is the one that’s available to you the soonest.” Results of the Janssen Phase 3 trials not comparable with mRNA vaccines. These vaccines were tested in different time periods, geographic locations, with different circulating strains and variants. The Janssen vaccine has very strong efficacy against serious disease and death from COVID-19. 93% of vaccine efficacy against hospitalizations (2 cases in vaccinated vs. 29 in placebo). No COVID-associated deaths in vaccinated vs. 7 in placebo. The vaccine is authorized for persons aged ≥ 18 years old. Intramuscular injection (0.5 ml), vaccine shipment and storage (until expiration date) at refrigerator temperatures (2-8C). Single-dose series. No diluent required.

Storage and handling: Store in the refrigerator between 2C and 8C (36F-46F) for up to the expiration or beyond use date. DO NOT FREEZE. After first puncturing the vial, the vial should be held between 2C – 8C for up to 6 hours, or at room temperature (up to 25 C/77F) for up to 2 hours. Vaccine is shipped under refrigeration, and stored under refrigeration. Should not be put back in the freezer.

Expiration dates: Not printed on the vial or the carton. To obtain the expiration date, scan QR code, call 1-800-565-4008, or go to www.vaxcheck.jnj Once you know the expiration date, record it, and if your getting close to the expiration date, don’t just dump it. Guidance could change to say it’s still effective.

Interchangeability of COVID-19 vaccine products: Any COVID-19 vaccine can be used when indicated; no product preference. COVID-19 vaccines are not interchangeable. Safety and efficacy of a mixed series has not been evaluated. If first dose of mRNA COVID-19 vaccine was received, but the patient was unable to complete the series with same or different mRNA vaccine, single dose of Janssen COVID-19 vaccine may be administered at minimum interval of

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



28 days from mRNA Dose, considered to have received valid, single-dose Janssen vaccination, not mixed vaccination series (mRNA/viral vector). Currently authorized COVID-19 vaccines are all inactivated vaccines. COVID-19 vaccine should be administered alone with minimum interval of 14 days before or after the administration of other vaccines. A shorter interval may be used in situations where the benefits of vaccination are deemed to outweigh the potential unknown risks (e.g., tetanus toxoid vaccine for wound management, etc.) or to avoid barriers or delays to vaccination.

Resources from the CDC to reference: Information on these sites are changing rapidly, they change all the time, so check back often.

CDC COVID-19 Vaccine Clinical Resources: www.cdc.gov/vaccines/covid-19/index.html

Clinical Care Considerations for COVID-19 vaccine: www.cdc.gov/vaccines/covid-19/clinical-considerations/index.html

Interim clinical considerations for use of mRNA COVID-19 vaccines being updated to include J&J vaccine (viral vector): www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html

Clinical considerations for use of mRNA Vaccines: www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/clinical-considerations.html

Preparing for the potential management of anaphylaxis at COVID-19 vaccination sites: www.cdc.gov/vaccines/covid-19/clinical-considerations/managing-anaphylaxis.html

Homebound vaccine guidance: www.cdc.gov/vaccines/covid-19/clinical-considerations/homebound-persons.html

For screening forms, standing orders, vaccine prep/admin summaries, storage and guidance, EUA fact sheets and more: www.cdc.gov/vaccines/covid-19/info-by-product/index.html

Healthcare professionals training and education: www.cdc.gov/vaccines/covid-19/training.html

CDC COVID-19-specific ACIP recommendations: www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19.html

Triage of people presenting for COVID-19 vaccination, Appendix B in Interim Clinical Considerations: www.cdc.gov/vaccines/covid-19/clinical-considerations/index.html

We had hoped we would get the twice the amount of J&J, but as of what we understand right now we won't receive until the beginning of April.

Q: Standing orders for this vaccine?

A: When we looked this morning they were not up yet. The EUA for providers has a lot of specific information, we are expecting them any day.

Q: Vaccinating people who have had COVID-19, some people are vaccinated 30 days after testing positive and other 90 days. Any recommendations on this? Is there a preferred vaccine for those who already had COVID-19? When would J&J be a preferred vaccine?

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



A: Go to Clinical Considerations. What it states that once someone has recovered from COVID-19, there is no waiting period. Maybe if they don't have time to get 2 doses, or if they're very nervous about needles the J&J would be recommended.

Q: Any guidance on how to handle vaccine reactions?

A: There is something available for healthcare workers, surely when time goes on they'll be more.

Q: There is a patient who received first dose of Pfizer, but has now been homebound and does not have Pfizer vaccine available.

A: Try to match as best you can, but if you don't have Pfizer available, and you have Moderna available, then yeah you can go that route. The ideal is to get the same vaccine within 42 days if possible.

MDPH Contact info:

Immunization division: For questions about immunization recommendations, disease reporting, etc: phone--617 983 6800 (24/7 Epi line); fax--617-983-6840;

www.mass.gov/topics/immunization

MIIS help desk: fax--617-983-4301; email questions to miishelpdesk@state.ma.us;

www.mass.gov/service-details/massachusetts-immunization-information-system-miis

MDPH Vaccine unit: phone--617-983-6828; email questions to: [dph-vaccine-](mailto:dph-vaccine-management@massmail.state.ma.us)

management@massmail.state.ma.us; www.mass.gov/service-details/vaccine-management

COVID email box: for questions about who can vaccinate, who can get vaccinated, vaccine prioritization, where to get vaccinated, and how 'x' group will get vaccinated. COVID-19-vaccine-plan-MA@mass.gov

Vaccine Distribution: Eligible on March 11th, *all* school staff. Not just instructors, this includes facilities and food service employees. Other eligible groups: Child care workers—professional ones, not babysitters.

Fast facts about Massachusetts rollout:

-Ranks #1 for first doses administered per capita amongst the states with 5M people. (Bloomberg)

-Ranks #1 for total doses administered (1st and 2nd) per capita amongst the states with 5M people. (CDC)

-MA ranks #6 for first doses administered per capita amongst all states. (Bloomberg)

-70% of MA's 75+ residents have received a first dose, exceeding the national average of 61%.

-Every county in MA has vaccinated at least 61% of its 75+ population.

-MA ranks 2nd for % of black residents with at least one dose. (Bloomberg)

-MA has given a first dose to 12.1% of its black residents and 6.2% of its Hispanic residents. (MA internal data using population numbers from UMASS Donahue Institute).

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



-Nationally, US had given a first dose to 4.2% of its black residents and 3.9% of its Hispanic residents. (CDC)

Massachusetts Department of Public Health COVID-19 Dashboard - Thursday, March 4, 2021

Cumulative COVID-19 Vaccine Doses Administered by Age Group

Data as of March 02, 2021

■ Individuals who received at least one dose ■ Individuals who are fully vaccinated

Doses Administered by Age Group (Cumulative)



Distribution of Doses Administered by Age Group (Cumulative)



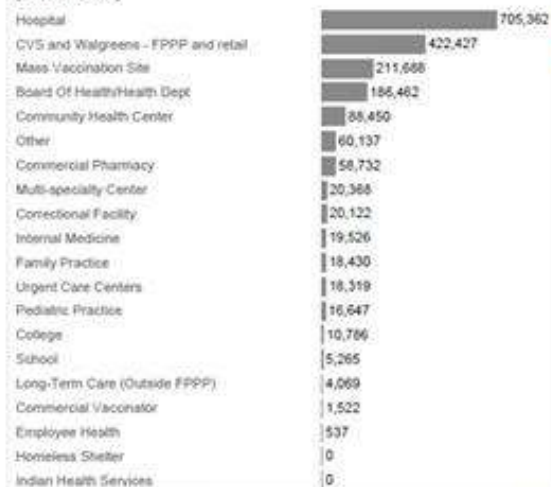
Note: Immunization data from most (but not all) providers in Massachusetts are reported into the Massachusetts Immunization Information System (MIIS) through direct messages from electronic health records or direct entry by users. Due to inputting and processing, it may take 24-48 hours or more for shipping or administration data to appear in MIIS. MIIS data are available for analysis one calendar day after they are reported to the MIIS. Duplicate patient records may be created when patient information is not entered consistently. Current COVID-19 vaccines require two doses for a person to become fully vaccinated. Individuals who are fully vaccinated are also reported as individuals who received at least one dose. Some individuals may receive a first or second dose from a non-reporting provider and would not be reflected as fully vaccinated. Some individuals may change age groups between the first and second dose if their birthdays fall in between the two doses. Data on doses administered includes doses administered by the Federal Pharmacy Partnership for Long-term Care Program and jurisdictional transfers to retail pharmacies.

Massachusetts Department of Public Health COVID-19 Dashboard - Thursday, March 4, 2021

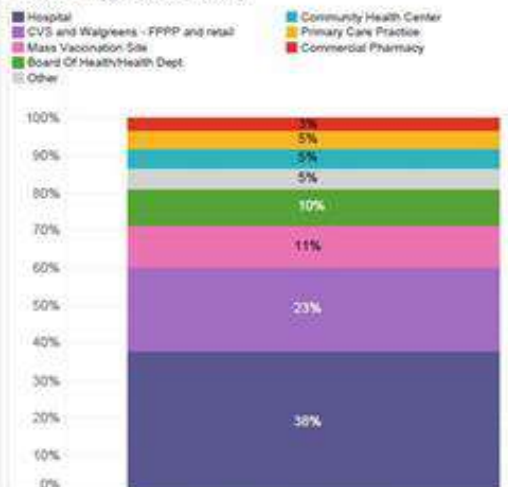
Total COVID-19 Vaccine Doses Administered by Practice Type

Data as of March 02, 2021

Total COVID-19 Vaccine Doses Administered by Practice Type (cumulative)



Total COVID-19 Vaccine Doses Administered by Grouped Practice Type (cumulative)



Note: Immunization data from most (but not all) providers in Massachusetts are reported into the Massachusetts Immunization Information System (MIIS) through direct messages from electronic health records or direct entry by users. Due to inputting and processing, it may take 24-48 hours or more for shipping or administration data to appear in MIIS. MIIS data are available for analysis one calendar day after they are reported to the MIIS. MIIS includes multiple practice types which have been collapsed into the most frequent practice types for reporting here. Practice types collapsed according to the next page. Commercial vaccinators may be hired by workplaces to vaccinate employees. Employee and occupational health programs at healthcare and correctional facilities are reported by facility type (e.g., hospital, community health center, correctional facility). Duplicate patient records may be created when patient information is not entered consistently or patients receive doses from different manufacturers. CVS and Walgreens are administering vaccines as part of both the Federal Pharmacy Partnership Program for Long-Term Care (FPPP) and through retail pharmacies.

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



Total COVID-19 vaccine doses administered by practice type. This will change over time, and fully anticipate the mass vax sites to take over at some point. Numbers also include vaccines distributed by pharmacies during the LTCFs rollout.

In-home vaccinations: LBOH play a vital role in identifying and serving vulnerable populations in their communities. Municipalities are encouraged to provide in-home vaccination and support when capacity allows as well as provide education to address vaccine confidence, identify members of the community who have transportation and medical barriers to getting vaccines, match qualified volunteers with individuals who need help navigating the vaccination site, and refer individuals to the right resource. Given the complexity of providing in-home vaccinations, LBOH will be able to choose from two options to vaccinate residents who are homebound:

- 1) LBOH chooses to take responsibility for in-home vaccinations for the whole community: Commits to directly oversee and run in-home vaccination for homebound individuals in their municipality. Identify and screen community members to determine their need for in-home vaccination, be prepared to handle intake and screening of homebound individuals in their municipality (i.e. residents in their municipality who call into the State In-Home Vaccination Program would be referred to LBOH), create appropriate intake forms for community members (phone, web, email, etc.), handle scheduling, consent, administration, MIRS reporting, and billing of all vaccine administration, administer the vaccine.

LBOH may partner with providers that already receive vaccine allocation (e.g. local hospitals, health centers).

LBOH may also choose to request allocation directly from DPH. The same parameters apply to all vaccine allocations, ongoing 85% use threshold and reporting in MIRS within 24 hours of administration in order to be eligible for subsequent allocations. Excess doses caused by the minimum shipping quantities should be administered to other eligible individuals, and all vaccinators shall implement a zero waste policy.

- 2) LBOH chooses to use State In-Home Vaccination Program to manage and administer in-home vaccinations: State program will be responsible for all aspects of in-home vaccination administration (including intake, screening/eligibility, scheduling, vaccine allocation, staffing, in-home administration, reporting, billing).

LBOH directs people to the State Program intake link (tentatively scheduled for March 22nd). In addition, LBOH may work more directly with the State Program during the “soft launch”. LBOH can create “call back” lists of individuals believed to be homebound until the State Program call line opens. The State Program will reach

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



out to these people the weeks of March 15th and March 22nd. It may take several weeks for an in-home appointment to be available.

NOTE: Some individual providers (e.g. hospitals, health centers) and health plans have already begun to provide in-home vaccination for their existing homebound patients. That is welcome and encouraged to continue under either option, as a complement or in partnership with LBOH efforts.

Who meets the definition of homebound and who does not?

Meets the definition for in-home vaccination program: Individuals who are not able to leave their home to get to a vaccination site without significant assistance. These individuals either require ambulance or two people assistance to leave the home; not able to leave the home for medical appointments under normal circumstances; have considerable difficulty and/or require significant support to leave the home for medical appointments.

Examples: “bedbound”; significant cognitive or behavioral needs (dementia, panic disorder); frail individual who can barely leave home and requires significant support to do so; individual with significant ongoing mobility issues who have trouble getting to the doctor.

Do not meet the definition: Individuals who can access a vaccination site with transportation support, even if they prefer in-home vaccination, who are short-term/temporarily homebound, who reside in a Long Term Care Facility.

Examples: individuals who fear leaving their home due to the virus, those with a broken leg, individual who has PCA/related supports but is able to leave their home with their support person, individual who leaves home for medical appointments but is concerned about going to a vaccination site.

NOTE: homebound individuals are eligible for in-home vaccination when they become eligible based on the State’s overall vaccine phases. Unvaccinated household members who are currently eligible for vaccination based on State’s overall vaccine phases may be vaccinated at the same time.

How does the State In-Home Vaccination Program works as a resource? Residents in municipalities where the LBOH is partnering with the State In-Home Vaccination Program will have access to a statewide vaccinator and intake/call center.

Central intake call center: Homebound individuals or their caregivers call a State call center. They will speak to a live representative who will walk them through a basic screening tool to ensure appropriateness for in-home vaccination. If in-home vaccination is appropriate, the State call center will refer them to the Statewide in-home vaccinator.

Statewide In-home Vaccination (Commonwealth Care Alliance): Will provide direct communications with individuals, trained vaccinator staff, scheduling appointments (geo-

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



mapping and routing), consent, confirmations, reschedules, in-home vaccination including monitoring individuals usually for 15 min, and reporting.

The Statewide vaccinator will adhere to the allocation criteria: Manage centralized allocation and meet an ongoing 85% use threshold. Distribute vaccination out to regional hubs/individual vaccinators by day. MHS reporting within 24 hours.

Roll out and timing:

Roll out and timing

Overview

- State In-Home Vaccination Program: Soft launch 3/8-3/22; Full launch week of 3/22
- LBOH informs DPH which Option they choose by 3/12 (submit Google survey)

If LBOH directly oversees in-home vaccination for their municipality
(Option 1)

Planning phase Next ~1-3 weeks

- LBOH plans implementation, including with local providers
- LBOH notifies DPH by March 12th of intent to pursue Option 1

Launch / begin vaccinations By end of March

- In-home vaccinations begin
- Exact timing determined by LBOH

If LBOH uses State In-Home Vaccination Program
(Option 2)

Soft launch March 8th to March 22nd

- LBOH can compile "call back list" for State Program
- State Program will reach out beginning week of 3/15 and 3/22 to start scheduling

Full launch Week of March 22nd

- In-home vaccinations begin with through the statewide vaccinator
- Public facing intake available for all consumers (1-800 line)

Note: given supply, appointments will likely be scheduled several weeks out

Q: Is PrepMod required for the homebound program?

A: No, not necessary. It's not even recommended.

Q: Local health department option to do local clinics for teachers?

A: At this point this does not seem like it would happen.

Questions from Q&A not answered out loud:

AnneMarie Fleming - 9:07 AM

Q: Sorry, continued around weddings: 2. Dancing will it be allowed 3. catered foods: will it still be served or will self serve be allowed 4. any problems with car shows if socially distanced.

Thanks-

-Michael Flanagan - 9:21 AM

A: Dancing will be allowed on 3/22 for weddings and events. Self-serve buffets are still prohibited. Car shows would have to follow event standards.

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



AnneMarie Fleming - 9:05 AM

Q: 1. will bars remain closed-

-Michael Flanagan - 9:22 AM

A: Yes

MAX SCHENK - 9:31 AM

Q: what about librarians?-

-Mike Coughlin - 9:32 AM

A: Not yet identified as phase 2

Colleen Fermon - 9:07 AM

Q: has the pre vaccine screening form been updated-

-laurie courtney - 9:33 AM

A: Not yet. Last updated 1/5/2021. Expecting the newly updated one any time now.

Teresa Riley-Singh - 9:23 AM

Q: when calling the 1-800 number for the exp date- is the lot number all we need to get that date?-

-laurie courtney - 9:34 AM

A: that is my understanding

Kristina Flanagan - 9:36 AM

Q: Hello! Where do student teachers fall in this? Can they be vaccinated 3/11? Thank you-

-Jana Ferguson - 9:36 AM

A: I assume yes for this.

Lauren Terzo - 9:25 AM

Q: Do you have any recommendations for products for vaccine transport (i.e., coolers) to do in-home vaccinations?-

-laurie courtney - 9:38 AM

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



A: As a start, please see the transportation section on the Vaccination of Homebound Persons webpage, at <https://www.cdc.gov/vaccines/covid-19/clinical-considerations/homebound-persons.html>

Kimberly Putney - 9:37 AM

Q: Are employees of MA schools that reside in other states eligible next week also?-

-Mike Coughlin - 9:38 AM

A: yes

Misty Trombly - 9:35 AM

Q: When will DESE release the updated guidance for K-5 school openings, including safety procedures for eating snacks & lunches in schools with students seated <6 feet apart in classrooms??-

-Anne Marie Stronach - 9:45 AM

A: DESE will provide guidance next week. Guidance will include information regarding unmasked <6 feet distancing including eating breakfast, lunch, and snack.

Carolina Bencosme - 9:47 AM

Q: When will the indoor/ outdoor events guidance be updated to reflect changes effective March 1, 2021?-

-Mike Coughlin - 9:49 AM

A: This guidance will not change until the (tentative) March 22 updates to the gathering orders are issued.

Maribeth Ting - 9:50 AM

Q: are high school athletic coaches eligible 3/11?-

-Mike Coughlin - 9:51 AM

A: yes

Larry Ramdin - 9:24 AM

Q: Can patrons go to the bar at wedding to get drinks or does it have to be served at table-

-Michael Flanagan - 9:57 AM

A: Must be table service

Norfolk County-8 Coalition

MDPH/LBOH Webinar 3/5/2021



sue sullivan - 9:57 AM

Q: Do you know which vaccine will be used for Homebound - my concern is that if it is the Janssen which is only good for 2 hours post puncture of vial, the monitoring time of the homebound individuals post vaccination may cause an issue with 2 hour window-

-laurie courtney - 10:00 AM

A: Do not know at this time. But JNJ will be ok refrigerated (once punctured) for 6 hours. It is 2 hours at ambient room temp.

James Philbrook - 9:57 AM

Q: Will large events such as the Spartan Races be allowed? Charlton has been asked to approve the event that has thousands of participants?-

-Michael Flanagan - 10:01 AM

A: Road races and similar events are still closed during Phase 3 Step 2 and Phase 4 Step 1. The Spartan Race would not be an allowed activity.

j t - 10:03 AM

Q: Can you help provide information about large scale events that take place across multiple properties (i.e. the Brimfield Flea Market)? Will events like this be allowed in May or over the summer months?-

-Mike Coughlin - 10:04 AM

A: No decision on large scale summer events has been made