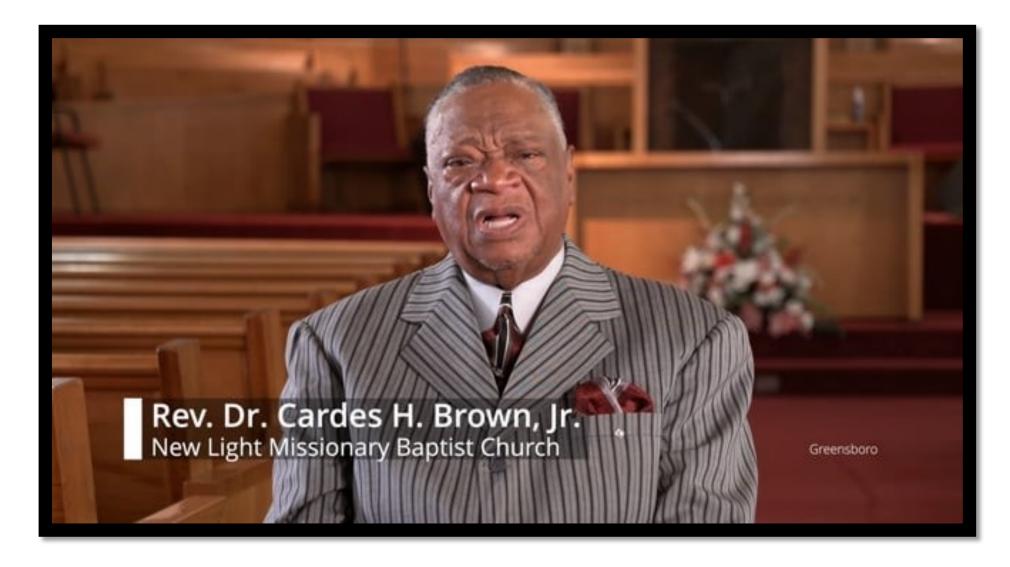
Covid-19 Taskforce Updates February 24, 2021





New Resources

New materials available

- Top Ten Facts
- Developing COVID-19 Vaccines infographic
- Social media graphics and content
- Community posters

Materials in English and Spanish







NCDHHS: COVID-19 Vaccine Communications Toolkit

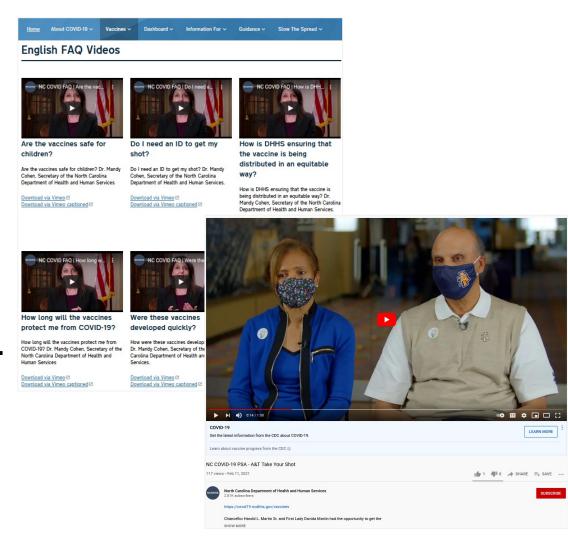
CAMPAIGN ②						
You Have A Spot. Take Your Shot.					#FindYourSpotNC #TakeYourShotNC #YourSpotYourShotNC #BestShot	
DESCRIPTION				#COVIDI9NC	#COVIDI9Vaccine	
This is your spot for ready-made materials to help you communicate about safe and effective COVID-19 vaccines.					C #StopCOVIDI9 ot #VaccinesSaveLives	
Anyone who is sharing informal including health care profession non-profit organizations, can uthe COVID-19 vaccines. This paposts, graphics and other materials.	nals, team leaders, co se and adapt the resc ge will be updated fre	ommunity and business le ources here to build confi equently with sample soci	aders and dence in			
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Outreach and Education: Videos

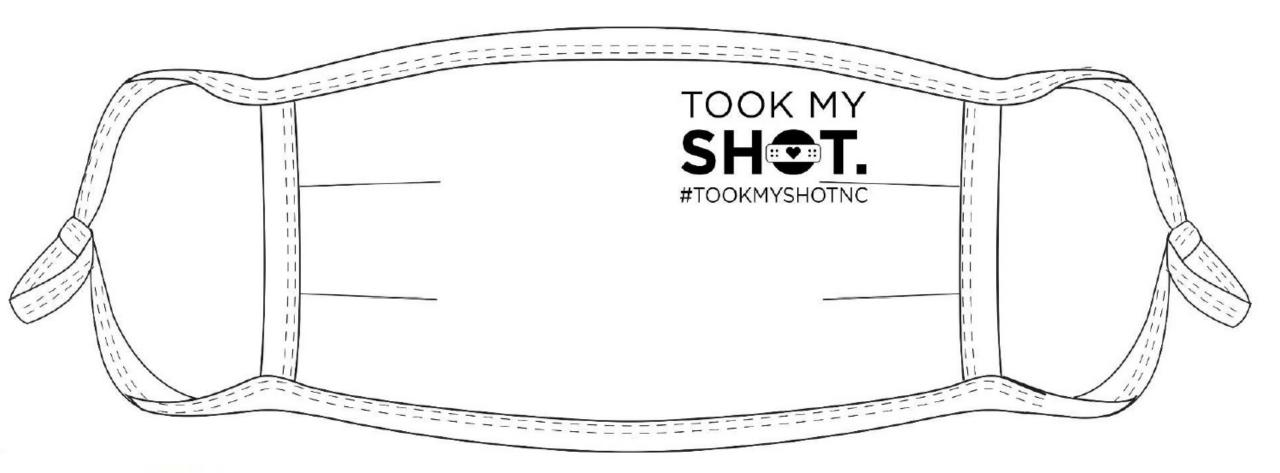
6 short FAQ videos w/Sec. Cohen

- Are the vaccines safe for children?
- Do I need an ID to get my shot?
- How is DHHS ensuring that vaccines are distributed equitably?
- How long with the vaccines protect me from COVID-19?
- Were these vaccines developed quickly?
- What are the side effects?
- Essential worker PSA
- Chancellor Martin, North Carolina A&T
- Up next:
 - Basketball coaches
 - Western NC with frontline workers





Reinforce the 3Ws





Johnson & Johnson

We will soon have another tested, safe and effective vaccine to increase the supply and help us get more people vaccinated quickly.

Johnson & Johnson applied for an Emergency Use Authorization (EUA) from the Food and Drug Administration on February 4, 2021. A hearing is scheduled for February 26 (Today!)

How it Works

- Like the Pfizer and Modena vaccines, scientists built on decades of previous work on similar vaccines to create the Johnson & Johnson one-shot vaccine.
- It teaches your body to make antibodies (germ-fighting cells) against the COVID-19 virus. These germ-fighting cells are then ready to fight off the real COVID-19 if it ever tries to attack.
- Instead of mRNA, the instructions are carried on a type of virus called adenovirus that cannot make you sick.
- You cannot get COVID-19 from the vaccine

Clinical Trials

- 43,783 participants 18+
- No significant safety concerns. No reports of anaphylaxis
- Similar temporary reactions after vaccination to Pfizer and Moderna: arm soreness, feeling tired, headache, muscle pain, fever



Johnson & Johnson

The Johnson & Johnson vaccine is given in one shot and does not require extreme cold storage, so it can be more easily shipped, stored and administered, providing opportunities to increase the number of vaccination sites and make them more convenient.

Having a third safe and effective vaccine will help North Carolina vaccinate as many people as quickly as possible and meet its goals to provide equitable access to COVID-19 vaccinations in every community in the state.

Getting as many people as possible vaccinated quickly will also help stop the spread of COVID-19 variants—and get us back in control of our lives and back to the people and places we love.

Key Message for All Vaccines

COVID-19 vaccines help prevent COVID-19 and are extremely effective in preventing hospitalization and death with no serious safety concerns.

Questions?



Transparent and Data-Informed Decision Making

Guiding principle: Transparent data builds public trust and fosters rapid-cycle-improvement among providers.

Key components of NC's data strategy:

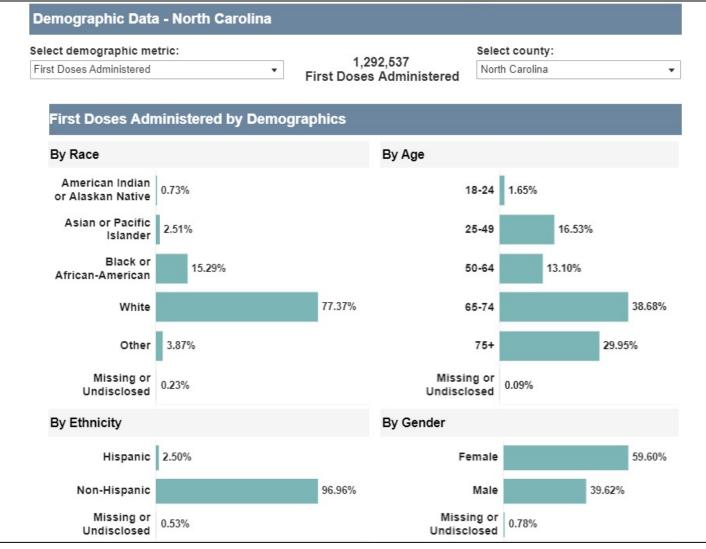
1. Requiring all vaccine providers collect and report to the state race and ethnicity data.

Advantages		Challenges		
ethnic	ful to have complete race and city data for virtually all state- ated vaccinations to inform ational strategy	•	Errors CVMS/EHR integration No option (yet) for those who wish to decline to report their race/ethnicity	

- 2. Publishing public dashboard that shows vaccine rates by race/ethnicity at state and county level.
 - NC is the only state publicly reporting race/ethnicity data for all state-allocated vaccinations
- 3. Providing weekly reports to each vaccine provider on their race/ethnicity vaccination rates.



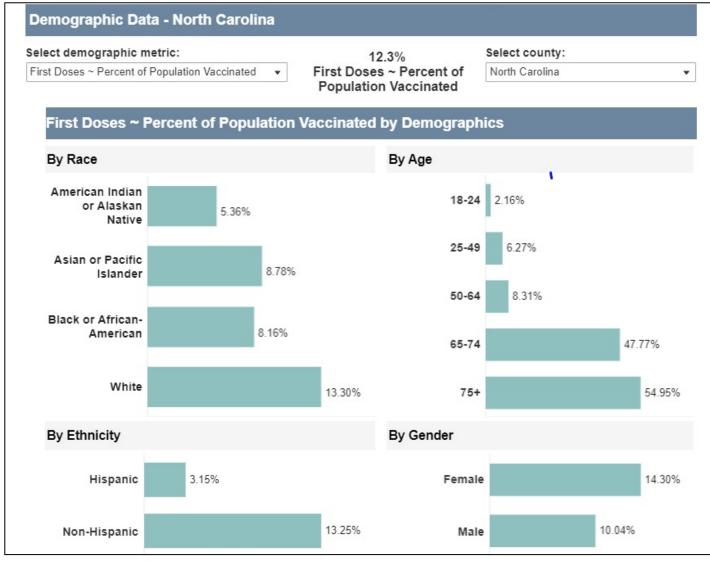
Transparent Data



Bloomberg News just rated North Carolina as being best in the nation for data quality, reporting race and ethnicity data for nearly 100% of people vaccinated in the space.



Transparent Data



Percent of the population by race, ethnicity, age, and gender that has received a first dose.



Using Data to Drive Action

Guiding principle: Vaccinate all North Carolinians as quickly and equitably as possible.

A three-part formula determines each county's first dose allocation.

Baseline Allocation with Equity Increases

- All 100 NC counties get a minimum baseline allocation based on population to ensure geographic equity
- 60 counties with large unvaccinated populations of Black/African American, Hispanic/Latinx, and American Indian residents receive additional "equity doses"

Set-Aside Allocations

 Sending addition doses each week to counties that have received cumulatively fewer doses per population compared to other counties

Community Vaccination Events

- Setting aside doses for weekly community vaccination events that focus on underserved communities
- Examples: partnerships with Black churches, Historically Black Colleges and Universities, Housing Authorities, high schools in low income neighborhoods

Clear Expectations and Accountability

Expectation for vaccine providers: The percentage of vaccine you administer to historically marginalized and minority populations in your county meets or exceeds the population estimates of these communities in their county and region. NCDDHS:

- Monitors providers each week to assess if they are meeting this expectation
- Provides weekly reports to each provider on their race/ethnicity vaccination rates
- Facilitates provider convenings to showcase and share strategies and leverages "soft-competition" through goal setting to drive performance
- Contacts vaccine providers who do not meet this expectation if a provider has at least two weeks of data showing consistent disparities
- Provides technical assistance to help address challenges or opportunity to transfer vaccine to other providers
- Will reallocate vaccines to other providers for sites that are consistently unable to achieve adequate representation



Intentional Action - Examples

- Deploying DHHS-directed testing and vaccination vendors (including HUB vendors) to zip codes with high numbers of HMPs and HMPs >65 years old.
- Directing FEMA mobile vaccination clinics to underserved, high HMP communities.
- Pairing testing/vaccination vendors with community health workers and communitybased organizations to facilitate events.
- 449 Community Health Workers employed, including 100+ who are Spanish speaking.
 232 CHWs in 39 counties (7/7 vendors) dedicated to vaccine work with vaccine registration, scheduling, and education.
- Prioritizing Old North State Medical Society physicians for on-boarding as vaccinating providers.
- NCA&T and UNC-Pembroke vaccination site open all semester. More HBCUs planned.



Making Progress – And More Work to Do

- For the past three weeks, more than 20% of first doses administered in the state have gone to our Black/African American population. The Black/African Americans population is 22.2% of the state's total population.
- Starting to see some progress in Latinx/Hispanic population. For the week ending
 February 21st, 3.7% of first doses administered in the state went to our Hispanic/LatinX
 population, up from 1.8% for the week ending January 17th. The Hispanic/Latinx
 population is 9.8 percent of the state's total population



Partnering to Host Vaccine Events

Survey for Organizations Wanting to Host/Support Vaccine Events

https://docs.google.com/forms/d/e/1FAIpQLScqcUN8JiHO-PnZJ3oRftlmSN3joiJfAOWxgdgz6ww-MQ7Rog/viewform

~240 responses since 2/12 launch; shared with vaccine providers to facilitate local partnerships; 14 AME Zion Churches enrolled and 28 pending completion

Toolkit for Partner Organizations Supporting NC's Vaccination Efforts

https://files.nc.gov/covid/documents/guidance/vaccinations/NCDHHS-Toolkit-for-Partner-Organizations-COVID-19-Vaccines.pdf



Healthier Together

Regional Health Equity Action Network to facilitate local partnerships and match supply with HMP demand. DHHS will contract with a community-based HMP serving organization to employ Regional Health Equity Directors to help match supply and demand in partnership with vaccine providers to serve African American, Hispanic, American Indian communities through events, reserved appointments, selecting appropriate locations for vaccine sites, etc.

Goal: Increase the percentage of historically marginalized populations receiving vaccinations by:

- Building and earning trust between community organizations, vaccine providers, and state partners
- Working with community partners, community media, and grassroots messaging to educate and address concerns of upcoming vaccination groups
- Focused deployment of NCDHHS resources/investments to mitigate barriers to vaccination

Approach:

- Leverage expertise of community-based organizations (CBOs) serving HMP communities, funded by NCDHHS, to support on-the-ground vaccination equity efforts.
- CBOs and vaccine providers to be supported by leads in each region who will help pull vaccine supply into marginalized communities and connect people from these communities to that supply via CBOs

