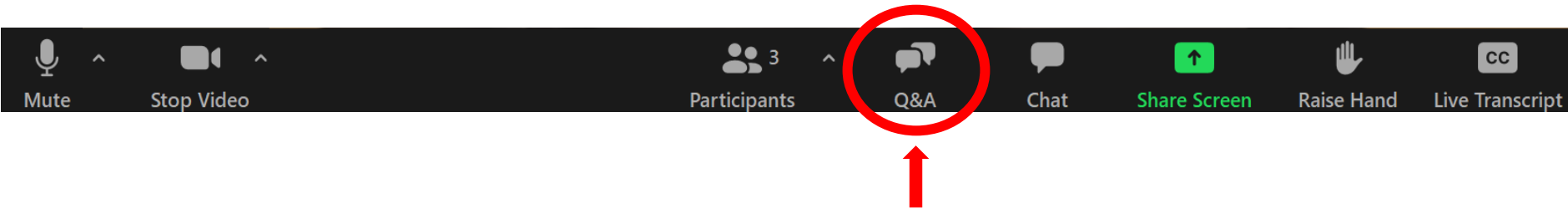


MODELS FOR HEALTH EQUITY IN COVID-19 VACCINE DISTRIBUTION

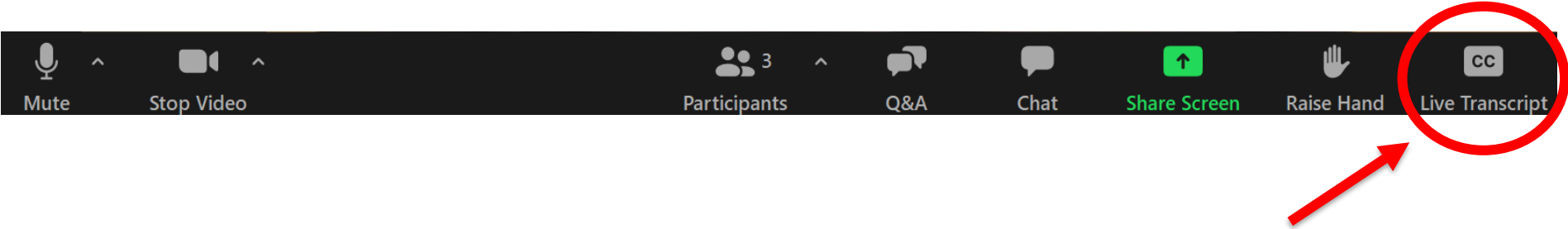
WEBINAR

June 30, 2021



SUBMIT A QUESTION

- Click on Q&A icon
- Type question, hit enter
- Moderator will review and relay question



ENABLE CLOSED CAPTIONING

- Click on "CC" icon to turn on
- Click on icon again to turn off

TODAY'S AGENDA

3:00: Introduction, housekeeping

Michele Calvo, NYAM

3:05: Introduction to Stop the Spread's Partnership Model

Molly Chidester, Stop the Spread

3:10: COVID-19 Vaccine Distribution Models

David Gross, Community Healthcare Network

3:25: Establishing Trust and Advancing Health Equity with Vaccine+

Emma Smith, Stop the Spread

3:35: Playbook for Community-Based Vaccinations

Molly Chidester, Stop the Spread

3:45: Q&A, discussion



VISION

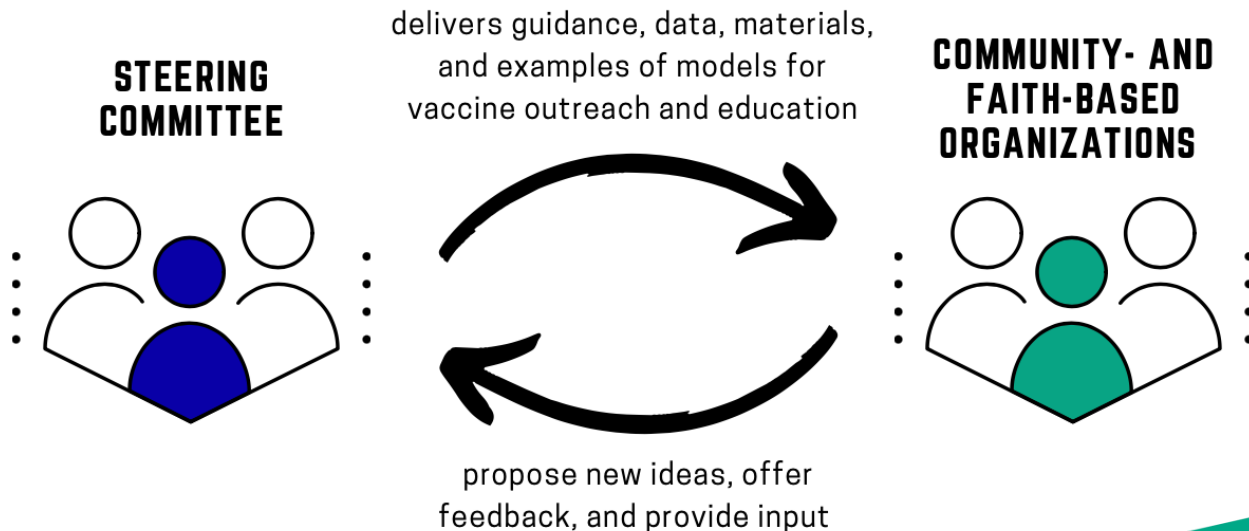
Everyone has the opportunity to live a healthy life

MISSION

Drive progress towards improved health through attaining health equity

ABOUT THE ACTION COLLABORATIVE

The **COVID-19 Vaccine Equity Action Collaborative** aims to bridge community voices with NYC metro region health systems and government to rapidly disseminate information and collectively problem solve policy solutions to advance vaccine equity.





Models for Health Equity in COVID-19 Distribution

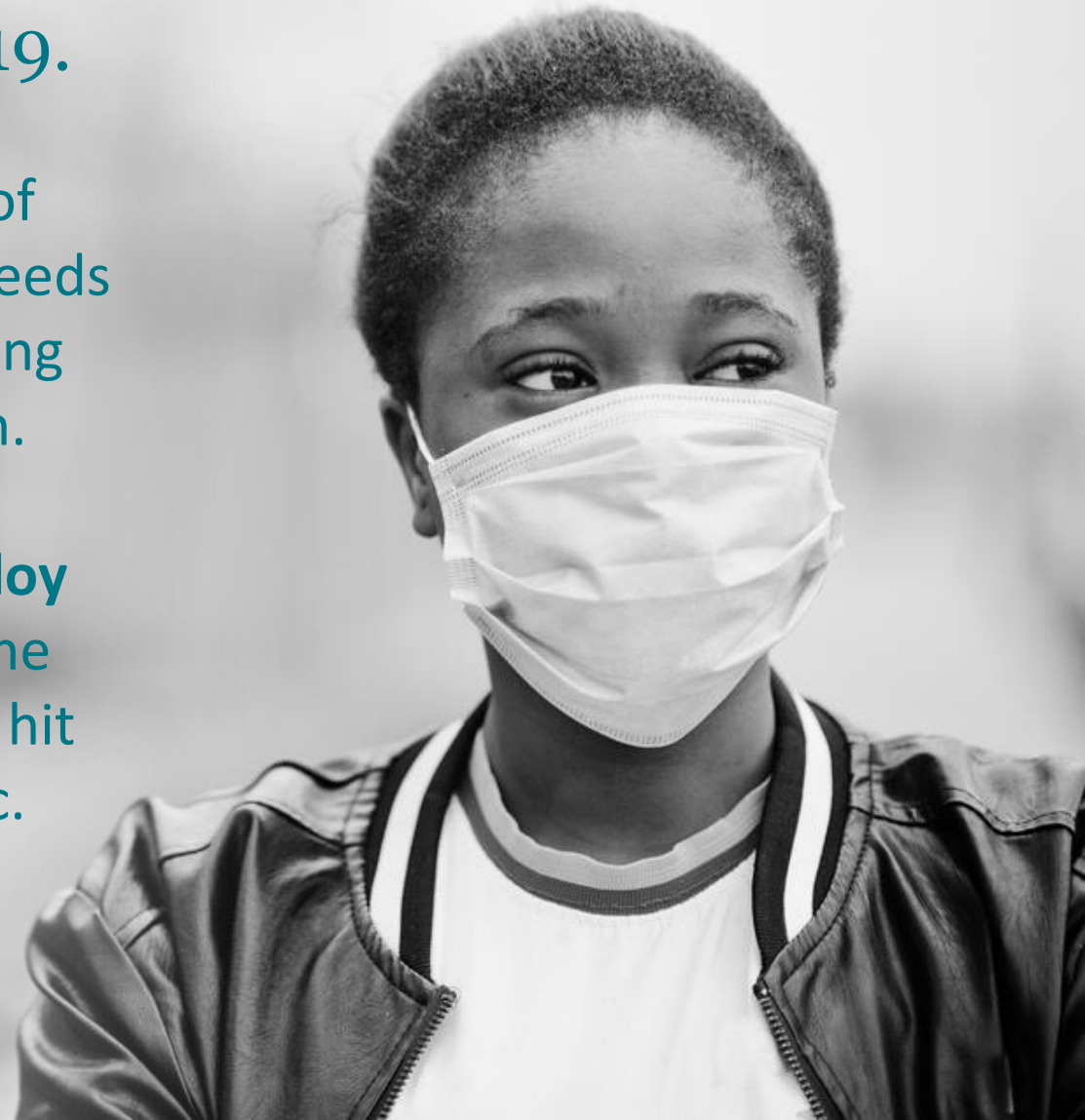
JUNE 30, 2021



Our mission is to fill the
gaps in our nation's
response to COVID-19.

We **increase the supply** of
novel solutions for critical needs
by catalyzing and supporting
private sector innovation.

We seek to **equitably deploy**
these novel solutions in the
underserved communities hit
hardest by the pandemic.



Since March 2020, Stop the Spread has helped combat the pandemic using a 2-pronged approach

1. Capacity building

We help unblock and accelerate innovators who are **increasing the supply of COVID-19 solutions**, focusing on evolving critical needs in testing, vaccine administration, PPE, and health services.

Impact
to date

650+

Partners¹

300+

Value-add
connections made

Focus of these materials

2. Equitable deployment

Working through trusted community and healthcare organizations, we **match solutions** from the STS network with **communities** at a hyperlocal level, ensuring COVID-19 resources are **equitably distributed** in a culturally competent way

Impact
to date

380+

Solutions²

30+

Community partners

Stop the
Spread
key
enablers



*We joined forces with
ImpactAssets to provide
infrastructure and expand reach
in philanthropic and impact
investing communities*



*We continue to grow our
board of advisors, which
includes 18 subject matter
experts, key industry leaders,
and strategic partners*



*We have published **16 position papers** to drive
thought leadership across
critical needs*

¹ Partners = The STS network of organizations, corporations, individuals, or community partners that are working directly in or supporting the COVID space

² Solutions = Members of our partner network that deliver tangible goods and services that can be deployed in a hyperlocal program

Partners coming together and stretching outside of their traditional boundaries in response to COVID-19 has been critical to our work

Healthcare



Community and faith-based partners



Private sector



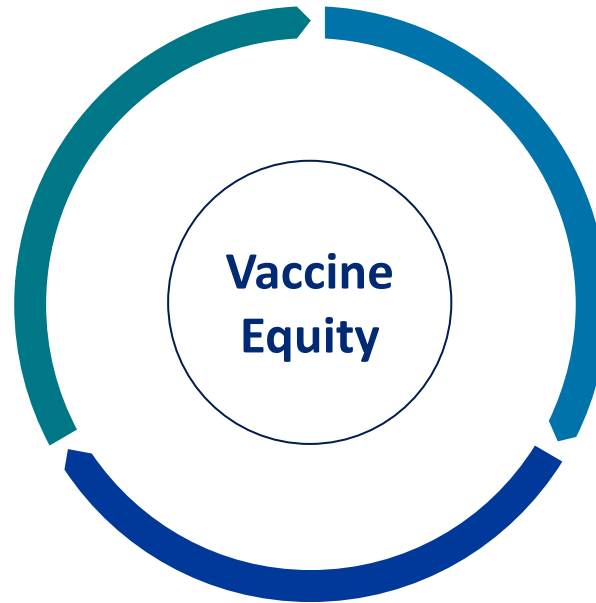
National and local coalitions



Stop the Spread brings partners together to create a flywheel of Access, Awareness, & Trust to drive vaccine equity

AWARENESS

Partner with the community and private sector to raise awareness



ACCESS

Create access that is purpose-built for the community you seek to serve

TRUST

Build on a foundation of trust with the community to build vaccine confidence

POWERED BY anchor
healthcare organizations



Community-and-faith-based
organizations



Private & philanthropic
sector partners



This is a **critical moment in history...**

to **connect** underserved populations,

to **rebuild** long-lost trust,

to **reimagine** the role that trusted community leaders play in public health,

to **advance** health equity for all,

and to create the infrastructure to prevent the next COVID-19.

COVID-19 Vaccine Distribution Models



Spotlight: Partnership Model for COVID-19 Vaccine Equity



- Licensed agency
- Responsible for vaccine
- Trusted community provider



- Best practice identification
- Cross-sector partnerships
- A-Z implementation support



- Staffing to scale (administrative and clinical)
- Community engagement



- Technical assistance
- Vaccine Command Center
- Vaccine supply



- Funding
- Technical assistance



- Streamlined Emergency CON review/approvals
-



About Community Healthcare Network

14

FQHCs

+700

staff

4

boroughs

55k

patients

Select clinical services

- Primary care (Adult & Pediatrics)
 - Health Homes/ Care Coordination
 - Women's Health and Family Planning
 - Dental Care
 - Infectious Disease
 - Behavioral Health
 - Podiatry
 - Optometry
-

Initial vaccine challenges . . .



Staff Capacity

- Administrative
- Clinical
- Implementation



Location and Space

- CHN sites are relatively small
- Limited open areas for observation



Vaccine Supply

- Intermittent deliveries
- Minimal notification



Eligible Population

- CHN patient population is primarily young with co-morbidities

Led to innovative solutions . . .

- ✓ Creative staffing models leveraging CBO and volunteer workforce
- ✓ New partnerships with med/nursing schools and the community

- ✓ Co-location of sites in CBOs and FBOs
- ✓ Even deeper understanding of the community and strengthened relationships

- ✓ Pop-up models to address supply and demand
- ✓ Flexible scheduling solutions

- ✓ Extended reach to local neighborhoods to serve underserved community members
- ✓ Ability to more quickly vaccinate CBO and FBO clients and members

Model 1: CBOs vaccinated in CHN sites

Increased access for CBOs but resulted in low volume relative to effort

OVERVIEW



CHN-run vaccine clinics located at CHN sites



CBOs invited to schedule staff/constituents



CBOs provide onsite administrative support



CBOs outreach to and schedule their staff/constituents



RESULTS

- Limited number of events
- Largest event was ~120 vaccines across 4 CBOs



CHALLENGES

- CHN physical space layout
- CHN clinical bandwidth
- Volume relative to bandwidth

Model 2: CBO-based vaccine events

Flexible model that allows for last-mile vaccine dissemination to CBOs

OVERVIEW



CBOs conduct
on-site vaccination
events



CHN provides
model and
oversight



CBO staff (leased to
CHN) provide
clinical/ admin
support

SELECT PARTNERS



RESULTS



- 13 events; 6 CBOs
- ~30 – 60 vaccines per event
- Included ACT/PROS/Health Home patients; supportive housing/ shelter residents; street medicine

CHALLENGES



- CBO interest and bandwidth: requires clinical staff; interest in taking on administrative challenges (e.g., data entry, scheduling)
- Limited to CHN's current network and partners

Model 3: Community-based pop-ups

Effective model but limited resources create challenges with volume of events

OVERVIEW



CHN identifies
community-based
partner with suitable
site space



Partner schedules
and recruits patients
or staff



Event is staffed by
CHN and Weill
Cornell Medicine

SELECT PARTNERS



**St. David's
Episcopal
Church**



RESULTS

- 19 pop-up sites (38 events)
- ~100 – 150 first doses per event
- > 5600 doses administered
- New partnerships



CHALLENGES

- Staffing
- Cadence of 1 per week
- Patient recruitment
- Funding

Model 4: Temporary, community-based vaccine sites

Made possible through partnerships, allows for a high-volume of vaccinations

OVERVIEW



4 church-based
vaccine sites
(NYC City Hall
Initiative)



Churches support
recruitment and
provide
administrative staff



Med school and
nursing school
volunteers staff sites
with CHN

SELECT PARTNERS



**Weill Cornell
Medicine**



NYU

**RORY MEYERS
COLLEGE OF NURSING**

RESULTS



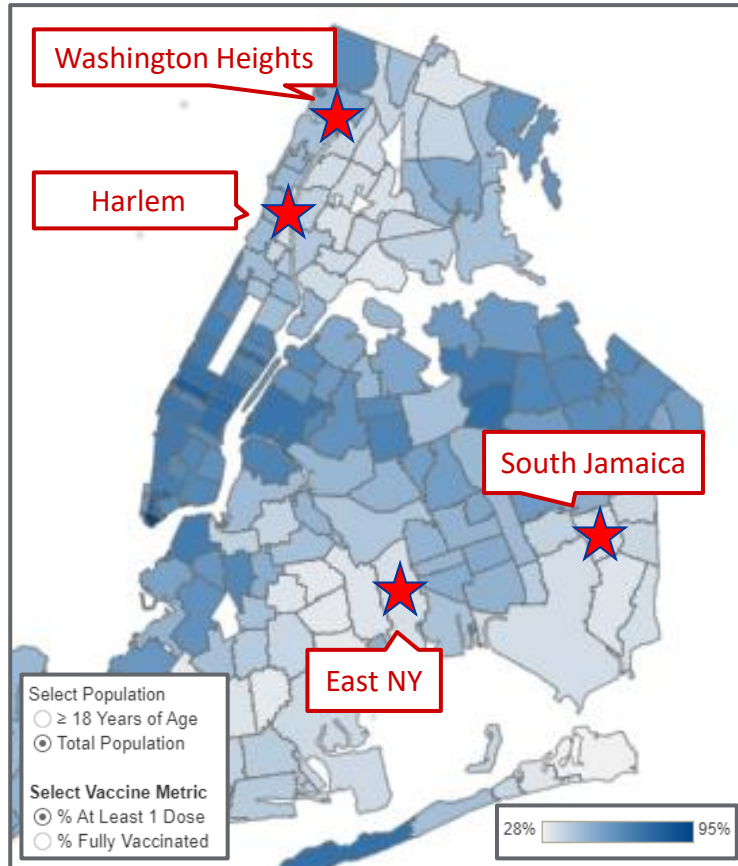
- 4 sites operating 4 days per week
- >20,200 doses administered

CHALLENGES



- Staffing – always seeking partners
- Patient volume – “tipping point”
- Partners to engage unvaccinated communities

Sites in anchor community or faith-based organizations provide neighborhoods vaccine access in a trusted space



CHN's Community-Based Vaccination Sites



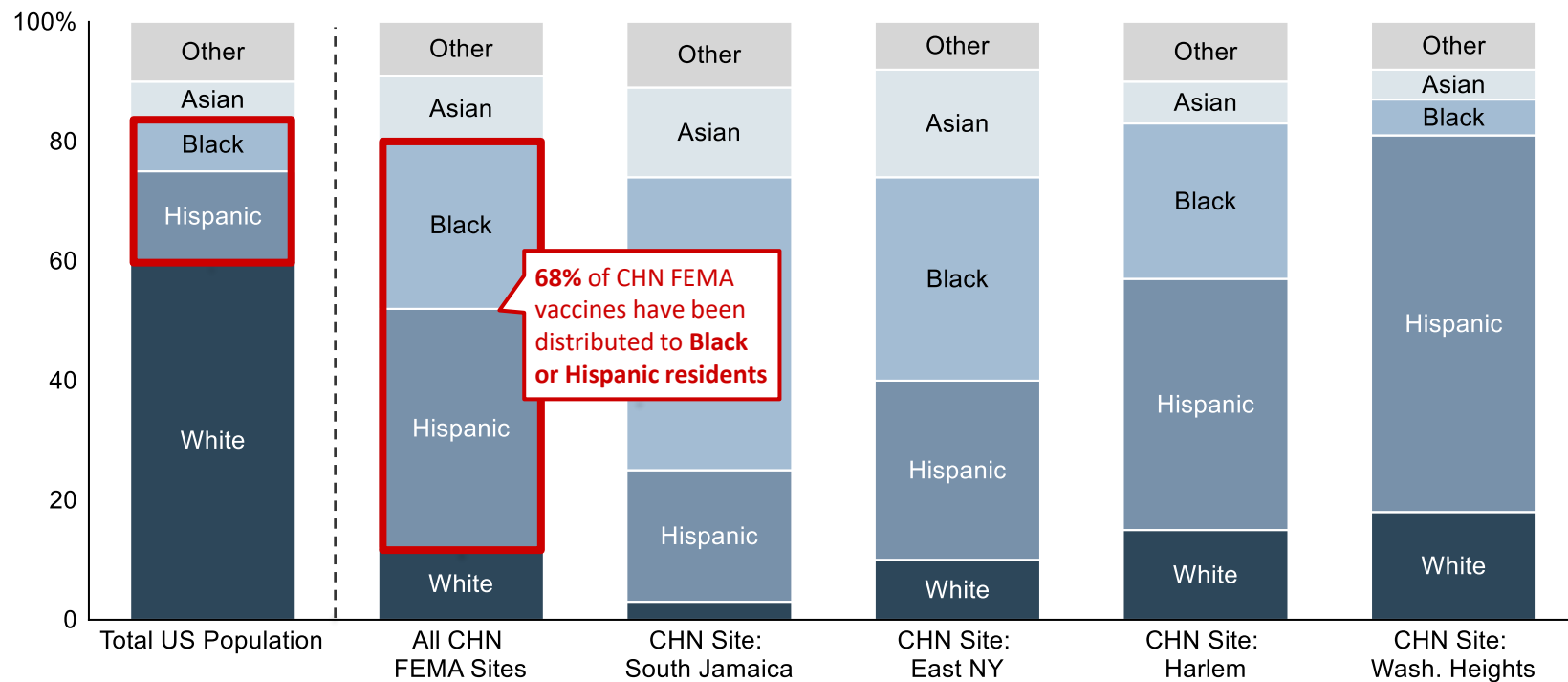
From top-left, clockwise:
Harlem, South Jamaica,
Washington Heights, East NY

Source: <https://www1.nyc.gov/site/doh/covid/covid-19-data-vaccines.page>

Insight: Of 600 community members surveyed at our sites, nearly 25% said that one of the reasons they chose the CHN site was because "I felt safe."

We have worked with community partners to ensure that the vaccines we distribute reach NYC's hardest-hit communities

People who have received ≥ 1 dose by race / ethnicity, US Population vs. CHN FEMA Sites



Note: Last updated 6/14. Categories are mutually exclusive, i.e. "Black" = "Black (non-Hispanic)". Source: NYC VAX.

Model 5: Bringing vaccines to where people are

Our newest model aims to increase vaccine volume through a community experience



**Bring vaccines to events
where people already
gather**

*(e.g., schools, green
markets, church events,
community events, sports
games)*



**Spread the word through
community and personal
networks**

*(e.g., word of mouth,
refer-a-friend, text
banking campaigns)*

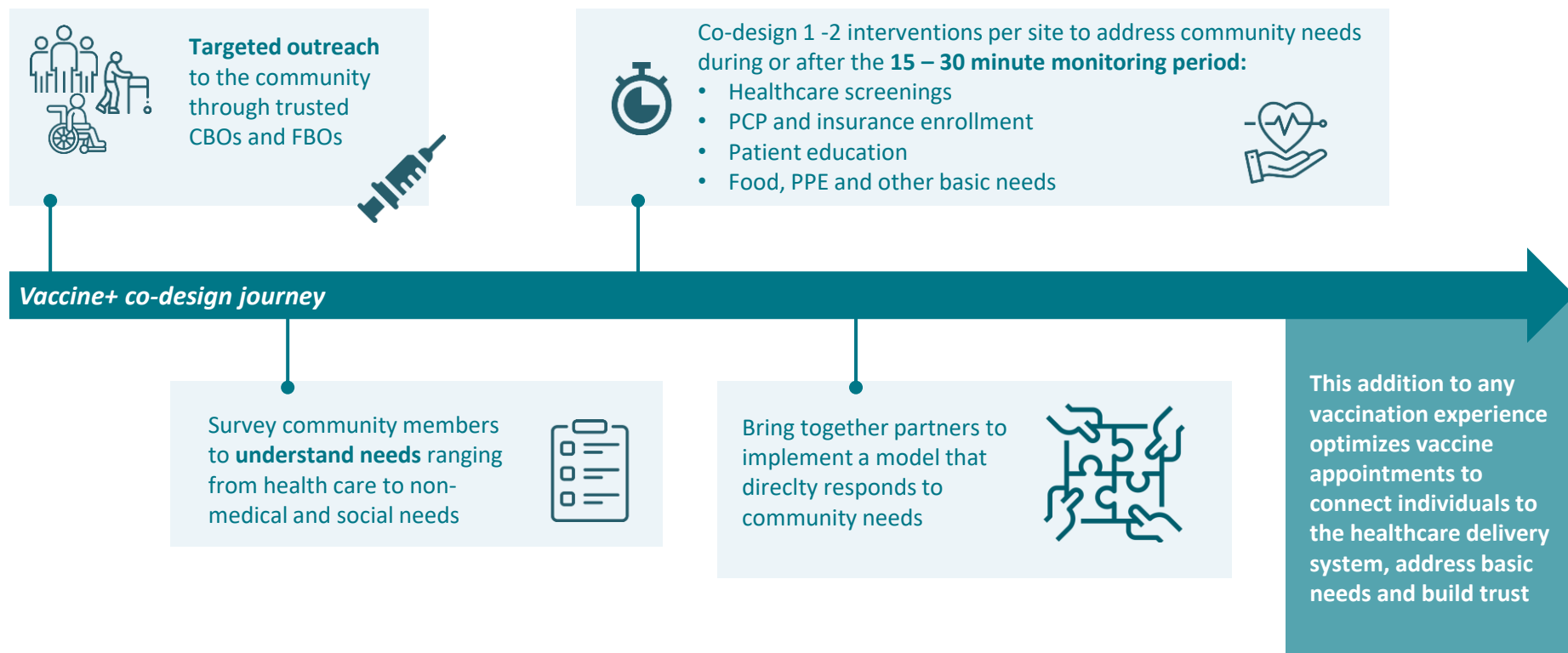


**Create a positive
community experience**

- Health screenings
- HIV testing/PrEP
- Food access
- Nutrition
- Meditation and mental health

Establishing trust and advancing health equity with Vaccine+

Vaccine+: STS aims to address community member needs and connect them directly to services during the vaccine monitoring period





Vaccine+: New York City Spotlight

NEEDS ASSESSMENT

- #1** Stress & anxiety **23%**
without PCP
- #2** COVID-related needs **31%**
uninsured
- #3** Healthy eating

INTEGRATED PROGRAM

Nutrition sessions

Insurance enrollment

Connection to primary care

Food access

Food services (SNAP, WIC)

IMPACT TO DATE

- 32** individuals screened for diabetes and cholesterol
- 6** individuals identified as prediabetic
- 3** individuals identified as diabetic
- 2** individuals connected to free nutrition services



Last-mile healthcare interventions are critical to health equity.

Vaccine+: Pride celebration, a community experience

EVENT IMPACT

46

Individuals vaccinated

21

Individuals tested for HIV

18

Individuals connected to PrEP

>100

Meals served to participants / families



Sunday, June 27 | 10am -4pm | Flushing Meadows

Music, prizes, Zumba, and free food after vaccination

Free COVID-19 vaccinations (ages 12+).

Free PrEP enrollment and HIV testing.

Walk-ins welcome.

No insurance required.

Immigration status does not matter.



Location:

47-01 111th Street
(New York Hall of Science Parking Lot)
Queens, NY 11368



For more information visit mobilize.us/madetosave/event/397625
or email emma.smith@stopthespread.org

Have questions about the COVID-19 vaccine? Text **VACCINE** to **22090**



Vaccine+ presents a valuable opportunity to build trust with community members.

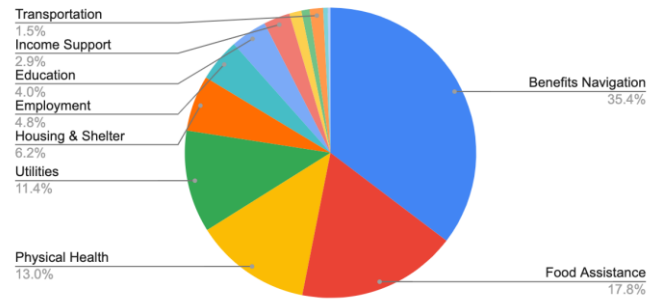


Vaccine+: Los Angeles Spotlight

NEEDS ASSESSMENT

- #1** Benefits Navigation
- #2** Food Assistance
- #3** Physical Health
- #4** Utilities

Top Priority Need



IMPACT TO DATE

1,555

program participants (and counting!)

874

meals provided through our partnership with **bento**

287

individuals to be connected with benefits counselors

11 outreach workers

9 vaccination sites

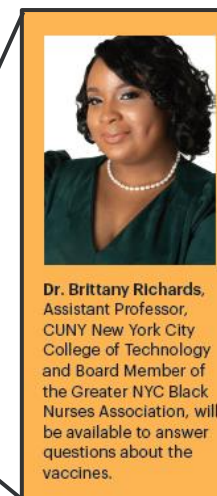
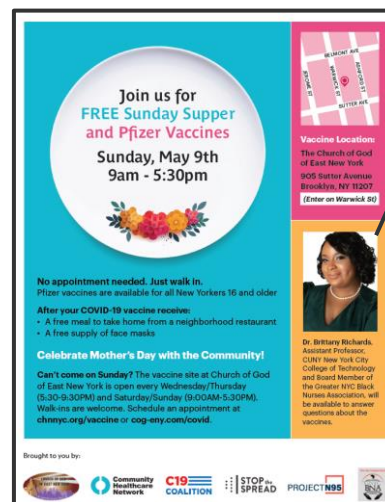
14 service categories



Vaccine+: Sunday Supper, a community experience

Sunday Supper Model with the C19 Coalition

- Local neighborhood meal after vaccination
- Sites staffed by community members, including church members
- Clinician on-site to answer questions about vaccine safety
- Create a community experience
- Neighborhood languages spoken and translation services onsite
- Emphasize that immigration and insurance status do not matter



Open-source playbook for community-based vaccinations


Today Stop the Spread is launching an open source Playbook for Community-Based Vaccinations

In January 2021, Stop the Spread began directly supporting **community-based vaccination efforts** in underserved communities in partnership with community health clinics.

We discovered that communities throughout the country are **tackling the challenge of vaccinating their citizens in siloes.**

In response, STS is publishing an **open-source community vaccination playbook for national distribution.**

We are documenting and sharing promising practices from across the country to **help communities better navigate ongoing and future vaccination initiatives and achieve vaccine equity.**

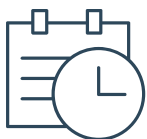


STOP the Spread Playbook for Community-based Vaccinations

- Introduction >
- BACKGROUND
 - 1. An Equitable Approach to Vaccinations >
 - 2. The Importance of a Hyperlocal Strategy >
- PARTNERING FOR IMPACT
 - 3. Cross-sector Partnerships for Collective Impact >
- SPEED + EQUITY
 - 4. Community-based Vaccination Models that Achieve Speed AND Equity >
- Glossary
- Provide Feedback
- Acknowledgements

COMING SOON!

Next Playbook drop will include best practices for outreach to drive Access, Awareness, & Trust



**Flexible
scheduling**



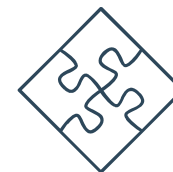
**On-the-ground
outreach**



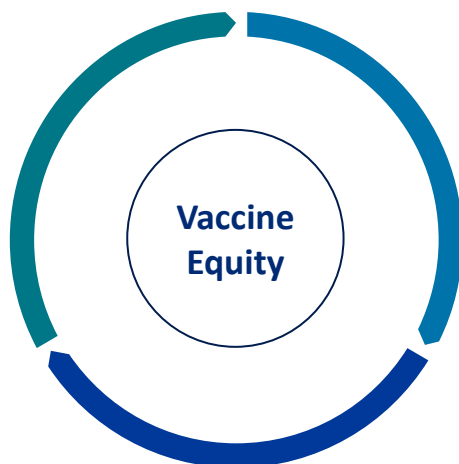
**Digital
outreach**



**Vaccination
experience**



**Vaccine+
program**



ACCESS: Create access that is purpose-built for the community you seek to serve

AWARENESS: Partner with the community and private sector to raise awareness

TRUST: Build on a foundation of trust with the community to build vaccine confidence

Together we can advance vaccine equity



Invite us to bring
vaccines to a
scheduled event



Partner with us
on outreach to build
vaccine confidence



Download and apply
the playbook to your
own efforts

Interested in partnering?

Email Emma Smith at

emma.smith@stopthespread.org

QUESTIONS, GENERAL DISCUSSION

Look for the Q&A icon at the
bottom of your screen

THANK YOU!

Please tell us about your experience
in our evaluation survey:

<https://www.questionpro.com/t/AR86uZnVbq>