Welcome to
Talking with Patients about Flu and COVID-19 Vaccinations

October 12, 2022
12:00PM – 1:00PM
Housekeeping

For Panelists: Please remember to mute yourself when not speaking.

For Attendees: Please access today’s slides through the following link: https://eziz.org/covid/crucialconversations

Please use “Q&A” to ask questions.

For post-webinar questions, contact rachel.jacobs@cdph.ca.gov
Webinar Objectives

Participants will learn:

• Flu and COVID-19 at-risk groups and symptoms
• COVID-19 and flu coadministration guidance
• How to have effective conversations about COVID-19 and flu vaccines
During today's session, please use the Q&A panel to ask your questions.
## Agenda: Wednesday, October 12, 2022

<table>
<thead>
<tr>
<th>No.</th>
<th>Item</th>
<th>Speaker(s)</th>
<th>Time (PM)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Welcome</td>
<td>Rachel Jacobs (CDPH)</td>
<td>12:00 – 12:05</td>
</tr>
<tr>
<td>2</td>
<td>Talking with Patients about Flu and COVID-19 Vaccinations</td>
<td>Karina Miranda, MSN, RN (#VacunateYa)</td>
<td>12:05 – 12:40</td>
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<tr>
<td></td>
<td><strong>Questions &amp; Answers</strong></td>
<td></td>
<td>12:40 – 12:55</td>
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<tr>
<td>3</td>
<td>Resources, Poll, and Wrap-Up</td>
<td>Rachel Jacobs (CDPH)</td>
<td>12:55 – 1:00</td>
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</table>
Poll: CDPH appreciates your feedback!

How confident are you in your ability to effectively discuss flu & COVID-19 vaccinations with patients?

- Very confident
- Confident
- Somewhat confident
- Slightly confident
- Not confident
Talking with Patients about Flu and COVID-19 Vaccinations
Karina Miranda, MSN, RN
New Horizons Nursing Care, Founder and CEO
#VacunateYa
2022-2023 Influenza Season

• Influenza and SARS-CoV-2 may co-circulate and people may become co-infected.
• There may be more influenza activity this season than in the last two seasons.
  o Reduced population immunity from fewer recent infections
  o Relaxation of measures to reduce COVID-19
• Receiving the flu and COVID-19 vaccines is the most effective way to prevent infection.
People at Risk of Developing Complications from COVID-19 and Flu

- Adults 65 years old and older
- Elderly people living in long-term care facilities
- Adults with chronic health conditions.
- Pregnant women
- Young children less than 5 years old

CDC Stay up to Date with Vaccines
Distribution of Bivalent Boosters in California as of October 11, 2022

7.8% of the eligible population has received a bivalent booster dose

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Bivalent Booster Recipients</th>
<th>% of Eligible Population with Bivalent Booster</th>
</tr>
</thead>
<tbody>
<tr>
<td>65+</td>
<td>883,539</td>
<td>15.7%</td>
</tr>
<tr>
<td>50-64</td>
<td>506,925</td>
<td>8.1%</td>
</tr>
<tr>
<td>18-49</td>
<td>674,285</td>
<td>5.0%</td>
</tr>
<tr>
<td>12-17</td>
<td>61,569</td>
<td>2.9%</td>
</tr>
<tr>
<td>Total</td>
<td>2,126,318</td>
<td>7.8%</td>
</tr>
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</table>

California Vaccination Data
Distribution of Bivalent Boosters in California

as of October 11, 2022

Bivalent Booster Dose Vaccination Rates

Higher uptake among communities living in healthier places (Vaccine Equity Metric Quartiles 3 and 4)
Infant/Toddler Vaccination Trends
as of October 11, 2022

- **4.7%** of children under 5 have completed their primary series
- Higher uptake in healthier places (Vaccine Equity Metric Q3 and Q4)
Effects on People at Risk of Developing Complications from Flu Virus

Most people can recover from the flu within 2-3 days to a week. However, the at-risk population are prone to develop life threatening complications:

- Pneumonia (serious complication)
- Sinus and ear infections
- Myocarditis (inflammation of the heart)
- Brain encephalitis
- Multiorgan failure
- Sepsis
- Worsening of chronic condition such as asthma and chronic heart conditions
COVID-19 and Flu Symptoms

- COVID-19 and flu have very similar symptoms, making them hard to differentiate.
- If a person has COVID-19, it could take them longer from the time of infection to experience symptoms than if they have flu.
  - **Flu:** Typically, a person may experience symptoms anywhere from **one to four days after infection**.
  - **COVID-19:** Typically, a person may experience symptoms anywhere from **two to five days, and up to 14 days after infection**.
- Because of the similarity in symptoms, patients should get tested for both the flu and COVID-19 at the first sign of symptoms.
Flu and COVID-19 Vaccine/Booster Dose Eligibility

- All individuals 6 months of age and older should get vaccinated for the flu and COVID-19.
  - Different flu and COVID-19 vaccines are approved for people of different ages. Everyone should get a vaccine that is appropriate for their age.
COVID-19 vaccination is recommended for everyone ages 6 months and older.

Today, the FDA expanded emergency use authorized of COVID-19 bivalent booster doses to individuals ages 5 years and older. This authorization is pending CDC and Western States Scientific Safety Review Workgroup recommendations.
flu Vaccine Timing

• Annual influenza vaccination is recommended for persons 6 months of age and older. Some children will need 2 doses of influenza vaccine in the same season. The following children will require 2 doses of influenza vaccine, administered at least 4 weeks apart, for the 2020–2021 season:
  o Children 6 months through 8 years of age who have never received seasonal influenza vaccine or for whom vaccination history is unknown
  o Children 6 months through 8 years of age who have not received at least 2 doses* of seasonal influenza vaccine (trivalent or quadrivalent) before July 1, 2020

• The following children will require 1 dose of influenza vaccine for the 2020–2021 season:
  o Children 6 months through 8 years of age who have received at least 2 doses* of seasonal influenza vaccine (trivalent or quadrivalent) before July 1, 2020
  o Children 9 years of age and older
  *Doses do not need to have been received during the same or consecutive influenza seasons.
COVID-19 and Flu Coadministration

• Providers should offer flu and COVID-19 vaccines to eligible patients at the same visit.

• Studies looking at coadministration have shown that immunogenicity is similar between those who received coadministered COVID-19 vaccine and seasonal influenza vaccine (SIV) and those who received these vaccines separately.
COVID-19 Vaccine Coadministration Best Practices

- Label each syringe with the name and the dosage (amount) of the vaccine, lot number, initials of the preparer, and exact beyond-use time, if applicable.
- Administer each vaccine in a different injection site (at least 1 inch apart)
- Administer vaccines that may be more likely to cause a local reaction (e.g., tetanus-toxoid-containing and PCV13, adjuvanted or high-dose influenza) in different limbs, if possible.
Clinic Flow: 15 Minute Post-COVID-19 Vaccination Observation Period Now Optional

- 15 min post-vaccination observation period previously recommended by CDC
- Vaccination providers **should consider** an observation period:
  - Consider 15 min observation: Adolescents (risk of syncope)
  - Consider 30 min observation:
    - Allergy-related contraindication to a different type of COVID-19 vaccine
    - Non-severe, immediate (onset within 4 hours) allergic reaction after a previous dose of COVID-19 vaccine.
    - Anaphylaxis after non-COVID-19 vaccines or injectable therapies
Discussing COVID-19 Vaccines during Flu Vaccinations: Raising Awareness and Urgency

- Parents may be unaware that their infants/toddlers are eligible for COVID-19 vaccines.
- Parents may not think their children need the COVID-19 vaccine.
- Vaccine safety is **top concern** among parents.

### Reasons for children not receiving or planning to receive a COVID–19 vaccine*

<table>
<thead>
<tr>
<th>Reason</th>
<th>Hispanic or Latino (may be of any race)</th>
<th>White alone, not Hispanic</th>
<th>Black alone, not Hispanic</th>
<th>Asian alone, not Hispanic</th>
<th>Two or more races + Other races, not Hispanics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concerned about possible side effects for children</td>
<td>59%</td>
<td>66%</td>
<td>55%</td>
<td>38%</td>
<td>44%</td>
</tr>
<tr>
<td>Plan to wait and see if it is safe</td>
<td>66%</td>
<td>59%</td>
<td>55%</td>
<td>38%</td>
<td>44%</td>
</tr>
<tr>
<td>Not sure if vaccine will work for children</td>
<td>62%</td>
<td>54%</td>
<td>45%</td>
<td>33%</td>
<td>40%</td>
</tr>
<tr>
<td>Don’t believe children need a vaccine</td>
<td>10%</td>
<td>16%</td>
<td>9%</td>
<td>6%</td>
<td>12%</td>
</tr>
<tr>
<td>Children in household not a high risk group</td>
<td>24%</td>
<td>33%</td>
<td>22%</td>
<td>33%</td>
<td>33%</td>
</tr>
<tr>
<td>Children’s doctor has not recommended a vaccine</td>
<td>15%</td>
<td>29%</td>
<td>22%</td>
<td>33%</td>
<td>33%</td>
</tr>
</tbody>
</table>

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U.S. Census Bureau Week 47 Household Pulse Survey: June 29 - July 11
Strategies for Increasing Flu and COVID-19 Immunization

• **Provider/care team**
  - Offer a strong, presumptive recommendation.
  - Bundle recommendation for influenza vaccine with recommendations for other needed vaccines.
  - Use consistent messaging across care team members.

• **Practice/health system**
  - Identify patients who need to be vaccinated for influenza, routine childhood immunizations, and COVID-19.
  - Vaccinate at all visit types and in all healthcare settings.
  - Send influenza vaccine reminder/recall messages.
  - Utilize standing orders for influenza vaccine.
  - Implement influenza vaccine provider prompts/clinical decision support.
  - Integrate electronic health records (EHR) with regional or state immunization systems.
Discussing COVID-19 and Flu Vaccines with Parents

Getting children vaccinated against flu and COVID-19 can:

• reduce disruptions to childcare and in-person learning and activities
• help protect others at home, including the most at-risk members of your family and community, such as grandparents, babies, and people with compromised immune systems.
Discussing COVID-19 and Flu Vaccines with Pregnant Women

• COVID-19 and flu vaccines are safe in all three trimesters of pregnancy

• Pregnant women who get COVID-19 and flu vaccinated help to protect their babies from flu and COVID-19 illness for the first several months after their birth, when they are too young to get vaccinated.

• Getting a flu vaccine can reduce a pregnant woman’s risk of being hospitalized with flu by an average of 40%
Discussing COVID-19 Bivalent Booster Doses

Q: Why do I need the bivalent (updated) booster dose?

A: Bivalent (updated) booster doses are meant to enhance or restore protection that might have decreased over time after completing a primary series vaccination. When you first complete your primary dose, your immunize system learned how to recognize and destroy the COVID-19 virus. After a period of time, it is necessary to refresh or update this new skill. The bivalent (updated) booster has been designed to bring new information to your immunize system to help you fight the new COVID-19 variants.
Discussing COVID-19 Bivalent Booster Doses

**Q:** Can I get a bivalent booster dose now, if I just recently got my second monovalent booster?

**A:** You will need to wait until two months have passed since your last booster dose. Get the bivalent booster shot as soon as you are eligible, and you will have expanded protection!
Discussing COVID-19 Bivalent Booster Doses

Q: How long do I need to wait to get the bivalent booster if I have had COVID-19?

A:

- People with known current SARS-CoV-2 infection should defer any COVID-19 vaccination, including booster vaccination, at least until recovery from the acute illness (if symptoms were present), and criteria to discontinue isolation have been met.
- People who recently had SARS-CoV-2 infection may consider delaying a primary series dose or booster dose by 3 months from symptom onset or positive test (if infection was asymptomatic).
Discussing COVID-19 Bivalent Booster Doses

Can we “mix and match” the new bivalent booster dose brand with another brand?

Yes. Any homologous or heterologous age-appropriate mRNA vaccine can be used if a booster dose is FDA-authorized for use in a specified population.
To address patients concerns about COVID-19 vaccines, use the 3-5-3 method.

3 Steps to Start the Conversation
5 Key Messages
3 Post-Conversation Steps
3 Steps to Initiating Conversations

1. Ask and listen to the answer
   “What do you think about the vaccine?”
   “Why do you feel that way?”
   “What concerns do you have about the vaccine?”

2. Create an alignment of safety
   "I would be scared too. Let’s do what’s safe here.”
   “We both want what's safest for you.”

3. Find common goals
   “We all want to be able to safely be with our loved ones again.”
   “What reasons would motivate you to get vaccinated?”
   Find their personally motivating reason.
Key Messages

1. The vaccine will keep you safe.

The vaccine will protect you from getting very sick. Over 200 million Americans have been safely vaccinated and are now protected.
Key Messages

Mild side effects are common, but serious side effects are rare.

Side effects are a sign that your body is protecting you.
For a few days after vaccination, many people temporarily feel:
• Sore arm (at administration site)
• Tired or fatigue
• Headache
• Muscle pain
• Joint pain
Key Messages

Mild side effects are common, but serious side effects are rare.

“What about the concern of myocarditis?”

- For all ages, the average risk of myocarditis from the vaccine is 1 in 200,000, which is 10 times less likely than being struck by lightning.
- The risk of myocarditis is much higher from COVID-19 infection than it is from the vaccine, and myocarditis is usually much more serious after COVID-19 infection than after immunization.
Key Messages

3 Vaccines are very effective.

Each vaccine is extremely effective at preventing hospitalization and death from COVID-19 and its variants.
Key Messages

The vaccine is built on 20 years of research and science.

It is good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.
I am glad you want to know more. Ultimately, the choice is yours. Today or when you’re ready, go to myturn.ca.gov or text your zip code to GETVAX or VACUNA to get your vaccine.
## COVID-19 Vaccine Language Tips

<table>
<thead>
<tr>
<th>Do Say</th>
<th>Don’t Say</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vaccination</td>
<td>Injection or shot</td>
</tr>
<tr>
<td>A safe and effective vaccine</td>
<td>A vaccine developed quickly</td>
</tr>
<tr>
<td>Authorized by FDA based on clinical testing</td>
<td>Approved by FDA; Operation Warp Speed; Emergency Use Authorization*</td>
</tr>
<tr>
<td>Get the latest information</td>
<td>There are things we still don’t know</td>
</tr>
<tr>
<td>Keep your family safe; keep those most vulnerable safe</td>
<td>Keep your country safe</td>
</tr>
<tr>
<td>Public Health</td>
<td>Government</td>
</tr>
<tr>
<td>Health/medical experts and doctors</td>
<td>Scientists</td>
</tr>
<tr>
<td>People who have questions</td>
<td>People who are hesitant, skeptical, resistant, or “anti-vaxxers”</td>
</tr>
</tbody>
</table>

*The perceived speed of vaccine development is a current barrier among many audiences. These recommendations are based partly on research conducted by the de Beaumont Foundation.*
3 Steps Post-Conversation

1. Acknowledge their agency and personal choice
   “I want you to get vaccinated today, but ultimately it’s your choice.”
   “I'm here as a resource to help you.”

2. Keep lines of communication open
   Trust is a journey. Give folks a way to reach you that you are comfortable with as they consider their decision.

3. Offer to find a vaccine
   Offer myturn.ca.gov or have them text their zip code to GETVAX or VACUNA to find a free vaccine location in their neighborhood.
Help Us Determine The Future of #ThisIsOurShot and #VacunateYa!

Take our survey here!
Questions & Answers and Discussion

During today's session, please use the Q&A panel to ask your questions.
Poll & Resources
Rachel Jacobs, CDPH
Poll: CDPH Appreciates Your Feedback!

Following this webinar, how confident are you in your ability to effectively discuss flu & COVID-19 vaccinations with patients?

- Very confident
- Confident
- Somewhat confident
- Slightly confident
- Not confident
Clinical Talking Points for Providers of Pediatric Services

A guide to having effective conversations with families about COVID-19 vaccines:

- Start the conversation now
- Validate parental concerns
- Provide accurate information

Recommendation of COVID-19 Vaccination: Clinical Talking Points for Providers of Pediatric Services

This resource is designed to help you and your staff have effective conversations with families about COVID-19 vaccines, as you are the most trusted source of medical information for families.

Begin to discuss COVID-19 vaccination now.

Start by asking, “What are your thoughts on your child receiving the vaccine?” Then listen closely to their answers. Remember that the goals of these conversations are to have a calm discussion, answer questions, understand and acknowledge any fears they express, and convey accurate information. This sets the stage for future visits, as families may need many conversations before they are ready to have their young children immunized.

Validate parental concerns and answer questions without judgement.

As their child’s provider, your guidance is influential to parents. Hearing your opinion that immunization is safe and effective can be reassuring. When parents express hesitancy, ask about their concerns and acknowledge their views. For example, “If I read those things on Facebook, I would be scared, too. Let’s talk about your concerns.” Let parents know that you share their goal of keeping their children safe.

Give parents accurate information.

Here are common questions and talking points to help parents. Praise parents who ask questions for wanting to know more. Wrap up the conversation by making a recommendation while acknowledging their authority in deciding for their children. For example, “I think getting vaccinated is best for your child, and ultimately, it’s your choice. I’m here to guide you and answer your questions.”

Why should my child get the COVID-19 vaccine?

- It’s effective: The vaccine does not protect against all COVID-19 infections, but studies have shown it is effective in preventing severe illness and hospitalization, including among the vaccinated.
- Children with pre-existing conditions are at higher risk for severe COVID-19 outcomes. Vaccination is especially recommended to keep children with chronic conditions and disabilities safe and healthy.
- “Healthy” children with no pre-existing conditions can have severe COVID-19, too. During Omicron, 63% of children under 5 years hospitalized with COVID-19 did not have any underlying conditions.

California COVID-19 Vaccination Program

IMM-1431 (4/22) Page 1
Don’t Wait – Vaccinate! Campaign

• Integrate IZ catch up talking points (updated!) into your activities.
• Tailor and share social media messages/images.
• Share these resources with providers and schools:
  ✓ Template provider letter to patients (English and Spanish)
  ✓ School letter templates (English and Spanish)
Don’t Wait – Vaccinate! Flu Campaign

- Integrate 2022-23 Flu Season Talking Points into your activities
- Tailor and share social media messages/images
- Share flu resources with providers and schools
Additional Flu Season Resources

- **Fight the Flu Toolkit** (CDPH) – Promote flu shots through [My Turn](https://myturn.ca.gov/)
- **Flu Communication Resource Center** (CDC)
- **Flu and Respiratory Disease Prevention Materials** (EZIZ)
Toolkits, Fliers, Conversation Guides, and Videos

#ThisIsOurShot Toolkit
COVID-19 Crucial Conversations Campaign

COVID-19 VACCINE CONVERSATIONS
TOP MESSAGES

SAFETY
The vaccine will protect you from getting very sick from COVID. Over 150 million Americans have been safely vaccinated and are now protected.

SIDE EFFECTS
Side effects are common. They are a sign your body is building up its defenses to protect you. Many people temporarily feel:
1. Sore arm (near site of vaccination)
2. Fatigue
3. Headache
4. Muscle pain
5. Joint pain

EFFECTIVENESS AND VARIANTS
Each vaccine is nearly 100% effective at preventing hospitalization and death from COVID and its variants. It will allow us to do the things we love and miss most. Vaccinated individuals can get a mild COVID infection.

SPEED
It’s good to be careful when new things come along. Health experts took all the necessary steps to produce a safe vaccine, and it was built on 20 years of research and science.

QUESTIONS?
I’m glad you want to know more. Ultimately, the choice is yours. If you have questions, talk with your doctor or healthcare provider soon.

Help spread the truth about COVID vaccines.

YOUR KIDS SHOULD GET THE COVID-19 VACCINE

TOP 5 REASONS

Unvaccinated children are at risk of getting COVID-19, and can suffer very serious complications, and potential long-term impacts that we are still learning about. The vaccine is safe and effective, and no long-term problems have been seen for any vaccine.

The science behind the vaccine has been under development and studied by the U.S. Department of Health and Human Services for over 20 years.

Getting those who are eligible vaccinated can help keep school communities safe.

Kids have missed critical social and emotional milestones with their school community. Getting them safely back to the classroom and their favorite afterschool activities helps support their mental health and wellness.

Vaccines are safe, effective, and free, regardless of insurance or immigration status.

Get your children back to school safely. Get them vaccinated against COVID-19 today! Learn more at VaccinateAll58.com.
Next Crucial Conversations Webinar: Safely Combatting Misinformation on Social Media

Please join Vicki Chan, MD, #ThisIsOurShot, to discuss safely combating misinformation on social media.

When: Wednesday, October 19th at 12:00PM-1:00PM

Register here!
Upcoming Opportunities

Monday
My Turn and myCAvax Office Hours
Next session: Monday, October 17, 12PM

Friday
Provider Consolidated Webinar
Next session: Friday, October 14, 9AM

Note: New session length of 90-minutes to include COVID-19 Vaccine, COVID-19 Therapeutics, MPX Vaccine, and MPX Therapeutics
# Additional Support

<table>
<thead>
<tr>
<th>Type of Support</th>
<th>Description</th>
<th>Updated 6.6.22</th>
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</table>
| **COVID-19 Provider Call Center** | The COVID-19 Call Center for Providers and Local Health Departments is dedicated to medical providers in California and their COVID-19 response, specifically addressing questions about State program requirements, enrollment, and vaccine distribution, including the Vaccine Marketplace.  
  - Email: covidcallcenter@cdph.ca.gov  
  - Phone: (833) 502-1245, Monday through Friday from 8AM–6PM | |
| **Enrollment Support** | For Provider enrollment support, please contact myCAvax Clinic Operations at  
  - Email: myCAvaxinfo@cdph.ca.gov | |
| **myCAvax Help Desk** | Dedicated staff provide up-to-date information and technical support on the myCAvax system.  
  - Email: myCAvax.HD@Accenture.com  
  - Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM | |
| **My Turn Clinic Help Desk** | For onboarding support (those in the process of onboarding): myturnonboarding@cdph.ca.gov  
For technical support with My Turn Clinic for COVID-19 and flu vaccines: MyTurn.Clinic.HD@Accenture.com or (833) 502-1245, option 4: Monday through Friday 8AM–6PM  
For job aids, demos, and training opportunities: flu at https://eziz.org/covid/myturn/flu/ and COVID at https://eziz.org/covid/myturn/ | |
| **Archived Communications** | For archived communications from the COVID-19 Provider Call Center about the California COVID-19 Vaccination Program visit  
  - Website: EZIZ Archived Communications | |
Special Thanks to
Today's Presenter:
Karina Miranda, MSN, RN

Webinar Planning & Support:
Rachel Jacobs, Cheri Banks, Tyler Janzen, Blanca Corona, Selena Polston, Leslie Amani