





CITY OF NEW HAVEN COVID-19 VACCINE UPDATE

JANUARY 18, 2021



NEW HAVEN HEALTH DEPARTMENT



DISCLAIMER



The information in this presentation is current as of January 18, 2021, unless otherwise noted, and subject to change.





- 1) Understand and describe the current COVID-19 situation in the City of New Haven
- 2) Discuss COVID-19 mass vaccination planning efforts
- 3) Outline safety and efficacy data for the COVID-19 vaccine
- 4) Learn additional considerations about the vaccine

CT DPH COVID FRAMEWORK

Town Map

Average Daily Rate of COVID-19 Cases Among Persons Living in Community Settings per 100,000 Population By Town



https://portal.ct.gov/coronavirus/covid-19-data-tracker

CONNECTICUT DEPARTMENT OF PUBLIC HEALTH TOWN-LEVEL COVID RESPONSE FRAMEWORK

	Yellow 5-9 cases per 100k per day	Orange 10-14 cases per 100k per day	<u>Red</u> 15+ cases per 100k per day
	,	ENCOURAGE TESTING FOR	ASYMPTOMATIC RESIDENTS
DPH Response	Outreach to Local Health Department	Weekly calls with Local Officials	Issue Public Health Alert
		HIGH-RISK INDIVIDUALS SHO	ULD STAY HOME, STAY SAFE
A Individuals	Masks, distancing, extra precautions for high risk	Avoid larger events, limit time with non-family members	Limit trips outside home, avoid gatherings with non- family members
e e e e e e e e Communities	Scale up public awareness, social media	Scale back public events	Cancel public events and limit community gathering points; Reverse 9-1-1
Organized Group Activities	Move activities outdoors where possible	Limit group sizes; Postpone indoor activities where mask wearing or social distancing cannot be maintained	Postpone all indoor activities; Postpone outdoor activities where mask wearing or social distancing cannot be maintained
Pre K-12 Schools	Re-Enforce and monitor safety measures with staff, students and families	Maximize spacing, mask wearing, ventilation and hygiene to support in-person learning	In collaboration with Local Health Department and Superintendent, consider more distance learning above 25
_r A,	REMIND STAFF TO ASSESS THE	IR SYMPTOMS DAILY AND NOT REPO	RT TO WORK IF THEY ARE ILL
Business & Sector Rules	Phase 3 with enhanced enforcement	Phase 3 with enhanced enforcement	Municipal option to revert to Phase 2
	CT DPH would	d like to remind evervon	e of the 3 W's:
D DH	Wear your mask, V	Wash your hands, and W	/atch your distance!

COUNTY INDICATORS (12/27-1/9)

Indicators by County

Summary Table

	Leading		Secondary			
County	New COVID-19 cases per 100,000 population per day	Leading Indicator Risk Category	Percent test positivity	New COVID-19 hospitalizations per 100,000 population per day	Percent COVID- 19-like illness hospital ED visits	Secondary Indicators Risk Category
Fairfield	64.9	High	8.8%	4.9	7.7%	High
Hartford	70.2	High	8.9%	5.5	6.0%	High
Litchfield	50.2	High	9.0%	1.9	4.8%	High
Middlesex	60.9	High	7.3%	5.8	5.8%	High
New Haven	69.1	High	8.0%	4.9	6.4%	High
New London	83.8	High	8.6%	5.8	7.6%	High
Tolland	48.1	High	8.8%	0.7	6.5%	High
Windham	100.6	High	10.2%	4.5	6.7%	High
Connecticut	68.5	High	9.5%	4.8	6.5%	High

Data for each reporting period is based on data available on the Wednesday of the following week at 8:30PM. Dates are based on date of specimen collection (cases and positivity), date of and test counts do not include cases and tests among people residing in congregate settings, such as nursing homes, assisted living facilities, or correctional facilities. All data are prelimin Source: CT Department of Public Health - Created with Datawrapper

Leading Indicator	MORE In-Person Learning	Re-assess strategies to determine appropriate balance of in-person and remote learning (hybrid learning)	LESS In-Person Learning
Number of new cases of COVID-19 (14-day average of new cases per 100,000 population per day)	< 10 new cases per 100,000 per day	10 to < 25 cases per 100,000 per day	25+ cases per 100,000 per day
[Reduce	e Person-Density in School Build	lings
Secondary Indicators	MORE In-Person Learning	Re-assess strategies to determine appropriate balance of in-person and remote learning (hybrid learning)	LESS In-Person Learning
Percent positivity rate (# of positive tests/ # of total tests, 14-day average)	Secondary Indicators trending down to flat	Direction of Change: Secondary Indicators trending flat to upward	Secondary Indicators trending upward
Number of new COVID-19 hospitalizations per 100,000 population (14-day average)	No statistically significant changes	Speed of Change: Any statistically significant changes upward to Secondary Indicators	Consistent, statistically
COVID-like and Influenza-like Illness (CLI and ILI) Syndromic Surveillance	Indicators	Secondary moreators	changes upward to Secondary Indicators

* Originally adapted from: the Harvard Global Health Institute's publication The Path to Zero and Schools: Achieving Pandemic Resilient Teaching and Learning Spaces. July 2020 and revised in consideration of the Centers for Disease Control and Prevention (CDC) guidance document Indicators for Dynamic School Decision-Making, updated September 15, 2020

https://data.ct.gov/stories/s/CT-School-Learning-Model-Indicators/ddy2-ijgu/

YNHH In-House COVID-Positive and ICU COVID-Positive (COVID+) Patients

from April 1, 2020 - Jan 18, 2021

----In-House COVID+ Pts ----ICU COVID+ Pts



COVID-19 VACCINES & TIMELINE



VACCINE CONFIDENCE

- 1. Safety is a top priority
- 2. COVID-19 vaccines will not give you COVID-19
- 3. COVID-19 vaccines will <u>not</u> cause you to test positive on COVID-19 viral tests
- 4. People who have been previously infected with COVID-19 may still benefit from getting vaccinated
- 5. Getting vaccinated can help prevent getting sick with COVID-19
- 6. Vaccination may help to lessen symptoms of COVID-19 illness if you get COVID-19.
- 7. May *protect* people around you, particularly those at increased risk for severe illness from COVID-19.
- 8. A critical piece in helping to control the pandemic.
- 9. <u>Recommended by CDC/Approved by FDA EUA</u>



VACCINATION PROTECTS US FROM DISEASES

COVID-19 VACCINE IN CT

Information on scheduling a vaccination is coming soon. We will post all guidance and instruction at <u>CT's</u> <u>main COVID-19 Vaccination Portal</u> as early as next week. At that time you may also wish to talk to your provider about getting access to the vaccine.



- Healthcare Workers
- Residents of long-term care facilities
- Medical First Responders

Phase 1b: Prioritization Pending

• Individuals 75 years and older

Later 1B

- Frontline essential workers
- Individuals and staff in congregate settings

<u>Phase 1c</u>: Updated information will be coming soon

Future Phases Summer/Fall 2021

• General public

https://portal.ct.gov/Coronavirus/COVID-19-Vaccination---Phases







PFIZER/BIONTECH MODERNA



ABOUT THESE COVID-19 MRNA VACCINES



These mRNA vaccines may produce side effects after vaccination Side effects may include:

- Fever
- Headache
- Muscle aches



No significant safety concerns were identified in the clinical trials. At least 8 weeks of safety data were gathered in the trials. It is unusual for side effects to appear more than 8 weeks after vaccination.

COVID-19 VACCINE QUICK SUMMARY



	moderna	Pfizer	
How it works	Messenger RNA (mRNA) vaccines teach human cells to make "spike protein", found on the virus that causes COVID-19 Our bodies learn to recognise that the protein doesn't belong there and make antibodies against future infection		
Storage	30 days with refrigeration; 6 months at -20°C	Freezer storage only at -70°C	
Dosage	2 doses, 28 days apart	2 doses, 21 days apart	
Efficacy	94.1% (95% CI: 89.3-96.8%)	95% (95% CI: 90.3-97.6%)	

Infographic by Rafa Estrada Sources: Reuters, US Centers for Disease Control and Prevention

https://www.channelnewsasia.com/news/world/covid-19-vaccines-comparison-pfizer-sinovac-moderna-13784890

https://www.cdc.gov/vaccines/acip/recs/grade/covid-19-moderna-etr.html#:~:text=The%20clinical%20trial%20for%20the,laboratory%2Dconfirmed%20COVID%2D19.&text=The%20overall%20efficacy*%20was%2094.1,%5D%3A%2089.3%25%2C%2096.8%25).

COVID-19 VACCINE TRIALS BY THE NUMBERS (AS OF NOVEMBER 30, 2020)



Pfizer/BioNTech

- 43,125 enrolled
- 150 trial sites in 6 countries
- 39 U.S. states Racial/ethnic distribution (U.S.)
- 13% Hispanic/Latinx
- 10% African American
- 6% Asian
- 1.3% Native American

<u>Moderna</u>

- **30,000** enrolled
- **89** clinical sites
 - 32 U.S. states

Racial/ethnic distribution

- 63% White
- 20% Hispanic/Latinx
- 10% African American/Black
- 4% Asian
- 3% All others

COMMON REPORTED SIDE EFFECTS FROM CLINICAL TRIALS



- Injection site pain, swelling, tenderness, redness
- Tiredness/fatigue
- Headache
- Muscle pain
- Chills
- Joint pain
- Fever
- Nausea/vomiting
- Feeling unwell
- Swollen lymph nodes (lymphadenopathy)



VACCINE RECIPIENT CONSIDERATIONS

IMMUNOCOMPROMISED PERSONS





- Persons with HIV infection, other immunocompromising conditions, or who take immunosuppressive medications or therapies might be at increased risk for severe COVID-19
- Data not currently available to establish safety and efficacy of vaccine in these groups
- These individuals may still receive COVID-19 vaccine unless otherwise contraindicated
- Individuals should be counseled about:
 - Unknown vaccine safety and efficacy profiles in immunocompromised persons
 - Potential for reduced immune responses
 - Need to continue to follow all current guidance to protect themselves against COVID-19



PERSONS WITH UNDERLYING MEDICAL CONDITIONS

- Vaccine may be administered to persons with underlying medical conditions who have no contraindications to vaccination
- Phase 2/3 clinical trials demonstrate similar safety and efficacy profiles in persons with underlying medical conditions, including those that place them at increased risk for severe COVID-19, compared to persons without comorbidities



PREGNANT WOMEN





- There are no data on the safety of COVID-19 vaccines in pregnant women
- mRNA vaccines and pregnancy
 - Not live vaccines
 - They are degraded quickly by normal cellular processes and don't enter the nucleus of the cell
- COVID-19 and pregnancy
 - Increased risk of severe illness (ICU admission, mechanical ventilation and death)
 - Might be an increased risk of adverse pregnancy outcomes, such as preterm birth
- If a woman is part of a group (e.g., healthcare personnel) who is recommended to receive a COVID-19 vaccine and is pregnant, the individual may choose to be vaccinated. A discussion with their healthcare provider can help aid in an informed decision.
- Considerations for vaccination:
 - level of COVID-19 community transmission (risk of acquisition)
 - her personal risk of contracting COVID-19 (by occupation or other activities)
 - the risks of COVID-19 to her and potential risks to the fetus
 - the efficacy of the vaccine
 - the known side effects of the vaccine
 - the lack of data about the vaccine during pregnancy

CONTRAINDICATIONS AND PRECAUTIONS





Package insert:

- Severe allergic reaction (e.g., anaphylaxis) to any component of the COVID- 19 vaccine is a contraindication to vaccination
- Appropriate medical treatment used to manage immediate allergic reactions must be immediately available in the event an acute anaphylactic reaction occurs following administration of the vaccine
- Because of reports of anaphylactic reactions in persons vaccinated outside of clinical trials, the additional following guidance is proposed:
 - A severe allergic reaction to any vaccine or injectable therapy (intramuscular, intravenous, or subcutaneous) is a precaution to vaccination at this time
 - Vaccine providers should observe patients after vaccination to monitor for the occurrence of immediate adverse reactions:
 - Persons with a history of anaphylaxis: 30 minutes
 - All other persons: 15 mins

CITY OF NEW HAVEN VACCINATION

The New Haven Health Department and City of New Haven leadership continues to plan for mass vaccination.

-First Responders

- -Healthcare Workers
- -High-Risk Populations
- -Subsequent Phases









VAMS ENROLLMENT

	DEPARTMENT OF PUBLIC HEALTH DPH Submissions System				
VA	VAMS Enrollment for Employers and Organizations				
	* - Required Field				
Description: The Vaccine Administration Management System (VAMS) is a secure, web-based application that is by invitation only to register your Employer/Organization in VAMS. Complete the following information if you are a healthcare organization or employer that have critical workforce who need to receive the COVID-19 vaccination. Each Employer/Organization must have an Employer Coordinator who can identify the critical workers and other at-risk groups who need to receive the COVID-19 vaccination and is responsible for uploading that workforce roster into VAMS for Phase 1.					
 Guidance: One representative (the "Employer Coordinator") from each healthcare organization should complete the survey below. The representative should be an individual who has access to a roster of healthcare personnel within their organization. Upon completion of this survey. CT Immunization Program will review your submission to request your access to VAMS. Then an email will be sent from the Vaccine Administration Management System (VAMS) to your employer coordinator to register the organization. Once registered, the employer coordinator can upload a roster which allows rostered healthcare personnel to schedule a vaccination appointment once supply is available. The rext step will be to receive the email from VAMS. It will not be sent immediately after the submission, as it will require the CT Immunization Program approval process. The VAMS Employer Portal only allows the same person to be the Employer Coordinator of ONE organization. If you are the Employer Coordinator of multiple organizations, provide only one organization which will cover all your category is not listed please choose the one that best fits. ONS Training Materials are posted at: https://portal.ct.gov/DPt/Immunizations/COVID-19-Vaccine-Providers If you have additional questions, please submit a request to our Helpdesk 					
Organization Priority Group	Select a Priority Group				
Employer/Organization Name	*				
Employer/Organization Email					
Employer/Organization Address Street	*				
Employer/Organization Address City	*				
Employer/Organization Address State	CONNECTICUT *				

https://dphsubmissions.ct.gov/VAMSEnrollment

AFTER VACCINATION





- Protection from vaccine is not immediate; the vaccine is a 2-dose series and will take 1 to 2 weeks following the second dose to be considered fully vaccinated
- No vaccine is 100% effective
- Given the currently limited information on how well the vaccine works in the general population; how much it may reduce disease, severity, or transmission; and how long protection lasts, vaccinated persons should continue to follow all current guidance to protect themselves and others, including:
 - Wearing a mask
 - Staying at least 6 feet away from others
 - Avoiding crowds
 - Washing hands often
 - Following <u>CDC travel guidance</u>
 - Following quarantine guidance after an exposure to someone with COVID-19
 - Following any applicable workplace or school guidance
- Individuals will receive a vaccination card and VAMS reminders for 2nd dose



SUMMARY



- Continue to increase awareness within your community networks
- The COVID-19 vaccine is available as part of a phased timeline
- Get Vaccinated!
- Stay Safe!



REFERENCES



Centers for Disease Control and Prevention (2020), *COVID-19 Vaccination Communication Toolkit*. https://www.cdc.gov/vaccines/covid-19/health-systems-communication-toolkit.html#slides

Food and Drug Administration (2020), Vaccines and Related Biological Products Advisory Committee Meeting, December 10, 2020, FDA Briefing Document, Pfizer-BioNTech COVID-19 Vaccine. <u>https://www.fda.gov/media/144245/download</u>

https://investors.Modernatx.Com/news-releases/news-release-details/moderna-announces-primary-efficacy-analysis-phase-3-cove-study

https://www.cdc.Gov/coronavirus/2019-ncov/vaccines/vaccine-benefits.html