






Talking About the Vaccine: A Virtual Panel Discussion for ERS Staff

Monday, August 30th | 3:30 PM

We are here today because we deeply care about our staff. We care about EACH one of you and where each of us are on this journey for COVID-19. We realize and respect that everyone is in a different place. However, we believe that the safest environment and best environment for the most vulnerable and the ones we serve is to mandate the vaccine. We are committed to providing education to all of our staff. Therefore, we wanted you to have access to industry leaders and hear from their experience and their knowledge.

On NPR, there was a recent recording that addressed hesitancy regarding the vaccine. We thought this was a good framework to use for today's panel. In addition, we have met with several staff who are hesitant. So with the questions we have heard from staff and the framework from the NPR recording, we have come up with questions for our panelists to address with you today.

Speakers	
	Dr. Melba R. Moore, DBA, MS, CPHA Health Commissioner of Cincinnati
	Renee Mahaffey Harris President & CEO, The Center for Closing the Health Gap
	Felicia Beckham MSN, APRN, FNP-BC Certified Nurse Practitioner University of Cincinnati, Department of Family and Community Medicine, Division of Geriatrics
	Dr. Lou Edje Associate Dean for Graduate Medical Education, Professor of Medical Education and Family & Community Medicine, University of Cincinnati College of Medicine
	Dr. Ronnita Usher, DNP, APRN Nurse Practitioner University of Louisville, Health Geriatric Medicine

Question: As of last week, none of the vaccines were fully approved by the FDA. Now the Pfizer vaccine has been approved, but the Moderna vaccine and the Johnson & Johnson vaccine are yet to be approved by the FDA. If the vaccine is safe, why hasn't the FDA approved the other vaccines?

Dr. Lou Edje: The first thing I want to address is what does FDA approval mean. To do this, I want to talk about the four major phases or buckets to the process. The 1st phase is a pre-clinical phase where a drug is tested on animals to ensure that the drug is not toxic before testing on humans. After this 1st phase is complete, they can then enter into the 2nd phase which is a clinical phase and this is where individuals are tested in increasing numbers (both for safety and also for effectiveness). Before entering the 3rd phase, there are

thousands of individuals being tested. The 3rd phase is where a New Drug Application (“NDA”) is submitted for FDA approval. The FDA reviews a lot of data before a new drug or vaccine is approved (with approval being the 4th phase). The FDA reviews things such as the location the drug is being made, animal studies, and human studies to name a few. There were 340,000+ pages of research for the Pfizer vaccine that the FDA reviewed before approving the Pfizer vaccine. We fully expect the Moderna vaccine to be approved as well as the Johnson & Johnson. vaccine.

Question: We have heard a lot recently about a booster that may be needed in addition to our original dose. Does this mean the vaccine isn’t effective?

Dr. Melba Moore: First I want to say thank you to all those who have received your first and second doses as we really haven’t taken the time to say, “Thank you.” For those who aren’t quite there yet- know that we are here for you. As it relates to the booster- this does not mean that the vaccine is not effective. The vaccine is still remarkably effective in reducing the risk of severe disease, hospitalization, and death. The booster is an extension of what we received and I highly encourage you to receive the booster when its time. We are waiting on the final recommendations and guidance.

Question: Are there medical conditions that would disqualify someone from getting the vaccine?

Dr. Lou Edje: Going on with Melba Moore’s comments, in terms of 6 months or 8 months- it’s looking like its 6 months. But the main thing is just following up and getting a booster when its time.

There are only two health risks to the vaccine:

If you have had a severe allergic reaction to an injectable medication in the past or allergic reaction to any of the ingredients (or parts) of the vaccines. The three main ingredients are mRNA (which stays in your body for 48 hours), sugar, and an antiparticle (which is a fat to hold everything together).

Question: If someone has had a reaction previously to other vaccinations, such as the flu vaccine, are they likely to have a reaction to the COVID19 vaccine?

Dr. Ronnita Usher: I want to thank ERS for allowing me to be a part of this much needed conversation for not just ERS’s staff but the entire community. If you are allergic to the flu vaccine, know that eggs are not a part of the COVID-19 vaccine. If you are that has Guillain-Barre syndrome (a rare disorder where your body’s own immune systems attacks your nerves), please contact your primary care physician or an allergist. Also anyone with a severe allergic reactions- please consult with your primary physician.

You WILL have a localized reaction (i.e. sore arm, redness, low grade temp, etc.). Major reactions include shortness of breath, racing heart, and a temperature that can’t be controlled with medication such as Tylenol.

Question: You have committed your career to working with elders. How have you seen this virus impact elders vs others and how has working with elders during this pandemic changed you?

Dr. Ronnita Usher: I first began as a neonatal nurse and now I am geriatric nurse focusing on the end of life. I can say that I have never experienced anything like this. For the most part, the emotional impact (on both residents and their families) is huge, including the lack of connection. It has also been hard on the staff and at times it was hard to just stop and take a breath. It was nothing we did, but there are things we can do to help mitigate the effects of the virus.

Question: If someone had previously tested positive for COVID, do they still need to consider receiving the vaccine or do they have long term immunity?

Felicia Beckman: Immunity is when your body is introduced to the virus. If you tested positive for the virus, it also depends on your symptoms in terms of building your “army” for immunity. If you had mild symptoms, your army will be small and if it was severe, then your army will be larger. The vaccine is the same for all and the vaccine helps build a robust army in everyone. So to answer the question- you still need the vaccine even if you tested positive to ensure you have that robust army.

Question: We know throughout our history as a nation that there has been and still are racial disparities in healthcare. For many people there is a lack of trust in the vaccine because of this. How have you seen people balance this honest hesitancy with deciding to receive the vaccine?

Renee Mahaffey Harris: Thank you to ERS for inviting me to be a part of this conversation. Know that I want you to feel comfortable in asking your questions. I want you to know that there has been decades of research. When you start looking at health care delivery, some don't feel heard and often times there is mistrust. What we now know is that many are okay after receiving the vaccine. Those who are in our ICU's currently because of COVID-19 are those that are unvaccinated. That's a fact. I can tell you the facts and it is these facts that help better inform your decisions. Unfortunately mistrust is further exacerbated by “social media doctors.” The facts and experiences of a peer you trust will help some of those mistrusts go away.

Question: Although we know that we remain in a public health crisis, we have all seen the COVID19 virus become political at times. How have you seen the local, state and federal political impact ones decision for or against receiving the vaccine?

Dr. Melba Moore: I have seen what can occur. For me what I gravitate towards the positives. Throughout this entire pandemic, I have witnessed people coming together that normally would not come together. What I heard and saw was **collaboration**. I witnessed many sharing our experiences with each other. In a pandemic, it's hard to think long term at times. **We need to be kinder and gentler.** It is up to you to lead and lead in a way to

convince your community that we are doing the right thing. We can silence the noise and negativity.

Question: Some people believe strongly that their personal freedom as an American is being jeopardized by asking them to receive the COVID19 vaccine. We have heard other stories about people “sneaking” to the pharmacy to get their vaccine and not wanting their friends or neighbors to know they have received it for fear others will view them as “giving in”. Have you seen this in the work that you do? How do you respond to someone who feels this way?

Felicia Beckman: This is unfortunate but we have to shift our mindset. Are we doing it for ourselves or for others? This is more about humanity. We need to do our part to help others and ourselves. It’s not about freedom, but what can I do for others. No one is taking power away or our freedom away.

Question: In the work that you do every day, what have been some of the greatest barriers that you and your agency have had to work through to help people decide to receive the vaccine?

Renee Mahaffey Harris: The barriers have been confusion to information, transportation, access to the vaccine, and access to testing. We saw what worked well. Now that we have the data, we look at the barriers and those that have greatest vulnerability and accessibility. The campaign we are doing for Hamilton County is, “#WeMustSaveUs.” No matter who we are or where we are, there is a reason for the questions. We need to remove the barriers to help those ask questions. Our persistency is about resiliency and humanity.

Tell us YOUR why and why you personally decided to receive the vaccine.

Dr. Lou Edje: I wanted to be sure I had a credible voice and it started with the death of my step mother. The Moderna trial was at UC Health, so I decided to do my part so I could speak to the data. I did my research before taking part in the trial to be sure it was safe. I am still in the trial and its day #346. I will be a part of the trial for the full 25 months. Subsequently, I had 3 more family members pass away before the vaccine, so my why is also for them.

Felicia Beckman: Personally it was a mission of mine. I was vaccinated 20% to protect myself and 80% to protect others. I have to protect myself to protect others. There were 8 members of my family who tested positive. I see the outcomes. For me, it’s about protecting others from all faucets. Testing positive for COVID-19 can affect your life. For example, not being able to work and not getting a paycheck.

Renee Mahaffey Harris: I was out in the field a lot when the pandemic began because I have to get information out to others. I lost an uncle to COVID-19. Early on, I wasn’t able to see my parents and I lost my mom to a rare disease last August. I wish we had the vaccine sooner to be able to spend time with her. I was ready when it was time to receive the vaccine and my family. It was what we did to protect each other and to see each other. I

understand there are still questions, but please ask your questions and we can help answer those questions.

Dr. Ronnita Usher: Personally I am in healthcare and understand the science. I believe in vaccinations and we have been taking vaccinations for many years. Second reason why I chose to receive the vaccine is for the saying I love, "Love thy neighbor." Finally, in my immediate family we all took the vaccine to be with each other. I also wanted to protect my patients. I wanted to be a part of the solution as we look to the future. It's not just a personal choice but a choice to protect others. You have the right to have concerns, but I always say, we all eat food. However, we don't all have a farm and we don't know where that food really came from- but we still eat it. This is a community decision and it's the best decision to receive the vaccine.

Dr. Melba Moore: First it was my family. I wanted to see my family. Second, my community including the employees I work with. I need to model the behavior I want to see. I am supposed to promote the public health AND prevent. If I'm a health commissioner, I am considered a trusted voice and need to be able to have a why. Bottom line- I did not want to be hospitalized with no one to visit if I was hospitalized. I had to stay focus on what I needed to do to stay healthy to be the voice and to listen to others. I believed in the science. We know what COVID can do.

ADDITIONAL QUESTIONS

Question: It looks like on the CDC's website, there is not enough data to support if one is pregnant or currently breastfeeding. Is it safe if we are pregnant or breastfeeding?

Answer: Usually in trials we do not enroll women who are pregnant, but of course nature happens and inadvertently, there were women who were pregnant during the trials (in fact 140,000 pregnant women) and there has been no loss or fetal malformation. mRNA is something that is injected into you but it remains separate from your DNA (your DNA is stored in a "lock box"). Therefore, we don't see any changes to the DNA. In addition, antibodies are passed into the blood and in breastmilk and are protective to the newborn. Women who are not immunized from the virus are 3x more likely to be in an ICU, more likely to have a tube down their throat and be on a ventilator, and have long term side effects. The American College of Obstetricians and Gynecologists and the Society Maternal-Fetal Medicine of both recommended that we vaccinate pregnant women and women who are breastfeeding.

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Question: Are vaccinated individuals at the same risk of transmitting the virus than a non-vaccinated individual?

Answer: Viruses are not a bacteria. Viruses are smart and can figure things out and mutate. Can you be vaccinated and get the variant? Absolutely. In my mom's situation, she was vaccinated and tested positive because she was immunocompromised, but the vaccine absolutely helped with having less severe symptoms. We are asking everyone to wear

masks and stay distant still so the virus doesn't have an opportunity to mutate and jump into different bodies. If we slow down the "partying" of the virus, we can eradicate this virus.

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Question: If I received the COVID-19 vaccine and I can still get the virus, will I still get it to the same degree?

Answer: If you are vaccinated, the outcome is different- hospitalization and death is less likely to occur.

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Question: With the recent decision from the Center for Medicare & Medicaid Services ("CMS") that all nursing home staff be required to vaccinated, will all nursing homes have to follow this?

Answer: LeadingAge is working with CMS currently. The mass majority of nursing homes accept funding from both Medicare and Medicaid. Therefore, this mandate means that anyone accepting funding is required to mandate the vaccine for staff. There are maybe 3 or 4 nursing homes in the entire state of Ohio that are only private pay. ERS does accept funding from Medicare and Medicaid. However, when this was announced, it was a non-event for us as we were already moving in this direction (and have). We have had a lot of criticism in our field and it's a matter of time when there will be the same kind of restrictions in hospitals. But I am happy to say that hospital systems in Cincinnati and Louisville collaborated and already moved in the direction of mandating the vaccine.

All the health systems in Greater Cincinnati are making sure we are vaccinated to help protect our patients. Also think of how diverse our physicians are (i.e. political views, religious views, cultural views, etc.) and 96% of physicians in Cincinnati are vaccinated because we believe in the science.

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Question: I don't like needles. Is there any other option to receive the vaccine without a needle?

Answer: There is no other option. However, there is a cream called EMLA cream to make the site of the shot numb. I promise you it goes so fast. Also take someone for moral support. You can do it!

Don't look- turn your head and take a breath. Shift your mindset.

There is also a device called a shot blocker and the shot can be given through this and it confuses your skin that there is nothing going on.

Thank you to our panelists for sharing their time and wisdom and for making the world a better place. Thank you for being a leader in our communities.