

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



**Vaccinate ALL 58**  
Together we can end the pandemic.

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>



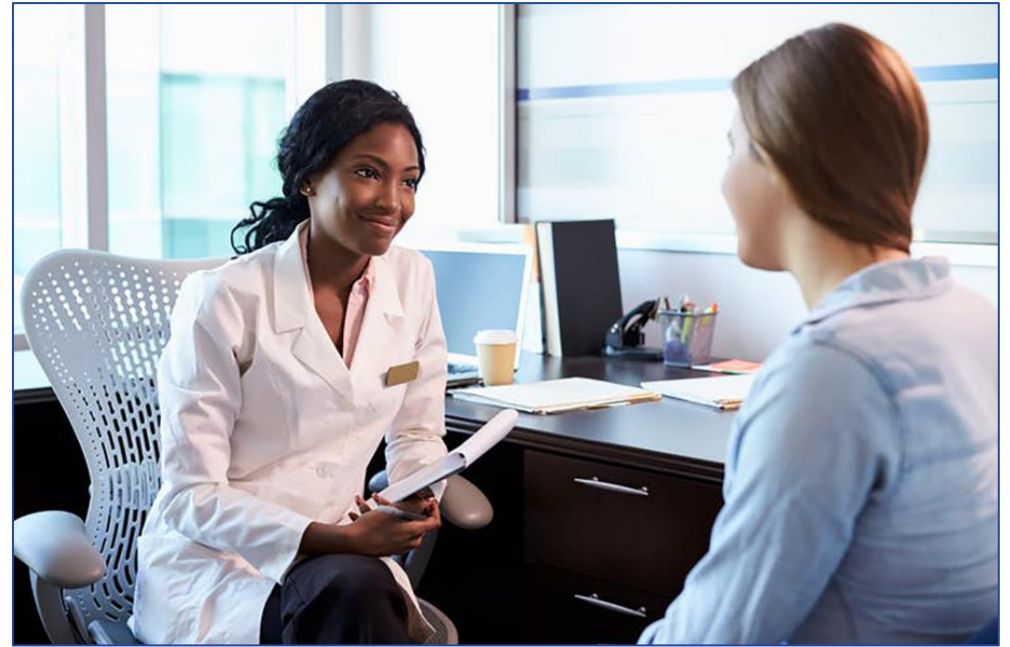
Please use “Q&A” to ask questions.

For post-webinar questions, contact [rachel.jacobs@cdph.ca.gov](mailto:rachel.jacobs@cdph.ca.gov)

# Webinar Objectives

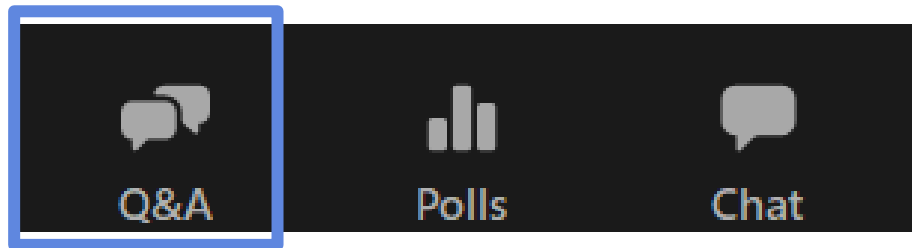
## Participants will learn:

- 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



# Questions & Answers and Discussion

**During today's session, please use the Q&A panel to ask your questions.**



# Agenda: Wednesday, October 12, 2022

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

# 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.
  - Reduced population immunity from fewer recent infections
  - Relaxation of measures to reduce COVID-19
- **Receiving the flu and COVID-19 vaccines is the most effective way to prevent infection.**



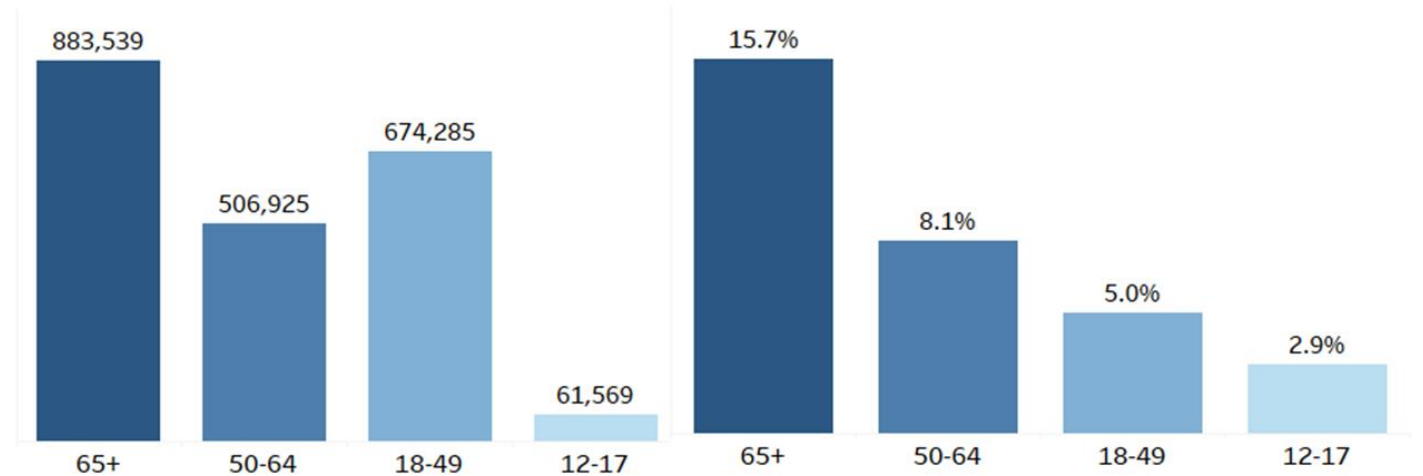
# People at Risk of Developing Complications from COVID-19 and Flu

- 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

# Distribution of Bivalent Boosters in California

as of October 11, 2022

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



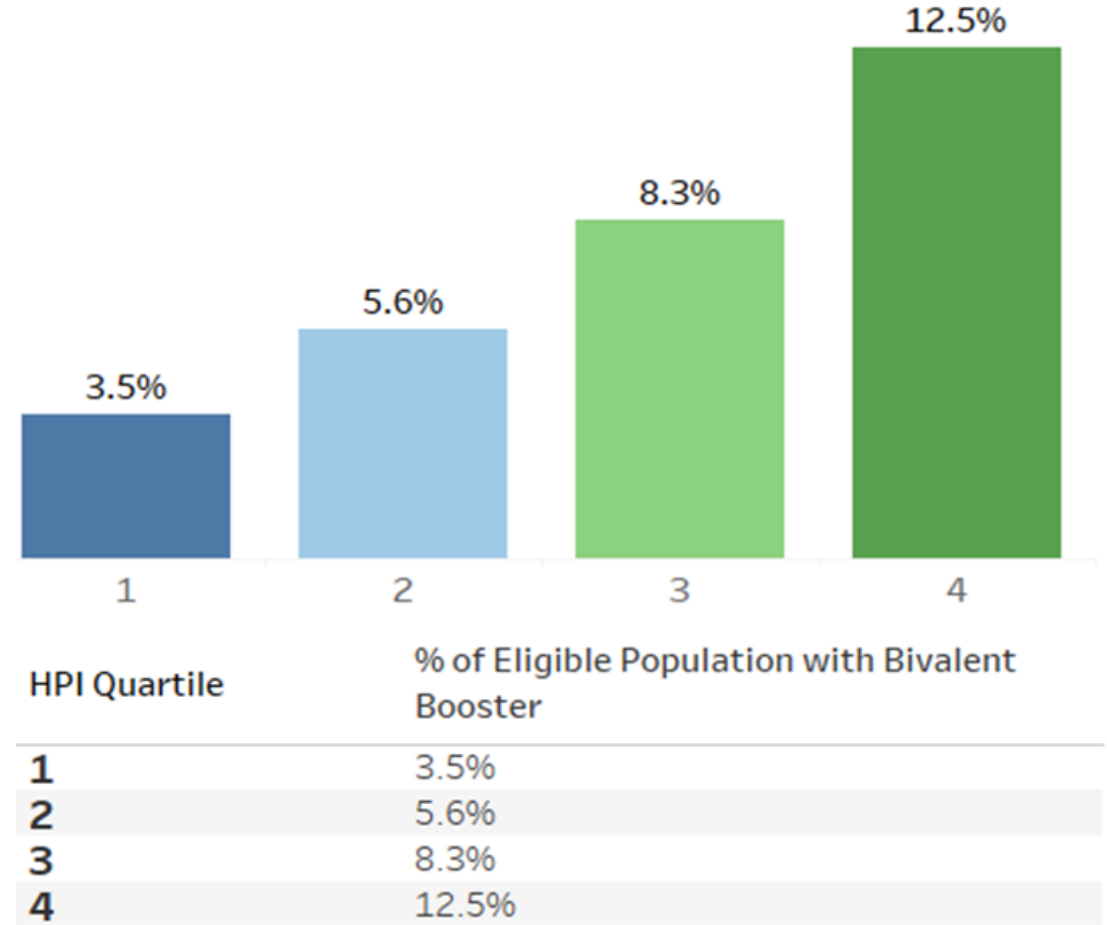
Age Group	Bivalent Booster Recipients	% of Eligible Population with Bivalent Booster
12-17	61,569	2.9%
18-49	674,285	5.0%
50-64	506,925	8.1%
65+	883,539	15.7%
<b>Total</b>	<b>2,126,318</b>	<b>7.8%</b>

# 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)

Weekly New Under 5 Initiating Primary Series by VEM: **Statewide**



# 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 Vaccine Timing

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.

COVID-19 Vaccine Timing			
Routine Schedule			
Age*	Vaccine	Primary Doses	Booster Dose
6 months–4 years	Pfizer–Infant/Toddler	1st Dose → 3-8 weeks* → 2nd Dose → ≥8 weeks → 3rd Dose	
6 months–5 years	Moderna–Infant/Toddler	1st Dose → 4-8 weeks* → 2nd Dose	
5–11 years	Pfizer–Pediatric	1st Dose → 3-8 weeks* → 2nd Dose → ≥5 months → Monovalent Booster Pfizer 5-11 years	
6–11 years	Moderna–Pediatric	1st Dose → 4-8 weeks* → 2nd Dose	
12+ years	Moderna–Adol/Adult	1st Dose → 4-8 weeks* → 2nd Dose	<b>Bivalent Booster</b> Pfizer: Ages 12+ Moderna: Ages 18+ (Regardless of the number of monovalent booster doses previously received)
12+ years	Novavax	1st Dose → 3-8 weeks* → 2nd Dose	
12+ years	Pfizer/Adol/Adult	1st Dose → 3-8 weeks* → 2nd Dose	
18+ years	Janssen (J&J) Pfizer/Moderna preferred**	1st Dose	

\* See schedules for children in transition from a younger to older age group: [Pfizer](#) | [Moderna](#).  
 \*\* Although use of mRNA COVID-19 vaccines is preferred, the Janssen vaccine may be offered in [some situations](#).  
 ^ An 8-week interval may be preferable for some people, especially for males 12-39 years.  
 View [Interim Clinical Considerations for Use of COVID-19 Vaccines](#) for details. Schedule is subject to change.



# 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:
    - Children 6 months through 8 years of age who have never received seasonal influenza vaccine or for whom vaccination history is unknown
    - 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:
    - 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
    - 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.

Routine and flu vaccines may be administered on the same day as COVID-19 vaccines.

### Considerations—What are the risks of:

- Missing recommended vaccines and catching COVID-19 or other vaccine-preventable diseases before the next appointment?
- Reactions from each vaccine?

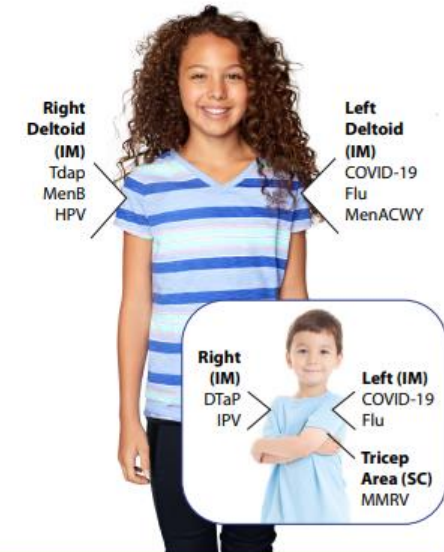
### Organize syringes:

- Label each syringe with vaccine name, dosage, lot number, initials of the preparer, and the exact beyond-use time.
- Place syringes on a clean tray, grouping vaccines by administration site.

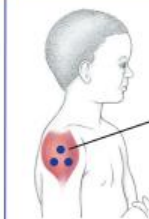
### Patient Care:

- When possible, administer the COVID-19 vaccine in a different arm from vaccines more likely to cause a local reaction (e.g., tetanus-toxoid-containing vaccines).
- Give the most painful injections last (e.g., MMR, HPV).
- If patient is anxious, try using these tips to ease anxiety during vaccination.
- After administration, observe patient for 15 minutes (30 minutes if at increased risk for anaphylaxis). Report any adverse events to VAERS.

### Examples for preteens and kids:



### Separate injection sites by 1 inch or more, if possible.



Administer COVID-19 vaccines by intramuscular (IM) injection.

#### Age: 3 years and older

- **Site:** Deltoid muscle, above the level of the armpit
- Needle: 1 inch, 22-25 gauge (1 1/2 inches for larger patients)
- Bunch up the muscle and insert entire needle at a 90° angle



Refer to CDC product info for administration steps by product.



#### Under 3 years

- **Site:** Vastus lateralis muscle, in the anterolateral thigh (outside of the leg in the mid- to upper-thigh)
- Needle: 1 inch, 22-25 gauge
- Bunch up the muscle and insert entire needle at a 90° angle

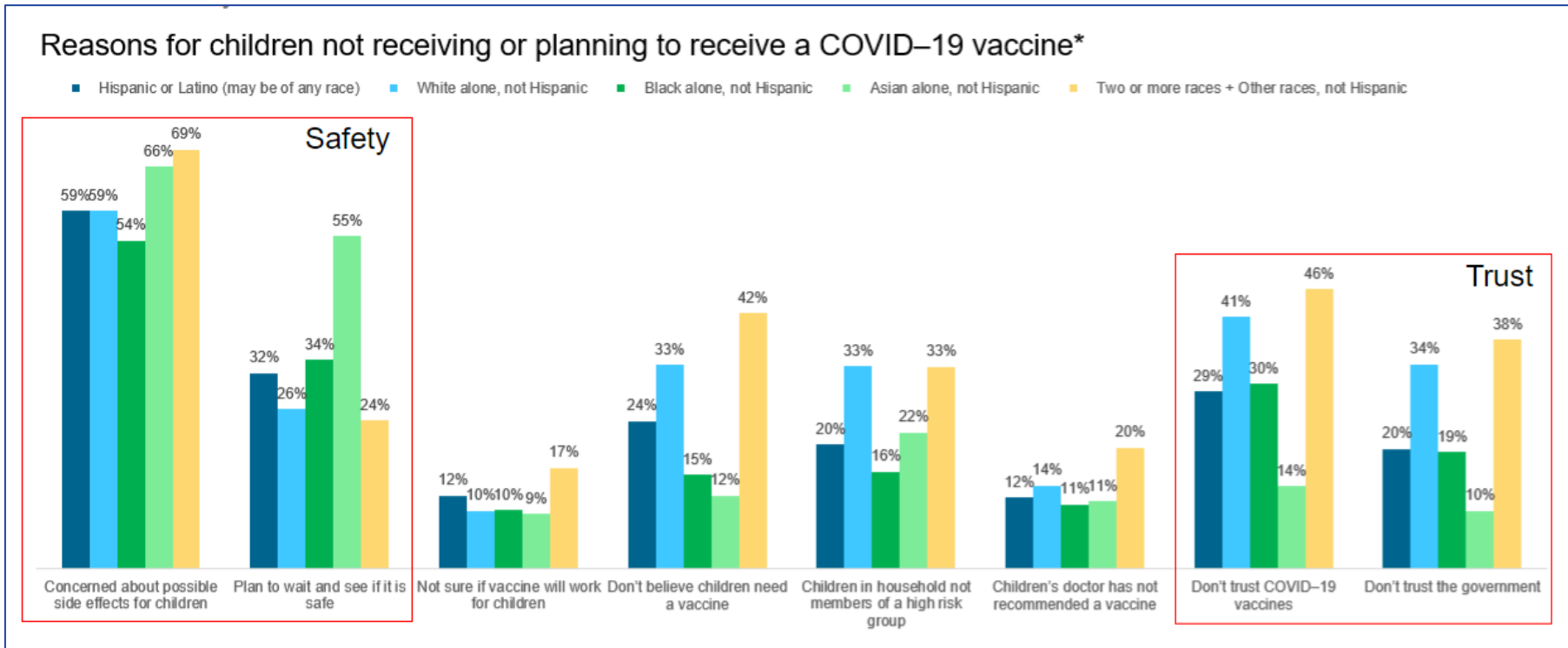


# Clinic Flow: 15 Minute Post-COVID-19 Vaccination Observation Period Now Optional

- 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



# 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%

## COVID-19 Vaccine and Pregnancy

COVID-19 vaccines are a safe way to protect you and your baby.

**Pregnant people who get COVID-19 are at higher risk for severe illness than people who are not pregnant.**

Complications due to COVID-19 during pregnancy can lead to:

- hospitalization
- breathing issues which may require a ventilator
- high blood pressure
- bleeding disorders
- preterm delivery
- stillbirth
- death

**Protect yourself and your developing fetus against COVID-19 by getting vaccinated and boosted**

The best way to protect against COVID-19 is by staying current on COVID-19 vaccines and boosters when eligible. COVID-19 vaccines can lower your chances of getting very sick or needing to be hospitalized from COVID-19. That's why it's recommended by every major maternal health organization.

[Vaccines are safe in all three trimesters](#), and they are FREE.

Talk to your health care provider to discuss which of the available [COVID-19 vaccines and boosters are best for you](#).

**Additional information about the COVID-19 vaccine and pregnancy**

- Vaccines give you antibodies, which teach your body how to fight against COVID-19.
- Vaccinated pregnant people pass antibodies to their developing fetus in the womb, so the baby is born with some protection from day one.
- Millions of pregnant people have been safely vaccinated against COVID-19.
- Side effects are normal. You may experience body aches, chills, and tiredness. Contact a health care provider if you have any questions or concerning side effects or if you have a fever.
- Visit [MyTurn.ca.gov](https://myturn.ca.gov) to schedule your vaccine appointment or call a health care provider



Visit this document on the CDPH website



August, 2022 • © 2022, California Department of Public Health



# 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.

# 3-5-3 Conversation Methodology

---



**To address patients concerns about COVID-19 vaccines, use the 3-5-3 method.**



# 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

2

**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

## 2

### 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

## 4 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.



# Key Messages

5

## Have questions? Please ask.

I am glad you want to know more. Ultimately, the choice is yours. Today or when you're ready, go to [myturn.ca.gov](https://myturn.ca.gov) or text your zip code to GETVAX or VACUNA to get your vaccine.



# COVID-19 Vaccine Language Tips

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

\* *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](https://myturn.ca.gov) or have them text their zip code to GETVAX or VACUNA to find a free vaccine location in their neighborhood.



**#ThisIsOurShot**  
VACCINATE FOR A COVID FREE WORLD

**#VACUNATEYA**

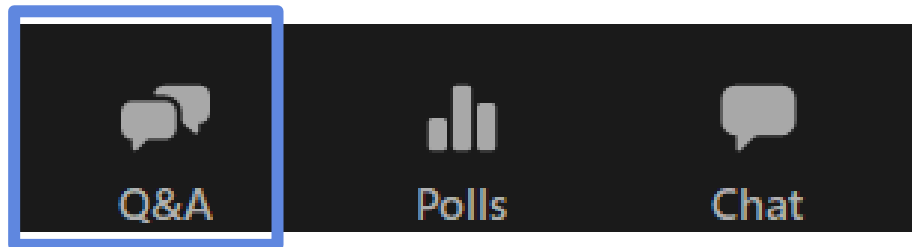
Help Us Determine The  
Future of  
**#ThisIsOurShot** and  
**#VacunateYa!**

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

## Recommending 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 cordial discussion, answer questions, understand and acknowledge any fears they express, and convey accurate information. This sets the stage for return 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 hesitation, 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.

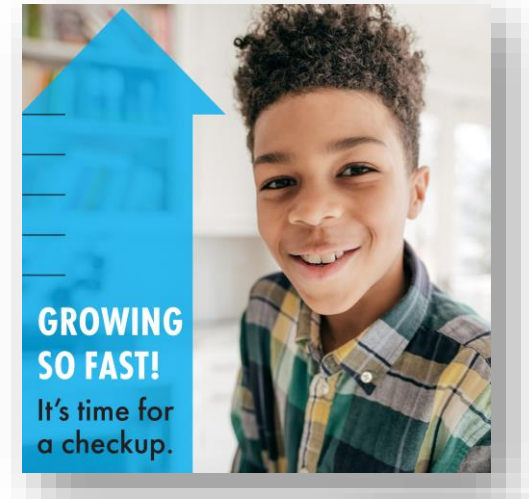
Here are common questions and talking points to help parents. Praise parents who ask questions for wanting to know more. Wrap up the conversation by making a recommendation while acknowledging their authority in deciding for their children. For example, "I think getting vaccinated is best for your child, 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 infection, but [studies](#) have shown it is effective in preventing severe illness and hospitalization, including [against the Omicron variant](#).
- [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.

# 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!](#)
- [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

#THIS IS OUR SHOT
VACU NATE YA
COVID-19 VACCINE CONVERSATIONS

TOP 5 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. Text your zip code to **GETVAX** (438829) to get your free vaccine today.

Help spread the truth about COVID vaccines.

#ThisIsOurShot | f ThisIsOurShot2021 | ThisIsOurShot | www.thisisourshot.info

#THIS IS OUR SHOT
VACU NATE YA

### LANGUAGE DO'S & DON'TS

<p><b>Do Say</b></p> <p>Vaccination ..... Injection or shot</p> <p>A safe and effective vaccine ..... A vaccine developed quickly</p> <p>Authorized by FDA based on clinical testing ..... Approved by FDA, Operation Warp Speed, Emergency Use Authorization<sup>1</sup></p> <p>Get the latest information ..... There are things we still don't know</p> <p>Keep your family safe; keep those most vulnerable safe ..... Keep your country safe</p> <p>Public Health ..... Government</p> <p>Health / medical experts and doctors ..... Scientists</p> <p>People who have questions ..... People who are hesitant, skeptical, resistant, or 'anti-vaxxers'</p>	<p><b>Don't Say</b></p> <p>Injection or shot</p> <p>A vaccine developed quickly</p> <p>Approved by FDA, Operation Warp Speed, Emergency Use Authorization<sup>1</sup></p> <p>There are things we still don't know</p> <p>Keep your country safe</p> <p>Government</p> <p>Scientists</p> <p>People who are hesitant, skeptical, resistant, or 'anti-vaxxers'</p>
--	---

1. 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.

**Messaging Elements That Resonate**

**Validate Concerns & Answer Questions**  
Acknowledge people's hesitancy rather than challenge it. Provide scientifically-based plain language answers.

**Moments Missed**  
Reference things the people miss most. With many feeling COVID-19 fatigue, missed moments (especially human connections that we took for granted like visiting family and friends) serve as a powerful reminder of the ultimate end goal: vaccination as a pathway to the possibility of regaining these moments.

**Protection**  
Emphasize "protecting myself, loved ones, and those in my community" (rather than "coming together as a nation").

**Positive Tone**  
Be inviting and respectful as opposed to demanding. Acknowledge that the "choice is yours to make," which connects with the deeply rooted American value of liberty.

**Messaging Elements That DON'T Resonate**

**Negativity & Fear**  
People push back when reminded of how difficult a year it's been—it tends to put them in a pessimistic, hopeless or frustrated frame of mind. Fear tactics are likely to backfire because this does little to generate trust or answer people's questions about vaccines.

**Guilt**  
References to "many people already stepping up" can come off as pushy or accusatory. Those who are hesitant do not see themselves as "free riders" letting others take risks first, rather, they are worried about being "guinea pigs" for new COVID-19 vaccines.

**Overpromising**  
Avoid claims that are unproven. Being overly rosy may cause concern. Be clear about the facts without any sugarcoating. Most people understand that mass vaccination is a long-term process. Avoid messages that inadvertently imply that vaccine availability will "flip the switch."

**"Back to Normal"**  
Some just want things to "get back to normal," but for others, post-pandemic life will never be "the way it was." It's more about getting back to life rather than back to normal. Messages that focus on economic recovery—rather than public health—do not perform well.

Research, insights, & content provided by Kaiser Family Foundation, AdCouncil, & COVID Collaborative

#ThisIsOurShot | f ThisIsOurShot2021 | ThisIsOurShot | www.thisisourshot.info

## TOP 5 REASONS

# Your Kids Should Get the COVID-19 Vaccine

With students heading back to in-person instruction, here are some things you need to know about protecting your children with the COVID-19 vaccine.

**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](https://www.vaccinateall58.com).

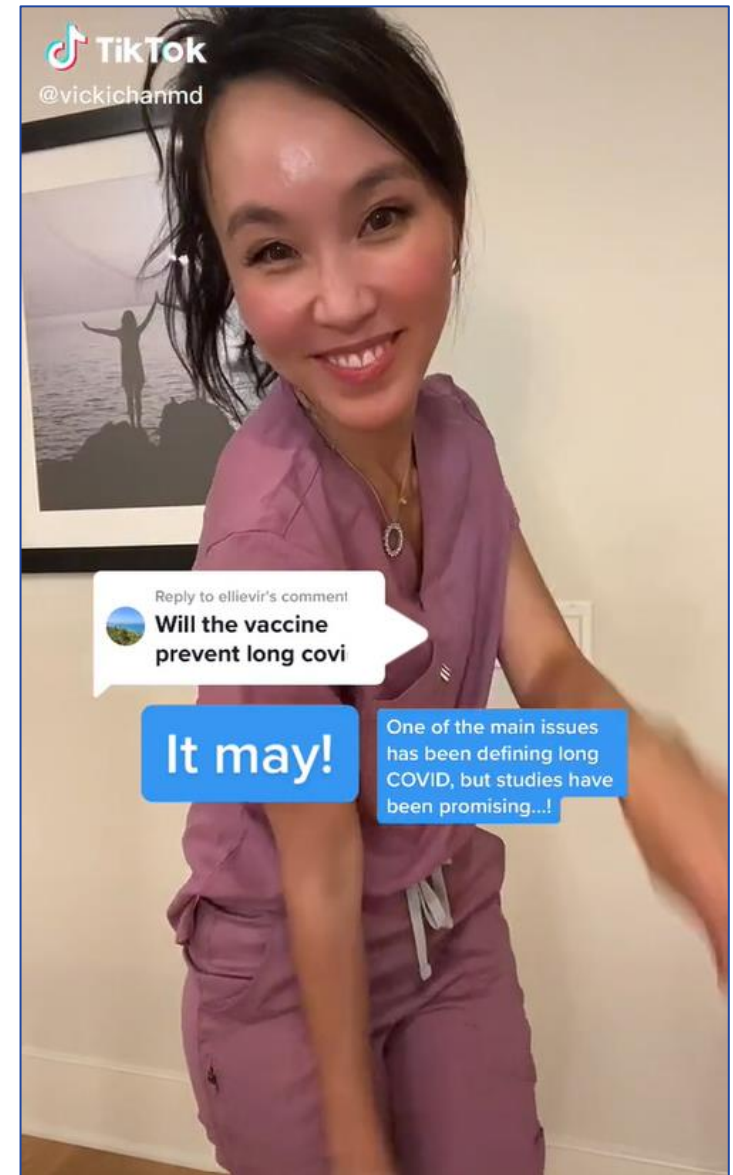
VaccinateALL58.com

# 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

## Type of Support

## Description

Updated 6.6.22



### 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](mailto: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](mailto: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](mailto:myCAvax.HD@Accenture.com)
- Phone: (833)-502-1245, option 3, Monday through Friday 8AM–6PM

For training opportunities: <https://eziz.org/covid/education/>



### My Turn Clinic Help Desk

For **onboarding support** (those in the process of onboarding): [myturnonboarding@cdph.ca.gov](mailto:myturnonboarding@cdph.ca.gov)  
For **technical support** with My Turn Clinic for COVID-19 and flu vaccines: [MyTurn.Clinic.HD@Accenture.com](mailto: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

