NC DHHS COVID-19 Vaccination Fire Side Chat

January 21, 2021



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agenda

- Current State of Vaccines in NC
- Best Practices from the Field
- History of Hesitancy
- Vaccine Truths for Doubters
- Question and Answer

They thought they were coming to be a DHB consultant…but they got pulled into the…

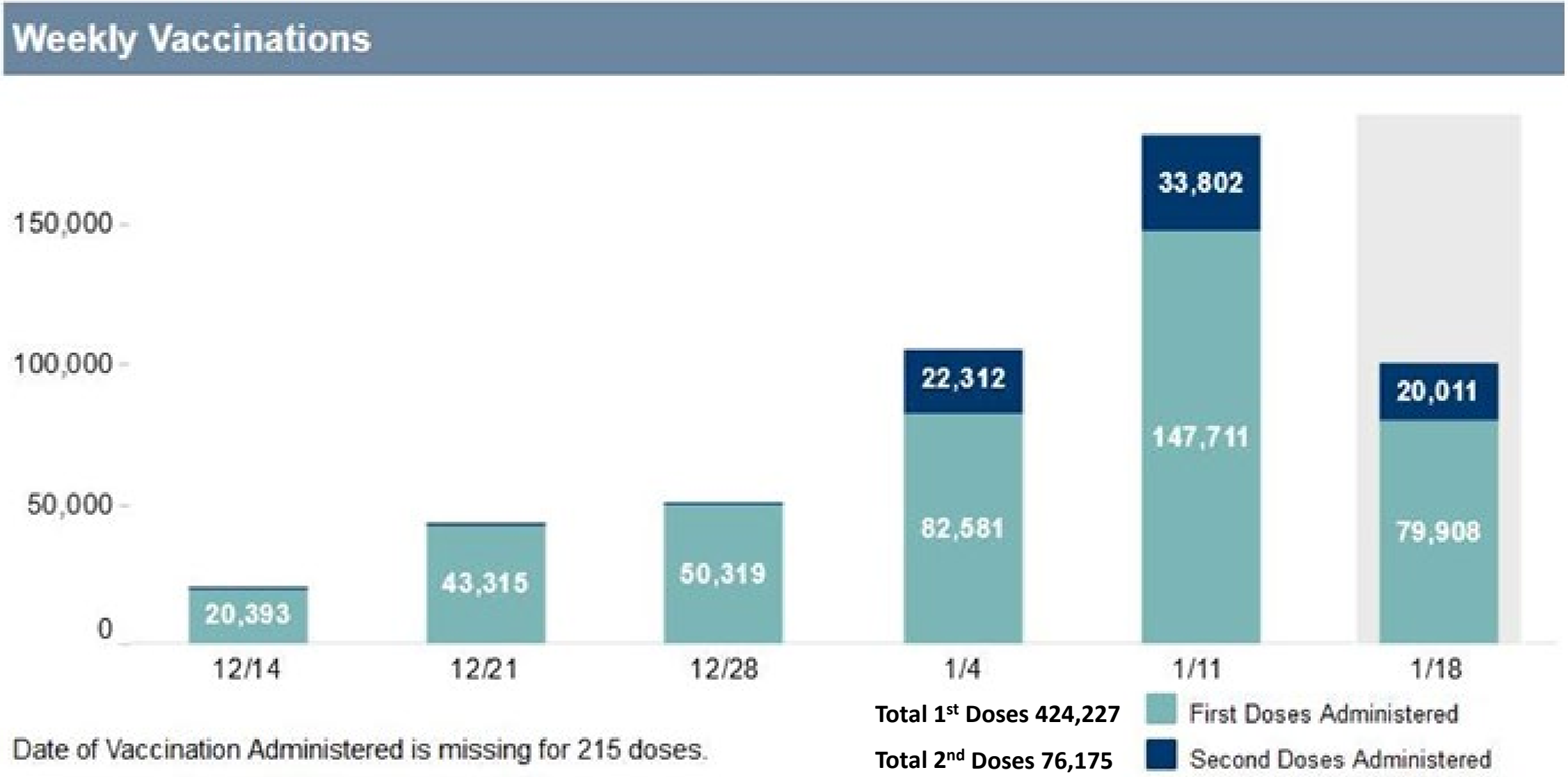


HIGH LEVEL OVERVIEW OF THE VACCINE JOURNEY

1. CDC/ Operation Warp Speed (OWS) provide pro-rata vaccine allotment to the state.
2. State divides allocation of COVID-19 vaccines across providers based on prioritization, populations served, geography.
3. NC DHHS transmits orders to CDC/ OWS.
4. CDC/ OWS places orders with manufacturer/distributor for vaccines and ancillary kits/ supplies.
5. Vaccines are transported by the manufacturer and/ or McKesson to enrolled sites as indicated by the orders. McKesson distributes ancillary kits/ supplies.
6. Upon receipt, providers store the COVID-19 vaccines in accordance with storage requirements.
7. Providers will organize vaccination clinics. Patients can register on CVMS (COVID-19 Vaccine Management System) and schedule an appointment or schedule with their provider to receive COVID-19 vaccine.
8. Provider administers the first vaccine dose and logs administration in CVMS. Appointments for second doses should be scheduled.
9. Provider monitors and reports adverse events using V-SAFE or VAERS in accordance with Emergency Use Authorization (EUA).
10. Patient receives a second dose reminder and schedules appointment if not already set up..
11. Provider administers the second vaccine dose and logs administration in CVMS. Continues adverse event monitoring.

- Federal Responsibility
- State Responsibility
- Provider Level

VACCINE IN NC: DOSES ADMINISTERED

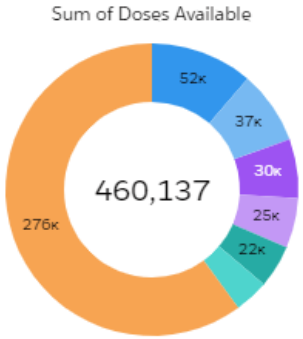


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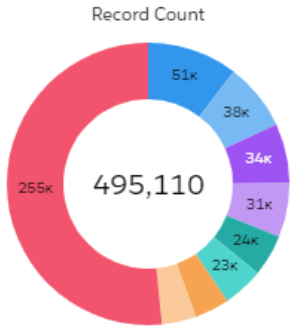
TRENDS IN DOCUMENTED DOSES ADMINISTRATION

Allocated
Ordered
Received
Available

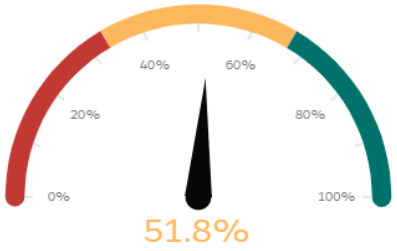
Total Doses Available
# of Vax Doses Available (HCP Updated)



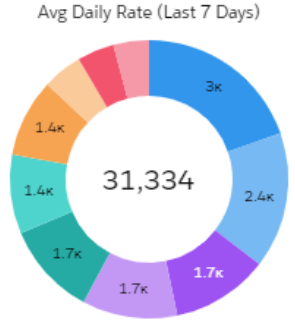
Total Doses Administered by County
# of Doses Administered to Recipients



% of Total Allocated Vaccine Used
Admins / (Admins + Waste + Available)



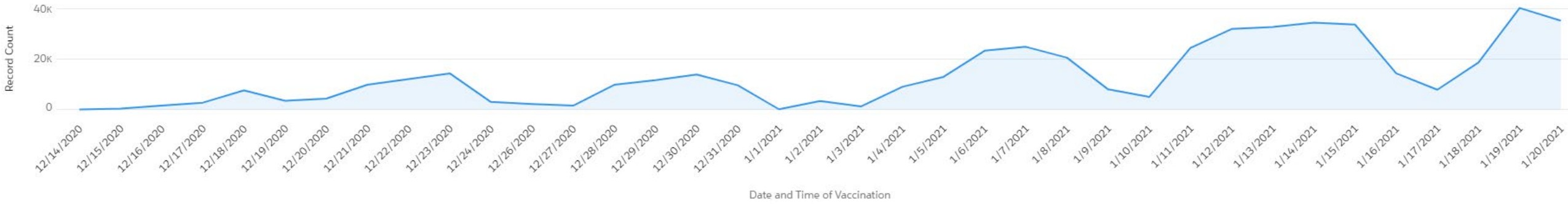
7 Day Average Rate of Vax Administrations
# of Vaccinations for Last 7 Days / 7



At this rate, 219,338 administrations per week

127,525 new doses allocated per week

Doses Administered by Date



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

As of 1/20/20 at 5:35 pm

CORE AREAS OF FOCUS

The vaccination program currently is focused on executing and improving three core areas:



Speed of Vaccinations



Address Consumer Confusion



Equity

Speed

Initial speed helps us with longer term equity
Focus on using **all** the vaccine on shelves and **documenting** those doses in CVMS

Vaccine providers:

- Broader, simplified prioritization groups should remove barriers to identifying eligible individuals
- Use all allocated vaccine within 7 days
- Do not waste any vaccine
- Share vaccine with other providers as needed
- OK to vaccinate individuals across county lines
- Outreach to providers with reserve to understand barriers, plans for acceleration, facilitate sharing

Coordinated "big pushes" to utilize back supply

- Focused on health care workers and older adults.
- 39 sites, Expected 100k+ doses

Finalizing details with multiple vendors to deploy mass vaccination sites

Mega sites in the plans (e.g., Panthers stadium)

Staffing Support

- *Shifting staff within reach*
- *Channeling additional staffing resources:* Emergency Management and National Guard
- *Coordinating Staff:* State-Staff and Public Volunteers
- *Data entry support*

Vaccine Allocation Methodology

- Shifting allocations from sites that have reserve to sites that have high throughput and matching allocations to expected throughput of next week

Onboarding additional vaccine providers:

- FQHCs starting to administer vaccine this week
- Sharing vaccines across enrolled providers
- Opened enrollment to a much broader group of vaccine providers (e.g., PCPs, occupational health) with prioritized onboarding and vaccine allocation

VACCINE: EQUITY + HESITANCY & CONSUMER CONFUSION

EQUITY + HESITANCY

Local partnerships

- LHD HMP enablement planning with vaccine focus in order to better link state and local infrastructure in its support of HMP and vaccination roll-out

Highlighting the voices of trusted messengers

- 3 vaccination news events held with 65+ HMP leaders; recording >15 leaders for PSAs
- Training 100+ vaccine 101 presenters from AMEXCAN and HMP advisory group

Education and Guidance

- Holding webinars with LTCF medical directors and staff to provide info on vaccination best practices and guidance
- Upcoming Medicaid fireside chat with providers on vaccine hesitancy

CONSUMER CONFUSION

Tools to help people find their spot

- Launched FindYourSpot with contact info for LHDs + hospitals that have vaccine available
- Launched COVID-19 line through CCNC (1-877-490-6642) to help with call volume
- Public facing ‘first line’ call center tracking for Jan. 30 launch date
- Exploring online screening wizard for individuals based on eligibility criteria

Communications toolkit for 65+

- New flyers to reach 65yo+, pushed out broadly (Message: Supplies limited, may have to wait)

Preparing for frontline essential workers

- Working to define “who” and “how” frontline essential workers will get vaccinated

Your best shot at stopping COVID-19.

YOU HAVE A SPOT. | TAKE YOUR SHOT.

1. Health Care Workers and Long-term Care Staff and Residents — ACTIVE GROUP
2. Older Adults — ACTIVE GROUP
3. Frontline Essential Workers
4. Adults at High Risk for Exposure and Increased Risk of Severe Illness
5. Everyone





Our goal is to vaccinate as many people as quickly as possible given the limited supply of vaccines. North Carolina moves through vaccination groups by aligning to federal priorities while empowering local health departments and hospitals with flexibility to move to the next priority group as they complete groups and have vaccines available.

For more information: YourSpotYourShot.nc.gov

01/2021

LTC ADMINISTRATION PROGRAM

The federal LTC program has administered 68,802 (41.5%) doses of vaccine of the 165,900 doses allocated to the LTC program.

- Calling LTCF medical directors and staff directly to provide context on resources and to get a sense of the barriers they are facing
- Conducting outreach to engage LTCFs to further encourage staff to sign up for second and third clinic dates, including virtual events, live Q&As, and townhalls with key influencers and panels

Pharmacy	Total Facilities	Number of Facilities Completed	Total Beds Scheduled	Resident 1st Doses	Staff 1st Doses	Total Doses
CVS	833	–	43,202	25,497	13,982	**39,479**
Walgreens	559	–	28,720	18,708	10,615	**29,323**
Totals	**1,392**	**957**	**71,922**	**44,205**	**24,597**	**68,802**

Data is as of 20 Jan. 2021

RETAIL PHARMACY PROGRAM

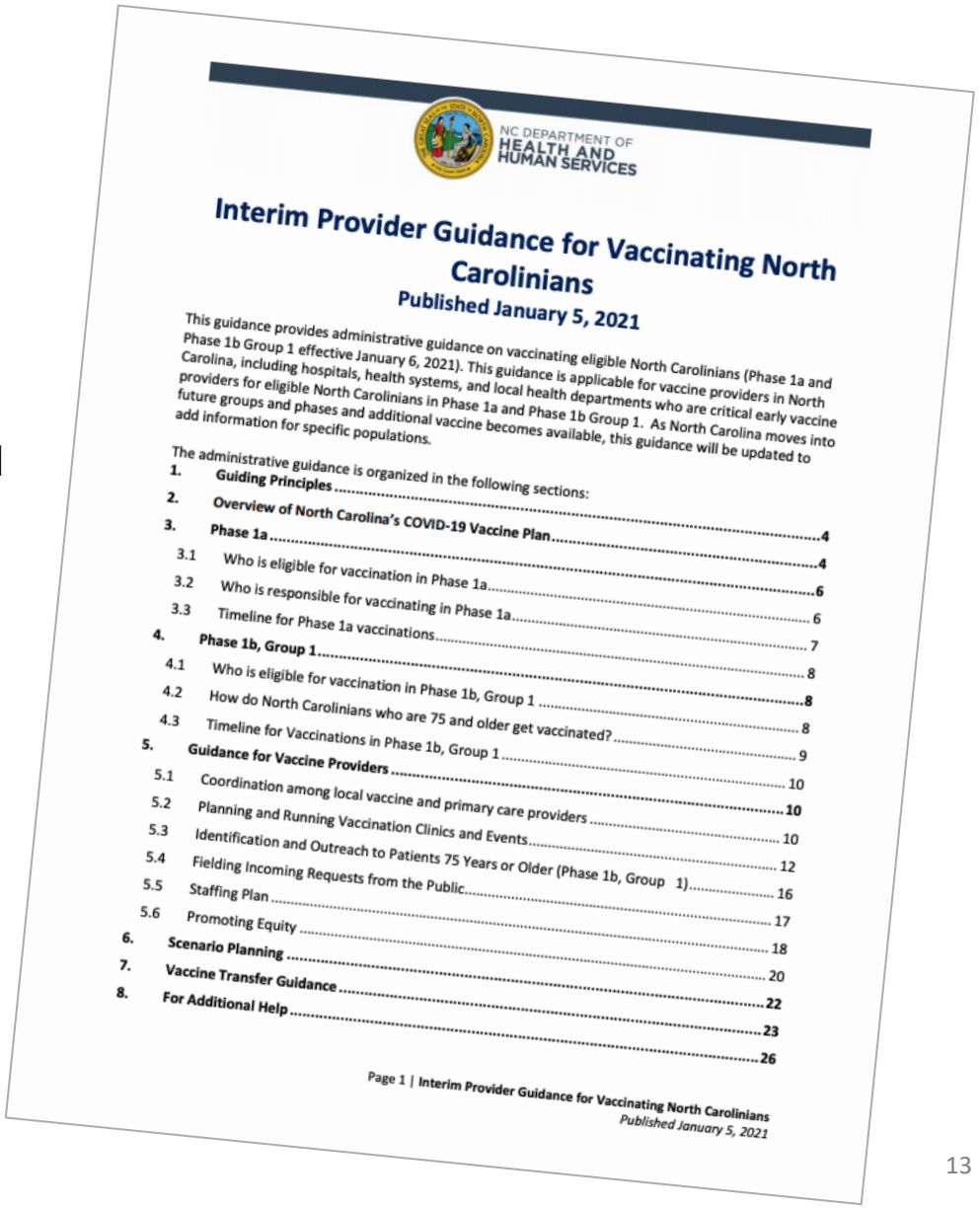
	Other Pharmacies Independent pharmacies (CPESN) and Walgreens	**Federal Retail Program (Walgreens)**
Timeline	Target January	With Federal Activation (Phase 2)
Reporting Method	CVMS	Data Integration (flat file)
Allocation Source	NC's Allocation	Federal Allocation

CONSUMER CONFUSION: CLEAR GUIDANCE FOR PROVIDERS

- **Vaccinating Providers**
  - New guidance document released for LHDs and hospitals/health departments
  - Emphasis on need for coordination

- **Primary Care Provider Messages**
  - Primary care providers are critical partners and play a key role to helping older North Carolinians get vaccinated.
  - Helping coordinate finding vaccination sites in your community and linking patients to them over the next several weeks is greatly appreciated.

[Interim Provider Guidance for Vaccinating North Carolinians_01.11.2021 updates.docx]



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

Interim Provider Guidance for Vaccinating North Carolinians

Published January 5, 2021

This guidance provides administrative guidance on vaccinating eligible North Carolinians (Phase 1a and Phase 1b Group 1 effective January 6, 2021). This guidance is applicable for vaccine providers in North Carolina, including hospitals, health systems, and local health departments who are critical early vaccine providers for eligible North Carolinians in Phase 1a and Phase 1b Group 1. As North Carolina moves into future groups and phases and additional vaccine becomes available, this guidance will be updated to add information for specific populations.

The administrative guidance is organized in the following sections:

1. **Guiding Principles** 4
2. **Overview of North Carolina's COVID-19 Vaccine Plan** 4
3. **Phase 1a** 6
   - 3.1 Who is eligible for vaccination in Phase 1a 6
   - 3.2 Who is responsible for vaccinating in Phase 1a 7
   - 3.3 Timeline for Phase 1a vaccinations 8
4. **Phase 1b, Group 1** 8
   - 4.1 Who is eligible for vaccination in Phase 1b, Group 1 8
   - 4.2 How do North Carolinians who are 75 and older get vaccinated? 9
   - 4.3 Timeline for Vaccinations in Phase 1b, Group 1 10
5. **Guidance for Vaccine Providers** 10
   - 5.1 Coordination among local vaccine and primary care providers 10
   - 5.2 Planning and Running Vaccination Clinics and Events 12
   - 5.3 Identification and Outreach to Patients 75 Years or Older (Phase 1b, Group 1) 16
   - 5.4 Fielding Incoming Requests from the Public 17
   - 5.5 Staffing Plan 18
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6. **Scenario Planning** 22
7. **Vaccine Transfer Guidance** 23
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PREPARING FOR THE NEW COVID-19 VACCINE MANAGEMENT SYSTEM (CVMS)



What is CVMS?

CVMS is a secure, cloud-based vaccine management solution for COVID-19 that enables vaccine management and data sharing across providers, hospitals, agencies, and local, state, and federal governments on one common platform. Providers will be able to do the following:

- Enroll in the COVID-19 Vaccine Program
- Manage COVID-19 vaccine inventory
- Manage scheduling clinics
- Track COVID-19 vaccine administration
- Produce and analyze reports on COVID-19 vaccinations



Who will use CVMS?

NC State officials will enroll providers and verify provider eligibility along with verifying site readiness.

Patients will enroll and have their eligibility verified by their providers. They will also use CVMS to register and schedule an appointment to receive COVID-19 vaccine.

Providers will verify patient eligibility, log dosage administration, and track frequency and timing of additional dosages.



Why CVMS?

CVMS provides a flexible approach for managing, delivering, and administering vaccine programs. It consolidates multiple legacy, siloed systems into an integrated platform with configurable modules. This will allow for quicker updates to the system in order to meet business needs. In addition, built-in automation features means less time on routine tasks and more time on high-value activities.

CVMS ACCESS

NCDHHS's CVMS consists of four user portals: Provider Enrollment, Healthcare Provider, Employer (not shown) and Recipient. In order to access CVMS portals, DHHS will need to provision access to you and your users. Any attempt to access the portals before account set-up will result in single sign on and login errors.

CVMS Provider Enrollment Portal



Providers must first enroll and be approved by NC DHHS as eligible to receive and administer vaccines at the specified provider location(s).

https://covid-enroll.ncdhhs.gov

Salesforce Provider Enrollment Portal username and password

CVMS Healthcare Provider Portal



After receiving Provider Enrollment approval, providers will onboard to the CVMS HCP Portal to manage vaccine shipping, inventory, and administration.

https://covid-vaccine-provider-portal.ncdhhs.gov

NCID username and password

CVMS Recipient Portal



COVID-19 vaccine recipients are invited by their HCP employers to register their account and complete a health questionnaire.

https://covid-vaccine-portal.ncdhhs.gov

Salesforce Recipient Portal username and password

CVMS Vaccine Support



Support for providers and recipients on NC DHHS COVID-19 vaccine program.

https://ncgov.servicenowservices.com/csm_vaccine

ServiceNow username and password

END-TO-END PROVIDER ONBOARDING PROCESS: PROVIDER ENROLLMENT AND CVMS ACTIVATION

Day 0 Provider contacted for enrollment

	Provider Enrollment			Provider Onboarding and Activation in CVMS						Total Potential Duration
Provider Onboarding Steps	1. Provider receives training (live or recording)	2. Provider completes application in CVMS	3. DHHS provider enrollment approval process: Review CMO and provider licensure matches a) Review storage & handling unit b) Update NCIR and Vtrcks with required information c) CVMS sends auto-generated provider approval email to provider	4. DHHS sends provider onboarding package (readiness checklist and CVMS training)	5. Provider completes user onboarding templates (provider and recipient upload)	6. Provider submit onboarding templates thru ServiceNow tickets	7. DHHS assigns NCID for individual user profile (NCID team)	8. DHHS creates user profile in CVMS (Accenture team)	9. CVMS sends auto-email with login info	

!! **Risk:** Provider may not complete the registration correctly – increasing activation processing time after approval

VACCINE: PROVIDER ENROLLMENT

PROVIDER ENROLLMENT DASHBOARD



312 Provider Organizations

589 Provider Location Sites

Enrollment Complete



Initial provider enrollment: Hospitals and Local Health Departments (LHDs)

Federal enrollment of pharmacies (Walgreens and CVS) for long term care settings

Currently Enrolling



FQHC's, (>100 locations activated, and dozens received direct vaccine allocations)

Federal enrollment of more Pharmacies

Currently

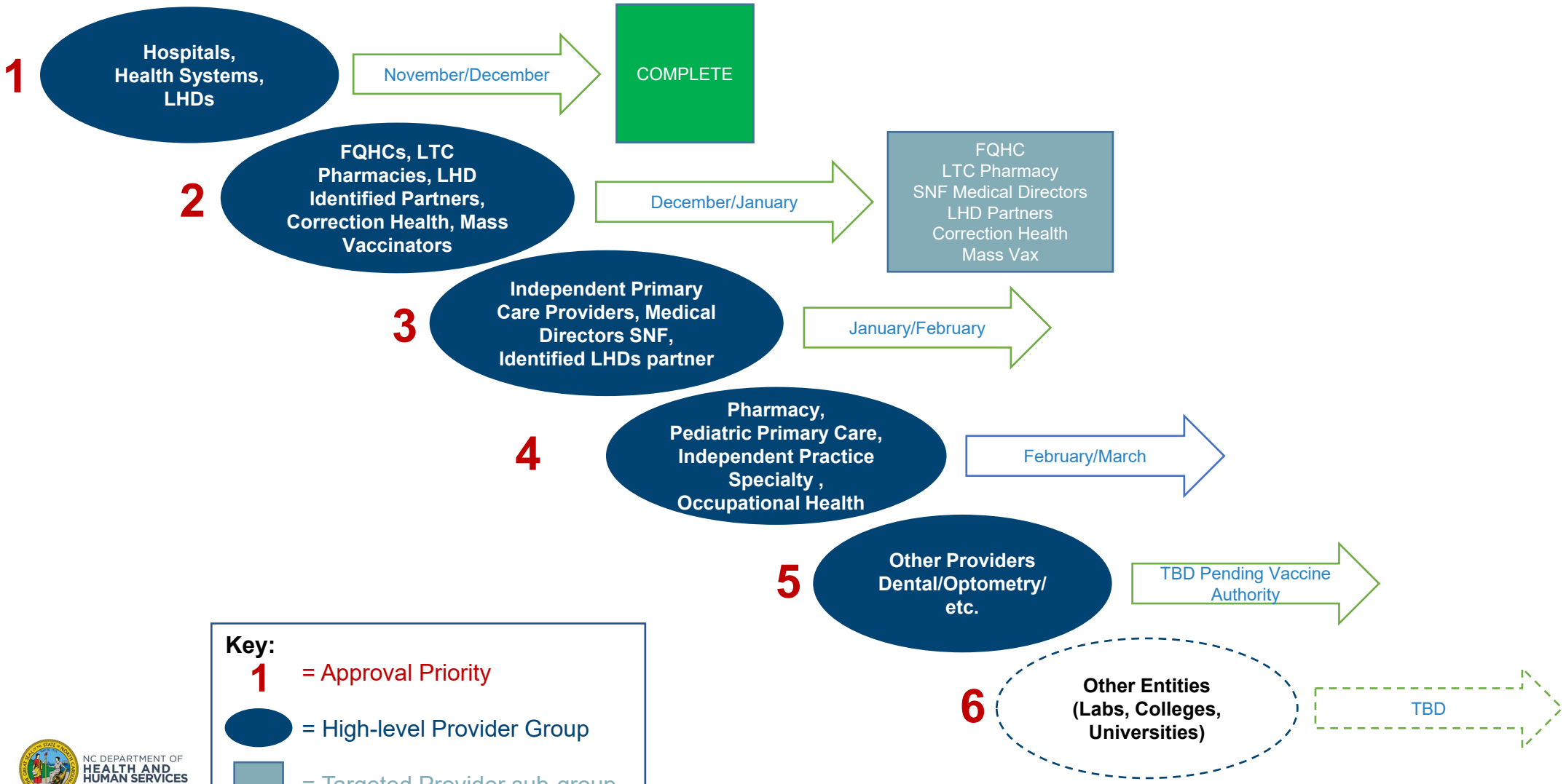


Remaining provider enrollment began on January 11th

- 2853 organizations initiated enrollment
- Prioritizing based on factors such as request from LHD, ability/ willingness to do mass vaccinations, HMP reach, community need

PROVIDER ENROLLMENT, ONBOARDING, APPROVAL PRIORITIZATION

Proposed Vaccine Activation Priority Methodology



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GROUP 3 PRIORITIZATION

PRIORITIZATION OF GROUP 3:
1st Family Medicine & Internal Medicine
2nd Peds identified by LHDs
3rd Occupational Health

ESCALATION FACTORS:

- **Request from LHD**
- **Size of practice/reach/willingness to do mass vaccinations clinics that includes patients not part of their practice**
- **Community Need**
- **HMP Reach**
- **Confidence**
    - Specialty Society input
    - VFC Experience/performance
    - Organization of application

3 **Independent Primary Care Providers, Medical Directors SNF, Identified LHDs partner**

January/February

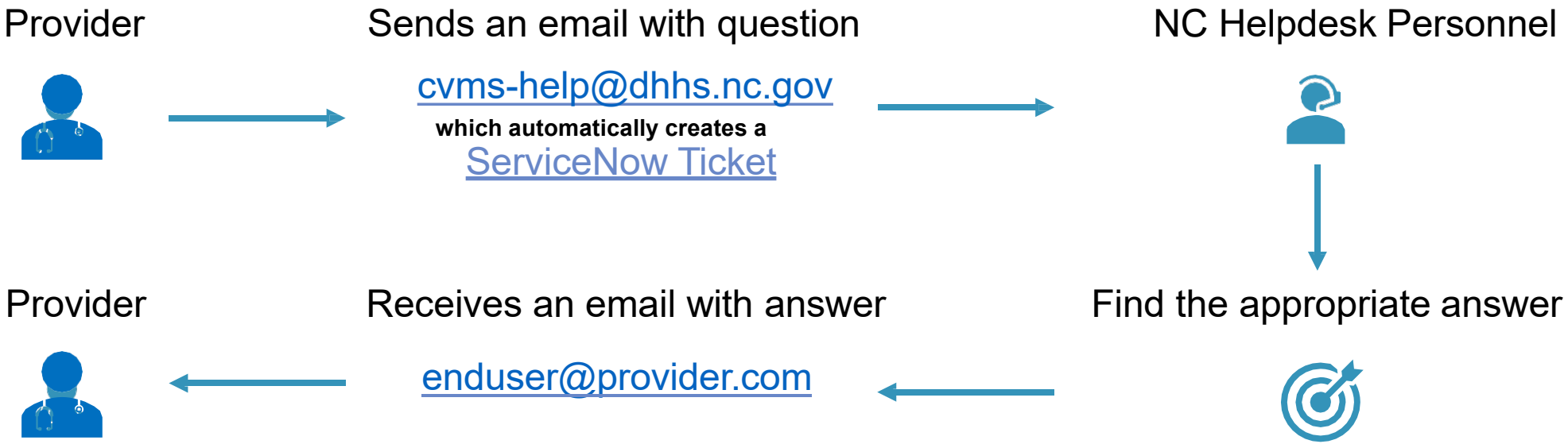
Rationale: FM/IM take care of large volume of 1B populations, particularly Medicare-aged and experienced in routine vaccinators.

Rationale:
If LHD have high confidence and existing partnerships and needs, escalating those practices to front of line indicated.
Additional Priority Factors:

- If practices are large and have multiple locations
- If practices are located in identified CRITICAL NEED areas
- If practices have unique access to vulnerable HMPs
- If practices are identified as HIGH CONFIDENCE practices

COVID-19 VACCINE HELPDESK IS LIVE TODAY TO HELP YOU!!!

Helpdesk process



Helpdesk hours of operations

Monday – Friday	Saturday - Sunday
8:00 AM to 5:00 PM	**10:00 AM to 6:00 PM**

Need Help! Call into the Virtual Office Hours: 984-204-1487 Code: 871816988. Office Hours are M-F from 8am-5pm

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ADDITIONAL STAFF SUPPORT – PUBLIC HEALTH PREPAREDNESS & RESPONSE



Staffing Support

- Notifying LHDs of short- and longer-term resources
- Channeling LHD staffing support requests via local EM through WebEOC
- PHP&R triaging requests to identify best match to support needs
- Immediate – Shifting staff within reach
  - •Case Investigation / Contact Tracing Staff
  - •Regional DHHS Staff



Utilizing Volunteers

- 270 Division of Public Health volunteer surveys received
  - 40 Clinical
  - 230 General support (including data entry)
  - Requesting DPH staff to train on CVMS to help LHDs w/data entry
- Currently determining specific availability to support requests
- Board of Pharmacy – survey of certified pharmacists vaccinators ~600 responses w/nearly 400 vaccinators.
- Coordinating with AHEC and IHE schools of health sciences
- Matching with State-Staff and Public Volunteers

VACCINE ADMINISTRATION



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

COVID HELP DESK- NOW THRU JANUARY 30, 2021

Expanding ability for all North Carolinians to call and receive prompt and reliable information regarding the vaccine.

CCNC COVID Call Center
(877) 490-6642

Now, until 1/29…



CCNC COVID Call Center provides increased caller capacity to **alleviate pressure on LHDs** as a ‘first line’ to call for general questions



Call center personnel include **both clinical and non-clinical professionals** who can support a variety of recipient questions about the COVID vaccines



CCNC COVID Call Center will contact LHD daily with consumer inquiries about vaccine availability to have the most up to date information at all levels

COVID HELP DESK- FUTURE JANUARY 30, 2021-THRU TBD

Expanding ability for all North Carolinians to call and receive prompt and reliable information regarding the vaccine.



Provides multi channel approach to serve as Resident facing call center for general vaccine administration (English and Spanish inbound calls, TTY, call back assistance, after hours voice messaging, web-based inquiries.)

NC COVID Vaccine Help Center
(888) 675-4567



Provides clinical and non-clinical professionals who can support a variety of residents questions about the COVID vaccines.

Coming Soon!



Provides navigation on eligibility registration, vaccine site locations, and designing future integration of enhanced technology (chat bot, virtual agents)

Blue Ridge Community Health Services

Dr. Richard Hudspeth

WakeMed Health & Hospitals

Dr. Chris DeRienzo

RECOMMENDED BEST PRACTICES FOR COVID-19 VACCINE ADMINISTRATION IN YOUR PRACTICE

- Create and distribute **patient education materials.**
- Develop a **patient education video** for your patients and post to your website and social media.
- Run a **list of patients from your EHR** to prioritize your outreach and administration. Filter and prioritize the patients based on the vaccine eligibility criteria.
- Develop **scripts for your staff** so that your communication is consistent.
- Include **important information in communications** including vaccine availability, practice's system of administering vaccine, benefits, side effects, and that the vaccine is free to the patient.
- Ensure **communication is concise and easy to understand** for all your patients.
- Update your **telephone triage system, voice mail, email, website and social media** with updated information for routine patient education and updates.
- Utilize your **patient portal and regular mail** to communicate vaccine and appointment updates.

RECOMMENDED BEST PRACTICES FOR COVID-19 VACCINE ADMINISTRATION IN YOUR PRACTICE

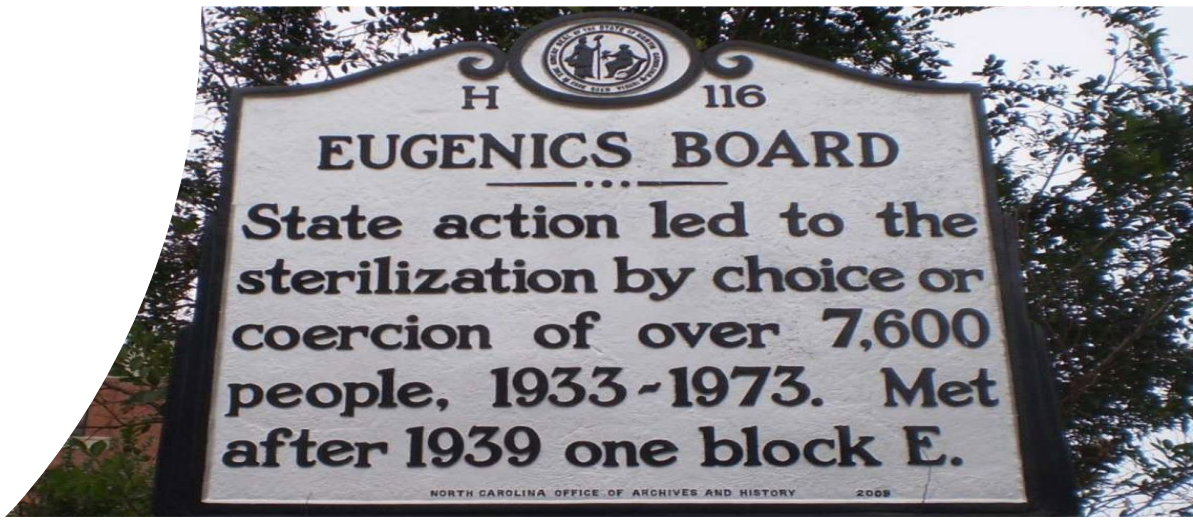
- Contact **local health department and hospital to explore options** for patient vaccinations and possible collaborative immunization clinics.
- Offer **special immunization clinics during week or weekend** (similar to flu shot clinics offered in the past).
- Provide **sheltered drive-thru or parking lot immunization clinic**s for patients who meet criteria.
- Designate **certain locations for vaccine administration** if practice has multiple sites and limited resources.
- Know the **billing and coding for vaccine administration**: vaccines are free to all patients, vaccine administrative costs are reimbursed for each dose.
- **Document in both CVMS and your practice EHR** to ensure patient's vaccine history is fully up to date.
- Work with **AHEC and CCNC practice support coache**s to help you with any clinical workflow redesign needs.

History of Hesitancy

Historical Medical Trauma Triggers

- Not just Tuskegee
  - Infamous Tuskegee syphilis study in 1932 was commissioned by the US government – Public Health Services
- Eugenics Project in North Carolina from 1933-1973
  - State action led to sterilization by choice or coercion of over 7,600 people
- Dr. Eugene L. Saenger University of Cincinnati radiation study from 1960-1971
  - Experiments in radiation irradiated 88 men, women and children, most of them poor, uneducated black people. It was reported that large amounts of radiation exposure caused some to die in just a few hours.



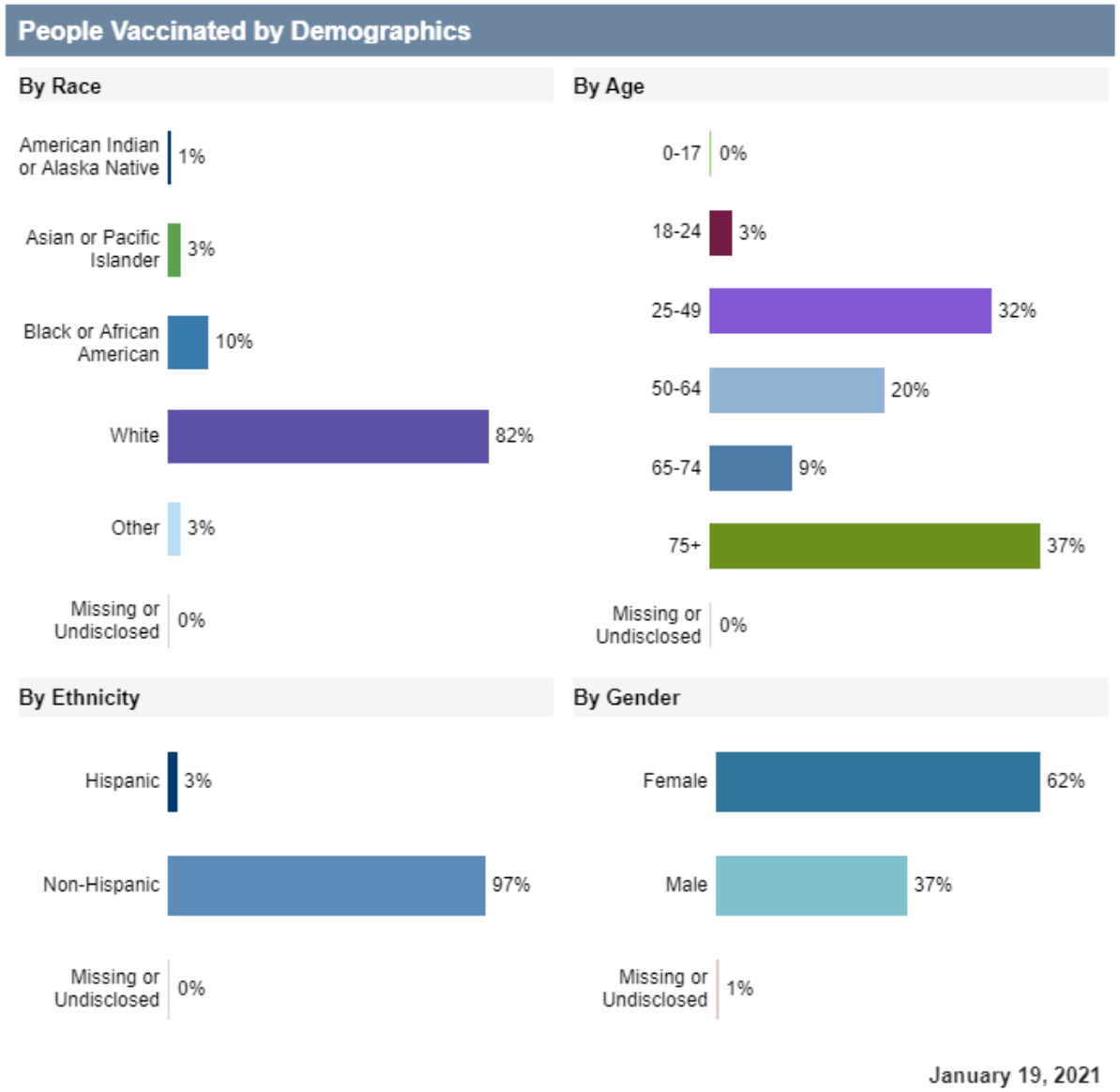


Historical Medical Trauma Triggers

- Dr. James Marion Sims, Father of Gynecology
  - Honed his craft and science practicing on slave women in 1800s
- Henrietta Lacks
  - Sought treatment at Johns Hopkins in 1951; diagnosed with cervical cancer



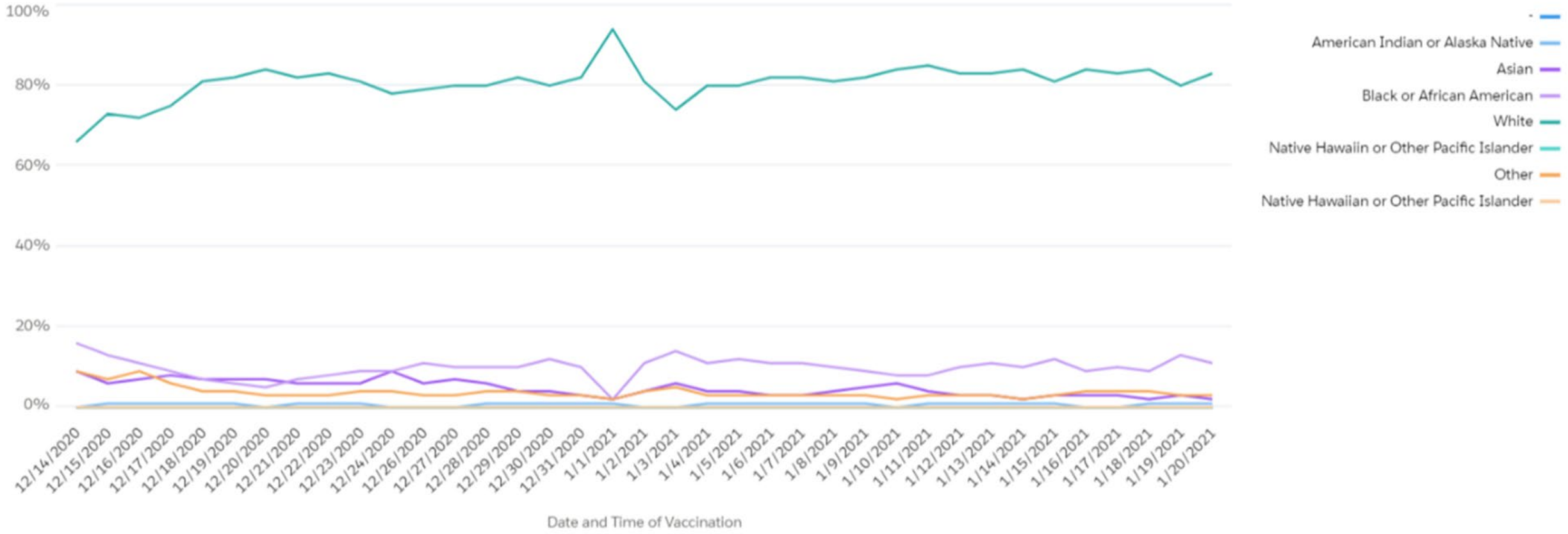
NORTH CAROLINA VACCINATIONS - CVMS



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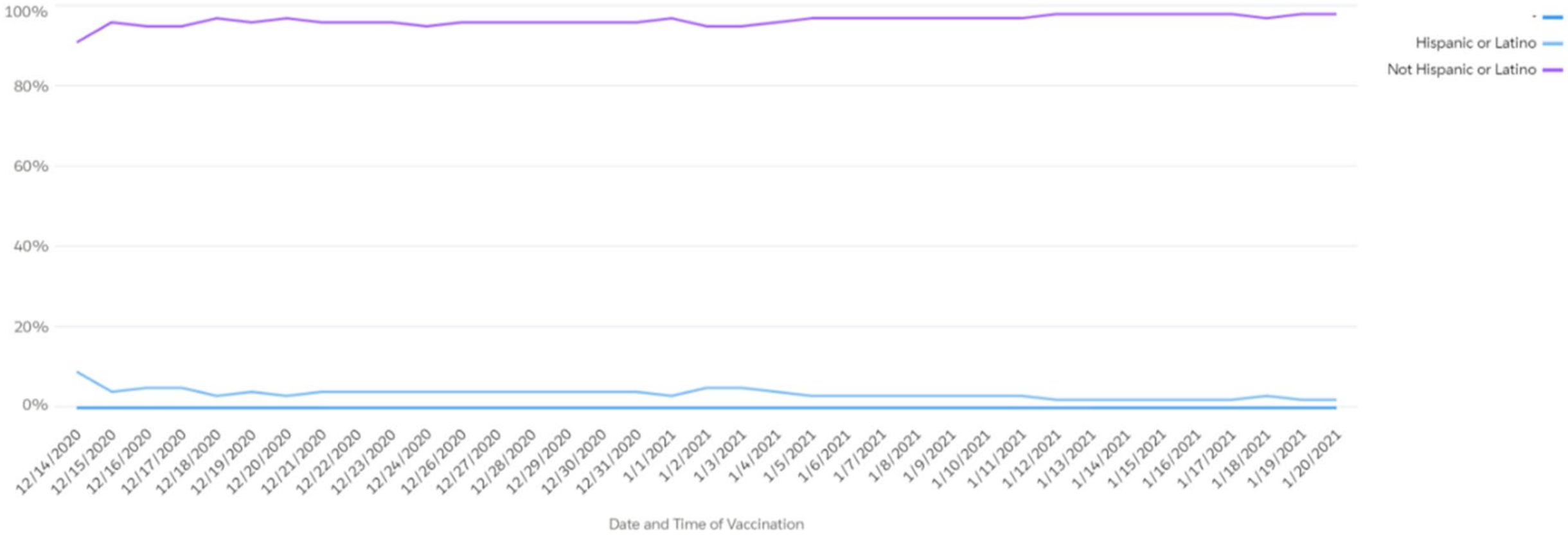
Vaccinations occurring at LTC facilities are managed by the federal government through contracts with CVS and Walgreens and are not reflected in these numbers.

PERCENT OF ADMINISTRATIONS BY RACE OVER TIME



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PERCENT OF ADMINISTRATIONS BY ETHNICITY OVER TIME



Equity & Hesitancy

COMMUNICATIONS CAMPAIGN BUILT ON RESEARCH WITH HMP

- >1900 surveyed & 30 interviewed, majority from HMP. Messengers are 90% of message effectiveness.
- Partnership with NCCU ACCORD for testing and vaccination outreach

OPERATIONAL APPROACHES

- Prioritize vaccine providers who can reach historically marginalized populations (e.g., community health centers)
- Vaccine and resource allocation (e.g., surge staff deployment) across the state
- Early activation point-of-care CVMS registration to vaccinate individuals without emails
- Mass vaccinations sites in areas trusted by HMPs (e.g., HBCUs, Faith Based organizations, high schools with high free and reduced lunch populations Mass vaccinations sites selection
- Utilize Community Health Workers to help navigate process
- Transportation resources, hold appointments for HMPs

REGULAR ENGAGEMENT WITH HMP LEADERS

- HMP Advisory Group (meets weekly)
- Over 80 vaccine presentations to stakeholder groups, from hosting small community health workers ”charlas” to webinars with 100-3000+ participants
- Bi-weekly calls with eastern NC black ministers
- Weekly updates with Latin19 group

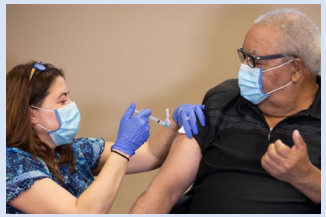
ONSMS EST. 1887 THE OLD NORTH STATE MEDICAL SOCIETY

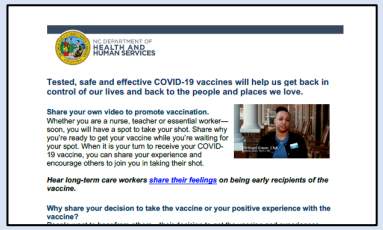
AMEXCAN

NC LBCF Legislative Black Caucus

BRINGING IN THE VOICES OF TRUSTED MESSENGERS







Started with health care workers & trusted public influencers. Inviting others to share their own videos to promote vaccination.

- Equipping trusted messengers with accurate and up-to-date information about NC’s COVID-19 vaccine
- After training >70 expert vaccine presenters in NCDHHS, we are offering the trainings to external stakeholders who will receive regular updates on vaccination
- Several organizations are already scheduled for trainings

VACCINE HESITANCY DECREASING: KFF SURVEY

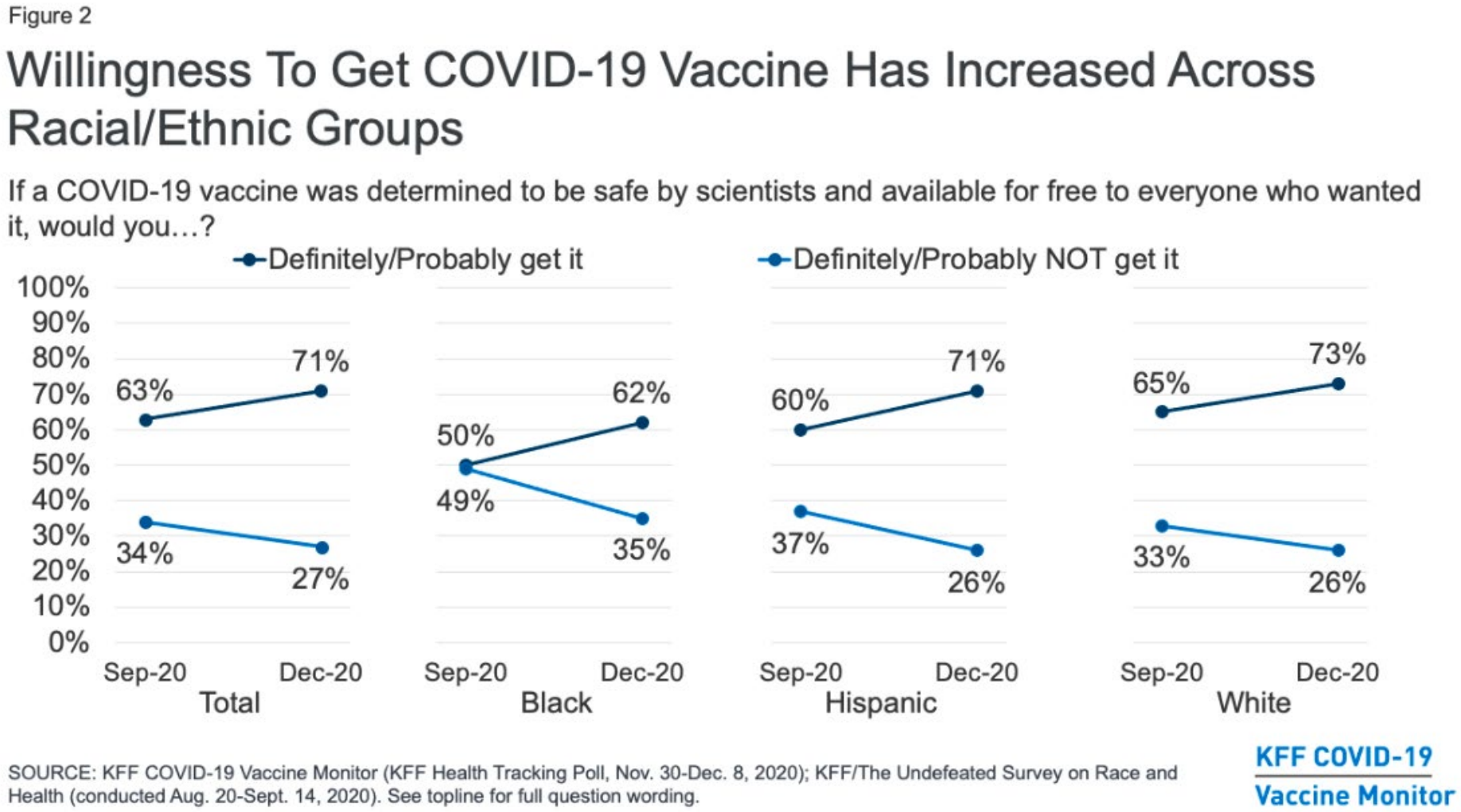
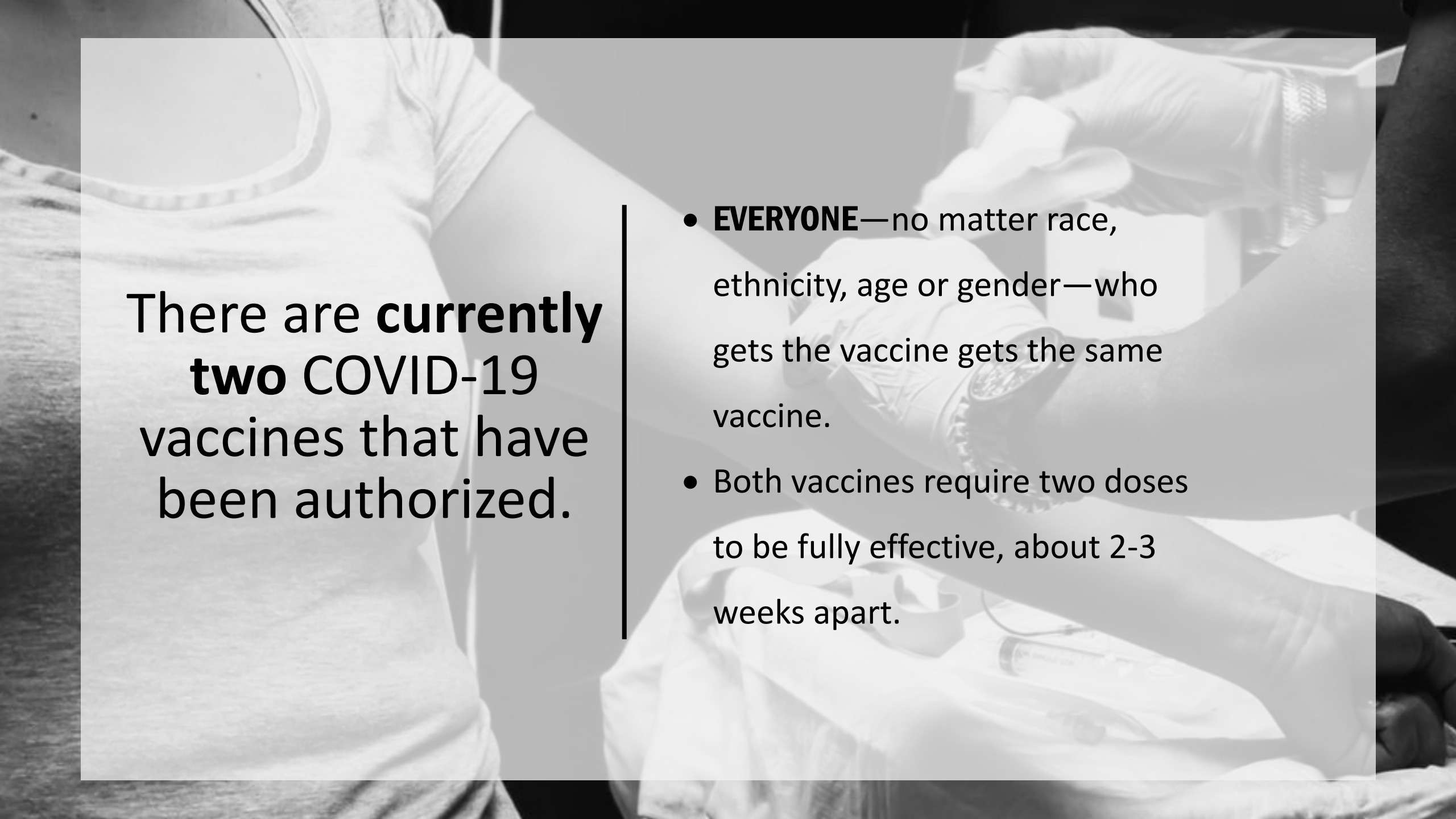


Figure 2: Willingness To Get COVID-19 Vaccine Has Increased Across Racial/Ethnic Groups

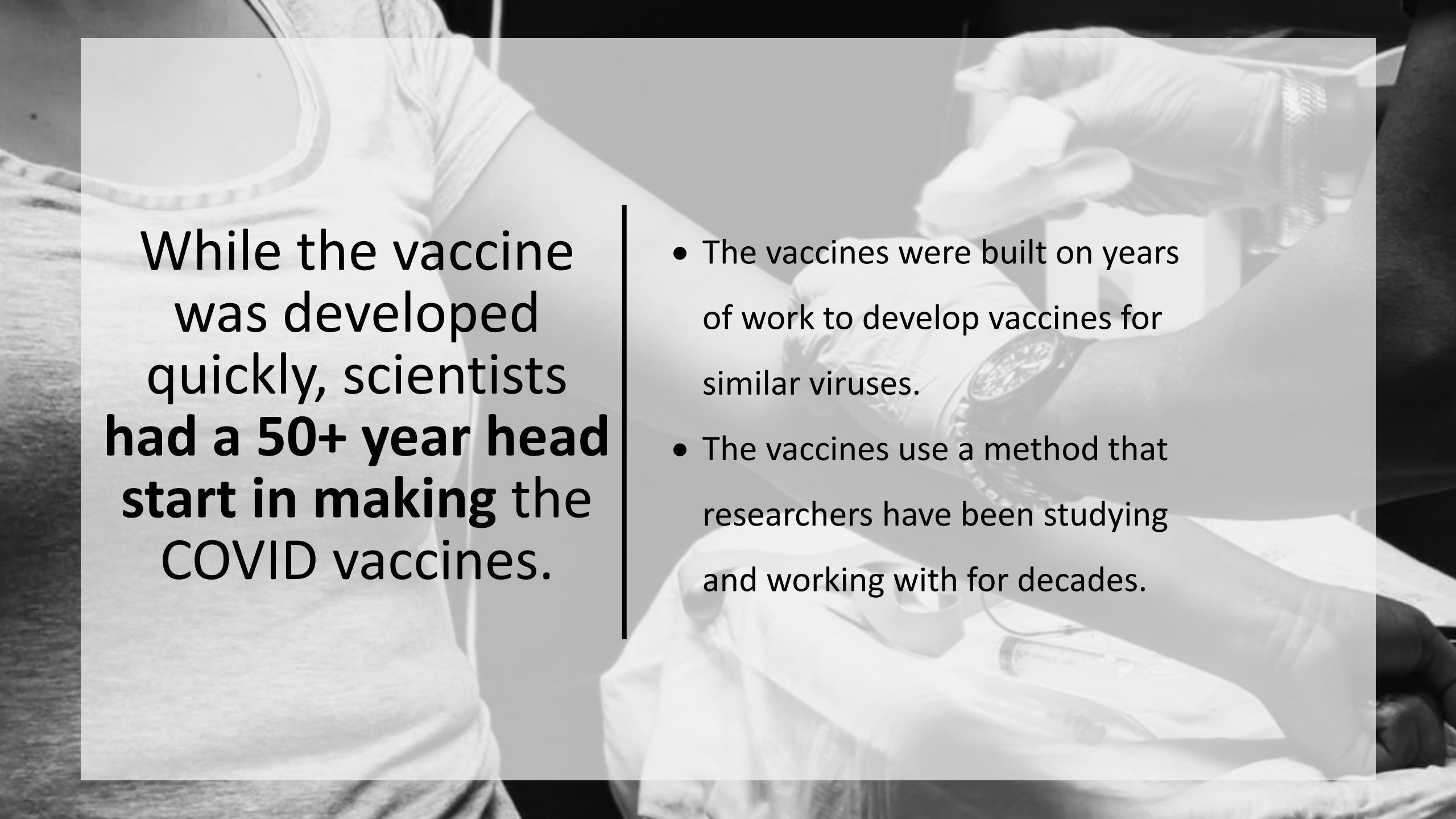
NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

Vaccine Truths for Doubters



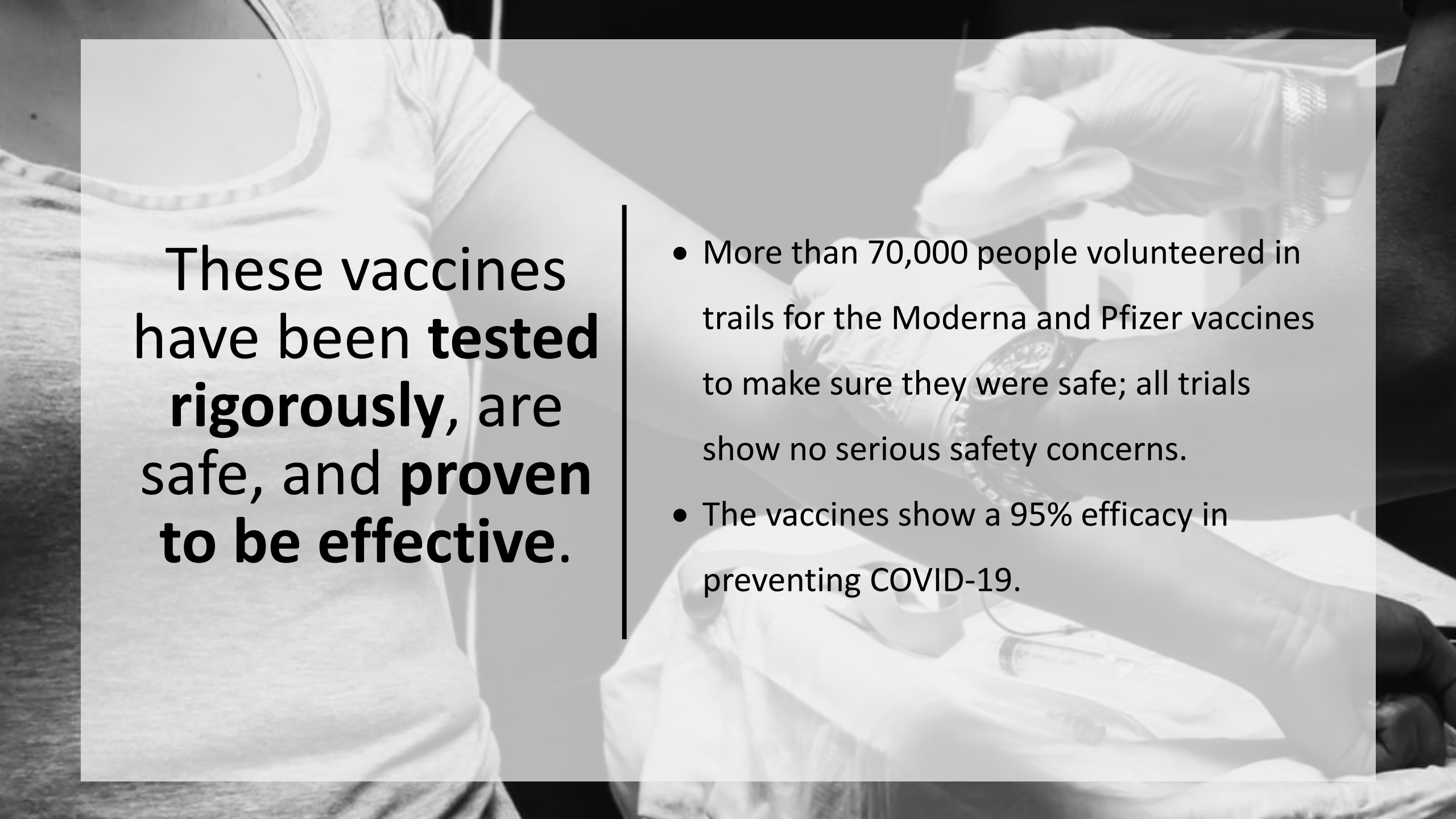
There are **currently two** COVID-19 vaccines that have been authorized.

- **EVERYONE**—no matter race, ethnicity, age or gender—who gets the vaccine gets the same vaccine.
- Both vaccines require two doses to be fully effective, about 2-3 weeks apart.



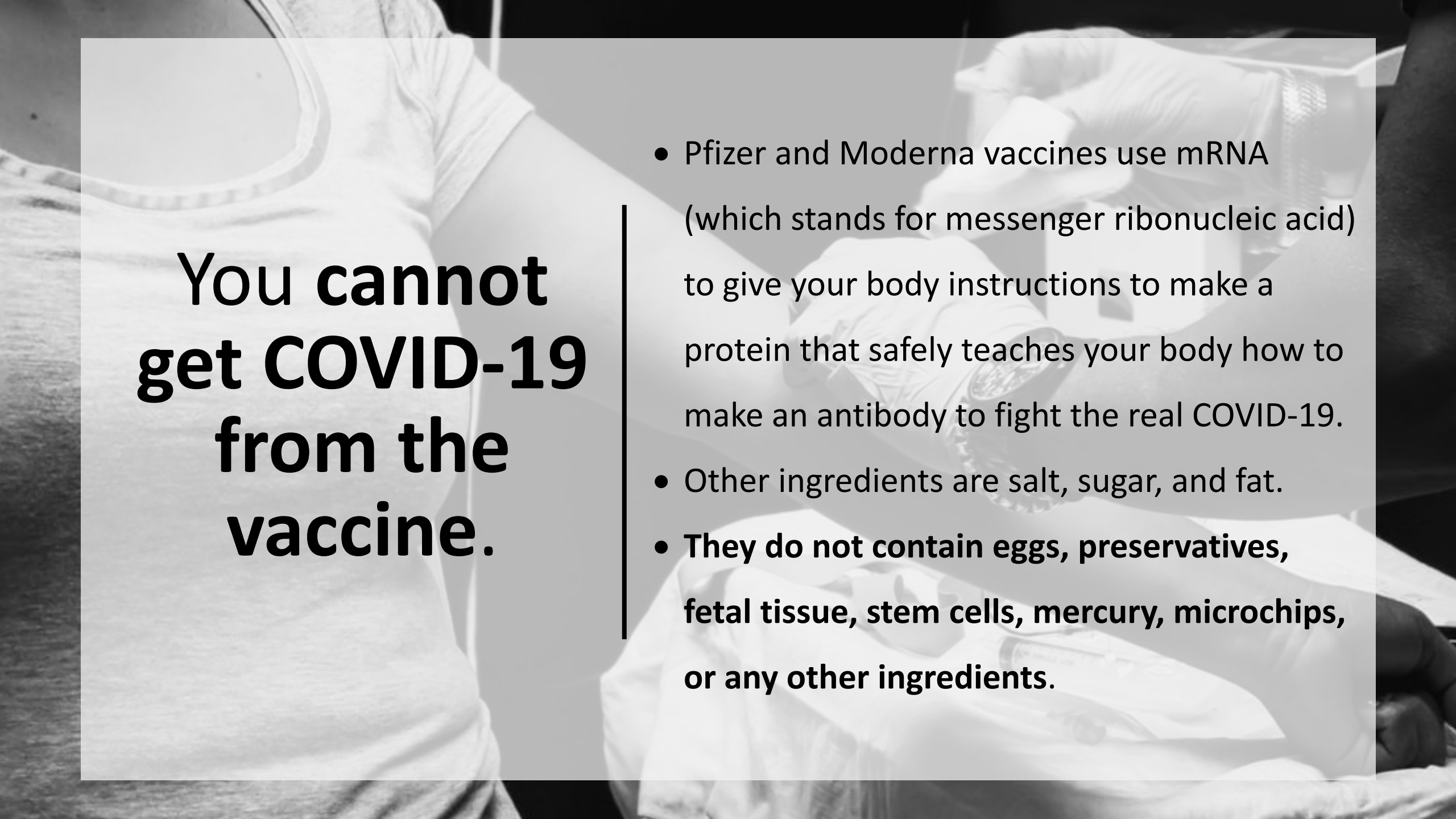
While the vaccine was developed quickly, scientists **had a 50+ year head start in making** the COVID vaccines.

- The vaccines were built on years of work to develop vaccines for similar viruses.
- The vaccines use a method that researchers have been studying and working with for decades.



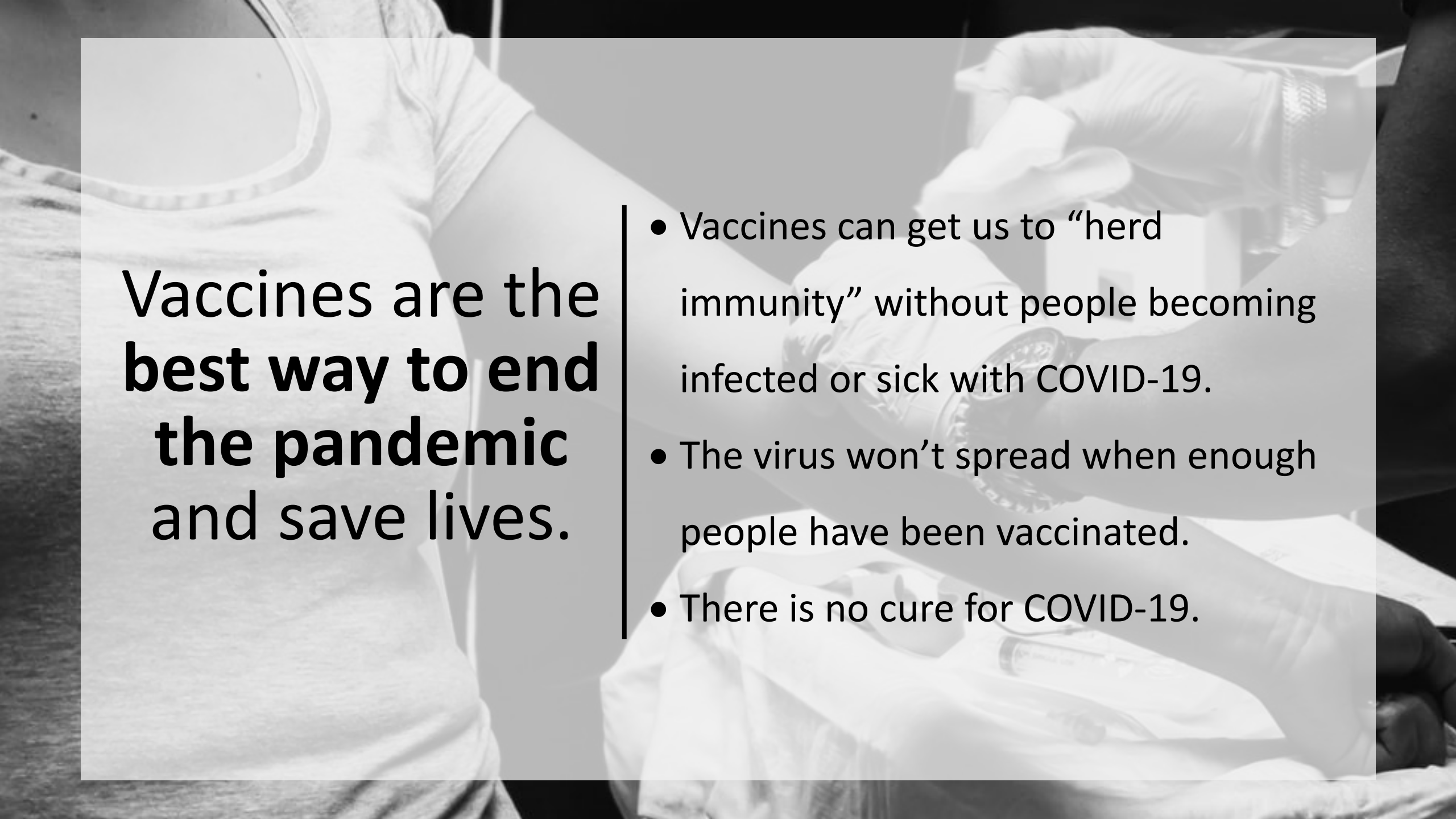
These vaccines have been **tested rigorously**, are safe, and **proven to be effective**.

- More than 70,000 people volunteered in trails for the Moderna and Pfizer vaccines to make sure they were safe; all trials show no serious safety concerns.
- The vaccines show a 95% efficacy in preventing COVID-19.



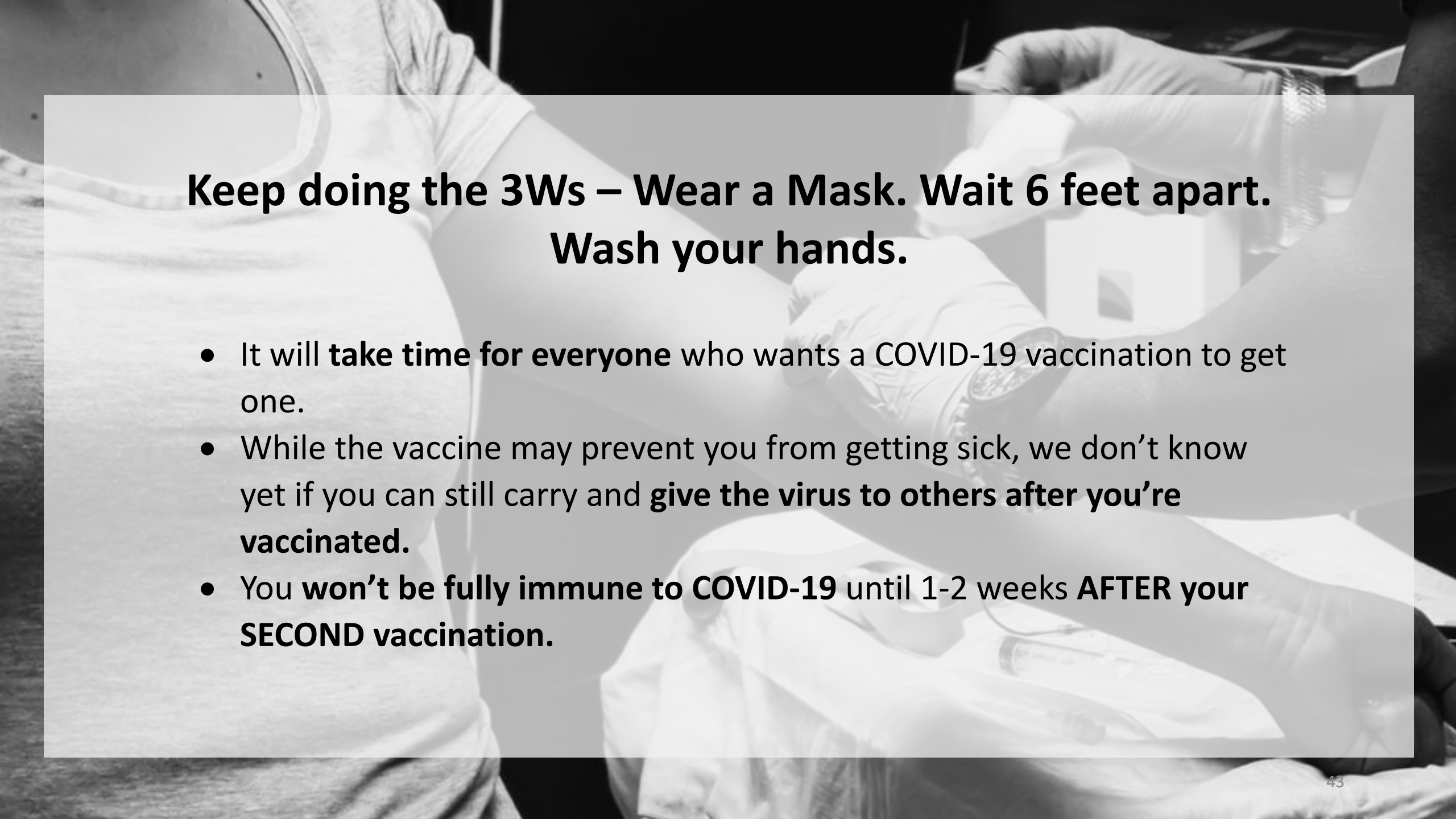
You **cannot get COVID-19 from the vaccine**.

- Pfizer and Moderna vaccines use mRNA (which stands for messenger ribonucleic acid) to give your body instructions to make a protein that safely teaches your body how to make an antibody to fight the real COVID-19.
- Other ingredients are salt, sugar, and fat.
- **They do not contain eggs, preservatives, fetal tissue, stem cells, mercury, microchips, or any other ingredients**.



Vaccines are the **best way to end the pandemic** and save lives.

- Vaccines can get us to “herd immunity” without people becoming infected or sick with COVID-19.
- The virus won’t spread when enough people have been vaccinated.
- There is no cure for COVID-19.



Keep doing the 3Ws – Wear a Mask. Wait 6 feet apart. Wash your hands.

- It will **take time for everyone** who wants a COVID-19 vaccination to get one.
- While the vaccine may prevent you from getting sick, we don't know yet if you can still carry and **give the virus to others after you're vaccinated.**
- You **won't be fully immune to COVID-19** until 1-2 weeks **AFTER your SECOND vaccination.**

QUESTIONS?



Appendix

Resources

CVMS TRAINING AND SUPPORT RESOURCES

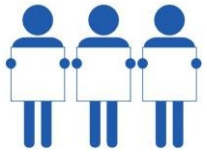
NC DHHS offers a range of tools and methods for CVMS and vaccine training including communications, user guides, live trainings, and helpdesk support.



Communications: Includes CVMS Provider Portal announcements, enhancement updates, training event invitations, and information about new user guides and video demonstrations. Communications will be tailored to individual roles and responsibilities.



User Guide: Step-by-step guide that combines text instructions and screenshots to walk users through each task in the CVMS Provider Portal. It breaks down tasks into key steps and includes annotated screen shots and helpful tips.



Live Training: Live training will include step-by-step demonstrations of key tasks in CVMS, with opportunities to ask questions and do “replays” to take a closer look with the trainers. A key feature of live training is its high engagement and interaction from trainees.



Helpdesk: email help for all CVMS users during published hours for all CVMS related questions.



ServiceNow: CVMS Vaccine Support portal will contain a number of Knowledge Articles and FAQ’s that will provide information such as self-help, troubleshooting and task resolution.

Initial training of Phase 1 enrolled Providers is currently in progress.

CONSUMER CONFUSION: CLEAR PUBLIC MESSAGING FOR 75+

COVID-19 vaccinations are now available to people 75 and older. Because vaccine supplies are still limited, those 75 and over may have to wait, but they have one of the first spots to take their shot. If you are 75 or over—or assisting someone who is—here is how to take your shot against COVID-19:

- **Supplies are very limited**. Right now, very few vaccine doses are available.
- **You will need an appointment to get vaccinated**. You may have to wait to schedule your appointment to get your vaccine.
- **Your local health department or hospital can help you get your shot**. Because supplies are very limited right now, most doctors cannot provide vaccinations in their offices.
- **Find your local health department or hospital**. Use the table below to find the health departments and hospitals giving vaccinations in your area. You can search by zip code or county to find locations and contact information.
- **You can also call the COVID-19 Line 1-877-490-6642**. It's a free call. The COVID-19 Line is managed by Community Care of North Carolina



Consumer Confusion

Public Education

- Creating and disseminating materials with accurate and up to date information on vaccines
- YourSpotYourShot.nc.gov



Helping People Find Their Spot – Version 1

- List of all enrolled vaccine providers who have received vaccine allocations is linked at the top of the NCDHHS vaccine page
- Working with vaccine providers to keep information updated and on staffing and strategies to make sure calls are answered
- COVID-19 line (CCNC)
- Public facing 'first line' call center tracking for Jan. 30 launch date
- Coming Soon: Online eligibility screener, call center with increased capacity, additional way-finding tools for consumers

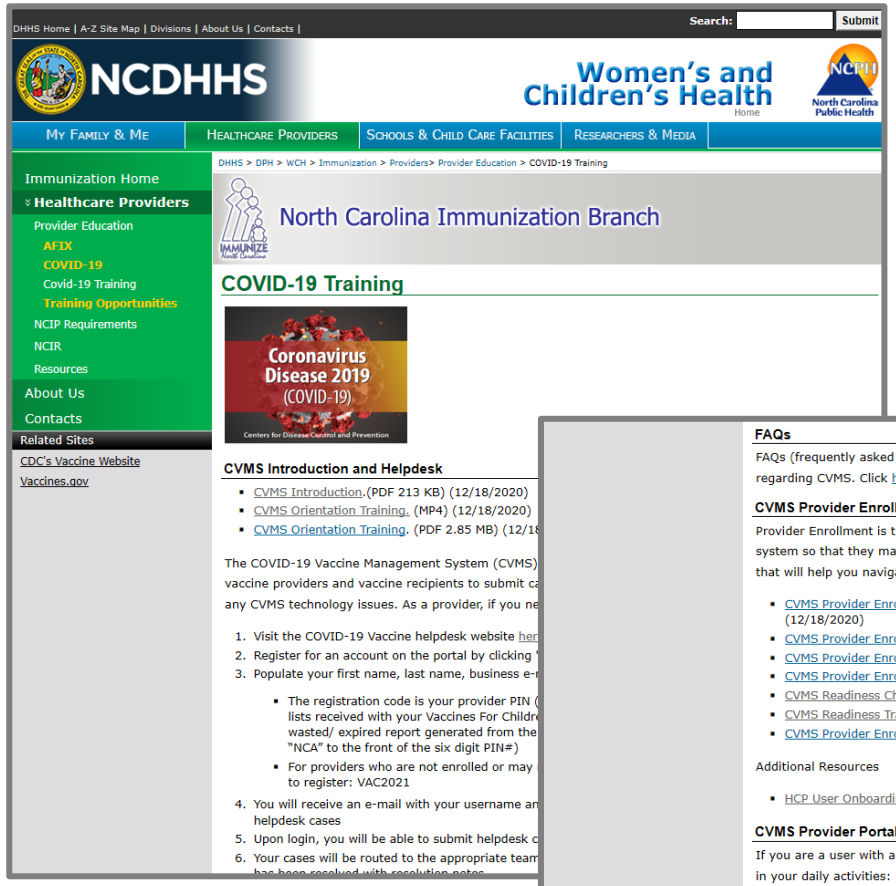
Vaccine providers may update their information using this form.

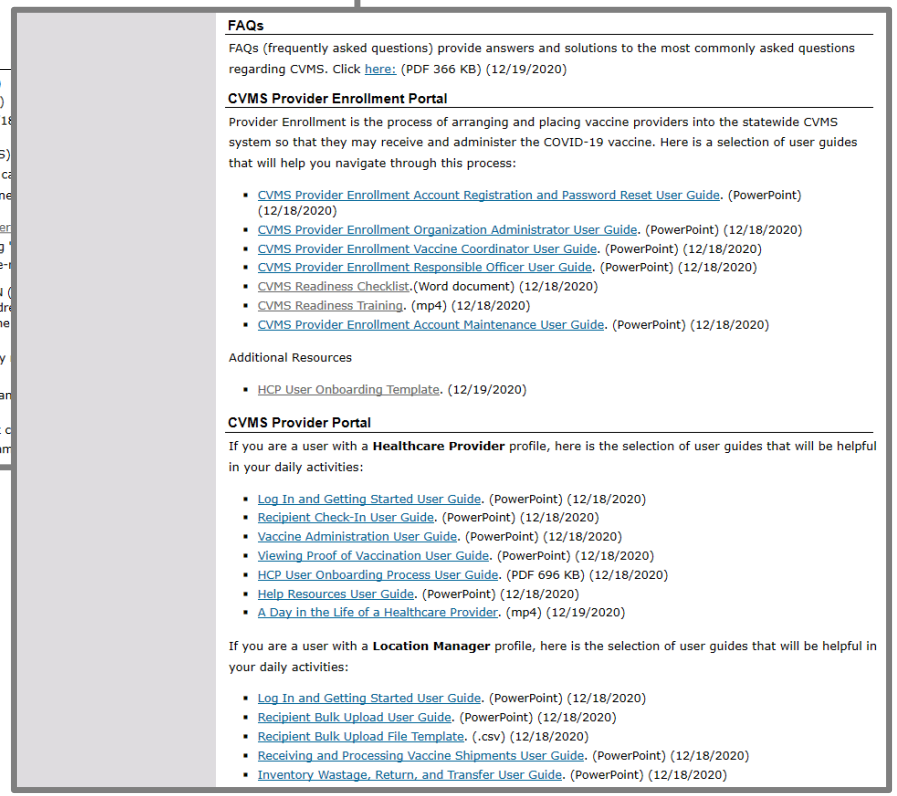
Show 100 entries Search:

County (or Counties) Served	Organization	Website
Alamance	Alamance County Health Department	https://www.alamance-nc.com/healthdept
Phone Number 336-570-6367 **Email Address** **Additional Information** https://www.facebook.com/AlamanceCountyHealthDept/		
Alamance, Guilford, Rockingham	Cone Health	http://conehealth.com/covid19vaccine
Alamance, Guilford, Rockingham	Cone Health Wesley Long Hospital	https://www.conehealth.com/covid-19-information/covid-19-vaccine-informa...

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NC DHHS IMMUNIZATION BRANCH WEBSITE: YOUR CVMS "ONE STOP SHOP"





North Carolina Immunization Branch Website

https://immunize.nc.gov/providers/covid-19training.htm

Content

- CVMS Introduction and Helpdesk Information
- CVMS FAQs
- User Guides and Training Session recordings for:
  - CVMS Provider Enrollment Portal
  - CVMS Provider Portal
  - CVMS Recipient Portal
  - CVMS Employer Portal

NC DHHS IMMUNIZATION BRANCH WEBSITE: YOUR CVMS "ONE STOP SHOP"

A day in the Life of a **Location Manager**

- Friday, January 22 at 11 am – 12:30 pm ET
  - Zoom link click: here Passcode: 010619

A day in the Life of a **Healthcare Provider**

- Friday, January 22 at 2:00 pm – 3:00 pm ET
  - Zoom link click: here Passcode: 832296

Provider Enrollment

- Thursday, January 21 at 2 pm – 3:30 pm ET
  - Zoom link click: here Passcode: 832296
- CVMS Provider Enrollment Training Recording. (mp4)



Or watch them on your own time

- Recorded sessions available on https://immunize.nc.gov/providers/covid-19training.htm