

"I was deployed for H1N1, part of a team responsible for vaccinations in three states in the Southwest.

We were being sent doses of the vaccine but we weren't getting it out fast enough. We asked ourselves, who could do it quickest? The answer? The pharmacists."

Rear Admirable (ret.) and former Asst. U.S. Surgeon General,

Pam Schweitzer



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How to be an Anti-Bureaucrat

The Startling Progress of the Navigators, A Partnership Between Public Health and Pharmacies

By Dale Dauten, Syndicated Columnist

2020. What a year. I heard it described this way, "2020 is like looking both ways before crossing the street and then getting hit by an airplane."

And, there's this, an unattributed quote referring to the isolation of working at home and social distancing:

"Struck up a conversation with a spider today.

He seemed nice.

He's a web designer."

Cute, right? But there is also something profound underneath our stiff-upper-lip joshing, something beneath the political and social maelstrom: good people wanting more than ever to make a difference, to fight back against the pandemic. One way we are getting to see that play out is the startling interest in an all-volunteer group committed to increasing access to vaccinations: The Navigators.

The group grew from a conversation between Todd Watkins of STChealth and Stacy Hall of the Louisiana Office of Public Health. They next recruited former Assistant Surgeon General Pamela Schweitzer and Jason Briscoe, Director of Pharmacy Operations for the Midwestern pharmacy chain, Discount Drug Mart, and in April of this year, the Navigators team was born. Now, just six months later, there are regular calls, representing every state, dozens of pharmacy chains and a list of immunization and pharmacy associations – 110 people on the last monthly call. (You can see logos from many of those organizations at the end of this article.)

There's a spirit to the group that makes me think of them as the anti-bureaucrats.

Todd Watkins said the group's mission is "ambiguous but clear," adding that while the group has no formal job description, the work is quite clear – "collaborative and outcome-driven."

Jude Alden, now of STChealth but formerly with Wyoming's Public Health Department, said, "I remember in my days with a state agency of being on call after call and fighting the same issues for ten years and nothing getting done. But on these calls there are no politics, no upsetting the wrong person; instead, the members are the ones doing the work and there's a passion to make things happen. There's a sense that we're all moving forward and no one wants to get left behind."

Shreya Angana of STChealth added, "There's no group like it. It used to be that people were waiting for the CDC. But the Navigators do not wait for anybody."

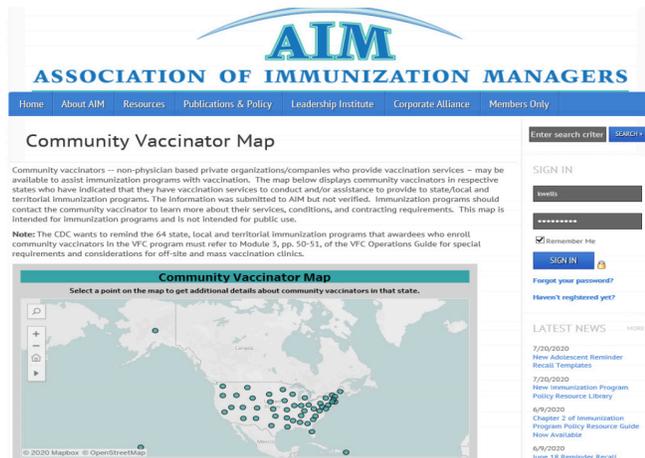
What are the membership dues? There are none. As Watkins points out, "Not one person has been paid one penny – it's all volunteers. The Navigators are changing the perception of what work is and can be."



Here are two examples of projects The Navigators have undertaken:

THE COMMUNITY VACCINATOR MAP

There is now a resource for public health to find organizations that provide vaccines – it's in the form of an interactive map on the AIM (Association of Immunization Managers) website.



Identify non-physician based private organizations/ companies who can conduct or assist with off-site/temporary mass vaccination clinics

- Search by state
- Download list in excel

www.immunizationmanagers.org/CommunityVaccinatorMap

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As Jude Alden explained, “This saves a significant amount of work for anyone who needs to do mass vaccination clinics. The work is done for you, the contact information is right there -- you just start calling or emailing and enrolling clinics.”

PHARMACIES AND THE VFC

Todd Watkins of STHealth called the VFC (Vaccines for Children Program) “arguably the most successful public health investment ever made.” Here are the numbers from a CDC study of those born in the VFC-era:

“routine childhood immunization... [will] prevent 322 million illnesses (averaging 4.1 illnesses per child) and 21 million hospitalizations (0.27 per child) over the course of their lifetimes and avert 732,000 premature deaths from vaccine-preventable illnesses.”

The VFC was created for pediatricians' offices to be able to give free vaccinations to any child where cost is an obstacle. And, as we just said, it's a triumph. But there are two issues. One, in a time where many people are reluctant to go to doctors' offices, it would be useful to include other options, like pharmacy vaccination programs. Two, there is an access problem in rural areas. As Jude Alden said, recalling her days with Wyoming public

health, “We had a shortage of pediatricians, but pharmacies are everywhere.”

So, one goal of The Navigators is to get pharmacies into the VFC. There are about 40,000 vaccinators enrolled in the program, but just 68 of those are pharmacies. One participant in the Navigators described for the group his experience with applying for enrollment – he succeeded but it took nine months. So one team from within The Navigators has undertaken an anti-bureaucracy effort. For instance, one big time-suck is when a compliance visit is mandated before approving an application, even though a pharmacy has been giving vaccinations for years. One idea is to establish a third-party organization authorized to do the compliance visits, something that could cut months from the process.

ARE YOU AN ANTI-BUREAUCRAT?

The problem with bureaucracy is that it’s relentless, the organizational equivalent of kudzu. So every organization needs anti-bureaucrats. If you’re interested in the work of The Navigators, contact Shreya Angana at navigatorinfo@stchome.com.



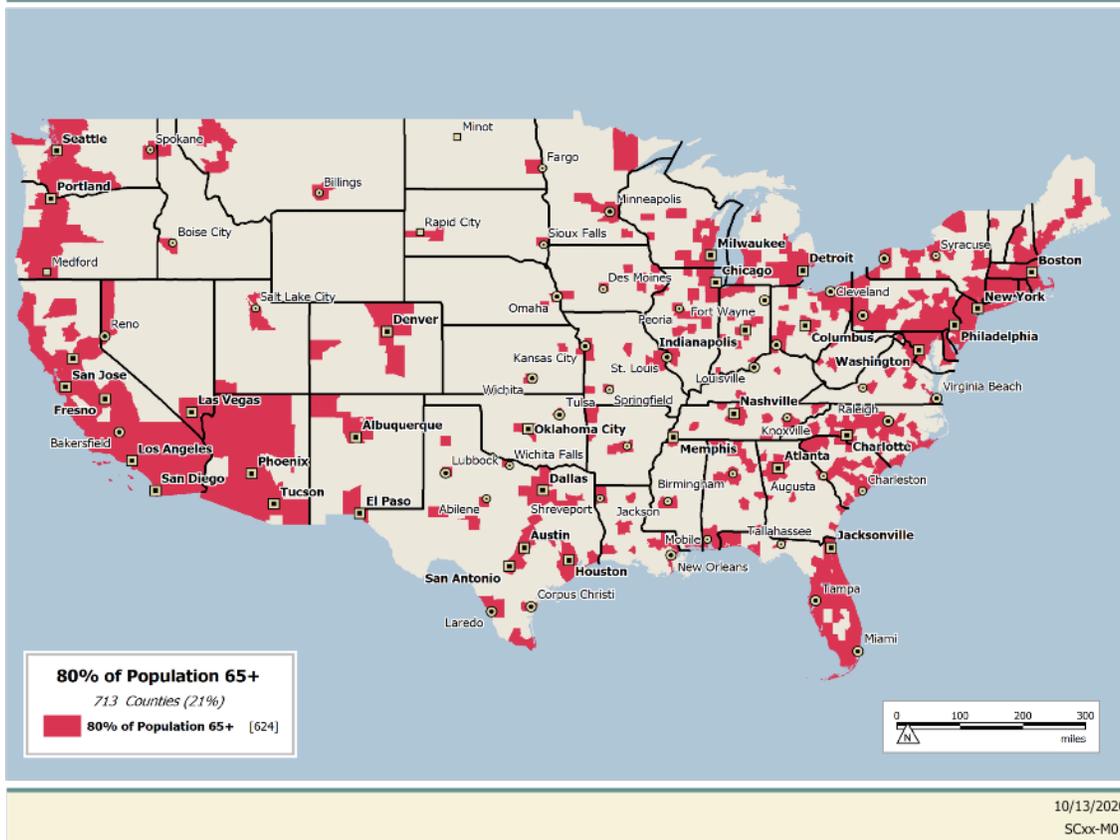
Demographic Logistics Comes of Age: Covid-19 Vaccine Distribution Planning

By Bill Davenhall, Geomedicine Analyst, STChealth Analytics

How good are the refrigerators at major airports near you? A recent WSJ story (October 5, 2020) discussed the logistical hurdles of delivering millions of doses of vaccines to people around the world. No small feat given the operational limitations of spoilage, cargo space on aircraft, and keeping the vaccines cold throughout its travel, delivery, and storage at the destination. Second to these hurdles is getting the vaccine delivered as fast as possible into the arms of people in your local jurisdiction. The report stated that most of the big air cargo carriers are stepping up their temperature monitoring technologies to be able to keep the spoilage to a minimum, with spoilage estimated to be around 5-20% due to lack of temperature control. Further, should a vaccine be available today, it would take, according to the logistical experts in this field, about 24 months to get every person in the world Covid-19 immunized.

Planners must also consider the uncertainties of the vaccines' journeys to and from airports – getting to the airport and being stored along its way either in the cargo plane or in the destination airport until “local” distribution arrangements can be executed. The cold chain requirements of the vaccine will help dictate the populations able to receive the initial doses quickly. Here is where your demographic analytics must be ready to make adjustments on the fly.

So, if the 55+ million seniors (those 65+) are among the earliest people to get a vaccine, then where will planes and trucks need to go first? Can one assume that “seniors” are evenly distributed across the US, geographically? The map below illustrates where 80% (44 million) of those over 65 actually reside – in only approximately 20% of the counties of the country (713 to be exact). As you can see, there are regions of the US that will need massive logistical transportation and vaccine delivery resources to keep a vaccine cold while still meeting the rising expectations of the public in general and among the target population, specifically. The white spaces on the map also cause great challenges to vaccine distribution planners since about 11 million seniors live in these places. But to deliver the vaccine to 80% of all seniors, planners will have to focus on red shaded areas of the US immediately.



Delivering the COVID-19 vaccine to all those that will be designated as a priority will become one of the most challenging vaccine distribution tasks that public health workforce will likely face. Waiting until the day a vaccine is approved is too late to get started on thinking about the distribution logistics, demographically or otherwise. Probably the best place (area) to live in order to receive a vaccine sooner rather than later is relatively close to a large urban airport with more than adequate capacity to keep a vaccine cold while distribution logistics are addressed.

Having current population demographics readily available 24/7 and an analytical system capable of on-demand, ad-hoc logistical decision making is a must as far as I'm concerned. Get your GIS (geographic information system) people involved now! You will thank me for encouraging to you to make them a critical part of any vaccine distribution planning.

As always, your 2nd opinion is welcomed.