The following FAQs were adapted from questions submitted by VNSNY staff for the Vaccinate VNSNY! Conference Calls hosted by Andria Castellanos on Monday, January 4th.

**Vaccine Availability & Administration**

**By what date will VNSNY begin to vaccinate staff members?**
We received word that we will get our first delivery of Moderna COVID-19 vaccine later this week. Starting today, our scheduling teams will begin to schedule our first vaccinations of VNSNY staff beginning Thursday, January 7th.

**Who are the priority groups to get vaccine first?**
*Please note: Since the call the State has issued new information as follows:*
According to New York State guidelines, all VNSNY field clinicians and Partners in Care home health aides are eligible to receive the vaccine. We will begin by offering the vaccine to field staff with specific work assignments. Then, depending on the quantity of vaccine we receive and our capacity to administer it, we will broaden our vaccination distribution to all field staff as quickly as possible.

Tony Dawson, Vice President of Quality and Customer Experience: So, the first group of staff that we’re going to vaccinate will be those staff who work in skilled nursing or other long-term care facilities as part of their assignments because they’re at higher risk. This is consistent with CDC guidance to prioritize staff working in congregate care settings. So, they’re the first group of staff that we have identified and then as Andria stated, the State has asked us to come up with our priority list. We will also be offering vaccines in the First Phase to Partners in Care and hospice staff who work long-hour assignments in patients’ homes. They’re home health aides who have patients who they take care of for 12 plus hours and so, they’re also at the higher risk.

I work at Sunrise Assisted Living Facility in Staten Island. When will I get the vaccine? So, this person would be prioritized in the first priority group and you should be getting an appointment in the next few days or so to get the vaccine. So, look out for the phone call from the scheduler.

Community mental health staff are seeing clients in mental health residents, shelters, and facilities that are considered long term care facilities to vulnerable clients. Is CMH part of the first priority group? The answer is “Yes”. Community mental health service is part of the first priority group.
I’m a 67-year-old Partners in Care employee. I’m a citizen and am worried about getting the vaccine or want to get the vaccine. Why doesn’t our agency get priority, or why doesn’t our agency give priority, to age and service years apart from other matters? Depending on how much vaccine we get, age may play a role in our next prioritization scheme, and we’ll keep you posted on that. We know that the morality rates are much higher for older people and so that is likely to be one of our considerations should we need to continue to prioritize the vaccine.

And what would be the process for staff to obtain the vaccine? We talked about our prioritization list. The New York State Department of Health and the New York City Bureau of Immunization has requested that we follow a prioritization, and they have recently issued new guidelines advising that all VNSNY field clinicians and Partners in Care home health aides are eligible to receive the vaccine. We will be reaching out by phone to individual staff members to schedule their vaccine shots so please wait for that outreach. When you schedule your first vaccine, we will also schedule you for your second vaccine. The second vaccine will be administered 28 days after the first vaccine, and it will be given up to East 42nd Street. The Department of Health has mandated that both the first and second vaccines be given to people in the same location. We will be sending you electronic reminders about your vaccine schedule so it’s very important that we have correct phone and email information for you.

How many people do you expect to be able to vaccinate a day? So, as I said earlier, this all depends on how much vaccine we get. The City Bureau of Immunization will be giving us the vaccine. And depending on how much vaccine they give us, we have to use that supply within a week. And so, we will flex up or down depending on how much vaccine we get. As you can imagine, this is a very difficult planning exercise because we don’t know exactly how much vaccine we will be getting. Even since this call we are in regular conversations with the City of New York Bureau of Immunization to determine exactly how much vaccine we will get delivered on Thursday this week. And as soon as we get that information, we can better plan.

I read that we will only be able to vaccine 150 people a day. With over 12,000 field staff that seems ridiculously low and will take nine weeks to vaccinate, even with giving that out at 7 days a week. Is there any way to increase those numbers? So, I’m not sure where this person got their information from. So, first of all, we don’t know how much vaccine we will receive and therefore, we really don’t know how many we’ll be able to give a day. And so, one of the things that the State and the City are mandating is that as much as vaccine as we receive, we have to be able to use it within a week and that’s going to be a mandate. We are prepared to administer vaccine starting this Thursday and will flex up (or down) as we see how much we receive and how quickly we can safely follow the City’s protocols and safely vaccinate staff.

So, this is a fluid situation. We’ll flex up as required. Just a note that we have 9,500 active field staff so that number’s not quite as large. So, we will keep you posted and again because we
don’t know how much vaccine we will receive, we’re making some assumptions right now and we’ll flex up or down based upon how much vaccine we actually receive from the State.

From my memory, I think it was stated 150 per day. I am very concerned that some field staff won’t be able to get it until February. It’s frustrating as we are in homes where people aren’t required to wear masks in multiple families in one home. Is there any other outlet for us to get the vaccine? For instance, my colleague in Connecticut was contacted from their Department of Health and given a dosage last week as they had a list of healthcare providers and offered it to them.

So, I think I’ve covered this. When information becomes available about where else our field staff can access the vaccine, we will inform them. And if any field staff has information about where else they have been able to access vaccine in New York, they should let us know so we can make that information available. This is a very fluid situation and things are likely to change quickly in terms of vaccine access, hopefully for the better.

Why has there been such a delay in the rollout of vaccine administering to staff who are in dire need of the vaccine?

Tony Dawson: It seems simple on TV and they show all these people getting vaccinations. But the amount of work and the amount of coordination that has to take place with the City and the State around the rules and regulations of how we do this and how we administer this are actually quite daunting. And we’ve been working almost 24 hours a day, 7 days a week over the last couple of weeks trying to prepare our staff and prepare our site to be able to vaccinate our staff safely.

An example of that is distribution of the vaccine itself. And so, there are millions of doses distributed but then they go to the City and State which have their own mayors and bureaucracy on top of this, which also creates a delay in them coming to us. So, we are working, please be assured that we are working very, very hard to get our vaccines out to our frontline staff as fast as we can. Our efforts have paid off and we now expect to get our first vaccine delivery Thursday.

What location will we utilize in Queens to administer vaccines?

So, at this point, we are going to be administering vaccine in Manhattan. I talked about the reasons why we’re selecting the Manhattan location. The logistics and safety measures around administering the vaccine are quite complex. If we can move into the boroughs once we get the system down, we will let people know and we’ll notify them. But right now, we will be administering vaccine in our Manhattan location.

Vaccine is being made available by the New York City Department of Health starting tomorrow morning.

This person looks like they got an invitation to schedule a vaccine. So, we don’t have good information on this yet. We do believe that the New York City Department of Health is likely to be offering vaccine to prioritize healthcare workers throughout the city. Again, I said that home care field staff will be prioritized officially by the New York State Department of Health later this week. Should other sources of vaccine become available from the New York City Department of
Health or other ways, we will communicate that with you, and we will encourage you to see if you can get appointments through other sources. So, we will continue to keep you informed as we learn more about this.

**Will the vaccine also be offered to VNSNY employees at local CVS pharmacies?**
So, as I said earlier, we don’t have information about vaccine being offered at local CVS pharmacies yet. If it does become available to our employees, we will communicate that information as quickly as possible.

**Are office space nurses for vaccine administration still needed?**
So, the answer is, we are still looking for office space nurses to volunteer to be vaccine administrators. And I will also forward this information, assuming this person might be interested, to our scheduling coordinators.

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**Vaccine Basics & Safety**

Once given both injections when we can travel without quarantine upon arrival in the State, or once returning home?

*Dr. Jay Dobkin, Chief Medical Officer, VNSNY CHOICE Health Plans: I haven’t seen anything yet. I think it’s still a long way from that.*

Andria Castellanos: Thank you. We know everyone is very interested in this question and the answer to this question, though I don’t think any recommendations have been developed yet. We’ll keep you posted when we know.

If you are vaccinated, can you still be a protected asymptomatic carrier of COVID and pass it to someone else?

*Dr. Jay Dobkin: It’s not really known. That’s really has not been defined. We think it’s much less likely that you would be infectious once you’ve been vaccinated. But we don’t know since the clinical trials used symptomatic disease as the end point — everybody in the trials was not being tested for virus.*

If you get vaccinated, should you still assume right now that you could pass the virus on? Is that a best practice?

*Dr. Jay Dobkin: Yes. And, you know, until there’s widespread vaccine uptake and the answers to these questions become clear, the strong recommendation is that we continue to use all of the preventive measures that we’ve been using. Social distancing, masks, hand washing, avoiding crowds, and so forth.*

Would the vaccine cause any problems with any underlying issues that I may have? Such as high blood pressure or diabetes, et cetera?

*Dr. Ritchell Dignam, Chief Medical Officer for Provider Services: I have not seen any article that indicated that the vaccine would exacerbate any underlying issues. Rather there are studies*
showing that if you don’t get the vaccine, getting the disease itself, the COVID-19 illness, puts the patient at risk to have higher morbidity and mortality.

Do you know whether the COVID vaccine will be an annual vaccination like the influenza vaccine?
Dr. Jay Dobkin: Not known yet. You know the studies haven’t been going on long enough. It’s seems very unlikely that it’s going to require annual boosting but that’s part of what’s going to be studied in the near future.