Leveraging Immunization Manager and Community-Based Organization Partnerships for COVID-19 and Beyond

THURSDAY, FEBRUARY 24, 2022 | 4:00PM ET / 1:00PM PT
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Closed Captioning

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Housekeeping

- Use Zoom chat feature for comments/reactions/links
- Click the "Live Transcript" button to enable closed captioning
- Use Zoom Q&A to ask a question

- Poll and survey will be shown at the end of the webinar
- Recording & slides will be shared after the webinar
## Agenda

**Welcome and Introduction**  
Julie Scofield

**Building Partnerships: An Overview of Current Activities and Strategies to Increase State and Community Collaboration**  
Charleigh Granade

**Immunization Program Landscape & Collaboration with CBOs**  
Claire Hannan

**Immunization Manager & CBO Partnership Bright Spots**  
Oregon Health Authority & Living Islands  
Wisconsin DHS

**Audience Q&A**

**Key Takeaways and Closing**  
Julie Scofield

## Speakers

<table>
<thead>
<tr>
<th>Speaker</th>
<th>Role and Organization</th>
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<tbody>
<tr>
<td>Jesper Angelo</td>
<td>CIO &amp; COO, Living Islands</td>
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<tr>
<td>Kianna Angelo</td>
<td>Founder &amp; Executive Director, Living Islands</td>
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<tr>
<td>Charleigh Granade</td>
<td>Public Health Analyst, Immunization Services Division, CDC</td>
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<tr>
<td>Claire Hannan</td>
<td>Executive Director, Association of Immunization Managers</td>
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<tr>
<td>Laura Kochlef</td>
<td>Project Manager, Vaccination Community Outreach Program, Wisconsin DHS</td>
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<tr>
<td>Rob Smith</td>
<td>Deputy Director, Community Driven Vaccine Program, Oregon Health Authority</td>
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Building Partnerships: An Overview of Current Activities and Strategies to Increase State and Community Collaboration

Charleigh Granade, MPH
Immunization Services Division

February 24, 2022
Agenda

- **Provide overview of CDC-funded partnership efforts**
  - COVID-19 Supplements
  - Partnering for Vaccine Equity (P4VE) program

- **Review additional resources to guide partner collaboration**
  - Guide for Developing, Implementing, and Monitoring Community Driven Strategies
  - Guide for Community Partners
  - Best Practices for Community and Faith-based Organizations

- **Propose future strategies to sustaining partnership efforts**
  - Partnership Success Framework
  - Opportunities to connect with state/local immunization programs
Overview of CDC-funded partnership efforts
COVID-19 Vaccine Milestones
by Doses delivered, December, 2020 - January, 2022

- Pfizer Distribution Begins
- Moderna Distribution Begins
- COVID-19 supp. 3
- COVID-19 Addendum
- Federal Retail Pharmacy Program Launched
- J&J/Janssen Distribution Begins
- COVID-19 supp. 4
- Pfizer EUA*: 12-15 years
- Pfizer EUA*: 5-11 years
- Pfizer adult vaccine receives full FDA approval
- Pfizer booster EUA authorized
- Moderna booster EUA authorized
- All adults 18+ eligible for boosters
- All adults 18+

*Expanded Use Authorization
COVID-19 supplemental funding guidance for immunization program awardees

- **COVID-19 Funding**
  - Coronavirus Response and Relief Supplemental Appropriations Act of 2021
  - The American Rescue Plan Act of 2021

- **Supplemental Funding Opportunities**
  - COVID-19 Vaccination Supplemental #3 Funding Guidance
  - COVID-19 Vaccination Supplemental #4 Guidance
  - Addendum to COVID-19 Vaccination Supplement 4
Overview of COVID-19 supplemental activity requirements

**COVID-19 Supp. #3**
- Ensure **equitable distribution and administration** of COVID-19 vaccines
- Increase vaccine confidence through **education, outreach, and partnerships**
- Develop and implement **community engagement strategies** to promote COVID-19 vaccination efforts

**COVID-19 Supp. #4**
- Improve understanding of **disproportionately affected populations** and barriers to vaccination and uptake
- **Develop, cultivate, or strengthen** community-based partnerships
- Improve **access** to COVID-19 vaccines
- Improve and expand **messaging/education** around vaccination
- Strengthen recipient’s coordination on **vaccine equity efforts**

**COVID-19 Supp. #4 Addendum**
- Develop and implement a **vaccine confidence strategy** for COVID-19 and routine immunization
- Use HHS and CDC provided message guidance, resources, and research to implement activities in line with vaccine strategy with focus on “**movable middle**”
Increasing vaccine confidence and uptake: immunization program and community partner collaboration

- **Address mis-/dis-information to increase vaccine confidence and uptake**
  - Convene focus groups and stakeholder meetings on vaccine hesitancy
  - Jointly develop culturally and linguistically appropriate resources and messaging

- **Work with community organizations and other trusted sources**
  - Recruit and train community partners to serve as trusted messengers, peer leaders, and ambassadors
  - Conduct webinars, town halls, and listening sessions; coordinate speakers' bureaus for eligible spokespeople

- **Increase access to vaccination services through community-based organizations (CBOs) and other local partners**
  - Expand coordination with community settings via school partnerships, community events, wrap-around services (e.g., provision of necessities on site), employer-based settings
  - Provide direct support/assistance to CBOs holding individual events such as mobile or pop-up clinics
Who are our other CDC-funded partners?

500+ Total Partners

300+ Local Chapters, Affiliates, and Community-Based Organizations

in 225+ cities and 50 states

Partnering for Vaccine Equity: Partner Network

<table>
<thead>
<tr>
<th>State</th>
<th>City</th>
<th>Organization Type</th>
<th>Level</th>
<th>Additional Priority Population Service</th>
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<tbody>
<tr>
<td>Georgia</td>
<td>Atlanta</td>
<td>Nonprofit (non-medical association)</td>
<td></td>
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<tr>
<td>Kansas</td>
<td>Lawrence</td>
<td>Nonprofit (non-medical association)</td>
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<td></td>
</tr>
<tr>
<td>South Carolina</td>
<td>Columbia</td>
<td>Nonprofit (non-medical association)</td>
<td></td>
<td>To create greater access and opp</td>
</tr>
<tr>
<td>Texas</td>
<td>Dallas</td>
<td>Nonprofit (non-medical association)</td>
<td></td>
<td>AP, Inc.'s mission is to provide sexual men, cisgender women,</td>
</tr>
<tr>
<td>New York</td>
<td>Bronx</td>
<td>Federally Qualified Health Center (FQHC)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Last Updated
2/11/22

 CDC

Partnering for Vaccine Equity: Partner Network Interactive Map | CDC
Resources to guide partner collaboration
Using a community driven approach to reduce vaccination disparities

This guidance provides a community-driven approach to identifying partners as well as increasing vaccine confidence and uptake using five steps

1. Use data to identify and prioritize communities of focus
2. Identify relevant government officials and community partners
3. Understand barriers in community and create an implementation plan
4. Help community partner networks implement plans
5. Conduct continuous program evaluation

Guide-For-Awardees-for-Community-Driven-Strategies.pdf
Complementary resources for community partners

- **CDC A Guide for Community Partners-Increasing COVID-19 Vaccine Uptake Among Racial and Ethnic Minority Communities**
  - Includes potential strategies, interventions, and ready-made messages and materials
  - Provides information on who and how to connect with others on efforts to increase COVID-19 vaccination confidence and access in communities

- **COVID-19 Vaccine Equity: Best Practices for Community and Faith Based Organizations Fact Sheet**
  - Communication materials and messaging
  - Outreach and use of trusted messengers
  - Vaccine Access (e.g., sites, training/scheduling, transportation, etc.)
Looking ahead: sustaining partner networks

**Partnership Success Framework (in-development)**

- Resource to assist immunization programs in establishing or maintaining partner networks focused on immunization
  - **Building** and sustaining partnership networks
  - **Expanding** operational capacity of immunization programs
  - **Developing** evaluation and monitoring processes for tracking impact

**Developing opportunities to connect immunization programs with CDC funded partners operating in their jurisdictions**

- National partners (e.g., Association of Immunization Managers, National Association of City and County Health Officials, National Association of Community Health Centers)
- State and local level sub-recipients
Claire Hannan
Executive Director
Association of Immunization Managers
Immunization Program Landscape & Collaboration with CBOs

Claire Hannan, MPH
Association of Immunization Managers
Executive Director
About AIM

• The **Association of Immunization Managers (AIM)** represents the 64 immunization programs that receive funding from CDC’s National Center for Immunization and Respiratory Diseases (NCIRD)
• 50 states, 6 major cities, 8 territories/federated states

• AIM works to:
  • Collaborate with partners
  • Promote efficient allocation of resources
  • Promote development/implementation of policies and programs
  • Provide a forum for information sharing and leadership development
Immunization Program Basics

Routine Activities

• Vaccines for Children Program  
  • Enrolling private providers  
  • Managing vaccine inventory  
• Outbreak control  
• Strategies to increase coverage rates  
• Data collection and analysis  
• Immunization education, promotion, communication  
• COVID vaccine program
New Program Managers 2019-2022

Thirty-three (53%) jurisdictions experienced turnover
Twenty-six (41%) jurisdictions experienced turnover during the COVID-19 pandemic (3/2020 – 2/2022)

LEGEND

New Program Manager
Interim Program Manager
No changes, 2019-2022

Version 2/3/22
Federal Immunization Funding

Figure 1. CDC Discretionary Immunization Funding
FY2011 through FY2019

*Reflects FY 2014 Consolidated Appropriation Act appropriation for Immunization.
**FY 2014 Omnibus establishes an Immunization line and eliminates the Section 317 and Program Implementation and Accountability sublines; activities in the former sublines are expected to continue.
COVID Vaccine Rollout

- Goal: Vaccinate all adults with two doses of COVID vaccine
- Enroll providers; build nationally connected data system
- Limited supply; complicated storage and handling
- Focus on efficiency led to concern for equity
- Challenges: vaccine hesitancy, boosters, children’s vax, data quality
## Current Funding Streams

<table>
<thead>
<tr>
<th>Award</th>
<th>Funding Source (Law)</th>
<th>NOA Issued</th>
<th>Period of Availability</th>
<th>Total Amount</th>
<th>Due Dates (Budget and Workplan)</th>
<th>Guidance/Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Core/Base BY2</td>
<td>Section 317</td>
<td></td>
<td>July 1 2020 – June 30 2021</td>
<td>$614 million</td>
<td></td>
<td>IPOM</td>
</tr>
<tr>
<td>Supplemental Flu Funding</td>
<td>CARES Act</td>
<td>July 2020</td>
<td>June 1 2020 – June 30, 2024</td>
<td>$140 million</td>
<td>July 6 2020</td>
<td></td>
</tr>
<tr>
<td>COVID Supplemental</td>
<td>CARES Act</td>
<td>Dec 16 2020</td>
<td>July 1 2020 – June 30 2024</td>
<td>$140 million</td>
<td></td>
<td>Meet requirements in CDC Interim Playbook for Jurisdictions</td>
</tr>
<tr>
<td>COVID Supplemental Cycle 3</td>
<td>Coronavirus Response and Relief Act (Stimulus)</td>
<td>Jan 18 2021</td>
<td>July 1 2020 – June 30 2024</td>
<td>$3 billion</td>
<td>March 1 2021</td>
<td>Seven required activities, #7 “Use IIS to support efficient COVID-19 vaccination&quot;</td>
</tr>
<tr>
<td>COVID Supplemental Cycle 3 adjustment (39 awardees)</td>
<td>Coronavirus Response and Relief Act (Stimulus)</td>
<td>April 1 2021</td>
<td>July 1 2020 – June 30 2024</td>
<td>$329 million</td>
<td>May 28 2021</td>
<td>Same as above</td>
</tr>
<tr>
<td>Core/Base BY3</td>
<td>Section 317</td>
<td>Late June 2021</td>
<td>July 1 2021 – June 20 2022</td>
<td>$614 million</td>
<td>May 7 2021 June 7 2021</td>
<td>IPOM</td>
</tr>
<tr>
<td>COVID Supplemental Cycle 4</td>
<td>American Rescue Act</td>
<td>April 1 2021</td>
<td>July 1 2020 – June 30 2024</td>
<td>$3.15 billion</td>
<td>May 31 2021</td>
<td>60% must support LHDs or CBOs 75% must be directed to improve health equity</td>
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</table>

- **IPOM**: Indicates funding source and availability.
- **CARES Act**: CARES Act funding.
- **COVID-19 Vaccination Supplemental Funding (cdc.gov)**: CDC guidelines for jurisdictions.

Note: Due dates and requirements vary by funding cycle and source.
COVID Supplemental 4

• Over $3 billion to IZ programs
• July 2020 thru June 2024
• 60% must be awarded to LHDs or CBOs
• 75% must be spent on improving equity
• Required activities involve using data, increasing vaccine uptake and access, improving vaccine equity, addressing COVID-19 health outcomes in rural/hard to reach communities
AIM, Health Equity, and CBOs

- AIM is committed to improving equity in vaccination
- AIM’s Member Assistance Program (MAP) supports immunization programs achieve success working with CBOs to improve equity
- Vaccine confidence depends on community engagement
- COVID vaccination provides opportunity to expand and engage partnerships
Future Considerations ....

Programmatic emphasis on data and equity
Incorporation of COVID into routine activities
Active legislative environment
Expansion of adult infrastructure thru COVID
Vaccine confidence and trust ongoing concern

Partnerships, CBOs CRITICAL To IZ Success
Working with IZ Programs

- Build relationship with state/local IZ program; participate in IZ activities
- Clearly articulate population and geographic location represented
- Demonstrate capacity to serve
- Meet reporting and data requirements

- IZ program manager list at www.immunizationmanagers.org
- Resources: AIM CBO and Faith Leader handouts
Thank you!
OHA’s Acknowledgement to Community

We acknowledge there are institutional, systemic and structural barriers that perpetuate inequity that have silenced the voices of communities over time.

We recognize community-engaged health improvement is a long-term and adapting process.

We are striving to engage with communities through deliberate, structured, emerging and best practice processes.
VOTE Overview

VOTE collaborates locally to co-create vaccine solutions with Oregon communities disproportionately impacted by COVID.

Provide $300,000 to Community Based Organizations (CBOs) to support vaccination opportunities and promotion in their community.

VOTE is currently working with 176 partners, with 125 vaccine events in planning stages and 677 events complete. We purposely try to partner with “non-traditional CBOs”.

Provide “matchmaking” of CBOs for events and support partnership among community leaders. We also magnify existing efforts.

Vaccine Engagement Coordinators (VECs) work in concert with existing regional OHA staff to ensure CBOs have a successful event.
VOTE scope of activities with CBOs

COVID-19 Vaccine Response
Helping Your Community

How to Get Involved?

- **Host an Event**: Host or co-host a vaccination event(s) in which you collaborate with a vaccine provider to give the vaccine to your community.
- **Provide Staff or Volunteers**: Provide staff or volunteers to support an existing vaccination event(s).
- **Promote a Vaccination Event or Effort**: Promote a vaccination event(s) or effort through outreach to the community or communities you serve.
- **Provide Transportation or Registration Support**: Help community members attend a vaccination event(s) through registration or transportation support.
Resources available to CBOs

- Funding for past and/or future vaccine events, even those independent of VOTE
- Food boxes, accessibility kits, interpretation, COVID testing
- Canvassing/ marketing/ communications and “Get Vaccinated Oregon” tool to promote events (as appropriate)
- Wraparound services supported by other OHA teams
Matchmaking

- Local public health authority (LPHA) notification
- Vaccinator needed or Vaccine “confidence” event
- Event space available and accessible
- Specific language or cultural needs
- Other state agencies in partnership with CBO
- Other resources needed (SNAP, Medicaid)
Event Execution

- Ensure events are advertised widely (if appropriate)
- Support any needs the partner may have, leading up to event execution
- Help the partner evaluate their event’s success
- Using lessons learned, prepare for any additional events with that partner
- Support the partner in executing additional events
Working Together

Living Islands and Oregon Health Authority

Web: livingislands.org
E-mail: kianna@livingislands.org
Pacific Islander
nations we
serve

Mission Statement at: https://livingislands.org/about/
Pandemic changed our focus

- Overnight almost all our projects stopped
- Our scope was too narrow - we now supported all Pacific Islander communities
- Focus exclusively on Covid-19
- Sought support from private enterprise, local cities, counties, and the state
- Reset, rethink, and reorganize our organization and work
- Listen to our community’s new needs
Culturally specific food drives

- Our community had access to emergency food and resources

- Through sharing and storytelling at the COVID-19 test sites, we learned our community didn’t have access to cultural foods

- We wanted to provide hope

- Food “from home”

- VOTE funding sent a message that OHA cared

- Been replicated in other Pacific Islander CBO events since
Rethinking food for vaccine events

By bringing in culturally specific foods and resources to vaccine events we increased engagement from the community!

- August 28, 2021
  - Served around 1400 people
  - Food boxes, resources, and vaccine education

- November 23, 2021
  - 300 people vaccinated/ given boosters, 400 food boxes given out

- A total of 2,000 people have been vaccinated at 5 events
Re-thinking messaging

- Language Barrier - 14 Languages
- Responsible media and data
- Culturally specific Covid-19 PSAs
- Live-streamed community events
- Embedded Covid-19 messaging from trusted community leaders
- Story telling BY Pacific Islanders FOR Pacific Islanders

Watch our community-driven media: http://linp.org/video
Moving forward

- Understand your community’s cultural background
- Trust your CBOs
- Listen to the community needs and wants
- Needs change constantly - adjust the way you help your community
- Surveys for BIPOC communities should include a DEI lens
- Workshops for emergency preparedness
It takes a village

- Oregon Health Authority / VOTE
- Oregon Community Foundation
- Oregon Food Bank
- Micronesian Islander Community
- COFA Alliance National Network
- Le`o `o e `OFA
- Oregon Marshallese Community
- Ka`Aha Lāhui o`Olekona Hawaiian Civic Club
- Oregon Marshallese Community Association
- Rengelkel Belau
- Samoan Pacific Development Corporation
- Tongan American Resource Committee
- Utopia PDX

- ASHA Hope Amanaki
- Oregon Pacific Islander Coalition
- Village Church Beaverton
- Washington, Multnomah, Marion, and Clackamas Counties
- Food Access & Essential Needs Network
- City of Salem, City of Lake Oswego, City of Tigard, City of Beaverton
- Pacific Islanders of Intel
- NIKE Ascend
- United Way PDX
- Kaiser Foundation

Thank you to Oregon Health Authority for listening to the needs of our pacific islander communities, and to all our community partners...

Our Village!
Laura Kochlefl
Project Manager - Vaccination Community Outreach Program
Wisconsin DHS
Wisconsin Department of Health Services
Vaccination Community Outreach Grant Program

Stephanie Schauer, *Immunization Section Chief, Bureau of Communicable Diseases*
Laura Kochlefl, *Project Manager, COVID-19 Response and Recovery Team*

2/24/2022
Agenda

• Program Overview
• Populations Served
• Activities Conducted
• Success Stories
• Challenges and Barriers
• Lessons Learned
Immunization Grant Funding

- CDC COVID-19 Supplemental Funds
- Wisconsin Department of Health Services
- Bureau of Communicable Diseases
- COVID-19 Response and Recovery Team
- Vaccination Community Outreach Grant Program
Vaccination Community Outreach Grant

Vaccination Community Outreach Grant designed to support marginalized and medically underserved populations across the state and to address:

- Inequities in COVID-19 vaccine access
- Limited access to COVID-19 resources
- Low vaccine confidence
Timeline

February 2021
First RFA Opened

April 2021
Start of Grant Period

October 2021
End of first Grant Period

Wisconsin Dept. of Health Services COVID-19 Response and Recovery Team
Timeline

February 2021
First RFA Opened

April 2021
Start of Grant Period

October 2021
End of first Grant Period
Second RFA opened

December 2021
Start for December Cohort

November 2021
Start of Round 2 for November Cohort

February 2022
Start for February Cohort
Funded Projects

First Round April, 2021–October, 2021
6.3M to 101 Community level organizations

Second Round November, 2021–October, 2022
11.6M to 135 Community level organizations
About 64% returning partners, 36% new partners

Funded organizations include:
• Federally Qualified Health Centers (FQHCs)
• School districts
• Local/tribal health departments
• Community-based organizations
Populations Served

Populations Served include:

• African American and Black populations
• American Indian/Alaskan Native populations
• Elderly and Homebound
• Farm workers and rural populations
• Frontline or Supply Chain Workers
• Hmong population
• Houseless and Housing Insecure
• Immigrants and Refugees
• Individuals with Disabilities
• Latinx and Hispanic

• Low Income
• Migrant Workers
• Youth
• LGBTQ+
• Low Literacy
• Rural Populations
Activities Completed

Activities Supported from April-October 2021

- **Over 4K** Vaccination Events
  - Over 131K vaccinations administered
- **Over 24K** education events
- **Nearly 3T** paid and social media ads
- Estimated trillions of impressions
“Our goal was for 5,000 households to be reached through door-to-door canvassing, and we exceeded that goal with over 8,000+ households reached over a 7-week period.”

Sherman Park Community Association

“We were able to help vaccinate over 400 Hmong and Southeast Asian elders and adults. Individuals shared with us that if it was not for our mobile vaccine clinics, they would not have been able to get vaccinated because they lacked the computer skills to register online...[and] due to language barriers”

The Hmong Institute
Challenges and Barriers

Trends in challenges and barriers to project implementation and success

- Vaccine Hesitancy
- Qualified Staffing Support
- Limited Funding Timeline and Adapting Strategies
- Lack of Communication and Coordination Between Local Organizations and Community Partners
- Lack of Adaptable and Culturally Resonating Messages
- Lack of Access to Vaccines and Steady Access to Vaccination Sites
- Incentive Limitations
Challenges and Barriers

Trends in Misinformation

- Limited Scientific Understanding of COVID and Vaccines
- Perception that Vaccine Development was "Rushed"
- Concerns About Long-term side Effects
- Lack of Trust in the Government and Health Systems
- Lack of Access to Information on Vaccines or Vaccination Resources

Number of Projects with Reference

Wisconsin Dept. of Health Services COVID-19 Response and Recovery Team
Challenges and Barriers

Trends in community vaccine access barriers

- Lack of Transportation and Mobility
- Lack of Interest and Vaccine Hesitancy
- Difficulties Navigating the Vaccination Process
- Lack of Vaccination Sites in Relevant Spaces
- Mistrust of Vaccines and Health Systems due to Past Racism

Number of Projects with Reference

0 5 10 15 20 25

Wisconsin Dept. of Health Services COVID-19 Response and Recovery Team
Utilize and Build Trusted Relationships

“the trust that exists in pre-existing relationships between OASD liaisons and family members helped families feel more comfortable about the vaccine.”

Oshkosh Area School District

“Focus more on one-on-one outreach activities in communities with low vaccination rates. Empower community members to share their own experiences when they get vaccinated to dispel myths and misconceptions. Personal experience was the most requested and effective way to share vaccine information.”

Wisconsin Literacy Inc.
Go Into the Community

“go where the people are--never assume that they will come to you. Utilizing strategies that build on trusted relationships are critical and will create ongoing opportunities to not only address vaccination but other issues that arise in the community in an equitable and sustainable approach.”

Partnership Community Health Center

“The door-to-door mobile missions were effective in helping us build greater trust with our most underserved communities, empowering community leaders to work with us as partners ...we noticed that we were becoming a popular presence in the community.”

Kenosha County Public Health
Effective Strategies

Trends in effective strategies

- Bilingual Staff and Culturally Responsive Forms of Communication
- Partnerships with Local Organizations and In-House Vaccination Clinics
- Leverage Trusted Messengers and Participate in Community Events
- One-on-One Conversations with Trusted Individuals and Advertisements

Number of Projects Referenced

Wisconsin Dept. of Health Services COVID-19 Response and Recovery Team
Advice for Community Based Organizations

Forming Partnerships with Public Health

1. Form partnerships strategically
2. Reach out
   • Call or email the main number
   • Call or email a specific department
     • Health Equity
     • Stakeholder Engagement
     • Emergency Response
   • Ask a community partner for an introduction
Acknowledgements

Wisconsin Department of Health Services Leadership
Melanie Schmidt, *COVID-19 Response & Recovery Team Director*
Stephanie Schauer, Ph.D., *Immunization Section Chief, Bureau of Communicable Diseases*
Diamond D. Hanson, DrPH, MPH, *Outreach Program Manager, COVID-19 Response & Recovery Team*

Vaccination Community Outreach Grant Team

**Current**
- Jessica Driver
- Mariel Torres Ramirez
- Sowmya Adibhatla
- Brie Godin

**Original**
- Karen Odegaard
- Jill Groblewski
- Janet Kazmierczak
- Joseph Larson
- Margarita Northrop
- W. Curtis Marshall

Data Analysts
Cassandra Sanford & Rashmitha Edem
Thank You

• Today’s slides and a recording of this webinar will be posted online; a link will be provided

• Please take the brief evaluation poll that will appear on your screen shortly

• Let us know your feedback and thoughts for future webinar topics in the post-webinar survey

• Thank you for your time and participation!