

# Immunizations: Myths, Fears & Truths

## Welcome!

- All lines are muted, so please ask your questions in Q&A
- For technical issues, chat to the 'Technical Support' Panelist
- Please actively participate in polling questions that will pop up on the lower righthand side of your screen

## We will get started shortly!



**Quality Improvement  
Organizations**

Sharing Knowledge. Improving Health Care.  
CENTERS FOR MEDICARE & MEDICAID SERVICES



The Quality Improvement Services Group of  
ALLIANT HEALTH SOLUTIONS

As you know, COVID-19 information is constantly changing.

Please note this information is what was available as of **1/13/2021**.

Please check <https://www.cdc.gov/> for the most up-to-date information.

# Libby Massiah, MPA

## AIM LEAD, CHRONIC DISEASE

Libby earned her BS in Therapeutic Recreation and Master's in Public Administration. She has worked in mental health and long-term care for a number of years prior to starting her career in public health.

She served as an Immunization Program Consultant for the Georgia Immunization Office for 11 years, working in the field with health care providers through education; VFC quality assurance activities and training on the Georgia immunization information system (GRITS.)

She joined Alliant Quality as the Immunization Task Lead in 2015 and began intensive Quality Improvement work, focusing on improving care for Medicare beneficiaries. In this role, she has lead the effort to improve the immunization rates for seniors in Georgia. Her role was expanded to include the initiative for cardiac improvement (Million Hearts) in Georgia and North Carolina. She is a LEAN/Six Sigma green belt and has completed Leadership in Organizing and Action courses.

**Libby enjoys sharing in her grandchildren's activities and spending time with her children. She and her children enjoy completing escape rooms. She enjoys renovating homes; reading; playing pool and poker, developing smart home systems; volunteering; working on her property and taking day trips.**

**Contact:**

**[Elizabeth.Massiah@AlliantQuality.org](mailto:Elizabeth.Massiah@AlliantQuality.org)**



# Tanya Vadala, Pharm.D.

## MEDICATION SAFETY PHARMACIST, IPRO

Tanya is an IPRO pharmacist with 17 years of clinical pharmacy, community pharmacy, academia, quality improvement and medication safety experience. Prior to joining IPRO, she worked at various community pharmacies and taught at Albany College of Pharmacy and Health Sciences in Albany, NY. She specializes in Medication Therapy Management (MTM), medication reconciliation, opioids, immunizations, and patient self-care. Her formal teaching experience includes courses in pharmacy practice and clinical experiential teaching.



**Contact:**

**[TVadala@ipro.org](mailto:TVadala@ipro.org)**

# Objectives

- Learn Today:
  - Some common, historical immunization myths.
  - Opportunities for improving acceptance.
- Use Tomorrow:
  - Facts to use to educate and encourage immunization acceptance.
  - Information about the COVID-19 vaccine to help staff and patients understand and be less fearful of the vaccine.

# Acceptance Levels

There are varying levels of vaccine acceptance

1. Those who seek out immunizations
2. Those who easily accept recommendations.
3. Those who are uncertain or “on the fence” but will be vaccinated with a firm recommendation and opportunity to be vaccinated by a trusted provider.
4. Those who are hesitant but will, eventually be immunized. Sometimes pushing too hard, pushes them to refusal.
5. Those who refuse.
6. Those who refuse and object. Loudly. (Anti-vaxxers)



# Myths, Fears and Truths

- Distrust and fear of vaccines is not new. Our ability to communicate without censor, or any rhyme or reason (various forms of social media) and professionals being limited to facts and debate without the same high emotion as those who highly oppose them has allowed myths about vaccines to increase in intensity over the past decade or so.
- Various individuals have developed resistance and, in some cases, fanatical belief that immunizations are dangerous; tracking methods for governments; a breach of religious beliefs and will certainly do harm to children.
- Some have gone past personal belief and individual decision making to encouraging others to follow their decision and path.
- Science does not support these claims or beliefs. However, many do not understand the science of vaccines.
- Scientist and immunization supporters have been ridiculed and threatened.
- A group of “anti-vaxxers” filibustered an ACIP meeting last year, resulting in new rules as to participation and being heard during the ACIP meetings.
- *Not everyone who is concerned or hesitant is a zealot. About 50-60% of people simply want to know more,* in a language they understand and in recognition of their concerns in all of the mixed and varied messages that are out there.

# Myths, Fears and Truths



Myths include:

- Vaccines cause Alzheimer's.
- My doctor makes a lot of money on vaccines and that is why they push.
- Getting the disease protects you better.
- Vaccines are a part of governmental control (microchipping). Why else would they pay me to take the vaccine?
- Vaccines are just another way that BigPharm makes money on us.
- Vaccines will make you sick and contain toxic chemicals.
- We no longer have vaccine preventable diseases in the united states.
- If everyone else gets the vaccine, I won't have to.

# Myths, Fears and Truths

Each individual's acceptance level and fear may be different from the next. Most are based in some of the myths.

Sometimes, the most well-meaning things health professionals do are interpreted as suspicious (VAERS, gift cards for being vaccinated, insistence on immunizing.)

- No one wants to be stabbed with a pointed metal object.
- We don't trust what we don't understand. We do trust Google.
- The recent hypermedia attention to one vaccine made normal things seem exceptional (like the allergy statement that is in every single vaccine information sheet.)



# Myths, Fears and Truths

- How and what we communicate is key to helping people understand immunizations.
- Adding to data overload is not always helpful and, sometimes makes people wonder why we are so insistent on making our points.
- We have to be willing to hear and acknowledge concerns.

# Myths, Fears and Truths

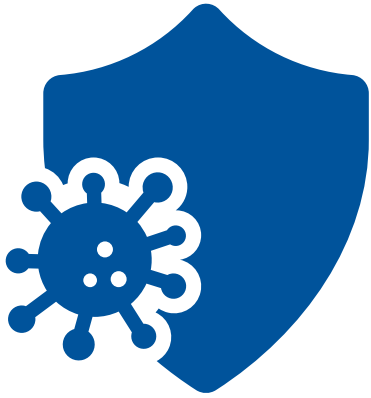
- **My doctor makes a lot of money on vaccines and that is why they push.**
  - *I know it feels that way. But, you trust your doctor to help you take care of your health. They don't really make a lot of money on vaccines, just a few dollars. BUT they do have expectations from their bosses to help keep you well. They push for vaccines because they know they can help protect you. Your insurance company will pay you \$10 to take the vaccine because they know that you getting sick will cost them thousands- especially if you have hypertension or diabetes or have had a heart attack.*
- **Vaccines are just a way that BigPharm makes money on us.**
  - *Yes they do. BigPharm does want to make money, who doesn't? The thing about it though is that they have to front the millions it cost to research, develop, test and get through the government approval. And then what if it isn't approved- they are busted for millions.*
- **Vaccines cause Alzheimer's.**
  - *I've heard that. Where did you see something about it? All I've seen is that flu and pneumonia vaccines are really important for people with Alzheimer's because they forget to take precautions against getting sick.*
- **Getting the disease protects you better.**
  - *I get why you think that. The thing is, vaccine really is kind of like getting a little version of the disease so your body can learn to protect you without all of the bad stuff that comes along with the disease. Immunity is like a fence. You don't have to have the cows trample the yard- just build the fence before you put them in that pasture.*
- **Vaccines are a part of governmental control (microchipping). (this is a favorite).**
  - *Oh. I didn't know that. I worked for the government in immunizations for years and was not given that memo. Really though, many vaccines come in multidose vials (like insulin) a lot of the time. There is no way that a nurse in a clinic would be able to assure that the microchip could be pulled up properly. Have you seen our government? I feel pretty safe in the knowledge that all of those different people and departments and groups and such could never organize a conspiracy that would actually work.*

# Myths, Fears and Truths

- **Vaccines will make you sick and contain toxic chemicals.**
  - *Some people think that. I guess the way I think about it is that vaccines make our bodies react. Diseases make us sick. If my body reacts a bit to a vaccine, I'm good with that. It's a trade off- a little discomfort is a trade off for hospitals, ventilators, long term disability or death. As to toxic chemicals, they do contain chemicals in tiny, tiny amounts. So do most of the foods we eat and products we use. You are 1,000X more likely to get hit by lightning than getting sick from a vaccine. But, if you get a disease and pass it off to your child or elderly parent, it could make them very sick.*
- **Vaccines will overload your immunity system.**
  - *It seems like they should, huh? But, if you think about it, our immunity system is hit by all kinds of things every day and we don't know about it or think about it. Our bodies are built to learn to protect us against all kinds of germs and such that is in the air, on the ground and on surfaces we touch.*
- **We no longer have vaccine preventable diseases in the United States.**
  - *Life has certainly gotten better and vaccines have really helped with that. My mom died from hospital acquired pneumonia. It is now vaccine preventable. She used to tell me stories about diseases that people would get and families would be destroyed. I've seen pictures of people in warehouses full of iron lungs. We still have cases of communicable disease, like flu and measles and pneumonia that can be prevented by vaccines.*
- **If everyone else gets the vaccine, I won't have to.**
  - *That is how herd immunity works, sort of. But not everyone can get vaccinated and vaccines are not 100%. Those of us who can, should be vaccinated to protect those who can't. Think of rabies. Vaccinating our pets does protect them, but more importantly it protects their humans.*

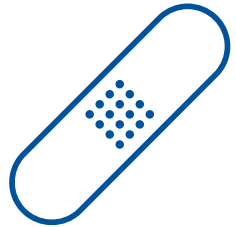
# Myths, Fears and Truths

- **Vaccines will make you sick and contain toxic chemicals.**
  - *Some people think that. I guess the way I think about it is that vaccines make our bodies react. Diseases make us sick. If my body reacts a bit to a vaccine, I'm good with that. It's a trade off- a little discomfort is a trade off for hospitals, ventilators, long term disability or death. As to toxic chemicals, they do contain chemicals in tiny, tiny amounts. So do most of the foods we eat and products we use. You are 1,000X more likely to get hit by lightning than getting sick from a vaccine. But, if you get a disease and pass it off to your child or elderly parent, it could make them very sick.*
- **Vaccines will overload your immunity system.**
  - *It seems like they should, huh? But, if you think about it, our immunity system is hit by all kinds of things every day and we don't know about it or think about it. Our bodies are built to learn to protect us against all kinds of germs and such that is in the air, on the ground and on surfaces we touch.*
- **We no longer have vaccine preventable diseases in the United States.**
  - *Life has certainly gotten better and vaccines have really helped with that. My mom died from hospital acquired pneumonia. It is now vaccine preventable. She used to tell me stories about diseases that people would get and families would be destroyed. I've seen pictures of people in warehouses full of iron lungs. We still have cases of communicable disease, like flu and measles and pneumonia that can be prevented by vaccines.*
- **If everyone else gets the vaccine, I won't have to.**
  - *That is how herd immunity works, sort of. But not everyone can get vaccinated and vaccines are not 100%. Those of us who can, should be vaccinated to protect those who can't. Think of rabies. Vaccinating our pets does protect. them, but more importantly, it protects their humans.*



# COVID-19 Vaccines

Currently, only two vaccines are  
approved by the US under Emergency  
Use Authorization





# Two Vaccines

## Pfizer

- Ultra cold freezer storage
- Two doses required
- 2<sup>nd</sup> dose is three (3) weeks after 1<sup>st</sup>
- IM injection

## Moderna

- Freezer storage
- Two doses required
- 2<sup>nd</sup> dose is four (4) weeks after 1<sup>st</sup>
- IM injection



You **MUST** receive **BOTH** doses for the full effect of the vaccines

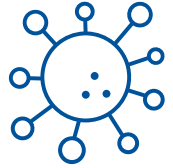
First and second doses must be from the same manufacturer

# mRNA vaccine

- Contains **NO** virus material
- Tells cells to replicate the spike protein on the COVID virus – just the spike **NOT** the virus
- Body recognizes the spike as a foreign body and begins building an attack against it
  - This attack includes creating antibodies
- The mRNA vaccine does **NOT** alter your DNA



# Safety



- FDA has granted emergency use authorization for both Pfizer and Moderna vaccines
- Safety has been shown in Phase 3 studies and by the millions of doses already administered to healthcare workers worldwide (approved in other countries as well!!)
- The vaccine will **NOT** give you COVID

# Who should get the vaccine?

- Everyone eligible
  - Vaccination of children is NOT approved at this time
- Most states have a rollout system with stages of when certain groups can be vaccinated
- Check with your local or state health department to find out when you can be vaccinated and how to sign up
- The federal government has set up specific clinics for nursing home staff and residents to be vaccinated

# Who Should **NOT** Be Vaccinated

- Allergy to any ingredient of the vaccine
- Allergy to PEG (polyethylene glycol)
- Allergy to polysorbate
- Anaphylaxis to the first dose of COVID vaccine
  - Do NOT receive second dose
- An immediate allergic reaction (non-severe allergic reaction within 4 hours of the vaccine such as hives, swelling, or wheezing) to the first dose
  - Do NOT receive second dose

# Vaccine Concerns

- Will the vaccine give me COVID?
  - No
- What are the side effects of the vaccine?
  - Pain at injection site, flu like symptoms
- Was the development of the vaccine rushed?
  - No, mRNA vaccines take less time to make
- How much does it cost to get the vaccine?
  - It is FREE



# Beneficiary Story



# References

<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

# Contact Information:

Tanya Vadala, Pharm.D.  
Medication Safety Pharmacist, IPRO  
[TVadala@ipro.org](mailto:TVadala@ipro.org)



Libby Massiah, MPA  
Aim Lead, Chronic Disease  
[Elizabeth.Massiah@AlliantQuality.org](mailto:Elizabeth.Massiah@AlliantQuality.org)

# Objectives Check In!



- Learn Today:
  - Some common, historical immunization myths.
  - Opportunities for improving acceptance.
- Use Tomorrow:
  - Facts to use to educate and encourage immunization acceptance.
  - Information about the COVID-19 vaccine to help staff and patients understand and be less fearful of the vaccine.

**How will this change what you do? Please tell us in the poll...**



## Closing Survey

***Help Us Help You!***



- Please turn your attention to the poll that has popped up in your lower right-hand side of your screen
- Completion of this survey will help us steer our topics to better cater to your needs

# CMS 12<sup>th</sup> SOW Goals



## **Behavioral Health Outcomes & Opioid Misuse**

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services



## **Patient Safety**

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce C. diff in all settings



## **Chronic Disease Self-Management**

- ✓ Increase performance on ABCS clinical quality measures (i.e., aspirin use, blood pressure control, cholesterol management, cardiac rehab)
- ✓ Identify patients at high-risk for developing kidney disease & improve outcomes
- ✓ Identify patients at high risk for diabetes-related complications & improve outcomes



## **Quality of Care Transitions**

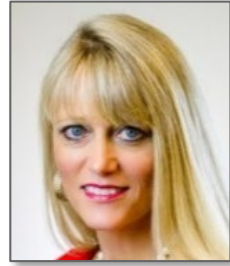
- ✓ Convene community coalitions
- ✓ Identify and promote optimal care for super utilizers
- ✓ Reduce community-based adverse drug events



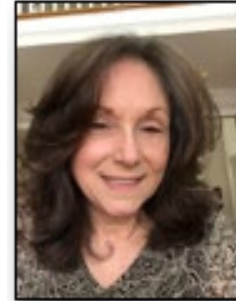
## **Nursing Home Quality**

- ✓ Improve the mean total quality score
- ✓ Develop national baselines for healthcare related infections in nursing homes
- ✓ Reduce emergency department visits and readmissions of short stay residents

## Making Health Care Better *Together*

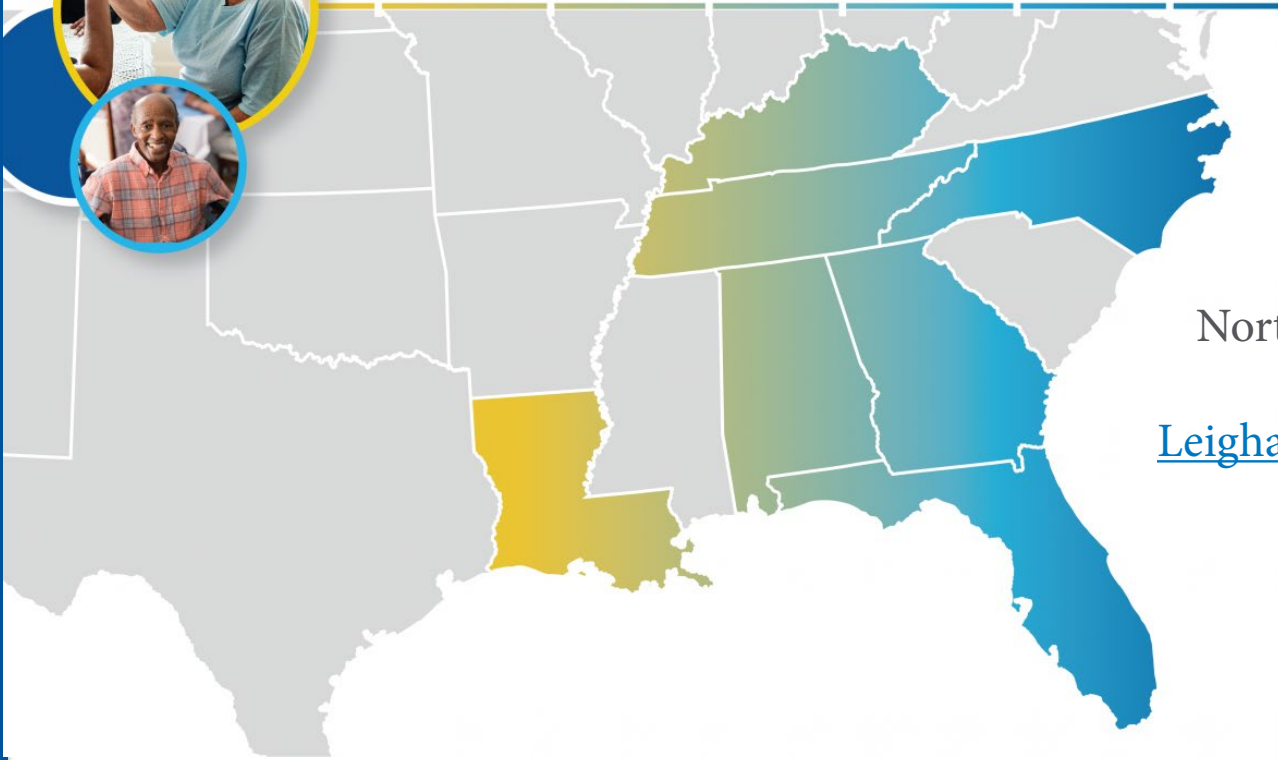


Georgia, Kentucky,  
North Carolina and Tennessee  
Leighann Sauls  
[Leighann.Sauls@AlliantHealth.org](mailto:Leighann.Sauls@AlliantHealth.org)



Alabama, Florida and Louisiana  
Jeana Partington  
[Jeana.Partington@AlliantHealth.org](mailto:Jeana.Partington@AlliantHealth.org)

## Program Directors



# Upcoming Events



## Learning and Action Webinars

---

### Nursing Homes

Tuesdays, 2pm ET/1pm CT

### Community Coalitions

Thursdays, 12:30 pm ET/11:30am CT

March 16, 2021: What is an Adverse Drug Event (ADE)? Let's look a little deeper

March 25, 2021: Data Deeper Dive: One Coalition's Experience Using Data to Reduce Readmissions

April 20, 2021: TBD

April 22, 2021: UAB Ticket To Ride: COVID & Vaccine Communication Across Care Continuum

# Making Health Care Better *Together*

ALABAMA • FLORIDA • GEORGIA • KENTUCKY • LOUISIANA • NORTH CAROLINA • TENNESSEE



@AlliantQualityOrg



Alliant Quality



@AlliantQuality



Alliant Quality

This material was prepared by Alliant Quality, the quality improvement group of Alliant Health Solutions (AHS), the Medicare Quality Innovation Network - Quality Improvement Organization for Alabama, Florida, Georgia, Kentucky, Louisiana, North Carolina, and Tennessee, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication No. 12SOW-AHSQIN-QIO-TO1NH-21-483



**Quality Improvement  
Organizations**

Sharing Knowledge. Improving Health Care.  
CENTERS FOR MEDICARE & MEDICAID SERVICES

 **ALLIANT  
QUALITY**

The Quality Improvement Services Group of  
ALLIANT HEALTH SOLUTIONS