

## **Episode 7 – Covid-19 Vaccine Rollout: A conversation with NC DHHS Sec. Mandy Cohen**

**Intro music: 0:00**

### **Podcast Introduction: 0:09**

Hello and thank you for joining me for this episode of MedBoard Matters. I'm your host, Jean Fisher Brinkley, Communications Director for the North Carolina Medical Board.

Our nation marked a somber milestone in February, passing 500,000 deaths from Covid-19. Since the first recorded death from Covid in February 2020, the illness has claimed the lives of 1 in every 658 Americans.

And yet, in many ways, it's a hopeful time for our country and for North Carolina.

Covid-19 vaccination is underway and gaining momentum.

In North Carolina the rate of new infections is finally flattening. And hospitalizations in the state are at their lowest levels in months.

But don't take my word for it.

I was fortunate enough to get some time this week with Dr. Mandy Cohen. Dr. Cohen is, of course, Secretary of the North Carolina Department of Health and Human Services and the face of our state's pandemic response.

We spoke about North Carolina's progress with Covid-19 vaccination. And Dr. Cohen had a personal message for our state's medical professionals, many of whom have worked tirelessly and creatively to serve their patients and communities throughout the pandemic.

Have a listen.

### **Interview with Dr. Mandy Cohen: 1:31**

JFB: Dr. Cohen, thank you so much for joining me. I really appreciate you taking the time.

MC: Well great to be with you Jean. Thanks for having me.

JFB: Of course. I wondered if you could begin by giving a brief update on where things stand with COVID-19 in North Carolina and with vaccination efforts in our state.

MC: Sure, happy to. You know as we are here mid to end of February, um overall with our fight against this pandemic, things are trending in the right direction. Our cases have been going down. I call them moer level at this point. Our percent of tests that are positive has been going down and is now around 6%. We're seeing or hospitalizations really decline. We peaked in early January with about 4000 people in the hospital day over day and now we're below 2000. So, we really are doing much better from our trends overall but, we sort of lose sight of the fact that we're back to probably where we were in like late September, October period of time. So, and we know that the wild card in all of this are some new variants of Covid that are out there. We're detecting a number of them here in our state. The most dominate one is that UK variant, which is probably a bit more contagious. We think early data shows maybe has more severity of illness as well, so that's a wild card here. As I said, we...we see your trends

going in the right direction, post-holiday. Um, we're not straining our health care system right now, which is great, but those variants are still out there, you know. But as opposed to October, here in February, we have a new tool vaccines, right?

JFB: Yes.

MC: I know, we're going to spend a lot of time talking about vaccines, which are fantastic. We have two 2 tools. I hope a third vaccine tool to soon be approved by...by the FDA, and we've administered more than two million doses of vaccine here in North Carolina, that's incredible.

JFB: It really is.

MC: It's...it's...it's awesome. So, we're making a dent. So that we can we know we've been vaccinating all health care workers and those who are over the age of 65 and older. And we also know that those 65 and older at the highest risk of severe illness. And so, I hope as we continue to make great inroads there, that will continue to see less hospitalizations, less death as we move forward in this. But like I said, virus is still out there. We're going to be hearing about the three W's for a while still.

JFB: sometime to come.

MC: Yeah, that's right, that's right.

JFB: So, in the early days of the vaccine rollout, North Carolina was making national headlines for being one of the slower states to deploy the vaccine. But, within just a few weeks, our state was recognized as among the fastest to get shots administered. How was North Carolina able to turn things around so quickly?

MC: Yeah, no. We...we got up to us, you know, slightly slow start. I think that was a combination of like look, we've never done this historic amount of vaccinating before, but it remember we got vaccine...arrived in our state literally the day before Christmas. And so, everyone just we had to, you know, get our get ourselves past I think, the holidays as well as mature our operations, but we also focused all of the power of our state towards vaccinations, from the governor on down. He was very clear we need these vaccines in arms and we heard that message loud and clear and it took a lot of like elbow grease and hard work to make sure that we had all of our vaccine providers working as fast as they could, learning lessons, and this was really about partnership 'cause our vaccine providers on the ground have been incredible. They have pulled out all the stops. They have put up operations that are incredible that are not just fast but are equitable and I'm excited...you know, I know we'll dive into equity a bit more as we go here, but look, it's been a learning process. I think folks have done an incredible job. We're getting vaccine into every county. And now what we see really is the limiting factor is supply. So, what we are able to get vaccine in arms if it arrives for us on a Wednesday or a Thursday and basically by the weekend we're out. We're out of 1st doses. We're that...we're that fast. I think our vaccinating providers could do three times the number of vaccines then they are doing today. So that's great. Now they couldn't, I don't know how long they could keep that up. 'cause that's at full tilt, but we can do a lot more. We're just so limited by supply at this point. I'm excited about this new potential third vaccine that is coming 'cause we certainly need the supply, but I wish we had more. But supply is definitely the issue.

JFB: Right. And that's certainly not an issue that is unique to North Carolina. Everybody is dealing with that...so. Alright, so Dr. Cohen, you mentioned equity. I had wanted to ask you sort of generally about the greatest challenges that are still ahead with respect to the vaccine rollout. Equity is a great place to start there. I know that Governor Cooper and you have made equitable distribution of the vaccine a priority. I wonder if you could just share how North Carolina is working on that.

MC: Yes, so I should say that the hardest part of the vaccinations and like what the...the thing that is...that is holding us back if you will, continues to be supply. But as we continue to work as fast as we can, equity is so important as we go here. And here is where I'm really proud of North Carolina's work and I think we are a leader in the country on this work and it's embedded to every single one of our processes related to vaccinations. Now the one that just got highlighted at the end of last week that I'm very proud of is we were rated the best in the country for our data on race and ethnicity. That we are reporting race and ethnicity for nearly 100% of the people vaccinated here in North Carolina. And that was very intentional because without the data you can't drive the equity work. So, it's not just a nice to have. It's a need to have. And frankly, we use that data every single day to figure out how do we target vaccines to those who historically, don't have access. So, we embed into our process, whether that's how we allocate vaccine we allocated to all 100 counties by population, but we also give an increase for counties that serve more African Americans or more Hispanic Latino, more American Indian. So, we make it into allocation. We make sure to hold people accountable to our vaccinating providers. We say we want to see you vaccinating at or above the percentages of the population that you serve. So, if you serve 30% African Americans, you should be vaccinating at least 30% African Americans. And then there is also all of the communications, right? 'cause you have to like meet people where they are. You have to set up vaccine sites that are at places that are trusted with partners that are trusted but then have the right messengers, right? And that's all about partnerships and trusts and I'm really excited that we've seen a 45% increase in the number of total doses going to our African American population. And in fact, just the...the week ending February 15th, 23% of our doses went to those who are African American, which is actually slightly above where they are, as a percent of the population. Which is good. We have ground to make up, so they're about 21-22% of the population. They got 23% of the doses for that one week, but remember, we had a number of weeks where it wasn't proportional, so we have some work to do still to catch up, but we're heading in the right direction and it's a lot of hard work that you need to do day in and day out and use your data to propel you forward on that work.

JFB: Well, that's fantastic. I've heard people say if you don't measure it, you can't manage it. So, I think that your point about the data is a really good one. Thank you for that update. So, as you know, the...the Medical Board licenses physicians and physician assistants, and of course as a physician yourself, you know, medicine is a helping profession, so I was hoping that you could offer some suggestions to our licensees who may be listening on for what they can do to support the State's Covid vaccine efforts and efforts to combat the pandemic in general. What should they be doing?

MC: Well, first I know many of them are already helping and have been for so long, and at first, I want to say thank you. This has been a long year, and so whether it was the fact you had to convert a lot of what you were doing to telehealth, thank you. Or whether you're...you're volunteering at vaccination sites or hosting them at your own practice or hospital, or your FQHC, thank you for what you're already doing. But if you're like hey, how can I do even more? I know that you know that there are many providers who are like, oh, I want to get vaccine here in my doctor's office, or where I see patients? You

know, again, the hard part about all this is the supply is so low, I barely can get vaccine to the enrolled providers we have now. But I hope that is going to be changing in the near future. So, I do want to make sure that we are building capacity and so that it folks who do want to vaccinate are going to be ready to do so in the near future. So, there's a couple of things folks can do. One is, you can always volunteer. We...we can, you can volunteer through the state through something called NC Terms and we can pair you up with vaccination sites that are always looking for you know, folks to help out. And frankly, you don't need to be a clinician. So, if you have a family member who just wants to help with vaccination volunteer events, there's a ton of them across the state. And I'll tell you it's seeing some of those smiles when folks get vaccinated...it's definitely heartwarming. So, if you want to volunteer opportunity, there's many out there. The other part of this is about, you know, folks who, yeah, who are clinicians being such an important, trusted source of information. And don't overlook that, right? So, make sure if you are seeing a patient ask, have you gotten your vaccine yet. And if there are great questions that they have, what a great opportunity to answer them, how the vaccines work. You'd be surprised how much misinformation is out there and you all have the opportunity to be great sources of information and potentially save that life that's in front of you when you change their mind to hopefully go get that vaccine. You can tell them how over 2,000,000 doses have been administered. We haven't seen any serious side effects. You know, that...that everyone gets that same...same vaccine no matter where you are in the state. You're not injecting Covid into someone. You know explaining that is really important. And so, I'd also make sure you are encouraging folks to visit our website. Look up where their vaccine is. Help your patients navigate, right? We all...we heard that it's...it's challenging to navigate to these appointments 'cause there we know supply is limited. The appointments are limited. So, my [spot.nc.gov](https://spot.nc.gov) is a place where you can help your patients look for vaccine providers near them. As well as it links to their portals to sign up for appointments and things like that. And I...I should say that every week providers are opening up new appointments, so get yourselves on wait list, but also you know be searching around for your patients because appointments are opening up.

JFB: I wondered if you could say a little bit about...I think you've given a lot of key messages that that our licensees can share with their patients. I wondered if you could talk a little bit about expectations about the vaccine and sort of what does success look like. Does it mean you don't get Covid or...what should people expect?

MC: Yeah, I think the most important thing to know about any of the vaccines that are currently or coming is, that we've seen in all of the trials that it has...it prevents you from getting Covid and most importantly prevents severe disease, hospitalization and death. It seems all of them do it and you know that that is what it is really meant to do is prevent that severe disease from Covid, and that's great. So, it acts similarly to the flu shot in that way where we know flu shots are not 100%, but we know if you get the flu shot and then happen to get the flu, it means you're going to likely get less sick, which is the whole the whole point here. So, I...I think that's important for folks to know that all of these vaccines, whether it's the two that have been approved, the one that I know is being reviewed by the FDA right now, they all prevent severe disease, hospitalization, and death, and that's what we're really looking to prevent.

JFB: I think it's important to focus on that, just because, I mean there is absolutely no doubt that this vaccine saves lives. That's a good thing to do. And again, I know your time is limited so I will just ask you one more question. People often say we don't have a crystal ball, you know when trying to predict outcomes, but we do have the benefit of the rearview mirror, and I wanted to ask you if there is

anything you would change about the State's vaccine plans if you could go back to December knowing the tools that you were going to have to work with, knowing what you've done over the last few months?

MC: Yes, no. It's a great question and I...I you know, so part of it is like it's really hard to Monday morning quarterback a crisis, right? 'Cause you have the information you have at the moment and you're making the best decisions you can. You know, but some of this is that we were getting information incredibly late in the game to prepare, right? There's only so much preparing you can do without really knowing who is this vaccine going to be even eligible for? Like, who is...what is the safety profile going to be? How many doses are we going to get? Like, what is the capacity I'm even supposed to build towards? Like we didn't have any of that information 'cause we didn't know, are we're going to have one vaccine? Are we going to have two? So...so it's hard to yeah, sure if I had perfect information and I knew exactly how many doses I would get, would we do things differently? Sure, but that just wasn't the reality. Plus, we were getting differing guidance on even how to prioritize groups. Remember, the federal government had one set of recommendations and a second set, and then a third, and then a fourth. So that's a lot of lot of changes in a short period of time. So, you know, look, I'm proud of where we are because you could see that within a few weeks, yes, we got, you know, had a couple weeks where we were a little slow, but that is well behind us. You know at this point when we were able to mature our operations, like we have not been behind now since January and in fact, we're one of the, you know, we're getting vaccine off the shelf quickly. We just need more supply. And you know, what I would mention about what I would want different for our state overall with this pandemic, you know, I think managing a crisis is really all about preparation. You know how well are you prepared as you enter it, not what can you do differently, sort of when you're in it? It's really about preparing. And I want to leave with, you know, everyone who's listening with a reminder that that you know we were in a slightly weakened state as going into this pandemic because we have so many folks here who are uninsured. Now insurance does not equal access as we all know and insurance is not a silver bullet. But the fact that we did not expand Medicaid here and left half a million more North Carolinians without access to coverage. It means they weren't managing their chronic diseases. It means they weren't getting access to other preventative kinds of things, or flu shots or what have you. And it just sets us up for less success overall as we head into a crisis. So, I'm hopeful as I look forward to the crystal ball of this year going forward in 2021 that we will rectify that. We will expand Medicaid. I think it's one of the most important things we need to do to help us both continue to respond and recover for this pandemic. Obviously there's a lot of important work and a lot of spaces that we need to do, but this is one that's so easy that we can just be doing and getting so much more help from the federal government to help the people of North Carolina. So, I'm hopeful that the General Assembly can get to yes this session, and it's going to be something I'm going to talk about a lot.

JFB: OK, well, great. Is there anything else that you'd like to add about the Covid vaccine efforts...the pandemic?

MC: Well, for I just wanted to say thank you again. I know this has been a long year. I think everyone has felt like it is felt like 10 years in one year here. I know there's been a lot of personal sacrifices all over and I'm so grateful to the healthcare community. We are so lucky here in North Carolina. We have fantastic clinicians who have stepped up in every way to help us respond to this crisis. And I'm so, so grateful. We'll get through this. I...I...I see that light. We're not...we're not at the end of the tunnel yet but it's there. I'm excited. So, just thanks for the help and you know continued support navigating your

patients to vaccines, talking to them about why it's important and you know being patient while we work and wait for that additional supply as we try to work through this. For...for everyone. We know everyone wants vaccines. I wish I could get it to every essential worker and everyone with a chronic disease and all that. We'll get there. We will get there, so just thank you again.

JFB: Well, thank you Dr. Cohen so much for your time. It was a great honor to have you.

MC: Thanks for having me Jean

### **Licensee Vaccination Involvement: 19:35**

I want to underscore a couple of things Dr. Cohen had to say about how medical professionals can support the state's Covid-19 vaccine rollout.

First, let's talk about volunteering. The state asks that anyone who is interested in volunteering as a vaccinator register with NC TERMS. NC TERMS is state-run platform that has been used in the past to organize volunteer disaster response and now has been adapted to deploy volunteers to assist with COVID. Both clinicians and non-clinicians can register. If you have registered previously with NC TERMS, go to <https://terms.ncem.org>. Log in and update your profile to indicate that you are interested in administering Covid-19 vaccinations. The state will match you up with volunteer opportunities in your area.

If you have never been registered with NC Terms you will need to go to the same website and establish a profile. Fair warning, the medical board has heard from several licensees that the registration process is long and cumbersome. I'll just say, if you are interested in helping, please persevere. NC TERMS may not be an ideal system but it's the system we have. You need to register if you want to help with COVID vaccination efforts.

Before I leave the subject of volunteering behind, I want to clarify an important point. It is not necessary to have an active professional license to volunteer as a vaccinator. It's true. North Carolina law allows licensed physicians to delegate certain medical tasks – and that includes administration of vaccinations – to an unlicensed person. The law allows this as long as the delegate is qualified to perform the assigned task and is appropriately trained. So, that opens the door for physicians or PAs who are not currently licensed to volunteer. So, if you are retired for example, and you've had your COVID vaccine, you can go ahead and register as a vaccinator.

If you are a licensed medical professional, remember you don't have to volunteer to help support the state's Covid vaccination efforts. As Dr. Cohen said, one of the best ways medical professionals can help is simply by talking with the patients they see every day about the vaccine. NC DHHS commissioned research to determine who patients trust most to educate them about the Covid-19 vaccine. Guess who was at the very top of the list? Medical providers. And not just any medical providers – patients said they trusted their own physician, their own PA the most.

So, keep that in mind. Ask your patients if they have a plan to get the Covid-19 vaccine. If you have gotten yours, tell them. Your simple encouragement may be what solidifies a patient's decision to get inoculated against Covid. You can save lives.

If you are looking for information to share about the vaccine, visit the website Dr. Cohen mentioned, [www dot your spot your shot dot nc dot gov](http://www.your.spot.your.shot.nc.gov). Share that resource with your patients as well.

And thank you for all you are doing for your patients and communities.

**Conclusion: 23:05**

That brings us to the end of another episode of MedBoard Matters. As always, if you have comments or suggestions, please email them to [podcast@ncmedboard.org](mailto:podcast@ncmedboard.org)

Thank for listening and please, do join me again.

**Outro: 23:27**

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