

MULTISPECTIVE HEALTH RESEARCH & CONSULTING, LLC

New Year of Opportunity | Future Directions

Vaccinations

How can we tell who has been vaccinated? Read about Immunization Information Systems on pg. 3

Health Equity

Our future edition will ask important questions about COVID-19 and equity. Read about what to expect on pages 4-5

Announcements

It's funding season, and we're glad to support your efforts in generating resources for your initiative! Easily schedule your consultation online today by visiting our website at <https://www.multispectivehealth.com>

Take Our Survey

Help share how we can tailor information and resources to meet your needs by filling out this short survey!

<https://www.surveymonkey.com/r/Multispectivehealth>



Welcome Message

We at Multispective Health Research & Consulting, LLC are starting the new year by launching a newsletter to share updates, activities, content, and future plans with our growing community. With the new year often comes new objectives. We are interested in hearing from you on your plans and roadmap to achieving those goals. If you find that you have questions, need additional expertise, or even just need an extra hand, we are here to help. Our team thrives on building personal relationships with our clients regardless of the project size. We are excited to connect with you and look forward to accompanying you on our shared journey to improve health and health care for all.

Who We Are

Designed with patients, providers, and communities in mind, our organization's mission is to improve individual and population health by tackling complex health and social system problems through collaborative partnerships. We are passionate researchers and consultants who are driven by honesty, integrity, authenticity, and transparency. We pride ourselves on remaining flexible and approaching projects from multiple perspectives. We aim to exceed your expectations and encourage you to reach out with any questions or queries by emailing us at info@multispectivehealth.com.

You can also visit our website at <https://www.multispectivehealth.com> and schedule a meeting with us.

We hope you enjoy this newsletter and look forward to hearing from you.

New Year and Opportunities for Meeting Public Health Challenges

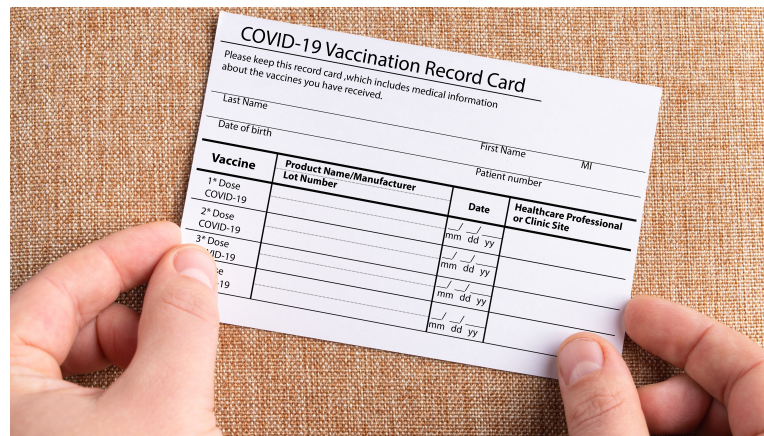
You have probably seen that 2020 was "unprecedented". The COVID-19 global pandemic remains a persistent and rapidly evolving public health crisis. From the individual devastations and enormity of the lives that have been lost, to the strain and challenges our communities, infrastructure, and health care workforce have faced, we are still a long way from recovery. The long-term effects of the pandemic, such as the economic, social, and health effects, will take years to fully manifest.

But there is hope. Two COVID-19 vaccines have now received emergency approval and are currently being administered. We know more about the virus than we did last year, and new treatments and therapeutics are in development. New strategies for coping under this "new normal" are being developed. Following convalescing patients is providing new evidence about the long-lasting effects of COVID-19 infections which allows us to plan and test interventions. This is an opportunity to evaluate and address challenges in health care access and equity, health behaviors and outcomes, and social determinants of health to aid in the recovery of our population.

Focus On Tracking COVID-19 Immunizations: How Can We Tell Who Has Been Vaccinated?

Distribution and administration of two vaccines is now underway and questions surrounding the phased roll-out of these vaccines have surfaced. Related to the roll-out, one question we explored was how administered vaccines would be tracked. The question is important for two key reasons:

1. Both the Pfizer-BioNTech and Moderna vaccines require two doses administered at different intervals (21 days and 28 days respectively) for optimal protection.
2. There have been no studies on the safety and efficacy of receiving the two doses from different manufacturers, therefore, it is important to get the same vaccine for both doses.



COVID-19 Vaccination Record Card

Please keep this record card, which includes medical information about the vaccines you have received.

Last Name _____ First Name _____ MI _____
Date of birth _____ Patient number _____

Vaccine	Product Name/Manufacturer	Lot Number	Date	Healthcare Professional or Clinic Site
1 st Dose COVID-19			mm / dd / yy	
2 nd Dose COVID-19			mm / dd / yy	
3 rd Dose COVID-19			mm / dd / yy	

COVID-19 Vaccination Card

Much of the focus on social media and news outlets has been on the use of a COVID-19 vaccination card, similar to the paper immunization cards that were routinely utilized prior to widespread adoption of electronic health records. Historically, these cards were often lost, illegible, or inaccurate and were not available for real-time analysis at a population level.

In a recent article, we describe the use of electronic Immunization Information Systems (IIS) as a robust and comprehensive method for tracking vaccinations and their capacity to assist public health officials with activities such as recall notifications. Even though most states in the U.S., as well as some larger cities, operates an IIS, these systems have been largely absent from media coverage as it relates to COVID-19 vaccines.

IIS are capable of numerous functions that increase their value in a crisis such as the COVID-19 pandemic. One way to maximize the use of IIS is to ensure that there is adequate data housed within the system which can be accomplished by ensuring participation by providers, facilities, and patients. To read more about this topic, you can access the full article [here](#), or email any questions to info@multispectivehealth.com.

Coming Soon: COVID-19 and Equity

In 2021, health equity priorities include those that relate to COVID testing equity (e.g., access, information, resources) and vaccination equity (e.g., vaccine hesitancy) in vulnerable populations. A few questions we aim to explore in our forthcoming article on equity and COVID-19 testing and vaccinations:

- What factors, such as socio-economic conditions, contribute to disparities in COVID-19 outcomes and timely testing?
- What strategies are being utilized to help ensure that underserved communities have adequate access to COVID-19 testing services?
- How are COVID-19 test results and action plans being communicated in these communities?
- How should vaccine hesitancy be addressed in vulnerable populations while in the midst of an active pandemic?

Increasingly, evidence shows that COVID-19 disproportionately impacts racial and ethnic minority groups. There are likely several reasons to explain these differences including known inequities in the social determinants of health (e.g., housing, education, criminal justice) and overall differences in health status. The conditions (e.g., lack of resources and opportunities) and social determinants of health faced by

communities of color increase the disproportionate impact of the COVID-19 virus on their communities.

Studies have shown that Black and Hispanic people are experiencing COVID-19 related deaths at nearly three times the rate of their white counterparts. Although overall rates of testing have not varied widely by race/ethnicity, patients in underserved populations received positive test results, required higher levels of care, and were more likely to test positive in inpatient settings. These data suggest that these communities may not receive timely testing compared to White people. Strategies to increase the timeliness and access of COVID-19 testing may be helpful in identifying COVID-19 positive patients sooner and thus helping to curtail the spread and prevent severe complications.

The recent emergency use authorization of two COVID-19 vaccines represents another tool to help stop the spread of the pandemic. However, there are historically differences in vaccination rates among immigrant and minority communities. Vaccine hesitancy is a concept where people's acceptance of vaccines exists on a spectrum, though reasons for hesitancy may be different among different groups of people. For example, the U.S. has a history of medical mistreatment of people of color which has strained the relationship between people of color and the healthcare system.

Curbing the spread of COVID-19 requires a multi-faceted approach. Although we could write our upcoming article from several perspectives, we have chosen to focus on that of equity in testing and vaccination as one avenue to help slow the pandemic and improve the health of underserved communities. We look forward to sharing it with you soon!

