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Increasing Utilization of COVID-19 Vaccinations

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Abstract

VNA, a non-profit organization, has been providing care for residents of Monterey, San Benito, Santa Cruz, and South Santa Clara counties since 1951. When the vaccination for COVID-19 came out they began vaccinating those in Monterey County and providing clinics in many different locations where residents could have easier access to a vaccine. Throughout the majority of clinics data was being gathered to compare the attendance rates. Recommendations were made to VNA about how to improve their attendance rates at clinics after going through the data and having different conversations. Based on the data collected, there was evidence that suggested people in South County did have lower rates, which was something VNA expected. Some of the recommendations made were returning to popular clinic sites, providing incentives for vaccination, spreading the word before clinics, and providing accessible information.

Keywords: Vaccinations, Monterey County COVID-19 rates, VNA

Agency & Communities Served

The Visiting Nurses Association (VNA) works to provide the best care to the residents of the Central Coast. This means seeing each individual and meeting their needs through a caring, effective, honorable, and accessible manner (VNA, n.d.). At VNA,

We transform the care and culture to meet the changing needs of patients, families and caregivers. We achieve positive results every day through quality standards, empowerment, teamwork, and accountability. We are trustworthy, innovative and unique in our clinical programs and customer service. We create a collaborative and respectful working environment recruiting highly skilled professionals while retaining satisfied employees. (VNA, n.d.)

The services VNA provides are home health, hospice, and community services. These services are provided in Monterey, San Benito, Santa Cruz, and South Santa Clara counties. This particular project only involves the community services section of VNA. Within community services, one of the goals is to vaccinate members within these counties. So far the other organizations working with VNA during South County clinics are the Virus Integrated Distribution of Aid (VIDA) project, United Way Monterey County (UWMC), and the Monterey County Health Department (MCHD). The VIDA project joins VNA at VEO clinics to help educate people on the vaccines available, if they are eligible, and try to get more people to get themselves, their friends and their family members to get their COVID vaccinations.

Problem Model Background and Literature Review

Problem Statement

There is a concern about lower vaccination rates in South County, such as Greenfield, Soledad, King City, San Ardo, Gonzalez, San Lucas, Bradley, Jolon, Lockwood, and Parkfield,

compared to other areas in Monterey County. To address this issue vaccination rates are being monitored and have been placed into different categories to make it easier to compare the different counties. As it separates into the different zip codes, viewing those zip codes can show the different factors involved in why some are lower than others (County of Monterey, 2021). Using this information to look into the problem of lower vaccination rates creates the ability to actually see where they are lower. Another reason to have a concern over the low vaccination rates is South County does have the highest rates of COVID cases in Monterey County. The county rate as a whole is 7,251.8 and the rate in South County is 9,648.5 (County of Monterey, 2022). While vaccinations do not make someone immune to COVID, they help with lowering symptoms and lowering the risk of spreading it.

Contributing Factors

When it comes to lower vaccination rates, there are three main contributing factors. Lack of access to culturally accurate information, weak outreach, and people thinking they only need one dose. Each of these factors works against raising the rates and reaching herd immunity.

Lack of Access to Culturally Accurate Information

Looking into and understanding how different cultures, religions, and lifestyles can impact the vaccination rates can help to make the proper changes or adjustments to providing a vaccine. Reading through why people with different backgrounds can have suspicion or distrust of vaccinations can provide ways to make these changes (History of Vaccines, n.d.). Using this new understanding to think of the different scenarios that may come up and ways to overcome them.

Having a language barrier makes it difficult to provide information. This becomes especially difficult when there is no written language and there is also no translator. Throughout

the pandemic this situation has been hard for “...immigrants from Mexico and Guatemala in California who speak Indigenous, non-Spanish languages...” (Getahun, 2021). Not having access to information that could end being life saving is a hard thing to deal with. Finding people who know the information and are able to translate can be a hard thing to come by when at vaccination sites or clinics.

Weak outreach

Without a connection people would most likely not want to participate or care about what is happening. Connecting in a proper way can improve the outreach and help create a word of mouth situation. Making the community feel comfortable about things going on there can help to increase the turnout of clinics. The CDC is providing ways to increase the COVID vaccinations. Looking into where people live, work, learn, pray, play, gather, and existing programs (CDC, 2021). Making information available in a place that is already somewhere that is seen as comfortable and safe is the first step to attracting more people. Making sure the vaccination is in that same place or a different place but still comfortable and safe can create a positive environment.

Finding ways to get people who are not already vaccinated is a difficult task. At this point during the rollout of the vaccines, people are either going to get it or they are not. However, finding new or creative ways to gain the attention of others can work to attract those who are unsure about the vaccine. Art is something that can have multiple meanings but is also something that does not need words or actions to be shared and understood. Having multiple sources of art from different people and different cultures to use gives organizations a way to promote vaccinations. The CDC has created a guide for this. Using this guide can show how an art culture program can improve the rates of vaccinations (Sonke et al, 2021). Recognizing that people who

are unsure might be concerned about the information related to the vaccine. With art and being able to provide an open minded environment there can be a level of trust created and give out the appropriate amount of accuracy when it comes to information and how to present it in a way that works best for them.

People thinking they only need one dose

There is a hesitancy when it comes to vaccinations and then there is a drop in people coming back to get their second or booster vaccinations (Herrera, 2022b). Trying to reach these people is getting harder and harder. While there is some immunity after one dose, there are people who believe that is enough protection and do not feel like getting more. Adverse side effects from the primary round of vaccinations, people can be discouraged from coming back because they do not want to feel that way again.

In Monterey County, there is a high percentage of people who have completed their first dose 83.1% (CovidActNow, 2022). However, there is a difference of about 10%, 74.6%, when it comes to those that have completed their primary series (CovidActNow, 2022). Since getting the Johnson & Johnson vaccine is considered to be fully vaccinated those who received that vaccine are in the completed primary series category.

Consequences

Lower vaccination rates create two consequences, higher rates of COVID/other illnesses and long term health conditions. The longer COVID is the main focus, there is less focus on other illnesses and preventing those.

Higher rates of COVID/other illnesses

Unvaccinated people have higher rates of COVID-19. With the variants that are coming out the rates are going up in general, but even more quickly for unvaccinated people. In addition,

unvaccinated, people are spreading the virus faster because they are more contagious. The perspective of those working in hospitals and exposed to COVID all day, is a useful tool to persuade people to get vaccinated (Harris et al, 2021).

Although the Monterey Herald is a newspaper and might not be the best source. They do provide some data on the likelihood of unvaccinated people and their rate of COVID-19 positive cases. As different mandates are being lifted people are forgetting the pandemic is still happening and cases are rising again (Herrera, 2022a). The rise of cases will reimplement these mandates making people angry again.

Data shows there is an almost 10% difference in symptoms between those with one dose versus those who are fully vaccinated (Los Angeles Times Staff, 2022). The zip code map has the percentages for both first only and fully vaccinated. These percentages are updated weekly and are able to show the population as well to use that in the comparison.

Long term health conditions

Discussing the long term impact of COVID-19 on farmworkers is something that is not often done. Looking into the higher rates of COVID-19 among farmworkers and how it not only impacts their health but also their work life and the overall agriculture and food production for everyone (Mora et al, 2021). Farmworkers have a major role in the lives of others, whether everyone agrees or not is different, without them there is less food available for everyone.

The CDC is describing the long-term impact of getting COVID. There is a lot unknown about them because the virus is still a newer thing that people are experiencing (CDC, 2022). This being said, the time frame and symptoms are different in a lot of people. No matter the severity of COVID, there is a possibility that they will get post-covid and that can last weeks, months or even longer.

Contributing Factors	Problem	Consequences
Lack of access to culturally accurate information	Low vaccination rates in South County	Higher rates of COVID/other illnesses
Weak Outreach		Long term health conditions
People thinking they only need one dose		

Project Description

Project Description

Research the low vaccination rates in South County, Monterey and then provide recommendations on increasing attendance to VNA. This can be done, first is to look into the reasoning of why they are low and find ways that might improve them. The plan is to research the accessibility of the vaccinations, how often they occur, and where they are and the location compared to the population of the community. Going out to these clinics and observing the amount of people that come to these clinics.

Project Justification

Lack of access to health information that is easily accessible for different people and places. Using this project to understand why the rates are lower in South County compared to other areas. Hesitancy in regards to vaccinations is a big part of the research and when the reasons are understood there can be changes or adjustments made to lower the hesitancy and raise the vaccination rates.

Providing the best care to residents of the central coast means to have the ability to provide all with the correct and accessible information. When it comes to giving vaccinations there is concern among people and there has to be a level of trust within each patient-nurse interaction. Nurses having accessible information for their interactions as well as being able to provide it in a way everyone understands.

Having rewards for getting a vaccination has shown to get more people vaccinated. Having different types of rewards can get everyone involved, as not everyone likes the same thing. In King City and Greenfield this has worked. In May of 2021, their rates were similar to the rest of Monterey County (Roney, 2021). Trying to reach herd immunity around COVID is the main goal and using the rewards and incentives is the next part of the plan to get there. Rewards and incentives are a part of most vaccination clinics and people are showing up because of these.

Benefits

The benefits that will result from this project would be there is a possibility to increase the current vaccination rates. Another benefit would be if there is another pandemic in the future or outbreak of some sort there is research to go on that would help ease the creation of vaccination clinics. Using this research to help to plan future COVID clinics. Having information that can be used by everyone is a good thing in general when it comes to health. Access to healthcare information is something that is a concern and this research can help to expand knowledge to improve the access to this information.

Implementation Process

To begin this project, there was uncertainty about what the focus would be. After having meetings to figure it out the conclusion came to focus on research. Since the focus of the project was determined in April, that is when the data started taking place. Going to clinics that were all

over Monterey County, with a few being in surrounding areas, VNA was able to gather data from different areas and from different people. During a few clinics the attendance was higher so tracking numbers got difficult, luckily there is a spreadsheet with data on it so if numbers were missed the data came from that. Talking with peers, working with the different partnerships, and having discussions with VNA staff, coming up with recommendations took longer than expected. The original plan was to send the recommendations November 4th but they were not sent until a week later, November 11th. This was due to the fact that VNA still had clinics and narrowing and summarizing the different ideas took some time. Afterwards, the recommendations were sent to a VNA mentor as well as a few others that are very involved in the planning of COVID clinics.

Assessment Plan & Expected Outcomes

To be able to assess this project, attendance will be recorded at clinics throughout Monterey County, discussions about attendance will be had with different organizations, comparisons of different locations in the same city or town will be done, and then review all the data and look through to see patterns or common themes. The attendance records are the most important piece of data because they will show how many people are coming to these clinics and if there is a difference in attendance for each town. The discussions before, during, and after will help to give ideas on ways to help get attendance up. Comparing the different locations can show if certain areas are more advertised or visited compared to others, and if VNA should have more clinics in the more popular locations. While reviewing the data collected, understanding all the numbers to explain how the clinics are attended and which are doing well and which aren't, can create ideas and change to improve. One measurable expected outcome would be if the agency

uses these recommendations for future clinics and if the recommendations are used, how well they help the goals of VNA.

Project Results & Recommendations

Over the past year and a half of experiencing clinics, the past few months formed a few recommendations that have come up for increasing attendance at COVID-19 vaccination clinics, as well as ways to educate people on vaccinations. Talking to people from VIDA, community members, and VNA staff about ways to increase attendance.

While VNA does a lot to provide health services to those in Monterey County and some surrounding areas, there is a small team that goes out to these clinics and provides the vaccinations for COVID-19. Being able to go to the people instead of them coming to us allows for them to not have to worry as much about transportation or making the time to travel. One common piece of feedback that was received is they find it convenient when we go to the workplace because we are there, it doesn't take a long time, and they can get their vaccinations done without making an extra trip to go somewhere else. Going out to community events that we may not be able to vaccinate a lot of people but we are able to inform them about our future clinics can be useful to gain more attraction.

Going back to places of previous clinics or popular places in the community are two of the bigger things that have helped with attendance. These two combined have led to larger crowds of people. Looking through the data from VEO clinics, the places that typically had higher rates of traffic often were the ones that had higher attendance. Going back to the same place makes it easier for people to remember locations.

Providing incentives has been something that has definitely worked for clinics. Getting the funding for these or getting them from the county can be difficult but they do attract more

people. Those that come towards the beginning can tell family and friends that they can get vaccinated and then receive something for getting vaccinated as well. This can help with the children because they can be persuaded to get vaccinated by being told they get a reward for it. The VISA gift cards were the most effective because they allow for people to spend them where they want and have the freedom to decide when to spend them.

The clinics that had bigger turnouts seemed to be the ones that had a larger advertisement before the day of the clinic. While this is hard to spread the word when it is at a far location, using the contact person to help or if VIDA is there they can help as well. While talking with a few people from VIDA they were able to give recommendations on how to spread the word. Using flyers of the schedule and posting them in stores, community centers, churches, and schools. They also said to announce it at church as well as keep reminding people about the next clinic in their area. Based on the feedback from those that attended clinics, most of them had heard from their child's school. Using the local schools to send emails or post flyers can gain the attention of the parents. Contacting local businesses or community focused programs that can spread the word to their employees and the community. All of these can help to increase the attendance or at least get the word out for those that might not be connected to any of these areas but want to get vaccinated.

One aspect that might not attract more people but would help during clinics would be providing all information in English and Spanish. While most information is in both there is a few that are only available in English. The simple thing of making sure there is both of everything can go a long way for those that want to be able to read the information.

The flu vaccine is not free in a lot of places and some of the clinics do provide it at no cost. If people are coming for the flu vaccine but are hesitant to receive the COVID vaccine, this

can be a time to educate them on the COVID vaccine and help them make their decision. Even if they decide not to get the vaccine they still learned something during their time at the clinic. This can lead them to telling others and/or coming to the next clinic in their area and receiving the COVID vaccine.

When deciding to submit recommendations, the outcome expected was to get feedback from VNA and then start to see them implemented into the clinical setting. To create recommendations, there needed to be data to back it up. At each clinic attendance was to be recorded. Using the attendance to create recommendations allowed for comparisons to be made between areas in Monterey County to be made. When dividing Monterey County into sections there were four made. North consisted of Prunedale, Castroville, Pajaro, and Watsonville. Central consisted of Seaside, Marina, and Monterey. South consisted of Greenfield, San Ardo, Gonzales, Soledad, and King City. The last area was Salinas. Figure 1 shows the population of each section in relation to each other. Using this population comparison, it was important to understand how the population compares so the vaccination amount (Figure 2) would not be standing alone. While the vaccination amounts show South County having the most vaccines and the lowest population. This shows their section had the most people unvaccinated and the VNA clinics allowed them a chance to get vaccinated. Using the attendance from clinics and having conversations with VNA staff, VIDA staff, or others that are living in the area the recommendations from above were made. After sending in the recommendations, the VNA staff was able to provide quality feedback. While the project ended before knowing if they were implemented, knowing VNA staff read them and responded leads to a possibility they will be implemented.

Conclusion

Working to lower the spread of COVID-19 starts with having the ability to reach the majority of people and allow them to have access to information and vaccinations. While VNA goes out to communities to provide both of these, some areas are harder to gain attraction from. Within this project, the contributing factor addressed was weak outreach. Through the recommendations provided to VNA, the weak outreach factor was addressed by having multiple ways to increase outreach. Overall, the focus of this project was to create ways to increase attendance at clinics in South County. Through gathering data, experiencing clinics, and having conversations recommendations were made to VNA and these recommendations can increase attendance at all clinics not only those in South County.

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Appendix A

Project Implementation Plan

Activities	Timeline/Deadlines	Supporting Staff
Meeting to discuss project and plan to start research	April 26	Andrea Zoodsma
Work with a peer on outreach for clinics in South County	September 25	Andrea Zoodsma
Find estimated number of people per clinic	September 27	Andrea Zoodsma
Tracking vaccination rates in different cities and towns in Monterey County	April 30 -November 4	Andrea Zoodsma
Have conversations with members of the VIDA project about their advertising	All clinics VIDA attends until October 28	Andrea Zoodsma and Clinic Staff
Work with other clinic staff to form ideas to improve turnout	April 30-October 28	Andrea Zoodsma and Clinic Staff
Attend COVID vaccination clinics in South County	April 30-October 28	Andrea Zoodsma and Clinic Staff
Track 3 categories (Flu, Covid, Both) on excel sheet	October 1-October 28	Andrea Zoodsma and Clinic Staff
Compare clinic turnouts from different areas	November 1	Andrea Zoodsma
Gather all findings and organize to make information and message clear	November 2nd	Andrea Zoodsma
Submit final findings to Mentor	November 4th	Andrea Zoodsma

Appendix B

Figure 1

Total Population

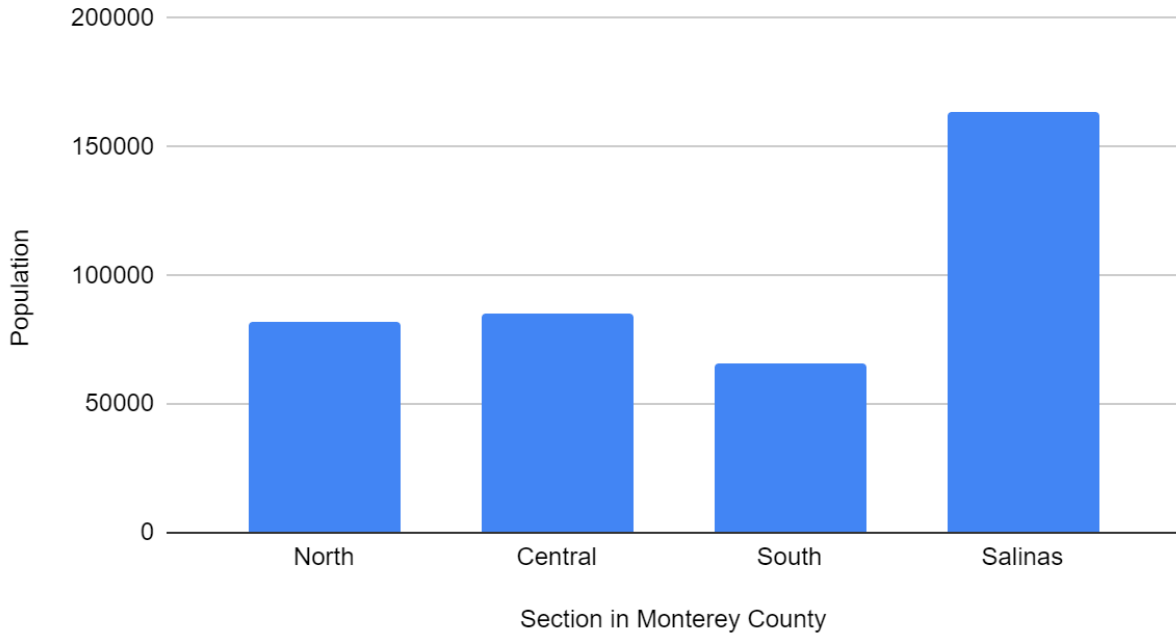


Figure 2

Vaccinations in Each Section

