SC Public Health Task Force Meeting: 8/30

1. Welcome/Attendance:
   1. Mandy Halloran, Annie Foster, Dr. Leigh Bragg, Agner, Anna Guryan, Anni Crook, Boris K., DaAsia Hamilton, David Rotholz, Eileen Schell, Eric Bellamy, Harley Davis, Karla Buru, Kimberly Tissot, Laura Aldinger, Lawson Clubb, Mark Collins, Mary Trunk, McKenzie Watson, Megan Branham, Megan Johnson, Monty Robertson, Nikki Brown, Reba Landry, Rebecca Williams-Agee, Sicilia Randazzo (FCSC Intern), Valarie Bishop, Rachell Johnson (check chat for attendees?)
2. Update from Dr. Bragg with DHEC:
   1. Dr. Bragg reviewed the PowerPoint slides with the most recent COVID-19 and vaccination information.
   2. DHEC carries the Moderna vaccines.
   3. The new boosters are coming out. As of 8/30, DHEC does not have the new vaccine booster available at the health department. The rollout is supposed to be in the next month or so. The recommendation is that vaccines go back to being monovalent and protect against the omicron variant. Currently, from DHEC, there are no updates on who needs the booster or when they will be available.
   4. Dr. Bragg reviewed guidelines for which booster or dose you need and when:
      1. 65 and older can get an extra bivalent after four months.
      2. Talk to your health provider if you have an underlying health condition.
   5. We are seeing an uptick in all respiratory viruses (flu, RSV, etc.) The best thing you can do is stay home if you are sick and wear a mask if you must be in public places.
   6. Dr. Bragg can send booster updates to Mandy when she receives them.
   7. Kimberly added that we will get the information on the new booster in accessible language to the disability community as soon as it is available.
   8. Dr. Bragg discussed funding for the vaccines. A lot of insurance companies may not cover the new booster. Dr. Bragg has brought this to the CDC. Vaccines will be privatized/commercialized this year, which is another barrier we will have to face.
   9. Megan Branham asked for Dr. Bragg’s thoughts on additional barriers impacting low rates for children.
      1. Most people don’t think kids have as many complications with COVID. It is not looked at as being as bad as it is for the elderly population. Also, for anything new, many people may take it themselves but not get it for their kids. It is also harder for young kids to access the vaccine. 12 and older can get it at places like CVS and Walgreens.
   10. Resources:
       1. [Bridge Access Program Announcement](a.%09https:/www.hhs.gov/about/news/2023/04/18/fact-sheet-hhs-announces-hhs-bridge-access-program-covid-19-vaccines-treatments-maintain-access-covid-19-care-uninsured.html)
       2. [Vaccine resources](https://www.cdc.gov/vaccines/programs/vfc/index.html) (for children)
       3. There are free programs for children and those who are uninsured. The Bridge program will be temporary.
       4. The VFC program is excellent; anyone with insurance like Medicaid is covered. Children with private insurance are the ones who are not covered. Providers will have to take on that cost.
   11. Mandy added that Able SC has a few barrier-free vaccine clinics coming up. On 9/16, the clinic is in the 29203 zip code from 1-5 pm. It will be at a community event. This is an underserved area. A barrier-free vaccine clinic is something that we created where we offer a plethora of accommodations, anything we can do to make the process of getting a vaccine more user-friendly. Mandy shared a success story from a vaccine clinic in St. Matthews. Two older Black women attended, and one of our vaccine access leaders, who is from that community, spoke with them, and they received their first shot. One of these women had a tracheostomy (breathing disability) and hadn’t received a shot before the clinic.
3. Kimberly shared the new DVAO website and toolkit: <https://dvao.able-sc.org/>
   1. [CDC Partnership Guide](https://dvao.able-sc.org/wp-content/uploads/2023/08/CDC_Foundation_Partnership_Guide_2023-508.pdf)
      1. When the COVID-19 pandemic began, people with disabilities were left out. COVID-19 remains one of the top killers for the disability community today.
      2. Everything you need to know about disability is in this guide!
      3. This is one of the national projects we have been working on with ILRU, NACCHO, and PIDS. Ensure you are sharing and reading it, especially if you represent a health department.
4. Hurricane Idalia is now a category 1 hurricane. It is forecast to approach SC as a Category 1 hurricane and become a tropical storm as it moves through the state.
   1. Storm surge warning 3-5 ft up the coastline.
   2. Midlands through coastal plains will see the most significant impacts.
   3. SCEMD doesn’t always meet the needs of the disability community. When the Governor held his press conference yesterday, there was no ASL interpreter. Able SC was able to arrange for an interpreter with 30 minutes notice this morning.
   4. We have been notified that some of the shelters on the coast are not physically accessible.
   5. In the Midlands, Mandy was notified that DART has been encouraging users to cancel their rides for the week. For a lot of individuals, that is their only means of transportation.
5. Committee updates:
   1. McKenzie Watson, System Planning Committee:
      1. The committee met on 8/3. We have five committee members: Beth Franco, Val Bishop, Harley Davis, Kimberly Tissot, and McKenzie. They discussed medical rationing. The goal is to research promising practices in other states and develop a report with recommendations. The ultimate goal is to have a policy and practice to ensure that medical rationing based on disability does not occur. The next meeting is 9/27. They will present their research on other states’ practices at that meeting. Contact McKenzie if you’re interested in joining [mwatson@able-sc.org](mailto:mwatson@able-sc.org).
   2. Mary Trunk, Violence Prevention and Survivor Services Coordinator at Able SC, Education and Integration Committee:
      1. They have up to 9 members now. Representatives from the Department of Aging, DHEC, Parks and Rec, Children’s Trust, CDR, etc.
      2. They brainstormed ideas for disability integration in all our work. Started thinking of who we could recruit for the committee. There is a gap in knowledge for disability education. The committee is looking at how we can fill that gap through education, outreach, and training. We started providing training through our committee member Anna with DHEC. We’ve already completed some and have more scheduled. Mandy and Mary are working on trainings related to ADA Compliance for organizations.
      3. Contact [mtrunk@able-sc.org](mailto:mtrunk@able-sc.org) if interested in joining this committee.
      4. Mandy thanked Anna for her help with scheduling trainings. Our goal is systemic advocacy, and we appreciate her work in educating the health departments.
   3. Reba Landry, Accessibility Committee.
      1. This committee is still recruiting. We have reps from DHEC, SCATP, etc.
      2. We have developed a plan but were not able to complete the first meeting.
      3. Contact Reba if you want to join [rlandry@able-sc.org](mailto:rlandry@able-sc.org). The next meeting is on 9/27.
6. Concluded the meeting by viewing the [Partnering for Vaccine Equity short film](https://www.youtube.com/watch?v=opKDARQ7ImY&t=21s) we were a part of.
7. The Next Task Force Meeting is October 25.