

15 December 2020



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Who we are...

For 50 years, the American Network of Community Options and Resources has been a leading advocate for the critical role service providers play in enriching the lives of people with intellectual and developmental disabilities (I/DD).

As a national nonprofit trade association, ANCOR represents 1,600+ organizations employing more than a half-million professionals who together serve more than a million individuals with I/DD.

Our mission is to advance the ability of our members to support people with I/DD to fully participate in their communities.

To learn more, visit ancor.org



Presenters



Dr. Matthew Holder, MBA, FAADM Past President, AADMD

Shannon McCracken, VP for Government Relations





Donna Martin, M.Ed.

Director for State Partnerships



Agenda

- Pros and Cons of Getting Vaccine Now
 - Dr. Holder
- Overview of latest federal actions
 - Shannon McCracken
- State Vaccine Allocation Plans Analysis
 - Donna Martin
- •Question & Answers



Joint Position Statement

- Individuals with intellectual and developmental disabilities who live in group homes or other community residential settings.
- All direct support professionals (DSP), including group home staff, in care settings aiding persons with intellectual and developmental disabilities
- Given increased rates of serious illness and death from COVID-19 in people with intellectual and developmental disabilities, persons with this diagnosis or condition should be explicitly included in the list of high-risk diagnoses that are used to determine vaccine priority.



Organizations Supporting Position Statement





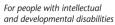






































Vaccine Overview



Overview

- What vaccines are available?
- Efficacy
- Safety
- Length of protection
- Why should people with IDD be vaccinated soon?
- Who else should get it?
- Do we still have to wear PPE?





What Vaccines are Available?

- Pfizer Vaccine (capacity, 1.3B doses per year)
 - Originally tested on adults over 18, then 16, now 12
 - mRNA vaccine
 - Targets the spike protein
 - Available NOW
- Moderna Vaccine
 - mRNA vaccine
 - Targets the spike protein
 - Available very soon
- Sputnik V (Russian vaccine)
 - Adenovirus vaccine
 - Available in Russia, not in the US
- Astrazeneca, Johnson and Johnson
 - Adenovirus vaccine
 - Still in trials





Efficacy

- Pfizer ~37,000 people, 170 cases of covid, 162 placebo, 8 vaccine (~95%)
 - Efficacy of both vaccines appears to be the same across all demographic lines (racial, gender, age, BMI).
 - Of "severe" covid cases, 10:1::placebo:vaccine
- Moderna 196 cases of covid, 185 placebo, 11 vaccine (~95%)
 - Placebo group 30 had severe disease, 1 died.
 - Vaccine group online have mild symptoms.
- Sputnik V is touted as 90% effective
- Astrazeneca has strange results (62% effective with 2 doses, but 90% effective with ½ dose first shot)
- J &J ?





Safety

- Pfizer Appears to be safe, but mRNA vaccines have never been licensed in the US before.
- Moderna Technologically, very similar to the Pfizer vaccine, so likely a similar safety profile.
- Sputnik V Wide use but only limited study sample size.
- Astrazeneca and J&J Likely safe using more traditional.





Length of Protection

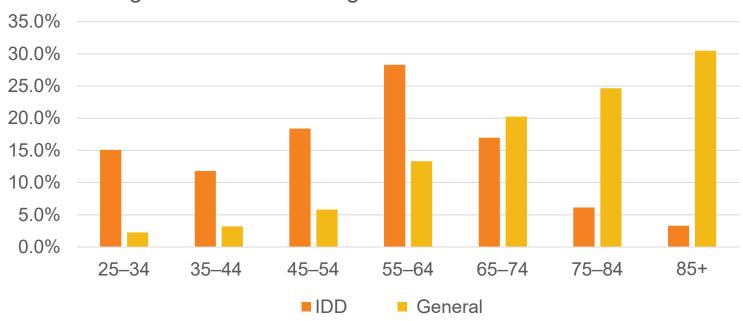
- Nobody knows
- Median follow-up of the Pfizer study was approximately 2 months.





Why Should People with IDD be Vaccinated Soon?





- 1. Georgia DBHDD 2016 Annual Mortality Report
- 2. https://www.cdc.gov/nchs/nvss/vsrr/covid_weekly/index.htm





Why Should People with IDD be Vaccinated Soon?

1 in 4

People with IDD will die due to a respiratory illness ^{1,2}

1) Georgia DBHDD 2019 Annual Mortality Report

 $2) \ https://shriver.umassmed.edu/sites/shriver.umassmed.edu/files/2012-13\%20DDS\%20Mortality\%20Report\%20Final_v2.pdf$





Why Should People with IDD be Vaccinated Soon?

The Covid-19 case fatality rate for people with IDD may be as high as:

15%

https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7311922/





Who Else Should get the Vaccine?

- DSPs
- Caregivers
- Family members
- People who associate closely with people with IDD





Do We STILL have to Wear PPE?

- Yes, at least for a while.
- It will take months before all the vaccines will be distributed.
- The vaccines are 95% effective, meaning it won't work for 1 in 20 people.
- My personal guess is that we'll start to see a relaxation of PPE requirements in the sometime in the Spring/Summer, once we see a significant decrease in cases and death rates.





Questions for AADMD?



Dr. Matthew Holder, MBA, FAADM

Past President, AADMD

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Advocacy: www.aadmd.org/vaccine



Overview of Federal Action



Federal Updates & Actions



- OWS (Operation Warp Speed)
- **CDC** (Centers for Disease Control)
- ACIP (Advisory Committee on Vaccination Practices)
- NIH (National Institutes of Health)
- FDA (Food & Drug Administration)



Friday December 11



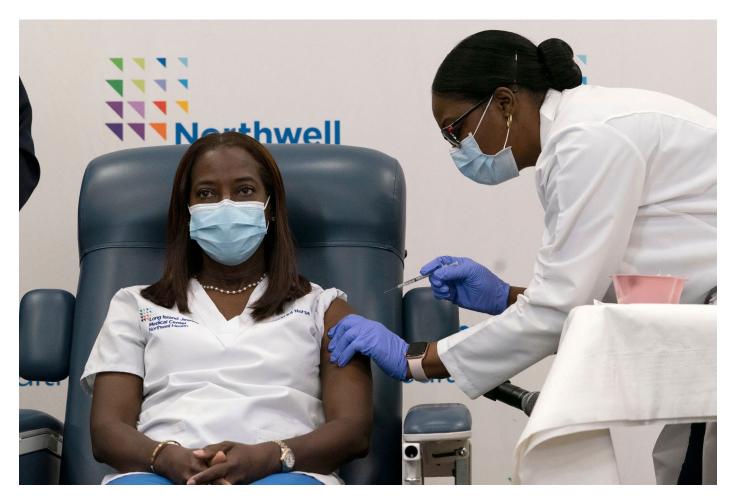


Vaccine Rollout Begins December 13





First Americans Vaccinated December 14





LTC Pharmacy Partnership

- CVS, Walgreens, and select pharmacies that are part of the MHA network will provide critical vaccination services to LTCFs. Participating MHA pharmacies include:
- Absolute Pharmacy (in Ohio)
- Community Pharmacy (in Iowa and Nebraska)
- Consonus Pharmacy (in Oregon and Nevada)
- HealthDirect/Kinney Drugs (in New York and Vermont)
- Pharmscript (in Indiana, Illinois, New York, Ohio, and Texas)
- Senior Care Pharmacy (in Alabama)
- Thrifty Drug Stores (in Minnesota and North Dakota)

https://www.cdc.gov/vaccines/covid-19/long-term-care/pharmacy-partnerships.html

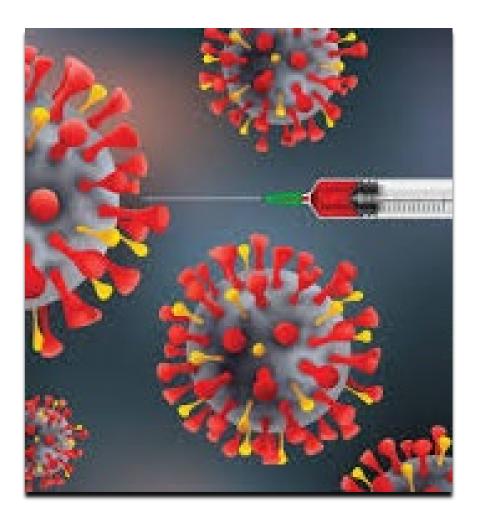


State Vaccine Allocation Plans



State Plan Components

- Organizational Structure and Partner Involvement
- Phased Approach
- Critical Populations
- Second-Dose Reminders
- Program Communication





Key Findings

- States with early outbreaks tended to have more fully developed plans.
- Most states have thoroughly developed communication plans.
- 10 state plans explicitly prioritize people with I/DD.



States specifically identifying people with I/DD

STATE	PHASE	DEFINITIONS & NOTES
Colorado	2	Specifically, people living in group homes
Florida	1	People living in Intermediate Care Facilities for Individuals with
		Intellectual Disabilities (ICF/IIDs)
Georgia	2	People living in group homes
Hawaii	2	People living in group homes for persons with disabilities
Indiana	1b	People with intellectual and developmental disabilities
Louisiana	1b	People living in Adult Residential Care facilities and ICF/IIDs
North Carolina	1b	People living in family care homes and group homes
North Dakota	2	People living in ICF/IIDs and congregate settings; people at
		high risk of severe outcomes
Tennessee	1c⁴	People with intellectual and developmental disabilities
Washington	1a	People receiving Supported Living services



Key Findings

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- Most states have thoroughly developed communication plans.
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- 11 state plans defined "essential workers" to include DSPs.



States specifically identifying DSPs

STATE	PHASE	DEFINITIONS & NOTES
Arizona	1a	Personal care aides
Colorado	N/A	"Human service provider of direct care of 'patients' in state- licensed or voluntary funded programs
Delaware	1c	Group home staff
Hawaii	2	Staff who work in group homes
Indiana	1a	Group home employees
Louisiana	1a	Staff of adult residential facilities, ICF/IIDs, developmental disabilities facilities, home- and community-based care
New Mexico	1b	Developmental disabilities providers in group home settings
North Carolina	1a	Staff in congregate living settings
Ohio	2	Critical risk workers in human services operations
Tennessee	1a	Staff in group homes
Washington	1a	Supported living staff



Key Findings

- States with early outbreaks tended to have more fully developed plans.
- Most states have thoroughly developed communication plans.
- 10 state plans explicitly prioritize people with I/DD.
- 11 state plans defined "essential workers" to include DSPs.
- 13 States explicitly included I/DD stakeholders in the planning process.



I/DD Stakeholders included in Planning

STATE	STAKEHOLDER(S) IDENTIFIED	
California	Department of Developmental Services	
Colorado	Disability advocacy groups and Cross-Disability Coalition	
Indiana	Division of Disability and Rehabilitation Services	
Kansas	Alliance for Kansans with Disabilities; InterHab (a state provider association)	
Montana	Organizations serving people with disabilities	
New Mexico	Monthly meeting of Disabilities Access & Functional Needs group	
North Carolina	Disability Rights North Carolina (the state's Protection & Advocacy organization)	
Ohio	Department of Developmental Disabilities	
Oregon	Representatives from long-term care facilities; representatives of community-based care organizations; disability support staff	
South Carolina	Advocates for special needs populations; the states Developmental Disabilities Council	
South Dakota	Department of Social Services; Department of Human Services	
Tennessee	Commission on Aging & Disabilities; Department of Intellectual & Developmental Disabilities	
Vermont	Developmental Disabilities Council; Disability Rights Vermont; Developmental Disabilities Services Division	



Final thoughts....

- The general oversight of states to recognize the I/DD community in planning and preparedness further reinforces our message of #ForgottenFaces.
- Advocate outreach to the NGA, DGA and RGA by ANCOR helping to encourage recognition of people with I/DD.
- Advocacy at the state level by State Associations and Providers is making a huge impact in the efforts to prioritize people with I/DD and those who support them.
- Keep up the good work!



Questions...





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