

Respondent



19

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21:56



Time to complete

1. Please provide your name, position title, and contact information. *

COmmunity outreach through things like town halls run by VA officials, but conducted in community setting- with the option of in person or virtual attendance. Open it up to the public not solely veterans, this information needs to be disseminated to everyone and more opportunity to give accurate information to the public the better.

2. Is this submission an idea for a Promising Practice or existing Promising Practice? *

- ☒ Idea for a Promising Practice
- ☐ Existing Promising Practice

3. What is the name of your Promising Practice? *

Community COVID Vaccine Town Hall

4. What type of Veterans does this practice serve? *

- ☐ Rural
- ☐ Urban
- ☒ Both

5. How does this practice promote vaccine acceptance? *

Provides a platform for dissemination of accurate information and opportunity for veterans or the public to ask questions and get answers from experts in person, experts who have also gotten vaccinated and who live in their communities.

6. What are the specific steps you took, or would take, to implement your practice and the timeline/timeframe for each? *

I would implement as soon as possible, reach out to public settings like churches, community centers, and universities that have space for public (socially distanced) town halls. I'd advertise publicly, possibly even on the news, and request media coverage. I'd make the town hall specific- advertise the topic of the town hall. I'd open the events to the public, not just the VA. This is a public health crisis, not a veteran crisis. Access to information should not be gated. I'd offer multiple town halls and include ID/vaccine experts, VA officials, mental health professionals, and media representatives with public facing presentation experience (e.g., understand how to de-escalate and how to couch answers in a way that is accurate and palatable). I'd make the town hall time-limited and structure the time for presentation and separate Q & A time. I'd get medical media to set up a streaming option as well, or broadcast at least one town hall on local television (PBS?). Coordinate to have vaccine sign-up on site. Have separate sign-up for VA location and for publicly run mass vaccination site. Can also provide space for privately approved vaccine clinics (e.g., CVS, Walgreens, grocery stores). This is something that should be going on in multiple locations, not at the national level. This needs to happen in our community for people to feel more connection. We do internal town halls regularly, with the director of our medical center updating staff in person and virtually. I'm using those meetings as a basis for this idea.

7. What departments are involved in implementing your practice? *

at individual VA medical centers: Public Relations, Legal, Media, Executive Directors Offices, Infectious Disease, Pharmacy (vaccine-ready training), Psychology, community representatives (e.g. pastor of church where town hall is being held).

8. What are the costs associated with your practice? *

Outreach tends to be expensive, but would ask staff to donate their time and use donated space. Each event/location would probably be around \$10,000. More if there is a broadcast fee paid for television coverage.

9. What primary metric data is tracked and collected to determine your practice's success? *

For in person attendees, have them fill out a feedback form asking their comfort with being vaccinated (comfort generally and then comfort with each EUA vaccine). Also watch if vaccine clinic utilization increased- at the local VA and in the community around the town hall (e.g., local pharmacies, mass vaccination sites).

10. What are the potential risks or barriers of implementing your practice and the proposed mitigations? *

There are potentially small legal or ethical risks if one of the town hall speakers gives inaccurate information or misrepresents information- but this is general information and not specific medical advice so risk is lower. Content may need to be pre-approved by Legal and Ethics depts. Same barriers to planning any public live event- scheduling difficulties, access to space, obtaining occupancy permits, coordinating with local media for coverage, coordinating with local municipalities regarding attendance limits and local regulations on social distancing/masking. In person events could need symptom screening, requiring more staff and equipment transport and set up.