

**SC DHEC Pee Dee COVID-19 –  
Regional Community Assessment Review and Equity Panels (CARE Panels)  
Initial Virtual Meeting  
April 27, 2021  
1:00 – 2:00 PM**

**Present:**

Jim Bruckner, SCDHEC-Pee Dee Region Health Director  
Tom Crawford, MUSC, Interim CEO of Florence Division  
Sandra Gilliard, St. James Health & Wellness, CEO  
Amanda Heirs, SCHA  
Greg King, SCDHEC-Pee Dee Region IT  
Ann Lewis, CEO, CareSouth Carolina  
Suzette McClellan, SCDHEC- Pee Dee Region Community Systems Director  
Lesli McGee, McLeod Health, Senior VP Care Coord. and Home Care Services  
Adam Parsons, Executive Director, Access Health Pee Dee  
Dr. Nancy Ofendo Reyes, Nursing Professor, SC Commission for Minority Affairs  
Madie Robinson, SC Chapter of the NAACP  
Dana Rogers, SCDHEC-Pee Dee Region, Secretary  
Heather Shelton, MD, SC Medical Association  
Brian Sponseller, MD, CMO, Carolina Pines RMC,  
Emily Way, SCDHEC  
Sheila Welch, Director, Vantage Point, SC Department of Aging

**Absent:**

Bruce Bailey, Alliance for Healthier SC, President and CEO, Tidelands Health  
Katie Dorrell, Williamsburg Rural Health Clinic, Practice Manager  
Tim DuBose, Lee County EMS, Director  
Chris Hardy, Greater Sumter Chamber of Commerce, President and CEO  
Ruthie Odom, Director of Covid Operations, SCDHEC Pee Dee Region  
John Williams, SCHA Representative

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**1. Welcome & Introductions**

- a. Dr. Brian Sponseller, Volunteer Panel Chairperson

**2. Panel Discussion SC DHEC Vaccine Dashboard**

- a. Pee Dee Data sent through email for panel review
  - i. Pee Dee Data 4.22.21 (excel spreadsheet)
    - 1. Information pulled directly from DHEC dashboard
    - 2. County population, pop eligible for vaccine, % of pop eligible for vaccine, total vaccine administered (1st & 2nd), vaccine doses completed.
    - 3. Data provided to aid in today's discussion based on last week's discussion of recommendation to identify least vaccinated by zip code
    - 4. % range from mid-teens - up to 38% depending on zip code.
    - 5. Some zip codes overlap into other regions (Kershaw county)

### 3. Q+A:

- a. Heather Shelton: Have patients that live in Marlboro county trying to get feedback re: reason for not vaccinating and seems to be a transportation issues, can we see about getting out into the communities via churches/community systems?
  - i. Jim - Lee and Marlboro are 2 of our counties that do not have hospitals, Ann Lewis with CareSouth provide services up there, several other entities help up in that area, Scotland Health, DHEC is averaging 1 event/wk., McLeod & MUSC have had events there. Trying to see about smaller more targeted events, will discuss on our coalition call this Thursday. Recommendation went up to DHEC re: Community Healthcare Worker's (CHW)/peer specialist.
  - ii. Ann Lewis - This area is CareSouth home territory, Marlboro has a large location that had 2 events a week. Demand has dropped off significantly, Moby's are starting back tomorrow with J+J vaccine, partnering with NAACP, big event in Wallace coming up. Participated in the Grand Rounds and Dr. Jane Kelly presented extraordinarily good information around addressing the issues. Will be doing an intense marketing campaign. Feel we need to tweak our messaging. anywhere depending on survey, 79-80% people responded hesitancy is dependency on Medical provider for answers, discouraged in many medical settings including own staff only (50-60%). Have work to do internally and tweak message externally. Worth listening to Dr. Kelly's recording and will send slides to group.
    1. CareSouth has a model of Community Health Workers (CHW), did use in the clinics due to staff shortages, now going out in mass, door knocking, going to paper the counties with information, getting a good response. CHW's are usually peers of the community and works well. Waiting to see what the J+J does tomorrow.
- b. Jim- Any thoughts on how to do additional clinics in Sumter?
  - i. Lesli- McLeod is trying to push towards distribution of vaccine at some of the small practices, by setting up for the practice's patients. In Sumter, we may need to look at the physicians, not try to have the practice sign up to be a provider, but partner with someone already out there. To figure out a way reach their individual patients and set up within the practice to deal with the challenges of keeping them from participating. When setting up for 300 but only 25 show up there is a waste of resources so there has got to be a better way for us to pull together, so we are not duplicating the same resources in the Sumter market. If the provider is key to that somehow we could work through the practice to get an appointment may help give credence, from a provider recommendation perspective.
- c. Dr. Reyes - Looking into the communities that do not have access through primary doctor (minority / underserved). Feedback from student is that the information needs to reach the population through Mexican stores, bakery, grocery stores or any place they go to. Interesting knowing there is a big chunk of the population without a PCP and are hesitant to reach out for fear of being identified or other reasons. Thoughts to share.
- d. Ann- Agriculture / Farmer event in McBee or Pageland with a huge turnout- farmers are very welcoming if we can go to them. Anyone in the CareSouth 5 counties and would like CareSouth to go to those areas, please reach out. Waiting on the pine straw farmers, very interested and prefer the J+J.
  - i. Lesli - Any feedback, comments or concerns with getting back in the groove with J+J?
    1. Ann- did a big outreach to the small business, thanks to DHEC for allowing these small closed events for 20-30 people and go to the worksite. All responded have said they only want Moderna, but tomorrow will be taking J+J and we will see. Moby's are going out an having a pop up at Northeastern Tech - will see how it goes.

- e. Suzette - DHEC has been gathering information and distributing information starting some partnerships with the catholic churches that have Hispanic services, some have schools in church and want to wait until school is out.
- f. Lesli- Is it worth it to find that information from testing events and go back through where testing events were held? Is there a piece of that, that may help?
  - i. Jim - Have an event in Lee Cty and only have 4 people sign up, we know the word is getting out but it's a challenge to get people to sign up.
  - ii. Dr. Sponseller - same thing is happening at Carolina Pines, were also in Lee Cty yesterday and did around 100 but way more vaccine than demand
  - iii. Lesli - McLeod is having the same issue, wondering if that testing info could help us circle back around to those areas. Lee Cty several events focus was on the migrant workers, thinking of those areas that maybe we haven't captured.
- g. Jim- Interesting with looking at the zip code data, that is where the challenge really comes in, because it's pretty much equal percentages regardless of where you look in those communities, also presents a challenge when determining which part of the community to go. Evident when looking at data the % is in the 20-30% except for 3 that are in the teens.
  - i. Dr. Sponseller - looking at Pageland with 17%, Carolina Pines has been there 4x
  - ii. Jim - Looking at Marlboro Cty, CareSouth has a major clinic open to anyone. Could look at Gable in Sumter we could look at. Turbeville have been to several times. If we pick anything less than 20% can start targeting but they are few and far between. In Lee Cty, 19.9% fully vaccinated (7000 vaccination), a lot of people still waiting to get a 2nd dose.
    - 1. Ann - interesting about Lee County, FQHC's tend to be very county service conscience, try not to cross lines, Maysville and Lynchburg have been the CareSouth focus, Dalzell, Rembert, Camden would not be in our area, may need to do a better collaboration with neighbors. Do have mobile resources, will commit to reach out to neighbors and offer support.
  - iii. Lesli - (Inaudible), for those who have not come back for the 2nd vaccine, doing some outreach to find out why. Hearing a lot say if I still must wear my mask I don't care to get the 2nd vaccine. There is some educational piece that (inaudible) need small steps to get to a bigger bowl...(inaudible) will require going to find things out, we don't all need to ask everybody we need to divide it up and have assignments to get the data....
    - 1. Suzette- Zero Covid SC did a canvassing event in Mullins (Marion Cty), 3 people from the coalition and 9 people from the community (council member, partnered with hot meals program). Very humbling 9/10 stated will not get vaccinated. Instead of signing people up started asking questions to find several were afraid of needles, shots, side effects, government plot, and dying. They realized they had to change their approach; originally thought they would go door to door to sign individuals up to get vaccine.
    - 2. Ann - Very on target, referenced in the chat, may want to ask Dr. Kelly (Epidemiologist with the state) to come address us. Will share the presentation with the CARE panel. Messaging is where we need to focus. Really encourage all to watch.
    - 3. Jim - Will put in a request for Dr. Kelly to come talk to us.
- h. Sheila - Where can I look to find break down by age, to see if we are targeting the seniors, or is it another age group to target?
  - i. Jim -Yes you can select on the data dashboard, can break down by 3 or 4 categories including age.
  - ii. Lesli - Is that data broken down by zip code.
    - 1. Jim - Will check and let know if broken down by zip code
- i. Madie - Is Dr. Bell still at DHEC? Find her to be a very good presenter for the African American population. Would like to take into consideration that she may have some ideas

to reach many of the population that we still need to reach, and the messaging needs to be looked at as far as helping people feel more comfortable.

- i. Yes, Dr. Kelly has been with DHEC about a year
- j. Sheila- Has anyone encountered groups that do not want to take the vaccine due to religious beliefs and how are you addressing that?
  - i. Jim- Information and education campaigns predominately

**4. Clarify Panel Recommendations for Submittal to DHEC:**

- a. Some sort of outreach for vaccination to independent providers - to become provider or partner to provide vaccine at site
- b. Latino/Hispanic outreach to identify places they frequent, grocery stores and others. Doing more farm worker / migrant worker events.
- c. Determine a type of outreach for individuals that haven't returned for 2nd doses
- d. Request Dr. Kelly to come to next Meeting.

**5. Date and Time for Next Meeting**

- a. Will be weekly on Tuesday's at 1pm

**6. Adjourn**