

**Lowcountry COVID-19 Community Assessment Review and Equity (CARE) Panel
April 29, 2021**

The Lowcountry COVID-19 Regional Community Assessment Review and Equity (CARE) Panel met on Thursday, April 29, 2021 at 1:00pm.

In attendance:

- Chief Michelle Mitchum (Pine Hill Indian Community Development Initiative, Chairperson)
- Taylor Lee (DHEC, Facilitator)
- Carmen Grice (DHEC, Secretary)
- Melanie Wooten (Hampton Regional Medical Center)
- Dr. Natasha Davis (NAACP)
- Danielle Scheurer (MUSC)
- Dr. Aretha Powers (Fetter Health Care Network)
- Dr. Hugh Durrence (Liberty Doctors)
- Letisha Scotland (Lowcountry Area Agency on Aging)
- Elaine Morgan (Berkeley County Chamber of Commerce)
- Dr. Faith Polkey (Beaufort Jasper Hampton Comprehensive Health Services, Inc.)
- Joel Taylor (Coastal Carolina Hospital)
- Dr. Christopher McLain (Roper St. Francis Healthcare)
- Tara Tsehlana (Roper St. Francis Healthcare)
- Dr. Olivia Brinkley (Bamberg Family Practice)

Welcome	<ul style="list-style-type: none"> • Thank you to everyone for attending.
Revisit Volunteer or Election of Secretary	<ul style="list-style-type: none"> • No nominations or volunteers for secretary position. • Carmen Grice will resume in the secretary position until we have a volunteer or nomination.
Recommendation Forms Review	<ul style="list-style-type: none"> • Taylor Lee went over the recommendations for vaccine clinic locations he received. <ul style="list-style-type: none"> ○ Rural areas where transportation is an issue (homebound and homeless). ○ Possibly working with churches and other providers to focus on the homeless population, youth at risk, and service agencies. • All of these areas are being addressed. DHEC has put out a bid to service homebound individuals, but no one has placed a bid at this time. A “bid” means an organization agrees to administer vaccines to homebound individuals. • The homeless population is being addressed. Thinking of delivering vaccines to the homeless shelters. We can stay in communication with the faith community. As the panel has contact within different churches, they can start discussions in the group.

	<ul style="list-style-type: none"> • You do not have to coordinate a vaccine clinic with DHEC, but if you do, we can add the location to the Vaccine Locator tool. Sometimes clinics are held in the same area close together, if they are not coordinated through DHEC. If DHEC is aware of potential events and can help coordinate the event, it would be easier to spread events out. • Per Letisha Scotland, is Agape not willing to participate in providing homebound vaccinations? Per Taylor Lee, Agape did a pilot with DHEC to provide vaccines for the homebound vaccines, but we haven't had any bids from organizations to take this over. He is not sure if the Agape pilot has concluded and will look into this. He will send out the link to access the bidding to the panel. • Per Tara Tsehlana, what is the process to request vaccine? Per Taylor, you must put in to be a provider to receive vaccines through DHEC. Once you are assigned to be a provider, coordination will take place.
<p>Maximum Use of Resources in Access Gaps</p>	<ul style="list-style-type: none"> • Is there any location we need to be focusing on? <ul style="list-style-type: none"> ○ No gaps identified.
<p>Outreach Opportunities</p>	<ul style="list-style-type: none"> • We have an opportunity as a panel to coordinate and schedule vaccinations. • Can this group create a scheduling system, so information gets out more effectively? Tara Tsehlana stated this is a great idea. • Chief Mitchum would like to gather information about where vaccines are located. It is hard to get social media broadcast in some areas. • The idea is to find out who is offering vaccines and what their schedule is. • Per Tara Tsehlana, there is a community partner that helps Roper St. Francis, so could we identify community partners in the next meeting. • Taylor Lee would like to suggest reaching out to the COVID team in the Lowcountry Region first. The team coordinates the majority of COVID vaccine clinics taking place. DHEC has coordinated many of these events, so this may be the best place to start. We may be startled by the overlap that exists right now. • Tara Tsehlana agreed to be the team lead in gathering a list of the locations of vaccine clinics. • Per Tara Tsehlana, Roper, MUSC, Fetter, St. James Health and Wellness have been sharing events in Berkley, Dorchester, and Charleston areas. Per Chief Mitchum, would the Charleston Tri-County be willing to come to the rural areas of North Orangeburg? Per Tara, there is a community partner with a mobile unit that has been able to go to a rural area. • Per Taylor Lee, a lot of the large events have less uptake now. A thought would be to identify small areas that we may need to focus

	<p>on to coordinate a very specific vaccine clinic to serve as few as 10 people or as many as 50 people.</p> <ul style="list-style-type: none"> • Chief Mitchum, is concerned that the pocket areas are getting missed. • We will work on a way to get the information out to those who do not have access to social media. • Per Dr. Natasha Davis, the NAACP partnered with DHEC for the state of SC and the pockets were identified. The campaign will run through the middle part of June to hit the small pocket areas. Per Taylor Lee, there is a lot of coordination that has already taken place or taking place. If you speak with someone on the COVID team, you will probably find out that there are many events already scheduled. We are working to get the proper timing of the events scheduled, so we can better serve the communities by spreading them out. • Per Danielle Scheurer, 3-5 times a week, we have a team that is willing to go out for a pop-up clinic. One of the biggest struggles is getting the word out about clinics prior to the event. They have even tried carrying flyers and advertising at the actual location before the event. • Per Dr. Christopher McLain, are we doing active engagement with those who are high risk and are not vaccinated? We can compare the Medicare beneficiaries to the vaccine locator list. Once we have this list, we can move to active communication to find out who is interested in receiving the vaccine. We can look at a location and try to get individuals that are interested to vaccine events. Per Taylor Lee, he isn't sure if we have a deficiency list, but this is a list the data team can work on gathering. • Per Elaine Morgan, in the rural area she is in, the issue with the Johnson & Johnson vaccine has now caused citizens to not want any vaccine. We may want to get communication out to try to get individuals to at least take one of the vaccines. Per Chief Mitchum, what does everyone think about creating a campaign to vaccinate? Per Dr. Chirstopher McLain, is DHEC already working on this? Per Taylor Lee, yes, there are many PSAs planned for not only television, but print as well. There are some precreated/predesigned materials on the DHEC website we can use. They can be distributed in social settings, churches, etc. <p>Follow up items:</p> <ul style="list-style-type: none"> ○ Create a list of the community partners for the next meeting.
Schedule Next Meeting	<ul style="list-style-type: none"> • The next meeting will be on May 13th from 1:00pm-2:00pm via Microsoft Teams.
Adjournment	<ul style="list-style-type: none"> • Meeting adjourned at 1:52pm