Adolescent Healthcare Providers: Enroll For COVID-19 Vaccine

May 25, 2021

Approximately 1.5 million COVID-19 cases in individuals 11 to 17 years of age have been reported to the Centers for Disease Control and Prevention (CDC) between March 1, 2020 through April 30, 2021. Pfizer-BioNTech COVID-19 vaccine has had emergency use authorization for 16 to 17 year-olds since April 15, 2021, and on May 12, 2021 Pfizer-BioNTech COVID-19 vaccine was authorized for emergency use for adolescents 12 through 15 years of age.

The Santa Barbara County Public Health Department is encouraging all adolescent healthcare providers to enroll in the COVID Vaccination Program to assist with vaccinating adolescents in our community. Your enrollment in the COVID-19 Vaccination Program will allow for your adolescent patients to receive their COVID-19 vaccine at their medical home with their trusted provider. Several vaccination sites including mobile vaccination sites and school sites operated by the Public Health Department are currently being offered throughout the county. Once these clinics conclude on July 31, 2021, individuals will be referred to their medical home and local pharmacies for vaccination.

Enrollment in the COVID-19 Vaccination Program

- How to Enroll in the California COVID-19 Vaccination Program:
  - Recorded Webinar
  - Enrollment Steps
- Additional enrollment support for healthcare providers serving adolescents are available through:
  - CMA resource center at vaccinenetwork@cmadocs.org or (800) 786-4262.
  - California COVID-19 Program Provider Call Center at covidcallcenter@cdph.ca.gov or (833) 502-1245, Mondays through Friday from 8AM–8PM.

Making a Strong Recommendation to Receive the COVID-19 Vaccine

- Patients consistently rank healthcare providers as their most trusted source of vaccine information. Your strong recommendation to get a COVID-19 vaccine is critical for vaccine acceptance.
- Make it clear to your patients that you recommend COVID-19 vaccination for them.
Tell your patients how important COVID-19 vaccines are to protect their health, as well as the health of their family and friends.

COVID-19 vaccines are new, and it’s understandable that your patients may have questions. Your answers can help them make an informed decision about getting vaccinated.

Make it clear that you understand they may have questions, and you want to answer them, so they feel confident in choosing to get vaccinated.

**Routine vaccinations continue to be necessary**

During 2020, as compared with 2019, an estimated

- 12% fewer children under the age of 3 years received an MMR vaccine,
- 19% fewer children ages 4-6 years received an MMR vaccine, and
- 20% fewer adolescents ages 11-13 years old received their Tdap booster.

**To bring or keep patients up to date, consider**

- Using the immunization registry and your electronic health record system to identify teens and children who have missed vaccinations and contact them to return to the clinic. CAIR2’s upgraded reminder/recall feature may be helpful.
- Plan socially-distanced, dedicated “immunization catch-up” clinics, especially to meet back-to-school demand.
- Consider novel immunization strategies such as walk-up and drive-through clinics.
- For adolescent patients presenting for COVID-19 immunization who are overdue on routine immunizations, administer COVID-19 immunization and routine immunizations at the same visit (see below for more information on co-administration).

**Co-administration of COVID-19 Vaccines with other Vaccines**

On May 14, 2021, [ACIP updated information on coadministration of COVID-19 vaccines with other vaccines](https://www.cdc.gov/vaccines/acip/index.htm). COVID-19 vaccines and other vaccines may now be administered without regard to timing, including simultaneous administration on the same day, as well as co-administration within 14 days.

Given the gaps in routine immunization noted above, recent ACIP guidelines may offer an opportunity to catch up adolescents with overdue immunizations as they receive COVID-19 vaccines.

When deciding whether to co-administer other vaccine(s) with COVID-19 vaccines, providers should consider whether the patient is behind or at risk of becoming behind on recommended vaccines, their risk of vaccine-preventable disease (e.g., during an outbreak or occupational exposures), and the reactogenicity profile of the vaccines.