



COVID-19 Vaccine Message Maps

January 18, 2021

Good vaccine communication has never been more challenging – or more important. We need to frequently share updated information and protect our communities from misinformation. To support health messengers, the Chicago Department of Public Health (CDPH) will issue this message map document on a weekly or as-needed basis

All Chicagoans have full permission to copy or adapt these messages for their communications. No credit is needed. We hope this document helps you answer questions from the community, prepare leadership for press briefings, update website content, write press releases, develop social media posts, and meet other communications needs.

Topline Messages for the Week (January 18, 2021)

- The safety of COVID-19 vaccines is a top priority. No steps are skipped during the clinical trial process. Vaccine safety checks are in progress and will continue.
- Getting vaccinated will help keep you from getting COVID-19 illness and may also protect people around you.
- People who have gotten sick with COVID-19 should still get vaccinated.
- The FDA has issued Emergency Use Authorizations (EUAs) for both the Pfizer-BioNTech vaccine (on December 11), and the Moderna vaccine (on December 18).
- The first COVID-19 vaccines will require two shots. The first shot starts building protection, but everyone will have to receive the second shot to receive maximum coverage from the vaccine.
- Vaccine supply is currently limited. While supply is limited, CDPH will follow federal guidelines for distribution and use of the vaccine. Healthcare workers and long-term care facility residents are prioritized to receive the vaccine first. As more vaccine becomes available in early 2021, front line essential workers and older Chicagoans will also receive vaccine.
- Though Chicago has not yet entered phase 1b, planning for transitioning into 1b has started. This week, hospitals and outpatient sites are continuing to prioritize healthcare workers for vaccination. Beginning January 18, if vaccination sites have not identified additional tier 1a healthcare workers for vaccination, surplus vaccine can start to be allocated to the highest risk patients over age 65 who live, work, or receive ongoing medical care in Chicago.
- Considerations for sub-prioritization include patients over 75 years of age, or patients over 65 years of age with significant underlying conditions, based on clinical judgment.
- CDPH began distributing Pfizer-BioNTech vaccine to all 34 hospitals in the city beginning the week of December 14. Hospitals continue to receive more doses of vaccine based on how many doses their facility has distributed and how many staff still require vaccine. Hospitals are also vaccinating other tier 1a priority healthcare workers, including outpatient providers in their neighborhoods. CDPH has started to distribute vaccines to Federally Qualified Health Centers (FQHCs) and other outpatient centers who have signed up to be vaccinators. The initial doses going to these facilities will be to vaccinate their health care staff and other people in 1a vaccine priority.
- **CDPH has organized CDPH-run vaccination sites which have started vaccinating healthcare workers not affiliated with a hospital or healthcare system. Invitations to make an appointment for vaccination will be sent out weekly in batches, with a goal that all healthcare workers in Chicago have access to start vaccination in the first several weeks of 2021. CDPH-run vaccination sites will likely be vaccinating healthcare workers through January into February. Vaccination is by appointment only and cannot accommodate walk-ins.**
- Pharmacy Partners (Walgreens, CVS, and PharmScript) continue to vaccinate staff and residents in long-term care facilities.
- **The vaccine will be offered to all Chicagoans who want it as soon as larger quantities become available, at no cost.**
- **People who are vaccinated should continue to comply with all other COVID-19 mitigation measures such as masking, social distancing, hand-washing, and quarantining after a close contact exposure to someone with COVID-19.**
- **There are no current plans to change PPE recommendations for healthcare workers who have been vaccinated.**

CDPH COVID-19 Vaccine Messages

Contents

Contents.....	3
COVID-19 Vaccine Status.....	4
Vaccine Safety	4
Vaccine Benefits.....	5
Vaccine Approval Process.....	6
Vaccine Availability.....	7
Prioritization & Vaccine Recommendations	8
Vaccine Distribution in Chicago	9
COVID-19 Vaccine Side Effects.....	10
Who should NOT get the COVID-19 vaccine?.....	10
How COVID-19 Vaccines Work.....	11
Vaccine Mandates	11
Vaccine Cost	12

COVID-19 Vaccine Status

As of Dec. 21 2020, two vaccines are available to prevent COVID-19 in the United States. The FDA issued an emergency use authorization (EUA) for the Pfizer-BioNTech vaccine on December 11, 2020. FDA issued a second EUA on December 18, 2020 for the Moderna COVID-19 vaccine. Scientists and doctors have been working on vaccine development since the beginning of the COVID pandemic. Around the world, many more vaccines are currently in development.

Pfizer-BioNTech COVID-19 Vaccine

- The FDA issued an Emergency Use Authorization (EUA) for the Pfizer-BioNTech vaccine on December 11, 2020.
 - The FDA has conducted a thorough evaluation of safety and efficacy information from over 36,000 clinical trial participants. The Pfizer-BioNTech vaccine is 95% effective in preventing symptomatic COVID-19 infections.
 - The most commonly reported side effects, which can last up to several days, are pain at the injection site, tiredness, headache, muscle pain, chills, joint pain, and fever. More people experience these side effects after the second dose than the first dose and side effects are less common in people > age 55.
- The Pfizer-BioNTech vaccine is administered as two shots, 21 days apart.
- The Pfizer-BioNTech COVID-19 vaccine does not use a live virus and cannot give someone COVID-19.

Moderna

- The FDA issued an Emergency Use Authorization (EUA) for the Moderna vaccine on December 18, 2020.
 - The FDA has conducted a thorough evaluation of safety and efficacy information from over 30,000 clinical trial participants. The Moderna vaccine is more than 94% effective in preventing symptomatic COVID-19 illness.
 - Similar to the Pfizer vaccine, the most commonly reported side effects, which can last up to several days, are pain at the injection site, tiredness, headache, muscle pain, chills, joint pain, and fever. More people experienced these side effects after the second dose than after the first dose, and side effects are less common in people > age 65.
- The Moderna vaccine is administered as 2 shots, 28 days part.
- The Moderna vaccine does not use a live virus and cannot give someone COVID-19.
- The University of Illinois at Chicago (UIC) is one of 100 clinical trial sites in the United States for the Moderna vaccine. 75% of trial participants enrolled at the UIC site are from racial/ethnic minorities.

Oxford AstraZeneca

- The Oxford Astra Zeneca vaccine is still in phase 3 clinical trials, including in Chicago, at Stroger Hospital and Rush University.

Vaccine Safety

Vaccine safety is a top priority. Vaccine safety checks are in progress and will continue as long as a vaccine is available. COVID-19 vaccines cannot cause COVID-19 infection as they do not use a live virus.

Vaccine safety is a top priority.

- Vaccines are one of the best defenses we have against infectious diseases.
- There is solid medical and scientific evidence that the benefits of approved vaccines far outweigh the risks.
- The United States' long-standing vaccine safety system ensures vaccines are as safe as possible. As science advances and new information becomes available, this system will continue to improve.
- The U.S. government maintains the largest, most robust, and most advanced vaccine safety monitoring systems available in the world.
- Ensuring vaccines are safe is a critical process that begins during vaccine development and clinical trials and continues after vaccines are authorized or approved for use.

No steps are skipped during the clinical trial process for COVID-19 vaccine.

- Vaccines are evaluated during three phases of clinical trials before they can be authorized for use by the Food and Drug Administration.
- These clinical trials require thousands of people and months of data.
- COVID-19 vaccine development has been faster than normal because 1) so many people volunteered for the clinical trials; 2) COVID-19 outbreaks across the United States made it possible to rapidly see that volunteers who received placebo (salt water) shots were getting COVID-19 at much higher rates than volunteers who received vaccine; 3) development steps have been taking place at the same time instead of one after another; and 4) 21st century technologies are being utilized in vaccine development and manufacturing.

Vaccine safety checks are in progress and will continue.

- Pausing or cancelling a vaccine trial is a normal part of the vaccine approval process, and it means the safety checks are working as designed.
- After a vaccine is authorized, FDA and CDC will continue to monitor it using three federal safety systems that are already in place.
- Safety monitoring allows experts to determine what problems after vaccination are vaccine-related, and which are not. Part of this process is making sure that any health events are not happening in vaccinated groups more frequently than in the general public.

Vaccine Benefits

Safe and effective COVID-19 vaccines are an important tool for ending the global pandemic. Vaccines can protect individuals in different ways. Vaccines also protect the people around you - including Chicago's healthcare workers and their patients.

Safe and effective COVID-19 vaccines are an important tool for ending the global pandemic.

- Vaccines work to protect people by helping the body produce immunity.

- **A COVID-19 vaccine must meet standards for effectiveness from the FDA. Reports from clinical trials for two vaccines (Pfizer and Moderna) indicate they are up to 95% effective in preventing people from getting ill due to COVID-19 infection.**
- Vaccines have already helped us reduce vaccine preventable diseases in Chicago (such as measles, influenza, and diphtheria).

Vaccines can protect individuals in different ways.

- Getting a vaccine may help keep you from getting infected OR may keep you from getting very sick or being hospitalized if you do get infected.
- Protection from vaccines can depend on your age and immune system.
- Protection from vaccines can last anywhere from a few months to your whole life.
- The length of protection achieved from various COVID-19 vaccinations will continue to be studied going forward.

Vaccines also protect the people around you - including Chicago's healthcare workers and their patients.

- Stopping a pandemic requires using all the tools available.
- There is not enough information available about the COVID-19 vaccine to know if or when the CDC might change its guidance about other COVID-19 prevention and control measures.
- **People who are vaccinated should continue to comply with all other COVID-19 mitigation measures such as masking, social distancing, hand-washing, and quarantining after a close contact exposure to someone with COVID-19.**

Vaccine Approval Process

The FDA can issue Emergency Use Authorizations (EUAs) for vaccines. The issuance of an Emergency Use Authorization (EUA) is different than an FDA approval (licensure) of a vaccine.

- During a public health emergency, the FDA can use a process called "Emergency Use Authorization" (EUA) to allow the use of medical products that are not yet approved to diagnose, treat, or prevent serious or life-threatening diseases when certain criteria are met.
- For a vaccine to receive an EUA, the FDA must determine if the vaccine's benefits outweigh its risks based on data from rigorous clinical trial(s).

Clinical trials test safety and effectiveness in three phases using thousands of volunteers before it is authorized.

- **Phase I** tests for safety in a small number of people.
 - **Phase II** tests hundreds of people with different characteristics (such as age and health status). This is to understand effectiveness and side effects.
 - **Phase III** tests thousands of people to assess safety and effectiveness.
- Additional information on EUAs: <https://www.fda.gov/vaccines-blood-biologics/vaccines/emergency-use-authorization-vaccines-explained>
 - Manufacturers whose COVID-19 vaccines are authorized under an EUA must continue

to obtain additional safety and effectiveness information from clinical trial participants.
Permission from the FDA is required before a vaccine can be used in the United States.

- The FDA also sets requirements for manufacturing the vaccine and reporting side effects.

After the FDA authorizes or approves a vaccine, **the CDC recommends how the vaccine should be used with help from the Advisory Committee on Immunization Practices (ACIP).**

- ACIP is a federal advisory group made up of medical and public health experts.
- ACIP recommendations are reviewed and approved by the CDC Director and the U.S. Department of Health and Human Services.

Vaccine Availability

Chicago is currently distributing vaccine for healthcare workers and long-term care facility residents. **Though Chicago has not yet entered phase 1b of vaccination, planning for transitioning into 1b has started.** This week, hospitals and outpatient sites are continuing to prioritize healthcare workers for vaccination. Beginning January 18, if vaccination sites have not identified additional tier 1a healthcare workers for vaccination, surplus vaccine can start be allocated to the highest risk patients over age 65 who live, work, or receive ongoing medical care in Chicago.

- **Considerations for sub-prioritization include patients over 75 years of age, or patients over 65 years of age with significant underlying conditions, based on clinical judgment.**

In the beginning, there will not be enough COVID-19 vaccine for everyone. The goal is to have a safe and effective vaccine available to all Chicagoans who want it.

- Chicago's 34 hospitals began receiving **initial shipments of Pfizer vaccine during the week of December 14, 2020. Chicago will continue to facilitate Pfizer vaccine shipments to hospitals based on vaccine usage and ongoing needs.**
- Moderna vaccine shipments are being distributed to federally qualified health centers (FQHCs) and other outpatient centers that are enrolled as COVID-19 vaccine providers so that they can vaccinate their healthcare workers. Moderna vaccine shipments are also being sent to Pharmacy partners (Walgreens, CVS, and PharmScript), who started vaccinating residents of long-term care facilities during the week of 12/28/20.
- **CDPH is arranging for health care workers who are not part of a hospital or healthcare system to be vaccinated. Invitations to schedule a vaccination appointment are being sent out weekly in batches. Vaccinations are by appointment only, and these sites do not accommodate walk-ins. CDPH is aiming for all healthcare workers in Chicago to have access to their first dose of vaccine by the end of January/early February.**
- CDPH and partners are planning for ongoing distribution of COVID-19 vaccines across the City during the winter and spring.

In the beginning, vaccine supply will be very limited - there will not be enough COVID-19 vaccine for everyone.

- The federal government decided to send small amounts of vaccine right away instead

of waiting until they can send enough for everyone.

The goal is to have a safe and effective vaccine available to all Chicagoans who want it.

- The City of Chicago will share updates on vaccine availability within Chicago at www.chicago.gov/COVIDvax.
- When vaccine becomes more widely available, the [VaccineFinder](#) website will be updated to help Chicagoans find COVID vaccine.
- To sign up for more information on the vaccine rollout in Chicago, including updates on when, where, and how vaccination may be offered to you, go to <https://covidcoach.chicago.gov/>

Prioritization & Vaccine Recommendations

- The Advisory Committee on Immunization Practices (ACIP) makes recommendations to the Centers for Disease Control and Prevention (CDC) about use of vaccines that receive Emergency Use Authorization (EUA) from the Food and Drug Administration (FDA). People at high risk of getting exposed to COVID-19 or getting very sick from COVID-19 will be vaccinated first.
- The Chicago Department of Public Health Immunization Program already follows ACIP schedules for childhood and adult vaccinations.
- Many states and cities, including Chicago, will follow ACIP guidance to help guide its COVID-19 vaccination efforts across different groups of people.
- Chicagoans can learn more about ACIP's goals, values, and decisions regarding COVID-19 vaccines at this [website](#).

People at high risk of getting exposed to COVID-19 or getting very ill from COVID-19 will be vaccinated first.

ACIP has made official recommendations for initial vaccine priority for two groups:

- 1a – Health care personnel and long-term care facility residents
- 1b – Frontline essential workers and people age 75 and older
- Governor Pritzker has announced that people age 65 and older will also be included in the state's 1b priority group for vaccination. Chicago will also include people age 65 and older for vaccination in group 1b, however special priority will be made to vaccinate people over age 75 within the 1b priority group.
- Chicago has not yet entered phase 1b of COVID-19 vaccination but has started transition planning for frontline workers and Chicagoans age 65 and older.
- For more information about vaccine rollout as well as when, where, and how you may be offered COVID-19 vaccination, sign up at <https://covidcoach.chicago.gov/>.

ACIP has recommended that frontline essential workers in group 1b include: firefighters, police officers, corrections officers, food and agricultural workers and U.S. postal service workers, manufacturing workers, grocery store workers, public transit workers, and people who work in education and child care.

ACIP has not finalized its recommendations regarding essential workers and individuals with medical conditions to be included in group 1c. More details regarding specific

groups of essential workers and people with chronic medical conditions to be included in 1c priority are expected from the CDC/ACIP.

It is likely that Illinois Department of Public Health guidance for priority group 1b and 1c will differ slightly from ACIP guidance.

CDPH is working with federal, state, and community partners to plan for Chicago's needs. Detailed priority information and vaccination timelines will become available as more vaccine becomes available in Chicago.

- Plans will take into account various factors, including vaccine effectiveness, level of disease in different community areas, number of doses needed, storage requirements, vaccine demand, and more.
- Keeping the public informed is an important part of the planning process. Chicagoans can visit the [CDPH website](#) for the latest updates.

Vaccine Distribution in Chicago

- Each COVID-19 vaccine that the FDA authorizes will have different instructions for shipping and storage. CDPH and community partners have skills and systems in place to overcome these challenges. The federal government oversees a centralized system to allocate, order, distribute, and track COVID-19 vaccines.
- CDPH communicates regularly with community partners to help them get ready.
- CDPH's distribution plans will remain flexible as we find out more about how many doses are available and who the CDC recommends for vaccination.
- CDPH has allocated initial COVID-19 vaccine doses to all 34 hospitals in the city, including small and safety net hospitals, to ensure the individuals and communities most impacted by the pandemic are prioritized for early vaccination.
- CDPH is working with partners to open vaccination clinics for other healthcare workers, which are by appointment only. These clinics have started vaccinating healthcare workers during the week of 12/28/20 and will continue into February.
- CDPH is also prioritizing vaccination delivery to long-term care facilities, including staff and residents. Long-term care facilities have been severely impacted by the pandemic. Long-term care facilities are being vaccinated by Pharmacy partnerships with Walgreens, CVS and PharmScript.
 - 49% of residents and 58% of staff in nursing homes in Chicago are Black.
- Each COVID-19 vaccine that the FDA authorizes will have different instructions for shipping and storage.
- In general, vaccines are stored in cold places like refrigerators, freezers, or coolers.
- Some of the new COVID-19 vaccines require ultra-cold storage temperatures (as low as minus 100°F) to be effective.
- Vaccines that need special equipment may come with instructions if that equipment is not available.
 - Example: The Pfizer vaccine can be stored for a few weeks without ultra-cold freezers using the box it is already shipped in and dry ice.

CDPH and its partners have skills and systems to overcome these challenges.

- CDPH has an existing system to get vaccines to vaccination sites.
- Vaccine temperatures are tracked throughout their trip. Staff will be able to tell quickly if a vaccine shipment gets too hot or too cold.

- Scientists will keep testing the vaccine at different temperatures to improve shipping processes.

COVID-19 Vaccine Side Effects

Side effects are normal after COVID-19 vaccination, and they are a sign that your body is building protection. These side effects may affect your ability to do daily activities, but they should go away in a few days. The safest way to be protected against COVID-19 is to be vaccinated.

Some side effects are common after receiving COVID-19 vaccines.

- These side effects may affect your ability to do daily activities, but they should go away in a few days.
- You may have pain and swelling of the on the arm where you received the shot.
- You may also have fever, chills, tiredness, and headache.
- **COVID-19 vaccination is the safest way to help build protection against COVID-19.** Before any vaccine can be authorized or approved for use, the FDA must determine that the vaccine is safe and effective. **Safety monitoring will continue.**
- COVID-19 vaccination will help protect you by creating an antibody (immune system) response without having to experience sickness.
- COVID-19 infection may offer some protection against repeat infection (natural immunity), but experts don't know how long this protection lasts, and the risk of severe illness and death from COVID-19 far outweighs any benefits of natural immunity.
- If a safety issue is detected, immediate action will take place to determine if the issue is related to the COVID-19 vaccine and determine the best course of action

Who should NOT get the COVID-19 vaccine?

Most people are able to get the COVID-19 vaccine, once supplies allow for their priority group to be vaccinated. A few groups of people should not get the vaccine, and some others should consult with their doctor or follow special procedures.

People who should NOT get the COVID-19 vaccine currently

- Anyone with a previous severe or immediate allergic reaction (i.e., one that causes anaphylaxis or requires medical intervention) to a COVID-19 mRNA vaccine dose, a component of the COVID-19 vaccine, or polysorbate
- Those younger than 16 years of age
- People currently isolating or experiencing symptoms of COVID-19; these people can get vaccinated once they have finished their isolation period and their primary symptoms have resolved.
- People who are on quarantine due to a close contact exposure to someone with COVID-19. These people should be vaccinated when they are out of quarantine (with exceptions for those living in congregate facilities who can be vaccinated when vaccine is available to them).

People who may get the vaccine after considering risks and benefits and/or consulting with their healthcare provider

- Individuals with a history of severe or immediate allergic reaction to any vaccine or injectable medication (These individuals should be observed for 30 minutes after receipt of the vaccine.)
- Pregnant women
- People with certain immune-compromising conditions
- Breastfeeding women
- People on anticoagulants

How COVID-19 Vaccines Work

COVID-19 vaccines work in different ways to offer protection, but with all types of vaccines, the body develops immune system “memory” that helps fight the virus in the future.

Currently, there are three main types of COVID-19 vaccines. Each type of vaccine prompts our bodies to recognize and protect us from the virus that causes COVID-19. None of these vaccines can cause COVID-19 illness.

- **Messenger RNA (mRNA) vaccines** teach our cells how to make a protein from the virus that causes COVID-19.
 - This protein causes an immune response inside our bodies.
 - Our immune system remembers this protein so it can respond later on if we are exposed to COVID-19.
 - mRNA vaccines do not contain any virus and mRNA does not become a permanent part of the body
 - Like all vaccines, mRNA vaccines help protect us, but without the risks of getting sick from a disease.
- **Vector vaccines**, such as the Oxford Astra Zeneca vaccine, use a weakened virus to carry the instructions for making a coronavirus protein into our cells.
 - When our cells make this protein, it causes an immune response inside our bodies.
 - Our immune system remembers this protein so it can respond later on if we are exposed to COVID-19.
 - Like all vaccines, vector vaccines help protect us, but without the risks of getting sick from a disease.
- **Protein subunit vaccines** include small pieces proteins from the virus that causes COVID-19.
 - Once vaccinated, our immune system recognizes that the proteins don’t belong in the body and begins building an immune response.
 - If we are ever exposed in the future, memory cells will recognize and fight the virus.

Vaccine Mandates

Vaccines can be mandated under certain circumstances, but there are no plans for

COVID-19 vaccine mandate by the City at this time. CDPH is working with community partners to provide Chicagoans with the information they need to make safe and healthy decisions about vaccination. CDPH prioritizes its residents' trust and safety.

In general, states and employers do have the legal authorities related to vaccine mandates. In Illinois, mandates for other vaccines are most often used by employers to protect the health of workers, their patients, or their students. For example,

- the state can mandate FDA approved vaccines (e.g. measles) for school children
- a hospital can mandate FDA approved vaccines for employees
- the military (as an employer) can mandate vaccinations for soldiers and civilian staff
- The Equal Employment Opportunity Commission has initial guidance addressing COVID-19 vaccine considerations for employers.

CDPH is working with partners to provide Chicagoans with the information they need to make safe and healthy decisions about vaccination.

- Education and communications resources are available at www.chicago.org/COVIDvax.
- CDPH considers the needs of different audiences as it develops new communications.
- If you have specific questions about whether a vaccine is right for you, you can ask your healthcare provider.

CDPH prioritizes Chicagoans' trust and safety.

- When a FDA-authorized vaccine is available, some public leaders, nurses, doctors, respiratory therapists, and other health care workers will share their stories of getting vaccinated to help others to make their decision about getting vaccination.
- Chicagoans who get a COVID-19 vaccine will be protecting themselves and those around them - including those who can't get the vaccine.
- If you see rumors being spread of a City COVID-19 vaccine mandate, protect others by sharing official information from www.chicago.org/COVIDvax.

Vaccine Cost

Resources are needed for the development, distribution, and administration of the COVID-19 vaccine. The CDC has stated that cost will not be an obstacle for the American people to get vaccinated against COVID-19. CDPH is working with state, federal, and local partners to ensure all Chicagoans have access to the COVID-19 vaccine at no charge.

Resources are needed for development, distribution, and administration of the COVID vaccine.

- Development costs include researching and manufacturing of the vaccine itself.
- Distribution costs include shipping the vaccine to states, Tribes, and territories.
- Administration costs include giving the vaccine to Chicagoans at hospitals, clinics, pharmacies, or other locations.

The CDC has stated that cost will not be an obstacle for the American people to get vaccinated against COVID-19.

- Since March of 2020, the U.S. government has funded several different companies to research, develop, and manufacture a vaccine.
- The U.S. government will work with McKesson Corporation to distribute a vaccine and related (ancillary) supplies. The CDC already uses McKesson to distribute childhood and flu vaccinations.

- The Coronavirus Aid, Relief, and Economic Security (CARES) Act and other guidance from the U.S. government set more detailed rules for COVID-19 vaccine costs.

CDPH is working to ensure all Chicagoans have access to the COVID-19 vaccine at no charge.

- In general, health care providers are not allowed to bill a patient for the cost of administering the COVID-19 vaccine.
- Your provider may charge your health insurer an administration fee related to the vaccine dose. If you have questions, please reach out to your health insurer or benefits administrator.
- If you are uninsured and a fee is charged by your provider, the fee may be paid by HRSA (Health Resources and Service Administration).

CDPH – Chicago Department of Public Health— www.chicago.gov/COVIDvax

FDA – U.S. Food and Drug Administration – www.fda.gov

CDC – U.S. Centers for Disease Control and Prevention – www.cdc.gov