COVID-19 and serious mental illness: A new role for psychiatric providers as vaccine ambassadors

June 14, 2021





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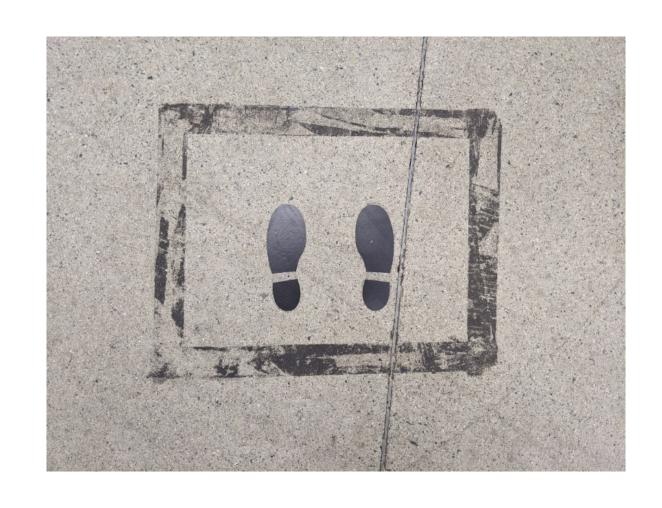
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Disclosures

I have the following relevant financial relationship with a commercial interest to disclose (recipient SELF; content area SCHIZOPHRENIA):

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THE PROBLEM



The shocking reality...

Risk factors for mortality from COVID-19

#1 Age

#2 Diagnosis of schizophrenia

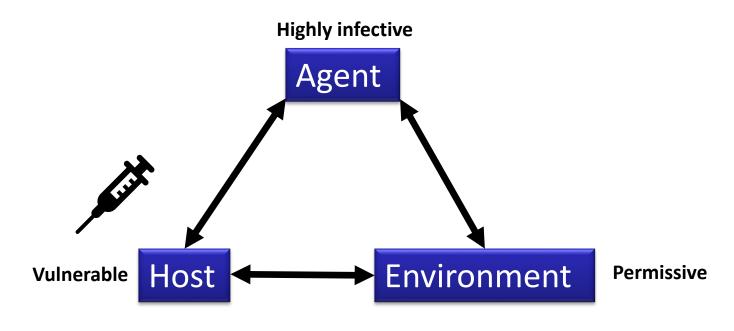
"Tragic" epidemiologic triad of SMI and COVID-19

Psychiatric illness

- -Acute psychosis/mania
- -Disorganization
- -Negative symptoms
- -Cognitive difficulties

Medical comorbidities

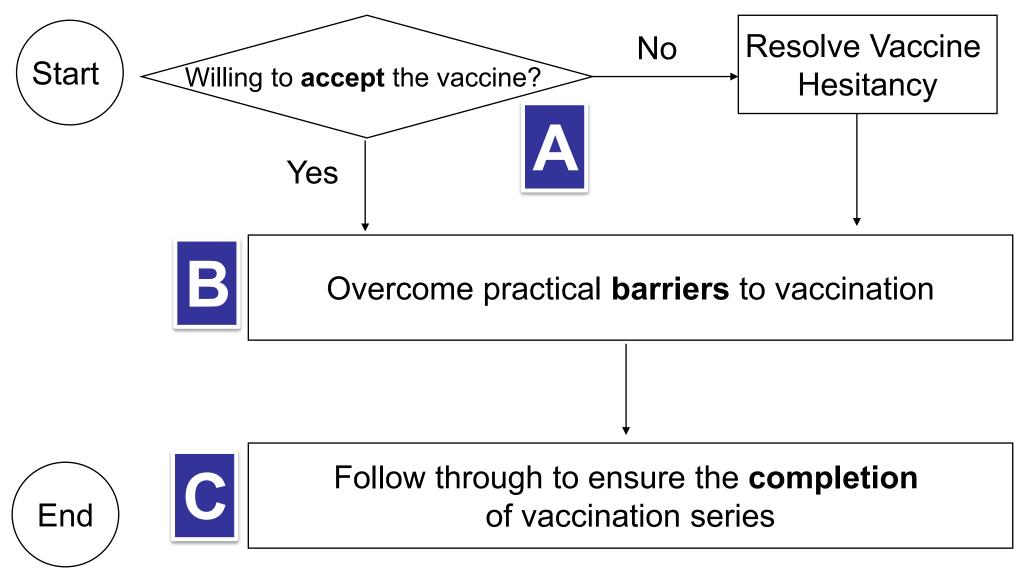
- -Obesity
- -Smoking
- -Lung disease
- -Diabetes



Crowded living quarters Poverty

Freudenreich O et al. Current Psychiatry. 2020;19(9):24-39.

Operation Warp Speed alone is insufficient







Erich Lindemann Mental Health Center Boston, Massachusetts

THE SOLUTION



QI project at Freedom Trail Clinic



Problem

- Patients with SMI have lower vaccination rates than general population
- Psychiatric providers are a missed opportunity (trust, skill set, frequent contact)

Aim

- Achieve 90% COVID-19 vaccination rate in our clozapine clinic
- Intervention
 - Engage and enlist psychiatric providers in the vaccine effort
 - Improve process (standardize vaccine discussion, tracking tool)
- Outcome
 - Pending (target date June 30, 2021)

Preventive care (vaccinations) as legitimate role for mental health care system

- Increase COVID-19 vaccination uptake
 - Enlist mental health staff to overcome barriers
 - Ensure patient follow-up with vaccination series completion
 - Explore mobile clinic at the FTC (with a pharmacist) to offer "shots in arms" in a mental health setting
- Broaden vaccination efforts beyond COVID-19
 - Annual flu vaccine
- View vaccination equity as part of larger effort to reduce health disparities

Project Leader

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Project Sponsors

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THANK YOU!





