



NATIONAL STUDENT RESPONSE NETWORK

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FROM: National Student Response Network (NSRN) on behalf of the undersigned allies and our network of 6,000+ health professions students nationwide

TO: COVID-19 Task Force and Biden-Harris Transition Team

SUBJECT: Accelerating Vaccination Rate by Involving Health Professions Students Nationwide

Honorable COVID-19 Task Force Members,

We admire your service and leadership in this time of national need. We write to respectfully suggest that national involvement of health professions students can accelerate mass COVID-19 vaccination toward and beyond President-elect Biden's goal of administering 100 Million vaccinations in the first hundred days of the new Administration.¹ Some states and health professions schools have already started involving health professions students in vaccination efforts. However, the full potential of the hundreds of thousands of health professions students in the United States cannot be realized without national leadership and policy. Thus, we also offer policy proposals for consideration to enable governmental entities, relevant industries, and grassroots organizations to coordinate a health professions student response beyond the existing patchwork approach.

Background: Overburdening of the Healthcare Workforce Impedes Vaccination Progress

The recent COVID-19 peak has overburdened our healthcare system in many places,^{2,3} compromising even routine patient care⁴ and placing further demands on health workers already "working sixteen hour shifts, day after day."⁵ Vaccination rates fall further behind the target with every passing day, and additional challenges beyond an overburdened workforce⁶ include decentralized, patchwork approaches⁷ and vaccine hesitancy even among health workers.⁸

Proposed Approach: Leverage the Unique Value of Untapped Health Professions Students

National involvement of health professions students is crucial toward addressing vaccination workforce shortages. The hundreds of thousands of health professions students nationwide represent a largely untapped, eager, and altruistic workforce that has previously administered vaccinations for influenza⁹ and H1N1.^{10,11} In the context of COVID-19, health professions students can help address workforce needs and engage in hyperlocal science communication around COVID-19 vaccines.¹² Health professions students are uniquely valuable to vaccination efforts for reasons including: (1) willingness to volunteer on an immediate basis as states face financial challenges to workforce expansion; (2) ability to help in a variety of roles, including administering vaccines; conducting patient intake, immediate post-vaccination observation, and follow-up (e.g., for a second dose); communicating vaccine science and phone banking; aiding vaccination site logistics and operations; distributing PPE; completing documentation; and more; (3) being trusted as community-centric health communicators in communities across the country, including those less likely to trust government and healthcare information sources; (4) status as low-risk vaccinators given age, early access to receiving vaccinations themselves, and good standing at an accredited program.

Precedents: Many Support Involving Students and A Patchwork Approach Exists Today

Already, seven states have enlisted health professions students to administer COVID-19 vaccinations.¹³ In Massachusetts¹⁴ and New York,¹⁵ recent orders from the Commissioner of Public Health and Governor, respectively, authorize certain health professions students to administer COVID-19 vaccines. In Michigan¹⁶ and New York,¹⁷ public volunteer registries now recruit health professions students for vaccination efforts. Further, health professions schools have begun involving

their students in vaccine administration; for example, medical and nursing students at the University of Massachusetts will administer vaccines in Worcester, MA and are able to help train one another.¹⁸

Limitations of Precedents: School-by-School Approach Insufficient for Rapid Mobilization

While precedents offer key models for student involvement, they are insufficient for a national response due to their patchwork nature, which creates a tedious bottleneck of arranging liability agreements with individual schools and adapting to guidelines (e.g., for training) that vary across locales. To further illustrate the benefit of federal action, we share that the key challenge in ongoing conversations about mass placement of health professions students in the National Student Response Network (NSRN) at vaccination sites of one of the nation's largest pharmacy chains is the need for liability agreements on a school-by-school basis. The current patchwork approach requires industry and grassroots organizations to negotiate hundreds of agreements with individual schools and states to nationally involve health professions students.

Policy Proposals to Overcome Current Limitations: Addressing Liability and Training

National guidance and policy can quickly expand the vaccination workforce by enabling the involvement of hundreds of thousands of health professions students. Thus, numerous national health professions associations,¹⁹ academic physicians,^{20,21} and health professions students²² are calling on the federal government to encourage and enable greater student involvement by overcoming liability and training obstacles. Federal guidance would help local and state governments, relevant industries, and grassroots organizations better involve health professions students in vaccination efforts. Thus, we provide specific policy proposals and model text pertaining to liability and training on the subsequent two pages.

Grassroots Mobilization: Bottom-Up Approaches Complement Top-Down Strategies

Grassroots mobilization of health professions students can hasten the placement of students at vaccination sites and complement the top-down recruitment efforts of governments and relevant industries. To streamline grassroots mobilization and training, we offer the National Student Response Network (NSRN) as a potential partner to the Department of Health and Human Services and the COVID-19 Task Force. NSRN is a growing 501(c)(3) network of over 6,000 health professions students helping hospitals, health departments, and non-profit partners serve communities in need during the COVID-19 pandemic. Since April 2020, NSRN volunteers have supported COVID-19 testing, contact tracing, PPE distribution, telehealth, healthcare worker support, patient education and support, logistics, and much more. NSRN is also in an ongoing conversation with one of the nation's largest pharmacy chains about involvement of NSRN health professions students at pharmacy vaccination sites nationwide while complying with local, state, and national policies. Furthermore, NSRN recently presented at the MIT Vaccines for All Conference²³ on involvement of health professions students in mass COVID-19 vaccinations, and NSRN is now in preliminary conversations with MIT Media Lab, Trusted Pandemic Technologies, and PathCheck Foundation toward development of a mobile application-based platform in preparation for scaling the placement of properly trained students at vaccination sites in need of increased person-power. As a centralized network for grassroots health professions student service with national and local coordination, NSRN aspires to serve as a model for the mobilization of health professions students in times of crisis. We are ready and eager to serve in mass COVID-19 vaccination efforts.

Kindly let us know if there are any questions or if we can be of help in any manner.

Very Respectfully,

National Student Response Network (NSRN)

on behalf of the undersigned allies and our network of 6,000+ health professions students nationwide

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Policy Proposals and Model Text Pertaining to Liabilities and Training:

A) Recommendations for federal policy pertaining to liabilities:

1. Broaden the definition of “health care professional” to explicitly include health professions students in the CARES Act. In doing so, the liability protections extended to healthcare professionals that are responding to a public health emergency as volunteers may also apply to health professions students who volunteer to administer COVID-19 vaccines.²⁴ A precise definition for health professions students would be implicated with this change. Existing models for eligibility and training criteria include the frameworks provided by NY Governor Andrew Cuomo’s December 2020 executive order²⁵ and MA Public Health Commissioner Monica Bharel’s December 2020 order.²⁶ We also provide additional model language for this definition extension proposal:
 - a. In any emergency declared by the Secretary of Health and Human Services under section 319 of the PHS Act, including a pandemic or virus threat, extend the definition of “health care professional” under CARES Act Sec. 3215 (d)(2) to include health professions students.²⁷
 - b. The term “health professions student” means appropriately trained students that are enrolled in a medical, nursing, physician assistant, or pharmacy degree program that is approved or accredited for licensure.
 - c. Note: additional health professions included in Governor Cuomo’s executive order include dentistry, podiatry, and midwifery. Optionally, degree programs (e.g., MD, DO, MSPAS, PharmD, LPN, RN, ADN, BSN, MSN, DNP, DNAP, PhD in Nursing) could be specified rather than professions (e.g., medicine, PA, pharmacy, nursing).
2. Explicitly designate health professions students as Covered Persons in the Public Readiness and Emergency Preparedness Act. The Secretary of Health and Human Services issued a Declaration to provide liability immunity to Covered Persons against any claims of loss related to administration or use of medical countermeasures, amongst other covered activities relating to a public health emergency, which includes administering vaccines.²⁸ Explicitly designating health professions students as Covered Persons would extend these liability protections to health profession students administering COVID-19 vaccines. We provide model language for this policy extension proposal, which would include the same definition of health professions student previously outlined:
 - a. In any emergency declared by the Secretary of Health and Human Services under section 319 of the PHS Act, including a pandemic or virus threat, in addition to the Covered Persons under the PREP Act (PHS Act 317F-3(i)(2)) as well as others set out in paragraphs (3), (4), (6), (8)(A) and (8)(B), health professions students may receive liability immunity authorized by PHS Act 319F-3(a)(1).²⁹

B) Recommendations for federal guidance to state governmental entities:

1. Encourage state governmental entities to provide the following liability protection through gubernatorial executive order, public health commissioner order, or by extending or modifying relevant Emergency Management laws and civil immunity statutes to definitively protect health professions students administering or supporting administration of COVID-19 vaccines. The previously outlined definition of health professions student may apply.
 - a. During a state of public health emergency, any health profession student shall not be civilly liable for causing the death of, or, injury to, any person or damage to any property in the course of administering or supporting the administration of COVID-19 vaccinations in support of the State’s response to the COVID-19 outbreak, except in the event of gross negligence or willful misconduct.

- b. The Commissioner of Health, in consultation with the Commissioner of Education, may determine and outline certification and training guidelines for health professions students to administer COVID-19 vaccines. In doing so, health professions students can have a clear reference for how to obtain authorization to administer the COVID-19 vaccine. Several volunteer liability protection policies on both the state and federal level explain that the protections only apply when the volunteer is authorized to provide a given service; thus, detailed authorization guidelines to administer the COVID-19 vaccine will be necessary.
2. “Clarify the language in the CDC guidance and questionnaires for state plans to explicitly include trained, supervised students as part of the vaccination workforce and make an associated public announcement to Governors and state health departments,” as proposed by American Association of Colleges of Osteopathic Medicine’s Students Assist America³⁰

C) Recommendations for federal support of vaccination training and preparedness:

1. Encourage the Secretary of Human and Health Services to use their discretion authorized by Sec. 311(c)(1) and Sec. 317(a) of PHS Act to promote and/or make grants for vaccine training programs. The Secretary of Human and Health Services is authorized to develop and implement plans and partnerships in response to health emergencies, and we respectfully suggest utilizing this authority to facilitate vaccine training programs.
2. Consider creation of a federal program for health professions student service and training in times of health crisis, including during the COVID-19 pandemic, that acts in collaboration with President-elect Biden’s proposed US Public Health Jobs Corps³¹ and draws inspiration from existing models (e.g., Medical Reserve Corps,³² AmeriCorps³³) and initiatives proposed during the current pandemic (e.g., COVID-19 Vaccine Corps,³⁴ National Service Program for Public Health³⁵).

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