

Addressing Common Employee Concern about the Coronavirus Vaccine



By Jodi Schafer, SPHR, SHRM-SCP

Question: Now that the coronavirus vaccine is available to my staff and me, a couple of team members have expressed hesitancy to get it. I am not

planning on mandating the vaccine in my practice, but I strongly encourage it. Is it appropriate to talk about this with my staff? If so, how do I address common employee concerns around safety and efficacy?

Answer: You are not alone in this situation. Dental practices across the state are grappling with promoting vaccine compliance among their team without going so far as to mandate it. As you know, the vaccine is one of the best tools we have to curb the pandemic and ensure a healthy, viable workforce. As health care providers, I believe you are well-positioned to encourage vaccina-

tion, which means addressing fear and concern head-on. To build confidence with vaccine-hesitant team members, you must have a communication strategy and understand who is on the fence or opposed to the vaccine, and why.

Let me share the three most common reasons I have heard from clients as to why their staff members have expressed hesitation or opposition to the vaccine, along with some helpful information that can serve as talking points for these staff discussions.

Distrust of the expedited vaccine development/approval process: Before development of Pfizer's coronavirus vaccine, the fastest vaccine took four years to bring to market. Given the devastating effects COVID-19 has had, we couldn't afford to wait that long. Operation Warp Speed
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For More Information

ADA COVID-19 FAQs for practice-owners and for employee dentists can be found at the MDA website at:

<https://www.michigandental.org/practice-management/coronavirus-update/>

Coronavirus Vaccine FAQs and FDA Emergency Use Authorization:

<https://www.cdc.gov/vaccines/covid-19/hcp/answering-questions.html>

<https://www.fda.gov/emergency-preparedness-and-response/mcm-legal-regulatory-and-policy-framework/pfizer-biontech-covid-19-vaccine-frequently-asked-questions>

<https://www.fda.gov/media/143890/download>

About Operation Warp Speed: <https://www.hhs.gov/coronavirus/explaining-operation-warp-speed/index.html>

About mRNA Vaccines:

<https://horizon-magazine.eu/article/five-things-you-need-know-about-mrna-vaccine-safety.html>

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines/mrna.html>

<https://www.nejm.org/doi/full/10.1056/NEJMe2034717>

Health Risks of COVID-19:

<https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/coronavirus-disease-2019-vs-the-flu>

<https://www.mayoclinic.org/diseases-conditions/coronavirus/in-depth/coronavirus-long-term-effects/art-20490351>

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was launched in early 2020 to remove any barriers that would cause unnecessary delays. Consequently, the increase in funding, the coordination of efforts among government agencies and private industry, and the green light to begin manufacturing while the clinical trials were being conducted have significantly reduced the timeline for the development of the coronavirus vaccines. Operation Warp Speed allowed safety and efficiency protocols to be aligned, and trials to proceed more quickly.

Skepticism regarding mRNA vaccines vs. traditional vaccines: The Pfizer and Moderna vaccines use messenger RNA (mRNA), which cannot replicate or become part of your genetic code, rather than injecting a weakened or inactivated version of the coronavirus into the body as a traditional vaccine would do. Such mRNA vaccines are not new. Researchers have been studying and working with such vaccines for decades. The already existing advances made in mRNA research were a contributing factor to the speed with which the current coronavirus vaccines were developed and tested. Although the coronavirus vaccines are the first mRNA vaccines to be brought to market, human clinical trials have been run with mRNA vaccines against the flu, Zika, rabies, and potential cancer treatments.

The benefits of using mRNA vaccines are many. Because the vaccine is not injecting an actual virus into the body, recipients cannot develop the viral infection from the vaccine, nor are recipients contagious from the vaccine after being vaccinated. Messenger RNA vaccines are also much easier and faster to create and produce than traditional vaccines. The results of early clinical trials

have been impressive. As stated in *The New England Journal of Medicine*, "In the primary analysis [of the Pfizer vaccine], only eight cases of COVID-19 were seen in the vaccine group [comprised of 21,720 participants], as compared with 162 in the placebo group [comprised of 21,728 participants], for an overall efficacy of 95%."¹ While this is incredibly promising, long-term data must be evaluated before full approval from the U.S. Food and Drug Administration (FDA) is granted. This is the primary reason why these vaccines have emergency use authorization (EUA) rather than having full approval.

Fear of long-term health risks associated with the vaccine: Until the coronavirus vaccines are granted full FDA approval, you will inevitably have some employees who are fearful of unknown long-term risks. However, according to the FDA, the clinical trials conducted in tens of thousands of study participants and the manufacturing information submitted by Pfizer and Moderna show that potential benefits outweigh the known potential risks of the vaccines' use.

A crucial consideration is that not getting vaccinated carries its own (much larger and more dangerous) set of risks. As of the writing of this article, COVID-19 has killed more than 370,000 Americans. Those who have contracted COVID-19 may not develop long-term immunity, and even those who experienced mild to moderate infection are not out of the woods. Reinfection can occur, and health care professionals are continuing to learn of long-term health effects caused by the virus (i.e., long-haulers syndrome). When you consider these known risks from COVID infection, vaccination is a much safer route to establishing immunity to assure the safety of our communities and a return to our pre-pandemic lives.

It's incumbent upon all of us to do our part in curbing this pandemic. Lead by example and use all available

means to combat fear, confusion, and misinformation. Educate your team using evidence-based information and encourage them to do their research as well, so they can make well-informed decisions to protect their health and the health of the practice. ●

Editor's Note: Jodi Schafer has an extended version of this article on her website at www.workwithhrm.com.

Reference

1. Haynes Barton F. (2020) A new vaccine to battle covid-19. *N Engl J Med* DOI: 10.1056/NEJMe2035557.