

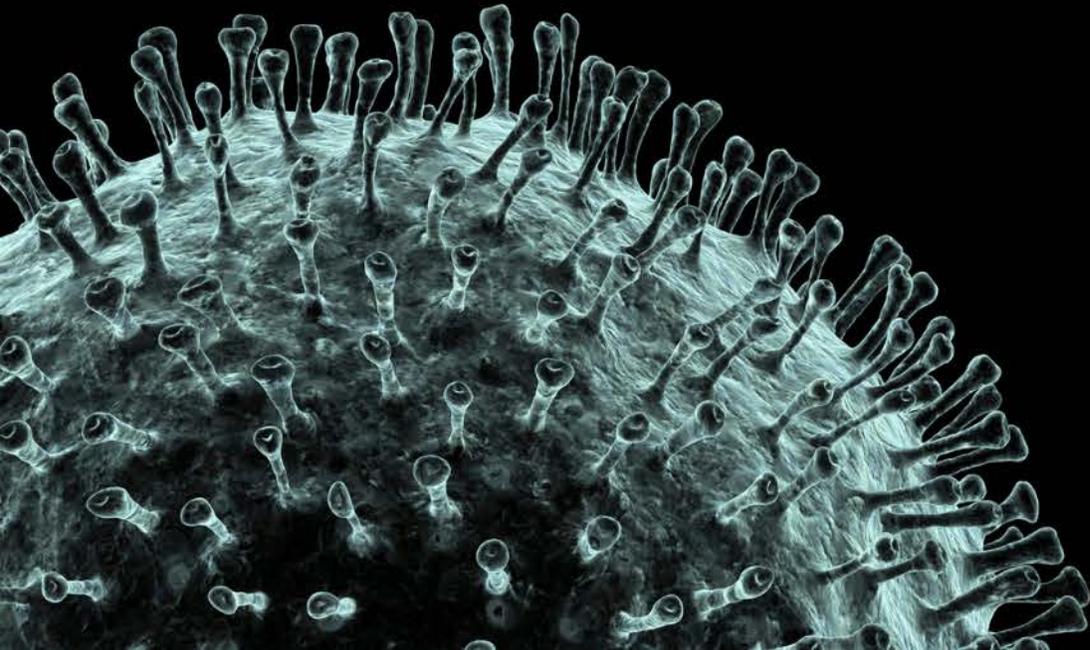
COVID-19 Conversations



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**Supporting an Equitable Distribution
of COVID-19 Vaccines:
Key Themes, Strategies, and Challenges
Across State and Territorial COVID-19
Vaccination Plans**

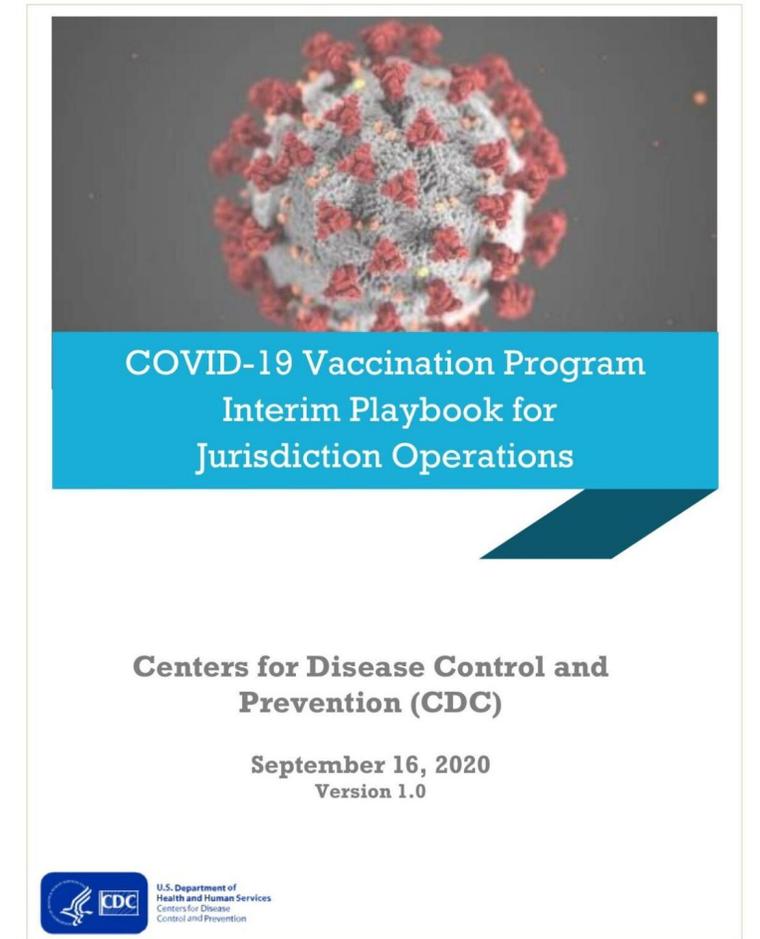
December 9, 2020

“The Last Mile”: The State Role in COVID-19 Vaccine Distribution

States, Territories, and six local jurisdictions receiving vaccine allocations will be responsible for:

- Identifying and allocating vaccines to critical populations
- Logistical planning to meet vaccine storage, handling, and administration requirements
- Supporting vaccine provider enrollment, vaccine ordering, distribution, storage, and handling
- Engaging providers, partners, and communities
- Vaccine program communications

Jurisdictional Vaccination Plans were due to CDC October 16, 2020.

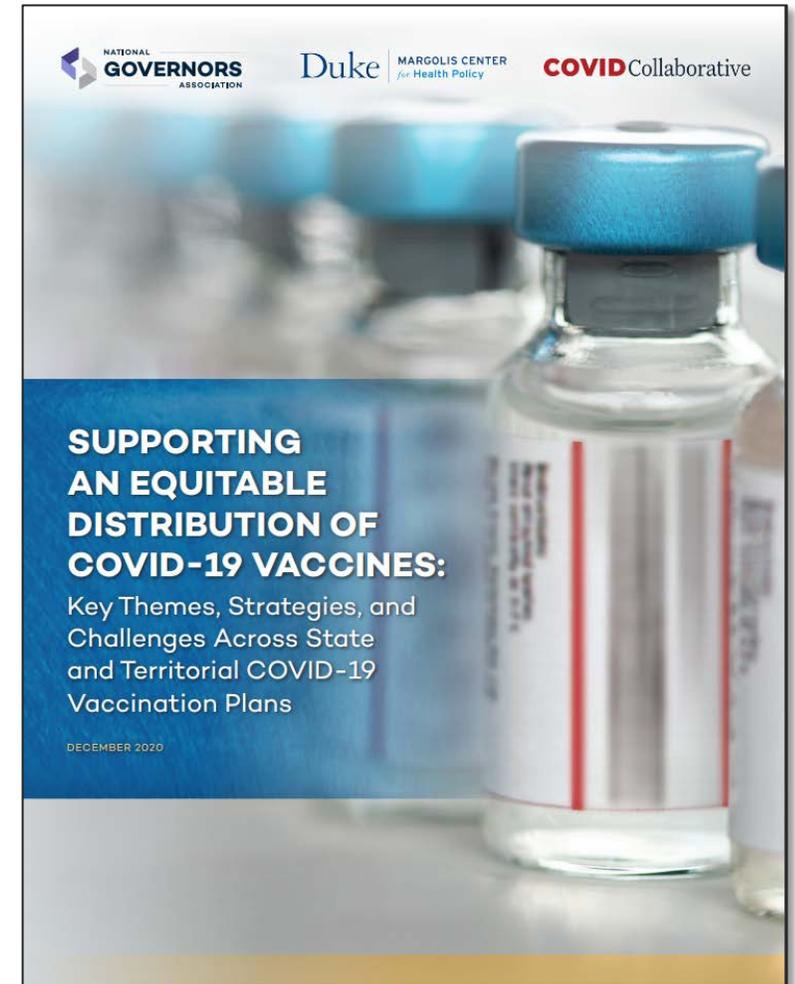


New Report: Analysis of state and territorial vaccination plans

Collaborative effort of the **National Governors Association**, **Duke-Margolis Center for Health Policy**, and **COVID Collaborative** to assist Governors and their partners in ongoing vaccine planning efforts.

Aims to support identification of key issues and sharing of promising practices across the country across planning domains:

Goals, Principles, and Lessons Learned	Cross-Cutting and State-Specific Challenges	Determining Allocation to Critical Populations	Distribution Strategies Across Phases
Ensuring Effective Distribution and Management	Building a Robust Data Infrastructure	Supporting Equity in Distribution and Access	Communicating with the Public and Vaccination Partners



Identifying Key Challenges Across State Plans

Cross-cutting challenges: Need for additional federal support for vaccine program activities, including:

- Funding for vaccine program activities
- More information, guidance, and resources

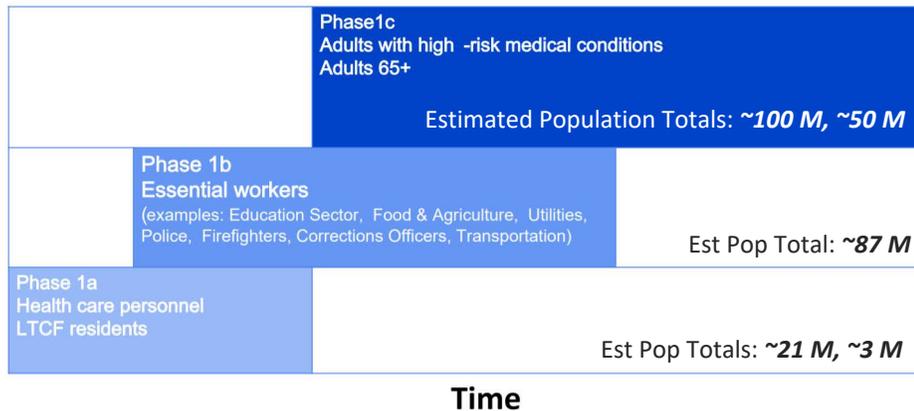
Other challenges raised by states:

- Limited public health and provider capacity
- Limited ultra-cold storage capacity and other logistical challenges
- Persistent technology concerns
- Lack of public confidence and vaccine hesitancy
- State- specific conditions: challenges related to access for rural populations, border states, weather

Key Challenge: How to Allocate Early, Limited Vaccine to Critical Populations

- **Challenge:** Allocating limited vaccine to critical populations in a manner that is transparent, equitable, and protects public health and those most at risk from COVID-19

Potential ACIP Phase 1 Populations



Source: CDC ACIP [Dec 2020](#) meeting presentations.

Allocation Approaches in State Plans:

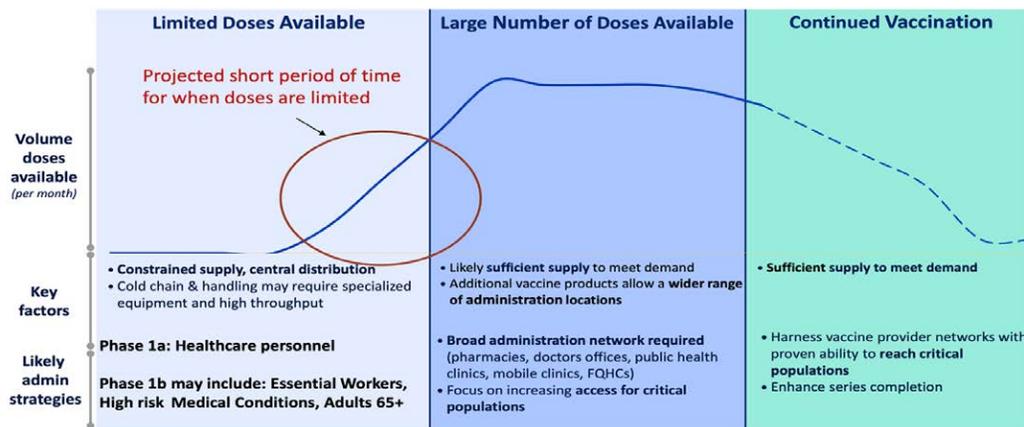
- Creating or leveraging **Advisory Committees** to determine recommended populations or subpopulations (**12** states)
- **Seeking input** from critical populations and providers that serve them
- Developing **methodologies** for prioritizing within phases
- Using data and vulnerability indexes to allocate to areas with high disease transmission or existing health disparities
- **BUT** states must be able to remain **flexible and responsive** to new information

Key Consideration for Governors: Set criteria for priority allocation of vaccines that are consistent with recommendations from CDC's ACIP, responsive to state needs and clearly communicated to the public.

Key Challenge: How to shift distribution strategies as more populations are eligible receive the vaccine

- **Challenge:** States must address a variety of operational challenges to equitably and efficiently distribute and administer vaccines to different populations across phases.

CDC Phased Distribution Illustration



Adapted from: COVID-19 Vaccination Program Interim Playbook for Jurisdictional Operations

Distribution Approaches Across State Plans

- **Phase 1:** Closed distribution in healthcare settings, LTCFs, mobile “strike teams”
- **Strategies in later phases:**
 - Engaging with a wide variety of community partners -- primary care providers, pharmacists, community health centers, local health departments, home health workers, employers, schools, faith-based organizations and community organizations - to increase access in convenient and accessible settings.
 - Building on seasonal flu and drive-through testing infrastructure
 - Expanding scope of practice and recruiting non-traditional partners to expand surge capacity.

Key Consideration for Governors: Ensure that critical coordination structures are in place to flexibly shift strategies to respond to changing dynamics, and address logistical issues early.

Key Challenge: How to Track and Report Vaccine Administration Data

- **Challenge:** states must scale or augment their immunization data infrastructure to manage, track, and report vaccine information.
 - Existing IIS or complimentary data systems must be capable of supporting provider enrollment, vaccine ordering and inventory management, tracking dose-level administration, and reporting to federal systems
 - Multiple states have laws or regs that prohibit reporting of identifiable data other limitations on sharing immunization data
 - New, untested federal systems may pose risks or learning curves

- **Approaches for bolstering COVID-19 vaccination data infrastructure across plans:**
 - Strengthening existing immunization data systems or augmenting with VAMS or PrepMod for mass vaccination sites
 - **38** states plan to connect to the **IZ Gateway** to report data to CDC or share with other jurisdictions
 - Many states plan on hosting publicly available **data dashboards** to track and share vaccine administration data with the public

Key Consideration for Governors: Deploy and test data management and reporting systems to ensure accountability for results, ability to adjust, and transparency to the public

Key Challenge: How to Promote Equity and Engage Communities

Challenge: The COVID-19 Pandemic has had a disproportionate burden on communities of color, many of whom may face additional barriers to vaccine access or demonstrate significant hesitancy toward a COVID-19 vaccine. Strategies are needed to meaningfully engage these communities in the planning process, and to partner with community leaders and organizations in providing information and responding to community concerns.

- **Strategies to promote equity and engage communities across state plans:**
 - Centering equity a guiding principle
 - Engaging state health equity task forces
 - Using data to monitor access and addressing barriers to care
 - Developing culturally and linguistically-responsive materials and messaging
 - Partnering with trusted messengers, providers and organizations serving high-risk communities

Key Consideration for Governors: Meaningfully engage local health departments, representatives from high-risk populations, health systems, providers, community leaders, and organizations serving at-risk populations in planning activities

Key Takeaways



Additional funding, guidance, and resources are needed to support state vaccination program activities



Set criteria for priority allocation of vaccines that are consistent with recommendations from the CDC's Advisory Committee on Immunization Practices (ACIP), responsive to state needs and clearly communicated to the public



Ensure that critical coordination structures are in place to flexibly shift strategies to respond to changing dynamics in vaccine availability, demand, and emerging challenges



Deploy and test data management and reporting systems to ensure accountability for results, ability to adjust, and transparency to the public



Meaningfully engage local health departments, representatives from high-risk populations, health systems, providers, community leaders, and organizations serving at-risk populations in planning activities