Vaccine distribution involves Federal, State and Local decisions

Federal agencies:

- Which vaccines are approved for use in United States (FDA)
- How much vaccine will be allocated to each state (CDC)
- Overall framework for who gets vaccine at each phase of the rollout (CDC)
- Ongoing research, monitoring, and oversight (NIH, FDA, CDC)

California Department of Public Health (CDPH):

- Which vaccine(s) will be used in CA
- How much vaccine will be allocated to each local health jurisdiction/county
- State-specific framework for who get vaccine when (per federal guidelines)
- Which data systems will be used across the state to monitor vaccine distribution and uptake
- Ongoing data collection, monitoring and oversight

Alameda County Health Care Services Agency:

- Coordinate local infrastructure for vaccine storage, distribution, & administration
- Promote equitable distribution across local communities
- County-specific framework for who gets vaccine when (per state guidelines)
- Ongoing data reporting and monitoring

Vaccine Prioritization Framework

- **❖** Alameda County is following Federal and State recommendations, which change from time to time
- Timing through each phase depends on vaccine supply and demand
- Local health depts. have *some* discretion within phases, but cannot skip phases or go out of order
 - 1a: Health care workers & long term care facility residents and staff
 - 1b: Essential workers & people 75+ years old
 - 1c:
 - Older adults in congregate living settings
 - People at significantly higher risk due to underlying health

Phase 1



- Older adults not in Phase 1
- Incarcerated and detained persons and iail/detention staff
- Staff and residents of: homeless shelters. and group homes for people with disabilities or serious mental illness
- People at moderate risk due to underlying health

 Young adults Children

- Workers not covered in Phases 1 or 2

 Anyone who did not access vaccine in Phases 1, 2, or 3

Phase 2



Phase 3

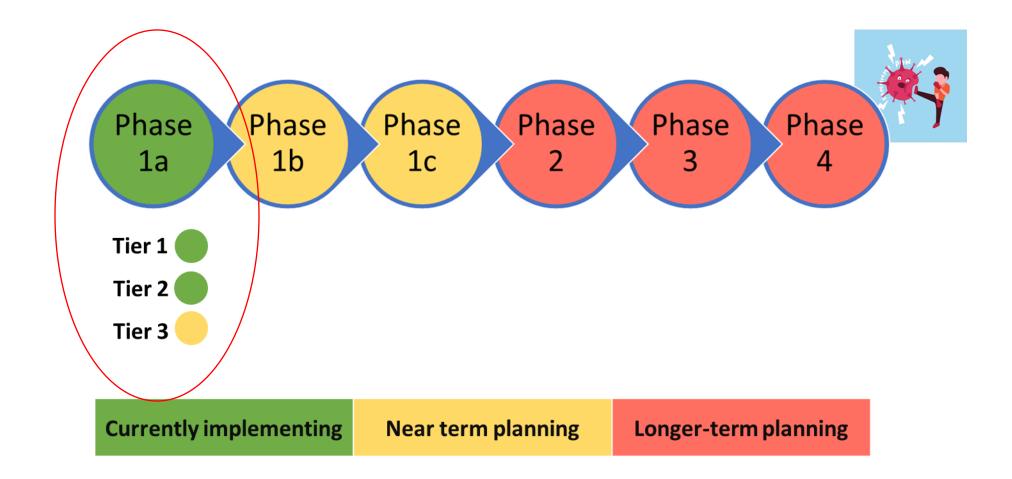


Phase 4



Equity is cross-cutting issue

What Phase are we in?



Who's in Phase 1a?

The Public Health Department is reaching out to eligible health care workers as vaccine becomes available.

Tier 1 (vaccination started in mid-December):

- Acute care, psychiatric and correctional facility hospital staff
- Staff and residents of skilled nursing facilities, assisted living facilities, and similar settings for older or medically vulnerable individuals
- Paramedics, EMTs and others providing emergency medical services
- Dialysis centers

Tier 2 (vaccine started late December):

- Intermediate Care Facility staff & residents
- Home Health Care/In-Home Supportive Services
- Community Health Workers/Promotoras
- Public Health Field Staff (including Testing Site Staff)
- Primary Care Clinics, including Federally Qualified Health Centers, Rural Health Centers, Correctional Facility Clinics & Urgent Care Clinics

Tier 3 (vaccination not yet started):

- Specialty Clinics
- Laboratory Workers
- Dental/Oral Health Clinics
- Pharmacy Staff (non-Hospital)

What's being planned for Phase 1b and 1c?

Phase 1b: Essential Workers & >75y.o*

- State Guidelines group is working to prioritize at least 6M essential workers
- Ranking by: occupational exposure, equity, societal impact, econ impact
- Current priorities:
 - Education
 - **Emergency Services**
 - Food/agriculture

Phase 1c: People with High-Risk Conditions

- Cancer
- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Heart conditions
- Solid organ transplant
- Obesity (BMI>40 kg/m2)
- Pregnancy
- Sickle cell disease
- **Smoking**
- Type 2 diabetes mellitus
- Adults >50 yo, congregate/overcrowded settings

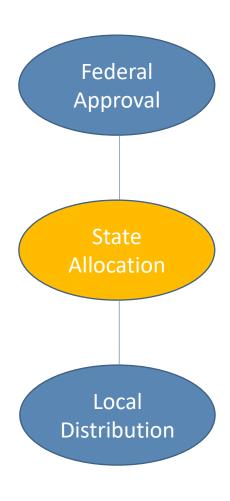
How is California making vaccine decisions?

Statewide COVID-19 Vaccine Task Force

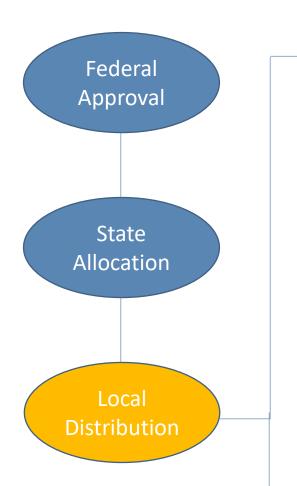
- Multiple State agencies and workgroups
- <u>Scientific Safety Review Workgroup</u>: vaccine experts to provide CA "seal of approval" on vaccine efficacy and safety
- <u>Drafting Guidelines Workgroup</u>: develop allocation guidance for who will receive vaccine when supply is limited
- <u>Community Vaccine Advisory Committee</u>: advises State's Task Force on direction of task force workgroups

CDPH in regular communication with local health departments

- Weekly calls, webinars, technical assistance
- Surveys and data collection to inform state and local decisions
- Priorities change week to week & day to day



Local Plan: How is Alameda County preparing for the vaccine?



Multidisciplinary COVAX Team has 3 focus areas:

1. Community Advisory Group

- Equity lens
- Engage and inform residents and community partners
- Seeking input on vaccine prioritization, trust building, messaging

2. Health Care Delivery System

- Coordinating clinical providers (hospitals, community clinics, private practice) to ensure broad access
- Collaborative process to support equity strategies

Immunization Logistics

- Liaison to State's Immunization team
- Monitoring cold chain and capacity
- Community-based Points of Distribution (PODs)
- Ongoing data and progress monitoring
- Communications, Data, & Health Equity teams in close partnership with COVAX team Coordination with cities in all three focus areas

Alameda County Vaccine Values & Principles

- Provide transparent and accurate information to help people make vaccine decisions
- Lead with equity and data
 - Race/Ethnicity
 - Geography
 - Socioeconomic factors
 - Critical populations
- Ensure safe and equitable distribution
- Leverage all venues & partners for broad distribution
 - Hospitals
 - Clinics
 - Private practice
 - Pharmacies
 - Community based Points of Distribution (PODs)

Next steps

- What types of information would be helpful for you throughout this process?
- How often would you like to meet?
- Next meeting (1/12/21) agenda:
 - State prioritization updates
 - Local implementation updates
 - Available local data & recommendations
 - Communications & messaging considerations