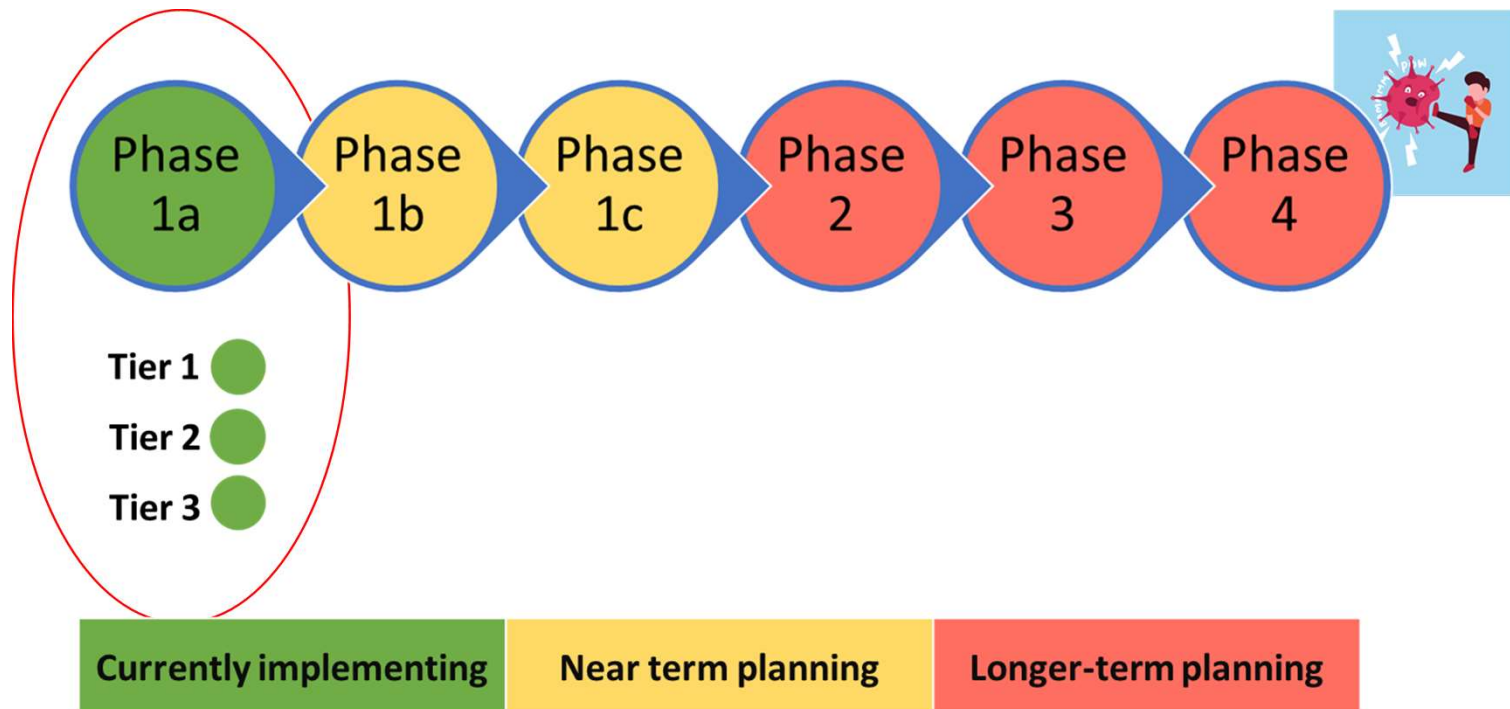
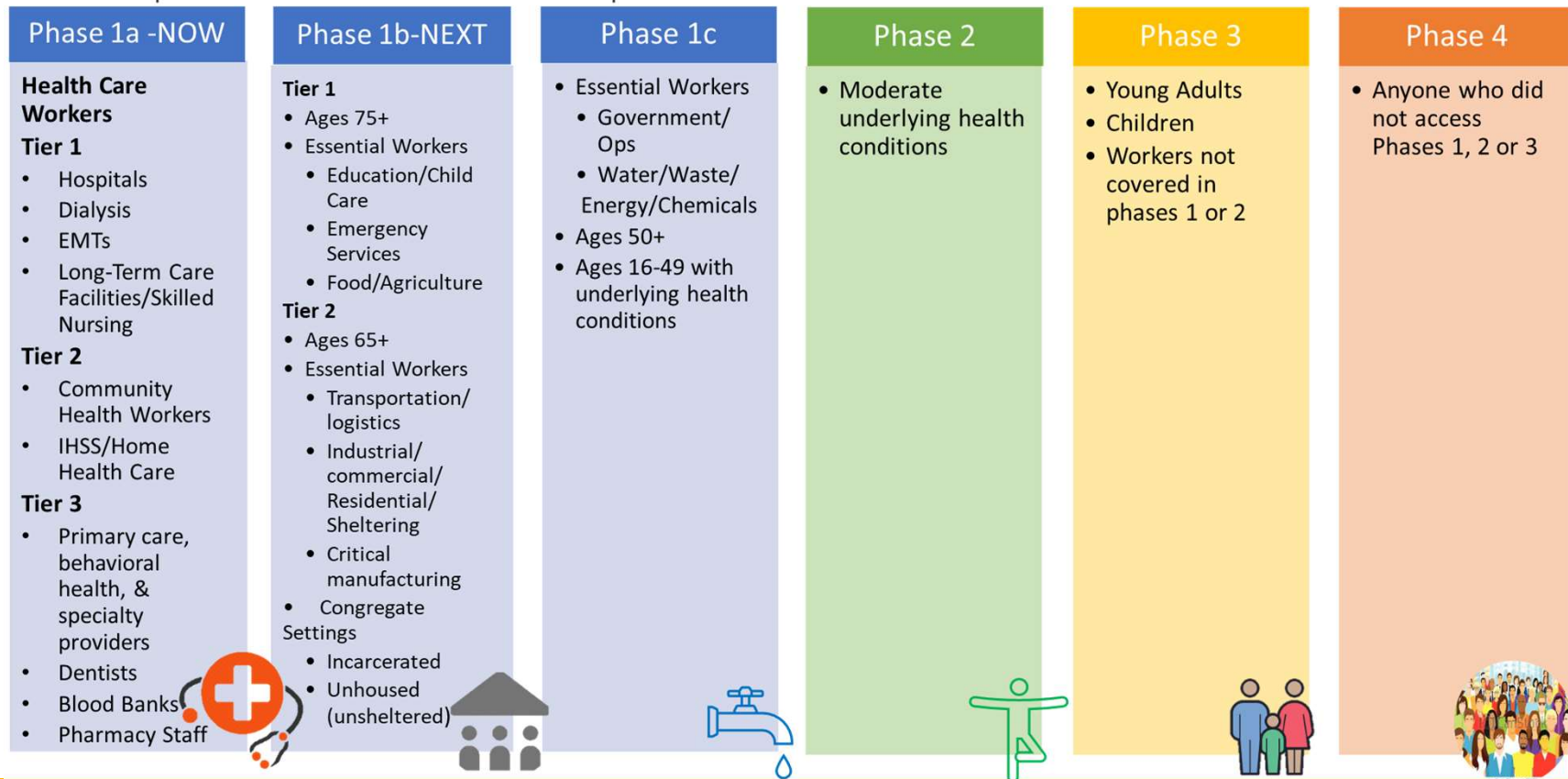


What Phase are we in? **As of 1/11/21**



Vaccine Prioritization Framework *updated 1/11/21*

- ❖ 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



Who's in Phase 1a?

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 (*vaccination 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 started*):

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



Who's in Phase 1b and 1c? *updated 1/11/21*

Phase 1b: Essential Workers, Older Adults & People at risk for severe illness

Tier 1:

- Older adults, aged 75+
- Essential Workers in the following sectors:
 - Education & Child Care (formal & informal)
 - Emergency Services (incl Law Enforcement)
 - Food/Agriculture

Tier 2:

- Older adults, aged 65+
- Essential Workers in the following sectors:
 - Critical Manufacturing
 - Industrial, Residential & Commercial Sheltering Facilities & Services
 - Transportation and Logistics
- Congregate Settings:
 - Incarceration Settings
 - People Experiencing Homelessness

Phase 1c: People with High-Risk Conditions & Essential Workers

- Adults, aged 50+
- Persons 16-49 with high-risk conditions:
 - Cancer • Chronic kidney disease • COPD (chronic obstructive pulmonary disease) / Heart conditions • Solid organ transplant • Overweight (BMI>40 kg/m2) • Pregnancy • Sickle cell disease • Smoking • Type 2 diabetes mellitus • Asthma (moderate to severe) • Cerebrovascular Disease • Cystic fibrosis • Hypertension/high blood pressure • Immunocompromised; blood/bone marrow transplant • Neurologic conditions e.g. dementia • Liver disease • Pulmonary Fibrosis • Thalassemias • Type 1 diabetes mellitus
- Water & Waste Management
- Defense
- Energy
- Communication & IT
- Financial Services
- Chemicals/Hazardous Materials
- Government Ops/Community Services



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 vaccines 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



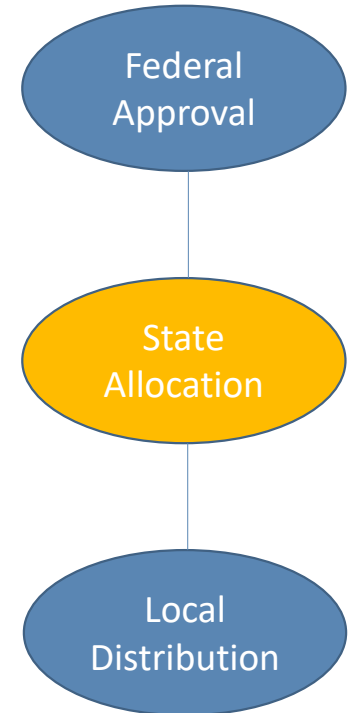
How is California making vaccine decisions?

Statewide COVID-19 Vaccine Task Force

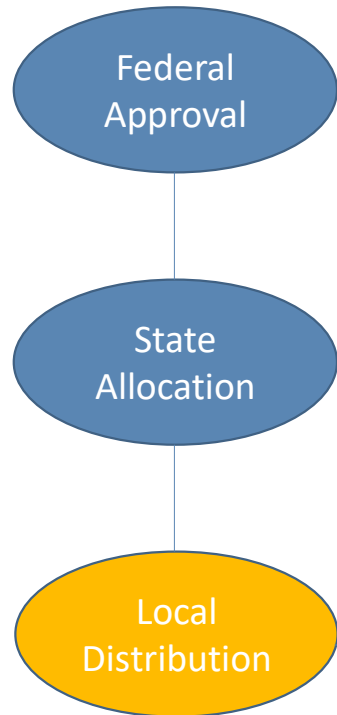
- Multiple State agencies and workgroups
- Scientific Safety Review Workgroup: vaccine experts to provide CA “seal of approval” on vaccine efficacy and safety
- Drafting Guidelines Workgroup: develop allocation guidance for who will receive vaccine when supply is limited
- Community Vaccine Advisory Committee: 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

3. 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)

