

STAFF REPORT

TO: Summit County Council
FROM: Chris Crowley, SCHED PHEP ERC
CC: Rich Bullough, Health Director, Phil Bondurant, Deputy Health Director
DATE: 10/08/20
SUBJECT: COVID-19 Vaccine Production & SCHED Mass Vaccination Clinic Planning

PURPOSE

To update and discuss current status of COVID-19 Vaccine production, distribution and planning for Summit County Health Department Mass Vaccination Clinics.

COVID-19 MASS VACCINATION PROGRAM PLANNING OBJECTIVES

- *Deliver a COVID-19 vaccine to the residents of Summit County in a safe, efficient and fiscally responsible manner.*
 - Develop an integrated Summit County COVID-19 Mass Vaccination Program Plan
 - Coordinate participation & communication with all stakeholders
 - Build public trust and awareness
 - Ensure operational and financial viability

In conjunction with the CDC, the Utah Department of Public Health updates local health departments weekly regarding COVID-19 vaccination developments including production, distribution and allocation priorities. Limited COVID-19 vaccine doses may be available by early November 2020, with supply increasing through 2021. Initially available COVID-19 vaccines will either be approved as licensed vaccines or authorized for use under an Emergency Use Authorization (EUA) issued by the U.S. Food and Drug Administration (FDA). Two primary vaccine candidates have been identified however, one of the candidates has recently delayed release until Spring 2021.

COVID-19 Vaccine Priorities

The Federal Government has issued guidance on groups to prioritize for initial COVID-19 vaccination:

- Critical workforce that provides health care and maintains essential functions of society¹
- Staff and residents in long-term care and assisted living facilities (LTCF)
- Allocation of COVID-19 vaccine to local jurisdictions will be based on multiple factors, including:
- Populations recommended by the Advisory Committee on Immunization Practices (National Academy of Medicine)
- Current local spread/prevalence of COVID-19
 - COVID-19 vaccine production and availability – (local jurisdictions should anticipate allocation shifts during response based on supply, demand and risk - plan for high-demand and low-demand scenarios)

Vaccination Timelines

- **1st Tier - November-December 2020:** Local Health Departments and large-chain pharmacies (Walgreens, CVS, Costco, Walmart, Kroeger/Smiths) will receive initial doses (approx. 29,100 doses to UT).
- **2nd Tier - November-December 2020:** 150,000+ doses to vaccinate healthcare workers, first responders, LTC and other targeted populations (approx. 533,500 doses to UT)
- **3rd – 5th Tiers - February - July 2021:** Local Health Department Mass Vaccination Clinic operations for remaining populations and Healthy Adults (19-64).

¹ CDC Interim Updated Planning Guidance on Allocating and Targeting Pandemic Influenza Vaccine during an Influenza Pandemic - <https://www.cisa.gov/identifying-critical-infrastructure-during-covid-19>

Mass Vaccination Clinic Planning

- CDC draft guidance released September 2020. Additional details and guidance to follow.
- Planning is first developed at a FUNCTIONAL level (subject/activity areas). CLINICAL level planning has already started as clinic operations will inform all other areas.
- The Planning process is divided into the following FUNCTIONAL planning (focused planning by subject/area), followed by INTEGRATED planning (overlaps and dependency-based), IMPLEMENTATION (testing and delivery) and finally DISSOLUTION (wrap-up and accounting).

Planning Group	Focus	Key Stakeholders
<i>Clinical</i>	Medical	SCHD, hospitals, healthcare providers, pharmacies, Medical Reserve Corps, EMTs, UDOH, etc.
<i>Facilities</i>	Facility Operations	SCHD, local/county government, facility owners (schools, recreation, private) etc.
<i>Public Information & Communications</i>	Public Outreach	SC PIO, SCHD, healthcare providers, UDOH, state/local/county government, community stakeholders, etc.
<i>Public Safety</i>	Public Safety & Transportation	SCHD, Law Enforcement, Fire, EMT, Transportation, Public Works, local/county government, etc.
<i>Administration & Finance</i>	Decision & Financial Oversight	SCHD, Summit County Administration & Finance, elected officials, etc.

Planning Strategy	Focus	Objectives
<i>Functional</i>	Roles & responsibilities, task-based planning, needs assessment, budgeting.	Site, staff, stuff and budgeting.
<i>Integrated</i>	Dependencies, overlaps and integration.	Cooperation, support, dependencies and cost reductions.
<i>Implementation</i>	Testing, training and operations.	Training, testing and phased implementation.
<i>Dissolution</i>	Termination and transition to normal operations.	Analysis, reporting, accounting and dissolution of program.

Issues

Though early in the planning process, some issues are already being anticipated and addressed accordingly.

- CDC Guidance: CDC guidance has been provided at a very high level with many details changing weekly - the biggest challenge to planning being the unknowns surrounding the vaccine types and availability in quantity.
- Vaccine Safety: Without ACIP or vaccine information statement Utah may hold vaccines.
- Allocation Priorities: Vaccine allocation priorities are still being developed on the Federal level. Local priorities have yet to be determined.
- Local Health Department: Availability of trained workforce specifically for extended clinical operations may become problematic.

Summary

Though the planning process is just beginning it is changing quickly - the timeline for planning and implementation is short. It is the intent of the Summit County Health Department to lead our Mass Vaccination planning and ultimately develop an effective foundation-level plan that meets the needs of our community and is flexible and adaptable to the continuously changing landscape of the COVID-19 pandemic.