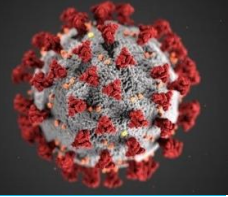




The following document is for historical purposes and is no longer being updated. Please go to the [COVID-19 Vaccination Clinical & Professional Resources](#) for more recent information.



VERMONT INTERIM COVID-19 VACCINATION PLAN



Executive Summary

October 21, 2020

Immunization with a safe and effective COVID-19 vaccine is a vital component of Vermont's strategy to reduce COVID-19-related illnesses, hospitalizations and deaths, and to help restore a fully functioning society and economy. The goal of the Vermont Department of Health is to have enough COVID-19 vaccine for every person in the state who wishes to be vaccinated. Our planning is guided by CDC's *Interim Playbook for Jurisdictions*, which makes it very clear that we can expect many updates as we move forward with planning and implementing this fast-moving campaign. The following summarizes where Vermont stands in our COVID-19 vaccination planning process to date. Two main workgroups oversee the COVID-19 planning work in Vermont:

- **COVID-19 Vaccination Advisory Committee** will provide overall guidance to the planning work. Membership will include a subgroup of the Crisis Standards of Care Committee and those serving the highest risk populations.
- **Statewide COVID-19 Vaccination Planning Team** is composed of experts from the Vermont Department of Health, Vermont Emergency Management, University of Vermont Medical Center (Vaccine Testing Center and Pediatrics), and the Vermont Agency of Digital Services, and is responsible for fully developing the vaccination plan. Based on CDC's current playbook, three subgroups are developing distinct aspects of the plan: Information Technology; Logistics; Communications.

Statewide coordination and implementation of the plan is managed jointly by the State Emergency Operations Center (SEOC) and the Vermont Department of Health's Health Operation Center (HOC), which includes the newly formed Vaccination Branch and its four sections: immunization program operations; technical response; points of distribution (POD) mass vaccination; and data management. Making vaccine available and accessible to all Vermonters will also depend on a wide range of participants within and beyond state government, including but not limited to pharmacies, hospitals, primary care providers, community service organizations, privately run clinics, long-term care facilities and correctional facilities.

Putting Safety First

Transparency and an emphasis on the fundamental importance of safety and efficacy will be central to building trust in and ensuring that Vermonters receive the full benefit of a safe and effective COVID-19 vaccine. Prior to promoting and distributing any COVID-19 vaccine in Vermont, that vaccine must meet all U.S. Food and Drug Administration safety standards and be recommended by the Advisory Committee on Immunization Practices, an independent national advisory committee. All newly developed vaccines must be continually monitored for safety and efficacy, and information about adverse reaction reporting for any vaccine must be shared freely. Vermont requires that all adverse events following any vaccination are reported to the Vaccine Adverse Event Reporting System. The COVID-19 Vaccination Program Provider Agreement denotes that vaccination providers who receive and administer COVID-19 vaccine "must report moderate and severe adverse events following vaccination to the Vaccine Adverse Event Reporting System".

Safe storage and handling of the vaccine will also be critical. Immunization Program staff will work closely with all locations that receive and administer vaccine to ensure they follow strict storage and handling requirements.

Identifying Priority Groups

Based on what we know now, the initial supply of COVID-19 vaccine will likely be limited, and vaccination efforts will necessarily need to prioritize groups that are most critical to the response, those who provide direct care,

and those who are essential to maintaining a functioning society, as well as those at highest risk for developing severe illness from COVID-19. To determine these critical populations in Vermont, we will review recommendations from the National Academies and the Advisory Committee on Immunization Practices and gather input from expert organizations across Vermont. The state's advisory committee will provide input to the Health Department to ensure the needs of critical populations are fully integrated into planning and allocation of vaccines when the supply is limited.

Implementing the Phased Approach

To reach the people who are prioritized for earlier access to the vaccine (Phases 1A and 1B), vaccination clinics will be provided across the state using a variety of effective vaccine clinic models. In Phase 1B, through a CDC contract, long-term care facilities have the opportunity to enroll with either CVS or Walgreen's pharmacies to receive free, on-site, comprehensive COVID-19 vaccinations for all of their residents, and staff who were not vaccinated during Phase 1A who now wish to be vaccinated. In Phases 2 and 3, we will capitalize on Vermont's strong medical home system and partnerships with pharmacies to provide wide-scale access to the COVID-19 vaccine. Data gathered during Phases 1A, 1B, and 2 will be essential in assessing vaccination uptake among various populations to plan for targeted outreach in Phase 3, if indicated.

Since some COVID-19 vaccines will require two doses, Vermont's Immunization Registry will be utilized for second-dose reminders to each person who received a first dose of COVID-19 vaccine when that time is indicated. Technology that will be utilized in some mass vaccination clinics also has recall abilities.

Ensuring Equitable Access

The Immunization Program will work closely with all COVID-19 vaccination providers and target settings to ensure equitable access to the COVID-19 vaccine. Vaccine allocation will be based on population data, with attention to critical populations. Vaccine administration data from the Immunization Registry will be monitored and reviewed by geographic location. Vaccine doses administered by enrolled sites will also be monitored and redistribution will be required. The Immunization Program is collaborating with the Health Operations Center's Health Equity and Community Engagement Team to ensure access for people who are disproportionately affected by COVID-19, including Black, Indigenous and people of color. GIS mapping and Social Vulnerability Indices will be employed to identify areas with limited access and direct distribution efforts.

Getting the Message Out

A comprehensive communication and media plan is in development, which will take into account low and high uptake scenarios throughout each phase of the plan. We will develop a marketing strategy, building on ongoing marketing efforts about COVID-19 prevention. We will use all available communication channels to reach various Vermont audiences, including earned and paid media, print materials and partner outreach. Efforts are starting now to help Vermonters understand the process of vaccine development, and to share information about how decisions concerning COVID-19 vaccine will be made.

Conclusion

We are working diligently to prepare for the COVID-19 vaccine and will continue to hone this plan as new information about COVID-19, a COVID-19 vaccine, and the nationwide distribution strategy emerge. COVID-19 is a new virus that will require an entirely new vaccine, and while there are still some unknowns on the horizon, we are not starting from scratch with our planning in Vermont. We will build on a strong existing primary care and medical home infrastructure, our experience with vaccine distribution in public health crises, and valuable partnerships across the state with health care and community partners to help make sure all Vermonters can access a safe and effective vaccine.