

COVID-19 Vaccine Health Equity Plan



Davis County Goals

- All Davis County residents who want a vaccine can get one.
- Davis County residents have equitable access to resources throughout the COVID-19 vaccination process.

Agencies & Partners Involved in the Development of this Plan

- Davis Behavioral Health
- Davis Community Learning Center
- Davis County Sheriff's Office
- Davis Hospital (Steward Healthcare)
- Media Partners
- Davis Links
- Davis School District
- Davis Technical College
- Department of Workforce Services
- Head Start
- Layton Hospital (Intermountain Healthcare)
- Job Corps
- LiveStrong House
- Local Businesses
- Midtown Community Health Center
- Lakeview Hospital (Mountainstar Healthcare)
- Tanner Clinic
- Pharmacies
- Safe Harbor
- Sheriff's Office
- St. Rose of Lima Catholic Church
- The Church of Jesus Christ of Latter-day Saints
- Utah Pacific Islander Health Coalition
- Utah State University Extension
- Utah Strong

State and National Guiding Documents

Utah COVID-19 Vaccine Health Equity Plan

As part of the Utah Changing the Curve Advisory Group, Davis County Health Department participated in the development of the Utah COVID-19 Vaccine Health Equity Plan and supports Utah's efforts to ensure vaccine health equity. The plan can be found at this [link](#).

Ethical Principles to Guide Decision-Making When COVID-19 Vaccines are Limited, CDC Advisory Committee on Immunization Practices (ACIP)

Ethical principles that assist in formulating recommendations for the initial allocation of COVID-19 vaccine: 1) maximizing benefits and minimizing harms; 2) promoting justice; 3) mitigating health inequities; and 4) promoting transparency. For more information visit:

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6947e3.htm>

Davis County Strategies

1. Accurately Collect & Report Data

- Collect racial and ethnic data in a fair, sensitive, and respectful manner for all those vaccinated
- Compare the demographic characteristics of vaccine clients to the overall characteristics of the county to identify whether any demographic groups are underrepresented
- Analyze characteristics between clients to determine what type of patients are not scheduling second doses and if certain demographic groups have higher vaccine initiation rates than others
- Compare municipal vaccine uptake rates to vulnerability/resilience indexes to identify if any at-risk communities are being underserved

2. Communicate Current & Credible Information

- Promote research-based Getting There and The Vaccine Real Talk media campaigns from coronavirus.utah.gov (plain language materials in multiple languages)
- Provide training for staff and partners to address hesitancy, myths, misconceptions, and barriers to vaccination in diverse communities
 - Key Message: Vaccination is about the peace of mind that comes from protecting those we love and returning to the things that matter most in our lives to end the pandemic and this health crisis.
- Utilize partnerships with trusted sources (individuals & organizations) for health information in diverse communities
- Develop materials that can help vulnerable communities find vaccine education from trusted sources and information about how to schedule an appointment
- Targeted outreach in zip codes and census tracts that have been most severely affected by COVID-19 or that have other social or economic factors that put people at higher risk

3. Reduce Barriers at Mass Vaccination Clinics

- Offer multiple registration options (online, phone, onsite, etc.)
- Provide accommodations for individuals with disabilities (visually or hearing impaired, mobility challenges, etc.) at vaccination sites
- Accept many forms of identification
- Provide multicultural staff at clinics; help those who speak other languages at the clinic
- Share transit information for accessing the clinic
- Offer extended weekday hours and weekend hours

4. Reach Those Who are Not Willing or Able to Get Vaccinated at Mass Vaccination Sites

- Provide in-home vaccination opportunities
- Mobile outreach to facilities serving high-risk populations and congregate living settings
- Develop temporary mobile units that can be deployed to locations reaching vulnerable populations
 1. Geographies with vulnerable populations
 2. Venues (grocery stores, food banks, ethnic markets, restaurants, WIC)
 3. Faith communities
- Coordinate with Midtown Community Health Center (Federally Qualified Health Center, FQHC) to make vaccination clinics or events available at locations that work best for community members
- Promote all vaccine providers

How We Identify Who is Most At-risk

Data Sources

- Utah COVID-19 Data <https://coronavirus.utah.gov/case-counts/>
- CDC's Social Vulnerability Index (2016 data) <https://svi.cdc.gov/map.html>
- US Census Bureau COVID-19 Portal (2018 data) <https://covid19.census.gov/>
- US Census Community Resilience Estimates (2018 data)
<https://uscensus.maps.arcgis.com/apps/opstdashboard/index.html#/f8fc348e4c99498baf18af09d4401553>
- UDOH Health Improvement Index
<https://ibis.health.utah.gov/ibisph-view/indicator/view/HII.SA.html>
- US Census Race/Ethnicity Tables by Age and County (B01001 tables A-G) (2019 data)
<https://data.census.gov/cedsci/all?t=Age%20and%20Sex%3ARace%20and%20Ethnicity&g=0500000US49011>

Note: This is a dynamic living document that aims to outline a fair and equitable approach to Davis County's COVID-19 vaccine distribution. It will be updated and revised as needed.

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