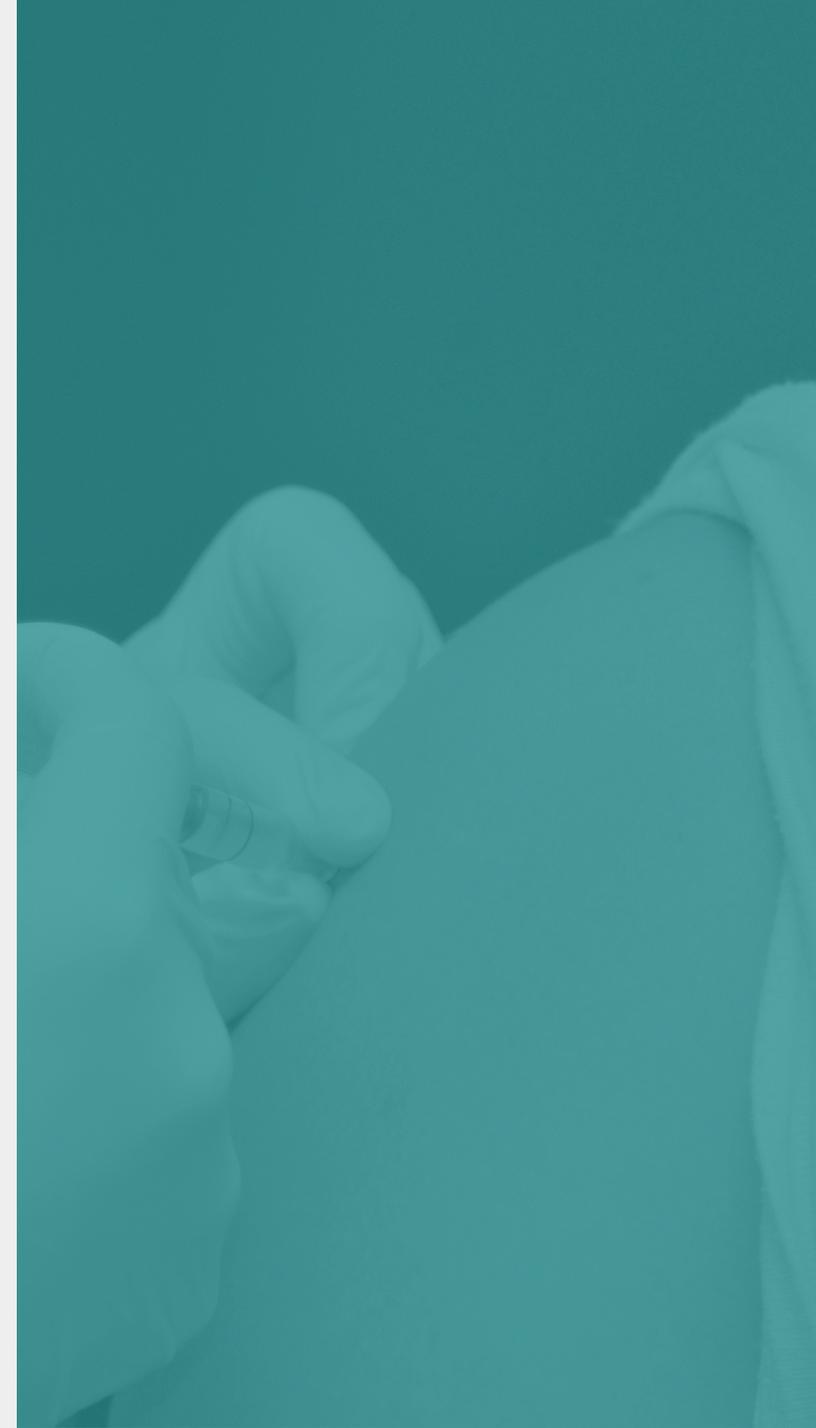


Michigan Interim COVID-19 Vaccination Strategy

Updated January 11, 2022





GUIDING PRINCIPLES

- + All Michiganders have equitable access to vaccines. All vaccines should be available in all communities.
 - Changes in vaccine availability and demand means that broad access to vaccine in trusted places should be prioritized over speed and volume
- + Vaccine planning and distribution is inclusive.
 - Actively engages state and local government, public and private partners; and draws upon the experience and expertise of leaders from historically marginalized populations.
- + Communications are transparent, accurate, and frequent to build public trust.
- + Data is used to promote equity, track progress and guide decision-making.
- + Resource stewardship, efficiency, and continuous quality improvement drive strategic implementation.

70%

of Michiganders age 16 and up vaccinated as quickly as possible.

95%

of people receiving the two-dose vaccines get their second dose within the expected time frame.

Zero Disparity

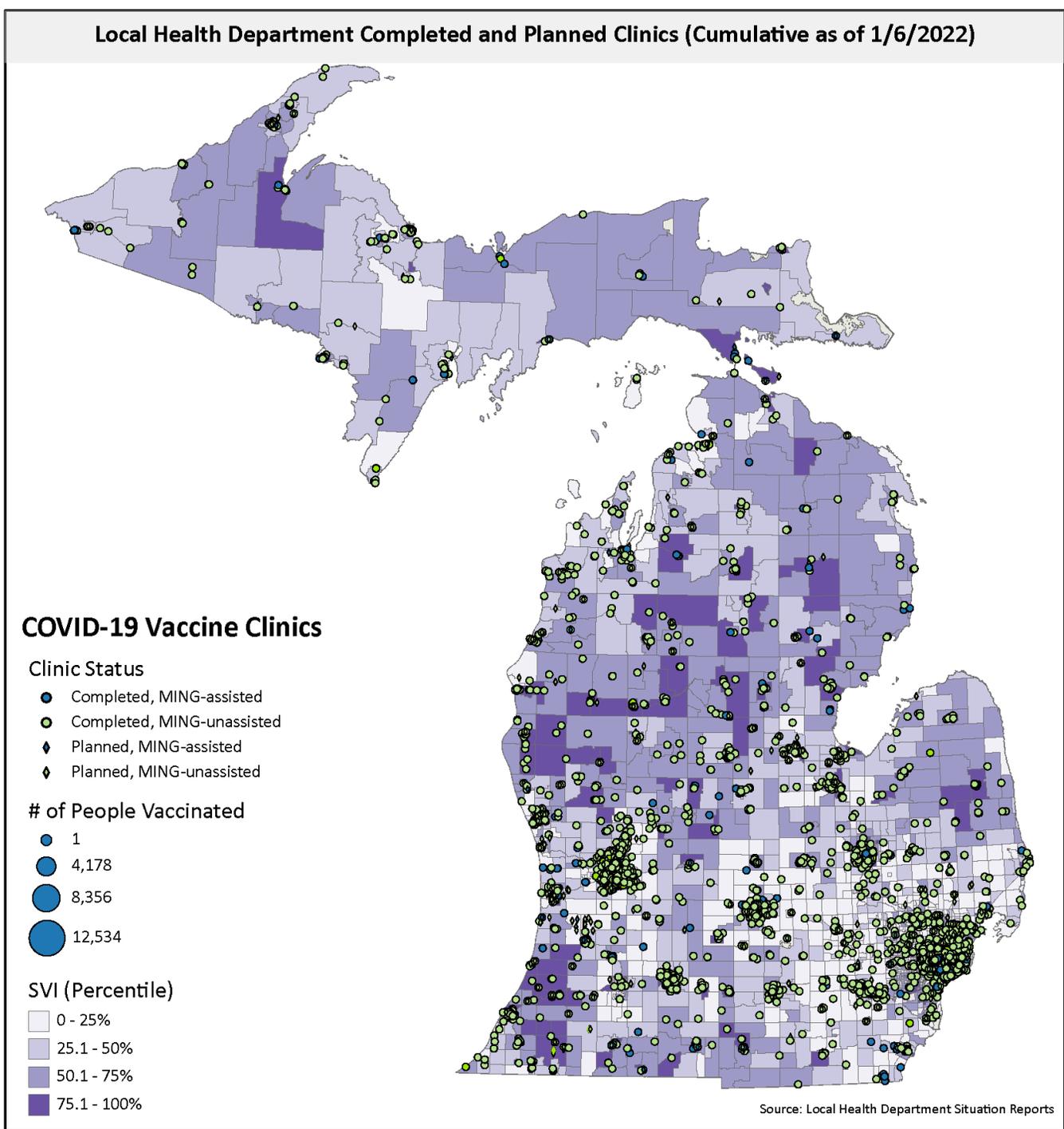
There is no disparity in vaccination rates across racial and ethnic groups or by social vulnerability index.

20-minute

No Michigander should have to drive more than 20 minutes to reach a vaccination site.



Completed and Planned Vaccination Clinics



Key Points Vaccine Providers Need to Know

- + Best practice during this pandemic is to assure providers have sufficient supply of vaccine available when someone is able or willing to receive vaccine. The current supply/demand landscape means it is acceptable to have a vaccine inventory.
- + Maximize opportunities to vaccinate families and others who may present to a place where vaccines are available. This may include staff, family members, or others who may be in close proximity to a vaccination site.
- + While ideally all vaccines would be used prudently, it is appropriate to maximize the opportunity to vaccinate someone even if some vaccine wastage occurs.
- + Michigan's Public Health Code requires parental/guardian consent in writing and maintained in the normal course of business.

Key Points Vaccine Providers Need to Know

- + Providers do not have to vaccinate patients that are not part of their general practice in order to be a federal COVID provider.
- + Providers should not use lack of ultra-cold freezer capabilities to deter enrollment in the federal program.
 - + Providers should maximize opportunities to request smaller vaccine amounts from local health department inventories and utilize vaccine cold storage guidance, including the ability to store vaccine at higher temperatures for a period of time according to vaccine storage requirements.
- + Providers should actively reach out to their patient base to encourage vaccinations, be prepared to address patient questions in real time, and provide opportunities in every clinical interaction to discuss COVID-19 vaccination.

STRATEGY 1: Get more people vaccinated

Objective

Expand capacity as much as possible, prioritizing those most vulnerable to severe disease and exposure and ensuring equity throughout process.

Actions

- + Work to support FQHCs, Indian Health Service, mobile clinics, local health departments, school-based health centers and other community vaccinators to specifically target vulnerable populations for vaccinations.
- + Utilize EMS, Fire Departments, Mobile Strike Teams, and other vaccinator partners to implement strategies to vaccinate homebound, disabled, migrant or transient workforce, and other marginalized communities.
- + Ensure vaccination efforts meet national Culturally and Linguistically Appropriate Services (CLAS) standards.
- + Maximize federal funding for provider reimbursement for vaccine administration
- + Ensure no out of pocket costs or citizenship requirements for vaccination.
- + Utilize Social Vulnerability Index in vaccination process.

STRATEGY 2: Build robust network of vaccination sites

Objective

Ensure all Michiganders have equitable access to vaccines.

Actions

- + Assure broad access to vaccines at pediatrician offices, family practice offices, school-based health centers, dialysis centers, specialty providers
- + While supply outpaces demand, utilize mass vaccination sites in each emergency preparedness region with local partners & Michigan National Guard.
- + Partner with pharmacies, FQHCs, colleges and universities to offer vaccines in targeted areas.
- + Utilize and expand neighborhood testing sites to eliminate barriers to access. Create vaccination sites located in places where patients frequently go.
- + Target transient/hard to reach populations such as incarcerated, homeless, disabled, or those living with substance use disorders.

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STRATEGY 2: Build robust network of vaccination sites

Objective

Ensure all Michiganders have equitable access to vaccines.

Actions

- + Leverage existing nontraditional spaces like casinos, nail salons, barber shop, and syringe service programs.
- + Leverage ride share programs to address transportation barriers.
- + Leverage emergency departments as vaccination locations.
- + Leverage vaccination opportunities at discharge for hospitalized patients, particularly for those being discharged to congregate care settings.

Michigan Community-Based Vaccination Strategy

Michigan will utilize private and public partners to support 6 key vaccination site types:

- + Homebound
 - Up to 90,000 vulnerable homebound individuals across the state
- + Community-based mobile clinics
- + Neighborhood Testing Sites
- + Seasonal Agricultural Workers
- + Shelters, Transient Communities, and Other Vulnerable Populations
- + Medium to Large Vaccination Sites (when demand necessitates)

STRATEGY 3: Promote maximal accessibility of vaccine

Objective

Maximize vaccination opportunities so that there are no missed opportunities to vaccinate people at the time they are able and willing to receive a vaccine.

Actions

- + Promote frequent communication, transparency, and clarity of allocation process.
- + Leverage public/private partnerships to enhance logistical support for vaccination efforts.
- + Engage stakeholders in allocation and distribution process.
- + Be responsive to changing landscape of vaccine supply and demand, and address distribution challenges and needs.
- + In times of limited vaccine supply, maximize administration thru-put by allowing demand to exceed supply.
- + Optimize distribution channels that prioritize administration to marginalized communities and efficient operational sites.

STRATEGY 4: Mobilize personnel to maximize vaccination efforts

Objective

Leverage human resource capital and partnerships to support vaccination efforts.

Actions

- + Fund additional community vaccinators, expand EMS support and other contractual workers.
- + Utilize MiVolunteer Registry with a targeted campaign to encourage participation.
- + Utilize clinical students to support vaccination efforts.
- + Maximize and expand use of Michigan National Guard and federal vaccination partners.
- + Leverage trusted community members as vaccinators and build upon existing relationships.

STRATEGY 5: Empower people with information to gain confidence to get vaccinated

Objective

Build a communications effort to assure all communities have access to timely, accurate, and understandable information on vaccines.

Actions

- + Build out robust earned and paid media strategy to address vaccine confidence.
- + Target communications efforts to those with low vaccine confidence and/or where low confidence creates great risk (i.e., congregate care staff).
- + Support broad and diverse coalitions to carry vaccine messages, leveraging Protect Michigan Commission.
- + Leverage and improve technology platforms so people have easy access to information simplify vaccine scheduling process.
- + Target communication strategies to celebrate successes and elevate positive vaccination experiences of trusted community members.
- + Use most up to date science and best practice risk communication strategies in our efforts.
- + Mandate race and ethnicity data reporting for vaccinators and make data readily available to public.