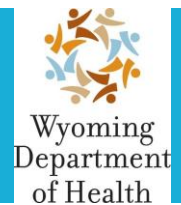


WYOMING DEPARTMENT OF HEALTH INTERIM DRAFT COVID-19 VACCINATION PLAN OCTOBER 16, 2020



Executive Summary

The Wyoming Department of Health (WDH) Interim Draft COVID-19 Vaccination Plan will be used to implement a statewide vaccination campaign for the COVID-19 pandemic. An internal COVID-19 Vaccination Planning Team has been established to draft the WDH COVID-19 Vaccination Plan. Multiple workgroups within the Team worked to complete sections of the plan and external stakeholders have been included as appropriate.

Phased Approach to COVID-19 Vaccination Response: The Wyoming COVID-19 Vaccination Campaign will be rolled out in a phased approach. Final priority group and subgroup allocations will be made once guidance from CDC and the Advisory Committee on Immunization Practices (ACIP) becomes available along with recommendations from the WDH Medical Ethics Committee.

Healthcare personnel likely to be exposed to, or treat people with, COVID-19 may be included as a Phase 1a priority group. Vaccinations of healthcare provider populations will be completed by hospitals, Public Health Nursing Offices (PHNOs), County Health Departments (CHDs), and the Eastern Shoshone Tribal Health Department. PHNOs and CHDs will be enrolled as COVID-19 vaccination providers first to ensure appropriate planning to immunize healthcare providers in their county. Hospitals will be enrolled to immunize their workforce as well as other healthcare providers in their community. Planning will be necessary between the hospital and PHNO or CHD to ensure vaccination for all healthcare providers groups. If necessary, additional vaccine providers will be enrolled for Phase 1 to ensure vaccination of healthcare providers.

Phase 1b critical populations may include people at increased risk for severe illness from COVID-19, including people with underlying medical conditions, people 65 years of age and older, and essential workers. PHNOs, CHDs, and hospitals will be enrolled as early vaccine providers to ensure appropriate planning to vaccinate Phase 1b critical populations in their county. PHNOs and CHDs will encourage large essential worksites that have medical personnel and the capability of being a vaccination provider to enroll as a COVID-19 Vaccine Provider to vaccinate their employees within Phase 1b. Additionally, PHNOs and CHDs will work closely with local partners to plan for vaccination of people with underlying medical conditions and those 65 years of age or older. In some counties, there may be additional vaccine providers in the county that would be essential for providing vaccinations to critical populations. PHNOs and CHDs will coordinate with the WDH to ensure these partners are enrolled as Phase 1b vaccination providers.

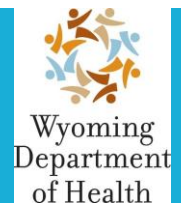
Phase 2 critical populations may include additional critical workers, people with underlying conditions, those in congregate settings, and people with limited access to vaccination services. As more vaccine doses are available later in Phase 2, the vaccine will be administered to all people that are recommended to receive the vaccine. The WDH Immunization Unit will reach out to organizations through collaboration with PHNOs, CHDs, professional associations, licensing boards, and other stakeholder groups to communicate the process for providers to enroll in the COVID-19 Vaccine Program. As vaccine supply continues to increase in Phase 2, the WDH will approve other providers to begin ordering COVID-19 vaccine and vaccinating additional critical populations as well as the general public.

During Phase 3, vaccines will be available to all people who are recommended to be vaccinated. Vaccine will be available to all enrolled COVID-19 vaccination providers and ordering will be based on provider capacity and need.

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Critical Populations: The WDH identified COVID-19 vaccine critical population groups and is estimating numbers of vaccine recipients in collaboration with various internal and external stakeholders. The WDH Medical Ethics Committee is compiling recommendations for prioritization of subgroups within each critical population. The Committee will provide prioritization recommendations based on a number of factors, including the need to maintain those elements of community infrastructure that are essential to carrying out the pandemic response; limiting mortality among high-risk groups and reduction of morbidity in the community; and minimizing social disruption and economic losses.

COVID-19 Vaccination Provider Outreach and Training: The Immunization Unit will reach out to organizations through collaboration with PHNOs, CHDs, professional associations, licensing boards, and other partners to communicate the process for enrolling providers. Enrollment information will be analyzed and where gaps are identified in coverage, the Immunization Unit will work closely with PHNOs or CHDs to identify and enroll additional vaccination providers.

During the provider enrollment process, the Immunization Unit will assess and verify storage capacity and equipment for each location. Provider offices will need to meet the storage requirements for storing the COVID-19 vaccine prior to being authorized to order and administer vaccines in order to minimize vaccine loss and limit the risk of administering compromised vaccine. Training will be provided to ensure appropriate storage and handling of the vaccine by providers.

Wyoming providers are required to report all vaccinations to the Wyoming Immunization Registry (WyIR). The WyIR has a Reminder Recall module, which can compile patient lists for the purposes of reminding of a dose due (reminder) or recalling those who need a dose (recall). Training will be in place for providers to ensure reminders are provided to people needing a second dose of vaccine.

When providers sign the CDC COVID-19 Vaccination Program Provider Agreement they are made aware of the need to report any adverse events following vaccination to the Vaccine Adverse Event Reporting System (VAERS). Enrolled providers will receive training including what the VAERS is, how to report, and requirements for reporting.

COVID-19 Vaccination Campaign Communication: The WDH recognizes the need for extensive and ongoing communication activities related to implementing the COVID-19 vaccination campaign. Anticipated key communication messages throughout the campaign period will include, but are not limited to, vaccine development status, vaccine availability in Wyoming, need for prioritization of limited doses, information about priority groups, vaccine safety reassurance, information on where to get vaccinated, importance of administering and receiving two doses, relationship to flu vaccine, and effectiveness of the vaccine. The WDH Public Information Officer and personnel within the WDH COVID-19 Vaccination Planning Team will coordinate and deliver public health information using the department's routine channels, applying crisis and risk communication principles as needed. Information will be provided to the public through public releases.

Provider and public information will also be available on the WDH Immunization Unit website:

<https://health.wyo.gov/publichealth/immunization/>.

COVID-19 Vaccination Campaign Monitoring: The WDH will employ multiple levels of program monitoring. Provider enrollment will be monitored and tracked and data provided to the CDC twice weekly. The WyIR will be used to monitor, track, and allocate all vaccine doses; monitor one and two-dose coverage rates; and report data to CDC as required.