




MEMORANDUM

TO: Mayor and Council Members

FROM: Adrienne Sturup, Interim Director 

DATE: November 15, 2021

SUBJECT: Staff Response Resolution No 20210826-110

The purpose of this memorandum is to provide an update regarding Council Resolution No. 20210826-110, which directed the City Manager to build on the Capital Area COVID-19 Vaccine Distribution Plan by developing a comprehensive COVID-19 vaccine booster shot strategy that -- notwithstanding any possible shift in vaccine distribution responsibility assigned by the State or Federal government -- includes but is not limited to:

- (1) A section dedicated to analyzing lessons learned from the ongoing initial COVID-19 vaccination rollout and process, with a focus on combatting vaccine hesitancy or access issues affecting communities most impacted by COVID-19;
- (2) The City's plan to build on its communication and partnership with community, government partners, and other vaccine providers during the booster shot process;
- (3) The City's plan to execute a booster shot strategy while continuing to address ongoing vaccine access issues and prioritizing populations experiencing disparate outcomes related to COVID-19;
- (4) The City's communication strategy and plan to educate the public with accurate information on the booster shot process and where residents can get the vaccine from among nearly 350 vaccine providers in the region; and
- (5) The City's plan to utilize Community Health Workers from Austin Public Health and community partners to address booster shot outreach efforts.

In response to the resolution, the City of Austin and its partners have undergone a rigorous process to incorporate the resolution's components into the COVID-19 vaccine operational plans. This process includes updating the Capital Area COVID-19 Vaccine Distribution Plan with a Companion strategy document. APH will post these draft plans for community-wide feedback utilizing a multi-pronged community engagement approach to ensure that the plans represent and respond to the community's needs.



The latest updates to the Capital Area COVID-19 Vaccine Distribution Plan includes a new Capital Area COVID-19 Vaccine Distribution Plan Companion describing leveraging the existing network of vaccine providers and increasing vaccine locations and staff capacity. The draft plans also incorporate expanded communication and outreach capacity through educational campaigns and targeted efforts through trusted sources. These strategies include Community Health Workers and Promotores and engaging partners and the ATX COVID-19 Vaccine Coalition to assess lessons learned and advise on adjustments to ensure equitable distribution of COVID-19 vaccines. This also addresses the integration of COVID-19 third doses and boosters into existing operations and prioritizing vaccine operations for unvaccinated or not fully vaccinated Travis County residents.

The following plans are currently in a draft state. Austin Public Health is working with the vaccine coalition, community partners, vaccine providers, including the County Vaccine Collaborative. The department is also launching a significant community engagement effort for residents to reflect on their vaccine experience and provide recommendations for improvement to shape ongoing vaccine operations. APH convened the Vaccine Coalition, provided two community town halls, and launched community and parent surveys.

Additionally, APH is supporting the provider network through technical assistance and education. Travis County Health Authority, Dr. Desmar Walkes, held a Pediatric Provider Panel discussion for local pediatric providers and school nurses to provide an educational, clinical discussion regarding the safety and efficacy of the recent COVID-19 vaccine approved for those ages 5-11. Information from this meeting is being shared through Travis County Medical Society to ensure all providers have the latest information.

APH continues to assess ongoing operations expenses to ensure efficiency while meeting community needs. Current clinical daily operations support 3-5 static clinics and 2-3 pop-up sites. Over the next few months, the overall community will have access to the COVID-19 vaccine through more traditional health care providers. The supply of vaccines is now widely distributed and this shift in the provider network allows APH to redirect its efforts to populations at highest risk and focus on areas with low vaccine rates and high rates of disease transmission.

APH is assessing ongoing operational costs to meet community needs. Rough estimates at this time include \$18.5 million in total vaccine response expenditures to date. Additionally, APH estimates that ongoing vaccine response will cost approximately \$1.5 million per month. A deeper cost analysis is underway and will guide long-term operational decisions better.

This assessment has identified multiple needs to support sustained response operations, including field operations, community outreach, risk communications, infrastructure support,



and logistics across City and County departments. The following recommendations aim to address unmet needs to support ongoing operations are listed below:

- Incentives to engage hard-to-reach populations and encourage vaccine uptake. This strategy is vital in addressing populations with limited access to vaccines and other resources, such as individuals experiencing homelessness. Additionally, this supports low-wage earners who may be concerned about losing wages due to taking time off to get the vaccine for themselves or their family members. Incentives can also nudge those planning to get the vaccine but have not made it a priority.
- Additional staff to manage and execute the incentive program, ensuring adherence to City policies and procedures, proper cash handling, and effective use of taxpayer resources.
- Development of localized neighborhood campaigns, including market testing, message development, and campaign collateral materials including Print, Radio, TV, Social Media ads, outreach materials such as push cards, fliers, translation services, printing, and focused media buys. The campaign is even more crucial now that vaccines are available to those under 12 years old, and waning immunity necessitates encouraging people to get 3rd doses/boosters.
- Support new clinical strike teams. Additional teams will expand current capacity to meet ongoing community requests for vaccine clinics and home visits. Currently, APH conducts vaccine strikes up to seven (7) days a week, morning, afternoon, and evening. Additionally, these teams can combine to scale to larger events and support static clinic sites.
- Ongoing security for existing and new operations to ensure the protection of patients and staff. Security may be provided through existing city/county resources, contracted resources, or mutual aid requests.
- Traffic control support at existing and new operations to ensure adequate traffic control engineering. Existing contractor capacity is limited by supporting other special events. Traffic control support may be provided through existing city/county resources, contracted resources, or mutual aid requests.
- Ongoing emergency operations logistical and financial support, including multi-agency coordination, supply chain management, including sourcing supplies through existing operations and vendor procurement, tracking finances, and cost recovery.

The above recommendations are based on the evolving lessons learned from the long-term implementation of the COVID-19 vaccine strategy and are critical to the successful community-wide implementation of the current and next phase of vaccine distribution.



Austin Public Health will work with the City's Budget office on the long-term plan to address unmet needs and sustain existing operations.

Attachments:

Capital Area COVID-19 Vaccine Distribution Plan Companion

Cc: Spencer Cronk, City Manager
Anne Morgan, Interim Deputy City Manager
Stephanie Hayden-Howard, Assistant City Manager

Capital Area COVID-19 Vaccine Distribution Plan Companion

DEVELOPED BY AUSTIN PUBLIC HEALTH

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Record of Changes

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Executive Summary

The purpose of this document is to detail Austin Public Health's framework for balancing equitable access, service delivery, and vaccine demand in consideration of contemporary concerns such as:

- Continued vaccine hesitancy in communities
- Inequity in vaccine administration
- Approval of booster doses for the COVID-19 vaccine
- Anticipated approval of a COVID-19 vaccine for use in children younger than 12 years of age

In January of 2021 Austin Public Health was designated as a statewide hub, providing COVID-19 vaccinations to Texas residents in accordance with eligibility requirements. To assist with vaccine accessibility Austin Public Health set up mass vaccination sites and launched the Mobile Vaccination Program, collaborating with community partners to develop community-based COVID-19 vaccination clinics. As a result of the changing demands to the vaccine response, Austin Public Health and the Vaccine Planning Committee have developed an additional set of Guiding Principles (Figure 1) to inform the ongoing community-wide vaccination efforts.

Guiding Principles

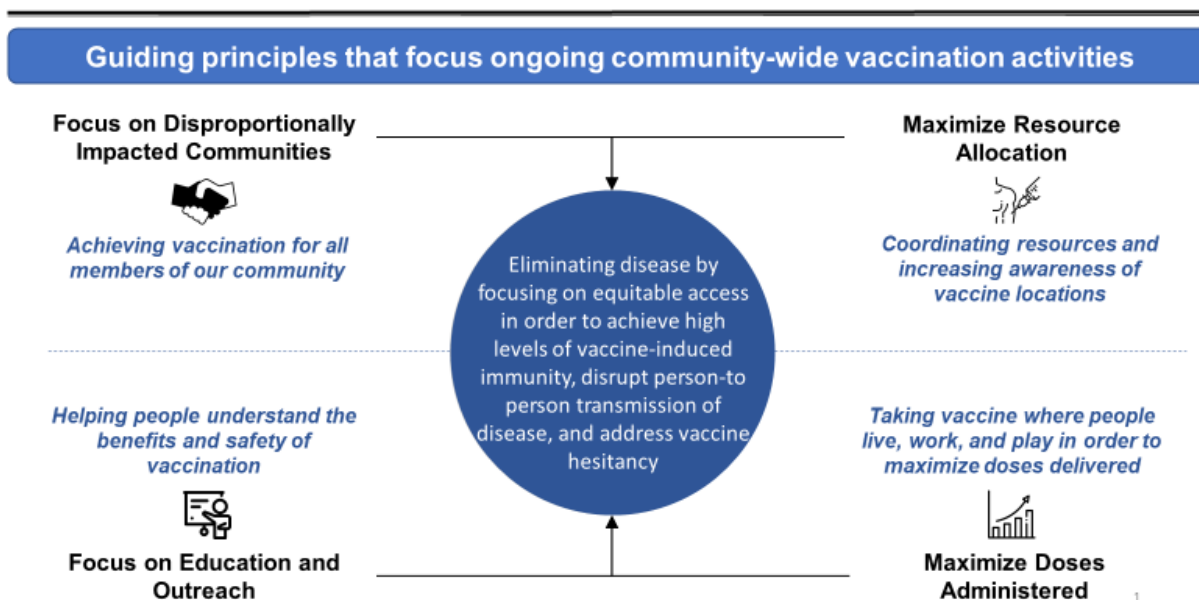


Figure 1

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COVID-19 vaccines are widely available to all residents of the capital area through private providers, pharmacies, and public health organizations. In general, the supply of the COVID-19 vaccine has exceeded demand and, as of July 4th, 2021, over 70% of eligible Travis County residents have received at least one dose of a COVID-19 vaccine.

Austin Public Health will continue to monitor COVID-19 vaccine uptake and coverage in high-risk populations, enhancing current strategies to reach population with low vaccination uptake or coverage. In addition, APH is preparing for 3rd doses and will employ lessons learned from 1st and 2nd doses to improve vaccination efforts.

Section 1: COVID-19 Vaccination Program Comprehensive Education and Outreach Campaign

APH launched a comprehensive multi-pronged outreach campaign, applying a health equity lens that considers the cultural and linguistic needs of the Austin/Travis County community. Outreach efforts focus on those who are at increased risk for severe disease and partnering with community groups, vaccine providers, and the Emergency Operations Center (EOC) Social Services Branch to lead partner activation and engage with groups disproportionately impacted by the pandemic, those with limited access to vaccine, hard to reach populations, and those that are vaccine hesitant. The campaign will follow a phased approach that mimics the phases of vaccine distribution outlined by the CDC.

- **Phase 1:** Campaign messaging will focus on 1) *setting expectations* as initial supply of the COVID-19 vaccine will be limited and 2) *continued precautions* as social distancing, masking, and hygiene
- **Phase 2:** Campaign messaging will focus on 1) *patient education* such as safety standards, dose requirements, and immune response and 2) *operational details* including provider locations and vaccine availability.
- **Phase 3:** Campaign messaging will continue to focus on 1) *patient education* and 2) *operational details* to emphasize vaccine safety and dose requirements, as well as 3) *metrics for hope* to guide a return to normalcy through vaccine acceptance and herd immunity.
- **Phase 4:** Campaign messaging will continue to focus on 1) *community education* to encourage people to get vaccinated, 2) *operational details* to provide incentives to those currently unvaccinated to get vaccinated and expanding operations to account for increase in site capacity to provide 3rd doses, 3) *continuous precautions* such as masking, proper hygiene, and avoiding large crowds, and 4) *metrics for hope* to guide a return to normalcy through vaccine acceptance and herd immunity.

With the support of the APH Education & Vaccination Program's Research & Planning team we are gathering data using public surveys. The surveys cover questions such as the participant's location, beliefs on the vaccine and COVID-19, and demographic information. The collected vaccination data is

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analyzed by race, ethnicity, zip code, and qualitative data concerning vaccine readiness. The data from these surveys and local COVID-19 health data is being used to inform strategies addressing vaccine hesitancy, education, and to identify populations disproportionately impacted by COVID-19. The results will build on current practices to inform both public outreach efforts and targeted interventions undertaken by the APH COVID-19 Education Team. The Education Team coordinates with the APH Mobile Vaccination Program strike teams to engage with vaccine hesitant populations offering education events or focus groups to address concerns, answer questions, combat misinformation, and encourage vaccination.

The Health Equity Task Force continues to work with the COVID-19 Education & Vaccination Program to bring vaccine resources to zip codes at less than 50% first dose penetration. Outreach events continue to be an important tool to support protective behaviors, meet basic needs and provide information about the COVID-19 vaccine.

Austin Public Health is also promoting vaccines using focused messaging, paid advertising, and leveraging partnerships. For example, Austin Public Health partnered with Travis County, Central Health, and CommUnityCare to launch the “Let’s Stick Together” initiative on June 28. The initiative aims to achieve the community-focused goal of 70% of eligible Travis County residents receiving at least one dose of the vaccine by July 4th and 70% of residents fully vaccinated by September 6th. Additional local organizations were involved in contributing to the initiative, including Ascension Seton, Austin Independent School District, Baylor Scott & White, Capital Metro, Dell Medical School, Del Valle Independent School District, Integral Care, Lone Star Circle of Care, People’s Community Clinic, St. David’s HealthCare, St. David’s Foundation, and the University of Texas at Austin. As part of the “Let’s Stick Together” initiative, Austin Public Health and Central Health placed targeted advertising on the radio, in print, and online in both Spanish and English.

To date, Austin Public Health has utilized television signals, radio frequencies, publications, websites, streaming platforms, email distribution lists, social media platforms, texting, and public transportation for paid advertising efforts.

Current Communication Strategies Include:

- Promoting walk-up and pop-up vaccination events, with paid radio promotions and paid social media campaigns, and texting that is zip code geofenced to the area in which vaccines are being provided.
- Encouraging people to prepare for travel by getting fully vaccinated, including information that it takes two weeks after the second shot for Pfizer and Moderna or two weeks after the single-shot Johnson & Johnson to be considered fully vaccinated.
- Providing the Equity Task Force with educational materials to address hesitancy and combat misinformation. Content includes, but is not limited to; educational materials to address community feedback such as concerns with infertility, severe side effects, vaccine development, and how the vaccine works with your body to protect you from disease.
- Continuing to encourage proper hygiene (washing your hands, not touching your face, wearing a mask, and social distancing) as well as information on testing, quarantine, and isolating if you come in contact with someone who has symptoms or has tested positive for COVID-19.

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Section 2: COVID-19 Vaccination Third-dose Administration, Scheduling, and Reminders

On August 13, 2021, the CDC recommended that people who are moderately to severely immunocompromised receive an additional dose of an mRNA COVID-19 Vaccine (Pfizer-BioNTech or Moderna). According to the CDC, moderately to severely immunocompromised people are more at risk of serious, prolonged disease and may benefit from an additional dose to ensure they have adequate protection against COVID-19. The third dose should be administered at least 28 days after the completion of the initial mRNA COVID-19 vaccine series in immunocompromised individuals.

Current recommendations for immunocompromised individuals who are advised to receive an additional dose include people who have:

- Active treatment for solid tumor and hematologic malignancies
- Receipt of solid-organ transplant and taking immunosuppressive therapy
- Receipt of CAR-T-cell or hematopoietic stem cell transplant (within 2 years of transplantation or taking immunosuppression therapy)
- Moderate or severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome)
- Advanced or untreated HIV infection
- Active treatment with high-dose corticosteroids (i.e., ≥ 20 mg prednisone or equivalent per day), alkylating agents, antimetabolites, transplant-related immunosuppressive drugs, cancer chemotherapeutic agents classified as severely immunosuppressive, tumor-necrosis (TNF) blockers, and other biologic agents that are immunosuppressive or immunomodulatory.

APH advises immunocompromised individuals or those who unsure about their eligibility for a third dose to speak with their healthcare provider about their medical condition and whether an additional dose is appropriate for them. Immunocompromised individuals who choose to receive their 3rd dose at an APH vaccination site may self-attest to their immunocompromised status.

COVID-19 Booster Dose Preparedness

On August 18, 2021, experts from the U.S Health and Human Services Department released a statement on the Administration's plan for COVID-19 booster doses. Per the statement, booster doses will be recommended for all individuals, pending an evaluation on the safety and effectiveness of a 3rd dose of the Pfizer and Moderna mRNA vaccines by the FDA and the CDC's Advisory Committee on Immunization Practices (ACIP). On September 24, 2021, the CDC recommended a booster shot of the Pfizer-BioNTech COVID-19 vaccine for certain populations at least 6 months after their primary vaccine series:

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- People aged 65 and older
- Residents of long-term care facilities
- People aged 50-64 with underlying medical conditions (expand on what these are from CDC list)
- People aged 18-49 with underlying medical conditions are also eligible
- People aged 18-64 that are at high risk of exposure to COVID-19 due to occupation are also eligible

While COVID-19 vaccines are effective at preventing severe illness, hospitalization, and death, the vaccines may provide reduced protection against the Sars-CoV-2 virus and its variants over time due to waning immunity. Individuals who received these vaccines will be advised to receive a booster dose starting 6-8 months after an individual's second dose. It is recommended that individuals get the vaccine from the same manufacturer as their 1st and 2nd dose. The CDC has not yet made recommendations for people who received the Moderna or Johnson & Johnson vaccines but data regarding the necessity and timeline of booster dose administration for these vaccines is expected to be forthcoming in the coming weeks. APH will continue to evaluate the Capital Area COVID-19 Vaccine Distribution Strategy as further recommendations and data are released.

Lessons learned during the initial distribution of the COVID-19 vaccine have informed the way that APH is preparing for the administration of booster doses of the vaccine. When Austin/Travis County began COVID-19 vaccination, the goal was to serve as many people as possible while adhering to the guidelines from the State of Texas that determined eligibility criteria. However, APH suffered from an incomplete appointment registration system, a lack of additional community COVID-19 vaccine providers, and the difficulty of meeting the overwhelming demand for the vaccine. The response effort quickly adapted, increasing the number of COVID-19 vaccination sites, improving the online registration system, and collaborating successfully with many community partners to offer vaccines to the public.

- APH has strengthened the Mobile Vaccination Program (MVP), which offers COVID-19 vaccination for targeted groups in community-identified locations. The MVP responds to requests from the community to provide vaccinations to homebound residents and to host pop-up vaccination clinics at long term care facilities, housing complexes, and other facilities. Organizations are encouraged to complete an online questionnaire to express interest in scheduling a pop-up vaccination clinic at their facility.
- APH has set up PODs and Pop-Ups (temporary vaccine clinics) in locations where there are low vaccination rates.
- APH has partnered with local authorities to set up community-based vaccine events.
- APH offers special services to the deaf, blind and visually impaired communities by providing ASL interpretation and other assistive services at vaccination sites. APH is also collaborating directly with community partners to ensure that vaccination services are accessible to people with disabilities in the community.

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- APH has developed a COVID-19 Education Team which offers COVID-19 vaccination education outreach opportunities. Organizations are encouraged to complete an online questionnaire to express interest in scheduling a vaccine education session at their facility.
- APH has worked diligently to ensure that the Austin Healthforce online registration system will be prepared to schedule patients for their booster doses and send appointment reminders
- APH has several existing regular vaccination opportunities, with the ability to increase availability on short notice.
- In consideration of the success of APH's previous mass vaccination sites, APH is working to identify a location that can accommodate mass vaccination operations capable of vaccinating many people per day
- APH will maintain walk-up unscheduled appointments at clinic sites to accommodate patients who are unable to preregister
- APH has reinforced partnerships with Travis County and the County Constable, among other partners, to provide comprehensive vaccination services across the county

These lessons, among others, have prepared APH to ensure that, as we look forward to the approval of booster doses, vaccine administration will remain accessible and equitable.

COVID-19 Vaccination Third-dose Scheduling & Reminders

Healthcare providers will be required to notify their own patients to schedule their third dose. Texas DSHS will provide lists from ImmTrac2 of clients to support third dose scheduling and it is up to the healthcare provider to arrange the reminder. For any Austin Public Health administered vaccines, the current scheduling portal for COVID-19 will be used. Austin Public Health has updated this portal to support vaccine scheduling, including reminders for scheduling appointments, for a third dose of the COVID-19 vaccine.

APH is actively reaching out to hard-to-reach populations through our call center to reduce barriers and offer appointments to eligible individuals seeking their 3rd dose. Upon CDC authorization, APH will contact APH COVID-19 vaccine patients to remind patients of the 8-month booster schedule through a direct text, email, or phone call. Patients will be offered an appointment with APH and be directed to available vaccine providers the community. Throughout the coming months, any eligible individual seeking a 3rd dose can contact 311 to schedule an appointment.

Fully Vaccinating Populations While Providing Additional Doses

As APH plans for the administration of additional doses of the COVID-19 vaccines, equitable vaccine distribution and access is a priority. In order to protect the eligible population of immunocompromised individuals along with our loved ones and community, APH will continue to encourage everyone who is still unvaccinated to get the COVID-19 vaccine. APH recognizes that there are communities who continue to suffer from COVID-19 due to low vaccination rates and will continue to offer and promote the vaccine to all persons who have not yet been vaccinated. APH will continue to develop accessible vaccination opportunities, develop appropriate educational materials and messages

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to address hesitancies, and collaborate with community partners to ensure vaccine uptake in Travis County's vulnerable communities.

Notably, the supply of COVID-19 vaccine in Travis County is much greater than it was at the beginning of vaccine administration. Vaccine supply has exceeded demand, vaccination efforts have expanded, and more providers, including private providers and pharmacies, have received the vaccine for distribution. In collaboration with the Texas Department of State Health Services, APH has begun transferring the COVID-19 vaccine, along with vaccine coolers and ancillary vaccination supplies, to community partners in order to strengthen vaccine administration efforts among community-based providers of the COVID-19 vaccine. Travis County residents are encouraged to visit [Vaccines.gov](https://www.vaccines.gov) for further information regarding available vaccination sites. Austin Public Health encourages those with access to other providers to seek the vaccine at other locations. While no one will be turned away from Austin Public Health, it is important to note that APH's focus is on the uninsured and underinsured populations

Section 3: COVID-19 Vaccination in Pediatric Patients

Vaccination continues to be the best line of defense against COVID-19. Currently, the CDC recommends COVID-19 vaccination in everyone 12 years and older. At this time, only the Pfizer mRNA COVID-19 vaccine is approved for children under the age of 18. Despite this restriction, APH has been diligent in vaccinating children 12 years and older. Existing outlets such as APH Shots for Tots clinics have provided the COVID-19 vaccine to children and family members in addition to helping protect children and family from life-threatening illness by offering additional immunization services to uninsured and underinsured children and their families. APH has also partnered with public school districts, charter schools, and private schools to host vaccination clinics for students and their families across Travis County.

Austin Public Health will utilize guidance from the FDA and CDC's ACIP made in regard to the vaccination of children under 12 years of age. Children under the age of 12, once eligible, will be able to receive their vaccination at APH COVID-19 vaccine sites. In addition, APH has been proactive in developing plans with local schools and is prepared to conduct pop-up vaccination clinics at accessible school locations.

Authorized adult consent: If an individual is younger than 18 years old, they will need a consent from an authorized adult to get the vaccine.

Authorized adults who may consent for minors include:

- Parent
- Adult who has court permission to make health care decisions for you (legal guardian)
- Adult who has your parent's written permission to make health care decisions for you
- Adult relative responsible for your health care

If an authorized adult cannot attend the vaccine appointment with a minor, the adult may fill out an adult consent form in advance.

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