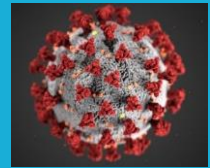


# NEW HAMPSHIRE INTERIM COVID-19 VACCINATION PLAN



## Executive Summary – INTERIM DRAFT

### Introduction

The Coronavirus Disease 2019 (COVID-19) pandemic has caused substantial morbidity and mortality, and significant economic and social disruption. Through current mitigation efforts, and in anticipation of a COVID-19 vaccine, New Hampshire's (NH) goal is to decrease disease burden and ensure NH citizens remain healthy and free from disease in every stage of life. This plan was developed by the NH Department of Health and Human Services (DHHS), Immunization Program (NHIP) and informed by the Centers for Disease Control and Prevention's *Vaccination Program Interim Playbook for Jurisdiction Operations*, prior pandemic and outbreak experience in NH, preparedness plans, and the National Academies for Science, Engineering, and Medicine's *A [Framework for Equitable Allocation of Vaccine for the Novel Coronavirus](#)*. This plan represents current plans and strategies. NH's approach will be adapted as appropriate based on new science or national best practices and guidelines throughout the vaccination initiative. Key components of NH's plan are summarized here.

### COVID-19 Vaccination Planning Highlights

#### Section 3: Phased Approach to COVID-19 Vaccination

NH's vaccination program is structured around the concept of a phased response, whereby vaccine may be initially be limited. A Vaccine Allocation Strategy Branch will inform strategies related to equitable dose distribution. The current distribution plan includes starting each phase of vaccination in geographic areas with the highest COVID-19 disease case count. Ensuring equitable access to COVID-19 is central to NH's vaccine planning efforts. NH's initial plan includes vaccination of the following groups under Phase 1a: High-risk workers in health care facilities, first responders, and older adults in residential care settings.

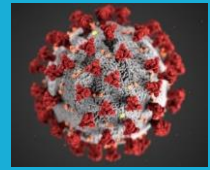
#### Section 4: Critical Populations

Some populations have been disproportionately impacted by COVID-19 and are at increased risk for infection, severe illness, and death. Data is being gathered from multiple sources to determine accurate numbers for distribution planning. NH's definition of critical infrastructure workforce is currently being determined by the Vaccine Allocation Strategy Branch, building off of the Pandemic Influenza critical workforce guidance to include critical infrastructure not traditionally considered. Sub populations will likely be determined by co-morbidity and will require vetting through medical homes. The Vaccine Operations Section's Communication Branch is developing an initial, comprehensive communication plan that clearly delineates methods for communication with various entities, including the general public and partners that serve critical populations.

#### Section 5: COVID-19 Vaccination Provider Recruitment and Enrollment

NH is a universal childhood vaccine purchase state, with many providers currently enrolled in NHIP. A Government/Non-government partnership of distribution will be implemented. Providers identified as vaccinators in the first phase will be prioritized for enrollment. Recruitment will be based on utilization in the next phases, as well as creating depth of vaccine providers and decreasing barriers towards immunization. Additionally, 13 fixed sites on the government side of the response will be established to supplement these individual vaccine providers. Pharmacies will also be recruited to provide additional vaccination services. Vaccine providers will be verified through the established, Vaccine Provider Agreement process; provider enrollment

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data will be submitted via CDC's Vaccine Tracking System (VTrckS) and sent to CDC. Ensuring equitable access to COVID-19 vaccine is central to planning efforts, with oversight by the Vaccine Allocation Strategy Branch, and solicitation of feedback from the State Disaster Medical Advisory Committee and the DHHS Office of Health Equity. Key documents leveraged for this work include NH's COVID-19 Equity Response Team [report](#), CDC's COVID-19 Response Health Equity [Strategy](#), and the National Academies for Science, Engineering, and Medicine's *A [Framework](#) for Equitable Allocation of Vaccine for the Novel Coronavirus*. All pharmacy distribution plans will be approved by the NHIP and Vaccine Operations Section to ensure equitable and fair distribution.

## Section 8: COVID-19 Vaccine Storage and Handling

Prior to the receipt of COVID-19 vaccine, new vaccine providers will be required to complete vaccine storage and handling training. The training will be conducted via an independent, on-line education portal (CDC TRAIN), webinars, an established Help Line which will include clinical and vaccine management subject-matter experts, and various job aids. COVID-19 vaccine storage and handling capabilities will be evaluated via the COVID-19 specific, CDC Vaccine Provider Agreement and Profile.

## Section 10: COVID-19 Vaccination Second-Dose Reminders

Individuals will be notified when they are eligible for their second dose of COVID-19 vaccine via the NH Immunization Information System's reminder/recall feature, through CDC "shot cards" provided upon initial vaccine receipt, through their medical home's reminder/recall process, or text messaging. State-wide documentation will be leveraged to ensure the second dose of a vaccine presentation is the same as the first, observing recommended intervals between vaccine doses.

## Section 12: COVID-19 Vaccination Program Communication

NH's COVID-19 vaccination communication plan is in place and will continuously be updated to include addressing communications with key audiences, identification of effective communication channels, and partner activation for each of the phases of the COVID-19 Vaccination Program. NH DHHS has established processes for providing crisis and emergency risk communications in an expedited manner. This includes leveraging NH's Joint Information Center and the Health Alert Network (HAN). A member of the Department's Public Information Office leads the vaccine planning Communication Branch.

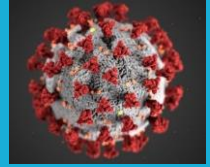
## Section 14: COVID-19 Vaccine Safety Monitoring

Through the vaccine provider enrollment process, NH will ensure enrolled vaccination providers understand the requirements and process for reporting adverse events to the Vaccine Adverse Event Reporting System. Information will also be made available through NHIP's website, social media platforms, and quarterly NHIP conference calls.

## Section 15: COVID-19 Vaccination Program Monitoring

NH will implement methods and procedures for monitoring progress in the COVID-19 Vaccination Program implementation. Vaccine ordering and distribution will be approved at the state level and vaccine wastage will be monitored through standard, established procedures. Methods and procedures for monitoring resources are in place, including monitoring the budget, staffing, and supplies. Reception of public communication messages will be monitored through the public information office, media inquiries, and social media. Program metrics to

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be monitored include vaccination provider enrollment, doses distributed, doses administered, and vaccination coverage. Bi-directional communication pathways are being formulated and leveraged to provide real-time feedback to inform NH's COVID-19 Vaccine response efforts.