

Baker County Health Department  
Equity Plan

Reporting Demonstrated Progress  
September 30, 2021

Q 1. Please review the jurisdiction's response to questions #1 and #2 in the accepted equity documentation, as well as recent race/ethnicity data. Describe any improvements in equity gaps as evidenced in the data. Provide a status update on progress the LPHA and its partners have made to eliminate vaccine access barriers and implement plans to close vaccine equity gaps among specific racial and ethnic populations. Please be specific, provide an example of work about which the LPHA and its partners are particularly proud, and describe any tangible impacts in the community.

A 1. As stated in the plan Baker County has been working to eliminate vaccine access barriers from the start of this response. Baker County is currently looking at purchasing a mobile vaccine clinic to reduce this even further.

Q 2. Please review the jurisdiction's response to question #6 and provide an update on the LPHA and its partners' work to address the vaccine needs of migrant and seasonal farmworkers in the jurisdiction and share the outcomes of these efforts.

A 2. Baker County has reached out to this community to make sure they are aware of the opportunities. At this time no feedback has been obtained that additional steps need to be taken.

Q 3. The pandemic has demonstrated and elevated the structural barriers that perpetuate health inequities. To dismantle those structural barriers in the long-term so that health equity can be achieved across all populations statewide, transforming how public health works with communities to engage in multi-directional communication and dialogue with, share power with and center in decision making communities most affected by those inequities is essential.

a. Please provide an example of feedback the LPHA and its partners received from a community experiencing vaccine inequities, how the LPHA and its partners worked collaboratively with the community to address the feedback and then shared back with the community the outcome or resolution.

A 3a. Baker County held vaccine clinics in each of the outlying communities to give access to those that could not make it to Baker City. At each one of these events we received a huge "thank you" as they did not know how they were going to get the

vaccine if we had not come to them.

b. Please provide an example of how the LPHA and its partners have shared power with and centered the communities experiencing inequities in decision making to determine strategies to increase vaccine access for communities.

A 3b. Baker County has a working group of those that are providing vaccine access and if they can't meet a need they bring it up to the group. The group then figures out how best to address this issue.