Jackson County
COVID-19 Vaccine Equity Plan

Jackson County is committed to the Oregon Health Authority (OHA) goals to ensure vaccine access to all populations and reach parity in vaccination rates. This plan outlines Jackson County’s efforts to address COVID-19 vaccine equity by closing gaps among communities of color and other marginalized communities. These efforts are ongoing and plans will be evaluated and adjusted as needed to reach OHA’s goals.

1. Please review race/ethnicity data for the LPHA jurisdiction on the OHA website and the race/ethnicity vaccination rate data shared weekly with the LPHA. Based on the experience of the LPHA and its partners, including community-based organizations, what are the operational, policy, and systemic barriers or strengths demonstrated in these data?

Similar to what has been seen across both the state and nation, COVID-19 has disproportionately impacted people of color in Jackson County. People who identify as Hispanic or Latino represent 23% of the total COVID-19 cases in Jackson County (compared to 13% of the total population) and have a case rate per 100,000 that is over 150% greater than that for people who do not identify as Hispanic or Latino. People who identify as American Indian/Alaska Native, Black, and Pacific Islander also have case rates significantly higher than the overall Jackson County population. Cases among those who identify as Pacific Islander have a higher rate of hospitalization compared to all other racial groups.

Additional concerning trends found in the data include:

- Jackson County vaccination rates lag behind statewide rates for all racial and ethnic groups.
- Vaccination rates for people of color generally lag behind that for people who identify as white, with the exception of the Native Hawaiian/Pacific Islander population.
- The Latinx/Hispanic population, which represent the second largest racial/ethnic group in Jackson County and 23% of our total COVID-19 cases, have the second lowest vaccination rate. Growth in vaccination rate for this population is also slightly lower than for several other groups.

Based on the experience of Jackson County Public Health and its partners, the following operational, policy, and systemic barriers underlie these concerning trends in the data:

- The initial groups that were prioritized for vaccination by the state — healthcare workers, educators, and older adults — were groups where people of color are underrepresented. In Jackson County, the age distribution of both the Black and Latinx/Hispanic population trends younger than for other populations and thus make up a smaller percentage of the older age groups they do in the population in general. This underrepresentation in prioritized groups got
vaccination for people of color off to a slower start than for people who identify as non-Hispanic White.

- Discerning vaccine eligibility and navigating vaccine scheduling early on, when vaccines were less available and specific groups were being prioritized, was difficult even for those with high levels of education, available time, and resources. It was even more confusing for those who experience disadvantages in their ability to navigate the healthcare system, such as low literacy, limited English proficiency, and those without flexible time during traditional work hours.
- Initial vaccination clinics required appointments and generally were only held in select locations, during traditional work days and work hours, creating difficulties for those who are unable to take time off work or have transportation difficulties.
- Historic and current discrimination and systemic racism has contributed to a mistrust of both government and healthcare systems among populations of color.

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Vaccination Rate 4/21/21</th>
<th>Vaccination Rate 6/1/21</th>
<th>Growth</th>
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<tbody>
<tr>
<td>American Indian/Alaska Native</td>
<td>17.3%</td>
<td>29.6%</td>
<td>12.3%</td>
</tr>
<tr>
<td>Asian</td>
<td>24.2%</td>
<td>37.8%</td>
<td>13.7%</td>
</tr>
<tr>
<td>Black</td>
<td>14.5%</td>
<td>24.9%</td>
<td>10.4%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>16.2%</td>
<td>26.5%</td>
<td>10.3%</td>
</tr>
<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>29.5%</td>
<td>50.4%</td>
<td>20.9%</td>
</tr>
<tr>
<td>White</td>
<td>29.7%</td>
<td>39.1%</td>
<td>9.4%</td>
</tr>
</tbody>
</table>
Jackson County has worked throughout the pandemic to address systemic barriers and disproportionate impacts for people of color. Examination of morbidity, mortality, and vaccination data reveal the following positive trends:

- In the past few months, the COVID-19 case rate gap between persons who identify as Hispanic or Latino and persons who identify as non-Hispanic has been significantly reduced and, in the past two weeks, case rates have been approximately equal between these two groups (see graph below).
- People who identify as Pacific Islander have the highest rate of vaccination in Jackson County. As the vaccination rate for this population has gone up, the hospitalization rate has decreased. Overall hospitalization rate for COVID-19 cases who identify as Pacific Islander was 17.6% in early April and is now around 12.5%.
- When looking at the growth in vaccination rates since 4/21/21, the increase in vaccination rate is similar across all races/ethnicities except for Pacific Islanders whose growth is approximately twice that of other groups.

Based on the experience of Jackson County Public Health and its partners, the following operational, policy, and systemic strengths underlie these positive trends in the data:

- **Strong community partnerships.** Jackson County has been working with healthcare and Community Based Organization (CBO) partners throughout the pandemic, including those that have strong existing ties to local communities of color. To specifically address equity in vaccination, a Vaccine Equity Planning Team was formed with partners including Jackson County Public Health, both Jackson County hospital systems, both Jackson County FQHCs, Unete, Jackson Care Connect, and our regional health equity coalition SO Health-E. A subgroup within this team is specifically focused on Latino/a/x outreach (more detail in later sections).
- **Community Vaccine Center pilot project.** Jackson County was selected by the Oregon Health Authority and FEMA to have a Pilot Community Vaccination Center (CVC), which was named the Jackson County Vaccination Equity Center. The goal of the CVC is to assist Jackson County Public
Health to expand vaccine services to the county’s rural and agricultural communities, unsheltered populations, and those displaced by the wildfires. This project brought in a large amount of additional capacity from FEMA and the Department of Defense to support both a fixed-location drive-thru clinic and mobile vaccination clinics throughout the county (more detail in later sections).

- Dedicated staff for equity and community outreach work. Jackson County Public Health created a CBO Coordinator position to support outreach and coordination with CBOs and to help bring an equity lens to all aspects of the COVID response.
- Policy decisions that decrease barriers. This includes provision of the vaccine for free, a state-level decision in places from the beginning of vaccination, as well as providing the option for walk-in service (no appointment needed), not collecting insurance information and increasing availability on evenings and weekends which were implemented at the local level starting in April.
- Regular reporting disaggregated surveillance data. This data has been used to identify disparities between demographic groups and inform the planning of strategies to close gaps.

2. What steps have the LPHA and its partners already taken to address specific racial and ethnic vaccination inequities in the community?

Vaccine Equity Planning Team

The Vaccine Equity Planning team is a partnership between Jackson County Public Health, the regional health equity coalition (SO Health-E), and local hospital systems, FQHCs, CBOs, and CCOs. Its intention is to ensure that Jackson County’s Latino/a/x community can easily access vaccination services in their preferred language and at locations that lessen barriers.

To fulfill this intention, the collaborative has five primary areas of work:

1. Openly engage with vaccination partners to identify their strengths and challenges in serving this community and support improvements in language access and other barrier busting activities (e.g., provide vaccination services during the evening and on Saturdays).
2. Coordinate efforts with vaccination partners to prevent the duplication of efforts and to maximize our reach.
3. Work with community partners to plan and execute vaccination clinics (PODs) to serve Latino/a/x community members who cannot, for whatever reason, access vaccinations elsewhere.
4. Use community input data to shape communication messages that are language and culturally effective, and work with community partners to share this information broadly.
5. Collate all vaccination clinic information (who is eligible, location of vaccination services, how to schedule an appointment, and what type of vaccine will be offered) into a weekly bulletin, translate this so that it is easily understood by Spanish-speakers, and distribute it widely (radio, CBOs, Facebook, etc.).

Work that this team has already accomplished includes:
• Conducting a local focus group and survey to better understand perceptions and barriers around vaccination within the Latino/a/x community. These were also used to collect information on the best ways to reach Latino/a/x in Jackson County with vaccine information.

• Utilizing information collected in the survey and focus group for the development of local Spanish-language vaccine promotional materials – pamphlet, web, radio, fliers, bulletins.

• Filming of Spanish-language PSAs in partnership with (1) KOBI and WAM campaign and (2) 5’O clock Marketing and FEMA support to the business community.

• Hosting of vaccination clinics aimed at serving the Latino/a/x population, designed in a culturally appropriate, culturally sensitive manner at trusted locations throughout Jackson County. Providing insight, guidance and support the CVC mobile vaccination clinic.

Jackson County Community Vaccination Equity Center

Jackson County was selected as a pilot Community Vaccination Center (CVC) site based on its low social vulnerability index, the destruction of the past summer fires, and the presence of an existing vaccination clinic operated by Jackson County Public Health at a site that could be quickly expanded to support a Type 3 CVC. The goal of the CVC is to continue to accelerate vaccination in an efficient effective and equitable manner that ensures historically underserved communities with a high risk of COVID-19 infection are not left behind. Populations of focus for the CVC location in Jackson County was to expand vaccine services to the county’s rural and agricultural communities, unsheltered populations, and those displaced by the fires.

The Jackson County Community Vaccination Equity Center is comprised of (1) a fixed site providing a walk-through Moderna and Johnson & Johnson vaccinations as well as a drive-through Pfizer option and (2) a mobile unit providing vaccination out in the community. Jackson County Public Health staff worked directly with the Oregon Health Authority, FEMA and the Department of Defense to set-up the CVC site, which expanded upon the Jackson County Public Health Walk-through Moderna located at the Jackson County Expo. The deployment of FEMA and Department of Defense staff is scheduled to continue through June 15, 2021.

To remove barriers around access to the vaccine, Jackson County Public Health insured that ID, proof of residency and health insurance were not collected. Hours were extended to cover early morning, evenings and vaccination services were available 7-days a week for 8 weeks. Jackson County Public Health staff also worked to ensure transportation needs were met by working with the Coordinated Care Organizations transportation services to provide rides to clients and worked with Rogue Valley Transportation Services to provides a bus route to the Jackson County Expo for vaccination.

The mobile unit is led by the Oregon Health Authority, with support from local Community Based Organizations and Jackson County Public Health, and vaccinations are provided by Mercy Flights, a local EMS provider. The mobile unit is providing vaccination in locations that are best suited for fire evacuees, houseless, and agricultural workers who have been most impacted by COVID-19.
3. What steps do the LPHA and its partners plan to take to continue to address these inequities in the jurisdiction?

Jackson County has been working with the following community-based organizations that provide services to communities of color and is committed to continuing our efforts to address vaccination inequities:

- La Clinica
- Rogue Community Health
- Unete
- Ballet Folklorico
- Unite Oregon
- Southern Oregon Health Equity Coalition (SO Health-E)

Jackson County Public Health and its partners plan on the following moving forward:

- A COVID-19 Vaccine Coordinator position is being recruited to work with the Jackson County CBO Coordinator and community partners to bolster vaccine equity work.
- Continue the weekly meeting of the Vaccine Equity Planning Team.
- Develop new content to dispel misinformation as new rumors start.
- Continue the relationship with 5 O’clock Marketing and the Latin Radio station La Grande to develop new content and to continue promoting vaccination.
- Develop a weekly bulletin for vaccination and education. Create a committee to support this work
- Continue distributing vaccination content to stakeholders (CBOs, service providers, schools, churches, etc.).
- Continue evaluating communication strategy and adjust as needed. Work with CBOs to support communication plan and any changes.
- Work in partnership with CBOs to promote vaccine confidence.
- Continue bi-monthly meetings with CBOs to support each other’s work to improve vaccination in our community.
- Work closely with CBOs to support their efforts in vaccination strategies.
- Help community partners improve vaccination services to include language access and address other barriers.
- Design and provide vaccination clinics in a culturally appropriate, culturally sensitive and trusted locations throughout Jackson County.
- Based on the areas of social vulnerability according to CDC 2018, create special vaccination sites.
- Continue the work with OHA partnership to support the efforts of vaccination in the County.
- Reach out to businesses who have been affected by COVID by providing vaccine information.
- Reach out to businesses who have Latino/a/x workers such as restaurants, hotels, cleaning etc.
- Work with partners to vaccinate migrant and seasonal farmworkers.
- Create new partnerships with local Latino/a/x businesses in the community.
• Create a Latino/a/x leadership group including people from business, clergy, LISTO, migrant ed.
  and others to help us to support the work.
• Each vaccination event will be partnered with a CBO or other members from the community.
• Partner with Title 1 schools to vaccinate students 12+.
• Each vaccination event must have all required signs in the appropriate language to the
  population it serves.
• Work with BIPOC and American Indian communities to provide vaccination and education.
• Work with people who face barriers to vaccination through supporting CBO’s who work with
  these populations.

4. What plan does the LPHA and its partners have to close the specific vaccine equity gaps among
specific racial and ethnic populations?

Jackson County will continue to work with the following community-based organizations to address
vaccination inequities.

• La Clinica
• Rogue Community Health
• Unete
• Ballet Folklorico
• Unite Oregon
• Southern Oregon Health Equity Coalition (SO Health-E)

A website has been created by a coalition of local organizations in Jackson County, targeted to the
Latino/a/x community, and will continue to be updated. The website is in Spanish and offers information
about the vaccine, vaccine sign-up, locations and dates of upcoming vaccine clinics, answers to
frequently asked questions, information and contact information. The website can be accesses here:

https://www.vacunatesurdeoregon.org/

The mobile vaccination unit was created to promote equity in the County’s vaccination efforts. The clinic
works closely with CBOs to provide outreach to the Latino community, providing services on a regular
basis with targeted outreach to the population of migrant and seasonal workers. The mobile sets up
every Sunday at La Placita Market in West Medford, a social hub for the local Latino/a/x community. A
request through Oregon Emergency Management has been submitted to continue the work of the
mobile vaccination unit to target BIPOC communities until vaccination demand decreases significantly.

CBOs work alongside the mobile to provide outreach services and resources including food boxes and
 gift cards as incentive to bring people in. Seasonal workers have been bussed in to mobile events to
close equity gaps. ODHS has attended events and provides information about health services. The
incorporation of community resources promotes trust and ensures comprehensive services that support
the community. The mobile also sets up every Thursday at the Rogue Valley Gowers Market/Hawthorne
Park to provide outreach to the unhoused population. The mobile will be beginning a pilot program in
White City, an area with a large Hispanic population. The pilot is set to begin near the end of June and will offer additional vaccine outreach efforts to the BIPOC community. Messaging around vaccines will continue to be provided in Spanish and English.

There are weekly meetings with CBOs to maintain partnerships and continually work to promote equitable vaccine distribution. The Vaccine Equity Planning Team has additional weekly meetings to discuss vaccine progress and equity between CBOs, CCOs, FQHCs, and SOHEC. This Coalition continually reassesses current outreach efforts, planning locations of future events that will best address equity gaps in the distribution of the vaccine. The group is open and receptive to requests from the community for vaccine event locations, with an ongoing commitment to ensure efforts are tailored to community needs.

Locations of the mobile clinic have included markets, schools, the Mexican Consulate, grocery stores, churches, food pantries, and community service centers.

Locations are chosen based on priority populations the coordinating team has determined most critical to close the equity gap. This includes BIPOC, low vaccine confidence, younger people, agricultural workers, people with transportation barriers, low-income, rural, wildfire survivors.

5. OHA has provided LPHAs county level survey data from OHA-funded CBOs indicating their preferred involvement in vaccination efforts. In reviewing the CBO survey results that outline the interest of CBOs in your community to host, support, and/or promote vaccine events in your jurisdiction:

   a) What steps are the LPHA and its partners taking to engage and actively partner with these and other organizations to increase meaningful, culturally responsive, low-barrier access to vaccines?

   b) How will the LPHA and its partners ensure that CBOs and navigators are aware of vaccine events so they can assist with registration and outreach as able?

We have selected sites that are trusted by our Latino/a/x community such as churches, farms, stores, and we partner with CBOs to help promote and sponsor the event. At each event, there are bilingual and bicultural staff members to ensure culturally responsive communication.

Sites will be conducting vaccine clinics on a regular basis and will be providing a calendar so that CBOs are aware and can outreach accordingly.

The Latinx Vaccine Equity Planning Team meet every Friday to discuss progress and keep CCOs/CBOs informed. Vaccine events are discussed at each meeting. CBOs often attend the events and offer support/services which strengthens partnerships and ensures comprehensive services for community members.
6. The agricultural employer survey results were shared with the LPHA and the LPHA has provided information to its Regional Emergency Coordinator (REC) about how the LPHA and its partners plan to use the survey results. OHA will be reviewing the information provided by the LPHA to the REC. Does the LPHA have any additional updates regarding work to serve agricultural workers in its jurisdiction since the LPHA last provided information to the REC?

Jackson County has a reasonably large agriculture industry that includes hemp, marijuana, wine, forestry, and farming. Jackson County also has large food processing plants such as Harry & David and Amy's Kitchen. Food processing plants and the agriculture industry employ many Hispanic workers, including migrant and seasonal farmworkers that are transient and tend to fluctuate based on seasonal demand.

We have reached out to each one of the businesses included in the survey and have provided information on vaccination. We work with our local partners and have created a spreadsheet that includes most of the migrant and seasonal businesses in our community. The pear harvest season starts in mid-June, and we will be working with La Clinica, Unete, and OHA to vaccinate and provide COVID testing to seasonal workers and farmworkers.

In preparation for the summer and fall harvests, in May 2021, Jackson County convened a Migrant Seasonal Farmworker/Agricultural planning group that meets weekly to identify gaps in outreach efforts and steps moving forward to close the gaps.

7. What steps have the LPHA and its partners taken to actively address vaccine confidence in the community?

JCPH is working with the Oregon Health Authority, Jackson County hospital systems, and COVID-19 vaccine providers to coordinate the distribution and administration of the vaccine. JCPH will also work with the CBOs, CCOs, and other partners to ensure the vaccine distribution is equitable and increase vaccine uptake among vaccine-hesitant populations.

JCPH will continue to engage with community partners throughout the planning and response process and build communication pathways across collaborating agencies. Currently, JCPH facilitates weekly vaccine planning meetings with the core medical systems and providers in Jackson County that are also COVID-19 vaccine providers to coordinate vaccine distribution and administration on a level. JCPH participates in state and regional vaccine planning meetings. JCPH holds a weekly Medical Advisory Group meeting to provide COVID-19 updates and vaccination updates, communicate new guidance and best practice, and provide county-wide recommendations to the COVID-19 response.

In order to actively address vaccine confidence in the community, Jackson County has collaborated with well-known leaders within the community in its vaccine campaign efforts in both English and Spanish. The County understands the importance of the public being able to see trusted individuals speaking about the vaccine. CBO's have reached out to faith leaders, agricultural employers, and business employers to equip them with accurate, up-to-date information about vaccinations so that they can promote the vaccine to their community. Jackson County's website is continuously updated to reflect
current guidelines and information. The County utilizes a “Flash Report” which is emailed to medical providers and community partners to facilitate widespread communication.

Regular interviews with the County Health Officer, Dr. Jim Shames, have been conducted and broadcasted to offer a trusted medical perspective to the community. Jackson County has worked with COVID providers in the community to ensure they have accurate and sufficient information to provide to their patients to make an informed decision. Regularly scheduled meetings have been held with COVID providers in the community to keep them informed and address and questions and concerns.

Examples of work include:

- Postcards were mailed directly to 98,000 households.
- A flyer has been created and more than 27,000 copies have been printed for distribution throughout community.
  - Distributed to 120 private, public, CBO organizations.
  - Translated to 6 languages
  - Starbucks and Dutch Bros are posting flyers in drive through windows.
  - Ashland Emergency Food Bank will include flyers in all their food distributions (300+).
  - Poster at Sherm’s Thunderbird Market.
  - Poster at Food4Less.

Jackson County has partnered with schools to provide students and their families with accurate information about vaccines and Inclusive community ads have been created and broadcasted on social media.
We have partnered with schools to provide students with accurate information about vaccines, and at events, have trusted individuals who can provide information. Mobile vaccination clinics have been provided to schools and community locations for outreach to low-income and diverse populations.

8. What plans do the LPHA and its partners have continue addressing vaccine confidence?

- Jackson County will continue working with trusted individuals within the community to build vaccine confidence.
- Continue social media campaigns.
- Utilize grassroots community-based organizations that have existing relationships with the BIPOC community.
- The flyer mentioned above is being continually distributed. We will continue to reach out to businesses and maintain connections.

9. What is the communications plan to dispel misinformation through a comprehensive, multi-modal communications strategy for communities experiencing racial and ethnic vaccine inequities in your jurisdiction? Examples could include: Spanish language radio spots, physically distanced outdoor information fair, training local faith leaders and equipping them with vaccine facts and information to refer a community member to a health care professional for follow up, etc.

Jackson County Public Health has invested in mass communication and marketing efforts to create awareness of locations to receive the vaccine and the importance of receiving the COVID-19 vaccine. All campaigns have been designed around three key objectives:

1. Use information provided by the Oregon Health Authority, Centers for Disease Control research efforts, and feedback from local focus groups and stakeholders. These reports provided Jackson County Public Health with messaging that best overcame misinformation and most common reasons people chose not to receive the vaccine. These reports included specific information for the Latino/a/x community.

2. Use individuals in the community that are in the medical field and other trusted community and reflect our community’s diversity.

3. Promote the Pilot Community Vaccination Center with the Oregon Health Authority and FEMA.

There has been a total of six campaigns and these campaigns continue to run.

1. [Vaccination Awareness English](#)
2. [Vaccination Awareness Spanish](#)
3. [Latino/a/x Community Partners Campaign](#)
4. [Community Vaccination Equity Center](#)
5. [Adjacent County Campaign](#)
6. **Health Vaccination Incentive Campaign**

Platforms used for Latino/a/x and All Citizens Campaigns:

- Marketing modules on Facebook, Instagram, YouTube, Google, Snapchat, Spotify and Pandora
- Spanish marketing modules on Facebook, Instagram, YouTube, Google, and Pandora
- Broadcast TV and Cable Networks including Gala, Univision, Telemundo
- Local radio (total of 12 different stations including pop, rock, country, talk, oldies and sport formats)
- La Grande Radio (only Latino/a/x station in the market for Southern Oregon)
- Mass mailing of vaccination flyer for the Community Vaccination Center

Jackson County Public Health and FEMA officials, and a well-known local medical professional have engaged in press conferences, public radio interviews, and televised interviews where they have answered question, shared information about the vaccine, and dispelled any rumors or misinformation that have arisen. Bringing medical, Public Health, and federal experts together on these platforms has ensured comprehensive, factual communication about vaccine information. A Spanish-Speaking “live remote” radio feature has been recorded from the vaccination clinic to be broadcasted on local Hispanic-owned radio groups radio stations.

Jackson County has participated in various media engagement events to encourage the publicized spread of evidence-based information about the vaccine. Local media stations have toured the County’s
mass vaccination site and broadcasted coverage on English and Spanish media outlets. Public Health officials, FEMA officials working with the County, and a well-known local medical professional have engaged in press conferences, public radio interviews, and televised interviews where they have answered question, shared information about the vaccine, and dispelled any rumors or misinformation that have arisen. Bringing medical, Public Health, and federal experts together on these platforms has ensured comprehensive, factual communication about vaccine information. A Spanish-Speaking “live remote” radio feature has been recorded from the vaccination clinic to be broadcasted on local Hispanic-owned radio groups radio stations.

The County has utilized Social Media platforms to target all age groups and promote the spread of fact-based vaccine information. Facebook, Instagram, Snapchat, Google have been regularly updated with clear information that is reader-friendly for individuals from various age groups and is available in both English and Spanish.

Business campaign:

- Outreach teams of FEMA Corps have gone to local businesses in Jackson County to promote vaccine events. Partnered with local businesses including Common Block Brewing in order to promote vaccine to staff.
- Utilizing small businesses and restaurants to reach younger, working population.
- A Fact Sheet has been created and distributed to 120 different businesses, chambers, academia, associations, library systems, consular corps, and community-based organizations.
- Private sector outreach includes grocers, coffee chains, banks, hospitality industry, chambers of commerce and industry associations.

FEMA Corps staff also did outreach to target people who were displaced by the fires and experience homelessness by doing outreach to parks, hotel and motels in the in Jackson County. They set-up tables to provide information on the COVID-19 vaccine and promote the Community Vaccination Center. Outreach tables were set up at Home Depot, Lowe’s, Food 4 Less, Coastal and El Gallo.

We partnered with local businesses in order to promote vaccine to staff. Utilizing small businesses and restaurants to reach younger, working population. Social media ads were created to promote vaccination among business owners and workers.

A mass mailing to all residents occurred to promote the Community Vaccination Center at the Jackson County Expo.
10. How has and how will the LPHA and its partners ensure language accessibility at vaccine events?

CVC: Accessible communication is another key element in reducing barriers around access to the vaccine. Telephonic language interpreting and on-site Spanish interpreters are available. There is real-time American Sign Language interpreting services available through on-demand video remote interpreting on person phone or on-site devices and assistive hearing and vision devices are available.

At Jackson County’s Walk-in Clinic, interpreters have been on site during all clinic hours.

Language Line: Providing Video Remote Interpretation (VRI) for over 35 languages, including ASL. Interpreters and volunteers are trained in best-use practices for these VRI iPads and accompany the vaccine recipient throughout the vaccination process.

Providing Spanish language interpreters at the Jackson County Vaccination Clinic and community clinics. Interpreters are available at the door and throughout the point of dispensing the vaccine: greeters, screeners, medical screeners, vaccinators, exit staff. Interpreters accompany the patient throughout the entire process. They are side-by-side with the client and guide them from check-in, to registration, vaccination, check out, the waiting area and the exit.
Accessibility, disability integration, physical access, and communication access: FEMA assessed entire site and how it would be set up. Wheelchairs are on site and available throughout. Curtained areas present in vaccine administration areas for privacy. Drive through offers a curtained-off section with a gurney so that people are able to lay prone, if they require an IM site different than standard deltoid. All accessibility features are promoted in both English and Spanish on social media.

Signage allows people to self-identify a need for accommodation in English and Spanish. Offer pictograms for interpretation. This gives all individuals the ability to self-identify their language and equipment needs upon initial entry to vaccine site. All vaccine stations are equipped with OHA-created communication card ensuring inclusive and effective communication.

FEMA VRI or VOINACE technologies are available for interpretation of 200+ languages. On site in person interpreters are fluent in Spanish and Tagalog (2nd most common after Spanish). Pen and paper are offered to communicate in writing. Clear window masks are available for those who lip-read. All equipment is available for use throughout entire process. Pocket talkers are available for use throughout. Magnifiers, flashlights are available for those with visual disabilities. All staff (DOD, FEMA, FEMA Corps, Public Health staff) are trained to use equipment.

Signs, billboards are in both English and Spanish. Assistive hearing and vision devices are available upon request.
11. What plans do the LPHA and its partners have to decrease transportation barriers to accessing vaccine?
The County has partnered with community transportation partners including Rogue Valley Transportation Department, TransLink, and Ready Ride to offer free rides to vaccination sites. The mobile vaccination unit has reduced the need for transportation by meeting people where they are.

Through a new federal program that began May 24th and runs through July 4th, LYFT and UBER have committed to providing a free ride code (up to $15) for those community members needing a ride for vaccination at any locations.

12. What plans do the LPHA and its partners have to ensure meaningful, low-barrier vaccine access for youth, especially those from Black, Indigenous, Tribal and other communities experiencing inequities in COVID-19 disease, death and vaccination?

- Youth outreach: extensive social media campaigns.
- The County is working closely with schools to ensure the widespread promotion of information about the vaccine.
- Working with school-based health centers at the Title 1 schools and continuing to provide vaccination access to places where families are used to such as churches, stores, food pantries.

13. How will the LPHA and its partners regularly report on progress to and engage with community leaders from the Black, Indigenous, Tribal, other communities of color to regularly review progress on its vaccine equity plans and reassess strategies as needed?

- The Vaccination Equity Planning Team will continue meet once a week to review our progress and reassess strategies.
- The Migrant Seasonal Farmworker/Agricultural planning group will continue meet once a week to review our progress and reassess strategies.
- JCPH will continue to meet weekly with the Medical Advisory Group and other vaccine partners to review demographic vaccination information and strategies to improve vaccination rates.
- JCPH will work to engage the following organizations to identify strategies to improve vaccination rates in BIPOC populations and establish regular communications. JCPH will reach out to the OHA Office of Equity and Inclusion (OEI), if needed, for guidance to help make connections with Black, Indigenous, and Tribal leaders.
  - Lomakatsi Restoration Project
  - Southern Oregon Black Leaders, Activists, and Community Coalition (SOBLACC)
  - Black Alliance & Social Empowerment (BASE)
June 10, 2021

We have each reviewed the attached responses to all questions and affirm that the Local Public Health Authority (LPHA) jurisdiction will continue to make meaningful efforts to offer culturally-responsive, low-barrier vaccination opportunities, especially for populations in our jurisdiction experiencing racial or ethnic vaccine inequities. We commit to implementing this plan to close the racial and ethnic vaccine inequities in our jurisdiction.

The LPHA and its partners will continue to ensure that vaccine sites are culturally-responsive, linguistically appropriate and accessible to people with physical, intellectual and developmental disabilities and other unique vaccine access needs.

Sincerely,

Rick Dyer  
Chair, Jackson County Board of Commissioners

Jackson Barnes  
Acting-Jackson County Public Health Administrator

Dr. Jim Blakeslee  
Jackson County Health Officer
BEFORE THE BOARD OF COUNTY COMMISSIONERS

STATE OF OREGON, COUNTY OF JACKSON

IN THE MATTER OF AUTHORIZING THE ORDER NO. 104-21
CHAIR OF THE JACKSON COUNTY BOARD OF
COMMISSIONERS TO ATTEST THAT THE LOCAL PUBLIC HEALTH AUTHORITY WILL
COMMIT TO IMPLEMENTING THE JACKSON COUNTY COVID-19 VACCINE EQUITY PLAN

WHEREAS, at their Work Session on May 18, 2021, the Board of Commissioners reviewed the Jackson County COVID-19 Vaccine Equity Plan; and

WHEREAS, meaningful efforts to offer culturally-responsive, low-barrier vaccination opportunities will be provided to marginalized communities through utilization of the Plan; and

WHEREAS, pursuant to Oregon Revised Statute 431.003(3) the Board of Commissioners, as the governing body of Jackson County, is the governing body of the Local Public Health Authority; and

WHEREAS, the Oregon Health Authority has requested that the Chair of the Jackson County Board of Commissioners, the Public Health Administrator, and the Public Health Officer attest to compliance with the Plan.

Now, therefore,

The Board of County Commissioners of Jackson County ORDERS:

1. The Chair of the Jackson County Board of Commissioners is hereby authorized to attest that the Local Public Health Authority will commit to implementing the COVID-19 Vaccine Equity Plan.

DATED this 10th day of June, 2021, at Medford, Oregon.

JACKSON COUNTY BOARD OF COMMISSIONERS

/s/ Rick Dyer
Rick Dyer, Chair

/s/ Dave Dotterrer
Dave Dotterrer, Commissioner

/s/ Colleen Roberts
Colleen Roberts, Commissioner

Due to the existing novel coronavirus (COVID-19) pandemic and the need to promote physical distancing, the Jackson County Board of Commissioners is conducting meetings through electronic and telephonic means. On January 5, 2021, the Board of Commissioners approved Order No. 1-21 authorizing the use of their electronic signatures on Ordinances, Orders, and other documents. Following the motion and roll call vote, Commissioners Dyer, Dotterrer, and Roberts authorized the use of his/her electronic signature on this Board Order No. 104-21.