



We have each reviewed the attached responses to all questions and affirm that the 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.



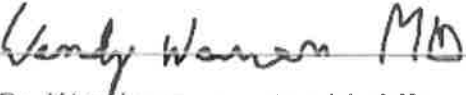
Kelley Minty Morris, Chair
Klamath County Board of Commissioners



Don Gentry, Chair
Klamath Tribes



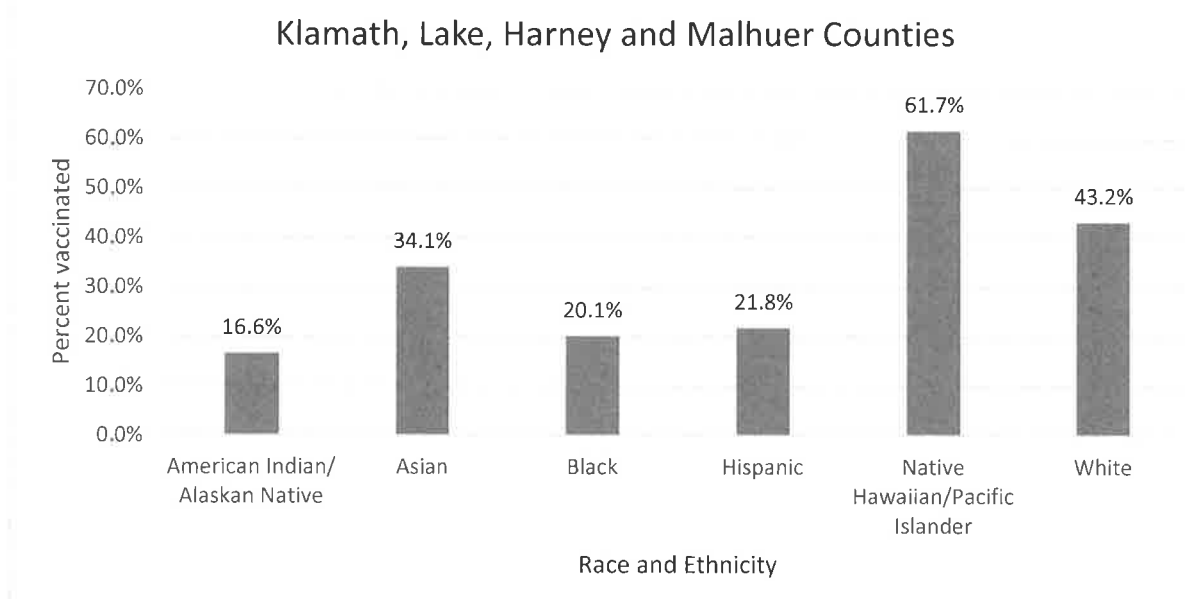
Jennifer Little, Director
Klamath County Public Health



Dr. Wendy Warren, Health Officer
Klamath County Public Health

Q1: 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?

Due to small population sizes, race and ethnicity data has been combined for Klamath, Lake, Malheur, and Harney Counties. The below data is current as of August 2, 2021 per the OHA dashboard.



Accessed from: <https://public.tableau.com/app/profile/oregon.health.authority.covid.19/viz/OregonCOVID-19VaccineEffortMetrics/RaceandEthnicityData>

However, a weekly epidemiologic report is prepared for Klamath County each week. Crude extrapolation of the county's population demographics allows some further insight into service to under-represented groups. Note that population estimates may be low in some categories, causing the percent vaccinated number to be higher than 100%. Vaccination performance through July 28 reflected stronger numbers than those available through the Tableau dashboard.

Demographic	% of population	Population number 18+	Vaccinated	Vaccinated %
American Indian/ Alaska Native	5%	2,678	713	26.6%
Asian	1.1%	589	380	64.5%
Black	0.9%	482	268	55.6%
Hispanic	13.8%	7,392	1,747	23.6%
Native Hawaiian/ Pacific Islander	0.2%	107	300	280%
White	77.1%	41,300	21,481	52.0%
Other race	4.3%	2,303	383	16.6%

Klamath County COVID-19 Epidemiology Summary as of 7/28/21 * note that population estimates may be low in some categories, causing Vaccinated % to be higher than 100%.

Operational strengths/barriers:

Since the beginning of vaccine administration efforts, Klamath County’s community partners have risen to the challenge. Sky Lakes Medical Center has the largest capacity and took on the responsibility of acting as a mass vaccination site. When demand was high, its throughput was approximately 700 vaccines per day. The medical center also hosted an off-site event at Steen Sports Park. Michael Sheets, a family nurse practitioner who operates clinics in the outlying communities of Merrill and Bonanza, provides walk-in vaccination visits. Klamath Health Partnership (FQHC) provides the bulk of mobile/on-site vaccination clinics to minimize transportation and barriers to access. To these points, it hosted three large-scale drive-through clinics at the fairgrounds. All three clinics have bilingual and multicultural staff on site. Tribal Health and Family Services provides both on-site and off-site services to both their members and non-Tribal members, recognizing the importance of vaccine access for the entire community. When pharmacies and smaller clinics came online, it increased access and speed of service. Clinics and partner community-based organizations (CBOs) provide community education through various communication channels.

Convened through Klamath County Public Health, Cascade Health Alliance, the local Coordinated Care Organization (CCO), partnered with each group listed above in producing a culturally- and linguistically-appropriate messaging campaign centered around increasing

awareness of vaccination sites and opportunities. Messages included registration information, as well as where to access additional information based on eligibility. Also, the campaign included a series of messages that addressed several myths about the vaccine, informed members of the process of each vaccine, and provided resources on where Cascade Health Alliance members could find additional help.

Below details the demographic information of CHA members targeted during the messaging campaign:

By Age:

Segments Based on Age Group	Number of Messages Delivered	Number of Members Reached	Number of Unique Phone Numbers
18-39	41,342	4,596	5,944
40-64	37,562	3,530	5,009
65+	17,918	2,075	3,691
under 18	12,290	2,228	2,924

By Race:

Race	Messages sent	Messages Delivered	Unique Numbers Reached	Individuals Reached
American Indian or Alaskan Native	2,417	1,634	171	260
Asian or Pacific Islander	699	571	49	67
Black	1,473	1,018	98	134
Caucasian	61,798	42,703	3,757	5,328
Declined to Answer	39,640	29,449	2,927	3,760
Hispanic	9,354	7,152	641	842
Native Hawaiian	61	48	6	6
NULL	39	32	3	4
Other	541	379	41	61
Pacific Islander	74	66	7	8
	12,991	8,883	1,186	1,694

By Ethnicity:

Ethnicity	Messages sent	Messages Delivered	Unique Numbers Reached	Individuals Reached
African	21	18	4	4
African American	626	445	48	58
Alaska Native	97	71	5	9
American Indian	2,005	1,356	144	214
Asian Indian	54	49	4	5

Canadian Inuit, Metis or First Nation	18	10	1	2
Chinese	111	84	6	8
Declined to Answer	7,243	5,404	553	695
Eastern European	305	210	23	29
Filipino/a	120	94	12	15
Guamanian or Chamorro	12	12	1	1
Hispanic or Latino Central American	86	61	4	5
Hispanic or Latino Mexican	7,669	5,894	543	700
Hispanic or Latino South American	44	32	3	4
Hmong	20	20	1	1
Indigenous Mexican, Central American or South American	225	184	15	20
Japanese	43	41	4	5
Korean	25	25	3	3
Laotian	2	2	1	1
Middle Eastern	18	18	3	3
Native Hawaiian	61	48	6	6
Northern African	3	0	0	1
NULL	22,253	16,478	1,515	2,026
Other African/African	757	505	39	63
Other Asian	222	175	12	19
Other Hispanic or Latino	875	702	62	74
Other Pacific Islander	70	62	6	6
Other Race or Ethnicity	563	386	42	62
Other White	56,929	39,176	3,427	4,862
Samoan	3	0	0	1
Slavic	106	69	7	9
Unknown	12,504	9,111	1,086	1,410
Vietnamese	91	80	5	7
Western European	2,915	2,230	210	266
	12,991	8,883	1,186	1,694

By Gender:

Individual_gender	Messages sent	Messages Delivered	Unique	
			Numbers Reached	Individuals Reached
Female	69,377	49,309	4,949	6,723
Male	58,472	41,639	4,378	6,044
Unknown	1,238	987	186	234

The community's greatest strength is collaboration. Early on, a weekly vaccine provider meeting was organized by Klamath County Public Health (KCPH), which has maintained strong attendance. Additionally, strong relationships previously established with schools, long term care facilities, and CBOs have aided Klamath County's vaccination efforts.

Finally, Klamath County is very fortunate to have dedicated medical and non-medical volunteers to increase capacity for vaccination events, homebound and street vaccinations, and community outreach.

Systemic strengths/barriers:

As mentioned above, a systemic strength is the use of technology platforms to reach community members. Cascade Health Alliance uses its member outreach texting system to send targeted, linguistically-appropriate messages to its members with vaccine information. Sky Lakes Medical Center uses MyChart, a component of its electronic health record system to allow individuals to sign up for vaccine appointments.

Rural areas such as Klamath County often lack access to resources compared to urban areas. Sky Lakes Medical Center became a regional distribution hub for vaccines, specifically for Pfizer. The large quantities and highly-specific storage requirements were a barrier for smaller clinics and underserved, remote communities to order and maintain the vaccine. Now with the hub, these areas are able to receive manageable quantities to meet the needs of those communities outside of the population center.

Historical trauma and systemic racism are barriers to accessing care for many of Klamath's community members. Negative experiences with clinics and government has created mistrust and fear. Community partners work hard to provide culturally, linguistically, and trauma-informed education and services to encourage vaccination confidence.

Klamath County has strong CBOs to engage and care for its citizens. The largest minority populations are Native American and Latino. The Klamath Tribes provide robust services for the Native American population and have been a stalwart partner in the COVID response and vaccination efforts. Oregon Human Development Corporation, Central Oregon Disability Support Network, and Klamath Health Partnership have been taking the lead on providing culturally and linguistically appropriate services for the Latino population. Aside from those organizations, Klamath does not have CBOs that are specific to other races/cultures such as Asian or Black communities. In an effort to meet those needs, Klamath County partners are seeking other community partners and taking a grassroots approach to conduct outreach and begin building relationships.

Policy strengths/barriers:

While federal Indian Health Service policy finds access to Klamath Tribal Health & Family Services traditionally limited to enrolled American Indian and Alaska Native Tribes, Klamath Tribal Council has strongly supported partnership and access to the whole community when it

comes to vaccination. Tribal Health was not required to share its resources, but saw the need to provide more access to vaccine early in the Spring.

Tribal leaders and elders were quick to tout the importance of vaccination, paying for billboards and televised public service announcements to reach the entire Southern Oregon region with media reach to Coos, Curry, Douglas, Jackson, Josephine, Klamath and Lake counties.

All three Klamath County Commissioners announced their personal vaccinations to encourage others to follow suit.

Q2: What steps have the LPHA and its partners already taken to address specific racial and ethnic vaccination inequities in the community?

A significant amount of work was done by vaccine providers and CBOs, both funded and unfunded by OHA. Below is a summary of the work done by each organization, but is not inclusive of the many services and supports provided on a small scale by myriad community partners.

Klamath Tribal Health and Family Services (KTH&FS)

- Hosted mass vaccination clinics for the Tribal population as well as the broader Chiloquin area
- Partnered with the fire departments and hosted vaccine clinics in the remote towns of Bly, Beatty, Sprague, and Chiloquin.
- Provided culturally-specific messaging to their members to encourage vaccination
- Partnered with HHS to provide education on vaccine education to community partners on outreach to the AI/AN community in webinars.
- Partnered with FEMA and NPAIHB to develop best practice for vaccine equity and release to CBOs to outreach to the AI/AN population

Healthy Klamath

- Produced vaccine promotion videos that featured diverse, local, well-respected community members both in English and Spanish.
- Created an online COVID-19 resource hub that includes vaccination information and COVID-19 educational tools
- Produced a Living Well issue (newspaper magazine insert) specific to COVID-19 and the vaccines. It printed 13,000 copies and had completed a direct mail campaign to 2,000 households in the Mills Addition neighborhood, one of Klamath County's most poverty-stricken neighborhoods.

Klamath Health Partnership (FQHC + CBO)

- Hosted mobile clinics on-site at farms, food processing plants, grocery stores, and high schools.
- Hosted a vaccine clinic in the outlying town of Malin to serve the Migrant Headstart program operated by Oregon Child Development Coalition.
- Provided on-site vaccinations for Pacifica, a long term care facility.
- Collaborated with two churches and the fire departments in the outlying towns of Keno and Bly to provide on-site vaccine clinics.
- Provided educational materials in Spanish.
- Ensured bilingual, multicultural staff were present at vaccination clinics.
- Provide walk-in clinics to accommodate work schedules.

Sky Lakes Medical Center (SLMC)

- Hosted mass vaccination clinics on-site and had Spanish speakers available from registration to vaccination observation.
- Hosted a clinic at Steen Sports Park.
- Produced a variety of educational pieces for social media and the newspaper.
- Provide walk-in clinics and extended evening hours to accommodate work schedules.

Klamath Works (CBO)

- Created educational videos in English and Spanish for community partners conducting street outreach for homeless populations. Individuals featured in the videos were well-known staffers from the various partner organizations who could provide a trusted voice and familiar face.

Lomakatsi Restoration

- Created Tribal-specific graphics for positive vaccine messaging

Friends of the Children- Klamath Basin (CBO)

- Provided education to the at-risk youth and families they serve (of which 50% identify as non-white) as well as coordination to vaccination sites.
- Shared vaccine information with the wider Klamath community by displaying KCPH's yard signs and by sharing through social media information on availability, safety and efficacy, staff vaccination testimonials, and the Healthy Klamath videos noted above.

Cascade Health Alliance

- Conducted direct phone calls and sent text messages to their members as previously noted.

Central Oregon Disability Support Network (CBO)

- Provided education and vaccine coordination for their clientele, which includes people with disabilities and the Latino/a community.

Klamath County Public Health (KCPH)

- Hosted a vaccination clinic at the Gospel Mission and had a Spanish translator on site.
- Hosted vaccination clinics in north county to serve the outlying towns of Chemult, Crescent, and Gilchrist.
- Partnered with Klamath Works (CBO), Transformation Wellness Center (peer support workers), Klamath Basin Behavioral Health (Safe + Strong grantee), Red is the Road to Wellness (peer support workers), Cascade Health Alliance (CCO), Klamath Lake Community Action Services, and Integral Youth Services to conduct street outreach to those who are homeless. KCPH and partners shared resources to put together supply bags with essential items such as sunscreen, sunglasses, socks, shoelaces, first aid kits, soap, granola bars, hand towels etc. to distribute while giving vaccine information. Cascade Health Alliance provided gift cards for members who received education and the vaccine.
- Partnered with Red is the Road to Wellness to provide vaccine at its recovery event.
- Partnered with Integral Youth Services to provide vaccinations at its summer lunch program kickoff.
- Partnered with Transformation Wellness Center and its Prime + program and accompanied their peer support specialists during its homeless outreach to administer vaccines. Sixteen people were vaccinated through this effort
- Partnered with Klamath County Emergency Management to create yard signs and banners in both English and Spanish to give to community members and partners who can act as additional advocates.
- Provided recorded phone messages in English and Spanish to direct people where they could get vaccinated.
- Partnered with Basin Transit Service to offer free door-to-door transportation to walk-in vaccination clinics.
- Partnered with a local physician to provide vaccine education at Klamath County Juvenile Detention and guidance to access the Sky Lakes walk-in clinic.
- Coordinated with the Klamath County Jail to provide on-site vaccination to adults in custody.
- In-home vaccinations were provided to homebound individuals or those with mobility issues. Letters went out with the Meals on Wheels food boxes and flyers were given to community partners to identify those in need.
- Partnered with OHA to host a vaccine booth at the Downtown Third Thursday event.

Albertsons, Merrill Clinic, Bonanza Clinic

- Provide walk-in appointments. There are openings on Saturdays as well as extended business hours to eliminate scheduling barriers. (The Merrill and Bonanza clinics have a longstanding, trusted relationship with the Hispanic population.)

Community volunteers

- Canvassed in a mobile home park to provide vaccine education. They were provided educational handouts and flyers that detailed locations to get vaccinated as well as transportation resources.

Q3: What steps do the LPHA and its partners plan to take to continue to address these inequities in the jurisdiction?

- The activities mentioned above will continue in addition to:
 - o Klamath Tribal Health will be providing vaccinations at the Klamath Tribes' Restoration event in August. This is an important cultural event that is well attended .
 - o Klamath's vaccine providers intend to provide mobile clinics at schools, as well as migrant summer school, Klamath Community College, and Oregon Tech, as diverse populations are served through educational institutions.
 - o Klamath Works and Central Oregon Disability Support Network (CBOs) are partnering to host a bilingual family fun night at a city park. The event will have free games, food, vaccines, and other resources. Each station will have a Spanish speaker and all materials will be available in English and Spanish.
 - o KCPH is partnering with Oregon Health Authority to provide vaccinations at the County Fair, as diverse populations attend that event.
 - o KCPH is partnering with SPOKES Unlimited and Klamath County Developmental Disability Services to survey local people with disabilities to see where vaccination awareness stands with this demographic.

Q4: What plan does the LPHA and its partners have to close the specific vaccine equity gaps among specific racial and ethnic populations?

- Cascade Health Alliance (CCO) is creating a report that maps all CHA members by race who are not vaccinated to understand if and where geographic inequities exist. Race and geographic location are pulled directly from its 834-form provided by the Oregon Health Authority. Vaccination status is also provided through ALERT data to CHA weekly. Mapping unvaccinated CHA members helps the agency identify where to target more specific canvassing efforts to improve vaccination rates among OHP members.
- Central Oregon Disability Support Network (CBO) is working to organize a meeting to discuss further strategies to engage the Latino/a community.
- The Health Equity Manager for Cascade Health Alliance is reaching out to gatekeepers in the community to determine new ways to engage people of color.

- KCPH is in conversation with a local detox and recovery facility to provide on-site vaccinations. It is also talking with the Senior Center to evaluate the possibility of doing on-site vaccines during the congregate meal program.
- KCPH received an OHA-provided accessibility kit, which will be available at outreach events for all of its community partners.
- Cascade Health Alliance and KCPH are in conversation with OHA's faith liaison to further engage local faith leaders and allow them to guide this group on how best to engage this demographic.
- Klamath Tribal Health is leading focus groups for the AI/AN community in all age groups to engage, and foster vaccine equity.
- Another round of canvassing is slated to occur in the coming months. Several community members and partners participated in OHA's outreach and canvassing training and are excited to put the skills to practice.

Q5: 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, 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? 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?

Initially all CBOs responded that they preferred to partner with outreach and education. Many of the activities were described in Q2. Since then, plans have begun forming to host a family fun night and have vaccines available, which is mentioned in Q3. Being in a small community, partnerships have been very easy. Participation in meetings has been good and communication channels remain open. When vaccine events are planned, community partners are notified through email, social media, and Health Alert Network in English and Spanish. Again, in a small community such as Klamath and maintaining high participation on CBO partner calls, it is easy to stay in close communication with CBOs and community partners.

Q6: 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?

Only one food processing facility responded to the agricultural employer survey. They were contacted and an on-site vaccination clinic was provided by Klamath Health Partnership. KCPH asked OHA for the list of survey recipients to compare with the list of local facilities that had already been contacted to ensure no one was missed. Unfortunately, OHA was unable to

provide that information, as the entity that administered the survey was unable to produce it. However, Klamath Health Partnership was able to serve 7 farms through local connections.

Q7: What steps have the LPHA and its partners taken to actively address vaccine confidence in the community?

As detailed throughout this report, Klamath County partners have worked diligently to address vaccine confidence in the community. Clinics, pharmacies, KCPH, and CBOs have been sharing state and local materials throughout the county. Educational and promotional videos were produced by two CBOs in English and Spanish that featured local community members who represent several key demographics.

Klamath Basin Behavioral Health (KBBH) was a Safe + Strong grantee and did intensive outreach throughout the county to provide education and support. The CBOs and other non-funded community partners distributed educational materials to their clients. As previously mentioned, KBBH worked closely with counselors and peer support specialists from Red is the Road to Wellness and Transformation Wellness Center who have strong rapport in the community, which has been successful when engaging hard-to-reach populations.

The medical community is a vital resource, addressing vaccine concerns and have been able to answer client questions in a professional and private setting. Sky Lakes conducted a paid advertising campaign to promote vaccination that included billboards, television and radio ads in an effort to reach a wide variety of demographic groups throughout the county. Additionally, several physicians have written letters to the editor in the local newspaper and are displaying the KCPH yard signs at their homes and at their clinics. It was a medical resident who rallied a group of volunteers to do canvassing in low-income neighborhoods. They visited a mobile home park near a library branch to start their efforts. She is taking the lead on another round of canvassing in the future.

The school districts and Senior Center are both trusted sources of information for large populations. The Senior Center has written several articles in its monthly newspaper insert about the importance of older adults and their families being vaccinated. Both the city and county school districts are displaying the KCHP yard signs at each school to help normalize and promote vaccines. Also, the larger high schools partnered with Klamath Health Partnership to host on-site vaccine clinics, which demonstrates and promotes vaccine confidence.

Q8: What plans do the LPHA and its partners have continue addressing vaccine confidence?

The activities mentioned above will continue. Outreach with CBOs and other community partners remains strong and the videos created will continue to be shared among partner organizations' channels. Unfortunately, the Safe + Strong program is sunsetting locally, but Klamath Basin Behavioral Health remains a strong partner and they will continue to provide

education to its clients. Medical providers will continue to provide guidance and encouragement to their patients.

When KCPH heard OHA was partnering with the Peace Corps to conduct canvassing in the urban areas, we requested a training for rural volunteers. The virtual training was a success and the medical resident mentioned above plans to conduct additional rounds of canvassing.

Klamath County is working with media outlets to implement a vaccine incentive program. Messages will be spread across all of the local radio and TV stations, as well as the newspaper. Bilingual materials will be available across the media platforms and the intent is to have a fun and engaging awareness campaign.

*Q9: 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.*

Early on, Klamath Health Partnership found that having bilingual, multicultural providers available, prior to vaccine administration, to answer questions at an on-site clinic was very helpful. Participants were able to ask questions in a private setting with someone they felt comfortable with, leading to vaccine confidence. These efforts continue.

CBOs are critical to correcting misinformation in the community. Friends of the Children-Klamath Basin addressed myths/misinformation head-on in its monthly newsletter to program families, using good research approved by the OHA liaison. Healthy Klamath and Klamath Works were very intentional about the people chosen to feature in videos, as these individuals are highly trusted members of the community and represent those experiencing disparities.

The family fun night in a neighborhood park hosted by Klamath Works and Central Oregon Disability Support Network will have free resources and providers available to answer questions in a casual setting to set people at ease.

As previously mentioned, the faith community will be engaged to provide another trusted source of information. Klamath Tribal Health also will provide vaccines and information at the Klamath Tribes' annual Restoration Celebration, which is a well-attended cultural event. KCPH will also be at the Restoration Celebration events and the Tribal Back-to-School Fair, providing information, created by the Johns Hopkins Center for Native American Health, about vaccination for youth through the elder population.

Q10: How has and how will the LPHA and its partners ensure language accessibility at vaccine events?

Spanish and English are the two primary languages spoken in Klamath. Clinics have Spanish speaking staff to register for appointments, assist with paperwork, and administer vaccines. When bilingual staff is unavailable, a professional translator is utilized. Additionally, the pharmacies and major clinics have contracts with the Language Line to provide linguistically-appropriate services in languages other than Spanish.

In the COVID-19 series of Cascade Health Alliances texting campaigns, members are sent messages in English and Spanish. They are also asked to respond '1' if they would like to receive messages in Spanish or respond '2' if they would like to receive messages in English. Of all members receiving COVID-19 vaccination event information 4% (or 345 unique numbers) have requested to receive messages in Spanish.

As previously mentioned, KCPH received an accessibility kit that has white boards, voice amplifiers, clear masks, and magnifying glasses to ensure those needing accommodation to better communicate will have the tools available. KCPH ensures that materials are provided in both English and Spanish. When community partners don't have a translator available, KCPH uses its resources to provide that service.

Q11: What plans do the LPHA and its partners have to decrease transportation barriers to accessing vaccine?

As previously mentioned, KCPH partnered with Basin Transit Service to provide free rides to Albertsons and Sky Lakes walk-in clinics. This is door-to-door, ADA-accessible transportation for anyone, with no eligibility requirements. Free bus fare is also provided during drive through vaccination clinics. BTS is a tremendous partner.

Translink provides free non-emergent medical transportation for Oregon Health Plan and Cascade Health Alliance members to access vaccine sites. Additionally, the Klamath Basin Senior Center provides transportation for seniors to access vaccine sites.

Taking vaccines to the people is another strategy to eliminate transportation barriers. Klamath Health Partnership provided several on-site clinics at farms and in the outlying communities of Merrill, Malin, and Keno. Klamath Tribal Health held pop-up clinics at the fire stations in the outlying towns of Bly, Beatty, and Sprague River. KCPH partnered with the Crescent Community Club to host three vaccine clinics in north County, serving Chemult, Crescent, and Gilchrist. Public Health also provided vaccines to homebound individuals, at Third Thursday, and in homeless camps.

Q12: 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?

Klamath Tribal Health has provided on-site vaccine clinics for Tribal youth and has scheduled mobile vaccination clinics for youth in Beatty and Sprague River. It is also holding a Back-to-School event in Chiloquin that will feature youth-specific vaccination education and vaccination for Tribal youth.

KCPH, Sky Lakes, Michael Sheets, and KHP all have very strong relationships with the county and city school districts, the community college, and university. The plan is to come along-side the districts to provide vaccine for eligible youth across the county, which will be a collaborative effort due to the extensive geographic area.

KCPH has strong relationships with Integral Youth Services, Citizens for Safe Schools, Friends of the Children- Klamath Basin, all of which are programs serving high-risk youth who struggle with poverty, violence and homelessness. Many of the youth served identify as a person of color. These agencies continue to provide powerful messaging to their youth and families about the importance of vaccines. They've also helped coordinate scheduling and transportation for their clients when needed. Integral Youth Services (IYS) invited KCPH to provide vaccines at its summer lunch kickoff program. Moving forward, these organizations will continue to be offered opportunities to partner to provide vaccine to their participants, whether hosting a special clinic or providing vaccine at an existing event. They will guide this group on the best approach.

As mentioned before, Klamath Works and Central Oregon Disability Support Network are partnering to provide a family-friendly night in the park that includes on-site vaccination for eligible youth. It is being held in a poverty-stricken neighborhood and all booths and materials will be in English and Spanish.

Q13: 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?

KCPH hosts bi-weekly provider meetings and participates in the monthly CBO meetings. Data is shared at these meetings, which provide a platform for community partners to offer feedback on progress and suggestions on how to improve the provision of culturally- and linguistically-appropriate services. KCPH also receives a weekly epidemiology report that includes detailed information about vaccine administration stratified by age, race, and ethnicity. These reports are posted on the KCPH website. Conversations with CBOs and leaders in the community who are people of color will continue as partnerships are cultivated and nurtured.