Lake County COVID-19 Vaccine Equity Plan Progress Report

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.

Transportation: Lake County Public Health (LCPH) identified transportation as a barrier, especially in the communities in the northern part of Lake County. LCPH hosted mobile vaccine clinics in partnership with OHA in Christmas Valley on August 10th and 11th and in Lakeview on August 12th. Additionally, a drive-through vaccine clinic was held in Paisley in May. These events allowed people, especially elderly citizens, to receive the vaccine without traveling multiple hours to LCPH’s clinic in Lakeview. To address this barrier, LCPH has worked with the Lake County Senior Center to coordinate transportation for vaccinations. Additionally, LCPH had a vaccine booth at the 3rd annual Suicide Prevention and Awareness BBQ at the Lake District Recovery Center on August 11th from 10 a.m. – 2 p.m., which allowed people to receive the vaccine without scheduling an appointment at the public health clinic.

Staff capacity: While LCPH is still short-staffed, they will not be the only vaccine provider in Lake County. Lake Health Clinic is currently applying to be a vaccination site. Once this is finalized, they will receive training from Judy Clarke, director of LCPH, in administering and storing the vaccine as well as completing the necessary paperwork and documentation.

Additional efforts: In addition to mobile clinics, OHA also held a vaccine clinic at the Warner Creek Correctional Facility on June 22nd and September 13th. Despite limited staff capacity, Clarke has offered appointments before 8 a.m. to individuals to accommodate their work schedules. Clarke also offered vaccine to firefighters from fire crews who were in Lakeview due to this year’s fires. She provided testing and offered vaccine to those who tested negative.

Lake County's data on vaccination rates by race and ethnicity are aggregated with Klamath, Malheur, and Harney counties (pictured below). Using the U.S. Census’ 2019 population estimates, we can see that Lake County's population is just under 8,000. The population makes up less than 10% of the total population in the aggregated data, making it difficult to draw conclusions on the equity gaps between racial and ethnic populations from the data provided by OHA.
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.**

As indicated in Lake County's original submission, we did not have any survey results from agricultural employers. LCPH continues to use radio and newspaper ads as well as its bilingual (Spanish) social media pages to share information and events. Additionally, LCPH has two employees who are native Spanish speakers who have conducted outreach to the Latino community.
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.

LCPH received feedback from residents in the northern part of the county that the distance to the public health clinic in Lakeview was a barrier to receiving vaccine. This was addressed by partnering with OHA to provide mobile clinics in Christmas Valley. LCPH also has partnered with North Lake EMS to hold vaccine clinics in North Lake as well as a drive-thru clinic in Paisley. All of these events were publicized and shared using Lake Health District and Lake County Public Health’s Facebook pages as well as newspaper ads in the Lake County Examiner. The North Lake mobile vaccine clinics were also advertised in Desert Whispers, a local newspaper in Christmas Valley.

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.

As indicated in our original submission, LCPH knows that lack of vaccine confidence has been a key factor in Lake County's low vaccination rates. As well as being short-staffed, LCPH struggled to conduct outreach and provide vaccine at its office in Lakeview as the county’s sole vaccine provider. With Lake Health Clinic becoming enrolled as a vaccine provider, LCPH believes that they will be able to reach more people during their regular visits rather than patients being required to schedule an appointment with LCPH to receive the vaccine. Additionally, they may feel more comfortable receiving it in a traditional healthcare setting that allows the patient to talk to their doctor about the vaccine and receive information about it at the time of their appointment. Also, as time goes on and patients see that more and more people receive the vaccine with minimal to no adverse effects, LCPH hopes to see vaccination rates rise throughout the county.