



Yamhill County COVID-19 Vaccination Equity Plan Demonstration of Progress September 28, 2021

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.

The table below demonstrates progress in vaccination rates among all populations with the biggest increases in our American Indian/Alaska Native, Native Hawaiian/Pacific islander, Black, Asian, and Hispanic populations, see table 1 below. Additional efforts include:

- In partnership with community-based organizations (CBO) and local coordinated care organization (CCO) we have done a series of videos of local providers discussing the vaccine.
- Are working to establish a contract with Providence Health to be available for confidential one on one calls to answer questions about the vaccine.
- Ensured vaccines are available 5 days a week including evening hours and weekends.
- Provided onsite vaccines in dozens of community locations including at Housing Authority of Yamhill County apartment complexes.

We believe these efforts have positively impacted the community by building trust and increasing vaccine rates.

Table 1

Population	Yamhill Pop Est	Yamhill Vaccinated at Least 1 Dose as of July 6, 2021	% of Group with at least 1 dose as of July 6, 2021	Yamhill Vaccinated at Least 1 Dose as of September 27, 2021	% of Group with at least 1 dose as of September 27, 2021	% Increase from July 6, 2021, to September 27, 2021
American Indian/Alaska Native	3304	1,720	52.1%	2,471	74.8%	22.7%
Asian	2914	934	32.1%	1,142	39.2%	7.1%
Black	1637	327	20.0%	471	28.8%	8.8%
Hispanic	16037	5,441	33.9%	6,872	42.9%	9%
Native Hawaiian/Pacific Islander	511	233	45.6%	314	61.4%	15.8%
White	84201	35402	42.0%	42,670	50.7%	8.7%
Total	108604	44,057		62,315		
"Other Race"		2472		2486		
"Unknown"		6135		5889		

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.

Yamhill County Public Health has continued to keep the lines of communication open with farmworkers and agricultural facilities in the County both directly as well as through partners. We have continued to offer on-site vaccine clinics and information on where employees can go if they wish to be vaccinated in another setting. Our on-site clinics have been provided multiple times at the same locations so that individuals who may have changed their minds have this opportunity on location. Yamhill County Public Health is also working to ensure access to booster vaccines to this population as they are approved.

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.

Yamhill County was provided feedback that information needed to be available orally as well in writing. We did the following:

- Ensured that people were available to read individuals the EUA, consent forms and other vaccine related documents at vaccine clinics and events.
- Worked with the local CCO who recorded video clips encouraging people to get vaccinated.
- Supported live Q&A sessions in English and Spanish for people to ask questions.
- Contracted with a healthcare provider to provide confidential one on one calls for people who have vaccine related questions.

These efforts have been shared back with our Vaccine Advisory Group through our meetings.

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.

An example of this is our work with our CBO YCAP to determine strategies to vaccinate our houseless community. This group determined locations and times and we followed their lead going to the locations they provided and at the times they told us would best work for the population served.