Vaccine Planning Team

Structure, process and membership January 15, 2021

(P.S. 321 Doses of Moderna given so far in 6 clinics. 30 vials used. Avg 10.7 doses per vial.)

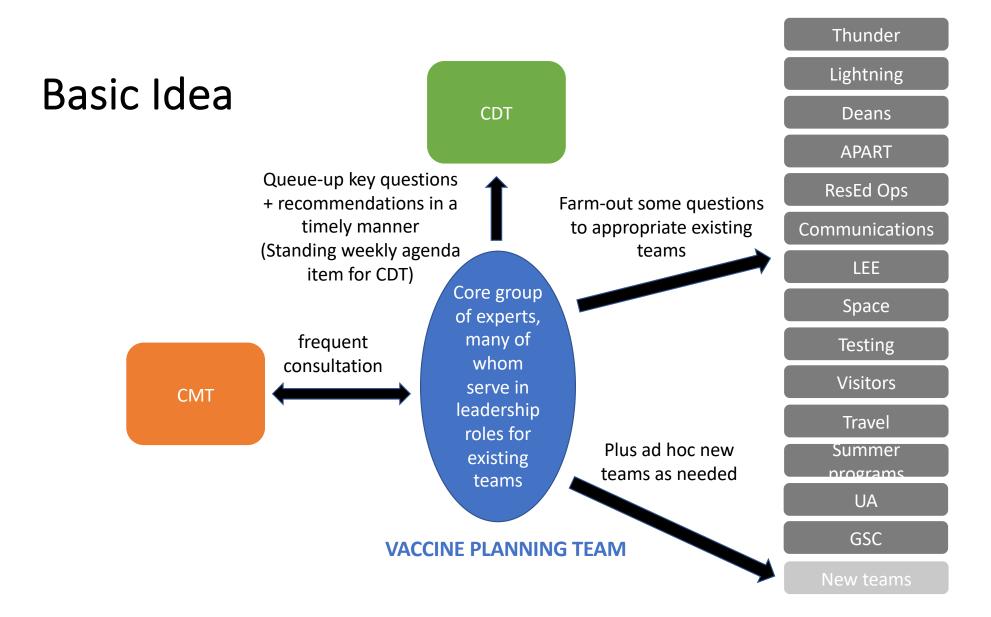
Context

Feels a little like March, but better...

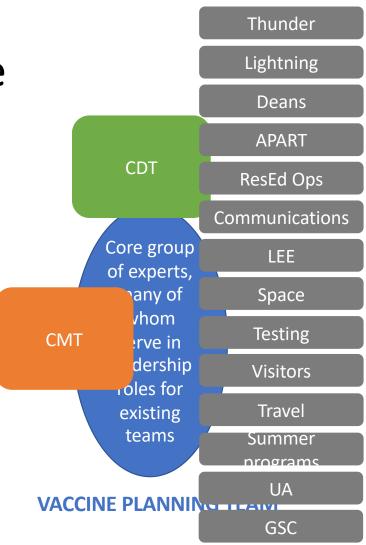
- Vaccine arriving faster than we can answer all the questions, establish our policies, and change our operations
- High uncertainty, much is outside of our control, and there are many questions/decisions we may not even know yet
- Managing how we emerge from the pandemic with the help of vaccines will be different than running our spring ramp-down in reverse
- High level anxiety/interest, there are a variety of equity implications
- Communications will be key

We have some very effective teams in place

To the extent possible we should rely on these



Design for some overlap



Vaccine Planning Team Members

- Ian Waitz (lead)
- Jason Baletsa
- Suzanne Blake
- Steve Bradt
- Chris Caplice
- Ron Hasseltine
- Peko Hosoi
- Marianna Pierce

- Christina Rudzinski
- Cecilia Stuopis
- Kate Trimble
- Krystyn Van Vliet

Guiding Principles: Comparison

Team 2020	Legal-Ethical-Equity Committee
Excellence in MIT's mission	
Community health and welfare	Safety
Expert guidance	
Leadership	
Diversity, equity, and inclusion	Equity
Compassion, empathy, and respect	Privacy
Adherence to our community expectations, policies, and standards	
Financial sustainability	
Access to campus	Equity
Qualities of the decision-making process	
Preserving flexibility in an uncertain and rapidly changing environment	

https://covid-team2020.mit.edu/values/

https://computing.mit.edu/wp-content/uploads/2020/10/LEEmemo.GuidingPrinciples30May2020.pdf

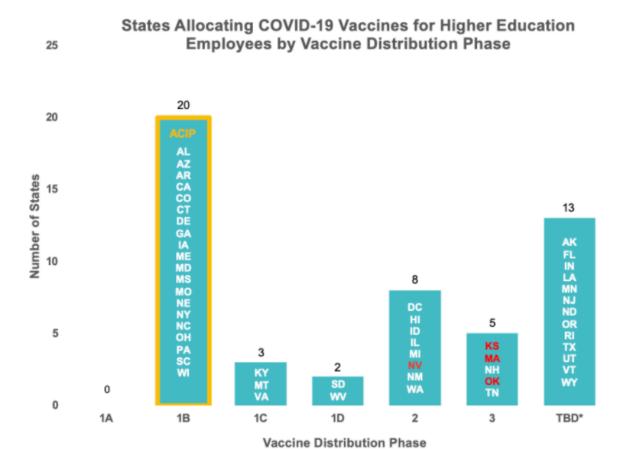
Key Guiding Principles for Vaccine Planning Team

Team 2020 Guiding Principles	LEE Guiding Principles	Questions
Excellence in MIT's mission		Will we prioritize vaccines in part by who is on campus and their role?
Community health and welfare	Safety	If we receive doses for a particular population that more than covers the entire population, how will we decide who should receive the excess vaccine?
Expert guidance		What percent of our community needs to be vaccinated before we relax face covering and physical distancing protocols?
Diversity, equity, and inclusion	Equity	Because the final group is age-based and is a large range, how will we decide who among them goes first?
Compassion, empathy, and respect	Privacy	What, if any, ability do we have to "enforce" that members of our community get vaccinated? How would we "know" whether people had been vaccinated? Will we use any form of identification for individuals who have been vaccinated?
Access to campus	Equity	What percent of our community needs to be vaccinated before we again welcome visitors? Will we allow people who are not vaccinated to work on campus?

State-by-state vaccine prioritization

- States set their own priorities for vaccine distribution
- In Massachusetts, higher ed employees are in Phase 3
- We are currently in Phase 1
- We must follow
 Commonwealth guidelines

SOURCE: <u>Higher Ed Workers Get in the Vaccine</u> <u>Line</u>, Inside Higher Ed, January 13, 2021



^{*} Several states have not released COVID-19 vaccine allocation plans past the initial phase. States listed in this column have not yet published information about when higher education employees may be eligible for COVID-19 vaccination.
Note: States listed in red present the phases of their COVID-19 vaccine allocation plans numerically, instead of following ACIP's standard alphanumeric format.

J, Nocka K, Jones D, Bor J, Lipson S, Jay J, and Chan P. (2020). "COVID-19 US state policy database." Available at: www.tinyurl.com/statepolicies

MIT Medical COVID-19 Vaccine Approach

Phase 1

February – April

April onward

Highly constrained supply with

December - February

- Highly constrained supply with distribution tightly controlled by Commonwealth
- Eligible Populations:
 - MIT Medical employees and contractors with patient contact and/or COVID-19 exposure risk
 - MIT Police
 - MIT EMS

Increasing supplies distributed more broadly by

- CommonwealthEligible Populations:
 - MIT Medical patients with two or more comorbidities, or who are age 75+

Phase 2

- MIT Medical patients age 65+
- MIT Medical patients with one comorbidity
- Select MIT employees who support critical infrastructure (i.e., CUP)

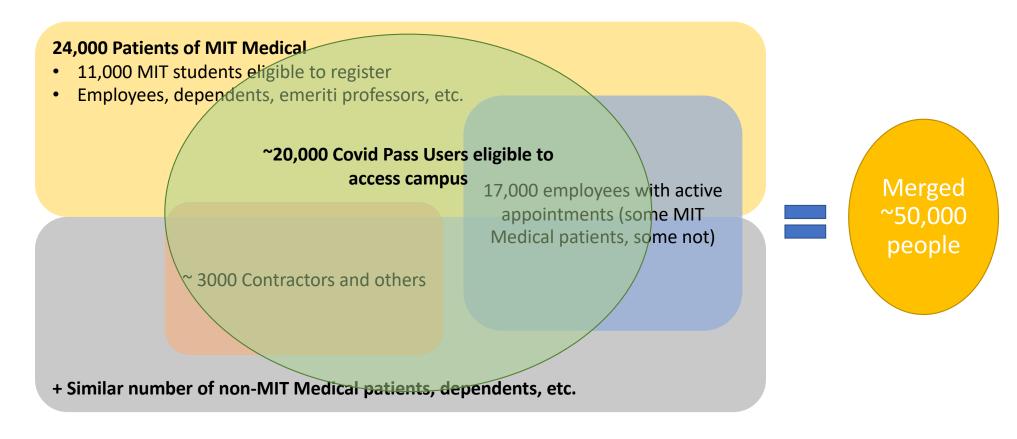
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 Widespread availability with health care providers able to order doses based on need

Phase 3

- Eligible Populations:
 - Broader populations TBD

MIT Community in Spring 2021



Question categories (so far)

- Vaccine prioritization
- Logistics, compliance and risk
- Reactivating campus
- Communications, education and governance
- Lincoln and other affiliates

Next steps

- Prioritize specific questions (by date we need answers)
- Determine which questions can/should be answered by others
- Move quickly
- Emphasize internal communications

Questions, comments, recommendations?