

MODULE SIX

From Getting Started to Sustaining the Journey: A Comprehensive Planning Guide for Ensuring Vaccination Equity & Student/Family Access to Vaccination-Related Health Services

An Introduction to the Theme, Issue, or Problem of Practice

This module provides a comprehensive planning guide for superintendents and other district leaders committed to ensuring vaccination equity. It provides suggestions and a planning grid for the four key phases of vaccination clinic development: (a) Initial Program Design and Staff/Family/Community Outreach; (b) Development of District- and/or School-Level Vaccination Clinics; (c) Scaling Up and Expanding Vaccination Initiatives and Programs; and (d) Ensuring Sustainability and Anticipating Future Vaccination-Related Priorities and Needs. The planning matrix includes performance indicators for each of the four phases of program implementation as well as space for indicating artifacts and deliverables, individuals responsible for leading each phase, data collection and evaluation of outcomes, and a timeline for each key component.

Essential Questions

- What are the key components associated with each phase of developing district- and school-level vaccination clinics?
- What should district leaders consider during initial stages of program design and outreach?
- How can educational leaders ensure that initial vaccination clinics are well designed and sufficiently resourced to meet the needs of students and families?
- What do successful leaders do to scale up and expand initial vaccination initiatives and programs?
- How can educational leaders use data and related information to anticipate future potential vaccination-related priorities and needs in their district?

Outcomes



Identify four key phases of vaccination clinic program development.



Ensure that all required components are in place during initial implementation of district- and/or school-level vaccination clinics.



Analyze requirements for scaling up and expanding initial vaccination clinics to ensure that all students and families within a district are served.



Use data and related information to predict potential vaccination-related issues and needs in a specific learning organization.

The Power Of Strategic Planning and Continuous Improvement In Promoting Increased Vaccination Rates For All Students



This strategic planning and continuous improvement planning template provides space for users to identify the following for each of these four phases:

1. Long-Range Goals
2. Key Performance Indicators
3. Artifacts and Deliverables for Each Performance Indicator
4. Individuals Responsible for Ensuring Achievement of the Actions and Work Products Generated for Each Performance Indicator
5. Tools and Processes for Data Collection and Program Evaluation Processes for Each Performance Indicator
6. Timeline for Each Performance Indicator (Including Due Dates)

This AASA/Merck Vaccination Toolkit concludes with a comprehensive template for educational leaders to use as a guide for the multi-stage process of developing, implementing, and sustaining district- and school-level vaccination clinics. Although variations and additions to this template are an essential part of any continuous improvement process (based upon district resources, goals, and priorities), this version can be a useful professional development tool for identifying the “non-negotiable” components of effective clinic implementation.

This toolkit strategic planning template is organized around the four identifiable stages of program development emphasized throughout the document:

- **Phase 1:** Initial Program Design and Preliminary District and Community Outreach Related to Communicating the Importance of High Levels of Student Vaccination Rates
- **Phase 2:** Development of Initial District- and/or School-Level Vaccination Clinics, Including Location, Budget Support, Technical Logistics (e.g., Vaccination Storage), Personnel, and Community Outreach
- **Phase 3:** Using Performance Data and Community Stakeholder Feedback to Determine Areas in Which Vaccination Clinics Should Be Expanded to Increase Accessibility for All Students and Their Families
- **Phase 4:** Ensuring Sustainability and Anticipating Future Vaccination Priorities and Community Needs



Long-Range Goal #1:

Develop Initial Program Design & Conduct Preliminary Staff, Family, & Community Outreach

Artifacts & Deliverables	Individuals Responsible	Data Collection & Evaluation of Outcomes	Timeline (Including Final Due Date)
Performance Indicator # 1: Articulate your district's rationale, vision and mission, and guiding principles for developing one or more school-based or district-level vaccination clinics.			
Performance Indicator # 2: Disseminate clear and accurate information about vaccination status of your students to staff, parents, and community members.			
Performance Indicator # 3: Develop a plan to address misconceptions and misinformation within the community that may be producing vaccination hesitancy.			
Performance Indicator # 4: Form a vaccination design team, including healthcare professionals, district staff, and representatives from key organizations (e.g., hospitals, pharmacies, clinics, government).			
Performance Indicator # 5: Develop and distribute for staff and public reaction and recommendations a comprehensive overview of your vaccination design principles and related organizational logistics.			
Performance Indicator # 6: Review proposed design proposal to ensure that it addresses key equity issues, including assurances that issues related to geographic isolation, socio-economic status, transportation issues, and other parental concerns are efficiently addressed.			
Performance Indicator # 7: Ensure that all relevant stakeholder groups are actively involved in the design process, including Board of Education support for funding and design specifications.			

Long-Range Goal #2:

Develop & Implement Initial District- & School-Level Vaccination Clinics

Artifacts & Deliverables	Individuals Responsible	Data Collection & Evaluation of Outcomes	Timeline (Including Final Due Date)
Performance Indicator # 1: Ensure that communication lines with key stakeholder groups remain open and active, including continual attention to areas of vaccine hesitancy and/or misinformation.			
Performance Indicator # 2: Collaborate with district staff and external partners (e.g., health agencies, hospitals, pharmacies, government agencies) to build the infrastructure to support the implementation of initial district-level and/or school-based vaccination clinics.			
Performance Indicator # 3: Select the site(s) that will house the vaccination clinic and ensure that internal staff and external partners and stakeholders support the selection of that site (including sensitivity to placing sites in high-needs areas in which residents may lack easy access, transportation, or funds to make use of other health services).			
Performance Indicator # 4: Work collaboratively with staff and partners to ensure that the necessary space, vaccination technology, vaccinations, and personnel are available to ensure effective opening(s).			
Performance Indicator # 5: Ensure that appropriate and comprehensive professional training is implemented for all personnel involved with the clinic(s), including a focus on reporting issues, data management, and physical plant issues such as vaccine storage.			
Performance Indicator # 6: Develop and implement a quality control process to collect and analyze emerging data and make appropriate modifications to the vaccination clinic(s) as needed.			

Long-Range Goal #3: Scale Up & Expand Vaccination Initiatives & Programs to Ensure Equitable Access for All Students & Families

Artifacts & Deliverables	Individuals Responsible	Data Collection & Evaluation of Outcomes	Timeline (Including Final Due Date)
<p>Performance Indicator # 1: Develop and communicate to staff, families, Board, and stakeholder groups an analysis of data and outcomes of the initial phase of SLV operations, including areas of achievement, impact upon vaccination rates for all students, and identified areas for modification, enhancement, and/or expansion of vaccination clinics and services.</p>			
<p>Performance Indicator # 2: Use initial summative evaluation results and feedback from stakeholders to determine locations and services that are needed to ensure that all families have ease of access to vaccination services.</p>			
<p>Performance Indicator # 3: Based upon this analysis, determine if and where additional vaccination clinics should be developed and implemented, including locations, range of services, required budget and personnel, and operational requirements (e.g., storage, space locations, communication and outreach issues, etc.)</p>			
<p>Performance Indicator # 4: Collaborate with community partners and internal staff to develop and implement your expanded vaccination clinic sites and services in alignment with your initial Phase 2 policies, processes, and procedures.</p>			
<p>Performance Indicator # 5: Continue to ensure that ongoing progress monitoring and data analysis are used to ensure quality control of expanded vaccination clinic sites.</p>			
<p>Performance Indicator # 6: Expand efforts to use multiple platforms to publicize the availability of vaccination services in your school district, including use of social media and in-person platforms to showcase the importance of vaccinations and diminish the impact of misinformation.</p>			

Long-Range Goal #4:

**Ensure Sustainability of Systemic Vaccination Clinics &
Anticipate Future Vaccination-Related Priorities & Needs**

Artifacts & Deliverables	Individuals Responsible	Data Collection & Evaluation of Outcomes	Timeline (Including Final Due Date)
<p>Performance Indicator # 1: Continue to integrate the importance of increasing and sustaining high levels of vaccination rates for early childhood and adolescent students in your district into your district strategic plan, school improvement plans, and central office outreach to school staff and community members.</p>			
<p>Performance Indicator # 2: Sustain and expand your efforts to promote cross-institutional partnerships with relevant agencies and organizations (e.g., your School Board, health providers, pharmacies, government agencies).</p>			
<p>Performance Indicator # 3: Expand staff focus on addressing emerging issues related to the change process in schools and the district, including helping a maximum number of individuals to move from information to action to renewal as they engage in support for district vaccination efforts.</p>			
<p>Performance Indicator # 4: Use a range of sources (e.g., CDC, National Institute of Health, local health agencies and service providers) to monitor current and potential disease outbreaks and epidemics/pandemics that may potentially affect your school district.</p>			

Some Final Thoughts & Acknowledgments

We are grateful for the contributions and input provided us during the development of this AASA/Merck Vaccination Toolkit. Specifically, we wish to honor the amazing district leaders and health service providers who were tireless in offering ideas, recommendations, and anecdotes about their experiences with developing and implementing school- and district-level vaccination clinics.

Without question, we are all living in extraordinary times. As this toolkit reflects, schools and districts are being asked to provide unprecedented services to their students in light of the recent pandemic—and what it has revealed about the need to move from an antiquated industrial paradigm of education toward a new paradigm that addresses the needs and development of the Whole Learner.

We sincerely hope that the suggestions, strategies, and resources provided in this toolkit will expand exponentially superintendents' commitment to the ideas of site-level vaccination clinics. Although never an easy process, these clinics can play a vital role in promoting the health, well-being, and equitable conditions that all students need to grow and prosper.

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