WHAT IS THE WEST POINT COVID-19 VACCINE PLAN???

The United States Government (USG) has purchased COVID-19 vaccine and is making it available to the DoD for distribution and administration to DoD personnel. The DoD will have an independent, but collaborative, program with the U.S. Department of Health and Human Services (HHS) and the Center for Disease Control (CDC) to provide COVID-19 vaccines to DoD uniformed service members, both the active and Selected Reserve components, including members of the National Guard; dependents; retirees; civilian employees, and selected DoD contract personnel as authorized in accordance with DoD regulation.

The Department's priorities are protecting our Service members, DoD civilians, and families; safeguarding our national security capabilities; and supporting the whole-ofnation response to the COVID-19 pandemic.

For more information on the DoD distribution plan and the COVID-19 Vaccine Distributed in Phases to TRICARE Members, go to https://www.tricare.mil/CoveredServices/BenefitUpdates/Archives/12 23 2020 COVID 19_Vaccine_Distributed_Phases_TRICARE_Members.

West Point's vaccination distribution prioritization will be consistent with data-driven CDC guidance for national prioritization. The CDC guidance describes population priorities as phases. DoD Population Schema identifies DoD personnel within CDC population phases. Those phases are described in the following chart:

AND A LEAD STATE	DoD Po	opula	PERSONNEL AND READINESS
CDC Phase	DoD Phase Level		Population Group
Phase 1a	Phase 1 All healthcare providers, healthcare support personnel, and emergency services & public safety personnel	Sub-tier 1*	Intensive Care Unit personnel, Emergency Room/Urgent Care Center personnel, and First Responders (i.e., Emergency Medical Services personnel, police, Search and Rescue personnel, and fire personnel as identified by their institution) and Armed Forces Retirement Home residents.
	Healthcare and support personnel at Military Medical Treatment Facility (MTF) outpatient clinics, and ambulatory care facilities (including but not limited to dental clinics, medical homes, blood donation facilities, and counseling centers)	Sub-tier 2*	Other inpatient healthcare and support personnel as identified by their institution.
	 May include military, civilian, contractors personnel, students, and other hospital non-clinical staff authorized to receive vaccinations from DoD and who support patient care and are at heightened risk of exposure to individuals who have contracted COVID-19. 	Sub-tier 3	Outpatient healthcare and support personnel (including National Guard and Reserve personnel on active duty supporting COVID-19 response operations (e.g., Providing patient care, providing support at UAMTFs, administering vaccines, conducting testing, and assisting in distribution.)
Phase 1b Other Essential Workers	Phase 1b.1 Critical National Capabilities		Strategic and nuclear deterrence forces, homeland defense forces, national leadership (senior staff) as defined by Joint and Military Service Staff principals, USSOCOM-national mission force personnel, and USCYBERCOM - National mission force personnel.
	Phase 1b.2 Personnel preparing to deploy to locations outside the United States		Personnel preparing to deploy within the next three months. This includes military, civilian, and contractor personnel authorized to receive vaccines from DoD.
	Phase 1b.3 Other critical and essential support personnel not identified above		Army, Navy, Air Force, Marines, Space Force, U.S. Coast Guard, and Reserve Component (including National Guard) critical and essential support personnel not identified above.
			DoD Education Activity (DoDEA) and Child and Youth Services (CYS) personnel and food handlers on military installations.
Phase 1b/ Phase 2	Phase 2 High-risk beneficiaries ¹		High-risk beneficiaries as defined by the CDC and others who live in congregate settings (e.g., incarcerated and detainee populations) To be prioritized concurrently with Phase 1b.
Phase 2/ Phase 3	Phase 3 Healthy population		Healthy uniformed personnel and beneficiaries and those not otherwise mentioned above (including new accessions) authorized to receive vaccines from DoD.

USSOCOM = U.S. Special Operations Command USCYBERCOM = U.S. Cyber Command

The tinal phase/teer is defined as the nighest phase/teer for Which a person qualities. Persons at increased risk for severe illness from the virus that causes COVID-19 are those over 65 years of age and those who have cancer; chronic kidney of COPD; heart conditions such as heart failure, coronary artery disease, or cardiomyopathies; those in an immunocompromised state from solid organ transp obscity, or severe obscity (Le., BM greater or equal to 30 kg/m2) pregnancy; sickle cell disease; smoking; or type 2 diabetes mellitus (cas of *Nov.* 32, 2020).

West Point's plan – Operation Immune Knight – is to assure the West Point community receives the vaccine; specifically, all supported DoD personnel and other eligible beneficiaries in accordance with DoD, Defense Health Agency and Army Medical Command guidance.

There are four steps to Operation Immune Knight. They are:

- (INFORM) Provide 'factual' information about the COVID-19 vaccine to all eligible beneficiaries. This was completed (and continues) through West Point-oriented social media platforms, the Pointer View, and through the creation and publicizing of a "COVID-19 Vaccine Information" page in the Internet. This page can be found at <u>https://keller.tricare.mil/Health-Services/West-Point-Dept-of-Public-Health/COVID-19-Vaccine-INFO</u>.
- 2. **(IMMUNIZE FRONT LINE PERSONNEL)** A sustainment operation that begins upon receipt of the first vaccine available to Keller and concludes with the immunization of all willing West Point community prioritized personnel. This includes:
 - Sub-Tier 1a.1: Intensive Care Unit, Emergency Room/Urgent Care Center and First Responders (i.e. Emergency Medical Services, Police, Search and Rescue, and fire personnel as identified by their institution).
 - Sub-Tier 1a.2: Other Inpatient Healthcare and Support Personnel as identified by their institution.
 - Sub-Tier 1a.3: Outpatient Healthcare and Support Personnel (Including National Guard and Reserve personnel on active duty supporting COVID-19 response operations; i.e. providers of patient care, UAMTFs, administering vaccine, conducting testing, distribution).
 - Sub-Tier 1b.1: HQDA directed critical national capabilities tied to strategic and nuclear deterrence, homeland defense, national leadership (senior staff).
 - Sub-Tier 1b.2: HQDA directed OCONUS personnel scheduled to deploy within 3 months.
 - Sub-Tier 1b.3: Other critical and essential support personnel identified by HQDA, DoD Education Activity (DoDEA), Child and Youth Services (CYS) personnel and food handlers on installations.
- 3. **(IMMUNIZE HIGH-RISK BENEFICIARIES)** A sustained operation that includes high-risk individuals defined by the Centers for Disease Control and Prevention (CDC), Nursing Homes, and others in congregate settings. This includes uniformed personnel and beneficiaries in addition to civilians and contractors authorized to receive immunizations from DoD.
- 4. **(IMMUNIZE HEALTHY TOTAL ARMY PERSONNEL)** A sustained operation that begins with the immunization of all Phase-3 priority personnel and concludes with the immunization of all available priority personnel. Priority personnel include healthy uniformed personnel and beneficiaries in addition to civilians and contractors authorized to receive immunizations from DoD, not otherwise previously mentioned, to include new accessions.

Keller has not – currently – received the COVID-19 vaccine, but we anticipate receipt of our first allotment before the end of January 2021; and the first allotment is scheduled for the population group identified in Tier 1a.

Keller will make public notifications when additional allotments of the vaccine are received and when we are ready to vaccinate the respective tier populations by their priority.

In an effort to provide you with as much information as possible about 'Operation Immune Knight' and the 'COVID-19 vaccines,' we will hold a Facebook Live Town Hall on Wednesday, January 13, 2021, at 1730.

If you have additional questions about the distribution plan, we invite you to provide questions – in advance of the town hall – and the team will do their best to address all questions. Please submit questions, no later than 1200 on Thursday, January 7, 2021, to the Facebook post on:

- Keller Army Community Hospital Facebook page at
- Garrison West Point Facebook page at
- Via e-mail (for those who do not have a Facebook account) to <u>Robert.K.Lanier.civ@mail.mil</u>. Any questions to this e-mail will be answered