



An Roinn Sláinte
Department of Health

Allocation Framework for Equitable Access to COVID-19 Vaccine(s)

16th December 2020

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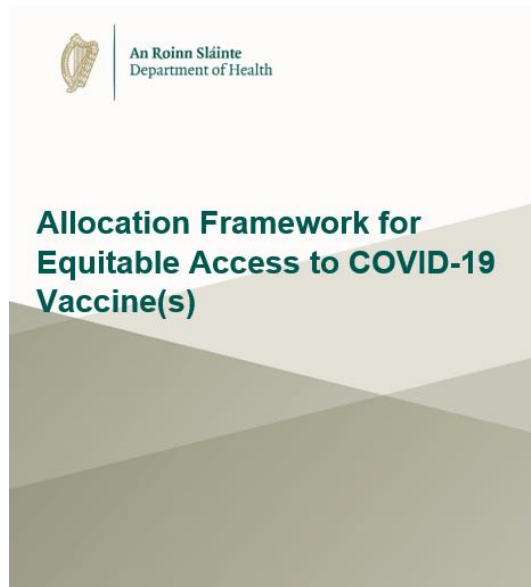
Chief Bioethics Officer

Allocation Framework for Vaccines



- Availability of safe and effective vaccines major step forward in limiting the impact of COVID-19 on our health, society and economy.
- **Equitable access to a safe and effective vaccine with the goals of limiting mortality and morbidity from COVID-19, protecting healthcare capacity and enabling social and economic activity.** Vaccination will be offered to all those for whom it is indicated, initially limited vaccines supplies available.
- Determining priority for vaccination during this period of scarcity was informed by expert advice on the current and evolving understanding of the clinical, epidemiological profile of COVID-19 internationally and in Ireland, with a focus on those at greatest risk from COVID-19.
- Allocation priorities considered in conjunction with other possible measures capable of protecting individuals e.g. ease of social isolation, modifications to the workplace, and/or provision of personal protective equipment.

Allocation Framework for Vaccines



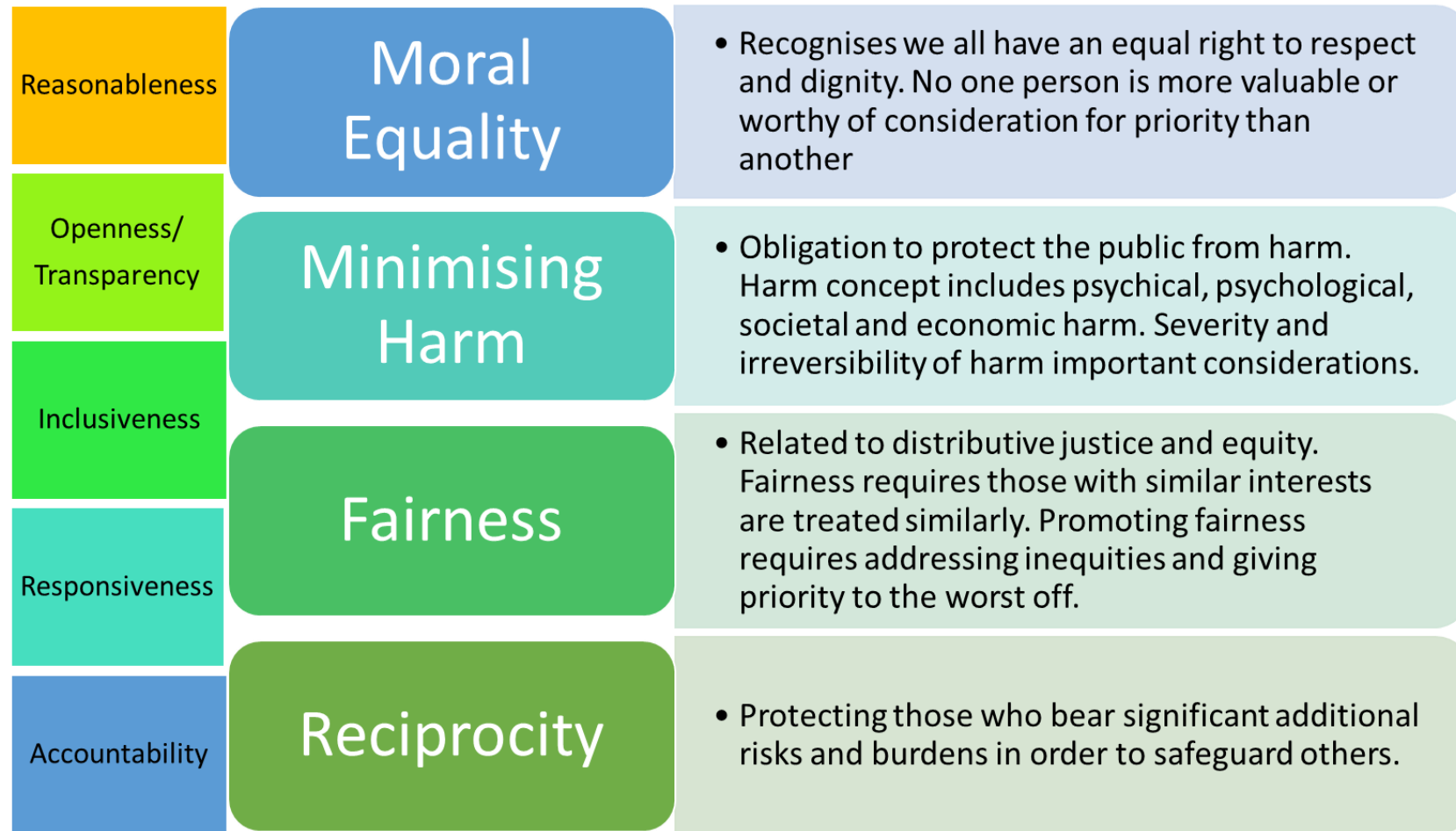
- Priority-setting process has tangible consequences for people's health and quality of life, requires that the values and principles which underpin choices regarding prioritisation should be made explicit.
- DoH Allocation Framework contains a number of principles and procedural values which are grounded in the Department of Health *Ethical Framework for Decision Making in a Pandemic* and informed by WHO Values Framework.
- Using ethical principles to guide decision-making can enhance trust and solidarity and can strengthen the legitimacy and acceptability of the decisions reached.

WHO SAGE values framework for the allocation and prioritization of COVID-19 vaccination

14 September 2020



Multi-Value Allocation Framework



Provisional vaccine allocation groups



- 1 People aged 65 years and older who are residents of long-term care facilities (likely to include all staff and residents on site)
- 2 Frontline healthcare workers
- 3 People aged 70 and older
- 4 Other healthcare workers not in direct patient contact
- 5 People aged 65-69
- 6 Key workers
- 7 People aged 18-64 with certain medical conditions
- 8 Residents of long-term care facilities aged 18-64
- 9 People aged 18-64 living or working in crowded settings
- 10 Key workers in essential jobs who cannot avoid a high risk of exposure
- 11 People working in education sector
- 12 People aged 55-64
- 13 Other workers in occupations important to the functioning of society
- 14 Other people aged 18-54
- 15 People aged under 18 and pregnant women

Initial Vaccine Allocation



Older Persons

- evidence strongly indicates that the single greatest risk of dying from COVID-19 is advanced age and that the risk increases exponentially with age.
- Protecting the most at risk of a poor outcome and recognises the disproportionate burden especially on those in LTRCF



Healthcare Workers

- In the first instance those in direct patient contact roles given high risk of exposure and risk of transmitting infection to multiple vulnerable person.
- Healthcare workers are essential to maintaining health services.
- Duty to protect those who are protecting us



Those with Underling Conditions which place them at High Risk of Severe Disease

- Increased risk of hospitalisation associated with certain underlying conditions e.g chronic respiratory disease, chronic heart disease, hypertension, diabetes mellitus, chronic neurological disease, cancer and chronic kidney disease. Older cohort prioritised.

Vaccine Allocation Strategy



The **vaccine allocation strategy** is a “**living document**” which will be **constantly updated and adapted where necessary in light of any new information**. A flexible, agile response will be required and operational considerations taken into account; depending on the amount and type of vaccine available, the priority of groups may change or several groups may be vaccinated concurrently

Many of the groups at risk of experiencing greater health burdens from a pandemic are already systematically disadvantaged in accessing healthcare and will also experience significant barriers to vaccination. The principle of equity therefore also requires that, within groups prioritised for vaccination, strategies are developed to ensure that those subgroups are able to receive a vaccine.