

INNOVATIVE STRATEGIES FOR LEVERAGING SCHOOLS AS COVID-19 VACCINATION SITES

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Executive Summary

As students across the United States return to classrooms this fall, state and local governments and K-12 educational leaders have a critical opportunity to help protect students and communities from COVID-19. School-located vaccination (SLV) can be one important tool for reopening schools safely and protecting students and their families against outbreaks of COVID-19.

To support leaders in developing effective, school-located COVID-19 vaccination strategies, the Duke-Margolis Center for Health Policy, in collaboration with the COVID Collaborative and the Council of the Great City Schools, National Rural Education Association, Rural Schools Collaborative, and AASA: The School Superintendents Association, has developed this issue brief, featuring case examples of innovative district-level approaches for engaging families and increasing access to COVID-19 vaccines. This issue brief was informed by interviews with educational organizations and school district leaders across the country, including school officials in Detroit, Michigan; Orange County, Florida; Los Angeles, California; and Shullsburg, Wisconsin.

Reflecting the unique structures, demographics, resources, and challenges of school districts across the country, there is no “one size fits all” approach to SLV. However, the innovative strategies, key considerations, lessons learned, and resources described in this issue brief can help maximize the impact and reach of SLV efforts.

Key Takeaways from school leaders for successful COVID-19 vaccination efforts include:

- ▶ **Leadership matters**
- ▶ **Build on existing partnerships**
- ▶ **Offer vaccination alongside other school programming and activities**
- ▶ **Use data to understand disparities and needs**
- ▶ **Have a “no wrong door” approach**
- ▶ **Elevate trusted community voices**
- ▶ **Streamline processes where possible**
- ▶ **Consider partnerships or incentives to encourage participation**
- ▶ **Empower students to communicate with their peers about vaccines**



Introduction

In May 2021, the Food and Drug Administration (FDA) authorized the emergency use of Pfizer-BioNTech's COVID-19 vaccine for adolescents aged 12-17. To date, adolescents' vaccination rates have continued to lag those of adults, with 33.2 percent of 12- to 15-year-olds and 43.8 percent of 16- to 17-year-olds [fully vaccinated](#) as of August 21, 2021. While the Centers for Disease Control and Prevention (CDC) does not publicly report vaccination data on race and ethnicity by age group, Kaiser Family Foundation's [analysis](#) of publicly reported state COVID-19 vaccination data suggests that racial and ethnic disparities in adolescent vaccination rates mirror those observed in the broader population.

As schools reopen for in-person instruction in the fall semester, school-located vaccination (SLV) – along with other [mitigation strategies](#) like testing, masking, and social distancing – is an [effective](#) tool for safely reopening schools and protecting students and their families against outbreaks of COVID-19.

Schools provide a convenient vaccination location for both students and family members who may not otherwise have easy access to vaccination services. Superintendents, principals, teachers, school nurses, school-based health centers (SBHCs), and other educational leaders also can be trusted sources of information on vaccines for parents and students. Beyond COVID-19, SLV can provide opportunities to offer influenza vaccinations ahead of the flu season and support “catch up” for routine vaccinations that have [lagged](#) during the pandemic.

Many school leaders hosted SLV clinics to vaccinate staff, students, and families in the spring and summer of 2021. Identifying lessons learned, strategies for addressing common challenges, and innovative models from these efforts can help additional educational leaders improve immunization rates among students in their communities and prepare for emergency use authorization of COVID-19 vaccines in children under age 12.

To support leaders in developing effective, school-located COVID-19 vaccination strategies, the Duke-Margolis Center for Health Policy, in collaboration with the COVID Collaborative and the Council of the Great City Schools, National Rural Education Association, Rural Schools Collaborative, and AASA: The School Superintendents Association, has developed this issue brief, featuring case examples of innovative district-level approaches for engaging families and increasing access to COVID-19 vaccines. This issue brief was informed by interviews with educational organizations and school district leaders across the country, including school officials in Detroit, Michigan; Orange County, Florida; Los Angeles, California; and Shullsburg, Wisconsin; and identifies lessons learned, key considerations, and resources that can support school leaders in implementing SLV clinics.

What is school-located vaccination (SLV)?

School-located vaccination is typically:

- Administered on school grounds via temporary clinics
- Primarily designed to vaccinate enrolled students
- Held before, during, or after school or when schools are not in session
- A collaboration between public health departments, schools, and/or other private sector entities

Source: [CDC Considerations for Planning School-Located Clinics](#)



Recognizing the Diversity of Schools and School-Located Vaccination Approaches

Reflecting the unique structures, demographics, resources, and challenges of school districts across the country, there is no “one size fits all” approach to SLV. Although school leaders interviewed for this issue brief routinely emphasized the importance of relationships and coordination with key vaccination partners, specific models for administration of SLV clinics often varied by school or district setting as well as available health care infrastructure and resources. For example, approximately 2,000 [SBHCs](#) nationwide provide a full range of primary health care service for students in low-resource settings, including vaccinations. Some schools have also used [American Rescue Plan Act](#) funding to hire or expand the use of school nurses to support a variety of public health and COVID response activities in school settings, including vaccine administration and education for parents and students. Other models for SLV have included partnering with state and local public health departments to host mobile or pop-up clinics, partnering with local Federally Qualified Health Centers (FQHCs), or contracting with local pharmacies or health system partners to conduct clinics.

Despite the diversity of SLV models, common challenges across efforts emerged, including logistical challenges (e.g. space, vaccine storage, workforce), difficulties in efficiently obtaining parental consent and insurance information for reimbursement, accurate reporting of vaccination information into state registries, coordination among key stakeholders, challenging political environments, and vaccine misinformation. The case studies and takeaways in this issue brief reflect innovative ways in which school districts across the country have addressed unique challenges in their own districts and worked to connect students and communities with opportunities to receive the COVID-19 vaccine.

CASE STUDIES: District and School-Level Leadership on School-Located Vaccination

Throughout the COVID-19 vaccination effort, state and local officials, health care providers, employers, schools, community-based organizations, and others have partnered to improve the availability of COVID-19 vaccines, engage communities to build vaccine confidence, and improve uptake of COVID-19 vaccines.¹ Incorporating lessons learned from these efforts and tailoring strategies to address unique barriers for school-aged populations will be essential to improving vaccination rates and ensuring equitable access to and uptake of COVID-19 vaccines.

The following case studies reflect unique approaches that educational leaders in Detroit, Michigan; Orange County, Florida; Los Angeles, California; and Shullsburg, Wisconsin have adopted to address the unique challenges and needs of their communities and schools.

¹For more information, see [Prioritizing Equity in COVID-19 Vaccinations](#); [Addressing Early Challenges in COVID-19 Vaccine Distribution](#); and [Building Private-Public Partnerships to Support Efficient and Equitable COVID-19 Vaccine Distribution, Access, and Uptake](#).



► CASE STUDY: Detroit Public Schools Community District, Michigan

The **Detroit Public Schools Community District** (DPSCD) is the largest public education system in Michigan, with 107 schools and over 50,000 students enrolled in grades pre-kindergarten through 12. DPSCD has a long-standing partnership with the Detroit Health Department (DHD), through which students are offered routine immunizations, vision and hearing screenings, and other health services in schools. This partnership provided a strong foundation for the COVID-19 response. DPSCD has dedicated health experts on its staff, including a Chief Health Officer, a Senior Director of Nursing, and a COVID-19 Project Manager, who collaborate with DHD and have been integral to the district's COVID-19 response efforts.

Once adolescents aged 12 and older became eligible for COVID-19 vaccination, DPSCD and DHD worked together to launch COVID-19 informational webinars and vaccination clinics at schools to increase access to vaccines in locations that students and families trust. For six weeks over the summer, DPSCD and DHD partnered to host mobile vaccination clinics at the three schools with [Technology and Family Resource Hubs](#), where families can receive technical support and supplies to support virtual learning, food and utility assistance, and linkages to additional community resources. Individual schools within DPSCD have also held vaccination events, with vaccines being administered by DHD as well as community providers vetted by DPSCD.

97.6 percent of DPSCD's students are students of color, including those who identify as African American/Black, American Indian/Alaska Native, Hispanic/Latino, Asian/Pacific, and multiracial. Experiences with present-day and historical racism have contributed to many families' distrust in health care institutions and in the safety of COVID-19 vaccines. However, DPSCD and its staff serve as trusted sources of information in the Detroit community. To help build confidence in COVID-19 vaccines, DPSCD launched an information campaign for teachers, staff, parents, and eligible students. Through the [Teens for Vaccines](#) campaign, student ambassadors have shared their experiences with receiving a COVID-19 vaccine. School nurses called over 10,000 homes to have conversations with parents, sharing information about COVID-19 vaccines and answering questions. DPSCD also partnered with a local radio station to share information with the broader community.

Detroit Public Schools Community District, MI

Total schools: 106

Total students: 53,406

Students eligible for free/reduced lunch: 78%

Student demographics:

- 82% African American/Black
- 13.6% Hispanic/Latino
- 2.4% White
- 1.7% Asian/Pacific
- 0.3% Multiracial
- 0.1% American Indian/Alaska Native

Source: [DPSCD Schools and Student Facts](#)



To help build confidence in COVID-19 vaccines, DPSCD launched an information campaign for teachers, staff, parents, and eligible students.



► CASE STUDY: Orange County Public Schools, Florida

For **Orange County Public Schools (OCPS)**, starting small, keeping all partners actively engaged, and promoting open communication with students, families, and the community led to successful COVID-19 vaccination at school sites across the district. OCPS emphasizes partnership and communication in its COVID-19 vaccination efforts. The Florida Department of Health in Orange County connected OCPS with a local pharmacy and a large vendor for vaccine supply to administer COVID-19 vaccines to students over the age of 12 and their families. While the schools provided sites and logistical support for vaccination, partners procured doses and allocated staff to run the clinics. To maintain coordination and engagement among partners, OCPS hosted weekly meetings to encourage collaboration and provide opportunities to identify necessary improvements for subsequent clinics.

The OCPS system serves an urban district of over 206,000 students. To meet the unique needs of its community, OCPS identified areas that lacked access to transportation to vaccination clinic sites and ensured that Spanish-speaking providers staffed all clinics. Additionally, OCPS coordinated with food distribution sites across the district to co-locate vaccination sites. Clinic hours coincided with the schedules of students and parents; clinics would open prior to dismissal to promote vaccination among students and remain open through the evening to vaccinate parents and community members.

From the start, OCPS recognized that active communication and education for parents and students would be necessary to promote vaccine confidence and uptake. The district sent text and phone call reminders to parents of eligible students, posted on social media, and provided credible information about the COVID-19 vaccine on its website. Additionally, principals at school vaccination sites sent communication during clinic hours to remind students and parents about the availability of the vaccine, encourage turnout, and provide updates on wait times and closing time. Looking forward, OCPS continues to engage with partners to identify school sites and ZIP codes with lower vaccination rates to host vaccination clinics.

Orange County Public Schools, FL

Total schools: 202

Total students: 206,058

Students eligible for free/reduced lunch: 74%

Student demographics:

- 43% Hispanic
- 25% White
- 24% Black
- 5% Asian
- 2% Multiracial
- <1% American Indian/Native Alaskan
- <1% Native Hawaiian

Source: [Orange County Public Schools Pocket Guide 2020-2021](#)

From the start, OCPS recognized that active communication and education for parents and students would be necessary to promote vaccine confidence and uptake.



► CASE STUDY: Los Angeles Unified School District, California

As the second-largest school district in the nation, the **Los Angeles Unified School District** (LAUSD) has undertaken a variety of strategies for providing COVID-19 vaccine access for its diverse student population. Thirteen of the district's 17 SBHCs and all 13 of the district's wellness centers, which partner with FQHCs to service the broader community, are currently or are planning to offer COVID-19 vaccines. In addition, LAUSD contracted with an agency to hold mobile COVID-19 vaccination clinics at 150 middle and high schools throughout the spring and summer and will hold additional mobile clinics as students return to schools. LAUSD also partners with local community organizations, health care providers, and 31 FQHCs that offer COVID-19 vaccines to students, families, and surrounding communities. By leveraging these partnerships, LAUSD is able to help meet the needs of schools and communities. The district's [Safe Steps to Safe Schools](#) resource site provides resources and vaccine information in a variety of languages and provides an updated list of available COVID-19 vaccine sites for students and families.

LAUSD continues to expand its vaccination efforts by seeking additional opportunities for collaboration with new and existing partners. The district has a team of organization facilitators on staff to mediate between clinic partners and the district to help identify resource needs and link school leadership with necessary support for clinics. With 44 [Communities of Schools](#) within LAUSD, the district hopes to establish a partnership within each to provide continuing access to COVID-19 vaccination. Ongoing partnerships with the Los Angeles Department of Public Health, Los Angeles City and County, and the Community Clinic Association of Los Angeles County have also helped coordinate resources and support for vaccine clinics, address access challenges, and help support outreach campaigns. Notable partnerships have included parent volunteer "ambassador" trainings to empower parents and other community members to talk about vaccines, door-to-door outreach campaigns using emergency medical services (EMS) partners, and a partnership with the County Board of Supervisors to include vaccination as a part of "backpack distribution" days, which provide students with back-to-school supplies and resources.

Throughout its COVID-19 vaccination efforts, LAUSD has been creative and flexible with its public communications. While engaging in formal communication through the mayor's office and county officials, LAUSD initiated a TikTok campaign, along with engaging local civic and faith leaders in an effort to combat flagging vaccination rates and bolster vaccine confidence. School nurses are trusted sources of information and continue to communicate with families about vaccines. LAUSD has a diverse student population, with nearly 100 languages spoken across the district. Accordingly, the district has tailored outreach approaches to each community and has established and maintained media campaigns and public service announcements in multiple languages to help students and families understand new safety protocols and provide information for testing and vaccination. LAUSD views each dose administered as a success, and moving forward, small efforts will likely have an outsized impact.

Los Angeles Unified School District, CA

Total schools: 1,424

Total students: 535,967

Students eligible for free/reduced lunch: >81%

Student demographics:

- 73.4% Latino
- 10.5% White
- 7.5% African American
- 3.9% Asian
- 2.0% Filipino
- <1% American Indian or Alaskan Native
- <1% Native Hawaiian or Pacific Islander
- 0.6% Not reported

Source: [Los Angeles Unified Fingertip Facts](#)





► CASE STUDY: School District of Shullsburg, Wisconsin

The **School District of Shullsburg** (SDS) is a small district of 325 students, with elementary, middle, and high schools all housed in one building in southwest Wisconsin. To meet the needs of its rural community, SDS built on its longstanding relationship with the Lafayette County Health Department (LCHD). Since the beginning of the COVID-19 pandemic, district and health department leadership have met weekly to coordinate response efforts. Once adolescents became eligible for COVID-19 vaccines, LCHD contacted school districts in the county to identify sites to host vaccination clinics for students.

SDS was able to hold a school-located COVID-19 vaccination clinic in the same week a vaccine became available with a team of school nurses funded through the local health department and supplemented with certified emergency medical technicians on staff. To inform families, SDS leadership sent out communications about the clinic to all parents of eligible students with an attached consent form. SDS took a thoughtful approach to organizing the logistics of the clinic and tried to maintain students' privacy in an effort to avoid bullying based on vaccination status. Since holding this SLV clinic, SDS has sent out regular messaging about vaccine availability, and plans to hold similar events once the vaccine is authorized for use for younger students.

School District of Shullsburg, WI

Total schools: 3

Total students: 325

**Students eligible for free/
reduced lunch: 40.5%**

Student demographics:

- 87.8% White
- 11.1% Hispanic/Latino
- 1.1% Two or more races

Source: [US News and World Report](#)



To inform families, SDS leadership sent out communications about the clinic to all parents of eligible students with an attached consent form.



KEY TAKEAWAYS: Considerations and Lessons Learned for Improving Vaccination Rates through School-Located Vaccination Efforts

The following lessons learned reflect considerations from school leaders who are continuing to lead school-located COVID-19 vaccine efforts in their own communities.

- ▶ **Leadership matters:** School leaders often cited the importance of leadership and guidance at the state, local, and district levels, while empowering local school officials to design approaches best suited to their community. Many schools also pointed to a critical “champion,” often school nurses, who provided leadership and helped enlist key stakeholders to support vaccination efforts.
- ▶ **Build on existing partnerships:** Many school leaders noted that ongoing communication and collaboration between local public health departments and school officials is critical for vaccination planning and responding to emerging challenges. With many school and public health leaders already working through the pandemic to support school testing programs and respond to COVID-19 outbreaks in schools, school leaders reported that participating in regular coordination meetings or having open lines of communication have been essential to support planning and communications to ensure that consistent and appropriate messages are reaching communities.
- ▶ **Offer vaccination alongside school programming and activities:** Many schools have continued to provide linkages to critical nutrition and social support services through the pandemic and are holding “Back to School” events in preparation for the fall semester. Integrating opportunities for vaccination into these existing efforts can both improve efficiency and make vaccination more convenient for families already accessing these services. A vaccination camp was held during Buffalo Public Schools’ [My Brother’s Keeper Summer Male Academy](#), which resulted in a significant percentage of males of color ages 12-17 in the district receiving the vaccine. Chicago Public Schools also provides vaccination opportunities at existing high-volume events, such as the district’s annual Back-to-School Bashes.
- ▶ **Use available data to understand disparities and needs:** While systems vary across jurisdictions, both schools and state Immunization Information Systems (IISs) have access to demographic and vaccination data that help identify communities with disproportionately low vaccination rates. School and public health officials can use this data to direct resources or efforts to address barriers to vaccine access. For example, a medical team in Buffalo Public Schools, consisting of three pediatricians, the district’s medical health care provider, and district nurse practitioners, meets weekly to discuss local trends such as COVID-19 vaccinations and hospitalizations (for children and adults). Schools in areas with low vaccination rates are prioritized for additional vaccination opportunities.
- ▶ **Have a “no wrong door” approach:** School officials stressed the importance of regular multi-channel communications to parents and students through school bulletins, newsletters, texts, phone calls, door-to-door outreach, summer meal programs, sports physicals, and back-to-school events. Even when SLV efforts are intended to reach students, school officials also emphasized the importance of using every opportunity to offer vaccines to families and community members. New York City Public Schools, the nation’s largest school system, launched a \$1.3 million, multi-media campaign to promote adolescent vaccination so that eligible students have the opportunity to be fully vaccinated by the first day of school. [Ads](#) will be translated into 13 languages and run on TV, radio, digital channels, newspapers, subways, and posters at neighborhood businesses.



- ▶ **Streamline processes where possible:** Although there are many different models for SLV, numerous school officials cited challenges related to staffing, logistics, vaccine storage, consent forms, and reporting for SLV clinics. A number of schools and districts described partnerships with full service or “end-to-end” providers that can manage these processes and alleviate many of these complications. Additionally, a number of districts that moved from paper to electronic consent forms described significant improvements in return rates.
- ▶ **Elevate trusted community voices:** Each community is different, and school leaders emphasized the importance of a hyper-local approach that is culturally and linguistically appropriate and engages voices that are trusted within the community. School leaders and school nurses are often trusted sources of information for parents. In addition, partnering with pediatricians, community health workers, faith leaders, sports coaches, teachers, student leaders, and other community members can be effective ways to communicate with parents and students about vaccines. New York’s Buffalo Public Schools is working with a collaborative group of stakeholders on a “boots on the ground, community outreach” [effort](#) to increase families’ vaccine confidence, access, and uptake.
- ▶ **Consider partnerships or incentives to encourage participation:** School leaders highlighted a variety of innovative partnerships and events to incentivize student and community participation in vaccine events. While some districts have chosen not to use monetary or gift incentives, others have explored ideas like partnerships with local radio stations, working with local businesses to support giveaways or raffles, or holding “skip days” from school for student vaccination. The District of Columbia Public Schools has used incentives, such as AirPods and VISA gift cards, to spur participation. Students who get vaccinated are also eligible to win an iPad or a \$25,000 college scholarship.
- ▶ **Empower students to communicate with their peers about vaccines:** In addition to Detroit’s [Teens for Vaccines](#) campaign, the School District of Philadelphia launched the Philly Teen Vaxx Program, where student ambassadors encourage all eligible students to get vaccinated at one of four teen-centered vaccination sites across the city. The ambassadors organize events, canvass neighborhoods, and use social media to debunk vaccine rumors. The Teen Vaxx tagline is: “We provide the facts so you can get the vaxx.”

A list of resources that can assist K-12 leaders in hosting school-located COVID-19 vaccination clinics is in the Appendix.

Conclusion and Next Steps

As students across the country return to the classroom this fall, K-12 educational leaders have a critical role to play in protecting students and communities from COVID-19. With their trusted place in the community and role as a connector to health and social supports for many students, schools are well-positioned to provide critical points of access for vaccines to students and families. Recognizing the important role of schools in boosting adolescent COVID-19 vaccination rates, the Biden Administration launched a [“Week of Action”](#) on August 7th, calling on school districts nationwide to host at least one pop-up clinic and releasing resources to support school-based clinics and community outreach. As school leaders redouble their efforts to reach unvaccinated students and prepare for the emergency use authorization of the COVID-19 vaccine in children under 12, identifying and sharing innovative strategies and lessons learned can help maximize the impact and reach of school-located vaccination.



Appendix

RESOURCES

The following resources can assist K-12 leaders with tools and support for hosting school-located COVID-19 vaccination clinics.

Resources for Hosting School-Located Vaccination Clinics

- CDC Considerations for Planning School-Located Vaccination Clinics ([link](#))
- Chiefs for Change Safely Reopening and Operating Schools: Deep Dive on COVID-19 Vaccinations ([link](#))
- Henry County Schools Comprehensive Vaccination Closed Point of Distribution Plan ([link](#))
- Kaiser Permanente and National Association of School Nurses (NASN)
 - Managing a COVID-19 Vaccine Clinic at a School Site ([link](#))
- Missouri Chapter American Academy of Pediatrics
 - COVID-19 Vaccine Toolkit for Missouri Schools ([link](#))
- School-Based Health Alliance and National Association of Community Health Centers
 - Advancing Health Center and School Partnerships to Improve COVID-19 Vaccination Administration for Adolescents ([link](#))
- US Department of Health and Human Services
 - Back to School Toolkit ([link](#))
 - Back to School Toolkit - Spanish ([link](#))
 - Guide to On-Site Vaccination Clinics for School ([link](#))
 - On-Site Vaccination Clinic Toolkit ([link](#))

Resources for Communicating with Students, Parents, and Communities

- American Academy of Pediatrics #CallYourPediatrician Campaign ([link](#))
- American Academy of Pediatrics Immunizations Campaign Toolkit ([link](#))
- CDC Vaccination Communication Toolkit ([link](#))
- Unity Consortium: Real Facts on Vax ([link](#))

Examples of School-Located Vaccination Efforts

- Council of the Great City Schools: Major Urban School District Efforts to Vaccinate School-age Students ([link](#))

