



# County of Surry, Virginia

February 12, 2021

*Melissa D. Rollins, County Administrator*

## Message on Vaccination Rollout Process in Surry County

The vaccination rollout in the past few weeks continues to generate questions from residents who are seeking clarity on the process. This need for information has resulted in many calls per day to our local government staff, the Virginia Department of Health and calls to the local health department in Surry County.

**We Recognize that Citizens Need to Hear a Voice:** The Crater Health District and members localities recognize the importance of citizens needing to hear a live voice when seeking information on the vaccine registration process. Beginning Wednesday, February 10, 2021, citizens in each of the Crater Health District localities will be able to access a call center specific to their locality to add their name to the COVID-19 Vaccine waiting list. [See the press release here.](#)

**The local call number for Surry County, Prince George and Sussex is 804-722-8799.** Call centers will operate Monday through Friday from 9:30 am – 5:00 pm. Messages left after hours will be returned the next business day.



**Surry County Advocated to Serve as a Point of Distribution Site (POD):** We continue to advise the CHD that a vaccination site is needed in Surry County and leaders have been advocating for a site to safely administer the vaccine in the County; we have the facilities to do so, have resources that will be of assistance to the health district, and have advised the health district of our readiness when the vaccine is made available.

**February 6, 2021 Vaccine Clinic At Surry County High School** - The vaccination clinic on February 6<sup>th</sup> was for approximately 90 Surry County public school teachers and staff only, a decision made by the Crater Health District due to the push for students by the Governor to return to the classrooms; a decision that is up to each school district. Equity in the distribution of the vaccine is a concern amongst many communities. During the Feb 6<sup>th</sup> clinic, we learned that additional doses were available from other jurisdictions in the Health District. Not desiring for any vaccines to be wasted and knowing that we had a wait list, Surry County leaders, volunteers, Crater Health District personnel on site sprung into swift action to ensure that the vaccine went into the arms of citizens on the waiting list, namely the 1B category 65+ or older or those with underlying medical conditions.

**February 6, 2021 - Notification to Citizens:** Emergency Management utilized the call down list of the 1B category

that had been accumulating over the course of the last few weeks from citizens requesting to be added via telephone calls to the department and from the survey that was developed by the County to assist vulnerable residents. The survey was a creative option as a result of citizens not being able to reach the local or state health department due to overwhelming call volume to one number.

Approximately 241 vaccines were administered on Saturday due to the efforts by the School Superintendent Dr. Sims and school personnel, Mr. Ray Phelps, Chief of Emergency Management, Mr. Ervin Jones, Coordinator and Ms. Kinsey Chilcutt, members of the Surry County Volunteer Rescue Squad, the Crater Health staff, school nurses, volunteer vaccinators (nurses) responding to the call for action by Emergency Management for assistance, Sheriff department, other volunteers and the community who patiently allowed all involved to work through the process after having to quickly change course and stay the course. Also, due to the volume of calls that would have been required to reach additional citizens, an instant alert message was sent out to residents stating that the vaccine was available on a first come first serve basis for the 1B category. The challenges were worked through; a small number of residents who showed up could not receive the vaccine as demand exceeded supply, but all names were taken and put on a waiting list in anticipation of having these residents called when the vaccine was again made available. A planned three-hour event essentially turned into nine hours and all involved are to be commended for making this happen for the community. We heard positive comments from citizens who were grateful to receive the call and was pleased with the process.

**Changing Course from Saturday February 13<sup>th</sup> to Wednesday February 10<sup>th</sup>:** County leaders recognize the resource challenges associated with Saturdays and to best ensure that resources would be available for the next clinic (the next round of teachers and staff), the date of the clinic was changed to Wednesday. While the County was extremely grateful to receive the doses that were available and not used in the other communities, it was also imperative that we advocate for vaccines dedicated for Surry. To this extent, we asked the Health District to provide vaccines to the County that could also be administered on Wednesday to citizens in the 1B Category in addition to the vaccines that were reserved for school personnel. After all, the County had a successful test run on Saturday at the High School. On Tuesday, February 9<sup>th</sup> we learned that 200 vaccines would be made available to Surry in addition to the 90 reserved for schools. Logistically, the balls had to be put in motion quickly to plan for this next day event in a matter of hours, especially in light of pending bad weather over the weekend. To this extent, the same process is being utilized to notify citizens who are on the waiting list in the 1B category. Taken lessons learned from Saturday, Emergency Management planned best for appointment times to avoid elderly citizens from long stand and wait times and to cut down on the number of persons in the facility at a given time (social distance concerns). According to our recent records, nearly 500 citizens have been requested to be on the wait list.

We understand that demand all over exceeds supply at this time, and we will continue to advocate for additional vaccines. The clinic on Wednesday, February 10<sup>th</sup> could not be open-ended to all citizens and is by appointment only unless otherwise notified.

**February 10, 2021- 2<sup>nd</sup> Round of Citizens Vaccinated** – A total of 328 vaccinations were administered on Wednesday to approximately 55 teachers, staff and county employees and the remainder to the 1B category of citizens. *The response from the event has been that it was well organized, efficient, friendly, helpful volunteers and the clinic provided an opportunity for citizens to see and greet each other even behind the masks.* **Surry Strong..... All in it together and the clinic was a success! Surry County Staff & Volunteers!**

**Again, Citizens should contact the Regional Call Center that has been created for Surry County residents:**

## Efforts Continue in Getting the Vaccine to the County:

Surry County understands that many are frustrated with the process. We are also and much is out of localities control.

- States rely on the federal government to distribute vaccine doses which have been limited and distribution proportionate to population.
- For Virginia, as of January 25<sup>th</sup>, this meant about 105,000 doses per week.
- Virginia distributed its weekly allocation of the 105,000 doses to each health district also proportionate to population. There are 35 local health districts in Virginia.
- The Crater Health District currently receives about 1,775 vaccines each week to be distributed to all eight member localities. Just think that if this continues, the length of time it would take to get the population in the district vaccinated is unreal.

A letter sent January 21, 2021 from the County as a member of the Hampton Roads Planning District Commission to Governor Northam expressed concerns on the behalf of citizenry and county leaders on the challenges and many concerns of the vaccine roll out process. Also, a January 24, 2021 correspondence was sent from the Surry Board of Supervisors to the Crater Health District leadership requesting that our local health department closed except for one day of the week during the beginning of the pandemic be opened more days and for the vaccine to be made available. The countless hours over the last several weeks of telephone calls by County Administrators, City Managers, School Superintendents and Emergency Managers with each other and with the Crater Health District team to best advocate on the behalf of our citizens has been well worth it to see some progress but much more is needed. While the work is not done, we will continue to advocate for the community. We are grateful for the collective support of the communities who continue to advocate for the vaccine to be equitably distributed in rural counties.

### *Excerpt from Vaccinate Virginia Partner Update - Feb. 5, 2021 from the Governor's Office:*

*The federal government has increased Virginia's allocation of vaccine by approximately 23%, from 105,000 to 129,000 new first doses per week. While this is good news, the increase for each of Virginia's 35 health districts is still relatively small. All states rely on the federal government to distribute vaccine doses by population, and the pace of incoming doses is not expected to increase again until March.*

*As part of a federal retail pharmacy program, 36 CVS Pharmacy locations in Virginia will soon receive a total of 26,000 first doses beyond Virginia's normal allocation. The Commonwealth is working with CVS to identify locations and registration processes that will help promote equitable distribution. The number of weekly doses and retail locations as part of this program are expected to increase in the coming weeks.*

### **What Can We Do In the Meantime:**

Governments all over are tackling a mass vaccination rollout process that has never been done before and undoubtedly has been challenging in the midst of COVID 19 testing and continuing governmental operations. While citizens are waiting to be vaccinated, it is imperative that we continue to wear our mask, wash our hands and watch distance.

**Free Drive Thru by Appointment Only COVID-19 Testing** continues to be offered in the County. Testing dates are announced in the instant alert messaging system and posted on the County's website at

[www.surrycountyva.gov](http://www.surrycountyva.gov).



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**Crater Health District Phone Line-** Remains Open to Answer General Questions Related to COVID 19 and Testing - COVID-19 General Information: **804-862-8989**

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### **What Can We Do In the Meantime:**

Governments all over are tackling a mass vaccination rollout process that has never been done before and undoubtedly has been challenging in the midst of COVID 19 testing and continuing governmental operations. While citizens are waiting to be vaccinated, it is imperative that we continue to wear our mask, wash our hands and watch distance.

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(804) 722-8799

# SURRY COVID-19 CALL CENTER

Local Answers About The  
COVID-19 Vaccine





# COMMONWEALTH of VIRGINIA

Office of the Governor

Ralph S. Northam  
Governor

January 27, 2021

The Honorable Andria P. McClellan, Chair  
The Honorable David H. Jenkins, Vice Chair  
Hampton Roads Regional Planning Commission  
723 Woodlake Drive  
Chesapeake, VA 23320

Dear Chair McClellan and Vice Chair Jenkins:

Thank you for your letter of January 21, on behalf of the residents and localities of Hampton Roads, and your commitment to support the goal of vaccinating all Virginians as soon as possible. I share your frustration, as I'm sure do all Virginians, at the slow rate of vaccination nationwide. I appreciate your candid feedback and the opportunity to respond to your concerns as follows:

### **Vaccine Supply and Transparency of Information**

All states rely on the federal government to distribute vaccine doses. Based on our population, Virginia is currently receiving approximately 105,000 new doses per week toward our goal of achieving herd immunity. We expect the pace of incoming doses to increase in March, which will allow for a faster rate of vaccination.

There are simply not enough doses available yet for everyone who is eligible to receive them. Virginia is not likely to catch up to the demand for Phase 1b until March or April. While everyone eligible for Phase 1a or 1b should register now, it may be weeks or longer before vaccination appointments become available for those who have registered.

This week, we expanded the Virginia Vaccine Summary Dashboard at [www.vdh.virginia.gov/coronavirus/covid-19-vaccine-summary](http://www.vdh.virginia.gov/coronavirus/covid-19-vaccine-summary) to provide greater clarity about the status of doses that have been received and administered. In just the last week, we have dedicated additional teams to reducing the backlog of data entry from vaccine providers and clarifying the status of doses sent to CVS and Walgreens as part of the federal program to vaccinate residents of long-term care facilities. I

have spoken with both providers to urge immediate rollout of these doses, and the Commonwealth will do everything we can to support this effort.

We can now see that the majority of first doses under Virginia's control have actually been administered. Virginia's dashboard does not include vaccine allocations to employees of the Department of Defense, certain other federal agencies, and the Indian Health Service, because those doses are administered by those agencies directly. We are working with our federal partners to obtain more detail about those efforts, with the hope that we can add this information to the dashboard. In the meantime, we have added a footnote on the dashboard to clarify this.

### **Vaccine Eligibility and Allocation**

Detailed information about Phase 1b eligibility and prioritization is available at [www.vdh.virginia.gov/covid-19-vaccine](http://www.vdh.virginia.gov/covid-19-vaccine), along with frequently asked questions about vaccines. We are asking vaccine providers to ensure that priority is given across all categories within Phase 1b. Today, we have issued more clear guidance to local health districts that roughly half of available doses should be used for people age 65 and older. The other half should be used for frontline essential workers; people who are at increased risk of severe illness, as identified by the CDC; and people in correctional facilities, homeless shelters, and migrant labor camps. Local health districts should use the order of priority for frontline essential workers in the Phase 1b details.

In order to make the vaccine available equitably and efficiently, VDH allocates doses to local health districts based on population. We are counting on each district to determine the best way to get shots in arms as soon as possible, leveraging any available combination of vaccinators. This may include the district's own staff; hospitals and health systems; pharmacies; individual providers, Medical Reserve Corps volunteers, and Virginia National Guard members when deployed. I have directed every state agency to assist in troubleshooting bottlenecks to ensure that all available vaccine is used as quickly as possible.

Anyone who receives a first dose of vaccine will be able to get the second dose at the appropriate time, three or four weeks later. Vaccine providers should not hold back their current supply for second doses; they will receive second doses in proportion to the first doses they administer.

### **Virginia Department of Emergency Management**

As you noted, the Virginia Department of Emergency Management (VDEM) is a key leader in Virginia's response to the pandemic. Early last year, VDEM activated the Virginia Emergency Support Team (VEST) to assist state and local partners during the pandemic. The VEST has been in constant communication with stakeholders over more than 300 days of activation. VDEM has also coordinated disaster procurement and PPE delivery, testing logistics, and health equity pilot projects. Recognizing that mass vaccine distribution may exceed the capacity of local health districts, I directed VDEM to identify mass vaccination sites and engage with local health districts and local emergency managers to help connect the various stakeholder groups, non-profits, private sector partners, and other entities necessary for this effort.

## **Public Information**

Public information remains a crucial aspect of the vaccination effort. Every day, VDH responds to dozens of news media inquiries and hundreds of questions from the public. VDH is working to expand communications; increase call center capacity; place advertising in targeted areas; incorporate health equity data; establish an ambassador program and speakers bureau; target underrepresented audiences with information and calls to action; expand the use of social media; increase news media coverage; and develop a grassroots vaccination campaign. Every day, VDH responds to dozens of news media inquiries and hundreds of questions from the public.

## **Coordination Between Partners**

I appreciate your suggestion to work more closely with local government administrators. Within the last week, I have added a full-time local government liaison in my office to receive feedback from localities about the vaccination effort, increase the consistency of announcements and other information, and plan regular updates with local leaders by email and phone. I have also asked Dr. Avula to host a weekly call with locality administrators, to provide an additional forum for questions and sharing of concerns and best practices.

Your role is critical. It is essential that local governments coordinate with your local health district leaders on a daily basis to pool resources. Any locality that can provide staff, supplies, equipment, logistics coordination, or other resources should contact their local health district. Many of the most effective vaccine clinics so far have involved close partnerships between state and local government, health systems, colleges and universities, and private property owners. Now is the time to make specific, scalable plans for vaccine clinics, even if the doses are not yet available to operate them.

As you noted, it is also critical that health districts and health systems work closely together. We must connect vaccinators who have unused doses with partners who can help set up additional vaccination clinics for eligible individuals. This is especially true in cases where health systems have remaining vaccine supply from their initial allocations in Phase 1a. I recently held a call with Virginia's local health directors and the Virginia Hospital and Healthcare Association, to make it clear that all existing supply must be used as soon as possible. We are also working to expand the pool of vaccination staff available for vaccine clinics, by clarifying some of the licensure and liability questions that have sometimes slowed down clinic rollouts.

## **Funding**

I recognize that many local governments have invested funds in the vaccination effort. I have proposed more than \$100 million in new general fund resources to assist. The most recent federal stimulus bill, the Coronavirus Response and Relief Supplemental Appropriations Act, provides additional funding that should help the Commonwealth in rolling out the vaccine, but we are awaiting federal guidance on how those funds may be used. That guidance will help us determine the best use of state and federal funds to vaccinate Virginians as quickly as possible. The stimulus bill also extended the deadline

for localities to spend the \$1.3 billion in federal COVID-19 relief that the Commonwealth distributed to localities in June 2020, soon after the federal funds arrived.

**Testing**

The CDC's Advisory Committee on Immunization Practices has emphasized that vaccines are the most effective way to reduce COVID-19 deaths and infections. This underscores the importance of increasing staff support for vaccine operations and ensuring that vaccines are administered to priority populations as fast as possible. This does mean that local health districts have shifted some of their focus from testing to vaccination. However, we are continuing to support testing in the community through other public and private partnerships, including the use of the Virginia National Guard; private commercial turn-key providers, including the privately-operated kiosks recently deployed in some areas in partnership with localities and local health districts; and the Division of Consolidated Laboratory Services, which is working with VDH to form a strike team to assist with specimen collection and testing.

VDH also is working to expand the number of fixed testing sites in the community, including a partnership with Walgreens to provide fixed rapid point of care testing sites at no cost in locations with limited access to testing. During the week of January 21, Virginia's 7-day average of nearly 47,000 tests per day far exceeded the goal we set last year of conducting 10,000 tests per day. Realizing that resources in each community differ, VDH will continue to work with local health departments and local government officials to address any remaining unmet needs for COVID-19 testing.

Thank you for the tireless work you and your colleagues are doing in our shared fight against COVID-19, and for your willingness to identify opportunities for improvement in the effort to vaccinate all Virginians as soon as possible.

Sincerely,



Ralph S. Northam

cc: Hampton Roads Planning District Commissioners  
Hampton Roads General Assembly Members  
Danny TK Avula, MD, MPH, Virginia Vaccine Coordinator



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I recognize that many local governments have invested funds in the vaccination effort. I have proposed more than \$100 million in new general fund resources to assist. The most recent federal stimulus bill, the Coronavirus Response and Relief Supplemental Appropriations Act, provides additional funding that should help the Commonwealth in rolling out the vaccine, but we are awaiting federal guidance on how those funds may be used. That guidance will help us determine the best use of state and federal funds to vaccinate Virginians as quickly as possible. The stimulus bill also extended the deadline

for localities to spend the \$1.3 billion in federal COVID-19 relief that the Commonwealth distributed to localities in June 2020, soon after the federal funds arrived.

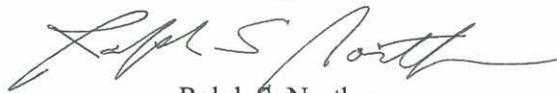
### **Testing**

The CDC's Advisory Committee on Immunization Practices has emphasized that vaccines are the most effective way to reduce COVID-19 deaths and infections. This underscores the importance of increasing staff support for vaccine operations and ensuring that vaccines are administered to priority populations as fast as possible. This does mean that local health districts have shifted some of their focus from testing to vaccination. However, we are continuing to support testing in the community through other public and private partnerships, including the use of the Virginia National Guard; private commercial turn-key providers, including the privately-operated kiosks recently deployed in some areas in partnership with localities and local health districts; and the Division of Consolidated Laboratory Services, which is working with VDH to form a strike team to assist with specimen collection and testing.

VDH also is working to expand the number of fixed testing sites in the community, including a partnership with Walgreens to provide fixed rapid point of care testing sites at no cost in locations with limited access to testing. During the week of January 21, Virginia's 7-day average of nearly 47,000 tests per day far exceeded the goal we set last year of conducting 10,000 tests per day. Realizing that resources in each community differ, VDH will continue to work with local health departments and local government officials to address any remaining unmet needs for COVID-19 testing.

Thank you for the tireless work you and your colleagues are doing in our shared fight against COVID-19, and for your willingness to identify opportunities for improvement in the effort to vaccinate all Virginians as soon as possible.

Sincerely,



Ralph S. Northam

cc: Hampton Roads Planning District Commissioners  
Hampton Roads General Assembly Members  
Danny TK Avula, MD, MPH, Virginia Vaccine Coordinator



“The Countrie it selfe, I must confesse is a very pleasant land, rich in commodities; and fertile in soyle...”

Samuel Argall, ca. 1609

## Board of Supervisors

Robert L. Elliott, Jr. Chair  
Michael A. Drewry, Vice-Chair  
Timothy Calhoun  
Judy S. Lyttle  
Kenneth R. Holmes

*Melissa D. Rollins*  
County Administrator

### *County of Surry*

45 School Street, P. O. Box 65  
Surry, VA 23883

[www.surrycountyva.gov](http://www.surrycountyva.gov)

Phone: 757-294-5271

Fax: 757-294-5206

January 24, 2021

Dr. Alton Hart, Jr. M.D.  
District Director  
Crater Health District  
301 Halifax Street  
Petersburg, VA 23803

Dear Dr. Hart:

On behalf of the Surry County Board of Supervisors, I want to recognize the enormous circumstances we all face together to address the COVID-19 public health crisis. We appreciate the efforts of the Crater Health District in dealing with unprecedented challenges thus far.

The health of Surry County's residents is of paramount importance and I am confident that you like our local leadership are committed to helping communities slow the spread of this disease and vaccinate the public.

In a letter to Governor Northam sent January 21, 2021 on behalf of the 17 member jurisdictions that make up the Hampton Roads Planning District Commission including Surry County, localities cited issues with the COVID 19 Vaccination rollout. Concerns relatively to inconsistency on how each health district is handling this effort are valid as it results in equity concerns amongst the region and neighboring localities. Due to our size and geographic location in the Crater Health District, we are very concerned about the equitable distribution of not just the vaccine when available, but of the resources and capacity of the Crater Health District to serve the needs of Surry County. Surry local health department closed during the Pandemic and since July 2020, remains open one out of five days.

Our vulnerable population and other citizens will be counting on us to deliver timely and consistent messaging as to where they fall into the plan, where to get information and to provide a location in the county where the vaccine can be safely administered. It is difficult to explain to citizens how a neighboring locality can be far ahead in the process regardless of circumstances that may be beyond our control.

We understand that there are limited vaccine supplies and that it will take significant time and support from partners at all levels of government to vaccinate those who want one as safely and efficiently as possible. To this extent, Surry County has offered assistance to the Health District by agreeing to have a mass vaccination clinic. Our citizens feel that Petersburg, Greenville/Emporia, Prince George and Dinwiddie are not practical due to the distance for most

“Take the Rural Route to Success”

residents. We are also being solution-oriented by devising a plan to work with the local Emergency Medical Services team and the School System to secure vaccinators.

As we move into Phase 1b, it is important for us to create channels to best ensure that as many individuals eligible in this category are notified, registered and ready to receive the vaccine when available. We are a community with broadband challenges, and telephone options for vaccine registration must be available for our residents. Thank you for the efforts in advocating for user friendly vaccine registration system that accommodates citizens that will need to call in.

We stand ready and hopeful to receive vaccines and to administer vaccinations to the people desiring it as soon as possible as the Pandemic continues to affect so many. We are very appreciative of the open dialogue with the Crater Health District and look to future communication with you and your team on opportunities to benefit as many Surry County citizens through these difficult times.

Respectfully,



Melissa Rollins, County Administrator/Clerk  
Surry County Board of Supervisors

cc: Members, Surry County Board of Supervisors  
David A. Harrison, Deputy County Administrator  
Dr. Serbrenia Sims, Division Superintendent  
Mrs. Valerie Pierce, Director, Surry Social Services  
Ray Phelps, Chief of Emergency Management

Enclosed: HRPDC Letter to Virginia Governor

January 21, 2021

MEMBER  
JURISDICTIONS

The Honorable Ralph S. Northam  
Governor, Commonwealth of Virginia  
P.O. Box 1475  
Richmond, VA 23218

CHESAPEAKE

FRANKLIN

RE: COVID-19 Vaccinations in Hampton Roads

GLOUCESTER

Dear Governor Northam:

HAMPTON

On behalf of the Hampton Roads Planning District Commission (HRPDC) which represents 17 local governments and 1.7 million residents in the Hampton Roads region, we respectfully request your immediate assistance to increase the rate of vaccinations within our region. We are very concerned that the Commonwealth of Virginia currently ranks very low as compared to other states in the per capita rollout of vaccinations. Based on input from our localities, and the number of vaccines being made available to our communities, we estimate it would take at least 12 to 16 months for the population of Hampton Roads to be vaccinated. We can all agree that this is not acceptable.

ISLE OF WIGHT

JAMES CITY

NEWPORT NEWS

NORFOLK

Our 17 local governments in the Hampton Roads region stand ready to assist you in this effort. Our cities and counties have available staff that can administer vaccinations and can also offer spaces as clinics to administer large-scale vaccinations. We are mobilized and ready to move very quickly, but we need your assistance and the support of the Virginia Department of Health to provide our localities the necessary authority to offer this assistance. We need agreements in place to open clinics and allow for our local government staffs to be able to administer the vaccine to our residents. Our City Managers and County Administrators are available to meet with you and your staff to discuss the mobilization of these efforts.

POQUOSON

PORTSMOUTH

SMITHFIELD

SOUTHAMPTON

SUFFOLK

To make this effort successful, we want to raise the following issues that must be addressed:

SURRY

VIRGINIA BEACH

1. It is clear that each Health District is approaching this effort in an inconsistent manner which is causing confusion and frustration across our region. While we understand operational flexibility, this approach where each Health District establishes its own policies is not serving our community well. This situation has created vast inconsistencies across our region regarding who is included in various phases, and how quickly they are being

WILLIAMSBURG

YORK

vaccinated. The ability of residents to receive vaccinations should not be based on the Health District in which they are located, but should be based on their need for vaccines as established by the criteria provided by the Department of Health.

2. The previous issue leads to a major concern about equity. We are concerned that if the vaccination program continues on its current path, many of our lower income, disadvantaged populations could have less access to vaccines due to the Health District in which they may be located. We must ensure vaccinations are delivered to geographic areas based on need and that all of our residents have fair and equitable access based on Department of Health guidelines.
3. We believe this pandemic has illustrated that our Health Districts have been underfunded and are currently stretched very thin without the resources and structure to respond to this crisis in a timely manner. We respectfully request that you consider engaging the Virginia Department of Emergency Management (VDEM) in this effort. VDEM has broad experience in successfully responding to emergencies, which we believe could provide valuable strategic oversight for this state-wide vaccination effort.
4. We request the Commonwealth provide clear guidance to its Health Districts to stratify and prioritize personnel who should be considered in the Phase 1(b) vaccination effort. Again, we note that there are different interpretations and policies across our Health Districts in Hampton Roads, and it is critical that a consistent approach be established.
5. After these clarifications are made, it is critical that a public information campaign occur to convey a clear and consistent message to our residents. This campaign should be very clear, providing basic information on the Who, Where and When of the vaccination program.
6. As we increase the rate of vaccinations in our region, we need to insure adequate resources and staffing to support COVID testing at our public health districts
7. As of this writing, it is our understanding that approximately 1/3 of the vaccines distributed in Virginia have actually been administered. We need to ensure that our limited supplies of vaccines are administered as quickly as possible. To ensure the vaccines are administered in a more expedient manner, protocol should be established that ties vaccine distribution numbers to those localities that can produce maximum through-put while providing immediate assistance to health districts not able to distribute their proportionate share by providing additional VDH resources or locality support. Once distribution systems are in place in those districts that are behind, vaccine distribution can be increased above their proportionate share until their areas are matching percentages in other parts of the Commonwealth.

8. It is critical that our Health Districts reinforce and strengthen their partnerships with our region's major health care providers to increase the vaccination rollout and request your assistance in this regard.
9. Many of our local governments have prioritized support of the vaccine rollout as priority #1, and have re-appropriated funding from other important efforts to support local vaccination efforts. Our localities are recording and documenting these costs, and request the Commonwealth consider a reimbursement program to offset these unbudgeted expenses.
10. It is our understanding that many of our active duty and retired military personnel and their families are successfully obtaining vaccines through the military. Since active/retired military personnel and their families represent over 300,000 people in Hampton Roads, this is very positive news. However, we are not clear if our vaccination numbers include the military and their families who have successfully acquired their vaccine. Your help in clarifying this question is much appreciated.
11. We want to restate the willingness of our 17 local governments to assist the Commonwealth, Department of Health and local Health Districts in this effort. We are sure there are many other localities across Virginia that stand ready to assist you as well. Mr. Governor, we respectfully recommend you appoint a small committee of six to eight City Managers/County Administrators from across Virginia to meet with you on a weekly basis to provide recommendations to improve the rate of vaccine rollouts in Virginia. We strongly believe that the advice of these professional public administrators will be very valuable to you in this effort. We request that one to two members of this professional manager group be from the Hampton Roads region.

In conclusion, we appreciate your dedication and leadership as the Commonwealth of Virginia addresses this unprecedented challenge. We appreciate your consideration of our comments and look forward to working with you to improve the rate of vaccinations across the Commonwealth of Virginia.

Sincerely,

  
\_\_\_\_\_  
Andria P. McClellan, City of Norfolk  
Chair

  
\_\_\_\_\_  
David H. Jenkins, City of Newport News  
Vice Chair

copy: Hampton Roads General Assembly Members  
Dr. Danny TK Avula  
HRPDC Commissioners