

The Danish Vaccination Programme Against COVID-19

Main objectives of the vaccination programme:

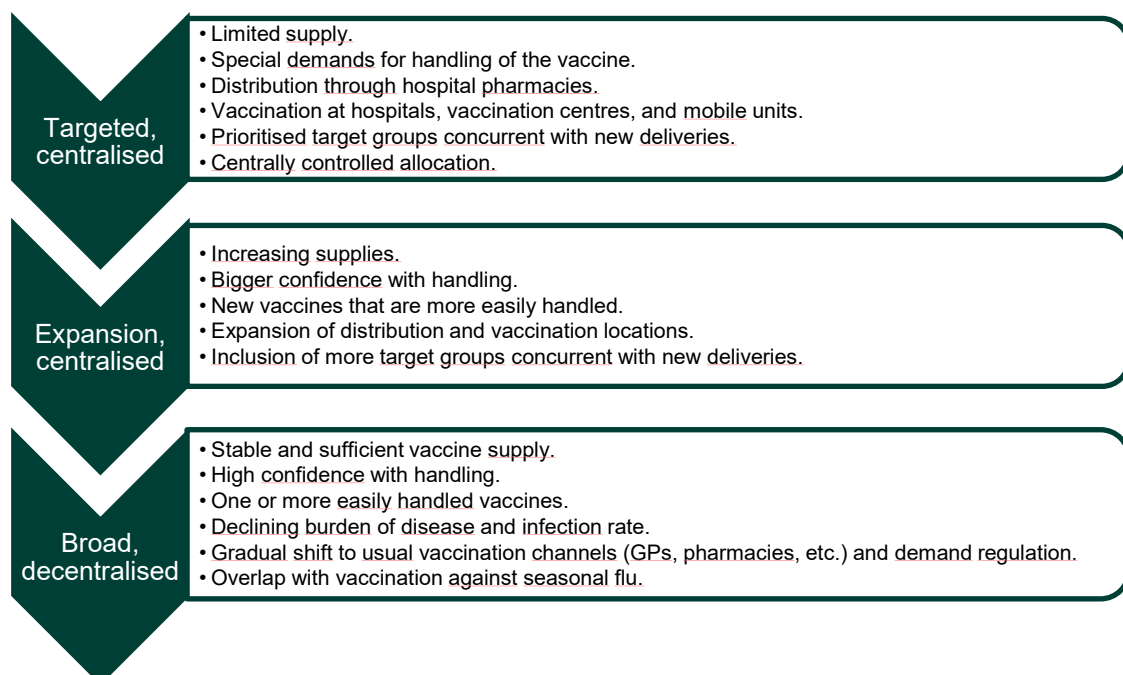
- Minimising death and serious illness due to COVID-19
- Epidemic control and minimising the spread of COVID-19
- Securing functions that are critical to the stability and functioning of society.

Target groups in order of priority:

The Danish Health Authority is responsible for prioritising the target groups for the vaccination programme against COVID-19.

1. Persons living in nursing homes.
2. Persons age ≥ 65 , who receive certain types of home care.
3. Persons age ≥ 85 .
4. Frontline staff in the healthcare sector with an increased risk of infection, or who carry out critical functions.
5. Selected patients with conditions or diseases that carry a significantly increased risk of a severe course of COVID-19.
6. Selected close relatives of patients with conditions or diseases that carry a significantly increased risk of a severe course of COVID-19.
7. Persons age 80-84.
8. Persons age 75-79.
9. Persons age 65-74.
10. Persons under the age of 65 years with conditions or diseases that carry an increased risk of a severe course of COVID-19.
11. Staff in other functions critical to society.
12. The remaining population, subdivided by age.

Phases of the vaccination programme:



Governance and identification:

The programme is centrally governed. The Danish Health Authority announces when new target groups or subgroups are included in the programme.

Different methods of **identification** of target group members:

- Through national registries
- By their employers
- By the doctor in charge of treating them
- By their place of residence

Most citizens are **invited** for vaccination through a secure public e-mail system (eBoks) which allows them to digitally book a time for vaccination.

The authorities in Denmark's five regions administer the vaccinations:

- Most vaccinations take place in vaccination centres established for this specific purpose
- Some take place in more local settings with outgoing units from the vaccination centres carrying out the vaccinations, e.g. vaccination of staff and residents at nursing homes
- Vaccination of hospital staff and hospitalised patients is administered at the hospitals.

Prerequisites for effective implementation:

High levels of trust from the public towards the authorities

- Data on trust in the vaccination programme and on the populations' behaviour has been collected throughout the epidemic and serves as a basis for the authorities to focus their efforts in the right places and actively work with communication initiatives that further strengthen trust. In an epidemic situation, the focus is on the health of the population and not primarily on the individual. Therefore, it is important to be aware of patterns in groups' attitudes and behaviours.

The level of adherence to national immunization schedules is generally high.

- For example, 96% of the population born in 2016 received the first vaccine in the childhood vaccination programme.

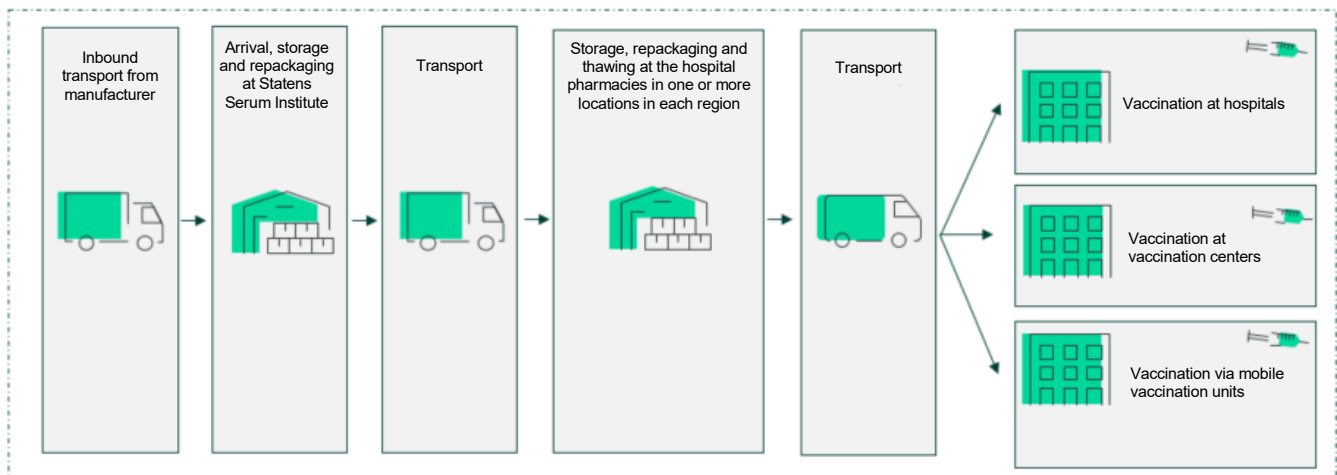
Registration of the population and high levels of digitalization

- Denmark already has a well-established vaccination register, in which all administered vaccines are recorded. This makes it easy to monitor who has received the first and second dose, who has administered the vaccines, and whether there are side effects.
- The thorough registration of the Danish population also serves as a basis for the nationally IT-supported vaccination-invitations.

A strongly anchored management chain, which includes central and decentralized health authorities, as well as other central authorities in relation to e.g. legislation, security, and finances.

A well-established distribution chain from national authorities to the regional hospital pharmacies.

Distribution chain in the vaccination effort, including vaccination sites



Key elements of the Danish vaccine strategy

A well-organized healthcare system with solid public and publicly-funded actors who have already-established areas of responsibility as well as cooperation and communication structures.

- This organization allows the decentralized operating regions to be the backbone of the local vaccination efforts in the first phase of the rollout with centrally controlled and targeted vaccination of target groups in the population.
- This organization also allows for close cooperation between political and administrative level, as well as close cooperation between administrative and operational level. This setup makes it possible to effectively create the conditions for implementation and allows for a short response-time and feedback on the implementation.
- By way of illustration, meetings are held twice a week between those responsible for the vaccination effort, including representatives from the Danish Health Authority, the regions, the municipalities, and the general practitioners' organization (a total of 10-15 people), who together plan the concrete implementation of the overall strategy.