DENALIDANIELS
+ ASSOCIATES

AGENDA
Statewide Immunization Coalition
Five Year Strategic Planning Session
May 19, 2025
9 a.m. to 4 p.m.
Frontier Building, Suite 100, Anchorage
www.ddaalaska.com/immunization-coalition

9-9:30AM	Introductions and Review Agenda
9:30AM	Context Setting Presentation on Recommendations Governance Work Group (Sarah and Shelley) **Action: Decision-Making approval** Communications Work Group (Carlo and Kayla) **Action: Branding Materials approval** Plan Document Review Work Group (Kerry Anne) **Action: Strategic Plan approval**
12-1PM	Lunch (Provided)
1-3:30PM	Review Priority Areas and Discuss Organization Year 1 Work Plans and Determine Group Participation, Leads, and Resources Build Trust Vaccine Positive Environment for Clinical Staff Equitable Access Data Modernization Increase Immunization Rates
3:30-4PM	Closing Comments

**Breaks will be offered between session activities*

Alaska Immunization Coalition

Strategic Planning Session

Meeting Notes

January 27, 2025

Prepared by Denali Daniels + Associates

--

The Alaska Immunization Coalition met on Monday, January 27, 2025. All coalition members were invited to attend this in-person session, which was designed as a follow up strategic planning session to develop the Coalition's 5-Year Strategic Plan. Coalition members were encouraged to attend in-person, however from 9:30 a.m. to 12 p.m., members were able to participate virtually during a presentation and discussion that allowed for hybrid participation.

In-Person

- Aho, Sarah
- Blair, Georgia
- Bunch, Julie
- Dang, Juliet
- Eastman, Jennifer
- Harris, Kathy
- Hewitt, Rose
- Kaempen, Jaime
- Kouad, Theresa
- Liska, Sharon
- Lohse, Shanda
- McCoy, Kara
- McIntyre, Melanie
- Murphy, Louis
- Quinn, Jessica
- Ryan, Chelsea
- Seignemartin, Brandy
- Sipin, Carlo
- Thomas, Laura
- Thompson, Jason
- Walsh, Faith
- Wilson, Kerry Anne

Online

- Aeder, Darci
- Davison, Kayla
- Foint-Anderson, Shelly
- Newland, Kyla

Facilitation Team (DDA)

- Denali Daniels
- Isabella Vaz
- Melanie McGinnis
- Jack Darling

Part 1. Context Setting: Strategic Plan Review

Isabella Vaz (DDA) reviewed the process leading up to the January 27, 2025, meeting and the latest updates to the Draft Strategic Plan Document (Draft Plan). The Draft Plan was circulated for review to all coalition members during the month of December 2024. DDA then reviewed the feedback and incorporated edits and coordinated a meeting with the Plan Document Review Work Group that provided further direction for edits to the Draft Plan. Edits were primarily to the five *Priority Areas* and their associated *Strategies*.

Denali Daniels (DDA) facilitated a discussion about group decision-making and on the draft Vision and Mission Statement. An ad hoc work group provided input on a draft interim executive committee, however there were other ideas about decision making raised in the full group discussion. The group agreed to use "thumbs up, sideways or thumbs down" method for decision making during the day.

Summary of Vision Statement discussion:

- *An Alaska where [individuals/communities] have the knowledge and access to be immunization ~~and protected from vaccine preventable [diseases/illnesses].~~*
    - *"An Alaska without vaccine preventable [diseases/illnesses]"*
    - *"Knowledge and access to immunize for all people and communities."*
- Other Vision Statement suggestions:
    - "An Alaska where all are immunized and protected from vaccine-preventable diseases" (pushed back as too scaled back).
    - "An Alaska without vaccine-preventable [blank]" (misinterpreted as opposing vaccines).
    - "An Alaska where individuals have knowledge and access to be immunized."
    - "Building a healthy Alaska where communities have access to be immunized from vaccine-preventable illnesses" (suggested for mission, not vision).
    - "Knowledge and access to immunizations for all" (suggested for conciseness).
    - Use of the term "disease" vs. "illness"
    - Alignment with CDC terminology
    - Avoiding "All Alaskans" to account for transitional populations (e.g. military, industry)

The full group agreed to revisit the vision and mission statements. Other discussion included the following the consideration of funding, whether a future nonprofit should be formed and methods for making decisions as a full group or smaller committees. Some shared these questions might be clearer after more substantive discussions on the plan content and work plans.

Part 2. Five-Year Targets

Participants transitioned into a workshop activity focused on refining the action plans for each Priority Area's strategies. Members divided into five smaller groups, one for each the priority areas, and were asked to consider the question: "*Where do we want to be five years from now?*"

Using printed materials from the October 29, 2024, meeting as a reference, groups projected short, mid, and long-term action items. Once refined, each group presented their action plan to the larger group. This exercise helps with alignment and mapping for achieving shared goals.

PRIORITY AREA 1: EQUITABLE ACCESS

Priority Area Wall Activity transcription

Strategy #	Short-term	Mid-term	Long-term	Who
1. Increase awareness about free vaccination clinics, particularly in underserved and rural areas.	Website list Partnerships – AK Virtual health fairs	Cross post – social media	Support appoint-making or ability to plan ahead	Kyla

2. Map current vaccine accessibility gaps using community and provider data.	Request data from VakTrAKs about "where"	Identify GIS/mapping partner	Fully functional map with all access points	Epi
3. Advocate for Medicaid, Medicare and other insurers to create policies for equitable vaccine access regardless of insurance status.	Identify/understand gaps in coverage	Develop model policies (whole coalition)	Lobbying	Coalition
4. Develop and distribute public education materials tailored for communities and recognizing the importance of incentivizing parents and guardians.	QR Code education	Connect links to Docket	Influencer	Truck House Timmy
5. Advocate for universal vaccine access for all age groups, addressing barriers such as language, transportation, cost, or others.	Identify alternate source payment	Sourcing payer	Lobbying HS structure sign for vaccine	Sarah

Priority Area: Equitable Access – Discussion

The group discussed bringing things into the 21st century and moving away from paper handouts to digital education, influencers showcasing vaccinations, and links that connect sources to Docket. They discussed getting handouts that reach a more age-appropriate audience and are available on mobile.

PRIORITY AREA 2: DATA MODERNIZATION

Priority Area Wall Activity transcription

Strategy #	Short-term	Mid-term	Long-term	Who
1. Promote the use of data systems for improved vaccine record management.	Convene VacTrAK end user group Have users meet with state and programmers' analysis Gap analysis End User groups who would like data	Develop training for HCP and incentivize completion (model after cancer registry) Quarterly progress reports	Advocate for HPV + Hep B policy change for minors Build end user consultation and groups to vendor contract Health Information Exchange?	Vax coalition gets end users SOA gets programmers and vendors Big meetings with lunch and t-shirts
2. Train healthcare providers on data-driven decision-making tools for outreach planning.	Develop Interactive training Incentives like stickers or lanyards	VacTrAK admin at each site gets an annual report Report is 0/0 for site how long from vax to input VacTrAK How does this compare to rest of AK region	Build end user consultation and groups to vendor contract	Vax coalition gets end users SOA gets programmers and vendors Big meetings with lunch and t-shirts
3. Advocate for development of a	Identify additional data that needs to	"Flat" webpage	Build end user consultation and	Vax coalition gets end users

state-level interactive dashboard to display real-time vaccination rates and gaps.	be collected to help explain gaps and identify solutions (examples) Evaluate barriers and facilitators of old COVID dashboard to inform next edition (e.g., low tech)	No Arc GIS no real time Quarterly "wild fire gauge" To build trust to help students' citations at bottom of page	groups to vendor contract	SOA gets programmers and vendors Big meetings with lunch and t-shirts
4. Integrate reminder-recall systems to enhance timely immunizations.	Get programmers and end users together	Just do it		Vax coalition gets end users SOA gets programmers and vendors Big meetings with lunch and t-shirts

Priority Area: Data Modernization – Discussion

The group reported on overly connected websites that don't load in rural Alaska on slow bandwidth. Also discussed was how the Health Information Exchange needs to be considered and the roll of the coalition in that movement, as well as using percentages within VakTrAK to make comparisons. They discussed implementing incentive training for professionals, a state level interactive dashboard for vaccine data (a real time and non-real time version), and integrated reminder and recall systems.

PRIORITY AREA 3: INCREASE IMMUNIZATION RATES

Priority Area Wall Activity transcription

Strategy #	Short-term	Mid-term	Long-term	Who
1. Establish baseline vaccination coverage rates by region and demographic.	Baseline data	Continuous	Continuous	Immunization Program / VakTrAK
2. Implement social media awareness campaigns targeting misinformation.	Market Research (Strategy 2 + 4), Social Media, I. D. Influencers, Contact Vision			Local Influencers / Community Leaders
3. Organize community workshop and clinician training programs focused on vaccine communication.	Locally Completed, Training Topics, Budget?	Development + Didactic / Scheduling of Series		
4. Initiate statewide awareness campaigns to increase immunization rates for children, teens, and adults.	Create Marketing 2 + 4 / Evaluate Current Education Materials			
5. Strengthen outreach, education, and access programs to a achieve national	Assess Progress / Baseline Data	Re-Eval Process		

top third vaccine coverage rates.				

Priority Area: Increase Immunization Rates – Discussion
This group reported on how efforts should focus on leveraging social media influencers, engaging community leaders, and organizing workshops on effective communication. They outlined actions for a strategy of a statewide campaign that should tailor marketing to different regions and age groups, using platforms to share information in rural areas. They discussed using existing efforts through stakeholders that will maximize impact and how outreach should be continuously assessed and refined for effectiveness.

PRIORITY AREA: POSITIVE ENVIRONMENT FOR CLINICAL STAFF

Priority Area Wall Activity transcription

Strategy #	Short-term	Mid-term	Long-term	Who
1. Identify and compile resources and data that address vaccine hesitancy and misinformation for clinical staff.	Identify Resources and Develop Handout	Utilize listserv, External Materials + Resources / Webinar / Evaluate	Revise	
2. Combine Strategies 1 + 2 Pilot training programs in trauma-informed care and effective vaccine communication techniques.	Define Trauma informed Care	Echo		ECHO Hub Team
3. Launch a statewide "Vaccine Awareness Month" Campaign to recognize and support vaccine advocates among clinical staff.	Coordinate statewide plan, Events all over state + one set we can all promote	Award Recognition	Annual Awareness Month + Conference	State Immunization Program + Expand Partners (School RNS / THO's / Pharms /Ect.)
4. Develop a peer mentoring program among healthcare providers to share successful strategies and best practices.	Work with universities + training program to examine education – CNA, RN, Providers, Pharm, Dental, CHA's / Define + expand Imm. SME/ Champion Who? Where?	SOA help ID best practices to share out what they are doing / Mentoring Consortium		
5. Establish an annual professional development conference for clinical staff focused on vaccination advocacy and education.	1 ECHO Session	Infuse immunization into more conferences	Create Standalone Conference	

Priority Area: Positive Environment for Clinical Staff – Discussion

This group discussed a strategy to implement a Vaccine Awareness Month which should be launched with a statewide planning committee to highlight efforts, recognize successful programs, and lay the groundwork for a future conference involving schools and state agencies. Additionally, they discussed a peer mentor program that should be developed in collaboration with UAA leveraging existing curricula, speaking engagements, and best practices. Another action discussed was an ECHO session on this topic that should be incorporated into an existing conference or serve as the foundation for a standalone event.

PRIORITY AREA: BUILDING TRUST

Priority Area Wall Activity transcription

Strategy #	Short-term	Mid-term	Long-term	Who
1. Conduct community listening sessions to understand vaccine concerns and barriers.	Decide how to select communities / Lit review of existing info		4 Year / Have held sessions in all regions	Coalition + Communities / AK Pharmacy Association / Contractor
2. Goal 2 and 4 are interchangeable / Partner with local leaders and trusted community voices to develop culturally sensitive messaging.	Identify			Identify
3. Develop and launch a public relations campaign using consistent messaging about vaccine safety and benefits.	Lessons learned from #1, 2, + 4 / Identify Funding	Hire Comms Contractor / Message Testing with 4 / Launch	Incorporate feedback from #1, 2, + 4	Contractor + Coalition Subcommittee
4. Establish a network of community liaisons to collect ongoing feedback and foster partnerships.	Identify	Define Engagement	Sustain	Identify
5. Create a coalition-wide program for continuous community engagement, including an annual trust-building summit.	Define Summit		Re-Assess / Sustain	All Interested Parties

Priority Area: Building Trust - Discussion

This group discussed developing four annual listening sessions and a literature review with input from coalitions for Strategy 1, as well as focusing on ensuring culturally sensitive messaging. They suggested that a coalition subcommittee should secure funding, hire a contractor, conduct message testing, and oversee the launch. They suggested the same plan for an annual summit to strengthen relationships.

Part 3. Communications + Branding Discussion

Following the report out of the priority areas, the group discussed the coalition's name, color palette and possible logo. The group unanimously agreed upon the coalition's name. Of the color palettes presented on the feedback form, the group provided input and asked for a combination of two options. Additionally, the group provided feedback on the coalition logo design.

Name Selection

- Final choice: **Alaska Immunization Coalition**
- Reflect the coalition's role as a collaborative, non-state-affiliated group.
- "Immunization" preferred over terms "shot" or "vaccine."

Color Palette Feedback

- Feedback encouraged brighter colors, specifically berry/salmon tones.
- Final color palette suggestion: Green from palette one and light blue from palette two.

Logo Design Feedback

- Inspiration: Generations, community
- Avoid imagery of shots, needles, or band-aids.
- No animals, though salmon was briefly considered
- Geometric shapes, name only.

Part 4. Closing Discussion

The closing discussion of the group centered on inclusivity and accessibility of the coalition. The following concerns were raised:

Meeting access and coalition participation

- Fiberoptic cable disruption in the Northwest Arctic has limited Zoom access for some participants, requiring phone-based participation and will require pre-sent PDF documents.
- Scheduling meetings exclusively during 8–5 work hours, potentially limits provider involvement in the coalition

Membership guidelines

- Need to clarify coalition expectations and roles to facilitate better participation, including balancing volunteer vs. paid time.
- Membership screening process by DDA ensures inclusion of professionals beyond the vaccine-specific field to diversify perspectives and extend coalition impact.

Coalition authority

- Discussion around the coalition's ability to direct partner to amplify current efforts.

Before ending the day, members of the group each expressed a takeaway from the day. Summaries of their responses are below:

- Honing in on our vision and mission statement. I appreciate everyone's effort. It takes a lot and how many of us there are. I feel comfortable in this group and sharing.
- I wasn't sure what to expect, and I am just looking for ways to improve. I am taking home a lot of good ideas I can start already. This has been very useful for me.

- I think we picked up a little bit of momentum. If we can keep that momentum up, I want to keep this a priority. We can find more wins for the team.
- I don't want you to feel discouraged. It takes a team. I wish I knew people in California that had this much passion. We are really in it for the long haul to partner with you and use our connections. We are going to make an impact, it's going to take time but we are on the right path.
- The work we are doing around immunization rates I am looking forward to addressing it here.
- I like the work we did on the walls. A lot of good comments. Let's not die on a hill on one word on the vision statement. We agree on what we need to do so let's get to work.
- I feel in limbo without the vision and mission statement. We can buckle down and do it.
- I feel excited and hopeful. We are here for the same reason and it's exciting and powerful.
- I am excited to get going with one small piece.
- This was a great birthday party! We are really close. We agree on the fundamentals, and we are in a good place and I have hope as we work together.
- I am such a sucker for a team sport and this is what this is. I work remote and it is lovely to be here. I am not as drained as I thought I would be and that is a testament.

Governance Briefing Paper

May 19, 2025

Presented to: Alaska Immunization Coalition

Issue

Since fall 2024, the newly formed Alaska Immunization Coalition (AIC) has been considering options for decision-making. This paper summarizes the work to date, and outlines two short-term recommendations by the Governance Work Group to assist in carrying out AIC business while the AIC considers its long-term governance structure:

1. ***Coalition-Wide Decision-Making***. Specific time-sensitive decisions include the approval of a Five-Year Strategic Plan, a branding package, and a Year One Work Plan.
2. ***Short-Term Steering Committee***. This steering committee would be delegated to assist the support contractor by providing feedback on the design and implementation of AIC activities.

Background

In fall 2024, early coalition feedback showed interest in a temporary leadership body and in turn the Governance Work Group proposed an Interim Executive Committee (IEC) to serve in this role. At the January 2025 Strategic Planning meeting there was interest in better understanding other options before making this decision.

At the January 2025 meeting, coalition members agreed to adopt a “thumbs up, thumbs down, sideways” decision-making tool to guide coalition-wide decisions. This approach was used successfully during the meeting to reach decisions on initial branding elements, such as the logo and color palette. The group also affirmed that when there isn’t unanimous “thumbs up” support, proposals should move into discussion or be tabled.

The Governance Work Group hosted a series of information sessions in March 2025 to learn from peer coalitions and governance advisors. The lessons learned will help inform longer-term, permanent governance decisions.

Recommendations

In the short-term, however, the Governance Work Group recommends the coalition adopt a two-part governance model: (1) a coalition-wide decision-making process and (2) a short-term steering committee.

1. Coalition-Wide Decision-Making

Purpose: Establish consistent expectations for how the full coalition makes decisions, including tools, timelines, and types of decisions requiring input.

Proposed Model:

- Continue the use of the "thumbs up, thumbs down, sideways" method for gauging of support
- If a decision point does not reach full consensus ("thumbs up"), the process would then be to facilitate further, time-limited discussion on the decision.
    - After discussion, a decision would then move to a second round of consensus agreement.
    - If there still is not consensus on the decision after the second round, the decision would be decided by a majority.
    - Majority is defined as >80% approval, with at least 15 members present.
- Full coalition decisions include matters of public-facing identity, strategic direction, and governance structure and work plan activities.

Structure/Expectations:

- Types of decisions that require full coalition engagement versus Steering Committee are described in Table 1.
- Establish frequency of coalition votes (e.g., at quarterly meetings, as needed via email).
- Decisions are clearly documented and communicated to all members.

Recommended Action: Adopt the "thumbs up, thumbs down, sideways" model for coalition-wide decision-making, and trial for one year. Begin using this approach at the May 19, 2025, meeting and develop a basic framework to categorize decision types and document decisions consistently.

Decision Type	Who Decides	Decision Tool
Logo and Branding	Full Coalition	"Thumbs" tool
Strategic Plan Adoption	Full Coalition	"Thumbs" tool
Governance Structure	Full Coalition	"Thumbs" tool
Meeting Agendas	Steering Committee	Consensus in Steering Committee
Routine Communications	Steering Committee	Consensus in steering Committee
Partnership Opportunities	Steering Committee (recommends), Coalition (approves major items)	"Thumbs" tool
Work Group Suggestions	Work Group (develops), Steering Committee (reviews/elevates to coalition), Coalition (reviews/approves)	"Thumbs" tool

Table 1. Coalition Decision Types and Methods

2. Short-Term Steering Committee

Purpose: Provide contractor input on process decisions. This group helps the coalition function but does not replace full-member decision-making.

Scope:

- Membership: 3–5 volunteer coalition members.
- Responsibilities:
    - Provide input on meeting design and facilitation.
    - Help prepare agendas, circulate proposals, summarize feedback, and elevate items requiring coalition-wide decisions.
    - Assist in determining when an issue should be brought to the full coalition.

Authority: Advisory only; no formal decision-making power. Can recommend proposals but not finalize decisions on behalf of the full coalition.

Recommended Action: Form a short-term Steering Committee by June 2025 with clear responsibilities and a one-year trial period. Solicit volunteers and confirm the group's name, scope, and expected meeting frequency.

Alaska Immunization Coalition

Governance Work Group

Meeting Notes

May 8, 2025

1 to 2 p.m.

Attendance

Participant	Organization	Present
Sarah Aho	Immunization Program (DOH)	x
Mykala (Kayla) Davison	Homer Medical Center	x
Michelle (Shelly) Foint-Anderson	Public Health Nursing-Fairbanks Public Health Center	x
Shanda Lohse	Eastern Aleutian Tribes	x
Kara McCoy	State of Alaska-Craig Public Health	x
Brandy Seignemartin	Alaska Pharmacy Association	
Facilitation Team – DDA		
Isabella Vaz	Facilitator and Project Manager	
Denali Daniels	Contract Manager	

Meeting Notes

1. Review Timeline
    a. DDA reviewed the work the group has done over the last several weeks.
2. Review April 1, 2025 Meeting Notes
    a. DDA reviewed the previous meeting notes from the information session debrief.
3. Review Governance Briefing Paper

DDA introduced the governance briefing paper that DDA drafted based on the work's group discussion so far, emphasizing the coalition's need for a decision for short-term decision-making:

a. The paper includes two short-term recommendations: formalizing the "thumbs" method and creating a steering committee.
b. The group had a robust discussion about the decision-making process, including consideration of the use of the "thumbs" method and majority voting.
c. There was discussion about achieving full consensus (as originally drafted) and the potential for decisions to be tabled indefinitely.

d. The group discussed the risk of stalling progress without another level of decision-making to keep momentum.
e. The group discussed and proposed a “two vote” system, where the coalition could use the “thumbs” tool, move into discussion if there wasn’t full consensus, and then use the “thumbs” tool once more. If consensus is not achieved after two votes, the decision should be made by the majority present.
f. The group discussed the importance of having a minimum number of members present to make decisions.
g. The group agreed on a minimum of 15 people bringing present for decisions to made, based on past coalition member involvement at coalition meetings.
h. The group suggested the revised language in the briefing paper:

If there is not full consensus (“thumbs up”), facilitate further, time-limited discussion

- *A decision would then move to a second round of consensus agreement*
- *If there still is not consensus on the decision, the decision would be decided by a majority*
- *Majority is defined as >80% approval, with at least 15 members present*

i. The group discussed the selection of steering committee members at the May 19 meeting.
j. There was discussion about the Governance Work Group continuing its work and supporting the development of a long-term governance plan for the coalition.

4. Next Steps
    a. DDA will finalize the briefing paper and provide talking points for the group’s spokespeople.

Communications Briefing Paper

May 19, 2025

Presented to: Alaska Immunization Coalition

Issue

The Alaska Immunization Coalition is in the process of establishing a unified visual identity to support consistent, engaging, and accessible communication across all coalition materials and platforms.

Background

Over the past several months, the Communications Work Group has developed a visual identity that reflects the AIC. This work has included multiple rounds of design exploration and thoughtful discussion within the work group. Input from the full coalition was actively solicited through two feedback forms and during the January 2025 strategic planning meeting. Based on this collaborative process, the group finalized a recommended logo and color palette for coalition-wide use.

Recommendations

1. The Communications Work Group recommends the following logo:

ALASKA IMMUNIZATION COALITION

2. The Communications Work Group recommends the following color palette:

Alaska Immunization Coalition

Communications Work Group

Meeting Notes

May 7, 2025

12 p.m. to 1 p.m.

Attendance

Participant	Role/Organization	Present
Julie Bunch	Kenai Public Health Center	
Mykala (Kayla) Davison	Homer Medical Center	
Molly Dischner	Seward Community Health	
Shanda Lohse	Eastern Aleutian Tribes	X
Ashley Peterson	Norton Sound Health Corporation	
Carlo Sipin	Public Health, State of Alaska	X
Facilitation Team		
Isabella Vaz	Facilitator and Project Manager (DDA)	
Melanie McGinnis	Project Support (DDA)	

Agenda Items

1. Review Timeline

2. Review Notes from March 26, 2025 meeting

3. Review Feedback Form Responses

DDA presented the feedback form response overview and opened discussion for the work group to finalize a recommendation on the logo and color palette at the May 19 strategic planning meeting.

The group discussed the open-ended comments on the logo and color palette from the feedback form.

***The group agreed to recommend logo option A*:**

ALASKA IMMUNIZATION COALITION

The group agreed to recommend the color palette as it was presented on the feedback form:

4. Review Website Content

The work group reviewed and provided input to the coalition website that is under development. Specifically, they provided input on the Homepage and Myths and Misconceptions pages.

- The all-white logo located in the website footer was discussed and suggested that it be re-created with better definition.
- The group would like to see a tracking method for distinguishing which Myth is clicked on the most.
- The work group found that the link on the homepage "Myths and Misconceptions" button takes the user to the Vaccine FAQs page of the website.
- The social media icons were brought up as they appear in the website footer, there was a brief discussion on implementing those in the future.
- It was suggested to insert an image that is the background of the dropdown in the Myths and Misconceptions info.
- There was a request to move two Myths to the top of the list on that page: 1) "It's better to spread out vaccines (alternative schedule)" and "You need to restart a vaccine series if too much time passes."

DDA will review the feedback provided and incorporate it into the website.

The following source was shared for the Resource page: **Healthy Children – Immunizations**

Next Steps

At the May 19, 2025 strategic planning meeting, Carlo and Kayla will serve as the work group's spokespeople to share the group's recommendations. DDA will work with them and provide talking points for the meeting.

The Communications Work Group will continue to meet and act in an advisory capacity on coalition website content development. Meeting frequency and scope will be discussed at the May 19 strategic planning session.

Plan Document Review Briefing Paper

May 19, 2025

Presented to: Alaska Immunization Coalition

Issue

The Alaska Immunization Coalition is asked to review and adopt its final 5-Year Strategic Plan. This plan has undergone multiple rounds of input and revision, led by the Plan Document Review Work Group and facilitated by Denali Daniels + Associates (DDA).

Background

Since the AIC's strategic planning meeting in October 2024, members have worked collaboratively to draft and refine the vision, mission, core values, and strategic framework for the coalition. Initial drafts were reviewed at the January 2025 meeting, followed by an open comment period through a coalition-wide feedback form. The Plan Document Review Work Group met multiple times to review this input and finalize recommendations.

Final Recommendations

The Work Group recommends the coalition adopt the full 5-Year Strategic Plan as presented. Specific recommendations on key components include:

- **Vision Statement**
  "An Alaska where everyone has the knowledge and access they need to be immunized."

- **Mission Statement**
  "Working collaboratively to ensure vaccine access and community trust to empower and educate Alaskans to make informed choices about immunizations."

- **Core Values**
  Access and Equity: Ensure vaccines are available to all Alaskans
  Safety: Support the highest safety standards in development, regulation, and administration of vaccines
  Collaboration: Foster partnerships to achieve shared goals
  Empowerment: Support individuals and communities with the knowledge and tools to make informed, confident vaccination choices
  Trust: Build and maintain trust through transparency, reliability, and meaningful community connections

Recent Edits to the Plan Document (since January 2025)

- Replaced all uses of “Alaska’s Statewide Immunization Coalition” with “Alaska Immunization Coalition”
- Standardized use of “AIC” and removed first-person language (e.g., "we," "our")
- Added finalized vision, mission, and core values to the framework and corresponding sections
- Updated the “How was the plan developed?” section to reflect recent work group efforts
- Clarified “leads” row in the plan framework table to reference upcoming work plans
- Additional minor copyedits for clarity and consistency

Recommendation: The coalition is invited to formally adopt the final 5-Year Strategic Plan as presented.

Alaska Immunization Coalition

Plan Document Review Work Group

Meeting Notes

May 7, 2025

3:30 to 4:30 p.m.

Attendance

Participant	Role/Organization	Present
Sarah Aho	State of Alaska Immunization Program	x
Julie Bunch	Kenai Public Health Center	
Kate Flynn	American Cancer Society	
Shelly Foint-Anderson	State of Alaska, DOH, DPH, Public Health Nursing-Fairbanks Public health Center	x
Dr. Shanda Lohse	Eastern Aleutian Tribes	x
David Montgomery	State of Alaska DOH	x
Kyla Newland	Mountain Pacific	
Faith Walsh	IHS-Norton Sound Health Corp.	x
Kerry Ann Wilson	ANTHC	x
Facilitation Team (DDA)		
Isabella Vaz	Facilitator and Project Manager	x
Denali Daniels	Contract Manager	x
Jack Darling	Project Support	x

Meeting Notes

1. Review Timeline
    a. DDA reviewed the coalition's work so far and what is planned.
2. Review March 14, 2025 Meeting Notes
3. Review Feedback Form Responses
    a. Vision Statement
        i. Clear direction for vision B, still some interest in continuing to work on it. The group decided to recommend the vision statement as stated on the feedback form.
        ii. **Recommendation: Proceed with majority selection of Vision B: *"An Alaska where everyone has the knowledge and access they need to be immunized."***
    b. Mission Statement
        i. Less clear vote, feedback for minor edits. The group reviewed the open-ended comments and decided to add the word "Working" at the

beginning of the statement and replace the term “broad” to “vaccine” to incorporate feedback from the coalition.

ii. **Recommendation: Apply and proceed with minor edits: *“Working collaboratively to ensure vaccine access and community trust to empower and educate Alaskans to make informed choices about immunizations.”***

c. Core Values

i. **Recommendation: Proceed with offered revision to the “Empowerment” core value wording to: *“Support individuals and communities with the knowledge and tools to make informed, confident vaccination choices.”***

<u>Core Value Statement Recommendation</u>

- Access and Equity: Ensure vaccines are available to all Alaskans
- Safety: Support the highest safety standards in development, regulation, and administration of vaccines
- Collaboration: Foster partnerships to achieve shared goals
- Empowerment: Support individuals and communities with the knowledge and tools to make informed, confident vaccination choices.
- Trust: Build and maintain trust through transparency, reliability, and meaningful community connections

4. Next Steps

a. Agenda for May 19 Strategic Planning meeting

i. Work group spokespeople will be provided with talking points to share with the full coalition.

ii. Discussion on presenting the group’s recommendations for the Vision, Mission and Core Values and Strategic Plan adoption.