



International “living” report: Long-Term Care and COVID-19 vaccination, prioritization and data

Shoshana Lauter, Klara Lorenz-Dant, Adelina Comas-Herrera and Eleonora Perobelli

Last updated 11th January 2021

Authors

Shoshana Lauter, Klara Lorenz-Dant and Adelina Comas-Herrera ([Care Policy and Evaluation Centre, London School of Economics and Political Science](#)) and Eleonora Perobelli ([Observatory on Long Term Care, CERGAS SDA Bocconi](#))

Itccovid.org

This document is available through the website [Itccovid.org](#), which was set up in March 2020 as a rapidly shared collection of resources for community and institution-based long-term care responses to Covid-19. The website is hosted by CPEC at the London School of Economics and Political Science and draws on the resources of the International Long Term Care Policy Network.

Corrections and comments are welcome at s.e.lauter@lse.ac.uk. This document was last updated on 11th January 2021 and may be subject to updates and revision.

Copyright: © 2020 The Author(s). This is an open-access document distributed under the terms of the Creative Commons Attribution NonCommercial-NoDerivs 3.0 Unported International License (CC BY-NC-ND 3.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See <http://creativecommons.org/licenses/by-nc-nd/3.0/>.

Suggested citation

Lauter S, Lorenz-Dant K, Comas-Herrera A and Perobelli E (2021) *International “living” report: Long-Term Care and COVID-19 vaccination, prioritization and data*. LTCcovid.org, International Long-Term Care Policy Network, CPEC-LSE, 11th January 2021.

Follow us on Twitter

[@shoshlauter](#), [@LorenzKH](#), [@adelinacohe](#), [@eleperobelli](#), [@CPEC_LSE](#), [@LTCcovid](#)

1. Key points

- This report aims to provide an overview of progress in the delivery of COVID-19 vaccinations to people who use and provide long-term care. It is a “living report” that will be updated regularly, please email s.e.lauter@lse.ac.uk if you would like to contribute.
- The report shows data for populations that either use and provide long-term care or are likely to do so. So far very few countries routinely share data on the characteristics of people who are receiving vaccinations. In all other countries the data has been announced by official sources to the media.
- On the 11th January we have found data on COVID-19 vaccinations in care homes for 8 countries, and for some regions/nations in Spain and the United Kingdom.
- 2 countries (Denmark and Israel) and a region in Spain (Asturias) report having completed first doses of vaccination for all care home residents and staff. Over half of all care home residents are reported to have been given a first dose of vaccine in Catalonia (Spain), Northern Ireland and Scotland, and over a quarter in Croatia, Cyprus and Germany, and close to 15% in Italy and the United States.
- The share of doses of vaccines given to people living in care homes ranges from 6% in Italy to 73% in Croatia.
- We have not found official data, so far, on the share of care home residents who either refuse the vaccination, cannot consent or are excluded from vaccination due to other reasons.
- Initial review of prioritization documents shows that all countries prioritise vaccinations for healthcare staff, and, with slight variations in order, care home residents and staff, older people and, less frequently, people who rely on care in the community and unpaid carers.
- Indonesia is an exception in that the working age population is currently prioritised and not older people.
- There are few mentions of people living with dementia or people with learning disabilities.

2. Introduction

This document gathers data on the COVID-19 vaccine rollout among people who use and provide long-term care and provides an overview of the vaccination priorities stated by different countries, with a focus on people who use or provide long-term care (defined broadly, including care in the community and in residential settings, and unpaid care). The aim is to update this document regularly and collaboratively, expanding the countries covered. Please email s.e.lauter@lse.ac.uk if you would like to provide information on your country or if you would like to be involved in future versions of the report.

2.1. Data to support prioritisation

An analysis of the [COVID-19 Actuaries Response Group](#) has compared the groups prioritized in the UK vaccination rollout plan to the COVID-19 deaths observed among those groups. They found that the priority groups represent less than half of the UK population yet amount to 99% of the COVID-attributed deaths. They also estimated the number of vaccinations required to prevent one COVID-19 death and found that this increased rapidly when moving down the priority order; for example, among care home residents 20 vaccinations would be needed to prevent one death, compared to 2,000 among people aged 60 and over, and to 47,000 for the rest of the population.

2.2. Challenges in vaccine rollouts for people using and providing long-term care

The process of vaccinating people in care homes poses particular challenges: from the complexity of obtaining consent of some care home residents (see this [article outlining the issues in relation to people living with dementia](#)), to the logistical difficulties posed by the vaccines that require very low temperatures. This means that, in some countries, despite statements of priority for care home residents, it may have been easier to first vaccinate older people who could travel to vaccination sites (such as hospitals or health care centres) instead of care home residents.

3. Data on COVID-19 vaccination doses among people who use and provide Long-Term Care

In this report we only include data on COVID-19 vaccinations for the population who use and provide Long-Term Care. For overall country vaccination progress, the website [Ourworldindata.org](https://ourworldindata.org) provides regularly updated data at national level¹. Similarly to Ourworldindata.org, we are including only data from official sources, including media reports of official announcements. In terms of the population of interest, we seek to include the following groups: people who live in care homes, people who work in LTC and unpaid carers. Where available, we also include data on groups of people who have higher probabilities of using LTC (older people and people with conditions such as dementia and people with other disabilities).

As table 1 shows, so far there are very few countries for which data on long-term care vaccinations are publicly available. Denmark, Israel and at least one region in Spain (Asturias) report having completed the first dose of COVID-19 vaccinations of all care home residents that wished to or could be vaccinated. We have found no official data, so far, on the share of care home residents or staff who refuse the vaccine, how many people are unable to consent, and for how many people vaccination is not possible due to counter-indications.

¹ Many of the data sources on vaccinations we have used in this report were identified through <https://ourworldindata.org/covid-vaccinations>.

Table 1. Data on COVID-19 Vaccination rollout in groups that use or provide long-term care and older people²

Country	Date	% Population given at least 1 dose of COVID-19 vaccine	% Care home residents (as % of all residents) given at least one dose of COVID-19 vaccine	% Population aged 60 + given at least one dose of COVID-19 vaccine	% Population 80+ given at least one dose of COVID-19 vaccine	% of vaccination doses given to care home residents and staff
Costa Rica ³	07/01/2021	0.19%	N.A.	N.A.	N.A.	9.90%
Croatia ⁴	30/12/2020	0.19%	25.78%	N.A.	N.A.	73.59%
Cyprus ⁵	06/01/2021	0.32%	35.17%	N.A.	N.A.	52.83%
Denmark ⁶	10/01/2021	1.98%	90.00% (complete)	N.A.	N.A.	36.02%
Germany ⁷	10/01/2021	0.73%	29.10%	N.A.	N.A.	38.81%
Israel ⁸	07/01/2021	19.55%	100%* (complete)	N.A.	N.A.	8.86%
Italy ⁹	10/01/2021	0.98%	14.28%	0.75%	0.63%	6.58%
Asturias (Spain) ¹⁰	08/01/2021	1.75%	100%* (complete)	N.A.	N.A.	66.86%
Catalonia (Spain) ¹¹	09/01/2021	0.68%	50.00%*	N.A.	N.A.	46.75%
England (UK) ¹²	03/01/2021	1.94%	0.00%	N.A.	23.08%	N.A
Northern Ireland (UK) ¹³	29/12/2021	1.78%	59.86%	N.A.	N.A.	26.54%
Scotland (UK) ¹⁴	07/01/2021	2.07%	50.00%*	N.A.	N.A.	15.92%
United States ¹⁵	08/01/2021	2.02%	14.28%	N.A.	N.A.	10.37%

*The data in terms of numbers vaccinated for Israel combines care home staff and residents. Also, the data for Asturias, Catalonia and Scotland is based on an announcement of the share of people vaccinated, but no information is provided on, for example, the percentage of care home residents who may have refused the vaccine or may have been excluded from vaccination due to contraindications (for example allergies).

Sources: as indicated in the footnotes for each country

² All data on population sizes has been obtained from: <https://population.un.org/wpp/> All data on number of care home residents, unless specified, has been obtained from Comas-Herrera A, Zalakaín J, Lemmon E, Henderson D, Litwin C, Hsu AT, Schmidt AE, Arling G and Fernández J-L (2020) Mortality associated with COVID-19 in care homes: international evidence. Article in LTCcovid.org, International Long-Term Care Policy Network, CPEC-LSE, 14 October. <https://lccovid.org/wp-content/uploads/2020/10/Mortality-associated-with-COVID-among-people-living-in-care-homes-14-October-2020-3.pdf>

³ <https://www.ccss.sa.cr/noticias/general?9-751-personas-recibieron-primera-dosis-de-vacuna-para-evitar-la-covid19>

⁴ <https://vlada.gov.hr/news/government-approves-120-million-hrk-aid-for-areas-hit-by-earthquakes/31169>

⁵ <https://cyprus-mail.com/2021/01/06/coronavirus-almost-4000-got-the-jab-since-december-27/>

⁶ <https://covid19.ssi.dk/overvagningsdata/vaccinationstilslutning> and <https://www.sst.dk/-/media/Udgivelser/2021/Corona/Vaccination/Kalender/Vaccinationskalender-8->

⁷ https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Daten/Impfquotenmonitoring.html

⁸ <https://www.israel21c.org/israel-has-vaccinated-everyone-in-elder-care-facilities/>

⁹ <https://app.powerbi.com/view?r=eyJrIjoiMzg4YmI5NDQtdm5ZC00ZTIyLTgxN2MtOTBkMWM4MTUyYTg0IiwidCI6ImFmFmZDBhNzVjLTg2NzEtNGNiZS05MDYxLTJyYkOTJlNDlyZiIsImMiOiJh9>

¹⁰ <https://twitter.com/obsaludasturias/status/1347601740066074626>, care home resident estimates: [Estimación de la ocupación en residencias de personas mayores, por comunidad autónoma, 2020 – EnR?](https://www.ine.es/dynt3/inebase/index.htm?padre=517&capsel=517) | [envejecimientoenred.es](https://www.ine.es/dynt3/inebase/index.htm?padre=517&capsel=517), population estimates: <https://www.ine.es/dynt3/inebase/index.htm?padre=517&capsel=517>

¹¹ <http://www.elpuntavui.cat/societat/article/14-salut/1905818-la-meitat-dels-interns-a-les-residencies-catalanes-ja-han-rebut-la-vacuna.html>, care home resident estimates: [Estimación de la ocupación en residencias de personas mayores, por comunidad autónoma, 2020 – EnR?](https://www.ine.es/dynt3/inebase/index.htm?padre=517&capsel=517) | [envejecimientoenred.es](https://www.ine.es/dynt3/inebase/index.htm?padre=517&capsel=517), population estimates: <https://www.ine.es/dynt3/inebase/index.htm?padre=517&capsel=517>

¹² <https://www.england.nhs.uk/statistics/statistical-work-areas/covid-19-vaccinations/> and [Analysis of population estimates tool - Office for National Statistics \(ons.gov.uk\)](https://www.ons.gov.uk/methods/estimation/population-estimates)

¹³ [Covid vaccine administered in Northern Ireland more than 33,000 times, Minister says - Belfast Live](https://www.belfastlive.com/news/health/covid-19-vaccine-administered-in-northern-ireland-more-than-33-000-times-minister-says)

¹⁴ <https://www.bbc.co.uk/news/uk-scotland-55575978>

¹⁵ <https://covid.cdc.gov/covid-data-tracker/#vaccinations>

4. Prioritisation of people who use and provide Long-Term Care for COVID-19 vaccinations

This section reviews the COVID-19 prioritisation plans stated by the Advisory Council reports of different countries, with a particular focus on the language regarding long-term care residents, carers, and personnel (see Table 2). Most countries are prioritising groups at highest risk of death and or infections based on their age and health status, job-related exposure and living in congregate settings.

In terms of priority trends (i.e. those whom councils typically declare “Group 1” sub-populations), we find long-term care **residents** and **personnel** consistently listed, while **partners/families** of residents and **unpaid/at-home carers** are only rarely explicitly mentioned, as well as older people (except in the case of Indonesia, that prioritises working age population). We also note that those deemed **clinically vulnerable** are amongst the top-prioritized, but there is little mention of those receiving long-term care for neurological illnesses (e.g. dementia, Alzheimer’s) and people with learning disabilities. It is rare to find explicit mention of those receiving long-term care in the community (home care and in non-residential settings).

Table 2. Long-Term Care Group Prioritization (Based on Countries’ Advisory Council Reports)

	Older People (typically 75+)	People living in Care Homes	Care Home Personnel	Care Partners of people who live in Care Homes	Unpaid Carers	Community LTC workers	People who use community-based LTC services	LTC workers (all)	Clinically vulnerable groups (i.e. comorbidities)	People with dementia, neurological illness	People with learning disabilities	Other Notable Populations
Australia	✓(1)	✓	✓(1)					✓(1)	✓(1)			✓(1) (indigenous communities, non-medical essential workers)
Austria	✓(2)	✓(1)	✓(1)						✓(1)	✓(2)		✓ (staff in health care with high risk of infection) (1) ✓(2) (people working in critical infrastructure)
Canada	✓	✓	✓									✓ (indigenous communities)
Belgium	✓		✓						✓			
Estonia	✓	✓	✓						✓			
Germany	✓(1)	✓(1)	✓(1)	✓(2)	✓(2)	✓(1)		✓ (1)(2)	✓(2)(3)	✓(2)	✓(2) ¹⁶	✓ ¹⁷

¹⁶ and staff supporting people with learning disability in residential and community/ domiciliary care settings

¹⁷ (1) staff in health care with very high risk of infection and those caring for people at greatest risk, (2) those at high risk and staff in public health services and relevant hospital positions

Hungary	√(3)	√(2)	√(2)			√(2)	√(2)	√(2)	√(5)			
India		√(2)	√(1)			√(1)		√(1)	√(2)			√ Non-medical frontline essential workers (e.g. teachers)
Indonesia			√			√		√				√ (Working age adults)
Ireland	√	√(1)	√(1)									
Israel	√	√	√			√	√					
Italy	√	√	√(1)									√ (Health staff)
Malta	√(1)	√(1)	√(1)			√(2)		√(2)				√(1) (Staff and residents of mental hospitals)
Singapore	√ (2)		√(1)					√(1)				
Spain	√	√	√				√		√			
United Kingdom	√	√	√		√ ¹⁸				√		√	
USA	√	√	√				√		√			√ Non-medical frontline essential workers (e.g. teachers)

Advisory Council reports are being regularly updated and adjusted to fit the real-time needs and crises of respective countries. Below is an ongoing summary (Table 3) with links to the reports by which Table 2 was formulated.

¹⁸ <https://www.gov.uk/government/publications/priority-groups-for-coronavirus-covid-19-vaccination-advice-from-the-jcvi-30-december-2020/joint-committee-on-vaccination-and-immunisation-advice-on-priority-groups-for-covid-19-vaccination-30-december-2020#fn:1>

Table 3. List of Advisory Boards and Published Prioritization Plans (By Country)

Country	Advisory Board	Vaccine Rollout Priority Groups (Summary)
Australia	Australian Technical Advisory Group on Immunisation (ATAGI)	<p>“As of 13 November 2020, the initial priority groups for COVID-19 immunisation identified by ATAGI are:</p> <ul style="list-style-type: none"> • People who have an increased risk, relative to others, of developing severe disease or dying from COVID-19: older people; people with certain pre-existing underlying medical conditions; Aboriginal and Torres Strait Islander people • People at an increased risk of exposure, infection and transmission of COVID-19, or in a setting with high transmission potential: health and aged care workers; other care workers such as group residential care workers and disability care workers; people in other settings where the risk of virus transmission is increased such as correctional and detention facilities, and meat processing plants. • People working in critical services: select essential services staff such as emergency services providers, defence forces, public health staff and staff managing quarantine facilities; people working in supply and distribution of essential goods and services such as food, water, electricity, telecommunications and other critical infrastructure. <p>Regular updates from the Department of Health are accessible here. Read the full ATAGI report here.</p>
Austria	Bundesministerium Soziales, Gesundheit, Pflege und Konsumentenschutz	<p>On 26 December 2020 the Federal Ministry of Social Affairs, Health, Care and consumer protection published the COVID-19 vaccine prioritization recommendations development by the national vaccination committee.</p> <p>In the first phase people with the highest priority including residents and staff in care and nursing home, staff in health care sector with high risk of exposure and people aged 80 years and older.</p> <p>The second phase will include people with existing illnesses (including dementia) and their closes contacts (especially of those living in residential care settings), domiciliary care workers, people aged 75 to 79 years.</p> <p>The full strategy providing an overview of the seven priority groups is available here, in German.</p>
Belgium	Government Commission On Coronavirus	<p>Published in July 2020, The Superior Health Council of Belgium advised prioritization of 1) workers in the healthcare sector (broadly), 2) people over 65 years of age, and 3) people with higher risk due to comorbidity (e.g. cancers, cardiovascular diseases, diabetes).</p> <p>On December 3rd, the COVID-19 Task Force produced a vaccination rollout strategy available here, in Dutch.</p>

Canada	National Advisory Committee on Immunization (NACI)	<p>“-Residents and staff of shared living settings that provide care for seniors.</p> <ul style="list-style-type: none"> -Adults 70 years of age and older, with order of priority: beginning with adults 80 years of age and older, decreasing the age limit by 5-year increments to age 70 years as supply becomes available. <p>-Health care workers who have direct contact with patients, including:</p> <ul style="list-style-type: none"> -those who work in health care settings -personal support workers <p>-Adults in Indigenous communities.</p> <p>As additional COVID-19 vaccine(s) and supplies become available, the following populations should be offered vaccinations:</p> <ul style="list-style-type: none"> -Health care workers not included in the initial rollout, -Residents and staff of all other shared living settings, such as: homeless shelters, correctional facilities, housing for migrant workers, essential workers who face additional risks to maintain services for the functioning of society.” Read the full statement here (modified Dec. 8, 2020), and NACI’s preliminary report here (modified Nov. 3, 2020).
Estonia	Ministry of Social Affairs	<p>Notice from the Ministry of Social Affairs (3rd January 2021): Priority is for health professionals and healthcare professionals, nursing home staff and residents, people over 70 years of age, and people with health conditions that increase their vulnerability to COVID-19. Vaccination to other target groups and the general population will take place as soon as sufficient COVID-19 vaccines become available.</p>
Germany	Standing Committee on Vaccination (STIKO), German Ethics Council, The National Academy of Science Leopoldina	<p>The initial position paper produced by the advisory committee in November 2020 is linked here (in English).</p> <p>The rollout plan beginning January 2021 is linked here in German.</p> <p>A summary of the German vaccination strategy can be found on LTC Covid’s Blog here. From the summary:</p> <p>“The German Federal Ministry of Health emphasises that high risk groups and medical staff will be among those who will be given first access to the vaccination once it becomes available. It specifically lists: 1) people living in care and nursing homes; 2) people aged 80 years and older; 3) staff working in health care settings with particularly high risk of exposure (e.g. A&E, staff caring for COVID-19 patients); 4) staff in health care setting in close contact with groups at particularly high risk (e.g. Haemato-oncology, transplant medicine); 5) care workers in domiciliary and residential long-term care for older people; 6) others working in care in nursing homes in contact with residents.</p>
Hungary	National Public Health Centre	<p>National Public Health Centre: only people over 18 with a valid social security number who have not been diagnosed with COVID-19 in the past 6 months are eligible for vaccination, in the following order of priority:</p> <ol style="list-style-type: none"> 1. Health care professionals (started on December 26) 2. Residents and staff in care homes

		<ol style="list-style-type: none"> 3. Law enforcement staff working in epidemic defence 4. People aged 60 or above 5. Younger people with chronic conditions 6. Critical infrastructure workers 7. General public
India	Ministry of Health and Family Welfare	<p>India's vaccination rollout will begin on January 16th, following recent approval of Covaxin (Indian firm Bharat Biotech) and Covishield (Astrazeneca).</p> <p>Priority will be given to healthcare workers and non-medical essential frontline workers (appx. 30 million people). This will be followed by those 50 and older and under-50 population groups with co-morbidities deemed clinically vulnerable (appx. 270 million people). You can find the Prime Minister's press release here.</p>
Indonesia	Health Ministry	<p>According to Reuters (January 4th, 2021), Indonesia is taking a novel approach and prioritizing working-age adults following the vaccinations of frontline health workers and public servants.</p> <p>For more information on COVID-19 developments and protocols, the government provides this website.</p>
Ireland	National Immunisation Advisory Committee (NIAC) and Department of Health	<p>Ireland's Vaccination Allocation Scheme can be found here.</p> <p>As of December 13th, Ireland is first and foremost prioritizing those 65+ who live in long-term care facilities, and those who work in them. These groups are followed by those 70 and older in the following order: 85+, 80-84, 75-79, 70-74.</p>
Israel	Ministry of Health's Corona National Campaign Information and Knowledge Center	<p>According to the Israeli Ministry of Health's Coronavirus Information website, those first eligible for the COVID-19 vaccine were healthcare workers and individuals over the age of 60.</p> <p>Through a decentralized approach, long-term care institutions and nursing homes are amongst the top-priority vaccination sites. The Ministry of Health aims to have all nursing home and LTC residents and workers vaccinated by mid-January.</p> <p>More information can be found on the regularly-updated COVID-19 dashboard here.</p>
Italy	Ministry of Health	<p>On December 12th, the Ministry of Health published the Italian strategic plan for the vaccination against Covid-19. The plan identifies three priority groups for the vaccination:</p> <ol style="list-style-type: none"> 1) Front-line health and LTC personnel 2) Nursing homes' residents 3) People aged 80 or above <p>These three categories together account for 6,416,372 people (although there might be an overlap between groups), almost 11% of the Italian population.</p> <p>For more information, read the Italian strategic plan for vaccination against Covid-19.</p> <p>Italy has also produced a national immunisation campaign website with live tracking of vaccinations.</p>

Malta	Ministry of Health	<p>On December 7th, Malta’s Health Minister informed Parliament of three priority cohorts to receive the vaccine in January: 1) Staff and residents in homes for the elderly and mental hospital patients, 2) healthcare workers in private and public hospitals, 3) People aged 85 and over. The second round in February would prioritize all other frontline workers and people aged 80+.</p> <p>The Minister’s speech in parliament and review of the vaccination rollout plan can be found at this site. For more details, access the ministry’s COVID-19 dashboard here.</p>
Singapore	Ministry of Health	<p>According to a press conference with Health Minister Gan Yim Yong on January 4th, Singapore is currently prioritizing the vaccination of frontline health workers, including staff at community care facilities and dedicated stay-home notice facilities. Starting in February, seniors aged 70+ will be prioritized.</p> <p>Read up on the Health Ministry’s COVID-19 developments and vaccination protocols here.</p>
Spain	Ministry of Health	<p>“The following group prioritization has been established for the first stage:</p> <ol style="list-style-type: none"> 1. Residents and health and social care personnel in care homes for older people and people with disabilities 2. Front-line health personnel. 3. Other health and social care personnel. 4. Dependent people with disabilities who require help from others (noninstitutionalized highly dependents).” <p>Last update of document setting out priorities (November 23rd, 2020).</p>
United Kingdom	Joint Committee on Vaccination and Immunization (JCVI)	<p>The initial December report by JCVI is linked here, with continuous updates (last: December 31st, 2020) found here.</p> <p>Summary: “Nine Priority Groups, Primarily Based on Age:</p> <ol style="list-style-type: none"> 1) Residents in a care home for older adults and their carers 2) All those 80 years of age and over; Frontline health and social care workers 3) All those 75 years of age and over 4) All those 70 years of age and over; those deemed clinically extremely vulnerable, etc... <p>A press release by the Department of Health and Social Care published on 4th January states that “GPs and local vaccination services have been asked to ensure every care home resident in their local area is vaccinated by the end of January.”</p>

<p>USA</p>	<p>Center for Disease Control's Advisory Committee on Immunization Practices (CDC's ACIP)</p>	<p>"ACIP's ethical principles for allocating initial supplies of COVID-19 vaccine, namely to maximize benefits and minimize harms, promote justice, and mitigate health inequities, support the early vaccination of 1) <i>health care personnel (HCP)</i> and 2) <i>long-term care facility (LTCF) residents</i>." December 3rd, 2020 statement here.</p> <p>Sub-prioritization details were updated December 23rd:</p> <p>Phase 1a (ongoing) includes healthcare personnel and long-term care facility residents.</p> <p>Phase 1b includes frontline essential workers and those aged 75+.</p> <p>Phase 1c includes those 65+, those with underlying medical conditions, and a broader definition of essential workers.</p> <p>A CDC Report on the importance of vaccinating LTCF Residents was published on December 28th.</p> <p>The National Governors Association has also released a report that looks at key themes, strategies, and challenges of COVID-19 vaccination plans in individual states and territories (December 9th, 2020).</p>
------------	---	---

For further information:

The [Our World in Data](#) site, which tracks weekly the announcements of countries beginning to vaccinate, has charted that 4.64 million people have been vaccinated globally as of December 28th, 2020.

[The Oxford COVID-19 Government Response Tracker \(OxGCRT\)](#) is an ongoing collection of coronavirus pandemic policy responses from 180+ countries tackling issues related to travel, education, and healthcare administration.

The World Health Organization's (WHO) Strategic Advisory Group of Experts on Immunization (SAGE) produced a [values framework for the allocation and prioritization of COVID-19 vaccination](#) (September 12th, 2020) and [is currently making a request for information on vaccine rollout effectiveness and impacts](#).

The European Center for Disease Control and Prevention's (ECDC) [Overview of COVID-19 vaccination strategies and vaccine deployment plans](#) in the EU/EEA and the UK (as of December 2nd, 2020).

We are hoping to continuously update and curate the above tables to reflect various countries' rollout plans, specifically with regards to long-term care users and personnel. If you'd like to contribute information on your respective country, please contact us at s.e.lauter@lse.ac.uk.