

HEALTH AND HUMAN SERVICES COMMITTEE &

MARATHON COUNTY BOARD OF HEALTH (JOINT MEETING)

MEETING AGENDA

Date & Time of Meeting: Tuesday, January 12, 2021 at 7:45 a.m. Meeting Location: Zoom Meeting/1000 Lake View Dr. Suite 100 Wausau, Wausau WI

Health & Human Services Committee Members: Tim Buttke, Chair; Michelle Van Krey, Vice-chair; Kelley Gabor, Dennis Gonnering, William Harris, Donna Krause, Tom Seubert

Marathon County Mission Statement: Marathon County Government serves people by leading, coordinating, and providing county, regional, and statewide initiatives. It directly or in cooperation with other public and private partners provides services and creates opportunities that make Marathon County and the surrounding area a preferred place to live, work, visit, and do business. (Last updated: 12-20-05)

Health & Human Services Committee Mission Statement: Provide leadership for the implementation of the strategic plan, monitoring outcomes, reviewing and recommending to the County Board policies related to health and human services initiatives of Marathon County.

The meeting site identified above will be open to the public. However, due to the COVID-19 pandemic and associated public health directives, Marathon County encourages Public Safety Committee members and the public to attend this meeting remotely. Instead of attendance in person, Committee members and the public may attend this meeting by **telephone conference**. If Committee members or members of the public cannot attend remotely, Marathon County requests that appropriate safety measures, including adequate social distancing, be utilized by all in-person attendees. Persons wishing to attend the meeting by phone may call into the **telephone conference beginning five (5) minutes prior to the start time indicated above using the following number: 1-312-626-6799**. **Meeting ID: 851 2896 1112 Password: 882227** When you enter the telephone conference, **PLEASE PUT YOUR PHONE ON MUTE!**

- 1. Call Meeting to Order
- 2. Public Comment (15 minute limit)
- 3. Policy Issues for Discussion and Possible Action:
 - A. Health care system and surrounding counties efforts to have a coordinated response to testing and vaccinations
 - 1. Role of Marathon County Health Department in Phase 1A, 1B, 1C
- 4. Operational Functions required by Statute, Ordinance, or Resolution:
- 5. Educational Presentations and Committee Discussion:
- 6. Announcements
- 7. Adjournment

"Any person planning to attend this meeting who needs some type of special accommodation in order to participate should call the County Clerk's Office at 715-261-1500 one business day before the meeting.

		SIGNED /s/ Tim Buttke		
		Presiding	Officer or Designee	
FAXED TO:	Wausau Daily Herald, City Pages, and	NOTICE POS	NOTICE POSTED AT COURTHOUSE	
FAXED TO:	Other Media Groups			
FAXED BY:	T. Ranallo	BY:	T. Ranallo	
FAXED DATE:		DATE:		
FAXED TIME:		TIME:		

COVID Vaccine

HOW ARE DECISIONS BEING MADE

WHO IS VACCINATING

ROLE OF LOCAL HEALTH DEPARTMENTS

How are decisions being made

WI State Disaster Medical Advisory Committee – Vaccine Distribution Subcommittee

- Based on guidance from Advisory Committee on Immunization Practices
- Recommends to WI Department of Health Services to develop their vaccine allocation plan

Vaccine rolling out in a series of phases

- Phase 1 A: Health care workers and long-term care facilities
- Phase 1 B: Under development, CDC recommending age 75+ and frontline essential workers
- Phase 1 C: CDC recommending age 65-74, age 16-64 with high risk medical conditions, other essential workers
- Phase 2: General Population

Vaccine efforts dependent upon

- Adequate demand
- Adequate supply
- Adequate delivery system

Who is vaccinating

Providers approved by the WI Department of Health Services

- Health care systems and clinics
- Pharmacies
- Local health departments

Federal Pharmacy Partnership for Long-Term Care Program

CVS and Walgreens

Role of Local Health Departments

Serves as the local coordinating entity for vaccinations

- Staying abreast of who is a provider and what their capacity is to vaccinate
- Fielding calls and emails, matching eligible individuals to providers
- Identifying and addressing gaps
- Public information

Provider of vaccines based on

- Capacity of health care systems and pharmacies
- Current capacity in light of other COVID-19 response responsibilities (Disease Investigation/Contact Tracing, Coordinate Testing, Public Information)
- Gaps that can't be addressed by other providers

Marathon County Health Department's Role

Working with vaccine providers on a daily basis to

- Assure vaccines get to identified priority populations in a timely manner
- Address identified gaps in vaccine distribution within priority populations
- Ensure an aligned and unified message of the safety and effectiveness of vaccines

Fielding calls and emails from the public

Communicating to the public via Department's COVID-19 Website and Facebook

- What phase we are in
- How to get vaccinated for those currently eligible

Wisconsin's Current Vaccination Plan

As of 1-9-21

State Disaster Medical Advisory Committee – Vaccine Distribution Subcommittee

- Established to develop guidance for Department of Health Services vaccine allocation plan
- Will roll out vaccine in a series of phases
- Use guidance documents, Advisory Committee on Immunization Practice (ACIP) and CDC recommendations and requirements

Vaccine Subcommittee Members

•**Co-chair: Ann Lewandowski** Founder (Wisconsin Immunization Neighborhood); Program Manager, Southern Wisconsin Immunization Consortium (Rural Wisconsin Health Cooperative)

•**Co-chair: Jonathan Temte, MD, PhD** Associate Dean for Public Health and Community Engagement (UW-Madison School of Medicine and Public Health)

•Edward Belongia, MD Director, Center for Clinical Epidemiology & Population Health (Marshfield Clinic Research Institute)

•Margaret Gesner, RN/MS in Public Health, BSN Health Officer (Central Racine County Health Dept.)

•Silvia Munoz-Price, MD, PhD Professor, Clinical Medicine, Division of Infectious Diseases (Medical College of Wisconsin); Enterprise Epidemiologist (Froedtert)

•Rob Gundermann President and CEO (Coalition of Wisconsin Aging and Health Groups)
•Mary Muse Chief Nursing Officer, Director of Nursing (Department of Corrections)

•M. Riccardo Collela, DO, MPH Professor and Division Chief (EMS Medicine); Director, State of WI EMS Medical & Trauma; Medical College of Wisconsin

•Mitchell Hagopian, Attorney Managing Attorney for Community and Institutions (Disability Rights Wisconsin)

•Rajiv Naik, MD, FAAP Medical Director of Informatics and Pediatrics (Gundersen Health System)

•Jim Conway, MD, FAAP Professor of Pediatrics (UW-Madison School of Medicine & Public Health)

•Thomas D. Harter, PhD Director, Department of Bioethics and Humanities (Gundersen Health System)

•Chris Schwake, MD Pediatrician (Children's Medical Group); Regional Medical Director (Children's Wisconsin)

 Daryl Daane, RPh Pharmacist Pharmacy Director (Department of Corrections)
Dan Hopfensperger Former Director, Wisconsin Immunization Program, H1N1 Incident Command, Immunization Lead

•Arthur Derse, MD, JD Professor and Director, Center for Bioethics and Medical Humanities

What are the phases of COVID-19 vaccine? When will we move to the next phase?

- Phase 1A
 - Health care workers and long-term care facilities
- Phase 1B
 - Currently under development
 - Age 75+ and frontline essential workers
- Phase 1C
 - Age 65-74; age 16-64 with high-risk medical conditions; other essential workers
- General population
- No hard start or stop for each phase it is a fluid process
 - 4-6 weeks per phase (500,000 people)

Wisconsin's Vaccine Allocation Plan

Phase 1A: Health Care Personnel

- National Advisory Committee on Immunization Practices (ACIP)
- State Disaster Medical Advisory Committee (SDMAC)

SDMAC Definition

Health Care Personnel

- Individuals who provide direct patient service (compensated and uncompensated) or engage in healthcare services that place them into contact with patients who are able to transmit SARS-CoV-2, and/or infectious material containing SARS-CoV-2 virus
- Flexibility built in
- Vaccinating entities may include one or more prioritization criteria when allocating vaccine among health care personnel
 - e.g., individuals who work on COVID units, essential nature of position, high risk procedures, ICU
 - May also prioritize based on worker demographics and health status

Wisconsin's Vaccine Allocation Plan • Phase 1A: Residents of Long-term Care Facilities (RLTCF)

- Adults who reside in facilities that provide a variety of services, including medical and personal care, to persons who are unable to live independently
- Currently have approximately 50% of SNF complete
- Begin assisted living facilities week of January 25
 - Need 50% set aside

Who administers the vaccines?

- Vaccinating entities
 - Vaccinators who have been evaluated by DHS and are approved to vaccinate HCP and RLTCF
- Federal Pharmacy Partnership for Long-Term Care (LTC) Program
 - CVS and Walgreens
 - Administers vaccines onsite

DHS' Use of SDMAC Recommendations When Allocating Vaccines

- DHS incorporates SDMAC's recommendations into its allocation formula, which governs distribution of the vaccine throughout the state
- The following slides detail the logic/framework applied
 - Four recommendations

Recommendation 1. Fill partial vaccine orders, where applicable. • To inform allocation decisions, several factors are put into an allocation algorithm

- Number of vaccine doses requested by each organization
- Allocation algorithm prioritizes filling at least some of every order for all entities rather than filling some orders completely and others not at all

Recommendation 2. Vaccine should be administered in the shortest time possible after receipt by the vaccinating entity

- Bulk of this responsibility falls to vaccinators
- In the weekly Allocation Survey, vaccinators indicate their current inventory and request doses only according to what they will use the following week for Phase 1A health care providers
- Vaccinators must maintain their inventory daily and doses administered in the Wisconsin Immunization Registry

Recommendation 3. Give greater priority to vaccinating entities who will administer vaccine in communities characterized by higher level of social vulnerability

• DHS is in the process of enhancing its algorithm to consider geographic-level Social Vulnerability Index (SVI) data

 Will allow DHS to give greater allocation priority to vaccinating entities in communities characterized by higher levels of social vulnerability Recommendation 4. Give greater priority to vaccinating entities who will vaccinate unaffiliated healthcare providers such as emergency medical responders

- When vaccinators make their requests for the week, they provide a breakdown of how many vaccines are for internal use and how many will be for outside entities, such as unaffiliated healthcare providers
- Entities vaccinating unaffiliated healthcare providers receive an increased allocation

What factors should not be considered?

- Current COVID-19 disease activity level in a geographic area
- Current health care provider staffing shortages

How has DHS allocated current supply?

- DHS has been able to fill most providers' weekly allocation requests
 - Health care entities have had primary responsibility for vaccination in the early phases (most equipped to handle)
 - As allocations from the federal government change and/or the number of eligible providers in Wisconsin increase, the allocation algorithm is updated accordingly

What is the vaccine ordering and delivery process (7-10 days)?

- 1. Federal government informs DHS how much vaccine Wisconsin will be allocated on a week-by-week basis (Note: federal government does not ask states about need)
- 2. DHS issues Allocation Survey on Monday evenings to enrolled vaccinators who can vaccinate Phase 1A recipients
- 3. Enrolled vaccinators indicate by Tuesday evening how many initial doses they can safely store and administer the following week
- 4. DHS generates the recommended number of vaccine doses for each vaccinating entity using an allocation algorithm, the state's federal allocation, and information from the survey

What is the vaccine ordering and delivery process?

- 5. DHS reviews the results and places orders with the federal government on behalf of providers, usually Thursday or Friday
- 6. Vaccinators receive an email informing them about the type of vaccine and number of doses they will be receiving, usually between Friday and Sunday
- 7. Early the following week, vaccine is shipped to vaccinating entities from McKesson (the Distributor), directly from Pfizer, or from a Wisconsin-based hub
- 8. Once received, vaccinators are responsible for ensuring vaccine viability.

When can we move on to Phase 1B?

- Need to complete Phase 1A residents of long-term care facilities and health care personnel
- State can progress to Phase 1B only when a critical mass of those in Phase 1A have been vaccinated
- Vaccination efforts rest on three equally important pillars
 - Adequate demand
 - Adequate delivery system
 - Adequate supply (need other manufacturers)
- As a state we do not yet have adequate supply to move on to the next phase
- Anticipate Phase 1B before the end of the month

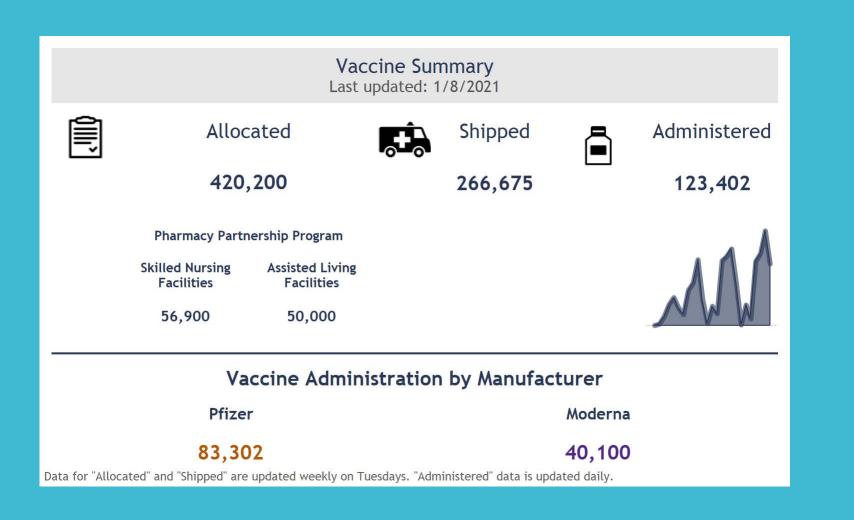
Who is likely to be included in Phase 1B?

• SDMAC meeting on January 8, 2021

- Came to consensus on the following: 70+, first responders (police/fire), K-12 education, corrections workers, congregate living (Family Care, IRIS, incarcerated populations), mink husbandry
- Meet again on Tuesday
- Plan to go out for public comment (much public comment has already been received)
- Ethical framework

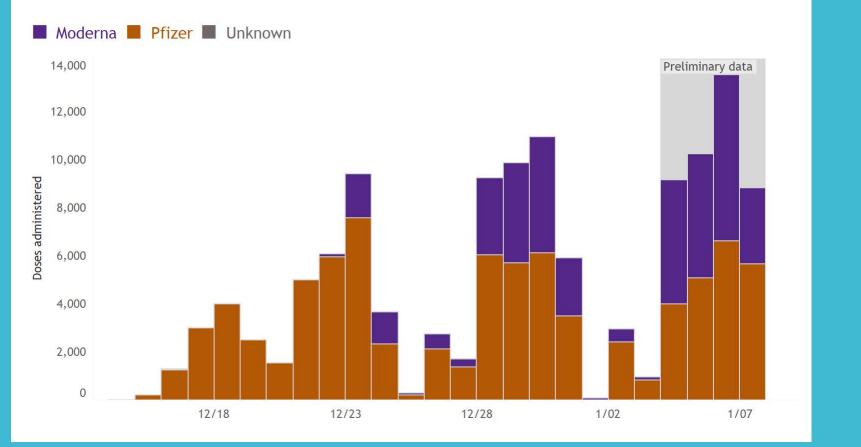
Doses received/distributed

- Wisconsin is receiving approximately 70,000 doses per week from the federal government
 - Based on the state's population
 - Need double or triple the doses to reach herd immunity (80%) by the fall
- Doses distributed to registered vaccinators
 - Currently 1,066 eligible providers
 - Was 108 on December 14
- DHS vaccine dashboard
 - <u>https://www.dhs.wisconsin.gov/covid-19/vaccine-data.htm</u>



COVID-19 vaccines administered per day

Updated: 1/8/21 (Total: 123,402)



Shipped v. administered

• Administered

- Shipped some in transit, not yet arrived
- On shelves doses to be administered the following week
 - No more than a one week supply

Doses in Wisconsin

- As of 1-7-21, 110, 201 doses in arms
 - Of that, 5,000 were second doses
- Per day doses
 - 1-4-21:6,000
 - 1-5-21: 8,000
 - 1-6-21: 11,000
 - Amount increases as number of vaccinators increases
 - Started with hospitals and health systems
 - Other vaccinators, including local public health departments (all now enrolled as vaccinators)

Vaccine Doses

- A few notes
 - The Centers for Disease Control and Prevention (CDC) determines Wisconsin's allocation of the US vaccine supply
 - Two-dose series
 - CDC withholds a portion of the allocation for the purpose of providing the second dose
 - SDMAC Vaccine Subcommittee recommends using initial allocations to administer the first dose with subsequent doses coming from the allocation the CDC withholds
 - Second doses from the withheld CDC allocation will be reserved for, and provided to, vaccinating entities who will immunize those who received the first dose and choose to receive the second

When will the vaccine be available to the general public and how will it be administered?

- It will likely take several months
- Once available there will be a number of ways to receive it
 - Doctor's office visit
 - Local pharmacies
 - Local and tribal health departments
 - Community based clinics
 - Mobile vaccination sites
- State committed to ensuring the vaccine is available to all Wisconsinites through planning, distribution, and ongoing partnership with local, state, and federal partners

Questions?