

Health and Human Resources Subpanel

April 27, 2021

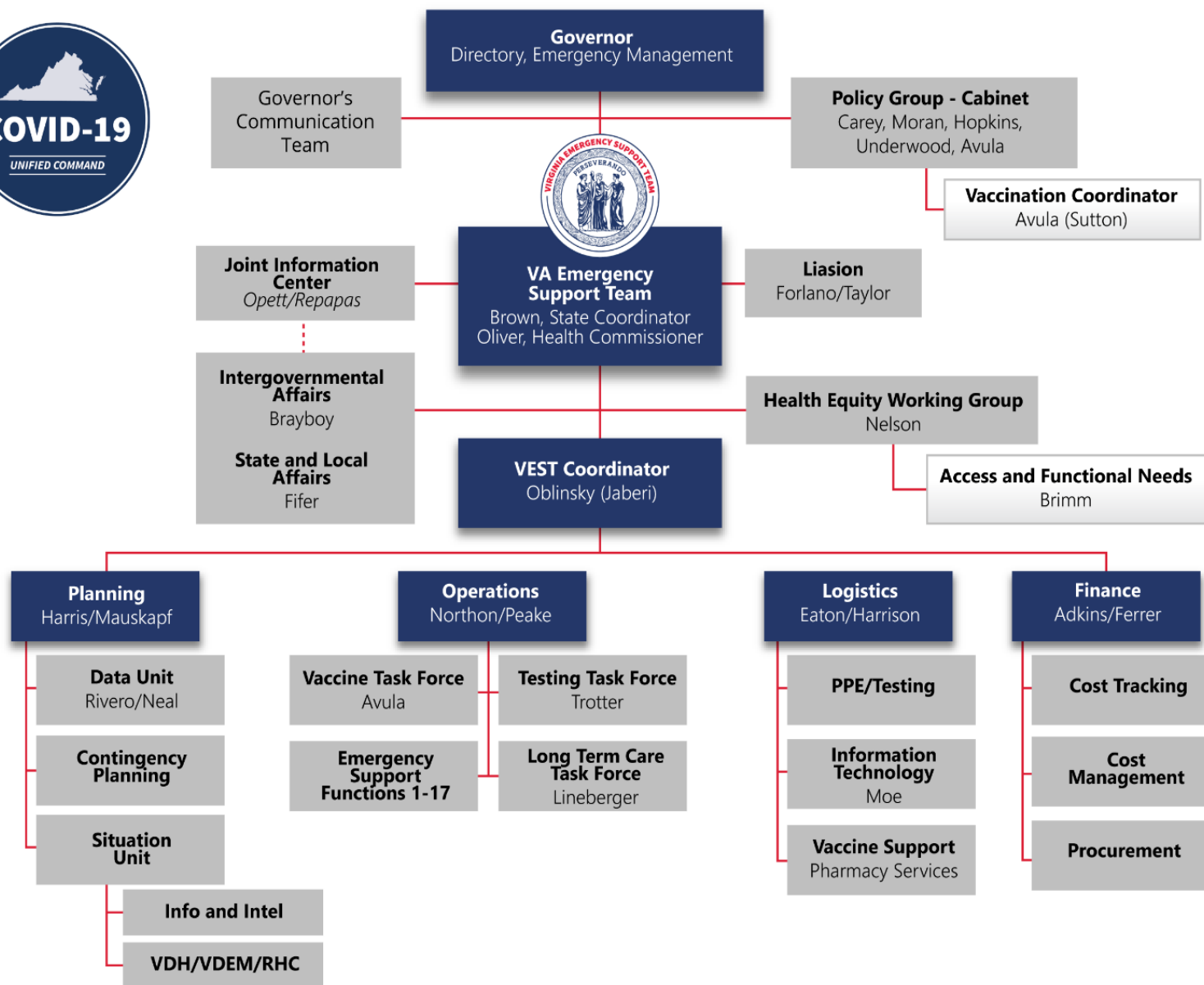
Overview of the VEST Response to COVID19

Incident Objectives

- **VACCINATION** - Support distribution and administration of vaccine(s) to the Commonwealth's population in accordance with Virginia's COVID-19 Vaccination Plan, including coordination of resources needed to activate Points of Dispensing (PODs).
- **MEDICAL SURGE AND THERAPEUTICS** - Assess and support current medical surge plans with hospitals, long term care facility, correctional facilities and other congregate settings and ensure the expeditious and equitable access to new therapeutics.
- **COMMUNITY MITIGATION** - Based on review of public health data, continue to evaluate the need for implementation of new policies and mitigation strategies in communities experiencing community transmission while encouraging key prevention strategies (social distancing, face covering, hand hygiene, etc.) and supporting contact tracing.
- **TESTING** - Support and/or expand the infrastructure for public health and private sector SARS-CoV-2 testing strategies in accordance with Virginia's COVID-19 protocols, while also considering the impacts of new SARSCoV-2 variants.

Weekly Priorities

- Develop and coordinate mobile vaccination plans in collaboration with the local health districts, local stakeholders, vendors and the VDH and VDEM regional teams.
- Expand outreach efforts at the local level and explore new funding opportunities across the state to enable equitable access to vaccination and to overcome the variety of reasons for vaccine hesitancy.
- Continue to ensure resourcing strategies at LHDs are assessed, coordinated and additional needs are reported.
- Align on and execute plan to vaccinate the medically fragile and home bound population.
- Continue to refine planning and execution for the vaccination of IHEs.
- Develop and disseminate updated talking points and communication strategies to the LHDs and the public regarding CVCs and mobile sites.
- Engage private sector businesses in Virginia to enhance public outreach, testing, and vaccination efforts.
- Continue to coordinate and deliver widespread public messaging about the phase 2 transition that manages public expectations about when people are likely to be able to access vaccine on the state, district and local level.
- Expand vaccination planning for 12 - 16 year olds.

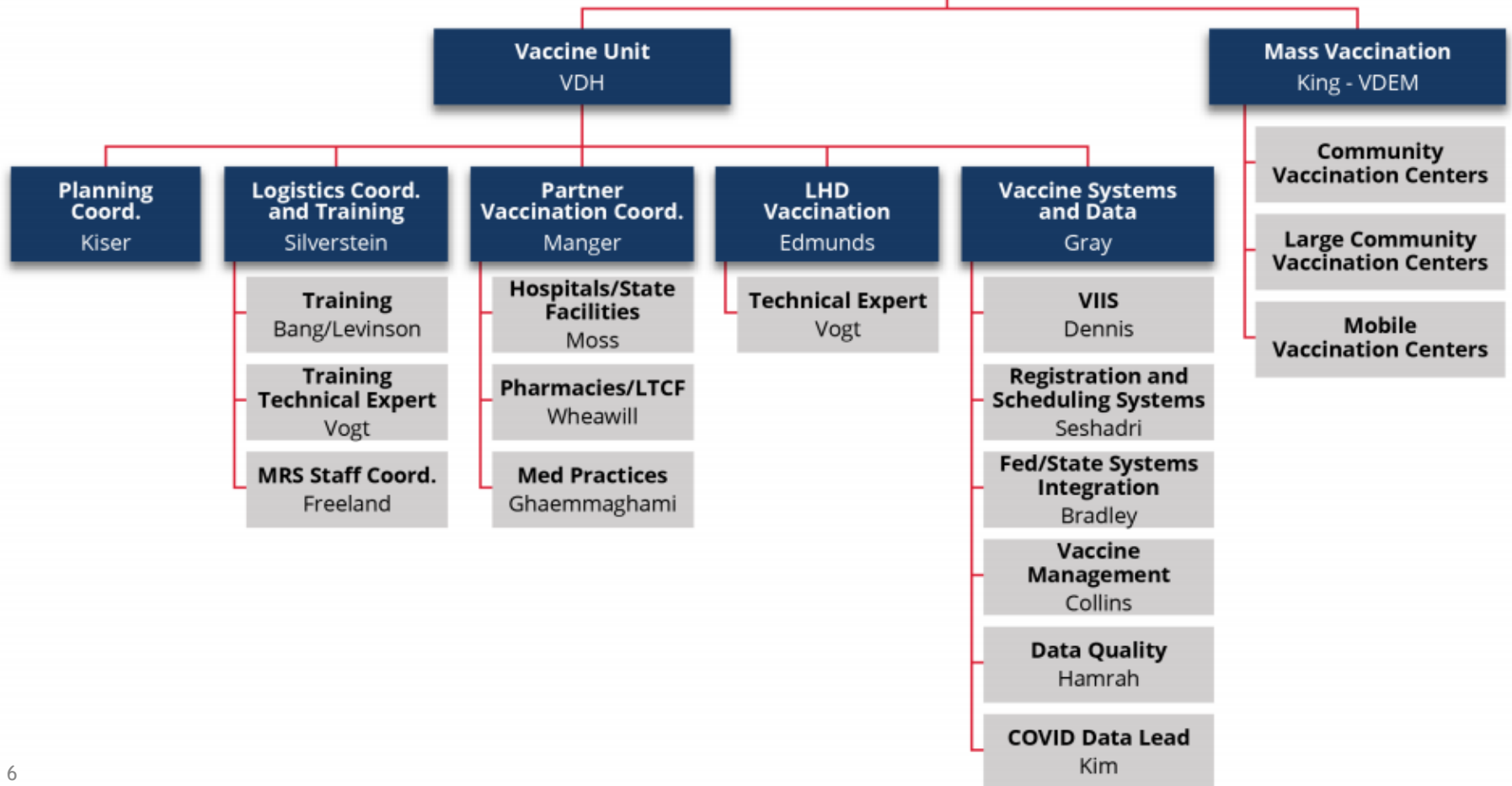




VDH



Vaccine Task Force
VDH & VDEM





654,929 (+719) Cases

10,706 (+15) Fatalities

54,228 Discharges

5.5% PCR Positivity Rate

Data source VDH and VHHA as of 1700 Apr. 25, 2021

3,519
(3,695*)



Available Beds

256



ICU Beds with
COVID Patients

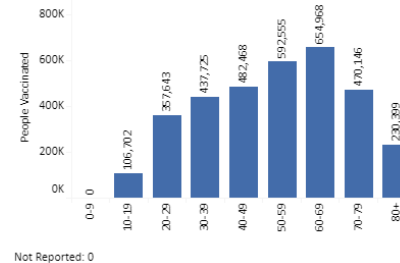
Data source VHHA as of 0900 Apr. 25, 2021

*Beds added under EO52

COVID19 Vaccine Demographics

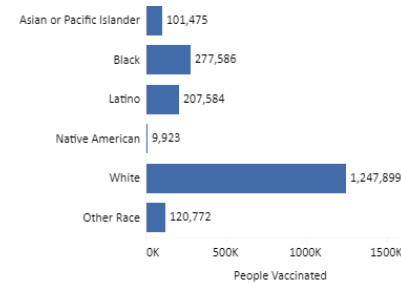
Data as of Apr. 25, 2021 as of 1700 on VDH COVID19 Vaccine Dashboard

Vaccination Count
By Age Group



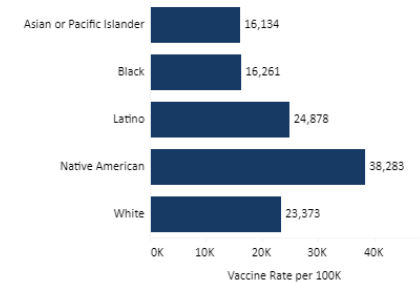
Not Reported: 0

Vaccination Count
By Race and Ethnicity

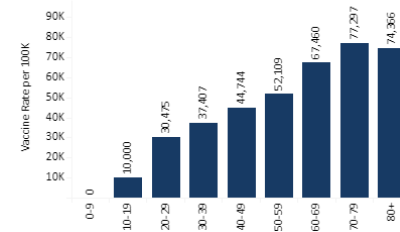


Not Reported: 1,367,367

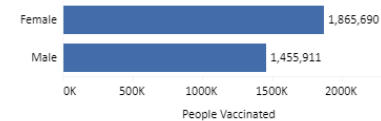
Vaccination Rate per 100,000 Population
By Race and Ethnicity*



Vaccination Rate per 100,000 Population
By Age Group

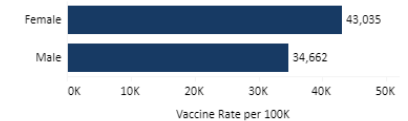


Vaccination Count
By Sex



Not Reported: 11,005

Vaccination Rate per 100,000 Population
By Sex



Population estimates data source: 2019 National Center for Health Statistics (NCHS) Bridged-Race population estimates.

*This data source does not include population estimates for the Other Race category. No population estimates are available for out-of-state individuals or those without a reported locality. More information about the population estimates can be found at this link - https://www.cdc.gov/nchs/hvs/bridged_race.htm

295,372 People with at least one dose and 178,975 people fully vaccinated are out-of-state residents or reported without a health district of residence. These are included in Virginia state vaccine totals.

CASES

VACCINATIONS

VEST Progress

POLICIES

RELEASES



VACCINATIONS

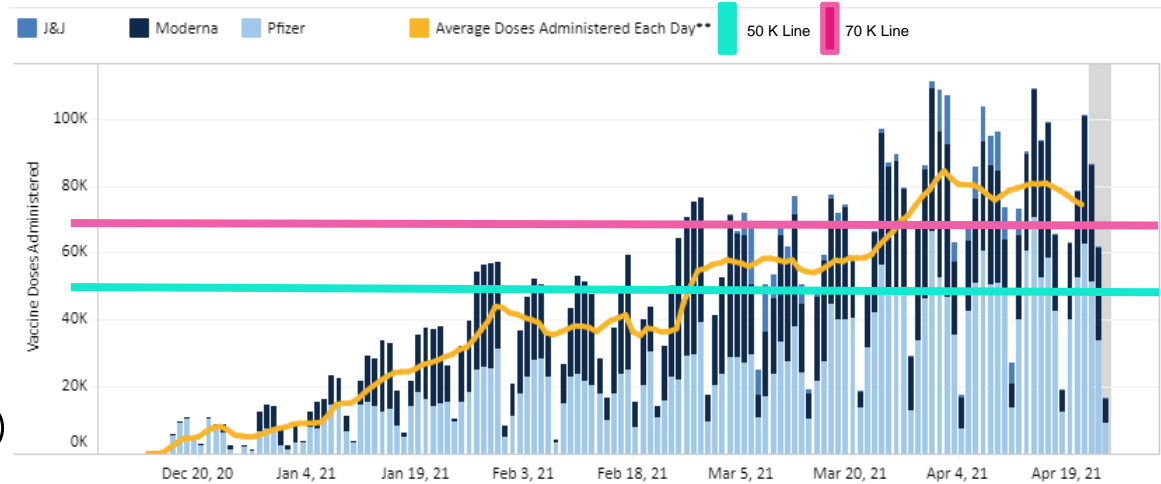
5,838,005 Received
5,911,691 Administered
(+70,685)
74,387 Average administered
per day**
3,627,978 1st dose
2,411,830 2nd dose (Fully Vaccinated)

42.5%

Population of Virginia with at
least one dose

COVID19 Administration[^] and Distribution by Day

Data as of 1700 Apr. 25, 2021 on VDH COVID19 Vaccine Summary Dashboard



**The average doses administered each day takes the last 7 days of daily doses given, adds them up, and divides that number by 7. This is useful to get a clear picture of the data while taking into account reporting delays.

[^]Vaccine administrations may take up to 72 hours to be reported, shown by gray shaded area on graph.

CASES

VACCINATIONS

VEST Progress

POLICIES

RELEASES



COVID19 Vaccine Doses Received and Administered

Data as of 1700 Apr. 25, 2021 on VDH COVID19 Vaccine Dashboard

Total Vaccine Doses Received
5,838,005

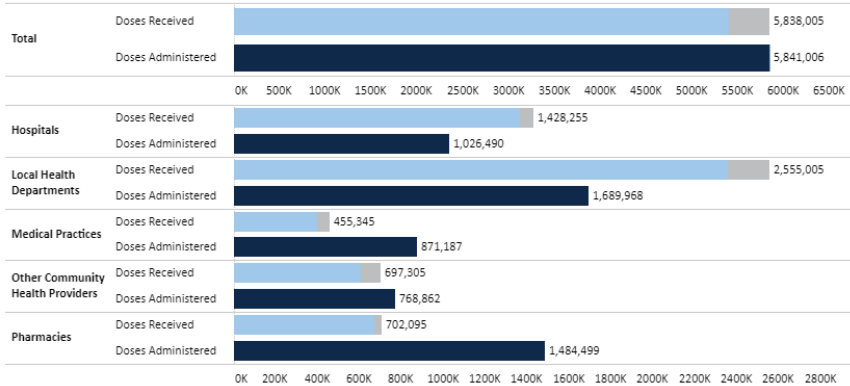
Doses Administered
(out of received)
100.1%

Doses received include 223,470 doses received through the Federal LTCF Program.

As of March 17, 2021, doses administered and received by the Federal Long-Term Care Facility (LTCF) Program are included in the Pharmacies category.

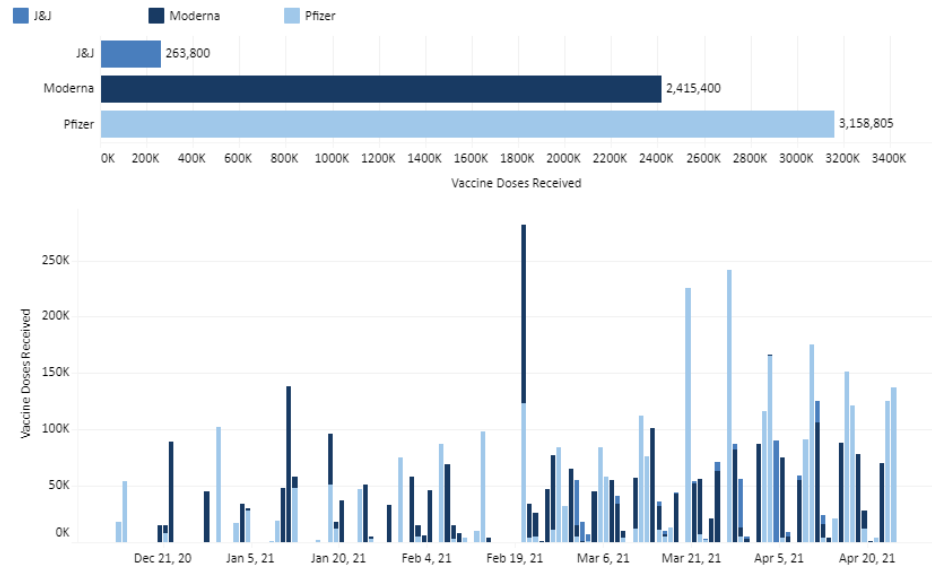
Vaccine Received and Administered through Virginia's State COVID-19 Vaccination Program (Federal LTCF Program doses administered and received are included with Pharmacies)

COVID-19 Vaccine Received and Administered by Facility Type*



*Doses received by hospitals and local health departments (LHDs) include those redistributed to the partners listed. Doses received by partners include only those shipped directly and do not include those redistributed by hospitals and LHDs.

COVID-19 Vaccine Received Totals and by Day (Federal LTCF Program doses received are not included by day)



CASES

VACCINATIONS

VEST Progress

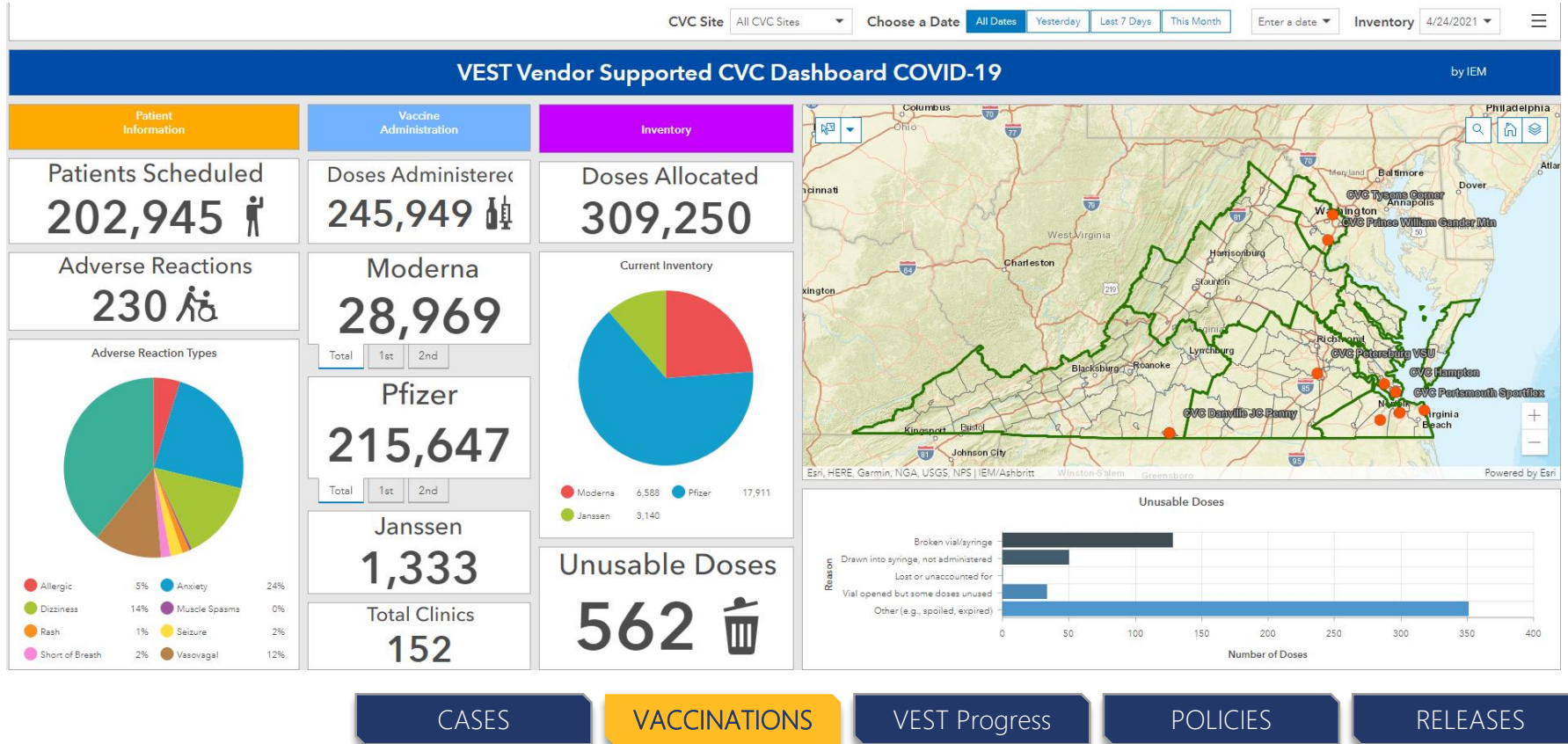
POLICIES

RELEASES

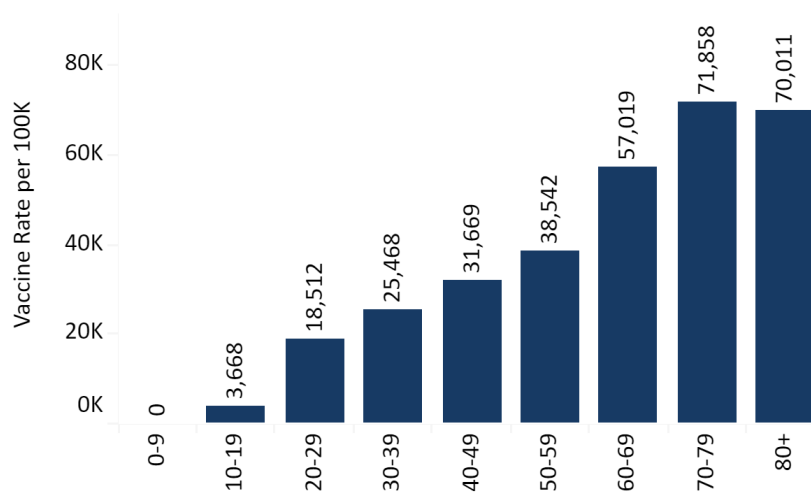




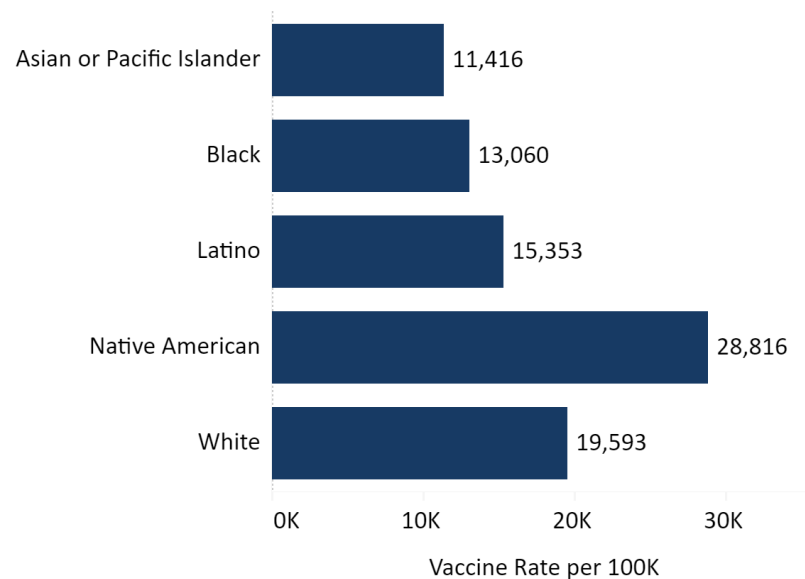
Dashboard- VACCINATION Vendor supported CVCs *Summary since opening



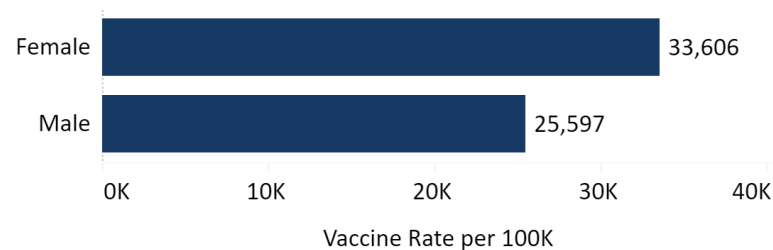
Vaccination Rate per 100,000 Population
By Age Group



Vaccination Rate per 100,000 Population
By Race and Ethnicity*



Vaccination Rate per 100,000 Population
By Sex



Striving towards equity in COVID-19 response

- The Virginia Department of Health's response to the pandemic has applied a health equity lens to approach, yet notable disparities continue to exist in rates of infection, hospitalizations and death.
- Identifying the social, economic, and historical barriers to achieving good health remain a cornerstone priority for VDH.
- Partnerships at the local level are paramount; trusted community leaders, healthcare providers, and community advocates can help provide the necessary information and education to dispel myths and concerns.
- Incorporation of community leaders and transparency in decision-making can help guide next steps.

Access and Functional Needs

- Produced ASL translations of general vaccination information, and vaccination registration press release (partnering with VDH)
- Advising on messaging and creative campaign materials to ensure accessibility of content and format; AFN liaison to the Outreach Director
- Socialized [HHS Civil Rights Guidance \(4/13/21\)](#) and [DoJ Letter to Colleagues](#) regarding ADA obligations during COVID-19 (4/16/21)
- Collaborated with Call Center team to facilitate direct ASL access capability (no interpreter needed)
- Provided AFN Partner feedback regarding vaccine hesitancy
- Contributed to the formation of the Homebound strategy team
- CVC Sites related:
 - Provided ADA checklists, signage templates, interpreting vendor information for use during planning
 - Consulted with the site vendor regarding AFN principles
 - [Vaccination site AFN guidance](#) document for distribution by VDH
- Provided AFN content for VDH training modules for vaccination site staff/volunteers
- Connected FEMA ODI & SAVE site team with local AFN related contacts & with the Homebound strategy team

CVCs / Mobile Vaccination

- Community Vaccination Centers
 - 10 fixed sites currently operational
 - Averaging approximately 16,000 doses per day
 - Site locations are equity based and data driven
 - Danville will demobilize 5 May
- Mobile Capability
 - Planning to start the week of 3 May
 - Focused on smaller, more rural communities
 - Coordinating with multiple stakeholders

Pharmacy Partnership

Virginia pharmacies offer critical services to public health during this pandemic which include:

- Medicines
 - mitigation of drug shortages
- Testing
- Therapeutics and Care Management
 - remdesivir
 - monoclonal antibodies
 - supportive care
- Vaccine
 - mass vaccinators (vaccination of LTC facility staff and residents, residential group homes, etc.; >1200 community pharmacies in Virginia receiving vaccine)
 - Accessibility (90% of people live within 5 miles of a community pharmacy)
 - Assistance with distribution and other logistics

Pharmacy Services Subcommittee was formed in April 2020.

Representatives included:

- Virginia Department of Health Professions (DHP) Board of Pharmacy (BOP)
- Virginia Department of Medical Assistance Services (DMAS)
- Virginia Pharmacists Association (VPhA)
- Virginia Association of Chain Drug Stores (VACDS)
- Pharmacists within long term care, community, pharmacy, academic, and other settings

In January 2021, Virginia had more than 500 pharmacies enrolled as a CDC vaccination provider. Virginia was one of the first states to expand to multiple partners within the Federal Retail Pharmacy Program (FRPP) which has allowed Virginia to have vaccine at greater than 1200 pharmacies.

How to Sign-Up for a Vaccine

- <https://vaccinate.virginia.gov/>
 - Sign Up/Preregistration
- [Vaccinefinder.org](https://vaccinefinder.org)
 - Connect to national databases of pharmacies/grocery stores offering vaccine - must meet eligibility criteria
- As of April 18, all of Virginia moved to Phase 2
- Call **877-VAX-IN-VA** (877-829-4682)

(877) VAX-IN-VA
(877) 829-4682

Call Center



Since launching on Feb 8th, the VA COVID Information Center has handled over **710K incoming calls** and **230k outgoing calls** across multiple languages and age demographics, and has helped residents schedule over **70K** vaccination appointments.

- Staffed by ~750 agents that are all equipped to answer general COVID inquiries, schedule vaccination appointments for residents, and place outbound calls. Approximately 20% of the agents are bilingual in Spanish and English.
- Supports calls in Spanish, Korean, Arabic, Mandarin, Cantonese, Vietnamese, and English directly through the IVR menu. Additionally, there are more than 100 other languages available through the language line.
- Residents who are deaf or hard of hearing are supported by 6 dedicated American Sign Language (ASL)-fluent agents directly over video. Since launching the ASL service on March 31st, agents have handled nearly 300 calls.
- To provide residents more convenient access to the call center's resources, an automated chat bot has been implemented and has facilitated ~**80K** interactions in both English and Spanish since going live on April 2nd.

Hi I'm the VDH Virtual Assistant! I can help you find answers to general questions about COVID-19, vaccines, and registration eligibility. To initiate type 'Hi'



VDH VIRGINIA
DEPARTMENT
OF HEALTH
*To protect the health and promote the
well-being of all people in Virginia.*

Key Benefits to Residents

Accessible to All Residents:

The call center offers services to all residents by supporting over 100 languages, inclusive of ASL, and prioritizes residents that are over 65 years old.

Centralized Point of Contact:

Residents are provided a single 1-800 number that provides real-time information and appointment scheduling support.

Consistent Resident Experience:

The call center offers comprehensive support 12 hours a day, 7 days a week for COVID related inquiries and vaccine scheduling for all participating Health Districts.

Ease of Use

The call center assists residents with the scheduling of vaccines by supporting all scheduling tools used by the Commonwealth (VASE, VAMS, Vaccinefinder.org, PrepMod and the Pre-Registration tool).

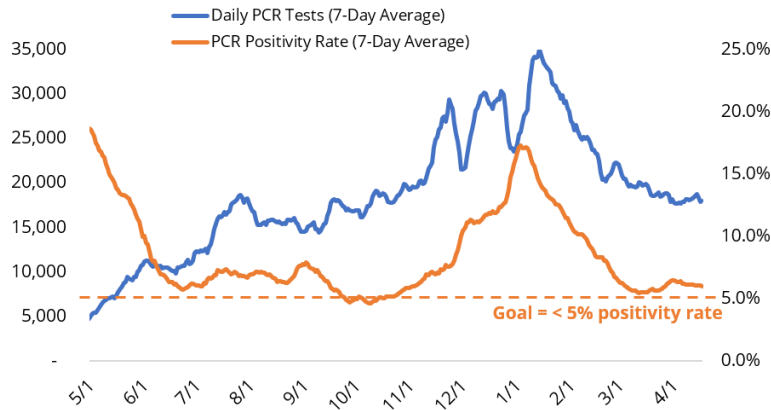
Current and Future Concerns Variant Strains

- **Variants of Concern: (VOC)** : evidence of an increase in transmissibility, more severe disease (increased hospitalizations or deaths), significant reduction in neutralization by antibodies generated during previous infection or vaccination, reduced effectiveness of treatments or vaccines, or diagnostic detection failures.
 - B.1.1.7 (UK)
 - B.1.351 (S. Africa)
 - B.1.429 and B.1.427 (CA)
 - P.1 (First detected in Brazil)
- **Variants of Interest (VOI)**: contain specific genetic markers associated with changes to receptor binding, reduced neutralization by antibodies generated against previous infection or vaccination, reduced efficacy of treatments, potential diagnostic impact or predicted increase in transmissibility or disease severity
 - P.2 (Brazil in April 2020)
 - B.1.525 (NY in Dec 2020)

COVID-19 Tests Conducted

Across the Commonwealth, an average of **26,002 tests (antigen and PCR)** have been conducted per day over the past seven days. The current 7-day average PCR tests per day is 17,949 and the 7-day average antigen tests per day is 8,054.

PCR Tests and Positivity Rate



April Testing Progress

Tests conducted this month to date

310,057

PCR Tests

136,678

Antigen Tests

446,735

PCR + Antigen Tests

Across the Commonwealth, **446,735 tests (antigen and PCR)** have been **reported to date** in the month of April. Approximately 69% of those tests were PCR tests

1. To account for delays in adding more recent data, a 3-day buffer is applied to lab data.
The latest day of full data as of this report is 4/17.

Data source: VDH internal data

K-12 Testing Programs

Updated 4/22

K-12 Pilot Program

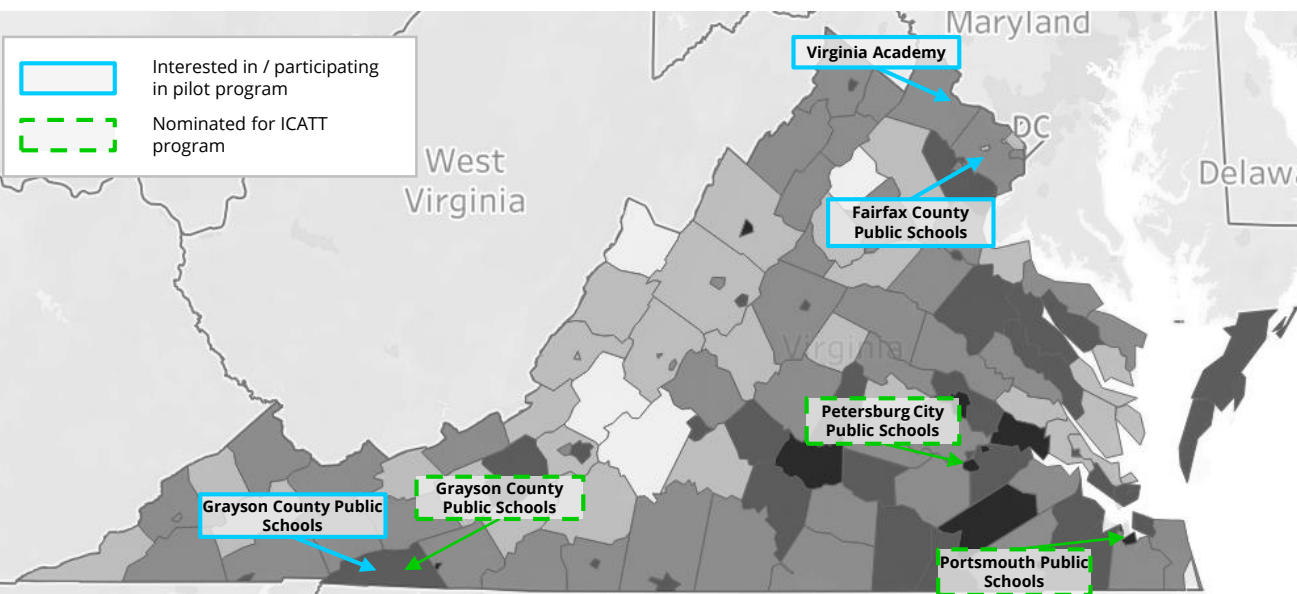
- K-12 Testing Pilot Program launched.
- As of 4/22, school districts that are participating or have expressed interest in the pilot include:
 - Virginia Academy in Ashburn
 - Grayson County Public Schools
 - 21 schools in the Fairfax County Public Schools District

HHS Increasing Community Access to Testing (ICATT) in Schools Submission

- VDH submitted three school divisions to the ICATT program sponsored by HHS: Grayson County Public Schools, Petersburg City Public Schools, and Portsmouth Public Schools.
- Divisions were selected based on a metric that combined three factors: percentage of county population below the poverty level, percentage of county population that identifies as part of a minority group, and the 7-day moving average of daily new COVID-19 cases per 100k. The dark areas on the map below show other areas that ranked highly on this metric.

Expanded K-12 Testing for Fall

- Virginia has been awarded \$257 million through the ELC Reopening Schools grant to provide testing in K-12 schools.
- VDH and VDOE are partnering to develop a program that will utilize partnerships with testing vendors to provide testing to schools.
- The Testing team finalized the scope of work (SOW) for an RFP to select testing vendor(s). At the most basic level, vendors will be expected to regularly provide testing kits and shipping materials for pooled classroom testing, return the results of pooled tests within 24 hours, and provide a digital method of reporting test results to schools.



Data sources: CDC Social Vulnerability Index, VDH website (PublicUseDataset-Cases), NCHS 2018 Population Estimates

Step 1

Provide PCR kits and shipping materials for pooled testing

Return test results within 24 hours of receipt at the lab

Step 3

Provide a digital platform for sample registration and result reporting

22

Testing Team Update

- **Supporting Vulnerable Populations**

- Connected VSU and Petersburg with Crater Health Department to plan an event offering COVID-19 testing and vaccination sign-ups
- Developing strategy for the new FDA EAU approved At-Home tests; work with community partners for distribution plan; budget in ELC Expansion Grant

- **Building Public-Private Partnerships**

- Walgreens: 54 stores operational and 17 additional stores awaiting CLIA waivers. Overall, testing has increased due to the increase in number of stores, especially in highly populated areas.
- Dollar General: Moving forward with 3 sites to increase access to testing with support from HHS and CDC. Expected launch date is May 10th, testing sites will be open for 2 weeks and be reevaluated for further dates as needed. CDC survey staff will be onsite collecting data to analyze effectiveness of incentives for testing. Sites: Lynchburg, Williamsburg and Norfolk

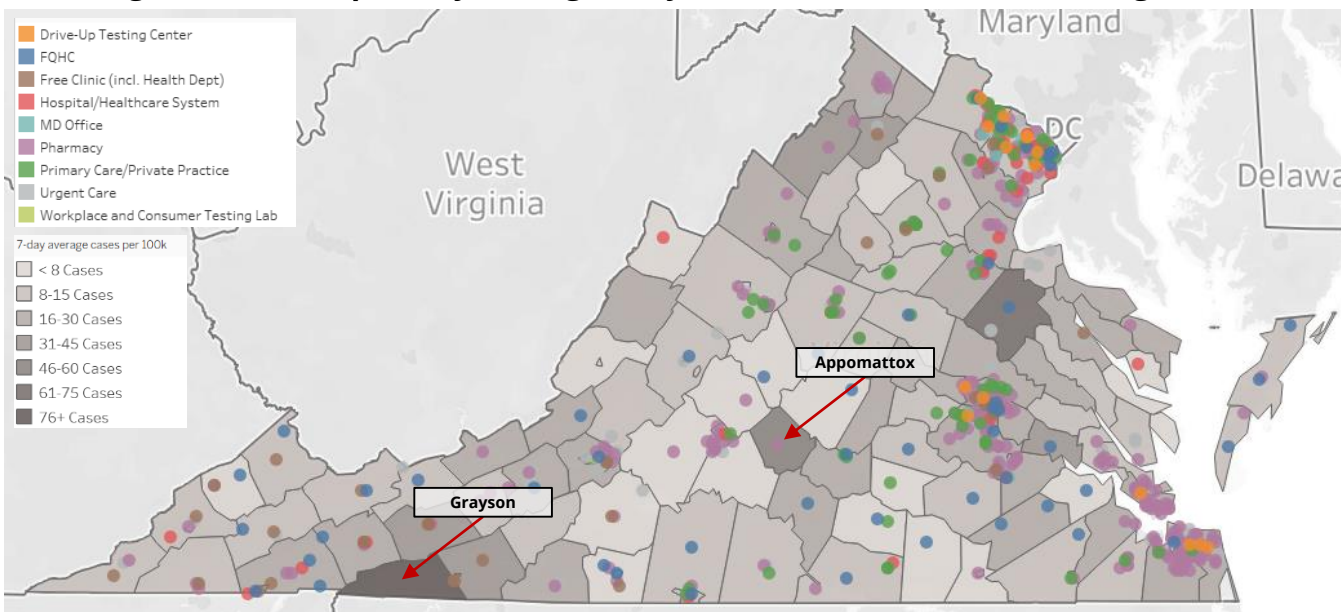
Updated 4/22

COVID-19 Fixed Testing Locations

Updated 4/21

Testing locations are fixed sites that provide COVID-19 testing throughout the Commonwealth. Testing locations are self-reported to VDH, so the below represents known sites with an emphasis on PCR testing locations.

Testing Locations Map: 7-Day Average Daily New Cases Per 100k vs. Testing Locations¹

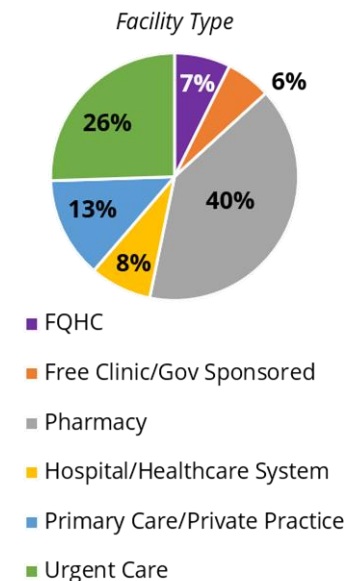


Localities with High **Daily New Cases Per 100k** and Limited Permanent Testing Locations

Locality	Local Health District	Daily New Cases Per 100k	Permanent Testing Sites (#)
Grayson	Mount Rogers	87	0
Appomattox	Central Virginia	56	CVS (1)

Weekly Facility Type Breakdown²

As of 4/21, there are **682 unique facilities** conducting testing across VA. The largest facility types are: Pharmacy (273), Urgent Care (174), and Primary Care (90).



² Includes both public and restricted sites.

¹ Includes only sites that have given VDH approval to distribute information publicly.

Public Health Response

Community Mitigation Measures

- Current Executive Order, 5th Amended EO 72, effective April 21, 2021, until May 15, 2021, all public and private in person gatherings of more than 50 individuals indoors and 100 outdoors are prohibited.
- The 6th Amended EO72, effective May 15, 2021, will further ease gathering restrictions to allow for 100 individuals indoors and 250 outdoors.
- Essential Businesses, Restaurants, Retail Stores, Farmers Markets, Gyms, Entertainment & Public Amusement, Campgrounds, Graduations have specific requirements, to include physical distancing between parties, cleaing and sanitizing, and capacity limits.

Mask Requirements

- All Individuals 5 or older must cover their mouth and nose with a mask if they are in an indoor setting shared by others. This restriction does not apply to persons inside their private residence.
- All individuals 5 or older must cover their mouth and nose with a mask when outdoors and not able to maintain at least 6 feet of physical distance from other individuals who are not Family members.
- Employees of businesses (listed in section I, subsections A and C) shall wear a mask while working at their place of employment.

Initial Public Health Response

Case Identification & Contact Tracing

1. Interviewing people who were diagnosed or tested positive for COVID-19 (“cases”) to recommend that they stay home (isolate) and find out how they were exposed and who they might have exposed while they were contagious (“contacts”).
2. Interviewing contacts to inform them that they might have been exposed to COVID-19 and recommend that they get tested, stay home (quarantine), and monitor their health.

Required Extensive Manpower - Initial Influx of Public Health Personnel Devoted to Case Identification and Follow-Up.

COVIDWISE - Virginia's Exposure Notification App

**ADD YOUR
PHONE
TO THE
COVID FIGHT**
SAVE LIVES, GET COVIDWISE.

Download Virginia's free **COVIDWISE** Exposure Notifications app to help protect your community while protecting your privacy.



Supported on iOS 13.5 & 13.6, compatible with iPhone.



Supported on Android Version 6 (API 23) or above.



Clinical Countermeasures

Distribution Coordinated (Initially) through the State

- **Remdesivir**

- On October 22, 2020, the U.S. Food and Drug Administration (FDA) approved the antiviral drug Veklury (remdesivir) for the treatment of patients with COVID-19 requiring hospitalization.
- As an antiviral drug, Veklury works to stop replication of SARS-CoV-2, the virus that causes COVID-19.
- Distribution initially coordinated through the Virginia Department of Health Pharmacy Services using guidance from the state's Virginia Disaster Medical Advisory Committee using a randomized selection process to all facilities based on the number of COVID-19 patients in each facility.

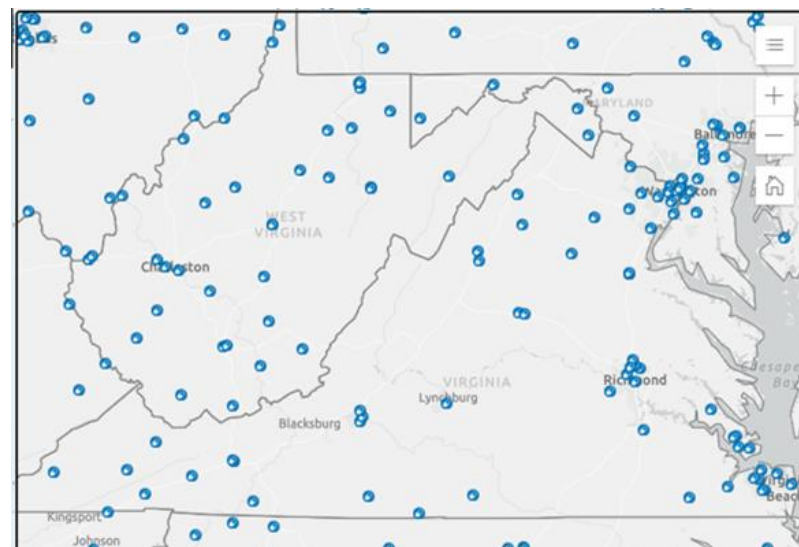
- **Monoclonal Antibodies (mABs)**

- Similar to Remdesivir, mABs followed a state based allocation strategy which was further refined to consider use by each facility.
- Intended for individuals with mild to moderate COVID-19 illness who are NOT hospitalized.

Reference: <https://www.phe.gov/emergency/events/COVID19/investigation-MCM/Pages/Veklury.aspx>

mAb Access in Virginia

- Nearly all Virginia Hospital systems across the Commonwealth have established infusion operations for ambulatory or emergency department patients.
- Several dialysis centers and skilled nursing facilities are also administering these therapeutics.
- Number of Unique Facilities: 41
- Number of Doses Used: 9,778
- Number of Doses Allocated: 76,311
- Requires additional provider education
- The federal government has bought hundreds of thousands of doses; Patients are not charged for the drug, but they may be charged for their clinic visit/infusion services.



Communications

2021 Activities

- Re-establishment of Joint Information Center as part of statewide vaccination effort
 - Staffed with more than 40 people from VDH, VDEM, contractors
 - Duties: social media, marketing, outreach, strategic media relations and monitoring, health equity, and regional outreach
- VDH
 - January-February (Pre-Vaccinate Virginia Launch)
 - February-March (Vaccinate Virginia Launch)
 - April (Phase 2)
- VDEM
 - Opened 7 community vaccinations centers across the Commonwealth with more on the way
 - Coordinated with FEMA on the opening of a federal mass vaccination site
 - Develop outreach strategy with regional staff

Logistics

- **Warehousing and delivery of PPE and other essential supplies to localities/tribal nations/state agencies**
 - Continued PPE support to Health Equity Working Group and School Equity Working Group - PPE
- **CVC Sites**
 - Support of 10 State CVC sites and 1 State/Federal Site
 - Support of local CVC operations with supplies
 - Warehousing of ancillary supply kits for VDH
- **Testing**
 - Warehousing and deliveries of BinaxNOW and BD Veritor rapid antigen tests
- **Other**
 - Assisting other states in locating potential PPE and other COVID19 resources (EMAC Executive Task Force Chair Elect role)



COVID-19 Funding Awards & Expenditures

- CARES Relief Funds- Examples of Use (PPE, Testing, Contact Tracing, Enforcement, Vaccine Distribution, COVID Communications, OT, as well as pass through funding to other entities, such as the VAFCC, Carillion, and the University Testing Reimbursements.)
 - VDEM Received \$128,939,785/ Expensed \$114,687,993
 - VDH Received \$162,791,170/ Expensed \$124,321,268
- Federal Grants awarded by CDC and other agencies- Examples of Use (Improving lab capacity, Testing kits, Vaccine distribution and support. VDH also received more “targeted” grants such as increases to CACFP, WIC, Ryan White and Violence prevention.)
 - VDH Received \$1,200,560,083/ Expensed \$49,570,592
- FEMA Projects - Call Center, CVC sites, Vaccine Support, Communication and Outreach, etc.
 - VDEM Obligated \$303,044,392 / Expensed \$52,363,302
 - VDH Obligated \$18,440,141 / Expensed \$0

COVID: Moving Forward