



COVID-19: Charting the Path Forward for a Right-Sized Response

November 16, 2022

- 1 | Protect Groups Who Are Most at Risk for Severe Outcomes
- 2 | Be a Trusted Source of Public Health Information & Services
- 3 | Address Health Equity
- 4 | Maintain Preparedness and Epidemiologic Awareness

Virginia has strengthened key tools that prevent and control respiratory pathogen outbreaks

VDH gained a variety of tools in order to prevent and control COVID-19. These tools can be strategically deployed for many respiratory pathogens.



Medical Countermeasures
(e.g., Vaccine, Treatment, Therapeutics)



Expanded Workforce & Community Health Workers



Expanded Data Systems



Informatics Capacity



Public Awareness & Education (e.g., communications on handwashing, masks, physical distancing)



Call Center



Early Case Detection & Contact Tracing



Testing



Community Partnerships & Relationships

Key partnerships were strengthened and were vital to success

Developing and maintaining partnerships were vital in responding and preventing respiratory pathogen outbreaks. VDH fostered partnerships with a variety of different stakeholders including:

Pharmacies

**Hospitals/Health
Systems/Providers**

**ECE, K-12 Schools, & Higher
Education Partners**

Clinical & Laboratory Partners

State & Federal Agencies

**Community Based
Organizations**

**Long-Term Care & Congregate
Care Partners**

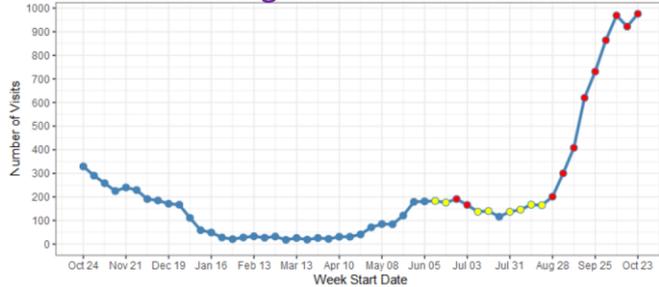
Jail/Correctional Facilities

Understanding COVID-19 in the context of Respiratory Diseases

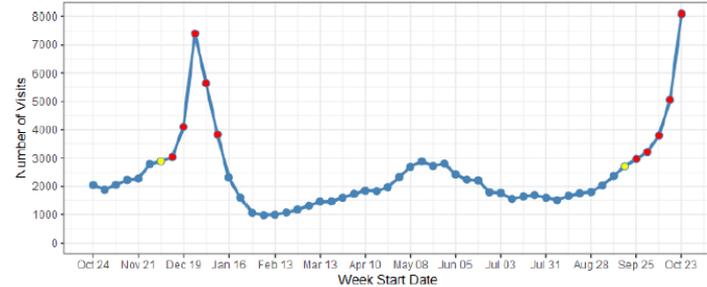
VDH monitors COVID-19, Influenza, and other respiratory conditions in parallel to maintain a comprehensive view of the trends.

- Similar disease impacts
- Strategic partnerships are similar to the responses
- Health Care System preparedness and readiness supports all of these conditions.

Weekly ED and Urgent Care Visits with Diagnosed RSV



Weekly ED and Urgent Care Visits for ILI Excluding Diagnosed COVID-19



Weekly Respiratory Disease Surveillance Report

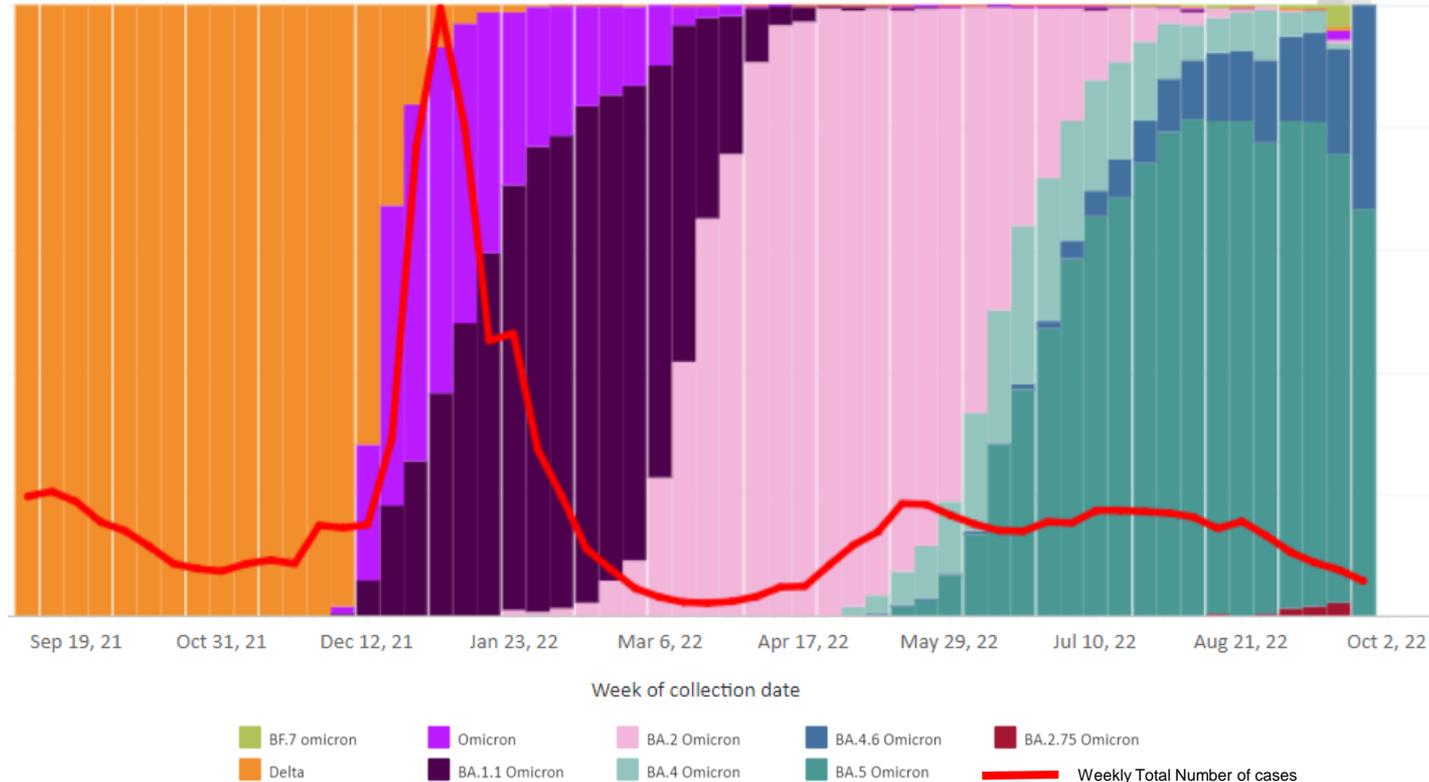


**Virginia Department of Health
Weekly Influenza Activity Report**

We must stay vigilant against the uncertainties of COVID-19

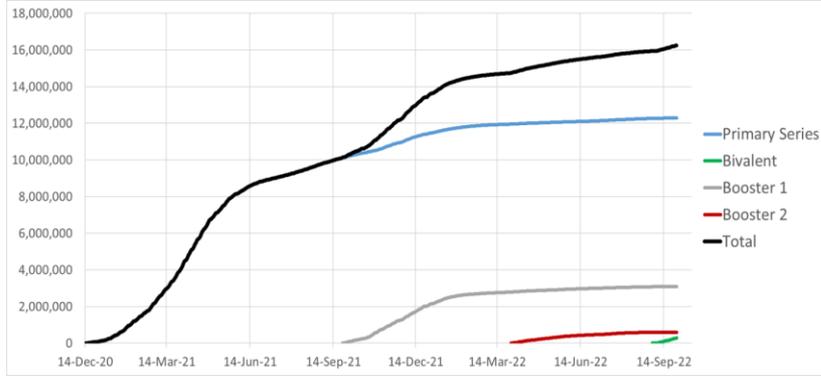
Evolving Trends: New variants, waning immunity, potential seasonality, long-term effects of Long COVID, and overall pandemic fatigue present unknown variables that could lead to future fluctuations in hospitalizations and death rates

COVID-19 Variants in Virginia, September 2021-2022

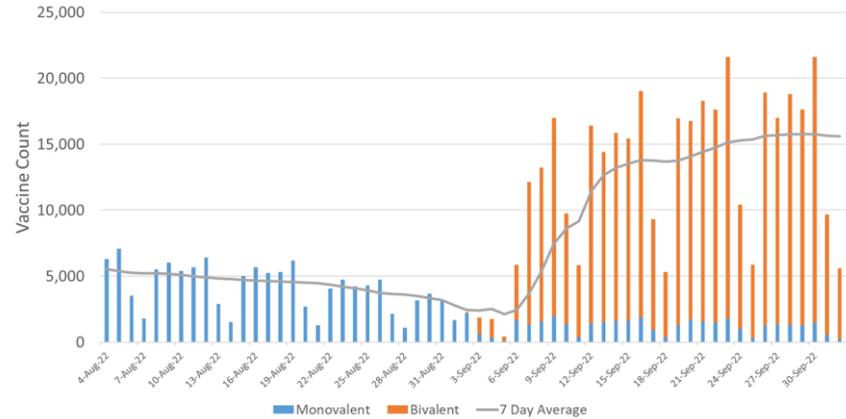


There is work to be done to continue to combat COVID-19 through vaccinations

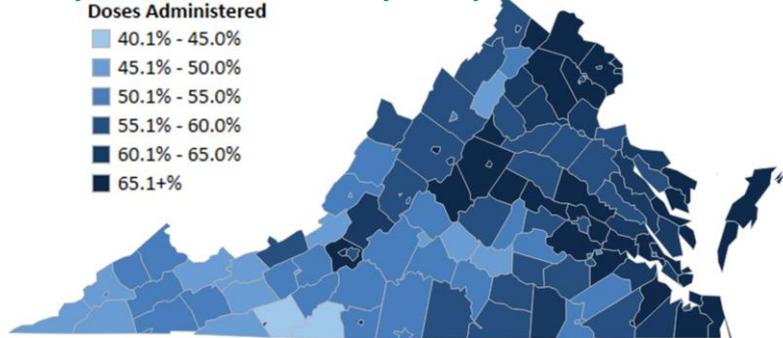
Total Doses Administered over Time



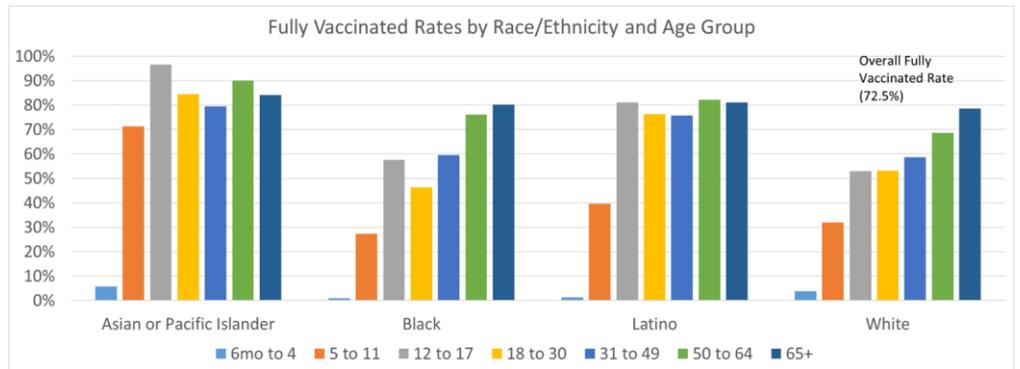
Monovalent vs. Bivalent (60 days)



Fully Vaccinated Administered by Locality



Fully Vaccinated by Age and Race / Ethnicity



The value and prioritization of different strategies have shifted throughout the pandemic response. VDH acts on evidence-based science and remains agile to provide up-to-date recommendations that may also be transferred to other respiratory pathogen outbreaks and situations of concern.



Reinforced that staying up to date with COVID vaccines is one of the most impactful ways to lower the risk of getting very sick, being hospitalized, or dying from COVID-19



Prioritized surveillance and investigation of disease reports related to high-risk settings, clusters and outbreaks, and novel or emerging variants



Provided strategies that reduce transmission in schools; recognizing that keeping schools and early childcare education (ECE) programs open, in-person, and safe is vital



Adjusted messaging to highlight that masks may help offer protection against COVID-19, particularly in specific situations



Promoted prevention strategies, such as improving ventilation, that keep COVID-19 from spreading

Path Forward: Key Activities for VDH



Moving forward, focus on selected activities within each category:

Surveillance and Outbreak Activities



Monitor trends and emerging concerns

Workforce Activities



Right-size and sustain a skilled public health workforce

Communication Activities



Continue to be a trusted source of information

Healthcare Coordination Activities



Remain engaged and clarify responsibilities of partners

Testing Activities



Focus on specific populations and remain prepared

Vaccination/Therapeutics Activities

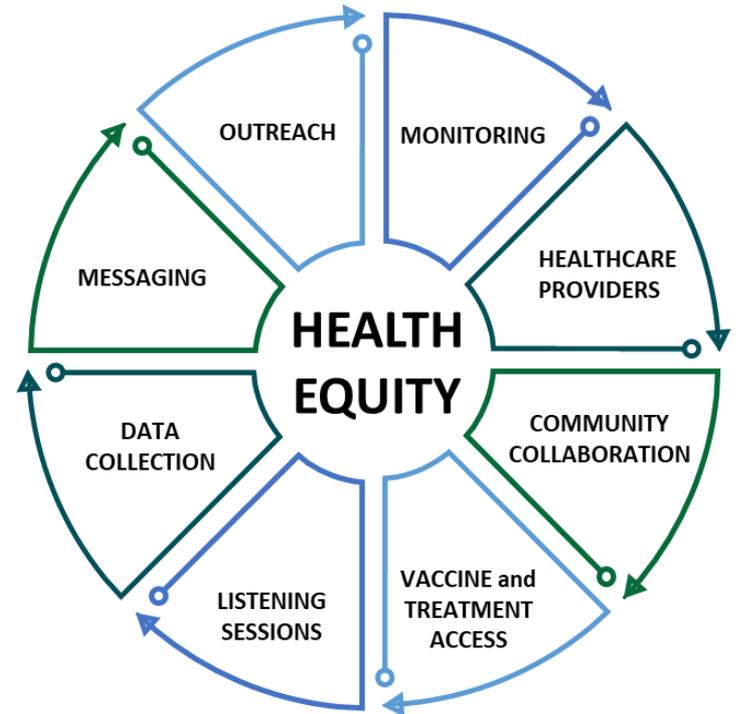


Ensure continued access to therapeutics and vaccines

Health Equity: Centering VDH's Activities and Recommendations

Health Equity is at the foundation of all activities, recommendations, and COVID response efforts. Recognizing existing disparities by race and ethnicity, rurality, income, and other social determinants inform VDH's response and guide the following efforts:

- Prioritize vaccine access and distribution for most sensitive and vulnerable populations
- Monitor COVID-19 Hospitalizations and Deaths by race and ethnicity AND geographic location
- Support local community engagement (e.g. listening sessions) to unearth community-specific barriers to prevention and treatment
- Inform health care systems of community challenges to bridge potential patient-provider gaps
- Tailor and target messaging that resonates with individuals across the Commonwealth
- Sustain community partnerships and grassroots engagement to maintain a pulse on community challenges



Sharpen focus for data reporting on most critical priorities

Proposed Goal: Create a redesigned website landing page with a combination of key metrics and trends (rather than daily counts) that guide current public health response, in order to centralize information but also reduce the ongoing data reporting (and staffing) needs.

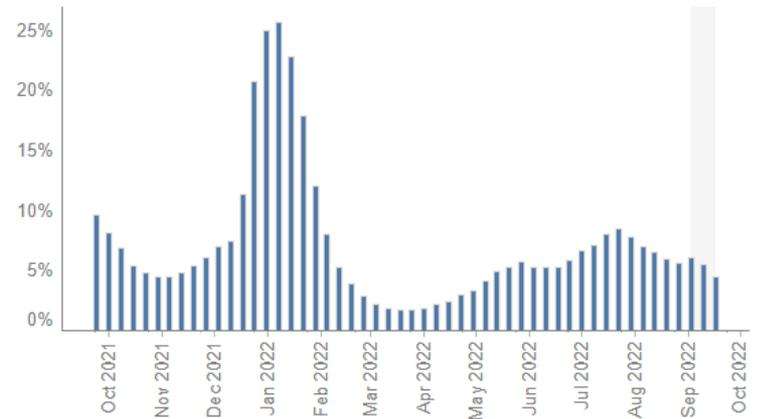
Streamlined page will highlight five main categories with clean, consistent, and simple visualizations:

1. Early Warning Indicators (e.g., syndromic and wastewater surveillance)
2. Health System Capacity (e.g., hospitalization trends, case and death trends)
3. COVID-19 In Virginia (e.g., demographics and outbreaks by setting)
4. Vaccinations
5. Surveillance of Variants

4.5%  Previous Week 5.4%

Emergency Room Visits for COVID Symptoms

The percentage of all emergency department visits that are for COVID-like symptoms can signal how much illness there is in a community.



Emergency department visits that are for COVID-like illnesses (CLI). [More Inf.](#)

Source: [North Carolina Health Department](#)



- 1. We have made good progress against COVID-19 to date**
- 2. It will be important to continue to monitor COVID-19 and other respiratory pathogens**
- 3. Public health recommendations remain important; we now know what works and what may not optimize impact**
- 4. Uncertainty is inevitable (new variants, surges possible, etc.) so continued surveillance is key**
- 5. Consult reliable sources of health information for further guidance, including official public health sources (local, statewide, and national)**

Recommended Key Messages for Public

- 1. Stay home and isolate from others** when you have COVID-19 or if you have symptoms and think you might have COVID-19.
- 2. Stay up to date with your COVID-19 vaccines:** people ages 5 years and older should also receive the most recent booster doses recommended by CDC. VDH advises parents to discuss this option with their child's healthcare provider.
- 3. Stay prepared:** Have at-home COVID-19 test kits on hand. If you have symptoms, test early and get treatments if you are eligible.
- 4. Stay informed:** Consult reliable sources of health information for further guidance, including official public health sources (local, state, and national); Know your COVID-19 Community levels to make decisions on which prevention actions to take.
- 5. Understand Risk:** If you or those around you have risk factors for getting very sick with COVID-19, take extra precautions (e.g., timely testing and treatment, distancing in crowds, etc.).

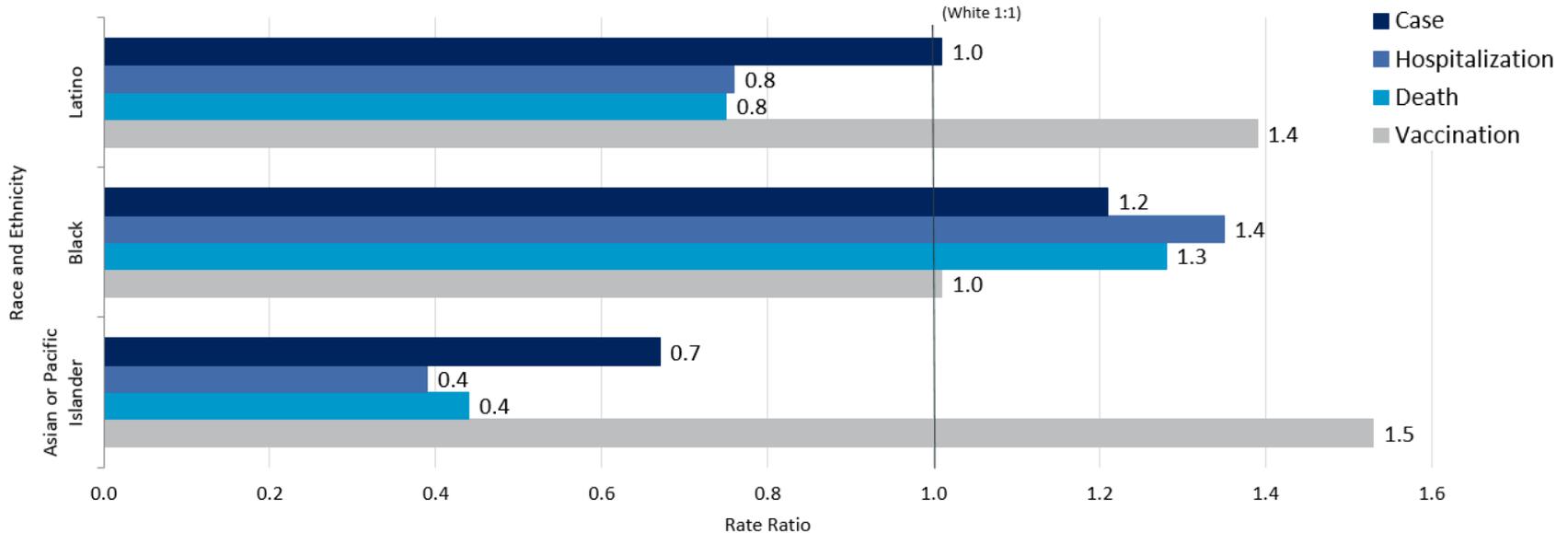
Recommended Key Activities and Priorities for Partners

- Continue to report cases and outbreaks per Disease Reporting Regulations
- Continue to educate clients, partners, and stakeholders
- Maintain adequate PPE supplies for health care workers
- Monitor workforce capacity and maintain preparedness for large surges or outbreaks
- Maintain active partnerships and collaborations with other agencies and entities across the Commonwealth, including non-governmental and commercial organizations such as healthcare providers and payers
- Resume lead responsibility for certain activities, such as:
 - Providers and pharmacies conducting patient testing during non-outbreak or variant surges
 - Continue the transition of MCMs (vaccines, treatment) towards providers/commercial carriers as appropriate

Progress in bridging COVID-19 disparities must continue to be a priority

COVID-19 Disparities: The availability and access to vaccines, testing, health care and therapeutics impacted health outcomes during the pandemic. Earlier on, Black and Latino individuals incurred higher rates of cases, hospitalizations, and deaths relative to Whites; since April 2021, efforts to bridge these gaps have shown progress, with vaccination rates across all racial/ethnic groups more aligned.

Virginia, April 2021 - March 2022
Average Rate Ratios by Race and Ethnicity



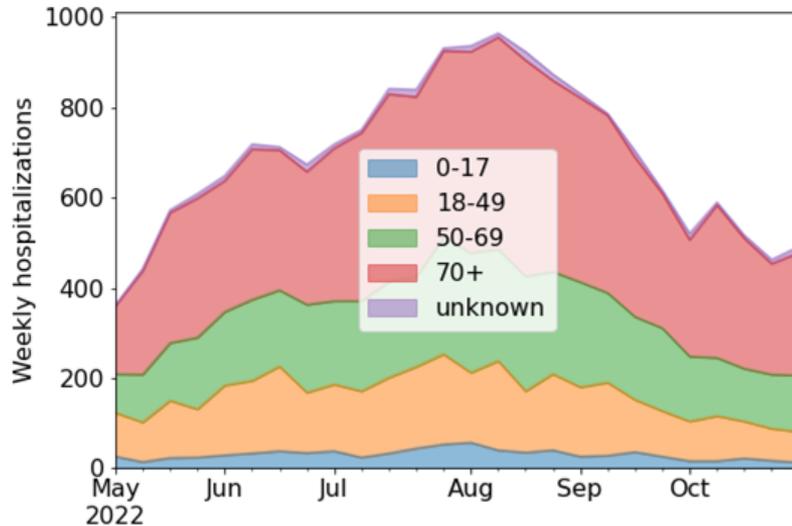
Guidance on graph interpretation: Whites are the reference group. Higher rate ratios mean higher rates within one group compared to the reference group (Whites). **Example:** Black individuals were vaccinated at about the same rate as Whites throughout the last year (with a rate ratio equal to 1). Asian and Pacific Islanders had much higher vaccination rates; 1.5 times higher than Whites.

Note: VDH is working on a dashboard to present hospitalizations by age group.

Over the past four weeks COVID-19 hospital admissions in the...

- under 50 age groups have been declining
- 50-69 age group have been stable
- 70+ age group have increased

COVID-19 Hospitalizations, All Ages



COVID-19 Pediatric hospitalizations have declined

- Primarily driven by declines in the 0-4 age group

COVID-19 Hospitalizations, Pediatric

