

MEDIA AVAILABILITY- FEBRUARY 16, 2021

Executive Somers:

Thank you all for joining us today. It's good to see you all and hope you're well. I just really first want to start by thanking all of our public works road and fleet crews for their really hard work since Friday to keep our roads clear and all our trucks and equipment running and also to the line workers the Snohomish PUD, our cable companies, all our public works staff in our cities within Snohomish County, first responders. It was quite an event and we're just very grateful for all the hard work they've put in over the last few days. So whenever we have these significant snow events they do just a great job working around the clock to keep our roadways passable and our community safe. So we are very grateful. Thank you. COVID-19 we're focused on safely and quickly vaccinating as many people as possible. I passed by the Evergreen Fairgrounds yesterday and there were literally hundreds of cars lined up. So it looked like things were going well there and people are eager to get their vaccine. We're grateful for that. And the supply is still not meeting our capacity to deliver it into arms, but we are optimistic that the federal government will increase the amount coming to the state and we should begin to have an impact and we are seeing a slow increases, but we're also managing to make sure people that need second doses. Won't be able to get second doses. So bit of a juggling act, but things are improving slowly. We're also focused on ensuring that our harder to reach and BIPOC communities who have really been disproportionately impacted by COVID-19 are able to access vaccines, first meeting last week with a number of community partners to talk about how we make sure that as the vaccine supply increases, so we can do outreach events and make sure that people that have difficulty accessing the healthcare system or perhaps don't drive or have other difficulties in front of them are served equally and equitably. So we're working off our standard and successful engagement model that we use during last year's census work. And many of those relationships with our communities throughout Snohomish County, it's really stemmed from that census work last year. So we'll continue to focus on that as well as making sure everybody's fed how much County gets vaccinated, just as quickly as possible. Again, some people in our community don't have cars to reach mass specs donation sites. Some don't speak English, some are skeptical of the vaccine. We really need to work hard to ensure that the vaccine reaches everyone and we'll continue to work on that. So with that, I'll hand it over to Dr. Spitters from the Snohomish Health District.

Dr Chris Spitters:

Well, thank you, Executive Somers and good morning, everyone. The teams were busy over the weekend working to balance the safety of staff and patients with the commitment to keep up the pace of vaccine administration and the need for ongoing testing for COVID-19 on the testing front, the Health District did close all the testing sites last Thursday through yesterday, due to the weather staff visited all the sites yesterday and this morning to check on the equipment. Because of damage to the tents and safety concerns, testing near Funko field, the Lynnwood food bank and the state fairgrounds is closed today. Those were the appointments at those sites are encouraged to contact their healthcare provider or schedule for the Everett Community College drive through testing clinic today, or to reschedule for any of the sites later in the week in terms of vaccine sites, the Arlington location was closed on Saturday. That was the only mass vaccination site set to be open that day. The other three locations did didn't have appointments Saturday or Sunday. And that's just based on regular scheduling and limited availability of doses, not the weather. The 864 appointments for Arlington on Saturday were rescheduled for today. The Everett, Edmonds and Monroe locations were open yesterday most with modified hours. Those with earlier appointments in the morning were contacted and told to arrive at any time during operating hours, vaccine did not go to waste to the decisions to close or modify appointments were made before any doses were drawn for those appointments. The Edmonds, Everett and Arlington sites are open today and back to regular operating hours. Those are the vaccine sites. Monroe will open this week. Once we receive allocation information, we previously mentioned a new appointments, a system coming online soon that our team got access to it late last week and are doing internal testing and training of staff. While we don't have an official start date for it, we do expect it to be launching soon. Given the holiday weekend, we don't have total vaccine numbers to share yet this morning, but we do have a preview in that. It looks like the allocation from the state for this week is 500 1st doses and 18,500 2nd doses. So consistent with the state department of health messaging and strategy this week is mostly

about getting second doses in for folks with limited availability this week. For first doses, speaking of vaccine data, I know that the department of health released a report last week with some high-level demographics, including race and ethnicity data on vaccinated persons in Washington state. We do not have a clear picture yet of those demographics at the county level. And we've asked the state to provide us with that data so we can pass it along to the community as well as get feedback on, on how we're doing in that, in that respect, our team is working with providers to ensure that demographic data, including race and ethnicity are completely entered. And we're working with DOH to extract the data, but it will take some time to see the results. In other data news. The department of health also released COVID-19 outbreaks in Washington state, K through 12 K through 12 schools report. The report includes data about K through 12 schools across the state that experienced a COVID-19 outbreak between August one, 2020 and December 31, 2020. This includes both public and private schools and all learning modalities. As a reminder, COVID-19 outbreak in a school is defined as each as a situation where each of the following have met. First, there are two or more laboratory confirmed cases in among school students and staff at the school, the cases have an onset date within 14 days of each other. They are epidemiologically linked, meaning that it was reasonably anticipated, that they spent time near one another while in the school building, they don't share a household and they don't have other activities or encounters with one another outside the school setting. So two cases or more in a close period of time with no other explanation for their contact. The report showed that Snohomish County has had 12 school-based outbreaks from August through December. The total number of cases associated with the outbreaks was just 53. That's an average of about four cases per outbreak with median, meaning 50% of the outbreaks had three cases or less. The Health District has also published its first COVID-19 report for schools. While the DOH report focused on outbreaks, our reports looks at total numbers of cases linked to schools from August one through February 11, there were 285 cases in staff or students attending public and private K through 12 schools in Snohomish County. Those cases impacted 201 different school facilities with the majority of them being just a single case that did not result in further transmission. So meaning the staff or the student caught COVID in the community was reported w they were found to be attending school or working at school, but then no further cases occurred in that school environment with several thousand students, staff and teachers having returned to the classroom, at least part-time thus far, this report shows that the prevention and intervention measures are working to protect staff and students, our schools have been working hard to make the classroom as safe as possible. I hope the community keeps masking up and physically distancing, so that trends continue to decrease the rate in the community. And that also alleviates the pressure on the schools reduces the likelihood that a staff member or a student will enter the school with a case of COVID. This school report will be updated every two to three weeks for the remainder of the school year and posted online under our case counts page www.snohd.org forward slash case counts, no spaces that'll be under snapshots and reports. The last update today from the Health District is on two new recommendations that came out late, late last week from the centers for disease control and prevention. The first one is around masks during a study in January researchers found that two modifications to mask could improve the filtration and reduce the leakage of masks by improving the fit, the tightness around the edges in particular, but also increasing layering to reduce the, the number of droplets that make it through the masks. And that can protect people around the mask wear as well as the mask where themselves. So there are two possible modifications that CDC is suggesting folks consider. One is wearing a cloth mask over a disposable mask. So the, the disposable mask goes on like this, and then the cloth mask goes on over it. And that just provides a little greater tightness around the edges, and it increases the filtration, the other approach, excuse me. The other approach is to take that disposable mask tie knots in the strings on both sides, as close as you can, to the, to the edge of the mask, then put the mask on that makes it a little tighter on the upper and lower margins. The side margins are still sticking out there. So then they recommend that you fold those in. And again, that reduces a leakage. Again, you could always put a cloth mask on top of that to further increase safety for yourself and for others. We encourage people to consider double masking and adding layers as it may provide additional protection for others, and for the person wearing the masks, CDC discourages doubling up of disposable masks. So don't, don't wear two of these together as well as don't double up anything with a K 95 mask the two most important things. So are really just making sure that whether one mask is used or two too, that they're multilayer tightly woven cloth, and that they fit, fit snugly around the edges, covering both your nose and mouth and minimizing gaps around the edges. We must all be consistent about wearing mass and correctly and routinely when we're around people we don't live with. The CDC also indicated last week, this was regarding quarantines for fully vaccinated people that that folks who have completed their vaccination series do not need to quarantine at home. If they are subsequently exposed to COVID and they meet all of the following criteria. One, as I mentioned, they're fully vaccinated, meaning they're two weeks or more

out from their last last dose. If it's a two dose series and 14 or more days after their second dose, if later we have a single dose product on the market, then it would be 14 days after that first dose. So that's criteria number one, number two, the VAX last vaccination occurred three months or less from the current moment. And then they need to remain asymptomatic since the COVID exposure. So if all of those are met CDC now is liberating, fully vaccinated folks from quarantining. If they get exposed, if they do not meet all three of the criteria, then they must continue to follow current quarantine guidance, which would be to sit out for 14 days. We are pleased to see CDC has confidence in the vaccines efficacy, and that is translating into greater flexibility in public health management of exposed individuals who are fully vaccinated. The practical benefits of this greater latitude also provides further incentive to the community to get vaccinated when they become eligible and when appointments become available. So with that, I'll turn it back to executive summary.

Executive Somers:

Thank you, Doctor. Couple of questions. The first is given the report on schools. What is your guidance from school districts on in-person learning?

Dr Chris Spitters:

Well you know, no change really. We just, we continue to encourage them to try to get kids back in, in hybridize, meaning part-time in school, part-time out of school in, in groups. So that's the same group of kids every day. And that we start with the youngest kids and the high needs kids get them into the school, you know, spend a few weeks doing that, let things equilibrate and make sure there's no problems everything's running. Well, then add on another grade or to do that for another few weeks and just keep on going up to scale. As long as the situation in the school permits it, you don't see any evidence of ongoing transmission and as long as our surrounding community continues to have rates that are declining. But even back when rates were higher, we really felt this was the right way to go. Given that the prevention measures really do, do seem to be effective in interrupting transmission in the school setting. So I would say no change in those recommendations that we've been communicating with the schools about for many months.

Executive Somers:

Okay. There's a question about a warming shelter is the Snohomish Health District website. It's last update States to warming shelters are still open- Everett shelter and the United church of Christ shelter. Do those remain open? And what has the capacity been in? How long do you anticipate keeping shelters open? You have information on that doctor?

Dr. Chris Spitters:

I don't know. I don't know. Executive Somers, and sorry, but we'll get back to you on that. We'll have somebody check out the answer.

Executive Somers:

I'm sorry. I don't know either, except it's really taken on a day-to-day basis, but I think as long as we're bring these out here in sky Valley, recovering about 34 degrees. So I would anticipate that no remain open, but we'll, we'll get you that information. Just some question for me, executive summary, as you said, you had your first meeting with some cases probably last week, seeing how many communities of color have been hit harder by COVID. Why wasn't this work started earlier? What sort of planning happened free vaccines were counted for communities of color who were being disproportionately affected by COVID? Yes. I, my statement was that my first meeting with community Columbus last week, however, my staff's been working with them for many, many, many weeks. And we started planning for this issue really in the fall as we were planning for a vaccine distribution. So we, as I mentioned or building on the relationships that we built during the census work. So we've really been working hard to make sure that disadvantaged communities are hard rich communities are we are communicating with them and working with them listening to them. My meeting last week was really to hear how we can best make sure that we're accessing them. They have, in many cases, been hit harder. In some cases there's transportation difficulties many are first line workers and service industry workers. There's

some social block blocks for some groups. And so we really have to work one-on-one with each one. The impediment right now really is a vaccine supply. And so as that increases, we have in the works plans for pop-up vaccine sites, special events, that sort of thing. That's all the pre-work has been done for quite some time. And again, we're working on vaccine supply and waiting on that. See how much of a challenge is it that there is no phase three in the roadmap to recovery restaurants say they need at least 50% opening to make it, there is no clue what the next phase is or how to get there.

Dr. Chris Spitters:

You know, it's just a comment. I don't have a window into the state's forecast or design of these phases. That's really something that's, that's happening to the best of my knowledge and the governor's office. And, and you know, as a public health official, I think the, governor's making a statement about wanting to put, placing a high value on suppressing transmission going forward here in the near term, and just focusing on that and rolling out the vaccine. That's how I interpreted from the Health District perspective. But I don't have any, any insight beyond that.

Executive Somers:

And just an add on to that. Do you think it's time to have a phase three option?

Dr. Chris Spitters:

Well, you know, it depends on what phase three looks like, I guess, you know, we're, we're certainly have several weeks now of declining rates, hospitalizations long-term care cases, deaths. On the other hand, the we've got an unknown in the, the, the new strain, the [inaudible] that could be 30 to 50% or even more transmissible, I think, work to validate that those findings from the UK is still pending here in the U S but I know some investigations ongoing and so, you know, with limited vaccine supply and an uncertain variant with an, you know, potential to increase transmission, again, I can understand the reticence to lay out a pathway that goes too far down the road. But certainly as we see continued improvements and see the vaccine continuing to roll out increasing the total proportion of people in the County that are at least for the short term immune to, to COVID, you know, will certainly, we hope that that we'll get corresponding increases in ability for society to function and the economy to, to try to recover.

Executive Somers:

Yeah. And I know the state is working on a phase three and outlining that. I think it will be helpful once we get that, just to give people some both hope and idea and what we're shooting for. But again, we're still a few weeks into our decline. We want to make sure that this holds with the new variants coming forward. I think staying in phase two for a while is probably what we're going to be doing, but we are talking to the state about defining a phase three. And so hopefully that will be coming soon. A question about older folks, worry, they're going to be left behind if the state expands, who is eligible for the vaccine, any update on special hours days for seniors at County vaccine sites.

Dr. Chris Spitters:

So our, as you recall, our call center, which is (425) 339-5278 is available to make appointments for older residents without internet access and needing assistance. And we're also talking with community partners to assist us with that. I know that this this I mentioned during my remarks that the scheduling system that we're testing out and trying to get in place, and I believe that has that or this call center will have some waiting lists capacity. But I think just to back up and speak to the larger issue with any group, once we reach a diminishing returns or, you know, half, two thirds of a group, let's say a one B one, then, you know, we'll open it up to one B2, but one B one will still be eligible just as now, when we're in one, B one, if a one, a eligible health care worker pops up, well, they, they they're eligible and they, they get a spot. So it's, you know, it's not like a window that closes on opportunity. It stays open and we'll keep vaccinating until everybody who wants a dose or two doses gets. And but we, we are trying to improve our systems to make it easier for folks who either, you know, in this case access to the internet fluency and dealing with the internet time and patients and, and all that, or, or many of the barriers that Executive Somers addressed for other groups within the community, you know, trying to make it accessible for all is our goal.

Executive Somers:

You may have mentioned this doctor, I'm sorry, but do we know when the new system new scheduling system will be up and running?

Dr. Chris Spitters:

We're testing it and training staff, I guess I would guess that means conservatively next week sometime.

Executive Dave Somers:

Okay. Okay. Doctor, how long would you expect? We need to wait to know whether we will see an explosion of cases due to the new variants. When might we feel confident that we're in declarer for that particular threat?

Dr. Chris Spitters:

Well I don't think we'll see an explosion. So that's the first thing if it's only, you know, if the and a lot of it depends on our, our behavior, right? So both in terms of face coverings, avoiding gatherings, and then our success in rolling out the vaccine, which is effective against this strain but on, you know, unbridled this strain has a propensity to, to transmit. It looks like 30 to 50% more efficiently than the circulating strains. So it's not something that will, you know, this week, it was fine. And next week there's an explosion. What we would see is gradually over, I think, several weeks to months, we'll see that strain replace the currently transmitted strains and, you know, it could, so we could end up going back up that the type of, of a wave that we just went through during December, January, that's my suspicion. And it, you know, it could be a little bit steeper when it comes a lot of that's when an, if it comes as a lot of it's dependent on us, because with face coverings, social distancing, and, and hand hygiene, hygiene, and all that we can, we can make the reproductive rate of even that [inaudible] less than one and still drive it down. And that's really our call to action for the community is to continue to do that, to buy time while we roll out the vaccine. And once we've done that and really suppressed the virus, then we'll have the benefit of the pool from which other variants might arise as smaller. Right? So just in terms of the numbers the less COVID that's out there two or three months from now, the less chances we'll get future variants like this coming up.

Speaker 2:

This is Kristin in the Joint Information Center. Thank you again for joining us today and for your, all of your questions, we are going to go ahead and wrap up. Please stay tuned for future media availabilities.