

## OHA media briefing (April 2, 2021)

Thank you, Governor Brown. Good morning, I'm Patrick Allen, Director of the Oregon Health Authority. Today I want to update you on our vaccination projections in light of the manufacturing interruptions for the Johnson & Johnson vaccine that the federal government announced earlier this week.

In addition, I'll give you the latest figures on vaccinations among older adults.

Then, Dr. Sidelinger will give you some troubling news about rising COVID-19 cases and what our model tells us we can expect in the weeks ahead.

Here are the three main points I want every Oregonian to know about the progress of our state's COVID-19 vaccination effort.

- **First:** Oregon will not delay our vaccine eligibility timelines, despite the disruption in Johnson & Johnson doses.
  - **On April 5**, all frontline workers, younger people with underlying health conditions and individuals living in a multigenerational household will be eligible to get vaccinated.
  - **No later than May 1**, we still plan to open vaccine eligibility to everyone 16 and older. We still intend to give counties the option to vaccinate everyone as early as April 26, if they show they will have appointments available and have made strong efforts to reach vulnerable Oregonians with vaccine.
  - However, we may need to temper our hopes of having enough doses to vaccinate all Oregonians over 16 by late May and bump that expectation back a couple of weeks.
- **Second:** Oregon continues to pass other states in the percentage of seniors who've been immunized. But — as we discussed last week — demand for the vaccines has plateaued among older adults. And in some counties, more seniors have waited to get immunized than have chosen to get vaccinated. This flat-lining demand should be a cause for concern for all Oregonians.
- **Third:** At the state level, we're taking steps to broaden eligibility and make sure no one is left behind.

- In turn, we want to encourage every Oregonian to do his or her part and get vaccinated when you become eligible.

Now, let's look at the numbers. As you see in this slide, as of today:

- 1,216,455 Oregonians have received at least one vaccination.
  - Overall, 28% of Oregonians have received at least one shot. The national average is 29%.
  - Oregon is averaging 30,302 doses administered each day.
- Oregon has completed full 2-dose vaccinations — or single dose Johnson & Johnson vaccinations — for 679,035 people. Overall, 17% of Oregonians have been fully vaccinated, which is above the national average of 16%.

**Now, let's look at where we stand in vaccinating seniors.** As you see in this slide, as of yesterday:

- 70% of all Oregon seniors have been vaccinated. That's more than 530,000 people 65 and older.
- In national rankings, Oregon is now 33rd in the nation in terms of the percentage of older adults who've been vaccinated.
- By age group, that includes:
  - 72% of people 80 and above.
  - 73% of people between 75 and 80.
  - 72% of people 70 to 74.
  - And 63% of people 65–69 years old.

But as this line graph shows on this slide, the pace of vaccinations among seniors has slowed. Throughout March, we were on track to vaccinate more than 3 in 4 seniors by early April.

Then, senior vaccinations slowed.

Not because older adults couldn't find appointments.

Not because Oregon vaccinations sites couldn't handle demand.

Not because other people with underlying health conditions or other eligible groups crowded them out.

It's because demand for vaccines is softening among some seniors, who have chosen to wait to wait for a vaccine, especially in less populous counties.

As of Tuesday:

- Fewer than 50% of older adults in seven Oregon counties had been vaccinated. Those counties are: Douglas, Gilliam, Grant, Lake, Malheur, Morrow and Umatilla.
  - The rate of growth in these counties has slackened. Over the past seven days, those counties have seen vaccinations increase at a rate of 2% or less — half the 4.75% rate of change statewide.
- In contrast, there were at least eight counties that exceeded the statewide average, where more than 7 in 10 seniors have been vaccinated. Those counties were: Benton, Deschutes, Hood River, Lane, Lincoln, Multnomah, Polk and Tillamook.
- We did have a coding issue that affected the way data were ascribed to Baker and Washington counties, which we are resolving. Those counties may also be at or above the state average.

Older adults are the people who are most vulnerable to the virus. We expect our senior vaccination rates will continue to grow. We'll continue to support county efforts to vaccinate seniors and focus our outreach on people 65 and older who have yet to get vaccinated, in communities where we know we can build more vaccine confidence.

However, I want to encourage every older adult who's waited to get vaccinated to make an appointment today.

- More than a million Oregonians, half of whom are seniors, have been vaccinated so far.
- We know the vaccines are very safe. I know many people are worried about side effects, but the COVID-19 case mortality rate among people 80 and older is 20% — or 1 in 5. The serious risk the virus poses to older adults far outweighs the temporary discomfort and disruption you might experience from getting a vaccine.

- And vaccines give older adults the freedom to see friends and family, attend in-person worship services, go out for dinner or make other choices about your life with less burden and worry.

If you have questions, talk to your health care provider or go to [covidvaccine.oregon.gov](https://covidvaccine.oregon.gov) for more information about vaccine safety and effectiveness.

Despite the leveling-off we've seen among older adults, we remain on track to have vaccinated 7 in 10 Oregon adults by the end of May.

**Now, let's look at our allocation forecast and see what the disruption in Johnson & Johnson doses will mean for Oregonians.**

Here's an updated projection of our vaccine supply through early June. As you can see in this slide, we've pushed back the timeframe when we expect we'd have enough doses to vaccinate all Oregonians who are 16 and older.

- The primary difference in this updated projection is the supply of the Johnson & Johnson vaccine.
  - Previously, we expected we would receive approximately 100,000 doses per week in April.
  - Based on what was reported this week, there is a potential we will not receive any additional Johnson & Johnson doses until the first week of May.
  - In other words, if that level of Johnson & Johnson supply disruption happens, it would equate to somewhere between 200,000–300,000 fewer prime doses than we previously expected.
  - That shortfall results in about an 8 or 9-day set-back in the timeframe when cumulative doses in Oregon would exceed the number of people who are eligible.
  - We are following up with CDC to get additional information about the Johnson & Johnson supply.
  - This change in supply DOES NOT change the fact that the Johnson & Johnson vaccine is safe. The quality control checks that are in place caught the issue prior to shipping

- For the week of April 5, we are expecting an increase in prime doses, which includes a one-week surge of 61,400 Johnson & Johnson vaccines in our state allocation (and another 2,000 to FQHCs).
  - In addition, we are expecting an additional 60,000 Johnson & Johnson doses to be sent to pharmacies through the federal retail pharmacy program
  - That total surge across all three vaccines raises our weekly total to over 275,000 prime doses next week.
  - However, we expect that total to drop back down to around 150,000 prime doses the following week and stay at that level until May.
  - The week of May 3, we expect to see our prime doses rebound to over 230,000 if Johnson & Johnson comes back on-line at forecasted amounts.

Once again, I want to emphasize that our vaccination progress depends on three factors: supply, demand and our capacity to vaccinate people. While we've seen unexpected ups and downs in the first 2 factors, our capacity continues to increase.

- Over the past week, our daily average of doses administered has increased by more than 3,000 doses per day to more than 30,000.
- We've also seen days in the past week in which Oregon vaccinators administered as many as 37,000 doses.
- As Governor Brown mentioned, the All4Oregon clinic at the Oregon Convention Center has vaccinated more than 8,000 people in one day. According to FEMA, the OCC has exceeded some of the largest FEMA mass vaccination sites across the country and it's among the highest performing sites in the nation.

**But this temporary Johnson & Johnson supply disruption isn't keeping us from looking for opportunities to make more people eligible sooner.** And it won't stop us from working to close disparities in vaccination rates, especially among our hardest-hit communities.

- As Governor Brown announced, we are expanding the types of underlying conditions that qualify for a vaccine, effective today. We're also expanding eligibility to family members of frontline workers.

- This slide shows the underlying conditions that now qualify for a vaccine:
  - Cancer
  - Chronic kidney disease
  - Chronic lung diseases, including COPD (chronic obstructive pulmonary disease)
  - Asthma (moderate-to-severe)
  - Interstitial lung disease
  - Cystic fibrosis
  - Pulmonary hypertension
  - Dementia or other neurological conditions
  - Diabetes (type 1 or type 2)
  - Down syndrome
  - Heart conditions (such as heart failure, coronary artery disease, cardiomyopathies or hypertension)
  - HIV infection, Immunocompromised state (weakened immune system)
  - Liver disease
  - Overweight and obesity (defined as body mass index (BMI) greater than 25 kg/m<sup>2</sup>)
  - Pregnancy
  - Sickle cell disease or thalassemia
  - Smoking, current or former
  - Solid organ or blood stem cell transplant
  - Stroke or cerebrovascular disease
  - Substance use disorder
- Expanding eligibility to families of frontline workers and people with a wider range of underlying conditions is important for two reasons:
  - **These groups are at greater risk than the general population.**
    - Aligning our list of qualifying underlying conditions with the CDC's expanded list captures a broader range of health conditions that could increase a person's chances of experiencing a severe case of COVID-19, or worse.
    - Most of the transmission we've seen in Oregon has been among family clusters. Short-circuiting family transmission protects loved ones of vulnerable front-line

workers, and in turn, helps keep the virus from being passed into the workplace by frontline workers exposed at home.

- **Prioritizing people in these categories will help reduce the racial and ethnic disparities we've seen in vaccination rates.** Communities of color face an unfair and disproportionate burden of chronic disease due to systemic racism. They're also disproportionately represented among frontline workers.
  - Expanding the circles of people eligible based on a health condition or their relationship to someone in a frontline worker role also helps protect the communities who've faced the worst effects of the pandemic.
- Finally, when we talk about vaccinating 35,000 people per day and millions of Oregonians by early June, we can't lose sight of the fact that every person who gets vaccinated is another individual who's protected from the risks of COVID-19 — and we need to find different ways to reach people no matter what barriers they face.
    - Governor Brown told you about the Morrow County effort to vaccinate migrant and seasonal farmworkers. As a follow-up, OHA is partnering with FEMA and Morrow and Malheur counties to hold a series of vaccine clinics in Boardman, Irrigon and Heppner from April 5–13, and in Malheur from April 14–15.
      - The goal is to administer 2,000 J&J vaccines using a FEMA mobile unit.
    - Lincoln County is sponsoring a clinic today and tomorrow in Newport, which is focused on reaching seafood, agricultural, fish processing and seasonal and migrant workers.
    - Their goal is to vaccinate 500 people in the next two days. The event will be ADA accessible and will have on-site interpretation as well.
  - Finally, I want to share the story of Clackamas County paramedic Amyjo Cook. On Wednesday, she was doing outreach to individuals experiencing houselessness and living in an encampment. While she was there, she offered COVID-19 vaccines to the people living in the encampment. That day, she vaccinated 12 people who were at-risk but might not otherwise have been able to get immunized.

- Her experience taught her that she'd need to take advantage of these kinds of moments to gain the best results. Next, she plans to drop in at a local shelter during lunch and shower times and visit the surrounding area to reach others who want the COVID-19 vaccine.

This kind of outreach can take a little time, but it's vitally important to helping us reach community immunity.

I want to thank all Oregon vaccinators who are working as hard as Amyjo, the teams in Morrow, Malheur and Lincoln counties and at big mass vaccination clinics like the Oregon Convention Center.

With every vaccine you administer, you are saving lives and bringing us one step closer to ending the pandemic and returning to normal life.

And for everyone who hasn't been immunized, I want to once again encourage you to get the facts. Make a plan to get vaccinated. Go to [covidvaccine.oregon.gov](https://covidvaccine.oregon.gov) to find out when you're eligible, register for notifications and get the latest information about vaccine events in your area.

And now, let me turn it over to Dr. Sidelinger.

**Dr. Dean Sidelinger:**

Thank you, Governor Brown. Before I discuss the most recent COVID-19 modeling, let me first provide a summary of where things stand with the pandemic in Oregon.

As of today, OHA has reported 166,013 cases of COVID-19 in Oregon. We continue to see a general trend of increasing daily cases, along with virus-related hospitalizations.

Hospitalizations are, however, significantly off their 2021 peak levels. There are 67% fewer virus-stricken patients in our hospitals since Jan. 1, even though hospital beds occupied by Oregonians with COVID-19 are increasing this week.

According to the most recent report covering the week of March 22 through March 28, OHA reported 10 deaths — the lowest weekly total since last June. To

date, there have been 2,385 COVID-19 related deaths in Oregon. My thoughts go out to everyone who has experienced a loss to COVID-19.

Counties across the state are seeing reduced risk levels and are opening more activities to Oregonians just as spring arrives. But, with rising spread of disease, more counties may see an increase in their risk levels in the coming weeks.

More of our friends, family, colleagues and neighbors are getting vaccinated every week. While vaccinations are still increasing, we all have the tools to protect ourselves and our loved ones — wearing masks, keeping our distance and limiting higher risk indoor gatherings. This is not forever — just for now.

Let me turn my attention to variants of concern. Since February 3, OHA has been reporting a cumulative count of each variant of concern on its Tableau dashboard. These counts have been based on information reported directly to public health authorities by laboratory partners.

On March 16, CDC reclassified the B.1.427 and B.1.429 variants as “variants of concern.” These variants have been circulating in Oregon since late 2020 and had not been previously reportable. OHA has reviewed historical data in the open-source sequencing data platform GISAID and has identified more than 190 B.1.427 and B.1.429 variants to date in Oregon.

In order to provide a comprehensive picture of variant circulation in Oregon, OHA will begin updating its variant of concern counts using GISAID data. This will allow for rapid reporting of historical data whenever CDC definitions of variants of concern are updated. The dashboard will be updated with GISAID data today and it will be updated weekly moving forward.

Oregon will continue to ask all laboratory partners to report all variants of concern (B.1.1.7, B.1.351, P.1, B.1.427 and B.1.429) and variants of interest (B.1.525, B.1.526, P.2) to public health authorities immediately in order to inform case investigation and contact tracing.

- The most recent COVID-19 model, which I’ll discuss in more detail later, shows an accelerated spread of the virus consistent with the pessimistic scenario outlined three weeks ago.

- We are seeing lately an increase in daily cases and a corresponding uptick in COVID-19 hospitalizations.
  - For the month of March, hospitalizations have increased by 17%.
  - Our rolling 7-day average has increased by 22%, to 392 daily cases, as of yesterday.
- In our most recent Weekly Report, OHA reported 2,456 new daily cases of COVID-19 — a 28% increase over the previous week.
- And the percentage of positive tests climbed to 3.7%.

These are indications that, despite the progress we've made, the virus appears to be rebounding. At this point in the pandemic, we know this much: COVID-19 is a resilient enemy. But we also know that Oregonians have the tools to fight this virus. We did so last spring, summer and winter. We will prevail here as well. Thank you for continuing the fight — for now, while we offer vaccines to all adults — not forever.

It is tempting as we move closer to the finish line, to fall away from the public health interventions.

We must not let that happen. We all possess the tools to have the power to slow the virus by continuing to wear masks, gather more safely and keep our distance. And, of course, by getting vaccinated as soon as you are eligible and when it's your turn. Thank you for continuing to take these steps to protect yourselves, your families and loved ones.

**Let me add another note of caution:** Just because we're vaccinated doesn't mean we can return to pre-pandemic life just yet. Until we see enough Oregonians vaccinated to stop the spread, we must continue with those preventive measures.

We cannot cede our momentum to the virus.

Among the welcoming wave of the re-openings, we are seeing many communities return to in-person classroom instruction in schools across Oregon. Declines in daily cases and in positive testing for COVID-19 have allowed for greater access for our school-aged students.

In-person instruction is important for the well-being and mental health of our students.

OHA has worked closely with the Oregon Department of Education to develop science-based protocols within the Ready Schools, Safe Learners guidance, including use of face coverings, class cohorts and — more recently — changes to the physical distancing requirements in line with data about effectiveness of control measures in schools.

OHA also worked with ODE to prioritize vaccinations for educators and school staff.

Studies from around the world and experience throughout the country show schools are not a driver of COVID-19 transmission. Though with increased cases in the community, we will see more cases who may attend school.

However, our case investigations suggest that peripheral activities are contributing to outbreaks.

OHA has reported 386 school-associated cases between January and March. Of that number, 218 had only one case on campus, and 168 outbreaks had two or more cases.

A closer examination shows that, of those outbreaks with two or more cases, transmission within the school has been identified in only 30 schools. Meaning that, of the schools identified with having cases of COVID-19 in schools between January and March 2021, only 7.75% were found to have transmission at school. More than half — 56% — never extended beyond the initial case.

Here is one example:

A high school student athlete developed mild symptoms without realizing they had the virus. The student continued to attend practice and participated in a travel game.

Later, the student tested positive and several other teammates became symptomatic. The outbreak has now extended to the coaching staff and to other sports at the high school because several of the students play multiple sports.

There are currently 15 cases associated with this outbreak.

Here's another one:

Approximately 80 people, mostly students, attended a social gathering where there were also six infectious people in attendance. This outbreak resulted in 35 first generation cases and a total of 30 second generation cases.

The Local Public Health Authority noted the efficiency of spread was most likely due to the people not wearing masks and gathering in close quarters indoors.

Another contributing activity cited in this outbreak was riding in cars, along with eating lunch and socializing in a vehicle. There were 53 student cases that spread across four high schools.

With adherence to the public health interventions and other guidelines within RSSL schools in Oregon can be open and operate safely for students and staff in counties where risk levels allow. Spread of COVID-19 is rarely happening in classrooms or structured school activities, but rather activities around schools.

Finally, let me turn to the new COVID-19 forecast.

The report shows a considerable increase in transmission through mid-March with an estimated reproduction rate of 1.12. That means that every person infected with the virus is spreading it to more than one additional person.

If that level of transmission continues as is, we can expect to see new daily hospitalizations increase to 17 for the two-week period between April 7 and April 20.

If the more contagious variants take hold or if we relax our vigilance and transmission increases by 20% over the same period, daily hospitalizations will increase to 27.

However, if Oregonians can stay the course and do what they've done before — flatten the curve — and transmission drops by 20%, then we would see a decline in new daily hospitalizations to 11.

We're all tired of COVID-19. We crave a return to seeing friends and family more, traveling and getting back to the activities we love. As this latest model shows, we still have work to do. We must remain vigilant. Experience has shown us that small setbacks can have huge consequences.

We, in Oregon, have made tremendous progress in turning the tide of COVID-19. These actions are for now — not forever. Let's not squander our hard-won progress. Thank you.

And with that, I'll turn things back over to Governor Brown.

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