

COVID-19 VACCINE ADVISORY COMMITTEE MEETING

Thursday, January 28, 2021, 10:00 am-12:00 pm

Join ZoomGov Meeting

<https://www.zoomgov.com/j/1608542261?pwd=VEZ0L1Q5aWgwR2p4YVBCSGJXQm9tUT09>

Meeting ID: 160 854 2261

Passcode: 350809

One tap mobile

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Meeting objectives:

- Discuss sequencing based on equity, population sizes and anticipated vaccine allocations

Welcome

Nhu To-Haynes,
Facilitator

Sequencing across priorities

- Discuss whether the committee would like to further define or sequence based on available vaccine
- Committee recommendation

Nhu To-Haynes,
Facilitator

Committee
members

Committee next steps and closing

Nhu To-Haynes,
Facilitator

Everyone has a right to know about and use Oregon Health Authority (OHA) programs and services. OHA provides free help. Some examples of the free help OHA can provide are:

- Sign language and spoken language interpreters
- Written materials in other languages
- Braille
- Large print
- Audio and other formats

If you need help or have questions, please contact COVID-19 Vaccine Advisory Committee staff at 971-673-1222, or covid.vaccineadvisory@dhsoha.state.or.us or 711 TTY.

Reducing Health Inequities: Connections of Risks and Structural Racism

Prioritize people who experience the kinds of risks that lead to adverse health outcomes

- Structural racism has created systems and conditions that place Black, Indigenous, People of Color (BIPOC) and Tribal communities into the kinds of jobs that put people at greater risk, into the kinds of housing that puts people at greater risk, into health problems that put people at higher risk, and creates barriers to accessible and adequate healthcare.
- COVID-19 has exploited those injustices and the kinds of vulnerabilities that racism creates

Reducing Health Inequities: Using Data to Lead with Equity

Based on data, prioritize on individuals and groups that experience the highest COVID-19 rates, risks of exposure and/or risks of severe illness or death. These may include but are not limited to:

- Those who work in occupations putting them at an increased risk
- Those whose living situations put them at an increased risk
- Those who are from groups with health inequities (COVID-19 and underlying health conditions) putting them at increased risk
- Those with underlying health conditions putting them at an increased risk
- Those who live in areas with increased risks or decreased access to health services

COVID-19 VACCINE ADVISORY COMMITTEE RECOMMENDATIONS - IMPLEMENTATION PLAN DRAFT

January 25, 2021

Sequence	Priority population	Estimated population size	Discussion and action items	Resource or reference document
	<p>BIPOC communities and especially those disproportionately impacted by COVID-19 (Latino/a/x; Black/African American; Pacific Islander; Indigenous, Tribal and Urban-based Natives)</p> <p>Focus on refugees</p>	805,881	Ensure culturally responsive vaccine access in communities, in primary languages	JAMA article
	Adults 16-64 with underlying health conditions	735,256 (*UPDATED: includes heart disease, cancer, stroke, kidney disease, diabetes, COPD and asthma)	Adopt parameters for underlying conditions (e.g., CDC recommendations or a subset)	List of chronic conditions as defined by the CDC
	Front-line workers who have been working throughout the pandemic to keep society running and who cannot work from home	483,413	Define front-line and critical workers with some high-level specificity	<p>CDC Workplaces, Businesses and Essential Services</p> <p>California's List of Essential Workforce by sector</p> <p>Essential Critical Infrastructure workers</p>

	Adults and youth in custody 16 years and older (must be included in 1b)	13,970	Consider operational efficiencies for vaccinating all eligible AICs/YICs at the same time	
	Multi-generational households		Identify locations for low income congregate housing	
	People living in low income and congregate senior housing	12,567	Determine if this group is intended to include sheltered populations	

Workplace and Outbreak data and information

Shimi Sharief, MD MPH



COVID-19 in Oregon Adults in Custody (AIC)

- **Confirmed AIC Positive Cases:** 3,280
Confirmed AIC Recoveries: 2,697
- **AIC COVID-19 deaths:** 39
- **Confirmed Staff Positive Cases:** 782
Confirmed Staff Recoveries: 677
- **All but 2 facilities** are currently experiencing an outbreak.

<https://www.oregon.gov/doc/covid19/Pages/covid19-tracking.aspx>

Oregon COVID-19 Outbreaks by Location, January 2021

Highlighted exposure sites indicate settings not already potentially prioritized for COVID-19 vaccine.

Exposure Site	Number of Outbreaks	%	Notes
Nursing Home/LTC/ALC	986	22.9%	
Workplace	512	11.9%	Broad category that includes retail, banks, etc.
K-12 Schools	401	9.3%	
Child DCC	254	5.9%	
Farm/dairy	232	5.4%	Includes nurseries, seed farms, produce, meat, dairy
Food processing	216	5.0%	Frozen foods, meat processing, bakeries, beverages
Factory/manufacturing	213	4.9%	Tech, timber, warehouses, woodworking, metal work
Restaurant/Bar	198	4.6%	
Social gathering	142	3.3%	
Outpatient clinic	135	3.1%	
Other congregate setting	119	2.8%	
Construction/sub-contractor	107	2.5%	Plumbers, roofers, general contractors
Higher Ed	107	2.5%	Dorms, fraternities/sororities, sports
Grocery store	84	2.0%	
Private Home	82	1.9%	
Religious facility	81	1.9%	
Retirement/independent living facility	81	1.9%	

Hospital	66	1.5%	
Prison or jail	64	1.5%	
Shelter/transitional housing	59	1.4%	
Fire Department/Camp/EMS	35	0.8%	
Home health	24	0.6%	
Utility	23	0.5%	
Hotel	17	0.4%	
Sports team/Rec sports	15	0.3%	Includes gyms
Learning Pod	13	0.3%	
Police Department	13	0.3%	
Camp	12	0.3%	
Other	7	0.2%	
Dialysis center	3	0.1%	
Ship	2	0.0%	
Reception facility	1	0.0%	
Grand Total	4304	100.0%	

Source: Oregon Health Authority

Summary of results from California study on deaths in essential work sectors

Excess deaths of 10,047 (95% PI: 9,229–10,879) among Californians 18–65 years of age

- Relatively large numbers of excess deaths were recorded among workers in the **facilities (chemical, energy and water) sector (1,681; 95% PI: 1,447–1,919)**
- And **transportation/logistics sector (1,542; 95% PI: 1,350–1,738).**

Summary of results from California study on deaths in essential work sectors

Mortality increased during the pandemic in these sectors:

- **39%** among **food/agriculture workers**
- **28%** among **transportation/logistics** workers
- **27%** among **facilities** workers
- **23%** among **manufacturing workers**.

Race and ethnicity among California workers

- **Latino/a/x** Californians experienced a 36% increase in mortality
 - 59% increase among Latino **food/agriculture workers**.
- **Black** Californians experienced a 28% increase in mortality
 - 36% increase for Black **retail** workers
- **Asian/Pacific Islander** Californians experienced an 18% increase
 - 40% increase among Asian **healthcare** workers.
- **White** working-age Californians increased by 6%
 - 16% increase among White **food/agriculture** workers