



COVID-19 VACCINE TASK FORCE

COVID-19 Vaccine Task Force Meeting #8

March 24, 2021

10:30AM – 12:00PM

Meeting Minutes

Task Force Committee Members Attendees

Emergency Services

Vince Pierucci, EMS

Chief Jonathan Stornetta, Fire

Sheriff Ian Parkinson, Law Enforcement

Bioethicist

Luis Ochoa, MD

Community Health Centers

Stephen Clarke, MD

Pharmacies

Maronee Hollister, PharmD

Long Term Care

Karen Jones, Ombudsman, SLO County

Business Community

Kristen Yetter, Promega Biosciences

Occupational Health

Brian Roberts, MD, MedStop

Hospitals

Mark Lisa, Tenet

Health Insurers

Paul Jaconette, CenCal - Absent

Education

Dr. James Brescia, County Office of Education

Courtney Kienow, Cal Poly-Higher Education

Child Care

Raechelle Bowlay, CCRC

Corrections

Christy Mulkerin, MD, Jail CMO

Religious Leaders

Pastor Tim Thuele

Rabbi Janice Mehring

Monsignor Ed Callahan - Absent

Organizations serving racial and ethnic groups

Erica Ruvalcaba-Heredia, Latinx

Veronica Avery, NAACP

Organizations serving people with disabilities

Diva Johnson, Tri-Counties Regional Center - Absent

Organizations serving people with limited English proficiency

Irebid Gilbert, Herencia Indigena

Community Representatives

Mary Jean Sage, Health Commission

Betsy Whitaker, Med Anthropologist

Hospice

Kim Chartrand, ASPC

Homeless Serving Organizations

Janna Nichols

Voluntary Organizations

[Rick London, United Way - Absent](#)

Behavioral Health

Jill Bolster-White, Transitions Mental Health Association

Utilities

Samantha Caldwell, PG&E Diablo Canyon, Energy

Bill Robeson, City of Arroyo Grande Water/Wastewater/Trash

Agriculture

Brent Burchett, Farm Bureau

Transportation

Geoff Straw, SLORTA

(Tania Arnold, SLORTA)

Welcome and Public Comment Review

Jen Miller welcomed task force members and reviewed the public comments submitted through the “Share your Input” button at the [recoverslo.org website](#). She reminded members that it will be three weeks until the next meeting, as meetings are the second and fourth Wednesdays of the month. As the decision-making role of the Task Force winds down, there is continued need for the task force to focus on sharing messaging to increase vaccine acceptance among the groups they serve.

Vaccine Advocacy

Public Comment summary 3.8.21 – 3.22.21

Total Unique Comments

| Quantity | Comment Type |
|-----------------|---------------------|
| 87 | All |

Vaccine Registration & Logistics (41%)

| Quantity | Comment Type |
|-----------------|--|
| 8 | Comments or questions on vaccination logistics and appointments. |
| 6 | Comments or questions about 2nd dose appointments |
| 4 | Comments/questions feedback on RecoverSLO.org (or what information should be relayed by the County). |
| 3 | Questions and comments on how vaccine data is reported. |
| 3 | Elderly community members sharing concerns with driving/transportation to the vaccination clinics. |

| | |
|---|---|
| 4 | Questions or comments on local vaccine supply/availability/allocation. |
| 2 | Feedback or questions on how the vaccine clinics are run. |
| 2 | Seeking medical advice regarding side effects from the 1st dose / Seeking guidance regarding the 2nd dose after a reaction or side effects from the 1st dose. |
| 1 | Feedback or criticisms of the self-attestation process. |
| 1 | Feedback or questions on expanding vaccine clinic hours. |
| 1 | Comments or questions about vaccine registration process (struggling with telephone line, how to confirm/cancel). |

Occupation-Related Prioritization (34%)

| Quantity | Comment Type |
|----------|---|
| 9 | Organizations advocating to prioritize their staff or volunteers for eligibility and/or to be placed on the "End of Day" list. <i>Templeton Community Services District, Sycamore Mineral Springs, Boutique Hotel Collection, SeaVenture Beach Hotel & Restaurant, The Cliffs Hotel and Spa, Althouse and Meade Inc., City of Paso Robles Recreation Services, County Park Rangers, USPS</i> |
| 2 | Advocating to prioritize childcare personnel or informal caregiver. |
| 2 | Advocating for grocery store employees. |
| 1 | Advocating to prioritize teachers and school personnel (teach in person or work around students). |
| 1 | Advocating for those who work in transportation. |
| 1 | Advocating to prioritize veterinarians. |
| 1 | Advocating for those with in-person roles in the judicial system (judges, lawyers, court employees). |
| 1 | Advocating to prioritize city employees. |
| 1 | Advocating to prioritize mechanics/workshop employees. |
| 5 | Advocating for those who work in the construction industry. |
| 4 | Advocating for coaches of youth sports. |
| 1 | Explaining profession and questioning when/if they are eligible for vaccination. |

Age & Underlying Conditions (15%)

| Quantity | Comment Type |
|----------|--|
| 3 | Advocating to expand the high-risk groups based on age (50+, 55+, 60+). |
| 2 | Sharing one's own underlying condition and asking if/when they will be eligible. |
| 1 | Questions about proving eligibility for those who are high-risk or disabled. |
| 1 | Advocating to prioritize the immunocompromised (all ages). |
| 1 | Advocating to expand the list of eligible high-risk groups (Type 1 Diabetes). |
| 1 | Questions regarding vaccine appointments after the State's March 15th mark for those with underlying conditions or disabilities. |
| 1 | Questions or comments on age increments ("I'm 64 and a half, I should be eligible"). |

Other Comments (10%)

| Quantity | Comment Type |
|-----------------|--|
| 7 | Praise and thanks. |
| 1 | Nonspecific feedback and frustration. |
| 1 | Questions about the vaccine or the COVID 19 virus. |

Vaccine Task Force Communications Update - Tara Kennon, Public Information Officer

Tara expressed appreciation to Task Force members for their continued messaging to their networks. While the Public Information team has been largely focused on dispelling myths and rumors, the messaging is now shifting to address vaccine hesitancy. Tara called upon task force members to help spread the word and continue to be the trusted messengers.

COVID-19 Status in SLO County as of 3/23 - Dr. Borenstein

Case numbers have leveled out since the beginning of the month and are hovering at about the level they were in early November. The County remains firmly in the Red Tier with recent changes to the State’s metric calculations in the Blueprint for a Safer Economy. Had the State not made recent changes, the County would have been in purple for the adjusted case count (7).

Vaccine Allocation and Distribution

To date, more than 111,000 doses have been administered in SLO County. Over 78,000 of those have been administered by the County, and the remaining doses have been administered by hospitals, pharmacies, the federal pharmacy partnership for long term care facilities and CHC. Over 32,000 SLO County residents have been fully vaccinated by Public Health.

New pharmacies are coming on board and getting federal allocations which increases the amount of vaccine being made available in SLO County. For this reason, it is predicted that 17,000-25,000 doses are being administered to SLO County residents each week. Therefore, the County expanded eligibility to those age 50+ sooner than expected. With new providers receiving allocation, the ratio of vaccine administration has shifted from near 75% of vaccines being administered by the County to approx. 66%. The remaining 33% of doses are administered by other providers; this is a shift in a positive direction.

Rates of vaccination by age is a concern. Only 55% of the 75+ population has been vaccinated, therefore approx. 12,000 people in this age group have not been vaccinated. 51% of people age 65-74 have been at least partially vaccinated. Dr. Borenstein expressed concern that if rates of vaccine acceptance do not increase, the County will not reach herd immunity.

The supply chain seems to be strong, though next week there may be a decrease due to a past allocation error at the State. The County received Johnson and Johnson 3 weeks ago and has used or ear-marked all of those doses and does not expect to receive more in the next two weeks. This could pose a challenge for farm worker vaccinations, jail inmates and mobile outreach.

In an effort to serve those most impacted by COVID-19, a special farm worker vaccination event was held last Friday for 640+ people from the agriculture sector, predominantly from the Latinx and

Indigenous communities. More than 100% of people scheduled came to get their vaccine. Over the weekend, family members and friends of the agriculture workers vaccinated on Friday called the Phone Assistance Center to learn how to schedule their own appointments – a good sign that it was a positive experience for the agriculture sector and positively influenced other Latinx community members to get vaccinated. The farm worker vaccination event was a collaboration with the SLO County Farm Bureau, many local agriculture businesses, the Promotores Collaborative, Herencia Indigena and many other partners who have been meeting weekly as part of the “Farm Worker Outreach Task Force.” Future farm worker events will be held every Friday afternoon, alternating between north and south county. The Janssen doses will continue to be used for hard-to-reach groups, including agriculture workers, as supply allows.

Current Eligibility and Local Considerations

Currently, those age 50 and over are eligible, plus those included in previous eligibility groups: health care workers, people who work in education, child care, food and agriculture, emergency services, public transit, janitorial services including hotel housekeeping, those who serve as informal care givers, people who live or work in a homeless shelter or behavioral health facility, and finally, those between the ages of 16-64 at high risk due to certain severe medical conditions or high-risk disabilities (physical, developmental, behavioral).

Since expanding eligibility to the 50+ age group on Monday, 7,000 individuals have signed up in the registry. The County expected more people in this age group would have entered the registry given that the total group size is 50,000+. Some of those new registrants have already been able to get appointments this week due to cancellations. 9,000 people will get appointments for next week.

Dr. Borenstein discussed projections about herd immunity in the County, emphasizing that these are rough estimations. Currently, with a total population of about 280,000, with 230,000 over age 18, there are currently about 40,000 fully vaccinated. In addition, there are more than 20,000 who have tested positive for COVID-19, thus assumed to have immunity. It is unknown how long this immunity lasts, but the CDC projects it is many months. CDPH studied serum from blood banks to detect antibodies. In the Central Coast region, about 30% of specimens had COVID antibodies. With all numbers considered, it is estimated that the County's current herd immunity among adults is approx. 45%, or 35%-40% of the total population. The goal for full herd immunity is at least 80%.

Discussion

Discussion ensued about when to open to younger age groups, whether to expand eligibility to all 16+ or to do so in smaller increments, and whether to prioritize members of previously eligible groups over newly eligible groups because they have higher risk of serious outcomes.

Dr. Borenstein presented several considerations for expanding eligibility and took some informal polls. In general, there was support of the Public Health Department making determinations about when to expand eligibility, based on supply, demand, and other factors influencing operations. The task force was also in support of prioritizing people in the registry, maintaining the risk-based approach the task force has been using to make eligibility recommendations. Ultimately, the task force members were supportive of expanding eligibility to the 30 – 49 age group next, followed by the 16 - 29 age group.

The task force also was in support of including all in the judicial system in the group of individuals currently eligible. Sheriff Parkinson offered to have the additional staff receive their vaccine through the clinic near the jail.

There was discussion about the ethics of the use of incentives to try to drive higher vaccination uptake. Most voices (including Dr. Ochoa, neonatologist serving as hospital bioethicist) felt that, despite the fact that the currently used vaccinations have been approved under a federal Emergency Use Authorization, non-monetary incentives are appropriate as the vaccines are in mainstream use and incentives are frequently used in healthcare and community settings to promote utilization of services.

Closing and Upcoming Events

Next meetings (2nd and 4th Wednesdays of the month):

Next meeting is in three weeks.

- April 14, 2021 10:30AM – 12:00PM
- April 28, 2021 10:30AM – 12:00PM
- May 12, 2021 10:30AM – 12:00PM

Future meetings TBD.

Meeting notes, slides, and public comment form available at
<https://www.recover slo.org/en/slo-county-vaccine-taskforce.aspx>

Adjourned at 12:00pm.

Questions and Comment from Chat

Pop ups/other sites

Q: Janna Nichols: Community Pop-Ups? San Miguel and Shandon, for example?

Q: Mark Lisa, Tenet Health Care: Pop up in San Miguel or North Paso...

A: Jen Miller: YES! Coming soon. Working with CHC on this.

A: Steve Clarke, Dr Steve Clarke, CHCCC, Med Director: CHCCC is very willing to work with communities like San Miguel and others like it. We have a clinic there and have a trusted relationship. We are in talks with SLO PHD to coordinate. Unfortunately, CHC's around the country are being capped through our Federal (HRSA) allotment. Public Health may be able to help provide vaccine and CHC can provide the staffing and we can all provide outreach and promotion.

Q: Janna Nichols: Can we organize the hospitality industry through the BID's or VCB, as the team that organized with farm workers? Sundays?

A: Kris Yetter, Promega Biosciences, representing business: Hey Janna, I reached out to the BID's and visit SLO regarding hospitality workers at Jen's request due to the number of comments from that group. A pop up in targeted areas might help.

Q: Jill Bolster-White, TMHA: TMHA hopes to host sites (High St in SLO, Wellness Center in Atascadero and Growing Grounds in SLO) for vaccine clinics for folks who are TMHA clients as well as are served by other nonprofits serving a similar population.

Opening up eligibility/registration

Q: Janna Nichols: What is the waiting time for those who are registered?

A: Jen Miller: Approx. 1.5wks or less

Q: Veronica Avery, NAACP Health Chair: Are incarcerated folks included in this congregate settings group (As we see with un-homed folks)?

A: Jen Miller: Yes, we would like to use J&J for inmates since many won't be in the jail by the time they need 2nd dose. We need more J&J allocation.

A: Christy Mulkerin: @Veronica we did approve incarcerated people in the Jail at the last meeting. We are implementing our plan now. We had hoped to get J&J but the supply to the County didn't come

Q: Kris Yetter: Where do essential businesses fall in this priority?

A: @Kris, essential businesses that are not included in the current occupation sectors that are eligible have been eliminated and they have instead shifted to an age-based approach, not occupation sector. More on that at recoverslo.org/vaccines.

- Kim Chartrand: I think being able to vaccinate all 16 and older is important because we can allow those people who are more mobile/social and tend to congregate to become vaccinated and avoid super spreader events (like spring break type instances...)
- Janna Nichols: Open it up to everyone, and let's move to the "why do it" message. Three weeks to next meeting? A lot can change in three weeks.
- Tim Theule: Open it up. I think vaccination supply will continue to increase.
- Luis F Ochoa: Agreed
- Jill Bolster-White: I think we should wait to open it up to the next tier until next week - we JUST opened it up to over age 50
- Steve Clarke: I'm worried that opening up to all means a gigantic amount of demand for incredibly limited supply.
- Mary Jean Sage: I'm with Janna & Karen; open it up to all.

- Elizabeth (Betsy) Whitaker: Can we expect supply to increase over the next several weeks? If not, it might be overwhelming to open it up to all ages. Maybe better to split them and go with 30-49 first
- Janna Nichols: I suggest we let the supply and vaccine rate in the next three weeks dictate the process. If there is an uptick of the 50's perhaps wait, but if we don't see an uptick, then open it up?

Prioritization within the Registry

- Janna Nichols: Yes, please continue to prioritize based on risk factor in the registry
- Elizabeth (Betsy) Whitaker, PhD, community representative: I agree, keep prioritizing by age
- James Brescia | County Superintendent of Schools: Agree, the risk factors should be a priority.
- Karen Jones, LTC Ombudsman Services: I agree with Janna for prioritizing the registry for persons by age and risk factors but also open up to everyone, so we take advantage of getting the vaccine to all who want it.
- James Brescia: Open up to the rest with prioritization for those with risk factors if shortages occur.
- Janice Mehring: I say open it up as long as SLOCPH can prioritize according to risk within the system
- Veronica Avery: Can we wait a week to open it up to all and then still continue to prioritize by age on your end of the registry.
- Tim Theule: Agree. Move older to the front of the line!
- Jill Bolster-White: I have seen some of our front-line staff change their minds and get the vaccine after initially balking - that is why I support moving people within priority groups over a healthy 52-year-old
- Kris Yetter: I support the County prioritizing appointments based on risk.
- Steve Clarke: I'm in favor of opening up as long as we can prioritize the 16-50 group with serious medical conditions. That makes sense, Penny.
- Jill Bolster-White: I agree with Steve about prioritizing the younger group.

Q: Brian Roberts, MD Med Stop Urgent Care SLO, Occupational Medicine: If the "system" could in the background prioritize the applicants in the order of every decision we have made ex. HCW > 75+ > 65+ > Medical Issues > Special groups > 50+ healthy than I say open to everyone. We still prioritize and yet let everyone have a chance based on demand.

A: Jen Miller: Yes Dr. Roberts, we are prioritizing by risk internally, within the registry

Q: Geoff Straw: To be clear: adding a group doesn't prioritize its members -- it only puts them in the pool, right?

A: Jen Miller: Yes, Geoff

Incentives/Lack of Urgency to get Vaccine

Q: Elizabeth (Betsy) Whitaker: Regarding community transmission, I have read that at the national level it is higher in the 30-49 age group than the 18-29 age group. Is that not the case in our county?

A: Jen Miller: We aren't sure

- Janna Nichols: I will want to be offering incentives for some of our hard to reach or more resistant groups.
- Tim Theule: Local shopping gift cards!
- James Brescia: If we are considering incentive dialogue, I recommend we ask the travel agency to provide some talking points on the travel vaccination cards as a PR point for getting vaccinated.

- Geoff Straw: I hope the State's recent additional 80 hours of employee COVID-19 sick leave doesn't result in some employees resisting getting jabbed.
- Tim Theule: I feel that personally a bit as an over 50 dude. My wife has been asking, "When are you going to get vaccinated?" I don't feel the urgency all the sudden.
- Elizabeth (Betsy) Whitaker: What kind of incentives would work with the 75+ age group?
- Karen Jones: Care facilities around the nation used incentives for their staff to encourage vaccine acceptance. The trick is to make the incentive enticing but not so enticing that people feel forced to take the vaccine.
- Geoff Straw: We offered up to 24 hrs additional leave after 1st shot and p to 40 hours after 2nd shot so that our employees would not fear losing work hours due to the "malaise" some experience.
- James Brescia: Yes, we are providing time for staff to take time off for vaccinations and after if any side effects.
- Jill Bolster-White: We offer incentives to our clients, particularly homeless clients, from time to time, and it makes a difference

16-17 Year Old

Q: Brent Burchett: Question - For 16 and 17 year olds in an eligible industry category, does the County have the ability to get them an appointment specifically for a Pfizer vaccine?

A: Jen Miller: Yes, if they register online, there is a way to filter by age and assign appointments based on whether Pfizer is available. We do not have Pfizer available at the farm worker PODs, so the 16-17 year old ag workers will need to get the vaccine through a different channel. Let's trouble shoot that process offline?

- James Brescia: Before opening up to the 16-18 year old individuals message the permission aspects.
- Maronee Hollister: Can the registry segregate the younger crowd to get certain vaccines? I think permission slips, etc will take work in pharmacies
- Tim Theule: 16-18 year olds are not that interested in getting vaccinated, IMHO. . .

Other comments

- Janna Nichols: Any anticipated change, increase, in doses? Is it likely to continue to increase?
- Janna Nichols: Time to change the efforts and messaging to "why you should get it." I think the time has come to change the focus to why people are resistant. Let's open it up and narrow our messaging to the "why." Time to change the message
- Geoff Straw, SLO RTA: We provided a pin stating "COVID-19 VACCINATED" that features our logo to our employees who were jabbed. We hope that it will help our bus passengers feel more comfortable riding again (and put pressure on those who have chosen not to be vaccinated!).