



COVID-19 Response + Recovery Cross- Functional Team Update

1.5.2021

Updated 1.4.2020

Table of Contents

- 1. Overview (Tommy Gonzalez)**
- 2. City Attorney's Office Update (Karla Nieman)**
 - a) Governor Abbott's Proclamations & Orders**
 - b) Emergency Ordinances**
 - c) Texas Eviction Diversion Program**
- 3. CFT Operations (Chief Mario D'Agostino/ Angela Mora)**
- 4. Team Lead Reports:**
 - 1. Health Focus (Hector Ocaranza, M.D.)**
 - a. Community Task Force Recommendations Update**



1. Overview

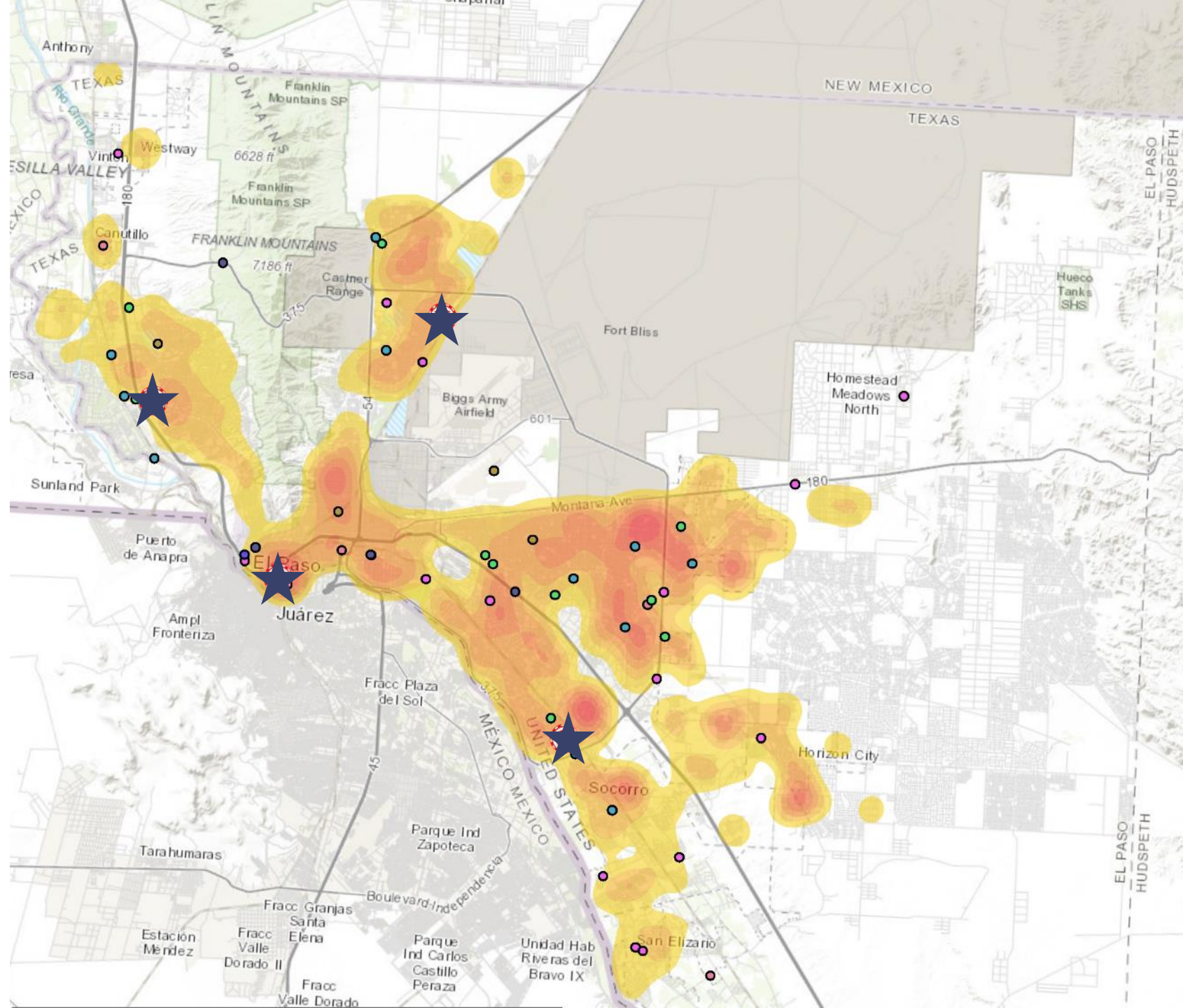
Tommy Gonzalez



Overview

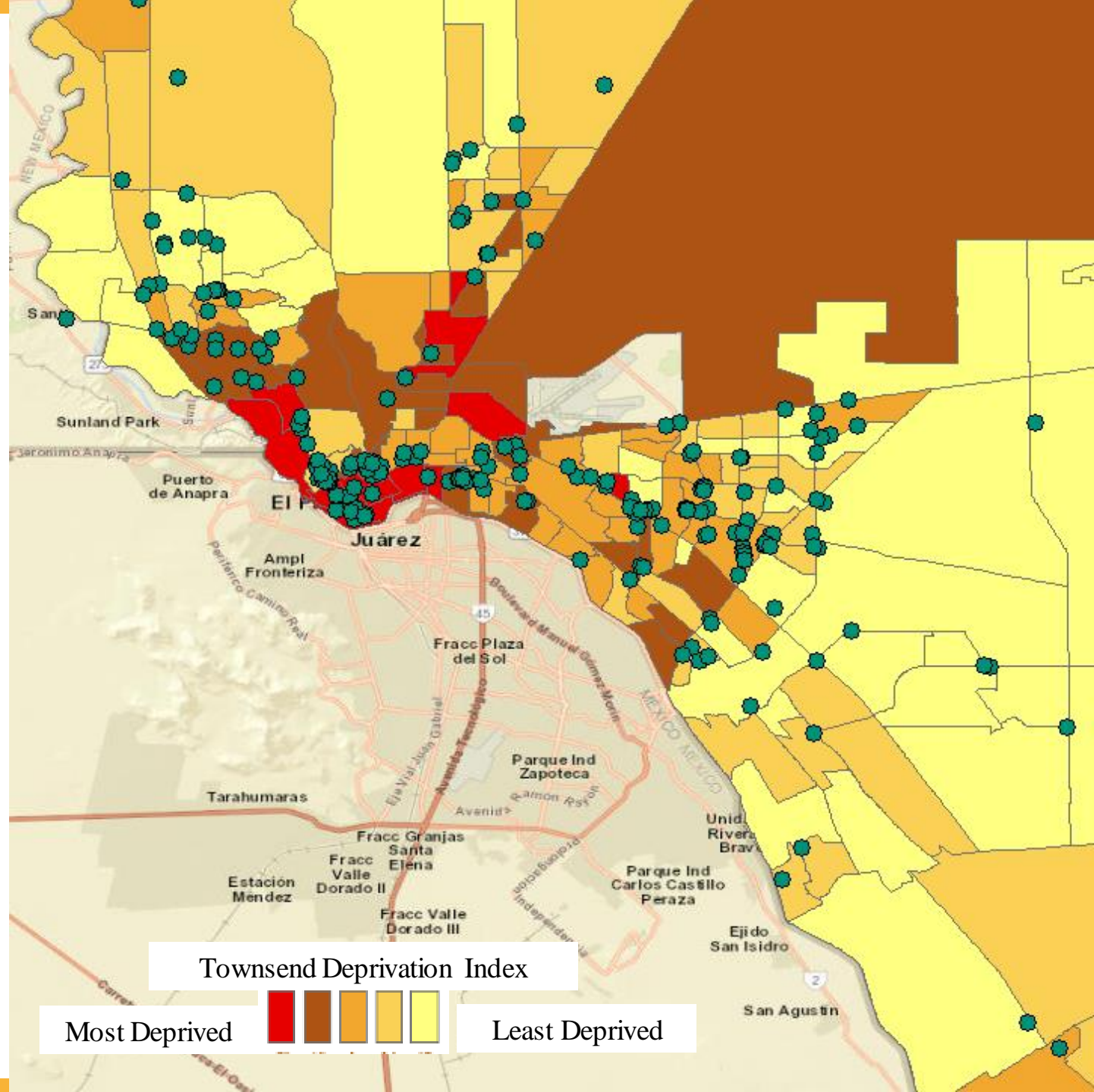
- Key Indicators and Trends
- Testing Remains Critical
- Vaccination Distribution Update
- Relief Funds + Transition Planning

Testing Sites + Regional COVID Response Clinics



228 LOCAL PROVIDERS HAVE ENROLLED TO DISPENSE COVID-19 VACCINES

CENSUS TRACT LEVEL





Federal Coronavirus Relief Funds

- ❖ Utilize every dollar of Federal/State funding for our community
- ❖ Leverage Federal and State resources (ex. State testing)
- ❖ Proactive fiscal management – local response plan
- ❖ Focus on short and long term public health response
- ❖ Provide community and economic response and recovery
- ❖ Address employee and customer safety

Coronavirus Relief Funds - \$119 million

Public Health & Safety

Program	Amount
Lab Testing	28,972,629
Preparedness	11,993,286
Epidemiology and Contact Tracing	10,768,459
Emergency Response	7,127,173
Education Taskforce	3,427,838
Logistics	3,137,890
Compliance Taskforce	3,015,223
Emergency Operations	891,270
Isolation and Quarantine	154,057
Re-open El Paso - City facilities, preparedness	7,536,847
Workforce - paid leave, healthcare, training	2,573,966
Total	\$79,598,639

Community Response/Recovery

Program	Amount
Gap Assistance	750,000
Digital Access Expansion	37,500
Food Security	3,000,000
Rapid Rehousing	574,635
Rental Assistance	6,000,000
Utility Assistance	1,000,000
Administrative Assistance	19,575
Child Care YWCA	1,616,072
Food Security Get Shift Done	500,000
Endeavors (homeless assistance)	500,000
Delta Sites (homeless assistance)	1,687,907
Opportunity Center (homeless assistance)	500,000
Inspira Hotel (temp. isolation housing)	733,489
Operation HOPE (funeral expenses)	500,000
Total	\$17,419,178

Economic Response/Recovery

Program	Amount
Small Business Grant Program	270,000
Sr Financial Research Analyst	21,697
Business Resource Clearing House	156,200
SB Fin Assistance & Relief Program	17,080,283
SB Consulting & Technical Assistance	400,000
Buy Local Marketing Initiative	577,298
E-Commerce Platform Development	450,000
E-Commerce & Digital Platform	77,664
Business Facility Safety Alterations	2,062,191
Increasing PPE & Safety Product Access	400,000
Downtown Sanitation Program	104,667
Worksafe Training for Business	100,000
Essential Worker's Childcare	50,000
Cultural Arts Operational Support	100,000
Outdoor Cafe Traffic Control	88,462
Total	\$21,938,462

Coronavirus Response & Relief 2021

- Bill signed into law on December 27, 2020
- Additional State and local aid was not included in this round of COVID-19 relief
- Coronavirus Relief Funds – extends deadline, but does not expand eligible costs (All City of El Paso funds already invested in our community)
- Transportation – transit agencies, airlines and airport contractors, airports, state DOT's
- Rental Assistance – first ever emergency federal rental assistance program to be distributed by state and local governments (can be used for past due and future rent, and utility or energy bills)

2. City Attorney's Office Update (Karla Nieman)

- a) Governor Abbott's Proclamations & Orders
- b) Emergency Ordinances
- c) Texas Eviction Diversion Program

Karla M. Nieman

Governor Abbott's Disaster Declarations



*Anticipate Governor Abbott will renew his Disaster Declaration between January 5th– 7th.

Emergency Ordinances



Ordinance	Adoption Date	Last Re-enactment	Expires
Disaster Declaration Ord. No. 019035	3/17/2020	12/14/2020	1/13/2021
Emergency Measures Ord. No. 019036	3/17/2020	12/14/2020	1/13/2021
Public Right of Way Ord. No. 019091	8/31/2020	12/14/2020	1/13/2021

Texas Eviction Diversion Program



A voluntary program that based on eligibility, enables landlords and tenants to resolve eviction issues, obtain past due rent coverage, and have the eviction case dismissed.





3. CFT Operations Overview

Chief Mario D'Agostino, Angela Mora,
Jorge Rodriguez

Preparing to Dispense COVID-19 Vaccines in El Paso

City of El Paso Department of Public Health

Vaccines approved



- **EUA vaccines**
- Pfizer – >16 age
- Moderna > 18 - age

- **Vaccines in Phase 3 clinical trials**
- As of December 28, 2020, large-scale (Phase 3) clinical trials are in progress or being planned for three COVID-19 vaccines in the United States:
 - AstraZeneca's COVID-19 vaccine
 - Janssen's COVID-19 vaccine
 - Novavax's COVID-19 vaccine

U.S. Phased Approach to Vaccination

(Specific dates are subject to change)



Phase 1 (Dec 2020 – Feb 2021): Limited supply of COVID 19 vaccine doses available.

Phase 2 (Feb 2021-July 2021): Increased number of vaccine doses available.

- **Ensure access to vaccine for members of Phase 1 critical populations and other groups; expand provider network.**
- **Vaccine allocations based on vaccine supply**

Phase 3 (July 2021 -October 2021): Sufficient supply of vaccine dose for entire population.

Phase 4 (October 2021 and forward) Sufficient supply of vaccine with a decreased need due to most of the population being vaccinated previously.

DSHS Priority Groups



Phase 1 a - First Tier

- Hospital staff working directly with Pos patients or at higher risk for COVID-19
- Long-term care staff and residents
- EMS providers who engage in 9-1-1 emergency services
- Home health care workers, including hospice care, who directly interface with vulnerable and high-risk patients

Phase 1 - Second Tier

- Staff in outpatient care offices who interact with symptomatic patients.
- Direct care staff in freestanding emergency medical care facilities and urgent care
- Community pharmacy staff who provide direct services to clients
- Public health and emergency response staff directly involved in administration of COVID testing and vaccinations
- Last responders who provide mortuary or death services to decedents with COVID-19
- School nurses who provide health care to students and students and teachers

DSHS Priority Groups



Recently expanded to Phase 1 b

- People 65 years of age and older
- People 16 years of age and older with at least one chronic medical condition that puts them at increased risk for severe illness from the virus that causes COVID-19, such as **but not limited to:**
 - Cancer
 - Chronic kidney disease
 - COPD (chronic obstructive pulmonary disease)
 - Heart conditions, such as heart failure, coronary artery disease or cardiomyopathies
 - Solid organ transplantation
 - Obesity and severe obesity (body mass index of 30 kg/m² or higher)
 - Pregnancy
 - Sickle cell disease
 - Type 2 diabetes mellitus

Next groups not yet defined by the Texas EVAP

Federal Allocation Process



- Based on vaccine availability
- Federal allocation to state
- Weekly allocations set

State Allocation Process



- Texas allocation decreased – initial allocation 1.4 Mill, actual allocation 1.1 Mill by Dec 30, 2020 – minus 300,000
- 25% set aside for pharmacy program 275,000 = 825,000
- State EVAP groups prioritization
- Weekly allocations set after federal allocation notification
- Allocation to El Paso decreased in weeks 2-3
- No week 4 allocations to El Paso

Local Allocations



Allocation and shipment to 33 sites:

- 12/14-Week 1 total: **6825**- Hospitals - **Pfizer** – administered:**3972**
- 12/21-Week 2 total: **17,650** – clinics, private providers, Texas Tech - administered- **Pfizer, Moderna-** administered: **6265**
- 12/27- Week 3 total: 8200- hospitals, health clinics – Pfizer, Moderna- administered:**6182**
- Week 4 total: **0**
- Total vaccines allocated/shipped as per DSHS: **32,675**
- Total vaccines administered: **16,419**
- **State reporting system glitch**

Current Local Capacity



- 228 enrolled
- Additional local capacity via pharmacy program for long term care facilities residents and staff
- CVS and Walgreens – Start date- Dec 28
- Pharmacy program estimated coverage
- Facilities not in pharmacy program

Allocations to City- Health/Fire



- DPH allocation - week 2 = 1500; week 3= 100- total 1600
- Fire allocation – week 2 = 900
- DPH date of shipment 12/22; received 12/23; dispensed on 12/24

Dispensing approaches:

- Mass vaccination POD – 1140;
- deployment teams to nursing facilities = 460

Vaccine registration City Process



- City has open registration process via epstrong.org and 21COVID
- As of Jan 1, 2021 = >47,189
- 1 a = 5,604
- 1b = 32,601
- Undetermined (phase 2) = 8,984 (CBP, schoolteachers, construction, Etc)

Vaccine Registration Steps



- **Registration** – epstrong.org and 21COVID hotline (212-4368)
- Epstrong.org –registration – acknowledgement receipt
- Hotline – registration -
- Placed on priority list until vaccine available

Allocation Notification:

- Select next in line based on vaccine availability
- Call and schedule appointment
 - Automated system under development

Vaccine Registration Steps



During appointment process:

- Provide date/time, location
- Complete screening form electronically, print and carry
- Direct to online Vaccine Fact Sheet, V-Safe App
- **At sites:**
 - Drive thru sites – organization
 - Clinics

Next Steps



- Automated registration and appointment system
- Communication with providers
- Continuous provider Recruitment to cover identified service gap areas
- Identify areas for improved efficiencies and effectiveness



4. Team Lead Report





1. Health Focus

Hector I. Ocaranza, M.D.

COVID-19 Summary

- ❖ Positive cases continue to have a significant decrease
- ❖ At least 1 out of 8 people in El Paso County have been infected
- ❖ Eastside of town (79928, 79936, 79938) have largest caseloads.
- ❖ New cases hovering at 30 cases per 100,000
- ❖ Awaiting impact of holidays
- ❖ Positivity rate at around 11%

COVID-19 Summary

- ❖ Testing demand significantly decreased to 1/3 of CDC week 45
- ❖ Close to 800,000 tests performed
- ❖ Asymptomatic patients' rate increasing now at 15%
- ❖ Hospitalizations (7-day rolling avg) around 400/day
- ❖ 1 out of 3 hospitalized patients requiring ICU care
- ❖ Currently our TSA area COVID Hospitalization at 15%
- ❖ Confirming deaths continue (Lag Indicator)

COVID-19 Summary

- ❖ Overall downward trend of Positive Cases and Hospitalizations
- ❖ Impact from Holidays expected by 2-3 week of January
- ❖ Schools expected to bring children back to school for in-person instruction
- ❖ Serologic Survey continues in the community

New Year for COVID-19: Hope

- ❖ Optimistic that behavior change is controlling Pandemic in our community.
- ❖ Testing strongly encouraged for those who traveled
- ❖ Hospitalizations decreasing but continue to be vigilant for other respiratory illnesses
- ❖ **Vaccine has arrived, but in small amounts.**
- ❖ We need to **CONTINUE WEARING MASKS, OBSERVING SOCIAL DISTANCING** even with vaccine. Prevention is the key for success,
- ❖ Prevention, Prevention, Prevention. If you gather, travel, etc. Test... Test... Isolation and Quarantine.

Dashboard



COVID-19
SITUATIONAL
MONITORING

December 31, 2020



Positive Tests
496 **98,540**
New Cumulative

COVID-19 Deaths
15 **1467**
New Cumulative

Active
34,128

Recovered
62,370

Hospitalized
392

In ICU
145



COVID-19
Community
Scorecard

Stage 2



Infection Rate **1**



Testing **3**



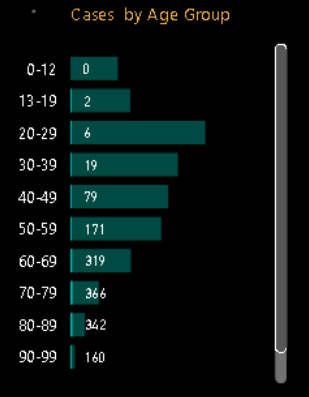
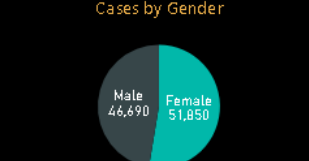
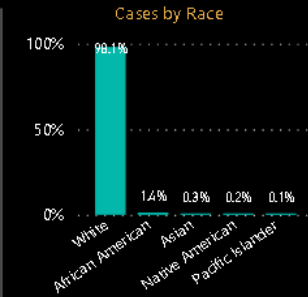
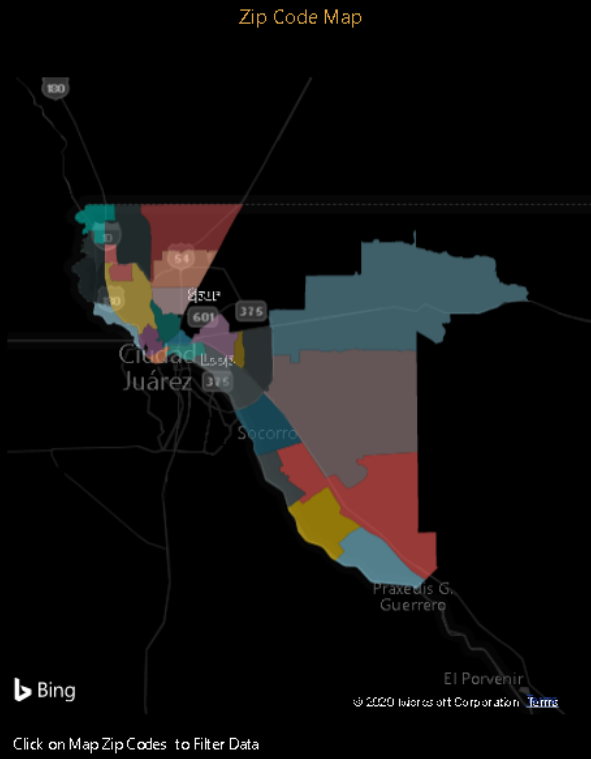
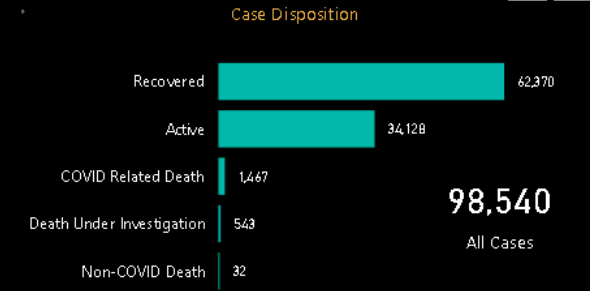
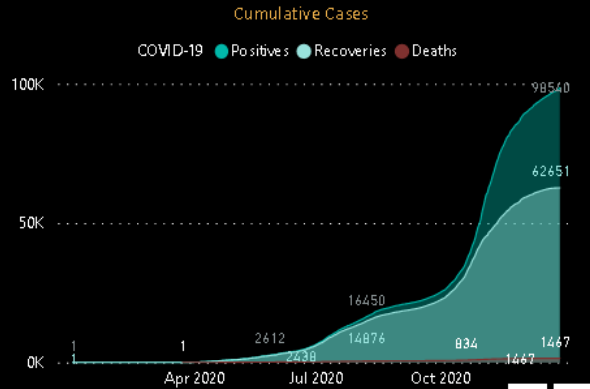
Investigations **4**



Healthcare
Readiness **2**



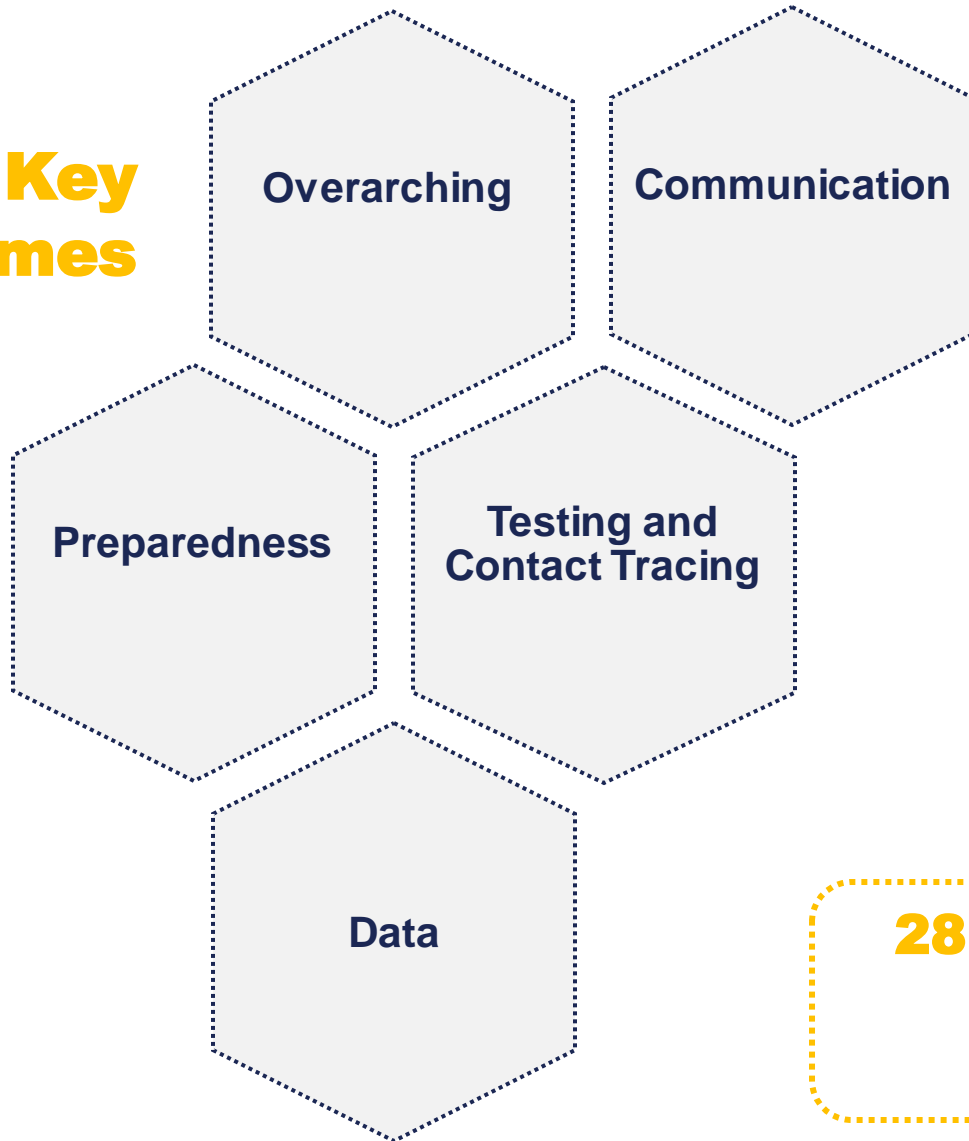
At-Risk
Population **4**



El Paso United COVID-19 Transition Task Force Recommendations Recap

Recommendations Recap

5 Key Themes



8.17.20: Final Short Term/Scorecard presented to City Council by Taskforce *reporting integrated into CFT updates

8.31.20: Launched Dashboard

9.1.20: Council action to implement short term recommendations: Communication, Preparedness, Testing & Contract Tracing and Data

9.26.20: Midterm and Long Term presented to City Council

28 Total Recommendations

- 18 short term
- 10 mid & long term

28 short-, mid-, and long-term recommendations

- Crafted based on real-time events and available data
- The Task Force acknowledges:
 - Recommendation timeframe serve as a guideline
 - Resource and funding availability, as well as emerging data, may impact the development and implementation of the recommendations
 - Recommendation timeframes may shift given the ever-evolving pandemic characteristics
 - Timeframe is based on urgency of the topic and the resources required to effectively execute the recommendation.

THEME	RECOMMENDATIONS	TIMEFRAME		
		Short	Mid	Long
Overarching	Create a COVID-specific scorecard using available data			
	Implement recommendations in a regional, cross-sector, public/private, collaborative way using available resources			
Preparedness	Advise on the development and dissemination of school reopening and sustainment plans			
	Provide performance improvement reports			
	Integrate and strengthen communication across border health agencies			
	Initiate a process to develop a model and strategic plan to address future public health organization, funding, resources, and staffing			
	Continue to act as a resource for schools as they develop, implement, and revise their COVID-19 health and safety plans			
	Develop a model for public health organization and strategic plan for future public health emergencies		Mar. 2021	
Invest in ongoing population health and behavioral change research, resources, and interventions			Feb. 2022	
Data	Increase accessibility and quality of data			
	Implement surveillance studies to assess community transmission and prevalence of COVID-19, as well as create a predictive tool			
	Continue to invest in ongoing COVID-19 epidemiological research and surveillance			
Testing and Contact Tracing	Expand testing resources to ensure accessibility, quick turnaround times, and demand			
	Support testing strategy development for private businesses and schools			
	Expand contact tracing capabilities by leveraging partnerships			
	Coordinate community members' ability to access testing resources using a patient navigation model			
	Incorporate other pathogen testing at current testing sites			
	Expand passive disease surveillance and existing syndromic surveillance methods			
	Develop, preserve, and promote partnerships to expand and diversify COVID-19 testing throughout the community			

THEME	RECOMMENDATIONS	TIMEFRAME		
		Short	Mid	Long
Communication	Institute a cross-sector collaborative partnership to create a communication strategy	■		
	Centralize and coordinate COVID-19 information and health communication resources			
	Partner with community health workers to create a communication outreach strategy			
	Promote modelling of public health behaviors by various community leaders			
	Establish a process for stakeholders to provide input on pandemic response for the government to take under advisement			
	City/county, working with cross-sector collaborative, should continue to effectively communicate with target audiences about COVID-19 by creating and launching a unified, dynamic health communication campaign		■	
	City/county, working with the cross-sector collaborative, should conduct an ongoing communication assessment that solicits stakeholder perceptions of the current communication strategy and creative elements, with the goal of improving the efficacy and local relevance of communication materials/media			
	To provide consistent quality COVID-19 communication resources, the cross-sector collaborative should advise on the production of COVID-19 communication resources			
	For accountability, to facilitate learning, and to document effort, the city/county, collaborating with public/private partners, should provide an after-action report that details COVID-19 communication activities (the implementation of this recommendation may extend beyond 18-months given the unpredictable nature of the current pandemic)			FEB. 2022
Timeframe Key:				
Short-term: Recommendation should be implemented within the next 30 days of issuing report.	Mid-term: Recommendation should be implemented within 6 months of issuing report.	Long-term: Recommendation should be implemented within 18 months of issuing report.		

Testing & Contact Tracing Recommendation #3: Continue to invest in ongoing COVID-19 epidemiological research and surveillance

- Partner with academic research institutes to facilitate epidemiological research and surveillance to better understand COVID-19 (e.g., antibody response, reinfection rate, community transmission)

Team: Victor Cardenas, MD., MPH, Epidemiology Professor at the University of Arkansas. Dr. Cardenas is a former professor of epidemiology at UT-School of Public Health – El Paso campus

Purpose of the project is to:

- Coordinate and establish an ongoing household survey of 210 subjects randomly selected using cluster sampling (30 census tracts using probability proportional to size), one household selected at random after rapid enumeration of occupied households per block, and one person at random irrespective of age, gender selected using the next birthday method.
- Evaluate the level of immunity reached - Assess the level of infection per week and compare the findings of the serologic study with the case-reporting for reconciliation and estimate the proportion of residents infected before the vaccination is available (Early 2021).

Test and Contact Tracing Recommendation #6: Expand passive disease surveillance and existing syndromic surveillance method

- Enhance and expand current syndromic surveillance methods to include COVID-like-illness
- Leverage partnerships with stakeholders in the academic community who are conducting ongoing research on COVID-19

UTEP Analytics team: *Leopoldo Gemoets, Professor of Information systems and Rigoberto I. Delgado, PhD, MBA, Professor of Health Economics -UTEP*

- Project is to forecast demand for influenza vaccine.
- Identify “hot”, or high-risk areas and population segments in El Paso/Hudspeth counties where vaccination campaigns can have highest likelihood of success for reaching priority at-risk community segments.
- GIS models will be used to segment geographically target community clusters and identify key, high-risk, segments of the population (e.g., elderly).
- The results from this phase will be used by the Public Health Department to design and implement a targeted vaccination campaign.
- They also conduct ongoing statistical assessments on the effectiveness of the proposed vaccination strategies.

PENDING RECOMMENDATIONS

Preparedness



- Recommendation #6: Develop a model for public health organization and strategic plan for future public health emergencies
 - Develop a model for public health organization
 - Develop a strategic plan that addresses future public health emergencies
 - Use COVID-19 after-action report, lessons learned, and performance improvement reports to inform model and strategic plan
 - Promote collaboration between key stakeholders and non-traditional stakeholders and strengthen relationships with regional partners

Preparedness

- Recommendation #7: Invest in ongoing population health and behavioral change research, resources, and interventions
 - Work with academic and community partners to continue to support behavioral health research
 - Identify and create behavioral change expertise that will facilitate health education and population-level behavior change
 - Optimize resource alignment and continue to collect data to address health disparities

Communication

- Recommendation #9: For accountability, to facilitate learning, and to document effort, the city/county, collaborating with public/private partners, should provide an after-action report that details COVID-19 communication activities (the implementation of this recommendation may extend beyond 18 months given the unpredictable nature of the current pandemic)
 - Summarize health communication process, strategy, products, and other relevant information in a section of the after-action report
 - Review communication best practices and incorporate into future pandemic plans
 - Collaborate with public-private partners also sponsoring communication efforts

Mission

Deliver exceptional services to support a high quality of life and place for our community

Values

Integrity, **R**espect, **E**xcellence,
Accountability, **P**eople

Vision

Develop a vibrant regional economy, safe and beautiful neighborhoods and exceptional recreational, cultural and educational opportunities powered by a high performing government



Thank you!

