

# COVID-19 Response + Recovery Cross-**Functional Team Update**

2.1.2021

**Updated 2.1.21** 

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# 1. Overview

Tommy Gonzalez



# 2. CFT Operations Overview

Chief Mario D'Agostino



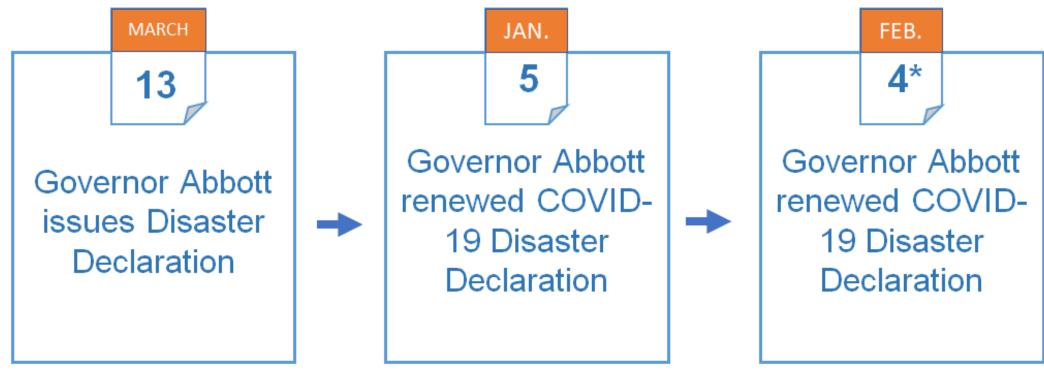
# 3. CAO Overview

- Governor Abbott renews COVID-19 Disaster Declaration
- Emergency Ordinances
- City Attorney's Office COVID-19 Support
- Legal Monitoring

Karla Nieman



## Governor Abbott's Disaster Declarations



<sup>\*</sup>Anticipate Governor Abbott will renew his Disaster Declaration between Feb. 4<sup>th</sup> – 7<sup>th</sup>.



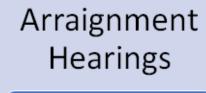
# Emergency Ordinances

Ordinance	Adoption Date	Last Re- enactment	Expires
Disaster Declaration Ord. No. 019035	3/17/2020	1/5/2021	2/4/2021
Emergency Measures Ord. No. 019036	3/17/2020	1/5/2021	2/4/2021
Public Right of Way Ord. No. 019091	8/31/2020	1/5/2021	2/4/2021



# City Attorney's Office COVID-19 Support

#### **Upcoming February Hearings on COVID-19 Citations**



53

4 waived

**Pre-Trials** 

5

Trials

19

The City Attorney's Office continues to provide enforcement training on local, state and federal COVID-19 guidelines to the City's Fire and Police Departments.



# Legal Monitoring

**Judicial Orders** 

**Eviction Orders** 

Testing & Vaccine Employee Initiatives

Federal Funding Requirements

American Rescue
Plan and impact
on FFCRA







# 1. Health Focus

Hector I. Ocaranza, M.D.

# COVID-19 in our community





# **COVID-19 Snapshot**

- Positive cases are now stable with day-to-day variation
- ❖New cases per capita plateaued between 53 57 cases per 100, about 14 days
- ❖ Positivity rate continues at around 10%
- Testing demand low, has seen increased because of School-based rapid testing
- About 900,000 tests performed

# COVID-19 Snapshot

- Rate of Asymptomatic patients about 16%
- Hospitalizations (7-day rolling avg) plateaued at 400 450/day
- 1 out of 3 hospitalized patients requiring ICU care
- Currently our TSA area COVID Hospitalization stable between 17-19%



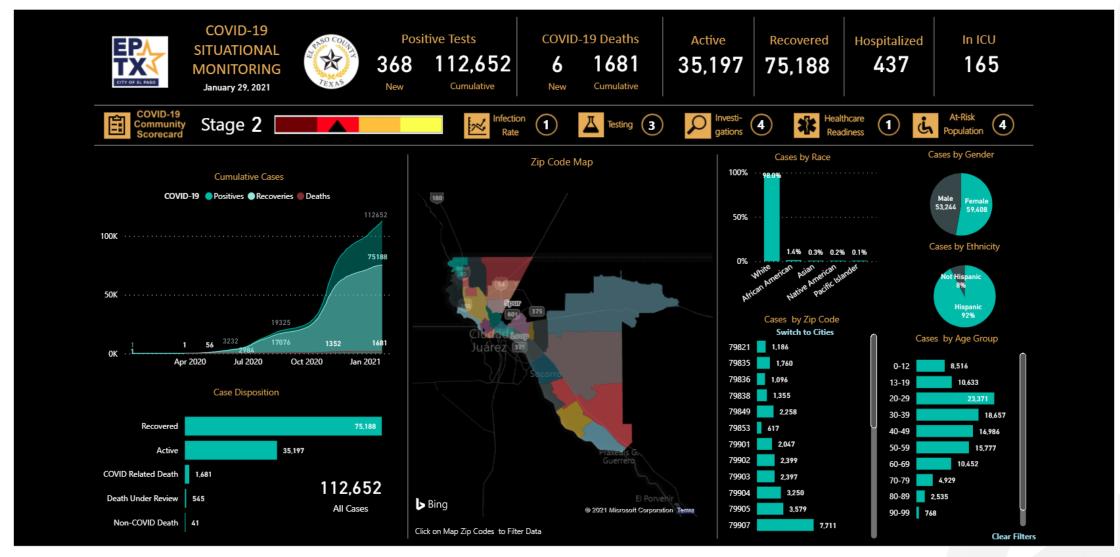
# COVID-19 Summary

- Positive Cases plateaued
- Hospitalizations remain stable without a significant increase
- Prevention is the key while vaccine is rolled out
- Need to encourage people to get tested





#### **Dashboard**





## COVID VARIANTS

- Three important Variants of Concern:
  - **❖**UK (B.1.1.7)
  - ❖Southafrica (B1.351)
  - ❖Brazil (P.1)
- ❖ Variants are more infectious
- ❖NOT producing more severe disease
- Important mutations on Spike Protein





### COVID VARIANTS

- Surveillance done by CDC and State labs
- To avoid infection: Mask (may use double), Distancing and Hygiene
- ❖ Vaccine still effective
- Travel Restrictions imposed at federal level





# **W** COVID VACCINE

- Two manufacturers approved and 1 more on Phase 3 Trials.
- Interval for second-dose slightly different but still effective if timing of second dose is longer that recommended
- Current vaccines still confer protection against new variants

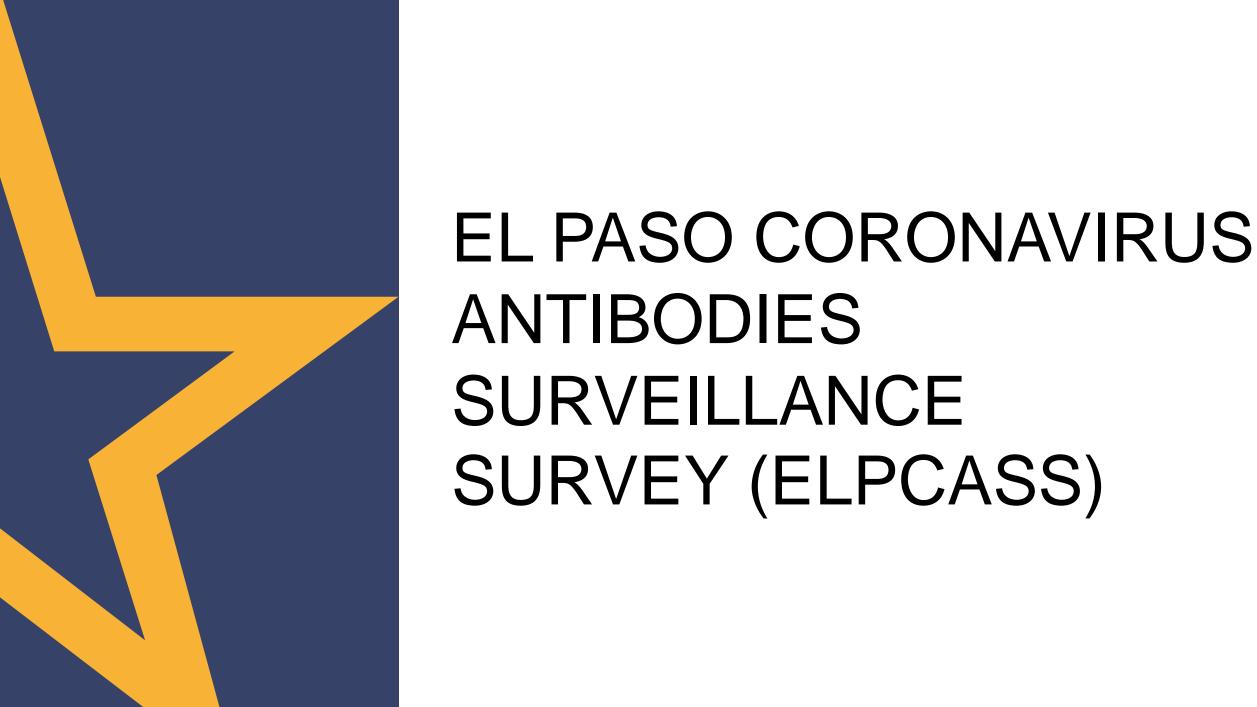




#### COVID VACCINE

- Severe reactions (anaphylaxis) not common
- Vaccine important protection and indicated for persons with pre-existing medical conditions.
- Pregnant and breastfeeding mothers may receive the vaccine if at-risk







# RATIONALE and PURPOSE

- COVID-19 pandemic
- Limited assessment of infection
- Role of Asymptomatic
- Immune response

To find out how many El Pasoans have truly been infected with the coronavirus, the cause of COVID-19.





#### Primary

Estimate the risk of SARS-CoV-2 infection in the population of El Paso

#### Secondary

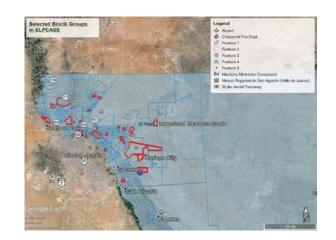
Determine whether the prevalence of SARS-CoV-2 infection varies over time, and age, gender, Hispanic ethnicity, and industry/occupation.

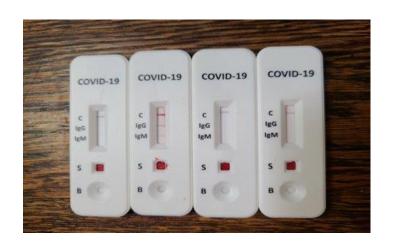


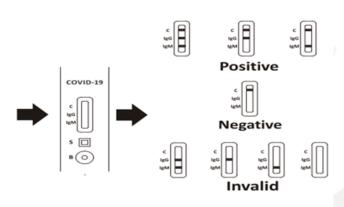


# **POPULATION AND METHODS**

- Cross-sectional weekly survey of randomly selected residents of El Paso
- Involves Two parts:
  - Interview (pen/paper)
  - A serologic LFA test (capillary blood sample)



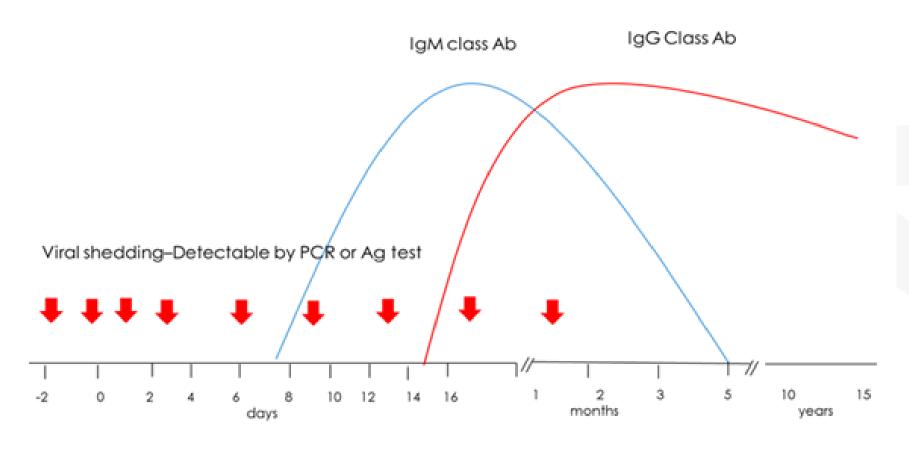








#### BIOMARKERS OF SARS-COV-2 INFECTION





- 197 Interviews completed
- There were considerable variations in infection risk by age, Hispanic ethnicity, and education.
- Those with High School or less were 1.9 times more likely to be infected
- On Behaviors: 38% respondents left home ≥5 times
- Learned that Infection Fatality Ratio (IFR) is less than 1% while Case Fatality Ratio (CFR) was 2%

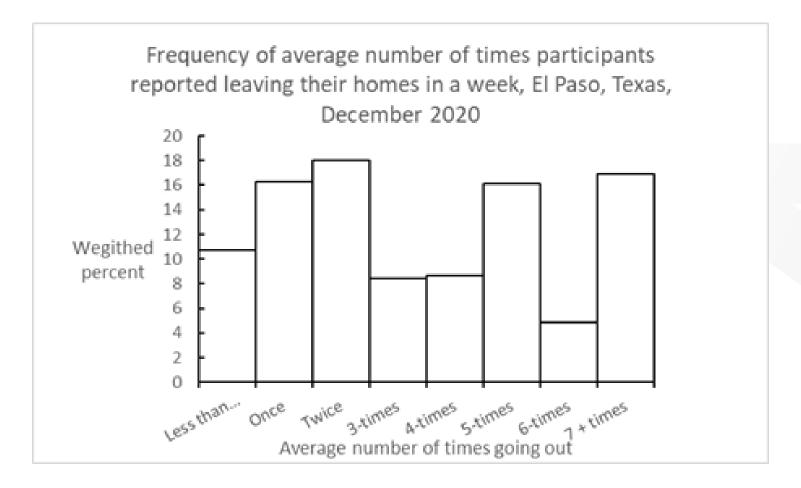


- As of December 2020, there were >90,000 reported cases and Based on results, there were approximately 155,000 infected
- Cumulative incidence of SARS-CoV-2 infection was 18.5% (36 positive test/197 tested)(95% CI: 9.6% 27.4%).
- Recent Infection (within 3 months) (IgM) 9.5%
- More than 3 months (IgG without IgM) 8.9%
- Adjustment for imperfect Se and Sp 17.6%≈ 18.5%
- One third of those positive results reported no symptoms





#### **Behaviors**



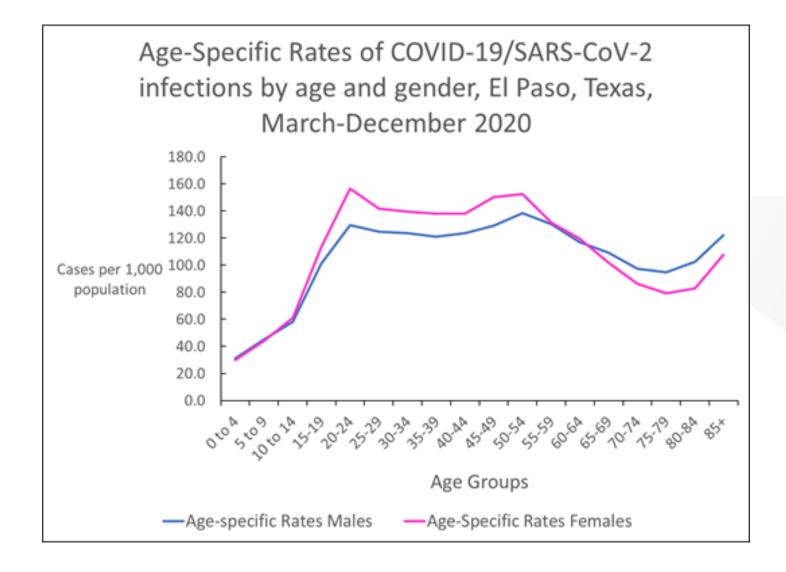




#### RESULTS FROM MORBIDITY DATA

- Hispanics found to have 2.9-times the risk of COVID-19 infection
- 21 times Excess Risk of death when people are older than 65 yrs of age and having Diabetes.
- Indirect relation between education level and risk of infection
- Found a direct relation between morbidity and poverty level









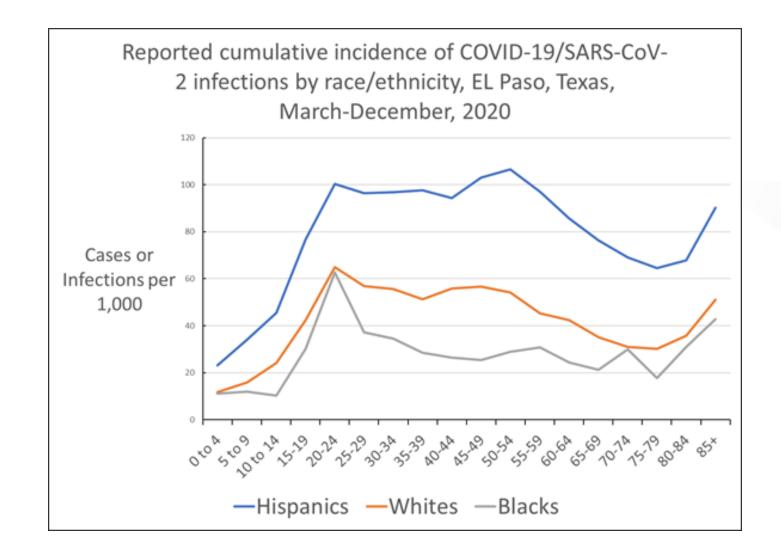






Table 2. Modification of the effect of diabetes mentioned in death certificate by age on the rate of mortality from COVID-29, El Paso, Texas 2020

Age Groups —	Diabetes					
	No		Yes			
	Deaths	Population	Deaths	Population		
Age						
20-64	267	450,328	243	33,896		
MRR (95% CI)	1 12.1 (10.2, 14.4 (Referent) P < 0.0000001		12.1 (10.2, 14.4)			
			.000001			
65+	181	55,848	1,109	49,327		
MRR (95% CI)	5.5 (4	5.5 (4.5, 6.6)		37.9 (33.2, 43.3)		
P < 0.000001		P < 0.000001				

RERI (95% CI) For 65+ years with diabetes=37.9 – 12.1 – 5.5 + 1= 21.4 (17.9, 25.5).



# El Paso United COVID-19 Transition Task Force Recommendations Recap



## Recommendations Recap

Communication 5 Key **Overarching** 1 pending **Themes Preparedness Testing and Contact Tracing** 2 pending Data

#### 28 Total Recommendations

- Comprehensive Update Provided: 1.5.21
  - 18 short term- COMPLETE
  - 10 mid & long term 7 COMPLETE + 3 Pending

Communication #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)

<u>Preparedness #6</u>: Develop a model for public health organization & strategic plan for **future public health emergencies** 

<u>Preparedness #7</u>: Invest in **ongoing** population health and behavioral change research, resources, and interventions



# 2. Vaccination Update

Angela Mora



# **Waccination Update**

3rd. U.S. Vaccine - Johnson & Johnson/Janssen's COVID-19 vaccine

- If data from 3rd phase of clinical trials shows it works and is safe application submission to FDA - then to ACIP
- Single dose
- Viral vector technology
- 45,000 clinical trial participants
- Age 18 to over 65



# **Waccination Update Continued**

- Preliminary findings good immune response, sustained immunity
- Predictable side effects fatigue, fever, headache, muscle aches
- Contractual 12 million doses by end of Feb 2021
- Effectiveness and efficacy –66%, 85% severe disease
- Oxford-AstraZeneca Covid-19 Phase 3 of clinical trials in the US, potential EUA in early April



## **W** Clinical Trials for Children

#### Moderna – current >18 years

- Next down to 12 years of age
- Slow start 3,000 goal, 800 enrolled/recruited
- Projected timeline late 2021
- Ages 1-11 last group
- Projected timeline 2022



## **Clinical Trials for Children Continued**

#### Pfizer – current >16 years

- Ages 12-15
- 2259 fully enrolled closed
- Timeline TBD

# ₩ Vaccine Efficacy

- Efficacy = how well it works in clinical trials
- Following two doses of mRNA COVID-19 vaccine
- Pfizer-BioNTech: 95.0% [95% CI: 90.3%, 97.6%].
- Moderna: 94.1% [95% CI: 89.3%, 96.8%].
- Limited data are currently available regarding the efficacy of a single dose
- Johnson & Johnson 66%, 85% severe disease following 1 dose



## **B**Second Dose Administration

- Moderna 28 days apart
- Pfizer 21 days apart
- CDC's recommendation 2nd dose as close to as possible
- 3 weeks, Pfizer-BioNTech
- 1 month, Moderna
- CDC's updated guidance 1/21 allows 2<sup>nd</sup> dose up to 6 weeks (42) days) after the first if it is not feasible
- CDC is not advocating for delay
- Data from clinical trials support this range



## ₩ Vaccination Efforts in Cd. Juarez

- Pfizer vaccine 2 dose
- Transported and secured by Mexican Army
- Phase 1 group 1a public hospitals
- 2 week-long efforts
- Tight eligibility controls
- Dispensed by locals after eligibility confirmation by military
- Exhausted vaccines total vaccinated 7081



# **Example 1** Long Term Care Facilities Update

Administrating Source	Facility Type	Facility Type	Facility Type	Facility Type	Facility Type	Total Vaccinated
	SNF	ALF	Foster & Host Home	Hospice	Intellectual	As of 1/29
DPH	0	21	0	0	0	527 1 <sup>st</sup> dose 340 2nd
DSHS	2	2	4	0	0	300 1 <sup>st</sup> dose
Fire	0	0	47	0	0	241 1st dose
Pharmacy	15	14	0	0	0	TBD
Pending	4	4	32	20	14	(72 Pending)
Total	21	44	79	20	14	106 1068 1 <sup>st</sup> dose 340 2 <sup>nd</sup> dose



- Continue DSHS-City taskforce efforts
- Continue Fire deployment team
- Focus vaccinate first 165 facilities
- Vaccine resources
- Identify next golden age facilities/groups

# **Mission**

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



Integrity, Respect, Excellence, Accountability, People



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



# Thank you!