

#### COVID-19 DAY 372 PRESS UPDATE MARCH 17, 2021 SECRETARIES TRACIE COLLINS, M.D. (DOH) & DAVID R. SCRASE, M.D. (HSD) & DEPUTY SECRETARY LAURA PARAJÓN, M.D. (DOH) INVESTING FOR TOMORROW, DELIVERING TODAY.

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NEW MEXICO DEPARTMENT OF HEALTH



## COVID-19 Vaccine Update March 17, 2021

### Dr. Tracie Collins Cabinet Secretary, Department of Health

# New Mexico fastest state in the country for vaccination by population (as of 3/17)

**Overall Totals** 

Total Doses Administered\*



Percentage Of New Mexicans With At Least One Shot\*\*

35.4%

Percentage Of New Mexicans Fully Vaccinated\*\*

20.8%

Total Doses Received\*



Number Of New Mexicans With At Least One Shot



Number Of New Mexicans Fully Vaccinated





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### Eligible populations

- Phase 1A (primarily health care workers)
- 75+
- Educators, early childhood professionals, and school staff
- 16+ with chronic conditions (prioritizing 60+ with severe conditions)



# Vaccinating educators, early childhood professionals, and school staff

- 60,254 registered for vaccine
- 3,227 scheduled for a first shot
- 46,595 received at least a first shot
- 17,414 fully vaccinated



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### Vaccine supply

- Next week's allocation will be 98,390 doses, including 2,400 J&J. Increase of approximately 2,000 doses from last week.
- NM has the capacity to distribute tens of thousands doses more each week.



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### New Mexico has three vaccines

- All vaccines available in the U.S. were highly effective at preventing hospitalizations and deaths in clinical trials.
- All vaccines authorized by the FDA are safe and effective.
- All vaccines available in the U.S. are highly effective against severe COVID-19.
- All vaccines are appropriate for all racial and ethnic groups.

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# Get vaccinated with the first vaccine available

- Vaccines, testing, and COVID-safe practices will keep more of our loved ones from being hospitalized or dying due to COVID-19.
- Please get a vaccine as soon as you are eligible. It could save your life.



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### **Registration update**

- More supply is coming!
- Register for vaccine at vaccinenm.org
- More than 740,000 New Mexicans registered for vaccine.



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# Two dashboards to track NM's vaccine progress

- Main dashboard now includes details on state, federal, and overall vaccine administration in NM.
- <u>https://cvvaccine.nmhealth.org/public-dashboard.html</u>
- New phase-based dashboard (linked from main dashboard) available as well.



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# Why Equity?

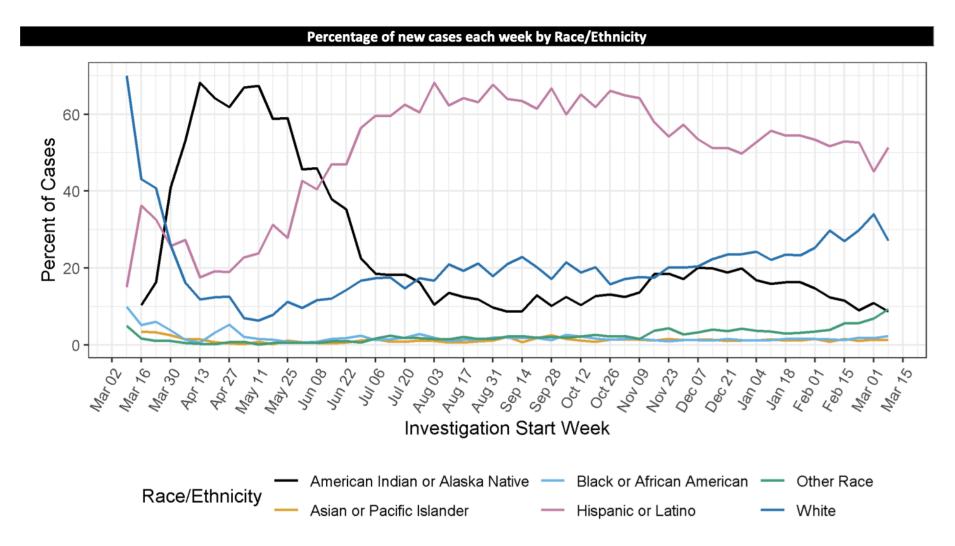
### Equitable distribution

- Reducing morbidity/mortality and reducing spread
- Equity allocations to communities with high Social Vulnerability Index (SVI)
- Mobile vaccination unit Hatch, Columbus this week, Blanco and additional locations next week



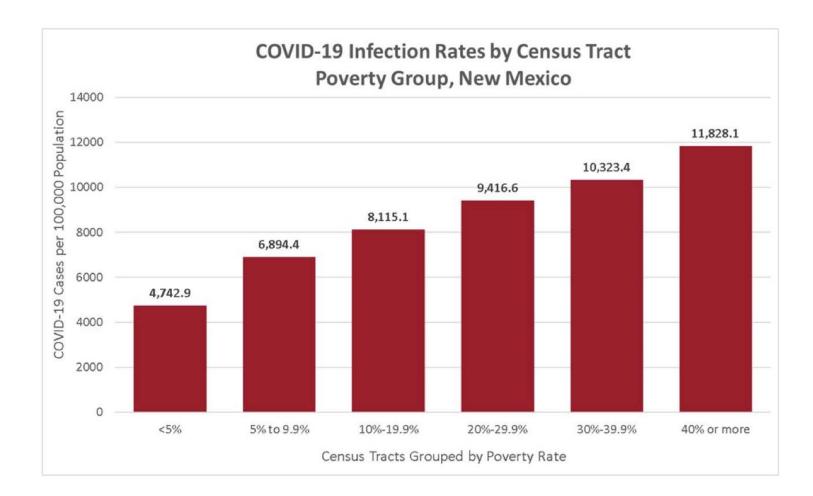
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### American Indian, Black, Hispanic Populations Disproportionately Affected by COVID



### People Living in Poverty Are Disproportionately Affected by COVID

Case rate per 100,000 population by census tract below poverty level





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## How we operationalize equity:

### **DOH Vaccine Equity Mission:**

Vaccinate New Mexicans swiftly, efficiently and equitably to save lives and stop the spread of the virus

"Saving Lives"

Community Level

Individual Level Vulnerable Populations and Communities (High SVI Communities, Congregate Living Settings) "Stopping the Spread"

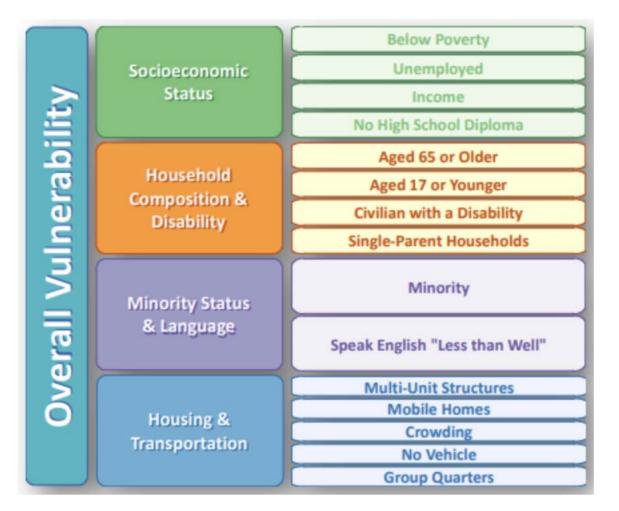
Highest Community Rates of Infection

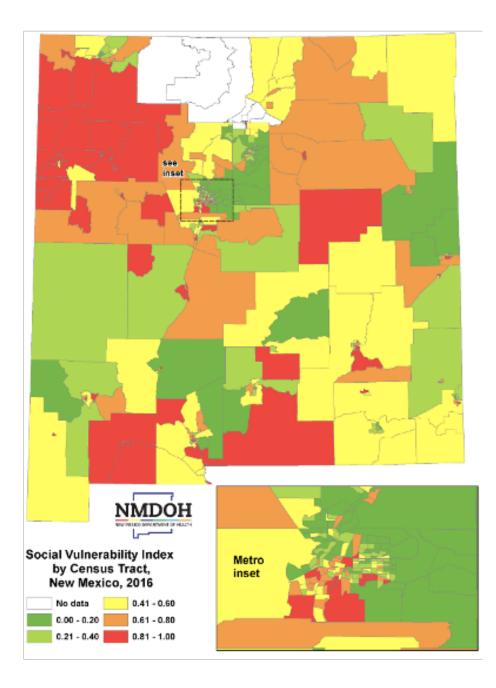
(Zip Codes)

Highest Risk Individuals (Age, COVID risk factors) Highest Rate of Individual Exposure Risk (health care, essential workers)

### **Equity Allocations using**

Social Vulnerability Index and Counties





## Allocate in areas of high SVI (reduce morbidity and mortality)

SVI score

Social Vulnerability by County

0.000 1.000

Colfax Taos San Juan **Rio Arriba** Union Mora Harding Sandoval Los Alamos McKinley Santa Fe San Miguel Quay Bernalillo Cibola Guadalupe Valencia Torrance Curry De Baca Roosevel Socorro Catron Lincoln Chaves Sierra Lea Grant Otero Eddy Doña Ana Luna dalgo

Source: U.S. Centers for Disease Control Social Vulnerability Index, 2018 data. No data available for Rio Arriba County.

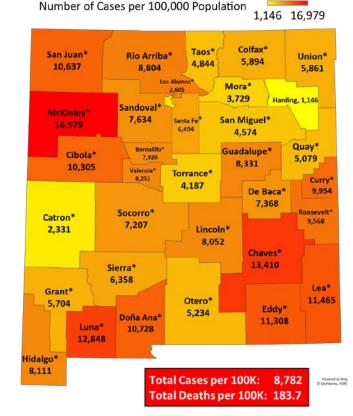
https://www.atsdr.cdc.gov/placeandhealth/svi/documentation/SVI\_documentation\_2018.html. February 25, 2021.

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### (reduce spread of the virus)

Allocate in areas of high cases

#### COVID-19 Prevalence Rate (3/16/2021)



Source: New Mexico Department of Health. Population estimates obtained from US Census American Factfinder. Retrieved from https://ibis.health.state.nm.us/query/result/pop/PopCnty/Count.html, March 29, 2020. \* denotes death occurred in county. Excludes cases in federal and state detention facilities.

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Phase Guidance	Allocate to Highest-Risk Individuals	Allocate to Highest Rate of Individual Exposure Risk
1a	Long-term care facility residents	Health care personnel
1b	Persons 75 years and older Persons 16-64 with chronic conditions	Frontline essential workers
1c	Persons 60-74 years old without chronic conditions	Other essential workers





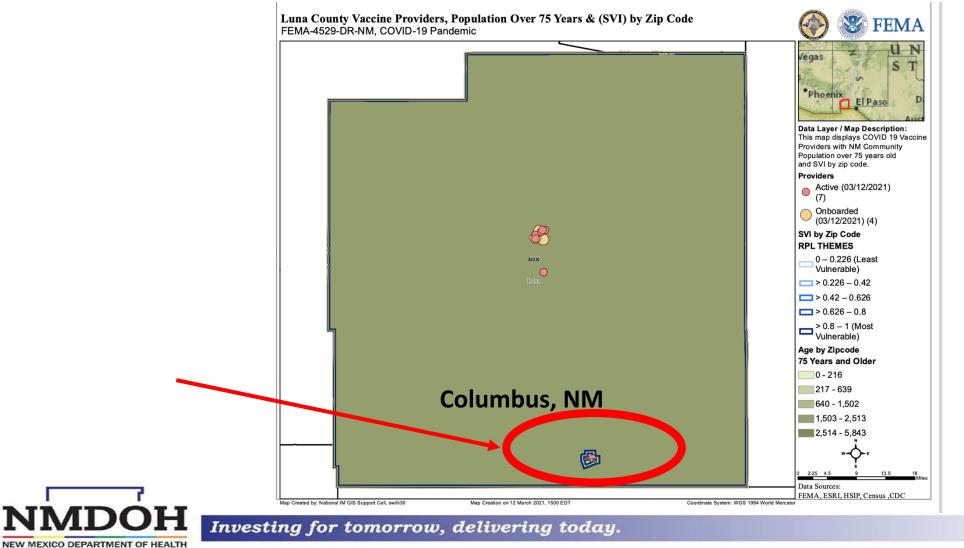
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## **Mobile Vaccination Teams**

### NM Equity Travel Teams The "NET"

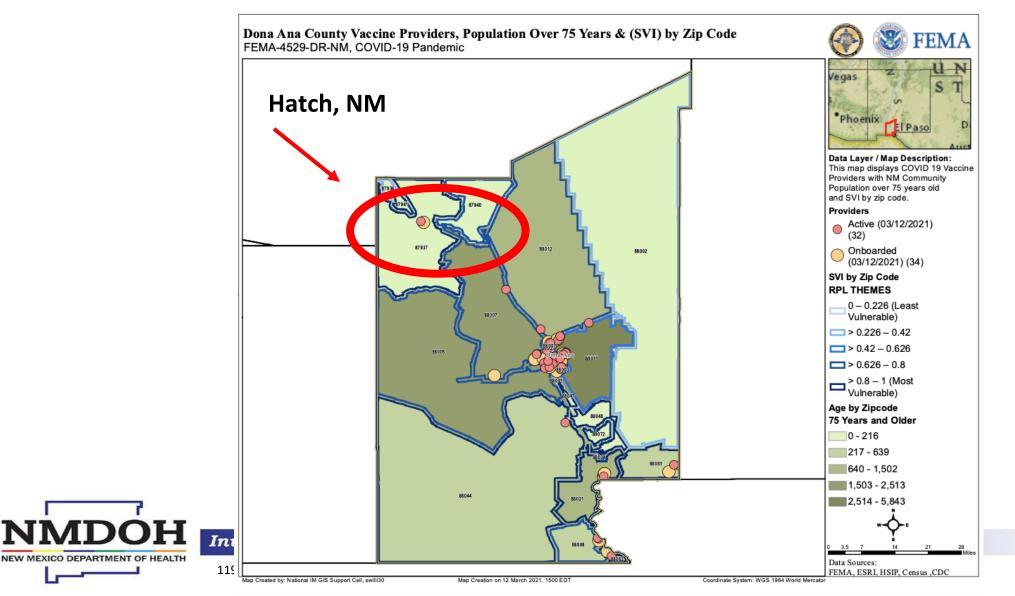
### Luna County:

#### High SVI, High 75+, 88% Hispanic/Latino





### **Doña Ana County:** *High SVI, 82% Hispanic/Latino*





### WHEN YOU'VE BEEN FULLY VACCINATED CDC

What's Changed for fully vaccinated individuals:

- Can gather indoors with unvaccinated people from 1 other household (e.g. relatives who live together) without masks, unless any of those people or anyone they live with has increased risk for severe COVID-19.
- Do not need to isolate or get tested unless they have symptoms if they have been around someone with COVID-19.
  - However, if they reside in group setting (e.g. correctional facility or group home) and are around someone who has COVID-19, they should stay away from others for 14 days and get tested, even if asymptomatic.



*People are considered fully vaccinated:* 

- 2 weeks after 2<sup>nd</sup> dose in 2-dose series (e.g. Pfizer or Moderna vaccines), or
- 2 weeks after single-dose vaccine, (e.g. Johnson & Johnson's Janssen vaccine)

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### WHEN YOU'VE BEEN FULLY VACCINATED CDC

What's not changed for fully vaccinated individuals:

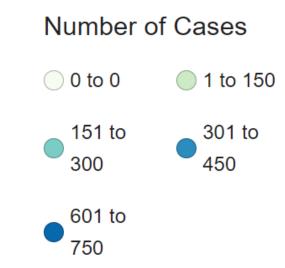
- Wear a mask, socially distance, and avoid crowds and poorly ventilated spaces whenever:
  - In public;
  - Gathering with unvaccinated people from more than 1 other household; and,
  - Visiting unvaccinated person at increased risk of severe illness or death from COVID-19 or who lives with person at increased risk.
- They should avoid medium/large-sized gatherings.
- They should delay domestic/international travel.
- They should still watch for COVID-19 symptoms, especially if around someone who is sick.
  - If they have symptoms of COVID-19, they should get tested and stay home and away from others.
- They will still need to follow guidance at work.

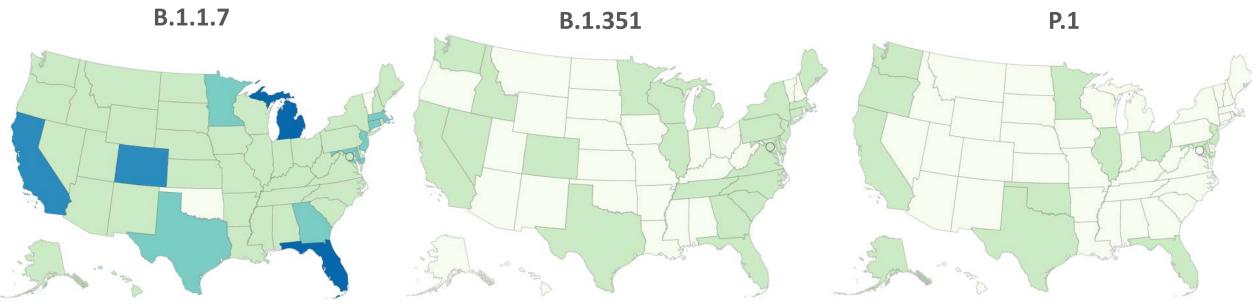




### COVID-19 VARIANTS IN U.S. CDC

Variant	Reported Cases in U.S. (NM)	Number of jurisdictions reporting	
B.1.1.7 (U.K.)	4,686 (9)	50	
B.1.351 (South Africa)	142 (0)	25	
P.1 (Manaus, Brazil)	27 (0)	12	

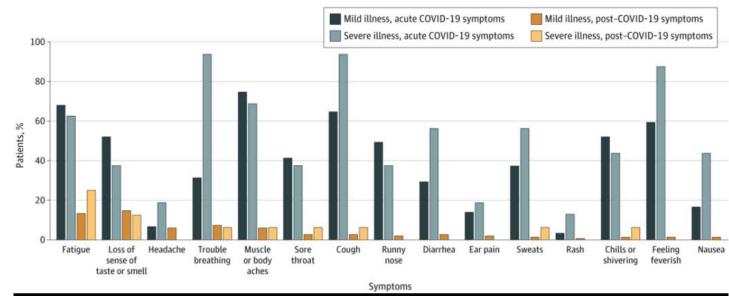




SEQUELAE IN ADULTS AT 6 MONTHS AFTER COVID-19 INFECTION

- 177 adults with lab-confirmed SARS-CoV-2 at Univ. of Washington between August and November 2020 completed questionnaire between 3 and 9 months after illness onset.
  - Overall, 11 (6.2%) asymptomatic, 150 (84.7%) outpatients with mild illness, and 16 (9.0%) required hospitalization.
- ~30% reported persistent symptoms for as long as 9 months after illness.
- Most common symptoms fatigue and loss of sense of smell or taste both 13.6%.
  - 13.0% reported other symptoms, including brain fog (2.3%).
  - 7.9% reported negative impacts on at least 1 activity of daily living, most common being household chores.

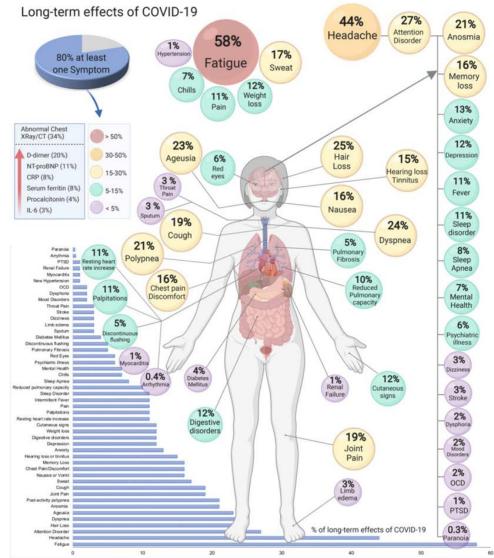
Percentage of participants who reported COVID-19 symptoms during acute illness and at follow-up





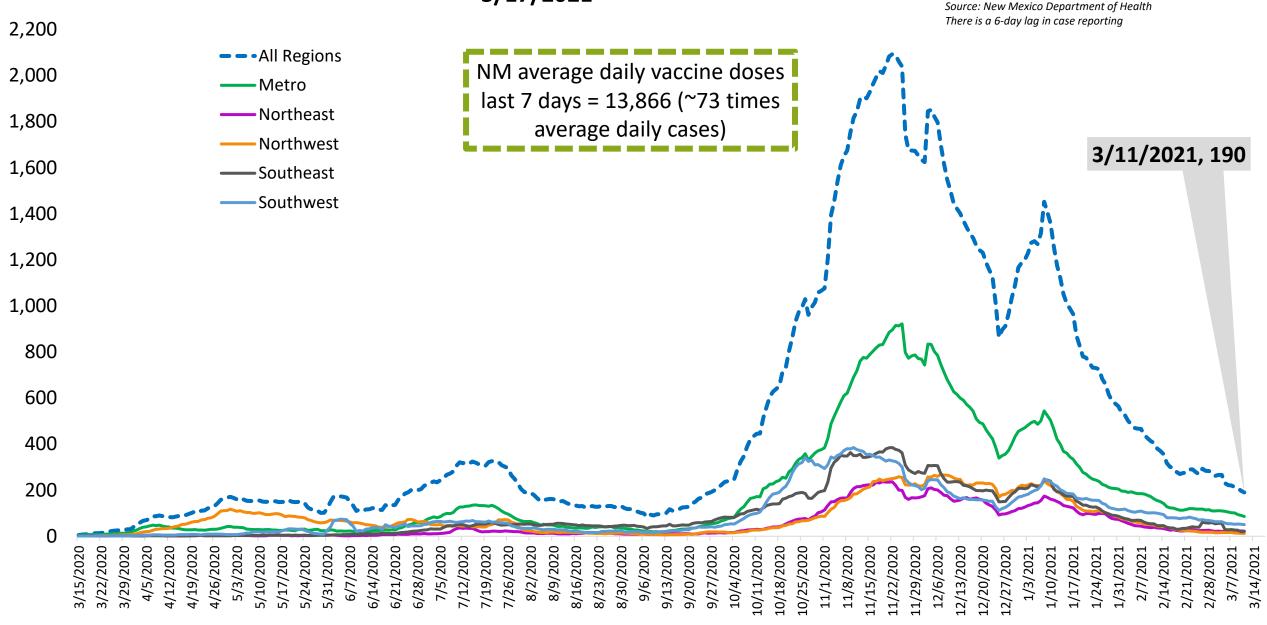
### SOME LONG-HAUL COVID-19 PATIENTS SAY THEIR SYMPTOMS 27 ARE SUBSIDING AFTER GETTING VACCINES WASHINGTON POST

- Some people with Long COVID are seeing symptoms disappear after vaccinations.
- Reasons for improvement after vaccination remain unknown and research is scarce.
- U.S. clinicians and researchers have yet to come to a consensus on even a definition for Long COVID.
  - They do not know how many people have it,
  - What all the symptoms may be; and,
  - Who tends to develop problems.
- National Institutes of Health (NIH) will spend \$1.1 billion over next 4 years to study Long COVID.
  - NIH estimates 10 to 30 % of people infected with COVID-19 have some long-term symptoms.

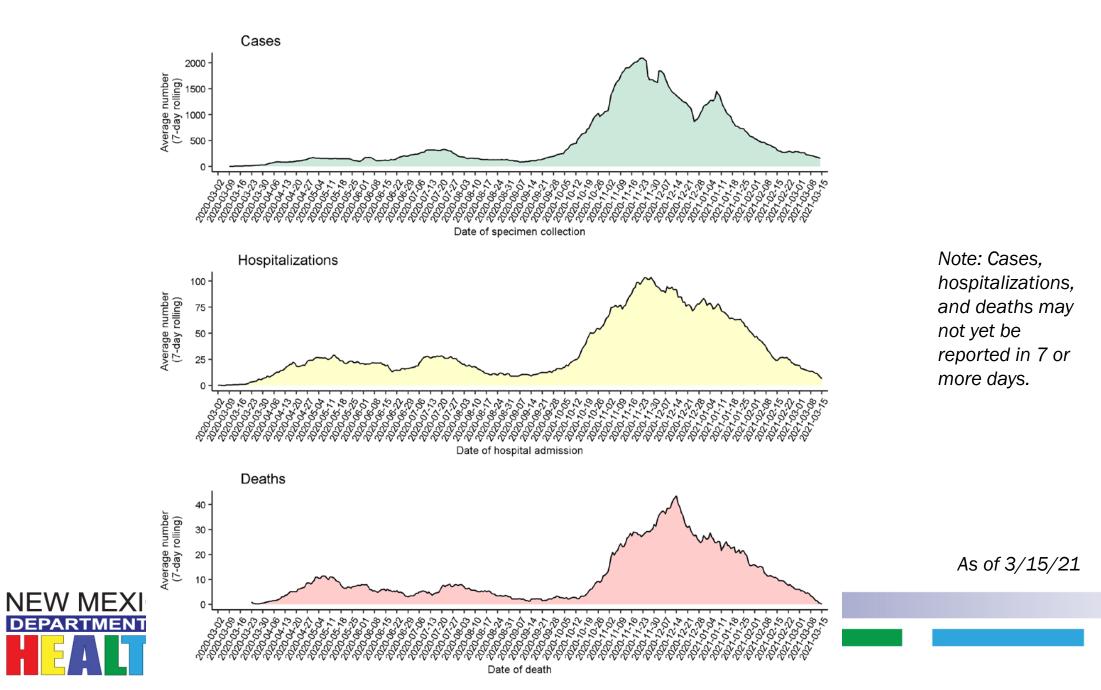


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7-Day Average of Daily COVID-19 Positive Cases by Date of Specimen Collection, NMDOH Regions 3/17/2021



Average number (7-day rolling average) of cases, hospitalizations, and deaths over time

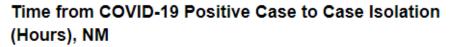


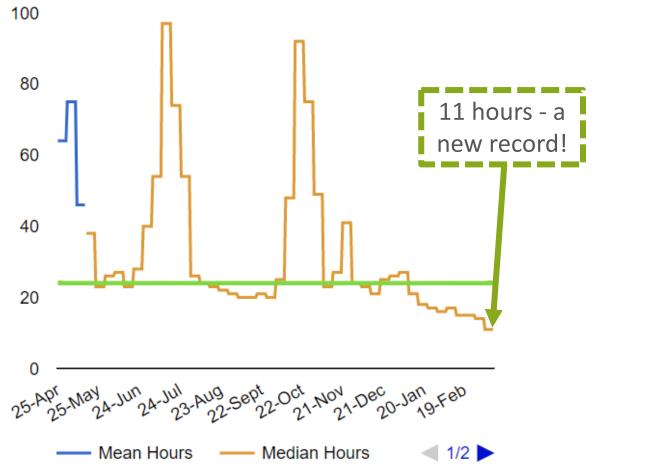
### STATEWIDE PUBLIC HEALTH GATING CRITERIA FOR REOPENING<sup>30</sup>

Criterion	Measure	Gating Target	<b>Current Status</b>
Spread of COVID-19	Rate of COVID-19 Transmission (10-day Rolling Average)	1.05 or less	0.80 on 3/16/21
	NM daily cases (7-day rolling average)	168	190 on 3/11/21
Testing Capacity: general and targeted populations*	Number of tests per day (7-day rolling average)	5,000 / day	9,904 on 3/15/21
	Test Positivity Rate (7-day rolling average)	5.0% or less	2.0% on 3/15/21
Contact Tracing and	Time from positive test result to:	24 hrs	Week ending 3/12 = 11
Isolation Capacity	<ul> <li>-isolation recommendation for case</li> <li>-quarantine rec. for case contacts</li> </ul>	36 hrs	Week ending $3/12 = 11$ Week ending $3/12 = 24$
Statewide Health Care	Availability of scarce resources in 7 Hub Hospitals:		
System Capacity	-Adult ICU beds occupied	439 or less	258 on 3/17/21
	-PPE	7-day supply	7 on 3/15/21

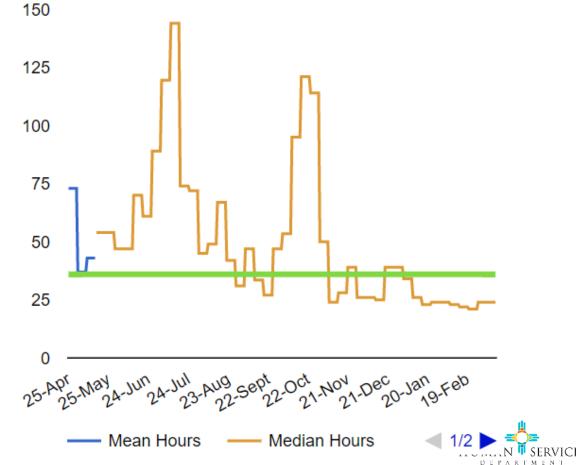
#### **ALL 4 CRITERIA DRIVEN BY SOCIAL DISTANCING BEHAVIORS OF NEW MEXICANS**

### GATING CRITERIA FOR REOPENING NEW MEXICO: CONTACT TRACING & ISOLATION





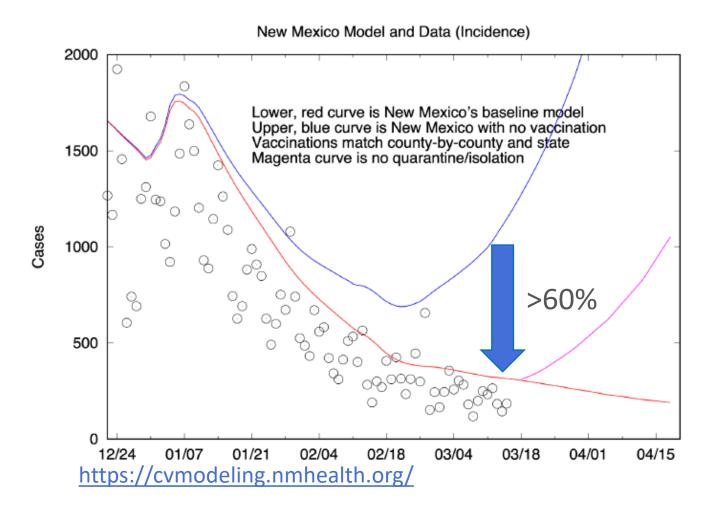
Time from COVID-19 Positive Case to Contact Quarantine (Hours), NM



https://cvmodeling.nmhealth.org/public-health-gating-criteria-for-reopening-nm/contact-tracing-and-isolation-capacity/ Investing for tomorrow, delivering today.

## EFFECT OF VACCINATION ON COVID-19 INCIDENCE

- Vaccination lowering daily incidence by more than 60%.
- Europe had strikingly similar trends and surges during pandemic as US and NM.
  - It had low points like NM is having now, then rose after mitigation strategies disregarded.
  - Quarantine, contact tracing, mask wearing, and social distancing still critically important.
  - We are moving in right direction but where we goes depends on whether we all do what must be done to protect ourselves and others.



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### WE MUST REMAIN VIGILANT

#### The virus is changing!

- New COVID variants may spread more rapidly and be resistant to treatments and/or vaccines.
- We are closely monitoring for new variants.
- Get tested if you think you have COVID-19 or have been exposed to someone who is positive.
- If you have COVID-19, learn if you're eligible for monoclonal antibody treatment.
- We ALL need to stay committed to fighting the virus for several more months.

#### CASE COUNTS REMAIN TOO HIGH. WE ALL STILL MUST FIGHT THE VIRUS.

- Stay at home.
- Wash hands, clean surfaces, cough into tissue/elbow.
- Everyone needs to wear face coverings in public.
- Maintain social distancing (minimum 6 feet).
- Be particularly careful in the month after receiving the vaccine.





# NMDOH

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### QUESTIONS

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