

COVID-19 Status Update

Scott County Board of Supervisors
September 14, 2021





Case Status

	2021	2020
September	556	960
August	1,515	633
July	335	865
June	88	384



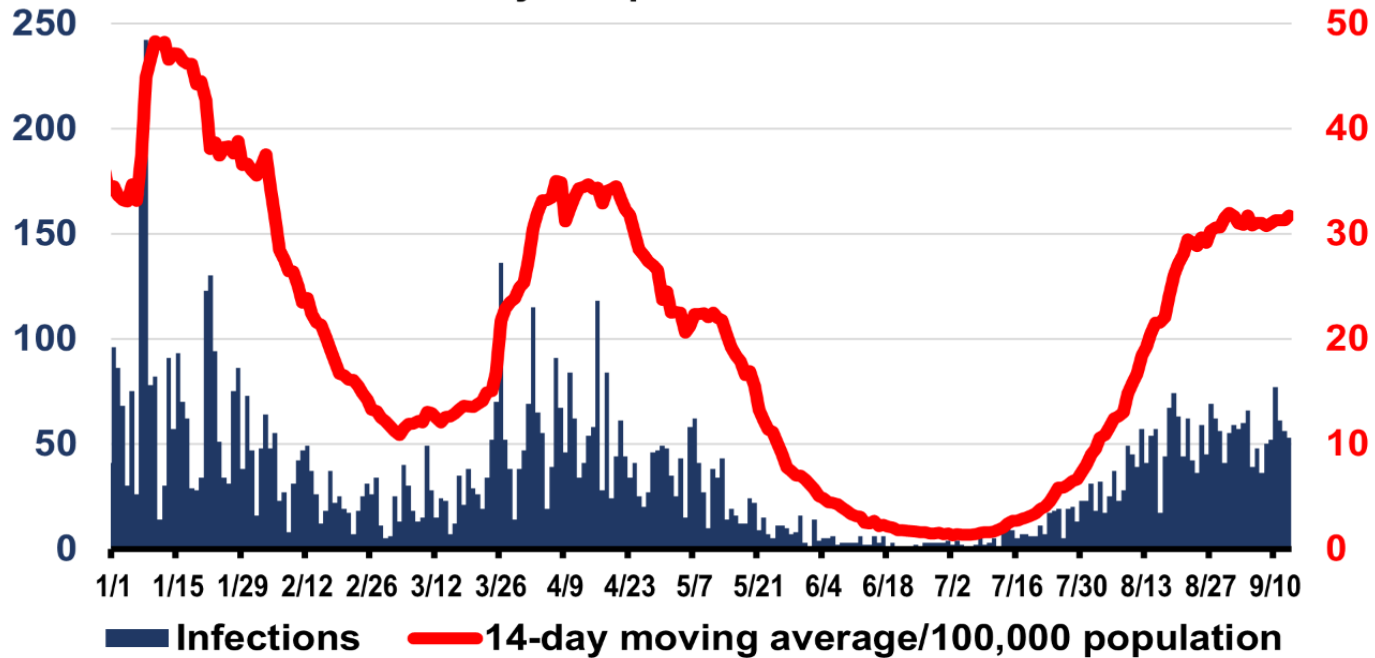
EpiCurve

Infections and 14-day moving average

SCHD: 1 Jan-13 Sep 2021

Cum. infections from 21 Mar 2020 = 23,626 (with epi-linked)

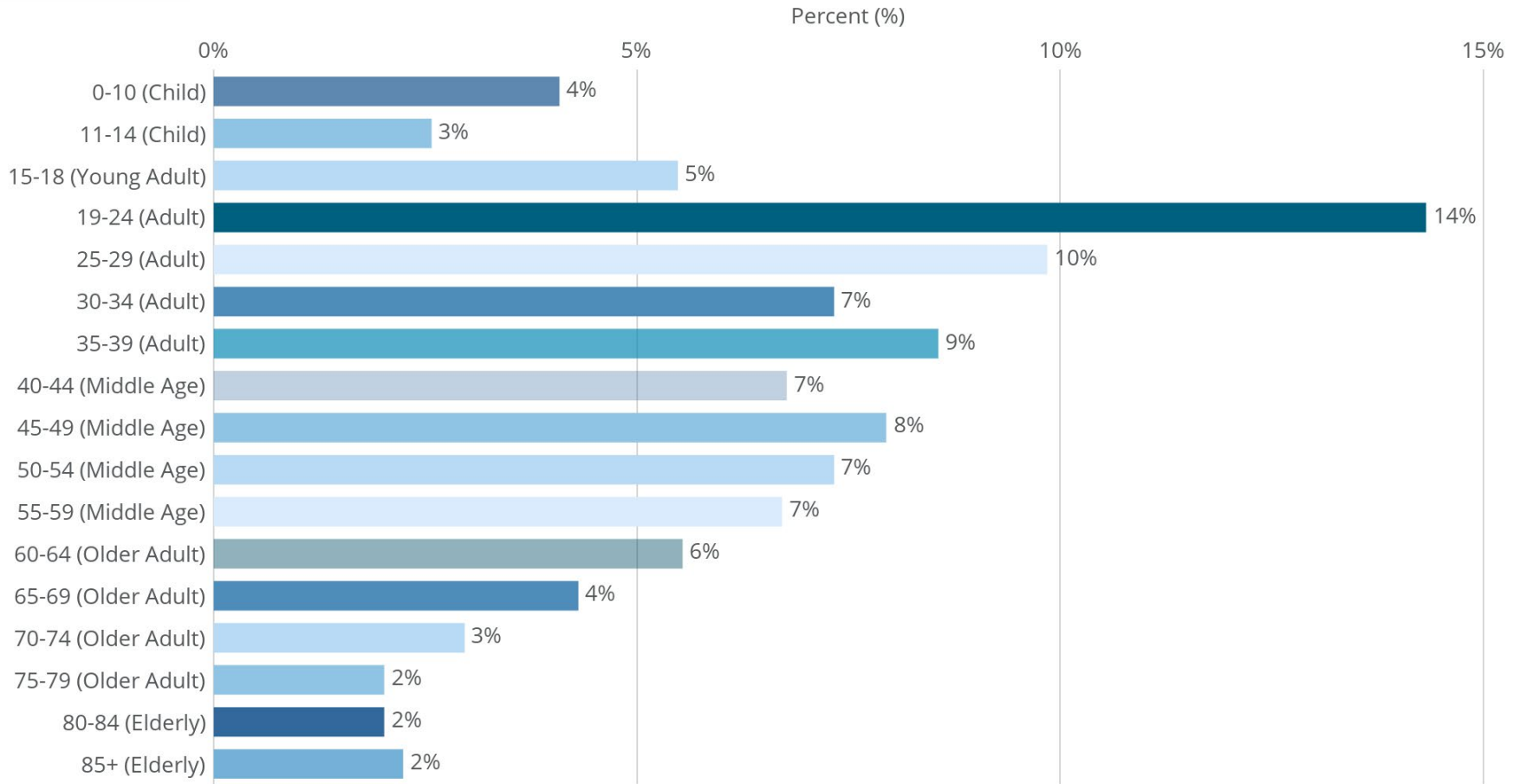
7-day test positive rate = 8.5%





Positive Cases by Age Group

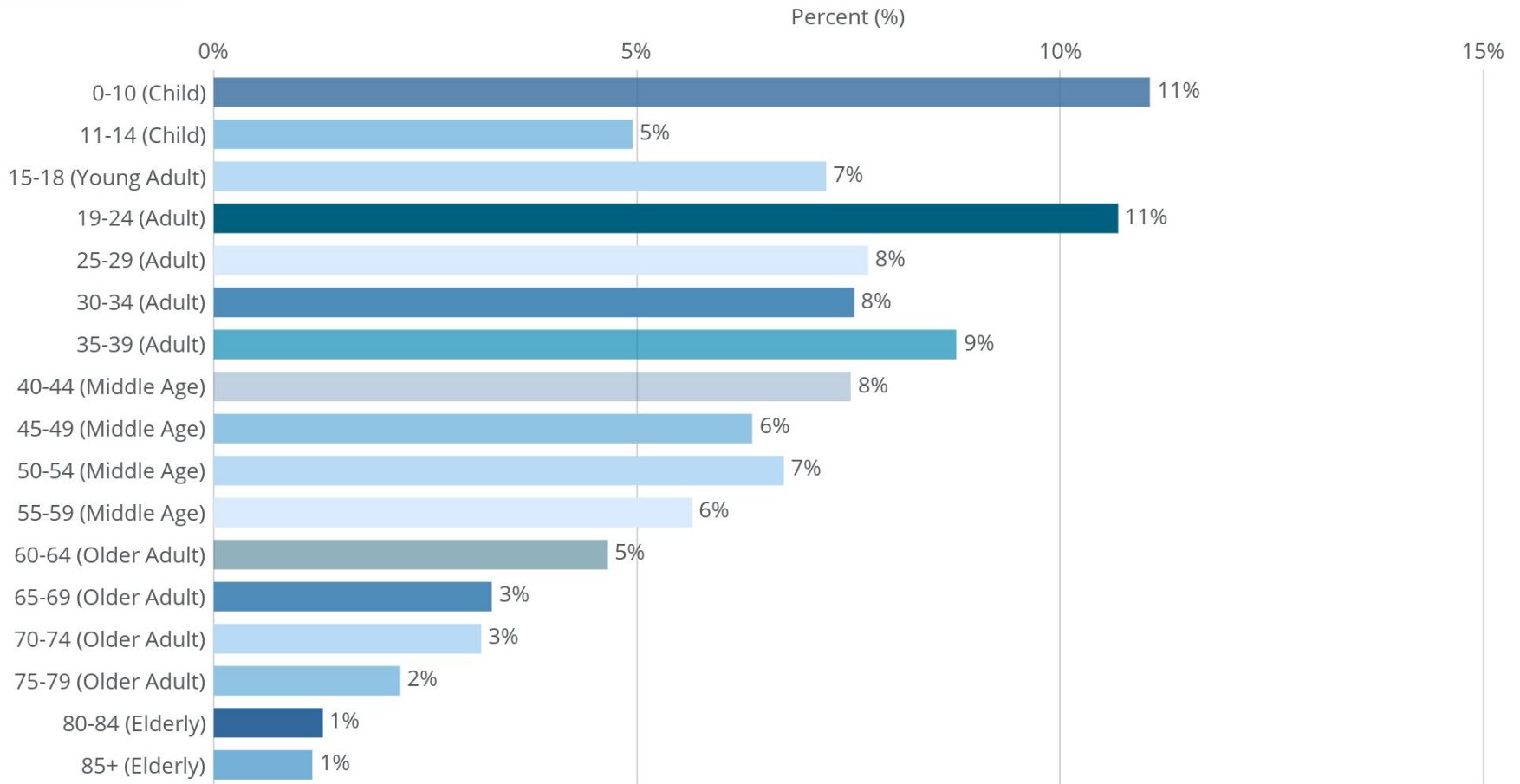
July 1, 2020 to September 30, 2020





Positive Cases by Age Group

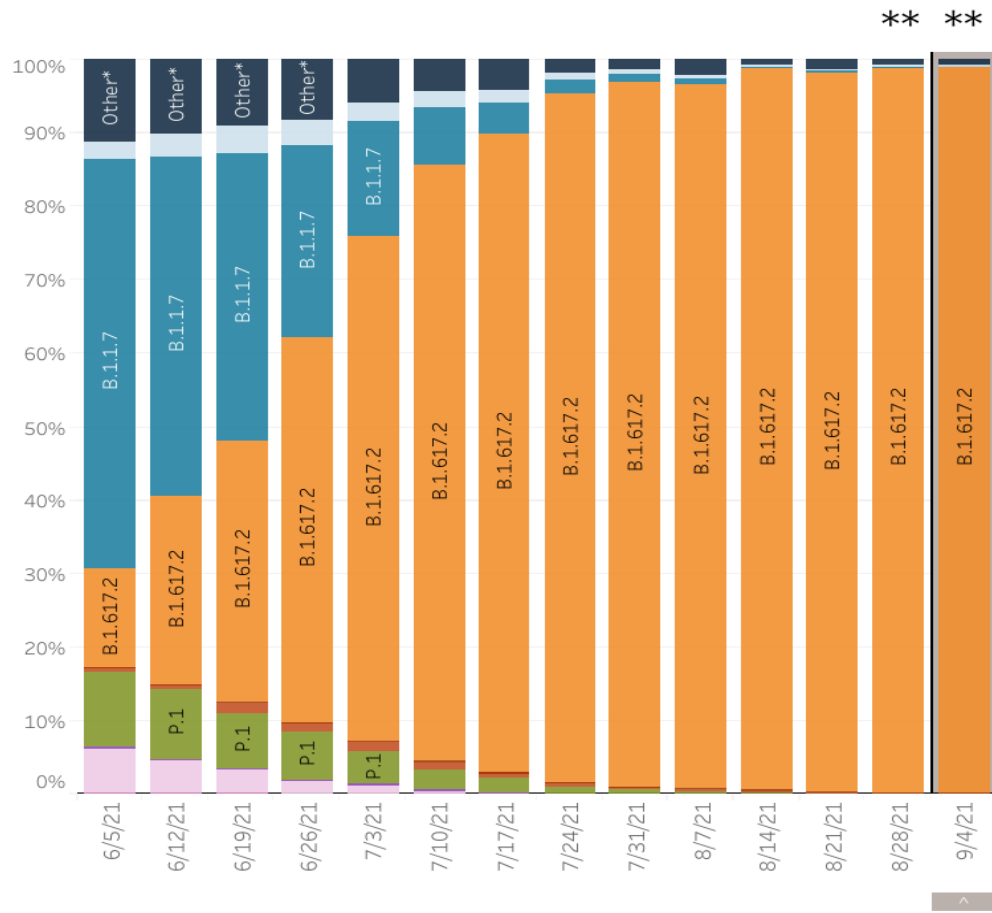
July 1, 2021 to September 13, 2021





Proportion of Variants

United States: 5/30/2021 – 9/4/2021



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Areas of Concern

- Delta Variant
- Classroom Transmission
- Testing
- Illness Volumes
- Staffing
- General Community Sentiment
- What Happens Next



Vaccinations

People Vaccinated	At Least one Dose	Fully Vaccinated
Total Population	57.1%	50.7%
Population \geq 12 years of age	67.6%	60%
Population \geq 18 years of age	69.7%	62.1%
Population \geq 65 years of age	91.5%	86.6%



Vaccinations for the Under 12

“Just like you, we are eager to see our children and grandchildren vaccinated against COVID-19 as soon as possible. We have to let the science and data guide us. The FDA is working around the clock to support the process for making COVID-19 vaccines available for children. As outlined above, this process is complex and relies on robust manufacturer trials and data, and while we cannot offer a specific date or timeline for when it may be completed for the various manufacturers’ vaccine candidates, we can assure the public we are working as expeditiously as possible to meet this critical public health need and we very much hope to have pediatric COVID-19 vaccines available in the coming months.”



Steps in Process

- Vaccine manufacturers complete clinical trials including at least two months follow-up
- Review of data by manufacturers and submission for EUA or approval
- FDA review of data
- FDA decision
- ACIP decision



Third Dose vs Booster Dose

- Third Dose
 - Approved by CDC and FDA
 - Recommended for individuals moderately or severely immunocompromised
 - Help with the immune response to the initial series
- Booster Doses
 - Not approved by CDC and FDA at this time
 - Data being reviewed regarding protection declining after time
 - FDA Committee meeting on Friday-Pfizer Comirnaty



Workgroup Considerations

- Top priority should be continued vaccination of unvaccinated individuals.
- Priority for booster dose policy: Prevention of severe disease in at-risk populations.
- Simplicity and flexibility will be important to support equitable and efficient delivery of booster doses.
- Important to ensure global vaccine availability.
- Policy around booster doses should also consider equity in the U.S. population.



Workgroup Considerations contd.

- In addition to immunogenicity data, need to review available safety data for booster doses.
- Balance of benefits and risks for booster doses may vary by age – Policy for booster doses needs to take this benefit/risk balance into account.
- Critical to wait for additional safety data and regulatory allowance for booster doses.
- Risk-based approach for booster dose recommendations.
 - Prevent severe disease in the most at-risk populations
 - Support strained healthcare system
- Time since vaccination.



Possible Recommendations for **Initial Booster Doses**

- Long-term care facility residents
- Healthcare personnel
- Adults $\geq 65/75$ years of age

<https://www.cdc.gov/vaccines/acip/meetings/downloads/slides-2021-08-30/09-COVID-Oliver-508.pdf>

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YOUR **HEALTH.**
Our priority.

