Governor Scott’s COVID-19 Press Conference – 12.29.20

[VT Digger Recording](https://www.facebook.com/watch/live/?v=233587471654841&ref=search)

<https://dfr.vermont.gov/sites/finreg/files/doc_library/dfr-covid19-modeling-122920.pdf>

* Second week our case rate is dropping – too early too see what holiday travel and gatherings will produce – holding our breath
* Avoid unnecessary gatherings and out-of-state travel, masks and social distancing
* Vaccinating will take some time we are on the path of protecting our most valuable – 10,000 VTers vaccinated
* Vaccination teams meeting multiple times a day

**Sec. Smith:**

We have vaccinated approx. 8,000 hcw, Ems – 800, LTC – 900 residents at 19/37 skilled facilities have received first dose – all should receive second dose by end of January

Kinneys said they are willing to accelerate at LTC and Assisted living facilities – Walgreens will accelerate also

32,000 doses of vaccine 24.2% has been shipped to VT hospitals and remainder has gone to federal pharmacy

LTC data is lagging but by the end of January all of phase 1A should have received first dose and many the second dose

Preview – completion of phase 1A will begin the process of Mass vaccination across VT at

* pcps,
* pharmacies,
* district health offices
* and mass vaccine sites in conjunction with 19 testing sites – all in service –

Vaccines will be prioritized by age – easiest way to administer

There will be age bands – 75+ 70+ 65+ - underlying conditions will be prioritized and well-defined

Disadvantaged will be considered and we will seek to mitigate inequities

Trying to design a system – easily implemented and administered

Primary goal is to save lives

AHS, VDH. DPS, National Guard and ADS – meet multiple times a day

Senior leadership team give the Governor and public informed

More to report in the coming weeks

**Commissioner Pieciak** – Cases decreasing by 28 percent over the past 7 days

 clear downward trends our communities are becoming safer

Positivity rate is remaining low

Hospital rates – steady but trending lower

Deaths – significant increase December will be the deadliest month

LTC – 1 new outbreak – 513 cases associate with an outbreak in a LTC facility

Fewest number of cases at LTC facilities

Cases will remain relatively flat over the next 4 weeks – improved forecast – this week the Northeast saw a decrease in positive cases – second week of decrease in regional cases

* VT has the fewest active cases in the region Washington and Orange Counties leading the region in lowest case rates
* Sharp decrease in travel re: Xmas
* 2 million Americans have received their first dose out of 22 million HCW needed to be vaccinated
* Have a regional vaccination map – Vters leader in vaccination rate

**Commissioner Levine:**

Public health never sleeps – thank you to all workers

* 82 new cases and 1 death – 10 deaths in the last 5 days
* 41 outbreaks and 200+ situations
* LTC has 14 of the outbreaks
* 7 day positivity rate – low at 2%

69% of VT COVID deaths are over the age of 80 – which is why we will prioritize vaccination by age. People that are exposed and have the virus can show no symptoms – but in a LTC facility is meets people that are older and have devastating results. Higher rates of illness and death at LTC compared to the general population

30% of deaths are in their community and almost exclusively for 6o yrs old or older

40% of people with COVID have a chronic condition

Highest risk is those with conditions and that are in the oldest age bands

There are over 400,000 Vters that fall into this category

Chronic conditions is anything that compromises immunity

Phase 1A – proceeding well

* Advisory group meeting to develop plans for the next phase
* Guiding north star is to prevent the most deaths – equitable and systematic access
* Too early to know if the holidays cause a spike – for Xmas and new year’s
* Follow the guidance – ***masks on faces, 6-ft spaces, uncrowded places***

**Questions –**

* No gap in UI benefits
* Congress working out difference btw $600 and $2000 personal benefits

Correctional facility outbreak/lockdown – no updates – 2 positive at NW correctional facility

Staff testing tomorrow

* Start of the session – virtual, unique and difficult – maybe when we get vaccinated we can go back to somewhat normal
* State-of the State will be a week from Thursday and I will release priorities and issue in SOS
* Still weeding through omnibus bill from Congress and what benefits VT

No problem accessing flu vaccine – except for the double dose for older people and that has been resolved

Chronic conditions and age – how do you prioritize simultaneously? Chronic conditions moved to the front of the line – always be a priority

* The reality is that it depends on the number of vaccine coming in at one time and we are about 1 month away
* How is the state going to notify the people who will be vaccinated? All being worked out now – a lot of people working with their PCPs now – part of that. Pharmacies will play a role – local health offices will play a role – I assume a registration will follow what we have done with testing
* How will you enforce? We put faith in VTers and that process has worked. Details TBD

Donation of monochromal antibodies – can they be used to treat people and offer protection to Vters?

Levine they are here in VT and administered by an infusion – someone who has mild to moderate symptoms and at high risk the therapy is used to prevent hospitalization. The question is if someone has just been exposed should have it – I think there is too much controversy in the US – not quite ready for primetime. Waiting for more studies – can’t imagine people using for prevention

Hopeful that Astrzeneca trial will have older people to show effectiveness in that population

Two vaccines 95% effective in the tested populations – done with 30-40,000 people over 3-4 month period

Need to test age, chronic conditions, youth, adolescents, race and ethnicity

Prioritize BIPOC pop – how do you identify them and reach out to those communities?

* VDH has done a good job of developing lines of communication with these communities
* Need to develop criteria and recognize we have to prioritize these communities – at the top of our list and our minds.
* LTC – trying to put out the fire everywhere – trying to accelerate the federal pharmacy program – have to try to get to the facilities faster than when was originally planned – within a week all of the 37 skilled nursing facilities will have the first dose.

Vaccination is not a strategy to end an outbreak in a facility – there could be people infected and need to acknowledge that the majority of LTC and assisted living do not have outbreaks

Month or two before vaccination is fully effective – must stay the course with masks and other preventive measures

Don’t know how many VTers will be in each age category

We are planning for everyone to accept vaccine – knowing they all won’t accept it