We will begin in just a few moments. Thanks!
This is an **emerging, rapidly evolving situation**. Information in this presentation is current as of February 24, 2021. Please check the South Dakota Department of Health website for the most current information and guidance.

[COVID.sd.gov](https://COVID.sd.gov)
Agenda

- Situation Update
- Laboratory Guidance
- Long Term Care
- Vaccination Update
- Community Mitigation
- Supply Chain Management
- On-going Communications
- Q&A Session

Not intended for press or for reporting purposes.
Coronavirus Situation (as of February 24, 2021)

- **International**
  - 111,762,965 confirmed cases
  - 2,479,678 deaths
- **United States** (50 states + DC)
  - 27,993,504 confirmed cases
  - 498,993 deaths
- **South Dakota**
  - 111,808 confirmed and probable cases
  - 1,864 deaths
  - 108,053 recovered cases

*Not intended for press or for reporting purposes.*
Epidemiologic “Epi” Curve of COVID-19 Cases, by Date Reported to SD-DOH

Not intended for press or for reporting purposes.
COVID-19 Case Map, by County

As of February 24, 2021

Substantial Community Spread

Beadle  Lincoln
Brookings  Meade*
Charles Mix  Minnehaha
Codington  Pennington
Day  Roberts
Grant  Tripp*
Hamlin*  Union
Hughes
Kingsbury*  * New County

As of February 24, 2021

Not intended for press or for reporting purposes.
General Testing Recommendations

Medical providers are recommended to test individuals with signs and symptoms compatible with COVID-19 infection, including:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea


As of June 18, 2020

Not intended for press or for reporting purposes.
Reporting COVID-19 Tests to SD-DOH

• **Reminder:** Coronavirus respiratory syndromes are a Category I disease

• Report *immediately* on suspicion of disease

• Reporting mechanisms:
  • Electronic Laboratory Report (ELR) – HL7 message to SD Health Link (health information exchange)
  • Flat file (CSV) – Secure email
  • Disease reporting website – [sd.gov/diseasereport](http://sd.gov/diseasereport)
  • Fax – 605.773.5509

*Not intended for press or for reporting purposes.*
Clusters of SARS-CoV-2 Infection Among Elementary School Educators and Students in One School District — Georgia, December 2020–January 2021


Not intended for press or for reporting purposes.

https://www.cdc.gov/mmwr/volumes/70/wr/mm7008e4.htm?s_cid=mm7008e4_x
## Post-Vaccination Symptom Considerations

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cough, shortness of breath, runny nose, sore throat, loss of taste and/or smell</td>
<td>Exclude from work, consult HCP to see if testing should be performed</td>
</tr>
<tr>
<td>Fatigue, headache, chills, myalgia, arthralgia</td>
<td>Able to work without COVID-19 testing if feeling well enough and afebrile</td>
</tr>
<tr>
<td>Fever</td>
<td>Workers with fever are generally recommended to stay at home</td>
</tr>
</tbody>
</table>


*Not intended for press or for reporting purposes.*
# First Month of COVID-19 Vaccine Safety Monitoring — United States, December 14, 2020—January 13, 2021

**TABLE 1. Reports of adverse events after receipt of Pfizer-BioNTech and Moderna COVID-19 vaccines, by recipients’ demographic characteristics and reported symptoms — Vaccine Adverse Event Reporting System, United States, December 14, 2020–January 13, 2021**

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>All COVID-19 vaccine doses (N = 6,994)</th>
<th>Pfizer-BioNTech vaccine</th>
<th>Moderna vaccine</th>
<th>Moderna vaccine Dose 1 (N = 1,373)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>No. (%) reporting adverse events</td>
<td>Dose 1 (N = 5,428)</td>
<td>Dose 2 (N = 193)</td>
<td></td>
</tr>
<tr>
<td>Nonserious adverse event reports</td>
<td>6,354 (90.9)</td>
<td>5,087 (93.7)</td>
<td>152 (78.6)</td>
<td>1,115 (81.2)</td>
</tr>
<tr>
<td>Serious adverse event reports*</td>
<td>640 (9.2)</td>
<td>341 (6.3)</td>
<td>41 (21.2)</td>
<td>258 (18.8)</td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>5,505 (78.7)</td>
<td>4,296 (79.2)</td>
<td>142 (73.6)</td>
<td>1,067 (77.7)</td>
</tr>
<tr>
<td>Male</td>
<td>1,408 (20.1)</td>
<td>1,056 (19.5)</td>
<td>51 (26.4)</td>
<td>301 (21.9)</td>
</tr>
<tr>
<td>Unknown</td>
<td>81 (1.2)</td>
<td>76 (1.4)</td>
<td>0 (-)</td>
<td>5 (0.4)</td>
</tr>
<tr>
<td>Age group (yrs)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>0–17</td>
<td>12 (0.2)</td>
<td>4 (0.1)</td>
<td>0 (-)</td>
<td>8 (0.6)</td>
</tr>
<tr>
<td>18–49</td>
<td>4,539 (64.9)</td>
<td>3,568 (65.7)</td>
<td>119 (61.7)</td>
<td>852 (62.1)</td>
</tr>
<tr>
<td>50–64</td>
<td>1,772 (25.3)</td>
<td>1,351 (24.9)</td>
<td>51 (26.4)</td>
<td>370 (27.0)</td>
</tr>
<tr>
<td>65–74</td>
<td>255 (3.7)</td>
<td>184 (3.4)</td>
<td>11 (5.7)</td>
<td>60 (4.4)</td>
</tr>
<tr>
<td>75–84</td>
<td>85 (1.2)</td>
<td>48 (0.9)</td>
<td>5 (2.6)</td>
<td>32 (2.3)</td>
</tr>
<tr>
<td>≥85</td>
<td>93 (1.3)</td>
<td>46 (0.9)</td>
<td>4 (2.1)</td>
<td>43 (3.1)</td>
</tr>
<tr>
<td>Unknown</td>
<td>238 (3.4)</td>
<td>227 (4.2)</td>
<td>3 (1.6)</td>
<td>8 (0.1)</td>
</tr>
<tr>
<td>Most frequently reported symptoms</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Headache</td>
<td>1,566 (22.4)</td>
<td>1,184 (21.8)</td>
<td>35 (18.1)</td>
<td>347 (25.3)</td>
</tr>
<tr>
<td>Fatigue</td>
<td>1,154 (16.5)</td>
<td>912 (16.8)</td>
<td>14 (7.3)</td>
<td>228 (16.6)</td>
</tr>
<tr>
<td>Dizziness</td>
<td>1,151 (16.5)</td>
<td>907 (16.7)</td>
<td>16 (8.3)</td>
<td>228 (16.6)</td>
</tr>
<tr>
<td>Chills</td>
<td>1,040 (14.9)</td>
<td>760 (14.0)</td>
<td>19 (9.8)</td>
<td>261 (19.0)</td>
</tr>
<tr>
<td>Nausea</td>
<td>1,037 (14.8)</td>
<td>790 (14.6)</td>
<td>18 (9.3)</td>
<td>229 (16.7)</td>
</tr>
</tbody>
</table>

*Based on the Code of Federal Regulations, classification of a serious adverse event includes a report of one of the following: death, life-threatening illness, hospitalization or prolongation of hospitalization, permanent disability, congenital anomaly, or birth defect. [https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcr/cfrsearch.cfm?fr](https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcr/cfrsearch.cfm?fr)
† Includes 113 deaths.

[https://www.cdc.gov/mmwr/volumes/70/wr/mm7008e3.htm?s_cid=mm7008e3_x](https://www.cdc.gov/mmwr/volumes/70/wr/mm7008e3.htm?s_cid=mm7008e3_x)

Not intended for press or for reporting purposes.
Selected CDC Updates

Available at: https://www.cdc.gov/coronavirus/2019-ncov/whats-new-all.html


Not intended for press or for reporting purposes.
Laboratory Guidance

Not intended for press or for reporting purposes.
There remains a need to maintain a high level of testing statewide.

Symptomatic individuals
- Connect COVID-19 patients with care
- Track spread of disease
- Disrupt transmission
- Variant surveillance

Asymptomatic individuals
- Detect “asymptomatic” COVID-19 cases
- End-of-quarantine testing
- Variant surveillance

Not intended for press or for reporting purposes.
Monoclonal Antibody Therapies for COVID-19

- 4,848 doses of monoclonal antibody therapy have been allocated to South Dakota
- 3,367 patients have been treated with mAb therapy in South Dakota
- 1,481 doses are currently on-hand in South Dakota

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**Doses Allocated**

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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>820</td>
<td>540</td>
<td>340</td>
<td>240</td>
<td>140</td>
<td>230</td>
<td>50</td>
<td>50</td>
<td>460</td>
<td>472</td>
<td>660</td>
</tr>
</tbody>
</table>

**One-week allocation cycles**

**Two-week allocation cycles**

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*Not intended for press or for reporting purposes.*
mAb Therapy Impact: Nationwide Assessment

- Approximately 40,000 mAb treatments are administered each week in the US
- Approximately 2,000 hospitalizations prevented each week
  - 21 mAb treatments are required to prevent 1 hospitalization
- Approximately 769 deaths prevented each week
  - 52 mAb treatments are required to prevent 1 death
- Based on this assessment, approximately 20,000 hospitalizations and 8,000 deaths may have been prevented since the beginning of mAb therapy roll-out

*Based on 70% of receiving sites reporting*
Information about mAb therapy and locations that offer mAb therapy can be found at [HHS Protect Public Data Hub: Therapeutics Distribution](#).
mAb Therapy Distribution Locations

- Data is based on shipments reported by the distributor and is not a guarantee of availability.
- Patients should coordinate with their physician or care provider before contacting a location to receive treatment.
- Locations that received fewer than 5 courses of treatment are not displayed.
- These therapeutics must be used under the terms of the EUA for appropriate patients.
- Data displayed on this page is for informational purposes only for clinicians and patients.

Not intended for press or for reporting purposes.
mAb Therapy Library of Information

Direct Ordering:
- Direct Ordering Process Guide
- AmerisourceBergen COVID-19 Director Order Request

General Information:
- COVID-19 Monoclonal Antibody Therapeutics Key Resources for Providers (Fact Sheet)
- Regeneron EUA Guidebook
- Lilly Bamlanivimab Antibody Playbook
- ASPR Portfolio of COVID-19 Medical Countermeasures

Support:
- HHS: COVID19Therapeutics@hhs.gov
- Amerisource Bergen: C19therapies@amerisourcebergen.com
- SD-DOH: Bob.Coolidge@state.sd.us

Not intended for press or for reporting purposes.
Long Term Care
Disease Impact – United States as of 02.07.21

Resident and Staff Cases and Deaths

<table>
<thead>
<tr>
<th>Total Resident COVID-19 Confirmed Cases</th>
<th>Total Resident COVID-19 Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>631,427</td>
<td>127,235</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Staff COVID-19 Confirmed Cases</th>
<th>Total Staff COVID-19 Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>542,443</td>
<td>1,576</td>
</tr>
</tbody>
</table>


Not intended for press or for reporting purposes.
Long Term Care in South Dakota

Disease Impact in Nursing Homes and Assisted Living Centers

- Current Number of LTC Facilities with Case – 13* (11 facilities with a case in staff only)
- Cumulative Total LTC Facilities with Case – 216
- Current Active Cases in a Resident – 7*
- Cumulative Total Resident Cases – 3,525
- Cumulative Total Resident Deaths – 861
- Current Active Cases in Staff – 10*
- Cumulative Total Case in Staff – 1,223

*self-reported by touch-base calls as of 02.23.2021 - all data is provisional

Not intended for press or for reporting purposes.
Visitation - guidance based on the Center for Medicare and Medicaid Services (CMS) revised guidance September 17, 2020 (QSO-20-39-NH)

- State of South Dakota Back to Normal Long-Term Care Reopening Plan - Revised September 25, 2020

- The guidance represents reasonable ways a NH and ALC can facilitate in-person visitation.

- The plan provides guidance to NH and ALC to relax visitor restrictions.

- Visitation may occur safely and based on the community (county) test positivity rate, the absence of COVID-19 within the facility, and the core principles of COVID-19 infection prevention.

- Facilities must have a plan with policies and procedures in place to ensure person-centered visitation is reasonably allowed and will occur based on the core principles of COVID-19 infection prevention and the COVID-19 test positivity rate in the community (county).
Community (County) Test Positivity Rate

- Low (<5%) = Visitation should occur according to the core principles of COVID-19 infection prevention and facility policies (beyond compassionate care visits)

- Medium (5% – 10%) = Visitation should occur according to the core principles of COVID-19 infection prevention and facility policies (beyond compassionate care visits)

- High (>10%) = Visitation should only occur for compassionate care situations according to the core principles of COVID-19 infection prevention and facility policies
### Percent Positive and Tests in prior 14 days:

#### Counties

<table>
<thead>
<tr>
<th>County</th>
<th>Test Positivity Rate</th>
<th>Tests in prior 14 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Green Monthly</td>
<td>39</td>
<td>59%</td>
</tr>
<tr>
<td>Yellow Weekly</td>
<td>25</td>
<td>38%</td>
</tr>
<tr>
<td>Red 2 X Weekly</td>
<td>2</td>
<td>3%</td>
</tr>
</tbody>
</table>

#### Nursing Homes

<table>
<thead>
<tr>
<th>Counties</th>
<th>Nursing Homes</th>
</tr>
</thead>
<tbody>
<tr>
<td>66</td>
<td>104</td>
</tr>
</tbody>
</table>

---

Data from February 4-February 17

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Not intended for press or for reporting purposes.
Compassionate Care – for counties over 10% test positivity rate

Source: CMS Frequently Asked Questions – October 6, 2020

While end-of-life situations have been used as examples of compassionate care situations, the term “compassionate care situations” does not exclusively refer to end-of-life situations. Examples of other types of compassionate care situations include, but are not limited to:

• A resident, who was living with their family before recently being admitted to a nursing home, is struggling with the change in environment and lack of physical family support.
• A resident who is grieving after a friend or family member recently passed away.
• A resident who needs cueing and encouragement with eating or drinking, previously provided by family and/or caregiver(s), is experiencing weight loss or dehydration.
• A resident, who used to talk and interact with others, is experiencing emotional distress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past).

Allowing a visit in these situations would be consistent with the intent of, “compassionate care situations.” Also, in addition to family members, compassionate care visits can be conducted by any individual that can meet the resident’s needs, such as clergy or lay persons offering religious and spiritual support.

Furthermore, the above list is not an exhaustive list as there may be other compassionate care situations not included.
The **Core Principles of COVID-19 Infection Prevention**

- **Screening** of all who enter the facility for signs and symptoms of COVID-19 (e.g., temperature checks, questions or observations about signs or symptoms), and denial of entry of those with signs or symptoms
- **Hand hygiene** (use of alcohol-based hand rub is preferred)
- **Face covering or mask** (covering mouth and nose)
- **Social distancing** at least six feet between persons
- **Instructional signage** throughout the facility and proper **visitor education** on COVID-19 signs and symptoms, infection control precautions, other applicable facility practices (e.g., use of face covering or mask, specified entries, exits and routes to designated areas, hand hygiene)
- **Cleaning and disinfecting** high frequency touched surfaces in the facility often, and designated visitation areas after each visit
- **Appropriate use of Personal Protective Equipment (PPE)**
- **Effective cohorting** of residents (e.g., separate areas dedicated COVID-19 care)
- **Resident and staff testing** are accessible

*Not intended for press or for reporting purposes.*
PPE and BinaxNOW are available to facilitate visitation in LTC

To facilitate visitation please contact:

- PPE – email a request form to COVIDResourceRequests@state.sd.us OR call 605.773.3048 and requesting entities must provide information regarding their current facility status.

- In looking forward to the end of the federal allocation of the BinaxNOW kits and to ensure use of these valuable resources, we will be pushing out another shipment of BinaxNOW kits to all LTC providers.

- Please look at your BinaxNOW expiration dates.
- Use kits with the earliest expiration date first.
- Please send an email to Cindy Koopman-Viergets at Cindy.KoopmanViergets@state.sd.us if you do not want these kits no later than Monday, February 22nd.
Continue to remain vigilant.

• *Please note, current CMS and CDC guidance in LTC has not yet changed.*

• Providers should continue to follow the Core Principles of Infection Prevention, PPE, and visitation guidance until updated new recommendations are issued by CMS and CDC.

• Completed vaccination series should allow the Administrator and Governing Board confidence in allowing for more flexibility, safe visitation as well as resident movement.

• CMS guidance allows for visitation to be conducted through a variety of means.
Vaccination Update
## Doses Administered

<table>
<thead>
<tr>
<th>Total Doses Administered</th>
<th>191,874</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manufacturer</td>
<td># of Doses</td>
</tr>
<tr>
<td>Moderna</td>
<td>99,895</td>
</tr>
<tr>
<td>Pfizer</td>
<td>91,979</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Persons Administered a Vaccine</th>
<th>127,096</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doses</td>
<td># of Recipients</td>
</tr>
<tr>
<td>Moderna - 1 dose</td>
<td>33,199</td>
</tr>
<tr>
<td>Moderna - Series Complete</td>
<td>33,348</td>
</tr>
<tr>
<td>Pfizer - 1 dose</td>
<td>29,119</td>
</tr>
<tr>
<td>Pfizer - Series Complete</td>
<td>31,430</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Percent of State Population with at least 1 Dose</th>
<th>22%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doses</td>
<td>% of Pop.</td>
</tr>
<tr>
<td>1 dose</td>
<td>21.97%</td>
</tr>
<tr>
<td>Series Complete</td>
<td>10.91%</td>
</tr>
</tbody>
</table>

*Based on 2019 Census Estimate for those aged 16+ years. Includes aggregate data on IHS and federal entities.*

*Not intended for press or for reporting purposes.*
## SD DOSES Received

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Pfizer 1</td>
<td>59,085</td>
</tr>
<tr>
<td>Pfizer 2</td>
<td>44,265</td>
</tr>
<tr>
<td>Moderna 1</td>
<td>71,800</td>
</tr>
<tr>
<td>Moderna 2</td>
<td>47,500</td>
</tr>
<tr>
<td>LTC Pharm</td>
<td>24,050</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>246,700</td>
</tr>
</tbody>
</table>

*Not intended for press or for reporting purposes.*
## SD DOSES Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>This Week's 1&lt;sup&gt;st&lt;/sup&gt; dose shipments</td>
<td>17,660</td>
</tr>
<tr>
<td>This Week's 2&lt;sup&gt;nd&lt;/sup&gt; dose Shipments</td>
<td>15,190</td>
</tr>
<tr>
<td>Doses At Pharmacy</td>
<td>10,323</td>
</tr>
<tr>
<td>Second Dose to be given this week</td>
<td>17,000</td>
</tr>
</tbody>
</table>

*Not intended for press or for reporting purposes.*
Weekly 1st Doses Projected

Pfizer 10,530

Moderna 8,300
Bonus Doses

Pfizer vaccine yields 6 doses – this will be a label change

Moderna vaccine may yield 1 or 2 extra doses

DO NOT POOL VACCINE FROM MULTIPLE VIALS
### Priority groups


<table>
<thead>
<tr>
<th>Priority Group</th>
<th>Population</th>
<th>Vaccinated</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A 19,265</td>
<td>22,846</td>
<td></td>
</tr>
<tr>
<td>1B 10,867</td>
<td>2,975</td>
<td>Vaccinated-not including CVS/Walgreens</td>
</tr>
<tr>
<td>1C 49,642</td>
<td>23,440</td>
<td></td>
</tr>
<tr>
<td>1D 265,561</td>
<td>57,789</td>
<td></td>
</tr>
<tr>
<td>1E 227,448</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Not intended for press or for reporting purposes.*
### Expected COVID-19 Vaccine Availability for South Dakota Residents

<table>
<thead>
<tr>
<th>Phase</th>
<th>Population Group</th>
<th>January</th>
<th>February</th>
<th>March</th>
<th>April</th>
<th>May-December</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A</td>
<td>Frontline healthcare workers and long-term care facility healthcare workers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1B</td>
<td>Long-term care residents</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1C</td>
<td>EMS, public health workers, and other healthcare workers (lab &amp; clinic staff)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Law enforcement, correctional officers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1D</td>
<td>Persons aged 65 years and older</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>High risk patients - dialysis, post-transplant, and active cancer</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>High risk residents in congregate settings</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Persons with underlying medical conditions under the age of 65</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Teachers and other school/college staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Funeral service workers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1E</td>
<td>Fire service personnel</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Includes public-facing workers in essential and critical infrastructure</td>
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<tr>
<td>2</td>
<td>All others 16 years and older</td>
<td></td>
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</tr>
</tbody>
</table>

**Note:** Estimated Vaccine Availability

- Estimated Vaccine Availability & administration is handled by any vaccine allocation & administration is handled by the IHS.

**Phase 1A:** Frontline healthcare workers and long-term care facility healthcare workers

**Phase 1B:** Long-term care residents

**Phase 1C:** EMS, public health workers, and other healthcare workers (lab & clinic staff)

**Phase 1D:** Persons aged 65 years and older, high risk patients - dialysis, post-transplant, and active cancer, high risk residents in congregate settings, persons with underlying medical conditions under the age of 65, teachers and other school/college staff, funeral service workers

**Phase 1E:** Fire service personnel, includes public-facing workers in essential and critical infrastructure

**Phase 2:** All others 16 years and older

Due to limited allocation of the vaccine, the South Dakota Department of Health and use COVID-19 infection rates and will follow recommendations from the Advisory Committee on Immunization Practices (ACIP) to guide which counties will receive the vaccine first.
South Dakota: All Federal Pharmacy Partners
Federal Partners in SD

<table>
<thead>
<tr>
<th></th>
<th>First Dose</th>
<th>Second Dose</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>BOP</td>
<td>100</td>
<td>97</td>
<td>197</td>
</tr>
<tr>
<td>VA</td>
<td>11,650</td>
<td>4,626</td>
<td>16,276</td>
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<tr>
<td>IHS</td>
<td>15,950</td>
<td>8,040</td>
<td>23,990</td>
</tr>
<tr>
<td>DOD</td>
<td>1,518</td>
<td>1,047</td>
<td>2,565</td>
</tr>
<tr>
<td>Totals</td>
<td>29,218</td>
<td>13,810</td>
<td>43,028</td>
</tr>
</tbody>
</table>
Janssen/Johnson & Johnson Vaccine

- Have applied for EUA
- FDA to meet on February 26
- Viral Vector vaccine
- 5 dose vials
Community Mitigation
Dashboard

Community Spread Map by County of Residence

Hover over a county to see its details, or click county to update the orange boxes.

Total Confirmed Cases 99,358
Total Probable Cases 12,450
PCR Test Positivity Rate, Last 1 Day 11.0%
Total Persons Tested 419,827
Total Tests 959,404

Ever Hospitalized 6,570
Deaths Among Cases 1,864
% Progress (December Goal: 44233 Tests) 345%
% Progress (January Goal: 44233 Tests) 241%
% Progress (February Goal: 44233 Tests) 186%

14-Day Trend of Confirmed Cases by Date Reported to SD-DDOH: This graph shows the trend (increasing or decreasing) of COVID-19 confirmed cases (persons who meet the national surveillance case definition case for COVID-19) at the state or county level.

Daily Rate of Total Cases, Last 7 Days 3/16/2021 - 3/22/2021 17.99 Daily Case Rate per Capita
Rate of Total Cases, Cumulative 3/16/2021 - 3/22/2021 12,663 Case Rate per Capita

Not intended for press or for reporting purposes.
Supply Chain Management
All requests for PPE from DOH must be:

- Emailed to COVIDResourceRequests@state.sd.us,
- Faxed to 605.773.5942, or
- Called in to 605.773.3048 to ensure prioritization and coordination of requests.

- **Do not** duplicate your request by using all three means of communication.

- Any requests received through any other email or number will all be directed to email COVIDResourceRequests@state.sd.us OR call 605.773.3048 and requesting entities must provide information regarding their current facility status.

*Not intended for press or for reporting purposes.*
On-going Communication
Helpful sources of information:

covid.sd.gov

coronavirus.gov

• SD COVID-19 Help Line: 800-997-2880

Not intended for press or for reporting purposes.
Communications

- SD-HAN: sdhan.sd.gov
- Epi Listserv
- Lab Listserv
- HAI Listserv
- OLC Listserv

Visit covid.sd.gov to subscribe

SOUTH DAKOTA COVID-19 INFORMATION LINE
Questions about COVID-19? We’re here to help.

PLEASE CALL 1-800-997-2880

Not intended for press or for reporting purposes.
Questions?

Follow-up after the webinar
COVID Helpline: 800-997-2880
Epidemiology: 605-773-3737
Laboratory: 605-773-3368

COVID.sd.gov

Not intended for press or for reporting purposes.