2019 Novel Coronavirus (COVID-19)

South Dakota Department of Health

March 18, 2021

We will begin in just a few moments. Thanks!

Not intended for press or for reporting purposes.
This is an **emerging, rapidly evolving situation**. Information in this presentation is current as of March 17, 2021. Please check the South Dakota Department of Health website for the most current information and guidance.

[COVID.sd.gov](COVID.sd.gov)
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Coronavirus Situation (as of March 17, 2021)

- **International**
  - 120,383,919 confirmed cases
  - 2,664,386 deaths

- **United States** (50 states + DC)
  - 29,374,758 confirmed cases
  - 534,099 deaths

- **South Dakota**
  - 114,966 confirmed and probable cases
  - 1,915 deaths
  - 110,944 recovered cases

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Epidemiologic “Epi” Curve of COVID-19 Cases, by Date Reported to SD-DOH

As of March 17, 2021

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COVID-19 Case Map, by County

Substantial Community Spread

- Beadle
- Brookings*
- Charles Mix
- Clay
- Codington
- Davison*
- Dewey
- Fall River
- Lake
- Lincoln
- Marshall
- McCo...
General Testing Recommendations

Medical providers are recommended to test individuals (1) identified as a close contact to a person with COVID-19 or (2) 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


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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

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Effectiveness of the Pfizer-BioNTech COVID-19 Vaccine Among Residents of Two Skilled Nursing Facilities Experiencing COVID-19 Outbreaks — Connecticut, December 2020–February 2021

https://www.cdc.gov/mmwr/volumes/70/wr/mm7011e3.htm?s_cid=mm7011e3_x

Mayo study evaluation both mRNA vaccines

Pfizer-BioNTech COVID-19 Vaccine Effectiveness – Israel

Not intended for press or for reporting purposes.
COVID-19 Vaccine Second-Dose Completion and Interval Between First and Second Doses Among Vaccinated Persons — United States, December 14, 2020–February 14, 2021

<table>
<thead>
<tr>
<th>Completion status and dosing interval</th>
<th>Total</th>
<th>Pfizer-BioNTech</th>
<th>Moderna</th>
</tr>
</thead>
<tbody>
<tr>
<td>Received ≥1 dose</td>
<td>37,335,139</td>
<td>18,161,871</td>
<td>19,173,268</td>
</tr>
<tr>
<td>Completion status among persons with sufficient time to receive second dose</td>
<td>12,496,258</td>
<td>7,750,089</td>
<td>4,746,169</td>
</tr>
<tr>
<td>Completed series</td>
<td>10,999,097</td>
<td>6,791,301</td>
<td>4,207,796</td>
</tr>
<tr>
<td>No second dose but remained within allowable interval</td>
<td>1,078,336</td>
<td>693,650</td>
<td>384,686</td>
</tr>
<tr>
<td>Missed second dose**</td>
<td>418,825</td>
<td>265,138</td>
<td>153,687</td>
</tr>
<tr>
<td>Dosing interval among persons who received second dose</td>
<td>14,205,768</td>
<td>8,400,210</td>
<td>5,805,558</td>
</tr>
<tr>
<td>Early††</td>
<td>216,905</td>
<td>98,585</td>
<td>118,320</td>
</tr>
<tr>
<td>During recommended interval**</td>
<td>13,582,544</td>
<td>8,053,661</td>
<td>5,528,883</td>
</tr>
<tr>
<td>After recommended interval but within allowable interval**</td>
<td>392,935</td>
<td>240,329</td>
<td>152,606</td>
</tr>
<tr>
<td>Late***</td>
<td>13,384</td>
<td>7,635</td>
<td>5,749</td>
</tr>
</tbody>
</table>

[https://www.cdc.gov/mmwr/volumes/70/wr/mm7011e2.htm?s_cid=mm7011e2_x](https://www.cdc.gov/mmwr/volumes/70/wr/mm7011e2.htm?s_cid=mm7011e2_x)

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Cases, Hospitalizations, and Deaths by Age Group - March 2020 – March 16, 2021

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

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

How to talk about COVID-19 vaccines with friends and family: 

Frequently Asked Questions about COVID-19 Vaccination: 


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Long Term Care
Visitation - based on the Center for Medicare and Medicaid Services (CMS) revised guidance March 10, 2021 (QSO-20-39-NH)

• The Centers for Medicare and Medicaid Services (CMS) recently updated guidance, in partnership with the Centers for Disease Control and Prevention, for safe visitation in nursing homes during the COVID-19 public health emergency.

• The changes reflect the impact of vaccinations on COVID-19 infections in Long-Term Care (LTC) facilities.

• Applies to all South Dakota Nursing Homes and Assisted Living Centers.

• Please read this guidance. Updates are in red.

• Lack of visitation in a LTC facility without adequate reasoning may indicate a Resident Rights concern.

• **The new CMS guidelines should be followed immediately.**
Updates to key considerations:

Outdoor Visitation

- CMS continues to encourage visits be held outdoors whenever practicable because of the lower risk of transmission due to increased space and airflow.
Updates to key considerations:

**Indoor Visitation**

- Indoor visits should **always** be permitted for residents, regardless of whether the resident or visitor has received a vaccine. However, CMS details three scenarios under which indoor visitation should be limited, including for:

  1. Vaccinated residents, if the nursing home’s COVID-19 county positivity rate is more than 10 percent and fewer than 70 percent of residents in the facility are fully vaccinated;
  2. Vaccinated or unvaccinated residents with confirmed COVID-19 infection until they meet criteria to discontinue Transmission-Based Precautions; and
  3. Vaccinated or unvaccinated residents in quarantine, until they meet criteria for release from quarantine.

Importantly, residents who are fully vaccinated may choose to have close, physical contact with visitors, as long as both parties are masked and hands are washed before and after contact.
Updates to key considerations:

**Indoor Visitation During an Outbreak**

- CMS explains that nursing homes should start outbreak testing and immediately cease all visitation after a new case of COVID-19 is identified until at least one round of facility-wide testing has occurred.

- Visitation can start again in other units of the facility if outbreak testing indicates there are no additional COVID-19 cases in those areas.

- However, if outbreak testing detects one or more COVID-19 cases in other units of the facility, the facility must stop visitation for both vaccinated and unvaccinated residents until it can meet criteria to end outbreak testing.
Updates to key considerations:

**Visitor Testing and Vaccination**

- CMS does not require the testing of visitors but continues to encourage facilities in medium or high-positivity counties to test visitors, if possible.

- CMS notes that facilities may also encourage visitors to be tested prior to visiting and provide proof of a negative test. Similarly, CMS suggests facilities encourage visitors to get vaccinated but not require vaccination.
Updates to key considerations:

**Compassionate Care Visits**

- The agency explains that compassionate care visits are required under federal disability rights law and should be allowed at all times for both vaccinated and unvaccinated residents, even during an outbreak.
Updates to key considerations:

CMS continues to advise all visitors adhere to the core principles of COVID-19 infection prevention, which include practices such as symptom screening, hand washing, wearing a mask, social distancing, instructional signage, and routine cleaning.
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 about and observations of signs or symptoms), and denial of entry of those with signs or symptoms or those who have had close contact with someone with COVID-19 infection in the prior 14 days (regardless of the visitor’s vaccination status)
- 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 staff use of Personal Protective Equipment (PPE)
- Effective cohorting of residents (e.g., separate areas dedicated to COVID-19 care)
- Resident and staff testing conducted as required at 42 CFR § 483.80(h) (see QSO20-38-NH)
Contact us to assist you with allowing indoor visitation

- Diana Weiland, Nursing Home Advisor email Diana.Weiland@state.sd.us
- Jennifer Maeschen, Assisted Living Advisor email Jennifer.Maeschen@state.sd.us

Fact Sheet
CMS Memo QSO-20-39-NH
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.

- Please send an email to Cindy Koopman-Viergets if you need BinaxNOW testing kits at Cindy.KoopmanViergets@state.sd.us.

- Please look at your BinaxNOW expiration dates.
- Use kits with the earliest expiration date first.
- Contact Cindy if you have excess BinaxNOW testing kits.
- Please do not share your BinaxNOW kits with “other” facilities as the “other” facility may not have a current CLIA certificate.
Vaccination Update
Doses Administered

Total Doses Administered

- **315,171**
  - State Allocation

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th># of Doses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Janssen</td>
<td>3,712</td>
</tr>
<tr>
<td>Moderna</td>
<td>153,402</td>
</tr>
<tr>
<td>Pfizer</td>
<td>158,057</td>
</tr>
</tbody>
</table>

Total Persons Administered a Vaccine

- **201,813**
  - State Allocation

<table>
<thead>
<tr>
<th>Doses</th>
<th># of Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td>Janssen - Series Complete</td>
<td>3,712</td>
</tr>
<tr>
<td>Moderna - 1 dose</td>
<td>44,090</td>
</tr>
<tr>
<td>Moderna - Series Complete</td>
<td>54,656</td>
</tr>
<tr>
<td>Pfizer - 1 dose</td>
<td>40,669</td>
</tr>
</tbody>
</table>

Percent of State Population with at least 1 Dose

- **35%**
  - State & Federal Allocation

<table>
<thead>
<tr>
<th>Doses</th>
<th>% of Pop.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 dose</td>
<td>34.80%</td>
</tr>
<tr>
<td>Series Complete</td>
<td>20.52%</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 Ordered All Partners

Not intended for press or for reporting purposes.
SD DOSES Ordered All Partners

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### SD DOSES Ordered All Partners

<table>
<thead>
<tr>
<th>Category</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Doses Ordered - Total</td>
<td>511,065</td>
</tr>
<tr>
<td>Doses Shipped - Total</td>
<td>511,065</td>
</tr>
<tr>
<td>Doses Delivered - Total</td>
<td>469,175</td>
</tr>
<tr>
<td>Doses Ordered - Jurisdiction</td>
<td>341,860</td>
</tr>
<tr>
<td>Doses Shipped - Jurisdiction</td>
<td>341,860</td>
</tr>
<tr>
<td>Doses Delivered - Jurisdiction</td>
<td>319,530</td>
</tr>
<tr>
<td>Doses Ordered - Pharmacy</td>
<td>67,210</td>
</tr>
<tr>
<td>Doses Shipped - Pharmacy</td>
<td>67,210</td>
</tr>
<tr>
<td>Doses Delivered - Pharmacy</td>
<td>56,530</td>
</tr>
<tr>
<td>Doses Ordered - Federal Entity</td>
<td>101,995</td>
</tr>
<tr>
<td>Doses Shipped - Federal Entity</td>
<td>101,995</td>
</tr>
<tr>
<td>Doses Delivered - Federal Entity</td>
<td>93,115</td>
</tr>
</tbody>
</table>

*Not intended for press or for reporting purposes.*
## Federal Partners in SD (101,995 ordered)

<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>14,076</td>
<td>10,241</td>
<td>24,317</td>
</tr>
<tr>
<td>IHS</td>
<td>21,328</td>
<td>12,881</td>
<td>34,209</td>
</tr>
<tr>
<td>DOD</td>
<td>2,794</td>
<td>1,295</td>
<td>4,089</td>
</tr>
<tr>
<td>Totals</td>
<td>38,298</td>
<td>24,514</td>
<td>62,812</td>
</tr>
</tbody>
</table>

*Not intended for press or for reporting purposes.*
SD DOSES Administered All Partners

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Weekly 1st Doses Projected

- Pfizer: 11,700
- Moderna: 8,300
- Janssen: 1,000
Pfizer vaccine yields 6 doses

Moderna has 10 doses per vial

Janssen has 5 doses per vial

DO NOT POOL VACCINE FROM MULTIPLE VIALS
## Priority groups


<table>
<thead>
<tr>
<th>Group</th>
<th>Personnel Count</th>
<th>Vaccinated Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>1A</td>
<td>19,265</td>
<td>23,289</td>
</tr>
<tr>
<td>1B</td>
<td>10,867</td>
<td>3,043 (not including CVS/Walgreens 5807)</td>
</tr>
<tr>
<td>1C</td>
<td>49,642</td>
<td>24,580</td>
</tr>
<tr>
<td>1D</td>
<td>265,561</td>
<td>110,572</td>
</tr>
<tr>
<td>1E</td>
<td>227,448</td>
<td></td>
</tr>
</tbody>
</table>

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# 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>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Includes public-facing workers in essential and critical infrastructure</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>All others 16 years and older</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: Tribal vaccine allocation & administration is handled by the RGC. Veteran vaccine allocation & administration is handled by the VA.

Due to limited allocation of the vaccine, the South Dakota Department of Health will 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. Individuals qualifying for vaccination based on age or underlying health condition must be South Dakota residents.

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Underlying Medical Conditions

- Asthma (moderate-to-severe)
- Cancer
- Cerebrovascular Disease (affects blood vessels and blood supply to the brain)
- Chronic Kidney Disease
- COPD (Chronic Obstructive Pulmonary Disease)
- Cystic Fibrosis
- Diabetes Mellitus (type 1 and type 2)
- Down Syndrome
- Heart Conditions, such as Heart Failure, Coronary Artery Disease, or Cardiomyopathies
Underlying Medical Conditions

- Hypertension or High Blood Pressure
- Immunocompromised State (weakened immune system)
- Liver Disease
- Neurologic Conditions, such as Dementia
- Pregnancy
- Pulmonary Fibrosis (having damaged or scarred lung tissues)
- Severe Obesity (BMI ≥ 40 kg/m2)
- Sickle Cell Disease
- Thalassemia (a type of blood disorder)
South Dakota: All Federal Pharmacy Partners

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Infection Prevention

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Infection Prevention Recommendation in Response to COVID-19 Vaccination


*CDC will routinely update this page as guidance is released.
Web App Features

- Outputs printable PDFs.
- Illustrated steps for safe donning and doffing.
- Offers options for REUSE and EXTENDED WEAR.
- Works on any modern mobile or desktop device.

Created with love by experts

- Created by some of the world's leading experts in the control of special pathogens like COVID.
- Content has been iteratively tested by frontline providers.
- Visuals were created by professional medical illustrators.

https://ppeguide.org
Infection Control E-mail

DOHInfectionControl@state.sd.us
Community Mitigation
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.

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On-going Communication
Helpful sources of information:

covid.sd.gov

coronavirus.gov

• SD COVID-19 Help Line: 800-997-2880

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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

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Questions?

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

COVID.sd.gov

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