



Monterey County

Item No.

Board Report

Board of Supervisors
Chambers
168 W. Alisal St., 1st Floor
Salinas, CA 93901

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Report

Receive a preliminary analysis report in response to **Board Referral No. 2021.30**, which directs the Health Department to partner with the K through 12 school system to increase the rate of vaccination among residents aged 5 to 11 years in communities disproportionately affected by COVID-19.

RECOMMENDATION:

It is recommended that the Board of Supervisors:

- a. Receive a preliminary analysis report in response to **Board Referral No. 2021.30** and direct that staff:
 - 1) Proceed with completion of the referral as described below, or
 - 2) Take action to direct that staff:
 - i) Proceed with completion of referral based on modifications by the Board, or
 - ii) Return to Board with a more comprehensive analysis of referral and anticipated effort for completion, or
 - iii) Rescind referral.
- b. Provide further direction, as appropriate.

PRELIMINARY ANALYSIS:

Referral Summary and Background:

Board Referral No. 2021.30 assigned on December 14, 2021, directs the Health Department to increase the rate of vaccinations among children ages 5 to 11 years of age. Board Referral No. 2021.30 identifies the following strategies for improving vaccination rates among children 5 to 11 years of age:

- Partner with the K-12 school system to increase the rate of pediatric vaccinations by offering vaccine clinics in partnership with districts.

There are over 43,000 school age children between the ages of 5 and 11 years old in Monterey County. As of December 29, 2021, approximately 2,700 cases of COVID-19 have been reported among children 5 to 11 years of age in Monterey County. The risk of becoming infected with SARS-CoV-2 is similar in children and adults. Both short- and long-term complications of COVID-19 can occur in children. Children who become infected with the SARS-CoV-2 virus can develop serious complications like multisystem inflammatory syndrome (MIS-C), a condition where different body parts become inflamed including the heart, lungs, kidneys, brain, skin, eyes, or gastrointestinal organs.

The California Department of Public Health (CDPH) utilizes the Public Health Institute's California Health Places Index (HPI) for allocation of resources and to track vaccination progress. The HPI scores and compares communities based on a composite of health, social, and economic factors. Communities are ranked from lowest quartile for predicted health outcomes (Quartile 1) through the highest quartile (Quartile 4). Nearly 78% of Monterey County residents live in an HPI Quartile 1 or Quartile 2 community, compared to 33% in Santa Cruz County.

Immunizations are one of the most successful and cost-effective public health interventions in history. Immunity through vaccination is achieved through an integrated system that leverages the complementary strengths of the public health and healthcare system. The healthcare system benefits from public health's role in policy, population health, health equity, and education, while public health benefits from the health care system's ability to provide individual patient assessment, disease management, care coordination, and quality improvement.

COVID-19 vaccine eligibility gradually expanded over time in 2021. There are approximately 35,500 school age children between 12 and 17 years of age in Monterey County. School age children 16 and 17 years old have been eligible for COVID-19 vaccination since December 11, 2020, and school age children 12 to 15 years old have been eligible for vaccination since May 10, 2021. Monterey County Health Department provided vaccinations to school age adolescents and teens via a combined strategy of community- and school-based immunization clinics. These efforts, along with the efforts of hospitals, pharmacies, and private medical practices, resulted in over 81% of 12- to 17-year-old school children in Monterey County receiving at least one dose of COVID-19 vaccine (as of December 27, 2021).

On October 29, 2021, the U.S. Food and Drug Administration (FDA) authorized the emergency use of the Pfizer-BioNTech COVID-19 Vaccine for the prevention of COVID-19 in children ages 5 through 11 years of age. On November 2, 2021 after review of available scientific data, the Center for Disease Control and Prevention's (CDC's) Advisory Committee on Immunization Practices (ACIP) recommended to the CDC that the Pfizer-BioNTech COVID-19 vaccine be used for the prevention of COVID-19 in children ages 5 to 11 years of age. Following the ACIP's recommendation, on November 3, 2021 the Western States Scientific Safety Review Workgroup's (WSSSRW) announced their review of the science to date supported the emergency use of Pfizer-BioNTech COVID-19 vaccine in children ages 5 to 11 years of age.

Proposed Project Description:

Actions to increase pediatric vaccination rates are already underway. The Monterey County Health Department has collaborated with a variety of stakeholders to increase COVID-19 vaccination rates. The Public Health Bureau hosted its first community vaccination clinic on January 2, 2021. In 2021, the Public Health Bureau organized and implemented 201 community COVID-19 vaccination clinics, administering over 36,000 doses of COVID-19 vaccine and 4,100 doses of influenza vaccine. Table 1 (attached to this report as "Attachment B") shows the top ten vaccine service providers among the 5 to 11, 12 to 17, and 18 years and older age groups. County agencies are in blue text.

Schools were identified as vaccine points of distribution sites in the *Health Department's Strategy for Implementing California's COVID-19 Vaccination Plan*, was first presented to the Board of

Supervisors on January 26, 2021. Public Health Bureau staff meet weekly with the Monterey County Office of Education and school district supervisors to discuss the most recent state guidance, available resources and resource needs, as well as evolving science and data. In 2021, the Public Health Bureau hosted 21 school-based clinics, not including an additional 28 vaccine clinics that were hosted at sites directly adjacent to a school campus. Eleven (11) additional school-based clinics are scheduled in January and February of 2022. Schools were selected based on location in communities disproportionately impacted by COVID-19, adequate and available indoor space (in order to avoid cancellations due to poor weather), and lack of nearby alternative vaccination opportunities.

School-based vaccine clinics were held during hours that bridged the end of the school day during the week to make it convenient for parents picking up children from school, were extended into the evening for parents who work, or were held on weekends to maximize access opportunities. Throughout the pandemic, the home environment has been a primary source of COVID-19 transmission. Recognizing that vaccination of entire households is key to keeping children in school, the Public Health Bureau's school-based clinics were open to all vaccine eligible household members. Families could attend and be vaccinated together to reduce the need for separate appointments at other locations.

The Public Health Bureau utilized local morbidity and vaccination data to identify existing health disparities and service gaps. One hundred ninety-four (194) of the 201 COVID-19 immunization clinics hosted by the Public Health Bureau in 2021 (97%) were located at venues within HPI Quartile 1 or Quartile 2 communities. Public Health Bureau staff distributed over \$66,000 in gas gift cards in November and December 2021 to enable families living in HPI Quartile 1 and 2 communities to drive to vaccination clinics and return for follow-up doses. Public Health staff partnered with the VIDA Project, school staff, and other agencies to increase awareness of vaccination opportunities and the emphasize the importance of ongoing vaccination efforts.

Because CDPH requires a minimum number of doses when vaccine service provider order vaccines, the Public Health Bureau established a vaccine distribution program to facilitate more pediatric health care providers vaccinating children in their medical home. The Public Health Bureau repacked and retributed nearly 2,000 doses of pediatric Pfizer vaccine and ancillary supplies to local health care offices, enabling medical providers to maximize opportunities to immunize the pediatric population.

Health Department staff will continue to review activities underway and determine if additional strategies should be explored. Staff will complete the 11 school-based COVID-19 and Influenza vaccination clinics already scheduled in 2022 and will continue ongoing discussions with additional schools with which to partner. The Health Department will also continue to raise awareness of additional resources available to schools, such as the free state-contracted mobile vaccination clinics that schools can request. Public Health Bureau staff will also continue to assist other vaccine service providers with navigating the vaccine ordering system and will redistribute small batches of COVID-19 vaccine to providers when requested.

Estimated Project Cost:

Health Department staff will continue to review activities underway and determine if additional strategies and staffing should be considered and return to the Board with a request for additional funding if needed.

Staffing Level Estimate:

Health Department staff will continue to review activities underway and determine if additional strategies and staffing should be considered and return to the Board with a request for additional funding if needed.

Department Challenges:

One of the challenges of expanding vaccination efforts has been the national shortage of health care workers, severely limiting the pool of available individuals to administer vaccinations. Hospitals, medical clinics, skilled nursing facilities, schools, and public health departments must compete for the same diminishing pool of available nurses. A recent national survey of public health workers highlighted the stress on our nation’s public health workforce. Over 50% of public health workers reported having at least one mental health symptom and 24% reported having been bullied, threatened, or harassed because of their work. Existing Health Department staff have been deployed as pandemic response workers for nearly two years, often working well in excess of 40 hours per week after normal business hours including weekends. Staff are experiencing fatigue and burn-out leading to transfers, resignations, and retirements. To augment the Public Health Bureau’s small workforce, the Health Department’s Human Resources team continuously recruits for volunteers to assist with COVID-19 vaccination clinics. The Health Department has agreements with two temporary service agencies for extra personnel. However, the pool of available volunteers and temporary staff has declined since summer of 2021. The Department continues to explore partnerships with nursing schools and other health care agencies to augment vaccine clinic staffing.

Proposed Response Date:

Staff will report back to the Board of Supervisors within 90 days or April 2022, with an implementation status update including a request for additional resources as needed to implement and sustain activities.

BOARD OF SUPERVISORS STRATEGIC INITIATIVES:

This recommendation advances the Board of Supervisors Health and Human Services Strategic Initiative and supports all three key objectives: Reduce regional, socio-economic inequities in health outcomes; improve health outcomes through health and wellness promotion and access to top quality healthcare; and advocate for a sufficient allocation of funds from the state and federal governments that will enable the County to carry out its authorized health care programs.

Mark a check to the related Board of Supervisors Strategic Initiatives

- Economic Development
- Administration
- Health & Human Services
- Infrastructure
- Public Safety

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Approved by: Charles McKee, County Administrative Officer, 755-5113

Attachments:

Attachment A - Board Referral No. 2021.30

Attachment B- Table 1 Proportion of Doses Administered by Vaccine Service Provider and Age Group, as of December 28, 2021