DATE: November 29, 2021

TO: CBJ Assembly

FROM: Robert Barr, Incident Commander

RE: Situational Update – Level 3 Modified High

### Overall Community Risk

<table>
<thead>
<tr>
<th>Disease Situation</th>
<th>Hospital Capacity</th>
<th>Public Health Capacity</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Level 3 - Modified High</strong></td>
<td>The community case load remains high and is declining. The Delta variant is present and community spread is occurring. Vaccine is available.</td>
<td>Local hospital case loads and staffing capacity have mostly stabilized, although staffing levels remain dependent on a state contract. Medevac capacity is improving.</td>
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### Situation Assessment:

The 14 and 7 day case rates remain at the high alert level. The Delta variant remains the dominant variant of concern locally and statewide. The community is urged to take advantage of vaccination, masking, and testing - the three most effective tools we have at combating the pandemic. Everyone regardless of vaccination status is required to mask when indoors in public places. Social distancing remains recommended to mitigate disease spread and allow for effective contact tracing. Individuals should test immediately if they have even mild symptoms. **The single most effective strategy to mitigate COVID is to get vaccinated.**

### Issues of Note:

Beginning Monday, December 6th, the State dashboards will update on Mondays, Wednesdays, and Fridays except on holidays. As CBJ dashboards rely heavily on State data, CBJ dashboards will follow this same update schedule. EOC reports will shift from Monday and Thursday to Monday and Friday.

The omicron (aa-muh-kraan) variant is widely in the news at the moment. Evidence suggests it is a highly transmissible variant; however, we do not yet know how much more transmissible it may be, how much it may evade vaccine- or infection-derived immunity, nor how much more or less severe its average symptom profile is as compared to other variants and the original strain of COVID-19.

We plan to begin the distribution of at-home rapid antigen tests this week. An information release with additional detail will go out tomorrow. We expect demand may exceed supply to start; however, we do not anticipate any supply-chain related delays for at least the next 4-5 weeks. As a reminder, rapid antigen tests enable quick, at-home, detection of transmissible COVID-19. Positive cases detected via rapid antigen tests are not reportable and the integrity of our case counts will decline as the access to and use of rapid antigen
tests increases. From a communications point of view, we will ask people who test positive on a rapid antigen test to notify local public health and, depending on sequencing needs/demands, we will also likely push out details asking people to seek a follow-up PCR test in certain circumstances (e.g. recent travel) if they test positive on a rapid antigen.

BRH reports stable staffing and stable hospital activity across the board. BRH staff expect hospitals across the state to see increased challenges with staffing when the statewide traveling healthcare worker contract expires on January 22nd.

The approval process for Antiviral medication is set to begin with the first of these drugs (Merck’s) being before an FDA advisory committee on November 30th. Pfizer’s version of this same type of treatment is likely to follow in December. We believe the approval process will be the same as vaccines - 2 steps at the FDA, followed by 2 steps at the CDC.

**General Case Trends:**

Juneau Public Health was able to report generalized case trends for the last 7 days:

- We have roughly 64 active cases and are seeing a slight uptick
- Of those, most are individuals in their 20s, 30s, and 40s and there are quite a few children under 3.
- There are several family groupings, mostly related to travel

**Daily Numbers update:** We are reporting 60 new cases since the last EOC report on November 22nd (M-M).

Statewide, the Alaska Department of Health and Social Services reports 632 new people identified with COVID-19 for data reported 11/24-11/25 and an additional 716 (link not yet available) cases for data reported 11/26-11/27. Unfortunately, the state reports 8 new deaths. The total number of resident deaths is 848. Alaska has had 145,398 cumulative resident cases of COVID-19 and a total of 5,411 nonresidents.
Breakthrough Cases: Vaccine breakthrough (VB) infections of COVID are those detected in a person who is at least 2 weeks beyond their second dose of a 2-dose series or the only dose of a 1-dose series.

From January 16–November 20, 2021, 99 deaths, 288 hospitalizations, and 23,020 cases with a VB infection were reported among Alaska residents aged ≥12 years. These counts are provisional and subject to change as data are compiled and reviewed. In that same time frame, a total of 76,775 cases, 1,814 hospitalizations, and 524 deaths were reported.

70% of all cases, 84% of all hospitalizations, and 81% of deaths among Alaska residents aged ≥12 years from January 16–November 20, 2021 were in people who were not fully vaccinated.
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Variants of Concern:
The Delta variant continues to be the dominant SARS-CoV-2 variant in Alaska. Information on the Omicron variant is sparse at the moment; however, no cases have been identified in Alaska yet. The State of Alaska variants dashboard is available online: [https://akvariants.github.io/](https://akvariants.github.io/)

Testing Summary:
PCR testing at BRH continues to return results in under 24 hours, with very few exceptions.
Vaccination Updates:

Total: **76.9%** of the total population of Juneau has received at least 1 dose of vaccine and **70.5%** have completed their vaccine series.

5+: **81.1%** of the age eligible Juneau population has received at least 1 dose of vaccine. **74.4%** have completed their vaccine series.

65+: **96%** of this age group has at least one dose of vaccine. **92%** have completed the vaccine series.
This chart tracks the number of new cases in the past 7 days, controlled for population. King County (Seattle) and Multnomah County (Portland) are included for context and due to travel frequency. The source data for Alaska is from the SOA dashboard. Out of state data is from the Harvard Global Health Institute (https://globalepidemics.org/key-metrics-for-covid-suppression/) and generally lags a day behind most of our other reporting. Policy recommendations at varying levels (<1, <10, <25, 25+) can be found on their website.