DATE: December 13, 2021  
TO: CBJ Assembly  
FROM: Robert Barr, Incident Commander  
RE: Situational Update –Level 2 Moderate

### 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 2 - Moderate</strong></td>
<td>The community case load remains high and, recently, has been stable. 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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</tbody>
</table>

### 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. Individuals not yet fully vaccinated are 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:

Due to sustained improvements in hospital and public health capacity, the EOC lowered the community risk level to moderate today. The last community risk level change was on November 15th when we moved from High to Modified-High. The primary difference between Modified-High and Moderate is that masking changes to a recommendation rather than a requirement for fully vaccinated individuals. In addition to sustained hospital/public health improvements, the other drivers of this decision are our community’s high vaccination rate and the availability of rapid testing.

We are starting to learn more – slowly – about the Omicron variant. On Friday, the UK Health Security Agency released a report comparing cases of the Delta variant to cases of the Omicron variant between November 27th and December 6th. Vaccine effectiveness against Omicron, while not as strong as vs Delta, was still strong after a booster dose of the Pfizer vaccine. Whether or not there is a need for an Omicron-specific vaccine will be a topic of debate among immunologists in the coming weeks and months.
We continue to distribute rapid antigen self-tests to members of the public through our distribution locations – City Hall, each Public Library, Public Health, JPD, and the Dimond Park Aquatic Center. Demand for rapid antigen tests is outpacing our supply and we anticipate periods of unavailability at various locations within the next week or two. We are working on securing additional supply.

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 18th.

**General Case Trends:**

Juneau Public Health was able to report generalized case trends:

- We have roughly 69 active cases
- Of those about half are from known exposures, about a third are community spread, and the remainder are unknown
- There are several family groupings, mostly related to gatherings/travel.

**Daily Numbers update:** We are reporting 24 new cases since the last EOC report on December 2nd (F-M).

Statewide, the Alaska Department of Health and Social Services reports 416 new people identified with COVID-19 for data reported 12/10-12/12. Unfortunately, the state reports 1 new death. The total number of resident deaths is 857. Alaska has had 148,380 cumulative resident cases of COVID-19 and a total of 5,455 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–December 4, 2021, 100 deaths, 310 hospitalizations, and 24,352 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 79,650 cases, 1,906 hospitalizations, and 542 deaths were reported.

69% of all cases, 84% of all hospitalizations, and 82% of deaths among Alaska residents aged ≥12 years from January 16–November 27, 2021 were in people who were not fully vaccinated.
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: **77.7%** of the total population of Juneau has received at least 1 dose of vaccine and **73.0%** have completed their vaccine series.

5+: **82.0%** of the age eligible Juneau population has received at least 1 dose of vaccine. **77.0%** have completed their vaccine series.

New: **31%** of those 5+ have received a booster dose.

65+: **96%** of this age group has at least one dose of vaccine. **92%** have completed the vaccine series.

New: **67%** of those 65+ have received a booster dose.
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.