



City and Borough of Juneau
 City & Borough Manager's Office
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DATE: December 2, 2021
 TO: CBJ Assembly
 FROM: Robert Barr, Incident Commander
 RE: **Situational Update – Level 3 Modified-High**

Overall Community Risk	Disease Situation	Hospital Capacity	Public Health Capacity
Level 3 - Modified High	The community case load remains high and is declining. The Delta variant is present and community spread is occurring. Vaccine is available.	Local hospital case loads and staffing capacity have mostly stabilized, although staffing levels remain dependent on a state contract. Medevac capacity is improving.	Contact tracing is improving with most positive individuals being reached within 24 hours. Approximately half of recent case activity is secondary in nature.

The Complete CBJ COVID-19 Dashboard can be found [here](#) or by going to [Juneau.org/ COVID-19](https://Juneau.org/COVID-19)

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:

The average number of cases per day for November ended at 8.80. This represents a sharp decrease from the previous three months but still a high over every other month except November of 2020 during our first wave. Public health reports 70 active cases in the community right now; this number has been slowly edging up over the past week. Most of these cases are in younger individuals and, in general, under half are fully vaccinated.

We've administered 423 pediatric vaccinations this week with one more clinic to go on Saturday. About 200 children are registered for that clinic and we have approximately 75 open appointment times. Given widespread vaccine availability throughout the community, this will likely be the last vaccination clinic we host in partnership with BRH and Public Health. Due to a shipping delay associated with the holidays, one of our vaccine deliveries was late for one of our clinics this week – we are thankful to SEARHC for loaning us 100 pediatric doses at the last minute.

We've distributed well over 1000 rapid antigen tests as of this report, with most of those tests being picked up at the Valley Library and City Hall. We plan to add an additional distribution location in Lemon Creek next week when our next shipment of tests arrives. It appears likely that supply will not keep up with demand – rapid antigen test distribution programs are standing up across the country and shipping bottlenecks are preventing manufacturers from acquiring the raw materials/components to produce these in sufficient quantity.

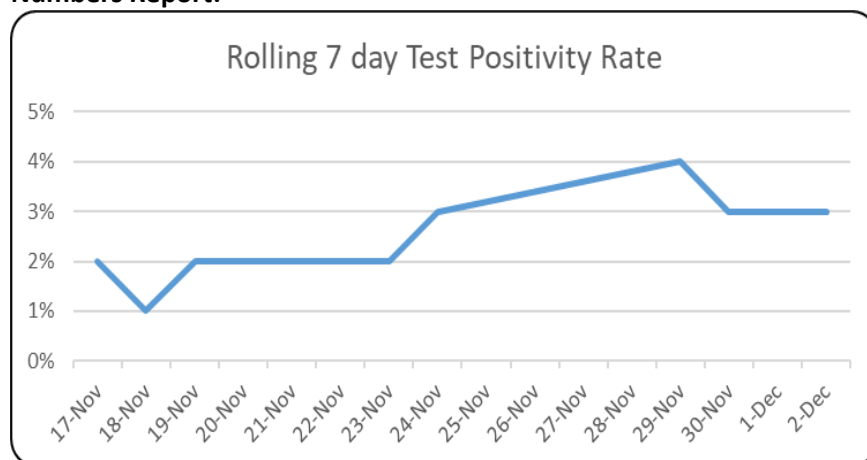
While what we don't know far exceeds what we do know with regard to the Omicron variant, we are preparing a software update to the laboratory equipment at the hospital which may enable us to identify the variant in test specimens in the future. In all likelihood, we will not implement this and continue to rely on the State public health lab for variant detection; however, this preparation step falls into the low hanging fruit category.

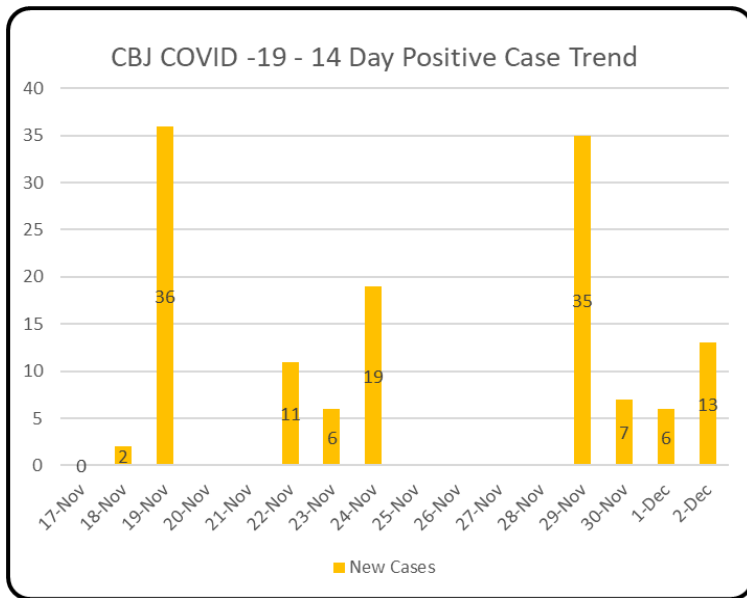
An FDA advisory committee approved one of the two types (Merck's) of antiviral pill-based medications that are under consideration for emergency use authorization. At least one more step needs to be taken at the FDA before this medication is available for prescription. Early indications are that it will not be indicated for broad use and is unlikely to make a substantial impact on the overall course of the pandemic/epidemic. Less is known about the second of these two medications (Pfizer's) and we should learn more about it late in December or early January.

BRH has reported 0 COVID patients since 11/22 – a record. Staffing at BRH also continues to be stable. The monoclonal antibody clinic at BRH continues to be operational and is not constrained. Monoclonal antibodies continue to be an effective therapeutic for individuals at high risk of COVID complications if taken early in the disease course.

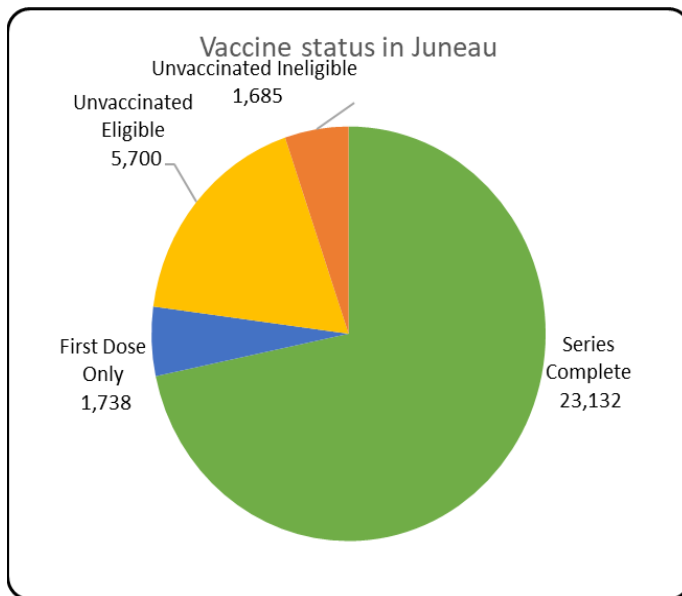
As a reminder, this will be the last Thursday EOC Report. Going forward, EOC Reports will be on Mondays and Fridays, to mirror the new State & Local dashboard reporting, which will occur on Mondays, Wednesdays, and Fridays.

Numbers Report:





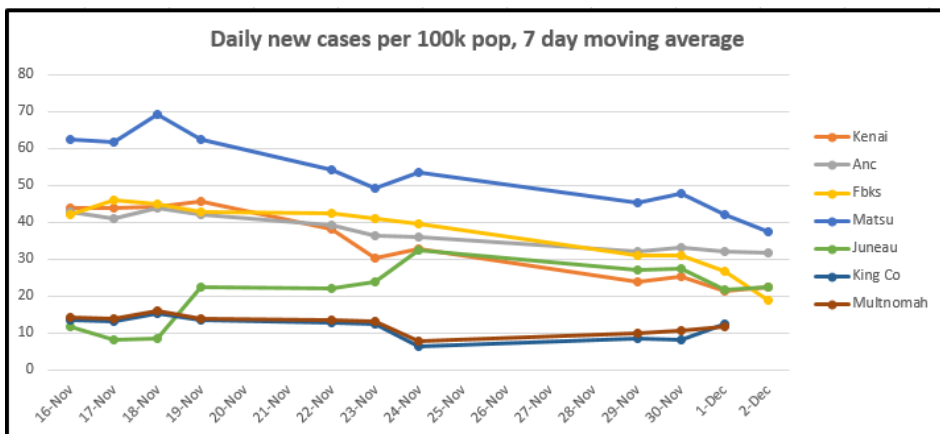
Vaccine Numbers:



Total: **77.1%** of the total population of Juneau has received at least 1 dose of vaccine and **71.7%** have completed their vaccine series.

5+: **81.4%** of the age eligible Juneau population has received at least 1 dose of vaccine. **75.7%** 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

