**DHEC Vaccine Update Transcript**

**Jan. 2, 2021**

**Cristi Moore:** Hi everyone, this is Cristi Moore with DHEC we'll go ahead and get started with today's media briefing on Covid-19 vaccine with Dr. Brannon Traxler, DHEC interim public health director and Stephen White, DHEC immunizations director. I’d like to welcome everyone, I’m Cristi Moore and I’ll be facilitating today's media briefing. We'd like to thank all of our media partners for joining and submitting questions ahead of time. Dr. Traxler will provide an update on Covid-19 vaccine and then we'll move into the question and answer portion of our briefing. I’ll ask our experts to answer as many of the questions you submitted as we can get to and if time permits will open up the session to a live Q and A, but please understand this might not be possible. As you can imagine we've received lots of lots of questions. Also as a reminder, please remain muted so that everyone has an opportunity to capture a quality recording and at this time let's get started. Dr. Traxler I’m going to turn it over to you for an update.

**Dr. Traxler:** Thanks Cristi, good morning everyone, thank you for joining us and happy 2021. As of this morning, 41,508 doses of Covid-19 vaccines have been reported as administered in South Carolina with vaccines continuing to be administered every day so our ultimate goal still remains to save lives DHEC remains dedicated to working with our partners to ensure that everyone who wishes to be immunized against Covid-19 in South Carolina will be vaccinated. To do this we have implemented a phased approach based on the CDC guidance. We've also taken several proactive steps to prepare in the recent months for the expansion of vaccine allocation across our state, and some of those actions include discussing with the South Carolina National Guard their capacity for their medics to assist with vaccination, while also maintaining their invaluable assistance with testing efforts and in hospitals across the state. We are working with the South Carolina Hospital Association to encourage and help hospital systems to vaccinate their local, non-affiliated phase 1A members, and working to onboard select DHEC sites in the near future, which will be open to members of the current phase to help vaccinate those, especially currently those healthcare workers who are not in hospital settings, and onboarding independent providers and partners in the near future to also help increase the vaccination opportunities for phase one members and beyond as we move into other phases

In addition, DHEC and our partners identified storage opportunities and expanded the storage capacity months ago to ensure that our state would be able to meet these storage needs and requirements for the unique attributes of these Covid-19 vaccines identifying the storage of opportunities early on allowed us to be able to prepare to be prepared to store the first ever authorized in history vaccine that must be stored at these ultra cold frozen temperatures, which is that Pfizer Biontech vaccine, requiring the locations then to receive it to have this specialized ultra cold freezer temperature monitoring capabilities in place, and then working to help get vaccine to places that don't have that in place currently.

The ultra cold freezers which maintain the vaccine at that negative 70 degrees Celsius, if needed, the the vaccine could be stored at that temperature in those freezers for up to six months after the manufacturing date. We've identified over 25 locations statewide capable of storing over two million doses of ultra cold frozen vaccine, that's 17 times the amount of what we have received already of vaccine. We also have palleted dry ice, which would allow the vaccine to be able to remain and be stored in their shipping coolers for up to 30 days.

As South Carolina prepares to receive more allocations of the Covid-19 vaccines, we also recognize that critical need to reach our rural and underserved communities where the residents may have limited access to healthcare transportation and the internet. As an information resource, to do this we have the resources in place already to receive and break down the larger shipments, that is 975 dose trays of the Pfizer vaccine, and redistribute them in smaller quantities to areas that don't have that ultra cold storage capacity.

In addition we are we are providing additional ancillary supplies to all sites that receive the vaccines to these are supplies that are needed to administer the vaccine that didn't come in the federal government's kits, ancillary kits, they include things such as gloves, band-aids, additional face shields and even alcohol preps.

At this time South Carolina like other states across the nation does have limited doses of that Covid-19 vaccine, so we continue to ask everyone to please be patient, wait your turn and listen to the public health officials. Doing this will allow us public health officials to ensure that the most vulnerable in our state and those who are keeping us all alive are vaccinated first. That includes prioritizing our frontline health care workers and those long-term care facility residents and staff.

As vaccine supply increases, the federal and state vaccination recommendations will expand to include more groups and all South Carolinians. Again, we want South Carolinians to understand that everyone in our state who wants to be vaccinated against Covid-19 will get their turn. In the meantime, we commit to keeping everyone informed of the progress being made in that phased approach for administering the vaccines and will let people know when and where they can receive it.

We call on all South Carolinians to step up by stepping back until it is their turn in the plan, and to continue to stand together to fight this disease by doing those small steps that we know make a big difference: wearing your mask, getting tested and staying home when you're sick, avoiding gatherings with people outside your household and practicing social distancing if you must be out in the public. Thank you very much, I’ll turn it back over to Cristi.

**Cristi Moore: Thank you Dr. Traxler for that very thorough update, we're going to hop right into the questions. The first one is about a roll out vaccine for groups like teachers. We've got a multi-part question here. In regards to teachers, does DHEC know yet how that's going to be handled? Will pharmacies come in or will vaccine clinics be the best option, and how will teachers be vaccinated without interrupting the school day?**

**Dr. Traxler:** DHEC has been and continues to be in frequent communication with all state agencies, the South Carolina Department of Education, to discuss the vaccination of school staff and that's beginning with those school nurses who are in phase 1A and then all phase 1B members, which we anticipate teachers and school staff will be a part of. We'll have a variety of opportunities to receive the vaccine once we get to that phase and that likely includes pharmacies and vaccine clinics that are open to all phase 1B members the goal for vaccination of everyone in the state is to make it available to them at times that are accessible for those who work.

**Cristi Moore: Okay our next question or set of questions, what is the plan for health care facilities that are done vaccinating phase 1A workers in their service area- will they send doses to other facilities or have health care workers sent to them, or will doses be stockpiled while waiting for phase 1B?**

**Dr. Traxler:** Sure so we, along with our very valuable partner the South Carolina Hospital Association, have recently in the last couple of days provided clarified guidance to the hospitals to let them know that they absolutely can and are encouraged within their capacity and ability to vaccinate health care workers that are out in their community that may not be affiliated with hospital systems. So we certainly encourage that again, to the extent that they can, to reach out to those persons and ask them to come in to be vaccinated. And no, in terms of stockpiling while waiting for 1B, we will not be allowing any stockpiling of the vaccine and or continuously monitoring utilization rates and appointments scheduled, etcetera, to make sure that that's not happening.

**Cristi Moore: Thank you, this next question is probably best handled by Stephen. Where in our supply chain is there a bottleneck, if any, in administering delivered vaccines? Also, are we short on nurses, facing communication problems with different entities, low on PPE or maybe other supplies, are we low on refrigerators or dry ice, or is it a matter of funding?**

**Stephen White:** Yeah, thanks for the question so we have been working in tandem with the hospital association as Dr. Traxler mentioned and we do understand that certain hospitals are experiencing different surge volumes, and some of them do have nursing shortages in some cases. So we have been advising those hospitals that have the capability of vaccinating outside of their outside of their walls to the members of the public to do so, but we do understand that some hospitals do have some limitations. However, we are working with other agencies such as LLR paramedics, county EMTs, working with DHEC and others to help with improving access points to vaccinations. So we feel like there's some good headway that's going there, and we'll continue to push forward with additional vaccination partners in the coming days. As far as I believe, you asked the question about PPE and supplies, so the federal government is supplying federal ancillary supplies with the vaccines and also DHEC as a state is supplying state ancillary supply kits, which are items that are not found in the federal supply kit that comes with the vaccines from the federal government. So as far as the vaccination supplies, they should have what they need to be able to administer the doses on those levels.

I believe that's also a question about refrigerators and dry ice, and as Dr. Traxler alluded to we do have enough freezers within the state to more than handle the capacity and the current volume of vaccines. And as far as dry ice we do have contracts with dry ice manufacturers vendors rather which can help with dry ice distribution, so no logistical issues at this time with those supplies, the PPE, or vaccine storage.

And then as far as communications, we are continuing to push out several communications such as these and others throughout our DHEC website to push information out when we find that we may have issues.

**Cristi Moore: Thanks Stephen. Our next question- is there more hospitals or the public can be doing to speed up the process of giving out vaccines?**

**Dr. Traxler:** As I mentioned earlier, we are working with hospitals and the hospital association to clarify guidance for them. They are allowed and we do encourage them again within their capacity and availability of vaccine to reach out to those community partners, those other phase 1A members who are not affiliated with hospital systems, to offer vaccinations to them, the public, when it is their turn and they are contacted about signing up for the vaccine.

We encourage them to go ahead and sign up, not to wait and see later on how things are going, but to go ahead and sign up and for those who have not been contacted. The message right now is again that step up by stepping back and waiting until it is their turn, and we promise we will be notifying through every means necessary those persons when it's their turn.

**Cristi Moore: Okay, how many doses of the vaccine is South Carolina going to be receiving this month? Is it possible to get a weekly breakdown of the numbers?**

**Stephen White:** In our conversations with CDC and Operation Warp Speed, they've been giving us information for several months as far as what we should be expecting. What we have been told thus far from CDC Operation Warp Speed is through the end of January, we should be expecting to receive around the same amount of doses that we have seen thus far on a weekly basis, and we would get those allocated doses so they want us to plan for those doses. So what that equates to in numbers is it equates to a little over 30,000 for Pfizer first doses, and it will equate to around a little less than 30,000 doses from the Moderna product through the end of the year for the first doses. And then we do anticipate that we will get the second dose for both Pfizer and Moderna vaccines. The Pfizer vaccines will get those three weeks after the first dose allocation that we got for that week, three weeks later we would receive the second doses from the CDC into our allocations. And then for Moderna, we would receive the second dose allocations four weeks afterwards. As far as reporting, I think you mentioned a weekly breakdown. DHEC is looking to report on daily numbers moving forward and so that information can be found on our DHEC website.

**Cristi Moore: Thank you Stephen, and this one's sort of related, have there been any reductions in the number of vaccines we're scheduled to get this month or so far in the response?**

**Dr Traxler:** Several months ago when we were having discussions with CDC and Operation Warp Speed, the numbers were much higher as far as the amounts that we could anticipate getting, and I think these were all planning scenarios from the CDC and Operational Warp Speed, and so those numbers have decreased. There was a reduction from the initial numbers that we got, you know a couple months ago, however from what we have been planning for and planning against with what we get, those numbers do look to be consistent with what they're telling us that we're going to get. And moving forward, so we anticipate that staying the same and potentially being more than what we're planning for, so we're trying to stay consistent with that.

**Cristi Moore: Stephen, what companies in addition to CVS and Walgreens, are administering vaccines in South Carolina?**

**Stephen White:** Currently CVS and Walgreens are vaccinating the long-term care facilities, so those skilled nursing facilities and community residential care facilities which would be the assisted livings and others. They are taking on that responsibility in partnership with the CDC on a federal partnership, and then the hospital systems have been our vaccinators thus far with their own frontline healthcare workers and also reaching out to the community. Again, as I think we've mentioned, is we do anticipate that here in the coming, very soon, in the next week or two, we anticipate that we will see additional vaccinators to be able to help vaccinate those outside of the walls of long-term care facilities and or the hospital systems, and looking to have additional access points for people that wish to be vaccinated that fall in that phase 1A subgroup.

**Cristi Moore: Thank you. Okay Dr. Traxler, when are officials hoping to have the vaccine widely available in our state to reach some level of herd immunity?**

**Dr. Traxler:** We are hoping to have and anticipating that the vaccine will be widely available by summer to any and all South Carolinians that are age, at this point 16 or older. And we would expect then that if enough people get vaccinated, which again we strongly encourage when it's people's turn, that they do get vaccinated, that we could reach basically that herd immunity point by the fall.

**Cristi Moore: The next question for you Dr. Traxler, has DHEC set goals for the number of vaccines to be administered in South Carolina in the coming weeks or months, and if so what are they?**

**Dr. Traxler:** We have set timeline goals rather than the number of vaccines to be administered per week. I would say that we have set the goal of having, as we've stated before, phase 1A, everyone in that phase who wants to be vaccinated is vaccinated, or offered the chance within a few weeks to a couple of months of when it began back in mid-December. As we learned more about the specifics of the sub-populations for each group or each phase going forward, we will have numbers and estimates and be able to plan and make goals that are much more accurate in terms of each of those phases and the length that we want them to stay within.

**Cristi Moore: Okay Stephen, how is vaccine waste, such as you know shelf life storage issues, tracked? How much if any vaccine waste has been reported so far in South Carolina?**

**Stephen White:** So we are using a CDC tool and contract that they're working with called VAMS, it's the Vaccine Administration Management System, and that is the tool that is being used to document the administered dose of vaccine. It also is the tool that providers use to place requests for additional vaccines, or to request vaccines for their sites. And it's also a tool that's used to manage waste, so when they, if they drop a vial on the ground or something happens, it stays out of the freezer, refrigerator for too long. There are mechanisms that they would be able to do in that system to be able to put it in there that it has been wasted, and then a reason code for that as well. But to date, there has been very, very minimal wastage. It's a very negligible, very small number that has been wasted thus far, and again due to simple things such as maybe dropping a vial or a broken vile or something like that, so very minimal.

**Cristi Moore: Thank you. Dr. Traxler does the number of vaccines administered impact allotments in future shipments?**

**Dr. Traxler:** It is one part of what we look at when we are determining those allotments, those allocations. Out of South Carolina's application, we're looking at sites, utilization rates, but also at the appointments that they have scheduled in the very near future, so where they would be using significantly more of the vaccine that they still have recorded as being on hand, but are really earmarked for other people. So we are tracking that and making sure again, as I said, that that there's no stockpiling or significant underutilization going on to help determine, based on including the facilities requests for vaccines, what their allocations will be. And if we need to we will not hesitate to reallocate vaccine and redistribute it from one site to another, depending on again the utilization rates and appointments and such.

**Cristi Moore: Okay, so again Dr. Traxler, as eligibility for the vaccine expands how will a person's eligibility status be verified? So for example if a person says they're eligible due to a high-risk medical condition?**

**Dr. Traxler:** Sure, and so some of the eligibility is a lot easier to verify than others. For example, when you're looking in phases 1B and 1C at age as a cut off alone, just providing you know some identification that shows your age is would be easy and acceptable. For one, such as that example you mentioned with a high risk medical condition, we are still evaluating and looking at the different options and also talking to different partners in this vaccination effort here within the state and talking to other states about what they're doing. Some of the options that we're looking at include things like even just having a doctor's order or note for it, or if you're getting vaccinated, a pharmacy having medications you know prescriptions on file there that would indicate that you have one of those high-risk medical conditions. But we really are looking at a bunch of different options to ensure we can make this as effective, but also basically as easy as possible, for people so that it's not a significant burden.

**Cristi Moore: Okay thank you. And then another question for you Dr. Traxler, in South Carolina what phase are children who are at high risk and 16 years or older expected to be in?**

**Dr. Traxler:** As I think you all have heard before, the Moderna vaccine is only indicated for those 18 and older right now, but the Pfizer vaccine does go down to age 16. So pediatric patients, children who are aged 16 and 17 and have a high risk condition, would basically fall in where the adults with a similar high risk condition do. So those 16 and 17 year olds for the Pfizer vaccine will be in the same phase as their adults with the same other attributes or characteristics would be, but they certainly do want to make sure that they are getting the Pfizer vaccine and certainly sites that are administering vaccines will be sure to administer the appropriate one.

**Cristi Moore: Okay thank you, and what outreach is being done to marginalized communities in pharmacy deserts or areas where access to broadband and healthcare is limited to inform them about what is happening with the vaccination process?**

**Dr. Traxler:** Sure, so we are doing a lot of media, television and radio interviews, and we thank you all our partners for that. As well as doing presentations to many different community organizations and and stakeholders out there. In addition to the media partners like you, we are enlisting the help of those trusted community partners in each community such as the faith-based community to help keep every South Carolinian well-informed as we progress through our vaccination efforts. To make sure they're getting accurate and timely and actionable information, we are developing and we'll be providing to our partners that up-to-date information, those toolkits that will have the up-to-date information that will be accurate and consistent and doesn't lead or contribute to any misinformation.

We're also doing advertisements in every weekly newspaper in the state. We're doing direct mailers like we've done before for testing. The postcards, signage at gas stations and essential businesses again a lot of the same methods we've done for testing. Billboards, especially in those rural areas, and certainly information at all of the health departments. And every county in the state has at least one health department.

**Cristi Moore: All right thank you, one more question for you Dr. Traxler for now. If all were to go according to plan, how many more lives do models predict would be saved if the public in our state took up universal masking?**

**Dr. Traxler:** I really do encourage, we're talking a lot about vaccination, but I want everyone to remember that while we are vaccinating, which everyone nationwide agrees is going to take some months to complete, I really encourage everyone to keep doing these things that we know work. That are very simple, but like wearing masks. So the IHME model at the University of Washington that I think you all have heard us mentioned before right now is suggesting that between now and April 1st of 2021, if basically universal masking was performed in South Carolina by South Carolinians that we would reduce the number of deaths between now and April first by about 450 roughly.

**Glenn Johnson:** **My name is Glenn Johnson with the Channel 9 in Charlotte. The governor obviously put out a tersely-worded letter the other day about the rollout and there are obviously some concerns about rollout. Can I ask you guys how would you term, is it how would you categorize it, has it been slow has it lived up to expectations?**

**Dr. Traxler:** I think it has been very smooth to this point, considering all of the logistical complexities that do go into place for this vaccine. But we also have faced things like the holidays that have occurred just in the first two and three weeks of vaccine administration. I believe that we are seeing that increase and we'll continue to see over the next couple of weeks a very rapid increase in the utilization rate of the vaccines, so I would say that we're going smoothly towards that rapid accelerated increase at this time.

**Cristi Moore:** I think we've got time for one more question. Judy Gatson, I see your hand is raised, can you ask your question please?

**Judy Gatson: Yes good morning everybody, thank you for doing the call today. I was wondering about the rural clinics that you've mentioned on previous calls, about possibly doing vaccination clinics in those rural areas where you know access to medical facilities and some counties don't even have a hospital, is very problematic. Is a general guideline or goal even at this point- what are you hoping that some of those vaccination clinics in the rural areas might start?**

**Dr. Traxler:** We are anticipating that some of those will be starting here in the next two weeks. We will be seeing both DHEC sites as well as some of those key partners, other independent providers, potentially pharmacies, etc. But I anticipate we'll be seeing a lot more of the out of hospital clinics and included in those areas as you said with less access to healthcare facilities. We'll be seeing those beginning administering vaccines in the next couple weeks

**Cristi Moore:** Thank you Dr. Traxler, I believe that's all the time we have today. I do have a few important reminders for the group. Our daily Covid-19 data on the website has been updated while we've been on the phone this morning, and we'll also have another update this afternoon it may occur around three or four o'clock for our vaccine allocations data. That spreadsheet, we'll be updating that daily, and we will be making that announcement that it's updated on social media later today. We also plan to continue holding these regular media briefings, probably several a week, and we'll continue to get as much advance notice out to the team as we can and collect those questions up front again. Thank you for joining us and we will see you probably in a few days. Thanks everyone.