

**COMMUNITY HEALTH AND EQUITY
COUNCIL COMMITTEE MEETING
DECEMBER 11, 2020 2:00PM
VIDEOCONFERENCE**

Members Present:	Councilmember Ana Sandoval, Chair, <i>District 7</i> Councilmember Robert Treviño, <i>District 1</i> Councilmember Jada Andrews-Sullivan, <i>District 2</i> Councilmember Rebecca Viagran, <i>District 3</i> Councilmember Shirley Gonzales, <i>District 5</i>
Staff Present:	Dr. Colleen Bridger, <i>Assistant City Manager</i> ; David McCary, <i>Assistant City Manager</i> ; Douglas Melnick, <i>Director, Office of Sustainability</i> ; Dr. Anita Kurian, <i>Assistant Director, Metro Health Department</i> ; Jennifer Herriott, <i>Assistant Director, Metro Health Department</i> ; Julia Murphy, <i>AICP Deputy Chief Sustainability Officer</i> ; Kathleen Shields, <i>Chronic Disease Prevention Manager, Metro Health Department</i> ; Anna Macnak, RDN, <i>Healthy Neighborhoods Program Coordinator, Metro Health Department</i> ; Deidre Murphy, <i>Assistant to the Director, Metro Health Department</i> ; Nancy Cano, <i>Office of the City Clerk</i>
Others Present:	None

Call to order

Chairwoman Sandoval called the meeting to order.

PUBLIC COMMENT

None.

1. Approval of the meeting minutes for the November 16, 2020 Community Health and Equity Committee Meeting.

Councilmember Andrews-Sullivan moved to approve the minutes for the November 16, 2020 Community Health & Equity Council Committee meeting. Councilmember Treviño seconded the motion. The motion carried unanimously.

2. A briefing on COVID-19 vaccines and distribution plans [Colleen M. Bridger, MPH, PhD, Assistant City Manager; Anita Kurian, MBBS, MPH, DrPH, Assistant Director, Health]

Dr. Anita Kurian reported that the largest mass vaccine campaign ever attempted in the history of the nation would begin next week. She reviewed a list of four of six vaccine candidates that were selected by Operation Warp Speed as the most promising countermeasure candidates, as follows: Moderna, Pfizer/BioNTech, AstraZenica/Oxford, and Janessen/Johnson & Johnson. She stated the Moderna and Pfizer vaccines were mRNA vaccines, and the AstraZenica/Oxford, and Janessen/Johnson & Johnson were non-replicating viral vector vaccines that were engineered to carry the Coronavirus genes. She noted that of the four, only the Janessen/Johnson & Johnson would require one dose, and all the others

would require two. She noted that Pfizer/BioNTech required ultra-cold frozen storage, Moderna and Janessen/Johnson & Johnson had frozen storage requirements, and AstraZenica/Oxford could be kept refrigerated. She emphasized that 2-dose vaccines must be taken with same manufacturer and could not be mixed and matched. She reported that once the approval of the Advisory Committee on Immunization Packages (ACIP) of the Centers for Diseases Control and Prevention (CDC) was released, it would be immediately adopted by the CDC and routed to all State and local health departments with a tentative vaccination start date of December 14, 2020 – December 18, 2020. She reviewed Reactogenicity Data, or expected adverse reactions, to the Pfizer vaccine, with an overall reported mild to moderate local reaction and the most commonly reported systemic symptoms of fatigue, headache, and fever after the second dose as reported by 16% of younger vaccine recipients (16 years – 55 years) and 11% of older vaccine recipients (>55 years).

Dr. Kurian reported that the ACIP approved the interim recommendations for who should receive the first COVID-19 vaccine doses upon FDA authorization or emergency use authorization. She indicated that healthcare workers, clinical publishing workgroups, and nursing home residents would be in the front of the line and in no preferential order; thereafter, essential workers, individuals with underlying medical conditions, and adults 65 and older would be eligible for the vaccine. She noted that although States are not bound by ACIP recommendations, the Texas Department of State Health Services (TDHS) adopted the interim recommendations made by the ACIP.

Dr. Kurian reported that 40 million doses were projected to be available by December 31, 2020 and could vaccinate 20 million individuals with the required two doses. She noted that the 40 million doses would not be delivered all at once and 5-10 million doses would be delivered per week post-authorization. She stated that vaccine providers were not expected to hold back doses for second dose administrations. She added that the COVID-19 vaccination would be completely voluntary. She noted that it was unknown how long vaccine immunity would last, nor if vaccination would prevent a symptomatic transition of the virus, and added that the vaccine would bring the number of COVID-19 cases back to pre-pandemic levels. She presented an overview of product packing, shipping and delivery methods for the vaccines.

Dr. Kurian reported that the Federal government would procure and distribute COVID-19 vaccines at no cost to enrolled COVID-19 vaccine providers that would be able to charge an administration fee and that could seek appropriate reimbursement from a health plan (e.g., private insurance, Medicare, Medicaid, CHIP, etc). She stated that the Metro Health Department's role would be to serve as a vaccinators and to provide training on reporting requirements, COVID-19 vaccine updates, and changes to priority groups. She confirmed that the Metro Health Department would not serve as a depot nor a distributor for the vaccine and would not be responsible for vaccine allocations. She presented a list of local registered COVID-19 vaccine providers and their geographic locations, and a list of Federal Pharmacy Contract Participants. She indicated that the first week allocation for the State of Texas was 224,250 doses of Pfizer vaccines that would be shipped to 209 sites across the State. She stated that the Phase 1A Critical Population Group within Bexar County was comprised of 127,024 Health Care Workers and 17,100 long-term care residents and provided an itemized breakdown of each category.

Chairwoman Sandoval requested that Metro Health continue to monitor target group vaccination timelines and target deadlines, and to provide an updated briefing at the next meeting.

Councilmember Andrews-Sullivan asked how many cold storage units were available in the City. Dr. Kurian reported that most of the large hospital systems in San Antonio had cold storage systems.

Councilmember Viagran asked if doses had to be administered within a certain timeframe due to cold storage requirements and if there was a quarantine period required post-vaccination. She stated that more needed to be done to inform TDHS Officials and State Leaders of the gravity of local health disparities. She requested an overlay review of the number of local COVID-19 cases and the location of testing and vaccine sites. Dr. Kurian stated that vaccines could be kept in ultra cold storage units for up to six months and emphasized that the goal was not to keep vaccines in storage, but to administer vaccines as quickly as possible. She confirmed there were no recommendations for quarantine post-vaccine. Chairwoman Sandoval stated that the requested overlay would be provided at the next meeting.

Councilmember Treviño requested that 3-1-1 be provided with the same information and messaging received from the Metro Health Department. He stated that the CDC Moratorium would expire on December 31, 2020 which would create a potential health crisis which would add to the burden of the COVID-19 Pandemic and Operation Warp Speed. He stated that Housing was Healthcare and asked what would be done to vaccinate the homeless population. He noted the opportunity to coordinate vaccine efforts for the homeless with the City's portable shower outreach program. Dr. Kurian reiterated that Housing was Healthcare and that the Metro Health Department would be working with local medical directors of nonprofit homeless organizations to serve as vaccine provider for the homeless population. She noted that UT Health, University of the Incarnate Word College, and University Health System were registered vaccine providers that would focus on providing vaccines for the homeless.

Councilmember Andrews-Sullivan asked of campaign efforts to address any public concerns about any possible adverse side effects for the COVID-19 vaccine. Dr. Kurian noted that questions received from the public at previously held community town halls would be compiled and presented in targeted campaign efforts.

Councilmember Viagran asked when second doses must be administered for each vaccine brand. She requested a map of local nursing homes enrolled as vaccine providers. Dr. Kurian stated that the duration between the first and second dose was 21 days for the Pfizer vaccine and 28 days for the Moderna vaccine. Dr. Kurian stated she would provide further information on nursing homes that had contracted with retail pharmacies for the vaccine.

Councilmember Gonzales asked of the age range for children that participated in the initial Pfizer trial. She asked if individuals who already had the virus needed to take the vaccine. Dr. Kurian reported that there was not enough sufficient safety and efficacy data for the pediatric population and noted that Pfizer's Emergency Use Authorization now enrolled children 12 years and older in its clinical trial. She stated that according to ACIP, persons who had already had the virus would have immunity for a finite period of 90 days and Metro Health was waiting further vaccine specific recommendations for persons that had already contracted the virus.

3. A briefing on the Metro Health Healthy Neighborhood program expansion model and plan for working in new neighborhoods. [Colleen M. Bridger, MPH, PhD, Assistant City Manager; Sandra Guerra, MD, MPH, Interim Deputy Public Health Director, Health]

Anna Macnak reported that the Healthy Neighborhood Program (HNP) Expansion Model used the community health worker model in an innovative approach to support food security and increase health and wellness through culturally appropriate outreach and education in targeted census tracts.

Ms. Macnak reported that \$500,000 in funding would primarily support eight new positions, including three lead community health workers, and the creation of a new Equity Communications & Education Specialist position to increase the visibility of health messaging and resources within the neighborhoods served. She reported that the HNP currently served ten neighborhoods within Council Districts 1-7 and four new neighborhoods would be selected based on the combined data of equity scores and data from asset mapping assessments.

Ms. Macnak reported that approximately \$108,000 of funding would be allocated to 12 new stores in Council District 1, 2, 4, and 7 in census tracts with low food access per the USDA's Food Access Research Atlas and established with businesses that expressed interest in the program and that accepted SNAP EBT. She added that \$12,000 would be utilized for ongoing support of the current eight stores in Council District 3.

Councilmember Viagran stated that she made the request at the Intergovernmental Relations Committee meeting that food insecurity be included as a top priority in the City's Legislative Agenda. She asked if Community Health Workers could provide a report for each HNP neighborhood with feedback on their areas of focus – healthcare, childcare, HNP expansion phasework, etc. that would inform policy decisions in the future. She advocated for another HNP program in the Riverside area of Council District 3 that could also serve residents in an adjacent area of Council District 5 located at Roosevelt St., near Highway 90.

Councilmember Treviño noted the opportunity provided by HNP to connect with vulnerable residents and lend support to those that may feel lonely or anxious during the pandemic. Ms. Macnak stated that local parenting and breastfeeding classes were important community resources that provided support to families, mothers, and children. She welcomed more ideas about connectivity through HNP.

Councilmember Andrews-Sullivan asked if any grants were available through the United States Department of Agriculture (USDA) or the Texas Education Agency (TEA). She asked how a green space in a floodplain area near Martin Luther King Drive could be utilized as a business model and a form of economic stimulus for healthy home gardening and food security opportunities. Ms. Macnak reported that HNP recently partnered with Garcia Street Farms in its grant application process and stated that USDA and TEA funding opportunities would match very well with HNP initiatives. She noted that community gardens provided more educational opportunities than in meeting production levels high enough to service and support community food security. She stated that the City's Fruit Tree Project and the City's partnership with the Food Policy Council could be expanded to focus on home gardening and the economic benefits of selling unprocessed produce which was allowed by City Ordinance.

4. A briefing on the status of the implementation of the SA Climate Ready Climate Action and Adaptation Plan (CAAP). [David McCary, Assistant City Manager; Douglas Melnick, Chief Sustainability Officer]

Chairwoman Sandoval stated that Item 4 would be tabled at this time.

Future Items

SA Climate Ready Climate Action and Adaptation Plan update

Adjourn

There being no further discussion, the meeting was adjourned at 4:00 pm.

Ana Sandoval, Chair

Respectfully Submitted,

Nancy Cano, Office of the City Clerk