

VMS Governor's Press Conference Notes from Tuesday, August 3, 2021

Calls with White House

- Gov Baker: 1000 cases, just 7 hospitalizations and 0 deaths – the vaccine works
- Fauci – vaccines work, prevent hospitalizations, severe cases and death
- What we see in VT shows it works – only 3 people hospitalized in VT
- We don't need more mitigations measures today – goal of mitigation was to flatten the curve and protect our health care system
- Vermonters stepped up and did the right thing – hit 80% in June, and still are not letting up even
- Vaccines change the risk assessment – we can move forward with our lives without the mandates
- 99.9% of those vaccinated have not had a case the result in hospitalization or death
- This week – DOE will issue advisory memo to schools as we restart in person education 5 days a week
- Here are the highlights
 - o Recommending all students under 12 who are not eligible to be vaccinated wear a mask
 - o 12 and older eligible for vaccine – similar approach to general public – when 80% have gotten at least 1 dose, drop masking mandates for those over 12
 - o Will have more vaccine clinics and inspire parents to sign their kids to get fully vaccinated

Pieciak

- Modeling report: https://dfr.vermont.gov/sites/finreg/files/doc_library/dfr-covid19-modeling-080321.pdf
- Anticipated cases will rise nationally for 4-5 weeks and will impact even in VT
- Seeing an increase in VT – 282 last week – majority among the unvaccinated – anticipate cases to continue to rise among the unvaccinated
- We expect hospitalizations and deaths to remain low; median age among those who got COVID this week was 30
- When we compare prior rises in cases – in prior rises hospitalizations also rose and deaths, in current rise, though cases are rising, hospitalizations are not rising
- Vermont fatality forecast for August – 0-6 though do project cases rising
- Highest weekly total in a month getting vaccinated – have now crossed 84% getting a first vaccine

French

- First advisory for schools this week
- State of emergency has ended so this will not be “Formal guidance” but advisory recommendations
- Full in person education
- We do know schools will need some time to implement guidance even though simpler than last year
- We also have CDC and AAP guidance at the national level
- The game changer this year is vaccines
- Recent federal guidance is very useful but when applied at the state level needs to take into account the state level differences in vaccination rates
- Mass school guidance that just came out fit the context of their state and high vaccination levels, VT will take a similar approach

- What recommendations will include:
 - o Stay home when sick
 - o Recommend all students and staff wear masks for the first several weeks of school, regardless of vaccination status
 - o No distance requirements
 - o After first few weeks: recommend masks only until 80% of students in a specific school receive their first dose and recommendations for how to determine their vaccination rates
 - o Then once hit 80% will recommend masks only for unvaccinated students and staff
 - o Masks for all passengers on school busses
 - o Contact tracing, optional testing programs

Mike Smith

- A huge difference in rates of contracting COVID, hospitalizations and deaths if you are vaccinated
- Overview of opportunities for vaccinations and walk ins this week
- Rescheduling a substantial number of school based clinics for those 12-18 (but open to anyone) – will have more information at next press conference
- ARPA funding has made health insurance more affordable – many Vermonters are eligible to purchase plans on VT Health Connect for lower than ever before – visit VermontHealthConnect.gov to learn more

Mark Levine

- This pandemic continues to throw challenges at us but we have a vaccine that can nearly prevent hospitalization and death and over 84% of Vermonters vaccinated
- Those who are vaccinated can become infected with Delta and may transmit it
- It transmits about 2x as effectively
- Important messages: vaccinated people make up a very small component of those who are transmitting; if you are vaccinated, you are prevented from the worst outcomes, cases are generally mild; 8x lower chance of getting ill, 25X lower risk of hospitalization or death
- Chittenden & Essex – now in the news for more cases, masking guidance - expect Essex to be adjusted downward soon since no cases there in 4 days
- Overall recommendations for masking for vaccinated has not changed
- Unvaccinated people need to protect themselves or others by masking indoors
- Any anyone may want to wear a mask based on their own risk factors – live with those who are more vulnerable, live with children who are unvaccinated, traveling to an area of more transmission
- get tested if you have any symptoms

Questions

- Can you elaborate on masking for school employees? French: This will be in writing hopefully this week; we are recommending that school require for first few weeks for all students and staff; then tying recommendations to STUDENT vaccination rate; we know staff were already over 80% as of the spring; now after student rate in a given school reaches 80% only unvaccinated students and staff wear a mask
- Will staff need to file proof of vaccination? French: No, this will be based on student vaccination rates

- What about schools with varying staff vaccination rates, are you worried? French: no, will look at each school as its own ecosystem, setting 80% as a high but achievable goal; we are already at mid-70s for some of these ages
- Is this 80% of eligible students or entire school, what about schools with mixed ages? French: Only 80% of eligible students
- What about schools with students under 12 where a lot of students are not vaccine eligible? French: this will not be very usual, most elementary schools are k-6; we do have k-8 schools where vast majority are under 12; we have very few k-12 schools and these are often divided by building; we will provide guidance to schools in these unique situations
- Will vaccination status be self-certified or will they need proof? This is not specified yet but we will give some ideas, make it as manageable as possible
- What about families who have some real concerns about sending their students to schools in these situations, especially after the federal guidance? French: vaccination rates vary very widely across the country, this needs to be localized
- What about timing on moving to remote learning, especially on how quickly Delta can spread? We will continue to put out advisory memos, right now this is about opening schools, giving schools enough time to operationalize new recommendations
- Sports guidance? French: fall sports largely outdoors, we will be addressing this in the next few weeks, too early to tell right now
- Should schools have remote learning plans waiting in the wings? Not at this point – don't anticipate whole school or whole class remote learning
- Now we will have 100s of unvaccinated students crowding together without masks – is this unsettling? Mark Levine: we will have cases in school, just like we had last year and we're seeing across the state; we do have 2 very powerful mitigation strategies – vaccines in those eligible and masking in an indoor setting; plus contact tracing will continue in a very robust manner; we did use CDC and AAP recommendations for guidance but the Northeast is different from other parts of the country in many ways
- Cases are expected to rise for 4-5 weeks and then decline – what is that based on, how do we know that? ML: this is how we learn from what is going on nationally and internationally – we see what is happening in Israel and UK – Delta races through the population and then starts to come down, even where vaccination has not reached the level they want
- Do we have data on who is experiencing the breakthrough cases, is it based on type of vaccine? ML: one is not standing out very much, J&J was slightly higher but fewer people in VT have gotten J&J so unclear if this is statistically significant – doing more analysis
- Should Chittenden county be wearing masks indoors? We are not recommending all population of the county wear masks indoors at the moment other than those he mentioned previously (immunocompromised, kids at home, etc) we are not seeing bad outcomes; Scott: we have not followed CDC in all aspects – we have made our own decisions and in fact been out ahead in many instances, in some cases, VT stands out because small changes absolute numbers can lead to be increases in % change
- What is response to FL Gov preventing schools from requiring masks? Scott: that would not work here, we have worked from the beginning to balance freedom and safety
- Can schools choose not to follow these rules because they are “advisory?” Can parents opt out if a school requires something? French: we are now making recommendations to schools – we are recommending that school districts require masks, school district is free to follow this or do something different, but parents cannot opt out if the school makes a policy; we will be briefing superintendents on Thursday and work well together with the districts

- How do you address the concern of peer pressure of masking if you are unvaccinated? Scott: this is striking the right approach, team approach in getting vaccinated
- Will things be changing about quarantining or testing if exposed to a case? ML: we are reviewing new CDC guidance on this, may have to do with testing, probably not quarantining
- Why no vaccine clinic this weekend a Franklin County Field Days? MS: we are gearing up to do fairs, events, if we missed it we will do our best to get there, we've been about 27-30 events per week, we will bring it anywhere, anytime; Scott – we could set up something easily there
- Will Vermont be requiring students to get a vaccine? French: not at this time
- Are you recommending screening tests for those who are vaccinated? ML: not at this time, if asymptomatic and have no other reason to get tested
- Just to clarify is the only reason these are not mandates for schools because there is no state of emergency? Yes, that is the best route for requirements
- Could a school board with a mask mandate bar entry to a student not complying? Pieciak: there are requirements for students to get an education so we will have to explore the implications of this
- Are there instances of children under 12 getting long COVID and what is their typically experience with COVID? ML: the typical experience in VT is a mild illness, we do not have any deaths, maybe 1-2 hospitalizations but extremely small, to best of his knowledge no long COVID or MIS
- What will contact tracing in schools look like? Is close contact the same definition? Impact of vaccination status? ML: we will have more information on this at a future conference, it will be as strict definitions as we have used in the past
- What percent of state employees are vaccinated and are you considering a mandate? Scott: he is not considering this right now, has not talked with VSEA about it yet, but every business has an ability to do so
- Are current cases outbreaks or more smaller events? ML: multiple single events, lone individuals, not big spreading events; Provincetown event did lead to 7 cases in VT who all traveled together – we have not seen large events leading to spread throughout VT
- There are parents upset that teachers are not required to be vaccinated, will there be some continued testing of unvaccinated staff? French: there will be continued voluntary testing of staff, not required
- Do you foresee changing any mandates or vaccine requirements once it gets full approval? Scott: that is not an issue right now – we are at high vaccination rates already
- How many 12-18 year olds have already gotten vaccinated? 12-15 are at 66% 16-18 are at 72.6%
- What has happened to approval for children under 12? ML: yes, people were hoping over the summer or early school year for an EUA for younger students, no firm date now but hearing later fall some even using early winter – hopes sometime in the fall; so some schools could need masks all year? ML: full vaccination could definitely happen before spring term
- How do you decide which cases to test for delta/sequence? Scott: nationally, 85% of cases now are Delta ; ML: 56 cases sequenced in July /48 were delta – 85-90%