

**COVID-19 Tribal Leadership Session Minutes  
February 8, 2021**

Angie Gorn, NSHC	Reba Lean, NSHC	Mark Peterson, MD, Medical Director, NSHC
Kelly Bogart, NSHC	Megan MacKiernan, NSHC	Cameron Piscoya, NSHC
Kristen Timbers, NSHC	Carol Charles, NSHC	Megan Alvanna-Stimpfle

\*Over 30 participants attended today's meeting.

AGENDA ITEMS	DISCUSSION/RECOMMENDATION
Introduction to Meeting – Angie Gorn, NSHC CEO	<p><b>Today's Reminder:</b></p> <ul style="list-style-type: none"> <li>- Please keep phone muted unless speaking or asking a question</li> </ul> <p>Note- Any questions may be sent to Public Relations at <a href="mailto:pr@nshcorp.org">pr@nshcorp.org</a> anytime or text to 907-434-1927 and they will be answered during the 11:00 am call.</p>
Updates	<p><b>Angie gave the following update:</b></p> <ul style="list-style-type: none"> <li>- Friday – 1 case detected in Koyuk, Sunday – 1 case discovered travel-related, with expected press release regarding that soon.</li> </ul> <p>Reba announced winners of the 10% drawing (1/10 survey respondents are eligible to win \$100.) List of winners has been posted on our FB page. Reba: We've had a lot of respondents of people who took the survey after getting vaccinated. We had 700 survey respondents from most of the communities and so 70 winners throughout the region who have won \$100 for completing the survey after getting vaccinated. No entries from Diomede.</p>
Medical Staff Briefing – Dr. Mark Peterson, Medical Director	<ul style="list-style-type: none"> <li>- 140 cases daily, no additional deaths (277), total nonresident cases, around 24 average this weekend.</li> <li>- Plenty of beds statewide</li> <li>- NSHC: 4 active cases. 1 each in Nome, SMK, Koyuk, WMO</li> <li>- Luckily small numbers in our region. We've been able to sustain and maintain our high level of testing at the airport, good contact tracing,</li> <li>- Vaccine update: Unfortunately, we had bad weather last week. A lot of Pfizer first dose didn't get in from the state. Percentages of first dose are similar to where they were last week. In Nome: 1745 first doses administered, second doses 1186 administered to residents in Nome. We'll continue to push people to get the first dose. We have the incentive program (raffle and prizes) as well as we expect the new variants to spread across the country, including Alaska. So we expect that to motivate people. We'd like to meet with some of the villages that have particularly low vaccination rates to see what we can do to encourage. We'd like to use these 11 am calls to answer calls about vaccinations. We want to encourage anybody to call in and ask questions about vaccines or side effects. We want to use this as an opportunity to get motivated.</li> <li>- Johnson &amp; Johnson vaccine: Has given the FDA their data on their vaccine. We expect that to get approved in the next 3 weeks probably. It's a single dose vaccine, and we don't know if it will be offered to ages 18 and under or not. We'll keep our fingers crossed on that.</li> <li>- Our regional statistics: given over 6000 total vaccines: 3600 first doses, 2400 second doses. We need to double that.</li> </ul>
Question and Comments	<ul style="list-style-type: none"> <li>o <b>Lucy, Teller:</b> Update on cases in the region. MP: 1 case travel related yesterday, 1 on Friday. Probably 1 in WMO, 1 in KKA, 1 in Nome, 1 in SMK. State of Alaska had about 140 cases each day average (Friday Feb 5-Sunday Feb 7) with no additional deaths.</li> <li>o <b>Toby, WMO:</b> Based on your numbers, do you attribute that to people getting the vaccine? MP: Are we looking better because we've been vaccinated? I'll say this, I think the village cases we've seen lately, we haven't had apparent spread to other people. I'm hopeful that's because of the vaccine. I don't know what else we can attribute it to. I'd like to think people aren't visiting, and limiting their social bubble &amp; hunkering down, but I think people have been starting to get back together. I think people are starting to visit more. So why aren't we seeing an outbreak as we had seen in Gambell &amp; Stebbins? I'm hoping the vaccine is helping.</li> </ul>

- **Barb Gray, N: Addressed to Roy:** We have tons of boards and committees and many of our people participate in these. We've attempted to hold meetings via teleconference, zoom, Microsoft Teams. There are a lot of people who struggle with this and it's holding business up. Maybe with your board skills, it might be beneficial to encourage people to get the vaccine. **Roy:** I think it would be good to work with Reba in PR to find ways and to engage people who have leadership roles (IRA, Native Corporations, City Governments) to get vaccinated.
- **Caller:** Have you seen a difference in a lot of new people getting vaccinated after the incentive program was announced? **Reba:** The only difference that we can see is Nome because the rest of the villages are on a schedule of when vaccine can get out to the villages. **Megan:** We've seen a little uptick in first dose vaccines administered, not huge but a little bit. **MP:** A little bit of a stale period for first dose vaccine. I commented earlier about leadership groups getting together to motivate their communities to get vaccinated. Any village that wants to encourage their leadership to get vaccinated that'd be incredibly helpful. Whatever we can do to get more people vaccinated is great.
- **Roy:** Are we or have we announce winners in the villages? **Reba:** Yes. **MP:** I put the invite out to any village that if any village leadership wants to reach out to our physicians about vaccine questions, we can do that. The state will be giving a talk today about vaccination and quarantine & travel. What's happening is that communities that with higher vaccine percentages will be able to have less stringent travel quarantines. We can be so much more comfortable with people who are vaccinated to be able to start to open up and to be able to host different activities.
- **Barb:** What about reaching out to churches? People who attend churches gather every week; it might be helpful to reach out to churches to encourage them to get vaccinated. We can't get to normal until we get vaccine numbers up. **Reba:** That's a good point, I can reach out to them and share resources. **MP:** I think that's a good suggestion. It's just a part of reality, to protect others to go and get vaccinated.
- **Roy:** Maybe we can try to educate people about the variants and how much more contagious/infectious they are. That can be one of the things we work on to get more information out. **Reba:** Yeah, that's possible. We started sharing information on the variants and that they're on the way. We can keep doing that.
- **Barb:** I have a question about these vaccines. We're getting Moderna & Pfizer. They're supposedly 95% effective, whereas the Johnson & Johnson is about 60-65% effective. Once we start getting J&J doses in the region, will the people lining up to get vaccinated have an option to choose which vaccine they want? **MP:** We don't know yet. We will wait to hear information from the state regarding that. We don't know yet. We'll be learning more about it as the time goes forward. The government has purchased some doses from J&J and has agreed to buy some which means we as NSHC will eventually get some. It will be available in the region, we don't know when or how much, but we know once it's approved, we will get some. The state may put restrictions as to who may receive it for how many people in your region based on how many people want the J&J. It'll probably depend on who wants it and will actually get it in our region. It's frustrating to think that by the time J&J comes out, NSHC has the capability to vaccinate all adults, and perhaps when J&J is available we would be able to use that just for kids (12+ for example). We have to push really hard over the next 2 months to get everybody vaccinated with Pfizer & Moderna. When J&J is approved and officially distributed, we expect to still receive/distribute Pfizer & Moderna. There'll come a time when we have vaccine when nobody wants it. We hope that doesn't happen until we're at 80%.
- **Toby:** What percentage of Alaska Natives get COVID compared to the general population. **MP:** Alaska Natives & Pacific Islanders in the Anchorage area have been hit pretty hard by severe COVID. Alaska Natives are sicker on average than other populations in the state. This makes it even more important to get vaccinated. Maybe we need to get that information out to our Alaska Native population that they may be at more risk of getting COVID and getting sicker with COVID.
- **Toby:** I like Roy's comment earlier about leadership getting vaccinated. Their opinions & actions carry a lot of weight and can help other people get vaccinated. **Megan:** Definitely, the more people who share that they got vaccinated and share why you got vaccinated. They are people who aren't getting vaccinated and sharing why they didn't pretty loudly and sharing why they didn't, perhaps, louder than other who have. Gotta balance out the people who share why they haven't gotten vaccinated.
- **MP:** If someone is exposed to COVID in a mostly vaccinated community, they're less likely to be able to spread

	<p>COVID to other people because of the vaccine. Still need to mask &amp; socially distance. We want to get school-age children vaccinated. We will do that as soon as we have an authorized vaccine for children.</p> <ul style="list-style-type: none"> <li>○ <b>Barb:</b> Using advertising and using our children to help advertise to get vaccinated. Children get the hearts of people.</li> <li><b>Reba:</b> I saw a prior advertisement from the high school volleyball team to promote reading, and that might be an effective way to get people vaccinated.</li> <li>○ <b>Angie:</b> Received a general question from people about getting vaccinated and traveling. Dr. Peterson, can you speak to traveling &amp; getting vaccinated? MP: ANMC &amp; our staff as well are still trying to limit medical travel for things that can wait 4-6 weeks. There are some medical travel questions about what our policy is about what is essential medical travel &amp; what isn't. It's hard to put a blanket statement towards what is good and what isn't. Each medical case is different in their own ways. And then we also have a gatekeeper in PCC for all the medical travel requests. We have the medical providers requesting travel and the gatekeeper double checking to see what is essential and what isn't. And there are some cases where patients can reach out to the Patient Advocate/Gatekeeper/Admin/ and myself to see if anyone feels as though their medical travel has been delayed too long. We review that and examine each case to see if there's any patient (cancer, surgery, etc) with emergent needs and review that. What we're doing is limiting travel somewhat out of region, so that we can limit COVID-19 exposure. If you know someone with delayed care or their referral is delayed, let the patient advocate or myself know (<a href="mailto:mgpeterson@nshcorp.org">mgpeterson@nshcorp.org</a>). For the most part, people understand that this won't last forever and that we will resume patient travel when it is safe to do so. We also make exceptions for our patients who have received both of their vaccination doses because they're at lesser risk of exposure if they need to travel. Angie: The Patient Advocate for NSHC is Jeannie Kost, her number is 907-443-4567. If you feel like you need to dispute or appeal a medical decision such as denied medical travel, our Patient Advocate is the first person you'd go through to get it looked at again.</li> <li>○ <b>Annie, SHH:</b> There was an unfortunate event in Shishmaref this prior weekend, where 3 residents lost their home due to a fire. If anybody is willing to donate anything, it would be appreciated. I have a list of what's needed or donations that would help. List has been emailed to Reba: <a href="mailto:pr@nshcorp.org">pr@nshcorp.org</a>.</li> </ul>
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Village vaccination rates (updated every Monday).