

Mayo vaccinating final eligible workers, with no favorites

BY PAUL JOHN SCOTT
Forum News Service

Mayo Clinic Rochester says it has embarked into a final category of health care workers permitted to receive the COVID-19 vaccine early. When this group has been administered shots, Mayo will have offered the doses to more than 33,000 — or 92% — of its 39,000-person staff.

That leaves just 8% of the workforce for the state's largest private employer considered ineligible to receive a vaccine early.

The figures come alongside news of favoritism within some large health care institutions across the country: Reports published over the weekend in The New York Times say that vaccine has been administered at academic hospitals to nonpatient-facing health care professionals, including researchers and administrators. The academic hospitals include Columbia University, Harvard, NYU and Vanderbilt, according to the Times.

With scarce, early doses meant for the prevention of sickness and preservation of societal function, giving vaccine to nonessential hospital administrators and others facing no contact with doctors or nurses was depicted in the article as equivalent to cutting in line, according to those who wrote the early vaccine guidance.

Mayo says it has avoided that scenario.

"In Southeast Minnesota we've moved to third priority," said Melanie Swift, an occupational medicine specialist in charge of the COVID vaccination program at Mayo Clinic Rochester. "It includes people who are part of the health care team, and they're on site ... It's important to vaccinate them as part of that team that's physically together supporting the care of patients."

Swift said this group does



Swift

not include researchers with no patient contact, employees who will presumably qualify for a vaccine at a later date as do much of the general public — based on their age and health status.

"Here at Mayo Rochester, we have not extended the invitation for vaccination to those groups," Swift said, "... those researchers, those teleworkers."

Swift said Mayo developed its list for health care workers allowed early access after an exhaustive internal assessment by supervisors of each employee's exposure, according to a set list of variables. The clinic undertook this project in early December, before the state released its guidance, and will soon publish it in the New England Journal of Medicine.

"The two groups not (allowed early vaccine) are people who may be physically onsite, but their work does not support clinical care," Swift said. "That would include people who do solely nonclinical research, who are not working with COVID samples, who are not working directly with patients. It includes people who support education but not the clinical enterprise, and people who exclusively telework."

FOLLOWING FEDERAL VACCINE PRIORITIZATION PLAN

In late December, the Centers for Disease Control and Prevention created guidelines outlining a prioritization process for distributing early, limited doses of vaccine. States were free to fine-tune these advisories. In Minnesota, the result was a plan demarcating the vaccine-seeking public into three early phases, Phase 1a, 1b and 1c.

Phase 1a was designated for health care workers and

residents of long-term care, Phase 1b included those older than 74 and essential workers, while Phase 1c served those with underlying conditions and over 64.

With its large health care sector, Minnesota is estimated to have 500,000 residents in Phase 1a alone, and health officials believe all of January will be needed to vaccinate them all.

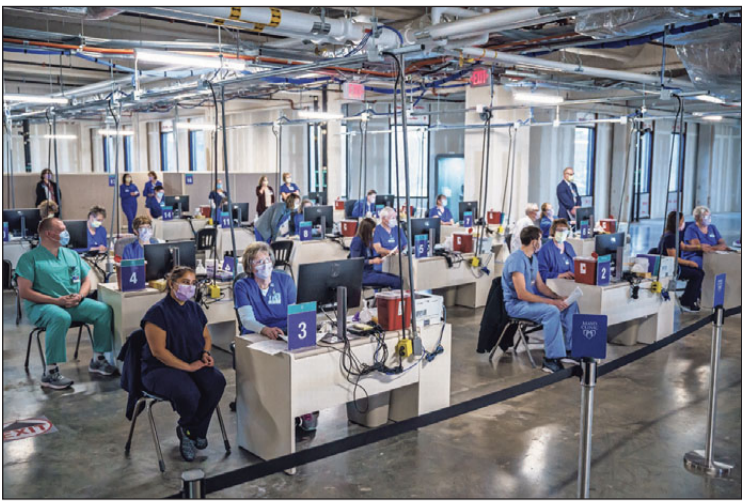
This has necessitated dividing Phase 1a into three tiers, with first tier doses within 1a reserved for those working with COVID patients or lab samples. The state is now in the second tier of Phase 1a, one in which all health care workers providing direct patient care are eligible for vaccine.

Tier three of Phase 1a, where Mayo arrived last week, is meant to serve vaccine broadly among all medical staff onsite within a health care organization. Asked if this guidance allows administrators with no patient contact to receive vaccine, in an email, Kris Ehresmann, Minnesota Department of Health Infectious Disease director, wrote, "tier 3 of Phase 1a ... is in reference to workers with direct patient interaction or who could be exposed to infectious agents that can be transmitted in the health care setting."

The language on the MDH webpage appears to go even farther, including in this final group "all remaining HCP (health care personnel) not included in the first and second priority groups that are unable to telework."

"Their Phase 1a is large," Swift said. "But we believe we are aligned with the intent of it."

M Health Fairview, with 34,000 employees, also says it has not allowed administrators, student researchers and others with no patient contact to get COVID-19 vaccine, according to spokesperson Jill Fischer.



Joe Ahlquist / jahlquist@postbulletin.com

Mayo Clinic in Rochester has entered the final stage of employee vaccination.

During a news conference Tuesday, Jan. 12, Ehresmann said "we are aware of several systems that have made decisions on their own," about which health care workers qualify for vaccine. "There are some situations in which you are vaccinating quickly to avoid wasting doses," she said. "But what is challenging is when decisions are made that are planful about not following guidance."

COUNTERPOINT: RIGID APPORTIONING OF DOSES IS SLOWING ROLLOUT

Ironically, concern has shifted away from the question of whether some may be getting early vaccine without justification, to the question of whether rigid adherence to prioritization guidelines has caused health systems to slow the delivery of vaccine.

Currently, just a third of the vaccine delivered to the nation's states has been administered. This lag led the White House on Tuesday, Jan. 12, to say it may shift away from allocating vaccine by population. Instead, more vaccine would be given to states that are using more, and by their percentage of population over 65 — who it says should begin getting vaccine now — along with those with elevated health risks.

Ehresmann said the announcement came as a surprise to state health officials, and will cause them to delay their planned announcement next week

of which essential workers and older Minnesotans gets vaccine under Phase 2a, slated to begin next month. She added that the change may not last, as it would not take effect until after Jan. 20, when Joe Biden is inaugurated as president.

"If you are tracking the date, there will be a new administration at that point," Ehresmann said. "We have appreciated the pro-rata (population-based) approach, and will wait to see what they have to say. The only information we have is what we saw in that announcement today."

Ehresmann said systems should consider giving any excess vaccine during the health care prioritization window to health care workers outside of their systems.

Asked if it was possible that highly placed executives who would never be thrust into patient contact might have received vaccine, Swift said "I can tell you that we built a process that assesses people for their individual risk level, and that we have not allowed people to self-assess their risk."

"We have tried to fine-tune it as much as possible. Is it going to be 100% perfect? No, probably not. But it's a good faith effort to make sure the vaccine is being allocated where it's intended to go. ... We just need more vaccine as soon as possible to get to the next phase of vaccination," she said. "We have no trouble getting vaccine delivered once we receive it."

Waters on Mayowood residents, staff receive first vaccines

BY ERICH FISHER
efisher@postbulletin.com

The Waters on Mayowood retirement community in Rochester received its first shipment of the Moderna COVID-19 vaccine, and began administering it to staff and residents on Tuesday.

Residents were "smiling ear to ear" upon the vaccine's arrival, as they believe it brings them one step closer to reuniting with their loved ones.

"In our residents' eyes, it was the world," said Executive Director Autumn Ostergaard. "They were so excited to finally have this happen in hopes of being able to see their family again



Traci Westcott / twestcott@postbulletin.com

Ken Babcock and his wife, Mary, receive their first does of the Moderna COVID-19 vaccine Tuesday at The Waters on Mayowood in Rochester. "We have been waiting for this day," Ken said.

and getting to have some normalcy.

"To actually see the residents have a smile on their face and stand up and walk proud ... It was a different group of

people today."

The facility administered about 300 vaccines, Ostergaard said, and will receive its next shipment on Feb. 9. Most residents elected to

receive the vaccine, with only a few declining.

However, Ostergaard said nearly 40% of the approximately 117 staff members declined the vaccine.

"They have the same fears that you see: 'It's a new vaccine, people are having side effects,' " she said. "I think as we see this process continue, we're going to have more staff seeing that everything is going OK and that they would be interested in receiving it. But right now, it was just because the vaccine was new."

The vaccinations mean going forward, The Waters on Mayowood will be "opening up more."

"We're going to start doing more activities, more engagements,"

Ostergaard said. "We're still going to follow social distancing. We're still going to wear masks, but we're going to hold more opportunities for people to do things and go out and about."

The facility was allowing in-person visits one at a time, while also monitoring the amount of time people could visit.

Once residents receive their second vaccination, Ostergaard said they will start to allow more visitations at once.

In Minnesota, 7,392 people have received two doses of the vaccine as of Jan. 12. Another 144,503 people have received one dose.

Olmsted County, as of Jan. 7, has vaccinated 7,193 people, and the

number continues to grow, with the state now moving on to the last of the first group of priority residents this week.

As vaccination continues in the county and in the retirement community, Ostergaard is hoping residents will have more opportunities.

"I just think it's important to give our residents the opportunity to smile and think of what can happen this year versus what can't," she said. "So much of the past has been saying no and thinking of what we lost, and now we can start looking at what we're gaining back, and what we can do with open eyes and positivity."

Rochester city buses ending fare-free practice this month

Post Bulletin staff reports

Rochester Public Transit will resume fare collection and front-door boarding on regular-route buses on Jan. 24, after nearly a year of fare-free service.

Also on that date, the citywide bus service will change the numbering on 16 of its routes. No schedule or geographic coverage changes are expected to accompany the numbering changes.

Rochester Public Transit suspended fare collection last year in April for passenger and operator safety amid the COVID-19 pandemic. Passengers also have been required to board buses using the rear door.

Acrylic barriers are

now in place near the farebox on RPT's fleet of fixed-route transit vehicles. The barriers provide an additional measure of protection against the spread of COVID-19 and allow for these changes.

Many additional safety measures remain in place, including enhanced daily cleaning, a face-covering requirement for passengers and operators, and a 50% capacity limit on passengers.

Evidence suggests these actions, along with cooperation from RPT passengers, have been effective at preventing the spread of COVID-19 on RPT buses. "Safety of our passengers and

operators is always our No. 1 concern," said RPT official Ia Xiong. "With safety barriers now in place, we are able to move public transit in Rochester forward with confidence."

The route number changes are part of enhancements outlined in RPT's 2017 Transit Development Plan. While losses in ridership due to the pandemic have slowed the expansion portion of the plan, the renumbering is a step in that direction.

The new numbering system is designed to be easy to understand for new riders and to allow for future expansion. New 3-digit route numbers use the first digit to indicate which of four geographic

quadrants the route operates. Northeast Rochester routes will begin with the numeral 1, Southeast with 2, Southwest with 3, and Northwest with 4.

Another change replaces the "D" used to identify routes that serve the city's four park-and-ride locations with an "X" to indicate express service. Park-and-ride lots and corresponding direct routes at Cub Foods and Target South remain suspended, with no plans to reintroduce them.

"Further evidence of forward momentum can be seen in the implementation of the new route numbers," Xiong said. "Before the pandemic, our system had three years of very

strong service growth. We do expect to return to that trajectory in the next planning period."

Information regarding the new numbering

system is posted online at rpride.com, with new maps and schedules expected to be available as service goes into effect later this month.

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