

SAN LUIS OBISPO COUNTY RESPONSE TO THE COVID-19 PANDEMIC

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SUMMARY

The COVID-19 pandemic is the single largest event to upend the way of life in San Luis Obispo County (SLO County or the County) in decades. For that reason, the Grand Jury believes it is important to look at how SLO County responded to this event.

In this Grand Jury report, findings show the County's emergency preparedness, leadership, and staff were committed, skilled and able to respond quickly with very little early Federal or State guidance and many unknowns. The County quickly established daily communication with the public and with mayors and city managers throughout the County. SLO County staff were in daily and weekly conversations with neighboring counties and became guiding leaders to many.

The focus of this Grand Jury investigation was on the methodology employed by the County to ensure the equitable and efficient delivery of vaccine to the population of SLO County. Early on, registering to get a vaccination was a struggle for many in the community. An unknown and unreliable supply of vaccines from the State and a high initial demand hindered the County's efforts to vaccinate the most critical and vulnerable. Despite these challenges, the Grand Jury's investigation revealed that the County did a commendable job responding to an unprecedented public health emergency.

Background And Introduction To The Report

The Grand Jury received citizen complaints asserting the County did not act fast enough and appropriately in managing the distribution of vaccines in response to the life-threatening pandemic facing SLO County residents. An understanding of how SLO County responded to the COVID-19 pandemic is important to all members of the community.

Key Events and Dates

Attachment 1 presents a timeline of critical events and actions associated with the County's response to the COVID-19 pandemic beginning with the onset of the pandemic in December 2019 and culminating with the Centers for Disease Control and Prevention (CDC) approving Pfizer booster doses for select groups in September 2021.

Methodology

The 2021-2022 Grand Jury was sworn in and as part of regular training, the Grand Jury received presentations from key leaders across the County, including public agency staff and elected officials. The topic of COVID-19 was often a part of each presentation. At the meeting with leaders of the County's seven cities, the Grand Jury asked each representative how SLO County was handling the COVID-19 pandemic. Without exception these leaders expressed their appreciation for SLO County's leadership and team effort. Nonetheless, the Grand Jury decided to investigate the County's response to the COVID-19 pandemic based not only on the residents' complaints but also based on public and Grand Jury concerns.

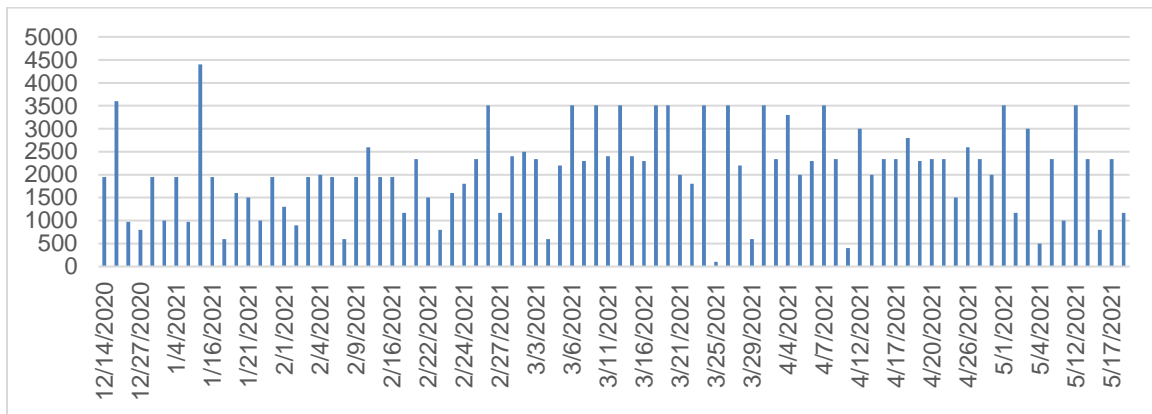
The Grand Jury reviewed the County's press briefings that began on March 17, 2020, to learn more about COVID-19 and the County's emergency efforts related to the pandemic. It conducted eight formal interviews of key personnel involved in SLO County's response to the pandemic emphasizing the process employed to vaccinate the residents of SLO County. Interviews were standardized around a core set of questions developed following the Grand Jury's review of all available information. The Grand Jury also reviewed data available on CA State websites.

Discussion

Vaccine Supply

The County took extraordinary measures to ensure vaccines were not wasted or stockpiled. Figure 1 shows SLO County Health Agency, Public Health Department (Public Health), received 179,570 doses of vaccine (Pfizer, Moderna and J&J combined) from December 14, 2020, through March 17, 2021.

Figure 1 - All Vaccines Received by Public Health



Public Health reserved the first supply of vaccine the County received for health care and public safety personnel and local partners such as hospitals and certain pharmacies, who vaccinated the residents in long-term care facilities. From the beginning, the supply of vaccine was unknown and unpredictable, so SLO County chose not to schedule second dose appointments until the actual supply was received. This avoided having to cancel appointments due to lack of supply.

The federal government provided vaccine to local pharmacies that were under contract to vaccinate the residents in long-term care facilities. The initial supply to local pharmacies was delayed, so Public Health gave them 200 doses from the first shipment it received. Public Health officials were in daily contact with the State to better understand vaccine supply and to maximize the County's allocation. The actual supply formula used by the

State was not defined and weekly supplies continually changed. Vaccine supply remained a challenge through mid-February 2021.

The State of California struggled to maintain a state-wide vaccination data base. The County continuously monitored the State's vaccine data and worked to correct it as needed to reflect the information the County was providing. This effort ensured the County would receive vaccine based on the actual vaccination rate in the County.

Registering for Vaccinations

Initially, SLO County attempted to use a call-in registration system. First-call, first-serve vaccination appointments were made available on Thursday mornings. The phone bank was overwhelmed by thousands of calls, and the community was frustrated. County staff subsequently developed an in-house, on-line vaccination registration system because the State's My Turn registration system was not yet available. The in-house system was constantly being updated and improved based on staff and community feedback. Demand always exceeded the available appointments due to lack of vaccine supply. People had to reregister each week in hopes of getting an appointment. This led to constant frustration for many in the community, especially among those with limited technology skills.

On March 2, 2021, the County switched to a lottery system, so registration was only required once. It assigned appointments based on a sophisticated algorithm that considered numerous criteria (e.g., age, health factors, essential work classes, etc.), so the most critical and vulnerable were scheduled first.

People could go to RecoverSLO.org/vaccines and fill out a registration form to request an appointment for the next week. They could request the day of the week and a morning or afternoon appointment. If they received an appointment, a confirmatory email was sent to them. No response was needed unless they wanted to cancel or change the appointment. Those not selected also received a message letting them know they did not have to reregister. Individuals could also call the County's phone support line to register if they did not have internet access. The State ultimately required all counties to transition to its

My Turn system for vaccination registration. The County made the transition on April 21, 2021. Public Health also offered walk-in and pop-up clinics throughout the County without any prior registration.

The federal government and State of CA provided somewhat different guidance for prioritizing the administration of vaccine. Phases developed at a national level were:

- Phase 1a:
 - Long-term Care
 - Health care settings

- Phase 1b:
 - People aged 75+
 - Frontline essential workers who include:
 - fire fighters
 - police officers
 - corrections officers
 - food and agriculture workers
 - postal service workers
 - manufacturing workers
 - grocery store workers
 - public transit workers
 - education sector (teachers, support staff and day care workers)

- Phase 1c:
 - People aged 65 – 74
 - People aged 16 - 64 with underlying, high-risk medical conditions
 - Other essential workers to include:
 - people in transportation and logistics
 - food service
 - housing
 - construction and finance
 - information technology and communications
 - energy
 - law
 - media
 - public safety
 - public health

- Phase 2:
 - People aged 16 - 64 without underlying, high-risk medical conditions

The above Federal Vaccine Allocation Guidance from the CDC was based on recommendations from the Advisory Committee on Immunization Practices.

Phases and Tiers developed at the state level were:

- Phase 1a – Tier 1
 - Acute care, psychiatric and correctional facility hospitals
 - Skilled nursing facilities, assisted living facilities and similar
 - Emergency Medical Services personnel
 - Dialysis Centers

- Phase 1a – Tier 2
 - Intermediate care facilities, home health and in-home supportive care
 - Community health workers and public health field staff
 - Primary care

- Phase 1a – Tier 3
 - Specialists
 - Laboratory workers
 - Dentistry
 - Pharmacy staff

- Phase 1b – Tier 1
 - People aged 75+
 - Those at risk of exposure in the following sectors:
 - education and childcare
 - emergency services
 - food
 - agriculture

- Phase 1b – Tier 2
 - People aged 65 – 74
 - Those at risk of exposure in the following sectors:
 - transportation
 - logistics
 - industrial
 - commercial
 - residential
 - sheltering facilities
 - critical manufacturing
 - Congregate settings with outbreak risk:
 - individuals experiencing homelessness or incarceration

- Phase 1c
 - People aged 50 – 64
 - People aged 16 - 64 with underlying health conditions or disabilities which increases risk of COVID-19
 - Those at risk of exposure at work in the following sectors:
 - water and wastewater
 - defense and energy
 - chemical and hazardous materials
 - communications and information technology
 - financial services
 - government

The above State of CA Vaccine Allocation Guidance from the CA Department of Public Health was based on recommendations from the Community Vaccine Advisory Committee.

Eligibility for vaccination followed State guidelines with one exception. When the State dropped its age criteria from 75 to 65 years, the County did not have enough vaccine supply to provide adequate coverage for the expanded age group. The County was concerned that its most critical and vulnerable citizens needed to be vaccinated before those age 65 and above because the death rate was significantly higher for people over age 75. SLO County’s Vaccine Task Force (VTF - see Attachment 2 for membership) discussed this and agreed to the exception in its meeting on January 13, 2021. Many people between the ages of 65 and 74 were understandably upset by the approach. Some County residents went to pharmacies in neighboring counties to get their vaccines. Only in limited situations (e.g., out-of-County residents hospitalized in SLO County) prior to April 26, 2021, did the County allow non-residents to receive a vaccination. Table 1 summarizes the age criteria for vaccination and approximate wait times to receive vaccinations once registered.

Table 1 - Age Criteria and Wait Times for Vaccinations Once Registered

Date	Age	Wait Time
1/18/2021	75 and older	1-2 weeks
2/10/2021	65 and older	1-2 weeks
3/22/2021	50 and older	1-2 weeks/walk-in
3/31/2021	30 and older	walk-in

As of March 17, 2021, in addition to those age 65 and above, people in the following sectors were eligible to receive vaccinations:

- Education and childcare
- Emergency services
- Food and agriculture
- Public transit workers
- Custodial staff
- Informal, unpaid caregivers
- Individuals with a high-risk condition

Vaccinating the Residents of SLO County

The County Health Department referred to its existing procedures for mass vaccination in the fall of 2020 and began preparing to distribute vaccines. In response to hospitals in major metropolitan areas around the country experiencing significant patient capacity issues, SLO County, working with local hospitals and California Polytechnic State University, SLO (Cal Poly), set up a 900-bed alternative care site at Cal Poly in the months before the vaccine arrived. The County increased its volunteer medical corps from 75 to 700 people during this time. Many of the volunteers were trained to manage the alternative care site and administer vaccine. SLO County also acted swiftly to request an emergency waiver from the CA Emergency Medical Services Agency to permit Emergency Medical Technicians (EMTs) and paramedics to vaccinate people. Having this level of organization in place when the vaccines became available appears to have greatly aided the County’s vaccination effort.

SLO County was one of the few counties in the State to provide mass vaccination clinics and moved quickly to set them up before receiving directions from the State. On January 18, 2021, the County opened its first 1,000 vaccinations-per-day mass vaccination clinic in Paso Robles. By February 1, 2021, the County had 3 mass vaccination clinics open, each with the capacity to deliver 1,000 vaccinations per day. This insured the County could efficiently distribute all vaccine doses received in a timely fashion. Thus, the state allocation of vaccine was not constrained based on this parameter.

While the County had performed mass vaccinations before, this effort was different. The County had to consider many additional issues when planning these clinics, such as:

- The number of people to be vaccinated
- Unique vaccine handling requirements (freezing and refrigeration)
- Different dosing requirements for three vaccines
- Locations to vaccinate people
- The chain of communications
- Eligibility screening
- Reception, medical screening, and post vaccination observation staff
- Vaccinators
- Data entry and documentation to keep the state allocation of vaccine arriving

The County Health Department effectively mobilized many people in this coordinated response. The first vaccination clinic ran for 3 days starting December 21, 2020, at 2156 Sierra Way, in the City of SLO. This clinic focused on front-line workers in the health care and public safety fields. During January, two additional mass vaccination sites, referred to as “points of delivery” (PODS), were established, one in Arroyo Grande and one in Paso Robles. Each site had a 1,000 vaccinations-per-day delivery capacity. On February 1, 2021, the San Luis Obispo clinic relocated to Cuesta College and expanded to a 1,000 vaccinations-per-day capacity. The POD in Paso Robles was a joint agency effort while the County led the Cuesta and Arroyo Grande Clinics.

The County’s Incident Management Team modified existing emergency response plans to incorporate things such as 15- to 30-minute medical screening wait times, vaccine refrigeration, and required second doses to support COVID-19 mass vaccination clinics. It

also had to balance waiting for the CDC guidelines versus developing plans in-house. Public Health staff had trained regularly for mass vaccinations. SLO County used vaccine supply as it arrived and made sure its ability to distribute vaccine always exceeded available supply. During January and February 2021, the County's per capita vaccination rate was one of the highest among the counties the Grand Jury sampled (see Attachment 3).

The State relied on data in the California Immunization Registry (CAIR) when allocating the COVID-19 vaccines. The CA Department of Public Health operated and managed it to track and record COVID-19 immunizations. The State struggled with data input and management. It was, therefore, critical that County staff monitored the State's database and acted to ensure the State data was current and reconciled with the County's public health records.

CAIR is a secure, confidential, statewide computerized immunization information system for CA residents. The CAIR system consists of nine distinct regional immunization registries, mostly multi-county regions. Each registry is accessed online to help providers and other authorized users track patient immunization records, reduce missed opportunities, and help fully immunize Californians of all ages.

SLO County maintained its own data, but it became important to reconcile local data with the State. Public Health staff tracked data by age and target groups and reported this to the CDC daily and reconciled local records weekly.

State reports showed the County had a 7-day turnaround from vaccine receipt to putting it into arms. Public Health staff compared SLO County vaccination rate data with State data in its CA Immunization Registry on a weekly basis. The County worked to ensure vaccination rates were within 5 percent of the State average so any reopening schedule would not be impacted by having a lower vaccination rate. Figure 2 shows the number of vaccine doses SLO County received versus the number of vaccinations given from December 18, 2020, through June 18, 2021.

Figure 2 - Vaccine Doses Supplied and Vaccine Doses Administered

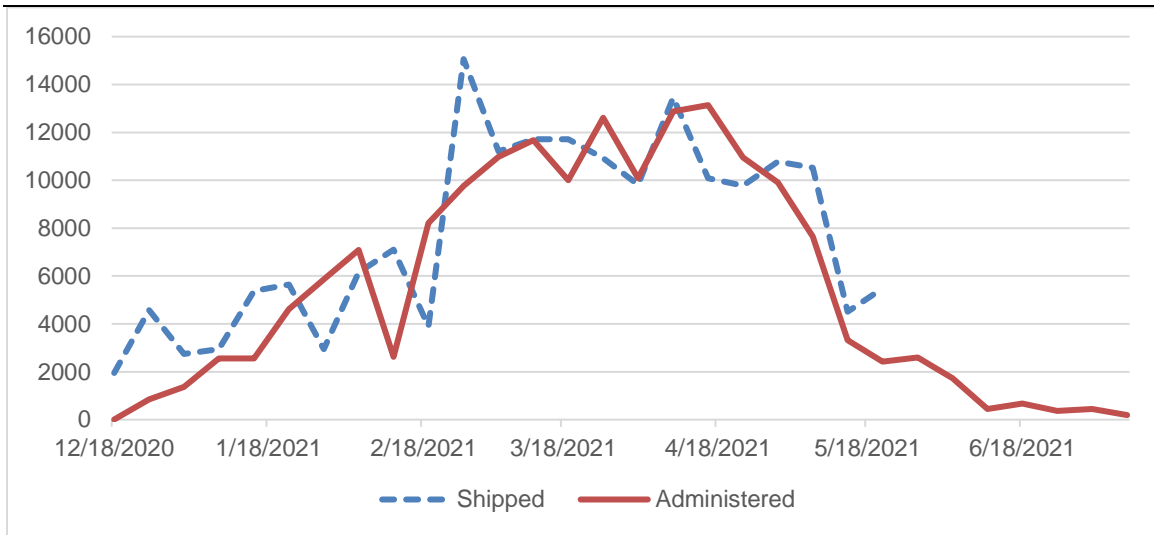


Table 2 shows vaccine doses received from the three manufacturers, and doses Public Health administered, as of July 21, 2021. Doses administered typically is somewhat less than doses shipped because Public Health wanted to have vaccine supply in-hand before registering people for vaccinations.

Table 2 - Doses Received and Doses Public Health Administered as of July 21, 2021

Manufacturer	Doses Received From State	Doses Public Health Administered
Pfizer	98,670	94,916
Moderna	76,000	70,857
Johnson & Johnson	4,900	2,436
Total	179,570	168,209

Senior County administrative staff stated that they committed the County to an active role in dispensing COVID-19 vaccine to ensure a science-driven (risk-based) equitable process. Based on the success of the County’s approach, several neighboring counties sought advice and direction from SLO County. In SLO County, 70 percent of the vaccines were dispensed at one of the County’s three mass clinics or various other programs. Other counties relied more heavily, and some entirely, on pharmacies and large health organizations (e.g., Kaiser).

The County had an outreach program and worked with homeless centers to vaccinate the homeless population. This included the Community Health Center of Central Coast (40 Prado Clinic), El Camino Homeless Organization, and 5 Cities Homeless Coalition shelters. Additionally, SLO County worked with Transitions Mental Health to vaccinate people at 27 homeless encampments. Mobile vaccination units were at parks and other areas where homeless populations were encountered.

Communication

In a meeting with mayors, council members, and city managers of the County's seven cities, the Grand Jury asked each representative how well SLO County was responding to the COVID-19 pandemic. All representatives responded positively with statements like the following:

- Emergency Operations Center liaison provided quick email responses
- Response was excellent
- Great, extraordinary collaboration – a model for the State to follow
- The CAO had great communication with the City Manager
- Extremely impressive performance
- Timely updates
- Good County partnership
- Doing a great job – criticism lies with State and Federal Government

The County created its VTF with community stakeholders based on CDC guidelines. This 30-person Task Force led by the County Health Officer built upon Federal and State guidance and considered guidance from key stakeholders who represent the unique needs and interests of the local community. The VTF provided advice on vaccine allocation and delivered clear, accurate information about the safety and efficacy of the vaccine to communities. It also advised the Health Officer and the CAO. Final decisions on public health and response to the pandemic remained with the Health Officer and CAO.

Ongoing communication with the community was a high priority for the County. Beginning on March 17, 2020, Public Health held daily (Monday through Friday) briefings for 3 weeks. They then moved to 3 days per week for 6 weeks before moving to weekly

briefings that continued through August 31, 2021. SLO County communicated with the public in many ways, including the following:

- Email:
 - Individuals could subscribe to COVID-19 email updates at www.emergencyslo.org
- Internet:
 - People could check the County's Current Emergency Information web page at www.emergencyslo.org
 - SLO County live streamed briefings on KSBY's and KEYT's websites
- Social Media:
 - Briefings broadcast live on the County's YouTube channel
 - Briefings were available on SLO County's Public Health Facebook page
- Telephone:
 - The County continued to expand its support, information, and registration phone bank to better meet the demand for information. At its peak, the phone bank was handling an average of 750 calls per day during February and March 2021
 - SLO County hosted daily phone updates with mayors and city managers of the seven SLO County cities. It also hosted regular phone updates with elected officials. SLO County officials spoke to officials in other Counties including Ventura, Santa Barbara, and Monterey. The County participated in daily statewide calls with Public Health officers and with Medical Health Operation Coordinators
- Television:
 - SLO County continued to broadcast live on Cable Channel 13
 - Briefings were re-broadcast on SLO-SPAN Cable Channel 21 at 8 am, 5 pm and midnight until the next briefing occurred

Staffing

In SLO County there were 12 health department employees assigned to deal with communicable diseases. In response to the demand, the County reassigned additional staff directly to the health department and streamlined hiring practices to the extent possible. SLO County established alternate care sites first to minimize potential impact on local hospitals.

For the COVID-19 pandemic, Public Health staffed 1,743 additional positions as follows:

- reassigned 691 County employees to be Disaster Services Workers
- registered 935 Medical Reserve Corps volunteers (nurses, EMTs, doctors, etc.) trained to staff alternate care site, give vaccinations, and perform other tasks
- added 21 Limited Term, full-time employees with benefits and 96 temporary employees

The pandemic response effort has taken a toll on County staff and mental health professionals throughout the County. The staff interviewed by the Grand Jury were proud of the work they had performed. Many had worked 7-day weeks through the critical months of the pandemic response. Most had not taken any time off. Some expressed dismay over the politicization of health agency efforts. All were tired and worn down from 18+ months of “double duty.”

The Grand Jury conducted interviews in June prior to the late summer Delta variant COVID surge. At that time, many of the County interviewees were looking forward to a break and vacation. National surveys of impacts to public health professionals indicate as much; public scrutiny was up; people were leaving the field; staffing and morale were down. This was a very difficult time for all health care workers and especially those in public health. In a November 2, 2021, *Los Angeles Times* article titled “Labs with No One to Run Them: Why Public Health Workers Are Fleeing the Field,” Anna Maria Barry-Jester wrote “The loss of top county health leaders-department directors and health officers charged with leading the pandemic response in local communities – has been particularly stark, mirroring a sobering national trend. Seventeen of California’s 58 counties have lost their health officer since March 2020, and at least 27 have lost a director or assistant director. The director and deputy director of the state Department of Public Health also resigned.” In response, the County increased its allowance for mental health counseling from four visits to eight and mobilized its behavioral support team.

FINDINGS

F1. SLO County moved quickly to establish vaccination capacity well in advance of receiving the COVID-19 vaccine. During the first months when the vaccine was available,

the County's per capita vaccination rate was one of the highest among the counties the Grand Jury sampled.

F2. SLO County maintained local COVID-19 vaccination records and reconciled that information with the State's data in CAIR to keep it accurate and current.

F3. SLO County made dissemination of information to local citizens and to the County's seven cities and other government agencies a high priority as evidenced by:

- developing and maintaining the [ReadySLO.org](https://www.readySLO.org) and [emergencyslo.org](https://www.emergencyslo.org) websites
- having frequent press briefings
- making daily phone calls to leaders throughout the County

F4. SLO County staff was knowledgeable in vaccination response.

F5. Strong County leadership took responsibility for pandemic response.

F6. Periodic emergency response drills conducted before the pandemic were beneficial.

F7. The County effectively mobilized its Medical Reserve Corps.

F8. The County's pandemic response effort has taken a toll on County staff and mental health professionals.

F9. The first effort to register eligible residents for vaccinations was overwhelmed by both the sheer number of people and the lack of vaccine from the State of California. The County acted quickly to rectify the situation and implement an effective, efficient system.

RECOMMENDATIONS

R1. SLO County should conduct lessons-learned evaluations with input solicited from all who participated in its COVID-19 vaccination response. The County should document

what went right and what could be improved in its pandemic response with an eye toward continuous improvement and being better prepared for the next major community health threat.

R2. SLO County should review existing emergency plans for mass vaccination events to ensure that lessons learned from the COVID-19 response are incorporated wherever appropriate.

R3. SLO County should develop a process to periodically educate the public regarding County response to the next public health emergency.

R4. SLO County should proactively provide as-needed Mental Health services to employees who experienced stress as a result of responding to the COVID-19 Pandemic.

REQUIRED RESPONSES

Responses to R1, R2, R3, and R4 are required from the SLO County Board of Supervisors, the SLO County Chief Administrative Officer, and the SLO County Health Officer/Public Health Director.

COMMENDATIONS

C1. County elected leaders, senior administrative personnel, and all staff are commended for their tireless and focused efforts in response to the COVID-19 pandemic.

C2. Citizens of SLO County are commended for volunteering for the Medical Reserve Corps and throughout the community where needs existed.

AGENCY RESPONSE REQUIREMENTS

The Penal Code Section 933.05 that specifies the format and methodology for agency responses is listed below. All agency respondents are required to respond to all findings and recommendations in the following manner:

- If the respondent disagrees wholly or partially with an item, the respondent must elaborate on the portion of the item that they disagree with, and provide an explanation.
- If a respondent notes that an item will be implemented in the future, the response must include a timeframe for implementation.
- If a respondent notes that an item requires further analysis, the agency must include in the response an explanation of and the scope of what will be studied and the timeframe needed for the study. The timeframe for follow-up from the agency cannot exceed six months.
- If the item will not be implemented or is not reasonable, the respondent is required to provide a detailed explanation.

933.05. Findings and Recommendations

- (a) For purposes of subdivision (b) of Section 933, as to each grand jury finding, the responding person or entity shall indicate one of the following:
- (1) The respondent agrees with the finding.
 - (2) The respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons therefore.
- (b) For purposes of subdivision (b) of Section 933, as to each grand jury recommendation, the responding person or entity shall report one of the following actions:
- (1) The recommendation has been implemented, with a summary regarding the implemented action.
 - (2) The recommendation has not yet been implemented, but will be implemented in the future, with a timeframe for implementation.
 - (3) The recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a timeframe for the matter to be prepared for discussion by the officer or head of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This timeframe shall not exceed six months from the date of publication of the grand jury report.

(4) The recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation therefore.

Presiding Judge	Grand Jury
Presiding Judge Craig van Rooyen Superior Court of California 1035 Palm Street Room 355 San Luis Obispo, CA 93408	San Luis Obispo County Grand Jury P.O. Box 4910 San Luis Obispo, CA 93403

**Attachment 1 - Key Events and Dates Associated
With SLO County's Response to the COVID-19 Pandemic**

Key Dates	Event
December 2019	An outbreak of a respiratory illness caused by the Novel Coronavirus (2019-nCoV) was first identified in Wuhan, Hubei Province, China. The 2019-nCoV strain of Coronavirus presents with pneumonia-like symptoms, including fever, cough, or difficulty breathing. The first confirmed death occurred on December 27, 2019, in Wuhan, and thousands of confirmed cases were identified in China.
1/31/2020	The U.S. Health and Human Services Secretary declared a public health emergency for the entire United States to assist the Nation's healthcare community in responding to 2019-nCoV.
2/4/2020	The County Health Agency, Department Operations Center (CHADOC) issued a Level II activation (Monday through Friday, 0800 – 1700 hrs.) for necessary sections. SLO County Administrator, County Counsel, Board of Supervisors, and other key County departments were notified.
February 2020	Postmortem testing on two deaths from February 6 and February 17, 2020, confirmed that COVID-19 was spreading in the greater Bay Area. Both fatalities in Santa Clara County had no travel history, and likely acquired COVID-19 through community spread. Prior to this, the only reported cases were travel related.
3/4/2020	The Governor of the State of CA declared a State of Emergency to allow a faster Public Health response.
3/11/2020	The World Health Organization declared COVID-19 to be a pandemic.
3/12/2020	The Governor of the State of CA issued an executive order cancelling or postponing non-essential mass gatherings.
3/13/2020	The SLO County Health Officer, declared a local health emergency regarding COVID-19.
3/13/2020	SLO County declared a local health emergency that the Board of Supervisors (Board) ratified on March 17, 2020. This declaration allowed latitude in procurement for the County. It also allowed access to emergency reserve funds the Board could use to address the situation and allowed flexibility in assigning individuals in the County workforce as Emergency Services Workers.
3/13/2020	The SLO County Administrative Officer (CAO) / Director of Emergency Services, issued a Proclamation of Local Emergency pursuant to the CA Emergency Services Act.

3/14/2020	First reported COVID-19 case in SLO County.
3/16/2020	The County's Office of Emergency Services (OES) upgrades the Operational Area Emergency Operations Center (EOC) to a Level III activation (all sections) to support full activation of the CHADOC. Key Public Health personnel are requested to respond to the EOC to support both the EOC and CHADOC. County-wide Disaster Service Workers are activated to support the response on a 7-day a week schedule. 12-hour day shifts are established 0700 hrs. – 1900 hrs.
3/16/2020	The County issued a moratorium on alcohol establishments to avoid large gatherings and the spread of the pandemic.
3/16/2020	SLO County started its Phone Assistance Center (PAC).
3/17/2020	SLO County hosted its first press briefing and launched the website READY.SLO.ORG to communicate with the community.
3/18/2020	The County announced a mandatory shelter-at-home order effective 5 PM, March 19, 2020, to limit the spread of COVID-19.
3/19/2020	CA State issued a shelter-at-home order.
6/18/2020	CA State issued its first mask mandates.
12/11/2020	The FDA authorized Pfizer vaccine use under an Emergency Use Authorization (EUA).
12/14/2020	The first COVID-19 vaccine administered in CA was in Los Angeles County.
12/14/2020	CA State notified SLO County Public Health it would be the first in the County to receive a total of 1,950 vaccine doses.
12/18/2020	The FDA authorized Moderna vaccine use under an EUA.
12/18/2020	<p>First doses of COVID vaccine were administered to five volunteers from the vaccination Phase 1a, Tier 1 group:</p> <ul style="list-style-type: none"> • A firefighter for the SLO City Fire Department • An in-center hemodialysis nurse for DaVita Dialysis Centers • An emergency physician at Sierra Vista Regional Medical Center • An emergency department nurse at French Hospital Medical Center • A medical director at the SLO County Psychiatric Health Facility.

12/19/2020	COVID-19 became the number 1 cause of death in the United States.
12/19/2020	The County opened its first vaccination clinic for front-line health care workers and Emergency Medical Technician (EMT) staff in the City of SLO. Public Health later moved it to Cuesta College.
12/19/2020	The County announced an online registration system for vaccination appointments. People could also get appointments via the call center. Available appointments were released Thursday morning at 9:00 AM and were filled on a first-come, first-served basis.
12/21/2020	The first, full-day vaccination clinics were held for 3-days beginning Monday, December 21, 2020. These clinics were by Public Health invitation only and focused on health care workers and first responders.
12/28/2020	Vaccination registration was opened to all healthcare workers.
12/30/2020	Public Health requests the San Luis Obispo County All Hazards Incident Management Team to set up two mass vaccination PODs; one located in North County and the other located in South County.
1/6/2021	SLO County's VTF met for the first time.
1/14/2021	SLO County began using online registration for COVID-19 vaccinations.
1/18/2021	The North County clinic opened at the Paso Robles Event Center.
1/18/2021	Skilled Nursing Facilities begin to receive vaccine through the National Pharmacy Program.
1/18/2021	Vaccination registration opened to Phase 1B frontline essential workers and age 75 and older.
1/25/2021	The South County clinic opened at Arroyo Grande High School.
1/25/2021	CA State announced a statewide registration program called MyTurn. The target date for implementation was mid-March.
2/1/2021	SLO County's Sierra Way vaccine clinic moved to Cuesta College.

2/10/2021	The VTF recommended opening vaccination eligibility for residents aged 65 and older.
2/27/2021	The FDA authorized Johnson & Johnson (J&J) vaccine use under an EUA.
3/2/2021	SLO County switched to a lottery system to register for vaccinations.
3/8/2021	The South County vaccine clinic moved to the South County Regional Center.
3/10/2021	Vaccine registration opened to the remainder of Phase 1B people including Education and Child Care, Food and Agriculture, Emergency Services, and those with certain high-risk medical conditions or disabilities.
3/19/2021	SLO County vaccinated 600+ agriculture workers at a special half-day clinic in collaboration with partners in the SLO County Farm Worker Outreach Task Force.
3/22/2021	Vaccination registration opened to age 50 and older.
3/26/2021	Vaccine registration opened to Court System Workers and Jurors.
3/31/2021	Vaccine registration opened to age 30 and older.
4/1/2021	County of SLO administers its 100,000th dose of COVID-19 vaccine.
4/6/2021	First mobile vaccine clinic launched at the Men's Gryphon House in Grover Beach.
4/7/2021	Vaccine registration opened to ages 16 – 18.
4/8/2021	The MyTurn Registration Program goes live to begin scheduling vaccination appointments for April 15, 2021, and beyond.
4/23/2021	Public Health administered 3000+ vaccinations in 1 day.
4/28/2021	SLO County retired its vaccine registry and fully transitioned to the State's MyTurn system for vaccination registration.

5/4/2021	Walk-in vaccinations are available at County clinics.
5/12/2021	Vaccine registration opened to age 12 and older (Pfizer only for ages 12 – 17).
6/4/2021	SLO County closed its last remaining mass vaccination clinic.
6/7/2021	SLO County held a mobile vaccination clinic at SLO High School.
8/23/2021	The U.S. Food and Drug Administration (FDA) gives full approval of the Pfizer vaccine.
8/23/2021	The CDC approves third doses of the COVID-19 vaccine for moderately-to-severely immunocompromised individuals.
8/30/2021	SLO County hosts its 100 th mobile vaccination clinic.
9/23/2021	<p>The CDC approves Pfizer booster doses for the following Pfizer vaccine recipients who completed their initial series at least 6 months prior and are:</p> <ul style="list-style-type: none"> • 65 years and older • Age 18+ who live in long-term care settings • Age 18+ who have underlying medical conditions • Age 18+ who work in high-risk settings • Age 18+ who live in high-risk settings (CDC COVID-19 website)

Attachment 2 - SLO County's Vaccine Task Force

Emergency Services (3)	EMS - Vince Pierucci Fire - Chief Jonathan Stornetta Law Enforcement - Chief Ty Lewis
Healthcare coalition (0) Many represented in other categories	
Local Health Department (1)	Penny Borenstein, MD
Health Systems/Hospitals	N/A
Bioethicist (1)	Luis Ochoa, MD
Community Health Centers (1)	Stephen Clarke, MD
Pharmacies (1)	Maronee Hollister
Long Term Care - seniors (1)	Ombudsman SLO - Karen Jones
Business (1)	Kristen Yetter
Occupational Health (1)	MedStop - Brian Roberts, MD
Health Insurers (1)	CenCal - Paul Jaconette
Education (2)	County Office of Ed - Dr. Jim Brescia Higher Ed- Courtney Kienow
Child Care (1)	CCRC - Raechlle Bowlay
Corrections (1)	Jail CMO - Christy Mulkerin , MD
Religious leaders (3)	Monsignor Ed Callahan Pastor Tim Thuele Rabbi Janice Mehring
Organizations serving racial and ethnic groups (2)	Latinx - Erica Heredia-Ruvalcaba NAACP- Veronica Avery
Orgs serving people with disabilities (1)	Tri-Counties - Diva Johnson
Orgs serving people with limited English proficiency (1)	Herencia Indigena - Irebid Gilbert
Community representatives (2-3)	Health Commission - Maryjean Sage Med Anthropologist - Betsy Whitaker
Seniors (1)	ASPC - Kim Chartrand
Homeless (1)	Janna Nichols
Voluntary Organizations Active in Disaster (VOAD) (1)	United Way - Rick London
Behavioral Health (1)	TMHA - Jill Bolster-White
Utilities (2)	PGE - Samantha Caldwell Water/wastewater/trash - Bill Robeson
Agriculture/Food (1)	Farm Bureau - Brent Burchett
Transportation (1)	SLORTA - Geoff Straw

Attachment 3 - SLO County's Per Capita Vaccination Rate

Vaccines Administered (Percent of Population)										
County	Population	12/30/20	1/6/21	1/13/21	1/20/21	1/27/21	2/3/21	2/10/21	2/17/21	2/24/21
San Luis Obispo	280,393	2.0%	3.0%	4.5%	6.8%	10.2%	13.4%	16.0%	19.3%	23.5%
Merced	282,928	0.6%	0.9%	1.5%	2.6%	4.6%	5.8%	7.6%	10.5%	12.6%
Santa Cruz	274,871	1.5%	2.3%	3.7%	6.0%	9.2%	13.1%	18.0%	23.0%	28.7%
Santa Barbara	454,593	1.1%	1.7%	3.2%	5.3%	8.2%	10.5%	13.5%	16.6%	20.4%
Marin	262,879	1.9%	2.6%	4.6%	7.6%	11.5%	15.7%	20.4%	26.1%	32.9%
Ventura	843,843	1.5%	2.1%	3.8%	5.7%	8.0%	11.0%	14.2%	18.0%	22.6%
Los Angeles	10,014,009	1.3%	2.0%	3.7%	5.7%	8.6%	11.5%	15.0%	18.4%	22.0%
Kern	916,464	0.6%	1.0%	1.9%	3.2%	4.9%	6.8%	9.0%	11.4%	13.9%
Monterey	445,414	1.2%	1.7%	3.1%	4.1%	5.3%	7.7%	10.4%	13.1%	16.0%
Kings	153,710	0.6%	0.2%	2.2%	3.2%	3.9%	5.9%	7.1%	9.0%	10.4%
Butte	226,466	1.6%	2.2%	4.2%	6.8%	10.0%	14.7%	18.1%	20.9%	24.8%
El Dorado	191,848	1.5%	2.1%	4.2%	6.4%	9.5%	12.6%	16.5%	21.2%	25.3%
Yolo	222,581	1.7%	2.5%	4.3%	6.0%	8.1%	11.5%	15.7%	19.8%	25.1%
Placer	396,691	1.6%	2.4%	4.4%	7.4%	10.5%	14.0%	18.9%	23.9%	28.9%
Solano	441,307	1.7%	2.4%	4.2%	6.8%	9.4%	12.3%	15.8%	19.8%	24.1%

Data Source: <https://data.ca.gov/dataset/covid-19-vaccine-progress-dashboard-data/resource/c020ef6b-2116-4775-b11d-9df2875096ab>