

Tohono O'odham Nation Health Care (TONHC)

COVID-19 Situation Update: March 17, 2021 T-Ñukuda Ha'icu Cihañig

This is a rapidly evolving situation. Information is based upon data as of March 17, 2021 at 7:00 and may change as more data becomes available.

COVID-19 Data among Members of Tohono O'odham Nation (TON)

Total Cases
This Week

1,748

New Cases
This Week
Tests This Week

1,748

Percent Positive
Tests This Week

Tests This Week

51%

Deaths

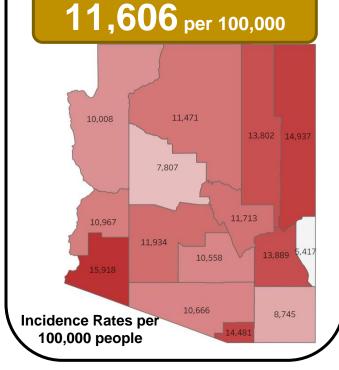
COVID-19 Contacts Interviewed

3,737

COVID-19 Cumulative Incidence
Rate among TON members residing
on the Tohono O'odham Nation

9,146 per 100,000

Arizona



Pima County COVID-19 School Reopening Recommended (03/17/2021)

Community Transmission to Reflect Level of Community

Risk: CDC recommends the use of two measures of community burden to determine the level of community transmission. These measures are used to assess the incidence and spread of COVID-19 in the community, not the school itself. Risk is dependent on community level transmission and implementation of school and community mitigation strategies.

County	Case Rate	% Positivity		Transmission Level
Pima	Substantial	Low	ı	Substantial

Indicator	Low Transmission	Moderate Transmission	Substantial Transmission	High Transmission
Total new cases per 100,000 persons in the last 7 days	0 - 9	10 - 49	50 – 99	≥ 100
Percentage of nucleic acid amplification tests (NAATs) that are positive during the past 7 days	<5.0%	5.0% - 7.9%	8.0% - 9.9%	≥ 10.0%

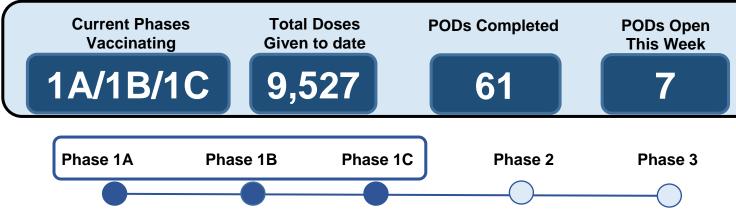
Recommended Implementation of Mitigation Strategies and K-12 School Learning Modes by Level of Community Transmission

Low Transmission	Moderate Transmission	Substantial Transmission	High Transmission	
K-12 schools open for ful	l in-person instruction	Elementary schools in hybrid learning mode or reduced attendance		
		Middle and high schools in hybrid learning mode or reduced attendance	Middle and high schools in virtual instruction unless they can strictly implement all mitigation strategies and have few cases. Schools that are already open for in-person instruction with successfully implemented mitigation strategies can remain open, but only if they continue to strictly implement mitigation strategies and have few cases	

Incidence rate is the number of new cases of COVID-19 in the population over a specified period. This allows comparison of areas with different population sizes. Population size is from http://www.tonation-nsn.gov/districts/ (Fall 2016), accessed 8/26/20.

COVID-19 Vaccination Points of Dispensing (PODs) in TON

March 17, 2021: TONHC COVID-19 Vaccination Program is currently in Phase 1C



The Moderna COVID-19 vaccine received Emergency Use Authorization (EUA) on December 18, 2020 and the Johnson and Johnson/Janssen received EUA on February 27, 2020. TONHC follows guidelines from the Centers for Disease Control and Prevention (CDC) and Arizona Department of Health Services (ADHS) to provide vaccine on the Nation in phases. The guidelines aim to decrease death and serious disease, preserve the functioning of society, and reduce the burden COVID-19 is having on people already facing disparities. ADHS distributes vaccines to health jurisdictions, including Tohono O'odham Nation, based on population. TONHC began to administer COVID-19 vaccinations on December 23 2020. There are mass vaccination clinics, also known as "points of dispensing" (PODs) for Phases 1A, 1B, and 1C at Sells Hospital, San Xavier Health Center, and San Simon Health Center.

COVID-19 Vaccine is currently available through TONHC to members of the Tohono O'odham Nation and other tribes in Phases 1A, 1B, and 1C eligible groups:

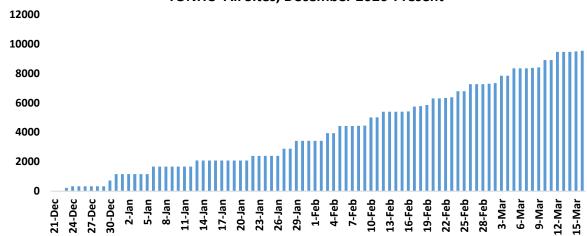
- Members of the Tohono O'odham Nation (TON) or other American Indian/Alaska Native Tribes regardless of employment status or medical diagnoses (photo ID, tribal ID preferred)
- Non-Native persons who work with or live on the Tohono O'odham Nation (bring employee ID or letter from supervisor stating your name, employer, and occupation)
- Non-Native persons who reside in a household with a tribal member (bring proof of residence)
- Must be 18 years or older

Public Service Announcements will provide dates and information for registration. Safety is a top priority in delivering a vaccine. We have a medical provider onsite at all times and infection control monitors. The Moderna vaccine requires an injection into the upper arm, with a booster shot given four weeks later.

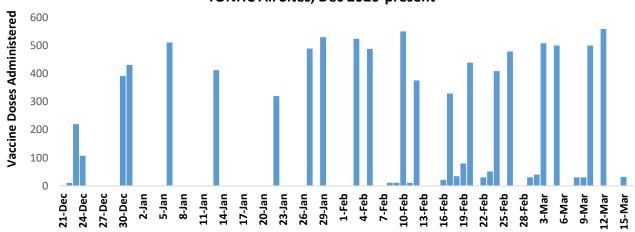
Arizona COVID-19 Vaccine Prioritization*



Cumulative Doses of COVID-19 Vaccines Administered by date TONHC- All Sites, December 2020-Present



COVID-19 Vaccine Doses administered by date TONHC All Sites, Dec 2020-present



What's New?

Vaccine availability

TONHC continues to vaccinate following guidelines from CDC. TONHC Public Health Nursing, Tohono O'odham Nation Health Care, TONHHS Community Health Representatives and TON Unified Command collaborated on a pilot community-based vaccine POD on 3/12/2021 in Chuichu District. 54 persons were vaccinated. More district PODs will take place in the near future.

COVID-19 Vaccine types

 Currently, Pfizer, Moderna, and Johnson & Johnson (Janssen) vaccines are approved under Emergency Use Authorization (EUA) in the USA. The AstraZeneca and Novavax vaccine may



Chuichu Community POD, 3/12/2021

undergo evaluation in the next few months. Vaccines are generally available to the public 1-2 months after review and approval. TONHC currently uses Moderna and Janssen.

New CDC Guidelines for vaccinated persons

- Vaccinated persons exposed to someone with suspected or confirmed COVID-19 are not required to quarantine if they meet all of the following:
 - Are fully vaccinated (over 2 weeks after the 2nd dose in a 2-dose series, or ≥2 weeks after one dose of a single-dose vaccine)
 - o Have been without symptoms since the COVID-19 exposure
 - All persons should continue mask wearing and physical distance, even after vaccination. COVID-19 positive persons should isolate themselves for 10 days, even from vaccinated persons.

Variants

- Variants: Several new variants (strains) of COVID-19 have been identified in Arizona that may be more contagious than the original strain.
- TONHC continues to encourage precautions to prevent spread of variants.
 - Continue to use face masks, distance, avoid gatherings and crowds.

Executive Orders and Restrictions

TON Executive Order 2020-09 further limits gatherings, continues to enforce a nighttime curfew, and enforces other policies to reduce the spread of COVID-19. Gatherings appear to be the primary cause of outbreaks on the Nation.

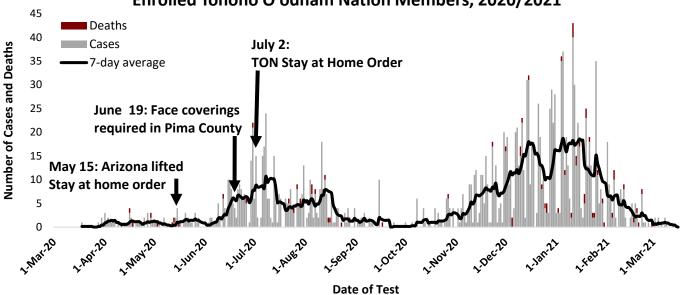
COVID-19 Brief

	Enrolled Member of Tohono O'odham Nation	Enrolled Member of Another Tribe or Other	Total
Residing within Boundaries of Tohono O'odham Nation	1194	44	1238
Residing outside Boundaries of Tohono O'odham Nation	554	243	797
Total	1748	288	2036

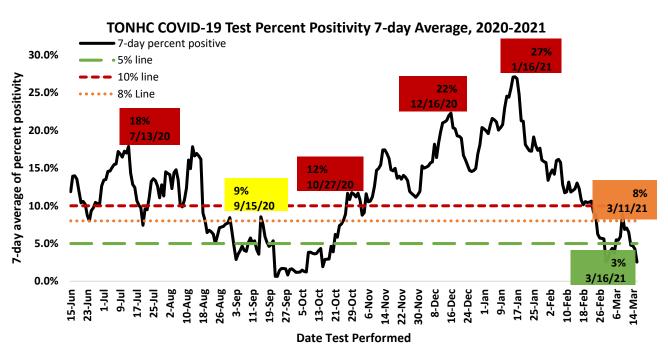
• 69 deaths among members of the Tohono O'odham Nation and 6 members of another tribe.

	Enrolled Member of Tohono O'odham Nation	Pima County	Arizona
Total Cases	1748	111,427	834,323
Number of cases			
in last 7 days	2	637	5693
Incidence Rate last			
7 days (per			
100,000)	0	64	78
Cumulative			
Incidence Rate			
(per 100,000)	9,146	10,666	11,606
Number Deaths	69	2,308	16,586
Deaths (% of total			
cases)	4%	2%	2%
Number			
Hospitalized	235	6,862	58,448
Hospitalized (% of			
total cases)	13%	6%	7%

Confirmed COVID-19 Cases and Deaths by Date among Enrolled Tohono O'odham Nation Members, 2020/2021



13,027 COVID-19 Tests Performed at TONHC



Weekly test percent positivity is calculated using the day tests were performed and 6-days prior (7-day detected "positive" results)/(7-day total tests performed) x 100

World, USA, Arizona COVID-19 Information

World (WHO):

Total cases: 120 383 919 Total deaths: 2 664 386

Updated: 17 March 2021, 11:34 am GMT-7

USA (CDC):

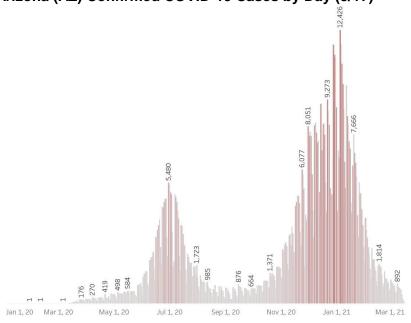
Total cases: 29,374,758 Total deaths: 534,099 Updated: Mar 17 2021 1:37PM

Arizona (AZDHS): Total cases: 828,630 (3/10) --> **834,323 (3/17)**

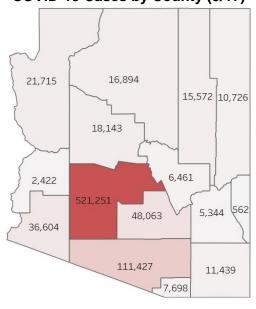
Total deaths in Arizona: 16,404 (3/10) --> **16,586 (3/17)**

Total cases in Pima County: 110,790 (3/10) --> **111,427 (3/17)**

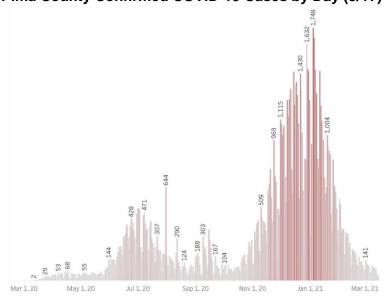
Arizona (AZ) Confirmed COVID-19 Cases by Day (3/17)



COVID-19 Cases by County (3/17)

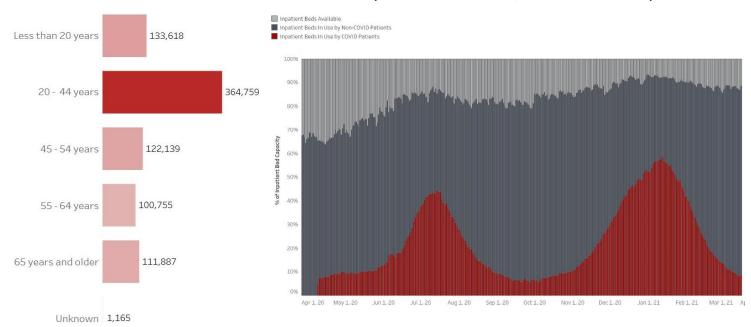


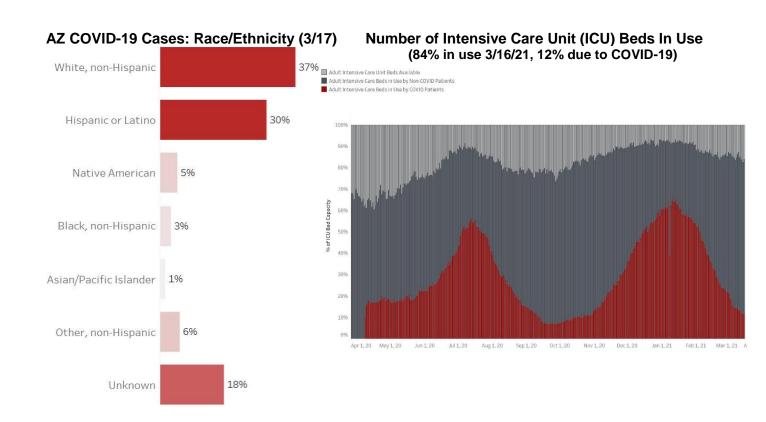
Pima County Confirmed COVID-19 Cases by Day (3/17)



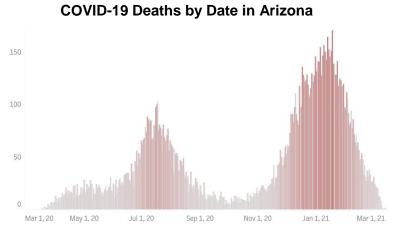
Age Distribution (3/17)

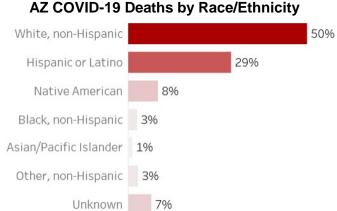
AZ COVID-19 Cases: Number of Inpatient Beds (88% in use on 3/16/21, 9% due to COVID-19)





Arizona (AZDHS): 16,586 deaths, Updated March 17, 2021





Tohono O'odham Nation COVID-19 Positive Case Information

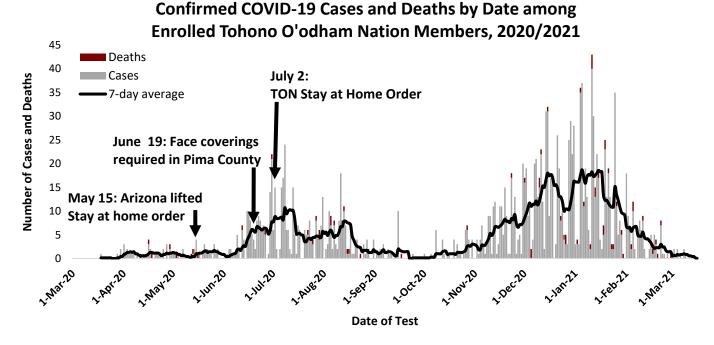
	Enrolled Member of Tohono O'odham Nation	Enrolled Member of Another Tribe or Other	Total
Residing within Boundaries of Tohono O'odham Nation	1194	44	1238
Residing outside Boundaries of Tohono O'odham Nation	554	243	797
Total	1748	288	2036

1,748 members of the Tohono O'odham Nation have tested positive* for COVID-19 (as of 3/17/2021 at 7:00). On 3/10/2021, there were 1,746. This represents a less than 1% increase over the last week. † The number of positive cases is 24x the number 40 weeks ago (72 on 6/9/2020).

1194 members of the Tohono O'odham Nation who tested positive reside in the Tohono O'odham Nation. On 3/10/2021, there were 1192. This represents a less than 1% increase over the last week. The number of persons who reside in the Tohono O'odham Nation and tested positive for COVID-19 is almost 50x the number 40 weeks ago (24 cases on 6/9/2020).

- 885 members (51%) are recovering (among members of the Tohono O'odham Nation) ¶
- **69** deaths among members of the Tohono O'odham Nation and **6** members of another tribe.
- 3 deaths in hospital in Tohono O'odham Nation, 66 in hospitals outside the Tohono O'odham Nation.

Recovering is defined as having diagnosis/symptom onset 14-days ago, improving, and no longer hospitalized.



7-day average is the average of cases for that day and the 6-days prior

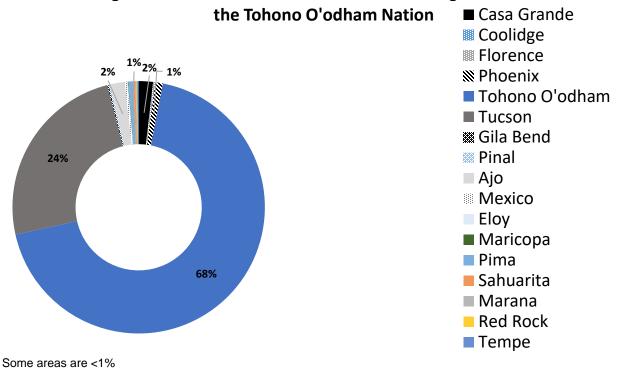
7/22/2020 was the first week that the percentage of persons residing in the Tohono O'odham Nation was over 50% of the cases.

^{*}COVID-19 positive result means COVID-19 test result of "detected".

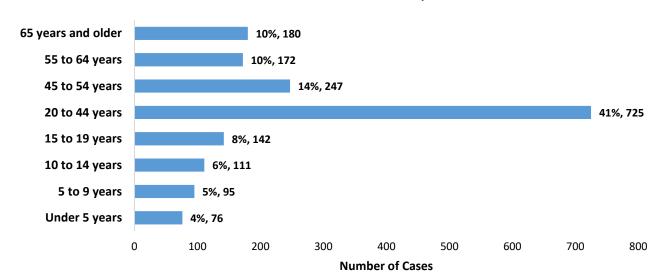
[†]Defined as percentage change (most recent number – previous number)/previous number * 100

[§]Absolute change in cumulative case count is the number of cumulative cases through week 2 subtracted from the number of cumulative cases through week 1, |week2 - week1|

Region of Residence for COVID-19 Cases among Members of



Age Distribution of COVID-19 Cases among Tohono O'odham Members, 2020



Laboratory-confirmed COVID-19 among Tohono O'odham Nation Enrolled Members

	Count (n)	Percent (%)	State of Arizona Percent (%)
TON members tested positive for COVID-19	1748		
Asymptomatic/Pre-symptomatic	328	19%	
TON Reside in Reservation	1194	68%	
Hospitalized	235	13%	7%
Recovering	885	51%	
Died	69	4%	2%

		Minimum (months)	Maximum (years)
Age	34	0	102

	Male	Percent (%)	Female	Percent
Sex	720	41%	1028	59%

At TONHC, we received the first presumptive positive test result for COVID-19 for a patient seen at San Xavier Health Center in the same day clinic on 3/30/2020. In response, we reached out to clinical staff and the patient/household/community to discuss exposure risk, how to monitor for symptoms, and help guide any recommendations for isolation or quarantine. We anticipate more cases in the future, and we are working together to tackle this challenge. Employee health has reached out to staff for contact tracing. Public health nursing has conducted community contact tracing. Please remember to keep patient and employee results confidential.

COVID-19 Laboratory Testing at TONHC

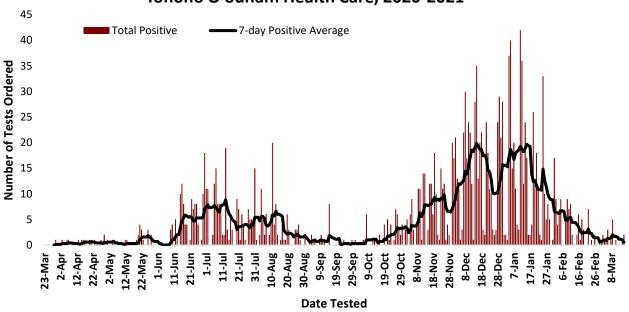
TONHC total number of COVID-19 testing (as of 3/17/2021 at 7:00): 13,027 tests performed:

- 12,002 = patients (anyone who receives care at a TONHC facility)
- 925 = employees
- 100 = first responders

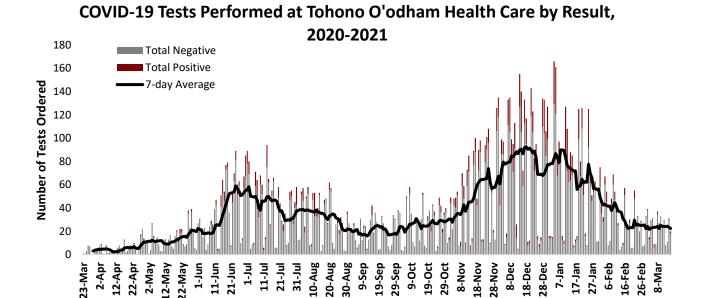
We continue to increase our testing capacity. On 3/10/2021, there were 12,862 tests. As of 3/17/2021, 1,729 tests results were positive* for COVID-19. On 3/10/2021, there were 1,723 tests. The number of positive test results are over 45x the amount compared to 40 weeks ago (since 6/9/2020). 38 total tests were positive on 6/9/2020. 81 TONHC employees have tested positive.

As of 3/17/2021 at 7:00, 7894 individual TONHC patients have tested for COVID-19. This comprises 39% of the TONHC User Population. User Population consists of patients who have received care at TONHC at least twice in the past three years.



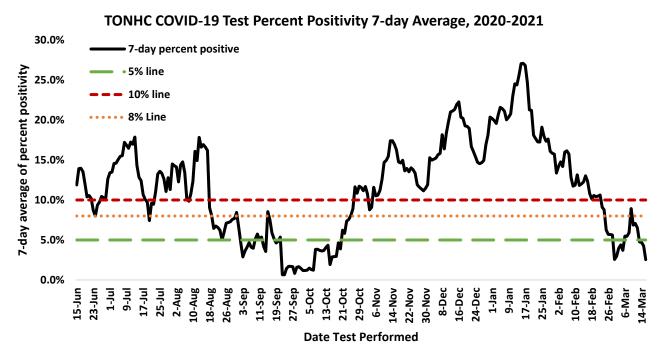


7-day average is the average of cases for that day and the 6-days prior

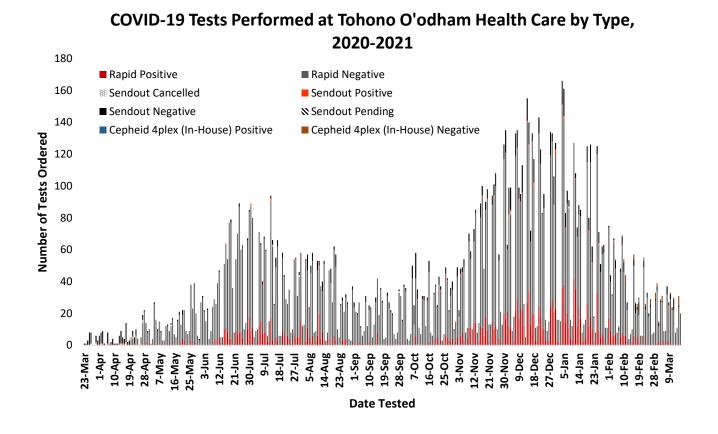


Date Tested

7-day average is the average of cases for that day and the 6-days prior



^{*} Weekly test percent positivity is calculated using the day tests were performed and 6-days prior (7-day detected "positive" results)/(7-day total tests performed) x 100%



COVID-19 testing began at TONHC on March 23, 2020. Same-day testing is available at San Xavier, Sells, and San Simon. This means all the equipment to run the tests are in the clinic laboratories at San Xavier, Sells, and San Simon. We began on-site same-day testing on April 20, 2020. There are two types of tests: send-out test or same-day/rapid test. Send-out testing is used for specific cases. As of 9/1/2020, on-site qualitative total antibody testing is available for specified cases.

We have nine on-site Abbott ID NOW™ machines that are used for same-day testing. We are pursuing avenues for more testing machines for on-site testing. In addition to expand our testing capabilities, medical assistants at TONHC completed competencies in performing COVID-19 nasal swab testing to assist with performing testing

Effective 9/24/2020, patients with no symptoms and no known exposure to someone with COVID-19 can be tested at TONHC. For all testing, please call and schedule an appointment at your clinic.

Please note testing criteria is accurate as of 9/25/2020 and may change in the future.

*COVID-19 positive result means COVID-19 test result of "detected" for tests performed at TONHC (San Xavier, San Simon, Sells, and off-site).

[†]Absolute change in cumulative case count is the number of cumulative cases through week 2 subtracted from the number of cumulative cases through week 1, |week2 – week1|

Staying Safe at HOME

Our team strongly recommends to continue prevention measures including avoiding all unnecessary travel and gatherings. We also recommend the use of masks/cloth face coverings for all persons in public settings. Please continue to share the messaging of minimizing group contact, including neighbors and relatives not in one's own household.



Stay at home as much as possible



Practice physical distancing (remaining at least 6 feet away from others)



Clean your hands often

Our testing algorithms aim to identify symptomatic persons, asymptomatic persons with known potential COVID-19 exposures, and persons who will enter high-risk or congregate settings (surgery, detention, foster care, hospitalization, dorms, etc.).

We all need to do our part and to continue to practice physical distancing and frequent hand hygiene.

Please share with community members:

The best way to prevent illness is to avoid exposure to this virus. These simple actions will lessen your chances of catching COVID-19 and spreading it to others:

- Everyone should wear a mask/cloth face covering in public when physical distancing of 6 feet is not possible (except children ages less than 2 years and persons with a medical contraindication).
- Limit direct physical contact to only persons who live in the same household.
- Avoid all group activities/gatherings, even relatives if they do not live with you until further notice.

- Maintain "stay at home" behavior except for essential needs.
- Report illnesses and possible COVID-19 exposures immediately to your provider.
- Frequently wash hands with soap and water, and use alcohol-based hand sanitizer if unable to wash hands.

Symptoms to Monitor



COVID-19 symptoms to monitor for: fever, chills, cough, difficulty breathing (shortness of breath), runny/stuffy nose, sore throat, headaches, fatigue, abdominal pain, vomiting, diarrhea, new loss of taste or smell. If you have any of these symptoms, please stay home and do not go to work, school, or be in public areas.

Face Mask Guidance in the Community Setting



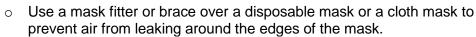
How to make sure your mask works the best it can

- 1. Make sure your mask fits snugly against your face. Gaps can let air with respiratory droplets leak in and out around the edges of the mask
- 2. Pick a mask with layers to keep your respiratory droplets in and others' out. A mask with layers will stop more respiratory droplets getting inside your mask or escaping from your mask if you are sick.

DO

- Choose a mask with a Nose Wire
 - o A nose wire is a metal strip along the top of the mask
 - Nose wires prevent air from leaking out of the top of the mask.
 - o Bend the nose wire over your nose to fit close to your face.





- Check that it **Fits Snugly** over your nose, mouth, and chin
 - Check for gaps by cupping your hands around the outside edges of the mask.
 - Make sure no air is flowing from the area near your eyes or from the sides of the mask.
 - If the mask has a good fit, you will feel warm air come through the front of the mask and may be able to see the mask material move in and out with each breath.
- Add Layers of material

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- 2 ways to layer
 - Use a cloth mask that has multiple layers of fabric.
 - Wear one disposable mask underneath a cloth mask.
- The second mask should push the edges of the inner mask against your face.
- Make sure you can see and breathe easily
 - Knot and Tuck ear loops of a 3-ply mask
 - Knot the ear loops of a 3-ply face mask where they join the edge of the mask
 - Fold and tuck the unneeded material under the edges
- For video instructions, see: https://youtu.be/UANi8Cc71A0external icon.



To video instructions, see. https://youtu.be/OAINIOCC/ TAGEXTERNAL ICON.



Arizona COVID-19 School Benchmarks

On March 2nd, 2021 CDC announced updated school guidance. The Arizona Department of Health Developed Community Transmission to Reflect Level of Community Risk: CDC recommends the use of two measures of community burden to determine the level of community transmission. These measures are used to assess the incidence and spread of COVID-19 in the community, not the school itself. Risk is dependent on community level transmission and implementation of school and community mitigation strategies.

County	Case Rate	% Positivity	Transmission Level
Pima	Substantial	Low	Substantial

Indicator	Low Transmission	Moderate Transmission	Substantial Transmission	High Transmission
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Percentage of nucleic acid amplification tests (NAATs) that are positive during the past 7 days	<5.0%	5.0% – 7.9%	8.0% – 9.9%	≥ 10.0%

Low Transmission	Moderate Transmission	Substantial Transmission	High Transmission	
K-12 schools open for full in-person instruction		Elementary schools in hybrid learning mode or reduced attendance		
		Middle and high schools in hybrid learning mode or reduced attendance	Middle and high schools in virtual instruction unless they can strictly implement all mitigation strategies and have few cases. Schools that are already open for in-person instruction with successfully implemented mitigation strategies can remain open, but only if they continue to strictly implement mitigation strategies and have few cases	
Arizona Danartman	t of Llocath Commission between	v azdhs gov/documents/preparedness	/onidomialomy diagona	

Arizona Department of Health Services, https://www.azdhs.gov/documents/preparedness/epidemiology-disease-control/infectious-disease-epidemiology/novel-coronavirus/schools/school-benchmarks.pdf, accessed 3/11/21.

COVID-19 GUIDANCE ON HOME ISOLATION

The Centers for Disease Control and Prevention (CDC), the Arizona Department of Health Services, and Tohono O'odham Nation Health Care updated guidance on home isolation. Accumulating evidence supports ending isolation and precautions for persons with COVID-19 using a symptom-based strategy. Researchers have reported that people with mild to moderate COVID-19 remain infectious no longer than 10 days after their symptoms began, and those with more severe illness or those who are severely immunocompromised remain infectious no longer than 20 days after their symptoms began. Therefore, CDC has updated the recommendations for discontinuing home isolation.

If you tested positive for COVID-19, you need to stay in ISOLATION:

- If you tested positive for COVID-19 or are waiting for results, you should be in **isolation**. Isolation means you need to stay away from others as much as possible. You should stay in a specific "sick room," if possible, and away from other people in your home.
- If you cannot separate from others at home, you should wear a mask.
- Do not attend work, school, be in public areas, or use public transportation.
- Do not share household items like dishes, cups, eating utensils, and bedding.
- Cover coughs and sneezes with a tissue or your elbow. Throw away used tissues in the trash and wash your hands.
- Avoid touching your eyes, nose, and mouth.
- Wash your hands often with soap and warm water for at least 20 seconds.
- Clean high-touch surfaces (tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, etc.) daily.
- Reschedule all non-essential medical appointments.
- If you need medical care, call your provider **before going**, and tell them about your illness.

The number of days you should isolate at home depends on your SYMPTOMS, how SICK you were, and whether you are SEVERELY IMMUNOCOMPROMISED.

Please look at the chart on the back of this sheet to help you figure out how long you should stay isolated at home.

- If you had any symptoms consistent with COVID-19 and had mild or moderate illness, you should isolate at home until:
 - At least <u>10 days</u> have passed since your symptoms first started <u>and</u>
 - At least 24 hours have passed since your fever resolved (without the use of medication) and
 - Your other symptoms have improved.
- 2) If you had any symptoms consistent with COVID-19 and had severe or critical illness or are severely immunocompromised, you should isolate at home until:
 - At least <u>20 days</u> have passed since your symptoms first started <u>and</u>
 - At least 24 hours have passed since your fever resolved (without the use of medication) and
 - Your other symptoms have improved.
- If you did not have any symptoms consistent with COVID-19, you should isolate at home until;
 - 10 days have passed since your first COVID-19 test was done.
- 4) If you did not have any symptoms consistent with COVID-19 and are severely immunocompromised, you should isolate at home until:
 - <u>20 days</u> have passed since your first COVID-19 test was done.

Contact your healthcare provider or Public Health Nursing for any questions.

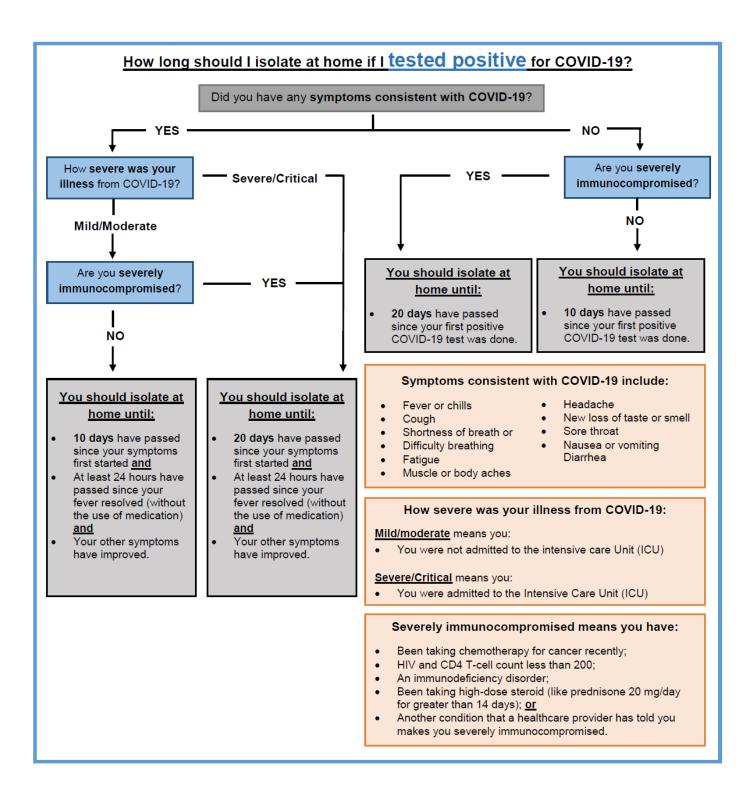
CDC guidance, https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html, accessed 7/29/20.

Guidance may change as new information becomes available. Please look for the most up-to-date recommendations.

TOHONO O'ODHAM NATION HEALTH CARE

Updated 7/27/2020 (subject to change)





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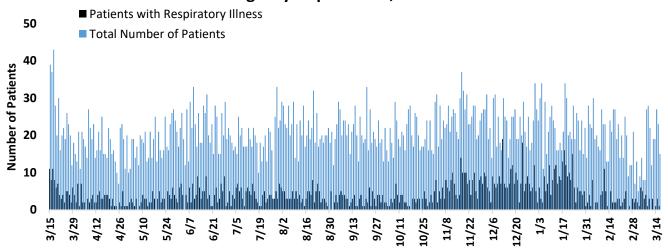
TOHONO O'ODHAM NATION HEALTH CARE

Updated 7/27/2020 (subject to change)



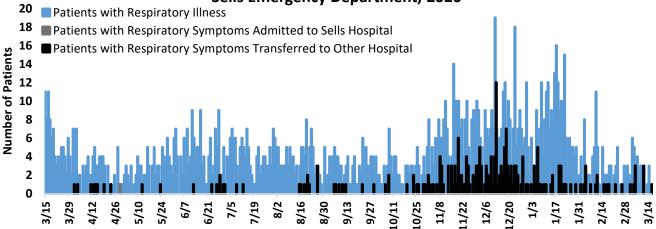
Sells Emergency Department Syndromic Surveillance

Patients Presenting with Respiratory Illness and Daily Totals, Sells Emergency Department, 2020-2021

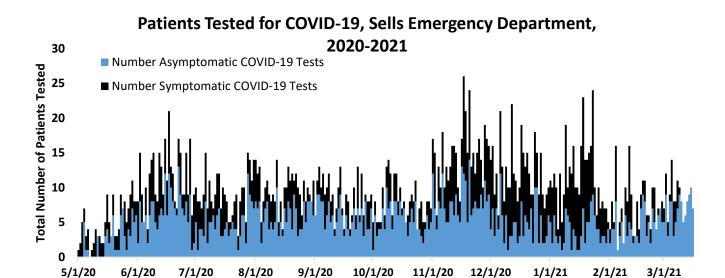


Syndromic surveillance refers to detection of indicators that are discernible before confirmed diagnoses are made. For example, an increase in the number of patients seen with respiratory symptoms could be an indicator of COVID-19. There were between 1 and 4 patients seen daily in Sells Emergency Department with respiratory symptoms during the week of 3/8/2021- 3/14/2021.

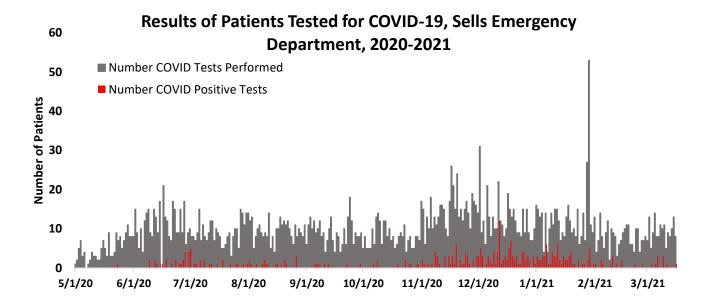
Patients Presenting with Respiratory Illness and Number of Patients Transferred/Admitted from Emergency Department to Inpatient Hospital, Sells Emergency Department, 2020



As of 3/17/2021, there were 2 admissions to Sells Hospital and 226 outside transfers for respiratory symptoms from Sells Emergency Department. The number of patients transferred from the emergency department to hospital inpatient units helps to identify severity of disease among the population. This is a level of disease severity that requires a higher level of care, such that care must be managed in the hospital (e.g. with oxygen, mechanical ventilation, etc.).



Same-day COVID-19 testing began on 4/20/20. From 3/8/21–3/14/21, between 12 and 28 patients were seen each day in the emergency department. Asymptomatic tests are performed on people who have no symptoms (no cough, no diarrhea, no fever, etc.). Symptomatic tests refer to tests performed on people who have symptoms (cough, fever, diarrhea, etc.) of COVID-19.



The week of 3/8/21–3/14/21, 5 people seen in the emergency department tested positive for COVID-19. There have been 307 total positive test results from tests performed in Sells emergency department

EMPLOYEE HEALTH

All employees at TONHC must wear a procedure/surgical mask while at work. All employees in patient care areas must wear a procedure/surgical mask and eye protection. All employees in areas with patients with suspected or confirmed COVID-19 must wear N95 respirator, eye protection, gloves, and gown.

550 TONHC employees and first responders (849 encounters) have been evaluated by employee health for respiratory symptoms related to illness or other reasons (as of 7:00 3/17/2021).

10 TONHC employees and first responders are currently sick (as of 7:00 3/17/2021).

81 TONHC employees tested positive for COVID-19. Each positive result has prompted an internal and external investigation and contact tracing. Based on these investigations, transmissions were more likely due to community spread. Employees possibly exposed are tested for COVID-19.

All employees are required to contact Employee Health with any call-outs. This is to ensure that employees are tested for COVID-19 if sick or exposed and given appropriate guidance on when to return to work. Employees are also required to contact their supervisor when they call out.

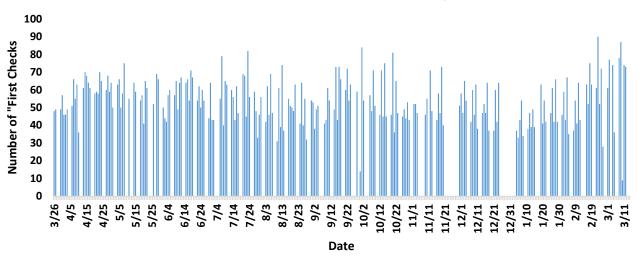
TONHC Infection Control

Infection control prevents or stops the spread of infections in healthcare settings. TONHC COVID-19 infection control team monitors, tracks, and provides guidance on personal protective equipment (PPE such as gowns, gloves, face shields, N95 respirators).

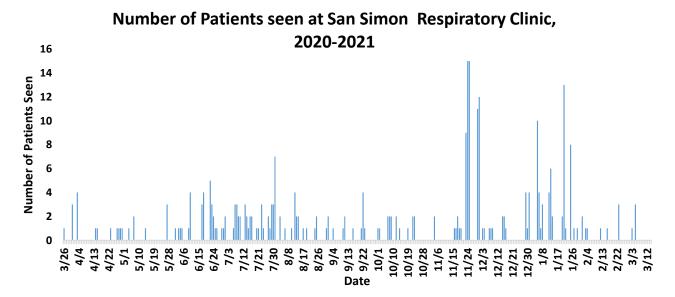
- At the San Xavier, Sells, and San Simon Health Care Centers, the Battelle CCDS Critical
 Care Decontamination System™ is being used to decontaminate N95 respirators using
 concentrated, vapor phase hydrogen peroxide (Emergency Use Authorization (EUA) issued
 by US Food and Drug Administration (FDA)).
- All staff are wearing procedure/surgical masks, and staff caring for patients are also wearing eye protection.
- Staff caring for patients that have or may have been exposed to COVID-19 are wearing gowns, gloves, face shields or other eye protection, and N95 respirators or Powered Air Purifying Respirators (PAPRs).

CLINIC - SAN SIMON

Number of "First Checks" at San Simon Clinic, 2020-2021



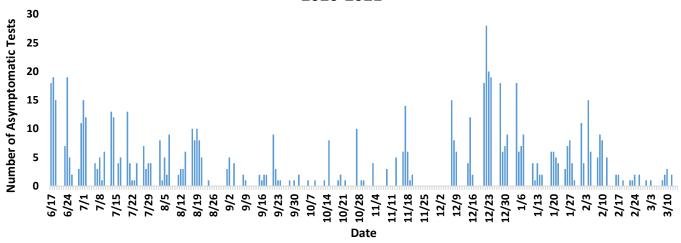
Some data is missing the month of December



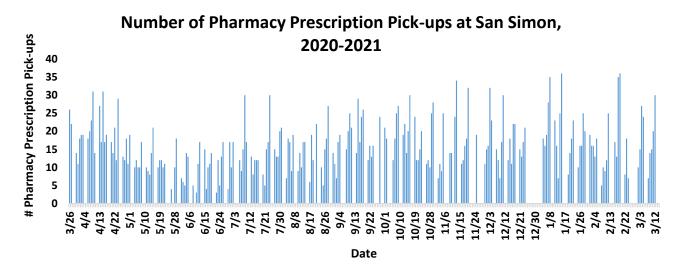
A "first check" involves asking questions about loss of smell or taste, sore throat, fever, cough, and/or difficulty breathing when anyone is entering the clinic or hospital grounds. First checks include employees and patients. As first checks are with entry, they occur multiple times per day for some people. The number of first checks is the number of times questions of respiratory symptoms were asked.

Two patients from San Simon Clinic were admitted to the hospital for respiratory symptoms.

Number of COVID-19 Asymptomatic Tests Performed at San Simon, 2020-2021

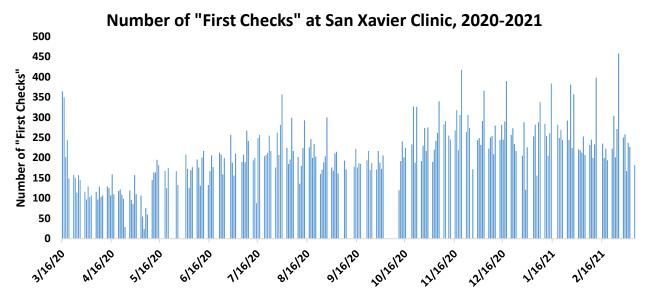


These are the number of tests for COVID-19 performed on patients that have no symptoms of COVID-19 (no fever, no cough, no difficulty breathing, etc.), or patients who are symptomatic but only desire to be tested. They are performed on people who have may have had exposure to COVID-19, are entering a congregate setting, or are going to be admitted to the hospital.



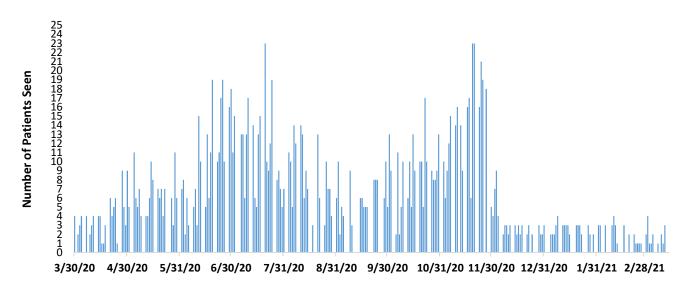
Some data are missing the month of December

CLINIC - SAN XAVIER

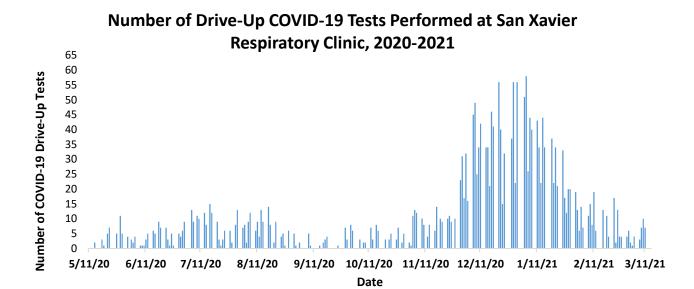


Some data are missing the month of October

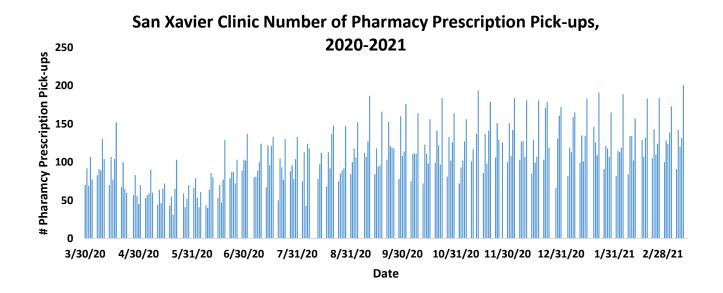
Number of Patients seen at San Xavier Respiratory Clinic, 2020-2021



16 patients were seen in the same day respiratory clinic and transported to the hospital from San Xavier clinic.

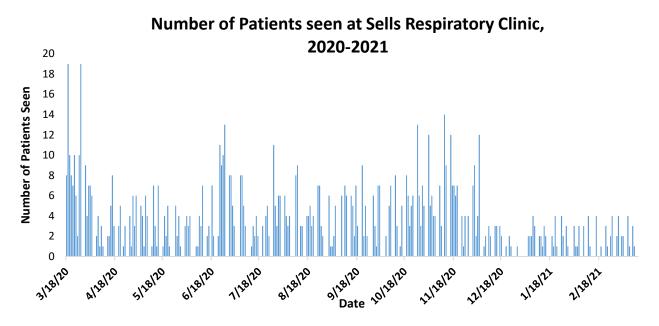


Drive-Up testing includes both symptomatic and asymptomatic patients, with testing for symptomatic patients beginning in November at San Xavier Clinic. Asymptomatic testing is for patients that have no symptoms of COVID-19 (no fever, no cough, no difficulty breathing, etc.). They are performed on people who may have had exposure to COVID-19, are entering a congregate setting, or are going to be admitted to the hospital. Patients who have COVID-19 symptoms may be offered a drive up test instead of a Respiratory Clinic visit.

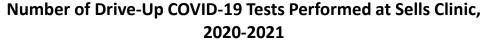


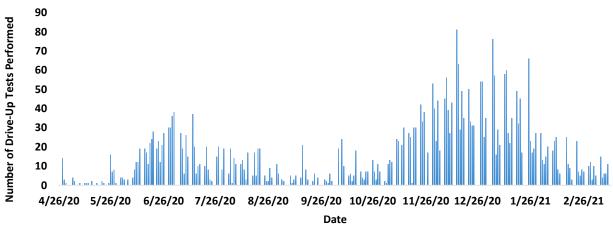
CLINIC - SELLS

As of November 5, 2020, Sells Hospital has transitioned to asking questions about COVID-19 symptoms as patients enter the clinics/hospital instead of first check at the parking lot entrance. Protocols have been created to ensure all patients and employees are checked at designated areas before entering clinics/hospital building. These include temperature checks and asking about COVID-19 symptoms.



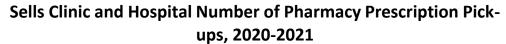
15 patients seen were transferred to the emergency room, 5 patients were directly admitted to the hospital. 3/21/20 and 3/22/20 included patients seen in the emergency department.

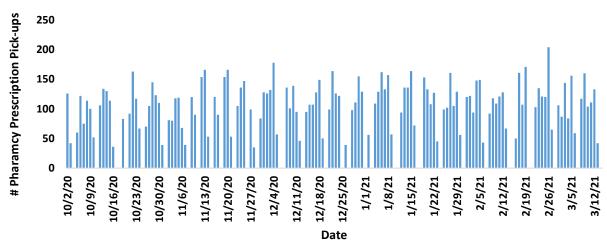




Drive-Up testing includes both symptomatic and asymptomatic patients, with testing for symptomatic patients beginning on 11/23/2020 at Sells Hospital. Asymptomatic testing is for patients that have no symptoms of COVID-19 (no fever, no cough, no difficulty breathing, etc.). They are performed on people who may have had exposure to COVID-19, are entering a

congregate setting, or are going to be admitted to the hospital. Patients who have COVID-19 symptoms may be offered a drive up test instead of a Respiratory Clinic visit.





SELLS INPATIENT UNIT

To minimize possible exposure and conserve personal protective equipment, visitors are not allowed on the inpatient wards. Exceptions are for a minor, woman in labor, and special circumstances. In accordance with state enhanced surveillance advisory related to COVID-19, daily information has been reported to Arizona State using EMResource.

5 patients were admitted to Sells Hospital who tested positive for COVID-19. Inpatient, in-hospital transportation, and postmortem protocols have been developed. Every patient admitted to the inpatient unit of Sells hospital is tested for COVID-19.

Med/Surge Bed Availability – 13 (3/17/2021)

Med/Surge Bed Capacity – 14, with 5 additional beds available if needed for emergency situations

No intensive care unit services

Negative Pressure Rooms – 2 inpatient rooms, 1 in emergency department (inpatient rooms are used by emergency department or other clinics when indicated).

For all transfers outside of TONHC we are calling the Arizona Surge Line. The Arizona Surge Line is a 24/7 toll-free statewide system activated 4/22/20 to keep hospitals and regions of Arizona from being overwhelmed by facilitating COVID-19 patient admission, transfer, and discharge to appropriate levels of care.

In preparation, our outpatient clinic staff has been cross-trained in inpatient patient care. To date we have trained 16 member of the healthcare workforce to manage patients in the hospital setting. Cross training will allow us to increase the number of patients we can take care of on the inpatient unit. Please note that Sells hospital is not an intensive care unit, so we cannot take care of patients

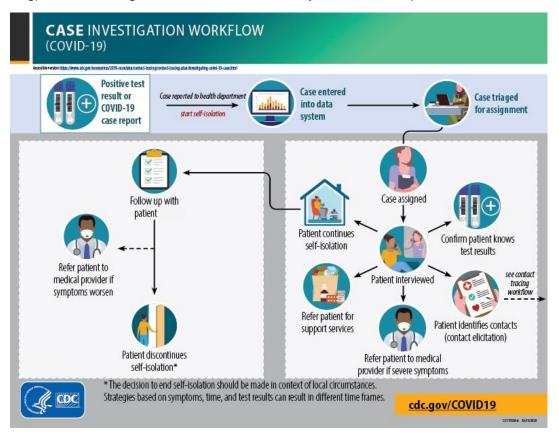
TONHC Situation Update 03/17/2021 7:00

with COVID-19 requiring intensive respiratory treatment. These patients are transferred to intensive care units at other sites.

PUBLIC HEALTH NURSING – CONTACT TRACING

As of 3/17/21 at 7:00, 3,737 individual contact tracings have occurred in the Tohono O'odham Nation.

TONHC public health nursing conducts case investigation and contact tracing (involves interviewing). Case investigations are initiated on everyone who tests positive for COVID-19.



Contact tracing, a core disease control measure, is a key strategy for preventing further spread of COVID-19. Contact tracing is part of the process of supporting patients with suspected or confirmed infection. In contact tracing, public health nursing works with patients to help them recall everyone with whom they have had close contact during the timeframe in which they may have been infectious. To protect patient privacy, contacts are only informed that they may have been exposed to a patient with the infection. They are not told the identity of the patient who may have exposed them. Contacts are provided with education, information, and support to understand their risk, what they should do to separate themselves from others who are not exposed, how to monitor themselves for illness, and the possibility that they could spread the infection to others even if they themselves do not feel ill.

CONTACT TRACING WORKFLOW (COVID-19) Contact assigned Patient with COVID-19 Patient identifies contacts Contact triaged for interviewed assignment See case investigation workflow Begin self-isolation test if available* Contact notified self-quarantine self-quarantine Contact discontinues Follow up with contact self-quarantine after 14 days from last exposure if asymptomatic Refer contact for support services test if available* Refer contact to medical provider if necessary *if contact tests positive or develops COVID-19 symptoms, case investigation is necessary. cdc.gov/COVID19 CS3100004 06/15/2020

TOHONO O'ODHAM NATION HEALTH CARE

COVID-19 VACCINATIONS UPDATE-Please Distribute Widely COVID-19 Vaccine Available for ALL Adults per Criteria Below

Sells Hospital and San Xavier Health Center Vaccination Dates:

- Every Wednesday and Friday in the month of March
- 8:00 am-3:30 pm
- Call for an appointment. Walk-Ins Welcome.

COVID-19 Vaccinations available at TONHC for:

- Members of the Tohono O'odham Nation (TON) or other American Indian/Alaska Native
 Tribes regardless of employment status or medical diagnoses
- Non-Native persons who work with or live on the Tohono O'odham Nation
- Non-Native persons who reside in a household with a tribal member Must be 18 years or older

To schedule, please call:

Sells Hospital:	San Xavier Health Center:	
520-383-7253	520-295-2529 5	20-295-2484
520-383-7209	520-295-2504 5	20-295-2590
520-383-7519	520-295-2482 5	20-295-2505
	520-295-2424	

San Simon Health Center (by appointment only)

520-362-7019 520-362-7078

If you have AHCCCS insurance, AHCCCS will pay for transportation to vaccine visits. Please contact an AHCCCS transportation provider to schedule a ride.

Helpful Tips for your Vaccine Visit:

- Wear a mask to cover your nose and mouth. Dress for the weather.
- Eat a snack, drink water, and use the restroom before your visit.
- Wear a short sleeve shirt under your coat.
- Tribal Members: Please bring your photo ID, Tribal ID preferred but not required.
- Non-native essential workers: please bring your Employee ID or a letter from your supervisor stating your name, employer, and occupation.
- Non-native household members/residents of TON: please bring proof of residence.
- Bring your insurance card. Vaccine is free.
- Be prepared to stay 15-30 minutes after vaccination.

If you feel ill or you are experiencing COVID-19 symptoms:

- Please do NOT come to be vaccinated.
- Please call TONHC at one of the numbers listed above and schedule a COVID-19
 Test.

If you have received a previous dose of COVID-19 vaccine outside of TONHC:

- Please call TONHC and have your vaccine information ready to review with a clinical staff member to ensure that you are able to receive Dose #2 at TONHC.
- Dose #1 and Dose #2 should be the same brand of vaccine.

If you have been diagnosed with COVID-19:

 Please wait at least 10 days before coming for a vaccination to avoid infecting others.

If you have been treated for COVID-19 with monoclonal antibody/convalescent plasma:

You must wait 90 days after treatment to receive COVID vaccine.

Thank You and Stay Safe!

APPENDIX

Confirmed COVID-19 Cases and Absolute Change among Enrolled Tohono O'odham Nation Members by Week, 2020

Members by Week, 2020	Cumulative COVID-19	
	Cases Among Enrolled	Absolute Change§ in
	Tohono O'odham Tribal	Cumulative Case Counts
Week (2020)	Members	from Previous Week
June 24 th – June 30 th	189	
July 1 st – July 7 th	241	52
July 8 th – July 14 th	297	56
July 15 th – July 21 st	320	23
July 22 nd – July 28 th	363	43
July 29th - August 4th	415	52
August 5 th – August 11 th	456	41
August 12 th – August 18 th	486	30
August 19 th – August 25 th	498	12
August 26 th – September 1 st	508	10
September 2 nd – September 8 th	509	1
September 9 th – September 15 th	535	26
September 16 th – September 22 nd	543	8
September 23 rd – September 29 th	545	2
September 30 th – October 6 th	547	2
October 7 th – October 13 th	555	8
October 14 th – October 20 th	564	9
October 21st – October 27th	586	22
October 28 th – November 3 rd	598	12
November 4 th – November 10 th	630	32
November 11 th – November 17 th	681	51
November 18 th – November 24 th	734	53
November 25 th – December 1 st	802	68
December 2 nd – December 8 th	881	79
December 9 th – December 15 th	1005	124
December 16 th – December 22 nd	1088	83
December 23 rd – December 29 th	1171	83
December 30 th – January 5 th	1297	126
January 6 th – January 12 th	1416	119
January 13 th – January 19 th	1513	97
January 20 th – January 26 th	1614	101
January 27 th – February 2 nd	1653	39
February 3 rd – February 9 th	1689	36
February 10 th - February 16 th	1711	22
February 17 th – February 23 rd	1735	24
February 24 th – March 2 nd	1742	7
March 3 rd – March 9 th	1746	4
March 10 th – March 16 th	1748	2
March 10 - March 10	1740	

Confirmed COVID-19 Cases and Absolute Change among Enrolled Tohono O'odham Nation Members Residing within the Tohono O'odham Nation by Week, 2020

Members Residing within the Tone	Cumulative COVID-19	2020
Week (2020)	Cases Among Enrolled Tohono O'odham Tribal Members Residing within the Tohono O'odham Nation Boundary	Absolute Change [§] in Cumulative Case Counts from Previous Week
June 24 th – June 30 th	82	
July 1 st – July 7 th	106	24
July 8 th – July 14 th	148	42
July 15 th – July 21 st	168	20
July 22 nd – July 28 th	193	25
July 29 th – August 4 th	227	34
August 5 th – August 11 th	256	29
August 12 th – August 18 th	285	29
August 19 th – August 25 th	294	9
August 26 th – September 1 st	299	5
September 2 nd – September 8 th	303	4
September 9 th – September 15 th	328	25
September 16 th – September 22 nd	337	9
September 23 rd – September 29 th	337	0
September 30th – October 6 th	338	1
October 7 th – October 13 th	346	8
October 14 th – October 20 th	350	4
October 21 st – October 27 th	360	10
October 28 th – November 3 rd	371	11
November 4 th – November 10 th	400	29
November 11 th – November 17 th	433	33
November 18th – November 24th	480	47
November 25 th – December 1 st	529	49
December 2 nd – December 8 th	583	54
December 9 th – December 15 th	675	92
December 16 th – December 22 nd	733	58
December 23 rd – December 29 th	782	49
December 30 th – January 5 th	866	84
January 6 th – January 12 th	952	86
January 13 th – January 19 th	1020	68
January 20 th – January 26 th	1101	81
January 27 th – February 2 nd	1128	27
February 3 rd – February 9 th	1155	27
February 10 th - February 16 th	1169	14
February 17 th – February 23 rd	1187	18
February 24 th – March 2 nd	1190	3

March 3 rd – March 9 th	1192	2
March 10 th – March 16 th	1194	2

Changes due to added cases and reclassification of residence

TONHC COVID-19 Positive Test Results and Absolute Change by Week, 2020

TONHC COVID-19 Positive Test Res		ige by Week, 2020
Week (2020)	TONHC Cumulative Positive COVID-19 Test Results	Absolute Change [†] in Positive Test Results from Previous Week
June 24 th – June 30 th	153	
July 1 st – July 7 th	202	49
July 8 th – July 14 th	251	49
July 15 th – July 21 st	278	27
July 22 nd – July 28 th	302	24
July 29 th – August 4 th	342	40
August 5 th – August 11 th	382	40
August 12 th – August 18 th	403	21
August 19 th – August 25 th	416	13
August 26 th – September 1 st	426	10
September 2 nd – September 8 th	431	5
September 9 th – September 15 th	444	13
September 16 th – September 22 nd	445	1
September 23 rd – September 29 th	447	2
September 30 th – October 6 th	449	2
October 7 th – October 13 th	457	8
October 14 th – October 20 th	464	7
October 21 st – October 27 th	487	23
October 28 th – November 3 rd	505	18
November 4 th – November 10 th	549	44
November 11 th – November 17 th	604	55
November 18th – November 24 th	667	63
November 25th – December 1st	725	58
December 2 nd – December 8 th	824	99
December 9 th – December 15 th	962	138
December 16th – December 22 nd	1066	104
December 23 rd – December 29 th	1148	82
December 30 th – January 5 th	1276	128
January 6 th – January 12 th	1409	133
January 13 th – January 19 th	1497	88
January 20 th – January 26 th	1584	87
January 27 th – February 2 nd	1630	46
February 3 rd – February 9 th	1664	34
February 10 th - February 16 th	1689	25
February 17 th – February 23 rd	1706	17
February 24 th – March 2 nd	1711	5
March 3 rd – March 9 th	1723	12
March 10 th – March 16 th	1729	6

Unified Command

Current and Planned Objectives:

- Operational teams to support COVID-19 response efforts and activities will be identified for activation and sustainment thru COVID surge.
- Maintain responsibility of PPE resource management by acquiring and distributing resources and assets.
- Maintain Alternate Care Site(s) (ACS) capability to include personnel, facilities, and wrap-around services for COVID-19 positive patients. Low level medical needs.
- Reactivate Community Lifeline(s) to support most vulnerable populations through COVID surge.
- Continue to deliver consistent community messaging and information for leadership and all stakeholders.
- Continue to monitor activity and workload of task forces/workgroups to perform gap analysis, resource assessment, contingency planning, partner outreach, and other tasks as required
- Maintain global, national, and state situational awareness of COVID-19 outbreak impacts and any surge in cases that might come from the border environment.
- Integrate best practices and up-to-date safety guidance for the first responder community, healthcare/medical community, supporting personnel, and stakeholders
- Maintain an up-to-date financial and cost analysis of incident-related expenditures and provide updates to senior leadership

Command Emphasis:

- Fatigue and burnout is a concern for personnel that have been activated over the last 9.5 months. Team Leaders and Command Staff will actively monitor.
- We will scale up resources and personnel to ensure span of control.
- Continue to maintain resources at a ready-state for support of healthcare preparedness activities in COVID surge.
- Forward leaning approach for plans, capabilities, and efforts during COVID surge.
- Maintain information sharing and resource management coordination among key stakeholders.
- Continue coordinated and synchronized public messaging regarding COVID-19 and Influenza. Keep the audiences tuned in.
- The Unified Command will continue to coordinate with external partners and agencies to achieve operational objectives.
- Ensure all orders for PPE requests are synchronized, tracked and distributed. EOC resource orders
 must be submitted using a 213-RR and submitted via eoc@tonation-nsn.gov
- Integrate additional stakeholders to operational briefings with the intent to foster a common operating picture and enhance working partnerships
- Maintain COVID-19 situational awareness of impacts, response actions, and gap analysis for effective support
- The Unified Command must acknowledge and recognize sensitive political, legal, and security issues and develop strategies and or solutions to help establish: clear lines of authority, accountability procedures, personnel relief and rehabilitation, situational awareness, environmental conditions
- Keep the Policy Group and senior leadership adequately informed
- Sustain an operational battle rhythm, to include Planning P methodologies, Incident Action/Coordination/Support Planning

Strategic Actions:

- TON-HC and Unified Command continue to coordinate in supporting the COVID-19 cases. UC Task
 Force Leader communicates with TON-HC if patient(s) need to be housed in an Alternate Care Sites.
- Unified Command Distribution Team continues in filling resource requests from approved 213-RR's.
- Unified Command Compliance Team continues to monitor the department's compliance with all required safety precautions and assist departments with implementing safety measures.
- Unified Command continues with planning efforts through the State for testing support.

State of Arizona:

September 1, 2020 – Governor Ducey issued E.O. 2020 – 53, *Driver License Renewals for Arizonans 65 or Older Amending and Extending E.O. 2020 – 08*

September 8, 2020 – Governor Ducey issued E.O. 2020 – 54, *Enhanced Surveillance Advisory - Monitoring The Spread of COVID-19*

November 11, 2020 – Governor Ducey issued E.O. 2020-56 *Enhanced Surveillance Advisory - Tracking the Spread of COVID-19*

- Extending the Enhanced Surveillance Advisory Tracking of COVID-19 which was established in March under Executive Order 2020-13 an additional 60 days

November 18, 2020 – Governor Ducey issued E.O. 2020-57 *Enhanced Surveillance Advisory - Monitoring the Administration of COVID-19 Vaccination*

Additional Online Resources:

Arizona data: Arizona Department of Health Services

Resilient Arizona Crisis Counseling Program: https://resilientarizona.org/

Global Data: Center for Systems Science AZ Engineering at John Hopkins University

National Guidance: Centers for Disease Control and Prevention

The COVID-19 Hotline 2-1-1: 211arizona.org

Resources for Arizonans: https://arizonatogether.org/

AZ Executive Orders (COVID-19): Arizona Executive Orders

Community Lifelines:

The Unified Command conducted the following food distributions for Districts and OIM (O'odham in Mexico). The distribution included the following contents:

There are three food distributions scheduled for the months of March and April.

- Thursday, March 25, 2021
- Thursday, April 8, 2021
- Thursday, April 22, 2021



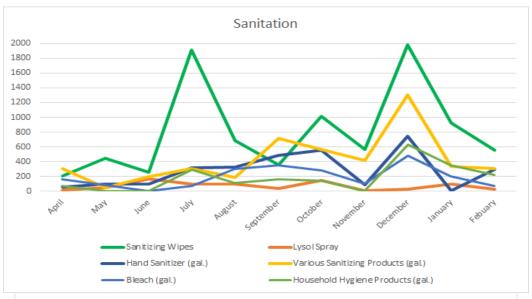
Personal Protective Equipment (PPE):

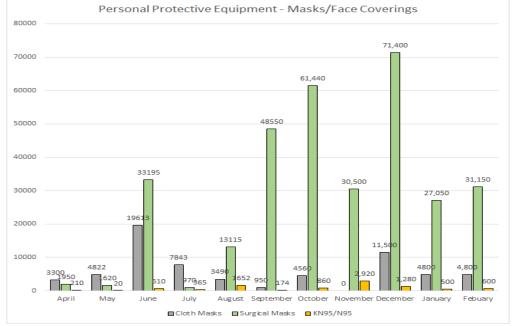
The Unified Command has distributed Masks/Face Coverings, Sanitation/Hygiene Products and numerous PPE to Programs, Departments, Communities, Districts and stakeholders. The following graphics identify

specific distributions:









Weather:





Today: Sunny, with a high near 80. Light and variable wind becoming west 5 to 7 mph in the afternoon.

Tonight: Clear, with a low around 49. Calm wind becoming east southeast around 6 mph in the evening.

Friday: Sunny, with a high near 84. Light and variable wind becoming west northwest 5 to 8 mph in the morning.

Friday Night: Clear, with a low around 52. West northwest wind around 6 mph becoming calm after midnight.

Saturday: Sunny, with a high near 84. Light and variable wind becoming west 6 to 11 mph in the morning.

Saturday Night: Partly cloudy, with a low around 50.

Sunday: Partly sunny, with a high near 76.

Sunday Night: A 20 percent chance of showers after 11pm. Partly cloudy, with a low around 45.

Monday: Sunny, with a high near 72.

Monday Night: Mostly clear, with a low around 44.

Tuesday: Sunny, with a high near 72.

Tuesday Night: Mostly clear, with a low around 43.

Wednesday: Sunny, with a high near 70.