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COVID-19 Health Talking Points

Updated on Friday, 01/22/2021, at 5:00 p.m.

Note: This document is updated and distributed regularly on Tuesdays and Fridays with occasional updates on other days as needed.

How to use the COVID-19 Health Talking Points:

There are two easy methods to find what you need in this document.

1. The Table of Contents contains sections with topics listed under each topic. Topics that have been revised or added are shown in purple. You can navigate to a topic by holding Control (ctrl) or Command on your keyboard and then clicking your mouse.
2. Use the Search Function by pressing Control (ctrl) or Command and the letter F on your keyboard at the same time.

Next, type the word you're looking for in the search box. Hit Enter and you will see the words that match what you are looking for highlighted in the document. You can navigate by clicking Previous or Next in the Find tool bar.

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Top Line Messages

Press conference gives overview of pandemic in Oregon

At a Jan. 22 press conference, officials from the Oregon Health Authority joined Governor Kate Brown to give an overview of the pandemic in Oregon, an explanation of Oregon's vaccine sequencing plan, and an update on the progress of vaccination efforts in the state.

Here are some key points made by Rachael Banks, director of the Public Health Division at OHA.

"We just don't have enough vaccines to immunize everyone who needs, and wants, a vaccination.

- As long as supplies are scarce, we'll face really tough calls on who to immunize next.
- There are good reasons to prioritize educators and good reasons to prioritize seniors.
- However the plan is to vaccinate most educators before we start vaccinating seniors on Feb. 8. If we want to give schools a chance at re-opening this school year with a vaccinated staff, now is the time to do it.

Banks said that, as of Jan. 20,

- Oregon ranked 19th in the nation in percentage of vaccine administered at 50%.
- Oregon ranked 20th in the nation in the percentage of population given at least one dose at 4.6%.
- Oregon has vaccinated two-thirds of those in the "Phase 1A" group of health care workers, first responders and people who live or work in nursing homes and other group residences. That's about a week ahead of schedule.

She also explained that Oregon is vaccinating educators before seniors for these reasons:

- We want to re-open schools this school year, with a workforce of educators that has the confidence to re-enter a classroom knowing they are protected by a vaccine, now is the time to act.
- If we waited to vaccinate educators after seniors, we wouldn't have enough doses of vaccines to finish vaccinating them until May.
- Quickly vaccinating educators adds to the robust safety guidelines for schools and helps to get students back into classrooms, and parents back to work, months sooner. And restarting schools mitigates the harsh educational and economic inequities the pandemic has worsened.

Banks pointed out that Oregon acted early to protect seniors with the result that:

- Oregon has the 2nd lowest COVID-19 infection rate among seniors in the nation and the 3rd lowest death rate among people 65 and older.
- And senior vaccinations are already underway: pharmacies have already finished giving first doses for residents and staff at long-term care facilities in Oregon.
- Oregon will open vaccines to all seniors over a four-week period starting with people 80 and older on Feb. 8.

Dave Baden, OHA's chief financial officer, is overseeing the unified state response coordinating the roll-out of the COVID-19 vaccines. At the press conference he talked through Oregon's planned timeline for vaccinating seniors and educators as quickly as possible, based on limited vaccine supplies.

He estimated vaccinating a critical mass of seniors (about 78%) by the end of the first week of May.

He emphasized that timelines depend on the doses received from the federal government.

Weekly COVID-19 cases decline, deaths surge

OHA's [COVID-19 Weekly Report](#) was released Jan.21 and showed a slight decline in daily cases and a sharp decline in positive tests. Here are some findings:

- OHA reported 7,860 new daily cases during the week of Monday, Jan. 11 through Sunday, Jan. 17, a 4% decrease from the previous week.
- There were 332 people hospitalized for COVID-19.
- COVID-19 related deaths surged to 195, the highest weekly toll to date, following a previous pandemic high the prior week as well.
- There were 129,723 tests for COVID-19 for the week of Jan. 10 through Jan. 16. The percentage of positive tests dropped to 5.9%.
- People age 20 to 49 have accounted for 54% of COVID-19 cases, while people 70 and older have accounted for 77% of deaths associated with the virus.

Today's [COVID-19 outbreak report](#) shows 208 active COVID-19 outbreaks in senior living communities and congregate living settings, with three or more confirmed cases and one or more COVID-19 related deaths.

OHA releases updated pediatric report

On Jan.21, OHA issued a [report analyzing the case data of pediatric COVID-19 cases in Oregon](#) since the beginning of the pandemic. Here are some key findings:

- As of Jan. 5, there had been 119,488 confirmed and presumptive cases of COVID-19 in Oregon. Pediatric patients — defined as people under 18 years old — accounted for 13,328, or 11.2%, of the total cases. There had been seven cases of Multisystem Inflammatory Syndrome in Children (MIS-C).
- There was a dramatic rise in daily COVID-19 pediatric cases in late October and mid-November with cases levelling out somewhat by the end of 2020.

- The report indicates that while pediatric case counts have increased, pediatric patients remain far less likely than adults to develop severe cases of COVID-19.
- Only 0.9% of pediatric patients have been hospitalized at some point during their COVID-19 illness. Comparatively, 6.2% of adults with COVID-19 have been hospitalized.

Vaccine Advisory Committee narrows recommendation, plans further discussion

Oregon's 27-member COVID-19 Vaccine Advisory Committee (VAC) met for its third official business meeting on Jan. 21. The committee met and discussed how to best sequence populations to center those most likely to experience both health inequities and the worst effects of COVID-19.

The VAC is expected to make a final recommendation on implementation and allocation scenarios at its next [formal meeting on Jan. 28](#). More [details from today's meeting](#) are available.

What if I need a home repair? Limit the risk of Spreading COVID-19

Keeping your home free from outside visitors is an important way to limit the spread of COVID-19, but sometimes you may need to have someone in your home for a necessary repair. If you do need to have a repair person or other visitor in your home, here are some steps to limit the risk of spreading COVID-19.

Look on the repair company's website or ask them what they are doing to reduce the risk of spreading COVID-19.

Make sure the visitor knows that you expect them to wear a well-fitting mask.

Stay at least 6 feet away from the visitor.

Everyone in the house should wear a mask while the visitor is present, including those who live there.

Open doors and windows.

Place a fan near an open window or door, blowing outside.

Turn on the exhaust fans in your bathroom and kitchen. Keep them running for 1 hour before and after the visit to remove virus particles.

More information on ventilation is on the [Centers for Disease Control and Prevention website](#).

New vaccine resources

An interactive tool to help you find out where you can get a COVID-19 vaccine in Oregon or to ask a vaccine-related question is available on the OHA's Covid-19 vaccine page. To try it out, go to <https://covidvaccine.oregon.gov/> and click on the blue and white icon in the bottom right corner.

-Updated Phase 1a vaccine and sequencing [FAQ](#).

Vaccine [FAQ](#) for people living with HIV.

[Contact Tracing](#): What to expect if you've been near someone with COVID-19.

OHA has added a graphic on vaccine sequencing ([English](#) or [Spanish](#)).

Oregon's [Phase 1A Vaccine Sequencing Plan](#) is now available in [Spanish](#), [Russian](#), [Somali](#), [Hmong](#), [Marshallese](#), [Traditional Chinese](#) and [Arabic](#)

An FAQ on Oregon's Phase 1a Vaccine Sequencing Plan has been added to the OHA's [COVID-19 Vaccine](#) website. It is available in [English](#) and [Spanish](#).

Updated OHA vaccine [FAQ](#).

Vaccine [facts](#) to address people's concerns or misconceptions.

[COVID-19 vaccines for OHP members.](#)

[OHA data dashboard showing the status of the state's COVID-19 vaccination effort.](#)

[CDC Vaccination toolkit](#)

[Schools can now decide whether to return to in-person instruction](#)

At the start of the new year, Oregon's COVID-19 Health Metrics for Returning to In-Person Instruction became advisory. This means that local school districts and communities can decide whether to return to in-person instruction with close consultation from their local public health authority. Teachers have been added into Phase 1B of vaccination to offer them protection as schools begin to reopen.

At a Jan.8 press conference, Governor Kate Brown stressed the importance of returning to in-person instruction, especially for early learners, and noted that many children have missed nearly a full year of classroom learning. Both Governor Brown and ODE Director Colt Gill, emphasized that schools across the world have been able to reopen safely with rigorous health protocols in place. Go to [Ready Schools, Safe Learners](#) to learn more about ODE's guidance for reopening schools.

[Free community testing events added in January](#)

If you need to get a COVID-19 test, you have some options.

- If you need a free community testing event, you can find a list of upcoming events on the [Do I Need a COVID-19? Test website](#). Sixteen free community testing events have been added for January, and more are planned. You'll need to register and create a new user account that will ask for contact information. This will let you schedule an appointment for your selected event and get your test results. Because of the high demand for COVID-19 tests, an appointment and voucher are required for testing, one person per appointment. If there are no appointments available, please select another location and date. Only those with appointments are guaranteed a test.

- If you have insurance, contact your health care provider or use the map on [OHA's testing webpage](#) to find a clinic near you. Most insurance providers cover the costs of COVID-19 testing and associated care.
- Need help? You can also [call 211 for help finding a testing site](#).

COVID-19 Vaccine Talking Points

REVISED Jan. 21, 2021

Topline Messages

- Together, the Oregon Health Authority (OHA) and our vaccination partners delivered more than 12,000 doses in one day to **people in Oregon** last week, meeting Governor Brown's goal of delivering 12,000 doses a day. In fact, we more than doubled the number of doses from the previous week.
- We're doing everything we can to get people in Oregon vaccinated as soon as we can. We know that getting the vaccine out to eligible Oregonians is a matter of life or death. This week, Oregon vaccinated two-thirds of the Phase 1A population.
- Oregon is prioritizing people who are most at risk and hardest hit. Health care providers and residents and staff in long-term care facilities are currently eligible. Vaccination of childcare providers and early learning is set to begin Jan. 25. **Vaccination for all seniors age 80 and older is set to begin Feb. 8.** This of course all depends on receiving enough vaccine supply from the federal government.
- We are working closely with health systems, pharmacies, hospitals, federally qualified health centers, primary care providers and local public health agencies to make sure every Oregonian in Phase 1A gets their vaccine.
- Vaccination is the safest, most effective and most reliable way to keep yourself, your family and your community healthy and safe from COVID-19.
- Right now, people in Oregon can:
 - **Go to covidvaccine.oregon.gov** to find out when you are eligible and to get questions answered
 - **Text ORCOVID to 898211** to get text/SMS updates (English and Spanish)

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o Email ORCOVID@211info.org (All languages)

o If you can't get your question answered on the website, by text, or by email:

- Call the Call Center at 211 or 1-866-698-6155.-It is open 6 a.m. – 7 p.m. daily, including holidays. Please be aware that wait times may be long due to high call volumes. There is an option to get a call back rather than wait on hold.(Languages spoken: English and Spanish. Free interpretation available for all other languages.) TTY: Dial 711 and call 1-866-698-6155

Progress

- We ramped up to reach Governor Brown's target to administer 12,000 vaccinations a day and our plans to sustain that effort as we move forward.
- We have made significant progress in speeding up the administration of the vaccine. We streamlined the supply allocation process to get more doses to sites with the capacity to vaccinate large numbers of people each day.
- We plan to offer vaccinations to educators and people over 65 as soon as possible – despite our disappointment that the federal government has told us they cannot fully deliver on the doses they've promised Oregon.
- We all want vaccinations to go faster in Oregon, despite the fact that our vaccination data shows we're in line with most states – and ahead of all our neighbors.
- The changes we've made in the past few weeks to speed the pace of Oregon's COVID-19 vaccination effort -- particularly opening up the 1A audience to all health care workers -- has paid off.

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Challenges

- We have made a lot of progress and we have a long way to go. We are asking

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people in Oregon to be patient.

- COVID-19 vaccines have presented us with unprecedented difficulties. But, in the same way we are making changes in their lives to keep each other safe, our health care and public health systems are adapting to administer vaccines faster and to more people.
- Our ability to vaccinate a large number of people in Oregon depends on how many vaccines the federal government provides. Right now, there isn't enough for everyone..
- Last week we learned that we would not be receiving the vaccine reserves promised to us by the U.S. Department of Health and Human Services. This was disappointing. We are awaiting updates from the new administration and will move forward with them.
- We should have recognized that our well-tested and high-performing system for distributing flu vaccines would not translate to the demands of distributing the COVID-19 vaccines. We are rapidly building new systems and tools to administer vaccines and connect people to vaccination sites.
- Oregon isn't alone – as we climb the state rankings in the pace of distributing the vaccines, it becomes clearer and clearer that other states are struggling in similar ways.

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Priorities

- Together with health systems, pharmacies, hospitals, federally qualified health centers, primary care providers and local public health agencies, we are working fast to ensure everyone in Oregon can get a vaccine when they are eligible.
- We encourage everyone who's eligible to get immunized. And if you're not yet eligible, stay informed. Go to covidvaccine.oregon.gov to learn when you are eligible.
- It's not just important to give people more options to get vaccinated. We also need to tell them when, where, and how they can get immunized. Each day we are sharing more information and tools at covidvaccine.oregon.gov.
- This week we are focused on:
 1. Improving data reporting with ongoing support to local vaccination sites.
 2. Encouraging sites to quickly draw down their remaining inventory of doses.

3. Prioritizing our allocations of vaccine doses to high-volume, high-throughput sites.
4. Expanding vaccinations to people at highest risk in Phase 1A.

The numbers

- **Weekly:** Last week, Oregon added a total of 27,464 COVID-19 vaccinations to the state's vaccine registry.
- **Total:** Oregon vaccination sites have administered a total of 238,759 first and second doses of COVID-19 vaccines.
- **National context:** Oregon ranks:
 - 19th in the nation in vaccines distributed at 39%. The national average is 36%. We are ahead of our all our surrounding neighbors in Washington, California, Idaho and Nevada.
 - We are 30th in the nation in the percentage of our population vaccinated at 2.8%. This puts us ahead ahead of our neighbors in Washington, California, Idaho and Nevada.

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WHO can get vaccinated

- **Oregon is prioritizing people who are most at risk and hardest hit.** Health care providers have been receiving the first vaccinations, with a focus on staff who are at highest risk of exposure. Residents and staff in long-term care facilities are also among the first vaccinated. This is group 1A.
- While everyone within the 1A group will be vaccinated as soon as possible, there aren't enough vaccines yet. These logistics are in development. We encourage anyone in Phase 1A to get vaccinated as soon as you are able.
- OHA does not require proof that someone is in Phase 1A and doesn't plan to request verification from vaccinating providers. Vaccine providers may require proof before administering a vaccine. People will get proof they've been vaccinated.
- On Jan. 25, 2021, K-12 educators, early childhood educators and childcare providers will become eligible for the vaccine. This is group 1B. This is dependent on vaccine supply
 - We propose to vaccinate seniors in four waves:

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- **Wave 1:** Seniors who are 80+. This population represents approximately 30% of COVID-19 deaths in Oregon. This wave will be eligible for vaccination starting Feb. 8
- **Wave 2:** Seniors who are 75+ are eligible for vaccination starting Feb. 14
- **Wave 3:** Seniors who are 70+ are eligible for vaccination starting Feb. 28
- **Wave 4:** We would expand eligibility to all Oregonians 65+ are eligible for vaccination starting March 7

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- People in groups beyond Phase 1A and 1B will be sequenced by the work of the Vaccine Advisory Committee (VAC). When your turn comes will depend on how quickly vaccines come to Oregon.

Phase 1A December 12, 2020
Everyone in Phase 1, Groups 1,2,3 and 4 are currently eligible for the vaccine.

Phase 1B Beyond Date TBD
Who's getting vaccinated in Oregon next

Group 1

- Hospital staff with frontline patient care responsibilities
- Urgent care
- Skilled nursing and memory care facility healthcare personnel (HCP) and residents
- Tribal health programs
- Emergency medical services (EMS) providers and other first responders
- All health care interpreters and traditional health workers in any setting within Phase 1a

Group 2

- Other long-term care facilities, including all paid and unpaid HCP, all staff and contractors, including residents who meet the age requirements of:
 - Residential care facilities
 - Adult foster care
 - Group homes for people with intellectual and developmental disabilities
 - Other similar congregate care sites
- Hospice programs
- Mobile crisis care and related services

Group 3

- Individuals working in a correctional setting
- HCPs in outpatient settings serving specific high-risk groups
- Day treatment services
- Non-emergency medical transport (NEMT)
- Paid or unpaid caregivers (including parents or foster parents) of medically fragile children or adults who live at home
- Adults and age-eligible children who have a medical condition or disability who receive services in their homes

Group 4

- All other outpatient HCPs
- Other HCP who provide direct service to people with I/DD and other high-risk populations.
- Other public health settings, such as HCP serving WIC, or CBO's with direct or indirect exposures

People eligible: **400,000** approximately

Group 1

- Childcare providers, early learning and K-12 educators and staff
Eligible January 25, 2021

Group 2

- People 80 and older
Eligible February 8, 2021

Group 3

- People 75 and older
Eligibility date to be determined

Group 4

- People 70 and older
Eligibility date to be determined

Group 5

- People 65 and older
Eligibility date to be determined

Subsequent groups will be determined in coordination with the Vaccine Advisory Committee and shared on OHA's COVID-19 vaccine web page. These are examples of groups of people who may be included:

- Critical workers in high-risk settings — workers who are in industries essential to the functioning of society and substantially higher risk of exposure
- People of all ages with underlying conditions that put them at moderately higher risk
- People in prisons, jails, detention centers, and similar facilities, and staff who work in such settings
- General population

Educators: **105,000*** approximately
People over 65: **795,000*** approximately

Oregon Health Division of Public Health

OHU 10278 (01/15/2021)

* Oregon's vaccine supply is limited. It is estimated to take 12-15 weeks to vaccinate groups 1-5 of Phase 1B.

Commitment to equity and anti-racism

- As COVID-19 vaccines become available, OHA, with the Vaccine Advisory Committee will ensure the distribution process will be equitable and challenge the roles of power, privilege and racism.
- For now, vaccine doses will be given to everyone at no cost. OHA is consulting with Oregon's nine federally recognized tribes and conferring with the Urban Indian Health Program on COVID-19 vaccine issues that

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may impact the tribes (and the health of their members) who have chosen to receive the state vaccine allocation as part of decision-making regarding vaccine distribution.

- Using an equity framework, OHA is currently distributing COVID-19 vaccines in line with the phased approach informed by CDC’s Advisory Committee on Immunization Practices (ACIP).

WHEN people in Oregon can get vaccinated

- On our website (covidvaccine.oregon.gov), you will find:
 - A new personalized, interactive guide that tells you:
 - If you’re eligible to get a vaccine, based on your age and occupation
 - Where you can get a vaccine, based on your local county resources
 - Where you can get the facts about vaccines and answers to your vaccination questions
 - Next week, Oregonians will be able to call and be directed to vaccination events.
 - This call center will be available before Jan. 25, when we expand vaccination eligibility to teachers.
- We continue to manage our vaccine stocks to ensure that people who receive a first dose have their second dose set aside for them. You can be confident you will get your second dose.
- Our goal is to administer at least 12,000 vaccines per day in Oregon and to ensure that trusted, culturally responsive and accessible vaccination sites are available.

WHERE people in Oregon can get vaccinated

- Vaccines will be available through health care providers, local health departments and retail pharmacies.
- Oregon is activating Part B of the federal pharmacy partnership program (between the Centers for Disease Control and Prevention and Walgreens, Consonus and CVS) to serve additional long-term care facilities within Phase 1A. We anticipate this change will speed vaccinations to approximately 80,000 staff and residents.

- In February, we'll activate a federal pharmacy program that will enable eligible people to go to certain retail pharmacies to obtain a COVID-19 vaccination.
 - These allocations will be in addition to Oregon's state allocation.
 - We'll continue to pursue state-level partnerships to expand retail pharmacy options for Oregonians.

WHY should people in Oregon get vaccinated

- Vaccination is the safest, most effective and most reliable way to keep yourself, your family and your community healthy and safe from COVID-19.
- COVID-19 vaccines are 95% effective and have undergone rigorous safety testing. These clinical trials included large numbers of people from Black/African American, Hispanic/Latino and other communities of color that are systemically affected by the COVID-19 pandemic.
- Vaccination gives us hope that the pandemic will end, but in the meantime, we need to continue safety measures to keep the virus from spreading: wear a mask, physically distance from others, wash your hands, avoid gatherings and stay home when you're sick.

WHAT to know about vaccine allocation

- Oregon receives vaccine shipments weekly, which are distributed throughout the state. As we go forward, we will have more outlets for people to get the vaccine, such as local public health departments and eventually pharmacies, increasing the pace of vaccination.
- We are working with pharmacy partners to finalize a facility list to include: adult foster homes for older adults, adults with disabilities, adults experiencing behavioral health issues, and people with intellectual and development disabilities (I/DD), as well as group care homes for people with I/DD and behavioral health residential treatment homes and facilities.
- The vaccine provider sites around the state have up to 72 hours to report vaccines administered. This means that the number of vaccines administered on a given day may be higher than early reports indicate.

Orders & shipments

OHA is ordering second dose allocations (boost doses) on behalf of all sites. Orders automatically ship to hospitals to mirror their prime dose allocations. OHA will eventually switch to a “pull” method where sites will have to order their own second doses.

OHA will communicate the timing of this switch in advance. Second doses of Pfizer vaccine will be delivered three weeks after the first-dose shipments and Moderna four weeks after.

Allocation method

CDC allocates doses to states pro-rata (based upon the percentage of the U.S. population they represent). For Oregon, that is about 1.28%. Oregon is then allocated on a weekly basis about 1.28% of the available COVID-19 vaccines produced by all manufacturers. The Moderna COVID-19 vaccine deliveries in Oregon began Dec. 21 and included doses to the six Tribes and the Urban Indian Health program that are participating in the state distribution program.

Still have questions?

211 is a statewide, multi-lingual service that can answer questions about the COVID-19 vaccine in Oregon, including when and where people can access their vaccination. Call 211 or visit [211info.org](https://www.211info.org). 211 is open to the public from 6am – 7pm every day, including holidays.

- o **Go to** covidvaccine.oregon.gov
- o **Text** ORCOVID to 898211 to get text/SMS updates (English and Spanish only)
- o **Email** ORCOVID@211info.org (All languages)
- o If you can't get your question answered on the website, by text, or by email.
 - **Call** the Call Center at 211 or 1-866-698-6155--open 6 am – 7

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pm daily, including holidays. Please be aware that wait times may be long due to high call volumes. There is an option to get a call back rather than wait on hold. (Languages spoken: English and Spanish. Free interpretation available for all other languages.) TTY: Dial 711 and call 1-866-698-6155

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- Questions about enrolling as a COVID-19 vaccination provider: Vaccine.ProviderEnroll@dhsosha.state.or.us
- Visit the OHA COVID-19 Vaccine Website: <http://healthoregon.org/covidvaccine>
- Spanish: <http://healthoregon.org/vacunacovid>
- COVID-19 Vaccine Provider toolkit: <http://bit.ly/COVID19-Vaccine-Provider-Toolkit>
- **Document accessibility:** For individuals with disabilities or individuals who speak a language other than English, OHA can provide information in alternate formats such as translations, large print or braille. Contact the Health Information Center at 1-971-673-2411, 711 TTY or COVID19.LanguageAccess@dhsosha.state.or.us

Data is being updated on a daily basis please check our [website](#) for the latest information.

Framework for counties Q&A

The new risk framework will help Oregonians get through the winter and spring safely. COVID-19 vaccines will arrive soon. But until then, and until we reach herd immunity, we will have to continue these mitigation measures:

- Stay home if you're sick
- Wear a mask or face covering
- Watch your distance
- Wash your hands frequently

Q: Why is Oregon changing from phases to the new framework?

A: The phases did not allow a lot of movement. The new framework is more adaptable.

Q: How does the new framework work?

A: To understand how the new framework works, it's helpful to know three things:

1. The new framework is based on the [school metrics data](#).
2. Oregon's 36 counties are divided into three groupings for the framework:
 - Large counties with more than 30,000 residents
 - Medium counties with between 15,000 and 30,000 residents
 - Small counties with fewer than 15,000 residents
3. The new framework divides risk into four categories based on the spread of COVID-19:
 - Lower Risk
 - Moderate Risk
 - High Risk
 - Extreme Risk

Q: How do counties get placed into risk categories?

A: For large counties (population greater than 30,000), the positivity rate is one of two metrics considered to calculate the risk category. The other factor is the case rate per 100,000. The overall determination reflects the most restrictive measure. So, for example, if Josephine County is in the Moderate Risk category for rate and the Extreme Risk category for percent positivity, then the county would fall into the most restrictive category, the Extreme Risk category.

For medium counties (population 15,000 to more than 30,000), the positivity rate is one of two metrics considered to calculate the risk level. The other is the number of cases. The overall determination reflects the most restrictive measure.

For small counties (population less than 15,000), only the number of cases is considered to determine the risk category.

Q: How often can a county move from one risk category to another?

A: The school metrics data is pulled every Monday and used to determine county risk categories. You can find it posted on the [OHA COVID-19 website](#).

The first week is the “warning week.” There is no movement of counties and no changes on the risk level map on the OHA and [Governor’s office](#) websites.

The second week is the “action week.” The data is pulled again on Monday. The Governor’s office notifies counties if they are likely to move from one risk category to another based on the new data. The Governor’s office also sends a press release about any changes. The county formally moves into the new risk category at the end of the week.

Contact tracing

Contact tracers call people who may have had contact with someone who tested positive for COVID-19. Go to OHA’s [Contact Tracing](#) website to learn what to expect if a contact tracer calls.

Masks and face coverings

Face covering guidance

In Oregon, face coverings are required statewide, for all people who are five (5) and over in indoor spaces open to the public, and outdoors when at least six (6) feet of distance cannot be maintained between others outside of an individual’s household.

- People are required to wear face coverings in all private and public workplaces including classrooms, offices, meeting rooms and workspaces, unless someone is alone in an office or in a private workspace.
- Face coverings are also required in outdoor and indoor markets, street fairs, private career schools and public and private colleges and universities.

- OHA’s revised guidance also recommends wearing a face covering instead of a face shield, except in limited situations when a face shield is appropriate such as when communicating with someone who is deaf or hearing impaired and needs to read lips.
- Face shields can be very good at blocking droplets that individuals release, but they are not as effective at limiting the release of aerosols that can go around the shield.
- For more information about face coverings and face masks [go here](#).
- **Some people are unable to wear face coverings for medical reasons.** When a person with a disability is unable to wear a face mask for medical reasons, they should be offered a reasonable accommodation. Medical exemptions, though, are not permitted.
- Reasonable accommodation examples may include a grocery store offering personal shopping for someone who cannot wear a face mask, or a medical appointment conducted over the telephone.
- For more information on ADA COVID-19-related requirements, please read the [Disability Issues Brief on the ADA and Face Mask Policies](#).

OHA has a [webpage on face covering and masks](#). The webpage includes information on face covering requirements in Oregon, FAQs, social media cards and other helpful information.

- Cloth face coverings help prevent people who have COVID-19 from spreading the virus to others.
- Wearing a cloth face covering will help protect people around you, including those at higher risk of severe illness from COVID-19 and workers who frequently come into close contact with other people (e.g., in stores and restaurants).
- Cloth face coverings are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings.
- The spread of COVID-19 can be reduced when cloth face coverings are used along with other preventive measures, including physical distancing, frequent handwashing, and cleaning and disinfecting frequently touched surfaces.

How to safely care for your mask

To minimize the risk of infection when removing a face mask:

- Wash hands before and after touching your mask, and
- Wash cloth masks daily.
- Masks should never be worn when wet or damp. After laundering, make sure your face covering is completely dry before wearing.

Here are some reminders about how to safely remove your face covering:

- Untie the strings behind your head or stretch the ear loops. Handle only by the ear loops and ties. Fold outside corners together.
- Be careful not to touch mouth, eyes or mouth when removing.
- Place covering in washing machine or washtub. Throw away if covering is disposable.
- Wash hands immediately.

OHA testing resources

AT OHA's [COVID-19 testing](#) page, -you'll find:

- A test site locator
- Information on understanding your test results
- Cost and insurance information

Questions about testing? Visit our [FAQ](#)

Testing data

Testing totals for the prior week, test positivity statewide for the prior week, and cumulative test positivity statewide are available at [this link](#).

Oregon's COVID-19 Weekly Report Summary gives details on the number of tests administered and the percentage of tests that are positive. [View all COVID-19 Weekly Reports here](#).

OHA's most recent testing guidance for healthcare providers can be [found here](#).

Public health

Outbreak information

Data and reports are available on [OHA's webpage](#).

- We will continue to gather information about COVID-19 and share what we learn. Our goal is to inform the public and share how, as a community, we can limit the effects of COVID-19. To do this, OHA will share:
 - The number of positive (lab evidence of COVID-19 disease) and negative (no evidence of disease) tests. Positive test results will be reported as received.
 - Total number of people who have died from COVID-19 in Oregon.
 - Aggregated demographic information on cases.
- You can find up to date numbers on cases of COVID-19 in Oregon at healthoregon.org/coronavirus or by calling 211.
- Oregon has cases that have no known link to someone who has COVID-19 or travel to an affected region. This is often referred to as community spread.

Response efforts

- We continue to work with our local trusted community partners like faith communities, clinics, hospitals, schools, tribes, non-profits and other groups to adjust our COVID-19 response strategies to meet community need.
- OHA has activated its agency operations center and has a response team dedicated to COVID-19.
- OHA and our partners are reviewing cases to identify people who had close contact with an ill person, so that we can take appropriate actions.
- The Oregon State Public Health Lab is conducting laboratory testing of prioritized samples sent to us, using CDC's and OHA's guidance.
- We provide health resources, guidance, and technical assistance to partners as needed to support their response to COVID-19.

- Governor Kate Brown’s #StayHomeSaveLives order was announced on March 23rd. By following the executive orders, researchers estimate that together we have prevented as many as 70,000 cases and 1,500 hospitalizations.
- **Governor Brown and OHA launch Safe + Strong outreach campaign in 12 languages**

On April 23, Governor Brown and Oregon Health Authority launched the [Safe + Strong campaign](#). Safe + Strong supports communities in Oregon through partnerships with community organizations and outreach.

Many people face barriers to staying healthy. Many face economic and systemic barriers to following the “Stay Home. Save Lives.” executive orders. These barriers mean many people in Oregon do not have equal opportunity to follow the orders. This includes seasonal and migrant farmworkers, immigrants, refugees, communities of color, non-English speaking people, hourly wage essential workers, people with chronic health conditions, and older people. The Safe + Strong campaign includes a website with culturally relevant information in 12 languages.

For more information, visit safestrongoregon.org.

Oregon COVID-19 daily update

- Oregon Health Authority releases a [daily update](#), which is produced jointly with Oregon Office of Emergency Management. It details the overall picture of the COVID-19 response across government agencies.
- The data reflects the best picture of the COVID-19 situation over the past 24 hours and is updated daily.

Pediatric COVID-19 data report

OHA updates pediatric COVID-19 data

- OHA has updated [a report](#) analyzing the scope of pediatric COVID-19 cases in Oregon since the beginning of the pandemic.
- Of confirmed and presumptive cases in Oregon, 4,901 – 11.3 percent – have been pediatric patients, defined as people under age 18.
- The pediatric age group most likely to be infected is people 12-17 years old.
- The report notes that while pediatric case counts are higher, young people are still far less likely than adults to develop severe symptoms. Only 1.3 percent of pediatric patients have been hospitalized due to COVID-19, compared to 8 percent of adults.

View the full report [here](#).

Confidentiality

- In the course of our work in public health, the Oregon Health Authority (OHA) and local public health authorities are entrusted with sensitive health information.
- Protecting this information is required by law except in very special circumstances. It promotes our ability to conduct effective public health inquiries, protect the public's health and maintain the confidence and cooperation of individuals participating in public health inquiries.
- Under Oregon Revised Statute (ORS) 433.008(1), any information obtained by OHA or a local public health administrator in the course of an inquiry of a reportable disease or disease outbreak is confidential. Such information is not subject to disclosure under the public records law.
- OHA may, in limited circumstances, disclose reportable disease or disease outbreak information to state, local or federal agencies authorized to receive the information under state law or federal law, but OHA and local public health administrators may only release the *minimum amount of information necessary to carry out the purpose of the release*. ORS 433.008(2)(a) and (4).
- OHA may release statistical compilations that do not identify individual cases or sources of information; in that spirit, on a regular basis OHA will release a standard set of information about COVID-19 cases, persons under monitoring and persons under inquiry.
- Some local health authorities and healthcare providers are bound by the Health Insurance Portability and Accountability Act (HIPAA). OHA is sensitive to our partners' limitations and obligations to protect patient information under HIPAA.

OHA's Public Health Division itself is not HIPAA-bound; we protect patient information shared with us based on Oregon statutory obligations and to maintain the cooperation of patients and positive working relationships with our healthcare partners.

COVID-19: Disease information

This [comprehensive page from the CDC](#) includes information on:

- The symptoms of COVID-19
- How it is spread
- Ways to protect yourself from becoming infected
- What to do if you or someone in your household gets sick

What to do if a parent or a sole caregiver has COVID-19

If a child's parent or caregiver is sick with COVID-19, follow the steps below to help protect the child from infection.

Older children

The child should avoid physical contact with the sick parent or caregiver until all sick people have ended their home isolation. For the child to safely have no interaction with the parent or caregiver, the child should be old enough to legally be home alone and mature enough to care for themselves.

Younger children

If the parent or sole caregiver will be caring for the child while sick, they should contact the child's healthcare provider for advice on how to best protect the child from infection.

Young children should be supervised at all times.

If the parent or the sole caregiver is too ill to care for the child, they should see if there is a caregiver outside of the home with whom the child can stay. The caregiver should not be someone who is at higher risk for severe illness from COVID-19, as the child has likely been exposed to the virus. The caregiver will need to help the child quarantine for 14 days since they last had close contact (less than 6 feet away from someone for more than 15 minutes) with the sick person.

Children staying in the home with the sick parent or caregiver

If the child will stay in the home with you (the parent or caregiver who is sick), you should:

- Wash your hands frequently with soap and water for at least 20 seconds. If soap and water is not available, use hand sanitizer containing at least 60% alcohol and rub your hands together until they are dry.
- Try to stay 6 feet away from the child, if possible and if safe.
- Wear a cloth face covering if you are in a room where the child may come into contact with you.
- Note that cloth face coverings should not be placed on:
 - Children younger than 2 years old
 - Anyone who has trouble breathing or is unconscious
 - Anyone who is incapacitated or otherwise unable to remove the cloth face covering without assistance
- Increase ventilation by opening a window in a room that you are in.
- When you need to bring items to the child, disinfect the items before giving them to the child.
- However, do not disinfect food when you need to bring food to the child.
- Watch for symptoms.
- During this time the caregiver should monitor themselves for symptoms.
- Check the child's temperature twice a day and watch for [symptoms](#) of COVID-19, such as fever, cough or shortness of breath or [symptoms specific to children](#).*
 - If the child does develop symptoms, call the child's healthcare provider for medical advice and follow the steps for [caring for someone who is sick](#).
- If possible, the child should stay away from people who are at [higher-risk](#) for getting very sick from COVID-19.

Children staying outside the home with a temporary caregiver

If the child will stay outside of their own home with a temporary caregiver, the new caregiver should help the child to [quarantine](#) and do the following:

- The child should stay inside the caregiver's home until 14 days after their last close contact with the sick person.
- Watch for symptoms.
 - During this time the caregiver should monitor themselves for symptoms and practice everyday preventive actions.

- Check the child's temperature twice a day and watch for symptoms of COVID-19, such as fever, cough or shortness of breath, or symptoms specific to children.*
- If the child does develop symptoms, call the child's healthcare provider for medical advice and follow the steps for caring for someone who is sick.
- If possible, the child should stay away from people who are at higher-risk for getting very sick from COVID-19.

The caregiver should then quarantine for 14 days after the last day the caregiver had contact with the sick child.

*COVID-19 symptoms can look different in different people. For many people, being sick with COVID-19 would be a little bit like having the flu. People can get a fever, cough, or have a hard time taking deep breaths. Most people who have gotten COVID-19 have not gotten very sick. Only a small group of people who get it have had more serious problems.

Cleaning and disinfecting at home

For detailed information about cleaning and disinfecting at home see [CDC's guidance at this link](#).

How to self-isolate and how to quarantine

With a large increase in cases across the state, more people are being asked to quarantine and self-isolate to prevent the spread of COVID-19. Quarantine keeps someone who was exposed to a person with COVID-19 away from others. Isolation keeps someone who is sick or tested positive for COVID-19 without symptoms away from others, even in their own home.

More resources:

- [Learn more](#) about quarantine and how to connect with resources.
- [Learn more](#) about how to self-isolate.
- If you must quarantine or isolate because of COVID-19 and don't have paid time off, help is available. The COVID-19 Temporary Paid Leave Program provides a \$120 per day (up to \$1,200) payment to workers in Oregon who

are required to quarantine due to COVID-19 exposure, who do not qualify for COVID-19-related paid sick leave or do not have access to paid sick leave. To see if you are eligible [take this quiz](#) or visit [gov/covidpaidleave](#).

How to discontinue home isolation after illness

People with COVID-19 who have stayed home (home isolated) can leave home under the following conditions**:

- If they have not had a test **to determine if they are still contagious, they can leave home after these three things have happened:**
 - They have had no fever for at least 24 hours (that is one full day of no fever **without** the use of medicine that reduces fevers)
AND
 - other symptoms have improved (for example, symptoms of cough or shortness of breath have improved)
AND
 - at least 10 days have passed since their symptoms first appeared
- **If they have had a test** to determine if they are still contagious, they can leave home after these three things have happened:
 - They no longer have a fever (**without** the use of medicine that reduces fevers)
AND
 - other symptoms have improved (for example, symptoms of cough or shortness of breath have improved)
AND
 - they have received two negative tests in a row, at least 24 hours apart. Their health care provider will follow CDC guidelines.

People who DID NOT have COVID-19 symptoms, but tested positive and have stayed home (home isolated) can leave home under the following conditions**:

- **If they have not had a test** to determine if they are still contagious, they can leave home after these two things have happened:
 - At least 10 days have passed since the date of their first positive test
AND

- they continue to have no symptoms (no cough or shortness of breath) since the test.
- **If they have had a test** to determine if they are still contagious, they can leave home after:
 - They have received two negative tests in a row, at least 24 hours apart. Their health care provider will follow CDC guidelines.

Note: if they develop symptoms, follow guidance above for people with COVID19 symptoms.

For ALL people

- When leaving the home, **keep a distance of 6 feet from others** and **wear a cloth face covering** when around other people.

**In all cases, follow the guidance of your health care provider and local health department. The decision to stop home isolation should be made in consultation with a healthcare provider and state and local health departments. Some people, for example those with conditions that weaken their immune system might continue to shed virus even after they recover.

[Find more information on when to end home isolation.](#)

Staying well

It is important to keep your body resilient:

- Eat a healthy diet.
- Exercise.
- Get plenty of rest.
- Embrace your spiritual health in a way that works for you.
- Stay up to date on routine vaccines. This includes the flu vaccine. Staying active is good for your mind and your body. Outdoor exercise, alone or with your household members, can be a fun way to relax and can help combat sad or anxious feelings. You can also exercise in your own home, alone or with online classes like yoga or Zumba.

- Limit alcohol to stay healthy and keep your immune system strong. Drinking alcohol can also lead to feelings of depression. Seek help if you find that it is difficult to limit your drinking.
- Substance Abuse and Mental Health Services Administration (SAMHSA) has a National Helpline, or TTY: 1-800-487-4889, that is a confidential, free, 24-hour-a-day, 365-day-a-year, information service, in English and Spanish for individuals and family members facing mental and/or substance use disorders. This service provides referrals to local treatment facilities, support groups, and community-based organizations. Callers can also order free publications and other information.
- Health care procedures such as scheduled surgeries may be postponed because of COVID-19. Contact your medical provider if you are unable to practice your daily routines because of physical or mental health reasons.
- Try to quit smoking and vaping. Initial research shows that people who smoke may be more likely to develop serious complications from COVID-19. If you'd like to quit, free help is available at 1-800-QUIT-NOW or www.quitnow.net/oregon.

Child wellness

- This is a stressful time for you and your children. Your healthcare provider is here for you.
- Child healthcare clinics have made their offices safe to see sick and well patients for appointments and can answer your questions. Call them.
- Children's well visits are still important. Delaying vital preventive or illness care may create problems for kids in the short and long term
- Contact your health care provider's office for newborn, child, and adolescent medical and behavioral health appointments for urgent, preventive, chronic, and specialist issues.
- Vaccines protect your child from preventable diseases. It is important to stay on schedule with your well child visits.

Many patients love the convenience of telemedicine. You can talk to your health care provider from your own home by phone or video conference.

Immunization

Flu

- OHA is urging everyone 6 months and older to get an annual flu shot, especially as COVID-19 cases increase in Oregon, and the pandemic persists.
- "Flu vaccines are safe and effective, and with ongoing COVID-19 outbreaks, it is more important than ever to get a flu shot to keep the people around you healthy," said Paul Cieslak, M.D., public health physician at the Oregon Health Authority.
- While it is unclear how the pandemic will affect the flu season, OHA and the Centers for Disease Control and Prevention (CDC) are preparing for COVID-19 and seasonal flu to spread at the same time.
- A "twindemic" of two potentially fatal viruses circulating at the same time could burden the state's health care system and result in many illnesses, hospitalizations and deaths, Cieslak said.
- Getting a flu vaccine is something easy people can do to protect themselves and their loved ones and help reduce the spread of flu this fall and winter.
- Flu vaccine is available from health care providers, local health departments and many pharmacies. The vaccine is free or low cost with most health insurance plans. To find a flu vaccine clinic, visit <http://www.flu.oregon.gov/> and use OHA's flu vaccine locator tool.
- Getting vaccinated is the best way to prevent the flu. Additional ways Oregonians can help prevent the spread of flu include:
 - Staying home from work or school when you are sick and limit contact with others.
 - Covering your nose and mouth with a tissue when you cough or sneeze.
 - Washing hands frequently with soap and water. Use an alcohol-based hand rub if soap and water are not available.
 - Avoiding touching your eyes, nose and mouth.
 - Cleaning and disinfecting surfaces and objects that may have flu germs on them.
 - Avoiding getting coughed and sneezed on.
- The flu vaccine may take up to two weeks to become effective, so getting it earlier in the season is ideal.

- Check out these [infographics](#) about flu shots and share them with your friends and family on your Facebook and Instagram accounts.

Mental and behavioral health

Safe + Strong: Community Resource Guide

COVID-19 has changed our lives in many ways. If you're struggling, you're not alone. There's support in your community. The Community Care Resource Guide is a place where you can find culturally sensitive resources created for and by your community. Join a support group or find a counselor where you can feel safe and understood. For affordable resources and care that are right for you and those you love, visit the [Community Care Resource Guide](#).

For more information on mental health resources, check out the [Safe + Strong website](#).

Safe + Strong Helpline

Oregon-based nonprofit [Lines for Life](#) and OHA have launched the Safe + Strong Helpline at 800-923-4357 (800-923-HELP). The line offers free, 24-7 emotional support and resource referral to anyone who needs it – not only those experiencing a mental health crisis.

The Safe + Strong Helpline is a response to the need for emotional support around disasters like COVID-19 and wildfires and was funded by the CARES Act. Callers are routed to a counselor who can provide emotional support, mental health triage, drug and alcohol counseling, crisis counseling or just connection.

OHA has also expanded its Safe + Strong education and outreach campaign to include behavioral health resources. A [behavioral health landing page](#) offers mental and emotional support information and resources as well as guidance for how to have conversations with loved ones who may be struggling.

Resources:

- Safe + Strong Helpline: 800-923-4357 (HELP)

- Safe + Strong: www.safestrongoregon.org/
- National Suicide Prevention Lifeline: 800-273-8255

Self-care

Stay home, stay healthy, stay connected. People in Oregon have done a great job and it is working.

Stay home

- You can help. Physical distancing can be challenging, but by staying home you are helping to control the spread of this illness and protect people who are more vulnerable. You are showing how much you value and love your community when you do this.

Stay healthy

- During this time of increased uncertainty and disrupted routines, it's also important to care for yourself physically and mentally.
- Our lives have been disrupted in ways both large and small. Be gentle with yourself, adjust your expectations and allow yourself time to get used to the new normal.
- Some additional tools that some have found helpful to cope with their feelings during this time of uncertainty include:
 - Guided relaxation, meditation, or mindfulness exercises
 - Physical exercise
 - Writing in a journal
 - Creative expression like singing, writing, making music or art

Stay connected

- It's natural to struggle with feelings of sadness, frustration, fear, or anxiety during this time of increased isolation. If you feel this way, reaching out to others can help. Try to build some social connection into your regular routine – it's best not to wait for sadness or loneliness to set in, since sometimes that can make it harder to reach out.
- Use whatever way you can to stay in touch with others (phone, smartphone, tablet or computer) on a daily basis. Isolation is hard for

many. Financial assistance for a mobile phone is available at Oregon Lifeline 1-800-848-4442 or on the [Oregon Lifeline webpage](#) for more information.

- People around the world are finding new ways to have fun with friends, family members, and even people they don't know from a distance. Some ways to do this include:
 - Playing online games with others using smartphones, gaming consoles or computers
 - Holding virtual play dates or hangouts
 - Sharing videos of themselves singing or playing musical instruments
 - Facebook live events
 - Online story time
 - Virtual powwows
 - Online talent shows and dances
- You can help others while you help yourself: check in regularly with friends and neighbors to offer support, especially to those who might be struggling more during this time.
- Older adults, people who experience disabilities, parents with young children, and those living with mental health or substance abuse challenges might be feeling especially isolated right now. If there is someone in your life who you think might need a little extra connection, reach out to them.

Suicide and suicidal feelings

- We can expect this time of increased stress, economic impacts, and prolonged change of “normal” routines to impact people’s mental health. Sometimes isolation, anxiety and fear that we experience can feel confusing and overwhelming and may lead to thoughts of suicide.
- **Suicide is not inevitable, it is preventable** – there are steps we can take to support each other and increase safety for ourselves and those around us.

- COVID-19 has changed the way people access support and resources. Resources are still available, but new challenges exist because of requirements for physical distance. Overall strategies to protect against suicide include increasing social connectedness, increasing feelings of belonging, and encouraging people to engage in their community.
- What you can do as a person supporting others:
 - Stay socially connected to friends or family, especially those who have or are experiencing thoughts of suicide
 - Listen without judgement, take all talk of suicide seriously, let them know that you care about them
 - Offer to help the person connect to resources
- What you can do yourself:
 - Remind yourself that you are not alone, and help/hope is available.
 - Reach out to positive friends and family.
 - Name how you are feeling – its ok to not feel ok.
 - Find ways to be involved in your community and help others.
 - Name and do the things that bring you joy, help you feel calm (examples: go for a walk, read a book, journal, practice mindfulness, getting plenty of sleep, create a routine with wellness practices in it).
 - Have a plan for ways you can support yourself if/when thoughts of suicide come up for you. (Example: have crisis number and numbers for main support people in an easily accessible place).

We recognize some groups find it harder to get the support that they need. OHA is doing what we can to identify and address those barriers and adapting our work to support people who might be experiencing thoughts of suicide during this time.

Risk groups that we've identified:

- Families with young children
- People experiencing homelessness

- People living in rural communities
- Black, indigenous, people of color
- People in recovery from substance use or problem gambling disorders
- People whose first language is not English
- Immigrant and Refugee communities
- People who experience disability
- People with limited incomes
- People experiencing social isolation (seniors, people who live alone)
- Veterans
- LGBTQ+ community (especially youth)

Here are some ways that OHA is responding and working towards solutions:

- OHA is monitoring suicide specifically during the COVID-19 pandemic.
- Lifespan suicide prevention team has been embedded into the COVID-19 response structure.
- Engaging with behavioral health consumers and other partners to identify barriers and address needs as they arise.
- Increasing capacity for online suicide prevention training for providers and community members.
- Created a remote suicide risk assessments and safety planning line to support K-12 schools.
- Adapting our existing suicide prevention efforts to meet the needs during this unique time.
- Redirecting funds to respond to identified barriers.
- Working with local, state and national partners to align strategies and leverage resources.

Help is available

- If you're struggling with your behavioral health, need support, or just want someone to talk to, you are not alone. Help is available, please reach out. Find resources in the behavioral health section of [the OHA website](#).
- If you need behavioral health services, telehealth care is available. Your health care providers may provide care to you using telephone or video platforms. This way, you can get the care you need while staying home. Contact your care provider or your health plan to learn more.
- Any aging adult who is experiencing loneliness, isolation, depression or anxiety can benefit from a confidential phone call with our Senior Loneliness specialists. Sometimes knowing there is someone who cares and wants to listen can be of great help. Follow [this link](#) for more information on the Senior Loneliness Line.
- Resources
 - Lifeline number: 1-800-273-8255 or online chat
 - Spanish Lifeline: 1-888-628-9454 or online chat
 - Crisis Line for Veterans: 1-800-273-8255, online chat or text 838255
 - Visit OHA website for local county crisis supports
 - Senior Loneliness Line: 503-200-1633 or <http://seniorlonelinessline.org/>

Child and adolescent behavioral health

What parents/caregivers can do to help

Children often react to stressful events differently than adults. How the child in your life reacts will vary by age, their previous experiences and how the child typically copes with stress. Here are some signs of stress in different age groups:

- Preschool Age Children:
 - Crying and/or screaming
 - Afraid to be separated by parents or caregivers

- Not eating and/or losing weight
- Having nightmares
- Elementary School Age Children:
 - Feeling guilt or shame
 - Trouble concentrating
 - Not sleeping well
- Middle and High School Age Children:
 - Feeling depressed or alone
 - Harming themselves
 - Abusing alcohol or drugs
- Caregivers can help children by staying calm and reassuring them. Talk to children about what is happening in a way they can understand. Keep it simple and appropriate to each child's age.
- Provide children with opportunities to talk about what they are experiencing. Encourage them to share their concerns; ask questions.
- Help children find age-appropriate actions they can take related to the event. For example, have them help an older family member or friend feel connected through a phone call or virtual video call.

Tips for safety and resilience

These tips to promote resilience and maintain safety during this stressful time have been compiled by a group of Oregon Health & Science University health care providers becoming Child & Adolescent Psychiatrists.

Remember, children follow the lead of their parents. They look to you to see if they should be afraid, concerned, confident, calm or carefree. You can set the stage for their response to be concerned and confident by taking a moment to check in with yourself before you check in with them.

Consistency and structure can help establish a sense of normalcy and be calming.

- Try to establish a simple routine for your family in 60- or 90-minute chunks.
- Get your children involved in the planning process to give them a sense of control.
- Consider including routine mealtimes and consistent bedtimes and wake up times.

- Physical activity has been shown to combat symptoms of anxiety and depression.
 - Taking regular breaks to go outside for fresh air and exercise is great for mental health.
 - Look for free online resources for youth-focused at-home workouts, such as [Fitness Blender Kids Workout](#), a 25-minute workout for kids at home.

Relearn how to be present with your family.

- Being present and available for your family can be the best way to support and help during this stressful time.
- Consider working on tasks or projects alongside your children and set aside time to offer your family your full and undivided attention.

Maintain technologic well-being.

- The key to healthy screen use is awareness and open conversations with your children.
- Consume news judiciously from reputable journalism organizations, the [Oregon Health Authority](#) or the [Centers for Disease Control and Prevention](#).
- Participate in technology alongside your children, for example by engaging with them via social media apps or video games they frequently use.

Safety and suicidal feelings

For those who experience or are at risk of experiencing suicidal thoughts:

- **Keep your children safe! It only takes a moment for someone to hurt themselves in a temporary moment of despair or anger.** Restrict access to lethal means in your household - it has been proven to save lives!
 - Keep over-the-counter and prescription medications in a medication lockbox or locked cabinet.
 - Ensure firearms are kept in a gun safe with a trigger lock and store ammunition separately.

- Alcohol and other mind-altering substances can impair judgement and lower inhibitions.
 - Consider removing these from the home or keeping them in a locked cabinet.
- Sharps such as knives, razor blades, and scissors are frequently used to engage in self-injurious behaviors.
 - Limit access to these items when youth are unsupervised.
- Develop a safety plan with your child, such as this one: [Patient Safety Plan Template](#)
 - Discuss warning signs, coping strategies, and healthy activities that can distract your child from thoughts of self-harm when they do occur.
 - Have a list of names and contact information that your child can reach out to for distraction or help when needed.
- Entirely removing access to technology as a consequence can be very isolating for your child.
 - Cutting off a lifeline to a teen’s friends can result in an emotional backlash and disruption in the parent-child relationship.
 - When a lapse in judgement is related to phone use, ask your child about the behavior and consider limited privileges targeted to the problematic behavior.
 - Aim to teach your children to manage their own relationship with technology.

Help is available

- Find more resources and learn more about how to support children of all ages by visiting [CDC’s Helping Children Cope](#) website.
- National Child Traumatic Stress Network (NCTSN) offers a [Parent/Caregiver Guide to Helping Families Cope](#).
- [YouthLine](#) offers teen to teen crisis help with both a phone line and a texting support line through Lines for Life. Teens respond from 4:00 to 10:00 PM Monday through Friday. Adults are available 24 hours a day, 7 days a week.
 - Call 1-877-968-8491

- Text teen2teen to 839863

Away from home

Running essential errands

If possible, continue to stay home. Only run errands that are necessary. It may help to make a list ahead of time to make sure you don't have to return to the store or business sooner than planned.

If you need to go to the supermarket, the bank or to run an errand the [CDC offers detailed guidance](#)

Transportation

- Public transportation should be reserved for essential workers and essential travel. When taking public transportation maintain 6 feet between yourself and others, avoid touching your eyes, nose and mouth, cover coughs and sneezes with a tissue or your elbow, and wash your hands after riding.
- When riding public transit, an individual must wear a face covering unless the individual:
 - Is under two years of age.
 - Has a medical condition that makes it hard to breathe when wearing a face covering.
 - Has a disability that prevents the individual from wearing a face covering.
- If you need to transport someone in your vehicle remind passengers of the need to "cover their cough" and any passenger with a cough illness should wear a mask. Wipe down surfaces afterwards with an approved disinfectant.

Detailed information on transportation is available on the [CDC webpage](#).

Travel

New travel restrictions

- To fight the rapid spread of COVID-19, Oregon Governor Kate Brown, Washington Governor Jay Inslee, and California Governor Gavin Newsom issued travel advisories urging visitors entering their states or returning home from travel outside these states to self-quarantine.
- The travel advisories urge against non-essential out-of-state travel, ask people to self-quarantine for 14 days after arriving from another state or country, and encourage residents to stay local.
- Oregon's travel advisory does not apply to people who cross state borders for "essential travel" which includes travel for work, study, critical infrastructure support, economic services, supply chains, health, immediate medical care and safety and security.

For more information on traveling during the pandemic see the [CDC website](#).

How to stay safe if you must travel

Before you go

- Pack alcohol-based hand sanitizer (containing 60-95% alcohol) and cleaning supplies.
- Bring a face covering to wear in public places (and pack a couple of extras).
- Prepare food and water for your trip to help limit having to go into stores along the way.
- When booking a room online, make sure you know what their COVID safety precautions are or call and ask.

Along the way

- Make sure to wear your face covering when stopping for gas, food or bathroom breaks.

- Maintain physical distancing when making stops.
- Wash your hands with soap and water for at least 20 seconds, especially after you have been in a public place, after touching surfaces frequently touched by others, after blowing your nose, coughing or sneezing, and before touching your face or eating. If soap and water aren't available, use hand sanitizer.

When you get there

- Stay at least 6 feet apart from other people.
- Avoid crowded places.
- Avoid touching your eyes, nose and mouth with unwashed hands.
- If you're staying in a hotel, consider limiting or opting out of daily housekeeping service to reduce the number of people entering your room.

A few tips for flying

- Try to limit contact with frequently touched surfaces like kiosks, touchscreens and turnstiles, handrails, restroom surfaces and elevator buttons.
- Try to limit your exposure to others in the airport.
- Wear your mask in the airport and during the flight.
- Continue to practice good hand hygiene.

Food, rent and unemployment

Many of us need support accessing food right now, and there are new and expanded resources to help meet these needs. To make it easier to see what resources are available, the Department of Human Services has developed a new website to help connect people in Oregon with:

- Local school meal programs

- Food banks and pantries
- Meals for older community members
- Applications for food assistance programs

You will also find downloadable flyers about Oregon's food resources in 11 languages. Go to needfood.oregon.gov or call 211.

Financial support available to replace meals children usually get at school.

The Department of Human Services (DHS) and the Oregon Department of Education (ODE) announced that children eligible for free or reduced-price meals will get cash benefits for the meals they would have received at school.

Households can receive \$5.70 per child for each normal school day for the months of March, April, May and June. This is the equivalent of one lunch and one breakfast.

Families who have experienced significant income loss may now be eligible for free or reduced-price school meals. [Apply online](#) or contact your local school.

1. [Oregon Food Bank \(OFB\)](#): All Oregon and Clark County, Washington food assistance sites along with other food resources.
 - Call for assistance: 503-505-7061
 - Email for assistance: gethelp@oregonfoodbank.org
2. OFB needs volunteers to box and deliver food. [Volunteer to help](#) - sign up for individual shifts, if you are under the age of 60 and don't face higher risks for COVID-19.
3. [Partners for a Hunger-free Oregon](#): Resources and information to access basic food needs including locations where families can get meals for kids during the school closure.
4. [211 Food Information](#): Information and referrals to food (and other) resources across Oregon and Southwest Washington.

Renters

Eviction moratorium extended through June 30, 2021

[House Bill 4401](#), passed during the Oregon legislature's third special session, [extends the statewide pause](#) on evictions for non-payment until June 30 of 2021. In order to get continued protection from eviction, renters must fill out and sign a sworn declaration of financial hardship and give it to their landlords.

Rent Relief

Oregon Housing and Community Services' COVID-19 Rent Relief Program (OHCS) has allocated \$8.5 million through a needs-based formula [to regional Community Action Agencies](#). The funds were allocated statewide to [local communities](#).

Unemployment

The Oregon Employment Department now has a new website focused on helping people in Oregon to:

- Easily find information about resources and programs to help them through the COVID-19 pandemic.
- Submit unemployment claims and avoid unnecessary delays.
- Get their questions answered without having to call the hotline.

Resources are now available at <https://unemployment.oregon.gov/>.

Workers' Compensation

Workers have a right to file for workers' compensation for COVID-19.

Workers who have been quarantined or isolated due to a workplace exposure or have contracted COVID-19 in the workplace may be entitled to have their lost wages and medical expenses covered by their employer's workers' compensation

insurance. Employers cannot retaliate or discriminate against a worker for filing a workers' compensation claim or for raising workplace safety concerns.

If you need more information or have questions, call 800-452-0288 (toll-free) or see [this flier](#).

[Oregon Department of Human Services \(DHS\) resources](#)

DHS is open to help people in Oregon navigate this public health crisis together. There are online applications and, if you are able, you can call or email a local DHS office. DHS offices are practicing physical distancing to keep the public and staff safe. All branch offices, but one, are open to serve customers at this time.

Note: The Warm Springs branch office has closed, and customers should go to Madras if they do not have access to phone or online services. Tribal members are given a bus pass to the Madras office in addition to phone support.

- Families and single adults without a disability can apply for services at DHS. Here is link to [a directory](#) of self-sufficiency branch offices around the state or a link to [apply online](#).
- Here is a link for [seniors and people with disabilities](#).

[Paid leave for COVID-19 quarantine or isolation](#)

People who work in Oregon and need to quarantine or isolate due to COVID-19 exposure, but do not have access to COVID-19-related paid sick leave may now be eligible for paid leave.

The COVID-19 Temporary Paid Leave Program was created with \$30 million received from the federal government to help Oregon respond to the coronavirus pandemic.

People who qualify will receive a \$120 per-day payment for up to 10 working days (\$1,200 total) for the time they are required quarantine.

The application form is available in English, Spanish and Russian. Those who do not have access to electronic applications can call 833-685-0850 (toll-free) or 503-947-0130. Those who need help in a language other than these three can call 503-947-0131 for help.

Employees can learn more about the program and apply for it at [this link](#).

Oregon Health Plan

- If you have the Oregon Health Plan and need to be tested for novel coronavirus (COVID-19), it's covered. If you are hospitalized because of COVID it's covered.

The 3/31 Oregon Medicaid waiver includes the following:

- OHP members will not lose or have a reduction in benefits during the COVID-19 crisis.

There are a few exceptions to this:

- i. Moving out of state for a reason not related to COVID-19
 - ii. Request by member to close benefits
 - iii. Incarceration
 - iv. Deceased
 - v. Youth previously enrolled in Cover All Kids turned 19 years old (aged out) and now only eligible for CAWEM benefits (emergency coverage)
 - vi. Other reasons impacting eligibility
- You can apply for OHP without having to verify income (submit a pay stub) with your application. You can self-attest, which will help you get access to OHP coverage more quickly.
 - Sign up at ONE.oregon.gov – you may be eligible for get OHP even if you have been denied in the past.
 - Federal stimulus payments and increased unemployment payments will not affect OHP eligibility. They will not be counted during the application process or when members report a change in their household income.
 - If you don't want to apply for OHP, we encourage you to see a clinician through your county health clinic or through a federally qualified health clinic (FQHC). Here is [a list](#) of FQHCs in Oregon.

Resources for people with disabilities

Oregon Deaf and Hard of Hearing Services has published a [page of ASL Covid-19 resources](#).

The page includes:

- Links to ASL videos about COVID-19
- Communication resources
- Emergency resources (e.g., food, housing)
- Mental health and resources for emotional well-being

More resources for people with disabilities are available at <https://govstatus.egov.com/or-oha-covid-resources>.

Quarantine fund for farmworkers

Farmworkers who need to quarantine may qualify for the Quarantine Fund which provides financial support of up to \$ 1,290 to farmworkers who have been exposed to COVID-19 at work or at home and who quarantine for three weeks (21 days).

Who is eligible to apply to this fund?

- All Oregon agricultural workers, 18 years of age or older;
- Has had exposure to COVID-19 for which self-quarantining is recommended;
- Is practicing self-quarantining; and
- Is seeking health care assistance during the period of self-quarantine.

Call 1-888-274-7292 to apply for this fund. More information is available on the [Oregon Worker Relief Fund website](#).

Immigrants and refugees

Medical care

- You can still see a health care provider if you don't have medical insurance. This includes care in the emergency room, at community and migrant health centers, free clinics, and public hospitals.
- If you have CAWEM, CAWEM plus, OHP, or private insurance, you won't be charged for a test or treatment for COVID-19, including going to the hospital.
- The Governor has reached an agreement with insurers so that people will not have to pay anything out of pocket for COVID-19 tests or hospitalizations from COVID-19.
- If the applicant is undocumented or has been a legal permanent resident (green card holder) for less than 5-years, they may be eligible for the Oregon Health Plan's (OHP) Citizen/Alien Waived Emergency Medical (CAWEM) benefit includes emergency medical, dental and transport services including services at a hospital emergency room and being hospitalized if needed. CAWEM also includes all services for the diagnosis and treatment of COVID-19. This coverage is not limited to emergency rooms and hospitals. OHA can reimburse providers for COVID-19-related services regardless of service location. Coverage includes non-emergency settings such as medical offices and urgent care.
- The receipt of emergency Medicaid, such as CAWEM, cannot be counted under U.S. Citizenship and Immigration Service's (USCIS) public charge rule. Additionally, on March 13, 2020 USCIS issued an alert on its website stating that the agency will not consider testing, treatment, or preventive care (including vaccines, if a vaccine becomes available) related to COVID-19 as part of a public charge determination. You should seek the medical treatment or preventive services you need to protect your health and the health of others. This includes if your care is paid for in whole or in part by Medicaid, also known as the Oregon Health Plan.
- If you do not have Oregon Health Plan (OHP) coverage or Citizen/Alien Waived Emergency Medical (CAWEM), you can [apply for it here](#). If you don't want to sign up for OHP because of the public charge rule, you can see a clinician through your county health clinic or through a federally qualified health clinic (FQHC). You can find a list of these clinics in Oregon by [clicking here](#). If you have any important medical, mental health or medication needs be sure to mention this when you call.
- Anyone, regardless of their immigration status, can go to one of these clinics. They will have a sliding scale for payment for general primary care services, and

all tests and treatments related to COVID-19 are covered without any cost. Call the clinic first to see if you can be seen there and to find out what the process is for getting an appointment. Some clinics will require an intake or registration for treatment. If you are worried about payments for services, talk to your clinic.

Public charge and COVID-19

- If you are a Legal Permanent Resident (have a green card) applying to become a U.S. naturalized citizen, USCIS issued an alert on its website saying they will not consider testing, treatment, or preventative care (including vaccines, if a vaccine becomes available) related to COVID-19 as part of a public charge determination.
- If you have symptoms that resemble Coronavirus/COVID-19 (fever, cough, shortness of breath), you should get medical treatment. This will not negatively affect you as part of a future Public Charge analysis.

Caregiver support for older adults and people with underlying health conditions

Many people want to know how they can support older adults and people with underlying health conditions.

- Older adults and people with underlying health conditions are at higher risk for complications from COVID-19. To protect them always maintain physical distancing of at least 6 feet when interacting with people who are not members of your immediate household.
- Caregivers should make sure they know what medications your loved one is taking and see if you can help them have extra on hand.
- Monitor food and other medical supplies; make a backup plan.
- Stock up on non-perishable food items to have on hand to minimize trips to the store.
- If your loved one is living in a care facility, ask about the health of residents frequently, follow visitor restrictions and know what the protocol of the facility will be if there is an outbreak at the facility.

Guidance

Faith institutions, funeral homes, mortuaries and cemeteries

Oregon faith Institutions, funeral homes, mortuaries and cemeteries have new guidance for the number of people allowed to attend in-person gatherings.

Information is available on Sector Guidance - [Faith Institutions, Funeral Homes, Mortuaries and Cemeteries](#).

Workplace safety

COVID-19 can easily spread in places where people live and work close together. Agricultural workers, food processors, service industry workers and others who work in close contact and shared spaces are at high risk for workplace outbreaks.

Workers have the right to a safe work environment. Employers are required to follow workplace health and safety rules that are available on [Oregon OSHA](#) and [BOLI](#) websites. CDC Guidance for employers can be found on the [CDC website](#).

Reporting a violation

People have been asking what to do if they witness a violation of Governor Brown's orders. The best way to respond to these violations is to file a complaint with Oregon Occupational Safety and Health (Oregon OSHA). You can file online at [Oregon OSHA's webpage](#).

Large events and public gatherings

Limit the size of your gatherings. Oregon has a framework to reduce transmission and protect Oregonians. Please look on the [Governor's webpage](#) to find the status of different activities in your county and for current information on Governor Brown's executive orders.

Schools and childcare centers

For information on Governor Brown's executive order related to childcare centers, find a list of resources [here](#).

School Health and Safety Metrics

There is no simple, statewide answer for every school in Oregon. It is important to get students back to class, but how we do that depends on a number of important factors. Oregon public health officials have developed evidence-based metrics to help school boards and school districts make decisions about how they can safely reopen schools. Visit ODE's [Ready Schools, Safe Learners web page](#) for more information.

Colleges and universities

For information on Governor Brown's executive orders please look on the [governor's webpage](#).

Long-term facilities

Information and guidance for long term care facilities can be found in the ["LTCE COVID-19 Response Toolkit."](#)

Limited indoor visits allowed at qualifying long-term care facilities

- Protecting the health of our vulnerable elders has been a necessary priority during the pandemic. But for many folks, missing out on visits with loved ones who may not be able to meet outdoors has been difficult.
- Starting Nov. 2, licensed nursing, assisted living and residential care facilities that qualify will be able to allow limited indoor visitation for residents. Residents will be able to have up to two visitors at a time to meet with in an approved area.
- More information on the policy and how facilities can qualify are available on the [Oregon Department of Human Services news release](#).

Foster care and group homes

There is a [new toolkit](#) available for foster care or group home providers that operate homes with five or fewer residents.

Health care providers

Information and guidance for health care providers can be found at [OHA's COVID-19 Healthcare Partner Resources](#).

For information on healthcare settings look under the heading [Guidance for Healthcare Settings](#) on the OHA COVID-19 webpage. The page contains the most current information on the resumption of non-emergent and elective procedures in the following:

- Medical and dental offices
- Hospitals
- Ambulatory surgical centers
- Veterinary offices
- Other health care settings

Oregon health and safety officials advise medical professionals to **stop using KN95 respirators**, in accordance with the Food and Drug Administration (FDA) guidance, which cites poor quality.

The Oregon Health Authority (OHA) and Oregon's Occupational Safety and Health Administration (OSHA) want to inform people in Oregon that this guidance applies only to the use of KN95 respirators. The FDA announcement does not impact other personal protective equipment, including N95 masks, which are safe to use.

More information is available on the [OHA website](#).

Resources for more information

Oregon Health Authority

- www.healthoregon.org/coronavirus
- Oregon Health Authority Spanish language Facebook page - [OHA en Español](#).

Department of Human Services – apply for Food or Cash help, Childcare, Employment

- <https://www.oregon.gov/DHS/COVID-19/Pages/Home.aspx>

CDC Guidance

- www.cdc.gov/coronavirus/2019-nCoV
- [Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus Disease 2019 \(COVID-19\) Exposure in Travel-associated or Community Settings](#)
- [Health Alert Network](#)
- [Travelers' Health Website](#)
- [National Institute for Occupational Safety and Health's Small Business International Travel Resource Travel Planner](#)
- [Coronavirus Disease 2019 Recommendations for Ships](#)

Other Federal Agencies and Partners

- OSHA Guidance:
https://www.osha.gov/SLTC/novel_coronavirus/index.htmexternal icon

References

- OHA Emerging Respiratory Disease page: www.healthoregon.org/coronavirus
- CDC COVID-19 page: www.cdc.gov/coronavirus/2019-ncov/index.html
- CDC travel notice: wwwnc.cdc.gov/travel/notices/alert/novel-coronavirus-china
- WHO page: www.who.int/westernpacific/emergencies/novel-coronavirus
- CDC HAN archive (latest 2020-01-17): <https://emergency.cdc.gov/han/2020.asp>
- National Health Commission of the People's Republic of China:
<http://en.nhc.gov.cn/>
 - News updates: <http://en.nhc.gov.cn/news.html>
 - Latest updates
 - http://en.nhc.gov.cn/2020-01/21/c_75990.htm
 - http://en.nhc.gov.cn/2020-01/22/c_75997.htm

Chinese CDC: www.chinacdc.cn/en/

Wuhan Municipal Health Commission:

wjw.wuhan.gov.cn/front/web/main/xwzx.html

Center for Health Protection (Hong Kong):

www.chp.gov.hk/en/features/102465.html

Washington State Department of Health 2019-CoV update page:

www.doh.wa.gov/Emergencies/Coronavirus

White House Briefing, January 31, 2020: www.whitehouse.gov/briefings-statements/press-briefing-members-presidents-coronavirus-task-force/

Additional SNS resources:

- US Department of Health and Human Services:
<https://www.phe.gov/about/sns/Pages/default.aspx>
- Association of State and Territorial Health Officials:
<https://www.fda.gov/EmergencyPreparedness/Counterterrorism/MedicalCountermeasures/AboutMCMi/ucm431268.htm>