DC | HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA

COVID-19 Vaccination Update

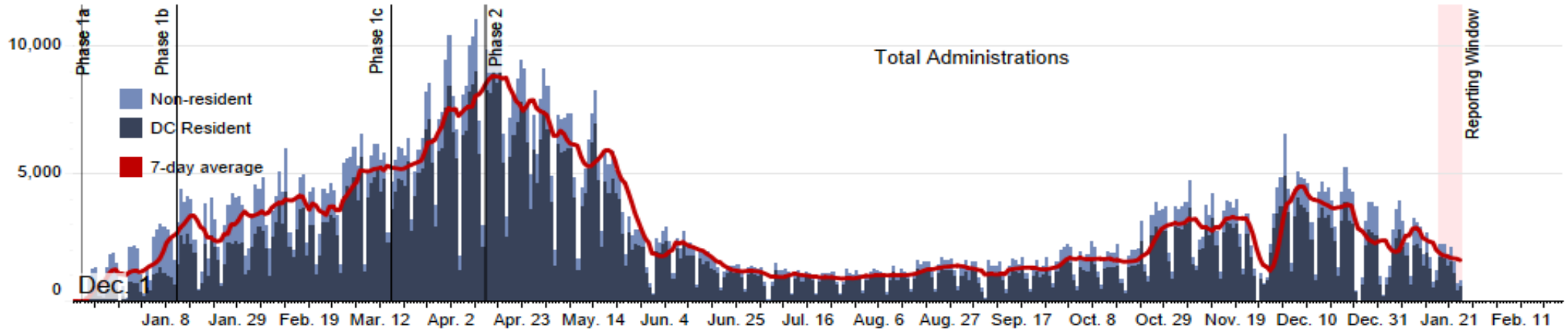
Heather Burris, Immunization Division Chief | February 3, 2022

DC Residents

Total Population

TOTAL DOSES ADMINISTERED WITHIN DC	ESTIMATED % RESIDENTS PARTIALLY OR FULLY VACCINATED**	ESTIMATED % RESIDENTS FULLY VACCINATED**	ESTIMATED % OF BREAKTHROUGH CASES***
1,334,181	92.1%	69.9%	5.39%

Individuals Partially or Fully Vaccinated within DC by Administration Date



	At Least One Dose	Fully Vaccinated	Booster Dose	Total Administrations	Dose 7-day Average
DC Resident (within DC)	457,389	373,015	118,321	922,451	1,200
DC Resident (outside DC)	154,617	84,692	22,682	251,560	
DC Resident (Federal Entity)	38,336	35,894	7,991	82,128	
Total DC Resident	650,342	493,601	148,994	1,256,139	1,200
Non DC Resident (within DC)	178,634	107,899	18,180	298,089	415
Non DC Resident (Federal Entity)	11,615	12,682	602	31,513	
Total Non DC Resident	190,249	120,581	18,782	329,602	415

Metric Definition: Number of administrations reported by DC-area providers by date of vaccine administration for DC Residents and Non DC Residents. The 7-day rolling average represents the average number of administrations including the past 6 days. Listed in Summary include the Total Doses administered within DC include residents and non DC residents.
Data Considerations: There may be a lag time between vaccine administration and provider report. This may impact the reporting of vaccine administered, especially in the three most recent days of report, highlighted in red above. Non DC residents may be vaccinated within DC, especially those who fall into prioritized non-resident categories. Administration may be impacted by holidays and weekends, and is impacted by the size of prioritized groups and vaccine supply. Individuals who receive single dose regimens such as J&J are considered fully vaccinated.The Chart consists of data from DC Health and table data consists combination of DC Health and Tiberius Data. Tiberius data are provided in cumulative numbers and have granular representation and only listed in the table and included in Summary bar values. Total doses administered within DC and **estimated rates of fully/partially vaccinated DC residents are calculated using both administered doses inside and outside of DC, which includes doses administered by some federal entities and other jurisdictions outside DC. Estimated coverage rates were calculated based on 2019 ACS population census estimates. ***Estimated % Breakthrough cases is calculated using the number of DC residents who were identified as being a breakthrough case (SARS-CoV-2 RNA or antigen detected on respiratory specimen collected >=14 days after completing primary series of FDA authorized COVID-19 vaccine (J&J, Moderna or Pfizer) out of the total number of DC residents who were vaccinated (and were reported to DOCIIS2.0).

Last Updated: 1/24/2022

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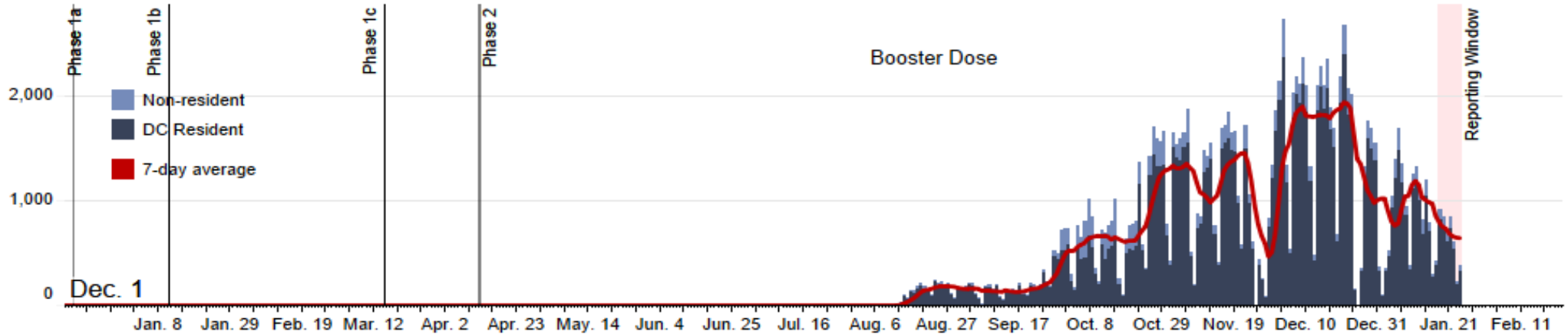

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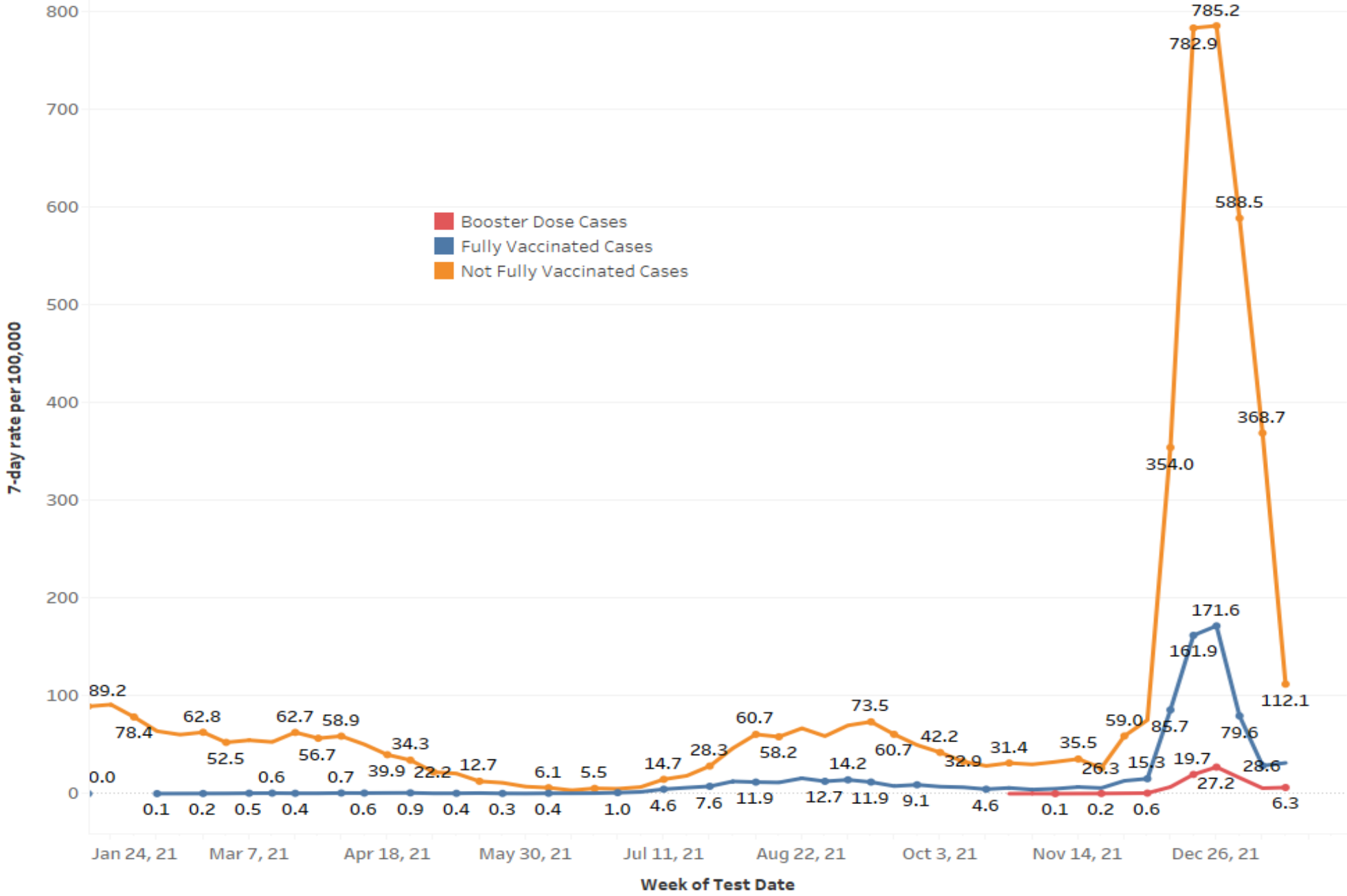
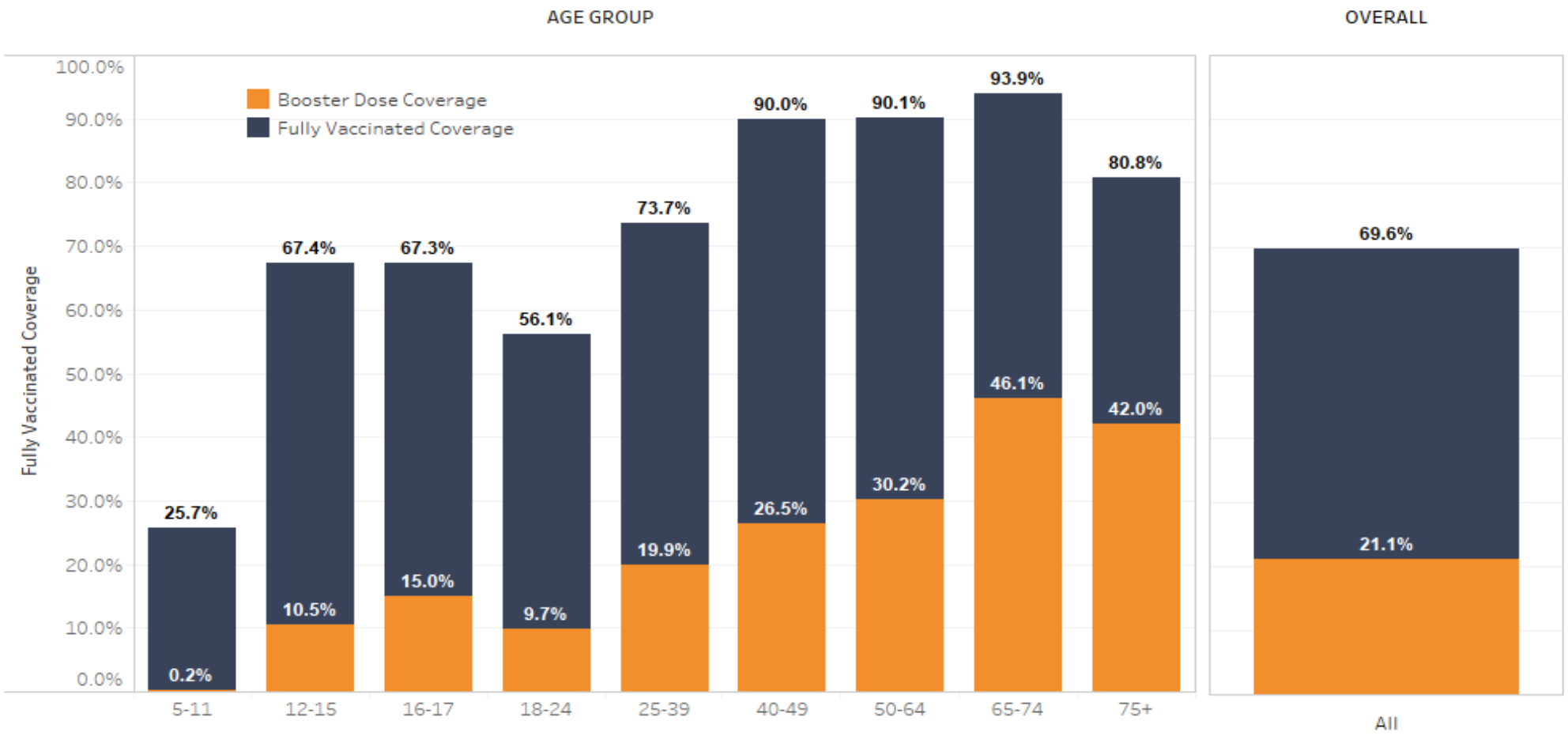
ESTIMATED 7-DAY AVERAGE OF FULLY VACCINATED AND NOT FULLY VACCINATED CASES (PER 100,000)

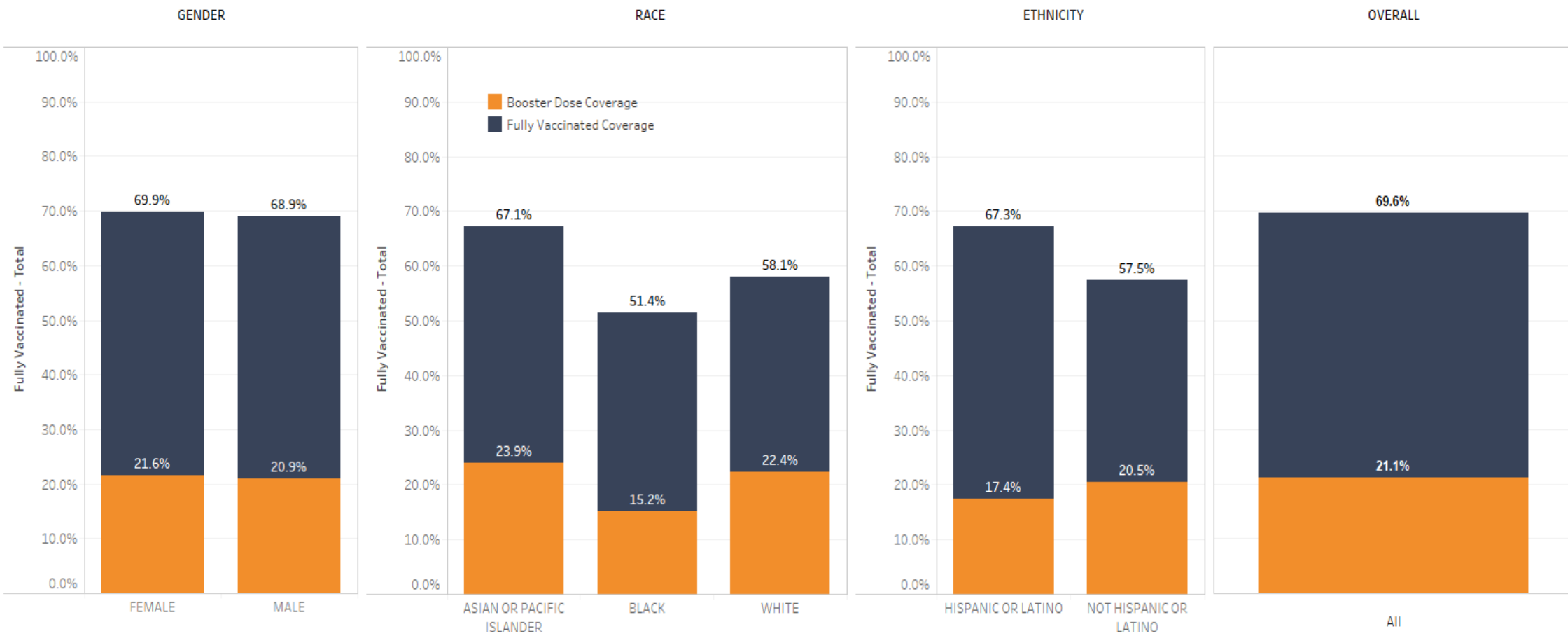


Fully Vaccinated Coverage (%) by Age Group - DC Residents*



*includes DC residents who were vaccinated within DC and outside DC, and by Federal Entity

Fully Vaccinated Coverage (%) by Gender, Race, Ethnicity - DC Residents*



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Three CDC Reports Highlight Vaccine/Booster Importance

- Released on 1/21/22
  - **First MMWR Report** showed a new CDC Analysis found that **getting a 3rd dose** of an mRNA COVID-19 vaccine was **highly effective** at preventing COVID-19-associated ER/UC visits by **94% during Delta and 82% during Omicron and prevented COVID-related hospitalizations by 94% and 90%, respectively.**
  - Vaccine effectiveness was higher in adults who received a 3rd mRNA vaccine dose (primary series or booster dose) compared with those who had received 2 doses.
  - Vaccine effectiveness increased following a 3rd dose during both Delta- and Omicron-predominant periods.
  - **Second MMWR Report** found that people who were **fully vaccinated and boosted had the highest protection** against infection with the virus that causes COVID-19, when Delta was the dominant variant and in the initial days of Omicron
  - A ***JAMA* Study (1/21/22)** found that a **third dose of a COVID-19 mRNA** vaccine provides **significant added protection** against symptomatic COVID-19 disease caused by the Delta and Omicron variants.
  - Protection was greater against the Delta variant compared with the Omicron variant.
  - This is one of the first U.S. peer-reviewed studies assessing COVID-19 vaccine performance against the rapidly spreading Omicron variant, which is critical to inform public health guidance.

FULL REPORTS WILL BE ATTACHED TO THE EMAIL WITH THE SLIDE DECK

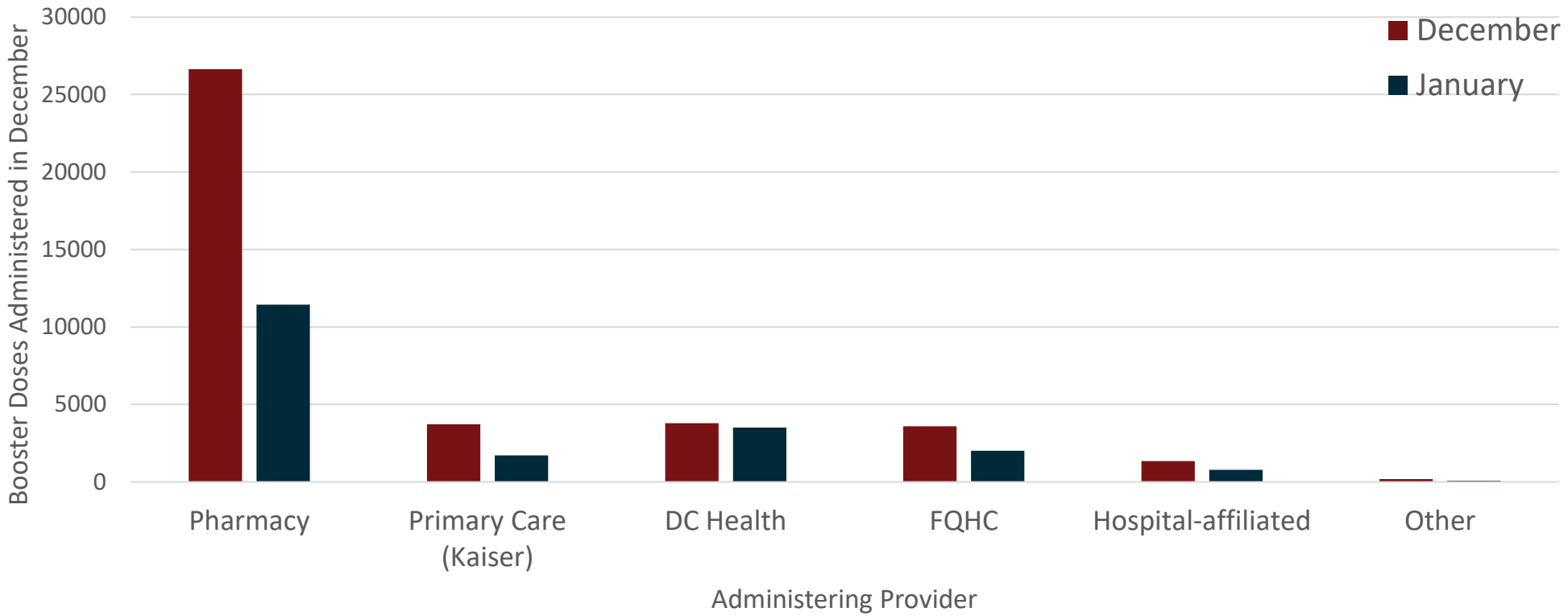
COVID-19 – Vaccine Booster

- Most fully vaccinated people are now eligible for and encouraged to get a booster dose. In general, people are considered fully vaccinated if it has been:
  - 2 WEEKS after their second dose in a 2-dose series, such as the Pfizer or Moderna vaccines.
  - 2 WEEKS after a single-dose vaccine, such as Johnson & Johnson's Janssen vaccine.

Who Should Get A Booster?

- Anyone **12 or older** who received the second dose of the Pfizer or Moderna vaccine more than 5 months ago. *At this time, only the Pfizer vaccine is authorized and recommended for adolescents aged 12-17.*
- Anyone **18 or older** and **moderately or severely immunocompromised** who received the third dose of the Pfizer or Moderna vaccine more than 5 months ago.
- Anyone **18 or older** who received the single dose of the **Johnson & Johnson vaccine** more than 2 months ago.

Booster Doses Administered in DC in Dec 2021/Jan 2022



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Vaccination Access – General Population (1)

- Pharmacies
  - Retail Chains
    - Promote easier access, esp. for seniors
      - Both appointments and walk-ins
      - Senior hours
    - Senior incentives (e.g. grocery gift card)
    - Provide DC Health signage
  - Independents
    - Encourage enrollment as providers, easy access

Booster Discussion & Feedback

- How does everyone feel about the following strategies?
- What additional support from DC Health would be beneficial to increase capacity?
- Pediatric planning for 6 mos- 4 yrs

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For more information on the District's COVID-19 response, visit **coronavirus.dc.gov**