

**From:** [Sarah Henery](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Public Comment on SDMAC Phase 1b recommendations  
**Date:** Monday, January 18, 2021 3:12:47 PM

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Although it is clear that the intent of the 1b recommendations was to include those who are forced into contact with the public by virtue of their roles protecting public safety, it is very disappointing to see that child welfare workers are not expressly included in the DHS essential definition within Appendix D.

Child welfare workers are charged with responding to allegations and concerns of child abuse and neglect within their communities. Their response necessitates having contact with members of the public regardless of whether there are COVID-19 positive individuals within a household. Since March, they have continued to respond to allegations of children being unsafe even though they have been dealing with the same challenges as all other first responders- including having vulnerable individuals or young children in their homes and dealing with child care challenges.

I know child welfare workers who have had to assess safety and take custody of COVID-19 positive children, holding them in their arms and transporting them to a safer place. I know child welfare workers who have contracted COVID-19 because their jobs put them in contact with positive clients. They have been treated as non-EMS first responders in their duties, they should also be treated as non-EMS first responders in terms of vaccine priority. Instead, they are not expressly included in any of these groups and are instead subject to the whims of local authorities to determine whether they are eligible. I believe this to be an oversight from a public health perspective.

**From:** [Patricia Dodge](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine Category 1B  
**Date:** Monday, January 18, 2021 2:23:22 PM

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Dear Secretary Palm;

Thank you for allowing public input into the very important categorization of the Covid-19 vaccine distribution to Wisconsin residents.

This message is in support of including social work staff, behavioral health case managers and therapists, and Economic Support Specialists who are in direct contact with clients in the next round of vaccines or Category 1B.

We have had several staff members in quarantine over the past several months or waiting for test results because they have been exposed to people who tested positive. We have also had several staff members test positive and have symptoms, in some cases very severe.

This leaves us with having to cover vacancies with existing staff who could at any time be exposed or contract the virus. This puts a stain on the whole system of services that we are required to provide to clients and members of the public.

Thank you for your consideration.

Patricia Dodge  
Director  
Manitowoc County Human  
Services Department  
926 S. 8<sup>th</sup> Street  
Manitowoc, WI 54220  
(920) 683-4230 Phone  
(920) 683-4908 Fax

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**From:** [Pam Schutz](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine subcommittee--Phase 1b  
**Date:** Monday, January 18, 2021 8:56:58 AM  
**Attachments:** image002.png

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I support including all recipients of Family Care and IRIS being eligible to receive the COVID-19 vaccine in phase 1b. I further support including all staff providing HCBS funded services as eligible in phase 1b. While vaccinating those receiving Family Care/IRIS services is a significant step in protecting a particularly vulnerable group, the staff who serve them are also at risk for increased exposure. If significant numbers of staff need to be quarantined, the availability and quality of much needed services will be compromised, increasing risks to already vulnerable citizens. Thank you.

**Pam Schutz**  
CEO

P / [920.292.1125](tel:920.292.1125)  
F / [920.424.4079](tel:920.424.4079)  
[pschutz@covey.org](mailto:pschutz@covey.org)  
[covey.org](http://covey.org) | [facebook.com/CoveyInc](https://facebook.com/CoveyInc)



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**From:** [Katie Gerwin](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1B  
**Date:** Monday, January 18, 2021 8:49:39 AM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

My name is Catherine Gerwin, and I live in Hartford, WI. I am writing in support of the recommendation to include IRIS and FamilyCare participants in Phase 1B of COVID-19 vaccinations.

I am a private duty nurse who cares for patients who live in their home (FamilyCare and IRIS participants). The patients I care for are medically complex and are likely to become extremely sick if they get COVID-19.

It is critical that vulnerable people like my patients be prioritized to receive the vaccine as soon as possible. Please allow IRIS and Family Care participants to be vaccinated in Phase 1B.

Thank you,  
Catherine Gerwin, RN, BSN

**From:** [lendl@everyactioncustom.com](mailto:lendl@everyactioncustom.com) on behalf of [Lisa endl](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Monday, January 18, 2021 8:24:54 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mrs. Lisa endl



**From:** [bkirchner@everyactioncustom.com](mailto:bkirchner@everyactioncustom.com) on behalf of [Brandice Kirchner](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Monday, January 18, 2021 8:10:40 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

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The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Ms. Brandice Kirchner

[Redacted signature block]

**From:** [ddgosdeck@everyactioncustom.com](mailto:ddgosdeck@everyactioncustom.com) on behalf of [Dan Gosdeck](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Monday, January 18, 2021 7:56:55 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

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Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mr. Dan Gosdeck





**From:** [kmichalski@everyactioncustom.com](mailto:kmichalski@everyactioncustom.com) on behalf of [Keith Michalski](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Monday, January 18, 2021 7:49:01 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

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Sincerely,  
Mr. Keith Michalski



**From:** [bgonzalez@everyactioncustom.com](mailto:bgonzalez@everyactioncustom.com) on behalf of [Brooke Gonzalez](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Monday, January 18, 2021 7:36:57 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Dear Robyn Vining,

Thank you for your efforts to ensure the efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

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The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those

accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Ms. Brooke Gonzalez



**From:** [Jan Dahmen](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine Subcommittee Phase 1B Recommendation  
**Date:** Monday, January 18, 2021 7:32:14 AM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

Hello, we are writing to urge you to keep the IRIS and Family Care Recipients included in Phase 1B and also please include the caregivers for this high risk group. Our daughter is an IRIS recipient and we are her legal guardians and caregivers. She has been unable to attend her day program at Madison Rehabilitation Center (MARC) since March of 2020 due to the risk of exposure to COVID-19. Thank you for your consideration,

Greg and Jan Dahmen



**From:** [bbauer@everyactioncustom.com](mailto:bbauer@everyactioncustom.com) on behalf of [Brian Bauer](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Monday, January 18, 2021 6:47:35 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

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Sincerely,  
Mr. Brian Bauer

[Redacted signature block]

**From:** [Alan Lins](#)  
**To:** [DHS SDMAC](#)  
**Subject:** vaccine subcommittee Phase 1B  
**Date:** Monday, January 18, 2021 5:11:07 AM

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Hello,

I would like to submit a recommendation.

My wife and I are the primary care givers for my 91 year old mother. She is in her own home and is ambulatory. I understand that she will be eligible for the COVID 19 vaccination in Phase `1B. She has no one else entering her home.

We live in separate households.

I respectfully urge that people like my wife and I (family care givers) be included in Phase 1B.

The Moderna and Pfizer COVID 19 vaccines are reported to be 95% effective at preventing infections. Vaccinating my mother is important. I also believe that vaccinating her primary care givers is also important. This would be a slight expansion of non-frontline health care workers.

Thank you for your time and consideration.

Alan Lins  


**From:** [lzuleger4@everyactioncustom.com](mailto:lzuleger4@everyactioncustom.com) on behalf of [Jean Zuleger](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 10:59:37 PM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

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The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Ms Jean Zuleger



**From:** [bgcamp54@everyactioncustom.com](mailto:bgcamp54@everyactioncustom.com) on behalf of [Bernie Gehrmann](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:53:00 PM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Dear Jon & Diane,

As an essential food pantry volunteer over 65 I am requesting that I be included in the next round of vaccinations. I volunteer over 25 hours a week at the pantry to help as much as possible. I have contact with people daily and am putting myself and others at risk. The pantry is providing a vital service to the community and needs the volunteers to be safe and able to continue working. As we are a small pantry with limited help, if we as volunteers get covid it could jeopardise the entire operation. I am asking that food pantry volunteers be included in the soonest vaccination possible.

Thank you!

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mr Bernie Gehrmann





**From:** [smith42@everyactioncustom.com](mailto:smith42@everyactioncustom.com) on behalf of [Randall Smith](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:23:23 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mr Randall Smith

[Redacted signature]

**From:** [smith42@everyactioncustom.com](mailto:smith42@everyactioncustom.com) on behalf of [Smith Smith](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:22:39 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mrs Smith Smith



**From:** [Felicia Behnke](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1b COVID-19 vaccine public comment  
**Date:** Sunday, January 17, 2021 7:07:47 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

Hello,

I feel social workers, case workers, mental health therapists, LCSWs, LPC, MSWs, all substance use counselors should be included. We we are providing face to face therapy and services with limited PPE. Please include us the essential workers and in 1b.

Thank you,  
Felicia Behnke Shaw MSW LCSW SAC-IT

**From:** [Sara Sievert](#)  
**To:** [DHS SDMAC](#)  
**Subject:** COVID-19 Vaccine: Social Workers ARE Essential  
**Date:** Sunday, January 17, 2021 6:56:42 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

To Whom It May Concern:

I am writing you regarding the COVID-19 vaccine and the critical need for social workers to receive this vaccine in phase 1b or as soon as possible. I, myself, am a juvenile justice/CPS social worker, and am deeply saddened and disappointed to hear that social workers are not seen as essential for the phase 1b COVID-19 vaccine. As social workers, our job duties include an array of responsibilities that put us at high risk for COVID-19. Some of these duties include:

- \*keeping the children safe in their own homes and communities through regular home visits in the child and family's home
- \*ensuring or assisting with the health and wellness of the child and/or the entire family
- \*ensure their basic needs and other needs are met including: mental health needs, regular/medical health needs, educational needs, transportation needs, AODA treatment needs, and many other needs.
- \*provide resources to families, so they are able to meet their basic needs AND other needs including: mental health needs, regular/medical health needs, educational needs, transportation needs, AODA treatment needs, and many other needs.
- \*transportation to and from doctors appointments, dentist appointments, visitation services, court ordered services, emergency room visits, school, and much more.
- \*being an advocate for children, youth, and/or their families by regularly attending school meetings, family team meetings with other formal supports/providers, and through many other situations.

For a lot, if not all of these children, youth, and their families, we are their only support system, their break away from struggle or their life stressors, their protector, their helper, their advocate, and/or their reason to keep trying.

Since COVID-19 has come to the United States, it has not only caused distance and struggle between people and their family and friends, it has also caused distance and struggle between the families that we work with and their supporters, their advocates, their social workers. Many of our families need that in person, face to face, contact to feel supported. However, COVID-19 has created a huge barrier to that for many. In addition, some social workers' presence is required due to child safety or present

danger of a child in their home with their caregivers. These social workers are going into homes, unsure if those families are following the CDC guidelines of social distancing and mask wearing, and are putting our own health at risk of getting COVID-19.

If we know anything about COVID-19, we know that it could be deadly for someone, and has been for many. It's not just a simple cold or flu for some people. It's not just another sickness that we could continue on and feel safe with without a vaccine. We also know that the health and wellness of the people in our community and in the United States rely on the help of social workers. We are needed. We are necessary. We are essential. We deserve to get the COVID-19 vaccine as soon as possible!

With this information, I beg you, please consider us essential and let us get the COVID-19 vaccine now! Please show us respect and appreciation by putting us on the list of essential workers that can get this vaccine. Please take our health and safety seriously because we take the health and safety of our families very seriously, and we need this opportunity!

Thank you,

Sara Sievert

**From:** [clay57](#)  
**To:** [DHS SDMAC](#)  
**Subject:** vaccine subcommittee phase 1b  
**Date:** Sunday, January 17, 2021 5:07:54 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

I am submitting the following comments in response to the proposed recommendations for the Wisconsin Department of Health Services for Covid-19 Vaccine Priority Group 1b offered by the Wisconsin SDMAC.

As a licensed art therapist who provides services to many vulnerable populations, I am in full support, generally speaking, of the guidance to DHS that has been offered thus far by the Committee regarding the most strategic, ethical and expeditious distribution of our state's limited vaccine resources. That said, I am concerned about one oversight in the Committee's 1b Vaccine Priority Group proposal which is now open for public comment.

In reviewing the proposal, I wondered why participants in the Children's Long Term Support Program (CLTS) were not included as a priority group, whereas the adults within IRIS and Family Care programs are?

I provide professional therapy services to both adults and children with disabilities and have worked closely with both populations throughout Covid. I can assure you that IRIS, Family Care and CLTS program participants are all being disproportionately impacted by the effects of Covid and require the protection that would be afforded by early vaccination.

The morbidity rates for both adults with disabilities and younger people with disabilities alike are exceptionally high, and far outpace those of the non-disabled population. Similarly, the risk of mortality is unusually high in both adults and children with disabilities given the frequency with which members of both groups have significant co-occurring medical conditions. Both groups are also vulnerable in the Covid environment as they are more likely to; reside in high risk congregate care settings, come in contact with other high risk individuals with disabilities, require close contact support from a variety of caregivers, and have little to no control over the whether other mitigation procedures will be employed in the environments in which they live and spend the majority of their time. All of these variables, which are realities in the lives of both children and adults with disabilities, significantly increase the risk of infection and the chance of poor outcomes, including death, when infected by COVID-19.

When schools begin to open again, as has become a focus in many Wisconsin communities and is priority within our upcoming federal administration, if left unvaccinated many of Wisconsin's children with disabilities will not be able to return to in-person learning given how medically fragile they are. Many of my younger clients, such as individuals with autism and developmental disabilities, were isolated and at risk of poor educational outcomes before COVID, and I'm certain they will fall farther behind academically and grow more socially isolated if they are not able to return to school with the rest of the student population. To

insure they do, it's imperative that we make vaccination available to them now.

It appears the effort to early vaccinate compensated and uncompensated caregivers in phase 1a may be the focus of the Committee's plan to protect children with disabilities until they are eligible for vaccination in the future as a part of the general population. I can assure you this intervention is not enough to keep this especially vulnerable population safe, and it is not an equitable approach to affording protection to Wisconsin's disability community. The Committee has moved to provide adults with disabilities the opportunity to become vaccinated, as well as have their caregivers vaccinated. This is what was deemed necessary for the adult population, and so I respectfully challenge the committee on the issue of why it did not offer youth with disabilities, 16 and 17 year old CLTS participants who are eligible for the Pfizer vaccine under CDC authorization, the same level of protection?

I appreciate the difficult task Committee members are charged with in making recommendations regarding the distribution of a limited vaccine supply to a number of high risk populations within the state. CLTS participants are one of those high risk groups which have been disproportionately impacted by COVID, and they should have been included in the developing guidance regarding which high groups priority should be covered in the 1b vaccination plan. Fortunately, it is not too late to correct this omission and I'd ask the committee to do that quickly before the proposal is voted on.

Thank you for your attention to this important issue,

Cherly L. Ray, M.S., LPC



Sent from my T-Mobile 4G LTE Device

**From:** [mason.flanagan](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1b Vaccination Congregate Living Facilities  
**Date:** Sunday, January 17, 2021 4:35:34 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

Good afternoon DHS SDMAC Vaccine Subcommittee,

First off, thank you so much for all your work to protect Wisconsin communities throughout the COVID-19 pandemic. All of Wisconsin owes you a great debt.

I'm emailing on behalf of Madison Community Cooperative (MCC), a congregate living housing facility in Madison WI. Info about the organization can be found here (<https://www.madisoncommunity.coop/faq>).

With the Phase 1b rollout of the COVID-19 vaccine in Wisconsin, I'd like to ask that the committee consider including community housing cooperatives as congregate living spaces. MCC houses consist of shared kitchens, bathrooms, and living spaces. As a result non-pharmacologic interventions to prevent the spread of COVID-19 are helpful, but do not completely guarantee the safety of residents. Since the beginning of the COVID-19 pandemic, MCC houses have followed strict COVID-19 guidelines and not allowed any outside individuals to enter the houses, implemented mask wearing and social distancing inside of houses, and bedroom quarantines for individuals with positive COVID-19 contact. Nonetheless, all of the houses have front-line workers living in them which creates daily risk for introduction of SARS-CoV-2 into the house.

The population makeup of MCC cooperatives aligns with the demographic characteristics stated as considerable to receive the COVID-19 vaccine under current WI DHS recommendations for phase 1b rollout including: public facing, frontline, essential service workers; age +65, Black, Latinx, and Native American; socioeconomically vulnerable, and individuals with pre-existing conditions. MCC is a progressive, equitable, organization which actively seeks to pursue social justice so many of the residents come from marginalized or otherwise low resource backgrounds.

In conclusion, I would ask that the Committee include housing cooperatives in the phase 1b rollout given that our resident population includes individuals which are extremely high risk for COVID-19, and the close proximity of our living situation makes it impossible to otherwise guarantee the safety of our houses.

Thank you for your time,

Mason Flanagan



**From:** [Sue Sippel](#)  
**To:** [DHS SDMAC](#)  
**Subject:** public comment on Phase 1B recommendations - congregate living  
**Date:** Sunday, January 17, 2021 4:33:46 PM  
**Attachments:** image001.png

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Dear members of the WI State Disaster Medical Advisory Committee,

I appreciate all your work on ensuring Wisconsinites most at risk for COVID-19 are prioritized for vaccination and that the distribution is equitable and efficient. To that end, it is incredibly important that the Phase 1B recommendation for the COVID-19 vaccine include, at a minimum, the staff of congregate living facilities.

As I read your draft recommendations, I am aware of your concern about the transient nature of the homeless population. I would like to point out two things, however:

- The staff working in domestic violence shelters is not transient and yet, they are coming to work every day, even though they know they are at higher risk. At the Wisconsin Rapids Family Center, we have had 4 staff members test positive in the last few months and at least 5 others quarantine due to an exposure. We are a staff of 23. Vaccinating staff will also help keep shelter residents safe. We were on the brink of closing about two weeks ago because of concerns about enough staff available to staff the shelter. Closing the shelter would leave domestic violence victims with no place to go when they are fleeing domestic abuse.
- It is my belief that residents of domestic violence shelters are less transient than residents in homeless shelter that shelter the general population. Many of them are “warming centers” that operate on a “one night at a time” basis. At the Wisconsin Rapids Family Center, there is no maximum number of days a victim can stay in the shelter. The average stay for families in 2020 was 36.27 days. Even after clients leave the shelter, they usually continue to remain in contact and engage with the program for emotional support, so we know where they are and can help them access a second dose of the vaccine. Moreover, our shelter is a six bedroom facility and since each family gets their own bedroom, we are talking about 6 adults.

Like others in the larger homeless population, residents in domestic abuse shelters:

- have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID disease. This population frequently has little access to consistent quality health care which may result in being excluded unless specifically prioritized.
- have exhausted all other resources and end up staying in a shelter. Although they have their own bedroom, all other spaces are “communal,” including the kitchen, living room, and playroom. They do not have a way to mitigate their COVID risk. They cannot avoid the interaction with other people and reliance on the organization to help meet basic needs and provide a safe place to be. Emergency shelters,

including domestic violence shelters, use shared living spaces and have limited opportunities to meet the social distancing requirements.

Currently in the homeless service system, an enormous amount of funding, time, and resources have been focused directly on COVID-19 prevention, screening, education, and mitigating the spread of the disease. Once the shelter system and residents have access to the vaccine, staff time and resources can be redirected to obtaining and securing permanent housing.

We have seen, and will continue to see an increase in the number of people seeking shelter due to domestic violence. There are numerous reports about the increase in domestic abuse as a result of the pandemic. Despite a lull during the initial “Safer at Home” order, when it was more difficult for victims to leave their partners who were home all the time, there was nearly a 40% increase in the number of families sheltered during the period March 1, 2020 to December 31, 2020 when compared to the same period in 2019 (40 families compared to 28). The Family Center has resorted to placing “overflow” families in hotels. When a family is in a hotel, there is less opportunity for them to avoid contact with the public, increasing the risk to others. The costs associated with placing large numbers of families in hotels is an unbudgeted expense, that results in diverting dollars previously budgeted for other items to paying for hotels, further stressing the agency.

The COVID-19 vaccine is a critical step toward ensuring the safety and the health of this vulnerable population and will provide much needed support to those facilities and staff struggling to provide these important services. I urge you to include, at a minimum, the staff of domestic violence shelters in the Phase 1b vaccinations and consider extending that to shelter residents as well. Thank you.

Sincerely,



*Sue Sippel*

EXECUTIVE DIRECTOR  
THE FAMILY CENTER



[director@familyctr.org](mailto:director@familyctr.org)



715.421.1559



500 25th Street North  
Wisconsin Rapids, WI 54494

**From:** [joanack@aol.com](mailto:joanack@aol.com)  
**To:** [DHS SDMAC](#); [Sen.Petrowski - LEGIS](#); [Rep.Edming - LEGIS](#)  
**Subject:** Vaccine subcommittee - Phase 1B  
**Date:** Sunday, January 17, 2021 12:56:26 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

I am sending this to express my disappointment that hunger-relief frontline workers and volunteers were not included the next vaccine priority group, IB. I am a board member at the Hayward Community Food Shelf (HCFC) in Hayward, WI and both my husband and I volunteer at the food shelf.

The pandemic has had a large impact on the HCFS. Due to the economic effect of the pandemic, the number of individuals/families seeking food assistance has increased greatly. At the same time, many of our volunteers have had to step away due to age, health issues and/or other concerns. We have had to change many procedures, including drive through food distribution. While volunteers wear masks and follow social distancing as much as possible, there are health concerns. Please note that there are no paid employees at HCFS as the food shelf is completely volunteer organized and staffed.

The Hayward Community Food Shelf is proving a very valuable service to Sawyer County and surrounding area residents. I urge the Committee to include hunger-relief frontline workers and volunteers, including those at HCFS, in Group IB.

Thank you.

Joan Ackerman  
Hayward Community Food Shelf Board Member and Volunteer  
Hayward, WI

**From:** [Janet Zander](#)  
**To:** [DHS SDMAC](#)  
**Subject:** GWAAR/WAAN Public Comments - SDMAC Vaccine Subcommittee - Phase 1b Recommendations  
**Date:** Sunday, January 17, 2021 12:40:21 PM  
**Attachments:** Public Comments\_SDMAC Vaccine Distribution Subcmte\_Recom-COVID-19 Vaccine Priority Group  
1b\_RJKellerman\_GWAAR-WAAN\_1-17-21.pdf

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

Please see attached comments from the Greater Wisconsin Agency on Aging Resources, Inc. and the Wisconsin Aging Advocacy Network on the SDMAC – Vaccine Distribution Subcommittee’s Recommendations for the Wisconsin Department of Health Services for COVID-19 Vaccine Priority Group 1b.

Thank you.

Sincerely,

[Janet Zander](#)  
*Advocacy & Public Policy Coordinator*  
p. 715-677-6723 | m. 608-228-7253  
Elder Law & Advocacy Center  
fb. Facebook.com/WAAN.ACTION | tw. [@ZanderWAAN](#)  
Greater Wisconsin Agency on Aging Resources, Inc.  
[www.gwaar.org](http://www.gwaar.org)



Date: January 17, 2021  
To: State Disaster Medical Advisory Committee (SDMAC) Vaccine Distribution Subcommittee Members  
From: Robert J. Kellerman, Executive Director, Greater Wisconsin Agency on Aging Resources, Inc.; Wisconsin Aging Advocacy Network, Chair  
Re: Comments on the Wisconsin SDMAC Vaccine Distribution Subcommittee Recommendations for the Wisconsin Department of Health Services for COVID-19 Vaccine Priority Group 1b

Dear Ms. Lewandowski, Dr. Temte, and members of the SDMAC Vaccine Distribution Subcommittee,

The Greater Wisconsin Agency on Aging Resources, Inc. (GWAAR) is a nonprofit agency committed to supporting the successful delivery of aging programs and services in our service area consisting of 70 counties (all but Dane and Milwaukee) and 11 tribes in Wisconsin. We are one of three Area Agencies on Aging in Wisconsin. Our mission is to deliver innovative support to lead aging agencies as we work together to promote, protect, and enhance the well-being of older people in Wisconsin. GWAAR is also a member of the Wisconsin Aging Advocacy Network (WAAN) a collaborative group of individuals and associations working with and for Wisconsin's older adults to shape public policy to improve their quality of life.

Thank you for this opportunity to provide comments on the Subcommittee's recommendations for COVID-19 vaccine priority group 1b. Though promises of additional vaccine supply may be on the horizon, we understand vaccine supply remains limited for now and rationing of available vaccine continues to be necessary.

WAAN supports the Subcommittee's recommendations for phase 1b prioritization, which include:

- People 70 years of age and older,
- IRIS (Include, Respect, I Self-Direct) and Family Care recipients,
- Congregate living facility staff and residents, and
- Frontline (public facing) essential workers.

WAAN offers the following additional comments in support of specific recommendations:

- ❖ **People age 70 and older** - The Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices (ACIP) recommendations include persons age 75 and older in phase 1b due to high rates of morbidity and mortality associated with COVID-19, as well as a significant number of individuals in this age group, particularly within racial and ethnic minority groups, living in multigenerational housing.<sup>1</sup> **WAAN offers strong support for the Vaccination Distribution Subcommittee’s recommendation to expand this group to Wisconsinites age 70 and older.** According to the Wisconsin Department of Health Services (DHS) epidemiological data, adults age 70 and older represent almost half of the state’s COVID-19 related hospitalizations<sup>2</sup> and over three-fourths of the state’s COVID-19 related deaths (4,189 people).<sup>3</sup> Long-term care facility resident deaths (1,492 people), of which the majority would be older adults, could only account for a maximum of 36% of all deaths among persons 70 and older. This data indicates a significant majority of the deaths among persons age 70 and older were among individuals not living in long-term care facilities and therefore, not included in phase 1a of Wisconsin’s vaccination plan. The feasibility of identifying and vaccinating members of this age group is very high, as most individuals are receiving Medicare benefits<sup>4</sup> and some are also participating in Medicaid. Vaccination of the age 70 and older population will significantly help to reduce Wisconsin’s hospitalization and mortality rates.

To get more Americans vaccinated quickly, the CDC is now urging states to offer the vaccine to anyone 65 years and older and to people under 65 who have comorbidities that increase their risk of severe illness from COVID-19. To help accomplish this, the federal government will soon begin allocating vaccine doses based on the state’s population over age 65 rather than on overall population numbers.<sup>5</sup> People age 65 and older make up approximately 17% of Wisconsin’s total population, giving the state a ranking of 19<sup>th</sup> largest among states

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<sup>1</sup> Dooling K, Marin M, Wallace M, et al. The Advisory Committee on Immunization Practices’ Updated Interim Recommendation for Allocation of COVID-19 Vaccine — United States, December 2020. MMWR Morb Mortal Wkly Rep 2021;69:1657-1660. DOI: <http://dx.doi.org/10.15585/mmwr.mm695152e2>

<sup>2</sup> COVID-19: Wisconsin Cases. <https://www.dhs.wisconsin.gov/covid-19/cases.htm>, accessed on January 15, 2021.

<sup>3</sup> COVID-19: Wisconsin Deaths. <https://www.dhs.wisconsin.gov/covid-19/deaths.htm>, accessed on January 15, 2021.

<sup>4</sup> Institute of Medicine (US) Committee to Design a Strategy for Quality Review and Assurance in Medicare; Lohr KN, editor. Medicare: A Strategy for Quality Assurance: Volume 1. Washington (DC): National Academies Press (US); 1990. 3, The Elderly Population. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK235450/>, accessed on January 16, 2021.

<sup>5</sup> CDC Now Says Everyone Over 65 Should Get Access to COVID-19 Vaccine. <https://www.healthline.com/health-news/cdc-now-says-everyone-over-65-should-get-access-to-covid-19-vaccine>, accessed on January 15, 2021.

ranked by percent of population age 65 or older.<sup>6</sup> When considering total state population, as is done currently by the CDC to determine vaccine allocations, Wisconsin ranks 20<sup>th</sup> largest in the nation.<sup>7</sup> While Wisconsin's ranking is not significantly higher when considering the population age 65 and older instead of total population, the CDC's new method of determining vaccine allocations to states should result in an increase for Wisconsin. Given the high rates of morbidity and mortality among older adults (including those age 65-69) and the potential for an increase in vaccine supply due to the CDC's new vaccine allocation method, **WAAN encourages Wisconsin to follow the CDC's new recommendation for states to offer the vaccine to anyone 65 years and older and to people under 65 who have comorbidities that increase their risk of severe illness from COVID-19.**

- ❖ **IRIS and Family Care (including Family Care Partnership and PACE) participants** – Though the CDC's ACIP recommendations do not include adults receiving home and community-based services (HCBS) through Medicaid long-term care waiver programs such as Wisconsin's Family Care, Family Care Partnership, PACE, and IRIS programs, **WAAN offers strong support for inclusion of all participants in these programs in Wisconsin's priority group 1b.** Wisconsin's Family Care and IRIS programs offer HCBS to older adults and people with disabilities who would otherwise qualify for an institutional level of care. State Medicaid programs must cover long-term services and supports (LTSS) in nursing homes, while coverage of HCBS is optional in many states. Wisconsin's long term care system offers older adults and people with disabilities who have functional and financial needs a choice to receive their LTSS in their own homes, supported apartments and other community-settings, as well as nursing homes. Residents of long-term care facilities such as nursing homes and assisted living facilities, including some Family Care and IRIS members, were eligible to receive the COVID-19 vaccine in Wisconsin's first prioritization group (1a) through the federal Pharmacy Partnership for Long-Term Care program. Though not eligible for vaccination in the first priority group, Family Care and IRIS members who live in their own homes, supported apartments, and smaller congregate living settings are also at high risk of severe illness and death from COVID-19.

There are a variety of reasons individuals in Family Care and IRIS are at high risk and should be prioritized next to receive the COVID-19 vaccine. As noted earlier, some members live in congregate settings with other unrelated individuals. Most members, whether living in their own home, supported apartment or congregate setting, receive services and supports from multiple caregivers (paid and unpaid) – some of whom are providing hands on personal care. Some individuals in the program participate in activities in congregate settings like adult day

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<sup>6</sup> Which U.S. States Have the Oldest Populations 2018. <https://www.prb.org/which-us-states-are-the-oldest/>, accessed on January 15, 2021.

<sup>7</sup> US States - Ranked by Population 2020. <https://worldpopulationreview.com/states>, accessed on January 15, 2021.

care centers, day service centers, and sheltered workshops. Additionally, some members with Alzheimer’s disease or other dementias or intellectual or developmental disabilities have difficulty complying with recommended health and safe precautions. In addition to these risk factors, many Family Care and IRIS members have multiple comorbidities putting them at increased risk of severe illness from COVID-19. For all these reasons and more, the older adults and adults with disabilities participating in these programs are experiencing higher rates of morbidity and mortality related to the virus.

Family Care and IRIS members represent approximately 1.4 percent of Wisconsin’s total population but account for 10 percent of the state’s total COVID-19 hospitalizations and over 18 percent of the state’s COVID-19 related deaths. Over 10 percent of Family Care and IRIS members have tested positive for COVID-19. Data from the Wisconsin DHS indicates nearly 18 percent of program enrollees in the frail elderly target group tested positive. Additionally, DHS data reveals nearly 26 percent of COVID-19 positive cases in the waiver system result in hospitalization and almost 11 percent result in death, compared to approximately 4 percent and 1 percent in the general population, respectively.<sup>8</sup> Participants in Family Care and IRIS are easily identified; member location, health conditions, and service providers are known to program administrators and staff making vaccination of this group highly feasible. Vaccination of all Family Care and IRIS participants will reduce hospitalization and death rates among this population and may help to reduce spread of the virus among the family caregivers and care providers (not all of whom will be vaccinated in these early phases) that support them.

❖ **Congregate living facility staff and residents** – While the CDC’s ACIP has not specifically recommended this group for inclusion in Phase 1b, the ACIP does consider it permissible and given the increased rate of virus spread among national, state, and local congregate living settings of all types, **WAAN strongly supports Wisconsin joining 18 other states in adding congregate living residents to vaccine priority group 1b.** Additionally, WAAN supports the Subcommittee recommendation to vaccinate staff working in congregate living facilities at the same time, as they are also at increased risk due to their exposure in these settings.

❖ **Frontline (public facing) essential workers**

In addition to the frontline (public facing) essential workers included in the Vaccine Distribution Subcommittee’s recommendations, **WAAN also recommends the following group for inclusion in vaccine priority group 1b:**

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<sup>8</sup> Medicaid Adult Home and Community-Based Services: COVID-19 Data.  
<https://www.dhs.wisconsin.gov/hcbs/data.htm#cases>, accessed on Jan. 16, 2021.



- **Transit workers** - ACIP relied on the Department of Homeland Security’s Cybersecurity and Infrastructure Security Agency (ISA) guidance to define frontline essential workers as the subset of essential workers likely at highest risk for work-related exposure to SARS-CoV-2. Transit workers were included among these frontline essential workers because their work-related duties must be performed on-site and involve being in close proximity to members of the public.<sup>9</sup>

Large COVID-19 outbreaks have been reported in multiple essential industries. Several factors contribute to workplace transmission in these industries, including high-density workplaces, prolonged close contact with coworkers, congregate/crowded housing, **reliance on public or shared transportation**, the need to hold multiple jobs, and frequent community contact among workers. In addition to increased occupational exposure risks, transit workers were found to have high percentages of workers who experience a disproportionate burden of COVID-19 morbidity and mortality, including at least 15% of workers in the transit/postal/messenger/courier and trucking industries were >60 years and 26% of transit workers are Black (compared to 12% of all workers). Transit workers were also found to have significantly higher rates of >1 underlying medical condition (asthma and diabetes) than other non-health care industries essential worker groups.<sup>10</sup>

Across the country, thousands of transit workers have tested positive for COVID-19 and hundreds have died.<sup>11</sup> Vaccination of transit workers addresses their elevated occupational risk for COVID-19 exposure due to close interaction with the public. Additionally, keeping transit workers on the job is critical to ensuring other essential workers – health care (hospitals, clinics, nursing homes, and assisted living facilities) and non-health care (grocery stores, schools, childcare centers) get to their places of employment. Without the services provided by transit workers, many other essential services would not be able to operate. In addition to transporting other essential workers, transit workers are providing trips for the everyday needs of the public

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<sup>9</sup> Dooling, K., Marin, M., Wallace, M., Mcclung, N., Chamberland, M., Lee, G. M., . . . Oliver, S. E. (2021). The Advisory Committee on Immunization Practices’ Updated Interim Recommendation for Allocation of COVID-19 Vaccine — United States, December 2020. *MMWR. Morbidity and Mortality Weekly Report*, 69(5152), 1657-1660. doi:10.15585/mmwr.mm695152e2

<sup>10</sup> Centers for Disease Control and Prevention. *Evidence Table for COVID-19 Vaccines Allocation in Phases 1b and 1c of the Vaccination Program*. <https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19/evidence-table-phase-1b-1c.html>. Accessed January 11, 2021.

<sup>11</sup> Communications, N. W. (2020, October 20). Nearly a Quarter of New York City Transit Workers Report Having Had COVID-19. Retrieved January 11, 2021, from <https://www.nyu.edu/about/news-publications/news/2020/october/transit-workers-covid-pilot-study.html>

including medical appointments, dialysis, prescription refills, groceries, retail stores, and other community businesses.

Though transportation providers have implemented cleaning and sanitation routines for vehicles, installed plexiglass barriers where space permits, and wear available personal protective equipment as they carry out their work, the nature of the transit workers' job requires them to interact with the public regularly during their work. Many asymptomatic residents are using transit services (not just designated healthcare transportation which was included in priority group 1a) to access COVID-19 testing and vaccination sites, clinics, dialysis centers, hospitals, and other services. For all the reasons noted, **WAAN strongly encourages the DHS to add transit workers to the SDMAC Vaccine Distribution Subcommittee's list of frontline, public facing, essential workers for COVID-19 vaccine priority group 1b.**

Thank you for your consideration of our comments on these recommendations for the Wisconsin DHS for COVID-19 vaccine priority group 1b.

Contact:

Robert J Kellerman

Executive Director

p. 608-243-5672 | m. 608-228-8084

[bob.kellerman@gwaar.org](mailto:bob.kellerman@gwaar.org)

**From:** [Kathy Johnson](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1b  
**Date:** Sunday, January 17, 2021 10:06:35 AM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

To whom it may concern,

Please consider including those who receive their care at home, including those with ventilators, be included in 1b vaccinations. The gentleman who I provide nursing care for as a PDN receives nursing care 24/7 with a team of about 15 nurses who come into his home. Thank you.

Kathy S. Johnson RN

Sent from my iPhone

**From:** [Margaret Fay](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Covid Vaccine  
**Date:** Sunday, January 17, 2021 9:53:28 AM

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January 16, 2021

Please approve early Covid-19 vaccine for those individuals with disabilities and rare conditions living with their family and or caregivers.

This vulnerable population is a high risk for complications from Covid-19. Families with children with special needs are the essential workers for this population. Parents, siblings over 16 and caregivers are the vital safeguards for a very vulnerable population.

Thank you for your consideration.

Margaret Fay  
Oconomowoc WI

**From:** [gvandenberg@everyactioncustom.com](mailto:gvandenberg@everyactioncustom.com) on behalf of [Greg Vandenberg](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:48:52 AM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.


Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mr. Greg Vandenberg



**From:** [Rachel Schwarz](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Group 1B Thoughts-Early Intervention  
**Date:** Sunday, January 17, 2021 9:43:37 AM

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Hello,

I am a Speech-Language Pathologist who works in early intervention (Birth to 3 home visiting). I am hopeful our services would be included under 1B as a part of Education and Childcare. If not already planned on being included, I would ask we seriously be considered.

We've been doing our best with providing virtual services but when needed providers are going into family homes putting themselves and families in the community at risk. Having the vaccine would allow for more in-person services for these families with children who have special needs in the critical developmental years of birth to age three.

Thank you,

Rachel Schwarz

**From:** [markawendricks@everyactioncustom.com](mailto:markawendricks@everyactioncustom.com) on behalf of [Mark Wendricks](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:38:10 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Hello Melissa and Jimmy,

This message is imperative that some of our most vulnerable, those dealing with food insecurity, have the support that they need by having food pantry employees and volunteers, many of whom are retirees and potentially high risk themselves, are vaccinated as soon as possible. Please support this conversation.

Sincerely yours  
Mark A. Wendricks

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mr. Mark Wendricks





**From:** [bavinwi@everyactioncustom.com](mailto:bavinwi@everyactioncustom.com) on behalf of [Margaret Bavin](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:34:26 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Approximately 17% of our households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live. Recently we had a client come in without a mask, a requirement for all of our clients. He told us that he had a medical reason that he could not wear a mask. He offered to show us his card. A former client of our Food Pantry recently returned from CA. He is deaf so I went outside and pulled down my mask so he could read my lips and we could get his name. And there are clients with medical conditions that are not able to load the food that they get from the pantry into their vehicles. So a volunteer loads their food for them.
- The hunger-relief network relies heavily on volunteers to fulfill the mission. Our entire staff of volunteers are seniors. And we have no paid staff. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,

Ms. Margaret Bavin



**From:** [phabeck@everyactioncustom.com](mailto:phabeck@everyactioncustom.com) on behalf of [Patti Habeck](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:14:21 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Ms. Patti Habeck



**From:** [dewendricks@everyactioncustom.com](mailto:dewendricks@everyactioncustom.com) on behalf of [Danielle Wendricks](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:13:42 AM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Miss Danielle Wendricks



**From:** [The Open Seat](#)  
**To:** [DHS SDMAC](#); [Rep.Hong - LEGIS](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential HUNGER RELIEF WORKERS in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 9:12:51 AM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

Hello --

I am an undergraduate student at UW-Madison and the Internal Director for the UW-Madison Open Seat food pantry. In my position, I organize volunteers to distribute food at our various food distributions. I am writing to **request inclusion of vaccines for frontline, essential hunger relief workers in phase 1B.**

Like other food pantries and resources, we have flipped our model completely to get food out to our UW students, while the need for food is even greater. There is an increased need for food from students on campus! Our students are often higher risk. They are a part of vulnerable populations, as they might be caring for at-risk family members, working essential jobs, or have health disparities due to their economic situations. They are unable to order groceries online for delivery, so must expose themselves to the elements to receive their weekly packages of food. The COVID-19 vaccine **is a critical step toward ensuring the safety and health of our food pantry users.**

Additionally, due to limited staffing abilities, if one of our staff members/volunteers contract the virus, it would be challenging to continue our work due to the rest of us needing to quarantine and our space needing to be disinfected. This would impact our ability to get food out to those students experiencing food insecurity.

I hope you will consider adding **essential and frontline hunger relief workers to the 1B phase** of the vaccine implementation.

Best wishes and please take care,

**Danielle Wendricks (she/her)**

*Internal Director for The Open Seat*

[Student Activity Center](#)

E: [openseat@asm.wisc.edu](mailto:openseat@asm.wisc.edu)

**From:** [Linda McNamara](#)  
**To:** [DHS SDMAC](#)  
**Subject:** covid 19 immunizations for adults in long term care/badger care who live with their families  
**Date:** Sunday, January 17, 2021 9:06:08 AM

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Please elevate adult individuals with disabilities to a priority group for receiving the covid 19 vaccination.

These individuals who are living with their families have not been able to safely go into the community for nearly a year. This has left them isolated from work, volunteering, social interactions with friends and peers, and from being able to hire new caregivers. For many of them, the independence they were striving for has disappeared. The isolation they are feeling from their precovid lives is a contributing factor to increased anxiety/depression.

They are at an increased risk of becoming seriously ill from covid 19, being hospitalized, and needing life saving interventions. In many cases they are not able to understand what they are going through, what they need or how to advocate for themselves while seriously ill and alone.

Long term care Medicaid recipients in our community deserve to be a prioritized group for vaccination for their own well being and to decrease their impact on our hospital systems during this pandemic.

Thank you

Linda McNamara

Sent from my iPhone

**From:** [kareltormey48@everyactioncustom.com](mailto:kareltormey48@everyactioncustom.com) on behalf of [Karel Tormey](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Sunday, January 17, 2021 5:44:24 AM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mrs. Karel Tormey



**From:** [Leslie Scherzer](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Priority list for covid19 vaccine  
**Date:** Saturday, January 16, 2021 11:33:58 PM

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I would also recommend family non paid primary caregivers who care for their parents/grandparents. These people need to stay healthy in order to care for the elderly who are not in nursing/assisted living homes and not spread covid to their loved ones.



**From:** [Vicki Seibel Betzold](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Food Pantry Volunteers Need to Be Vaccinated in Stage 1b  
**Date:** Saturday, January 16, 2021 10:56:26 PM

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I am a weekly director volunteer at the Amery Area Food Pantry in Amery, WI. We serve approximately 150 families each month. Nearly 25% of our clients are senior citizens and disabled people. In March, we allowed people to come inside our small pantry and asked them to sanitize their hands. Not everybody cooperated. Later that spring, we moved outside to increase safety for everyone. This winter and early spring, weather does not allow us to work outside. We ask clients to come into the west campus cafeteria of Amery Hospital and Clinic to pick up food we have packed for their families and to choose some vegetables, fruit, and bread. We cannot take the clients' temperatures. We wear masks and ask our clients to do the same. It is difficult to keep a distance of 6-10 feet.

Feeding the poor and unemployed is a necessity. People who have not needed our service in years have returned. Some people feel ashamed that they need our help for the first time, though it is through no fault of their own. Schools here were completely virtual from before Thanksgiving until January. Children were home for more meals and parents were forced to stay home to care for them.

All of our volunteers are age 65 or older, with the exception of me. ( I hope to live to be 65 years old in April.) We should be considered for vaccinations in the second round. Many of our clients are not in good health. We need to protect them, as well.

Thank you for considering all food pantry volunteers in Wisconsin as being Frontline workers, too.

Vicki Seibel Betzold



**From:** [Dawn Grelle](#)  
**To:** [DHS SDMAC](#)  
**Subject:** vaccination priority groups  
**Date:** Saturday, January 16, 2021 9:30:54 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

I am a private patient advocate/care manager and I work with seniors who have medical challenges both in their homes and in facilities. Many of them have been stuck in their apartments or rooms at facilities for months and are feeling significant effects of social isolation. They are depressed, lonely and in many cases declining cognitively. Many have not seen their families since March and do not have the resources to zoom or FaceTime with them- nor do they have the option to simply go out for a drive. Staff in assisted living facilities are burned out and exhausted beyond belief and are not often adhering to CDC guidelines, thus putting these seniors at a higher risk yet of contracting Covid.

My understanding is that the vaccinations have begun reaching into SNF's but not assisted living facilities as of yet. I am hopeful that public health will find a way to help expedite the process in ALF's. I hope that our frail seniors in these facilities and the ones with numerous health conditions will be prioritized and afforded the opportunity to receive the vaccination before other populations that are not as vulnerable.

Thank you for your consideration in this matter and for all that you are doing for all of us.

Dawn Grelle

**Dawn Grelle, BCPA**  
**Board Certified Patient Advocate**



*A New Dawn Patient Advocates, LLC*  
(608)206-0637  
[Dgrelle@ANewDawnPatientAdvocates.com](mailto:Dgrelle@ANewDawnPatientAdvocates.com)  
[www.ANewDawnPatientAdvocates.com](http://www.ANewDawnPatientAdvocates.com)

This email may contain confidential or private information. If you are not the intended recipient or designated agent, please be advised that you may not copy, forward or disseminate this information in any manner. If you have received this email in error, please inform the sender immediately.

**From:** [jcschell6868@everyactioncustom.com](mailto:jcschell6868@everyactioncustom.com) on behalf of [Cindi Schell](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Saturday, January 16, 2021 8:48:51 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

My husband and I are board members for the Cumberland food Pantry and we work every week preparing boxes for drive thru distribution and then distribute these boxes plus fresh produce , meat and dairy products. Our pantry serves 400 families, distributing 160,000+ pounds in 2020. We are both over 70 as are 4 other board members and the 3 other volunteers we have. We are all in the at risk age group and yet we must continue to operate the Pantry or many, many people will not have this main food source.

Please seriously consider adding hunger relief workers to Phase 1b category. Thank you

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mrs. Cindi Schell



**From:** [linda.baderfamily.com](mailto:linda.baderfamily.com)  
**To:** [DHS SDMAC](#)  
**Subject:** Covid Vaccine for people with disabilities  
**Date:** Saturday, January 16, 2021 7:42:28 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Hello,

I am righting regarding the distribution of the COVID Vaccine. I understand that different populations need to be prioritized with health care/ front line workers and elderly receiving the vaccine first. I believe that people in the Family Care/IRIS program should be considered for 1B status, even if they do not live in a group or congregate living situation. The reality is that individuals who have a developmental disability are at overall increased risk for serious complications from COVID, as many of them have additional underlying medical conditions. Many of these individuals receive care from care workers who are going from home to home and increase the risk of these individuals being exposed to COVID. In addition, due to the fact that they are often receiving care from day services, they are in settings where they are congregating with more people and unable to be isolated. Furthermore, many people with intellectual disabilities are unable to understand and comply!  
with the safety protocols of wearing a mask or socially distancing.

I realize that there are many populations of people who need and want the Covid Vaccine. I hope that you will consider individuals with developmental disabilities for the 1B status.

Sincerely,

Linda Bader

**From:** [cheryl bowman](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine subcommittee and "Phase 1B"  
**Date:** Saturday, January 16, 2021 7:39:30 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

Dear Committee members,

My name is Cheryl Bowman. I am an Executive Co-Director of the Amery Food Pantry in Amery, Wisconsin. Amery is a small rural community of about 3000 people. Many of our small family owned businesses have had to close their doors during the pandemic.

Our pantry is located in the Behavioral Health Center as well as the Wound Healing Center of the Amery Hospital. Our pantry has been open to our clients ever since the pandemic began back in March, 2020. Our volunteers, who are all individuals of 65 years or older have worked very hard to keep the pantry open as we are considered an essential business while risking their own health.

We are open two days a week for a total of 6 hours. We see an average of 150 families a month with about 20% being senior citizens.

We have changed our procedures significantly as to how the food is given to the clients which has increased our work load a great deal and still puts us at risk when handling the food over to the clients.

Many clients rely only on their Social security checks to put food on their table. Their visit to us once a month helps them out greatly.

Please consider how important our job is in serving the hungry in our small community. If just one of us gets Covid, the pantry will likely have to close its doors.

Sincerely,  
Cheryl Bowman



**From:** [Michael Jones](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine Subcommittee - Phase 1B  
**Date:** Saturday, January 16, 2021 5:16:59 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

If not being done yet, I also suggest vaccinating paid employees and volunteer employees who work in homeless shelters and food pantries.

**From:** [ronvick@everyactioncustom.com](mailto:ronvick@everyactioncustom.com) on behalf of [Ronald Kvamme](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Saturday, January 16, 2021 2:20:42 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mr. Ronald Kvamme



**From:** [Jill Kowalske](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine Distribution  
**Date:** Saturday, January 16, 2021 11:45:37 AM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

To: Members of the Vaccine Distribution Subcommittee

This message is to express support for prioritizing disabled individuals and their caregivers in the distribution of SARS-COV-2 vaccines in Wisconsin.

First, please explicitly include all caregivers of participants in the IRIS, Family Care, CLTS, and Katie Beckett programs alongside other essential health workers in Phase 1A. Please indicate that "caregivers" includes unpaid family members providing an institutional level of care to disabled individuals at home.

Second, please explicitly include all participants in the IRIS, Family Care, CLTS, and Katie Beckett programs, along with yet-unvaccinated caregivers, in Phase 1B.

Ethical distribution of the vaccine prioritizes these individuals for reasons including, but not limited to:

- Vulnerability to Exposure - Disabled individuals are vulnerable to exposure from unavoidable contact with caregivers
- Disproportionate Severity of Impact - Disabled individuals are more severely impacted by SARS-COV-2 and at greater risk of death from its complications
- Health Worker/Caregiver Shortages - Disabled individuals face a shortage of qualified, well-trained caregivers; SARS-COV-2 outbreaks among caregivers, including unpaid family members, exacerbate this already acute shortage
- Access to Critical Health Services - Disabled individuals with complex health needs disproportionately seek care and/or have been foregoing needed care in medical facilities and other settings where SARS-COV-2 is likely to circulate

Your careful consideration of this request is appreciated.

Thank you.



**From:** [Frank Sterzen](#)  
**To:** [DHS SDMAC](#)  
**Cc:** [Frank Sterzen](#)  
**Subject:** Home care workers  
**Date:** Saturday, January 16, 2021 11:24:31 AM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

Please consider including home care and home health care workers in the next round of vaccine recipients. These folks have to go from home to home and facility to facility to provide health care for the ill and supported living for the disabled. Many of these people work for more than one employer because they get paid so little which only increases the risk of exposure. They should be given the same priority as those doing similar jobs in hospital and group settings. Thank you.

Sincerely,  
Frank A. Sterzen

**From:** [Lori Lutze](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine Subcommittee Phase 1b  
**Date:** Saturday, January 16, 2021 4:58:31 AM

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Good morning. I saw where comments could be submitted for the next phase rollout.

While I totally am excited for all the rollouts of this vaccine , I feel phase 1a is still delayed on some levels and we should try to complete one phase before the next one.

I work at an Assisted Living and we still have not had our clinic - and is looking like we continue to be weeks out till the first injection. I am not sure why we would advance to the next phase when the one we are in is not even done.

I'm all about vaccinating and appreciate everyone's role in it but seniors and care givers are really needed immediately to stop this spread.

Thanks

**From:** [Shannon R. Mullins](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Public comment regarding 1b  
**Date:** Saturday, January 16, 2021 2:31:01 AM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

For panel discussion regarding 1b phase

I was unable to find any other link for comment on your website for public comment for 1b.

I hope it is ok for me to leave it here.

Let me start by saying thank you for all you do!

Working in long term care we have been seeing a shortage of workers which is no surprise.

Unfortunately with the COVID virus and the quarantine recommendations it puts an even larger strain on the work force for LTC. Extending immunization to family members of Health care workers would be beneficial. Not just for the fact of keeping workers working, and not having to quarantine, but not losing workers for family leave having to stay home to take care of ill family members.

I have been lucky enough to be included in 1a and have had my 1<sup>st</sup> vaccine so far. My family has worked hard over the last year to keep us safe, which in turn keeps my patients safe. (As I type this from our COVID unit) 😊

Thank you for listening

Shannon R. Mullins RN

Park Manor LTC and rehab

**From:** [bwray@everyactioncustom.com](mailto:bwray@everyactioncustom.com) on behalf of [Brent Wray](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Friday, January 15, 2021 7:15:20 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mr. Brent Wray



**From:** [mikrueg527@everyactioncustom.com](mailto:mikrueg527@everyactioncustom.com) on behalf of [McKenzie Mellecker](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Friday, January 15, 2021 7:13:57 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

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Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mrs. McKenzie Mellecker



**From:** [meqzymom@everyactioncustom.com](mailto:meqzymom@everyactioncustom.com) on behalf of [Megan Murphy](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Friday, January 15, 2021 7:11:05 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.


Prioritization of hunger-relief frontline workers is imperative for the following reasons:

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- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
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Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mrs. Megan Murphy



**From:** [Denise Marie Miesbauer](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine Distribution  
**Date:** Friday, January 15, 2021 6:35:34 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

To: Members of the Vaccine Distribution Subcommittee

This message is to express support for prioritizing disabled individuals and their caregivers in the distribution of SARS-COV-2 vaccines in Wisconsin.

First, please explicitly include all caregivers of participants in the IRIS, Family Care, CLTS, and Katie Beckett programs alongside other essential health workers in Phase 1A. Please indicate that "caregivers" includes unpaid family members providing an institutional level of care to disabled individuals at home.

Second, please explicitly include all participants in the IRIS, Family Care, CLTS, and Katie Beckett programs, along with yet-unvaccinated caregivers, in Phase 1B.

Ethical distribution of the vaccine prioritizes these individuals for reasons including, but not limited to:

- Vulnerability to Exposure - Disabled individuals are vulnerable to exposure from unavoidable contact with caregivers
- Disproportionate Severity of Impact - Disabled individuals are more severely impacted by SARS-COV-2 and at greater risk of death from its complications
- Health Worker/Caregiver Shortages - Disabled individuals face a shortage of qualified, well-trained caregivers; SARS-COV-2 outbreaks among caregivers, including unpaid family members, exacerbate this already acute shortage
- Access to Critical Health Services - Disabled individuals with complex health needs disproportionately seek care and/or have been foregoing needed care in medical facilities and other settings where SARS-COV-2 is likely to circulate

Your careful consideration of this request is appreciated.

Denise Wagner

[Sent from Yahoo Mail on Android](#)

**From:** [Deb Simon and Bill Wambach](#)  
**To:** [DHS SDMAC](#)  
**Subject:** GROUP 1b vaccines for hunger-relief frontline workers and volunteers  
**Date:** Friday, January 15, 2021 6:26:02 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

Please give careful consideration to including hunger-relief frontline workers and volunteers in the Group 1b vaccine.

Our Neighborhood food pantry is absolutely essential to addressing the ever increasing hunger-relief going as this pandemic continues.

Thank you for your consideration.

Bill Wambach



**From:** [blueberrycabin@everyactioncustom.com](mailto:blueberrycabin@everyactioncustom.com) on behalf of [Debra Tietz](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Friday, January 15, 2021 6:08:05 PM

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Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.

Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
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- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
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Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mrs. Debra Tietz



**From:** [Don Bartig](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine subcommittee- phase 1b  
**Date:** Friday, January 15, 2021 6:08:00 PM

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**Caution: Message from external sender. Do not click on links or open attachments unless you recognize the sender.**

I am the coordinator of the Hope and Friends Backpack Food Program. Our volunteers provide over 100 meals to elementary and middle school students in the Ladysmith School District. While our school administrators are doing all they can to keep schools open, I feel it is imperative that these food distribution workers be placed in the 1B priority to receive Covid-19 vaccine. All are retired volunteers, all are concerned about Covid, but all are still on-the-line to provide weekend meals to kids in need.

Sincerely, Don Bartig

**From:** [blueberrycabin@everyactioncustom.com](mailto:blueberrycabin@everyactioncustom.com) on behalf of [Michael Tietz](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Requesting inclusion of vaccines for frontline, essential hunger-relief workers in phase 1B of the Wisconsin State Disaster Medical Advisory vaccine subcommittee recommendation  
**Date:** Friday, January 15, 2021 6:07:12 PM

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Dear Wisconsin State Disaster Medical Advisory Committee Vaccine Subcommittee,

Thank you for your efforts to ensure efficient and equitable distribution of vaccines. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include hunger-relief frontline workers and volunteers. These workers and volunteers are essential to continue the unprecedented distribution of food to those Wisconsinites experiencing hunger during the pandemic and economic crisis.

Prioritization of hunger-relief frontline workers is imperative for the following reasons:

- Hunger-relief workers and volunteers are the critical force behind the wellbeing of the record number of Wisconsinites facing food insecurity. One in eight Wisconsinites, including one in five Wisconsin kids, don't know where their next meal is coming from. The hunger-relief network is mobilized like never before to meet this need. Our network is serving about 60% more individuals than last year. And Wisconsin's Feeding America member food banks and partners distributed about 90 million unprecedented pounds of food to those experiencing food insecurity from March to September of 2020, that is 25 million more pounds than was distributed in all of fiscal year 2019.
- The hunger-relief frontline workers and volunteers serve individuals in vulnerable health situations. People experiencing food insecurity have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID-19 complications. This population frequently has less access to consistent quality health care and insurance. Also, 23% of households served has at least one senior and we know that age is a good indicator for risk of severe COVID-19 complications or death. People of color disproportionately experience food insecurity and are also known to be at greater risk of severe COVID-19 complications.
- It is our duty to ensure the safety of those being served. Individuals being served and in contact with hunger-relief frontline workers have few other options but to seek assistance from food pantries and meal sites do not have a way to mitigate their COVID-19 risk. They cannot avoid the interaction with staff and volunteers and rely on the organization to help meet basic needs and provide them with the meals they need to live.
- The hunger-relief network relies heavily on volunteers to fulfill the mission, many (37%) of these volunteers are seniors. An estimated 52 percent of food pantries and meal sites report having no paid staff. Among the 46 percent of agencies with paid staff, the median number of paid full-time equivalent staff members reported is four. As a result, if staff or volunteers were to test positive for COVID-19 and potentially require other staff or volunteers to quarantine, food distribution operations would be greatly impacted.

Collaboration between our hunger-relief organizations, public health, and those administering the vaccine will be essential to planning for equitable and efficient distribution, addressing concerns, educating about and adhering to appropriate protocols.

The COVID-19 vaccine is a critical step toward ensuring the safety and health of staff, volunteers, and those accessing food resources. It also ensures that food banks have the capacity to continue distributions at this unprecedented rate to feed Wisconsinites experiencing hunger. Thank you for your consideration.

Sincerely,  
Mr. Michael Tietz



**From:** [connie oliver](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Covid-19 vaccine  
**Date:** Friday, January 15, 2021 5:57:31 PM

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As a state licensed Adult Family Home in Racine WI. Would ask that you consider the long term care homes like ours for the next distribution of the vaccine. My residents as most have underlying medical conditions that should qualify them and our caregivers as high priority candidates. As we are in a caregiver crisis it is important that they are healthy and come to work. I see a mental decline in my residents and they are experiencing agitation and anxiety being home bound 24/7.

Thank You for your timely response to all of us.  
Connie Oliver/ owner

**From:** [Clair Kentopp](#)  
**To:** [DHS SDMAC](#)  
**Subject:** vaccine distribution subcommittee comment  
**Date:** Friday, January 15, 2021 5:03:30 PM

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I feel every person in independent living should be allowed to receive the vaccine regardless of age. Some of us chose to live on a campus that offers independent living as well as assisted living and extended care living for the flexibility of care as our life changes and those changes often occur not because of age. COVID threatens our lives more than anything else right now and age has nothing to do with it. Dead is dead at any age. We need to get that vaccine into as many people as possible as soon as possible

**From:** [Herstand, Marc](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine sub committee Phase 1B  
**Date:** Friday, January 15, 2021 3:45:40 PM  
**Attachments:** wisconsin state disaster medical advisory committee letter on phase 2.doc

---

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Dear Wisconsin State Disaster Medical Advisory Committee:

Attached please find our comments on the proposed Covid-19 Vaccination Phase 1B.

Sincerely yours

Marc

Marc Herstand, MSW CISW  
Executive Director  
National Association of Social Workers, Wisconsin Chapter  
131 West Wilson Street, Suite 903  
Madison, WI 53703  
(608) 257-6334  
(608) 320-1207 Cell  
[Mherstand.naswwi@socialworkers.org](mailto:Mherstand.naswwi@socialworkers.org)



**Social Workers: NASW is Here for You!**

Find Coronavirus resources at [socialworkers.org/covid19](https://socialworkers.org/covid19)

*Please be safe.*

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Dear Wisconsin State Disaster Medical Advisory Committee

Thank you for providing this opportunity to provide feedback on the Covid-19 Vaccine Distribution Phase 1B. I appreciate the work you have all devoted to developing the vaccine distributions plans.

I am writing to request that front-line certified and licensed social workers be specifically referenced as one of the front line essential worker groups.

Although some certified and licensed social workers are providing tele-mental health, there are many other social workers who have continued to provide direct service to vulnerable clients throughout the Covid-19 pandemic. These include social workers providing child protection, adult protection, youth justice services, crisis services, school social work in public schools that have remained open, hospice and hospital social work and other practice areas. There are also social workers who are providing mental health counseling in person because tele-mental health is not workable for their clients. Although some certified and licensed social workers have become vaccinated during Phase 1A, others have not been provided access to the vaccination.

Vaccinating front-line social workers as soon as possible will help ensure these staff stay healthy and are able to continue to meet the critical social services and mental health needs of our state.

I appreciate your consideration of this request.

Sincerely yours

Marc

Marc Herstand, MSW CISW  
Executive Director  
National Association of Social Workers, Wisconsin Chapter  
131 West Wilson Street, Suite 903  
Madison, WI 53703  
(608) 257-6334  
(608) 320-1207 Cell  
Mherstand.naswwi@socialworkers.org

**From:** [chris4includes@aol.com](mailto:chris4includes@aol.com)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccination - Phase 1B  
**Date:** Friday, January 15, 2021 3:28:27 PM

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I would encourage this committee to read the FACEBOOK page for Wisconsin Board of People with Development Disabilities and the multiple comments requesting vaccination for their adults with disabilities, inclusive with their support team, Family Care and IRIS participants and staff.

There are many valuable comments in favor of vaccinations for this cohort and their supports.

Chris Wasik



**From:** [Mary Rideout](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine Subcommittee and Phase IB  
**Date:** Friday, January 15, 2021 2:25:51 PM

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Vaccine Distribution Subcommittee, This is a request to specifically add the Social Work profession (Social Workers) to the list of non-EMS responders to receive the COVID-19 vaccine during Phase IB. Justification is indicated below:

1. The impact of the COVID-19 pandemic on county Social Work: Social Workers have been required to respond to crisis situations throughout the pandemic. They often respond *with law enforcement* to situations involving children. They must respond to situation where an elderly or disabled adult is at risk. Social distancing in these situations is not possible, which leads to increase risks to Social Workers.
2. The specific impact the pandemic has had on business or personnel: Some County Human/Social Service agencies have entered into Mutual Aid Agreements with other counties to ensure that a trained and knowledgeable workforce is available to respond to crisis situations and to maintain statutorily required functions. The skills and knowledge needed to respond to child or adult protection issues takes many months to attain. It is not a function that anyone can perform. Smaller agencies are at risk of having inadequate staff to perform essential function if staff become exposed or infected and are unavailable to perform their duties.
3. Other concerns: There is already a shortage of Social Workers in the northern region of the state. The added stress of the pandemic is making an already very difficult career worse. The role Social Workers play in our communities, protecting our most vulnerable citizens, is essential.

Thank-you for your consideration.

Mary Rideout  
Director  
Oneida County Department of Social Services  
PO Box 400  
Rhinelander, WI 54501  
715-362-5695 (v)  
715-362-7910 (fax)  
888-662-5695 (toll free)  
[www.ocdss.com](http://www.ocdss.com)

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**The science is in—wearing a mask works. Even if you feel fine, #MaskUp to protect yourself and those around you from #COVID19. [ama-assn.org/maskup](https://ama-assn.org/maskup)**

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**From:** [Dan McWilliams](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine subcommittee Phase 1B  
**Date:** Friday, January 15, 2021 2:18:26 PM  
**Attachments:** Letter to Sec Palm re vaccine\_12.11.20.pdf

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I have attached a copy of the WCHSA letter to Secretary Palm relating to social workers and advocacy to be in 1B as first responders. Throughout the pandemic, child protective services, crisis services, youth justice and adult protective services social workers have continued to provide face to face services to the public. This include hospital visits, home visits and community visits to the clients they serve. Their services are necessary for public safety and individual safety of their clientele. Please include these frontline workers in Phase 1B.

Dan McWilliams, Director  
Crawford County Health & Human Services Department  
225 N. Beaumont Rd.  
Prairie du Chien, WI 53821  
Phone: (608) 326-0248

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**From:** [Cates, Lisa A - DHS](#)  
**To:** [DHS SDMAC](#)  
**Subject:** FW: Letter from WCHSA re: vaccine  
**Date:** Friday, January 15, 2021 1:08:53 PM  
**Attachments:** Letter to Sec Palm re vaccine\_12.11.20.pdf

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**From:** Katie Davis <katie@wchsa.org>  
**Sent:** Friday, December 11, 2020 3:36 PM  
**To:** Palm, Andrea J - DHS <andrea.palm@dhs.wisconsin.gov>  
**Cc:** Amundson, Emilie A - DCF <Emilie.Amundson@wisconsin.gov>; Willems Van Dijk, Julie A - DHS <julie.willemsvandijk@dhs.wisconsin.gov>; Anstett, Julie L - DHS <JulieL.Anstett@dhs.wisconsin.gov>; Tuohy, John O - DCF <John.Tuohy@wisconsin.gov>; Deidrick-Kasdorf, Sarah <diedrick@wicounties.org>; Przybelski, Ray <przybelr@co.portage.wi.us>; Cable, Diane <Diane.Cable@co.eau-claire.wi.us>; Tessmann, Shawn <Tessmann.Shawn@countyofdane.com>  
**Subject:** Letter from WCHSA re: vaccine

Good afternoon Ms. Palm,

Please find the attached letter from the Wisconsin County Human Service Association regarding the COVID-19 vaccine. Thank you for your time and consideration.

Sincerely,

**Katie Davis, MS, MPA**  
Executive Director  
Wisconsin County Human Service Association  
612 W. Main St., Suite 200  
Madison, WI 53703  
608.630.2160 (mobile)

  
[www.wchsa.org](http://www.wchsa.org)

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developing partnerships in service delivery*



December 11, 2020

Secretary-designee Andrea Palm  
Wisconsin Department of Health Services  
1 W. Wilson Street  
Madison, WI 53703

*Sent via email only*

Dear Secretary-designee Palm:

The Wisconsin County Human Service Association (WCHSA) would like to draw your attention to a matter of importance to county human services and social services agencies. As you may know, social workers whose duties involve face-to-face interactions with community members face an increased risk of exposure to COVID-19, similar to that of other public employees typically labeled "first responders." In fact, during the pandemic, some counties have locally categorized these essential employees as first responders to help ensure they receive the equipment and other protections available to minimize their not only their own exposure and risk of infection, but also that of the community members they serve.

With a vaccine available in the near future, and as the Department of Health Services works with stakeholders to prioritize distribution of Wisconsin's vaccine supply, we respectfully request that front-line social workers, including those providing child protective services, adult protective services, youth justice services, and crisis services, be considered with the same regard as other first responders (e.g., law enforcement). Counties want to ensure that social work staff are able to provide critical services as safely as possible to individuals and families in crisis. Allowing this group of professionals to be vaccinated at the earliest opportunity will help ensure we maintain a healthy workforce that is able to meet the daily demands of their community work while also minimizing risk of exposure to those we serve.

Thank you very much for your consideration of this request.

Sincerely,

Ray Przybelski, President  
Wisconsin County Human Service Association

cc: Emilie Amundson, Secretary, DCF  
Julie Willems-Van Dijk, Deputy Secretary, DHS  
Julie Anstett, Director of Area Administration, DHS  
John Tuohy, Director, Bureau of Regional Operations, DCF  
Sarah Diedrick-Kasdorf, Wisconsin Counties Association

**From:** [Lee Jonas J](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Inclusion of Community Health Workers in higher tiers for COVID vaccines  
**Date:** Friday, January 15, 2021 12:12:12 PM

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Hello,

I am a family physician providing care to low income uninsured, underinsured in Madison. I have been training community health workers to provide community based services to underresourced neighborhoods for the past several years. It is unclear which tier they fit into. None are affiliated with any medical provider through which they can access vaccines for themselves. I strongly encourage this group of front line workers to be included in the 1b tier of individuals for consideration for the COVID vaccine.

Thank you.

Jonas

Jonas Lee, MD  
Department of Family Medicine and Community Health  
School of Medicine and Public Health  
University of Wisconsin—Madison  
Wingra Family Medical Center/Access Community Health Center  
1102 South Park St.  
Madison, WI 53715  
Cell: 608-207-0493

**From:** [AZ Snyder](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Social workers  
**Date:** Friday, January 15, 2021 12:11:57 PM  
**Attachments:** FinalLogo long.png

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Hello,

It is unclear where social workers, including CPS and juvenile justice, should fit in the prioritization. Please call human services workers out in the first responders section.

AZ

--

AZ Snyder, MSc  
Public Health Director/Health Officer  
Pierce County Public Health Department  
[ayslinn.snyder@co.pierce.wi.us](mailto:ayslinn.snyder@co.pierce.wi.us)  
Phone: 715-273-6782  
Fax: 715-273-6854



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**From:** [Jake Keneen](#)  
**To:** [DHS SDMAC](#)  
**Subject:** vaccination implementation - domestic violence shelters  
**Date:** Friday, January 15, 2021 8:20:06 AM  
**Attachments:** image005.png  
image006.png

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Hello. Thank you for your work to implement vaccinations throughout Wisconsin.

Please include domestic violence shelters in the next phase.

I work behind the scenes, so I am asking for the staff who work directly with clients.

Domestic violence shelters must be able to remain open to help victims fleeing violent partners.

Thank you for considering this request.

Jake Keneen  
Director of Administration  
The Women's Community  
3200 Hilltop Ave.  
Wausau, WI 54401-4026  
Phone: 715-842-5663  
Fax: 715-842-7051

[www.womenscommunity.org](http://www.womenscommunity.org)  
[www.facebook.com/womenscommunity](https://www.facebook.com/womenscommunity)





**From:** [kpophal](#)  
**To:** [DHS SDMAC](#)  
**Subject:** COVID-19 Vaccines  
**Date:** Thursday, January 14, 2021 9:37:44 PM

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I have a question regarding the vaccines for COVID-19. Why aren't social workers, especially those who work in CPS and going into homes where hygiene, social distancing and mask wearing are definitely not a priority, not considered AT LEAST as vulnerable as school teachers, daycare workers, etc.? In addition, I work as an estate planning paralegal and due to COVID-19, our caseload has greatly increased. Our clients tend to be the elderly. Wisconsin law requires we execute estate planning documents in person. This puts our clients and staff at risk. Is there any possibility of adding estate planning law firms to a higher priority for vaccines?

Thank you for your consideration.  
Kathi Pophal

Sent via the Samsung Galaxy S10+, an AT&T 5G Evolution capable smartphone

**From:** [Rebecca Tietje](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Frontline worker vaccinations  
**Date:** Thursday, January 14, 2021 9:15:11 PM

---

Hi,

I'm writing as I am concerned social workers in county public human services departments are not part of the 1B vaccination rollout. As child protective service social workers, we are going into COVID positive homes on a regular basis because we have to maintain child safety. Please reconsider including social workers in this rollout.

Thank you,

Becca Tietje

**From:** [Geri Segal](#)  
**To:** [DHS SDMAC](#)  
**Subject:** COVID-19 Vaccine Roll-out; Phase 1B recommendations  
**Date:** Thursday, January 14, 2021 6:33:38 PM

---

Hello Members of the WI State Disaster Medical Advisory Committee,

Thank you so much for your work on ensuring the vaccine rollout is efficient and equitable.

It is important that the Phase 1B recommendations for the COVID-19 vaccine include staff of Domestic Violence and Sexual Assault agencies. It is particularly important that this include workers of non-shelter agencies who are not otherwise included in recommendations for shelters, group and other congregate living facilities. Domestic violence and sexual assault workers provide mental health and life-saving services to victims, many of whom cannot meet safely via phone or video platform. Services include counseling, advocacy, safety planning and restraining order assistance. In some counties, victims and their advocates must seek restraining orders in-person, because restraining order court has no video or phone option. Advocacy during forensic exams is another service which is much better facilitated in person.

It is important that staff of non-shelter domestic violence and sexual assault agencies be afforded the protection of the COVID-19 vaccine so that these vital services continue with minimized risk of COVID-19.

Thank you for your work and consideration,

*Geri Segal*  
*Executive Director*  
*Family Support Center*  
*geri@fscf.org*  
*715-723-1138*  
*P.O. Box 143*  
*Chippewa Falls, WI 54729*

*Pronouns: She, Her, Hers*

*“Going high means standing fierce against hatred.” Michelle Obama*

**From:** [D.Knief](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1b COVID-19 vaccine public comment  
**Date:** Thursday, January 14, 2021 10:01:24 AM

---

Good morning,

Please specifically include child welfare workers under the Non-EMS first responders category. Child welfare (CPS) workers across the state are required to make in-person emergency visits to assess for child safety after safety concerns are reported, just as police.

Thank you,

**From:** [Katie Davis](#)  
**To:** [DHS SDMAC](#)  
**Cc:** [Anstett, Julie L - DHS](#)  
**Subject:** vaccine subcommittee - Phase 1B comments  
**Date:** Thursday, January 14, 2021 9:34:47 AM  
**Attachments:** Letter to Sec Palm re vaccine\_12.11.20.pdf

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Greetings,

The Wisconsin County Human Service Association (WCHSA) submits the attached letter for the subcommittee's consideration in finalizing Phase 1B vaccine plans. We request that social workers and similar front-line human services professionals providing in-person child welfare, youth justice, crisis, and adult protective services be specifically named as first responders for this phase. These individuals face an increased risk of exposure to COVID-19 similar to that of other non-EMS first responders and are responsible for helping to ensure the health and safety of our state's most vulnerable residents.

Thank you for your consideration.

Sincerely,

**Katie Davis, MS, MPA**  
Executive Director  
Wisconsin County Human Service Association  
612 W. Main St., Suite 200  
Madison, WI 53703  
608.630.2160 (mobile)



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developing partnerships in service delivery*

**From:** [CBECK2001@wi.rr.com](mailto:CBECK2001@wi.rr.com)  
**To:** [DHS SDMAC](#)  
**Subject:** Priority need for adult Protective Social Worker Covid Vaccine  
**Date:** Thursday, January 14, 2021 8:34:15 AM

---

The work of an Adult protective Service Worker employed by Milwaukee County Dept. on Aging is an important first responder position. often we investigators are Social Workers by degree. We are mandated to investigate referrals of abuse, neglect or exploitation to adults in the community. We often are first on the scene as we are mandated to make contact and best practice dictates face to face generally unannounced home visits are a preferred method. Our skill is to discuss referral issues with the alleged victim in private which frequently involves a team approach with a co-worker when an alleged perpetrator may be present on the scene and attempt to influence the investigation. An attempt is made to separate the individuals. Interviews frequently run 20-40 minutes of sustained contact with the adult in their home, hospital, assisted living, nursing home or apt. We are often first on the scene and routinely call police or ambulance responders when we uncover emergent risk. We must evaluate adults' cognitive abilities for decision making, the suitability of their environment and level of risk on a daily basis, getting new cases to investigate every couple of days.

Our risk is high as these environments are unknown and covid exposure is never certain. Reports where callers indicate a positive COVID CASE still must be investigated. Phone interviews and collateral information gathering often assist in our investigations but face to face contact is best practice. Frequently elders with dementia lack capacity to be accurate or aware of their covid status which puts us at consistent risk.

some deny that we are first responders and while we continue this work we have been denied covid risk pay but we continue to do our work. We have been essentially over looked perhaps because we number ONLY 13 INVESTIGATOR STAFF FOR ALL OF MILWAUKEE COUNTY. Interestingly a memo dated March 28, 2020 from Homeland Security on Covid( page eight) clearly identifies Adult protective workers as FIRST RESPONDERS. We are waiting for the vaccine and told we are someplace in 1B. We implore you to expedite that status to be 1A or at least a priority and first among 1B. We work in the community and zip codes all over the county and in some areas where covid is surging. We certainly are in a risky group but NOBODY seems to notice us. We certainly rate with the risk of first responders and obviously more than MINK FARMERS.

Thank you for the opportunity to express my and other Protective Service worker views,

Carol Beck M.SW  
33 year Social worker (Milw. Co.)

**From:** [Heather Stertz](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1b COVID-19 vaccine public comment  
**Date:** Thursday, January 14, 2021 6:10:22 AM

---

I am pleased to see the recommendations for phase 1b includes education and non-EMS frontline workers. I have two comments. I am not sure where social workers in state mandated child protection roles fall. Please consider all social workers who are required to respond to reports of child maltreatment (also called initial assessment workers) as first responders. They are forced to go to homes with little or no notice to assess for child abuse and work with families. Many of these families engage in activities that place them at higher risk of disease which also places the social workers at higher risk of disease. The social workers are forced to have direct contact with youth and families regardless of any COVID concerns.

I am very happy to see teachers on the list. I would like to see it defined as any school personnel with direct contact with students. It should not include teachers who work in all virtual settings such as online education programs (example Wisconsin Virtual Academy) It should include maintenance staff, principals and other school staff who have in-person contact with students or parents on a regular basis.

Thank you for your consideration.

Heather Stertz

Sent from my iPhone

**From:** [Goetz, Jade D - DCF](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Public comment  
**Date:** Wednesday, January 13, 2021 6:20:48 PM

---

Hi there,

I appreciate your committee's work on vaccination prioritization. I wanted to clarify where in the current drafted recommendations child protective services workers are being considered. Would this be as Non-EMS First Responders?

Initial Assessment Child Protective Services workers have been doing home visits to ensure child safety since the beginning of the pandemic, so I just want to make sure we are being seen and considered.

Thank you so much,

Jade Goetz, MSW



**From:** [Nicole Laird](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1b COVID-19 vaccine public comment  
**Date:** Wednesday, January 13, 2021 12:24:24 PM

---

I am advocating for social workers- specifically those involved in the child welfare system who are monitoring the safety of children in the community- to be vaccinated as soon as possible. They are going into homes and placed in dangerous situations every day while completing their job duties during the pandemic.

Sent from my iPhone

**From:** [Lora Hudson, LCSW, CSAC](#)  
**To:** [DHS SDMAC](#)  
**Subject:** COVID-19 Vaccinations for Mental Health Agency  
**Date:** Wednesday, January 13, 2021 10:18:02 AM

---

Good Morning Mrs. McCamy,  
I have been searching for a way to sign up Jessie Crawford Recovery clinicians and staff to receive the COVID 19 Vaccination. I have searched and searched but have not been able to find out how. Many of our college in the Madison area and this field have already gotten them due to being essential workers. Could you be so kind as to help me out with this?

Thank you and have a great day.

--

**Lora Hudson, LCSW, CSAC**

Owner/Therapist

Monarch BHC, LLC.

1310 Mendota St Suite 115

Madison WI 53714

[Lora.Hudson@monarchbhc.com](mailto:Lora.Hudson@monarchbhc.com)

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**From:** [Megan Kallmann](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1B  
**Date:** Wednesday, January 13, 2021 8:15:30 AM

---

Good morning,

Thank you for the tireless work to protect our community during the COVID-19 crisis. I am very excited to see the vaccination progress in our state.

However, I am writing today to voice my disappointment that social workers have been left out of Phase 1B. Under your department's requirements, social workers are conducting face-to-face visits with clients, often in their homes, with extremely limited protection. As one of these social workers, I agree with DHS - these visits ARE essential. But for us to do these client-facing jobs safely, Wisconsin must prioritize social workers in their vaccination plan.

I urge you to include community social workers among the other essential workers in vaccination Phase 1B.

Sincerely,  
Megan Engevoid, BSW



**From:** [Abbey Girman](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Phase 1B  
**Date:** Wednesday, January 13, 2021 7:56:39 AM

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Hello,

I wanted to advocate that social workers be included in the phase 1B for vaccinations.

While many social work positions are able to get vaccinated through their positions such as hospital social workers, residential care social workers, school social workers etc, there are some missing that are vital to the health, safety and well being of the community. In addition, many agencies may dismiss vaccinating social workers due to the limitations.

For example, Child Protection Services social worker are federally and state mandated to be available, all hours of all days including holidays and weekends to investigate assess for the safety of the most vulnerable in our community, the children that are reported to be abused or neglected. This includes requirements to go into home, meet with families, and speak directly with parties. They are not included in the plans to be vaccinated at this time. This affects the safety of the families that the social worker is there to protect and ensure their safety. There are also social workers that investigate elder and vulnerable adult abuse, that need to meet with people face to face because of lack of technology but also older generations often do not know how to use the technology necessary. This puts their clients are exceptional risk as the clients are in a vulnerable age bracket.

I urge that social workers of all kinds be included in this next phase of vaccinations.

Thank you.

Abbey Girman  
Pewaukee WI.

**From:** [Lori Wagnitz](#)  
**To:** [DHS SDMAC](#)  
**Subject:** Vaccine Subcommittee-- phase 1B  
**Date:** Tuesday, January 12, 2021 10:32:54 PM

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Good day,

I have reviewed the document outlining the proposed target groups to receive the covid-19 vaccine for "phase 1B".

It is understood the the task of setting priorities of this nature must be challenging, and thank you for managing this.

I would like to strongly urge your consideration for adding frontline child welfare/human services workers to the phase 1B target group. If further delineation is needed...I would recommend the focus to be on staff who are Statutorily bound to provide assessment and/or intervention to vulnerable populations in the community. This would include field staff in the area of child protective services (CPS) and human services staff who respond to concerns about the welfare of elderly or otherwise at-risk adults (i.e. the broad area of adult services or adult protective services).

Staff in these job categories provide service delineated in State Statute. In the area of CPS, those services must be available 24/7. They risk contracting covid19 every day. They come into contact with children of all ages as well as adult household members. They are taking children to medical facilities, transporting children to foster homes, visiting schools, etc. They therefore risk unwittingly passing covid on to other clients or their own family or coworkers. Further, I have seen firsthand the impact on the availability of a sufficient number of staff to meet the needs of the community (e.g exposure leads to quarantining which takes the staff person "out of the field", if the staff become ill, they may be out even longer). The staff face so many other dangers and challenges inherent in CPS work, and the risk of contracting covid19 compounds this greatly.

Thank you for your consideration.

Lori Wagnitz

