Dear [elected official],

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.

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.

Nancy Eisele

Rhinelander Area Food Pantry

Good Afternoon Vaccine Committee,

I was shocked, dismayed, and disappointed regarding your decision not to include hungerrelief frontline workers and volunteers. Since March 2020, volunteers and staff of Interchange Food Pantry take a risk by helping the general population by providing food; it is a passion for most of us. In 2019, we provided food to 13,870 guests, and because of the pandemic, our number s of guests served reached 33,646.

We have had to deal (even today) with guests who don't want to wear a mask; when speaking, they pull down their mask and don't cover their nose when serving a mask. How can you not include hunger-relief staff and volunteers as they risk getting the vaccine and may lose their life because of serving the poor.

Please reconsider and include the staff and volunteers of hunger-relief programs into phase 1B. Your decision of not protecting frontline workers and volunteers risk the lives of people who are making a difference to people in need during such a horrible time.

Peace and Happiness,

George Neureuther

Dear Members of the Wisconsin State Disaster Medical Advisory Vaccine Subcommittee:

I want to 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, such as those who operate the St. Vincent de Paul Food Pantry in Madison. Our pantry staff members and volunteers -- like those at other food pantries, meal sites and food banks around the state -are essential to continuing 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 well being 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 and for your work to keep the people of Wisconsin safe and well.

Sincerely,

Ernie Stetenfeld

CEO & Executive Director District Council of Madison Inc., Society of St. Vincent de Paul

P.O. Box 259686 Madison, WI 53725-9686

(608) 442-7200, Ext. 31 (office) svdpmadison.org & shopsaintvinnys.com

Helping Our Neighbors In Need

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

* People experiencing homelessness 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.

* People who have exhausted all other resources and are staying in a shelter 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.

* The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that 6.7% of Wisconsin's

population <<u>https://www.census.gov/quickfacts/Wl</u>> was Black in 2009. In November 2020, 43% of the population experiencing homelessness was Black <<u>https://icalliances.org/monthly-dashboard-wi</u>>.

* 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,

Derek Weinfurter, Intern, Harbor House Crisis Shelters of Superior, WI

Address: 2231 Catlin Ave. Superior, WI 54880

Derek Weinfurter

Pronouns: he, him, his Social Work major Ross/Hawkes Desk Manager | Residence Life

From:	Carol Sheier
To:	DHS SDMAC
Subject:	Shelter Need-COVID Vaccine
Date:	Monday, January 18, 2021 3:44:51 PM
Attachments:	Outlook-v3wlzw3p.png

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

- People experiencing homelessness 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.
- People who have exhausted all other resources and are staying in a shelter 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.
- The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that <u>6.7% of</u> <u>Wisconsin's population</u> was Black in 2009. In November 2020, <u>43% of the population</u> <u>experiencing homelessness was Black</u>.
- 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness - sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

We have had many young women and children in our shelter and housing programs who have lost jobs, daycare slots and apartments because of COVID. This population could benefit from the COVID vaccine.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution,

education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,



"House of Hope provides a safe and supportive place where young parents and children experiencing homelessness will become confident, independent, and successful members of our community."

From:	cdetjen@everyactioncustom.com on behalf of Curt Detjen
То:	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 3:34:54 PM

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 unprecedent 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 hungerrelief 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. Curt Detjen

From:	phabeck@everyactioncustom.com on behalf of Patti Habeck
То:	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 3:32:32 PM

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 unprecedent 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 hungerrelief 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:	psoma@everyactioncustom.com on behalf of Paige Soma
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 3:22:58 PM

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.

As volunteer coordinator for our Milwaukee food bank, my staff and I are needed on site every day to organize and lead volunteers in order to provide food to the growing number of our neighbors in need. Our organization has continued to diligently work through the pandemic, and I have been in awe of our volunteers who continue to provide their time and talents to help provide some aid to those facing hunger. As a front-line worker at the food bank, I love working with these dedicated volunteers, but by doing so during a world-wide pandemic, I am putting myself in harms way.

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 unprecedent 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 hungerrelief 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. Paige Soma

From:	Randall Brown
To:	DHS SDMAC
Subject:	Phase 1B recommendations
Date:	Monday, January 18, 2021 3:18:54 PM

- TO: WI State Disaster Medical Advisory Committee
- FR: Consumer Advocacy Council, La Crosse, WI

DT: January 18th, 2021

RE: Phase 1B recommendations

As residents of Wisconsin who have personally experienced being homeless, we ask that your Phase 1B recommendations for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative. People experiencing homelessness have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID disease. Without housing, I would be unable to manage my chronic kidney failure via dialysis and treatment, let alone effectively practice social distancing. Our council fights to end homelessness in the state's Coulee region, but the homeless community lacks access to consistent quality health care and will continue to be disproportionately affected by the pandemic unless specifically prioritized. Prioritization can also help reduce COVID-19 related health disparities. 6.7% of Wisconsin's population was Black in 2009, but accounted for <u>43% of the state</u> population experiencing homelessness last November, as well as a disproportionate amount of those both infected by the virus and lacking access to testing and vaccination right now. Once the shelter system and residents have access to the vaccine, staff time and resources can be redirected to obtaining and securing permanent housing for those in need. Until then, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

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.

Thank you,

Randall Brown & LeeAnn Martinez,

Consumer Advocacy Council

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: <!--[if !supportLists]-->• <!--[endif]-->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 hungerrelief 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 unprecedent 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.
- <!--[if !supportLists]-->• <!--[endif]-->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.
- <!--[if !supportLists]-->• <!--[endif]-->**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.

<!--[if !supportLists]-->• <!--[endif]-->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.

Mike

Michael Fordney, Chair Feeding America Eastern Wisconsin <u>mfordney@mac.com</u> 920-896-2902

From:	kathie.schellin@everyactioncustom.com on behalf of Katheryn Dvorak-Schellin
То:	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 3:08:09 PM

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 unprecedent 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 hungerrelief 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.

I beg of you, when you sit down to eat dinner tonight to consider the many people unable to do so safely, unless those with the ability to distribute available food to those in need can do so in a way that most limits the risk of Covid infection to our clients or ourselves. For many people, food pantries are their main source of food and it is our obligation as hunger-relief workers to continue to meet that need.

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. Katheryn Dvorak-Schellin

From:	joyd29@everyactioncustom.com on behalf of Joy Dowd
То:	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 2:50:00 PM

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 unprecedent 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 hungerrelief 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 who are at risk of serious illness themselves. Our volunteers regularly have contact with the homeless and those without consistent access to sanitary facilities. It is important that the volunteers have access to the vaccine.

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. Joy Dowd

From:	Gail Fitzgerald
То:	DHS SDMAC
Subject:	Vaccine Subcommittee - Phase 1B
Date:	Monday, January 18, 2021 2:27:06 PM

Dear Committee Members,

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. Most of our workers at the Rhinelander Area Food Pantry are retired seniors living in their own homes. We serve the community at-large, but my group also serves local school children who may face a food shortage in their homes each weekend.

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.

Good afternoon,

First of all, I wanted to thank all of you at the Wisconsin Department of Health services for all of the hard work, diligence and care that you have shown the residents of Wisconsin over the past year. Your work is truly saving the lives of our fellow Wisconsinites and we owe all of you at DHS a huge debt of gratitude.

I am writing to you to urge you to consider adding Hunger Relief workers in the 1B vaccination group. These tireless workers are literally feeding our fellow residents who are struggling to put food on the table for their families. Many of these Hunger Relief organizations have a small staff of workers and volunteers that literally feed hundreds of people. If one volunteer contracts COVID the domino effect has the potential to negatively impact the food availability for hundreds of families. Vaccination for this group of workers simply cannot wait.

Thank you again for considering adding Hunger Relief workers in the 1B vaccination group and THANK YOU again for all of your hard work and dedication to the health and safety of all people in Wisconsin.

Warm Regards,

Jeff Bergstrom



From:	Nuto Farms
То:	DHS SDMAC
Subject:	Farm Workers - Phase 1b COVID vaccination Plan
Date:	Monday, January 18, 2021 2:20:32 PM
Attachments:	image001.png

Dear Secretary-Designee Palm and Members of the SDMAC Vaccine Distribution Subcommittee:

We are 4th generation potato, corn and soybean farmers from Northern Wisconsin. At the present time, we have 3 generations of family working together daily, along with many devoted employees.

Frontline essential <u>farm workers</u> keep Americans fed, EVERYDAY and did so throughout the worst of the Pandemic, NEVER missing a day. In fact, as our country faced food shortages, our employees worked extra long and double shifts to keep up with the demands. We have done all that we can to keep our <u>farm</u> <u>workers</u> safe during this major health crisis, such as implementing temperature testing, strict enforcement of the wearing of masks, social distancing, vigorous hand washing and extra sanitation of the packing warehouse. Our employees have stepped up and have been extra careful not to contact COVID in their personal lives, as well.

<u>Farm workers</u> SHOULD NOT be denied early access to vaccinations; they are a critical part of Wisconsin state's workforce. Without a robust community of <u>farm workers</u>, the rest of the state would suffer from high food prices; more pronounced food supply shortages and increased hunger.

<u>The Agricultural community</u> needs to be prioritized in the vaccination schedule. They deserve better than to be pushed to the back of the line when it comes to COVID prevention.

Thank you for your time and consideration...stay healthy and safe.

Sincerely, Sue and Dennis West

Dennís W. West Nuto Farm Supply, Inc. 407 E. Sawyer St. Ríce Lake, WI 54868 715-234-1122

From:	Jerry-Carol Schulz
To:	DHS SDMAC
Subject:	Vaccine subcommittee Phase 1B
Date:	Monday, January 18, 2021 2:20:07 PM

To whom it concerns. Please include hunger-relief frontline workers/volunteers in the 1B vaccine group.

I am a volunteer at Community Center of Hope, Inc. food pantry in Mosinee, WI. We have seen increased use of our food pantry. But the pandemic has significantly limited our hours and hindered our access for people who really need food assistance. Plus, most of the CCH volunteers are senior citizens who are in an at-risk age group but who need to be available for the food pantry to serve the food insecure population in our area. The vaccine would allow us to have more hours, easier access for people needing food, and staff would be more protected.

Thank you for considering hunger-relief workers/volunteers in the 1B vaccine group.

Jerry Schulz



To whom this may concern:

Thank you very much for the opportunity to comment on COVID-19 vaccination prioritization.

I wanted to forward you some information from the National Academy for State Health Policy on state plans for vaccinating populations against COVID. It can be found here - <u>https://www.nashp.org/each-states-plan-for-vaccinating-its-populations-against-covid-19/</u>. It shows the different populations, workers, and facilities and where they are in each state's vaccination prioritization plans. Among the states' Phase 1 (or 1A, 1B, and 1C) prioritization levels, the following states/districts have included homeless shelters: Alabama, Arizona, California, District of Columbia, Delaware, Maine, Massachusetts, Nebraska, New Jersey, North Dakota, Pennsylvania, Texas, Vermont, Virginia, and Washington.

I wish to advocate for Wisconsin to add homeless shelter residents and shelter staff to the 1B priority level for vaccinations. The pandemic has had a severe impact on homelessness systems – particularly emergency shelters. To adhere to the guidelines on social distancing provided by the Centers for Disease Control and Prevention, congregate sheltering facilities all around the state have had to dramatically reduce their capacities. Almost all, if not all, shelters in Wisconsin are in buildings that were not originally developed to shelter people, resulting in very close quarters for sleeping at night. Additionally, shelters rely heavily on volunteer labor from people who are at retirement age – a population shown to be extremely vulnerable to COVID. The result of these factors has resulted in all shelters to serve fewer people during this crisis – with some shelters having to suspend operations altogether.

Communities across the state have responded to this in some cases by standing up non-congregate sheltering in hotels. While this has certainly helped keep a lot of people safe, especially those who have been exposed to COVID, it has come at an expense to communities that is not sustainable beyond the near-future. I hear regularly about communities putting limits on the time they can support non-congregate sheltering and am extremely concerned that this option won't been available beyond the coming weeks and months.

This, combined with people having to leave doubled-up housing situations and other social factors, has led to a spike in unsheltered homelessness throughout the state – regardless of area of the state or urban/rural status. Even under what I call "the normal state of crisis" homeless people die outside in Wisconsin every winter. If we cannot get unsheltered homeless people inside, my fear is that we will see continuing exposure to the elements to an unprecedented amount of Wisconsinites and more death will result.

The number of people we are looking to help through vaccination is in the low thousands. Providing vaccination priority for homeless persons and systems staff would not have an adverse effect on the

overall vaccine rollout. But the necessity of prioritizing this population cannot be understated. If we can do this, shelters will be able to operate at fuller capacities, shelter workers will be able to return to work, and more people who are currently sleeping outside in the Wisconsin winter will be able to seek shelter.

Please do what you can to include congregate shelters, and their residents and staff, to the 1B level for vaccination priority. I remain grateful for DHS's efforts and look forward to seeing good results as we vaccinate the population against COVID.

Regards,



Michael Basford | Director Department of Administration Interagency Council on Homelessness Mike.Basford@Wisconsin.gov http://homelessness.wi.gov Direct: (608) 266-3633

From:	pastortom@everyactioncustom.com on behalf of Tom De Groot
То:	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 2:11:51 PM

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 unprecedent 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 hungerrelief 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, Rev. Tom De Groot

From:	schantzee54455@everyactioncustom.com on behalf of James Schantz
То:	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 2:02:33 PM

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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• 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 hungerrelief 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. James Schantz

From:	schantzee54455@everyactioncustom.com on behalf of TAMARA SCHANTZ
То:	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 2:01:59 PM

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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• 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 hungerrelief 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. TAMARA SCHANTZ

From:	brunamuraca09@everyactioncustom.com on behalf of Bruna Muraca
То:	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 1:53:48 PM

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 unprecedent 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 hungerrelief 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.

I work for a hunger relief organization and our community needs us more than ever. During the pandemic, there was an increase of 85% on the need for our organization to feed families. Every day I take the bus, and work all day with new and regular volunteers who are in contact with dozens of other people and places in which they can contract the virus, and possibly pass it on to us. I have been living in constant fear of contracting COVID; the vaccine will protect me, my family, and coworkers so we can continue to feed our communities in this time of need.

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 Bruna Muraca
To Whom It May Concern:

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.

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.

At the present time, the Watertown Food Pantry has numerous volunteers who will not work until they have the vaccine. This makes it very hard operating the food pantry during the pandemic. We continue to operate and provide services Monday through Friday with the volunteers who are willing to work.

We have instituted numerous safety protocols in order to stay open and provide our services. However, many patrons still must not feel safe, as our food pantry has not been nearly as busy as before covid hit.

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.

Watertown Food Pantry Board of Directors Dawn Westenberg, Treasurer



This email has been checked for viruses by Avast antivirus software. <u>www.avast.com</u>

From:	Robin Lowney Lankton
То:	DHS SDMAC
Subject:	vaccine subcommittee - 1B feedback
Date:	Monday, January 18, 2021 1:41:45 PM

As a member of the Board of Health for Madison and Dane County and public health professional with more than 15 years of experience in population health, I am writing in support of SDMAC Phase 1b draft recommendations which include shelter populations and incarcerated individuals in the definitions of congregate living. Both of these populations represent marginalized groups who are at disproportionate risk of COVID-19 as well as represent a disproportionate risk of health inequities for African American, Latinx, and Native American populations.

Incarcerated individuals have disproportionately high rates of chronic disease that place them at increased risk of severe illness caused by COVID-19. For example, those in institutional settings are about 50% more likely to have diabetes or high blood pressure, roughly 50% more likely to have asthma, and nearly 67% more likely to have high blood pressure. These settings also provide fewer opportunities to take risk mitigation steps, like physical distancing, using quarantine and isolation areas, wearing face coverings, and maintaining hygiene.

There is a strong equity consideration to be made for maintaining the draft definition of 1b for congregate living as written. While Black residents make up only 7% of Wisconsin's population, they represent 29% of those in jail and 41% of those in prison. Communities of color are similarly overrepresented in other congregate living facilities, such as domestic violence and homeless shelters in transient environments that place them at disproportionate risk for COVID-19.

I strongly support your draft recommendations to include incarcerated individuals and shelter populations in group 1b as part of congregate living.

Robin Lowney Lankton

From:	westbaycamping@everyactioncustom.com on behalf of Linda Krebsbach
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 1:40:43 PM

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 unprecedent 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 hungerrelief 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. Linda Krebsbach

From:	Kayleigh Whipps
To:	DHS SDMAC
Subject:	Vaccination Subcommittee and 1B group suggestion
Date:	Monday, January 18, 2021 1:14:27 PM

Hello,

I am emailing today to ask you to consider our hunger-relief personnel (regardless of age) to be considered in the 1B vaccination group. There is no way to adequately serve those in need in our communities without having staff in direct contact with the public. However, the model that serve people the best puts frontline essential volunteers at tremendous risk, all while serving those less fortunate in our communities. Both my mother and grandmother are coming into contact with the communities weekly and it would tremendously help their safety to be considered for vaccination.

Thank you for your consideration, Kayleigh Whipps

From:	rwatry77@everyactioncustom.com on behalf of Roger Watry
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 12:55:20 PM

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 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. Roger Watry

From:	nancy.watry@everyactioncustom.com on behalf of Nancy Watry
То:	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 12:53:46 PM

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 unprecedent 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 hungerrelief 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. Nancy Watry

From:	Barbara Beckert
То:	DHS SDMAC
Subject:	Vaccine Subcommittee-Phase 1b Comments
Date:	Monday, January 18, 2021 12:53:16 PM
Attachments:	MMHTF comments to SDMAC 1 2021.pdf

We are submitting the attached comments from the Milwaukee Mental Health Task Force – please contact me if there are any questions. Thank you for your consideration.

Barbara Beckert, Milwaukee Office Director Director of External Advocacy SE Wisconsin DISABILITY RIGHTS WISCONSIN 6737 W. Washington St., Suite 3230 Milwaukee, WI 53214 414-292-2724 Voice 414-773-4647 Fax barbara.beckert@drwi.org

From:	Karen Stuesser
To:	DHS SDMAC
Subject:	Vaccine subcommittee Phase 1b request
Date:	Monday, January 18, 2021 12:43:44 PM

Dear Vaccine Subcommittee members,

Thank you for your work to ensure efficient and equitable distribution of Covid-19 vaccines. It is so important and necessary that the Phase 1B recommendation include hunger-relief frontline workers and volunteers who are essential to continue the unprecedented distribution of food to Wisconsinites.

I have been helping prepare and serve food to 60-80 underprivileged youth at the Lussier Community Education Center in Madison since before Covid-19, as well as helping with the center's food pantry services. Although Lussier staff have streamlined service and delivery of food so as to minimize potential disease exposure for all, there is no denying that many volunteers are older folks who are at risk. I am 60 years old and healthy but have felt compelled recently to take a break from volunteering due to my husband's health issues that put him at increased risk. I know other volunteers who have also felt the need to step down, but I worry a lot about some of my older fellow volunteers who continue to step up day after day despite the risks. Some are putting in more and more hours as others feel compelled to step away, and the loss of even one or two of these folks due to illness would significantly impact our ability to meet these unprecedented needs right now.

The Covid vaccine is a crucial 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, and for the work you are doing.

Sincerely, Karen Stuesser

From:	Penny ODonahue
To:	DHS SDMAC
Subject:	vaccine subcommittee
Date:	Monday, January 18, 2021 12:22:28 PM
Attachments:	1b proposed grouping.pdf

This email requests that the passage below from the SDMAC – VDS proposal document be removed from the 1B group:

Rationale for including Congregate Living Facility Staff and Residents in Phase 1b......The Subcommittee recommends that DHS restrict the definition of congregate living to the following:

"Incarcerated individuals: Individuals in jails, prisons, and mental health institutes. a. Feasibility: High. These populations have health infrastructure to deliver the vaccine and are easily identified. b. It is recommended that previously infected residents consider delaying vaccination for 90 days as the vaccine may not provide additional protection. 27 c. The majority of the Subcommittee supported this recommendation."

Please put the State of Wisconsin's economy needs first.

People that are incarcerated/in prison and jail are not making an active contribution to the economy of the State of Wisconsin. The opposite is true. They cost taxpayers millions yearly. I request those beheld in prison and jails be moved out of the phase 1B category. I support that those people that work to supervise the people being held in those facilities be included as law enforcement in 1B.

The majority of states (32 out of 50) are not including this group in their 1B roll out. Wisconsin should follow that majority.

<u>The optics do not matter</u>. Making decisions that support a strong and economically sound condition of our state do.

Making decisions based on "Feasibility" and "ethical principles that underlie including this group are: Equity, Fairness and Unity". These principles do not generate revenue or drive capitalism. Decisions based on the criteria of feasibility and ethical principles will not re-open businesses closed due to the pandemic. Vaccinating the people that work, earn money, run and own businesses that contribute to the economy of the state should be the priority.

PLEASE REMOVE **Incarcerated individuals** FROM THE 1B GROUPING.

Penny ODonahue



(This is a resend of a previous email with a better subject line.)

Good morning,

As the director of a small non-profit food pantry in Mosinee, WI, I implore you to consider our hunger-relief volunteers and staff (regardless of age) to be considered in the 1B vaccination group. There is no way to adequately serve those in need in our communities without having staff in direct contact with the public. However, the model that serve people the best puts frontline essential volunteers at tremendous risk, all while serving those less fortunate in our communities.

Overall, the population of volunteers and staff in these organizations come into contact with hundreds of people every week and also quite frequently are working in small spaces with limited access to the improved HVAC options that companies and corporations may have available to them. So many people in our communities are suffering and my volunteers are working diligently to make sure they have food on the table...literally risking their lives for those less fortunate.

I implore you please consider adding this group to 1B.

Thank you!

--

Amy Bergstrom

Executive Director Community Center of Hope, Inc. <u>www.cchope.net</u> <u>facebook.com/communitycenterofhope</u> 715-693-7145

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

* People experiencing homelessness 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.

* People who have exhausted all other resources and are staying in a shelter 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.

* The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that 6.7% of Wisconsin's population<<u>https://www.census.gov/quickfacts/WI</u>> was Black in 2009. In November 2020, 43% of the population experiencing homelessness was Black<<u>https://icalliances.org/monthly-dashboard-wi</u>>.

* 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness - sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social

distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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 can write grants for my area to increase capacity for at-risk and homelessness shelters, community health programs, and street outreach; I can't write anyone a vaccine. Those at-risk of or experiencing homelessness live at high risk for medical complications, including covid-19, and have the fewest resources to prevent and treat any illness. Please help us support our entire community by taking care of our most vulnerable.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,



T: 608.781.2783 Ext.226 F: 608.781.2906

E: grants@ywcalax.org | ywcalax.org

she/her but QAF in friendly conversation



3219 Commerce St. La Crosse, WI 54603

From:	Amy Bergstrom
To:	DHS SDMAC
Subject:	Please include hunger-relief workers in phase 1B
Date:	Monday, January 18, 2021 12:03:30 PM

Good morning,

As the director of a small non-profit food pantry in Mosinee, WI, I implore you to consider our hunger-relief volunteers and staff (regardless of age) to be considered in the 1B vaccination group. There is no way to adequately serve those in need in our communities without having staff in direct contact with the public. However, the model that serve people the best puts frontline essential volunteers at tremendous risk, all while serving those less fortunate in our communities.

Overall, the population of volunteers and staff in these organizations come into contact with hundreds of people every week and also quite frequently are working in small spaces with limited access to the improved HVAC options that companies and corporations may have available to them. So many people in our communities are suffering and my volunteers are working diligently to make sure they have food on the table...literally risking their lives for those less fortunate.

I implore you please consider adding this group to 1B.

Thank you!

Amy Bergstrom

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Amy Bergstrom

Executive Director Community Center of Hope, Inc. <u>www.cchope.net</u> <u>facebook.com/communitycenterofhope</u> 715-693-7145

From:	Amy Mathers
To:	DHS SDMAC
Subject:	Important Please Read
Date:	Monday, January 18, 2021 11:59:43 AM

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

People experiencing homelessness 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.

People who have exhausted all other resources and are staying in a shelter 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.

The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that 6.7% of Wisconsin's population was Black in 2009. In November 2020, 43% of the population experiencing homelessness was Black.

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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness - sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility

issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Thank you, Amy Loof Director of Homeless Services Eviction Prevention Coordinator Shelter Coordinator 920-922-8122 Shelter Phone 920-238-2465 Work Cell

amym@solutionsfdl.com

From:	Pamela Alsum
То:	DHS_SDMAC
Cc:	<u>Sen.LeMahieu - LEGIS; Sen.Bewley - LEGIS; Rep.Vos - LEGIS; Rep.Steineke - LEGIS; Rep.Hintz - LEGIS;</u> Sen.Kapenga@legis.wisconsin.gov
Subject:	advocacy for early vaccination for those residing in shelter, encampment and other congregate habitation due to homelessness
Date:	Monday, January 18, 2021 11:58:04 AM

TO: Wisconsin State Disaster Medical Advisory Committee

The Wisconsin Department of Health and Human Services and its affiliated public health departments are to be recognized for the challenging work that has already been done to provide a COVID vaccination program that is expedited, efficient and equitable. This effort has been made even more challenging due to the lack of federal and state legislative support.

As clinical volunteers in a non-profit community-based organization providing direct services to those experiencing homelessness, we wish to emphasize the crucial importance of including this group of residents as a top priority for vaccination. Persons experiencing homelessness are frequently unable to physically distance and often lack access to personal protective equipment. Crowded living conditions found in shelters and encampments, like other congregate settings, greatly increase the risk of transmission and infection.

In addition, this group of people disproportionately suffers chronic medical conditions that place them at higher risk, and they have inconsistent access to preventive or treatment based care. Further, people of color are vastly over-represented among this group and are known to be much more vulnerable to hospitalization and death due to Covid 19 infection, complicated by the effects of generations of systemic racism, including multiple barriers to access to medical care.

We strongly urge that our fellow WI residents experiencing homelessness and housing insecurity, whether staying in shelters, encampments or doubling up in crowded homes, as well as those residing in jail settings, and including their associated staff, be prioritized for early vaccination.

We also encourage that vaccination offered to those homeless occur in collaboration with shelter and outreach workers who already have relationships of trust with those at highest risk.

Thank you for your consideration of our concerns.

Sincerely,

Madison Area Care for the Homeless (MACH) OneHealth clinical volunteers Pamela Alsum MD Joanna Anderson RN David Deci MD Molly Finnegan LCSW Lorrie Hylkema RN, APNP Doug Kirk LCSW Amy Parins PA-C Marc Rosenthal RN Carolyn Virginia RN Rachel von Paumgartten BS, CNA Nancy Wild RN, APNP

From:	amyjbergstrom@everyactioncustom.com on behalf of Amy Bergstrom
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 11:55:07 AM

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 unprecedent 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 hungerrelief 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. Amy Bergstrom

TO: Wisconsin State Disaster Medical Advisory Committee:

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.

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

61

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.

Sincerly,

Mary E. Kitzman

From:	mcb102301@everyactioncustom.com on behalf of Mark Behrens
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 11:44:13 AM

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 unprecedent 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 hungerrelief 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 Behrens

From:	Jim Middleton
То:	DHS SDMAC
Subject:	vaccine subcommittee" and "Phase 1B
Date:	Monday, January 18, 2021 11:42:07 AM

I am a 75-year old volunteer at the Walworth Country Food Pantry and feel I am very exposed to the virus on a daily basis. I am in reasonably good health, but my wife reminds me that I am vulnerable due to age and exposure. But the show must go on as we support 450+ families on a weekly basis.

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.

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.

Jim

James Middleton



From:	George Fix
То:	DHS SDMAC
Subject:	Group 1B
Date:	Monday, January 18, 2021 11:28:31 AM

Good afternoon, As a long time volunteer of the Sherman Park Community Ministries, Inc. Food Pantry, I feel that hunger-relief frontline workers should be included in the Group 1B to receive the Covid 19 Vaccine soon. Many of us are Seniors and took health chances to serve our hungry Food Pantry Customers. (In fact we had to close for several weeks in the summer when some volunteers tested positive and became quite ill.). Our pantry serves our hungry families twice a week. They depend on us to distribute healthy food to upwards of 100 families each week.

Please keep our volunteers safe so we can continue our mission. Sincerely,

Sue Fix, President Board of Directors

Sent from my iPad

From:	exec@everyactioncustom.com on behalf of Maggie Gleason
То:	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 11:26:20 AM

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 unprecedent 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 hungerrelief 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. Maggie Gleason

From:	denise@everyactioncustom.com on behalf of Denise Thomas
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 11:24:43 AM

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 unprecedent 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 hungerrelief 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 Denise Thomas

From:	sharonsda.csmith@everyactioncustom.com on behalf of connie S
То:	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 11:17:03 AM

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 unprecedent 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 hungerrelief 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. connie S

From:	secretary@everyactioncustom.com on behalf of Linda Gary
То:	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 11:15:16 AM

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.

Rhinelander Area Food Pantry serves Oneida County Wisconsin. In 2020 we gave out more than 1,000,000 lbs. of food! This is approximately 400,000 lbs. over our prior yearly amounts. This shows how much the pandemic has affected our county. It's imperative for our volunteers to have access to the Covid-19 vaccine asap. Thanks for your consideration.

Linda Gary Volunteer Secretary Rhinelander Area Food Pantry

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. Linda Gary 627 Coon St Rhinelander, WI 54501-3526 secretary@rhinelanderareafoodpantry.org
From:	Carol Reynolds
То:	DHS SDMAC
Subject:	Covid vaccine
Date:	Monday, January 18, 2021 11:10:29 AM
Attachments:	SDMAC VDS Phase 1b Recommendations FOR PUBLIC COMMENT.pdf

Sent from my iPad 71 year old person who wants to know where to go to get a vaccine!!

Vaccine Priority Group 1B. St Joseph SSVdP Conference- Marinette serves our area homeless

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

- People experiencing homelessness 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.
- People who have exhausted all other resources and are staying in a shelter 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.
- The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that <u>6.7% of Wisconsin's population</u> was Black in 2009. In November 2020, <u>43% of the population experiencing homelessness was Black</u>.
- 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

In Marinette we are limited to two homeless shelters, we would encourage the committee to include the occupants in the Phase 1B of the Vaccine Priority Group Rollout.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for

guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,

Jeanne M Harper Secretary

St Joseph Conference of the Society of St Vincent de Paul

Marinette WI 54143-0563

From:	theperk76@everyactioncustom.com on behalf of Rick Perkins
То:	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 10:49:32 AM

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 unprecedent 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 hungerrelief 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. Rick Perkins

From:	guincy.kissack@everyactioncustom.com on behalf of Quincy Kissack
То:	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 10:43:01 AM

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.

I personally run the food pantry at the university of Wisconsin - Milwaukee, and believe that this is vital. Since March, we have seen an over 1,000% increase in patronage. This leads to me interacting with hundreds of people EACH WEEK to ensure they have food. If I go down, so does the pantry, and so do my students and colleagues who rely on us. The vaccine is vital to ensure continuity of service to our state's most vulnerable populations.

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 unprecedent 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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• 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 Quincy Kissack

From:	gch@everyactioncustom.com on behalf of Guy Hansen
То:	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 10:26:21 AM

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 unprecedent 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.

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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. Guy Hansen

From:	<u>Mike D</u>
To:	DHS SDMAC
Subject:	Vaccine Subcommiittee - Phase 1B
Date:	Monday, January 18, 2021 10:18:23 AM

To whom it may concern. I am writing to advocate on behalf of hunger-relief frontline workers such as myself who I believe need to be included in the prioritization discussions. As a frontline worker volunteer for the Neighbors Helping Neighbors food distribution site located in Mount Horeb I see first hand every week when we hand out food, how many families are counting on us.

While we are counting on volunteers to run this effort we have been fortunate so far that only a couple of them have had to decline a volunteers shift due to being exposed to COVID, However, given the growing spread and the new more contagious variants I am feeling it is only a matter of time before more of us could be exposed to COVID. Without a reliable source of food if we are not able to volunteer, many families (average 70 per week) would be left without the food that we routinely provided.

I understand and appreciate the reality of trying to vaccinate everybody given the supply and logistics but I feel that I would be remiss if I did not speak up and advocate for this group of frontline workers.

Thank you for your consideration.



Hello,

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. As a volunteer and board member for Second Harvest Foodbank of Southern Wisconsin, I have seen how this pandemic has put an immense strain on our community's food insecure population and the people who serve them.

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 unprecedent 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

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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.

Lizzie Duffey

From:	smithl42@everyactioncustom.com on behalf of Linda 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:	Monday, January 18, 2021 10:15:17 AM

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 Linda Smith

Dear Vaccine Subcommitee:

We are writing to make recommendations for 1B distribution prioritization.

Our first priority would be our prison and jail staff and inmates.

Secondly, we would like you to consider homeless shelters and mental health institutions.

Thank you for your consideration.

Arnold and Carol VandenBush Green Bay, WI

From:	tjp.mke@everyactioncustom.com on behalf of Tim Powers
То:	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 10:12:51 AM

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 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 hungerrelief 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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I have worked for Feeding America Eastern Wisconsin for the last 2 years. Covid-19 has had dramatic effect on the need in both Urban and Rural environments. People are out of work and do not have money to purchase food for their families. Food banks provide an essential role to fill this need. But to provide assistance we put ourselves at risk of catching the virus. The added protection on the vaccine will provide us with extra assurance in meeting the challenges of hunger in our communities.

Thank you for your consideration

Timothy Powers

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. Tim Powers

From:	LBerg1993@everyactioncustom.com on behalf of Linda Berg
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 10:12:36 AM

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.

I am the volunteer director of a Food Pantry in Superior, Wi. All of us volunteer our time and efforts to keep this Food Pantry open for those most in need in our community. Most of the volunteers are senior citizens also. I have worked hard at keeping these volunteers safe by making masks for them and their family members and asking a company to donate antimicrobial gloves in the beginning of the pandemic, Now that the vaccine is ready for distribution, I feel that it is necessary to protect these volunteers so they can

continue their work in hunger-relief.

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 unprecedent 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 hungerrelief 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. Linda Berg

From:	lspodos@everyactioncustom.com on behalf of Sally Podoski
То:	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 10:07:58 AM

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, Ms. Sally Podoski

From:	dillismike@everyactioncustom.com on behalf of Mike Dillis
То:	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 10:07:46 AM

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, Mr Mike Dillis

From:	modonnell@everyactioncustom.com on behalf of Michael O"Donnell
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 10:05:38 AM

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, Mr. Michael O'Donnell

From:	leehanson1975@everyactioncustom.com on behalf of Leroy Hanson
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 10:04:29 AM

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. Leroy Hanson

From:	sharte@everyactioncustom.com on behalf of Stephanie Harte
То:	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 9:53:39 AM

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, Miss Stephanie Harte

From:	lauraberg2442@everyactioncustom.com on behalf of LAURA BERG
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 9:46:32 AM

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, Ms LAURA BERG

From:	Sandy Langel
To:	DHS SDMAC
Subject:	COVID-19 Vaccine
Date:	Monday, January 18, 2021 9:26:06 AM

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

- People experiencing homelessness 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.
- People who have exhausted all other resources and are staying in a shelter 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.
- The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that <u>6.7% of Wisconsin's population</u> was Black in 2009. In November 2020, <u>43% of the population experiencing homelessness was Black</u>.
- 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness - sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people

experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,

Sandy Langel

Sandy Langel Office Manager 25700 Wilmot Road | P.O. Box 172 | Trevor, WI 53179 262.298.5535 ext. 204 | 262.922.4411 fax slangel@thesharingcenter.net

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www.thesharingcenter.net

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Failure to follow this process may be unlawful. Thank you for your cooperation.

From:	janemotowski@everyactioncustom.com on behalf of Jane Motowski
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 9:23:37 AM

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 unprecedent 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 hungerrelief 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. Jane Motowski

From:	jennifer5loaves@everyactioncustom.com on behalf of Jennifer Hanson
То:	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 9:22:24 AM

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, Mrs. Jennifer Hanson
From:	Rhendricks56@everyactioncustom.com on behalf of ROBERTA HENDRICKS	
То:	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 9:22:04 AM	

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.

At Pastor Fred's Food Pantry, we are serving over 500 people a month during this pandemic. Up about 35%. We are working with half of our volunteers because most of our volunteers are over 70. My husband and I are extremely worried about getting COVID-19 because we do all the food pick-ups for the pantry. If we get COVID-19, our pantry would close until we get better. We would greatly appreciate to be considered to be essential workers in our community.

Thank you for all your efforts in getting the vaccine distributed.

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 unprecedent 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 hungerrelief 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. ROBERTA HENDRICKS

Vaccine committee:

This vaccination rollout has been too slow compared to other states. There is high political risk here so this needs to get moving and get done right.

Our request would be that the 1B group would be those age 65 & older with an underlying health condition that would make it more likely to have severe health ramifications (thus a high risk group) should they get Covid & also all those aged 70 and older. However every one wishing to get the vaccine must show up with identification & be legal citizens of the state of WI, or they do not get the vaccine. For the 1B higher risk age 65 to 70 group: it would include people w/diabetes, heart disease, coronary artery disease & whatever other conditions that make Covid more severe to survive. For those who had Covid recently (such as the last 4 months, or longer if studies show there is longer immunity); they still have some immunity & should wait until a later date to get vaccinated.

Also in this group should be all practicing medical personal, law enforcement workers & actively employed elementary, pre school & high school teachers that could come in contact with Covid as children need to return to school.

I'm opposed to having any of the prison population get the vaccine before the above mentioned groups. Homeless people should be treated like the group listed as 1B but gain with the rules of identification for proof of residency, & proof of age & if under 70, need proof from a doctor that they have an underlying health condition which makes surviving Covid high risk.

We have heard of the poor roll out effort which is how you're currently viewed. The National Guard should be called up to insure the manpower necessary to maximize injection each day by appointment. University nursing and medical schools should also be engaged to give the shots. Absolutely zero vaccine can be thrown out at end of the day. This should be a 24/7 effort. This is a life or death situation. We need a wartime effort.

Thank you, Jim Piwoni

From:	sueschool246@everyactioncustom.com on behalf of susan truitt	
То:	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 9:02:03 AM	

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.

I am 70 years old, and volunteer three times a month in order to get food to those who need it in my community. I must admit it's the only time that I get a little nervous about Covid because I do a good job isolating on the other days. I want to continue this work, people are hungry right now. I would appreciate being able to get my vaccination as soon as possible.

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 unprecedent 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 hungerrelief 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 susan truitt



From:	scottmarshallwi@everyactioncustom.com on behalf of Scott Marshall	
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 8:53:50 AM	

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 unprecedent 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 hungerrelief 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. Scott Marshall

From:	jjoslyn@everyactioncustom.com on behalf of <u>Jeff Joslyn</u>	
То:	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 8:53:49 AM	

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.

I am the Director of Food Resources for Feeding America Eastern Wisconsin, a food bank serving 35 counties in our great state. Within our footprint alone, we have increased the amount of food distributed by over 80% year-over-year since the pandemic began. While that is in itself a staggering increase, the reality is that we have so much more work to do within our communities to ensure our neighbors have enough to eat.

Because our work is so integrated in the communities we serve, it is imperative that our staff, volunteers and all people involved in the hunger-relief effort are prioritized in receiving COVID-19 vaccination. While we have taken necessary precautions to ensure the safety of our staff and volunteers, we are hamstrung in many ways due to the diminished capacity we face due to the nature of the controls we have enacted. Where at one time we would have 100 volunteers in our warehouse sorting donated food on a given day, we now have a maximum of 10. It is incredibly important to the unprecedented needs of our community that the staff and people who support our efforts are protected in order to continue to face the challenges before us.

I appreciate your leadership and efforts to ensure the best possible outcomes are realized through your efforts. 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. Jeff Joslyn

From:	bfbradley24@everyactioncustom.com on behalf of Brian Bradley	
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 8:49:22 AM	

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 unprecedent 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 hungerrelief 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. Brian Bradley

From:	asutherland@everyactioncustom.com on behalf of Andrew Sutherland	
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 8:31:22 AM	

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, Mr. Andrew Sutherland

From:	cadolan2000@everyactioncustom.com on behalf of CHRISTINE DOLAN	
То:	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 8:27:31 AM	

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.

The Walworth Food and Diaper Bank, has an extremely important role in providing the necessary essentials for our community members who are suffering during this pandemic with loss of food, baby supplies and hygiene products due to loss of employment, poor physical and mental health. The volunteers at our pantry work every day to prepare for our community service. Most of the volunteers are retired and need the vaccine so they can remain safe from Covid and that the pantry can remain open. Our interaction with the citizens of Walworth has the potential to put our volunteers at risk for Covid-19.

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 unprecedent 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 hungerrelief 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. CHRISTINE DOLAN

From:	Brittany Crowdis
To:	DHS SDMAC
Subject:	We NEED a vaccine too!
Date:	Monday, January 18, 2021 7:19:13 AM

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents. Prioritization for this critical population is imperative for the following reasons:

- People experiencing homelessness 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.
- People who have exhausted all other resources and are staying in a shelter 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.
- The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that <u>6.7% of</u> <u>Wisconsin's population</u> was Black in 2009. In November 2020, <u>43% of the population</u> <u>experiencing homelessness was Black</u>.
- 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness - sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,

Brittany Crowdis Siena House Lead Hebron Housing Services 1519 Summit Ave Waukesha, WI 53188 (414) 549-8732 www.hebronhouse.org

From:	bgehrmann@everyactioncustom.com on behalf of Sheryll Gehrmann	
То:	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 8:50:45 PM	

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.

Jon & Dianne,

I am retired and spend six days a week working at the Waunakee Food Pantry. I work alongside devoted volunteers that are stretched thin. Our client's in need has doubled since pandemic but our volunteers have dropped, especially the over 70 group due to worries of Covid.

We are a small, tight building and have limited space for volunteers. We are client faced every time we are open which puts us at risk not only with volunteer closeness inside and meeting the public. Winter has been challenging as well and hard on volunteers serving clients in snow, sleet and rain. Please, include us on the vaccination list, as we are critical workers for so many in need. I would hate to see us shut down due to volunteers unable to run the Pantry.

Jon, please talk with Tryg on the great work we do serving and exposures.

Sincerely,

Sheryll (Schumann) Gehrmann (

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. Sheryll Gehrmann

From:	nataliedresen@everyactioncustom.com on behalf of Natalie Dresen	
То:	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 7:48:29 PM	

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 unprecedent 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 hungerrelief 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.

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Sincerely, Mrs. Natalie Dresen

From:	jamalast134@everyactioncustom.com on behalf of Julie Last	
То:	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 7:36:45 PM	

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 unprecedent 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 hungerrelief 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. Julie Last

From:	Scott Hume
То:	DHS SDMAC
Subject:	Vaccine Subcommittee re Phase 1B
Date:	Sunday, January 17, 2021 7:34:53 PM

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.

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.

I work with the Walworth County Food Bank.

Sent from my iPad

From:	bsbrandt@everyactioncustom.com on behalf of Sally Brandt
То:	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 7:29:22 PM

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.

I volunteer at a soup kitchen in Menasha, WI. I am proud to say we have remained open thru the entire CoVid crisis. We serve a hot meal to 60-70 people 3 times each week. We also provide bread and pantry items each time guests visit. While we have been fortunate to remain open, we have had some close calls with shutting down. Our lead people have been quarantined at different times. Luckily it has not been at the same time otherwise we would have had to shut down. We also had a volunteer who tested positive the day after she volunteered. This prevented a large pool of our volunteers from being able to volunteer. Luckily one of our leads was not there and was able to pull untrained volunteers to fill in and still serve all the scheduled meals. If we were vaccinated we would know we would always be able to provide food for those in need.

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 unprecedent 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 hungerrelief 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.

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 Sally Brandt

From:	alyssakphelps@everyactioncustom.com on behalf of Alyssa Phelps
То:	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 7:08:47 PM

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 unprecedent 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 hungerrelief 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. Alyssa Phelps

From:	jlarsen@everyactioncustom.com on behalf of Jodie Larsen
То:	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 7:02:38 PM

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 unprecedent 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 hungerrelief 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. Jodie Larsen

From:	Melissa Brandt
То:	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 6:51:22 PM

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
 unprecedent 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.

Melissa Brandt

Sauk County Food Security Coordinator Central Wisconsin Community Action Council, Inc. 1000 Hwy 13 Wisconsin Dells, WI 53965 melissa@cwcac.org (608)-432-1467

From:	melissa@everyactioncustom.com on behalf of Melissa Brandt
То:	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 6:49:14 PM

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 unprecedent 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 hungerrelief 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. Melissa Brandt

From:	preparer10402000@everyactioncustom.com on behalf of Rosanne Anderson
То:	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 5:55:53 PM

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 unprecedent 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 hungerrelief 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. Rosanne Anderson
From:	Kathy Ronco
То:	DHS SDMAC
Subject:	Please Include Emergency Shelters on the COVID-19 Vaccine Priority List
Date:	Sunday, January 17, 2021 1:53:32 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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents. Prioritization for this critical population is imperative for the following reasons:

- People experiencing homelessness 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.
- People who have exhausted all other resources and are staying in a shelter 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.
- The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that <u>6.7% of</u> <u>Wisconsin's population</u> was Black in 2009. In November 2020, <u>43% of the population</u> <u>experiencing homelessness was Black</u>.
- 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness - sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,

Kathleen Ronco

Director of Operations Hebron Housing Services, Inc. 1166 Quail Court, Suite 400 Direct Dial: (262) 522-1582 www.hebronhouse.org

Dear Committee Members,

I feel that our homeless population should be in inculded in the phase 1B, along with grocery store store workers, which should inculded gas station workers and convince store workers. These groups have high contact with the population at large, and having those in these groups would benefit greatly in reducing the spread of the virus.

Thank you, Hope Januchowski-Baleywah

From:	dybs909@everyactioncustom.com on behalf of Maria Dybevik
То:	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 3:54:27 PM

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 unprecedent 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 hungerrelief 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. Maria Dybevik

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities (including jails and prisons) for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

- People experiencing homelessness have a disproportionately high rate of chronic health conditions that put people at higher risk of severe COVID disease and often little access to consistent quality health care which may result in being excluded unless specifically prioritized.
- People who have exhausted all other resources and are staying in a shelter 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. Emergency shelters, including domestic violence shelters, use shared living spaces and have limited opportunities to meet the social distancing requirements.
- The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease.
- 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness - sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.
- Many people in jails and prisons are there for low level offenses and are serving a specified term. Getting covid may mean they are getting a death sentence. Also, the staff go home to their families and then spread the virus to others in their community.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure these vulnerable and at risk populations is prioritized. Due to the reasons above, it is imperative that people accessing shelters and in jails or prisons are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter, corrections and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

The COVID-19 vaccine is a critical step toward ensuring the safety and the health of these vulnerable populations and will provide much needed support to those facilities and staff struggling to provide these important services.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,

Connie Raether

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Dear SDMAC Vaccine Subcommittee,

Thank you for requesting public feedback on your Recommendations for COVID-19 Vaccine Priority Group 1b.

Attached, please find a response from Legal Action of Wisconsin. Thanks for your consideration and all of your efforts.

Becca Donaldson Staff Attorney Legal Action of Wisconsin, Inc. 633 W. Wisconsin Avenue, Suite 2000 Milwaukee, WI 53203 Phone: (414) 274-3413 E-mail: <u>RMD@legalaction.org</u> Pronouns: she, her, hers



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January 16, 2021

Wisconsin Department of Health Services (DHS) State Disaster Medical Advisory Committee (SDMAC) Vaccine Subcommittee 1 West Wilson Street Madison, WI, 53703 DHSSDMAC@dhs.wisconsin.gov

Re: Vaccine Subcommittee Priorities Phase 1b

Dear SDMAC Vaccine Subcommittee,

Thank you for requesting public comment on your recommendations for Wisconsin's COVID-19 Vaccine Priority Group 1b, specifically on the impact the pandemic has had on these populations.

Legal Action of Wisconsin, Inc. (LAW) is the state's largest provider of free civil legal aid. LAW delivers high-quality, personalized legal service to those with low or no income who could not otherwise afford this legal help. Our clients typically come to us when they face a crisis critical to their survival: an eviction, the loss of or inability to access necessary public benefits, unpaid or improperly garnished wages, illegal car repossessions, uninhabitable housing, human trafficking, or violence at home.

In short, COVID-19 exacerbates the perils our clients face. Recommending Phase1b to include those living in congregate settings, and those who otherwise receive Family Care and IRIS benefits, positively impacts our clients in these emergent situations. Furthermore, keeping employer-based housing in this priority group while explicitly incorporating low-wage agricultural workers into this subgroup would keep some of those most vulnerable to COVID-19 even safer while achieving the goal of administering Phase 1b effectively, feasibly, and ethically.¹





¹ Given what can be the compelled nature of congregate living, and in light of concerns from some people of color about receiving the vaccine, residents like our clients would benefit from the opportunity to accept the vaccine with freely given informed consent. *See* Sarah Volpenhein, Talis Shelbourne, and Jessica Rodriguez, *Coronavirus vaccinations are beginning in Wisconsin. Some people of color are skeptical*, Milwaukee Journal Sentinel, January 7, 2021, https://www.jsonline.com/story/news/2020/12/21/coronavirus-wisconsin-vaccine-hesitancy-may-complicate-rollout/3924302001/.

Green Bay Office Brown, Calumet, Door, Kewaunee, Manitowoc and Outagamie Counties | tel 920-432-4645 | toll-free 800-236-1127 | fax 920-432-5078

La Crosse Office Buffalo, Crawford, Grant, Jackson, Juneau, La Crosse, Monroe, Richland, Trempealeau and Vernon Counties | tel 608-785-2809 | toll-free 800-873-0927 | fax 608-782-0800 Madison Office Columbia, Dane, Dodge, Green, Iowa, Jefferson, Lafayette, Rock and Sauk Counties | tel 608-256-3304 | toll-free 800-362-3904 | fax 608-256-0510 Migrant Project Statewide | tel 608-256-3304 | toll-free 800-362-3904 | fax 608-256-0510

Milwaukee Office Milwaukee and Waukesha Counties | tel 414-278-7722 | toll-free 888-278-0633 | fax 414-278-7126

Oshkosh Office Adams, Fond du Lac, Green Lake, Marquette, Ozaukee, Sheboygan, Washington, Waushara and Winnebago Counties | tel 920-233-6521 | toll-free 800-236-1128 | fax 920-233-0307 Racine Office Kenosha, Racine and Walworth Counties | tel 262-635-8836 | toll-free 800-242-5840 | fax 262-635-8838

Including Agricultural Workers Living in Employer-Based Housing

The combined pandemics of racism and COVID-19 have devastated farmworker communities,² including LAW's clients. As DHS data demonstrates, since the start of the pandemic, Black and Hispanic or Latinx populations are over-represented among COVID-19 cases, hospitalizations, and deaths. Compared to white Wisconsinites, Hispanic or Latinx Wisconsinites have 1.7 times greater case rates.³ Add to that: people who live in high-density housing, like the employer-provided congregate housing where agricultural workers often reside, are more likely to contract the virus because of unavoidable person-to-person interaction. Wisconsin saw numerous COVID-19 outbreaks across agricultural worker communities with devastating impacts on the lives of workers.⁴

Farmworkers encounter heightened exposure to COVID-19 because they encounter the risk both where they work and in employer-provided congregate housing. Bunk beds, common in congregate agricultural worker housing, increase the risk of contagion in farmworker sleeping quarters because more workers are packed together in tight quarters.⁵ Further, lack of good ventilation increases transmission risk in this kind of dormitory or barrack-style housing. A significant portion of our clients live in this kind of congregate housing, with high risk of infection. The same individuals also have less access to quality health care and higher incidence of certain chronic diseases, which leads to more severe outcomes if they contract COVID-19.⁶ These conditions for greater exposure and more severe outcomes have been concentrated in communities of color, including farmworker communities, due to decades of deliberate policy choices and racist institutional practices.

For Legal Action's farmworker clients who are in Wisconsin currently, and for the farmworkers expected to arrive in Wisconsin in the coming weeks in time to take part in Phase 1b, having access to a COVID-19 vaccine as soon as possible would greatly increase their ability to work and live with safety and security. Since early January 2021, at least two Wisconsin employers have had crews of farmworkers living in employer-provided congregate housing, and fifteen additional Wisconsin employers have crews that will be housed in employer-provided congregate housing starting in February and March through the H2-A program.⁷ Likewise, some of Wisconsin's migrant food processing workforce has historically arrived in Wisconsin as early as February.

The feasibility of identifying and locating employer-provided agricultural housing is higher than these Recommendations discuss. All migrant farmworker housing in the state is licensed by the Wisconsin Department of Workforce Development (DWD). DWD tracks the address of congregate agricultural housing, the estimated number of workers living in this housing, and the expected occupancy dates, as you can see in the attached Appendix.⁸ Additionally, DWD maintains information regarding housing operators. If you include agricultural workers living in employer-provided congregate housing in Vaccine Priority Group 1b, DWD will be a valuable and accessible resource in accomplishing vaccination efforts.

For agricultural workers living in employer-provided congregate housing that is not required to be licensed by the DWD, such as the housing at large dairy farms or the migrant farmworkers housed as groups in public hotels and

⁴ 44 Percent Of Seneca Foods Employees In Barron County Test Positive For COVID-19, Wisconsin Public Radio, https://www.wpr.org/44-percent-seneca-foods-employees-barron-county-test-positive-covid-19.

² See, e.g., Rick Jervis, Rebecca Plevin, Trevor Hughes, and Omar Ornelas, *Worked to death: Latino farmworkers have long been denied basic rights. COVID-19 showed how deadly racism could be*, USA Today (October 24, 2020), https://www.usatoday.com/in-depth/news/nation/2020/10/21/covid-how-virus-racism-devastated-latino-farmworkers-

california/5978494002.

³ COVID-19: Racial and Ethnic Disparities, WI DHS, https://www.dhs.wisconsin.gov/covid-19/disparities.htm.

⁵ Oregon OSHA adopted a temporary rule that prohibits the use of bunk beds by unrelated individuals in such housing. *See* https://osha.oregon.gov/news/2020/Pages/nr2020-14.aspx_

⁶ Migrant Health Issues; Migrant Clinicians Network; https://www.migrantclinician.org/issues/migrant-info/health-problems.html

⁷ Available at https://seasonaljobs.dol.gov with search for "Wisconsin" and "agricultural." Last accessed January 13, 2021.

⁸ See, e.g., Wisconsin DWD Migrant Labor Camp Status Report from October 2020 (Attached Appendix).

motels, numerous service providers and community groups across the state could help identify congregate housing locations. Since April 2020, the Wisconsin Farmworkers Coalition has been meeting biweekly to track and address COVID-19 in agricultural worker communities. The in-depth expertise and knowledge of that group, in addition to local community health centers, local public health officials, and agricultural industry partners, could be utilized to support vaccination efforts. State and local public health departments and community-based organizations serving farmworker communities could help by sharing information about the vaccine and vaccine distribution plans in languages spoken by farmworkers and through existing trusted community relationships. Culturally and linguistically appropriate information must be provided, and farmworkers must be given space to voice their concerns regarding the vaccine.⁹

The disproportionate impact of COVID-19 on Hispanic or Latinx workers, including farmworkers, has been felt in our client community in many ways. Legal Action has spoken with workers who are mourning the loss of a loved one who left to work in Wisconsin and never returned home. We have spoken with clients suffering from the symptoms of COVID-19 many months after their infections. We have spoken with clients who made difficult decisions to leave employment and lose essential income because they feared that continuing to live and work in Wisconsin would jeopardize their health and safety, and the health and safety of their families and communities. Agricultural workers, many living in employer-provided congregate housing, have been on the front lines throughout the pandemic, risking their health and lives while providing essential services to our state. It is just and fair that Phase 1b include agricultural workers living in employer-provided congregate housing.

Including Incarcerated Individuals

Wisconsin has a duty to protect the health and safety of individuals in its jails and prisons. Courts have long recognized that the government has an obligation to provide medical care to incarcerated individuals because they are uniquely dependent on the government for protection.¹⁰ COVID-19 has strained the government's ability to protect these individuals like never before.

As of January 13, 2021, the Wisconsin Department of Corrections (DOC) reported 25 COVID-related deaths and 10,544 positive tests for incarcerated persons since March 18, 2020.¹¹ This places the Wisconsin DOC as the 7th most infectious prison system in the country. People inside of the state's correctional system are 386% more likely to test positive than the general population. Prisons have struggled to contain the virus since the early days of the pandemic, in large part because standard COVID-19 practices designed to reduce the spread of the virus, such as social distancing, are nearly impossible within a prison setting.^{12 13}

⁹ Family Health La Clinica, a federally qualified health center, receives specific funding to provide medical services to migrant farmworkers statewide. Due to their history of providing culturally and linguistically appropriate medical care to farmworkers, Family Health La Clinica is well situated to assist in vaccination efforts and has already begun planning for how to distribute vaccines to migrant farmworkers in Wisconsin. Working with trusted local partners will be key to ensuring Wisconsin's agricultural community voluntarily accepts and understands the efficacy of the vaccine and vaccination process, which will positively impact Legal Action's clients.

¹⁰ Estelle v. Gamble, 429 U.S. 97, 103, 97 S. Ct. 285, 290, 50 L. Ed. 2d 251 (1976).

¹¹ Department of Corrections, "COVID-19 (Coronavirus): Persons in Our Care Testing Dashboard," State of Wisconsin, Last accessed January 13, 2021, https://doc.wi.gov/Pages/COVID19(Coronavirus)/COVID19TestingDashboard.aspx.

¹² Gina Barton, *There's No Protection Here Whatsoever: As Coronavirus Emerges in Wisconsin Prisons, Workers and Inmates Try to Stop the Spread*, Milwaukee Journal Sentinel, April 4, 2020,

https://www.jsonline.com/story/news/2020/04/04/coronavirus-found-wisconsin-prisons-where-spread-hard-avoid/2946429001/.

¹³ Gregory Hooks and Wendy Sawyer, *Mass Incarceration, COVID-19, and Community Spread*, Prison Policy Initiative, December 2020, https://www.prisonpolicy.org/reports/covidspread.html.

Although the evidence is unclear yet as to how effective the vaccine is in reducing transmission of the virus, the evidence is very clear that "multiple brief exposures to individuals who are asymptomatic during detention can lead to infection[.]"¹⁴ Also, given that Black people and Indigenous people are disproportionately incarcerated in Wisconsin, many of the people releasing from custody are returning to communities that have already been hit hardest by the pandemic.¹⁵ ¹⁶

Concerningly, these Recommendations suggest delaying vaccination for recently infected residents of correctional institutions, but not for any other population, without any basis for that distinction.¹⁷ Excluding incarcerated individuals who have been infected within the past 90 days would significantly reduce the efficacy of vaccination efforts amongst this population. Rather, including these individuals gives Wisconsin an opportunity to easily offer vaccinations to one of the populations hardest hit by COVID-19 while potentially providing protection for a much longer period than natural immunity.

Including Shelter Residents

COVID-19 has significantly inhibited our clients' ability to use shelters, including those who risk losing their homes if the eviction moratorium lifts as well as those who would otherwise leave their homes if they could because of domestic violence, stalking, or harassment.

COVID-19 has only compounded these issues. More clients face eviction from the skyrocketing unemployment rates we have seen with the pandemic.¹⁸ At the onset of the pandemic, domestic violence spiked.¹⁹ LAW staff have spoken with domestic violence victims who have remained in abusive situations because they were more afraid to risk their lives contracting COVID-19 at a shelter, commenting that the danger they know is better than the danger they don't.²⁰ Additionally, at various times throughout the pandemic, domestic violence shelters have closed, turned away new arrivals, limited new residents, or housed residents elsewhere due to COVID-19 exposure in the shelter. Meanwhile, many without a home to stay have simply remained unsheltered.

¹⁴ Pringle JC, Leikauskas J, Ransom-Kelley S, et al., *COVID-19 in a Correctional Facility Employee Following Multiple Brief Exposures to Persons with COVID-19*, Vermont, July–August 2020. MMWR Morb Mortal Weekly Rep 2020; 69:1569–1570. DOI, http://dx.doi.org/10.15585/mmwr mm6943e1external icon.

¹⁵ Department of Corrections, "Profile of People in Our Care," State of Wisconsin, last accessed January 13, 2021, https://doc.wi.gov/Pages/DataResearch/DataAndReports.aspx.

¹⁶ *Health Equity Considerations and Racial and Ethnic Minority Groups*, Center for Disease Control, July 24, 2020, https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity html.

¹⁷ SDMAC Vaccine Distribution Subcommittee Recommendations, Draft for Public Comment, Appendix C(5)(b), January 12, 2021.

¹⁸ Jessica Contrera and Tracy Jan, *Facing evictions as millions shelter in place*, Washington Post, March 22, 2020, https://www.washingtonpost.com/dc-md-va/2020/03/22/evictions-coronavirus-renters-shelter-in-place/.

¹⁹ Ashley Luthern, *Domestic violence reports have risen in Milwaukee during coronavirus – but there is help, advocates say*, Milwaukee Journal Sentinel, April 21, 2020, https://www.jsonline.com/story/news/crime/2020/04/21/domestic-violence-up-milwaukee-during-coronavirus-help-available/5165193002/.

²⁰ Mary Kate McCoy, *With 'Safer-at-Home' Comes Growing Concern for Domestic Abuse*, Wis. Public Radio, April 17, 2020, https://www.wpr.org/safer-home-comes-growing-concern-domestic-abuse.

These concerns have increased with winter, as people must spend more time indoors while plunging temperatures outside can result in the deaths of unsheltered people.²¹ By vaccinating shelter resident, Wisconsin could prevent deaths not just from COVID-19, but also from domestic violence and exposure to the elements.

Vaccinating this population remains feasible. Many shelter residents stay for a month, if not longer, and will frequently utilize shelter resources long after they have been rehoused. Moreover, many shelters work with residents who experience chronic challenges.

Including Family Care and IRIS Recipients

To the extent Phase 1a does not reach Family Care and IRIS recipients as residents of long-term care facilities, including them in Phase 1b protects individuals like our clients who live in community-based settings with the assistance of family and professional caregivers. Such an arrangement makes it nearly impossible to social distance as advised and thus heightens the exposure to and risk of COVID-19 for an already vulnerable population, as your Recommendations discuss.

* * *

Thank you for so carefully weighing your Phase 1b Recommendations. Thank you also for requesting the public's comments as a component of your consideration, including information from LAW on how Wisconsin's vaccine priorities can protect the most vulnerable while promoting public health for all.

Please do not hesitate to contact us with any questions. We appreciate your efforts and leadership on behalf of our clients, and all Wisconsin residents, during this crisis.

Cc: Deedee Peterson, Executive Director
Atty. Chris Donahoe, Housing Priority Committee Coordinator
Atty. Robert Held, Family Law Priority Committee Coordinator
Atty. Matthew Hayes, SeniorLAW Project Director
Atty. Susan Lund, Employment Priority Committee Coordinator
Atty. Katie Alft, Reentry Legal Services Program Director
Atty. Jacob Haller, Reentry Legal Services Program Assistant Director
Atty. Mary Delaney, Reentry Legal Services Program Benefits Specialist
Atty. Erica Sweitzer-Beckman, Farmworker Project Legal Director

Enclosures: Appendix – Wisconsin DWD Migrant Labor Camp Status Report from October 2020

²¹ Rachael Vasquez, *Between Pandemic, Evictions and Dropping Temperatures, Homeless Shelters Anticipate A Touch Winter*, Wis. Public Radio, Nov. 30, 2020, https://www.wpr.org/between-pandemic-evictions-and-dropping-temperatures-homeless-shelters-anticipate-tough-winter.

Migrant Camps							
County	C = Certified P = Partial		Migrant Camp No./Address	City	ZIP code	Estimated # of workers	Occupancy Dates (Anticipated)
ADAMS COUNTY						I	
Gary Bula Farms Inc.	С	1012	630 Evergreen Drive	Grand Marsh	53936	6	07/15-10/15/2020
Gary Bula Farms Inc.	С	951	3153 10th Ave.	Grand Marsh	53936	6	07/15-08/15/2021
Gary Bula Farms Inc.	С	1046	1006 Edgewood Ave.	Grand Marsh	53936	6	07/15-10/15/2020
ARRON COUNTY							
Nubia M Moreno	С	965	200 E. Soo	Almena	54804	25	06/01-10/01/2020
Seneca Foods Corp.	C	1006	1105 2nd St.	Cumberland	54829	77	06/09-10/09/2020
Seneca Foods Corp.	C	1030	1490 Arcade St.	Cumberland	54829	27	06/09-10/09/2020
OLUMBIA COUNTY							
Seneca Foods-Cambria West	С	494	801 W. Commerce St	Cambria	53923	173	05/15-10/15/2020
Seneca Foods-Cambria West	С	495	801 W. Commerce St	Cambria	53923	37	05/15-10/15/2020
lenry Farms, LLC	С	1053	N5740 Sky High Dr.	Portage	53901	14	09/01-10/01/2020
CRAWFORD COUNTY							
Sunrise Orchards	С	31	46545 Hwy 171	Gays Mills	54631	30	08/15-10/26/2020
Sunrise Orchards	С	982	16822 & 16848 Apple Rd.	Gays Mills	54631	27	08/15-10/26/2020
Sunrise Orchards	С	1066	48524 Appleland Drive	Gays Mills	54631	8	08/15/10/26/2020
Hillcrest Orchards	С	1056	16604 Hwy 131 North	Gays Mills	54631	4	08/15-10/15/2020
DANE COUNTY							
Paul's Turf & Tree Nursery	С	516	5146 Ridge Rd.	Marshall	53559	6	03/20-11/20/2020
AcKay Nursery Co.	С	566	10 Hwy 19 West	Town of Medina	53594	8	03/25-11/08/2020
AcKay Nursery Co.	С	958	N7014 Hwy 89	Town of York	53594	11	03/25-11/08/2020
ODGE COUNTY							
Seneca Foods Corp.	С	1031	N3003 County Rd. M	Watertown	53016	76	03/24-12/15/2020
Seneca Foods Corp.	С	189	W6471 Caughlin Rd.	Clyman	53016	16	06/01-12/15/2020
Seneca Foods Corp.	С	259	W6901 & W6905 Clymet Rd.	Watertown	53094	102	06/01-12/15/2020
Seneca Foods Corp.	С	878	W6356 & W6370 Schmidt Rd.	Watertown	53094	20	07/01-12/15/2020
DOOR COUNTY							
Vood Orchard	С	1016	6930 Memorial Dr.	Egg Harbor	54209	20	09/01-10/31/2020
Vood Orchard	С	1050	3947 County Rd. E	Egg Harbor	54209	18	09/01-10/31/2020
Vood Orchard	С	74	8150 State Hwy 42	Egg Harbor	54209	6	09/01-10/31/2020
Vood Orchard	С	1064	3928 Peterson Rd	Sturgeon Bay	54235	5	09/01-10/31/2021
Seaquist Orchards	С	97	4399 County Rd E	Egg Harbor	54209	30	07/17-08/15/2020
OND DU LAC COUNTY							
Bonduelle, USA	С	194	101 Kennedy St.	Fairwater	53931	120	04/01-03/31/2021
Bonduelle, USA	С	907	N6051 Hwy E	Fairwater	53931	31	04/01-03/31/2021
Seneca Foods Corp.	С	978	229 W. Waupun St.	Okfield	53065	260	06/15-11/15/2020
_akeside Foods	Р	1001	108 Main St.	Eden	53019	38	06/15-11/30-2020

GREEN LAKE COUNTY							
Del Monte Foods, Inc.	С	51	680 E. John St.	Markesan	53946	59	06/01-03/31/2021
Del Monte Foods, Inc.	С	52	W1880 County Rd S	Markesan	53946	57	06/01-03/31/2021
Del Monte Foods, Inc.	С	53	425 E. John St.	Markesan	53946	27	06/01-03/31/2021
Del Monte Foods, Inc.	С	54	375 E. John St.	Markesan	53946	32	06/01-03/31/2021
OWA COUNTY							
Alsum Farms & Produce	С	1063	6530 Helena Rd.	Arena	53503	5	08/25-10/31/2020
EFFERSON COUNTY Dean Kincaid, Inc	С	280	N2028 WI- 106	Palmyra	53156	8	05/01-12/01/2020
AcKay Nursery Co.	С	567	842 S. Monroe St.	Waterloo	53594	5	03/25-11/08/2020
AcKay Nursery Co.	C	573	1001 West Madison	Waterloo	53594	24	03/25-11/08/2020
AcKay Nursery Co.	C	565	N8395 County Hwy O	Waterloo	53594	10	03/25-11/08/2020
AcKay Nursery Co.	C	988	W12008 Clarkson Rd.	Waterloo	53594	5	03/25-11/08/2020
McKay Nursery Co.	C	946	550 Adams St	Waterloo	53594	11	03/25-11/08/2020
ANITOWOC COUNTY	С	1035	1615 S. 30th St.	Manitowoc	54220	47	04/01/20-03/31/2021
	C	1035	1015 5. 30(113).	Marinowoc	34220	47	04/01/20-03/31/2021
ARINETTE COUNTY							
landt Farms	С	409	N3439 Jandt Rd.	Peshtigo	54157	6	05/15-10/20/2020
MARQUETTE COUNTY							
JMOS-Montello Center	С	47	2898 N State Road Hwy 22	Montello	53949	25-85	05/06-10/25/2020
Gumz Muck Farms	С	407	W6867 County Rd O	Endeavor	53930	1	05/18-11/25/2020
Gumz Muck Farms	С	1033	529-531 Harvard Ave.	Endeavor	53930	4	05/18-11/25/2020
DCONTO COUNTY							
Seneca Foods Corp.	С	939	200 N. Green Bay Ave.	Gillett	54124	149	06/08-10/16/2020
						1	
DZAUKEE COUNTY		074			50004	110	
akeside Foods, Inc.	С	274	130 Elevator Ln.	Belgium	53004	110	05/01-12/20/2020
akeside Foods, Inc.	С	275	705 Main St.	Belgium	53004	24	06/01-12/10/2020
DUTAGAMIE COUNTY							
Vagner Farms	С	98	N7469 Spoher Rd.	Black Creek	54106	3	05/20-11/15/2020
RACINE COUNTY							
Wind Lake Turf, Inc.	С	651	23630 Burmeister Rd.	Union Grove	53182	3	05/01-11/30/2020
ROCK COUNTY Seneca Foods Corp.	С	1058	530 E. Conde St.	Janesville	53546	151	06/02-11/25/2020
		1000			000+0	101	00/02 11/23/2020
RICHLAND COUNTY		1					
Dakwood Fruit Farm	С	887	31120 Apple Ridge Rd	Richland Center	53581	2	08/10-10/10/2020
Dakwood Fruit Farm	С	1014	31055 Apple Ridge Rd	Richland Center	53581	20	08/10-10/10/2021
Dakwood Fruit Farm	С	1023	25655 Bennet Lane	Richland Center	53581	6	08/10-10/10/2022
Sunset Orchard	С	884	23770 Hustler Ridge Dr.	Richland Center	53581	10	08/30-10/18/2020

AUK COUNTY akeside Foods-Reedsburg	С	396	601 Veterans Rd.	Reedsburg	53959	36	05/15-11/20/2020
	-		-				
ST. CROIX COUNTY Lakeside Foods	С	953	660 High Street	New Richmond	54017	132	04/25-11/30/2020
		953	Boo High Street	INEW RICHIMONO	34017	132	04/25-11/30/2020
VILAS COUNTY							
Lake Nokomis Cranberries	С	1061	7660 Jack Pine Forest	Eagle River	54521	3	05/01-10/31/2021
Lake Nokomis Cranberries	С	1062	6041 Hwy County D	Eagle River	54521	4	05/01-10/31/2022
WALWORTH COUNTY							
Birds Eye Foods/Conagra	С	635	W 8880 County Road X	Walworth	53114	200	01/01-12/31/2020
WAUPACA COUNTY							
Yeska Brothers Farms	С	991	E599 Hwy 22	Waupaca	54981	7	04/15-11/15/2020
		•	· · ·				
WAUSHARA COUNTY J&P Harvest, Inc.	С	1059	W13475 Cottonville Ave.	Coloma	54930	9	03/09-10/30/2020
Leach Farms, Inc.	C C	223	W1026 Buttercup Ct	Berlin	54930	240	03/09-10/30/2020
UMOS-Aurora Center	C C	100	N1485 Co.Hwy XX	Berlin	54923	100	04/27-10/31/2020
Paradise Farms, Inc	C	980	N7172 Hwy AA	Wild Rose	54909	15	05/20-10/31/2020
Yeska Brothers Farms	C	185	N6853 Hwy 22	Wild Rose	54984	24	05/20-10/01/2020
Yeska Brothers Farms	C	152	N6601 21st Ave	Wild Rose	54984	50	06/10-10/01/2020
		152	NOOT 213LAVC	Wild Rose	34304	50	00/10 10/01/2020
H-2A Camps							
		Address		City	ZIP code	Requested #	Occupancy Dates
Adams							
Adams Robert H Heath Farms	С	1453 1st Ave		Coloma	54930	21	2/1/20-10/31/20
Adams Robert H Heath Farms Robert H Heath Farms	С	1453 1st Ave 202 Cumberl	and Ave	Coloma Coloma	54930 54930	21	
Adams Robert H Heath Farms Robert H Heath Farms J&P Harvesting Inc/Bula	C C	1453 1st Ave 202 Cumberl 1897 W 7th A	and Ave Ave	Coloma Coloma Friendship	54930 54930 53934		2/1/20-10/31/20
Adams Robert H Heath Farms Robert H Heath Farms J&P Harvesting Inc/Bula J&P Harvesting Inc/Bula	С	1453 1st Ave 202 Cumberl	and Ave Ave	Coloma Coloma	54930 54930		
Adams Robert H Heath Farms Robert H Heath Farms J&P Harvesting Inc/Bula J&P Harvesting Inc/Bula J&P Harvesting Inc/Bula	C C C	1453 1st Ave 202 Cumberl 1897 W 7th A 752 County J	and Ave Ave	Coloma Coloma Friendship Friendship	54930 54930 53934 53934		2/1/20-10/31/20
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Adams Robert H Heath Farms Robert H Heath Farms J&P Harvesting Inc/Bula J&P Harvesting Inc/Bula J&P Harvesting Inc/Bula Brown Jan Enterprises, LLC Buffalo B & B Agri Sales Huntsinger Farms, Inc	C C C C	1453 1st Ave 202 Cumberl 1897 W 7th / 752 County J 1885 W 7th / 726 Airport D W185 County	and Ave Ave Ave rive y Rd P ty Rd A	Coloma Coloma Friendship Friendship Friendship Hobart Cochorane	54930 54930 53934 53934 53934 53934 54155 54629	See V	2/1/20-10/31/20 Vaushara County 2/8/20-10/31/20 3/15/20-12/15/20
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Migrant and H-2A Housing Status October 2020

STATE OF WISCONSIN
SOMD
Department of Workforce Development

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andmark Services Cooperative	С	N491 County Rd A	East Bristol	53590	36	3/1/20-12/15/20
andmark Services Cooperative	С	2631 Bristol Rd	Coumbus	53925		
Crawford						
Sunrise Orchards Inc	C	306 Rebecca St	Gays Mills	54631		
Sunrise Orchards Inc	С	48202 State Hwy 171	Gays Mills	54631	23	8/7/20-12/21/20
Sunrise Orchards Inc	С	46545 State Hwy 171	Gays Mills	54631		
Dane	0					
Eugster's Farm Market	<u> </u>	3939 State Hwy 138	Stoughton	53589	4	4/6/20-11/18/20
JenEhr Family Farm	C	918 Chicory Way	Sun Prairie	53590	3	3/15/20-12/1/20
Statz Bros. Inc	С	2126 State Rd 19	Sun Prairie	53590	4	3/1/20-1/1/21
Aguilera Harvesting Corp (2)	H	915 Applegate Rd	Madison	53713	36	05/18/20-05/28/2020
Landmark Services Cooperative	С	142 W Reynolds St	Cottage Grove	53527		e Columbia County
Natalie's Garden & Greenhouse	С	1592 Sandhill Rd	Oregon	53575	3	4/1/20-10/31/20
Hartung Brothers, Inc	С	2622 Blaney Rd	Madison	53711	16	8/25/20-10/15/20
Dodge						
Legacy Labor Inc/Hoekstra's	С	N9914 Hwy 73 N	Randolph	53956	16	6/29/20-10/21/20
Door						
S & S Jerseyland Dairy, LLC	С	1570 Mill Rd	Sturgeon Bay	54235	12	2/1/20-11/30/20
S & S Jerseyland Dairy, LLC	С	149 N. Grand Ave	Forestville	54213	6	11/15/20-02/15/21
Barnard Farms	С	6417 Hwy 42	Egg Harbor	54209	4	4/15/20-10/31/20
Evergreen Nursery Co.	С	5027 County TT	Sturgeon Bay	54235	10	3/23/20-12/10/20
Dunn						
Red Cedar Honey Farms	С	N13321 County Hwy M	Sand Creek	54757	4	3/8/20-11/21/20
· · · ·		· · · ·				
Eau Claire						
Ferguson's Morningside Orchard	С	6468 Balsam Rd	Eau Claire	54701	5	2/22/20-10/31/20
Ferguson's Morningside Orchard	C	6466 Balsam Rd	Eau Claire	54701	25	2/22/20-5/31/20
Huntsinger Farms, Inc	C	W3032 State Hwy 37 Upstairs & Downstairs	Eau Claire	54701	15	3/20/20-6/8/20
				100		
Fond du Lac						
Green Barn Farm Market	С	570 N Douglas St. Unit C	Ripon	54971	6	4/15/20-11/7/20
	0	or on Doughas of. Onit o	Пароп	04071	Ū	4/10/20 11/1/20
Grant						
R & R Harvesting/SWTC	С	1930, 1955, 1940, 1960 Brownwood St	Fennimore	53809	88	6/27/20-7/31/20
R & R Harvesting/SWTC	C	1950, 1953, 1940, 1960 Blownwood St		55005	00	0/21/20-1/31/20
Croop Laka						
Green Lake	С	950 S South St	Kingston	52020		
Frembling Prairie Farms	-		Kingston	53939		
Trembling Prairie Farms	<u>C</u>	180 S. South St Apt #2	Kingston	53939	11	7/19/20-10/16/20
Trembling Prairie Farms	<u>C</u>	180 S South St Apt #3	Kingston	53939		
Trembling Prairie Farms	С	231 Mill St	Kingston	53939		
owa						
Alsum Farms Inc	С	6530 Helena Rd	Arena	53506	5	8/1/20-10/31/20

Jackson						
Northern Family Farms	<u>C</u>	W10811 Jeffery Rd (duplexes)	Merrillan	54754 54754		
Northern Family Farms	C	W10811 Jeffery Rd (house)	Merrillan			
Northern Family Farms	C	200 S Hammond St	Merrillan	54754	92	3/2/20-12/3/20
Northern Family Farms	<u>C</u>	N10038 Castle Hill Rd	Merrillan	54754		
Northern Family Farms	C	108 N. Main St Apt #D	Merrillan	54754		
Northern Family Farms	C	105 N Mains St Apt #B	Merrillan	54754	0	5/00/00 40/04/00
Comstock Trees & Service Inc	С	E11273 County Line Rd	Humbird	54746	8	5/26/20-12/31/20
Jefferson						
Ag Installers	С	948 Mulberry St	Lake Mills	53551	00	
Ag Installers	С	1041 Highland St	Jefferson	53549	66	2/22/20-6/30/20
McKay Nursery	C	1001 W. Madison St (Hwy 19)	Waterloo	53594	35	3/30/20-7/18/20
Kenosha				504.40	-	
Mariani Nursery	<u>C</u>	10770 136th Ave	Kenosha	53142	7	3/11/20-11/30/20
Arthur Weiler, Inc	C	8850 184th Ave	Bristol	53104	3	3/23/20-10/19/2020
Breezy Hill Nursery Inc	С	29403 60th St	Salem	53168	29	3/30/20-11/6/20
Kewaunee						
Ebert Enterprises, LLC	С	N6701 County Rd D	Algoma	54201	3	4/15/20-12/1/20
			Algonia	04201	Ŭ	4/10/20 12/1/20
Lafayette						
Berget Farms	С	7165 Hawley Rd	Argyle	54452	9	4/6/20-12/5/20
Lincoln						
Central Wisconsin Evergreens	С	N2160 Hwy 17	Merrill	54452	9	4/6/20-12/5/20
Northwoods Evergreen & Wire	С	W3125 Center Rd	Merrill	54452	6	7/1/20-12/31/20
Marathon						
Baumann Farms LLP	С	237546 Radar Rd (duplex)	Wausau	54403		
Baumann Farms LLP	C	237246 Radar Rd (dorms)	Wausau	54403		
Baumann Farms LLP	C	237246 Radar Rd (house)	Wausau	54403	84	3/29/20-12/31/20
Baumann Farms LLP	C	204834 Honeydew Dr	Wittenburg	54499		
Bijing Tong Ren Tan Health	C	931 Ancestor Lane	Mosinee	54455	12	4/1/20-12/31/20
Heil Ginseng Inc.	C	203 Thomas Hill Rd Apt #2, #5, #6, #7, #8	Edgar	54426		
Heil Ginseng Inc.	C	207 Quaw St	Edgar	54426	24	4/15/20-12/15/20
/anDer Gest Dairy Cattle, Inc	C	3855 Maine Dr	Merrill	54452	4	5/17/20-12/31/20
Hsu Ginseng Farms Inc	<u> </u>	2706 Jelink Ave	Schofield	54476	20	4/26/20-1/15/20
		2700 Jeilin Ave	Scholleid	54470	20	4/20/20-1/15/20
Marinette						
Jim D Jandt	С	W4385 County Rd D	Peshtigo	54157	0.5	
Jim D Jandt	C	W3997 County Rd D	Peshtigo	54157	22	6/5/20-10/20/20
			1. contigo	0.101		
Marquette						
Gumz Muck Farms LLC	С	W6867 County Rd) Units #9C, #7, #5	Endeavor	53930	18	6/15/20-10/5/20
		· · · · · · · · · · · · · · · · · · ·		•		
Milwaukee						
Rodriguez Harvesting	Ħ	Motel 6, 1201 W College Ave	Oak Creek	53154	200	6/2/20-11/15/20

Appleland, LLC	С	6330 Hwy B	Belgium	53004	4	4/1/20-7/1/20
Portage						
LB Werks, Inc	С	8903 Central Sands Rd	Bancroft	54921	1	5/12/20-11/1/20
Silent Night Evergreens LLC	С	119 Wauona Trail	Endeavor	53901	4	6/22/20-11/25/20
Racine						
Oak Ridge Sod Farm, Inc	С	23907 Burmiester Rd	Union Grove	53182		
Oak Ridge Sod Farm, Inc	С	22901 Burmiester Rd	Union Grove	53182	8	2/1/20-11/3020
Landmark Services Cooperative	C	4801 Northwest Hwy Apt #A & Apt #B	Racine	53185	Se	e Columbia County
Rock Bonnie Plants. Inc	С	3105 Village Court Apt #6	Janesville	53563		
Bonnie Plants, Inc	C	3106 Village Court Apt #6	Janesville	53563		
Bonnie Plants, Inc	C	3104 Village Court Apt #7	Janesville	53563	20	2/27/20-7/8/20
Bonnie Plants, Inc	<u>с</u>	3105 Village Court Apt #3	Janesville	53563	20	2121120-110120
	<u>с</u>	3105 Village Court Apt #3 3130 Village Court Apt #1		53563		
Bonnie Plants, Inc	с С		Janesville	53563		e Columbia County
Landmark Services Cooperative		8721 N Territorial Rd	Evansville		36	
McFarlane Pheasants, Inc	<u>C</u>	2933 S Oakhill Ave	Janesville	53563	14	3/15/20-1/15/20
McFarlane Pheasants, Inc	C	2234 S. Crosby Ave	Janesville	53563		
Breezy Hill Nursery Inc.	С	308 Milwaukee Rd	Clinton	53525	56	ee Kenosha County
Shawano						
Dan Hanauer's Tree Farms	С	5280 Hwy MM Apt #1, #5, #6, #7,	Shawano	54166	9	4/20/20-12/15/20
			Chanano	01100	Ũ	1/20/20 12/10/20
Sheboygan						
Honey Land Farm II LLC	С	W6894 County Hwy F	Cascade	53011	3	5/15/20-11/12/20
St. Croix						
Beskar Partners	С	1935 County Rd G	New Richmond	54017	2	4/20/20-12/1/20
Trempealeau	<u> </u>	WO4905 Casia Dd	Calaavilla	54000		
Sacia Orchards, Inc.	<u> </u>	W21865 Sacia Rd	Galesville	54630	15	3/15/20-11/2/20
Sacia Orchards, Inc.	C C	W21888 Sacia Rd	Galesville	54630	8	8/11/20-10/31/20
Ferguson's Morningside	U	N17057 Grover Ln	Galesville	54630	0	0/11/20-10/31/20
Vernon						
Harmony Valley Farms	С	109 Center St	Viroqua	54665		
Harmony Valley Farms	С	660 S. Washington St	Viroqua	54665	40	4/1/20-12/24/20
Harmony Valley Farms	С	E3404 Hammel Ln	Viroqua	54665		
Walworth				_		
Signet Builders Inc	С	291 Fraternity Ln Apt #201, #202, #203, #204	Whitewater	53190	12	3/15/20-6/15/20
MorAgra Family Farm	C	150 W School St Apt #321	Sharon	53585	4	2/1/20-12/1/20
Ag Installers	C	291 Fraternity Lane Apts #102, #108, #112	Whitewater	53190	т	2,1/20 12/1/20
Ag Installers	C	291 Fraternity Lane Apts #106, #118	Whitewater	53190	Se	e Jefferson County
ig notanolo	C		Whitewater	53190	00	

Vaukesha							
Gwenyn Hill Farm	С	N130 W294 Bryn Dr	Waukesha	53188	3	3/15/20-12/1/20	
Breezy Hill Nursery Inc	С	N96 W21627 County Line Rd	Menomonee Falls	53051	Se	e Kenosha County	
Waushara							
J & P Harvest, Inc/Flyte Family	С	532 E. King St., Apt #217	Coloma	54930	35/45	4/20/20-11/20/20	
J & P Harvest, Inc	С	W13475 Cottonville Ave Trailer #2	Coloma	54930	33/43	4/20/20 11/20/20	
J & P Harvest, Inc/Flyte Family	С	N979 County Rd Ch	Coloma	54930			
J & P Harvest, Inc/Flyte Family	С	W13475 Cottonville Ave Trailer #1	Coloma	54930	35/45	5/15/20-8/10/20	
J & P Harvest, Inc/Flyte Family	С	W13475 Cottonvile Ave Trailer #3	Coloma	54930			
J & P Harvest/Paradise Farms	С	N7122 Hwy AA	Wild Rose	54984	32	7/5/20-11/20/20	
Robert H Heath Farms	С	114 S Waupaca St	Wautoma	54982			
Robert H Heath Farms	С	520 W. Grove St	Wautoma	54982	S	ee Adams County	
Robert H Heath Farms	С	514 W. Grove St	Wautoma	54930	See Adams County		
Robert H Heath Farms	С	W14077 Cottonville Ln	Coloma	54930			
_auer Farms, Inc	С	N2092 State Rd 43	Wautoma	54982	65	4/17/20-10/30/20	
Bonnie Plants, Inc	С	W9448 State Rd 21	Wautoma	54982	8	3/9/20-7/2/20	
Thomas R Happersett	С	514 Fairview Ct	Wautoma	54982	8	5/1/20-11/30/20	
Kirk International	С	302 N Scott St	Wautoma	54982	7	6/12/20-12/5/20	
J & P Harvest/Kevin Sigourney	С	W14102 State Road 21	Coloma	54930	5	7/5/20-11/20/20	
Midwest Housing Project/Oasis	С	N5572 County Rd B	Plainfield	54933	108	6/10/20-10/31/20	
Mecan River Inn/GIII Harvesting	ж	N1264 County Rd B	Coloma	54930	40	6/23/20-8/10/20	
Gary Woyak	С	N5845 Hwy KK	Plainfield	54966	6	8/28/20-10/31/20	
Arlene Resource	С	N6853 Hwy 22	Wild Rose	54984	20	8/28/20-12/4/20	
Wood							
Mortenson Bros. Inc	С	911 West 3rd St., Apt #217, #325, 329	Nekoosa	54457	8	3/2/20-12/31/20	
Mortenson Bros. Inc	С	1110 Baker St Apt #B	Wis. Rapids	544944	4	3/2/20-12/31/20	

Subcommittee on Vaccinations:

I am sending this message to urge you to include among those to receive the vaccine in Phase 1B those individuals living in the congregate living facilities of prisons, jails, homeless and domestic violence shelters and other such settings that make social distancing, quarantine, and isolation impossible. I would like to quote segments from a letter written to you on January 4, 2021, with which I am in agreement.

"As it stands now, the CDC's Advisory Committee on Immunization Practices (ACIP) has recommended that the vaccine "should be offered to persons aged ≥ 75 years and non-health care frontline essential workers."² The report also cites that "high incidents and outbreaks within multiple critical infrastructure sectors illustrate the COVID-19 risk in these populations and the disproportionate impact of COVID-19 on workers who belong to racial and ethnic minority groups," in making their recommendation to offer the vaccine to non-health care frontline essential workers.³

These same factors are in play when considering congregate living facilities—including prisons, jails, homeless and domestic violence shelters, and any other setting that makes social distancing, quarantine, and isolation difficult or impossible. ACIP considers "scientific evidence regarding COVID-19 epidemiology, ethical principles, and vaccination program implementation considerations" in its recommendations for vaccine rollout.4

When considering the populations housed in congregate living facilities, the science, ethics, and implementation considerations all strongly suggest that these individuals be offered the vaccine as part of Phase 1b."

¹ The inclusion of residents of congregate living facilities in higher-priority groups is explicit policy of no fewer than 26 states across the nation. See Katie Rose Quandt, *Incarcerated people and corrections staff should be prioritized in COVID-19 vaccination plans*, PRISON POLICY INITIATIVE December 8, 2020, available at https://www.prisonpolicy.org/blog/2020/12/08/covid-vaccination-plans/

2 Kathleen Dooling, MD, et al, *The Advisory Committee on Immunization Practices' Updated Interim Recommendation for Allocation of COVID-19 Vaccine*, MORBIDITY AND MORTALITY WEEKLY REPORT, Centers for Disease Control December 22, 2020, available at <u>https://www.cdc.gov/mmwr/volumes/69/wr/mm695152e2.htm</u> 3 *Id.*

4 Id

Sincerely,

S. Frances Hoffman



Hello all,

I write to ask that you immediately include criminal defense attorneys in your updated list of essential frontline workers.

Criminal defense attorneys enter jails and prisons constantly and interact with a wide crosssection of the population. At this point, we are the only unvaccinated population still being admitted to these locations without testing or vaccination.

Often our clients are the same groups most at risk of testing positive for the coronavirus. These may be homeless people or those too poor to afford attorneys. They are often frontline workers themselves.

Further, the law allows for us to be appointed to represent defendants without our consent, something that happens more often in more rural communities.

While court appearances can often be held remotely, we cannot meet with our clients to review documents and discovery videos remotely. Other appearances (such as jury trials) cannot be held remotely, and clients have the right to have hearings be held in person. When trials occur, other members of the community, including hundreds of potential jurors, may also be court ordered to appear.

We are tasked with securing our clients constitutional rights to counsel, to due process, to speedy trials, all under the direction of courts and ethical standards that leave us no options except close physical contact with unvaccinated, untested, and often high risk individuals. We may have medical conditions that make us high risk as well.

I have an upcoming trial where my client is **burn**. He does not really want to sit 2 feet away from an unvaccinated attorney who has constant contact with unvaccinated members of the community for 2 weeks. I cannot blame him, but also, none of us have a choice about this. We are all court ordered to be there.

Government is always quick to recognize law enforcement as essential. Yet, often left behind are the attorneys whose involvement in the process is just as necessary, even if we represent citizens instead of the government. Every arrest resulting in a court appearance requires an attorney. So it cannot just be those making the arrest, and guarding the inmates, who need to be vaccinated.

It is not just state public defenders either. Private attorneys handle 40% of all public defender cases in Wisconsin, as well as all court appointments.

Please put us on the list so we can get our courts functioning again. People have waited too long for their day in court already. Stop putting us in the position of risking our lives and the lives of our families day after day to keep the wheels of justice moving.

Best,

Justin Singleton, J.D.

From:	Acevedo Jr, Rafael
To:	DHS SDMAC
Cc:	Acevedo Jr, Rafael
Subject:	Support for vaccine prioritization for homeless population
Date:	Saturday, January 16, 2021 6:46:19 AM

Hello members of the WI State Disaster Medical Advisory Committee,

My name is Rafael Acevedo, I work for the City of Milwaukee and I manage the Citi's plan to end homelessness and we are the lead agency for the Milwaukee Continuum of Care (CoC). The CoC is a county-wide effort to end homelessness with over 100 partners and members, <u>www.milwaukeecoc.org</u>. Thank you so much for your work on ensuring the vaccine rollout is efficient and equitable. It is incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

- People experiencing homelessness 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.
- People who have exhausted all other resources and are staying in a shelter 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.
- The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that <u>6.7% of Wisconsin's</u> <u>population</u> was Black in 2009. In November 2020, <u>43% of the population experiencing</u> <u>homelessness was Black</u>.
- 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and

should be included in our prioritization for the vaccine.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,

Rafael Acevedo Grant Compliance Manager City of Milwaukee City Hall 200 E. Wells Street, Room 606 Milwaukee, WI 53202 414-940-8573

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From:	Sarah Bogen
То:	DHS SDMAC
Subject:	Include Food Pantry Workers in Vaccine group 1B
Date:	Friday, January 15, 2021 10:39:09 PM

To whom it may concern:

I am on the front lines of the COVID-19 pandemic every day that I go to work. I do my best to smile with my eyes as I greet food pantry clients at MOM in Middleton, WI. Each person or family pulls up to our drive-up distribution with their own story, their own fears, and their own understanding of COVID disease and the virus that causes it. Most wear the masks that we distribute, but some do not. All need the food and supplies that we provide. The sooner that my colleagues both volunteers and employees can receive the vaccine the more secure our food pantry operation will be in continuing to provide healthy food to those in need.

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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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 unprecedent 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.

Sarah Bogen

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Preventing Homelessness, Ending Hunger www.momhelps.org www.facebook.com/MiddletonOM

Proud partner of United Way of Dane County.

From:	Jennipher Janness
To:	DHS SDMAC
Subject:	Comments on Phase 1B
Date:	Friday, January 15, 2021 10:02:37 PM

I strongly agree that congregate living facility staff should be a high priority. I have friends who work in healthcare, but are not ever in contact with patients, who have already gotten the vaccine. I'm in contact with homeless individuals at work every day and frankly, I've been scared to go to work every day for close to a year now. Thank you, Jennipher Janness

From:	Dayna Long
То:	DHS SDMAC
Subject:	Vaccine Subcommittee - Phase 1B
Date:	Friday, January 15, 2021 4:36:20 PM

Hello,

I'm writing to request that you include transit workers in Phase 1B of COVID-19 vaccine distribution. Transit workers provide an essential service, as evidenced by the fact that they have continued to work without fail throughout the pandemic. They have regular contact with the public, including many members of the public who are also highly vulnerable to infection - those struggling with homelessness, food service and retail workers, etc.

I am especially concerned with making sure that transit workers are included in the next phase given news about the new COVID strain, B.1.1.7. In Madison, it was a fight to make sure that transit workers were provided with appropriate PPE and safety precautions. Many of the safety precautions that were implemented early on in the pandemic have since been rolled back, though it would probably be better to once again reduce capacity and limit contact between drivers and riders by once again waiving fare and having passengers use rear-door entry. Bus drivers are sitting ducks for a new, more contagious strain of COVID-19. We must take urgent action to keep them safe.

Finally, in cities like Madison (and I assume also MIIwaukee) transit workers play a critical role in getting kids to and from school. Taking care of transit workers early means we'll be that much closer to resuming in-person schooling safely, when we're finally able to provide vaccines to teachers as well.

Thanks for your attention to this overlooked sector.

Best,

Dayna Long

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 incredibly important and necessary that the Phase 1B recommendation for the COVID-19 vaccine include congregate living facilities for both staff and residents.

Prioritization for this critical population is imperative for the following reasons:

- People experiencing homelessness 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.
- People who have exhausted all other resources and are staying in a shelter 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.
- The homeless population is disproportionately people of color, who we know are also at greater risk of severe COVID disease. In Wisconsin, it was estimated that <u>6.7% of Wisconsin's population</u> was Black in 2009. In November 2020, <u>43% of the population experiencing homelessness was</u> <u>Black</u>.
- 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 are seeing and will continue to see an increase in the number of people experiencing homelessness in our State. Evictions and people no longer able to stay with friends and family, the increasing economic burden of the pandemic and the limited funding and availability for motel voucher alternatives, there has been a statewide increase in people experiencing unsheltered homelessness sleeping outside and in other places not meant for human habitation (e.g. caves, abandoned buildings, storage units, vehicles, fishing shacks). With an increased need, the risk of COVID in

congregate settings, capacity reduction because of social distancing guidelines, shelters are struggling to meet the needs of people experiencing homelessness. As a result, the unsheltered population continues to be at risk for COVID and should be included in our prioritization for the vaccine.

I am the Executive Director for an agency serving victims of domestic abuse and sexual assault. One of the programs we operate is a shelter. This program has operated throughout the pandemic without interruption but with precautions. Staff and clients continue to take all the recommended precautions but it is sometimes impossible when working with a trauma victim in shelter to stay 6 feet away, etc. When someone's crying, it's really hard for them to wear a mask. We have had some shelter clients test positive for COVID while they were in shelter. This causes a lot of fear from other clients in shelter and staff. It would be extremely helpful if the vaccine could be offered to staff who work in shelter and to the people who are in shelter.

The current recommendations for DHS regarding COVID-19 Vaccine Priority Group 1b includes some concerns about feasibility in Appendix C. While feasibility is one domain of consideration, equity and justice should be additional considerations when working to ensure this vulnerable and at risk population is prioritized. Due to the reasons above, it is imperative that people accessing shelters are prioritized for the vaccine. Collaboration between public health, those administering the vaccine, shelter and outreach staff will be essential to address the rollout concerns, distribution, education, and adherence to appropriate protocols. There will be a need for guidance on timelines, the second vaccine, and accurate education to address myths and misunderstandings. Across Wisconsin, homeless services providers have access to a shared database that can help us see what services people are accessing and possibly use to document vaccines. There are many options available to ensure success. Allowing unsheltered people experiencing homeless to access the vaccine through the emergency shelter system should be encouraged and supported. While challenging, open communication and creative solutions will overcome those potential feasibility issues and enhance trust between the homeless population, staff, and public health. We cannot wait for a single dose vaccine to ensure that this vulnerable population and the staff that are working so hard to keep them safe are vaccinated.

Transitional housing settings often have shared living spaces as well. It is important that residents and staff of these facilities are considered in Phase 1B rollout. Again, this could be a challenging population to reach, but with clear communication and creative strategies, this can be successful. The efficacy of only prioritizing staff for the vaccine and not including the residents is a missing opportunity to develop partnership, trust, and demonstrate what we know to be true - COVID does not discriminate. Residents and staff are equally at risk.

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.

Thank you for your work in rolling out the vaccine and advocating for all Wisconsinites.

Sincerely,

Sara Meier Executive Director InCourage Manitowoc, WI <u>sara.meier@incouragewi.org</u> 920-684-4661 (w) 920-242-4966 (c)