In the past three months, cyber criminals have targeted 47% of Americans with SSN scams. 53% of all Senior citizens were targeted and 21% of Seniors were targeted with more than three SSN scams in the same time frame.

To reduce your risk of becoming a victim of a SSN suspension scam, familiarize yourself with the following prevention and mitigation strategies:

- Ignore anyone who claims that your SSN is suspended.
- Block any phone numbers associated with the scam by adjusting your phone’s settings, block the senders of associated fraudulent emails, and discard any associated mail solicitation.
- Never reveal sensitive personal information such as your Social Security number or bank account information when answering an unsolicited call.
- Scrutinize any US government correspondence initiated through telephone or email. US government agencies primarily contact citizens by mail sent via the US Postal Service.
- Because caller-ID can be spoofed to make it look as though a call originates from a legitimate source, it is best to hang up and then call the agency directly using an official phone number located on the agency’s website to verify legitimacy.
- Recognize that the Social Security Administration only sends texts and email correspondence when you have subscribed to receive them or as part of enhanced security settings when accessing your SSN account.
- Most importantly, remember that the US government does not suspend Social Security numbers.

To Report A Scam: OIG.SSA.GOV
Today is National Get Covered Day

Residents are encouraged to sign-up for high-quality, affordable health insurance at DCHealthLink.com
### WHERE WE ARE TODAY

#### Level of Community Spread
- **Daily case rate**: 40.9 (Dec 8), 7-day avg. per 100,000 pop.
- **Rate of transmission**: 1.02 (Nov 28), Effective reproduction number (R0)
- **Test positivity rate**: 5.8% (Dec 6), Percent positive from RT-PCR tests
- **New cases from quarantined contacts**: 9.5% (Dec 6), 7-day average

#### Health System Capacity
- **Percent hospital utilization**: 86.9% (Dec 8), of available beds without surge
- **Percent COVID-19 patients**: 9.0% (Dec 8), of daily hospital census, 7-day average
- **Mean test turnaround time**: 3.3 (Dec 8), (days) 7-day average
- **Diagnostic tests conducted**: 8,527 (Dec 6), 7-day avg. per million pop.

#### Public Health System Capacity
- **Positive cases with contact attempt**: 99.2% (Dec 7), 7-day avg. attempt within 1 day
- **Close contacts with contact attempt**: 97.0% (Dec 6), 7-day avg. attempt within 2 days

#### Community Engagement
- **Positive cases interviewed**: 75.9% (Dec 6), 7-day avg. completed within 3 days
- **Positive cases who provide close contacts**: 42.9% (Dec 6), 7-day avg.
- **Mean number close contacts provided**: 1.1 (Dec 6), 7-day avg. mean per positive case
- **Exposure Notification Opt-in**: 467,498 (Dec 8), cumulative number of smart phones opted in to official exposure notification system
Contact tracers were stationed at 151 locations across the 8 wards in the District to audit mass compliance between 11/18-12/09.

Of 4,250 total individuals observed, 78% of individuals met the DC mask guidance criteria for being required to wear a mask.

83% of those required to wear a mask had a mask visible to the observer; however, only 72% of those required to wear a mask wore the mask correctly.
The majority of individuals observed were estimated to be aged 19-40 years (61%) and 41-64 years (29%), while 4% were estimated to be aged 5-18 years and 6% were estimated to be aged 65 years and older.

Among adults estimated to be 19-40, 41-64, and 65 years and older, the percentage of individuals wearing their masks correctly (among those requiring mask use) ranged between 70-73%.

The percent of incorrect mask usage was highest among adolescents aged 5-18 years (19%).

*Please note: due to a modification with the audit instrument during the observation period, age was only available for 75% of total individuals.

Data source: Community Mask Audit, DC Health (data collected 11/18-12/09)
79% of females required to wear a mask wore their mask correctly, while only 67% of males required to wear a mask wore their mask correctly.

Slightly more males were observed (55%) in the audit than females (45%).

79% of females required to wear a mask wore their mask correctly, while only 67% of males required to wear a mask wore their mask correctly.

Data source: Community Mask Audit, DC Health (data collected 11/18-12/09)
Differences in correct mask usage were observed by ward.

The highest percentage of individuals observed wearing a mask correctly was Ward 2 (84%);

The lowest percentage of individuals observed wearing a mask correctly was Ward 7 (55%).

Data source: Community Mask Audit, DC Health (data collected 11/18-12/09)
Washingtonians are strongly encouraged not to travel for the holidays and to celebrate at home with your household.
Recently, the Centers for Disease Control and Prevention (CDC) updated their guidance around quarantining after exposure to COVID-19. Based on the updated CDC guidance, ending quarantine after 10 days (on day 11) after exposure may be acceptable if:

- You do not develop symptoms of COVID-19 at any point during quarantine.

AND

- You continue to self-monitor for symptoms until 14 days after the last exposure.

- If you develop symptoms at any time in the 14 days after exposure, self-isolate immediately and follow-up with your health care provider for testing.
If you are a close contact of a person confirmed to have COVID-19, quarantining for 14 days after the last exposure remains the safest course of action, and the District is not changing guidance to allow close contacts to “test out” of quarantining.

Health care facility and congregate setting staff, residents, and patients must adhere to 14 days of quarantine.
VACCINE UPDATE
Our community has worked hard and sacrificed, since March, to save lives and protect our most vulnerable residents.

Washington, DC has been a leader in mask usage and testing. Now, we are ready to lead an equitable distribution of a safe and effective vaccine.

A successful vaccination implementation will finally bring an end to this crisis. When Washingtonians are vaccinated, we can come back together with our friends, family, and neighbors.
In June, the District started acquiring supplies to administer the COVID-19 vaccine. These supplies include over 184,000 needles and syringes, 1 million alcohol prep pads, 1 million Band-Aids, as well as other supplies needed to store properly the vaccine.

In order to further prepare for COVID-19 vaccination, DC Health issued an administrative order on March 13, 2020 to modify the scope of practice for certain licensed, registered, and certified health care providers as required, including authorizing certified paramedics to administer vaccines with appropriate training and supervision. The District currently has 176 provider agreements with hospitals, pharmacies, long-term care facilities, clinics, urgent cares, and other health care facilities. This provider agreement will allow providers at those locations to order and administer the COVID-19 vaccine in the District of Columbia.
Next steps after the Pfizer vaccine receives Emergency Use Authorization:

1. The CDC Advisory Committee on Immunization Practices (ACIP) must issue recommendations for vaccine distribution.

2. Vaccinators must be fully trained.
Six sites (those that have the necessary equipment to store the Pfizer vaccine) will receive DC’s initial allotment. Our initial allotment of 6,825 doses will be delivered in seven boxes that each carry 975 doses.

- Medstar Washington Hospital Center (2)
- Howard University Hospital (1)
- The George Washington University Hospital (1)
- Children’s National Hospital (1)
- Kaiser Permanente (1)
- MedStar Georgetown University Hospital (1)

This week, DC Health is conducting inspections of these six sites to ensure they are ready to receive their boxes.
These partner institutions include:

- DC Fire & EMS and DC frontline public health workers
- HSC Pediatric Center
- National Rehabilitation Hospital
- Psychiatric Institute of Washington
- Saint Elizabeths Hospital
- Sibley Memorial Hospital
- United Medical Center

For example: Children’s National will partner with United Medical Center and Kaiser will partner with DC Government to vaccinate FEMS and other frontline public health workers
In line with CDC guidance, Washington, DC is using a phased approach.

**PHASE 1A**
Health care workers and first responders

**PHASE 1B**
Essential workers and at-risk residents

**PHASE 2**
Rest of Phase 1 populations and the general public

**PHASE 3**
General public
Who is included in Phase 1a?

- Full and Part Time Hospital Staff (33,850)
- Nursing and Residential Care Facility Employees (14,810)
- Outpatient Providers and Ancillary Care Providers (11,445)
- Home Health Providers (8,115)
- Health Care Providers in Long-Term Care Facilities (7,860)
- Pharmacists and Pharmacy Technicians (5,300)
- Emergency Services & Public Safety, e.g. Fire and EMS (3,170)
- Frontline Public Health Personnel (550)
Who is included in Phase 1b?

- Persons 65 years and older (84,960)
- Adults 19 - 64 with High Risk Conditions (163,000)
- DC Government Critical Infrastructure Personnel (3,800)
- Law enforcement and Public Safety (10,500)
- Department of Corrections Residents and Staff (2,921)
- Residential Care Community Residents (1,220)
- Nursing Home Residents (1,260)
- Residents Experiencing Homelessness and Transitional Housing Residents (6,521)
- Grocery Store Employees (9,590)
- Childcare Providers and Staff (7,000)
- School Teachers and Staff (20,000)
Who will receive the vaccine first?

Frontline health care workers, including those who work at our public testing sites, and first responders (Fire and EMS) will be prioritized.

Initial distribution of the vaccine will be tied to settings, not roles. Priority will be given to those who have direct exposure to patients, including doctors, nurses, techs, front desk workers, and other environmental and support service workers in settings such as intensive care units and emergency rooms.
How did the CDC and DC Health decide who to prioritize in Phase 1a?

Vaccinating health care workers:

- Ensures we have a healthy workforce to treat and care for sick people
- Protects patients
How will the vaccine be distributed?

The first batches of vaccines will go directly to health care facilities.

As we move through Phase 1a, DC Health and the Office of the Chief Technology Officer are working together to build an online registration system for health care workers who work outside of traditional health care settings to register for a vaccination.
We want Washingtonians to feel hopeful and confident.

We know that people have questions, and we will continue to share information and answer those questions, thoroughly and transparently, in the coming days, weeks, and months.
Help is on the way...

We need to actually double-down on the public health measures as we’re waiting for that help to come, which will be soon.  

~Dr. Anthony Fauci