

From: [Malcolm, Jan \(MDH\)](#)
To: [Huff, Daniel \(MDH\)](#); [Leppink, Nancy \(MDH\)](#)
Cc: [Ehresmann, Kristen \(MDH\)](#); [Klammer, Susan \(MDH\)](#); [Kenyon, Cynthia \(MDH\)](#); [Kelly, Margaret \(MDH\)](#); [Emerson, Emily \(MDH\)](#)
Subject: RE: Data on what's driving the spread
Date: Thursday, October 22, 2020 3:37:00 PM
Attachments: [image001.gif](#)
[image002.png](#)

Jan Malcolm

Commissioner

Minnesota Department of Health

Office: 651/201-5810 |



See COS questions below, fyi, in case it's helpful context for his request on schools and sports. I don't think he has seen any sports data from us that I am aware of.

From: Malcolm, Jan (MDH)
Sent: Thursday, October 22, 2020 10:15 AM
To: Ehresmann, Kristen (MDH) <kristen.ehresmann@state.mn.us>; Kelly, Margaret (MDH) <Margaret.Kelly@state.mn.us>
Subject: Data on what's driving the spread
Importance: High

COS has been asking for data to be given to the Governor regularly (I proposed weekly) on what is driving the case increases, building off of the chart you produce Kris. We need some way to estimate total impact from generations of transmission and not just the primary case, as people look at the primary case numbers and think those are small impacts that don't justify the dial backs we propose. See COS questions below. THX as always for creative thinking and fast turnaround.

Jan Malcolm

Commissioner

Minnesota Department of Health

Office: 651/201-5810 |



From: Schmitter, Chris L (GOV) <Chris.Schmitter@state.mn.us>
Sent: Thursday, October 22, 2020 6:21 AM
To: Malcolm, Jan (MDH) <jan.malcolm@state.mn.us>; Held, Jessi (GOV) <jessi.held@state.mn.us>
Cc: Bernardy, Pete (MMB) <peter.bernardy@state.mn.us>; Long, Nate (GOV) <Nate.Long@state.mn.us>; Tanis, Patrick (GOV) <Patrick.Tanis@state.mn.us>
Subject: RE: Weekly Epi Report - 10/15/20

Thanks for this. This is helpful, though less useful than what I expected. Given these numbers are small

in comparison to the overall case numbers, I assume the conclusion here is that we just don't know where most transmission is happening?

I'm thinking of something we gave Birx that allowed her to make a conclusion about the percentage of spread coming from social gatherings, weddings, funerals. Do we have something like that? Or not because we don't have enough data and there's too much community spread.

In other words, if you could say that 75% of case growth (as she did) was happening in social gatherings, weddings, funerals, you could target those areas most aggressively.

Chris Schmitter

He / him / his

Chief of Staff

Governor Tim Walz

From: Malcolm, Jan (MDH) <jan.malcolm@state.mn.us>

Sent: Tuesday, October 20, 2020 10:18 AM

To: Schmitter, Chris L (GOV) <Chris.Schmitter@state.mn.us>; Held, Jessi (GOV) <jessi.held@state.mn.us>

Cc: Bernardy, Pete (MMB) <peter.bernardy@state.mn.us>; Long, Nate (GOV) <Nate.Long@state.mn.us>;

Tanis, Patrick (GOV) <Patrick.Tanis@state.mn.us>

Subject: RE: Weekly Epi Report - 10/15/20

Here's a slide of the data Kris E's team produces periodically.

Jan Malcolm

Commissioner

Minnesota Department of Health

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[iconmdhmnemail](#)



From: Schmitter, Chris L (GOV) <Chris.Schmitter@state.mn.us>

Sent: Tuesday, October 20, 2020 8:41 AM

To: Malcolm, Jan (MDH) <jan.malcolm@state.mn.us>; Held, Jessi (GOV) <jessi.held@state.mn.us>

Cc: Bernardy, Pete (MMB) <peter.bernardy@state.mn.us>; Long, Nate (GOV) <Nate.Long@state.mn.us>;

Tanis, Patrick (GOV) <Patrick.Tanis@state.mn.us>

Subject: Re: Weekly Epi Report - 10/15/20

Weekly run fine. If it's in here great. Let's see what it looks like first and can discuss how to draw it out.

Get [Outlook for iOS](#)

From: Malcolm, Jan (MDH) <jan.malcolm@state.mn.us>

Sent: Tuesday, October 20, 2020 7:43:44 AM

To: Schmitter, Chris L (GOV) <Chris.Schmitter@state.mn.us>; Held, Jessi (GOV) <jessi.held@state.mn.us>

Cc: Bernardy, Pete (MMB) <peter.bernardy@state.mn.us>; Long, Nate (GOV) <Nate.Long@state.mn.us>;

Tanis, Patrick (GOV) <Patrick.Tanis@state.mn.us>

Subject: RE: Weekly Epi Report - 10/15/20

Yes, sorry, I asked for the community outbreaks to be included in this report and don't see it yet. Would you prefer to get it separately? It wouldn't change much daily so I'd propose a weekly run. OK?

Jan Malcolm

Commissioner

Minnesota Department of Health

Office: 651/201-5810 |

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From: Schmitter, Chris L (GOV) <Chris.Schmitter@state.mn.us>

Sent: Tuesday, October 20, 2020 5:57 AM

To: Malcolm, Jan (MDH) <jan.malcolm@state.mn.us>; Held, Jessi (GOV) <jessi.held@state.mn.us>

Cc: Bernardy, Pete (MMB) <peter.bernardy@state.mn.us>; Long, Nate (GOV) <Nate.Long@state.mn.us>;
Tanis, Patrick (GOV) <Patrick.Tanis@state.mn.us>

Subject: RE: Weekly Epi Report - 10/15/20

Thanks, Jan. Yes, I believe the Gov receives the weekly EPI report. Jessi and Nate can make sure. It's such a helpful doc, but I'm still looking for the dashboard or summary we discussed that captures where most transmission is happening. E.g., what we gave Birx back in August that led her to conclude some 70% of our spread was in private gatherings, weddings, and funerals. Can we get a summary sheet that breaks down where transmission is happening, where we know it (e.g., percentage of cases in various settings), with more detailed breakdowns (like the workplace outbreaks pages in this document) as needed? Is that possible? Looping Pete as well.

Thanks,

Chris

Chris Schmitter

He / him / his

Chief of Staff

Governor Tim Walz

From: Malcolm, Jan (MDH) <jan.malcolm@state.mn.us>

Sent: Friday, October 16, 2020 10:59 AM

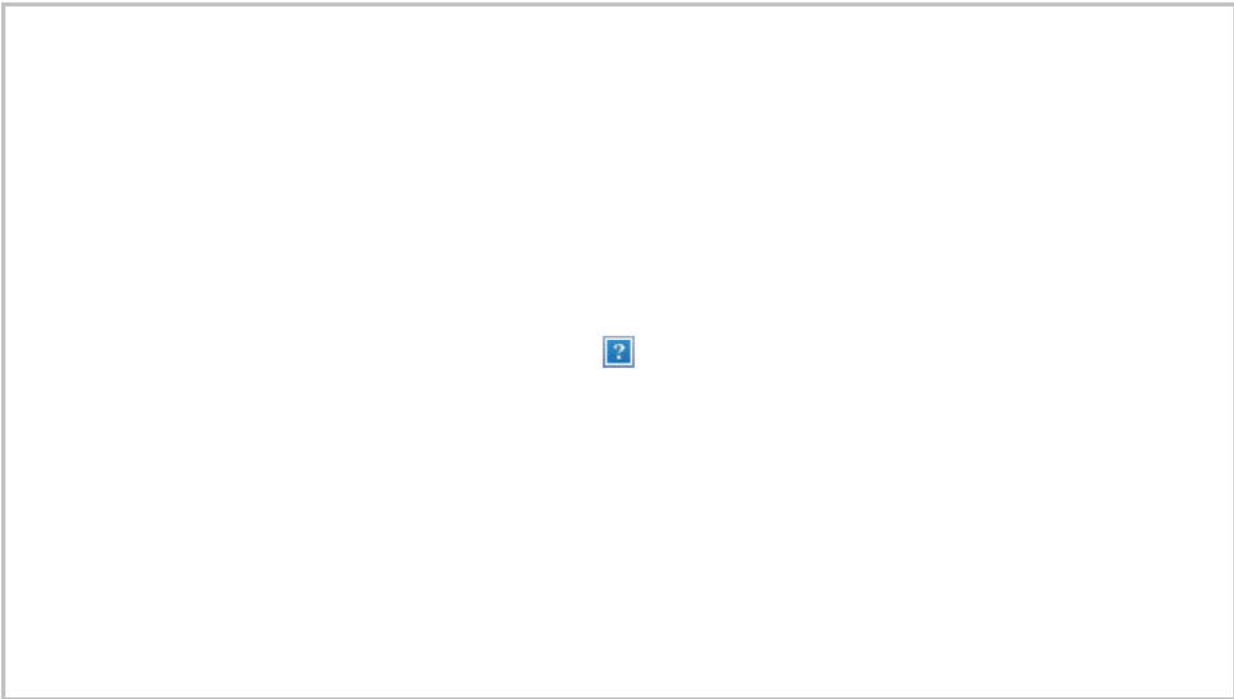
To: Schmitter, Chris L (GOV) <Chris.Schmitter@state.mn.us>; Held, Jessi (GOV) <jessi.held@state.mn.us>

Subject: FW: Weekly Epi Report - 10/15/20

Importance: High

I think the Governor would probably like to see this report but leave that to your judgment. Quick summary in the text below hits the main points. The red lights keep getting redder. Also of note on test positivity, it looks to me from the lag period numbers we could go over 6% in the coming days and keep heading higher.

Chris also here is the slide on implications of accelerating case growth per 100k from the MDH framework deck.



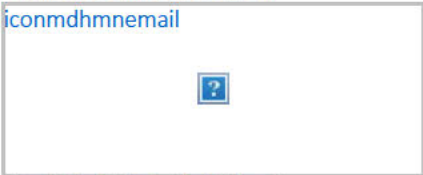
Jan Malcolm

Commissioner

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Changes in Epidemiological Assessment

- No changes in report card colors this week; trends continue in similar trajectories as last week.

Highlights & Additions

- This week, lab results reporting changed to include both antigen (probable) and PCR tests. Number of tests are broken out separately for antigen and PCR in the percent positivity figure (page 6). **As of October 7, the percent of tests positive (all tests, including antigen and PCR) increased to 5.2% (7-day rolling average), despite increased testing and the addition of antigen test results.** *Please note that antigen tests are currently included in Minnesota-specific figures, but are not currently included for Minnesota in figures comparing states.*
- **Cases in the lag period (Week 41) are reaching a new peak: there are currently 9,170 cases in Week 41. This new peak is already 25.7% above the previous peak in Week 39 (7,295 cases).**
- Two new figures appear in this week's report: one depicts total workplace outbreaks by MMWR week (page 16); the other shows Pneumonia, Influenza or COVID-19 (PIC) as underlying vs. contributing causes of death (page 32). **The workplace outbreaks figure shows that the week prior to the lag had the highest total number of workplace outbreaks so far over the**

pandemic. The PIC figure better aligns with CDC methods/definitions for mortality and highlights the impact of COVID-19 as compared to pneumonia and influenza.

- Community spread with no known contact exceeds 40% of cases in the Metro and Southwest regions of the state, with multiple days (October 5–7) having more than 400 new cases in this exposure category (by specimen date). The proportion of exposures through community spread where this is a known contact, but not part of an outbreak or congregate setting, is also increasing, with multiple days in the past week having more than 300 new cases in this category.
- Cases in health care workers reached a new peak in the week prior to the lag, and are already reaching a new peak in the lag period (Week 41). Health care worker cases in the lag are already 18.2% above the prior week's peak (768 cases compared to 650 cases).
- Hospitalizations continue to increase, and should be monitored closely as surrounding states (Wisconsin, North Dakota, and South Dakota) are experiencing hospital capacity concerns.
- Moving forward, health equity and non-COVID-19 mortality data will be updated every other week. This week's report includes non-COVID-19 mortality data. Neither section will be included next week, but both sections will be in the following week's Epi Report.

Zaynab Rezania, MPH

Epidemiologist | Health Risk Intervention Unit

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