



# Transcript

National Guard Bureau Public Affairs

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**National Guard on-the-record telephonic media roundtable discussing National Guard role in COVID-19 vaccine distribution – Monday, December 14 – with the following subject-matter experts:**

- **Army Maj. Gen. John C. Harris, Jr., Adjutant General, Ohio National Guard**
- **Army Brig. Gen. Murray E. “Gene” Holt, Assistant Adjutant General and Joint Task Force Corona Commander, West Virginia National Guard**
- **Army Brig. Gen. Cynthia K. Tinkham, Assistant Adjutant General, Oklahoma National Guard**

**MODERATOR:** The National Guard Bureau has been at the forefront of the COVID-19 pandemic response across the nation, providing support the state local authorities, and in June more than 47,000 guardsmen and women were supporting these operations across the country and 20,000 remain on duty battling the pandemic today. Currently, governors in 26 states and territories are planning to use the National Guard in some capacity for Covid-19 vaccine distribution. Three general officers representing state senior leadership will provide their perspective on the missions of their National Guard men and women and what they are doing in support of COVID vaccine distributions in their respective states.

So, today we have Army Major General John Harris, who is the Adjutant General of Ohio National Guard. We also have Army Brigadier General Murray “Gene” Holt, Assistant Adjutant General and Joint Task Force Corona Commander for West Virginia National Guard, and we also have Army Brigadier General Cynthia Tinkham, Assistant Adjutant General for Oklahoma National Guard. So, each general will provide some brief on the record comments regarding their state and National Guard’s COVID vaccine distribution mission. In the media advisory, their bios were attached. Following their comments, we will take your questions.

With that, I’m going to turn it over to Major General John Harris for his comments. Sir, over to you.

**HARRIS:** Thank you, and good morning all. And thank you to our friends from the media and a special thanks to my colleagues from Oklahoma and West Virginia as we stand shoulder to shoulder in this fight against the Coronavirus. Right now, over the last 10 months, Ohio has had over 3,000 of our soldiers, our airmen, and members of our state defense forces on duty in this endeavor. That’s both for Corona response and in support to civil authorities in the wake of civil disturbance here in the state. At that same time, we’ve been deploying the same operational tempo to our soldiers and airmen in overseas engagements. So, this is all on top of what we normally do, what’s been steady state deployments for us since September 11th.

This response is unusual because it's unprecedented not only in the lane and the time that we've been on this mission, but also the scope. The variety of missions and the diversity of what we've had to do was pretty unprecedented. In fact, as we speak today, we have over 900 soldiers and airmen on duty. They're doing things like helping distribute food at 14 food banks across the state. We're doing sample community pop-up testing missions at various locations around the state. We also have couriers on duty who are transporting specimens and samples from that testing to laboratories.

We're surging staffing into nursing homes as those nursing homes are experiencing staff shortages due to COVID-positives, and we're also doing something similar in our correctional system. We've surged staffing. We have over 300 soldiers and airmen in our prisons right now to fill in for those the correctional officers who are ill due to Coronavirus. And when it comes to the vaccine, we'll be supporting with our warehouse with the breaking down of some of the larger shipments into smaller shipments and getting those ready for redistribution. So, we're partnered with our Department of Health, and it just is a great demonstration of the civil-military partnership that's required to be successful for this COVID response.

I'm humbled by the sacrifices our men and women have made, I'm humbled by the relationship that we've built with our partner agencies, our mission partners, that all are just incredibly dedicated heroes.

**MODERATOR:** Okay, Sir, thank you so much. Brigadier General Holt, would you like to have some opening statements? And if the media will please close their mic. We're trying.

**MODERATOR:** We really need whoever that is to turn it off, because it's taking –

**MODERATOR:** So, let me take a few minutes to figure this out on the background. So, otherwise we might have to open up a different line. And we do apologize for this inconvenience, so. Okay, General Holt?

**MODERATOR:** Thank you. Stand by everybody. And we apologize in advance for this confusion, so. We shall start again. We're just going to start from Major General Harris. Sir, I apologize, but would you please repeat your opening statement and then we will continue from here on out. Thank you.

**HARRIS:** Heck, I can't remember what I said, so.

**MODERATOR:** It was so genius. Thank you, sir.

**HARRIS:** No, I thank all our friends from the media. Thanks so much for this opportunity to help the Guard tell its story, and to my colleagues from Oklahoma and West Virginia. Since this started about 10 months ago, the Ohio Guard's had over 3,000 of our soldiers, airmen, and state defense forces on duty. They've done a wide variety of COVID support missions to include some civil disturbance, civil response in the wake of some violence a few months ago. And at that same time, we've continued to deploy hundreds of soldiers and airmen overseas.

So, this particular response has been unprecedented for the Guard, not only because of the duration of this domestic response, but also because of the scope and the diversity of the missions that we perform. In fact, as we speak today, there are about 900 Ohio citizen soldiers and citizen airmen on duty, and they're doing everything from helping distribute food at 14 food banks across the state, pop-up testing, so we're conducting testing sites across the state, as well as courier missions to transport specimens in some cases from nursing facilities to labs. One of the big missions is providing temporary staffing at nursing homes as they lose staff to positive coronavirus tests. We've surged the medical staff to ensure that we're continuing to protect that vulnerable population.

Along those lines, we're also providing surge staffing into our prisons as correctional officers test positive and those numbers decline below minimum levels. Right now, we have over 300 soldiers and airmen who are conducting that mission at our correctional facilities. And as we look forward, the Guard will be involved with distribution of the vaccine. Specifically, we'll work with the Department of Health as we receive larger shipments and break those down into smaller shipments and ensure that those get moved onward. We've conducted daily drills with our civilian partners in support of that mission, and this is a quintessential example of the partnership that can occur between civilian and military mission partners.

And I'm just humbled by the sacrifices each day that our men and women make as they serve our communities as well as our mission partners and just an honor to serve with these dedicated professionals. Thank you.

**MODERATOR:** Thank you, sir. Brigadier General Holt, would you please provide your comments?

**HOLT:** Good morning. I am Brigadier General Gene Holt, the Assistant Adjutant General of the West Virginia Army National Guard. I'm also the commander of our Joint Force for Corona. I want to first just thank Major General Harris for his comments and leading us off twice. I appreciate that, sir. Since March, the dedicated men and women of our Army and Air National Guard have been on the front lines of this pandemic, providing support for the state of West Virginia through our lines of effort, which have focused on COVID-19 testing, epidemiologic support for our local health partners, PPE production and distribution, and data and analytic tracking.

We are now at a pivotal time in this response as we prepare for the distribution of a lifesaving vaccine across the nation. In our state, we have the most vulnerable population in the United States due to our aging population and other health factors. So, we understand the vital need to get this process right, which is why we have been planning with our interagency partners for months to prepare for this moment. Under the direction of Governor Jim Justice, we are ready for vaccines to arrive in West Virginia right now today. Nearly 500 National Guard service members are dedicated to the mission to receive and transport across the state, and that mission is already underway. The first doses of the Pfizer vaccine are arriving currently. That's all that I have.

**MODERATOR:** Thank you, sir. Again, media, could you please mute your phone and do not

place them on hold? Because that is where the background music is coming from, our information. General Tinkham, would you please provide your comments?

**TINKHAM:** Yes. Good morning. This is General Tinkham from Oklahoma, and I appreciate the opportunity to talk about our guardsmen and what we're doing in support of our state Covid-19 pandemic response. We've been supporting our state in this endeavor since March of 2020, and this has included missions that we've had up to 385 service members participating in since that time. Today, currently, we have about 65, and Governor Kevin Stitt has authorized us to increase that to 120.

Our missions have included supporting our state partners in medical and logistical support to regional health administrations, transportation efforts as far as transporting, testing, and medical supplies, supporting regional food banks, and supporting also the Strategic National Stockpile Warehouse. Now we are poised to support our Oklahoma State Department of Health in their distribution plans for the vaccine. We will be able to support them by providing transportation, safely transporting the vaccine, picking it up from five prepositioned sites and distributing those to the satellite sites as identified by our State Department of Health.

We are going to continue working with our state partners and all the support missions that we have ongoing, as well as the vaccine support, and we do this through continued planning and coordination, all while we also completely maintain readiness for any other missions, our traditional missions in winter storm support, tornadoes, wildfire, and we will continue to maintain readiness for those as well. Thank you.

**MODERATOR:** Thank you, ma'am. Okay, so just as a reminder, we're going to go down the list. I am going to ask you to keep your questions for one question and a follow up. And so, let's start with McClatchy. Tara Copp, are you here?

**TARA COPP:** Yes, I'm here. Thanks for doing this and for your patience with our noise levels. So, there's been a lot of confusion about what distribution means. So, could each of you be very specific about what distribution means as far as like going inside a prison or a nursing home? Would you actually be administering the shot or is it ensuring the supply line? Any details would be appreciated. Thank you.

**MODERATOR:** General Harris, would you like to begin, please?

**HARRIS:** Sure, I'll start. Well, here in Ohio, the Guard's role is very limited and it's mostly at our warehouse. The Pfizer vaccine comes in, in batches of 975. And as we push this out into our communities, our local health departments in the future, we know that some of them, as the allocations come in, we'll need smaller batches than that because of the way the population is segmented and the way we'll distribute the vaccine. So, we'll be actually taking that ultra-low temperature product, breaking it down into smaller packages, and shipping those out to those local health district or whatever providers are going to administer that vaccine.

So, we won't be actually transporting it. Operation Warp Speed's done a tremendous job. So, we know that if it's an intact shipment, if it's Pfizer, we know it's going to be 975. If it's Moderna,

we know it's in increments of 100 and they will ship those directly to the providers. So, our job will be to take those large Pfizer shipments that have to be broken down and ensure that we can break those down into smaller increments and get them to those locations that need those smaller packages.

So, the transportation has been contracted to us by Operation Warp Speed and from our warehouse to any future destinations that's been contracted with Cardinal Health.

**MODERATOR:** Thank you, sir. General Holt, do you have anything to add?

**HOLT:** Yes, ma'am. From West Virginia, much like Major General Harris mentioned, in West Virginia we have a similar process in which the Pfizer vaccines are going to come directly to our five distribution hubs, and from those hubs we have personnel in place to help break those down into smaller packaging to meet the vaccination requirements at each of the identified locations. So, for us, it's going to be a mixture in terms of the distribution process. We will have some of our healthcare professionals, organizations, hospitals that will come directly to the hubs themselves to pick those up.

Obviously, they will be repackaged into containers that will keep the temperature at the correct temperature. And then the other option or alternate means of distribution is the National Guard, and our interagency partners will be supporting some of the distribution to our local health departments and also our long-term care facilities and pharmacies directly.

**MODERATOR:** Thank you, Sir. General Tinkham, do you have anything to add to that for the distribution?

**TINKHAM:** Yes, thanks. Pretty much similar to the other two states, our responsibility is in transporting the vaccine from the primary site to one of our satellite sites that has been determined by our State Department of Health. Our soldiers will not be unpackaging the vaccine, they will simply be picking it up from one of the primary sites, delivering it to the satellite site, and then returning back to continue other deliveries in that manner. Our Guard members will be handing off the vaccine to a provider or pharmacist who will actually handle the vaccine. No member will be handling it outside of the packaging at this time.

**MODERATOR:** Thank you, ma'am. Tara, do you have a follow-up?

**COPP:** Just to make sure we're clear, because I think it was in the first introduction that we ended up going back over. It sounded like there were going to be a surge of Guard members in some long-term health facilities for elderly people and possibly some correctional facilities that will actually have a role in getting those populations vaccinated. Maybe I missed it, but could you guys please clarify what that is?

**HARRIS:** This is Major General Harris. I said that, but it's not around the vaccine. We're surging staffing in there because the limiting factor for our healthcare community and the greatest concern that we have across the board during the surge here that's happening in Ohio is the ability to staff not only hospital beds, but our nursing facilities. So, when nursing homes have

a shortage of staffing because of positive COVID cases or an outbreak, we have put together special rapid response teams that go in and backfill that staffing. Not to administer the vaccine, but to provide patient care when they get below the minimum level of staffing that is safe for the patients in those nursing homes.

And regarding the prisons, it's about the corrections officers. At any given time, we will have a large number of corrections officers who are COVID positive and it's very difficult to control in those congregate settings. So, when the numbers exceed their minimum staffing levels, we push staffing. We give our soldiers and airmen two days of training by the Department of Corrections and then they will go in and they will backfill that corrections staff side by side to augment the corrections officers so they can maintain minimal staffing in those prisons.

And we've recently expanded that. Also, the governor signed an additional proclamation that gives us the ability to do that in local jails, too, because they have the same problem. Congregate facilities, once there's an outbreak, the numbers get pretty high pretty quickly and they lose staffing fast. So, the Guard is both in prisons, our state prisons, as well as in the county jails to help with that staffing. But it is not around the vaccine.

**COPP:** All right. Thank you.

**MODERATOR:** Thank you, Sir. Okay, so next we have Reuters, Idrees Ali, are you here?

**IDREES ALI:** Yeah, I'm here. Thanks for doing this. Just a quick clarification for all the states. So, am I correct in understanding that in Ohio and West Virginia the Guard will be breaking down the packaging, whereas in Oklahoma the Guard will be handling and shipping it? If you could just clarify in how many of each state will specifically be on the vaccine duty?

**MODERATOR:** General Holt or Harris –?

**HARRIS:** This is General Harris. Yeah, I'll start. Yes, we will be breaking down the vaccine into smaller quantities, but only for those jurisdictions, whether that's local health jurisdiction or providers who are going to administer the vaccine, that need it in smaller dosages. So, the distribution is based on population size, it's population percentages of vulnerable populations in the affected communities, affected county. So, when you do the spreadsheet, there are some of the counties that will be getting less than 975 doses in these initial increments. So, what we're doing is breaking it down in the appropriate size to ship those, but only for those locations.

So, if a location is over that number, if it's getting a larger, larger quantity, we want Operation Warp Speed doing a direct ship. We want it to go directly from the manufacturer to the end user to the provider that minimizes error rate and provides the best likelihood of success, which is what's important is getting the population protected. So, we all are only involved if there is a need to break down into smaller quantities and get those smaller quantities pushed forward, and we'll have about 30 people here in Ohio working on that.

**MODERATOR:** General Holt, would you like to add to that?

**HOLT:** Yes, ma'am, I would. In our case, it's much the same as Major General Harris mentioned. We are only breaking down those that we need to that are not going to be direct ship. And in those regards, I will also point out that as a precaution, the only individuals that are handling the vials are actually licensed healthcare professionals that are within the National Guard. So, we don't just have some of our soldiers doing that. So, just as an added layer of precaution. I'm sorry, but we have 100 pacts that are going to be supporting that, the complete overall effort of breaking those down for redistribution. Approximately 20 people at each of our five locations.

**MODERATOR:** Thank you, Sir. General Tinkham?

**TINKHAM:** Yes. Here in Oklahoma, we are not opening the packaging at all. We are transporting it to the provider, the medical provider, who will then, if necessary, will open that package up, take out what they need, and close the package back, and we will deliver it to the next or complete the delivery then.

**MODERATOR:** Thank you. Idrees, do you have a follow up?

**ALI:** Yeah. Just to make sure. For the first few states, is the Guard the only authorities that are responsible for breaking it down, or are there other entities as well?

**MODERATOR:** General Harris?

**HARRIS:** This is General Harris. Here in Ohio, it's in partnership with our Ohio Department of Health. So, the facility is actually Ohio Department of Health's facility. And when you go there, you'll see their staff and the Guard staff working side by side to accomplish this. And it's a very scripted routine because obviously keeping this product at the ultra-low temperature that it has to be maintained at and getting it repackaged and back in containers, you've got about two minutes. So, the team has done a great job of rehearsing this at least twice a week.

So, it's not exactly super specialized, but it does take a specific set of skills and it takes a routine and a team that is very accomplished at working together to ensure that this is done right. So, again, if you go to our RSF warehouse, you will see Ohio Guardsmen and the warehouse staff, they're working side by side in those specific roles to ensure that gets accomplished.

**MODERATOR:** Thank you, Sir. General Holt, I know as part of the Joint Task Force Corona Commander, is there any other outside agencies, as Idrees was asking in his communication?

**HOLT:** Yes, ma'am. Our Department of Health and Human Services is the lead agency for the response, and for us, we are doing some of the mechanics for them. They are obviously our interagency partner. They are controlling the vaccine distribution quantities and the process using the VAM system. So, again, from our perspective, we are, as always, simply providing support to our interagency partners.

**MODERATOR:** Thank you. Moving on, NBC News, Ms. Courtney Kube, are you here?

COURTNEY KUBE: I am here. Thanks. I know this is tough to say because you're representing your own individual states, but I'm wondering if anyone can characterize the larger mission across the country. I mean, what we're hearing from you three is a pretty similar role. So, is this consistent with what many other states are doing in the distribution as well? And then can you also say a little bit about why the Guard would be selected for separating out some of these vaccine doses and driving them around? Like what capabilities does the Guard bring to it that's why they were selected?

**MODERATOR:** General Harris, would you like to begin?

**HARRIS:** Sure, I'll start. So, I don't have a good sense for the exact number of states. I think that you'll find probably anywhere from a third to a half of the states are probably involved in some way with this distribution or the repackaging of the vaccine. But that's just a guess based on just conferences with my fellow Adjutants General and whatnot. I think what makes the Guard so well suited for this is No. 1, we are a surge force for our state. We bring a wide variety of not only capacity to augment the size of the workforce, but also specialized skills within that workforce. So, when you have a special response requirement like this, a need to respond for our communities, this is exactly what the Guard does.

And to bring in a team that's already configured as small teams that comes with leaders, that come with an innate leadership team, comes with a culture around checklists and maintaining a high standard and processes and being disciplined in a process, regardless of what the specific military skill is. Those are underlying basic skills that every soldier and airman has. So, to take that inherent team, again, with its own leaders and its own leadership structure and put them into a process is actually very easy. And you know that that process is going to be repeatable and it's going to be done with a high level of standard.

And also, built into the culture is a culture of improvement. So, we're always looking at the process and finding ways that we can improve it. So, as I mentioned, that's exactly what this handling of the vaccine is. It's a very scripted and very disciplined process for getting it out of those ultra-low temperature coolers. You know, minus 86 to minus 94 degrees, that in and of itself is dangerous. And of course, taking the vaccine out of that, getting them repackaged, getting them into another package, getting that time, knowing the time that each process takes, getting it back into the smaller packages and back into the vehicles. But that's just inherently along the lines of what we do.

And again, to do it in a in a scripted, disciplined way and to bring an organic team that's structured around leaders and led is just a perfect fit for the Guard. And that's quite frankly the same template that we overlay over everything that we do. We put a team into a nursing facility because it's short-staffed. It's the same thing. They fall in, they've got a checklist that they're able to execute and they're able to do that in a repeated and sustainable way. So, ideally, the Guard's kind of the perfect structure to augment that warehouse staff like that.

**MODERATOR:** As well, Courtney, we have approximately 26 states in support of the governors that are planning to use the National Guard in some capacity for the Covid-19 vaccine distribution. But it is at the request of the governors how the National Guard does support and

come out. Is there anything in addition to that, either General Holt or General Tinkham, from your perspective?

**HOLT:** This is General Holt. No, I think that Major General Harris answered that well. Thank you, sir.

**MODERATOR:** Thanks. Do you have a follow-up, Courtney?

**KUBE:** Just one quick one. When you talk about the distribution, are those actually going to be like military vehicles that will be driving or are they like vans because of the need for refrigeration?

**MODERATOR:** General Holt?

**HOLT:** Yes, this is General Holt. For West Virginia, it is going to be mostly vans, rental equipment, those things of that nature, not necessarily our military vehicles. And that's largely just due to efficiencies.

**KUBE:** Great, thank you, General.

**MODERATOR:** Thank you. Next, we have The Oklahoman. Carmen, are you still on the line? Okay. Next, nothing heard. Military Times, Davis Winkie. Are you on the line?

**DAVIS WINKIE:** Hi. Yes, I am. Thank you. So, my question is about the states that aren't represented here. I know that I believe it was General Harris who said that based off conferences he's had that about a third to a half of the states are planning to use their Guards for vaccine distribution or the kind of repackaging work. Are the other states, to your knowledge, preparing to actually administer the vaccine? Or what kind of other generalized role are we going to see guardsmen in across the country in this work? Thanks.

**MODERATOR:** Davis, since that's not specific to this particular state, what we can do is we can follow up with you and provide you with some more information on what some of the other states are doing as a National Guard response and try to facilitate you to have the ability to get your question answered. Do you have a secondary question? Davis? Davis?

**WINKIE:** Yeah, yeah. In terms of personnel, is there any kind of specific MOS. requirement in Ohio? I understand that West Virginia, based on General Holt's comments, will likely be limited to 68-series troops. Thanks.

**MODERATOR:** General Holt?

**HOLT:** Yes. For West Virginia, for the individuals that are actually repackaging and dealing with the dry ice and the cold storage, those are going to be healthcare professionals. In large cases, they're PAs or nurse practitioners. Now, and then the rest of our support for the distribution, those are a variety coming from all of the different both Army and Air as part of our joint task force.

**MODERATOR:** Okay. And General Harris, do you have anything to add?

**HARRIS:** Well, most of our personnel that will be working the redistribution are mostly logistics types, not the medical types. In fact, we're taking a little bit different approach. We're really trying to preserve that medical capacity, whether that's the medics or our providers for surge capacity. We're watching the hospitals very closely, our nursing facilities. And if we have to surge staffing into our hospitals because they're getting their staffing capacity or if we have to surge in the nursing homes or even put medical staff into our correctional facilities. So, we're kind of preserving those medical folks and that capability as we surge them into those missions. And we're using logistics folks for this redistribution mission.

But quite frankly, MOS or AFSC for the Air Force is almost irrelevant here because it's more about learning a very specialized process and doing it precisely, and we can teach that to just about anybody. But they've done enough repetitions of this thing that we're totally comfortable with how they do it.

**MODERATOR:** Thank you. Moving on, Associated Press. Ken Miller, are you here?

**KEN MILLER:** Yes, and thank you. My question is regarding security. Is there a concern of keeping this secure? And I'm speaking of criminal activity as opposed to the security and safety of the vaccine itself.

**MODERATOR:** General Tinkham, would you like to start?

**TINKHAM:** Yes. As far as security, in our transportation role we're driving the vehicles and we are being escorted by the Oklahoma Highway Patrol, and they'll be responsible for any security.

**MODERATOR:** General Holt?

**HOLT:** Yes. From West Virginia, initially, one of the key things that we did when we identified our five hub locations, the five distribution locations, was we actually went in and did an overview of the security of the facility to ensure that there weren't any concerns from that perspective, and not moving any. But, yes, I mean, security is still a significant factor. And as we work with our interagency partners, just as Oklahoma mentioned, the state police and other first responders are going to be part of that process so that we have security as needed.

**MODERATOR:** Thank you, Sir. Do you have anything to add, General Harris?

**HARRIS:** Simply the multiagency requirements for this. Of course, the Guard's not the lead agency and certainly don't really want to be on missions like this. This is the Department of Public Safety's domain, and they really have a multilayered approach in how they approach this, from the initial intelligence, always monitoring for potential threats to the vaccine and to the distribution sites to the actual security when it's transported. But also notifying local law enforcement when shipments are arriving, when they've left the hubs, when they're arriving at their location. How many? How much?

And it's up to the State Department of Public Safety and local law enforcement to formulate the specifics. But I do want to point out that this is a whole government kind of approach because it takes those local law enforcement agencies, it takes the local sheriff, it takes the Department of Public Safety, and it takes our community, that law enforcement intel community, not ours, but the law enforcement intel community to paint that entire picture. But we've intentionally kept the Guard out of that security business because that's really not our role.

**MODERATOR:** Thank you, sir. Do you have any follow up question, Ken?

**MILLER:** Yeah, one. And thank you again. Can you identify the locations where the vaccines will be shipped in each state?

**MODERATOR:** General Tinkham, would you like to begin?

**TINKHAM:** No, as far as the locations, those are determined by our Oklahoma State Department of Health, and I would have to defer to them to any information regarding those locations.

**MODERATOR:** General Harris or Holt, do you have anything to add?

**HOLT:** Yes, just a very similar answer. At this time I'm not able to. I would have to defer that question as well to our Department of Health and Human Services.

**HARRIS:** I can say here in Ohio that ten prepositioned sites were selected, two of those have already received the vaccine and probably administered their first doses already this morning. The Ohio State University and the University of Cincinnati have both received their shipments and done their first inoculations. So, the other eight prepositioned sites will probably receive later today or sometime tomorrow. And I can't iterate what those eight sites are, but those are what we originally called the prepositioned sites.

And of course, much of the direct shipment is going directly to our pharmacy partners. The state has partnered through federal contract with both CVS and Walgreens. And they will receive major shipments also at their major warehouses because they will be responsible for vaccinating our long-term care facilities, our nursing homes, our assisted living facilities, both those residents and staff. So, most of our initial shipment will go directly to those two pharmacy providers so they can get to work protecting our vulnerable population.

**MILLER:** Thank you all.

**MODERATOR:** Thank you. Now, Fox 23 News. Tiffany Alaniz, are you here?

**TIFFANY ALANIZ:** Yes, ma'am. Yes, I'm here. Thank you so much for taking our calls. And thank you so much for all the information. We greatly appreciate the opportunity to share it with our viewers and the country. I wonder, General, since I'm in Oklahoma and also for the rest of you all, if you could talk about just the huge effort that has gone into this. General Tinkham, as

we've been on the phone, we've learned that our vaccine has arrived here in Oklahoma and that it will be distributed to or administered to medical professionals at Integris this afternoon at 1:30.

So, what was it like just for you guys as the vaccine arrived? Media was not able to be there to see that as we have in many other states this morning. So, what was that like? Can you walk us through that process and what it was like for your soldiers and getting that from the airports and getting it to the five locations?

**TINKHAM:** Well, unfortunately, I was not able to be there to witness it either firsthand. But I am sure that the soldiers are very proud to be involved in this mission, and everyone has a sense of excitement to see that we are getting the vaccines and that we are getting to support our partners in the state in executing this plan. And it's been since March that we've been involved, supporting throughout the state all our health administrations and doing a lot of the transporting and also just in the planning cells with the other state agencies.

And so, this is a momentous day in that regard because of all the other efforts that we've been going through with our state partners. So, as always, our soldiers and airmen are very proud to serve their communities and be involved in something like this. And I'm sure as it moves on, we'll get to see and hear more from them on what their personal experiences were and be able to share that more.

**MODERATOR:** Thank you. Do you have a follow up?

**ALANIZ:** Yes. General, thank you so much for providing that insight. We would love to be able to speak with any of the soldiers who were involved in the transport this morning. I know that we have to keep the site secret and we're not able to know those, but even just to talk to them about their feelings about that. That would be awesome. Then also, just as we have seen, like you said, and we've been covering since March, the firsthand role that the soldiers have been taking, including going into our nursing homes and cleaning and helping, especially since our nursing homes have been so hard hit. Can you just talk a little bit about the role continuing?

The vaccine getting here is such a bright spot, but Oklahoma is at record high numbers and we're losing record numbers of Oklahomans sadly right now, and are suffering from the things we've seen, and our hospitals are full, and we're out of ICU beds. So, can you just talk about your continued role? We've seen them helping in some areas with tent hospitals and things like that. You guys will stay on the ready going forward.

**TINKHAM:** Yes, that's for sure. We will be staying at the ready in whatever capacity our state calls upon us to do. At this time, we are continuing our operations as far as supporting the testing sites and helping with transportation not only of the vaccine, but of medical supplies as well, and staying involved and engaged with our partner agencies on planning and coordinating and continuing the response to this pandemic. And as I said earlier, we have been authorized by Governor Kevin Stitt to have 120 personnel involved in COVID response. And as always, we will be standing by to continue to support in whatever way we can our fellow Oklahomans.

**MODERATOR:** Thank you, ma'am. Moving on to TIME magazine, Bill Hennigan, are you

here?

**BILL HENNIGAN:** Yeah, thank you. General Tinkham, you mentioned that your primary role will be moving the vaccine around the state. How many folks are involved in that whole process? And again, because you're transporting, are you using military vehicles or are you also using rental vehicles?

**TINKHAM:** Okay. We currently have 15 personnel for the transportation of this initial receipt of vaccine. And as far as the vehicles, we are not using military vehicles. We are using the Oklahoma Health Department provided vehicles with highway patrol escort.

**MODERATOR:** Bill, do you have a follow-up?

**HENNIGAN:** I do. Just broadly, we're dealing with a very limited number of vaccine now. So, to the three of you, do you have plans to build out your capacity to be involved in this as more vaccine comes online to get it distributed throughout the state?

**MODERATOR:** General Holt, would you like to begin?

**HOLT:** Yes, ma'am. You know, in West Virginia, we currently have approximately 500 service members, Army and Air, helping to support the overall effort. And as we've already talked about, there's the multiple different lines of effort that we do. We are planning to increase our number to 600 in January to help facilitate the additional capacity that we believe will be needed to support both the distribution of the vaccine as well as the other lines of effort that are also very important to the citizens of West Virginia.

**MODERATOR:** All right. General Harris, do you have anything to add?

**HARRIS:** Sure. Again, Ohio's Department of Health is the lead agency, and what they're doing is working very hard to ensure that the providers build out their capacity to do this.

So, between the large health systems that will be responsible for their own staff, the pharmacy network that's going to be responsible for our long-term care facilities, our local health departments, especially during the early phases, will build this capacity as they inoculate the EMS and other types of providers that are not covered by the large carriers. And also, a number of our facilities, nursing homes, and behavioral health facilities have medical staff and they're enrolling as providers so they can administer it to themselves.

So, the role for the Guard, if it has a role, because based on our state law a person has to be a licensed provider, so a nurse practitioner, a nurse, a doc. We can't just put a medic out there to give the vaccines based on what's in our revised code. So, if the Guard's involved, it'll be that specialized medical staff. Again, it's a limited commodity for us. It'll be more surge-type missions. It'll be in places that have specific niches, maybe a congregate care facility that is understaffed and unable to do it.

But most of our large, large providers will take care of themselves. And between them, our local

health departments, those self-enrolled providers, we have a pretty robust plan here in Ohio that won't require much support from the National Guard. And if there is support from the National Guard to actually administer the vaccine, it'll be in a very specialized niche kind of way.

**HOLT:** This is General Holt. Just to add onto that. From the West Virginia perspective, we have large areas of rural population. We see, I think, some of our biggest need being in the local health departments themselves as possibly providing additional support as we have already to do epidemiology, contact tracing. I think that there will continue to be a need for that going forward.

**MODERATOR:** Thank you, Sir. Moving on, Washington Post, Dan Lamothe, are you here?

**DAN LAMOTHE:** Yes, I am. Thank you. Sort of a follow-up on Bill's question. As you're planning it out, what do you see as a possible high-end capacity needed as we really move into this in 2021? Thank you.

**MODERATOR:** General Harris?

**HARRIS:** When you talk about high-end capacity, are you talking numbers or some sort of specialized skill? I just want to clarify the question.

**LAMOTHE:** Sure. Thank you. I'm thinking when we get to the point where we are moving and vaccinating as many people as quickly as possible, and it's not sort of these early trenches where the numbers are much smaller.

**HARRIS:** Gotcha. That's a great question, it's one that we really haven't gotten our arms around yet. I know that the governor's staff, Governor DeWine and he's directed his staff. "What is the number? What is the number?" Each day that we have to vaccinate in order to get this thing taken care of by the summer, to get to the numbers that we need to ensure that our population is protected. And I haven't seen that number yet. But I can tell you that the throughput of the vaccine is going to be a function of how many companies get vaccines approved. We certainly don't expect Moderna and Pfizer to be the only companies that get the emergency use authorization.

And so, it will depend a lot on how many. We will vaccinate as fast as we can vaccinate here in Ohio. And that's going to depend on how much vaccine is available that we can purchase here in the state of Ohio. And I will tell you, we don't have a sense of what that high end looks like yet because we don't know how many players are going to get into the vaccine market. It could be as many as four or five. And so, we're really not sure what that looks like yet.

**MODERATOR:** Generals Holt or Tinkham, do you have anything to add?

**HOLT:** Yes, this is General Holt. Just as Major General Harris mentioned earlier, it is truly a whole of government approach to solve this challenge. And I think from our perspective, in our agency we're working with our interagency partners and also our corporate partners, private partners, to help plan for the surge. And in the end, they will be the answer to the dilemma or the challenge as they continue to build out their capability.

**MODERATOR:** Thank you, Sir. Anything else, Ma'am? General Tinkham?

**TINKHAM:** No, I think they both stated it pretty well. It's the same here for us is just staying engaged with our state partners and the governor as we move forward, what capabilities are going to be needed from us and what we can provide.

**MODERATOR:** Thank you. A follow-up, Dan?

**Lamothe:** No, thank you.

**MODERATOR:** Okay, excellent. So, we're quickly running out of time. We're going to have one more question. If we didn't get to your question, please feel free to follow up with our office and we will facilitate and help you to find the answers to your questions. But let's go to Politico, Lara Seligman. Lara?

**LARA SELIGMAN:** Hi, thanks so much. Yeah, I'm here. So, two questions. One is just to clarify, will any Guard members be doing any escorting of the shipment or will you rely on nonmilitary units like highway patrol, like you said? And then the second question is, can you just tell me a little bit more about what exactly this process that you described as dangerous is to get the vaccines out of the ultra-cold storage, please?

**MODERATOR:** General Harris, would you like to go first?

**HARRIS:** This is General Harris. First of all, we here in Ohio, the Guard will not be escorting that. Again, that's a civil law enforcement matter. So, between our Health Department of Public Safety, county sheriffs, and local law enforcement, they have that covered. The only reason I say that it's dangerous is because, of course, the temperatures are ultra-cold, anywhere from minus 90 to minus 94 degrees centigrade is incredibly cold. So, the moment that they step in to reach into those coolers, there's vulnerability. So, they have to wear specialized PPE. And then the handling of the container. It's very easy to drop the containers because they're ultra-cold, they're slippery, and they're wearing gloves.

And of course, with such a scarce resource, that's a very undesirable outcome. But it's just working even for a short period in that ultra-cold space puts them at risk. And again, the risk of dropping or damaging the vials as a result of those unusual conditions, it is very real. So, again, just being repetitious, getting a lot of repetitions, doing it over and over again, making sure they get in and reach in and they're out of that container very quickly. They're wearing the proper PPE, all the discipline that we expect from our military folks.

I will add one other thing, too. You know, when it comes to the vaccine teams or any of the medical teams that the Guard is supporting, just remember that it's a zero sum game when it comes to medical staffing, and every state is probably really getting close to the limits for their ICU and their critical care capacity. Any time we bring a medical provider onto duty for the National Guard, we're probably taking that person away from some other provider that needs them.

So, while we do have the ability to build very large medical capability and capacity in the Guard, during a pandemic, especially in a pandemic when most elective procedures haven't been shut down yet, we have to be very careful. We have to be very careful how we build medical capacity and how we use it, because everything that we build is costing someone on the civilian side staffing and capability. And that staffing is very, very critical to them right now. So, while we could help a lot of these missions, we have to be very careful about how we apply our capabilities during a pandemic because it's costing someone else. Thank you.

**MODERATOR:** Thank you, Sir. General Holt?

**HOLT:** I think Major General Harris answered that one pretty well. I don't have anything else to add.

**MODERATOR:** Is that the same for you, General Tinkham?

**TINKHAM:** Yeah, he answered that thoroughly. Again, we are only transporting, and highway patrol will be escorting our vehicles.

**MODERATOR:** Okay, thank you so much, Major General Harris, Brigadier General Holt, and Brigadier General Tinkham. We really appreciate your time. Media, if you have any further questions or any follow ups or if you'd like to perhaps maybe coordinate your questions with another state, we can facilitate that. Please send your questions to the media operations desk at the National Guard Bureau and we will assist in any of their follow-ups. This does conclude our media roundtable and we really appreciate each one of you and your patience for the beginning. Thank you so much. And we are concluded.

**For information regarding this transcript, please send an email to the National Guard Bureau Media Operations desk at [ng.ncr.ngb-arng.mesg.ngb-media-desk-owner@mail.mil](mailto:ng.ncr.ngb-arng.mesg.ngb-media-desk-owner@mail.mil).**