

Audience Member:

(silence)

Audience Member:

You guys all ready?

Speaker 1:

Yep.

Audience Member:

You guys all ready?

Speaker 2:

Yes.

Michelle Shoresman:

Good afternoon. My name is Michelle Shoresman. I'm the designated media contact for the San Luis Obispo County COVID-19 Public Information Response Team. This afternoon, again, we have three speakers for you. We will begin with Emergency Services Director and County Administrative Officer Wade Horton. He will be followed by County of San Luis Obispo Behavioral Health Director Anne Robin. That's Anne Robin, A-N-N-E R-O-B-I-N. County Health Officer Dr. Penny Borenstein will speak last before they all take questions.

Michelle Shoresman:

As we did yesterday we'll request the speakers to repeat their own questions before answering them. Also, just a quick note that we have about 30 minutes for this press briefing. If there are any additional media questions after approximately 30 minutes are up I'm happy to take those questions and get back to you with answers following my ability to get a response.

Michelle Shoresman:

Before we begin, again, thank you to Robin Babb, our American Sign Language interpreter. Thank you to the members of the media for being here, as well as members of the public for tuning in at home.

Michelle Shoresman:

Now San Luis Obispo County Emergency Services Director, and County Administrative Officer, Wade Horton.

Wade Horton:

Thanks Michelle. Good afternoon, Wade Horton, County CAO and Emergency Services Director.

Wade Horton:

I know this is a stressful time for everyone and we want to make sure it's as easy as possible to get the resources that you need. Today we have launched a virtual local assistance center. It's up and running on ReadySLO.org. This will serve as a one-stop shop for local residents who need assistance.

Wade Horton:

In typical emergencies we would open a physical local assistance center. We'd probably open more than one throughout the county. To connect people with services, assistance, benefits, mental health support, unemployment, and more. However, in this pandemic we want people to stay home as much as possible. So we are taking our local assistance center and putting it online.

Wade Horton:

We want you to be able to put food on the table, get your driver's license, take care of your mental health, apply for unemployment, find business resources, and more. We'll continue to update these resources as the situation unfolds. Again, the virtual local assistance center is online at [ReadySLO.org](http://ReadySLO.org).

Wade Horton:

I'd also like to share with you that we are on track standing up the Cal Poly alternate care site and anticipate starting the move in process Monday. Our plan is phased so we can expand capacity to match the need. Our goal is to have the site ready for operation by April 8th.

Wade Horton:

In addition to Cal Poly, Dignity Health, and Tenant I'd like to thank RRM Design Group, Thoma Electric, and Trust Automation, our private sector partners who are working around the clock to meet our April 8th operational date. I'd also like to thank Straight Down, who are leveraging their overseas operations to help us supply our critical needed PPE, personal protective equipment.

Wade Horton:

Yesterday we announced that we'd be closing access to campgrounds and beach parking areas throughout San Luis Obispo County to discourage large groups of visitors while we are trying to limit the spread of this disease. We announced the closure Avila Beach Pier, Pismo Pier, and today Cayucos Pier will also be closed to help discourage out-of-area recreators from visiting our county. I realize this is a big inconvenience for locals, but it's important to remember that this temporary inconvenience will help limit the disease spread so we can all get back to normal as soon as possible. An updated list of closures can be found at [ReadySLO.org](http://ReadySLO.org).

Wade Horton:

We know that all these changes, in such a short period of time, have been difficult for people. I'm proud to see our communities and residents rise to the occasion. Cities are implementing creative tools to support residences and local business. Businesses are reinventing themselves to do home deliveries of food and create new products to meet the demands of this pandemic. We learned today that Vitalant, our local blood donation center, has received unprecedented numbers of inquiries from people wanting to donate, so thank you.

Wade Horton:

Please keep up the great work and continue to follow the six foot standard of physical distance between you and others when you're out in the community. We are all in this together. Thank you.

Wade Horton:

I'll now turn it over to Anne Robin, the County Behavioral Health Director.

Anne Robin:

Thank you Wade. Thank you very much for being here everybody. I am Anne Robin, your County Behavioral Health Director. I'm also a licensed marriage and family therapist.

Anne Robin:

I'd like to start by saying that if you've been feeling unwell, if you've been feeling nervous, frightened, anxious, that's normal. We're all in this together, as Wade has said. It's normal that you have these feelings, and we want you to be able to share them, and get help for them. I want you to know that we are here to help you. All of our County Behavioral Health services have continued. Not in the same way we're used to doing them. We have stood up a lot of telehealth, a lot of telephone services, but we continue to serve our population, our families, our clients.

Anne Robin:

Our first priority is really to make sure that our clients, and our families, stay well and keep their mental health well. That goes for our Drug and Alcohol Services programs, as well as ...

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Anne Robin:

our mental health programs. We've adapted all of our operations to provide telephone or telehealth appointments to all of our clients. Our clients will be receiving phone calls from their service providers, so please talk. Let's hear from you, see what you need. Our inpatient psychiatric health facility is open for business as well as our crisis stabilization unit. These are intensive services for people who need critical care for their mental health. They're open by referral only and we would like to make sure that people who have needs for this level of care reach out and get their care they need.

Anne Robin:

If you have insurance, please reach out to your insurance provider. Look on the back of your insurance card to see who to contact to find out who you may have available to you in your insurance network for mental health care. You have therapists in this community who are great, who are signed up to your insurance policies, please make sure you reach out to them. If you have a hard time finding mental health care, please reach out to us. Our community county behavioral health number is 1-800-838-1381 and we are available Monday through Friday from 8:00 to 5:00. We'll help you find a resource.

Anne Robin:

As mentioned earlier this week, we're also seeking volunteers from our therapeutic community to help sign up for the Medical Reserve Corps. We will need volunteers of licensed therapists, psychiatrists, psychiatric nurse practitioners, people who are certified in drug and alcohol services to help serve the broader community. Over the next week, we'll be working with our other partners in the community to ensure people have access to brief but targeted mental health care during this crisis. Please call us. We also want to ensure you that any information that we have, any crisis line phone numbers, tips on how to maintain wellness are linked from the county website ReadySLO.org. We put a lot of information there, more is being added daily.

Anne Robin:

We really want to encourage all of our community members, all of our residents to use the great resources that exist in our county. As Wade said, parking lots are closed, but the beaches aren't closed. Those of you who live in our community know how to get places and can park and go for a walk on the beach. Again, using the proper six foot physical distancing. Getting outside, breathing fresh air is fabulous for your mental health and your wellbeing. We want you to do that. We also want you to do other things that might clear your mind: hobbies, activities around the house, honey-do lists, great time to take care of things around the house that you haven't done. All of those things help your mental wellness. So please stay busy, but stay home.

Anne Robin:

We just want to give you two more pieces of information that we've given earlier in the week and we'll continue to give. We have a hotline here in San Luis Obispo County for calls for people who are distressed, needs some support, just want to talk. That number is 1-800-783-0607. You may also call the national warm line at 1-800-273-8255, or for our younger generation who prefers to text, text Hello to 741-741. Thank you. Take care of yourselves. This is not the time to be ashamed of needing help. Please reach out, talk to somebody, call us and take care of yourselves. Thank you. And now I will turn this over to Dr. Penny Borenstein.

Dr. Penny Borenstein:

Thank you. Thank you Anne. That was important information. I'm Dr. Penny Borenstein, the county health officer. I'm going to give you the daily update on where we are in this epidemic. Locally, we have 59 cases today, and we have as of today started to share the case counts by city or community. I do want to say... I'm not going to go through all of those details, it is available on the website ReadySLO.org and individuals can look for what the case count is within their communities. I do want to clarify a bit because I heard from some folks overnight that I singled out a single community of having a higher number of cases than others.

Dr. Penny Borenstein:

As I have said all through this process that we want to give public information, we want to maintain medical privacy. We don't want people to be reacting as if there is a really big difference if your count is 17 versus 12 or five because the bottom line in this epidemic is that we have cases in virtually every area of our community and we anticipate seeing many more. We also know that the number of cases that we are able to count is a direct reflection of the cases that we are able to test and we fully anticipate that there are many more cases that we have not been able to count.

Dr. Penny Borenstein:

So while it is a window into what's happening in our county and what the relative number of cases are in jurisdictions across the county, I certainly wanted to meet the public's interest and desire in that, I also want to continue to emphasize that that case count could be misleading because of the small numbers and also is not necessarily reflective of the full outbreak.

Dr. Penny Borenstein:

We do have seven individuals in the hospital. No, I'm sorry, correction. We have six individuals in the hospital. We had to make a correction, which will appear on the website after this presser, but one of the individuals that was listed for the past couple of hours as being in the ICU is actually only physically in the ICU because that's where the hospital decided to place that person, but it's not an ICU level of

care. We continue with one patient in need of intensive care and we have five additional patients who are in the hospitals across our system.

Dr. Penny Borenstein:

I do want to reflect on our Medical Reserve Corps. We have put out a call far and wide and we have gotten response. So I very much want to thank our community of healthcare providers and all of the other people who have stepped forward. We now stand at a number of 85 people who have made themselves available to us to staff the alternate care site and to possibly be available for additional response capabilities in our hospitals as needed. Primarily we're looking to staff that alternate care site that you've been hearing about and we've gotten a nice range of individuals from physicians, nurses, therapists, non-medical paraprofessionals and a host of individuals that will help us meet the needs of the moment with regard to caring for folks if and when we get to the point of exceeding our capacity on the hospital campuses.

Dr. Penny Borenstein:

With regard to PPE, I want to repeat again because I continue to get requests from providers directly to me as to how they can have their personal protective equipment needs met, and so we are going to simplify this. I have walked folks through how many clicks you need on the ReadySLO.org site. I think to simplify it, what I'd like for medical providers to know is if they go to that site and they just search on the word MHOAC, and I'll spell it, M-H-O-A-C, which stands for Medical Health Operational Area Coordinator, but MHOAC, and M-H-O-A-C, if you search for that on the site, it will bring up the single tab at which providers can click on and get the form to request PPE.

Dr. Penny Borenstein:

Okay. I have gotten a number of questions in the last 24 hours and I'd like to take this opportunity to address them because if we get one or two questions on a topic, it often means that there's many more people interested in the same area of concern. One thing that we've been asked is, what is recovered? When do we consider someone recovered? I think we're at 11 individuals now of our total case number who have recovered. This means that we consider them no longer infectious and they can resume their normal life. We know that normal life is anything but normal these days. But it means that that individual can resume the same activities as individuals who are not infected.

Dr. Penny Borenstein:

The criteria we use for that is that they have had at least seven days since the onset of symptoms, that they have been free and clear of fever for three days and that their respiratory symptoms are improving. I believe that I said those same criteria yesterday, but I want to be additionally clear that when that moment passes, that those individuals should be perceived as anyone else who is not at risk of spreading this disease. And even more so, I would say, they are the people that you should feel most comfortable with because they are going to have at least short term immunity if not long-term. And what I mean by that is that they are not likely in the near term to get this virus again and so those are the people who are most safe from being able to transmit the virus at that point.

Dr. Penny Borenstein:

I've also been asked about the accuracy of the test. There's a lot of different information out there. There are some articles that I have seen that say as low as 60% is the reliability of the laboratory test for this virus and that simply is not true. If done accurately, if the technique is done well, the test actually

has an above 95% predictive value. Meaning, if you get a positive test, you can rely that that is a true positive.

PART 2 OF 4 ENDS [00:22:04]

Dr. Penny Borenstein:

If you get a negative result, you can depend on that meaning that the person is not infected at the moment, is not able to transmit and I do say at the moment because you can still have a negative test in someone who has not yet passed their incubation period. So someone may have been exposed, is testing negative today, is incubating the virus but not able to transmit it to someone else. So upon that negative test, contacts can feel safe that they are not risk of exposure today, but should symptoms worsen, should we not have an alternate diagnosis for that person, there are definitely going to be situations where a repeat test further on in the timeline for that person may be warranted. But all of this is to say that I have a lot of confidence in the laboratory system that is in place in our county, in our state, and that people should feel that the results that they are getting are accurate.

Dr. Penny Borenstein:

I've also been asked when do we think this is going to peak? When is going to be our worst moment? And that is a very difficult to predict outcome for a number of reasons. As a world, we're still largely in the early stages of this. We have seen turning of the curve in different countries, in different timelines, so I have generally been following those countries in my prediction that the typical first wave of this should we get additional waves, is something on the order of six weeks to three months. So that's a period of time we're about ... That's a diverse period of time. Is it going to be that the middle of our curve is in three weeks or is it in six weeks? And so if you look at our first case having been March 14th we're about two weeks into this.

Dr. Penny Borenstein:

That means it could peak in another week or so. It means it could peak in another three to four weeks. We don't really know. What we are trying to do with all of the mitigation measures in the physical distancing as you've been hearing over and over again is to spread out the transmission of disease so that our curve instead of going like this goes like this and spread out considerably over time. We continue to prepare for the disease to peak or for our highest numbers to come sooner rather than later. And that's why you heard Mr. Horton talk about us being ready for that response of seeing the highest number of cases in the next couple of weeks, but we are very hopeful that all of the measures that we are taking is going to push off the peak of this illness in our community. Ultimately, and I think this is what folks need to think about and understand as a community, as a society, is a lot of people are saying, "Well, are we going to be hunkered down for three weeks, for eight weeks, for four months, for a year?"

Dr. Penny Borenstein:

And what we are trying to do in managing this epidemic pandemic is to spread out the cases of disease so that we do not have a situation where people who need intensive care cannot get it. That's the worst case scenario for all of us is to see the kinds of things that we have seen in other places, particularly Italy now Spain have had where the number of people in need of intensive care has superseded the healthcare capacity. We are doing everything in our power to avoid that outcome in our community. And so if we can spread out the disease cases that that is our best scenario, but ultimately we will not be

out from under this germ, but for two things that could happen. One of them is that the germ itself mutates and becomes less infectious and less of a health burden.

Dr. Penny Borenstein:

That is not likely to happen because we know that Coronaviruses are very stable organisms, unlike influenza, which changes year to year and the and the proteins on the surface of the bug change. That's why we need a new vaccine every year. We don't know year to year what it's going to look like. We don't know if we're going to have a new organism altogether as we did in 2009. Coronaviruses over the past century of our understanding of it is a very stable virus, so that leaves us with only the alternative that this particular virus is likely to be around for a long time as has been true of the many Coronaviruses that cause the common cold. So what we need to get to, to get out from under this pandemic is enough immunity in our community that the virus can no longer find people who are susceptible.

Dr. Penny Borenstein:

And so to do that we're waiting for a vaccine. That's going to be our best armament is to impose immunity through a shot on our community and thereby make the virus have nowhere to go. If everyone is immune, the virus will die out. The second way is that over a long period of time that enough people have gotten this disease and recovered and have natural immunity and therefore again, the virus will not be able to find a home, if you will, in new people. So we are waiting for that vaccine. There are very smart and very committed people working on getting that timeline shortened, but in the meantime we are trying to spread out the number of people are getting it at the same time, to preserve our healthcare system and, to prevent the disease from hitting the people who are most vulnerable from bad outcomes from this disease.

Dr. Penny Borenstein:

But ultimately we probably will be seeing ongoing cases for a long period of time. We just need to really spread out the rate at which our community becomes infected. I know that was a bit of a science lesson, but I'm hoping that that resonates and people can begin to sort of understand the decisions that we will have to make as community as leaders of this community regarding, we are not going to be able to lift social distancing next week or the week after or probably for some time to come. But we do want to monitor how many people have had this disease and that's why it's so important as I keep saying, to be able to test, to be able to know what proportion of our community are actually infected and recovered. So we will continue to work on that. And with that sort of immunology lesson, I, excuse me, I will turn it over for questions to our media friends. Yes.

Speaker 4 - audience:

So I was wondering, can you tell us how along the lines of testing, how long it takes for people to be notified of their test results both from the public health lab perspective and then also from if they go to their primary care doctor and they get a private test?

Dr. Penny Borenstein:

Okay. So the question is how long does it take to get one's test results and it does differ if the test is performed by the public health laboratory and we are continuing to offer that to the highest risk folks that we're able to get those results turned around in about 24 hours, sometimes less. In private labs, there's a range. Some labs are three to four days, other laboratories I've heard are as long as eight, so

that's why we are prioritizing the immediacy of a result turnaround for the people in settings that we most need to know in hospitals, in congregate living settings, in our corrections facilities, et cetera.

Speaker 5 - audience:

Question for Wade or Dr. Borenstein as well. Wade, you had mentioned, I think it was last week that the ventilators on order, is there an update on when those arrive? Obviously there's a great demand around here.

Wade Horton:

There is. So the question was what's going on with the ventilators and the ventilator order? So as you mentioned, there is a great demand and the federal government is purchasing large quantities of ventilators. That has delayed the arrival of our order, however, we're not waiting. So, we know that order is delayed, so the first thing we did is request additional ventilators through Cal OES for Mutual Aid. We're also, again last night, we made another contact with the ventilator company and we are also placing an order with them with a potentially much shorter delivery date and that delivery date will be here in time for our stand up on April 8th. So there's a great demand across the whole country right now for ventilators. I want the public to know that if we hit a roadblock, we're immediately go into plan B and to plan C and again our goal is to open that alternative care site by April 8th. Yes?

Speaker 7 - audience:

Viewers are asking why gun stores are essential.

Wade Horton:

So as I mentioned, so the question is why are gun stores essential? And I've addressed this question before. In consultation with Sheriff Ian Parkinson. Ian is in charge and responsible for public safety in this County and this matter I'll defer to him. Ian and I are working closely together to protect the health and safety of this community.

Speaker 8 - audience:

Could you discuss what metric you guys use for evaluating the shelter at home? Are you looking for anything specific? And I know you said, I think it was last week, you guys were going to reevaluate in two weeks. Do you guys have any kind of timeline? I know it's really hard to predict that right now, but ...

Wade Horton:

Well, so as doctor ... The question was how are we evaluating shelter at home? Well, we have epidemiologists that are providing advice, and of course Dr. Borenstein is talking with her counterparts, not only in the state, but also she's on calls with the CDC. And so we're getting the best information possible to make that determination on how long shelter at homes should continue.

Speaker 9 - audience:

Can you also discuss the ... you mentioned a spike in domestic violence cases, I think recently, and we were wondering which-

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Speaker 9 - audience:

which agencies were reporting that, and if that problem continues-

Wade Horton:

So I received that data from the sheriff, the county sheriff's department, and I can follow up with specifics. If you need specifics.

Speaker 9 - audience:

I have a question for Dr. Borenstein regarding pets and their ability to carry the virus on their fur or any [inaudible 00:33:24] pets are able to carry the virus and what they can do to help minimize that risk.

Dr. Penny Borenstein:

So the question was, is the virus ... Do pets carry the virus? And specifically you asked on their fur, but I think you're probably also referring to can they have the virus themselves become infected and transmit? And so I'll answer the latter part of the amplification of that question, which is yes, there have been case reports of animals being able ... Having the virus when tested in the same way as humans being tested. As to what type of disease that may cause an animals is still unclear and there's very few reports of this.

Dr. Penny Borenstein:

So yes, the animals can be infected, but we don't know to what extent and at what level of health impact to the animals. Can they transmit it by their fur or other means, through their nasal respiratory secretions. That is unclear, or at least unclear to me at this moment. And I certainly will have someone more schooled in veterinary medicine respond to that question at a future date.

Audience Member:

I had a question about [inaudible 00:01:43], but if you could discuss the emergency response team, if you could explain who's on it and how you guys communicate with each other.

Wade Horton:

So the question was, can you explain the emergency response team? So right now we have our, our emergency operations center is open. We probably, I would estimate 80 individuals in that response center. We've also ... We've augmented that response center with two trailers so we can try to maintain social distancing and spread out as much as we can in the EOC, the emergency operations center. It's comprised of subject matter expertise throughout the County, including law enforcement, public works. Certainly the main line of effort right now is public health. We have liaisons with CalOES. We have a CalOES liaison. I anticipate that we will have a California National Guard liaison arriving tomorrow that will sit in our emergency operation center.

Wade Horton:

We see a spot for city liaisons and periodically we do have city managers that come and sit in that EOC and the purpose is, for the EOC is to take in information, make decisions and then push information out. Now let me also add the California National Guard. So I mentioned that we do have a liaison coming tomorrow. We are ... We have requested national guard resources to help us potentially with food distribution. We've also requested resources on Camp San Luis Obispo, just a quarter mile from here.

We're looking to working with the California National Guard for warehouse space, so we can store additional food to help supplement the food that the food bank is providing right now. So that's moving along very well and we anticipate operations moving food in that warehouse very shortly.

Audience Member:

Couple more.

Speaker 9 - audience:

We do have another question from a viewer then. As cases arise, are there plans to put additional restrictions in place? You have touched on a couple of those, but just maybe so they can plan?

Wade Horton:

So as far as additional ... So the question was as cases rise, do we anticipate putting additional restrictions in place? The intent of the restrictions right now are really to limit the spread of this disease and as long as it's ... We're all in together as a community, as long as people are doing what they need to be doing, social ... Or physical distancing, going out for essential services going to the gas station. If you work for an essential service, keep doing that. Getting outside. That's all good things. We did, as you know, limit or close some parking lots yesterday for beach access. We closed some piers, again, we just closed campgrounds. The intent behind that is to limit large groups of visitors coming into our county when everyone should be staying close to their homes. So right now do I anticipate further measures? No, I don't.

Audience Member:

I have one more. Could you discuss the federal stimulus money if you guys are anticipating getting any or anything you might know about that?

Wade Horton:

So the question was regarding the federal stimulus money. Yes, yes. We are certainly requesting all federally that we can. We are ... The situation is changing rapidly and we're evaluating every step that we can to get as much aid in this county as possible for the benefit of our residents. Thank you.

Michelle Shoresman:

Thank you again to all the members of the media for being here today and for those at home tuning in online or on TV. A few final reminders. As usual, we have all our information and resources for the SLO County response to COVID-19 on our website. ReadySLO.org. Please check out our new virtual local assistance center there as well as links for volunteer opportunities for the Medical Reserve Corps. We also continue to maintain our public health information line 24 hours a day and our phone assistance center where you can talk to a real person to get your questions answered seven days a week, between 8:00 AM and 5:00 PM.

Michelle Shoresman:

Finally the county enforcement line that was mentioned yesterday, where you can report violations of the county's shelter at home order. All of that information, again, is on readySLO.org. Lastly, just to note that we will not be conducting these regular briefings over the weekend. If the situations change rapidly, we will call an additional press conference, but as of right now, please use that time to get outside, get

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some fresh air, take care of your mental health as our behavioral health director and Robin asked, and we will be back here again on Monday at 3:15. You can tune in then on the public health department Facebook page. Our county's homepage also has a live stream, or KCOY or KSBY. Thank you, be well, and have a good weekend.

PART 4 OF 4 ENDS [00:40:33]