Good afternoon, here we are in the middle of February and things are moving forward in a good way. We still continue to see a relatively high number of cases but they are coming down. So our number today is 19,248. You can see that we peaked in January, but the majority of the cases have happened in just the last three months. We now have almost 7% of our entire county who have tested positive with the coronavirus. And we are continuing to see a downward trend also in our active cases. So today we have 790 individuals down from a high of 3000 at any given point in time who have active infection.

Our positivity rate, so the proportion of people who test to actually have a positive test result is also continuing to decrease at the county level. That is now down to 4.3 from our high of 11.1, just a few weeks ago. The number of people in the hospital is also dropping, we're very happy that it has now entered the 20s, whereas we were seeing day over day hospitalizations people in the numbers of 50s and 60 on a given day in the hospital. Today it is 23 and seven of those individuals are in intensive care. So this is a great trend we want to continue to see.

Unfortunately, the death count in our county, the toll keeps coming for some individuals we are at 210 deaths in our county from COVID. That is just 10 in the past week, since I stood before you and we have another 27 individuals who will likely become part of that overall statistic we're awaiting their final death certificates. So I know that I stand here week after week and throw out numbers at you. These are real people with families who are missing their loved ones and our hearts and condolences go out to these individuals and their families.

The vaccine news continues to be good. We, as you know, opened last week, two individuals aged 65 and above at the guidance of our vaccine task force. First appointments are available to this group but this group is very large and our number of appointments remain small. We are filling all the appointments that we provide availability for such that yesterday alone in our county, we administered nearly 2,500 doses. This was an all time high for us. 1,100 of them were given at the
Cuesta clinic in SLO City. And that exceeded our supposed maximum capacity of 1000, so my thank you goes out to all the staff at that location who accommodated above our maximum capacity. This was able to happen because people all made appointments at the same time. And even though slots were filled those who got through the system were accommodated with an appointment time as they moved through the appointment process. In addition, we had 600 individuals at each Arroyo Grande and Paso Robles opened this week Tuesday to Thursday who are being vaccinated.

We know that there is an awful lot of stress on the system far more demand than we can accommodate. So we continue to ask people to please be patient. If you cannot get your vaccination appointment this week or next week it can happen the following week or the week after that or the week after that, you will get accommodated. We simply need more vaccine to meet the demand that's out there. So again, we ask people who are eligible even in this older age group, if you can safely continue to do what you've been doing for a year largely stay at home, largely, you know stay away from others and do so safely. If you're not living with high risk individuals then we're asking you to please preserve this very limited resource at this time for those with much higher needs.

I do wanna point out as people are understandably clamoring for these appointments, I'm grateful for that. I want to see everyone in our county want to get this vaccine it is our way forward. But if you think about this countywide, we have collectively between public healths having administered coming up on 30,000 doses countywide, almost 45,000 doses. 80% of those first doses, we are coming up on about 15% of our population having been vaccinated. So we are making headway, this is only in eight weeks time that we've done this and there is more vaccine coming. If you think about it, it is within one year of a first case of this disease. Having occurred in our county that we are now looking at about one in five people who have either natural immunity or vaccination based immunity. So we are making progress toward what we all want to be our end game here, which is getting back to life as we know it. Second doses, we have also been able to move aggressively forward with making those appointments available.

So as you see, we've administered, we've given out in the county clinics, just under 23,000 doses, 22,742, 5,656, or roughly one quarter have received their second dose already, so we have full immunity for a large number of people. As a reminder, that even if you can't get your second dose right on time on the 21st day
after your first dose for Pfizer or the 28th day for Moderna, if it lags another week or even two, that is still perfectly acceptable. And even if it goes beyond that period of time there is no need to restart the series. So we've had quite a few people reaching out to us who want their second dose from us but they did not get their first dose from us. So we are asking those people to go back to the location of their first dose, be it French Hospital, local pharmacy a clinic out of our county. There are some exceptions, if someone has moved across the country we will provide them their second dose. But for the most part, we are asking that people go back to the location of their first dose.

We will remind those who got their first dose with us, when it is time to set an appointment for their second dose, please be patient. You may not get that notice until a few days before a week before your second dose is due. But we are reaching out to all people who have come through our system for their first dose with either text or email information, or if they don't have that and they've given us a phone number, we will contact everyone when your second dose is due and we have appointments to accommodate that second dose demand. So please be patient with that system.

Next week, we are able to again offer quite a few first doses and second doses. So at our SLO vaccination clinic we will be able to maximize to reach our intended plan which is 1000 doses a day, five days a week. That is what we are setting out in the way of appointments for our community, for those eligible. Again, this includes any healthcare workers who have not yet come through. Individuals 75 and older, individuals, 65 to 74 at this time those are eligible groups and they will have the opportunity to try to make an appointment in the coming week for a first dose at the Cuesta site, Monday through Friday, 1000 a day. And we're also able to accommodate the second dose demand at our Arroyo Grande sites and our Paso Robles sites for 600 doses a day. However, only three days a week for each of those locations it gets a little more complicated but when you get to the appointment system you'll see what's available at Arroyo Grande, it will be Monday through Wednesday. At Paso Robles it will be Tuesday through Thursday. But appointments the short version of this appointments for first doses appointments for second doses, particularly of the Moderna, which is what will be due this coming week for those who got it four weeks ago or longer ago will be available at these three sites in the coming week.
I do want to address information that was put out by the state, by the Governor, by Dr. Mark Ghaly setting a date of eligibility for individuals of younger ages, ages 16. Which is the lowest age for licensure of the vaccine through the age of 64 that individuals with certain underlying medical conditions or disabilities will be eligible come March 15th for a vaccine. That is an aspirational goal in this county. We are progressing as quickly as we can through that current eligibility tiers. We very much acknowledge the needs of this population. We very much wanted to get to it as quickly as possible. It is why we continue to push at every opportunity to get more allocation into our county. But at this time we cannot guarantee that we will have the vaccine available to accommodate that group as well as some of the other groups that per state guidance are eligible, but not yet in this county because the numbers simply don't add up. So please stay tuned. We will continue to work with you, the public our task force. We do get public comment. We honor that public comment in our deliberations of how to move forward. And we like, you want to be able to open our doors more widely just as soon as we can.

And lastly, I want to address where we are in our tier status, vis-a-vis the blueprint. So, unfortunately, a week ago, I gave some hope that we were on the cusp of moving to the red tier. There are two ways that a county can progress forward through the tiers and the relative restrictions. One is by meeting all of the metrics in a particular tier. So to get to red for this for any county, less than seven cases per 100,000 population per day, on average. Less than 8% between five and 8% test positivity for the county as a whole. And the same test positivity for the health equity core tier, the healthy places index lowest 25th percentile per vulnerability measures. The other way that a county can progress forward is if those latter two measures the test positivity overall and the test positivity in that lowest 25th percentile quartile are even better in a tier, less restrictive. So less than 5% test positivity would put us in orange that cannot withstanding the higher case rate can allow a county to move forward at tier. That happened for one week in our county but it did not happen this week.

The health equity quartile bumped up from 4.9%, 5.9%. So we have missed that opportunity to progress at this time. The good news, however, is that all of our metrics continue to go in the right direction. Our case rate is coming down. It came down from 19.3 last week adjusted to 15.6. I believe I'm looking for the number but I believe that is the number. And so it, it shows that we are continuing to move in the right direction in our case counts. These are adjusted case counts, so our
county continues to do quite well in terms of getting a maximal adjustment factor, because of the high volume of testing we're doing but we will now need to wait at least two more weeks to see if we can progress forward into the red tier in either fashion by getting our case rate below seven or for two weeks and maintaining it for two weeks or by virtue of seeing or test positivity rate countywide and in our health equity quartile go down. So please stay tuned, as I know you will, but I do believe that we are making progress and absent any changes in how things are going in our community. And if we all continue to do our part at still doing all of the measures that we know work for preventing spread of this disease we will be able in the short term to move forward. And with that, I'll open it up to questions.

- [Alley] See Dr. Borenstein, I know there is a lot of hope anticipation about going into the red tier this week. So if you can reiterate, it resets the clock back and now we start over again and the earliest we could move into red would be what?

- So it would be at least two weeks from yesterday. So you have to have two full weeks in the less restrictive, your metrics have to meet two full weeks of being in the less restricted tier in order for things to progress forward. With schools, it used to be you had to be in the red tier for two weeks to be able to move forward, it's now five days with a plan in place. And so schools are aware that they need to be primed, as you heard from Dr. Brescia last week, that to be ready to move in that five day timeframe that means you have to have a safety plan in place a checklist, approval of your board, et cetera. But all of the things can move forward very quickly when we reach a red tier.

- [Alley] I learned in the news yesterday what was their reaction, disappointment, surprise or what were your feelings, I guess?

- Yeah, so I like everyone else was hopeful and that we would be able to move forward. We actually debated whether we should remind the public about this nuance because we didn't wanna raise hopes to be dashed. We are all about transparency and full communication, so appropriately decided we need to tell people where we're at. We were at that point, right at the margin for red. So it was not a complete surprise that we would, you know have minor changes in where we're at a step forward a step back that's not unusual.

- [Alley] Another question we've heard there may be some delays with vaccination with vaccine doses because of the inclement weather, most of the country is experiencing might that impact the county here?
- Yes, thank you for that question. I actually meant to address it because some of our appointments, particularly our second dose appointments next week are dependent on our getting a shipment that was supposed to have come yesterday. We, again, today got noticed that they are on pause by the distributor, and we are hopeful that we will still see those doses in time but it is possible that some of our appointments later in the week, next week if we do not get that additional shipment may have to be postponed.

- [Alley] And in terms of doses and allotments, you know last week I think it was 1900, it's fluctuated, obviously through the weeks, what are the numbers looking like for next week? You just mentioned there could be delays but what's the county hoping to receive?

- We have been averaging between 3500 and 4500 doses over a three week period, both last week this week and projected for next week. So we seem to have sort of hit that sweet spot, but and then once in a rare while we got a delivery we didn't know it was coming for almost 2000 doses. We like those, but so it remains slightly, somewhat erratic. And we'll take everything we can get our hands on.

- [Reporter] Dr. Borenstein, has contact tracing identified why the positivity rate in the health equity census tracks increased this last week?

- So to Mr. Alley's point and yours is you know 1% difference and over one week period of time is not particularly dramatic and really does not a trend make. We certainly continue to try to push efforts for testing in vulnerable populations, and we will continue to do that but we don't have anything specific to address why we might have slipped by a small amount.

- [Reporter] And we heard that health lab is gonna be starting saliva based testing tomorrow. Can you explain how saliva based testing is different and if the county will be doing that anytime soon?

- So this is, you know, you'd do better to ask them but they made a decision based on their own lab capabilities to use that saliva as the source, rather than a nasal swab that is used in quite a few places it uses the exact same technology as the nasal swabs which is the PCR molecular testing. So the actual test mechanism is the same just the specimen sample is different. We, you know, we're sticking with what has worked for us. We also, most of our community-based testing actually is state contracted testing through OptumServe. And that is the mechanism that they've been using for a long time, so we're not planning on making any changes.
- [Reporter] And Dr. Borenstein, is there any discussion of the state level about whether or not vaccinations will be a metric for reopening for example if the county reaches X percent of the vaccinations?

- At this time, I have not heard of any nexus between the ability to open a vaccination status in a county. Yes.

- [Reporter] Is there anything a community member who may have a disability or maybe a health condition that's not on the list, is there anything they can do to bring them up to phase 1C or will they be left to get the vaccination with the rest of the general public?

- No, we intend to move forward for individuals with certain medical conditions and disabilities just as soon as we have enough vaccine to do that of all ages and that they would come ahead of the general population. Is that your question.

- The question was if they were not, I guess there's a list I haven't seen their condition, I don't know what it is but I guess they are.

- The list of conditions per se

- [Reporter] And they're not on the list.

- Yeah, we are trusting the State Scientific Advisory Committee to determine which specific conditions present a much higher risk of bad outcome from getting COVID disease, and we will adhere to that list.

- [Reporter] Dr. Borenstein, kind of similar to that question now that the state has set that March 15th date, even if the county can't likely meet that will be vaccine taskforce reorder priority to allow people with underlying health conditions to go before agriculture workers or teachers or will that order still remain the same?

- So I can't speak to the future, we will take up these issues as we move forward but I don't have an answer at this time.

- [Reporter] And do you have any more date specific on when those who are not on the list so they would go in with the general public when they would be available to I know it's a guesstimation, that's the question.

- Yeah, I've many times said my crystal ball, it's not just broken, it's shattered it. You know, all of these hard decisions are at the end of the day, based on how much
vaccine product comes off the assembly line. And we will move just as quickly as we can, based on the amount of product that comes into our county.

- [Reporter] And doctor, school districts are starting to have approve reopening plans just within the last day or so, we see more at San Luis, coastal, many parents are very happy about that, some maybe not so happy. What's your message to parents, as schools seem quite closed now to be able to return public schools, large public schools to having class instruction return?

- I would say, as a parent, as a public health professional I'm very excited by the opportunity for all students in this county to have in-person instruction if it meets their needs. And there are many for whom virtual instruction has been very problematic and really held back some students in their educational advancement. I have consistently said through this pandemic that should be our number one priority is getting students in schools. It is not based on vaccination status. It is based on schools being able to put safety measures into place. And I'm very happy to see all of the school systems now moving forward, some have already moved forward and every one of them now is planning to do so.

- [Reporter] In terms of this county and other counties within the state or even outside the state, what are you seeing in terms of spread and transmissibility of, I mean what are the numbers showing to up-to-date right now?

- So nationally statewide and in our location everybody is seeing a downward trend of cases and transmission. As long as we stay there, that's good news, in a lot of ways, it allows us to open more safely. It allows us also to stave off further mutations of the virus. If you've got a lot of virus circulating, you have a lot of opportunity for more mutations or variants. If you have a lot, you know, if you have very little virus circulating that will protect us both in the immediate term, as well as keeping at bay any further mutation options.

- [Reporter] I guess I was trying to ask about it in schools within schools, what's the data showing in terms of yes.

- So yes, schools have proven in many places globally to be able to be open and largely protect their students, it doesn't mean we don't have cases. We have had many students in school in some fashion, we have had many cases, but they are still few in number compared to the large numbers. Students in general have a much easier time with this disease. The teachers have a better opportunity in most cases to keep that physical distance to do all the protections that they need have
you know, physical separation, hand washing, sanitization et cetera. So, and we're seeing that play out in our county in the state, and nationally, and globally that schools can find a mechanism for being open and not putting staff or the students at great risk.

- [Michelle] One last question.

- Okay thank you.

- Thank you all for being here today. A few updates and reminders before we close our phone assistance center remains open seven days a week from 8:00 am to 5:00 pm. Staff there are available to answer your questions from members of the public and to help individuals make appointments at the vaccination clinics if they don't have computer access or access to the internet, or just don't feel comfortable using a computer. We also continue to maintain our public health information line recorded message. ready.slo.org remains your main source of online information about the county's response to COVID-19. And recover.slo.org/vaccine is the best place to go for information about vaccines and our county's vaccination efforts. When it's your turn to get vaccinated you can go to recover.slo.org/vaccine appointments. First dose appointments are made each week, they're made available on Thursday mornings at 9:00 am. However, you can also check back weekdays to see if new appointments have been made available due to cancellations. Please do cancel your appointment in advance with as much notice as possible, if you are unable to attend. COVID-19 testing continues in five locations around the county, please go to ready.slo.org for all of those informational items and links to appointment testing. You can watch these briefings live on the county's YouTube channel. They are also frequently live-streamed on KSBY and KEYT websites. They are also rebroadcast on SLO county's public access Channel 21 at midnight 8:00 a.m. and 5:00 p.m. until the next briefing occurs as well as being available on the SLO County Public Health Facebook page. Thank you once again for staying informed, be well and we will see you here next Wednesday February 24th at 3:15 p.m.