

- Good afternoon. Today is Thursday, December 3rd, 2020. My name is Michelle Shoresman and I'd like to welcome you to today's San Luis Obispo County COVID-19 weekly media briefing. This afternoon, we will hear from San Luis Obispo County Health Officer Dr. Penny Borenstein. County Administrative Officer and Emergency Services Director Wade Horton is also here and available to take your questions. Thank you once again to our American Sign Language interpreter, Robin Babb. And now county health officer Dr. Penny Borenstein.

- Good afternoon, everyone. So let me first start. It's been a couple of weeks since I've been before you with where we are in this county. We, like every other county in California, have seen our case numbers go up. We have had 82 since yesterday and in the past two weeks over 1,000. 1,059 in that two week period. We've surpassed our highest active caseload ever since the beginning of this pandemic. A few days ago, we had over 1,000 active cases. Fortunately, we've come down some. We're at 774 today of people recovering at home. And we've averaged though over the last two weeks 78 cases on a daily basis. So that is dramatically different than what we had been experiencing for a very long time in this county. You can see the slide behind me gives evidence of that case and number rising locally.

We, however, are fortunate in this county. Still, we continue to have low numbers of cases in the hospital. We have 11 in our hospital, one of whom is in intensive care, and this differs dramatically, again, from the slide you see behind me. This is case counts at the national level but you would see a very similar slide with respect to hospitalizations at the national and the state level where we really as a nation and as a state are tending to go off the charts, even compared to our last two sets of increases, one in the spring and one in the summer. We are relatively spared, as I've said, in terms of severity of disease.

However, we are worried about some of the aspects of this that we are seeing, notwithstanding that we continue to do better. We do have 12 outbreaks currently and all but one of those are in senior living facilities or skilled nursing facilities. So that gives us pause and we've been very much engaged in responding to those. We have had four deaths since I last came before you. And we also have several more individuals who have died for whom we're waiting their final death certificate information, but we believe that they will also be, that have an underlying cause of death of COVID. So we're seeing a lot of disease. We're seeing some severity of disease in terms of our deaths. We're seeing outbreaks that we need to respond to.

The positives, though, is that we are not seeing the numbers that is being experienced all around us with respect to hospitalizations or intensive care.

So with that, the state, as you know probably by now, is moving into a new phase with a new shelter at home order that is based upon hospitalizations. And so we find ourselves very disappointed at the regional schema, which has us in a region along with all of our Southern California peers all the way down to Mexico, as I say it, through Los Angeles, Orange County, San Diego, Imperial County. So we've got in our county, as you can see on the slide, those counties. We go up the eastern coast of California as well, Riverside County, San Bernardino County, and as far north as Inyo and Mono. So that is a very large region and we are doing better pretty much than anyone else in terms of the metric that the governor is using to determine this stay-at-home order by region. Again, let me just remind you we have one person in intensive care, 11 individuals in the hospital, and that has been pretty consistent despite our case increases. We're glad that ICU and hospitalizations are being looked at as the metric. But again, we find ourselves at a loss to tell you how to react to this given that there isn't a whole lot more that we can do in driving down our hospital cases and especially intensive care.

We know that our community remains resilient and we very much know that there has been suffering and there will continue to be under this new stay-at-home order. But we look forward to continuing and resurrecting, if you will, the partnership, the sense of togetherness that we all experienced in the spring when things started to take off and there was a lot of concern about the impacts of this disease. So we are at that place again. We are likely in our region to see the stay-at-home order kick into place as soon as tomorrow. We're right on the cusp of meeting the metric that will trigger the stay-at-home order for a region and that metric is that more than 85% of the ICU, intensive care unit, bed capacity is exceeded. So while we don't have that problem, it is being experienced in the region to our south that we are a part of, in the region to our east, in the region to our north, and even the far north. All of these regions in the state of California have already met the metric or are soon to do so.

So what was this stay-at-home order look like for us? As I mentioned, it would be quite similar to that which we experienced in the spring. The intention is to have people stay home as much as possible, or do only individual or household activities outdoors or essential activities like grocery shopping, pharmacy. But the idea is to limit mixing between households or any individuals. And this is intended to drive

the case rate down statewide and our county as well that we're seeing really a vertical rising. So with more specifics, what a stay-at-home order closures will include are things like indoor and outdoor playgrounds, indoor recreational facilities. It will include, in this case, hair salons and barbershops and other personal care services, nail services, massage, tattoos, museums, zoos, aquariums, movie theaters, card rooms, wineries, bars, breweries, distilleries, entertainment centers. Live audience sports, which had recently been allowed, it would now be closed again. And amusement parks which doesn't really affect our county, but does on a statewide basis.

Additional modifications are intended for some of the other sectors. So outdoor recreational activities would, again, go back to, as best we understand it at this moment, we need some clarification. We think that that pertains only to things like golf or tennis, single play, one individual in a golf cart, one person on each side of the net. Campgrounds, however, would be closed. Retail will remain open. And unlike at the beginning where big box stores got to stay open because of their grocery capacity, in this newer situation all retail stores would be allowed to remain open but at a significantly reduced capacity.

So 20% for retail stores with an expectation that that would actually be monitored, that there be entrance metrics kept and also a strong recommendation that those in more vulnerable populations, such as the elderly or those who are immune compromised, have special shopping hours. Hotels and lodging are also supposed to be under the shelter at home order, only used for critical infrastructure travel. Restaurants would be closed to indoor and outdoor dining with only take-out and pick-up or delivery allowed. And entertainment production, including professional sports, would go back to having no live audiences. We recently updated our allowance for music and other types of theatrical activities to include drive-through and specified recording types of activities and we need to take a look at how that would comport with this new guidance.

Those things that can stay open, and of critical importance, you've heard me many times say it and I am very happy to know that the state is also very much emphasizing that our schools, those that have opened, would be allowed to stay open. I have continuously said if I had one sector to be open, it would be our schools. For in-person learning, those schools that have already opened, whether it's by waiver or by their reopening plan, they would be allowed to stay open. Medical and dental care would continue, even non-urgent care. And childcare and

pre-kindergarten services would remain open as well as critical infrastructure which needs to be defined a little bit further at this time. I know that there are probably many offices, many industries that are trying to determine what critical infrastructure means. That was probably the most common type of question we got at the beginning and I'm sure that we will be revisiting that.

So I just wanna reiterate that I know that this is incredibly difficult. I know that many in our community will have a hard time understanding how this is applying to our county on the basis of ICU capacity throughout the region when it's not impacting us in the same way. We, unfortunately, did make, I did plead with the state that we be allowed to use our hospital bed capacity, our ICU bed capacity but we do not stand alone. And this is the state's approach to trying to drive down what is a remarkable resurgence of this disease at this time. And so we will fall into this. What I do wanna really emphasize for our population who may be feeling incredibly discouraged is two things. One is, and I can't give you all the detail on this, but I know that there are quite a few things happening at the state level to try to support businesses and individuals in terms of their financial viability through loans, through grants, through tax deferrals, and more information is available on all of those through the state. And we will try to get that information available as well on our website, as we get it all sorted out.

The other thing that I would ask of our community is let's hope that this is a short period of time, that our region steps up, and that we come out of it having driven our case rate as low as we can get it during this period of relative closure and inactivity. If we get ourselves into that yellow tier in three weeks time, and the stay-at-home order is lifted, it needs to be a minimum of three weeks, but if our region does well in terms of its ICU capacity and we use that time to get our case load quite low, we will be able to move forward just as quickly as the stay-at-home order is lifted. So for those who may be thinking, "What more can I do?", it is the same things that I have been saying over and over again. Don't mix. Don't mingle. Keep your activities limited to your household, to one or two other families, if you must, and use this time to buy local. Shop online. Support our local businesses. Do take-out. And let's all come together as a community to really support one another, who are gonna be impacted by this.

The next thing I do wanna talk about, which is pretty big news, you've been hearing about vaccines coming. They may be coming very soon in very limited quantity. So at a state level, we had, I think the last time I spoke about this I may have been

saying that the first allocation to the state was intended to be or expected to be in the one to two million range. We've now gotten notification that the very first allocation to the state of California is numbered at only 327,000 doses. We have received locally information that we are going to get just shy of 2,000 of those very first doses. And who those are intended for, based on national recommendations coming out of Centers for Disease Control as well as the California Vaccine Advisory Committee, is healthcare workers as well as vulnerable populations living in senior living settings, skilled nursing homes in particular.

When we look at healthcare workers and our residents in skilled nursing facilities, we have a number that is more like 17,000 and we are anticipating in the very first delivery 2,000 doses. So obviously we will have to make some additional triage decisions and in accordance with the recommendations of the state as well as our intention to bring together, in the coming days to week, a healthcare coalition, one that's been in existence, but we are going to add to it all of the membership that we need, including dentists, including EMS, including outpatient providers, specialty providers. We're gonna look to that group to help us make the decisions of how to tier this vaccine availability. We will almost certainly start with the highest risk healthcare workers in hospitals and at the skilled nursing facilities, the staff, the residents but beyond that we have some hard decisions to make and that's only with the first allocation.

As you've heard, there are expected to be many more doses coming over the course of months, not weeks and with that, we have also begun to put together a work group, our COVID vaccination task force that is going to draw from all sectors who have a dog in this fight, if you will, with respect to how we are going to make these very challenging decisions about vaccine allocation. So we're drawing from community-based organizations, from faith-based organizations, from healthcare folks, business, agriculture, farm workers, homeless-serving folks, individuals who represent ethnic and racial communities, and we are beginning to put together a list of names who will represent each one of those sectors and hope to bring that group together in the near term as well, because we need to start that very difficult work sooner rather than later. I guess that that is where I will leave it at this moment. I'm sure that there are questions related to vaccine.

Let me talk about just two other announcements. So Cal/OSHA has just put out new workplace rules related to COVID-19. These are temporary standards that have about 9 or 10 new requirements for businesses in dealing with any cases of COVID

within their employment. And the main thing that I want to make sure that businesses are aware of that if you have an employee outbreak in a business that that is a reportable situation to public health and it needs to be reported within 48 hours to our department, the local health department, immediately but no later than two days from becoming aware of it. And that can be done most effectively by finding a form that we now have available or soon will. I'm not actually certain if it's been posted yet but we're working on it on readyslo.org, where any outbreak from an employer can be reported to the local health department.

And lastly, I wanna talk about testing. The demand on testing has, again, really gone up and we have had the opportunity to expand further our testing sites in the community. So we continue to have our regular sites in Grover Beach which is at Ramona Community Gardens. We have SLO Vets Hall available and we now have been able to add a third state-sponsored site, five days a week in Paso Robles. We had been only three days a week. We're now gonna be there Tuesdays through Saturdays in the Pasa Robles Event Center. And we are moving that three days a week that was Pasa Robles now down to Nipomo where we will be Monday, Thursdays, and Saturdays. And we will retain our Morro Bay Vet's Hall presence on Tuesdays, Wednesdays, and Fridays.

We have seen a lot of hiccups, if you will, at our testing sites, as we have gone from low numbers to high numbers and trying to ask of our testing partners, the Optum state-funded community sites, that they take walk-ins and then they started taking walk-ins and then Thanksgiving hit and then we were overwhelmed. And so for the community who has experienced these types of policy changes that may be happening on a near daily basis, depending on the demand on the system, we ask that you be patient with us. We try to make sure that we maximize the utilization of all of these sites and sometimes if we open the doors a little bit wider, that means that we then have to shut, restrict a little bit more in the coming days. So please work with us. Always check online at emergencyslo.org/testing. For making an appointment, it's the absolute best thing to do. And check as to whether or not there is capacity at a given site on a given day. And with that, I am open for questions.

- [Man] Thanks. Dr. Borenstein, in regards to any potential mutual aid, will there be beds used here for folks from outside of our area?

- So we work through a regional disaster medical and health system and we are part of that Southern California region. So they can make requests of us. We still

need to get approval from our hospitals. And there have been times, not in COVID, where that has happened, but it remains to be seen if it will be utilized in that fashion.

- [Man] How 'bout the alternative care site then?

- So our alternative care site remains an option but what is being experienced right now is people at the hospital level of care and intensive care which our ACS cannot accommodate. I know that there are a couple of places that the state is looking to reopen to offload in other areas of the state. We haven't had any requests at this point from anywhere in our region.

- [Man] And you were mentioning that possibly tomorrow this could kick in. What's the criteria for that? Is it the 85%? But is that what would put us into the stay-at-home?

- Right, so if this region of X number of counties in Southern California were to be experiencing 85% or more of all of their staffed intensive care beds filled with patients COVID or otherwise, that would pull the trigger on the stay-at-home order for our region.

- [Woman] And any idea why San Louis Obispo County ended up in this specific region?

- Yeah, so these regions are based on health officer groupings that have worked for many years as a body of professionals who have shared best practices and sometimes resources and that just happens to be where we have fallen over recent years. We have communicated with the state that in this particular situation, as it's being applied, that it doesn't fit us particularly well. And we will probably continue to try to have that dialogue with respect to us not being of the same, not having the same demands that we're seeing on the hospital system further south of us.

- [Man] And that will put elective surgeries and other hospital admittances that are allowed right now, if we go into that?

- So the state is, in this case, not mandating as they did early on for discontinuation of non-emergent surgical procedures. They are leaving that to the healthcare system and the hospital system to make the decision on a hospital by hospital basis.

- [Man] This part is you addressing vaccines. What does it look like into next year for a potential?

- Yeah, so thank you for that. I do wanna really emphasize, because I know I'm feeling, I'm personally feeling it. I'm sure that our audience is feeling this sense of heaviness. I really do want us to, in two ways, keep our eyes on the light at the end of this tunnel. We continue to do well in this county. That is good news. And we have a vaccine coming. We have vaccines coming. We have two products that are on the cusp of being approved by the FDA for emergency use. We have every expectation that those are safe and effective and that there are many more doses coming in the coming months. So as I have stood at this podium many times before and told you there will be an end to this, I am hopeful that we are talking months rather than years at this point. If the promise of these vaccines, and they are looking quite good, do come through in the next several months, this is all really good news for our community.

- [Man] One other question. You guys can go. In terms of businesses that may feel like they'll go out of business, if they just do what's opposite of what the orders say, I mean, will there be some sort of remedy and will there be enforcement that stepped up? How do you envision anyone that just chooses to ignore these orders?

- Well, I'm gonna turn to my counterpart County Administrative Officer Mr. Horton on that.

- Thanks for your question, Nick. Before I address that question, though, I just wanna say that I think it's a good thing that the state is looking at hospitalizations now as an indicator of where we should move and how we respond to this pandemic. I'm glad that they're focusing on hospital capacity. The fact that we are grouped with all Southern California, as Dr. Borenstein stated, doesn't make a lot of sense to me. And we will continue to advocate with the state to realign our San Luis Obispo County either with another region or a smaller region but it's very difficult. And if you're a small business, looking and facing the question of going out of business for complying, I think it's a very, very difficult position to be in, particularly when you look that we have one COVID patient in the ICU right now in our county. However, we are a subdivision of the state. As the ESD or the CAO, I don't get to make these decisions. It's the state and the governor who makes these decisions. And as a subdivision of the state, when they decide that this is where we need to go, our area and our county is subjected to those rules.

And just as we've done through the course of this pandemic, our goal will be to educate. Our goal will be try to obtain compliance, but when the state comes down and says, "This is what you need to do, and there needs to be enforcement," we're gonna have to look at that and also understand that the state will also be making resources available for egregious violations. This is a really difficult situation to be in. And again, as Dr. Borenstein mentioned, thank God, there's a light at the end of the tunnel, that there's a vaccine coming. We're expecting to receive our first doses in weeks which I think is a wonderful thing. It's gonna be a heavy lift getting from where we are right now to the point of the vaccine. But, as Dr. Borenstein also indicated, this is an opportunity for our county. If we've gotta be locked down, let's make the best use of it, so when we do come out of this thing, we can jump tiers and get open again. And I wanna make sure that the businesses understand that this is difficult. It's a difficult thing, a difficult situation to be in and we need to pull together as a community right now. Shop locally. Order online locally. Let's do what we can to support our businesses.

- Any other questions? Thank you all for being here once again today. As a reminder, you can still get all our county's COVID-19 information on readyslo.org or by calling the Phone Assistance Center or the Public Health Information Recorded Line. As Dr. Borenstein announced, we have expanded our free community testing site locations over the last several weeks. We now have COVID-19 testing available in five locations around the county. Information and links to appointments are all available at readyslo.org under the testing and information, or testing information and locations tab. Also, if you make an appointment and aren't able to keep it for whatever reason, please cancel it online or by phone to make sure that that slot is available for someone else who needs it. If you are asymptomatic and have not been exposed to someone with COVID, please consider taking a self-swab test via an in-home test kit instead of using one of the community testing sites. This will help improve availability of testing appointments for those who are symptomatic or might need a test urgently. We encourage you to watch live online at keyt.com and ksby.com, on TV and live on cable channel 20, I'm sorry 13. They're live on cable channel 13, these briefings. Shortly after each briefing, we'll post the videos on SLO County Public Health's Facebook page, on our county's homepage and on the County of SLO YouTube channel. They will also continue to be rebroadcast on cable access 21 at eight a.m., five p.m., and midnight until the next briefing occurs. Thank you once again for staying informed. Be well and we will be back here again on Wednesday, our usual time at 3:15.