UPDATE ON LOCAL EPIDEMIC DECEMBER 15, 2020

Dr. Sara Cody



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COVID-19 Epidemic, Santa Clara County, Jan. 27 – Dec. 13, 2020:

Case count has been increasing since early October, with rapid increase since early November

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Figure: Lab-confirmed COVID-19 cases stratified by Long-Term Care Facility, outbreak, and community, reported by date of specimen collection



*91 cases not populated in graph due to missing specimen collection dates. Counts for Other Outbreak and LTCF cases for the past two weeks are preliminary; data are updated when case investigation is complete and the case is closed. COVID-19 Epidemic, Santa Clara County, Sept. 8 – Dec. 7, 2020: Disparities in case rates by county section have increased since November

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Figure: Daily rolling average rate of lab-confirmed COVID-19 cases by county section by specimen collection date Sept. 8 – Dec. 7, 2020



Source: California Reportable Disease Information Exchange (CalREDIE), Data retrieved 0700 December 14, 2020.

California Blueprint for a Safer Economy, Santa Clara County Unadjusted and adjusted case rates are increasing rapidly



COVID-19 Epidemic, Santa Clara County, Hospitalizations, Apr 1 – Dec 13, 2020: Number of COVID+ hospitalized patients has been increasing rapidly since early November

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Figure: Number of COVID+ hospitalized patients per day, Santa Clara County 600 Number of COVID+ Hospitalized Patients 500 400 300 200 100 0 5/8 3/27 4/3 4/104/24 5/15/15 5/29 6/5 6/26 7/3 7/10 7/17 7/24 8/14 8/21 8/28 9/18 9/25 4/175/22 6/12 6/19 7/31 8/7 9/4 9/11 10/2 10/910/16 10/23 10/30 11/611/1311/2011/27 12/4 12/11

COVID-19 in the Asian Population in SCC

- No Asian subgroups are overrepresented in cases relative to their share of the County's population.
- However, some Asian subgroups represent a larger proportion of cases than other Asian subgroups.
- Case rates among all racial and ethnic groups are rising.
 Rates among Vietnamese and Filipino residents are rising faster than those of other Asian subgroups.

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Percentage of total cases is lower than share of county population for all Asian subgroups

Figure: Percentage of total lab-confirmed COVID-19 cases by Asian subgroup, Jun. 1 – Dec. 3, 2020 Percent of Total Population Percent of Total Cases 15 10.1 10 9.1 Percentage 6.9 4.8 5 3.9 3.7 2.9 2 1.8 1.5 1.4 0.7 0.6 0.2 0.1 0 0 Filipino Chinese Indian Korean Other Vietnamese Japanese Unknown Asian Subgroup Note: Uses data from June 01 to December 03 due to a lag of 7 days.

Source: California Reportable Disease Information Exchange (CalREDIE), Data retrieved 0700 December 10, 2020.

COVID-19 Epidemic, Santa Clara County, Jun. 1 – Dec. 3, 2020:

Vietnamese and Filipino residents are disproportionately affected by COVID-19 among Asian subgroups

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Figure: Percentage of lab-confirmed COVID-19 cases (Asian cases only) by subgroup, Jun. 1 – Dec. 3, 2020





Source: California Reportable Disease Information Exchange (CalREDIE), Data retrieved 0700 December 10, 2020.

Case rates are higher among Vietnamese and Filipino residents relative to other Asian subgroups, but lower than other populations

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Figure: Cumulative rate of lab-confirmed COVID-19 cases by race/ethnicity and Asian subgroup, Jun. 1 - Dec. 3, 2020



*Native Hawaiian or Other Pacific Islander

Source: California Reportable Disease Information Exchange (CalREDIE), Data retrieved 0700 December 10, 2020.

COVID-19 Epidemic, Santa Clara County, Jun. 1 – Dec. 7, 2020:

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Case rate has been rapidly increasing among Vietnamese and Filipinos since early November

Figure: Daily rolling average rate of lab-confirmed COVID-19 cases by race/ethnicity and specimen collection date, Jun. 1 - Dec. 7, 2020



Note: Uses data from June 01 to December 07 due to a lag of 7 days.

HEALTHCARE SYSTEM PREPAREDNESS DECEMBER 15, 2020

Dr. Ahmad Kamal



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OVERVIEW

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- COVID-19 hospitalizations are continuing to increase significantly in both ICU and non-ICU beds
- **•** For now, hospitals have compensated by:
 - •Adding surge beds
 - Deferring elective surgeries (e.g., joint replacement, heart valve replacement, kidney transplant).
- However, hospitals' ability to further compensate is limited.

OVERVIEW



Ability to stretch is determined by: • Volume of patients • Rate of increase • Staffing • Supplies

COVID HOSPITALIZATIONS CONTINUE TO INCREASE





[EMResource 12/13/20]

HOSPITALS ARE ADDING ICU SURGE CAPACITY



[EMResource 12/10/20]

HOSPITALS ARE DEFERRING ELECTIVE CASES



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[EMResource 12/12/20]

BED AVAILABILITY REMAINS $\sim 15\%$

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[EMResource 12/13/20]





EFFORTS TO MAINTAIN STAFFING RATIOS

- Staffing continues to the be the #1 issue facing hospitals
 Staff exhaustion
 - Absenteeism due to illness and contacts with COVID+ persons outside of work
 - Unprecedented demand throughout the State and Nation for qualified nurses and HCW's
- Process of applying for waivers
 Hospitals submit applications to the State
 - State asks for County input
 - State approves or denies*

CDPH WAIVER REQUIREMENTS

- Describe cancellation of non-emergent surgeries
- Describe transfers to other hospitals
- Describe efforts to obtain additional staff, including contacting staffing agencies
- Describe management of vacancies and lay offs

SUPPLIES: PPE

Goal: To ensure all HCW's have access to PPE

5 M

4.0 M

3.0 M

1.7 M

7.0 M

N-95 Masks

Surgical Masks

Face shields

Gowns

Gloves Significant requests; constantly being replenished

14 12 12 10 Number of 8 requests filled in past 5 6 14 days 2 2 0 Clinics SNF/LTCF Hospitals First Responder Agencies

[Inventory Report 12/7/20] [WebEOC 12/11/20]

SUPPLIES: PPE

| PPE / Testing Supplies Requests | | | | | | | | | | |
|--|---|---|------------|------|------|--|--|--|--|--|
| Entity | / Name | | | | | | | | | |
| Entity | у Туре | ALF EMS SNF Hospital Laboratory First Responder Mortuary Home Health | | | | | | | | |
| | | City/Jurisdiction Private Provider/Dentist School County of Santa Clara Department | | | | | | | | |
| | | Other: | | | | | | | | |
| By requesting PPE or other supplies from the Emergency Operations Center of the County of Santa Clara, I certify that on behalf of the above-named entity ("Entity") that: | | | | | | | | | | |
| 1. Th in | The PPE requested will be used for a medical need/procedure that if not performed could result \Box YES \Box NO \Box N/A in serious injury or death. | | | | | | | | | |
| 2. Th tir | The Entity has completed the required PPE Survey (daily for hospitals, weekly for SNFs, one \square YES \square NO \square N/A me for all others if quantity thresholds are met). | | | | | | | | | |
| 3. Th pc | The Entity has tried extensively through all known vendor options and has exhausted all possible PPE procurement options prior to making this request. | | | | | | | | | |
| 4. Th th | he Entity un his PPE requ | e Entity understands that it may be billed, and the Entity agrees to pay the County's costs for YES NO N/A s PPE request in the future. | | | | | | | | |
| 5. PF | PE will be us | ed for the provision of clinical services in Santa Clara County. | YES | □ NO | □N/A | | | | | |

COVID-19 VACCINE PLANNING

County of Santa Clara

Dr. Marty Fenstersheib



12/15/2020

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COVID-19 Vaccine Update

| Manufacturer | Туре | Storage | Dosing | Notes |
|--------------|--|-------------------------------|------------------------------------|---|
| Pfizer | mRNA | Ultra cold storage (-70 C) | 2 doses, 21 days apart | 12/11/20: EUA approved by FDA for patients 16+ |
| Moderna | mRNA | Frozen (-20 C) | 2 doses, 28 days apart | 12/17/20: EUA review by FDA for patients 18+ |
| Astrazeneca | Adenovirus | Refrigerated | 2 doses, 28 days apart | Expect results in late-January and EUA application around that time |
| 1&1 | Adenovirus | Refrigerated | 1 dose 2 dose, 57 days apart | - Expect results in January; EUA application in Feb |
| Novavax | Recombinant Protein Nanoparticle | Refrigerated | 2 doses, 21 days apart | 11/30/20: completed enrollment of Phase III in UK; plans to start US trials soon |

First Pfizer Vaccine Allocation



Estimated arrival:

- •Local Health Department: December 15
- Acute care hospitals: December 18

| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|--------|--------|---------------------------------------|-----------|----------|----------------------------|----------|
| 13 | 14 | 15 Pfizer: PHD for SNF staff | 16 | 17 | 18 Pfizer: Hospitals | 19 |
| 20 | 21 | 22 | 23 | 24 | 25 | 26 |

Vaccine Administration for SNF Staff and Residents

Skilled Nursing Facility staff working in County will be offered vaccination by PHD beginning this week.

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 Skilled Nursing Facility residents will be offered vaccination through federal program using retail pharmacies (begins wk. of 12/28)



- Estimated arrival:
 - Public Health Department: December 22
- Re-distribute all 39,300 doses to acute care hospitals for

continued vaccination of Phase 1A population

| Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|--------|--------|---------------------------------------|-----------|----------|----------------------------|----------|
| 13 | 14 | 15 Pfizer: PHD for SNF staff | 16 | 17 | 18 Pfizer: Hospitals | 19 |
| 20 | 21 | 22 Moderna: PHD to hospitals | 23 | 24 | 25 | 26 |

Pfizer Vaccine Indications, Contraindications, Side Effects

- Indications
 - Approved for use in ages 16 years and older
 - Ok in persons with prior symptomatic or asymptomatic Covid-19 infection
- Contraindications
 - ACIP/CDC: Severe allergic reaction (anaphylaxis) to any vaccine or injectable therapy
- Common side effects
 - Injection site redness, swelling, pain
 - Fever, headache, tiredness

Pfizer Vaccine Administration

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- 2-dose series administered intramuscularly approximately 3 weeks apart
- Administration of 2nd dose within 4-day grace period (e.g. day 17-21) considered valid
- If >21 days since 1st dose, 2nd dose should be administered at earliest opportunity (no doses need to be repeated)

Both doses are necessary for full protection

Local Partner Engagement

1. COVID-19 Vaccine Providers Taskforce



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2. County of Santa Clara COVID-19 Vaccine Community Stakeholders Working Group

WASTEWATER PILOT UPDATE

Michael Balliet



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- Emergency Operations Center has been participating in local, state and national research and pilot programs on testing for SARS-CoV-2 in wastewater as an additional tool
- **•** The virus is primarily present in stool and can be detected in people who are asymptomatic
- Represents a composite biological sample of an entire community
- Currently working with Stanford University and all four Wastewater Treatment Plants (WWTPs) in Palo Alto, Sunnyvale, San Jose/Santa Clara, and Gilroy
 - Daily sampling and analysis is being performed with a 24-hour result provided to Public Health started December 1st
 - Project is funded for 6 months by Stanford University and their partners, so there is no direct cost to the County
 - Data is being evaluated in conjunction with other Public Health data sources
- The sampling and analysis procedures are still evolving regionally and nationally
- Data is promising, as it appears to track with trends in the clinical data

San Jose/Santa Clara Wastewater Treatment Plant



San Jose/Santa Clara Wasterwater Treatment Plant

Data Trends Include:

- Historical wastewater data appears to be consistent with the three waves in mid-March, mid-June, as well as the recent surge since early November
- Recent trends show much higher concentrations, consistent with the current surge

Countywide Wastewater Data



Countywide Wastewater Data

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- Data analysis and interpretation is still evolving
- Data Trends:
 - Variability from day-to-day can be high
 - Important to looked at trend lines, and averages over a period of time
 - Data can be used to track relative virus concentrations within these four distinct geographic areas
 - When used in conjunction with other data, wastewater data can provide a glimpse of viral trends in the broader community