- Good afternoon, my name is Michelle Shoresman and today is Wednesday, February 3rd, 2021. Thank you for watching today's San Luis Obispo County COVID-19 media briefing. This afternoon, we'll have two speakers for you. We will begin with San Louis Obispo County Superintendent of Schools, Dr. James Brescia. He will be followed by County Health Officer Dr. Penny Borenstein. They will take questions after providing their prepared statements. Once again, thank you to our sign language interpreter, Robin Babb. And now I'd like to introduce SLO County Superintendent of Schools, Dr. James Brescia.
- Thank you. Local K-6 classrooms have additional options to increase in-person instruction now that San Luis Obispo County's COVID-19 case rate has fallen below 25 cases per 100,000 population per day for five consecutive days. On January 14th, the California Department of Public Health released revised school guidance that allows elementary school grades kindergarten through sixth grade to increase inperson instruction with strict safety protocols on campus when the county is in the purple tier and the county case rate is below 25 per 100,000 population for five consecutive days. California Department of Public Health guidance allows schools to begin the process of putting their approved COVID-19 safety plans into action.

The health and safety of students in our county is a top priority. I thank the entire community for their continued support and adherence to safety protocols. County Public Health Department is working with my office, all school districts, charters, private, and parochial schools to ensure that our schools operate following state and county guidelines. So what does this mean to be open or reopened? Well, the current state criteria indicate for a school to be open, it must meet all criteria to reopen safely and give all students at least one grade option to return for in-person instruction for at least part of the school week. So that would be the entire grade of a kindergarten, the first grade, second grade, et cetera. Being considered open includes a school that has offered all students at least one grade option of receiving instruction only on certain days of the week, or commonly referred to as a hybrid model.

If only selected groups of students were receiving in-person instruction at the school, for example, students that have disabilities, students who are English language learners, et cetera, and all the students in that grade did not have the option to return, the school is not considered by the state as opened. This can be somewhat confusing and I would advise that people look at the state's website for additional information. Reopening for in-person instruction requires time and

resources to ensure safety. So the changes at school will include smaller class sizes, increased cleaning and disinfection, hand washing stations, ventilation upgrades, student mask wearing, and other safety mitigations.

All school staff throughout San Luis Obispo County are tested regularly. I, myself, just completed surveillance testing for my office. Not all elementary schools will offer in-person instruction at this time. Per county health and state health guidance, schools must consult with their staff, parents, community organizations, and their local boards must approve the changes to in-person services. Schools that are serving seventh through 12th grade students that have not already started in person services when our county was in the red tier, will only be eligible when the county returns to the red tier. Please consult local school district websites for additional information, the readyslo.org site for further details on COVID, and speak to your school administrators. Thank you again for your continued support in keeping our community safe and remember hands, face, and space will keep us safe. Thank you.

- Thank you, good afternoon. Good to see you all. I want to thank Dr. Brescia for this important information about schools. As you've heard me say many times that is the sector that I would most like to see returned to normal. It affects every aspect of our functioning in society. Children who have great needs, families who need to go about their lives with their children in school. So with that, Dr. Brescia's a member of our SLO County COVID Vaccine Task Force. And the task force in general is working very hard to try to take on these challenging decisions, not withstanding state and federal guidance about how we move through these phases and tiers. There's not enough vaccine as you know. So we have put a pause on the education sector but we are looking to move forward with that sector as well as other essential workforce, just as quickly as possible and I wanna express my gratitude to the task force members who have been continuing to, in their parts of the community, message this so that everybody understands where we're at and it's not a lack of desire on anyone's part or pitting one sector against another. We're simply waiting for more vaccine.

So COVID disease in our county continues to be high but the good news is we're continuing to see a drop off of cases. We've had more than 18,000 cases total in our county which means more than 6% of our total population have now been tested positive with this disease. Likely there are more who didn't get tested. But so we have, you know, a number of people who have tested positive but the majority of

them have really been in the last three months. In January alone we saw an increase of 82% compared to what our case reports were in December. Unfortunately, we're not seeing quite the same drop-off yet. We hope that we will in the coming week and weeks but our hospitalizations are still at a higher level than through most of this pandemic.

And unfortunately, we're still seeing deaths coming through. We're now at 187 individuals and families that have been affected by loss from this disease. That is 25 more than when I stood before you one week ago. 89 community members have lost their lives just in the last month and another 28 are in that category of likely COVID deaths but we've not yet received the death certificate. So I know that these are numbers and I always feel badly when I'm throwing out numbers as opposed to understanding that these are 187 individuals in our county who lost their lives from a preventable disease. So I ask of you as I always do to not ease up on the gas pedal at this point. Vaccine is here and yet we're still seeing very high rates of transmission and deaths that don't need to happen. So double down on all the production measures that we've talked about lo these many months.

I also wanna address one item that I hear a lot about, whether it's calls to the Board Of Supervisor, emails I get, there seems to be this mantra of 99.9% of people have no issue with this disease. They recover, everything's fine. And it really does depend what sector you're in. So that's absolutely true for individuals who are children or even young adults, but it's very different if you're in an older age group. There was in fact a recent MMWR report that showed that, you know, above the age of 25, of course it's variable, whether you're 30 versus 80, but in the adult sector, there's actually a much higher proportion of people that die. In our county alone, we're seeing, you know, close to 2% of deaths for individuals above the age of 30 and of course that's a spectrum. So the older you get, that's even higher. So I need to point this out on a regular basis that it isn't 0.1% of the individuals who get this disease who actually get hospitalized. That's a much higher proportion. ICU admission and even deaths, you know, 2%, 5%, much higher if you're in the very senior age grouping. So this is not the flu. 0.1%, 0.2%, a typical flu year. But with COVID-19 the impact is far worse than with the flu. I say that on a number of occasions but I do recall that a year ago, I probably was, you know, talking to my staff about, "Yeah, maybe this is gonna be a bad flu." I want our community to understand, if they haven't yet adapted that understanding, that this is very different and we now have

a year's worth of experience and 440,000 plus individuals in the US who have died from this disease.

With that I'm gonna turn to the good news, the light at the end of the tunnel, the vaccine. So we do continue to administer vaccine, a lot of it, as much as we can get our hands on, and particularly to high risk individuals. So the age group of 75 plus is our early entree into that Phase 1B. We continue to administer doses to healthcare workers from Phase 1A but most of them have had their needs met. Our supply to date, this is through last Friday, is 25,676 doses received and retained by the Public Health Department. With that 15,541 are first doses and just over 10,000, 10,035, are second doses. We in Public Health as of last Friday have administered over 15,000. Exactly 15,511 people in this county have gotten a dose of vaccine. So you can see that we have used virtually all of our first doses. Even in the second dose, about 20% of people who received a first dose have now been fully vaccinated with that second dose. So we are making also good headway on second doses.

Last week, we administered 6,000 vaccines which is a little bit lower than previously but that was with our weather conditions. So we retained some pride in the fact that we were able to do as well as we did under one of the worst storms we've seen in a long time. And this week we have booked appointments for 7,300 individuals, and that will be the greatest number of people getting a vaccine dose in our county, if all the appointments are kept. Our hospitals are now also getting into administering second doses as are Walgreens and CVS. They continue to administer first and now second doses in our long-term care facilities. French Hospital in particular has made some of their doses available in a community setting to people above the age of 75. And we have had the opportunity with our limited supply to provide some pharmacies with some vaccine supply. We would like to do a lot more of that. Again, we're waiting for more doses. So in total in the county we've administered vaccine at least one or two doses to over 15,000 people. We think with all the partners, the pharmacies, the hospitals, our state facilities that probably another 10,000 doses have been given or at least first doses. So we're closing in on 10% of our population having had the opportunity for a vaccine, if you put those numbers together.

As I mentioned, vaccine supply is definitely our issue and we are feeling that very acutely for the week coming. We had mentioned earlier in the week, we were going to expand our number of vaccines available this week and hope to keep pace with that next week. But our allocation has dipped. We received notice of only getting

900 doses next week and we're not sure what that's about, but with that we have had to make some very difficult decisions. And so given what we have in stock and what we are getting this week, we have had to make the very difficult decision to close for the entire week next week our Paso and our AG sites. We will remain open at our SLO site, which is at Cuesta College, but only Monday through Thursday. The reason that we need to do this is we want to operate efficiently. It makes no sense to put a couple of hundred doses in 30 people all day in three different sites. But really we want to get the most people with the staffing that we have and to operate efficiently.

The other reason for SLO site being the one to operate is we're focusing on second doses next week. We're gonna have both Pfizer and Moderna at that site as well as first and second doses. And so they're more seasoned, if you will, about being able to handle the logistics or the complexities of that. But we very much anticipate in the coming weeks that all of our sites will be able to handle first and second doses simultaneously. We are using Moderna at our outlying clinics, Paso and Arroyo Grande sites because there's less cold chain concerns with that product. And we're maintaining all of our Pfizer use at the SLO clinic. But this is not set in stone. We reevaluate every single week. So first doses, second doses, Pfizer versus Moderna, how many of each. It is an ongoing iterative process. But just to recap for next week, we will have one location SLO County at the Cuesta site. It will be focusing on second doses but also some first doses available at that site. And only Monday through Thursday and we'll reevaluate for the following week just as soon as we get more information on our supply acquisition.

We have made some changes in our system. We have been able to accommodate people without computer access. This has been from the very beginning, the phone system to help people make appointment. But one important change that has happened is we've added an automated system to that phone operation so that people won't just get a ringing off the hook or busy signals. We heard people's frustration. We equally wanted to move in a direction to accommodate a waiting process and we now have that in place this week where people are queued up, the same kind of thing you might have with any other busy business, where you get a message that says, "You are X number in line. Your expected wait time is thus and such." You can decide if you're gonna hold on or if you're gonna call back and hope for a less busy time in the future. But this system seems to be working very well for us. Thank you for the feedback that we've gotten and we've made that adjustment.

We do expect that next week we will, I'm sorry, this week, so tomorrow is Thursday. Per usual we will open up the online system for appointments at nine a.m. tomorrow, again, with it being this reduced number of appointments that we're able to accommodate for the following week.

I do wanna say one more thing. I mentioned this, I think, last week but it is worth repeating about second doses. We have now started to hear from a large number of people who have gotten their first dose and did not get their second dose appointment or have not had any communication from us or the electronic system about when and how to get their second dose. This is similar to what I've said about first doses is we have made the decision to not make appointments far out into the future, to do it week by week because we think it is a worse situation for people to feel secure that they have an appointment only for us to have to cancel. So we only invite people to make appointments when we are sure that we will have a dose in hand for them. With that it means that second dose, people who are awaiting their second dose may not be hearing from us in exactly the timeframe that they would expect to get that second dose. So if the dose is under ideal conditions due in three or four weeks, they would hope to hear from us from two to three weeks to make that appointment. But because we are having to delay some of those second doses, people should expect that they may not hear for us as far out as five weeks. So we're available to help with questions but please do trust the system that we will reach out to all people who got their first doses through us when it is time and there is appointment capacity for them to make an appointment for that second dose.

The other thing that is been a blessing from one of our partners is SLO Regional Transportation Authority is helping with getting people to vaccine appointments, those with mobility issues or without transportation, at no cost, round trip, to go door to door from home to a vaccination clinic. So those who need that service through RTA Runabout, can call 805-541-2544.

Next, I want to address how we continue in our community to tamp down where we are with this disease. It's great that we're seeing vaccine but as you heard me mention, we still need to all do our part to get from where we are now, which is the purple tier, through the process that has been resurrected. Now that we are not under the regional stay-at-home order, we're back to the Blueprint for a Safer Economy. So that means we want to move as quickly as we can from purple to red

and so on. The good news is that we are seeing progress over the last couple of weeks.

Our main metric, our case rate per 100,000 population unadjusted, our raw rate, is 41 per 100,000, but our adjusted rate is 22.6 per 100,000 population. We're still a ways off from red, which needs us to be at seven, not 22, but we are making progress. The other implication of seeing that adjusted rate is how strongly the testing is operating in our county. We actually this week have had the highest testing rate in the state of California. So that helps us quite a bit in making progress toward further openings. It also, as you heard, Dr. Brescia talk about, at this adjusted case rate under 25, it allows us to move forward with further elementary school opening. The other area that we're proud of the progress that we're making is with respect to our test positivity. As you'll recall, that's one of the other metrics. So countywide our test positivity has gone from 5.9 to 5.5. So we're within the red tier on our test positivity. And also we are in that tier, we're at about the same rate close to 6% on the health equity quartile. So that's our most vulnerable 25% geographically of our population. So in order to move to red, we need our case rate down to seven, our adjusted case rate. We need our test positivity below 8%, which it is, and we need our test positivity in our lowest quartile also to be below 8%. Those last two factors have occurred. We now need to continue to work on getting our case rate overall down.

Lastly, and I wanna put up one slide on this, it's just to remind folks what the next opportunity is for gathering in our community Super Bowl is upon us and this is a time in our American society and SLO County that people tend to gather in homes, indoors, eating, drinking, and we saw the effects of those types of gatherings going back as far as Halloween. You can see on this graph we had a surge right after Thanksgiving. We had a surge right after Christmas. We had an additional slight surge after New Year's and now we have been able to come down. We do not want to see this graph go up because of Super Bowl. So I'm gonna remind folks to please do your part in celebrating in other ways, Watch the game together on Zoom, rate the commercials, share your recipes, do everything but come together indoors across families and celebrate like a boss. So brief, outside, small, and symptom-free. And remember to continue all the other things that have made a real difference. They really do make a difference, wearing face coverings, keeping your distance, staying home when you're sick, washing your hands regularly, and not gathering. And with that, I will open it up for questions.

- [Man] Dr. Borenstein so 900 doses coming in next week. Remind us what have you been seeing over the last month or so. Has it been a couple of thousand? I'm trying to remember.
- Yeah.
- So it's a dip down, right?
- It is. This is one of our lower, I think, our lowest ever was 600. We had one that was 975. So this is quite low. We've had as much as 5,000 in the past. It continues to be inscrutable and somewhat erratic. We continue to try to understand what the formula is at the state level. I know it has to do with the estimates of certain populations. So the Phase 1B populations, the Ag and food workers, education, childcare sector, emergency services, you know, but, I know I look across. We get information about what each county is getting on a week over week basis and sometimes we're better than some of our counties of our size and sometimes we get less and I'm continuing to try to understand that. But the next week in particular is not a happy allocation for us.
- [Man] Yeah, you kind of answered what I was gonna ask you next is have you been able to see what some neighboring counties are looking like for next week? Is there a drop there or was it just there's really kind of no science to it?
- I believe there is a science to it. I just don't know what the formula is.
- [Man] And also a lot of people are curious when that next phase of people 65 to 74 will be eligible? Any insight on when that may occur?
- So I believe we're making very good headway on vaccinating everyone over the age of 75 who wants a vaccine. We're trying to do additional outreach to that population for those who have not gotten the message or maybe need some support in believing it to be safe and effective as it is. So we're trying to do more outreach to that population, the most vulnerable group. But I think within the next couple of weeks we will have the capacity to expand.
- [Man] Dr. Borenstein in regards to those who get in-home care, but they're vulnerable in terms of their health, how soon will those folks be able to get vaccinated if they haven't been already?
- Yeah, so at the present moment that group unfortunately is not considered in the first tier of this Phase 1B. Workers in those homes are considered healthcare

workers, people who are taking care of whether they're elderly or disabled individuals with face-to-face contact. Quite a few of them have gotten vaccinated. The persons with the medical conditions or disabilities themselves have not risen to the level of the next tier. I know that there is a lot of conversation going on about that at the state level and we're told to stay tuned for possible reconsideration.

- [Man] And if someone has had COVID-19 recently, how soon should or could they be vaccinated?
- Yeah, so as I've said on a couple of occasions, that's a good reminder to the general community. If you're safe at home, if you're not interacting with people, or if you have had COVID in the last three months, please defer your vaccination as you understand that the demand for that vaccine supply outstrips our supply. So people who have had COVID within the last 90 days should wait at least until that period passes and we may have more supply available.
- [Man] I had a couple of questions for Dr. Brescia, if that's okay.
- [James] Sure.
- [Man] Hi, Dr. Brescia. Just wondering if you've heard of any specific school districts that are getting ready to open how soon that could be? What are your feelings about how quickly that could happen?
- All of the school districts have been informed of this information, all of the private schools, parochial schools, and I know it's varies across the county with each local governing board. Some still have to go back and consult with their stakeholders and their community groups. I think you'll continue to see districts across the county increasing in-person services.
- [Man] And how are teachers feeling about this, if they haven't been vaccinated yet? What conversations are you having with them about that?
- I can only speak for my own staff. I think there are mixed feelings. People are anxious. They want to be vaccinated as soon as possible. And then there are those that are concerned, a larger number are interested in being vaccinated than those that are concerned though.
- [Man] So final question. At this point how well is virtual school working and do you have concerns about that or is it going to your satisfactory?

- I think consistently all educators and families agree in person is the optimum and that's really where we want to go. That being said, our schools, our employees, our families, parents, students are making tremendous effort to allow virtual learning to work as well as possible and there are some students who prefer this mode of instruction. So I do think as we come out of these COVID conditions, we will start to see options for virtual or online learning expand.
- [Man] Question for you, Dr. Brescia. Let's say a school district now they have this information, they hope to move forward with returning in-person instruction, how quickly would that process be under optimal circumstances?
- It would depend on where they are with their governing board on approval for this. Theoretically if they had approved it already, they could move forward within the next week or so. I would anticipate the school districts may take a little longer than that. School boards move a little slower.
- [Man] Just one last thing. And you mentioned that certain grades levels might be a little bit more prone to this. Is there any preference about which grade levels or how that could play out if you had to stagger?
- I'm sorry, I'm not. It's allowing kindergarten through sixth grade.
- [Man] Sure, yeah. So any of those, I mean, would they happened at the same time or would you have to stagger grade levels?
- That's probably gonna depend on staffing availability and I know most districts are doing some form of pod or primary grade instruction at this point today.
- [Man] Okay. Thank you.
- Any other questions for either of them? Thank you all, once again, for being here today. A few updates and reminders. Our Phone Assistance Center remains open seven days a week from eight a.m. to five p.m. Staff there are available to answer questions from members of the public or to help individuals make appointments at the vaccination clinics, if they do not have access to the Internet or a computer, or just have trouble accessing and using a computer. We also continue to maintain our Public Health Information Line recorded message. readyslo.org remains your main online source for information about the county's COVID-19 response and recoverslo.org/vaccine is the best place to go for information about vaccine and our county's vaccination efforts. When it's your turn to get vaccinated, you can also go to recoverslo.org/vaccineappointments. New vaccination appointments for next

week, as Dr. Borenstein mentioned, will become available tomorrow morning at nine a.m. However, you can also check back weekdays to see if any new appointments have been made available due to cancellations. And if you've made an appointment and cannot keep it, please cancel that appointment as early as possible so that we can make those appointments available to somebody else. COVID-19 testing continues in five locations around the county and in the coming weeks there will be some changes and some expansion of hours. So please go to readyslo.org for the most up-to-date information and links to where you can make appointments. You can watch these briefings live on the county's YouTube channel and they are frequently live-streamed on the KSPY and KEYT websites. They're also rebroadcast on SLO County Public Access Channel 21 at midnight, eight a.m. and five p.m. until the next briefing occurs as well as posting on the Public Health Facebook page right after the briefing occurs. Thank you once again for staying informed. Be well and we'll see you here next Wednesday, February 10th at 3:15 p.m.