- Good afternoon. Today is Monday, April 6, 2020, and you're watching the daily media briefings for the County of San Luis Obispo, COVID-19 emergency response. My name is Michelle Shoresman and I'm the designated media contact for the public information team. Thank you to all the members of the media and those of you at home for tuning in and watching today. This afternoon, we have five speakers for you. We will begin with Emergency Services Director and County Administrative Officer, Mr. Wade Horton. He will be followed by a County Health Officer, Dr. enny Borenstein and then after Dr. Penny Borenstein, We have three local physicians here to talk with you today. First, we have General Vascular and Thoracic Surgeons, doctors, Eddie and Howard Hayashi. Next we have Pediatrician, Dr. Rene Bravo. And last we have an Emergency Room Physician, Dr. Rushdi Abdul Cader. After our local physicians each make their statements, all the speakers will be available for questions and as a reminder, please remember to repeat the question before you answer it. Thank you again to Robin Babb, our American Sign Language Interpreter and now San Luis Obispo County Emergency Services Director and County Administrative Officer, Wade Horton.
- Thank you. Good afternoon, Wade Horton, County CAO and Emergency Services Director. on top of all the hardships we're facing, our community grieves the loss of one of our neighbors from North County, who was the first patient here to succumb to this disease. The patient passed away on Saturday and our deepest sympathies and condolences to their family. This death is a stark reminder why we are staying home. We need to protect the most vulnerable among us. I know these past few weeks had been hard. I know people are giving up a lot right now. Thank you for doing what is right. For those of you at home worried about the basic necessities, there is help. Please visit our Virtual Local Assistance Center on ReadySLO.org to connect with resources that can help you get food on the table and to pay your utility bills. I'll now turn it over to Dr. Penny Borenstein. Thank you.
- Thank you, Wade. So I have new numbers for today, but they actually are not new. We have not seen an increase from yesterday. We're at 95 cases in this County. We have been very slowly ticking along over the last few days. And one of the reasons we think that is the case perhaps is that we're not seeing as much testing as we would like. So I wanted to address that issue today as my predominant message to the public. We continue to test in the Public Health Laboratory at about the same rate that we have and we believe that our private labs have also been testing quite a bit. As you know, I've been saying that we are challenged to get the numbers of total tests that have been done in the commercial laboratory sector and we are still working at that. I also have heard from a number of individuals that neighboring counties seem to have those numbers. And I had the opportunity today to look to my counterparts North and South and the numbers that they are showing, and I believe that we are at about the same pace, and here's why. So Santa Barbara, I actually have just in communication with their health officer and they're showing about 1400 individuals tested. In Monterey County, also about 1200. We are a bit over 500, but that's without any count from our private laboratory sector. When we were getting information, we believe we're in the range of 150 to 200 lab tests done per week for our residents, and it has been about three weeks since we've been able to bring you those numbers. So I believe that the amount of testing in our County really does not differ from our neighbors. Nonetheless, we are gonna continue to really push with the State and the laboratories to fix what I have been told is a bit of a technical issue in terms of the electronic laboratory reporting system. Understanding why our

neighbors are reporting those numbers and we are not, is they have told me that they've been getting numbers from some of their clinicians as to what numbers they're testing. But those are people who ordered the tests, not actually produce the test results. And so they're very uncomfortable with their numbers as well. None of that is good, we would like to be able to bring to the public a real understanding of how much we are testing. And more to the point is we ourselves would very much like to understand what the number of tests are and what our positive rate is. We'd like to understand if indeed what we are seeing that 10% of all tests are showing positive. Is that truly a sign that there is much more other respiratory disease than this disease continuing in our County? Are we just not capturing all the people with mild illness? So toward that end, we have made a number of changes in our recommendations. First and foremost, we pushed out to our healthcare workers, our healthcare clinics and private practices last week that they no longer need to check in with public health. If they order a test, we will do the test. They need to consider even mild symptoms. So all along we've been saying the predominant symptoms are fever, cough and shortness of breath. But we as we understand this disease as we're beginning to see more of it. People are presenting with other symptoms and maybe not fever. So whether it's sore throat or a bad cough with that and some cases, runny nose and some cases, even diarrhea, not so much diarrhea as the only sign of disease. But even these mild symptoms, we are really asking our provider community and our urgent care centers to keep doing what they're doing, to test as much as they can and to not be dissuaded by people presenting with even these lesser symptoms. We want that message to go out to the public very much so as well. We think that perhaps the public has ceased even trying to get a test because early on the message was there aren't enough tests, there aren't enough tests. We believe that anyone in this County who wants to get a test at this point can, if they go to the right place. And let me be clear on that, having made a very dramatic statement, let me walk that back a little bit. So still we are not offering people who have no symptoms the opportunity to get a test. Yes, there are probably people who have this disease who are in fact showing no symptoms at the time of their disease. They may never develop symptoms or they may develop symptoms two, three, four days after they actually have the disease. Those individuals who are without symptoms are still not in a position to get a test, but people who have any manner of this constellation of symptoms, be it fever or not or very low grade fever with cough, with sore throat, with runny nose, body aches, chills, tiredness, any kind of constitution like that with or without diarrhea should be able to present to their healthcare provider or an urgent care setting and actually get tested. If they are unable, we still at public health very much want to hear from people if they are running into challenges getting tested, if they have symptoms. And the phone number for getting that assistance from the Public Health Department is 805-781-5500. Let me say that again, the phone number for getting assistance with finding your way to a test if you have symptoms of a respiratory nature is 805-781-5500. There should be no cost to any individual regardless of your insurance status in getting a test. And again, as I said, we have asked the providers to not go through the Public Health Department for preapproval. So with that, that is the main thing that I wanted to talk about today. I also have invited some of my colleagues to talk about the experience that they're having from various sectors of the healthcare community. As you heard, we're gonna be hearing from doctors, Eddie and Howard Hayashi who are community surgeons and they have one perspective. We also have a Pediatrician with us, Dr. Rene Bravo and we have an Emergency Room Physician, Dr. Rushdi Abdul Cader. And they will all tell you about from their perspectives what they are seeing and experiencing with respect to this disease and how we in the County are working across sectors to be of one voice and to be coordinated with our

healthcare partners in our response to this emergency event. So with that, I'm gonna ask Dr. Eddie and Dr. Howard Hayashi to come up. Thank you.

- Good afternoon. We first would like to thank everyone for those everyone at home, that is, for your care, compassionate, and kindness while our community is trying to slow the spread of the Coronavirus. Right now, it's still very, very important for all of us to do our part. This means limiting your activities, travel and business to those that are really only basic and essential. Maintaining a safe six foot social distance from each other at all times. And avoid gatherings, groups, and crowds outside of your immediate family or household.
- As a surgeon, we've even extended these preventative measures to canceling elective surgery. This is to protect our patients and to allow our community hospitals all the essential needs that they have to care for our County's COVID patients, but as surgeons, we're always available to take care of any urgent needs and any necessary surgery. It's only the non time sensitive surgery that we're not doing right now and we're delaying so that we can take care of our COVID patients. Now, be clear this does not mean staying at home at all times. Please, continue to do your exercise, walking, hiking, wherever it's permitted. Get fresh air, go to your medical, dental, veterinary appointments, get takeout and delivery from restaurants. Do your gardening, do your grocery and your pharmacy shopping. We understand that these times are difficult, but it's important to sustain your physical and your mental health.
- Hi, I'm Dr. Rene Bravo and I've had the privilege of practicing here for three and a half decades. As a pediatrician, I want to urge the local community, especially parents of teens and young children to listen to the public health experts in the medical community. If your teen or child is sick and you feel very concerned about them, then please get them tested as soon as possible. Gratefully, children are less susceptible to serious complications, but they still should be tested. I also want to take this opportunity to thank County Public Health Officer, Penny Borenstein. She and the County had been working with the local health community and the larger SLO County to reduce the spread of this disease. I have been incredibly impressed at the communication and the day-to-day collaboration that I've seen. Together we are on the front lines as she stands with us, thank you, Penny. It's important for you at home to know that the local medical community stands arm in arm with the County as well. We are all working together to fight this disease. This is a strange and rare time. We understand that people are afraid. I see this everyday in my office, but I can assure you that I, along with my colleagues in the local health community agree SLO County is going as far as we need to go to stop this. We've been in close communication daily about this crisis and we do greatly appreciate all the work that the County has done to help local healthcare providers prepare and continue keeping the community informed. We're going to get through this. It's all going to be fine. And that's the message that I am constantly conveying to all the patients that I have out there. Thank you.
- Good afternoon. My name is Dr. Rushdi Abdul Cader. I'm a UCLA trained emergency physician. I'm a kind of a newcomer to the community compared to the Hayashis and the good, Dr. Bravo. I've only been

here for 20 years. This is our home, and we're fortunate to have people like these good doctors, like Dr. Borenstein, who has been reachable at all hours of the night. I've actually had conversations with her at two in the morning discussing a COVID possible patient and she's always been there. She's kind of our local Anthony Fauci, so to speak. I wanted to touch on a few concerns that people in the community have expressed. When it comes to emergency care in our County. You know, we see some of the stuff in the media and I think people are scared, people are concerned. We see what's happening in New York. And I want to reiterate resoundingly so, that it is safe to go to the emergency department if you need emergency care. Once again, it is safe to go to the emergency department. In our hospitals we now have layers of screening questions that we've asked screenings of temperature. We keep our patients at safe distances. It is a safe place to go and get care if you have an urgent condition. And the reason I mentioned this is because we are seeing in our emergency department cases where people may have had a gastrointestinal bleeding for example, and they said, I'm not going to go in for a couple of days. And then they come in and they're very sick. So if you have an urgency, the emergency department is there, it's open and we are there to take care of you. In the coming weeks, service to hospital, one of our local hospitals, we'll be launching a telemedicine portal. I have to always avoid touching my face nowadays. We have a telemedicine portal that will allow for virtual encounters between patients. And so this is going to be coming up in the coming week. It's an opportunity for patients. I wanted to touch on a couple of other things. If you have minor symptoms, not requiring emergency care and you wish to have COVID testing performed, call your local provider. Use a ReadySLO.org for a list of providers, that's a resource for you. Also this is a good time. If you're a smoker, this is a great time to quit smoking. It's a fantastic time. Tobacco will paralyze the little Cilia inside of your trachea bronchial tree. Quitting smoking is going to put you at better odds when it comes to COVID-19. Other things, if you are an excessive alcohol user or have illicit drug use issues, now's a good time to look at that and say, let me quit. It will eliminate our emergency rooms from being impacted with emergencies that are times avoidable. The last two things I'd like to mention is that we should all take a look and see what we can do for those people who are vulnerable. There are some of us who are preppers that we're prepared, you know, went out and bought all the toilet paper. Those types of things. Well, if you have a lot of toilet paper, maybe it's time to give some of the things that you collected to other people to help other folks out, especially people that are vulnerable, people that have lost their jobs and really are on that last paycheck. It's an opportunity to help. Every generation has people that are called upon to put themselves at risk to protect the lives of others. And when I turned to my colleagues in medicine, our EMS workers, our techs, our doctors, our nurses. This is you in the face of this pandemic, you've been called and this is your time. And so I want to thank all of you for putting yourselves at risk. I want to tell you that I'm proud to stand with you on the front lines. With that, I will hand it over for questions and you've got a handful of people to be able to answer. Thank you.

- [Reporter] I'll start off with Dr. Borenstein, as always on Friday we had a lot of discussion about masks and the use of those, since it's been out a couple of days, is there anything you'd like to pass along about the potential use of masks whenever you go out in public like we are right now?
- Sure, the question is, is there anything that public health or the County wants to say about recommendations vis-à-vis of masks in public? I put out a viewpoint today in our local newspaper, The

Tribune. And we are and have been since the information started to flow about how much of the disease may present without symptoms that wearing a face cover is potentially a way to additionally prevent spread. So again, I wanna emphasize that wearing that face cover is to prevent the person wearing it from spreading germs that they may not be aware they have to others. There are situations in which that may be very important, especially when distancing is not possible. So whether it's our food workers or grocers, some have begun to put up plastic shields, others have not. There are situations our law enforcement now are largely law enforcement as well as fire. Medical responders, EMS where they have to put themselves in direct proximity to people. They are beginning to use universally face covers. So our message from this County is where it's warranted and when used correctly, it is recommended. We have not gone as far as at least one County to the best of my knowledge in ordering it that all people at all times in public should, not should but shall wear face covers. We are not at that point in this County. For a number of reasons, one is we are doing well thus far with the mitigation measures we have. I in no way want that to be misconstrued as we've arrived, we're done, let's move on. But we don't see right at the moment the need to take this even more what I would call perhaps draconian measure of asking that all people at all times in the public sector regardless of where they are, wear a face mask or face cover. The other reason is they are subject to be used inappropriately. Give people a false sense of protection. Be messed with all the time. I've been watching the population take up the practice of wearing face cloths or face masks and that has to be done with some measure of care. It may seem like a simple thing, just put a bandana over your face and you're good to go. But people mess with it all the time. People are coughing and spitting into their mask potentially. They're uncomfortable, they take them off, they touch them, they put them down, they put it back on. So if one is going to as recommended, be in a situation where they cannot use distancing as their primary means of containment then use them but use them properly and make sure that you avoid messing with it, touching your face. Make sure you're washing it on a regular basis, daily at a minimum. The other reason is we don't have still today enough supply and for the general public to use surgical mask, face mask, N95s. I see many members of the public using N95s. And I again want to implore our community to save those medical grade masks for the people who are delivering direct healthcare to patients in hospitals, in clinics who have this disease. So the message is in short that this additional layer of protection is just that, additional. In situations primarily where distancing cannot be done and not in exchange for all the other measures like hand-washing, like staying home when you're sick, like for some avoiding going out at all. If you are in your upper years in the 80s, or you have significant medical conditions but it is a recommendation from public health that this is an additional means of reducing the spread in our community. Yes, Melissa.

- [Melissa] The president had said like the next two weeks are going to be the peak for the country with cases. Is there reason to believe that in this County we're getting close to that peak as well?
- So the question was, the president of the US has said that we should expect the peak in our country within the next two weeks. What do we think locally in terms of our peak? I think that different communities, different States, different counties within States, even subpopulations within Counties are not seeing the same trajectory of spread. We know that the Bay Area in California started probably at least two weeks before us. We know that New York is undergoing what we hope is their peak because if

it's not, things are only gonna get worse in an already very bad situation. I don't believe that we've seen our peak. And I have a really hard time telling you when we will, all of our models have proven wrong. And not wrong, let me just say they need to be adjusted. Our models are only as good as the day that we put in the information. And I think I had stood here several times and said, we expect to see a case doubling every three to five days. We're not seeing that right now. Again, the reasons for that, maybe some combination of we're not testing enough and, or we're doing a really good job with the mitigation measures that we have in place. But we have to stay the course because many people in our community are still very much at risk of getting this disease. And all of these intensive measures that we have in place with physical distancing are to avoid getting to a peak that's beyond our capacity to take care of folks. So when that will be, is very hard to predict, it may be in two, three weeks, it may be longer than that. But I don't think we are going to experience that same peak in every place across the United States at the same time. That's good news because as you know, our governor is sending ventilators to New York. We certainly hope to get them back when they cease to need them. So I think it's a good thing if we don't all peak at the same time, but the predictions are very hard to come by.

- [Reporter] And just to reiterate, there are enough tests for everyone that would want one or needs one, I guess?
- So the Public Health Department continues to have its relatively limited capacity. We continue to prioritize the highest need individuals hospitalized patients, longterm care, first responders, emergency workers ourselves. And we will go up to the capacity that we have available. Beyond that, we're since we did another survey late last week. There are a lot of places that are offering testing across the County. You heard one of our doctors mentioned that you can go on ReadySLO.org to figure out where that is. Our community health centers in Central Coast are testing, in most of their locations, urgent care testing. Many private doctor's offices are testing. Our emergency departments, I've begun to speak with them about opening the door for sick people who need to come to the emergency room. They may not all need admission. But we're going to begin to ask them to not turn people away. If they're sick enough to need the emergency department, still, please do a test. And so I think my short answer to the question of do we have enough tests for anyone who needs one or should have one? My answer today is I think that we do. And until everyone responds to this call that I've put out today for go get a test if you are sick. If we begin to see that we exceed the capacity, we'll adjust in the moment. But I believe that today that there is a lot more testing capacity than people are taking advantage of.
- [Reporter] Penny, I have a question for you. How is it going with the Cal Poly center? And do you expect to have other counties send patients to the alternative care site?
- Yes, I can partially address that and perhaps, Wade Horton would like to also chime in. So we are slated to open with a bit of a soft open later this week. I'm sorry, the question was how is it going with the planning for and the opening of our alternate care site at the Cal Poly campus? We are prepared to open, we are getting rapidly all of our policies and procedures in place. The facility is ready, staffing

continues to be our rate-limiting step. But we believe we absolutely have enough staff to start with whatever the first wave of patients may be. Our hospitals continue to have a lot of capacity right now. That's a good thing. But we want to be ready for them if and when they reach the limits of their ability. The question about will we take people from other jurisdictions? The short answer is yes, but I'm going to turn over to Wade to address that more fully.

- Thank you Dr. Borenstein. As Dr. Borenstein mentioned in regards to the peak, we're not certain when the peaks going to hit. All we can do is make sure we're ready for it when it does. And I believe there's a lot of the communities come together to be ready. And that's what opening this alternative care site is all about. We've partnered with the medical community, we partner with Cal Poly and the private sector to be ready to take care of our community if needed when the peak comes. So in regards to the question, are we going to partner with other counties? Are we going to take care of folks who are the other counties? We created the alternative care site for San Luis Obispo County to take care of San Luis Obispo residents. However, in the case that we have capacity and we have the counties in the North and South of us are in need, we certainly will take care of everyone we can. I think California is in this together. I think that we need as not only as a County, but as a region, we have to be ready to take care of our constituents and if we have capacity and we can take care of residents to the North and South of us, we will do that.
- [Woman] Just a follow up to that in terms of like the process of care at the care site, is there a point in sickness where they would get transferred back to the hospital?
- So the question is, is there a point at which patients admitted to the alternative care site would need to go back to the hospital or be readmitted to the hospital? And the answer is yes. We hope that that will be a relatively small percentage. But if someone is proving to have in the course of their disease challenges that merit of the level of care that you can only get at a hospital, they will absolutely be transported by ambulance from the alternate care center to the hospital. We have on alert emergency medical system to do just that. And and we have health care staff onsite who will be able to make the determination about when someone is getting into trouble and will need that additional level of care.
- Thank you all again for being here today members of the media and for the members of the public tuning in at home. A few new announcements and reminders today. We now have three safe parking locations available throughout the County for people without homes to park their cars and stay for the night. These are located at Los Osos Library, the San Luis Obispo Vets Hall and the Coastal Dunes RV Park and Campground in Oceano. That information and all the details are on ReadySLO.org We've also been getting lots of questions about resources available in Spanish for those needing it. All our media materials are available in Spanish on our website ReadySLO.org All you need to do is go to that website and select Media Releases or Press Briefings and it's all their links in English and Spanish. Finally, recorded public health information line and phone assistance center remain open seven days a week and we are still recruiting for members of our Medical Reserve Corps, so please go to ReadySLO.org to

sign up for that. Thank you again for tuning in today. Our next regularly scheduled briefing will be Wednesday here at 3:15. Please remember, you can watch on San Luis Obispo County Public Health's Facebook page or on our County website as well as tuning in on KCOY or KSBY. Thank you, be well and we'll see you on Wednesday.