- Good afternoon. Today is Wednesday, April 22nd, 2020. Thank you for watching today's San Luis Obispo County COVID-19 media briefing. My name is Michelle Shoresman, and I am the designated media contact for our public information team. This afternoon, we have two speakers for you. We will begin with San Luis Obispo County District Five Supervisor, Debbie Arnold, and she will be followed by County Health Officer, Doctor Penny Borenstein. County Administrative Officer and Emergency Services Director, Wade Horton, is also here and is available to take questions. Speakers, please remember to repeat each question before answering, and thank you again to Robin Babb, our American Sign Language interpreter. And now, San Luis Obispo County District Five Supervisor, Debbie Arnold.
- Thank you Michelle. And today, I'm pleased to announce updated guidelines for businesses and activities. We know some residents are concerned that we're relaxing restrictions too fast, and others are concerned that we're taking too long. I wanna assure you that our decisions are based on data, which include our case count, and hospitalization trends for the last 14 days. As we developed a phased re-opening plan, we're also continually analyzing businesses and activities which can be partially reopened under the County's order, and is consistently the Governor's order. We've been working on ways we can start to relax restrictions and guidelines under the current shelter at home orders, based on the current COVID-19 status in our county. We look forward to returning to business as usual for now, we still need to follow the shelter at home orders in place. Doctor Borenstein will clarify today four areas that were revisited, including houses of worship, janitorial and house keeping services, fabric stores, and drive in theaters. Many other county services continued during this current crisis, the County Department of Planning and Building's counter is still closed to the public, but department staff is working remotely and available to answer questions and process permits. New construction can now begin, in addition to ongoing construction that was considered essential under the original order. The department has begun processing all new applications for building permits and land use permits. Permit applications are now being accepted electronically. To access our online system, or for more information, please visit the departments website. Staff has been continuing to process applications that were already received, so if anyone has questions on projects that are under review, applications can, under review, or applicants can contact their project managers. The County Public Works Department continues to be hard at work during this time. You may have seen County Public Works road crews out and about, continuing to maintain and repair local roads and prepare roads for upcoming pavement management contracts. On April 27th, they'll begin a bridge repair project in Templeton, on Templeton Road at the Selinas River Bridge. We resumed water deliveries from Nacimiento water project, Paso Robles, Atascadero, and San Luis Obispo, by repairing a leak temporarily. A contract is complete, Contract, excuse me, to complete the permanent repair was approved by the board yesterday, at our April 21st meeting, and is being released for bids from contractors. Public Works utility staff continue to provide safe drinking water and treat waste water to maintain public health in several unincorporated communities in San Luis Obispo County. And our Sheriff's Department, CAL Fire, continue to work hard to ensure the public's safety and respond to incidents as they arrive throughout the county. I know here at the County's Emergency Operational Center, they're doing all they can to get this virus under control so that we can get back to normal. Lastly, I wanna take a moment to recognize a local business who has stepped up in this great time of need. The County already partners with SLO Food Bank to deliver free food and medicine to self isolating seniors, and individuals with chronic medical conditions. The creativity, ingenuity, and community spirit individuals and businesses have shown throughout this

pandemic has been heartwarming. The latest example of that is Lemo's Feed and Pet Supply has agreed to donate 4,100 pounds of pet food to our free food delivery program. I'm happy to report that 84 bags of cat food, 224 bags of dog food, are in a truck currently on their way to San Luis Obispo. We expect to begin delivering dog, cat food to residents as part of our free food delivery program, sometime this week. And I wanna say thank you to all that are helping do all they can and stay safe everyone. And with that, I'd like to introduce Doctor Penny Borenstein.

- Thank you, Supervisor Arnold, always good to hear some good news. We continue to have good news in this county. We have an uptick, we're now at 142 cases, which if people are paying close attention day over day, that's a little bit more than what we've seen over the past few weeks, but if you recall the last time I came before our public, I said we are not gonna react by a single day's. Ya know, if we go from four to eight or ten, that does not a trend make. And so, I'm not particularly concerned about seeing a slightly higher number today, of importance is that we continue to only have one person in the hospital, and that remains good news. We continue to do our lab testing, and we have done a number of community outreach events and I'm happy to report that none of those, whether it was through homeless settings or pop up clinics, have revealed even a single positive. So, it remains good news. And with that, we continue, as you heard Supervisor Arnold mention, to look very closely at the state's order and our own order and see what we can do, even in advance of a comprehensive plan. That meets the intent of those orders, and the letter of the law, but that gives us some leverage to move forward in bringing our community back to some manner of commerce and community activities. So, with that, you heard that I would mention four more areas today, and those are as follows. So with respect to congregations coming together, houses of worship, churches, synagogues, mosques, we want to make sure that the community knows that we can approve those services taking place in a parking lot, at either the facilities themselves or other designated places, as long as people remain in their cars and continue to observe the tenets of physical distancing. Again, that people not congregate physically even though their cars may be doing so on a parking lot. In addition, we strongly recommend that during the course of those religious services, that no material pass between people. No objects, or plates, or foods or what have you. So that's one area. The second is in the area of janitorial and house keeping. Many of our larger facilities have continued and needed to, especially essential services, to have janitorial services. We have taken a hard look at the aspects of proper health and hygiene, such that we need in some settings to have housekeeping available, especially for people that we are asking to remain in their homes. There are a number of elderly people who perhaps can't even change their own sheets. They don't need home health care, but they may not have the physical strength to do that kind of activity. And so, housecleaning is being added to our list of approved services, again, with all the due precautions of social distancing, we recommend mask usage if there's another person who's going to be within the six foot distance, but that is one other service that we can slowly bring back. Thirdly, along the lines of masks, we believe that fabric stores can provide services and the reason we want them to do so, is we understand that there is a shortage of raw material available through retail stores that have been shuttered as well as online. And so, fabric stores and associated notions, stores that, for those of you who don't know what notions are, that means all of the things that you need to sew. So, threads and thimbles and needles, et cetera. Are, so these types of, I'm sorry I'm losing my thought, these types of facilities that sell these products are now able to resume their business, again, with physical distancing, limited numbers of people at a time, and spacing out the folks who are purchasing services, purchasing

supplies. And the fourth item is drive in theaters. So, similar to what we are expressing is allowable with respect to religious services, the same type of activity can occur at a drive in theater everyone stays in their cars. If they go to the concession to purchase food, it would be deemed much like takeout. We want people to go one at a time, we want the concessionaires to use all due precautions and physical distancing and masks if available, so those are the four areas. Houses of worship, janitorial and house cleaning, fabric stores, and drive in theaters. We will continue to look at these things as we go forward, and as we have said all along, we want the coming back to some normalcy to be in phases. So if we can start to open things up in small increments, and then continue to watch what the disease is doing as we do these things, that's going to be our best approach. Rather than letting everything open up at the same time. I do wanna talk about testing, that is certainly an important component to this. We can't have surveillance if we don't continue to understand where the disease is, how much of it there is, and the physical locations both by geography as well as facilities, as I've mentioned repeatedly, we keep a very keen eye on long term care facilities, corrections facilities, housing, shelters, and things of that sort. So, we continue to offer our testing that we've been doing at the Public Health Lab, we've started to get some numbers from the private sector, and we believe that the amount of testing is going up incrementally. But, we are still waiting for some of that high-throughput that we've been talking about for weeks. So we have a partnership with Santa Barbara County, and our hospital systems that is looking toward the acquisition of a high-throughput machine, we have still not gotten that. We are in a long queue. We thought we would have it by now, but unfortunately we don't. However, we're not sitting back and waiting for just that. We are continuing, as you've heard me say, looking to community events where we can bring up testing in a community, or at a food distribution center, or should we, and we've been very lucky to not have a single case in a long term care facility, but if that were to occur, that might be a place that we would do some universal testing, including asymptomatic. So, our testing approach is to make sure that we are doing some good surveillance as I said, both geographically and sector wise, and we feel that that is in place even in the absence of the much higher numbers that we're continuing to pursue. Let me talk a bit about the difference though, between the kinds of tests that you've been hearing about. So, what we're talking about, the testing that we are doing, is looking for the virus in the nose, in the nasal cavity, and all of the specimens that are being tested in our county have to be collected, put in a viral transport media, and sent to a laboratory. So it is not a point of care service or a rapid test. There's been a lot of information about the availability of rapid tests, that you could do it at the patients bedside and give them an answer right away, that test is available in some places, it is not in our county. We continue to pursue that. We continue to pursue also, serologic testing. So looking for antibodies to tell us who has had this infection in the past, and how many of our community have been infected at some point over the course of this pandemic. We continue to try to make inroads on getting our hands on that testing, and yet we do not have any date certain for moving forward in that regard. So, I think that is pretty much what I wanted to share today. I think everything that the community is hearing, I hope is understood as taking a continuous, balanced approach to slowly moving back to some measure of normalcy. Especially with respect to our business community and our faith community as we're doing today. But we also, absolutely need to continue to be diligent in our infection control measures as a community, as individuals, so that we do not have to get to a place of pulling back on these easing of some of the restrictions. And with that, I will open it up for questions.

- [Reporter] Doctor Borenstein, so, eight cases, new cases today, a little quick research I did, I think that's the second biggest count since tracking started. I know you said at the top, you wouldn't overreact, we've been seeing cases one, two, three, four, about three weeks. At what point though would you become concerned if you see eights, nines, tens consistently in a short period of time?
- Yeah, so the question was at what point and over what period of time would we be concerned if we did see this slightly higher number that like, today was eight, which is close to our daily high I think we had a nine or a ten day, but, part of the plan that is being put together does have some recommendations for what metrics we'd be looking to to pull back. It would not be in isolation. So, by that I mean, if simply we're seeing an uptick, even a doubling, maybe a tripling of our case load day over day, and if we're still seeing green light all the way through our hospital system, we'll take all of that information into consideration before we would pull the trigger on any reversion of protective measures. So, there's very, I know you keep hearing about the science and the data that is driving all of our decisions, and that is absolutely true. But I also want people to understand that there is an art to this. It's based on many people with many decades of experience in infectious disease management. And so, there isn't going to be a single number that I can point to that's gonna make the decision. It's gonna be a look at everything that's happening and all the different metrics that we're looking at.
- [Reporter] Somewhat similarly, we heard Supervisor Arnold say there's some people think you're moving too fast, some say they're moving too slow. How on earth are you able to balance that out? 'Cause I know there's immense pressure from both sides, really.
- The unanswerable question that's posed is how do we balance when the community is of very different perspectives on how we should move forward. Some are saying we're moving too fast, some saying we're moving too slow. Some saying we're, this is now my part of adding to your question, some saying we're being too cautious and we need to get people back to work, and other people saying you're taking our lives for granted and we should all still be hunkered down until we get to zero. And how to we make decisions within that framework? Carefully, judiciously, as part of a team with a lot of smart minds around us, hearing everything that everyone is saying and continue to try to take an intelligent and balanced approach and as I keep saying over and over again, and just watching what the reality is on the ground in our community. There are some metrics. Not to say that this is all, ya know, in the wind. We absolutely look at what our hospital surge capacity is on a day over day basis. What our number of cases is, what our number of deaths is, ya know. But there are not absolute numbers upon which we will flip a switch.
- [Reporter] In terms of neighboring counties, I know Santa Barbara and Ventura have had significantly more cases. As we start to reopen the economy here, and some sectors, what's your concern and how can it be handled to try to maybe prevent or keep the spread coming in from those counties, which do have higher numbers of cases?

- Yeah, so the question is, as we do begin to open our doors so to speak, knowing that neighboring counties are having more of a disease burden than we are, how do we control that situation and keep it at our borders? We can't, fully. But having said that, that is absolutely one of the metrics we look at. We have looked at, we will continue to look at, is what is our hotel rate occupancy, what are the video cams showing us on the beaches, what are we seeing and hearing about trails? Again, as much art as science, but we absolutely have our eyes on those exact kinds of measures.
- [Reporter] And, following up on the church piece from today's announcement, ya know, the parking lot situation, is that envisioning services in the parking lot? Is that what you're thinking along those lines?
- Yeah, so the question was with respect to the religious service clarification or announcement, what is the vision for what that would look like? Is it parking lots? And the answer is simply, yes. We think at this time, that that is a first step back to congregant services, but not, where people can safely participate in a service in their cars. We know that our religious communities have lots of technology at their hands as well, and so however they want to do it, whether it's on a big video screen, or a pastor sort of through the windshield making connections, ya know, there's lots of different ideas. But we haven't gone to the next step of opening up the buildings themselves.
- [Reporter] Very last thing just on the antibodies test, ya know, do you have a sense of our community spread and how, ya know, I know that would tell you a lot more but do you have any sort of hunch on that?
- So the question was, even though we don't have the antibody test, do we have any idea of what the community spread is? And what I would say to that is, I have some ideas that I'm kinda keeping in my back pocket that obviously I'm not any longer as I'm gonna share with you. But, looking to those who have, and Stanford and Santa Clara counties, the one jurisdiction that has published results on doing a sampling of a relatively large part of their community. I know 3,000 doesn't sound like a lot, but in statistical terms it is meaningful, and they found that their community prevalence is on the order of two to four percent. So, we may have less than that because as you've seen, our numbers have really stayed low per capita, but what I take away from that is that we are far from being in a position of saying we beat this thing.
- [Reporter] Thank you.
- [Michelle] Any other questions?

- Thanks.

- Thank you all again for coming today, and for tuning in online and on TV. A few new notices today. In addition to my usual reminders. If you would like to receive updates and information on the counties response to COVID-19, you can now sign up for a weekly e-newsletter at readyslo.org. On the homepage, you can look for and click on the button that says "sign up for COVID-19 updates to your inbox". Additionally, as of this week, we are re-airing these Monday, Wednesday, and Friday afternoon briefings on public access channel 21. The most recent briefing will be re-aired at midnight, 8 A.M, and 5 P.M each day, until the next briefing occurs. You can also continue to tune in live at 3:15 at San Luis Obispo County Public Health's Facebook page, or on our county home page, as well as the live streams of KCOY and KSBY. Remember there are also a number of ways that you can get the latest information on San Luis Obispo county's COVID-19's response on readyslo.org. Or you can continue to call the public health information line that is a recorded message in English and Spanish that's updated daily. Finally, our phone assistance center remains open during the week, from 8 A.M to 5 P.M and on weekend days from 8 A.M to 4 P.M. Thank you again for tuning in, be well and we'll see you on Friday.