- Good afternoon. Today is Friday, May 8th, 2020. My name is Michelle Shoresman. Thank you for watching today's San Luis Obispo County COVID-19 media briefing. This afternoon, we have two speakers for you. We will begin with County Administrative Officer and Emergency Services Director Mr. Wade Horton. He will be followed by County Health Officer Dr. Penny Borenstein. Thank you once again to our American Sign Language interpreter, Robin Babb. And now I'm pleased to introduce our County Administrative Officer and Emergency Services Director, Mr. Wade Horton.
- Thank you, Michelle. Good afternoon. Wade Horton, County Administrative Officer and Emergency Services Director. First, I'd like to thank all that were involved in creating our START Guide and all those that provided comments. It was a community effort that we can all be proud of. As we've been sharing with you throughout the course of this incident, our focus has been to bend the curve and create the health capacity necessary. We've also focused on safely reopening our community and society. We developed the START Guide in coordination with an independent panel of experts with the support of the community. It represents the best thinking of our community under the direction of the public health officer and was endorsed by our Board of Supervisors who formally requested to the governor that SLO County be allowed to move forward with our plan last week. However, the governor has not given us the ability to move forward with our plan and has since outlined his own roadmap for reopening, which is available online at covid19.ca.gov. He is not going to lift his statewide order. He has also added additional criteria that affects the pace in which businesses and communities will reopen. He has made it clear that businesses that are licensed and regulated by the state will be held to the standard of the state roadmap. What this means is that the county has not been granted local control to implement our START Guide. We remain under state control and subject to the governor's Resilience Roadmap, and the governor will enforce his roadmap through state regulatory bodies. I wanna note that I am disappointed by this outcome. We had great hope alongside of you that we would be moving forward to reopen more of our workspaces and community spaces. The governor's roadmap is still being updated, but based on what is published, it will be a longer path to reopening and it will delay the reopening of certain businesses along different timelines. For example, churches, wineries, salons and barbershops will not be opening up in the governor's stage two at this time. This morning, the Board of Supervisors met in a special meeting and underscored their support for the START Guide. We will continue to advocate and make the case to the state for a safe, reasonable, and responsible path for reopening. That said, at this time, we are not allowed by the state to implement our START Guide. The only option before us is to proceed as quickly and responsibly through the governor's Resilience Roadmap as possible in order to safely reopen our community under the governor's timeline. Per his roadmap, the governor is allowing opening of curbside retail today in what he calls stage two. To some extent, this has already been allowed in SLO County. Per the governor's roadmap, he will also allow certain jurisdictions who meet specified criteria to open in-store retail and in-restaurant dining as early as next week. This is called an attestation. Today, the Board of Supervisors approved the attestation, which is a statement by County Health Officer Penny Borenstein that outlines how SLO County meets all the criteria set forth by the state. Once we have more details from the

governor, we will provide notification when in-store retail and inrestaurant dining can begin operations. I'd also like to touch on our
county shelter-at-home order. Up to this point, we have maintained a
county order for some measure of local control and interpretation.
However, with the governor's direction to proceed with a statewide plan,
a county order will no longer be needed. Therefore, at this time, we do
not plan to renew our local order on May 16th when it's set to expire.
Our county will then exclusively fall under the state's order and under
the governor's direction. Again, at this time, the county remains under
the state control and subject to the governor's Resiliency Roadmap. We
will continue to update you on the allowances for loosening restrictions
as we are granted the ability to do so. And with that, I'll turn it over
to Dr. Penny Borenstein.

- Thank you, Wade. Good afternoon. And so I will give my daily information on where we stand with this disease in the county. We have 212 cases today. That is an increase of one from yesterday. We now have four individuals in the hospital, two of whom are in intensive care, and 79% of all of our cases to date have recovered per the CDC definition of recovery being a minimum of a 10-day period. So much of what I have to say is really a bit of a repetition of what you heard from Mr. Horton, but I wanna provide some additional clarity if we can. So as you heard, the governor announced yesterday that we are able now to move forward with a modified order under the state health officer to have retail businesses open for curbside pickup and for delivery services only. I wanna reiterate that the parts of the county's plan that we had hoped to move forward, we cannot at this time. We had some elements in our START Guide that we are ready and willing to move forward more quickly, but at this time, we are taking a pause on those. So those are in fact worship services, gyms, personal care in the form of hair and nail salons, body art, otherwise known as tattoo to some, and a number of other areas. What is in the governor's stage two that as we attest to and able to move forward more quickly is, as you heard, in-restaurant dining and full instore retail. Also in the governor's stage two is modified opening of schools and child care, outdoor museums, some other services as well like car washes. Pet grooming we have already moved forward on, but there are a number of areas in the governor's stage two that we would be able to fully attest to our readiness. Having said that we could attest, I want the public to know that we have already, I believe perhaps I am the first, as a health officer, to attest to our state of readiness. So what is involved in that process is that the health officer has to show that we in a county meet all of the criteria that the state has laid out to indicate our state of readiness for moving froward. Those criteria are in terms of epidemiologic metrics. They are that essential workers have protections. They pertain to our hospital state of readiness, that we have a plan for vulnerable populations to be taken care of should they become sick, that we have a regional perspective on this, and that we know how we're going to try to control outside infection coming into our community. So we have looked at that attestation form, completed it, and submitted it already to the state public health department. I do want to share that there is one metric in that quide that is available to the public because it was posted as part of our Board of Supervisors meeting this morning where they looked at my attestation and determined that they could support it, but I wanna be clear that there is one metric that is

still under discussion with the state because we don't meet it in its purest terms, and that is the number of cases that we have seen in a 14day period. The way I have chosen to attest is meeting the spirit of the attestation rather than the actual word in this one criteria. So as I have said all along, we look at all of our cases. We take a great deal of pride in all the testing that we do, how aggressively we have gotten on new cases, particularly in high risk institutions like California Men's Colony, skilled nursing facilities. And in some way, because we have done all that additional testing, we have found quite a few additional cases in controlled settings like that. We also test in households where individuals may have very mild symptoms, but if they are linked to a known case, we have tested and identified additional cases. So what I have attested to in terms of our state of readiness with the state's criteria is that if you look only at our cases, at our community transmission, new sources of infection, or travel-associated infection and exclude those congregate settings or household transmission where we already had people under quarantine in the household who became sick during that period, then we do meet the criteria. And so that is part of our county's attempt to continuously be out in front, both with respect to how we have protected the community and now we are leaning forward again as far as we can and as fast as we can with respect to how we begin this phased reopening. So we would like to be able to move forward with a number of other counties on this accelerated move into the state's stage two, and we are waiting for communication back from the state health department as to our attestation as well as our containment plan that was submitted along with that. As you heard, the Board of Supervisors did approve the submission of that plan and also our two hospital systems lent their support in the way of a letter of support in moving forward. So with that, I just want to reiterate because there has been some confusion over recent days that we are moving forward in a much slower way than we had hoped to. There are certain things that can move forward effective immediately, which is that curbside and pickup of retail products and all the manufacturing and the logistics that support those industries are able to open, but some of the other areas that were included in our county's START Guide are not amenable at the present time for moving forward. We will continue to advocate for our community, continue to have dialogue with our partners at the state Department of Public Health, and the Health and Human Services Agency, but right now, we're taking a more measured approach to live within the state law and the state quidance. So with that, I will open it up for questions.

- [Monica] Dr. Borenstein, you said that in your attestation there was only one metric that the county doesn't meet under the governor's criteria, that being the number of cases over the last two weeks. I'm confused about where the gap is in testing then. According to the START Guide, which included, I think, the most recently opened clinics and expected testing to be open soon, that put testing, according to the START Guide, at about 300 tests per day while under the state criteria, which follows recommendations of national medical researchers that SLO County should be doing 420 tests a day. So 300 and 420 are not the same number, and you're saying that we meet it. Is there testing that you're expecting that we don't know about that wasn't included in the START Guide or how do you address that?

- So the question of testing and having additional testing moving forward, we are doing that. We have more testing coming online in a couple of weeks. That particular element of the state attestation form allowed for consideration of a justification for why we're not at that measure of 1.5 for 1000. Let me be clear that that number comes from one individual at the Harvard Global Institute, Dr. Ashish Jha, and that is a guideline. The state has, over the course of the recent weeks, talked about one in 1000, 1 1/2 in 1000, move toward two in 1000. There's lots of numbers out there related to how much testing we should do. The reason I wrote in the justification that we're at 1.1 per thousand, we're not at 1.5, and that I think for the time being that's adequate is because we are not even filling all of the testing slots that we have available right now. We have been working on a communication plan for the additional testing that's coming forward. So we're continuing to move in the right direction. One other factor that was, at some point, considered to be a metric was what percent of your tests are positive, that it should be below 10%. We are below 6%. So we, at this moment in time, are continuing to see disease. We wanna take all precautions to continue to not see an explosion of our disease rates, but we believe that testing is available to anyone with any manner of symptoms at this point and time. If that's not the case in some of the smaller communities or for individuals who work in settings where it's hard for them to make the even seven a.m. to seven p.m. timeframe, we are going to be additionally coming into more communities and more workforce settings in the coming weeks.
- [Monica] So to follow up, well, first of all, I just wanna push back that it's not just one doctor at Harvard University that recommends that number, and the state's number was actually lower than the Harvard University's recommendation. It's also Johns Hopkins. So Harvard University was recommending we have 450 tests for the county population, and the governor's is--
- So Monica, I don't want to get into a numbers game with you. The only published document on a recommended guidance is 152 tests per 10,000, and that did come out of the Harvard Institute. We made that available in our START Guide. There are other recommendations out there that are in that ballpark. I believe we are in that ballpark. I believe that we have testing available to everyone who wants it at this time. If they have even one symptom that meets any of the criteria, there is no one who's being turned away from testing, and we are continuing to grow our testing number. I do not feel that the testing capacity is anything less than making available to anyone who has this disease at this time to be tested.
- [Monica] What is the testing capacity of the clinics, at the clinics specifically?
- So right now, in the two clinics that we have in Paso Robles and Grover Beach, we have a capacity of 132 per day per clinic. We have been running, between the two, around 250 per day, so slightly lower than our full capacity across the two clinics. People are able to get appointment same day or next day, and that's in addition to our community health centers that are testing. We have at least half a dozen, or eight or 10,

I don't remember the number. Actually, I do because I put it into the attestation. It's 11 urgent cares that are testing in many communities in our county.

- [Monica] So yeah, that's the only reason I was, 'cause I thought the START number of 300 a day seemed low, given the 260 capacity with the clinics.
- It may well be higher. We still struggle with getting our negative reports from some of our private labs, so it's an estimate, and thank you. Had I thought of that and put into the attestation plan, I would have, but yeah, our minimum number of tests puts us above one per 1000.
- [Michelle] Other questions?
- [Reporter] Actually, yeah, the face masks, I know you've stated your policy, but all the stores that are requiring them now, can you just go over the county's policy and how that differs from private businesses?
- So the county, myself as the health officer, I've actually put out a white paper on this, recommends mask use for situations when six-foot distancing is not possible. That is based on recommendations that have come out of a number of different organizations, CDC being the most predominant one. It is not to be in place of other measures like the social distancing, hand washing, staying home when you're sick, not coughing near or around anyone. I have been asked many times why we don't mandate masks. And if you look at the white paper and what I said at a briefing earlier this week, it's because there really isn't enough absolute information about the utility of that as a prevention measure. It may be beneficial. It also, in some regards, may be harmful, and thus the county has taken a position of it being a recommendation, especially in situations where it is necessary and that it remains something that we would look to if our situation were to worsen as an additional mitigation measure that might provide some additional protection.
- [Reporter] Dr. Borenstein, can you tell us how many contact tracers the county has and is there any plans to increase?
- Yes, so currently we have 14 individuals who have been doing all the contact tracing. The state metric tells us that we should have 15 per 100,000 population, which puts the number at us needing 28 more. We have plans in place. We have identified people either through our own county workers who have this type of experience. There's quite a few nurses and other medical professionals and all manner of people on our Medical Reserve Corps who are available and interested, and there is a training program that is being rolled out from the state in the next week or so. So we anticipate that those already who have been trained don't even need training. Many of them have been doing this type of work for years and years, but we will take advantage of the additional online state training that is available and we will ramp up as we need to. At this point, we have been able to do 100% contact tracing for our cases based on the resources that we have in hand.

- [Reporter] Along those lines, I was wondering if you'd break down the cause of transmission for each of the different cases. Do you have that breakdown for each of the communities in which they're--
- We don't have that handy.
- [Reporter] In your communication with the state, have they given any indication that they may change their policy and take it on a county by county basis those who are prepared and have the attestation that you spoke of?
- So health officers, elected officials, county administrators, all of us have had a number of telephone conversations recently with state officials, expressed our dismay, quite frankly, at some of the metrics, particularly those epidemiologic metrics. One other that your colleague mentioned, I think you mentioned, is that we cannot have one death in the past 14 days. That seems to us a little bit arbitrary and capricious in terms of something could happen tomorrow and would suddenly mean that we can't move forward with going back to business, but if it didn't happen tomorrow, we could. And if it happened a week later, would we have to close down? So there's a lot of that kind of dialogue that is occurring. I believe that the state officials are open to this ongoing dialogue, and that's why we submitted the attestation plan. I believe that there will be an opportunity for a county like ours that is so prepared in so many other ways and simply doesn't meet this one metric that we may be able to move forward in spite of that variation.
- [Reporter] Dr. Borenstein, that attestation, you submitted it today, probably within the last couple of hours, I imagine. What's the timeframe on that?
- I do not know the timeframe for a response.
- [Reporter] And if I can ask you and maybe Mr. Horton as well, the START Guide, where does this all fit in now within the state's guidelines? Is the START Guide going to go by the wayside or what's the future of this whole--
- Yeah, so we've talked a lot amongst ourselves and the constituents and the project team and the reach that had a strong hand in bringing all the constituents together in planning the START Guide. All of the elements that comprise that START Guide are relevant in terms of the guidances that we built, in terms of the community input, in terms of business readiness, in terms of providing to each of those sectors ideas of how they can move forward, whether it's today or next week or next month. So in a lot of ways, none of that effort was for naught. We have made revisions. We didn't announce them publicly, but we got, I think, over 1000 public comments or forms filled out. Some of them were giving us corrections on typographic errors. Some of them were meaningful. Not that that typographic errors aren't meaningful, but we did get quite a few comments that we took to heart and we have made some measure of tweaks, especially in the area of the specific industry guidances that will continue remain as an important element of our county being able to move forward. Once again, we got ahead of the state on that. Yesterday, the

state put out, I think, 17 areas of guidance. We haven't had a chance to look at all of that and whether we will blend or meld or steal from and retain our own guidance, so all of this is under discussion over the coming days.

- [Reporter] In the expanded testing that started Monday, you said about 250 a day, so you're well over 1000 this week and you expected it would be likely that you'd see additional cases. Doesn't seem like that's been the case. Today, it was only one additional case. The numbers really haven't gone up significantly this week. Any comments on how expanded testing, there hasn't been those surge of cases that you might have expected?
- Yeah, absolutely it's reassuring to us that with the additional testing, we have not seen increased numbers of positive cases, and that goes back to my point about the one important metric for us is what percent of all those who are tested actually have this disease because it does tell us that there are other diseases that are still causing symptoms in people, and there are other things circulating in our community, but if amongst our population, we have a low positive rate of testing, that is a reassuring sign.
- [Reporter] I have a question for Wade. I'm smiling under my mask. Hello. When you were speaking earlier and you said that you were disappointed with what's unfolded from the news from administration, so we knew last week that the state was going come out with some specific criteria to go to their next phase after curbside for retail. So it sounded a little bit like you guys are maybe surprised a little bit and it's not unfolding the way you expected. Is it just that the criteria is stronger than you were anticipating or where is kind of, how is what is unfolding now different than what you were expecting a week ago?
- So a week ago, we were expecting the governor to say, "Execute your plan." I thought we put together, with the community, a very good plan. It was thoughtful. It was very deliberate. It was responsible, and there was tremendous community input in that plan. It was a plan that was supported not only by the community. It was supported by the Board of Supervisors, and we thought that the governor would take a look at that plan and that he would give us approval to move forward and execute that plan. That didn't happen.
- [Michelle] Any other questions?
- [Reporter] I had one question that came in early this morning probably for Dr. Borenstein. The question is, so with the steps that we're gonna be slowly reopening, how does that impact basically residents and their medical care?
- So even prior to the START Guide and the governor's, I can't remember the exact timing, but I believe as much as two weeks ago. I think it was on a Monday, so a week and a half ago, we communicated to our healthcare community that they can, and in fact should in many cases, move forward to reopening. Many healthcare conditions have been in need of healthcare. Many so-called elective surgeries are really not elective, but healthcare

delayed is healthcare denied at some point. So we have been working very closely with our healthcare community across all sectors. Dentist has become a very big area of need in terms of having the protective equipment. We've been trying to support our dental community to reopen. I know that next week, one of our hospital systems is looking to beginning what they're calling MeNTS, Medically Necessary and Time-Sensitive, surgeries, to the extent that all of our healthcare system can begin with all of the control measures in place to reopen for business, that would be desirable for our community from a health perspective.

- [Michelle] Any others?
- [Reporter] Thank you, Penny.
- Thank you again for coming today and tuning in online and on TV. Please remember that next week, starting on Monday, we continue to offer free COVID-19 testing at Ramona Gardens Community Center in Grover Beach and the Veterans Hall in Paso Robles from seven a.m. to seven p.m. You can sign up for appointments on ReadySLO.org, but if you don't have access to the internet, you can also call their phone bank at 888-634-1123. You can find other quidance documents, media releases, and other information at ReadySLO.org, including the attestation document sent to the state, described by Dr. Borenstein a few minutes ago. That can be found at ReadySLO.org at the page referencing the state Resilience Roadmap. Our Phone Assistance Center remains open this weekend between eight a.m. and four p.m., and thank you for tuning in on the San Luis Obispo County Public Health Facebook page for this briefing today. You can also review the briefing after today at Public Access, Channel 21, at midnight, eight a.m., and five p.m., and on KCOY and KSBY. Thanks again for staying engaged. Be well, and we'll see you on Monday.