COVID-19 Public Health Update

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BoCC meeting | January 6, 2020
COVID-19 (Novel Coronavirus)

Deschutes.org/covid19
State level data available on the Oregon Health Authority website.
Deschutes County Cases (Cumulative)

4,276 Cases  
24 deaths

Data are shown based on the date a case first became identified as a case.

Data as of 1/5/21
Data are shown based on the date a case first became identified as a case.
Deschutes County Cases by Age Group

Data as of 1/5/21
Beginning 12/3/20, Oregon Health Authority transitioned to reporting total COVID Electronic Laboratory Reports (ELRs) rather than reporting total persons tested for COVID. Electronic Laboratory Reports better reflect the total volume of COVID tests for a county and may include duplicate positive and/or duplicate negative test results for individuals.

Data as of 1/4/21
## Risk-based Framework for Counties

<table>
<thead>
<tr>
<th>Disease Activity</th>
<th>Lower Risk</th>
<th>Moderate Risk</th>
<th>High Risk</th>
<th>Extreme Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rate of COVID-19 cases per 100,000 over 14 days (counties with 30,000 or more people)</td>
<td>&lt; 50.0</td>
<td>50.0 to &lt; 100.0</td>
<td>100.0 to &lt; 200.0</td>
<td>≥ 200.0</td>
</tr>
<tr>
<td>-or-</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of COVID-19 cases over 14 days (counties with less than 30,000 people)</td>
<td>&lt; 30</td>
<td>30 to &lt; 45</td>
<td>45 to &lt; 60</td>
<td>≥ 60</td>
</tr>
<tr>
<td>-and-</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percentage test positivity over previous 14 days</td>
<td>&lt; 5.0%</td>
<td>5.0% to &lt; 8.0%</td>
<td>8.0% to &lt; 10.0%</td>
<td>≥ 10.0%</td>
</tr>
</tbody>
</table>
Advisory School Metrics: Two-week Case Rates per 100,000 population

As of 1/1/21, school metrics are advisory. Data are provisional and subject to change.

As of 1/4/21, school metrics are advisory. Data are provisional and subject to change.
Advisory School Metrics: Two-week Percent Positivity

As of 1/1/21, school metrics are advisory. Data are provisional and subject to change.

As of 1/4/21, school metrics are advisory. Data are provisional and subject to change.
Risk-based Framework for Counties

Oregon’s COVID-19 Risk Levels

Statewide Metrics
- 12/13/2020 - 12/26/2020
- 376.7 cases per 100k residents
- 6.5% test positivity

COVID-19 Risk Levels
- Lower
- High
- Extreme

Hover over one of the bars below to highlight the counties in that risk level.

Oregon Counties by COVID-19 Risk Level

Notes: COVID-19 data are provisional and subject to change.

Data as of 12/28/20
Daily Count of COVID-19 Patients Currently Hospitalized (St. Charles Health System Data)

Data as of 1/5/21
Age distribution of Deschutes County hospitalized patients

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;20</td>
<td>5%</td>
</tr>
<tr>
<td>20-29</td>
<td>5%</td>
</tr>
<tr>
<td>30-39</td>
<td>8%</td>
</tr>
<tr>
<td>40-49</td>
<td>11%</td>
</tr>
<tr>
<td>50-59</td>
<td>13%</td>
</tr>
<tr>
<td>60-69</td>
<td>20%</td>
</tr>
<tr>
<td>70-79</td>
<td>20%</td>
</tr>
<tr>
<td>80+</td>
<td>18%</td>
</tr>
</tbody>
</table>

Denominator: 154 Deschutes County cases ever-hospitalized

Data as of 1/5/21
COVID-19 Vaccination Data

Vaccination Rates per 10,000 population, by county of residence*

Deschutes County COVID-19 Vaccination Data as of 1/5/21

| # people with vaccination series in progress | 2,607 |
| # people fully vaccinated | 2 |
| # people with vaccination series in progress or fully vaccinated per 10,000 population | 135.18 |

*Includes people with vaccination series in progress or fully vaccinated

Sherman, Gilliam, and Wheeler counties are not displayed due to suppression rules. These counties have between 1 and 5 vaccinated people.

People vaccinated per 10,000

- 0.00
- 36.33-112.09
- 112.75-125.63
- 126.67-133.29
- 134.98-198.31

*Includes people with vaccination series in progress or fully vaccinated
COVID-19 Vaccination Distribution

Our highest priority is to vaccinate residents as quickly as possible

• Administered our first weekly allotment (500) doses within 3 business days

• Coordinating with health care partners to increase capacity to vaccinate and to scale up as we receive more vaccines
<table>
<thead>
<tr>
<th>Phase 1a, Group 1</th>
<th>Hospitals, EMS, first responders, urgent care staff, vaccinators, and long-term care – skilled and memory care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phase 1a, Group 2</td>
<td>Other residential care facilities (assisted living), hospice, behavioral health crisis teams, adult group homes, Oregon Youth Authority, corrections, drug and alcohol residential treatment and homeless shelters</td>
</tr>
<tr>
<td>Phase 1a, Group 3</td>
<td>Outpatient clinical staff serving specific high-risk groups, in-home medical care providers, day treatment services and non-emergency medical transport, Outpatient clinical staff serving specific high-risk groups, in-home medical care providers, day treatment services and non-emergency medical transport</td>
</tr>
<tr>
<td>Phase 1a, Group 4</td>
<td>All other outpatient clinic staff, public health, early learning sites and death care workers</td>
</tr>
</tbody>
</table>
When can I receive the vaccine?

We are grateful that so many Deschutes County residents are excited to receive their vaccine!

Currently, individuals eligible for Phase 1a vaccines are notified by their employer or residential living facility.

Most people will receive the vaccine from their doctors, a pharmacy, or future community clinics.

Deschutes County Health Services, as well as our health care community, will provide ongoing communications to let everyone know when it is their turn for the vaccine.

Stay up-to-date on vaccine distribution: www.deschutes.org/covid19vaccine
As viruses replicate, they will have mutations. Some may have no effects, but some may have serious effects. The more replication, the higher the risk.

**Antigenic Drift**

As a virus replicates, its genes undergo random “copying errors” (i.e., genetic mutations). Over time, these genetic copying errors can, among other changes to the virus, lead to alterations in the virus’ surface proteins or antigens.
Our immune system uses these antigens to recognize and fight the virus. So, what happens if a virus mutates to evade our immune system?

In influenza viruses, genetic mutations accumulate and cause its antigens to “drift” — meaning the surface of the mutated virus looks different than the original virus.
South African Covid variant appears to ‘obviate’ antibody drugs, Dr. Scott Gottlieb says

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Emily DeCicco
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KEY POINTS

• “The South Africa variant is very concerning right now because it does appear that it may obviate some of our medical countermeasures, particularly the antibody drugs,” Dr. Scott Gottlieb said.

• The South African variant is also known as 501.V2, and in mid-December officials reported that 501.V2 had been largely replacing other strains of the coronavirus as early as November.

• More than 17 million Covid doses have been distributed to states, but only 4.8 million Americans have received their first shot according to the Centers for Disease Control and Prevention.
The UK is spooking everyone with its new covid-19 strain. Here’s what scientists know.

European nations are throwing up travel barriers to the UK over fears of a more transmissible strain of the coronavirus.

by Antonio Regalado  December 21, 2020

A rising wave of covid-19 cases in the south of England has been blamed on a new variant of the coronavirus. The new version, which appeared by September, is now behind half the cases in the region. Genomic researchers have found that not only does the variant have a lot of mutations, but several of the genetic alterations are predicted to make possibly significant changes to the spike protein, a part of the virus that plays a key role in infecting cells.
The difference between droplet and airborne transmission

**Droplet transmission**
Coughs and sneezes can spread droplets of saliva and mucus

**Airborne transmission**
Tiny particles, possibly produced by talking, are suspended in the air for longer and travel further

Less than 5 microns

More than 5 microns

Human hair: 60 - 120 microns wide

Source: WHO

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**COVID-19**

**CORONAVIRUS DISEASE**

**BE INFORMED:**

Know Your Risk During COVID-19

On a scale of 1 to 10, how risky is...

1. Opening the mail
2. Getting restaurant takeout
3. Pumping gasoline
4. Playing tennis
5. Going camping
6. Grocery shopping
7. Going for a walk, run, or bike ride with others
8. Playing golf
9. Staying at a hotel for two nights
10. Having dinner at someone else's house
11. Attending a backyard barbecue
12. Going to a beach
13. Shopping at a mall
14. Sending kids to school, camp, or day care
15. Working a week in an office building
16. Swimming in a public pool
17. Visiting an elderly relative or friend in their home
18. Going to a hair salon or barbershop
19. Eating in a restaurant (inside)
20. Attending a wedding or funeral
21. Traveling by plane
22. Playing basketball
23. Playing football
24. Hugging or shaking hands when greeting a friend
25. Eating at a buffet
26. Working out at a gym
27. Going to an amusement park
28. Going to a movie theater
29. Attending a large music concert
30. Going to a sports stadium
31. Attending a religious service with 100+ worshippers
32. Going to a bar

Ranking by physicians from the TMA COVID-19 Task Force and the TMA Committee on Infectious Diseases. Please assume that participants in these activities are following currently recommended safety protocols when possible.

Texas Medical Association | 401 W. 15th St. | Austin, TX 78701-1680

www.txmed.org  twitter: @txmed  facebook.com/texasmed
Q: Can you provide Covid-19 positive numbers and outbreaks from our restaurants, breweries, and gyms in Deschutes County

A: We are unable to provide COVID-19 case counts and outbreaks for restaurants, breweries and gyms.

- We are unable to provide an estimate for the number of cases who were exposed to COVID at restaurants, bars, and gyms
  - Questions about exposures these settings are not built into the standard case investigation or tracking database.
  - There is currently no mechanism to identify spread in these settings unless there is an identified outbreak, which would typically be among staff and would likely not include patrons.

- We are currently unable to provide information on outbreaks in restaurants, breweries, and gyms while implementing OHA surge guidance.
  - OHA surge guidance directs our team to focus outbreak investigations primarily on “high-consequence” settings such as long term care facilities, schools, shelters, and jails.
  - Our team is still tracking “large or otherwise notable” outbreaks in other settings, but the threshold for identifying such outbreaks is higher (5+ epidemiologically-linked cases) and data would likely be incomplete.
  - Restaurants, breweries, and gyms are also closed or experiencing limited operations, so outbreaks in these settings would be rare and, if identified, would most likely only include employees rather than patrons.
Opinion:

- Our only sensible option is to reduce viral transmission as much as possible until vaccine coverage is broad.
- This will entail continuing constraints on human activities, including many enterprises and social amenities, until rates fall substantially.
- As enterprises are being constrained to serve a public good (reducing transmission of a potentially lethal virus), we should, as a society, thank the owners and proprietors and provide compensation and accommodations for their losses and do our best to ensure adequate unemployment payments for employees.
- Failure to do so will contribute to resentments and non-compliance with those strictures.
- We may also have to take near-heroic and costly measures to enable the safe reopening of schools as soon as infection rates fall. With the aerosol nature of the virus transmission becoming clearer, these may include much more ventilation, high-volume air cleaning devices, and the ready availability of on-site rapid COVID19 testing for people who are symptomatic or have been exposed to COVID19.
Tips for Reducing Risk of Getting COVID-19

**Things that Increase Risk**
- No Masks Worn
- Crowded Place
- Indoor Space

**Things that Decrease Risk**
- Masks Worn
- 6 Feet of Space Between People
- Outdoor Space