

# Fresno County Department of Public Health COVID-19 Response

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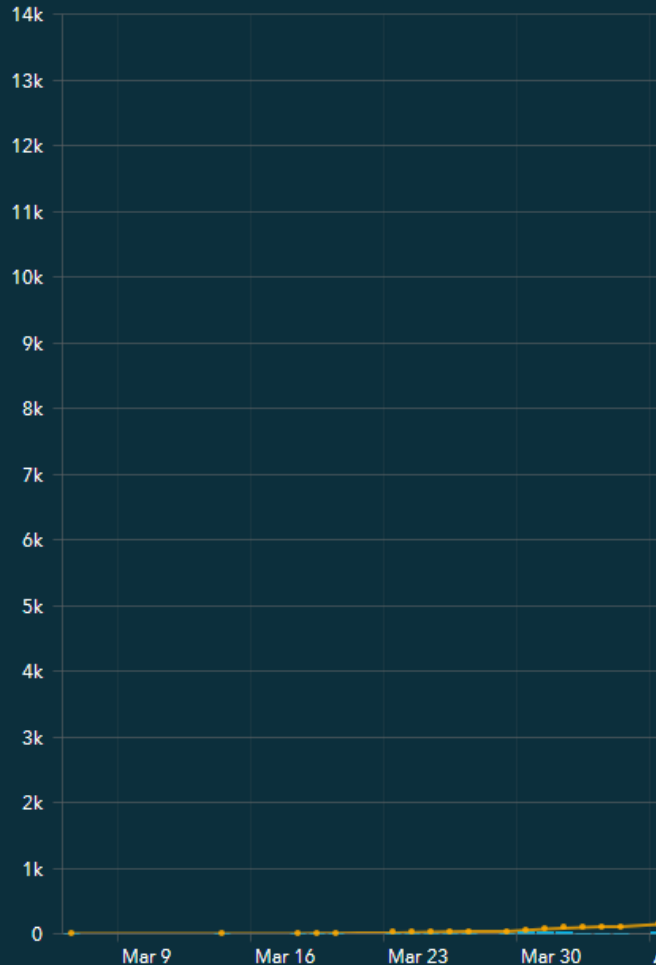
# Agenda

Brief Timeline for COVID-19 in Fresno County

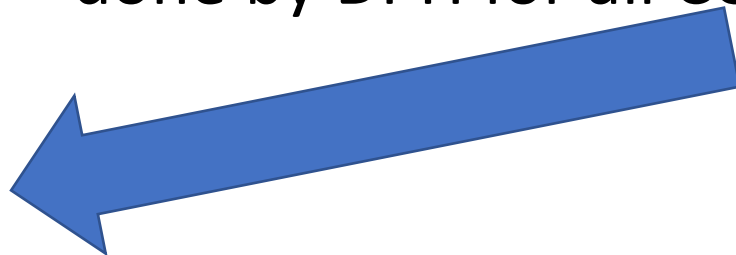
Lessons Learned

Strategic Health Care Response for COVID-19

# March



- Emergency declaration by Fresno County
- City of Fresno Shelter in place order
- Statewide Shelter in Place order
- Schools closed and other activities stopped to slow the spread
- Worldwide: COVID-19 diagnosed in multiple countries, cruise ship passengers returning to US
- Testing, quarantine and contact investigations are done by DPH for all COVID-19 cases in Fr. County



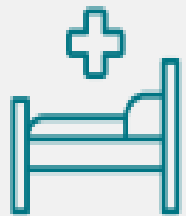
# April



- Curve stays “flat” statewide and locally
- Testing capacity not great but expanding
- Symptom screens and temp checks start
- Workplace screening and monitoring starts
- Hospitals/MDs reporting fewer patient visits
- Governor’s Roadmap to Recovery (6 steps)
  - Testing, isolation, contact tracing
  - Protecting vulnerable populations
  - Hospital surge capacity
  - Develop effective treatments
  - Social distancing in workplaces and schools
  - Reinstate stay-at-home orders as needed

# Safeguards In Place Before Opening

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Ensuring health care system capacity



Protecting vulnerable populations



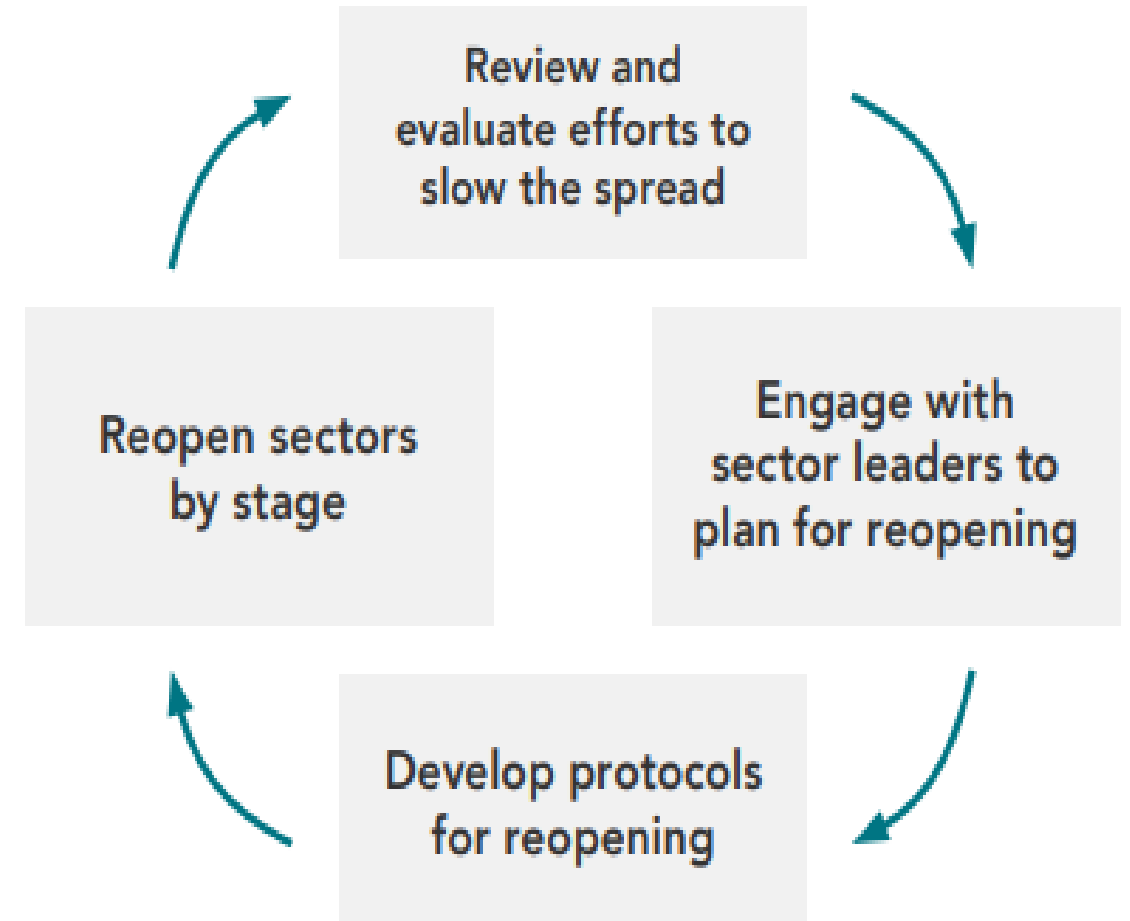
Ensuring public health capacity to test, trace and isolate



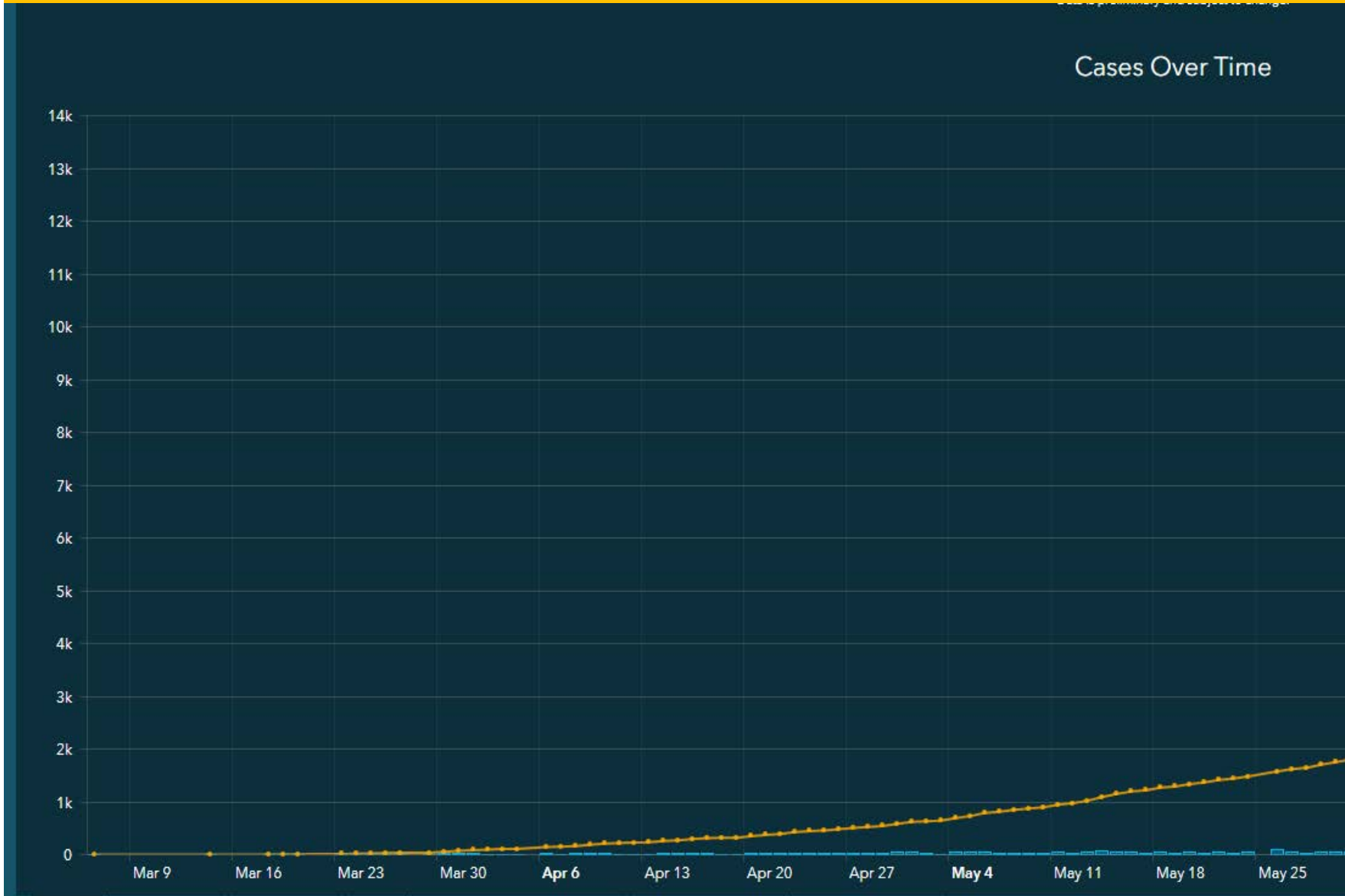
Developing protocols to keep workers and residents safe

# Process for Staged Reopening

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# May



- Case counts (and fatalities) keep rising
- DPH testing set up at 2 sites (FCC/ Sanger)
- “Quarantine fatigue”
- Business community anxious to reopen
- Variance Attestation is submitted to allow reopening with a plans for mitigation and containment





# June: Activities (and Cases) Rise More Rapidly





# July: The Bend Becomes a Surge Becomes a Disaster


Total Cases

 **12,148**  
of 112,528 Total Tests

Active Cases

 **8,722**  
of 12,148 Total Cases

Recovered

 **3,314**  
of 12,148 Cases

Deceased

 **112**  
of 12,148 Cases

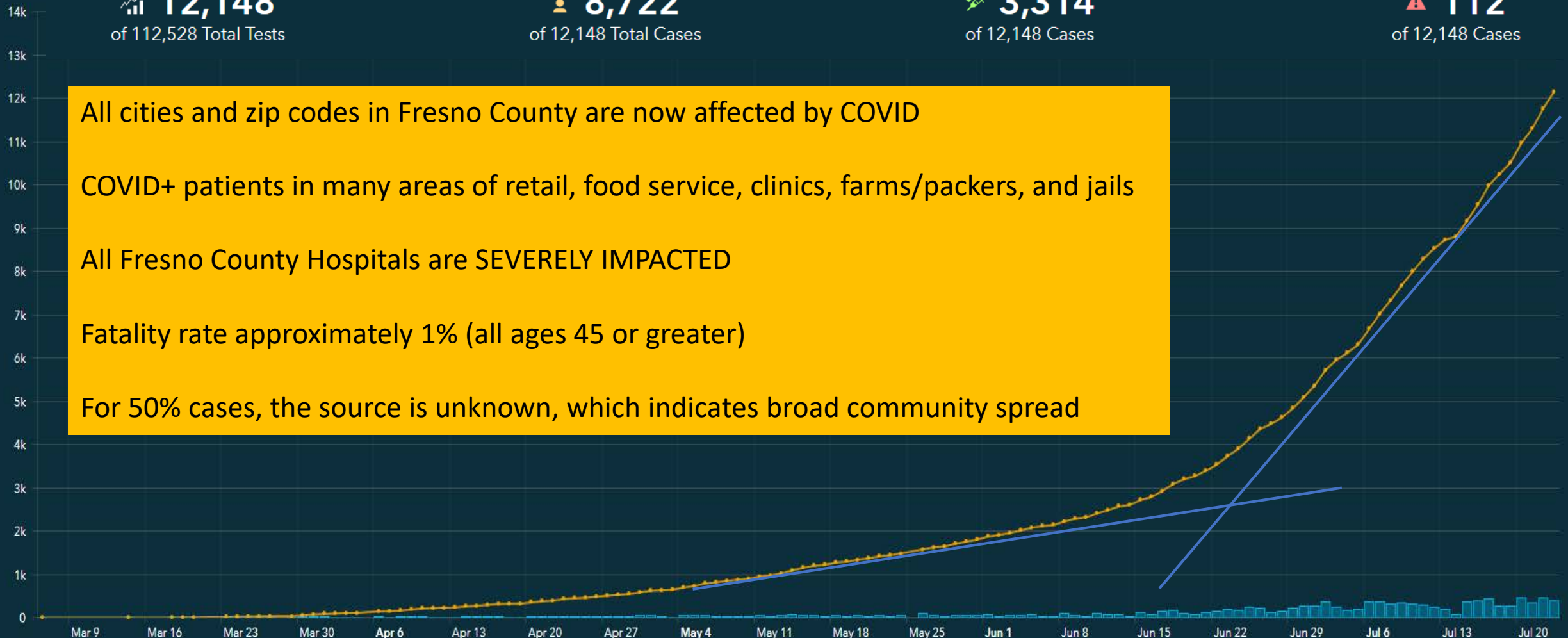
All cities and zip codes in Fresno County are now affected by COVID

COVID+ patients in many areas of retail, food service, clinics, farms/packers, and jails

All Fresno County Hospitals are SEVERELY IMPACTED

Fatality rate approximately 1% (all ages 45 or greater)

For 50% cases, the source is unknown, which indicates broad community spread





Hospital Capacity is Maxed Out, Staffing is Low, and  
Tents Are Being Used For Emergency Care Services







# History Repeating Itself?

LEFT: Oakland Influenza Field Hospital, 1918

BELOW: FRESNO COUNTY ALTERNATE CARE SITE  
*@ Fresno Convention Center Exhibit Hall, 2020*





## ALTERNATIVE CARE SITE Fresno Convention Center

### WHAT IT CONTAINS:

Hard metal cots

Folding Chairs

Toiletries bag (1 per bed)

Paper linens

First Aid Kits

Flashlights

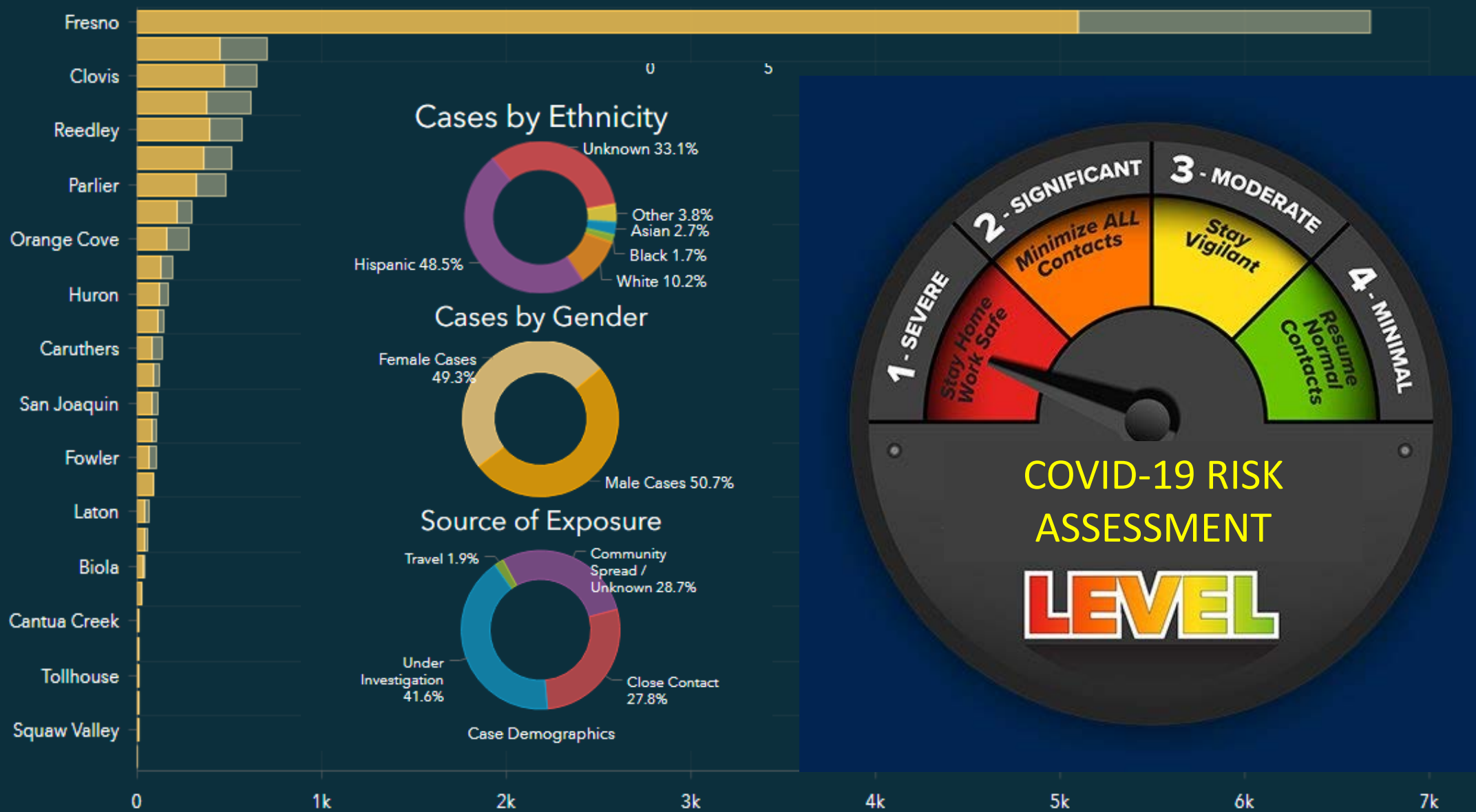
Toddler Beds/ Pack'n' Plays

### WHAT IT LACKS:

STAFFING, privacy, lab, xray



# COMMUNICATING DATA TRENDS TO THE PUBLIC: THE STRUGGLE IS REAL



\* Summarized communities under 5 cases

# What Have We Learned Through Our Response?

## Multiple factors have led to a COVID-related crisis for Fresno County

Reopening safely will require a coordination of health policy, prevention education, and public participation in safe behaviors

Young people in crowds spread C-19 most

Rare but serious complications are being seen in the young/healthy demographic

Chronic illnesses are higher risk conditions

Crowded or congregate settings (nursing homes, shelters, jails) and essential worksites are all experiencing outbreaks where virus spreads quickly and silently

Social outings, backyard parties and group social activities all contribute to the spread

Outdoor activity is less risky than indoors

We can respond successfully in two ways:

1. SLOW THE SPREAD

2. BUILD MORE MEDICAL CAPACITY

3. What about the value of effective medications, herd immunity, or a vaccine?

- *It will take at least another 6-12 months for proven pharmaceuticals to become routine in COVID care*
- *Drugs will not reverse every complication in the very ill*
- *Supplies are-- and will be -- limited for anything worthwhile*
- *Herd immunity doesn't work for all viruses (HIV, Hep C, etc)*

Successful navigation of this crisis is still possible!

Communication and teamwork will be essential.

Time is scarce, denial is deadly, and failure is not an option

# SLOW THE SPREAD & ADD MEDICAL CAPACITY

The virus needs breathing humans to replicate!

We can outsmart the virus based on this fact by:

- staying home whenever possible
- using social distancing outside our households
- wearing masks to prevent viral spread to others
- cleaning surfaces and hands that harbor droplets
- doing as much social activity outdoors as possible
- promoting prevention and safety education for all

We can add health care capacity in these ways:

- expanding the number of hospital beds and staffing
- creating alternative care sites for recovering patients
- develop, test, and distribute effective medications
- test people with symptoms and deliver fast results
- train people to track close contacts of COVID patients
- ensure that infected people can stay away from others
- creating support services to quarantine successfully

Together, this set of strategies can help us lower case counts and deaths. While none of these is 100% effective, they all work together to help flatten the curve of cases

Our best evidence suggests that, in this epidemic, changes are MOST effective if they are community-wide.

# COVID is the Tip of an Iceberg

An iceberg floating in a deep blue ocean under a clear sky. The visible tip of the iceberg is relatively small and jagged. The much larger, submerged portion of the iceberg is visible below the water line, showing a complex, layered structure. Several yellow text boxes are overlaid on the image, with some on the visible tip and others on the submerged part, illustrating the concept that COVID is just the tip of a much larger problem.

COVID complications

COVID cases

poor interagency coordination

medical knowledge gaps

undertreated chronic health issues

skilled workforce shortages

economic fragility



# Where Do We Go Next? Our Strategic Plan

## **Fresno County's public health response needs these elements:**

Prevention Education that reaches ALL County Residents

Testing frequently and widely with rapid results

Tracing to identify/quarantine those who are high risk

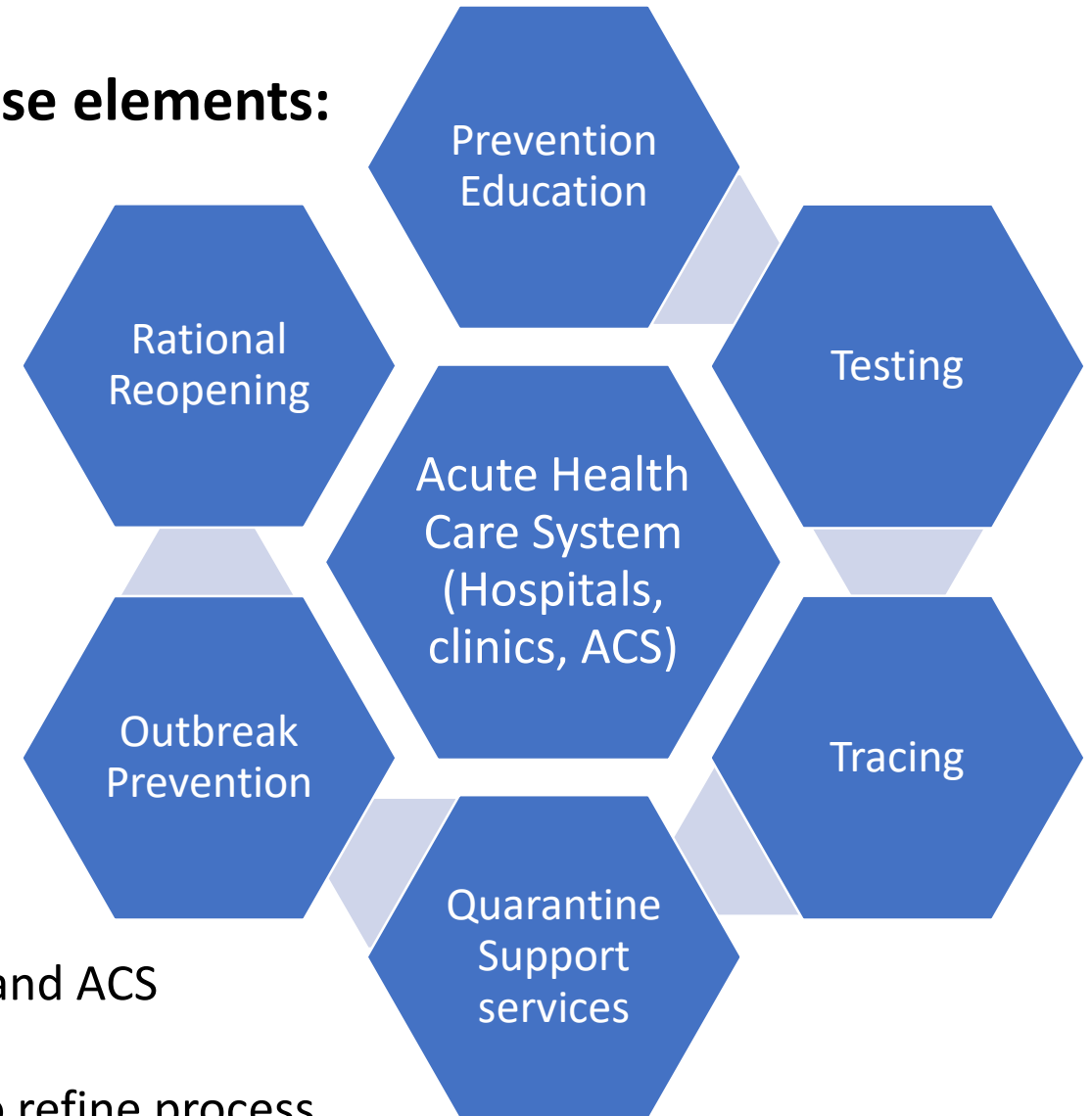
Quarantine Support Services to ensure success with above

Outbreak Investigation and Prevention in crowded areas

Rational and safe reopening of schools, businesses, etc

Coordinated Acute Health Response: Hospitals, clinics, EMS and ACS

Continuous reassessment and feedback from stakeholders to refine process



A large, brightly lit indoor facility, possibly a temporary hospital or a large hall, filled with rows of hospital beds. The beds are arranged in long, parallel rows, stretching far into the background. Each bed is covered with a white sheet and has a small, colorful bag or package resting on it. The floor is a smooth, dark grey polished concrete that reflects the overhead lights. The walls are white with blue horizontal accents. In the far background, there are some tables with supplies and a few people standing near a doorway. The overall atmosphere is one of organized readiness.

thank you

Sort by  
Positive Cases

### Positive Cases by County

Los Angeles	174,322
Riverside	35,636
Orange	34,352
San Bernardino	29,545
San Diego	26,986
Kern	17,394
<b>Fresno</b>	<b>13,209</b>
San Joaquin	10,637
Alameda	10,489
Santa Clara	8,986
Sacramento	8,972
Tulare	8,392
Stanislaus	8,228
Imperial	7,781
Contra Costa	7,095
Ventura	6,844
Santa Barbara	5,939
San Francisco	5,823
San Mateo	5,078
Marin	4,595
Monterey	3,901
Kings	3,591
Merced	3,251
Solano	3,197
Sonoma	2,503
Madera	1,744
Placer	1,628
San Luis Obispo	1,565
Yolo	1,408
Santa Cruz	970
Butte	822
Napa	769

## Fresno CASE STATISTICS

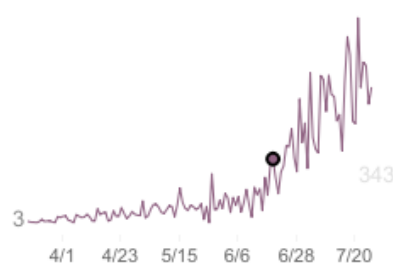
### Positive Cases

13,209

1 Day  $\Delta$  +343  
+2.7%  
14 Day  $\Delta$  +4,802  
+57.1%

US Total Cases:  
4,163,892

### Day-Over-Day New Cases



Note: Numbers may not represent true day-over-day change as reporting of test results can be delayed.

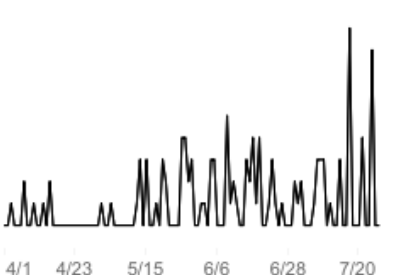
### Deaths

112

1 Day  $\Delta$  +0  
+0.0%  
14 Day  $\Delta$  +24  
+27.3%

US Total Deaths: 145,982

### Day-Over-Day New Deaths



## CASE DEMOGRAPHICS

| = California Population %

### Gender

Female 50%  
Male 49%  
Unknown 1%

### Age

0-17 9%  
18-49 60%  
50-64 19%  
65+ 11%  
Missing 0%

### Race/Ethnicity

AIAN 0%  
Asian 6%  
Black 4%  
Latino 56%  
White 18%  
Other 15%  
Multi-Race 1%  
NHPI 1%

### Gender

Female 43%  
Male 57%  
Unknown 0%

### Age

0-17 0%  
18-49 7%  
50-64 17%  
65+ 76%  
Missing 0%

### Race/Ethnicity

AIAN 0%  
Asian 13%  
Black 9%  
Latino 46%  
White 30%  
Other 1%  
Multi-Race 1%  
NHPI 1%

Note: Demographic percentages may not add up to 100% due to rounding. Breakdown of deaths is a subset of total deaths as reported by law enforcement.

## CALIFORNIA TESTING RESULTS

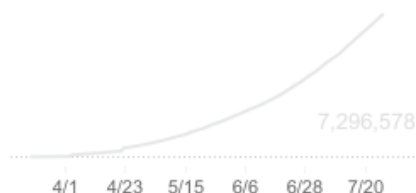
Tests Reported  
(by 25 public labs)

7,296,578

1 Day  $\Delta$  +128,439  
+1.8%  
14 Day  $\Delta$  +1,752,213  
+31.6%

Positivity:  
7 Day: 7.8%  
14 Day: 7.5%

### Cumulative Total Tests Reported





Select KPI  
Positive Patients

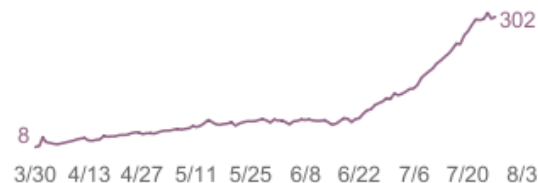
**Note:** HHS Significantly changed reporting requirements resulting in historical data from non-reporting facilities not being part of today's update. This data will be added back in as soon as it is available.

#### Positive Patients by County

Los Angeles	2,051
Orange	661
San Bernardino	609
Riverside	488
San Diego	369
<b>Fresno</b>	<b>302</b>
Kern	260
Sacramento	246
San Joaquin	227
Stanislaus	209
Alameda	188
Santa Clara	171
Contra Costa	103
Tulare	102
San Francisco	99
Kings	85
Ventura	85
Santa Barbara	80
Imperial	75
San Mateo	70
Merced	61
Placer	57
Madera	52
Solano	48
Sonoma	46
Monterey	39
Yuba	25
Butte	22
Marin	21

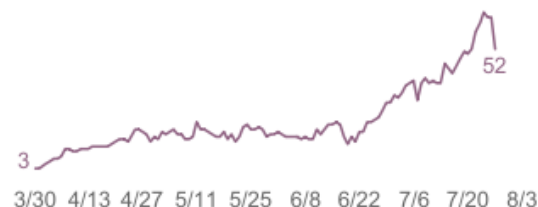
#### Positive Patients

**302** 1 Day Δ +4 +1.3% 14 Day Rolling Avg. 268



#### ICU Positive Patients

**52** 1 Day Δ -13 -20.0% 14 Day Rolling Avg. 54



#### ICU Available Beds

**22** 1 Day Δ -5 -18.5%



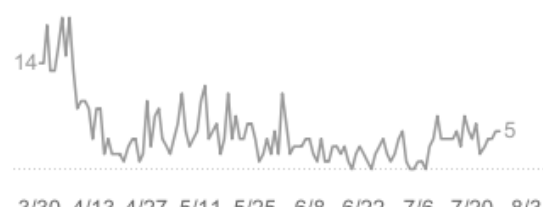
#### Suspected Patients

**62** 1 Day Δ +3 +5.1% 14 Day Rolling Avg. 52

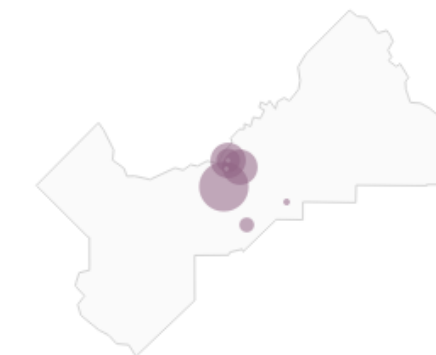


#### ICU Suspected Patients

**5** 1 Day Δ +0 +0.0% 14 Day Rolling Avg. 4



#### Positive Patients by Facility/County



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#### Daily Survey Response Rates

**89%** of facilities (8 of 9) **96%** of licensed beds (1,688 of 1,750)

There are 416 licensed facilities (1 in suspense); one or more facilities can operate under the same license.

Note: Due to a recent change by HHS, NICU bed counts are no longer provided.