



Contra  
Costa  
County

To: Board of Supervisors

From:

Date: July 28, 2020

Subject: Update on COVID-19

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**RECOMMENDATION(S):**

CONSIDER update on COVID 19; and PROVIDE direction to staff.

1. Health Department - Anna Roth, Director and Dr. Farnitano, Health Officer

**FISCAL IMPACT:**

Administrative reports with no specific fiscal impact.

**BACKGROUND:**

The Health Services Department has established a website dedicated to COVID-19, including daily updates. The site is located at: <https://www.coronavirus.cchealth.org/>

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☒ APPROVE

☐ OTHER

☒ RECOMMENDATION OF CNTY  
ADMINISTRATOR

☐ RECOMMENDATION OF BOARD  
COMMITTEE

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Action of Board On: **07/28/2020** ☒ APPROVED AS RECOMMENDED ☐ OTHER

Clerks Notes:

**VOTE OF  
SUPERVISORS**

I hereby certify that this is a true and correct copy of an action taken and entered on the minutes of the Board of Supervisors on the date shown.

ATTESTED: July 28, 2020

Contact: David Twa, County Administrator and Clerk of the Board of Supervisors

By: , Deputy

cc:

## CLERK'S ADDENDUM

As of today the state of California is reporting 466,550 confirmed cases of Covid-19, with 8800 deaths. Contra Costa County currently has 7304 CASES, an increase of 1886 cases in two weeks. Sadly, we have lost 108 people to the virus. Intensive Care Unit (ICU) utilization is at 74% of which 40 of the beds are Covid-19 cases. Of the 931 people in the hospital, 105 are Covid-19 cases.

The state has implemented a monitoring list for counties using various metrics, such as increase in active cases or number of hospitalizations. Contra Costa has on the monitoring list since July 9<sup>th</sup> because of the percentage of people testing positive. On July 18, 2020 there were 189 cases positive per 100,000 people. As of yesterday it was 109 per 100,000. So from slightly over 8% decreasing to just under 8%. The goal is 5% or lower.

Contra Costa has a total of 1600 hospital beds with a surge plan in place. We have 4 people hospitalized in our county who are residents elsewhere, and 16 Contra Costa residents in a different county's hospital. Not all hospitals have been reporting consistently so those numbers may be higher.

Approximately 70% of the fatalities have been amongst those who are living in long-term care facilities, most of whom have been quarantined since March. This is a clear indicator of community spread – the virus is coming in to them, they have not been outside.

We are working diligently to prevent the spread in these facilities but we know there is very high risk as long as community spread is happening. The County is currently following 27 outbreaks in those type of facilities.

Statistics indicate the virus is still disproportionately impacting low-income communities, and communities of color. The data on the County website is being refined to be more clear. Neo-natal ICU beds cannot be converted for adult use so those will be removed from the count of ICU beds available.

On July 15<sup>th</sup> the Federal Government mandated that the hospital data that historically been reported to the CDC is now being reported to the National Health and Human Services. This has resulted in reporting delays and tracking of hospitalizations. Therefore some of the data points and graphs on our website have not been updated. It is not known how long this transition will impact our data.

As reflected nationwide, the County is struggling to get testing results back in a timely manner. At this time it can take as long as two weeks or longer to receive the results, especially those in the asymptomatic category. The County's public health lab can process a small number of tests with rapid turnaround for hospital patients with symptoms but that is only a fraction of the testing that is needed. Slow testing has become a nationwide crisis that hampers containment of the virus and contact tracing efforts. This is mostly a result of a nationwide surge in cases as well as a local surge. The County has been relying heavily on large commercial labs and the massive surge in testing demands from Arizona, Texas and Florida are impacting their ability to serve our local area. Another challenge to testing is still shortages of supplies such as reagents to complete the tests.

The shelter in place in March and April was quite effective in flattening the curve, of flattening the curve. But that came at tremendous cost. No one wants to return to that so we are focusing our strategy on social distancing, hand washing, masking, and protocols for businesses to prevent spread. Those measures are paired with aggressive testing and quarantine to break the chain of transmission.

To meet the increased demand for testing and faster turnaround for results, some contracts for additional labs will be placed on next week's Board agenda and more in later weeks. Additionally Health Services is seeking to increase the salary level for our lab scientists to be more successful in filling the

vacant positions so the County can perform multiple test runs per day. The Department is also seeking to purchase more testing machines in a highly competitive market. Contra Costa is now testing above its target of two people per thousand but still needs faster results returns. The County is working with the state on rapid-result tests but Dr. Farnitano cautions that the results of that type of test are not as reliable. All the partner hospitals are experiencing the same difficulties in supplies, equipment to process the tests, and slow delivery of results. Pool testing is being examined, but each machine for that has to be FDA approved.

Regarding treatment, there is now good evidence that there are several that are effective in treating people with Covid-19, especially those who are hospitalized and very ill. The death rate of the infected is dropping from 5 to 8 percent in the early days of the pandemic to between 1 to 3 percent currently. The drug Remdesivir has shown good results but is still in very short supply. A second drug called Dexamethazone has also shown clear benefit to those very sick with the virus and is a generic steroid drug that has been in existence for many years. For those with very mild illness it is not recommended. Many techniques are in use including the use of blood thinners and rotating patients onto their stomachs to improve fluid balance.

Dr. Farnitano notes that the random trials of hydroxychloroquine have stopped. The drug is NOT effective in treating Covid-19. No benefit has been shown from the drugs hydroxychloroquine or Zithromycin and the side effects may be harmful.

Contra Costa County is on the state monitoring list. Schools in monitored counties are mandated to do distance learning and not do in-classroom learning while on the list and at least two weeks after they fall off the list. Our local schools will be using distance learning. The state did mention they were going to set up a waiver process where elementary schools, defined as Kindergarten through 5<sup>th</sup> grade, could potentially apply for a waiver. If that waiver had the support of the local school superintendent, the local teachers union or teachers and parent organization and the support of the local health officer they may be able resume in-person activity. That process is still being worked on at the state level. The state has promised a checklist that may be available as soon as next week. Much depends on improved testing result capability in light of possible outbreaks.

Everyone wants the children to be able to safely return to school. The best way to get the children back in school is to slow the spread!