

March 3, 2022 HPP / HCPWG Meeting Minutes - Zoom

COVID-19 Situation Update

- We're seeing a decrease in cases – Public Health operations are shifting to the needs of the response
- As of March 1, contact tracing has ended except for congregate care
- Community Testing
 - Has slowed down.
 - The Morro Bay site will close as of March 31
 - The other sites, Paso Robles, SLO, Grover Beach will stay open but days/hours may be limited
- Vaccinations at the Public Health sites
 - Has slowed down
- Monoclonal and COVID-19 Therapeutics distribution is still a MHOAC function
 - We are currently working with 22 providers for COVID-19 Therapeutics.
 - Currently in the county, we are distributing Sotrovimab, Bebtelovimab, Paxlovid and Evusheld.
 - Bebtelovimab is the only therapeutic that is effective against Omicron BA-2. We are currently seeing under 10% circulating in our county.
- Free COVID-19 tests are available at covidtests.gov and at some participating pharmacies

PHEP/HPP Update

- Statewide Medical and Health Exercise
 - Has been canceled the past 2 years but will resume in the next grant year.
 - Will have one possibly in spring of grant year 2022/2023
 - The Coalition Surge Test Exercise has been renamed the Medical Response & Surge Exercise (MRSE) and needs to be completed by June 2023.

Communications Update

- Will resume tracking GETS Card testing and satellite phone testing in Q4. PHEP Communications functions have been paused during COVID response.
- Robin announced her retirement date of June 30, 2022. We are so grateful to have worked with Robin for the last 15+ years after her initial “retirement”. She will be volunteering more at the Pacific Wildlife Center helping injured and sick animals recover and return to the wild.

Partner Update – Current COVID-19 status & meeting preference

- Dana Melgares – AGCH infection control: doing OK, not many in-patient COVID-19 patients, mostly just through the ER; prefers in-person with ZOOM option
- Dean Gosselin – VHHC – had another outbreak but now COVID-19 free; Prefers ZOOM meetings
- Melissa Smith-Huff – Templeton Endoscopy Center – getting better; no preference
- Michelle Payne – RESCARE – doing well, day programs are starting up again; no preference
- Natasha Lukasiewich – new ER Director at FHMC – currently in a post-crisis mode; no preference.

See presentations attached.

Medical Response & Surge Exercise (MRSE)



COUNTY OF SAN LUIS OBISPO

MRSE Purpose

- The purpose of the MRSE is to provide HCCs and their members with an opportunity to test their surge response and preparedness capabilities.
- The scenario used in the MRSE is defined by the HCC, but all exercises will test an HCC and its members' capacity to accommodate a surge of patients equal to at least 20% of its staffed-bed capacity and to ensure the availability of staffed beds, supplies and equipment, and personnel across its membership.



MRSE General Information

- The MRSE is replacing the Coalition Surge Test (CST) and Hospital Surge Test (HST)
- The MRSE is due by June 30th, 2023 (extended from 2022)
- The MRSE is an annual requirement
- The MRSE is a functional exercise:
 - *an operations-based exercise designed to test and evaluate capabilities and functions while in a realistic, real-time environment*



What has changed from the CST/HST?

- Removal of the low- or no-notice requirement
- Removal of a time limit for the exercise (previously 90 minutes)
- Including flexibility for the HCC to define its surge scenario
- Enabling greater linkages to other program components (e.g., Hazard Vulnerability Analysis (HVA), each HCC's individual response plan)
- Increasing opportunity to meet non-HPP exercise requirements such as those required by Centers for Medicare and Medicaid Services (CMS), the Joint Commission, and state/local authorities
- Use of only five required bed types in the 20% surge calculation, rather than all HCC staffed beds.
- Additional bed types may be added by your HCC depending upon your surge scenario
- Increasing the ability of HCCs to utilize a qualifying real-world incident in lieu of the MRSE



MRSE Outcomes

- The HCC has validated all applicable response plans and identified gaps which remain unaddressed.
- The HCC is better prepared to respond to a large-scale surge inpatients.
- HCC members have improved their capacity to assess the availability of and secure access to key resources such as staffed beds, personnel, supplies and equipment, and patient transport during a large-scale community incident.
- The HCC has strengthened its role in sharing information, situational awareness, and coordination during a large-scale community incident





COVID-19 UPDATE

February 23, 2022

COUNTY OF SAN LUIS OBISPO HEALTH AGENCY

PUBLIC HEALTH DEPARTMENT

COVID-19 Status in SLO County

Total cases	51,680
Active cases	1,177
14 day daily case avg	119
Hospitalizations	24
ICU	4
General	20
Deaths	432
Pending	19

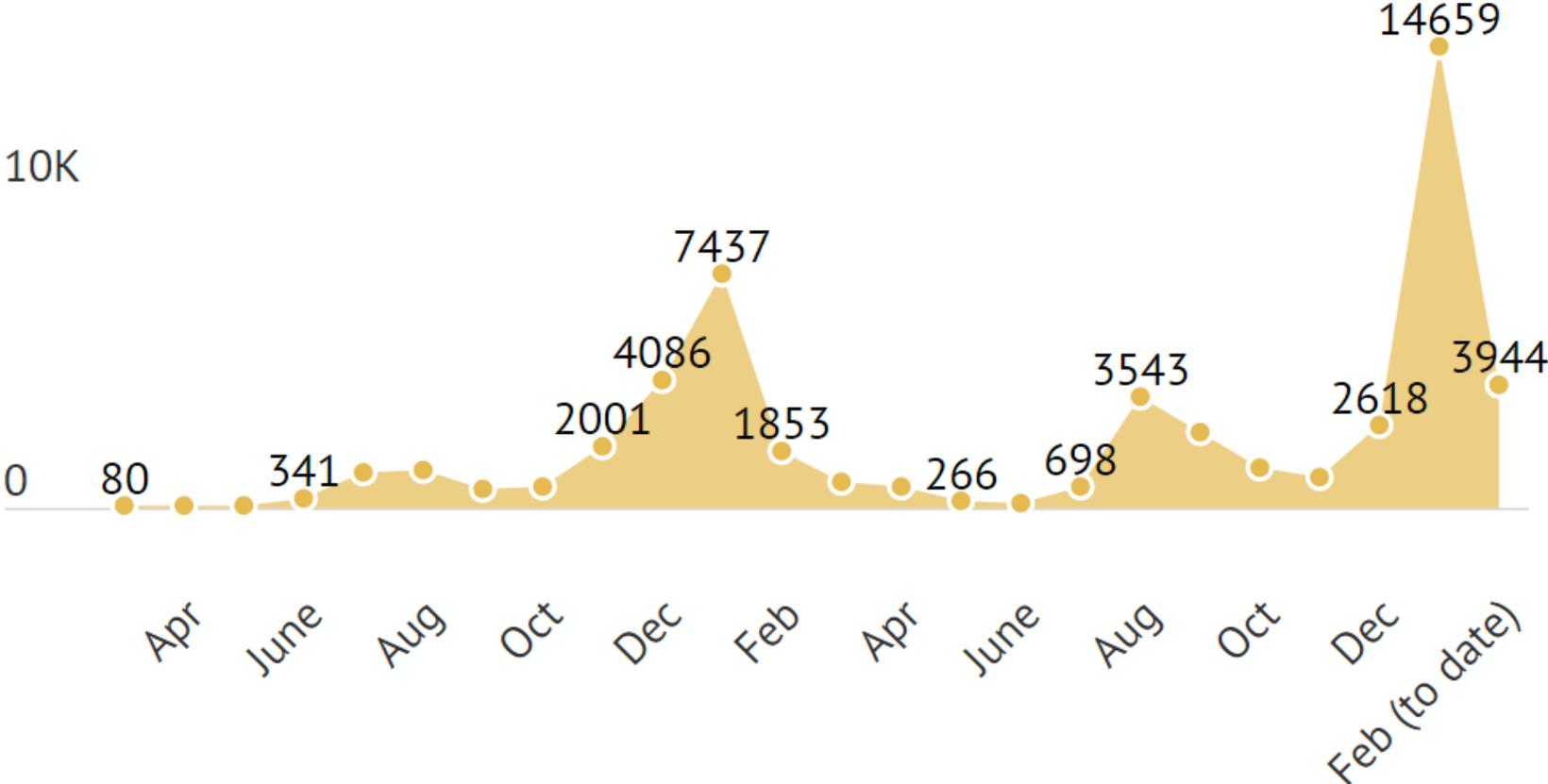
[Data - County of San Luis Obispo, CDC COVID Data Tracker 2.18.22](#)



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SLO County COVID-19 Cases by Month



Data - County of San Luis Obispo (ca.gov) 2.18.22



COVID-19 Cases by Age, 14 day average

Last 14 Days By Age Group (by Test Collection Date)

Age Group	Confirmed Cases	Percentage of Cases	Percentage of Population
0-11	192	12%	11%
12-17	118	8%	7%
18-22	179	10%	11%
23-29	168	10%	8%
30-39	282	16%	11%
40-49	246	14%	10%
50-64	298	18%	18%
65-74	107	6%	14%
75-84	46	2%	8%
85+	24	2%	3%
Total Cases	1660	—	—

Age groups disproportionately represented in cases

Data - County of San Luis
[Obispo \(ca.gov\)](https://www.slopublichealth.org) 2.18.22



SLO County Outbreak Data

	1/24/22	2/18/22
Congregate Settings:	59	22
K-12 Schools:	52	47
Preschool/Child Care:	34	27

Data from 2.18.22

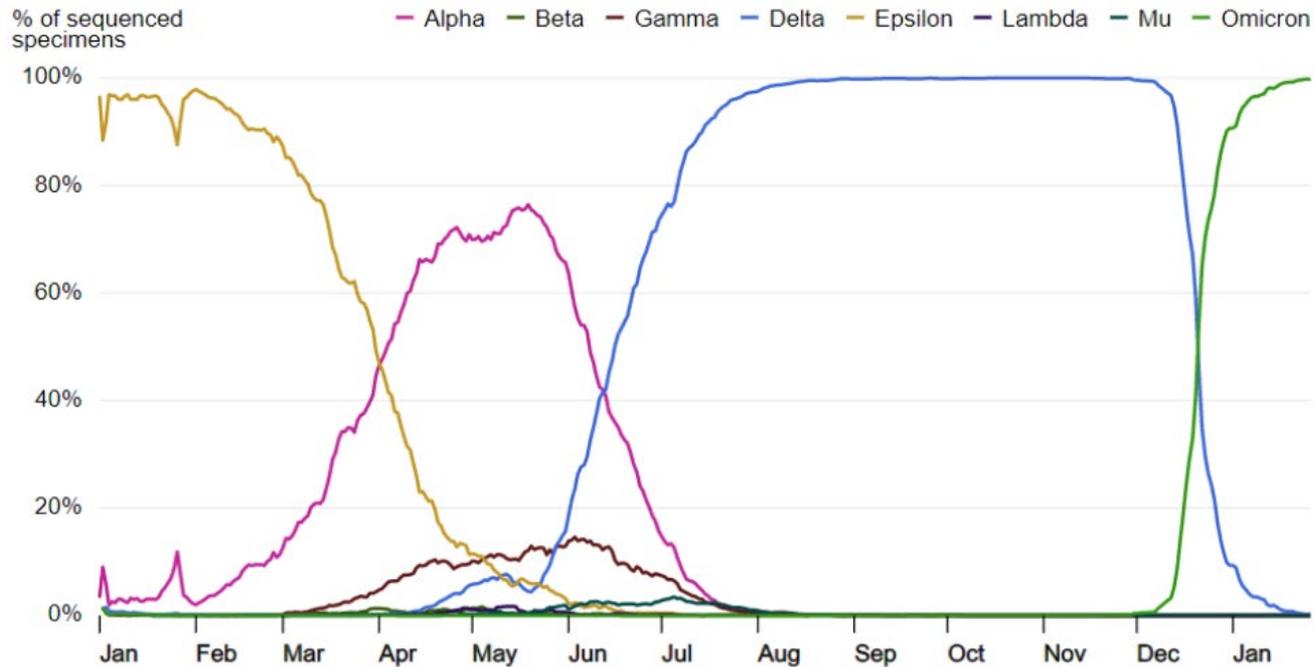


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Omicron, SLO County

- 100% of local specimens sequenced are Omicron
- All specimens sequenced in our lab are Omicron BA1



Governor Newsom's SMARTER Plan

S

Shots- Vaccines are the most powerful weapon against hospitalization and serious illness.

M

Masks- Properly worn masks with good filtration help slow the spread of COVID-19 or other respiratory viruses.

A

Awareness- We will continue to stay aware of how COVID-19 is spreading, evolving variants, communicate clearly how people should protect themselves, and coordinate our state and local government response.

R

Readiness- COVID-19 isn't going away and we need to be ready with the tools, resources and supplies we will need to quickly respond and keep public health and the health care system well prepared.

T

Testing- Getting the right type of tests - PCR or antigen - to where they are needed most. Testing will help California minimize the spread of COVID-19.

E

Education- California will continue to work to keep schools open and children safely in classrooms for in-person instruction.

R

Rx- Evolving and improving treatments will become increasingly available and critical as a tool to save lives.

[smarterplan.pdf \(ca.gov\)](#) 2.17.22



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Mask Mandate

- [Indoor Mask Order Lifted Feb. 16](#)
 - Exceptions:
 - Healthcare facilities
 - K-12 schools
 - High-risk settings (child care, homeless shelters, emergency shelters, corrections, long-term care facilities, and public transit)
- CDPH: “Fully vaccinated individuals are recommended to continue indoor masking when the risk may be high. Surgical masks or higher-level respirators (e.g., N95s, KN95s, KF94s) with good fit are highly recommended.”

[Guidance for face coverings \(ca.gov\)](#) 2.17.22



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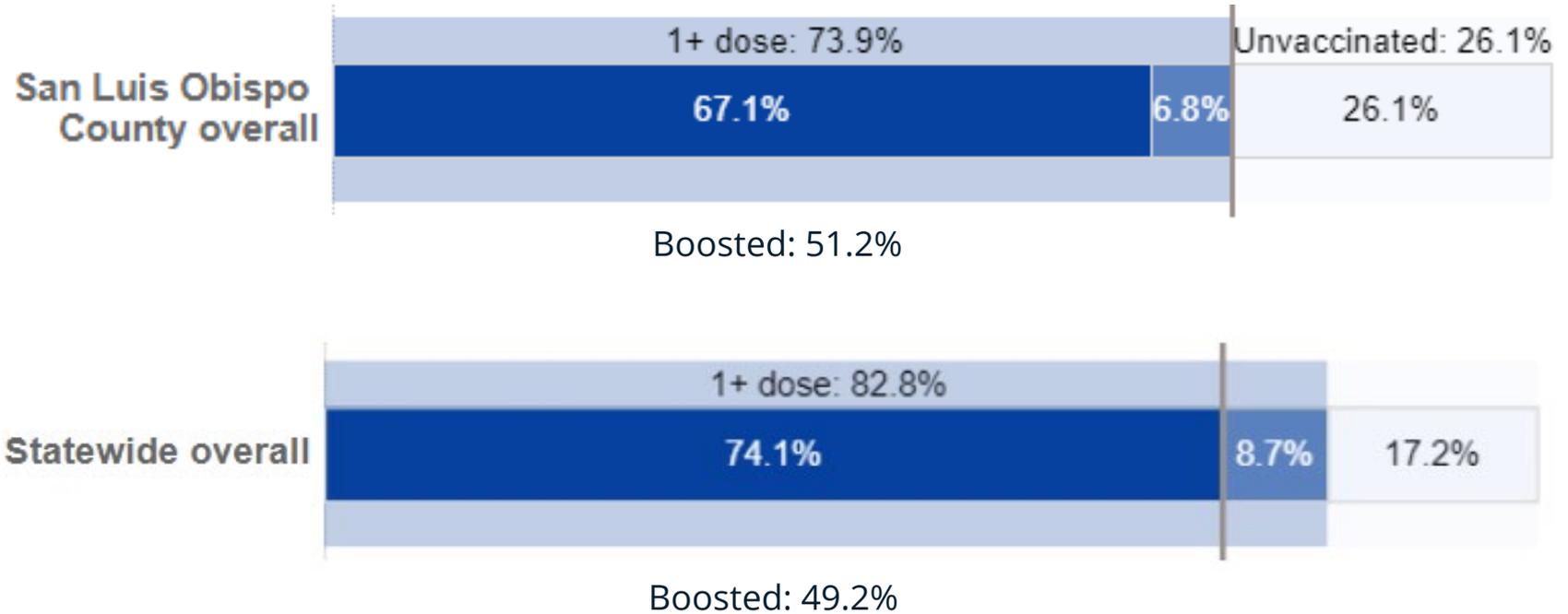
www.slopublichealth.org

Testing

- 1.67 day average turnaround time (PCR)
 - 17% test positivity (down from a high of 35% in January 2022)
 - Morro Bay testing site to close end of March
- At-home rapid test kits distribution for vulnerable areas
 - SLO Food Bank - San Simeon, Shandon and senior meal deliveries
 - Promotoras – San Miguel, Paso Robles, Oceano
 - Homeless Serving Organizations and Shelters
 - Child Care providers
 - Behavioral health clients
- [COVIDtests.gov](https://www.covidtests.gov) – Four free tests shipped to each home
- Insurance reimbursement for over-the-counter tests purchased.



SLO County Vaccination Rates



[Tableau Server \(ca.gov\)](#) 2.18.22

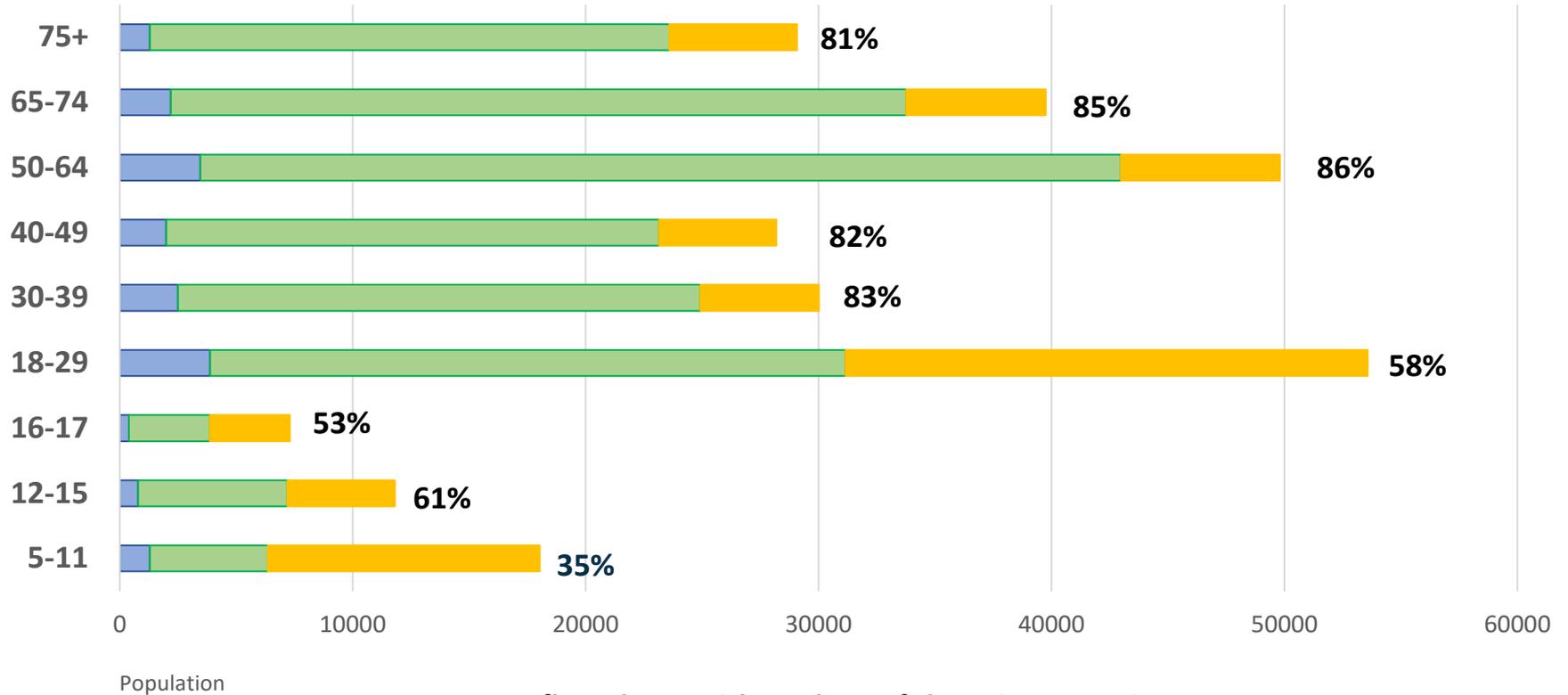


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SLO County Vaccination Rate by Age (Primary Series)

Partially Vaccinated Fully Vaccinated (primary series) Not vaccinated



Percentages reflect those with 1+ dose of the Primary Series

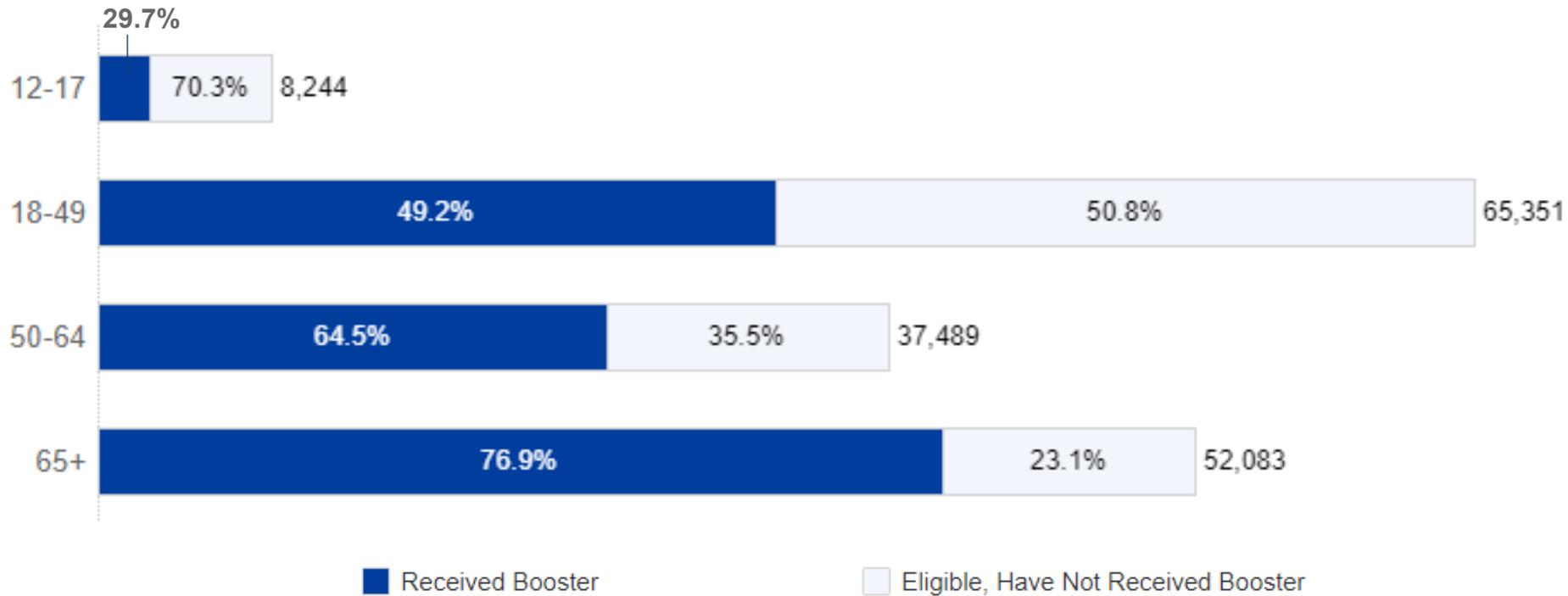
DoF Pop Estimates (2021) and Snowflake LHJ Data 2.18.22



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Boosters/Additional Doses by Age



[COVID-19 Vaccine Progress Dashboard | Tableau Public](#) (2/16/22)



SLO County Vaccination by City

City	% Population Fully Vaxxed 2.8.22	% Increase of Fully Vaxxed from 6.8.21	% Boosted (of those Fully Vaxxed)
Creston	56%	16%	49%
Santa Margarita	58%	15%	52%
Atascadero	59%	15%	54%
San Miguel	56%	20%	38%
Shandon	56%	25%	34%
Paso Robles	61%	18%	49%
Oceano	63%	19%	47%
Grover Beach	63%	17%	52%
San Simeon	65%	21%	35%
Los Osos	67%	14%	63%
Arroyo Grande	67%	15%	59%
Templeton	68%	17%	54%
Cayucos	70%	12%	64%
Pismo Beach	70%	12%	64%
Nipomo	70%	18%	53%
Morro Bay	72%	14%	61%
Cambria	77%	11%	62%
SLO (93401)	80%	16%	61%
Prioritized areas for mobile clinics and outreach/canvassing			

[CHHS Open Data - COVID-19 Vaccine Progress 2.8.22](#)

* Avila & SLO (93405) not included due to data errors



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Fully vaccinated by Race/Ethnicity & Age

Goal:
>70% Fully vaxxed for all groups

	5-11	12-17	18-49	50-64	65+	Grand Total
Asian	27.9%	44.4%	66.8%	76.3%	62.8%	64.1%
Black	13.4%	43.8%	22.9%	35.7%	62.5%	29.5%
LatinX	16.7%	48.8%	58.6%	66.1%	56.8%	54.1%
White	28.6%	47.8%	57.3%	70.8%	73.4%	62.8%
Grand Total	27.8%	51.0%	63.5%	76.9%	81.1%	67.1%

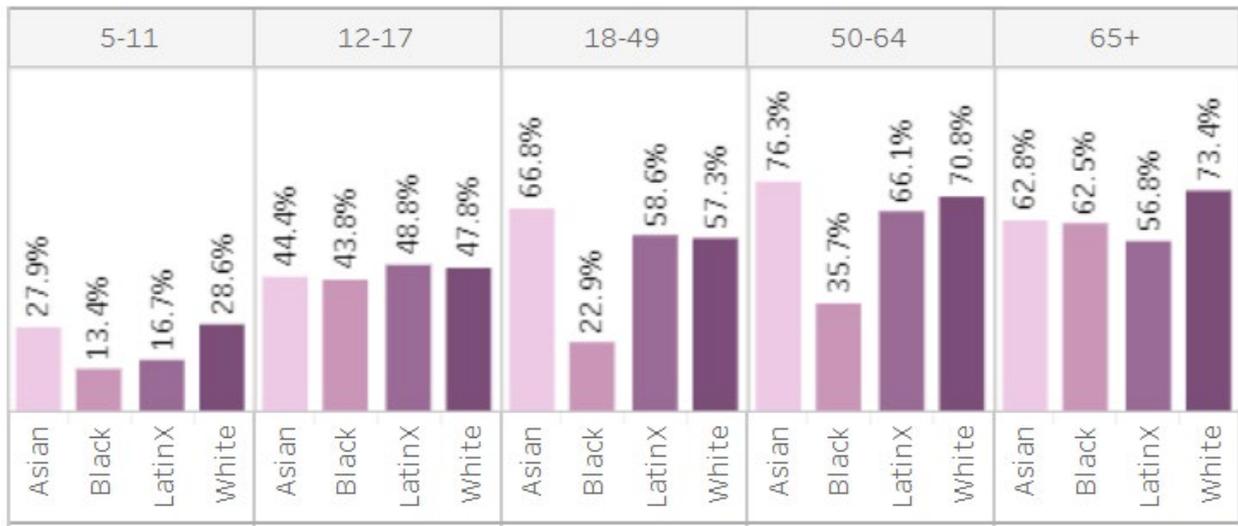


Tableau Server (ca.gov) 2.16.22



Mobile Vaccine Clinics, Age 5+

3/3 **Paso Robles**, Flamson Boys & Girls Club
Thursday, 5 – 7pm

3/4 **Nipomo**, Nipomo Elementary*
Friday, 3:30 – 7:00pm

3/8 **Templeton**, Templeton High School*
Tuesday, 3:15 – 6:30pm

3/10 **Paso Robles**, Flamson Boys & Girls Club
Thursday, 5 – 7pm

Open to the public

No appointment necessary

* Flu
vaccines
available

Details: [SLOPublicHealth.org/COVID19/Vaccines](https://www.slopublichealth.org/COVID19/Vaccines)

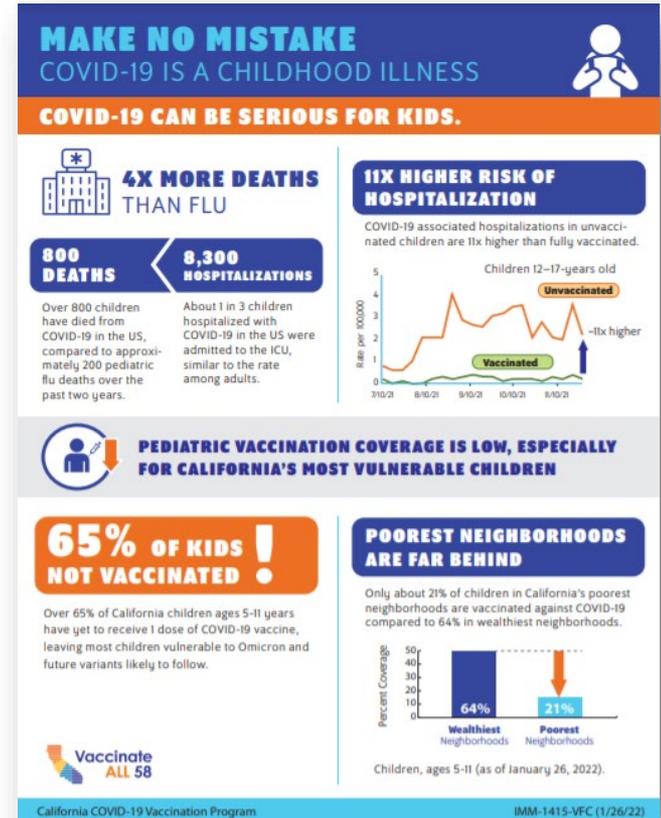


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COVID-19 is a Childhood Illness

- 4x more deaths than flu
- 11x higher risk of hospitalization for unvaccinated children
- Poorest neighborhoods are far behind
- 65% of kids not vaccinated



Infographic: COVID-19 is a Childhood Illness





Top 5 Reasons to Vaccinate Kids



Unvaccinated children are at risk of getting COVID-19, + potential serious complications, and/or long-term impacts.



The vaccine is safe and effective, and no long-term problems have been seen for any vaccine.



Getting those who are eligible vaccinated can help keep schools & communities safe.



Getting them safely back to the classroom and their favorite afterschool activities supports mental health & wellness.



Vaccines are safe, effective, and free

[Infographic 8x11Poster](#)



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Therapeutics

TREATMENT	VARIANT	
	OMICRON	OTHER
bamlanivimab and etesevimab	✗	✓
REGEN-COV (casirivimab and imdevimab)	✗	✓
Paxlovid	✓	✓
Sotrovimab	✓	✓
Veklury (remdesivir)	✓	✓
Molnupiravir	✓	✓

✓ = approved ✗ = not approved

[COVID-19 Treatments - County of San Luis Obispo \(ca.gov\)](https://www.ca.gov)



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Communications Update

- Adjusting pace to generally weekly updates (data, digest)
- Mass comms: returning to pre-surge framing of vaccine as routine healthy choice
- Focused campaigns for key audiences
- Integration with range of public health messages and messengers
- Continuing to engage community health care providers as key messengers



COVID-19 Informational Materials Available

- FREE COVID-19 buttons, educational brochures, and posters are available in English and Spanish.
- Order here: <https://forms.office.com/g/j25mG2QNNY>
- [Resources for Partners](#)

