

## **TRANSCRIPT: Snohomish County Response to COVID-19, August 11, 2020, Briefing**

**Dave Somers:** Well, good morning. Thank you for joining us again today. And just a few brief comments. As you all know the entire county from Woodway to Darrington and Stanwood to Index have been negatively affected but it is helpful to step back and remember that the entire region, state, country, and world is suffering through and from the COVID virus. So we are not alone in this.

We've had over 200 fatalities in Snohomish County and many other families have had to deal with members who have been gravely ill. Many others, people have lost their jobs and really seeing their lives change and some of their dreams vanish. We have major manufacturers severely affected all the way down to mom and pop stores and restaurants and service workers. Really, nobody's untouched by the economic downturn that we're facing.

Right now we've got a lot of families with school-aged children who are worried about how to juggle work and homeschooling and the challenges that remote learning really presents to all of us. So it's been an extended shock to our community.

Again, there's only two ways out. Readily available and effective vaccine or the widespread use of masks and social distancing. So there really are no shortcuts, there are no cheats or easy solutions. Really no videos or messages we can give to people beyond please.

We are a country that can get things done. We have a can-do spirit. We have faced many challenges over the years. We've sent people to the moon, vehicles to Mars. We've cured complex diseases before but it all takes time and it takes effort and takes us all pulling together. So again, wear a mask, encourage and more than encourage others around you to do the same. Socially distance. We can really conquer this by being selfless and thinking about those around us.

We've also really been working hard to tackle the economic downturn. We've rolled out two rounds of grants for small businesses and one grant program for aerospace companies. We're going to try to do more if the federal government can really get a bill passed and assistance we need that desperately.

We've also rolled out a grant to help retain workers who have been furloughed or laid off because of the pandemic. I've set up an Office of Economic Recovery and Resiliency and we're working on making sure that we're really doing everything we can to help our communities.

We've also established an economic and workforce recovery task force that brings in our partners and others from around the county to assist us in really mobilizing our resources to help businesses and workers and families. We've purchased a million, well millions of pieces of PPE for our frontline workers and we've also established food distribution programs. So we've been really scrambling to mobilize and respond as best we can.

Because of disruptions to travel our local aerospace companies, including Boeing are hurting. I've called meeting of the Snohomish County Aerospace Task Force for this Thursday. We're going to be making our case for why Snohomish County is really the best, most profitable place to make airplanes and we really want to encourage Boeing to look long and hard of the quality workers, we have here in Snohomish County.

We have over 50 year history with Boeing here in Snohomish County and we'd like to see that go for another 50. So we're going to continue to do as much as we can to help our communities, our businesses and really we're, we know that we're in this for the long term. It's going to take a while, but we're going to keep working hard at it. So if people don't wear masks, don't maintain social distancing, then all these efforts are really going to be for naught. So, please continue to do that and be vigilant about that.

And our numbers are turning around and Dr Spitters will mention where we're headed in the right direction. So kudos to all of you. Thank you for really taking this seriously, but keep it up. So with that, I'll turn it over to Dr. Spitters.

**Chris Spitters:** Thank you, Executive Somers and good morning everyone. Just like to give you an update about the recent data related to COVID-19 and with our convener's help, possibly, I'm going to try to share the screen just to show a couple of slides. So this will take just a second here.

Right, so you hopefully now are seeing a slide that shows a green line which is the case rate over time moving from left to right from March up through the present and in two week rolling intervals, meaning every week we look at the prior two weeks, add up all the cases, and then calculate rate per 100,000 for that two week period. And each one of those is a point on that line moving from left to right.

So as I'm not sure if you can see my pointer. But as we went through the initial wave of COVID-19 in March and April things peaked, came down slowly, and then we were in this very good space here during May and early June, and then things picked up again shortly after we moved into Phase Two. We had six consecutive weeks of increasing case rates peaking in late July at about 98 cases per 100,000 for two weeks. The next week. it was basically flat. And then this past week, the two weeks, going from last Saturday back 14 days up things appear to be turning around.

So that's that's a good signal as Executive Somers mentioned and not least of all important is the efforts of the community to reduce the gathering sizes, wear the face masks and distance ourselves from one another in public.

Now this this graph is really a breakdown of the prior graph into age groups. And the key thing I just want to show you is that these groups all here are our younger age groups. That the orange group is the 20 to 29 age group that we think kind of fueled the last rise through a combination of probably returning to customer facing work and work settings where they are around others their same age, as well as probably some indulgence and gatherings that were of a frequency and size that we would not recommend.

Over time, that worked its way both down the age chain into these younger individuals, adolescence and children, as well as some folks in their 30s and 40s. And what we've seen in the last week or two, is that that appears to have flattened out and it's coming down.

Now, we really need to see that continue to come down for another couple of weeks before I think we can really say with confidence that that's not just an aberration, but it's certainly a good signal that the community's efforts to get things under control have helped. Additional features that might have contributed to this decline or the case investigations and that and that the contact notifications and quarantines. And so that's that's been very helpful.

One possible warning signal, something that we're remaining vigilant about is in these older age groups in the in the dark blue, those in their 50s, and then the green folks over 60. That appears to have flattened out but the over the long run, you can see that there's a slower increase them in the younger age groups and a less impressive change in. And that's again because those are our age groups that are more likely to end up in the hospital, higher frequency of other medical conditions that make hospitalization or severe illness more likely. That's really what what you know our whole control effort is about trying to prevent that. So we'll, we'll keep a keen eye on especially on these age groups in the coming weeks.

This is just to show you what these rows are weeks over time, over the past couple of months. These are the total numbers of tests done in the county and the positivity rate. And we just want to highlight a couple of things for you here. First that the total number of cases diagnosed has remained essentially the same over the past several weeks. The number of tests went down. As you may recall in prior weeks, we've mentioned that there's a somewhat of a log jam in the national commercial COVID testing system. And so that, and in some laboratories are having problems getting a hold of reagents or other materials necessary for doing the testing. So that led virtually all clinical settings to back away from widespread testing of asymptomatic individuals and asymptomatic people are only being tested a targeted nature now, like if they're close contact part of an outbreak that sort of thing. And so we think that that's what's driven this decline of about a third in the number of tests over the third to the fourth week of July. And correspondingly, we've had an increase in the percent positive, but the total number of positives is roughly stable.

What we're potentially not detecting are some asymptomatic cases but again the targeted asymptomatic testing, looking at folks who are more likely to be infected: close contacts part of an outbreak that should still be occurring. And so we shouldn't be missing too many of those. So part of most of the increase in the percent positive. it's really been driven by this decline in the number of people being tested, the vast majority of whom are asymptomatic.

Last slide I want to show you is just the hospitalization rates. You see this up and down nature. It's a very relatively small numbers. We've got when we peaked in well, we actually peak back in March. That's not on this graph up at around 100 people in the hospital at one time. Things gradually came down to where we reached a low of about 20 in in early July. And things have, in an up and down fashion, but the overall trend is up and is somewhat consistent with that other slide I showed you with the older age groups over this same time period, having a slight increase. So again, this and the incidence in the older age groups are the key factors that we're keeping an eye on going forward.

So cautious optimism about where things are going, it seems that that all the efforts of the community, public health, workplaces and other places where people are congregating are maybe starting to have benefits.

And like Executive Somers, I urge us all to follow that guidance, especially around the use of face coverings and public staying six feet away and limiting our social circles really to, you know, five people or less and keeping that a stable group over time.

So with that, I'd like to hand it over to Therese Quinn, who is with our the Health District's Public Health Emergency Planning and Response Program. She's the coordinator for the Medical Reserve Corps.

**Therese Quinn:** Okay, thank you very much. I don't know if you've heard of the Medical Reserve Corps before but it's a group of volunteers who our mission is to supplement the health care system in times of crisis. And the Health District has had the Medical Reserve Corps unit since 2007 and that's when I started working at the health district. We've done different kinds of work when we're in steady state. We do things like have first aid stations and more fun things like that.

However, Medical Reserve Corps volunteers have worked in different types of disasters, since 2007 when there was flooding that happened back in 2007 and eight our volunteers staffed emergency call centers. Then when the slide happened near Oso, our volunteers again helped in the emergency call center, they worked in the operation center, emergency operation center. They assisted in other things at clinics and behavioral health support. And they've also worked at the cold weather shelters in Monroe and Snohomish. So our volunteers have done a lot of different things.

But since January, when we had COVID come we have had over 200 volunteers active in this response and they have worked over 15,000 volunteer hours. They've done a lot of different things in that. They started out working at the emergency call center. We had them working on supporting logistics, working as couriers running test kits to facilities and taking specimens to the lab, different types of things like that. We've had them work on testing operations, which is our biggest thing that we're doing now. They've also worked at the warehouse. We're helping all kinds of different operations, also screeners so Providence Hospital has asked MRC volunteers to come help their staff provide screening at their entrances at Pacific campus and they're also doing that at the health district.

So, a lot of people think that Medical Reserve Corps are all doctors and nurses. And we do have doctors and nurses, but we have a lot of other people that help as well. And we have we have interpreters, we'd love to have more interpreters. We have people that have other licenses.

But we have most of the people that are volunteers are not medically licensed and they do amazing work. I, I am very impressed with the work that volunteers do and they come out and they help out. I have to tell you, I'm very humbled by working in this job because I get to work with people who give their time for free to help the community and it's just so rewarding to work with people like that.

So we do need more volunteers, as we are continuing to work in the response. The testing is very labor intensive and takes more people, especially when there's more people coming through. So we're always welcome to have new volunteers. We'd love to have doctors and nurses and interpreters and anybody who wants to help. We're very flexible. We want to meet people where they are to be able to. Whatever their schedules are, I'm sure we can find a job for people to do. So, thank you very much.

**Dave Somers:** Thank you. Therese. Great work really, really kudos to the whole team. Thank you.

We've got a question for Dr. Spitters. The state has not been posting negative test results due to issues with its database. Are the state's problems impacting the health district and measuring the viruses spread in the county, and if so, in what way?

**Chris Spitters:** So yeah, this morning I just spoke with our lead epidemiologist about about this matter. The state is having some problems with the electronic laboratory reporting. Labs, positive and negative results for COVID, as well as positive results for all other notifiable conditions that are required to be reported by laboratories come to the state health department through an electronic portal. And then their county of origin is determined and they're distributed out to us to investigate. We're getting all the positives, so it's not really interfering with our immediate disease control interventions. We certainly all want you know precise, accurate numbers in the long run, but in the short run glitches like this have occurred from time to time. And you know we get back on track and catch up and I anticipate that that's what will occur this time. So no short term impact on our disease control efforts. And long term, I think it'll be a non-issue as, we, we get the problem resolved and and finalize those numbers that any numbers that are currently inaccurate as a result of that.

**Dave Somers:** Another question for you, Dr. On Wednesday visitation will be allowed at long term care facilities. It was a state decision. This week you recorded outbreaks of several such facilities. How will you let residents and their family members know visitation will not be allowed there for a few weeks, where there are outbreaks?

**Chris Spitters:** And so you know the state guidelines for visitation are also phased much like the safe start plan. So there's essentially now a safe start plan for long term care facilities that addresses visitation and other activities in long term care facilities such as skilled nursing facilities, assisted living, adult family homes, and other like settings.

That, the phases of that progression are independent of the county status with respect to other aspects of public life. So we're in Phase Two county-wide for in general with respect to COVID-19, but because our case rate in Snohomish County exceeds 75 per 100,000 per two weeks, we are in Phase One of the long term care facility program and therefore, although that plan goes into effect Wednesday, the framework goes into effect, visitation in long term care facilities in Snohomish County county-wide does not change.

Visitation can be remote by electronic means. Outdoors. And and then these these window visits that some places permit. All of those, anything that's outdoors or the window visit, is physically distance by six feet and involves use of face coverings. But, and then congregate activities within long term care facilities like group dining, group activities are still discouraged in Phase One. So really, there should be no change and activities in Snohomish County long term care facilities, outbreak are not, in any given facility until we get a little bit further down the road here.

Executive Somers, you're muted.

**Dave Somers:** There we go. You would think after six months, I would get this. For Dr. Spitters, explain again why the 9% positive rate is not alarming.

**Chris Spitters:** Well, I didn't say, well maybe I did. I can't remember if I said it wasn't alarming or not. It certainly draws attention when you go from 5.8% up to 9%. That's a, you know, our goal is to be 2% or less and so we're above that now. The total number of positives has remain stable over the past three weeks; the amount of testing went down. We we'd like to see more testing occurring.

So I think that's concerning, it bears watching. This recent decline that we've witnessed in case reports certainly could be an artifact of less testing and occurring. And if that's the case, time will tell. So I think not alarming, but certainly concerning, merits attention and vigilance and we'll continue to watch. But you know, our goal is to get the percent positive and the total number of cases being reported and transmission in the community down. So any increase in the percent positive is a step in the wrong direction. There you have it.

**Dave Somers:** Are there any more questions. Anybody have any more questions. Got a couple minutes left.

Okay. Regarding the long term care visitation. The state has said visits could start Wednesday if the facility has not had a new case in 28 days and enough PPE. Are you saying that the health district will prevent visitation on Wednesday until I can verify those situations?

**Chris Spitters:** Well, will I think we'll have to discuss that. My understanding of the is that the plan goes into effect Wednesday. But one of the parameters is assigning a Phase to a county and those visitations that are afforded in the plan beginning Wednesday only take effect in a county that's in long term care Phase Two, which we are not in. We're in long term care Phase One. So we'll certainly send the signal to the Department of Social and Health Services that regulates the long term care facilities, but there would be no under the under the governor's framework, which we all are under and cannot be less restrictive than, there can be no in indoor person to person visitation in long term care facilities, at least until we get down below 75 cases per 100,000 for two weeks.

**Dave Somers:** Now we've got two more to wrap it up. And I think you've addressed this, but just to be absolutely sure to follow Jerry's question. Will there be no outdoors starting tomorrow in Snohomish County?

**Chris Spitters:** Believe outdoor visits that are physically distanced and that involves these face coverings and symptom screening for the visitor are allowed. There's a, I think a number limitation on them. It might be one or two individuals. That I I don't have that guidance right in front of me, but we will certainly make sure that that Department of Social and Health Services is making Snohomish County long term care facilities aware that they are in Phase One and should follow those that guidance.

**Dave Somers:** Okay, and last question. The state has a pretty active public education campaign on COVID. Can you describe any separate public education efforts of the county and health district? How much money is earmarked for the effort and how is it being spent?

**Chris Spitters:** Well, we, you know, we have the ongoing public information program. There's there's these press, press briefings. We have weekly press releases, we put the data on the website. And then we have a blog that it has a lot of information, usually one or two new updates on one, on a topic or two weekly. And we are, our communications team is also working on putting together some messaging for social media, involving community leaders, surrounding advice and recommendations, reinforcing the preventive measures that that Executive Somers and I have been emphasizing all along.

So I can't speak to the the dollar amount that's going into that, but it's just a significant amount of our daily activity. We have a whole communications team working on all these matters and coordinating with the county's communications team.

**Dave Somers:** Yeah, I just add on to that. We did not sort of allocate a certain amount of dollars for public education that I'm aware of. There, there may be some, but we're using all the resources, our staff in our Emergency Management Center, our joint information team, Dr. Spitters and their social media outlets to get information out. We're also working with some other partners around the region that are involved in public education campaigns and want to assist that. But again, we're not targeting a certain amount of dollars for that.

And we did get a another question under the wire. Dr. Spitters, the state has seen its first death in someone under 20. An otherwise healthy 19 year old. It wasn't this county. Is there anything you can say to parents or young adults about how concerned they should be?

**Chris Spitters:** Well, first, I wasn't aware of this, but I think time was eventually going to bring us here. I'm very sorry for that individual and their family and their other loved ones, so that's that's heartbreaking for them. And certainly, another signal to all of us that while the elderly and the medically vulnerable are more likely to have these sad endings, it can occur with anyone. And it's just on on all of us to do our very best to try to prevent transmission to other folks. And and by doing those things that, that we keep saying face coverings, physical distancing, limiting your participation in gatherings, and and keeping your social circle small. But a very sad event for that family and and I'm sorry to hear this.

**Dave Somers:** I think that wraps us up.

**Joint Information Center:** This is Kristin in the Joint Information Center. Thank you again for joining us today and for all of your questions. We're going to go ahead and wrap up and please stay tuned for future media availabilities.