

## **Snohomish County Response to COVID-19, October 27, 2020, Briefing**

**Executive Dave Somers:** Well thank you and thank you all for joining us today. Good to see you all. Before I say anything about the pandemic, I just want to encourage everybody to vote. So one week from today is the last possible day to get your ballot to dropbox or get it postmarked. So in Washington state you can have your ballot postmarked on election day and it will count. But don't wait. The sooner you get it in, the better. So for all the sound and fury of this election cycle, it's really up to the voters. The ultimate choice rests with the people so vote please. And if you haven't registered to vote, there's still time. If you have not yet voted, please do so and vote early. It really looks like a record-setting year for voter participation, and the earlier votes are cast, the easier the count will be. And you can register in person at the county auditor's office in Everett, they are open for business this week. There are lines I understand, but you can both drop your ballot off and register if you need to. So if you have any questions, reach out to the county auditor or go to their website.

So on to COVID-19. Once again we're seeing the case numbers spike and grow ever higher. This really isn't a local or even a regional problem. What we're seeing is nationally and many places around the globe, so it's of great concern. So there's a bit of a lag here locally but we're now seeing infections among older populations growing as well as hospitalizations. So Dr. Spitters will be giving us lots more details on that in a minute. But I really can't stress this enough, if you want to prevent another shutdown, please wear a mask, social distance, and limit any unnecessary gatherings, particularly Halloween and other holidays. I know that's tough, but the more people who get together the higher the risk. And to really preserve your health and the health of your families and friends, we really need to socially distance. And the only way we're going to get the economy back again and going again is to defeat this virus. So the places that have been successful around the world at opening up their economies more have done so with social distancing, masking, contact tracing, and testing, so we've got to beef up our efforts if we want to get back. So we need everybody's help on that. It's really not somebody else's problem. Every one of us has the solution, as we've been saying for six months now.

Small businesses particularly have had a really horrible year. We want to try to help as many of them as possible. Want to get our economy going again. But we've got to get the infections under control and we don't want our hospitals to get overwhelmed. I saw that Idaho is now sending patients into Washington because they're at capacity. We're starting to really bump up against the problem we've been trying to avoid all along which is maxing out our hospital capacity. So still time to bend the curve back down, but we need to really up our actions and up our protective measures and just take this seriously and hope that a vaccine is coming.

So with that I'll hand it over to Dr. Spitters from the Snohomish Health District.

**Dr. Chris Spitters:** Thank you Executive Somers. And good morning everyone. You know my comments are really just going to add a little detail in parallel to the comments already made by Executive Somers that really speak right to the point that cases continue to increase. That two-week rate, which had gone to 100 through Saturday the 10<sup>th</sup>, now the two-week rate, excuse me through Saturday the 17<sup>th</sup> was at 100, then through Saturday the 24<sup>th</sup> of October that prior two week rate's now up 20% to 122. And that represents 1,000, just over 1,000 cases in Snohomish County in two weeks. The only time we've seen that many cases reported in a two-week period was back at the peak of the first wave of activity. So we're really, we're really into this. There's no time like the present to try to turn it around. The sooner we do that, the greater our chance of

avoiding a hospital surge. As Executive Somers mentioned, we have seen a bump. If you go back two, three weeks ago, we were running in the mid-teens on COVID related hospitalizations in Snohomish County and were less than or at 2% of all hospital beds being dedicated to COVID patients. Those are two of the key metrics that we follow in terms of hospital capacity.

Well, a week or two ago, that increase kind of doubled up to the high-20s, low-30s. Fortunately over the last seven days that's stabilized and we're, currently there's 29 COVID-related hospitalizations in Snohomish County. Three of those individuals are on ventilators. So that represents about 3.5% of all available hospital beds. So it's still below the danger zone of when you get above 10%, and that's when COVID hospitalizations start to infringe on the acute care systems ability to be able to take care of other people and, you know, with the situation in Idaho going on, that means were we to have a surge, we're also going to be competing with them for where to put the people we can't hospitalize here locally. So the best route is to circumnavigate that whole thing by bending the curve, trying to limit transmission particularly to our older adults and try to get out of this third wave without a lot of collateral damage to people and the system.

A couple of other things I wanted to mention, we have seen an increase in case counts in long-term care facilities, another signal of concern going forward because those are our older adults. They're just more vulnerable to having severe disease and needing hospitalization or even dying as a result of COVID either due to age or due to other medical conditions they have. So for the prior two-week rolling period, we had ten cases in long-term care facilities. That was up to 30 for this most recent two-week period. That's tripling. Now a lot of those are associated with one or two outbreaks in long term care. But whether they're happening in one place or scattered across the county, those are still people who are sick and who can end up in the hospital or even dying. So we'd like to, again, if we bend that curve we protect those folks as well.

So those are some of the key trends. The other thing I wanted to mention is that case rates are up in all age groups now. Earlier we had seen it mostly driven by younger adults but now we're seeing the majority of cases or increase in cases are still in adults 20 to 49 years of age, but we've seen increases in children, school-age children, adolescents, and as I mentioned our older adults. So it's everyone. And again, just pointing to the fact that this is a community-wide problem. Certainly there are population groups or geographic areas where it might be more active than others, but there's no place in the county that's low risk and no population group really in the county that's considered low risk. So we all really need to do our best and, as I said, no time like the present to reinforce with yourself and the people around you face coverings, social distancing, and really equally important is trying to defer unnecessary social gatherings at this point. You've got to remember that at this rate last time through, on the first peak, we had shut down society. And as Executive Somers mentioned, we don't want to have to resort to that. The consequences of that are not benign. So let's try to take care of this while the ball's in our hands and see if we can bend the curve. And I don't think that means foregoing a lot of elective social activity and just focusing on those necessary things that we need to do to keep our lives and this world running.

So with that, I would like to pause and turn it back over to Executive Somers.

**Executive Dave Somers:** Thank you doctor. So first question is what is today's guidance for schools reopening with in-school learning? And is the final decision up to each district rather than an edict from the Health Officer?

**Dr. Chris Spitters:** Well again, you know, I apologize for the circumstances that when we meet every Tuesday it's prior to our meeting with school officials, so, you know, that's really a discussion we need to have with them before we have it with the community at large just to make sure we're all on the same page and out of respect for them and their roles as elected officials running school districts. Having said that, you know, these are shared, this is shared decision making. They're the educators. They know best how to educate kids. And we provide ongoing global advice as we've shared with you over the past weeks and then detailed consultation as needed in specific situations. And we'll continue to try to operate that way. A unilateral directive to the Health District would likely only occur in the context of, say, closing a school because an outbreak is not controlled, or to harmonize with some statewide direction that comes from the governor, the state health officer, that is restricting schools. But otherwise we're going to try to muddle through this as safely as possible and try to control, try to put out the fires where they occur, and try to keep at least our youngest learners in school as long as it's reasonably safe to do so.

**Executive Dave Somers:** Next question. It seems a long-term care facility in Monroe has had a large spike in cases, yet it isn't shown in the report's list of outbreaks. Does the Monroe facility have multiple outbreaks? And also to add on to that, is there any idea how cases started to rise at that facility? Was it visits, employees or something else?

**Dr. Chris Spitters:** The first question I can't quite address for you other than possibly the timing of the events at the facility in Monroe and the time windows of our report. I suspect they may have exceeded the threshold for, you know, we have that small numbers issue where when case counts are less than five we don't like to disclose entities because it can lead to identification of individuals. I suspect this is a timing issue. But there is a large outbreak, somewhere around 50 cases at a long-term care facility with Monroe. We're working closely with the facility and they appear to be, you know, there's a lesson in this for all of us about this virus. They appear to be doing everything by the book and yet still the virus is making its way around the facility. Certainly we're hoping to curb that, to limit the suffering of the people in there, limit hospitalizations and by all means deaths. But they're working with us well and it's just a single outbreak. We don't have sort of a smoking gun as to what the spark was that set the fire, but that's where things are at.

**Executive Dave Somers:** So Dr. Spitters, if we see another 20% jump in cases by next week what if any action might you take regarding new restrictions in the county?

**Dr. Chris Spitters:** Well I think that as we move along with this pandemic and our local experience of it we're all learning. So we have much more information and knowledge and, on the one hand, humility and respect for the virus, but also confidence in better understanding what helps, what doesn't, where it makes sense to try to put a bottleneck on the virus and where it doesn't. So these are multifactorial decisions and it's unlikely that a single metric, aside from maybe a hospital surge, would as a single data point lead to heightened restrictions on public life. But it's the case rate, it's the number of outbreaks we're seeing, the difficulty or ease with which we're controlling them, the case rates particularly in our elderly and our long-term care facilities, and as I mentioned not the least of which is the impact on the acute care hospital capacity. So I really think it's a multifactorial thing. So if there was a 20% jump and everything else was looking OK, I suspect that we'd try to muddle through as I've been mentioning, whereas if we're seeing, if hospitalizations have doubled or tripled in concert with an increase like that, we might have a different tone. So I humbly just ask you to just stay tuned and we'll do

our best to try to keep an eye on what's happening, control what we can, and let you all know about what you can do to help and what our advice is as time moves along.

**Executive Dave Somers:** And next question. Will the health district be giving any more information on the three outbreaks at schools? A district? Public or private? Also, are you confident in the schools' responses to their outbreaks?

**Dr. Chris Spitters:** There's a few questions in there. So in general, there are a few schools, I think we have more like, I think it's four, five school outbreaks. Remember sometimes the terminology here is an issue. Often the term outbreak raises the notion of things are out of control and there's dozens of cases. But even two cases connected in a school setting constitutes an outbreak. And I think most of those, I think the more appropriate term for common understanding is there are clusters of cases in several schools around the county. The schools are all working well with us and when we've done site inspections related to those we've been satisfied with the measures schools are taking. We've taken no directive action to close any schools because we thought things were proceeding in a direction that they're not going to get better without closing them. So we'll just continue to work with them and so I guess we're confident in how things are going at this point.

**Executive Dave Somers:** Has the state distribution plan for rapid testing delivery extended to Snohomish County?

**Dr. Chris Spitters:** I think you're referring to the Abbott BinaxNOW test, which is a, it's still a clinic based test but it's not dissimilar to the technology of a home urine pregnancy test. It's quite simple and fast. It's not as accurate as a laboratory based PCR in terms of detecting a positive. It's a little less sensitive. It maybe only picks up six to eight out of 10. We're still learning about this test and its application. So that's the test. And the state has received hundreds of thousands of these cards and has begun distributing them out to community health centers, tribal health authorities, and critical access rural hospitals, including those in Snohomish County who either have shipments on the way or have them in hand. That's the goal is to increase point-of-care rapid testing for patients who are symptomatic in those settings. The health district will also receive a smaller quantity, we're estimating maybe 10,000 or 15,000 of those and we're working through a process internally to determine how to best make use of those tests, basically whose hands to put them in and whether we want to use any ourselves as time goes forward and that will be a continuing effort. I think that's going to be sustained over several months.

**Dave Somers:** Next question. Is the county working to secure a flow of remdesivir, given its recent FDA approval for use on COVID-19 patients? Is there any talk of early remdesivir treatment for high-risk cases in the county?

**Dr. Chris Spitters:** So remdesivir has I would say a partial impact on reducing the need for intensive care, reducing the need for mechanical ventilation, and death. I think it's roughly a one-third reduction among those with severe disease who are hospitalized. So it's not a panacea, but it does help about a third of the people who get it. My understanding is that the supply distribution plan is driven at the federal level and then would come down to the state and whatever is apportioned to Snohomish County, that's really going to be a federal, state decision. We can't fill out a purchase order and go buy some and I don't think any of the local hospitals can. It will be distributed to us on some basis, either per capita or per case and further developments are to be determined.

Executive Somers you're muted.

**Dave Somers:** Some people like that. Next question is how are Snohomish County hospitals doing with PPE supplies? Do the hospitals have enough masks etc. to deal with the increasing cases? Has the state been providing PPE when hospitals request more supplies?

I'll just start off that our Department of Emergency Management which has been activated since late February has been working nonstop to secure supplies of PPE and we've used our federal CARES Act dollars to acquire as much as we can. We feel we're in a pretty good place in Snohomish County at least through the end of the year and into next year. We're supplying those PPE supplies to first responders, hospitals, clinics, etc., etc. So at least from our standpoint we feel we're in a pretty good place but hospitals and others are also acquiring their own. And primarily these have been local actions. We do work with the state but we've largely been acquiring these directly and then in coordination with other counties around us. Doctor, any more to add?

**Chris Spitters:** Other than thank you to the county and DEM on the outstanding work on resourcing in general but personal protective equipment in particular throughout the course of the pandemic. And the last time I heard about any PPE challenge was about a month ago we were having some difficulty with getting glove but I think that has all resolved. I am not aware of any acute care or other setting that are short on critical PPE.

**Dave Somers:** Excuse me. I'll just wait a minute. That will stop. So how frustrating is it to both of you given the continued increase in cases despite your continued advice to the public?

I'll start on this one also. I'm extremely frustrated that much of the debate about COVID has really been turned into a political debate and really has created a lot of confusion and distrust and as a person I was a biologist and I like to look to science for answers and try to put out good information. But the politicization of this I think has really caused great harm. So that is extremely frustrating to me. I understand people don't like restrictions. We are social beings. We like to be together. We like to be out and about. So I understand people's frustrations. But again the thing that bothers me the most is how this has been politicized and I think that's a great disservice and really has made this whole COVID pandemic much worse than it needed to be.

**Chris Spitters:** Oh indeed. I don't think the virus is aware of our political situation. It's just trying to infect people to survive and propagate. And it's a nonpartisan entity and it's really, you know, we all want, one, to be well, we want the people around us to be well. We don't want to infect them and have other people infect them. We don't want to see them hospitalized. And we all want kids to get back to school and our economy to recover and, you know, get back to some sense of normalcy. But we're in the middle of, you know, we can't get right there from here. We've got to get past the virus first. We can't shortcut this thing. I think that's the biggest challenge I see as a public health official. I believe the majority of people are really doing their best. I think we're all tired. Even in my own family there are people who are suffering socially, psychologically from the extended impacts on their ability to interact with the rest of the family and with their friend and work and all that. So I sympathize with that. And yet, you know, we really have to try to be disciplined. And also one challenge is with this virus a minority of kind of defectors from the regime who don't want to support these prevention measures can kind of veto the majority, and that's somewhat unfair and frustrating. I don't want to blame or stigmatize folks who don't feel this way, but it sure would be great if everybody were on board even sort of agree to disagree but let's stick together and get through this because there's no shortcut out of

this and we're not going to be back to normal next week. It's many, many months away even with a vaccine coming. We've got to get through at least another nine to 12 months of preventive measures. Even if you get vaccinated, not everyone around you will be vaccinated. We've got a long way to go. So discipline, patience and commitment to the community is critical at this point and a long time to come.

**Dave Somers:** So next question. What are you hearing from or being told by the state about the state tightening restrictions on businesses and social activity?

We are in constant communication with the state and other counties. All possibilities are still on the table. There's nothing that is imminent in terms of restrictions but I think we're all concerned with the steep spike in cases, and particularly if we start to really burden our hospital systems, medical treatment. I think anything is possible. I think if there is another round of restrictions it will be targeted toward specific activities rather than the broad brushes it was the first time around, but that's the indication we have. Doctor are you hearing otherwise.

**Chris Spitters:** That's precisely how I understand the discussions as well, Executive Somers. Nothing to add to that.

**Dave Somers:** Next question is the state released its plan for vaccine distribution. Did either of you have any issues or concerns with how it would apply to Snohomish County and, if so, what changes did you seek?

Well again, similar with PPE, the Department of Emergency Management with the Health District created a plan locally for rapid distribution that we then gave to the state which then they bundled up and provided to the federal government. So I am not aware of any problems or issues with that. But we do think that the timing is likely in the next year rather than sooner, or maybe at best the end of this year. But it's been very much a team effort with the health district and the county. Doctor?

**Chris Spitters:** Yeah. That's right. And again a great partnership between the emergency management and health district to get our local plan together which dovetails with the state plan which dovetails with the federal plan. And these are all moving, I would say, living documents. The plan looks good to us right now. There's a lot of uncertainties and contingencies depending on which vaccines make it and when but the overall mission, goals and strategies make sense to us and we're looking forward to seeing the situation evolve, getting more details, refining our plans at the state and local level. And I'm grateful for the leadership that the state has provided us in this.

**Dave Somers:** Do you feel like people in the community are listening to your guidance about not gathering? It's Halloween this weekend, and more holidays to come. How much of a risk do you think there is as far as the level of compliance at this point? Doctor.

**Chris Spitters:** Well, you know, obviously we're having an increase in cases so the empiric information I've got says that not everybody's on board with that plan. Some of the increase is due to natural expected increases associated with resuming public life that go back to June. But we're, you know, from our case investigations people are having social gatherings with family or friends that exceed the number and style of what makes sense in the middle of a pandemic. I suspect some of that's due to fatigue, some of it may be ignorance, some disregard. But whatever the reason we've really got to all kind of get on the same page that those kinds of

things are sadly something for the future and we've got to forego it now because, again, shortcutting it just holds us back from the destination of getting beyond.

**Dave Somers:** So there's a question for me. You said at the start of this meeting that if people want to avoid a shutdown they should wear a mask. Is that a particular issue at this point in Snohomish County? Or just general ongoing guidance?

It's ongoing guidance. And when I'm out and about I see pretty good compliance. In stores it's essentially 100% now when at the start of the pandemic it was not. And even with folks walking on the street, many or most wearing masks. So I think the mask issue, it's become socially acceptable and normal. So I'm pretty pleased with that. I think the problem and the spike seems to have come as the weather changed and people have gone indoors. And my sense is, and I've heard from the health district and Dr. Spitters, is it's people gathering, letting down their guard, having family members or even friends come into their homes. So it's the small gatherings. And that's extremely difficult to do anything about except really plead with people to take this seriously. Think about the fact that the more people you have contact with the greater your risk and the greater the risk of spread, so we really need to try to limit those small gatherings. So that would be my plea to people is please, I know it's Halloween, I know Thanksgiving is coming up, but we just really need to keep our social distancing measures in place.

So let's see. We did get one more. Mentioned was the possibility of sharing beds with Idaho. And then there's a link to CDC, it shows 49% capacity. Is there data predicting a surge, given the looser restrictions there? Any predictions on what that could do to hospital capacity and potentially hospital staffing in Washington? And that will be our last question.

**Chris Spitters:** Well the basic answer is, you know, I think it's a potential problem. But for details, that's knowledge and relationships that occur at the state level. It's kind of an interstate question. So I think you'd get a better answer from our state counterparts. I'd suggest getting in touch with the Department of Health.

**Dave Somers:** And just as a final wrap-up point. I just want to go back to the fact that the federal CARES Act dollars that we received from Congress were really vitally important to us to acquire PPE, to mobilize testing efforts, support contact tracing, everything we've been doing, providing food to those in need, our local food program that has been going strong. Those federal dollars really made a lot of those efforts possible. And I'm very concerned. Those CARES dollars were restricted to being used this year and there has not been a second package or flexibility to go into next year, so sort of looming on the horizon is a great need for assistance, coordination with the state but also with the federal government. We've got to have the federal government on board supporting our effort or things could get much, much worse. So that's both a thank you for the CARES Act dollars and really a hope that after this election we can move forward and get the federal government back as a supporting member of the team.

**Joint Information Center:** I think that's it for our questions. Thank you all. This is Kari in the Joint Information Center. We're going to go ahead and wrap up for today. I did want to mention, most of you are used to us having these briefings on Tuesdays. We will also be having another public update for the community later this week on Thursday evening. So that advisory should be available tomorrow to you, so please keep an eye out for that, as well as future advisories.

They usually come out on Mondays for our Tuesday availabilities. So thank you all again for joining us and we will see you again soon. Bye.