



Board of Supervisors The Novel Coronavirus (COVID-19)

April 7, 2020

Dashboard

<https://publichealthsb.org/dashboard/>

Total Cases

Active Cases

Cases by Age Groups

Cases by Geographic Areas



COVID -19 Situation Status

- SBC COVID-19 Statistics (as of 4/6/2020 at 12pm)
 - Count of confirmed cases: 192
 - Number of COVID-19 hospitalization: 34
 - Number of COVID-19 deaths: 2
 - Number of fully recovered cases: 42
- Current Hospital Beds @ ~40% capacity
 - Med/Surgical: 376
 - ICU: 91
 - Ventilators available*: 50
- Regional characteristics relevant to COVID-19:
 - Older population (~15% of SBC residents are over age 65). Older age groups are more likely to get COVID-19 and are more likely to have serious health impacts
 - Lower population density

*from ReddiNet, 4/7/2020



Modeling & Projections

- **Modeling:** Based on real-time data accessed on 4/6/2020. Models may produce different results using data from another time period.
- **Projections:** Long-term projections may lack precision due to unknowns about the COVID-19 infection, transmission, and social distancing measures.



Penn Model

VARIABLE	CDPH RECOMMENDATIONS	SBC DATA	NOTES
Current COVID-19 Hospitalization	County data	27	
Doubling time	6 to 7 days	6	
Current hospitalized patients		27	
Social distancing - % reduction in social contacts going forward	30% to 70%	50%	Mobility estimates
Hospitalization rate (of total infections)	5% to 20%	10%	
ICU percent of total infections	1% to 5%	3%	
Ventilated percent	1% to 5%	2%	
Average hospital length of stay	7 days	7 days	Default of model
Average days in ICU	9 days	9 days	Default of model
Average days on ventilator	10 days	10 days	Default of model
Hospital market share	County data	100%	
Regional population: county to determine	County data	450,000	
Currently known regional infections	County data	174	

Projected COVID19 Patient Hospital Census by Achieved % Social Distancing

40%

- Hospitalized Census peaks at 1,198 on Jun 25
- ICU Census peaks at 768 on Jun 26
- Ventilated Census peaks at 566 on Jun 27

45%

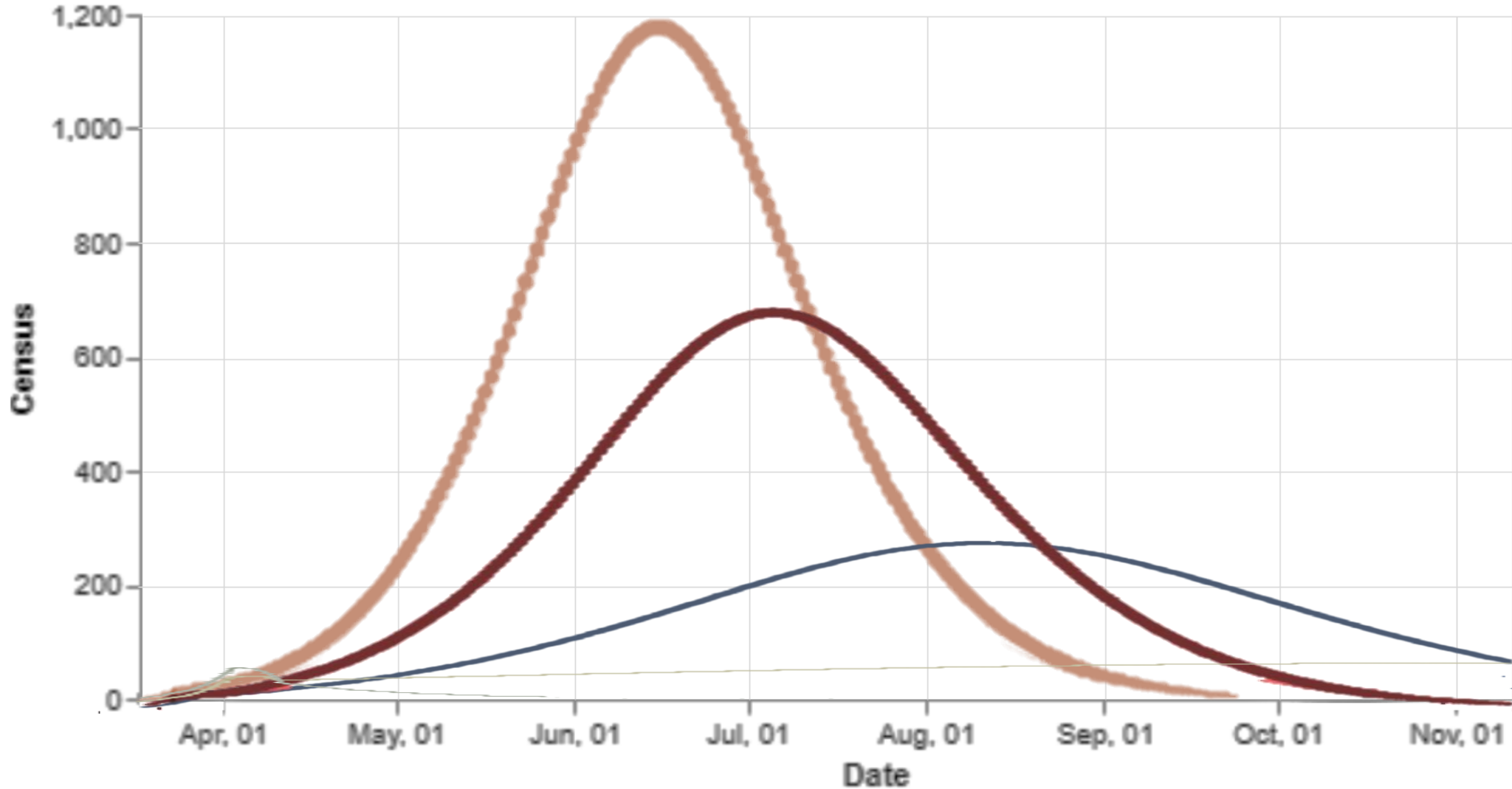
- Hospitalized Census peaks at 682 on Jul 16
- ICU Census peaks at 438 on Jul 17
- Ventilated Census peaks at 323 on Jul 18

50%

- Hospitalized Census peaks at 274 on Aug 20
- ICU Census peaks at 176 on Aug 21
- Ventilated Census peaks at 130 on Aug 22

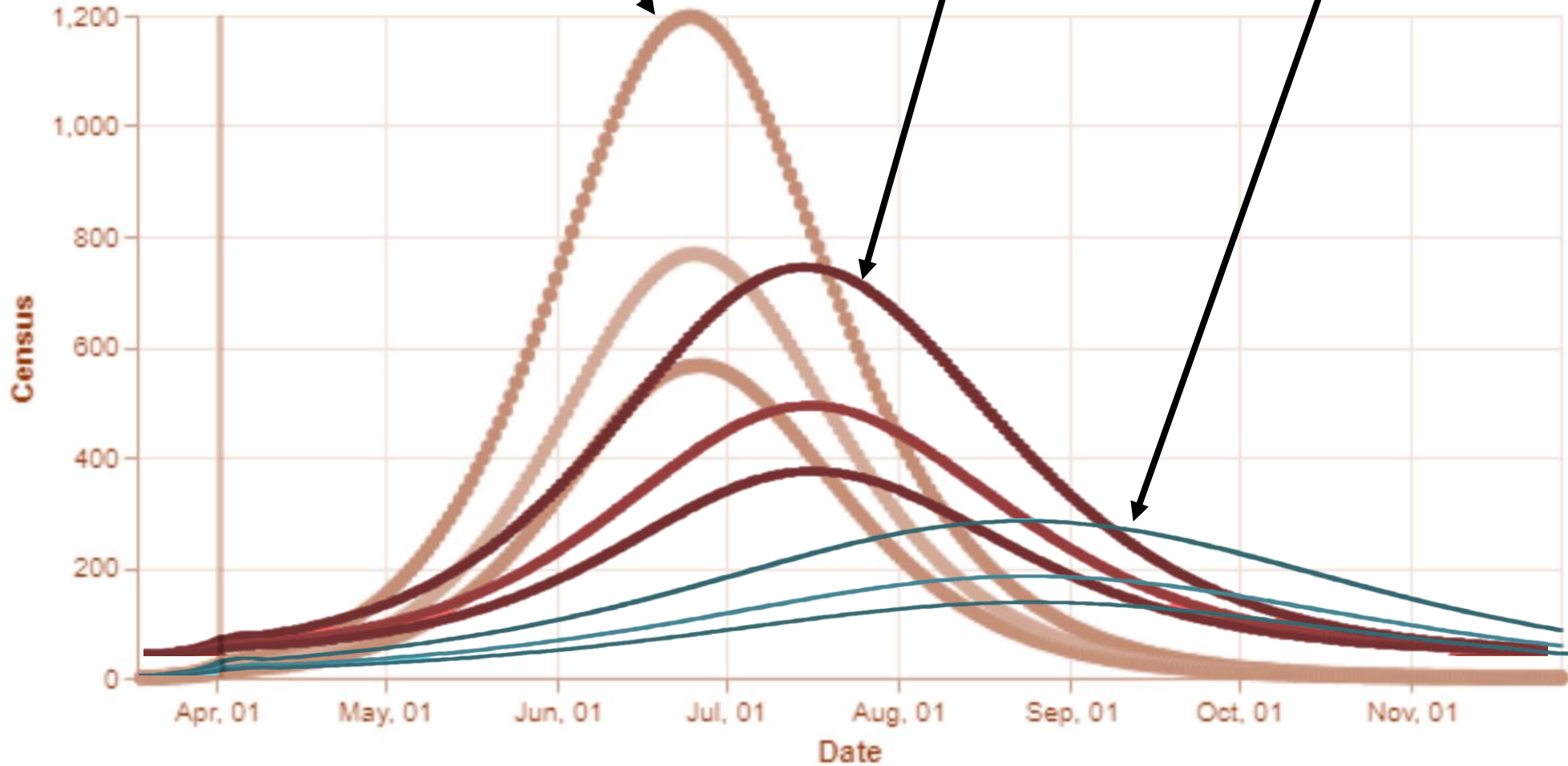
55%

- Hospitalized Census peaks at 42 on Aug 31
- ICU Census peaks at 27 on Sep 01
- Ventilated Census peaks at 20 on Sep 07



Social Distancing

40%	Hospitalized Census peaks at 1,198 on Jun 25 ICU Census peaks at 768 on Jun 26 Ventilated Census peaks at 566 on Jun 27	45%	Hospitalized Census peaks at 682 on Jul 16 ICU Census peaks at 438 on Jul 17 Ventilated Census peaks at 323 on Jul 18	50%	Hospitalized Census peaks at 274 on Aug 20 ICU Census peaks at 176 on Aug 21 Ventilated Census peaks at 130 on Aug 22
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University of Washington: IHME Model

COVID-19 projections assuming full social distancing through May 2020

As the pandemic progresses, we are working to incorporate new data about the virus in the US. Please check back on Saturday, April 4 for our next update.

Last daily update on April 1, 2020.

[FAQ](#) | [Update Notes](#) | [Article](#)

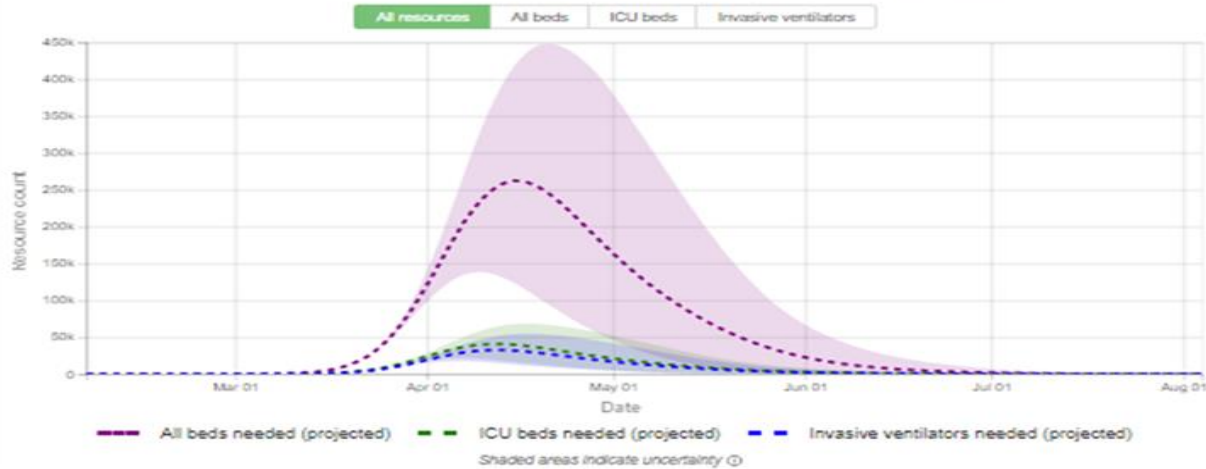
United States of America ▾

Hospital resource use

12 days until peak resource use on April 15, 2020

Resources needed for COVID-19 patients on peak date

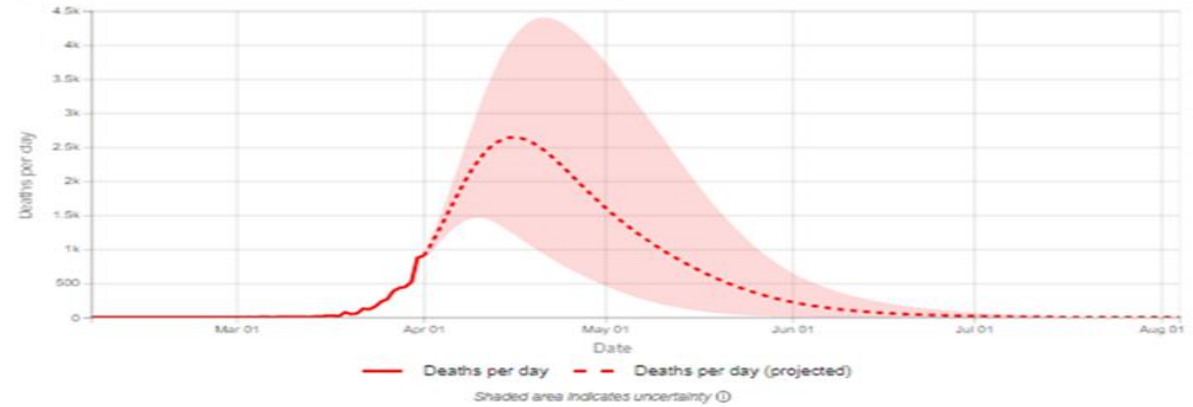
All beds needed	→	Bed shortage
262,092 beds		87,674 beds
ICU beds needed	→	ICU bed shortage
39,727 beds		19,863 beds
Invasive ventilators needed		
31,782 ventilators		



Deaths per day

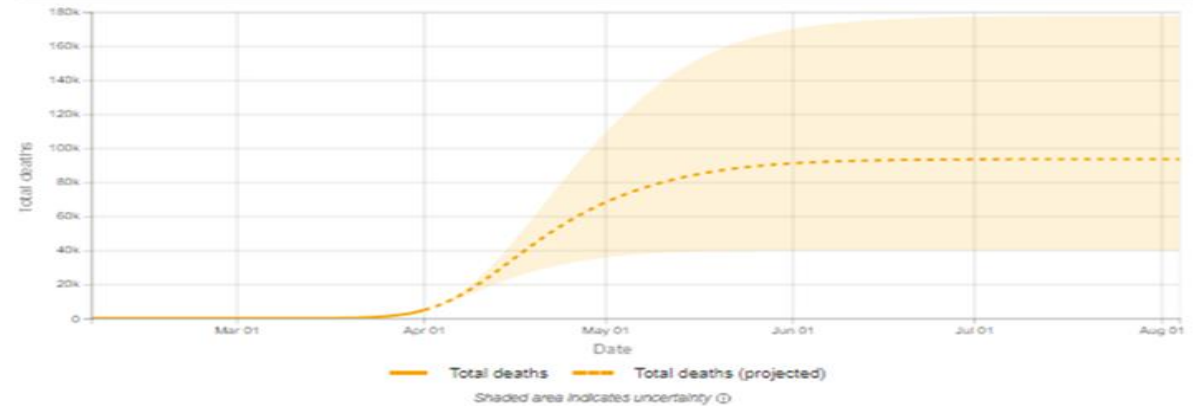
13 days until projected peak in daily deaths

2,644 COVID-19 deaths projected on April 16, 2020



Total deaths

93,531 COVID-19 deaths projected by August 4, 2020



University of Washington Model

California ▾

Government-mandated social distancing ⓘ



March 19, 2020

Stay at home order



March 19, 2020

Educational facilities closed



March 19, 2020

Non-essential services closed



Not implemented

Travel severely limited

Hospital resource use ⓘ

8 days until peak resource use on
April 14, 2020

Resources needed for COVID-19 patients on peak date

All beds needed 4,869 beds	→	All beds available 26,654 beds	→	Bed shortage 0 beds
ICU beds needed 798 beds	→	ICU beds available 1,993 beds	→	ICU bed shortage 0 beds
Invasive ventilators needed 678 ventilators				

U of W – Implications for SBC

Wash-IHME Updated 4/1/2020 accessed on 4/5/2020	CA MODEL	SBC Projection
		(1.13% of 2019 Est.)
Days Until Peak	21	
Peak Date	4/26/2020	
Peak Hospitalized Census	12,421	140
Peak ICU Census	1,866	21
Peak Vents	1,493	17
Deaths as of Aug 4th	5,068	57



Planning Efforts using Penn Model

- Hospital Surge Planning
- Alternative Care Sites
- Medical Equipment



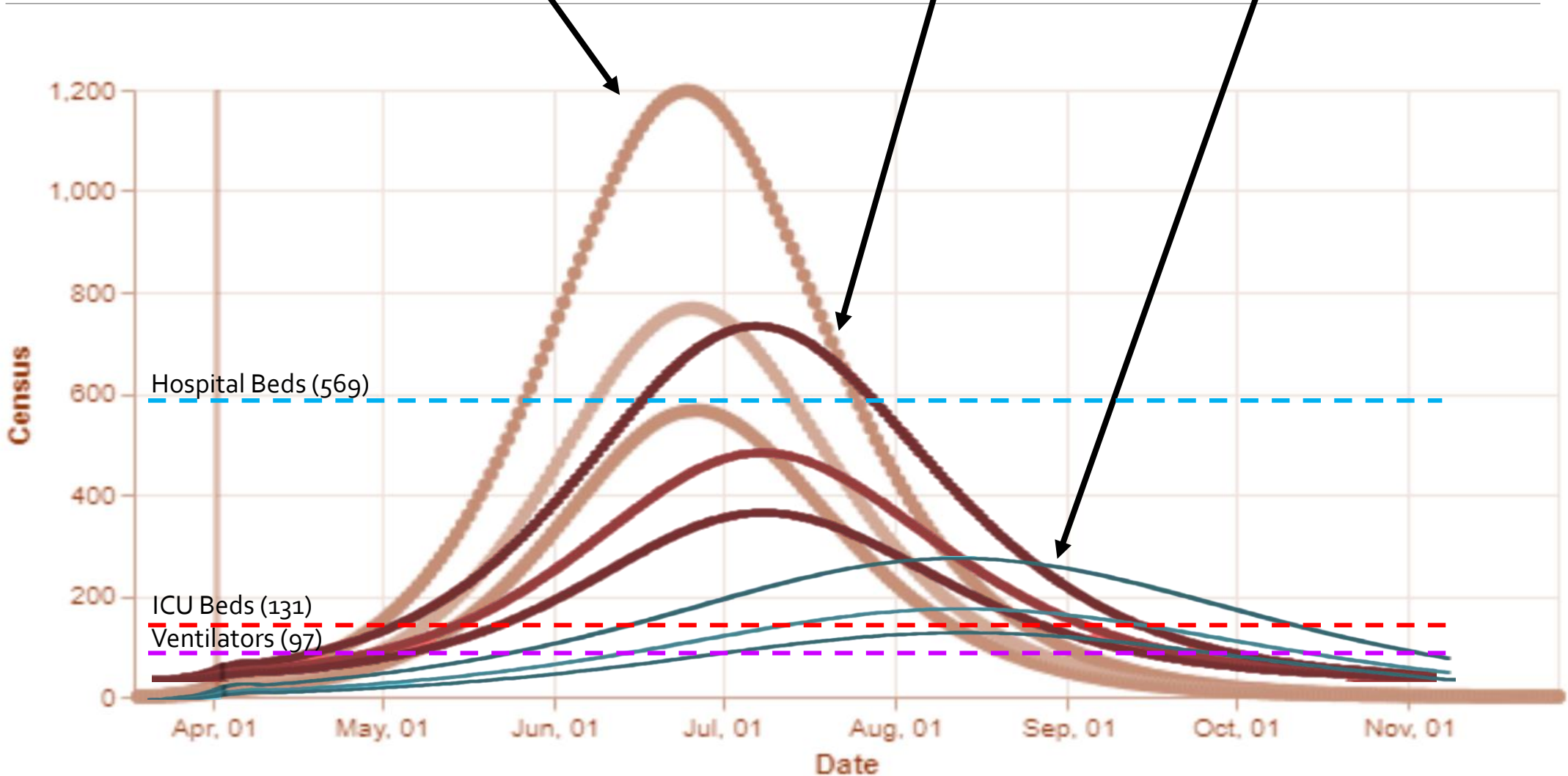
Current Surge Capacity

		Pre-Existing	Available for COVID (60%)	Surge Beds	Tot Avail For COVID Patients
Medical/Surgical	Cottage-SB	192	115	172	287
	Cottage-GV	20	12	72	84
	Cottage-SYV	11	7	8	15
	Marian	105	63	76	139
	Lompoc	48	29	15	44
	Total Med/Surgical	376	226	343	569 *
ICU	Cottage-SB	57	34	18	52
	Cottage-GV	8	5	0	5
	Cottage-SYV	0	0	0	0
	Marian	20	12	58	70
	Lompoc	6	4		4
	Total ICU	91	55	145.6	131
Grand Beds Available for COVID Patients					699

*56 "Med/Surge" beds are cots in various locations

Social Distancing

40%	<p>Hospitalized Census peaks at 1,198 on Jun 25</p> <p>ICU Census peaks at 768 on Jun 26</p> <p>Ventilated Census peaks at 566 on Jun 27</p>
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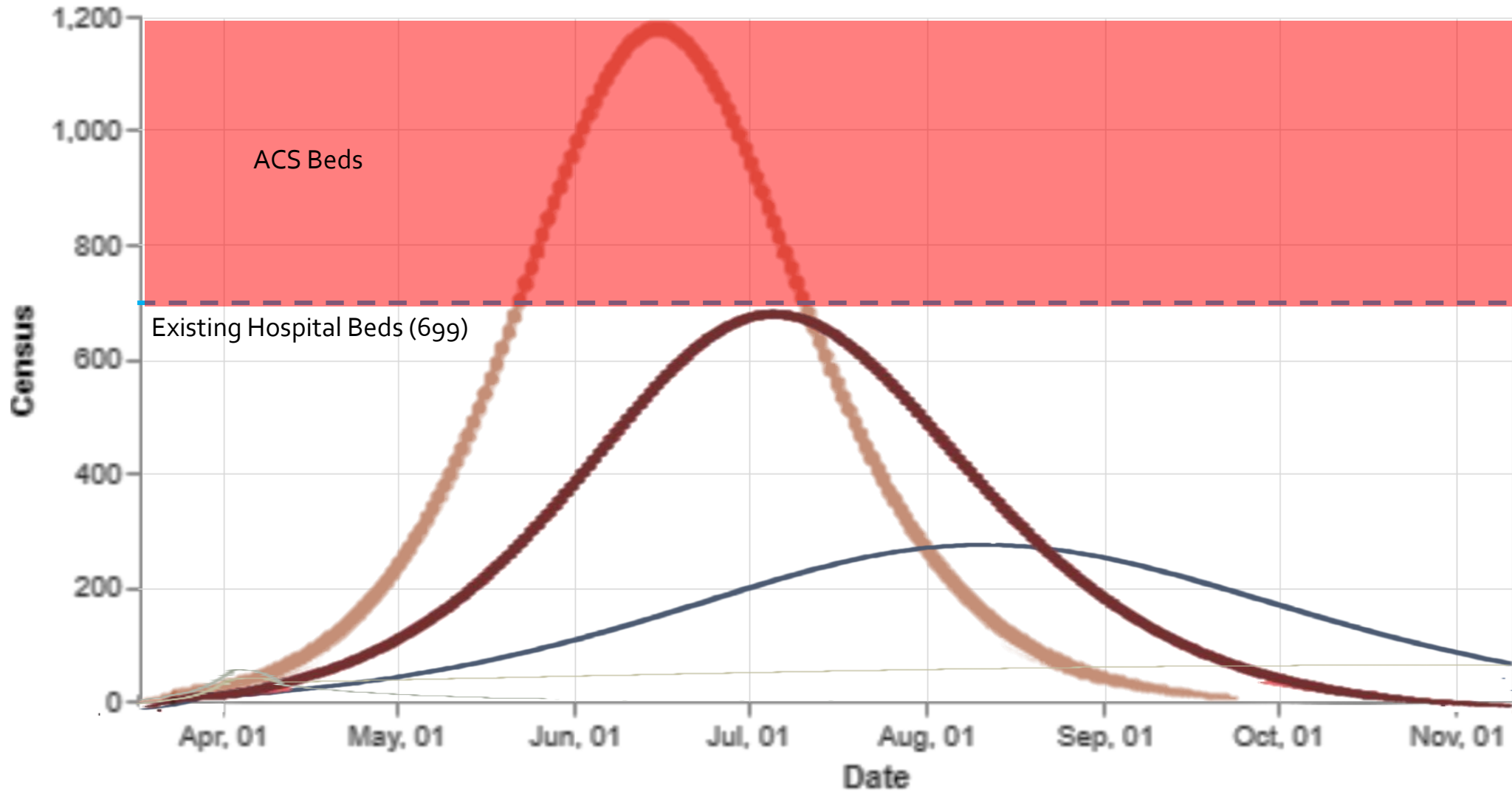
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Alternate Care Sites

Immediate Priority:

- 20 hotel rooms for COVID-19 discharged patients meeting criteria

By Mid-April:

- 80 additional hotel rooms
- Build capacity for additional 400 beds.
 - Currently have materials for 300,
 - finalize sites
 - recruit staff

Future daily data will guide us

- If we reach 50% surge capacity, will activate ACS sites



Medical Equipment

- Current number of ventilators: 97
- Additional number of ventilators requested: 100 (Plus 500 Disposables)
- Additional number of vents being purchased by hospitals
- Additional PPEs through federal & state; vendors



Takeaways

- Great variations in the models
 - Various models in use with varied results, ranging from no surge bed need to high need
 - IHME model used by federal government; and provides only national and state level information
 - Penn CHIME model is recommend by State of CA
 - ALL models rely on estimated social distancing compliance
- SBC will be ready and prepared!
 - SBC models show range of bed surge needs from zero @ high levels of social distancing to 500 @ lower levels of social distancing.
 - Realistic range are 40% to 50% of social distancing compliance
 - SBC is preparing a phased approach to address these scenarios



Coordinated Response -Access to information

Santa Barbara County
PUBLIC Health
DEPARTMENT

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(COVID-19)

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Community Call Center # **833.688.5551**

Community Wellness Call Center
emotional support # **888.868.1649**

211

CDC www.cdc.gov

CDPH www.cdph.gov



Questions?

**STRONGER
TOGETHER.
SAFELY APART.**