Board of Supervisors
The Novel Coronavirus
(COVID-19)

April 7, 2020

Santa Barbara County PUBLIC Health DEPARTMENT

Dashboard

https://publichealthsbc.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	

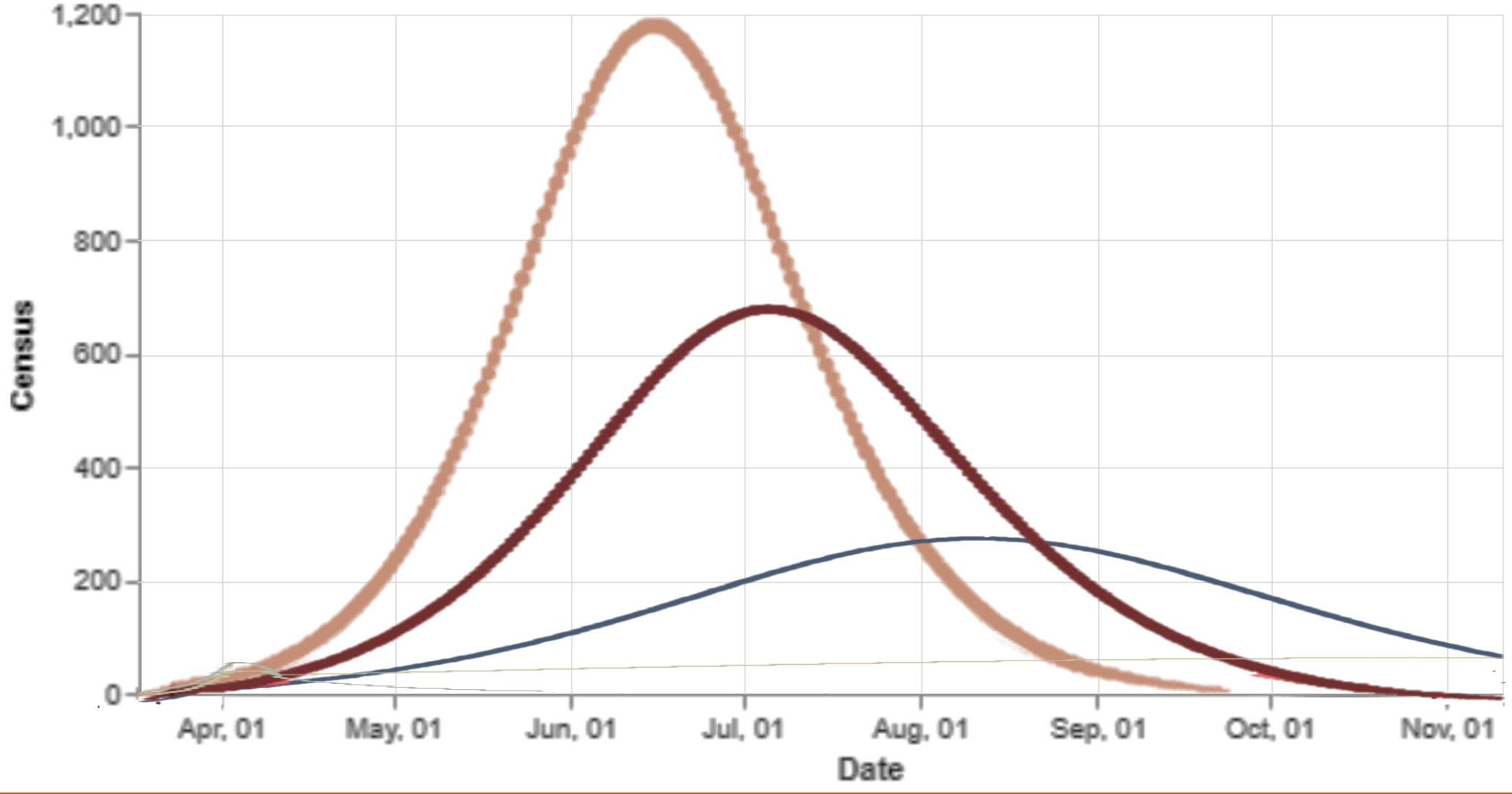
Projected COVID19 Patient Hospital Census by Achieved % Social Distancing

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

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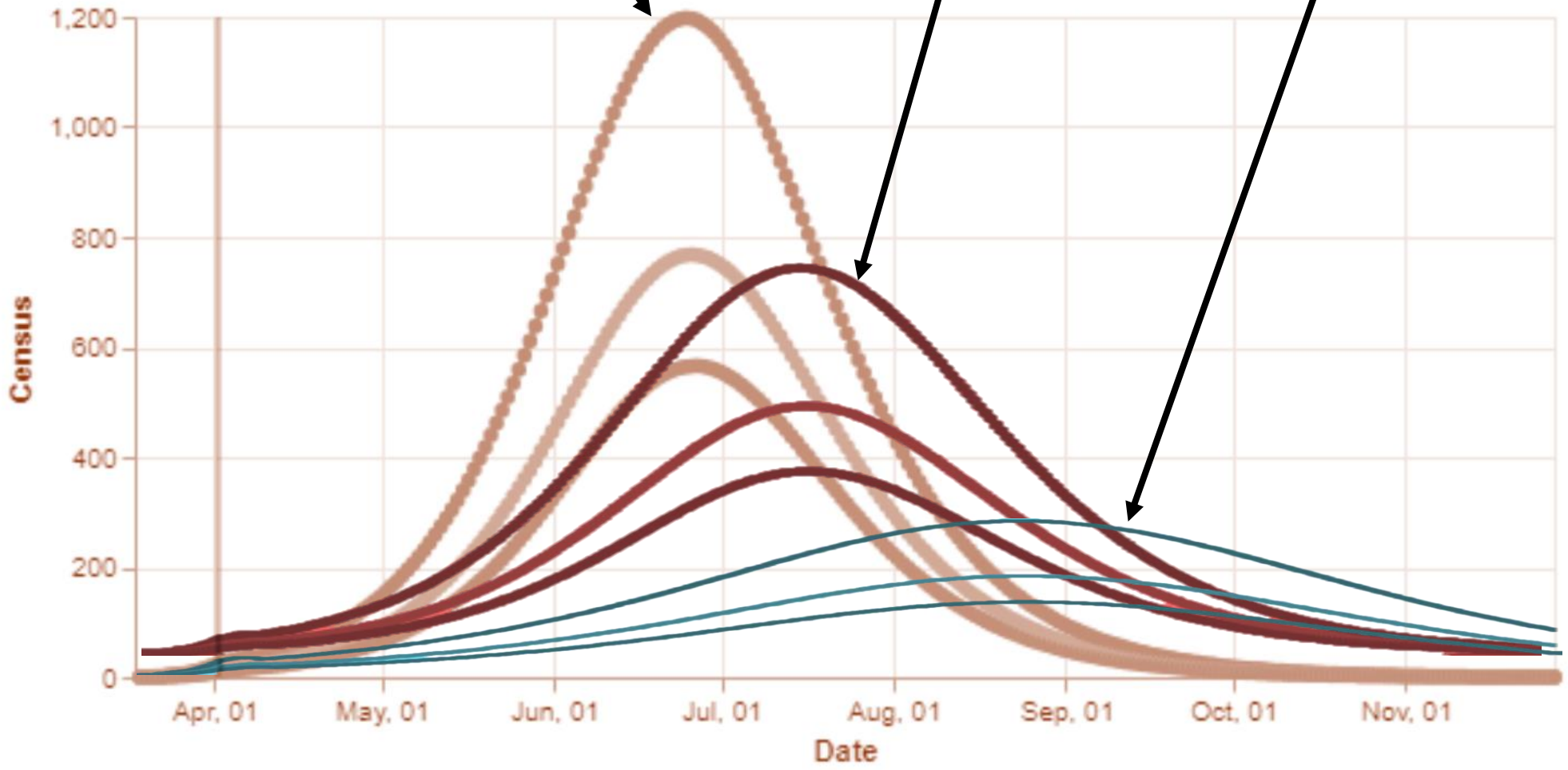
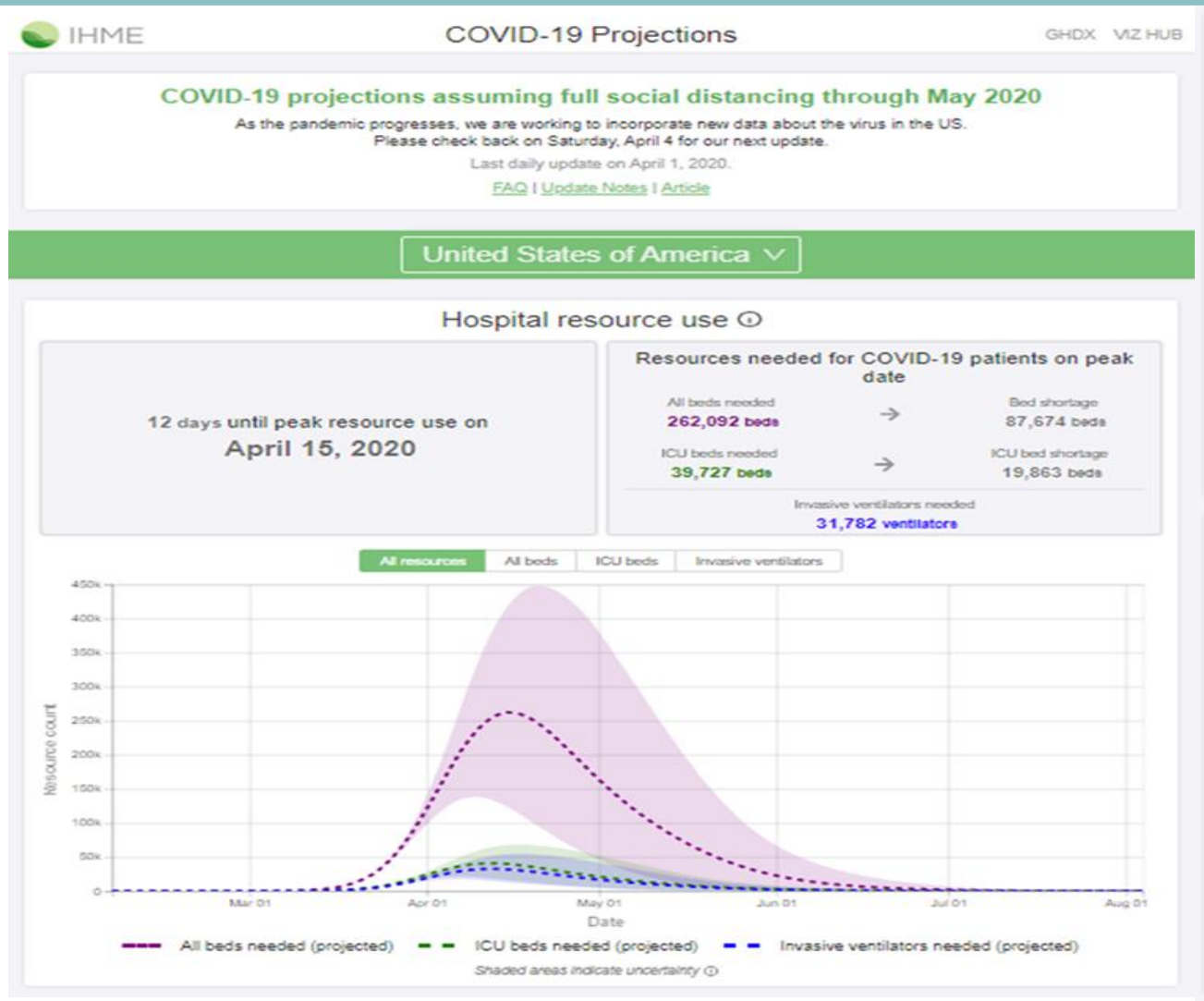


University of Washington: IHME Model



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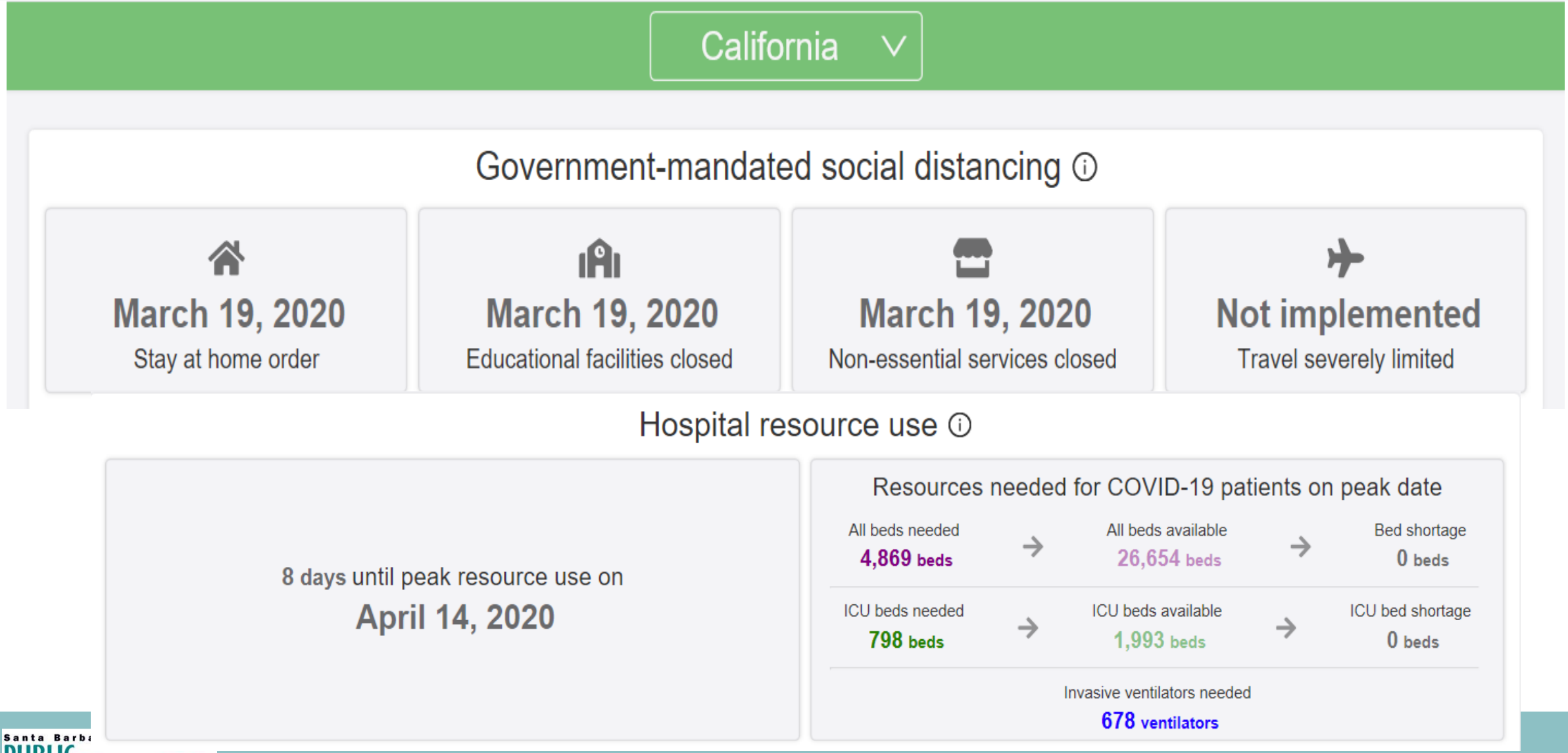
University of Washington Model



https://covid19.healthdata.org/projections

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 locatons

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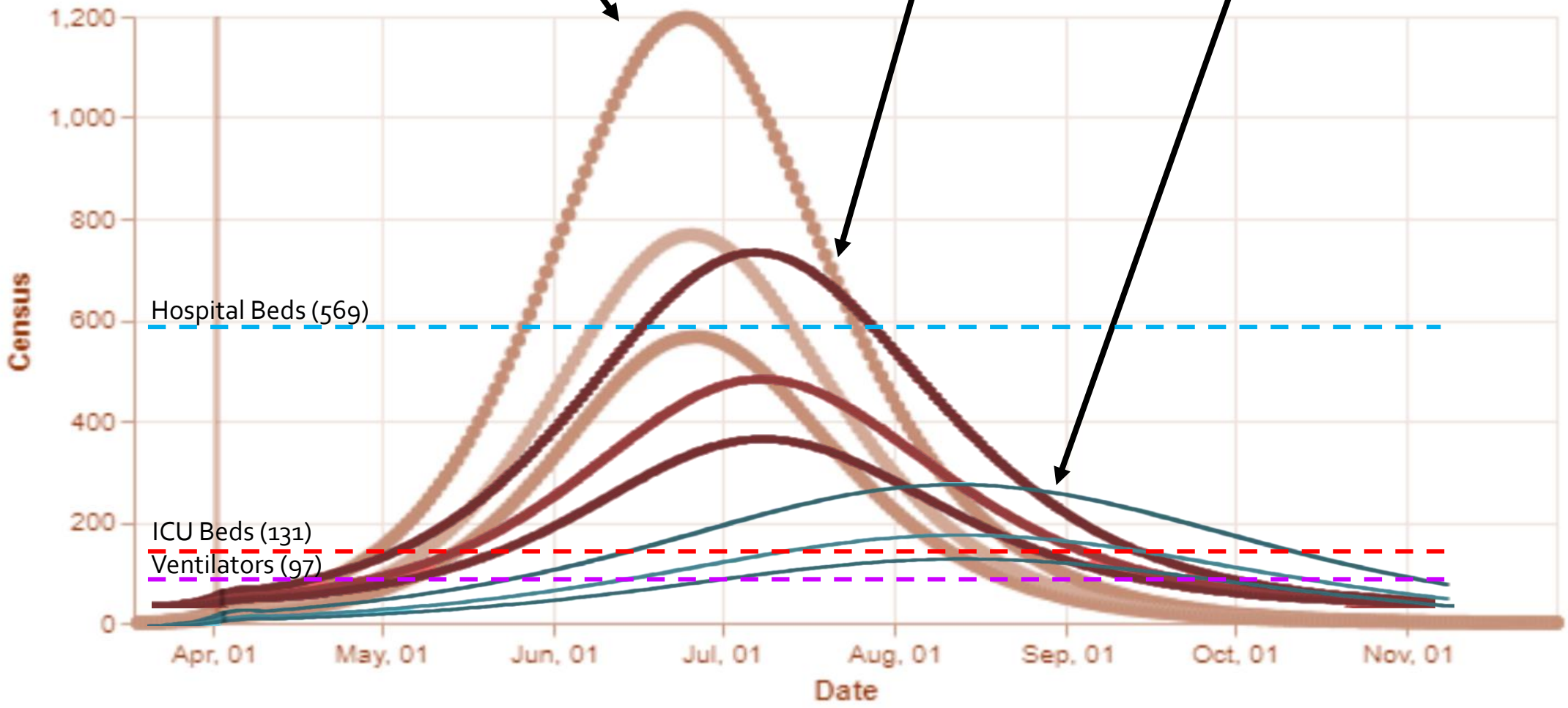

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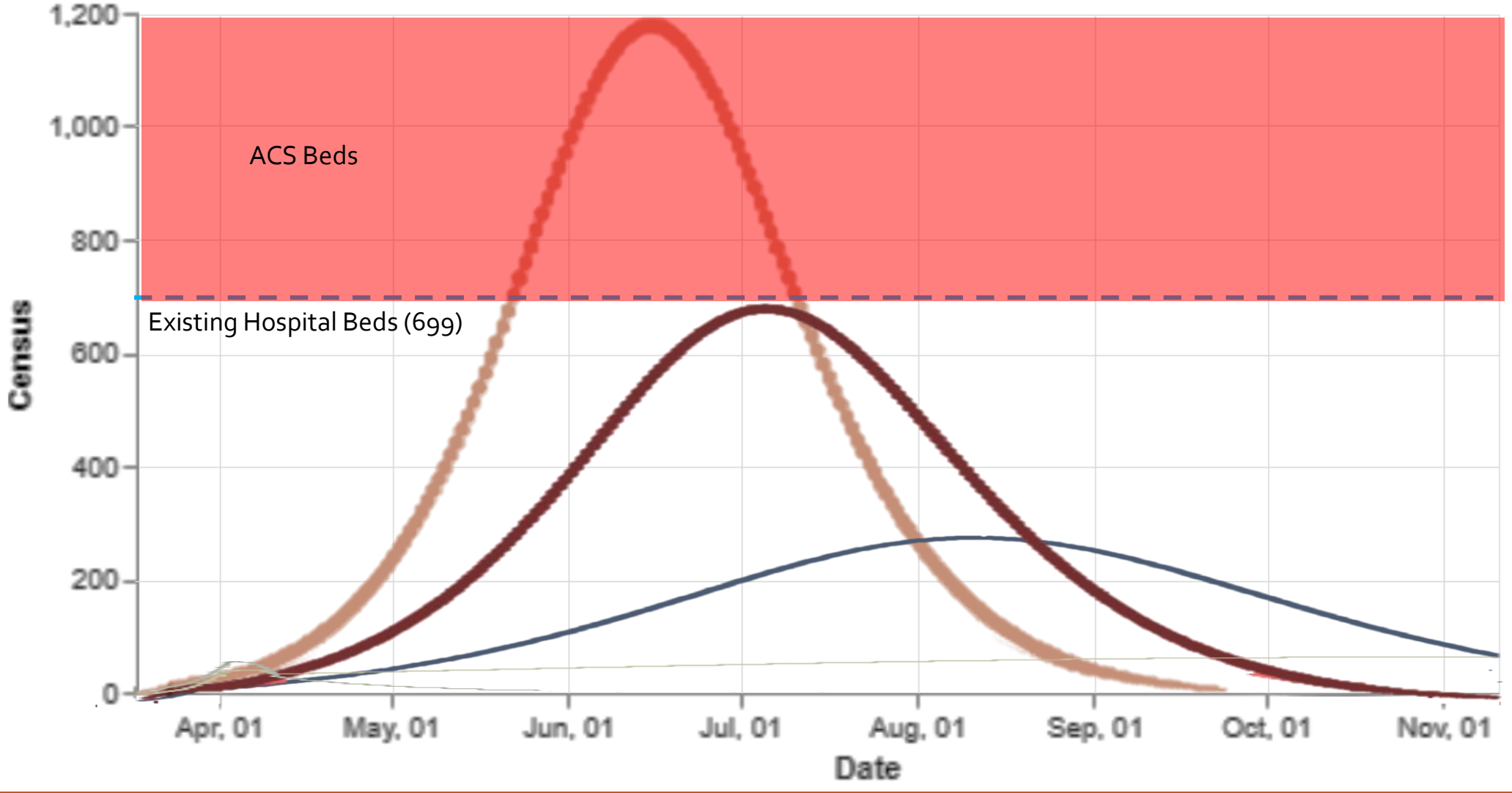

Alternate Care Sites

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

Website: www.publichealthsbc.org

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.