

PLACER COUNTY COVID-19 UPDATE

JULY 31, 2020



Placer County COVID-19 cases at a glance

The first case of COVID-19, the viral infection caused by SARS-CoV-2, was identified in Placer County on March 1, 2020. Since then, cases have been reported throughout the county.

New cases are investigated as they are reported. Our team of case investigators strive to interview those who have tested positive and their close contacts as soon as possible. These teams provide guidance and offer support to those who need to isolate and quarantine to help keep their families and communities safe.

Confirmed COVID-19 Cases by Location of Residence as of 7/30/20			
Location	Confirmed Cases	Likely Recovered	New Cases in Last 7 Days
Roseville	706	552	122
Lincoln	364	305	45
Rocklin	318	246	63
Auburn	171	134	24
Granite Bay	53	40	11
Kings Beach	47	46	*
Loomis	36	29	9
Newcastle	22	17	*
Truckee	18	17	*
Meadow Vista	15	10	*
Tahoe City	10	8	*
Foresthill	10	*	*
Colfax	9	7	*
Sheridan	9	8	*
Olympic Valley	6	6	*
Total:	1822	1453	293

* The number of cases in locations with less than 6 cases is masked to protect patient privacy. As such, cases displayed will not add up to total.

Locations with less than 6 cases include: Alta, Applegate, Carnelian Bay, Dutch Flat, Elverta, Penryn, Tahoe Vista, Weimar, Homeless, and Unknown.

This week in COVID-19 (7/24 – 7/30):

Cases in congregate living settings continue to increase:

- Currently 7 skilled nursing facilities with 1-20 cases (staff or residents) each:
 - 17 new cases in SNFs this week
- 2 additional long-term care facilities with 6-10 cases each
 - 12 new cases in LTCFs this week
- [Click here](#) for the latest information about correctional facility cases

When a case is identified in a vulnerable setting, public health recommends testing of all residents and staff.

Placer County residents hospitalized (7/30):

- 25 (6 in intensive care)

Estimated active cases, calculated as total cases minus deaths and likely recovered cases (see link in location table for definition): 354

Confirmed Cases by Geographic Zone		
	Total Cases	Last 7 days
South Placer	1515	256
Mid Placer	203	31
East Placer	98	4
Unknown/Homeless	6	2
Total	1822	293

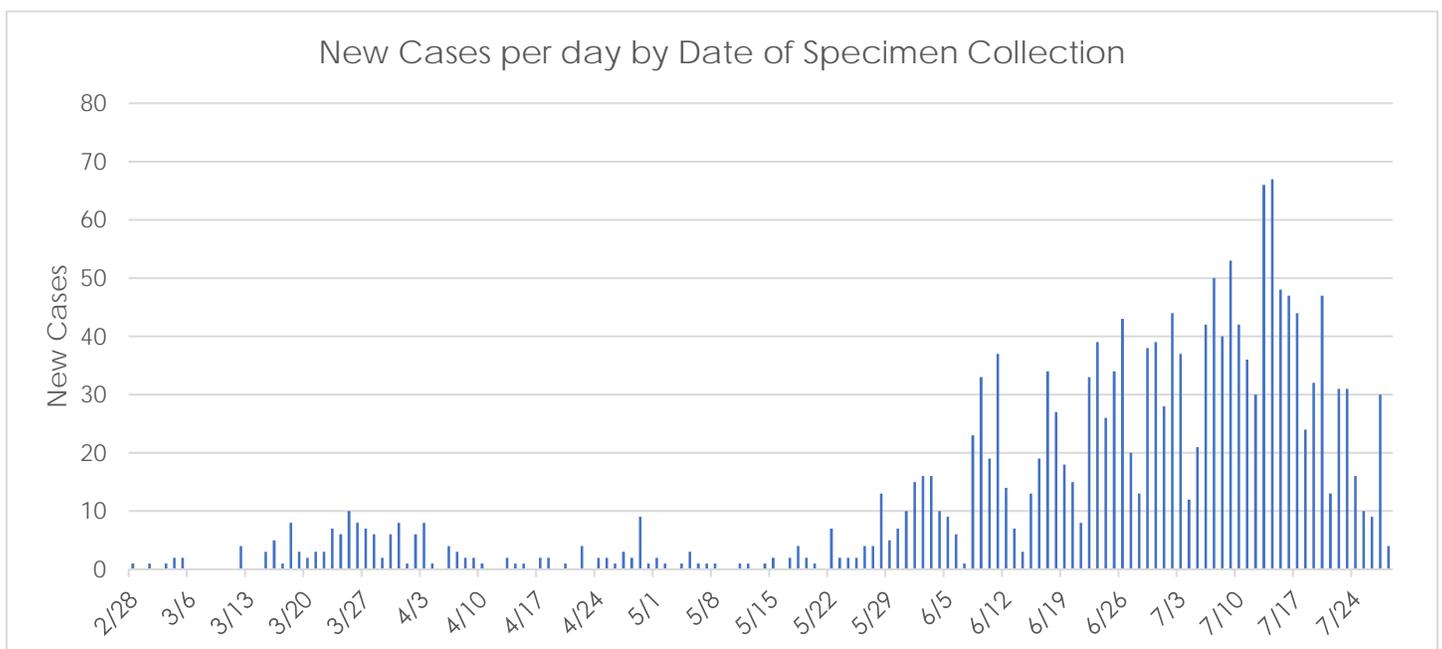
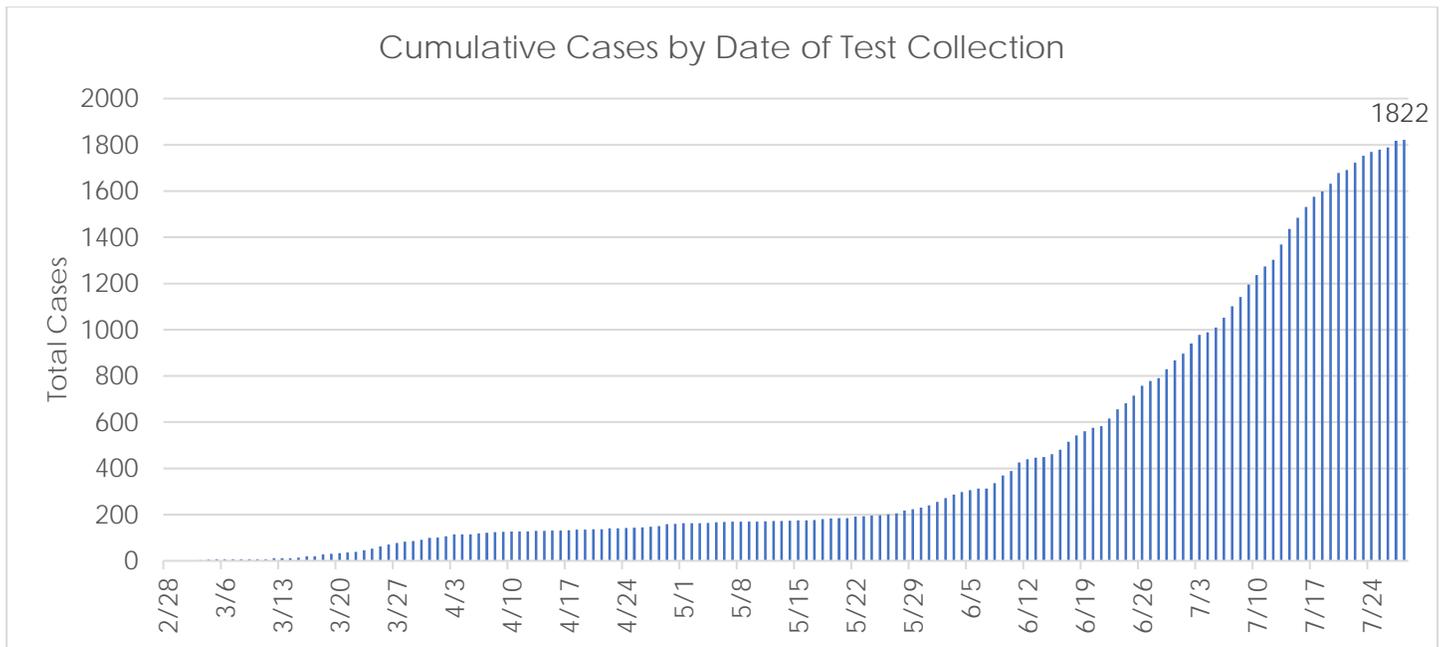
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Epidemic Curves

There are now 1,822 confirmed COVID-19 cases in Placer County (data current to 7/30).

Cases increased from 1,531 to 1,822 (+291) since last week's update, a rise of 19%. Compared to the update 2 weeks ago, cases have increased 54%. An individual who tests positive on multiple occasions is only counted as a single case. Public Health now reports cases by date of specimen (test) collection. This better approximates the burden of infection in the community compared to the previous method of reporting by date of case receipt.



As new results are received by Public Health, collection dates will be updated and the case counts for recent dates will rise, especially dates in the most recent 7 days. Dips in specimen collection dates fall on the weekends when many testing sites are closed.

Descriptive Statistics

The tables below contain summary data for various Placer County COVID-19 case demographics.

A sizeable proportion of race and ethnicity data remains unknown, although systematic data collection has improved through the course of the pandemic. Placer County lacks race/ethnicity data for 26% of cases compared to 36% missing this data statewide. Race/ethnicity information is collected during the case interview, so data quality improves as closed cases are entered into the database. In addition, some cases decline to share this information.

Age Distribution and Hospitalization among Confirmed Cases					
	Total Cases	Age Distribution Total Cases	Cases Last 7 Days	Age Distribution Last 7 Days	Percent Ever Hospitalized
0-17 years	148	8%	24	8%	0%
18-49 years	1095	60%	161	55%	4%
50-64 years	379	21%	71	24%	10%
65+ years	200	11%	37	13%	27%
Total	1822	100%	293	100%	7%

Ethnicity and Race of Confirmed Cases		
	# Cases	% Cases
Latinx	455	25%
White	684	38%
Asian	82	5%
African American/Black	25	1%
Multi-Race	8	0%
American Indian/Alaska Native	4	0%
Native Hawaiian and Pacific Islander	6	0%
Other Race	77	4%
Unknown*	481	26%
Total Cases	1822	100%

Cases Ever Hospitalized				
	Overall Cases		Cases in Past Month (since 6/30)	
	# Cases	% Cases	# Cases	% Cases
White	55	41%	33	52%
Latinx	31	23%	12	19%
Asian	7	5%	3	5%
African American/ Black	2	0%	2	3%
Other Race	4	3%	1	2%
Unknown*	34	26%	12	19%
Total Cases	133	100%	63	100%

*Systematic data collection has improved through the course of the pandemic but some demographic information is unknown. In addition, some cases decline to share this information. Therefore, data should be interpreted with caution. Data is subject to change as cases are transferred to other counties or new information is obtained

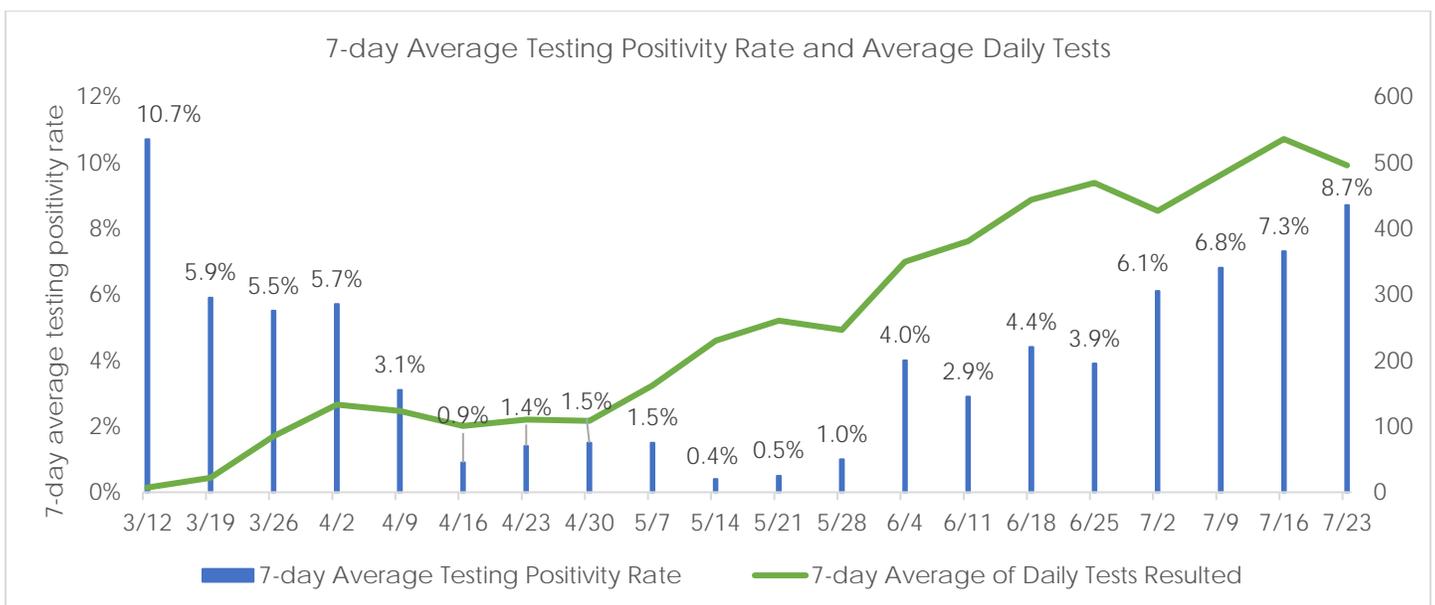
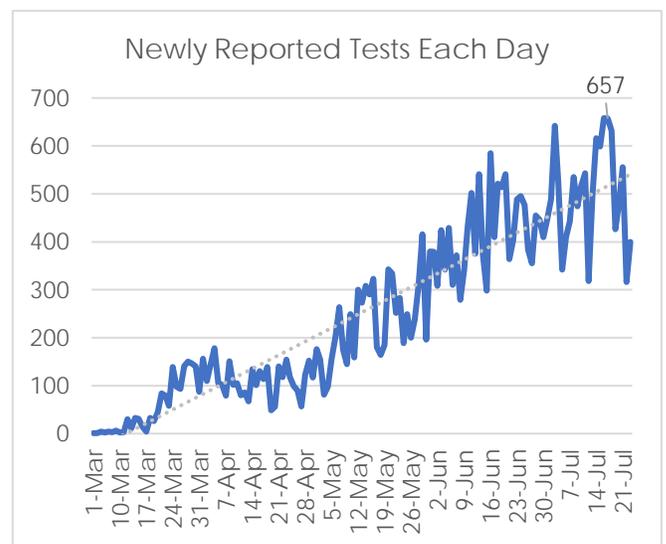
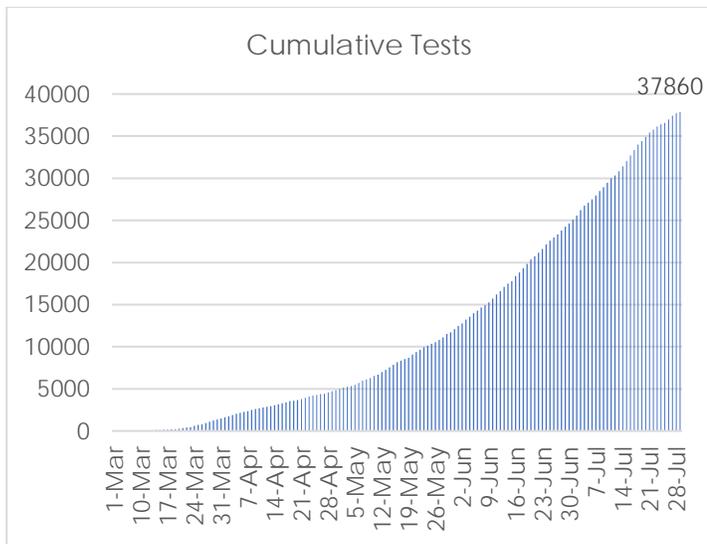
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Testing

As of July 30, Placer County Public Health has received 37,860 initial test results to detect new COVID-19 infection. Overall, 4.8% of tests have been positive, an increase of 12% from our last update. The overall 7-day average testing positivity rate is currently at 8.5%. This figure does not reflect current widespread delays in testing and will be revised as new results are received. The daily testing positivity rate has ranged from 6-10% in the past week. Reported tests only include PCR tests that detect viral RNA. They do not include serology (antibody) tests. An individual who tests positive on multiple occasions is only counted as a single case.

* Testing positivity rate is the number of new positive tests in the last 7 days / total initial tests reported in the last 7 days. The 7-day average testing positivity rate is variable for several days as new test results are reported. Public Health reports the rate for the 7-day period ending 7 days prior to the current day. The figures for daily newly reported tests will increase as new test results are received.



FAQs of the week

How many asymptomatic individuals have been counted among Placer's positive cases?

Of 1,783 confirmed Placer County cases whose case investigation interview has been assigned, 97 reported having not experienced symptoms, or 5%. Some were tested due to being in close contact with another confirmed case, while others may have sought testing for other reasons.

People who are infected and have no symptoms can transmit the virus to others, which is why Placer Public Health urges all close contacts to seek testing during the incubation period.

How many people are unable to be reached or refuse to provide information to investigators?

Of the 1,783 cases that have been assigned for investigation as of 7/30, 120 (7%) were unable to be reached by Public Health. A case is left several voice messages and a letter is mailed to their home address if phone efforts are unsuccessful. Most individuals participate in an interview when reached. However, a small number of cases (34, 2%) refused to provide information to Public Health. In these cases, guidance is mailed to the home address. In all, 8% of cases are currently considered lost to follow up.

How will new testing criteria impact the county's test positivity rate?

Due to limited testing capacity locally and statewide, Placer County Public Health is recommending for now that residents should only seek testing if they are experiencing symptoms of COVID-19 or have been in close contact with someone known to have COVID-19. The temporary change is in line with new [state guidance](#) that prioritizes limited testing for those who are ill, close contacts of confirmed cases, or part of an outbreak, followed by people who live or work in high-risk settings.

It is possible this prioritization may contribute to an increase in the testing positivity rate should fewer lower-risk individuals access testing. Current testing volume is contributing to significant delays in test results, hindering the ability of Public Health to quickly identify cases and their contacts. The goal of increasing availability of testing for high-priority circumstances is to expedite the identification of ill individuals and their contacts so that quarantine and isolation is more timely, thereby reducing overall disease transmission in the community.

What does it mean that Placer's Adult Surgical/Medical and ICU Bed availability are in the single digits this week? What surge capacity is there within the county if needed?

Placer County has a total of 418 Adult Medical/Surgical beds and 140 Adult ICU beds at last recorded baseline. It is normal for hospital bed occupancy to fluctuate. In the last week, there have been an average of 59 COVID-19 patients hospitalized, 13 of them in the ICU. Other beds are occupied by patients experiencing other health conditions.

Two Placer hospitals have implemented their surge plans. Placer County's three hospitals have phased surge plans that allow for up to 1028 hospital beds in total. Currently, there have been over 60 surge beds activated.

Patients should not delay seeking care should they experience a medical issue. Beds are currently available and area hospital have put precautions in place to prevent COVID-19 transmission.

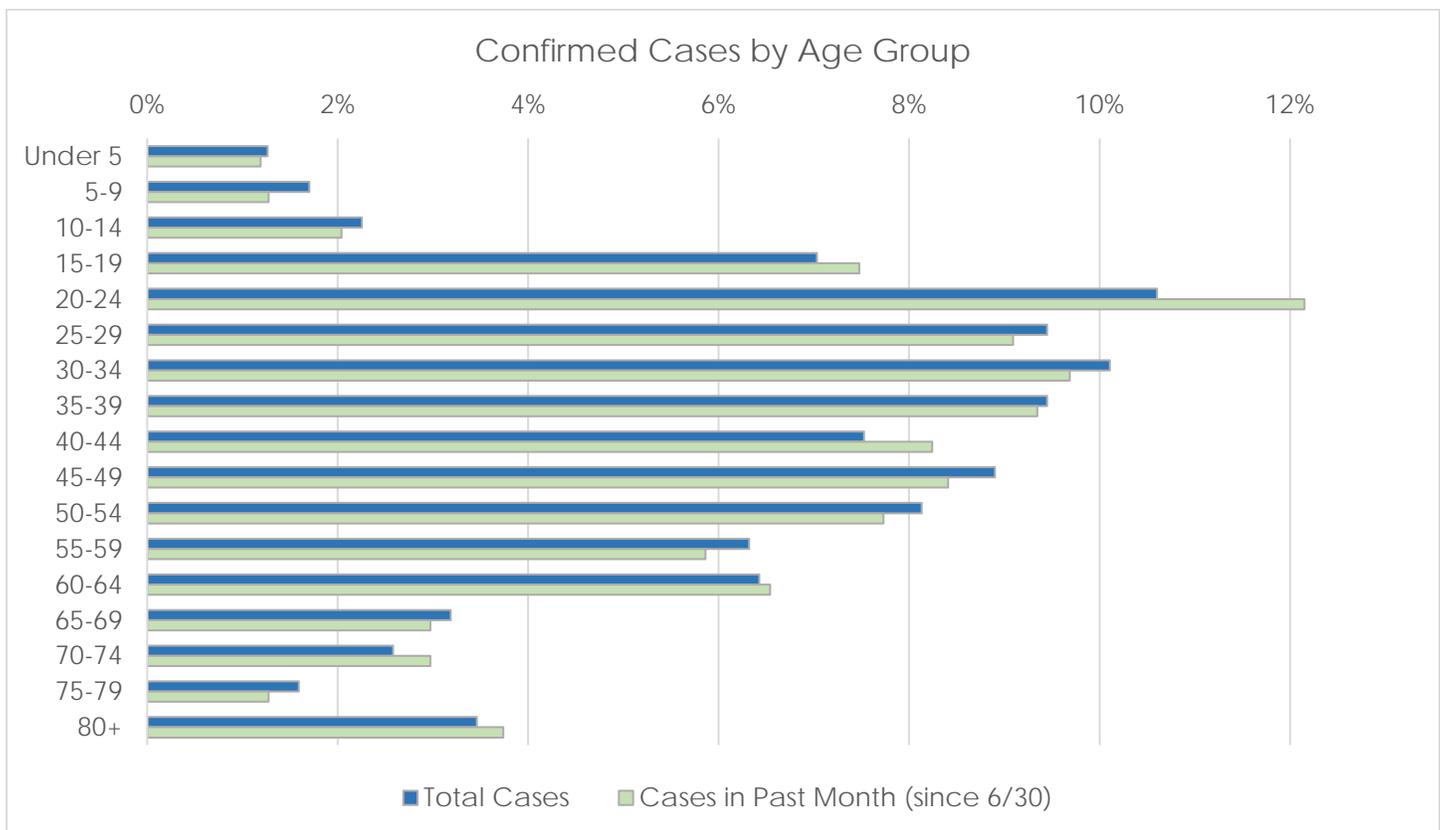
Are there any notable trends among age groups?

Placer County Public Health aligns this reporting on our [daily dashboard](#) to age ranges reported by the California Department of Public Health.

The highest proportion of confirmed cases is among the 18-49 year old age group, representing 60% of all cases. Possible exposures among this group continue to include workplace settings along with summer travel and social and recreational gatherings.

Public Health reviews more granular data to assess changes in disease transmission patterns in the community.

Here is a more detailed look at the ages of cumulative cases and those received in the past month:



What is the value of reporting by specimen collection date?

The decision to shift to reporting by specimen collection date rather than result report date was made by our Placer County Public Health epidemiology team in an effort to more accurately share data about COVID-19 in Placer County.

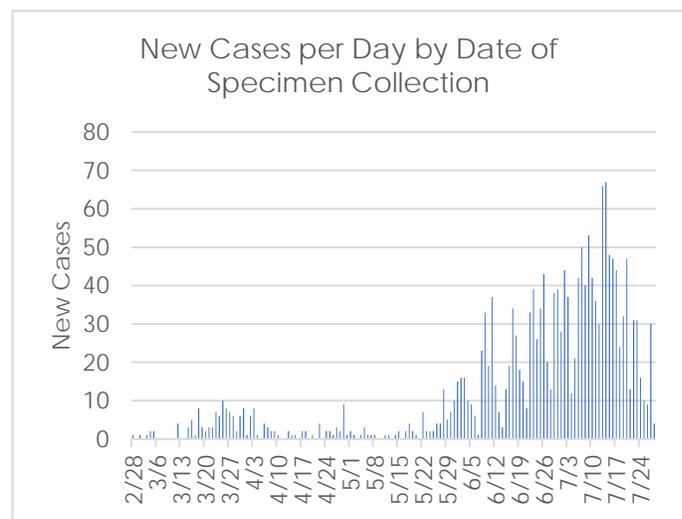
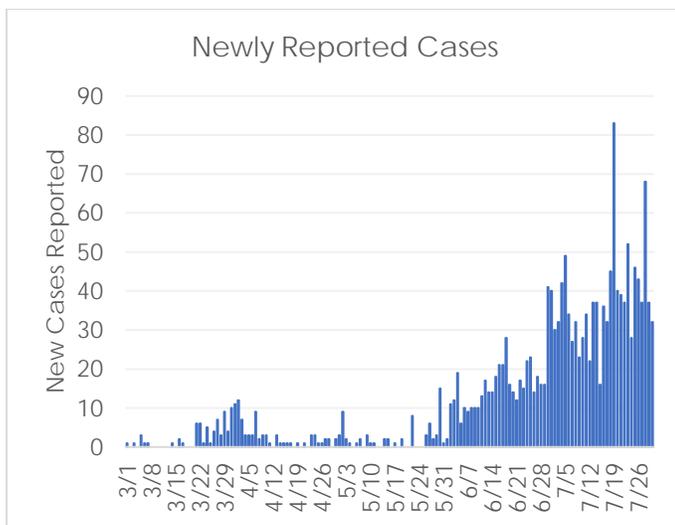
Many other counties report by specimen collection date or episode date rather than date reported to the health department, including [Sacramento County](#) and [El Dorado County](#). We made this change to better reflect the amount of infection circulating in the community. Until last Thursday, Public Health was reporting the number of new cases *received by us* in a given day. This is more useful when test turnaround time is quick, but the actual time that people are getting sick becomes

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more unclear as we wait longer for test results. The average turnaround time has increased from 2.7 days in June to 4.1 days in July, with a recent range from 0 to 16 days from date of test collection to date of test result. When report date was used, you may remember seeing some big days of case numbers – as high as 83. When those cases are graphed by the day the actual test was taken, you can see a timeline that more closely resembles when cases are becoming sick, and can better see transmission patterns in the community.

The graph below on the left shows cases by the date they are reported to the health department; the graph on the right shows cases by date of specimen collection. The total numbers are the same in both, but we can better approximate when people were actually sick when viewing data by collection date. The most recent dates aren't filled in completely because we are still awaiting many results. These are filled in as Public Health receives new cases.



The dashboard changes will take some getting used to, but they more accurately display how disease is spreading over time in the county. Individuals can still track how many cases are reported each day by following the change in total case numbers from day to day, but keep in mind that the date reported is always later than when the case got sick or when they were tested. The lag from a person getting infected, to getting tested, to getting their test results, to getting reported to Public Health exists in both of the above graphs. Graphing cases by report date does not allow us to visualize this lag, but graphing cases by collection date does. It is important to remember that lower numbers of charted cases within the most recent several days does not necessarily indicate a decrease in disease spread (particularly when we are seeing long turn-around times for test results, as has been the case over the last several weeks).

What is the County doing to address and prevent outbreaks in skilled nursing/long-term care facilities?

Placer County Public Health implemented a skilled nursing facility (SNF) surveillance program in May. Through this program, 20% of all staff and residents at each facility were tested on a weekly basis until all staff and residents had been tested. After that, Public Health now continues to test 25% of staff each week to identify if COVID-19 has been introduced into a facility.

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As overall disease transmission has grown in the county over the past several weeks, cases have also increased among SNF staff and subsequently residents as well. While SNFs and other long-term care facilities in Placer County are taking proper precautions in terms of sanitation, protective equipment and staff monitoring, it is difficult to fully eliminate transmission given the ability for coronavirus to be spread by those not experiencing symptoms. The surveillance program will continue with the aim of catching such cases early before an outbreak has grown much larger.

Monitoring/Thresholds

Placer Attestation Triggers		
Placer Triggers	Threshold	Current Value
Doubling time of cases	<5 days for 5 straight days	27.9 days
Hospital census	>135% licensed capacity	<135%*
Health care worker infections	Increasing for 5 days	Increasing for 5 days (n=9)
PPE for health care workers	<7-day supply	>7 day supply
% of cases with contacts elicited	<80% of cases	>80%
% symptomatic contacts tested within 48 hours of symptoms	<90%	<90%

State Monitoring Indicators		
State Indicators	Threshold	Current Value
Case rate per 100K (14-day)	>25 (or >100 alone)	121.8
Testing positivity rate (7-day)	>8%	8.5%
Change in 3-day hospitalization average	>10% (only if n>20)	1.7% (n=59)
% ICU beds available	<20%	2 beds*
% Ventilators available	<25%	78.9%

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*Awaiting exact percentages through bed polling following recent statewide shifts in reporting by hospitals; however existing reporting suggests baseline capacity in range (on 7/30, 6 Adult Medical/Surgical & 2 Adult ICU beds available).

Preventing Infection

Personal precautions go a long way to help reduce the spread of COVID-19.

- Anyone who is feeling ill should stay home.
- Vulnerable (high risk) individuals are encouraged to stay at home. This includes those over age 65 or with serious medical conditions.
- Wear a face covering in public. [Read some Face Covering FAQs here.](#)
- When in public, maximize physical distance from others (at least six feet).
- Maintain good hygiene practices by washing hands, using hand sanitizer, disinfecting frequently touched surfaces, and covering coughs and sneezes.
- Avoid gathering with people you don't live with.