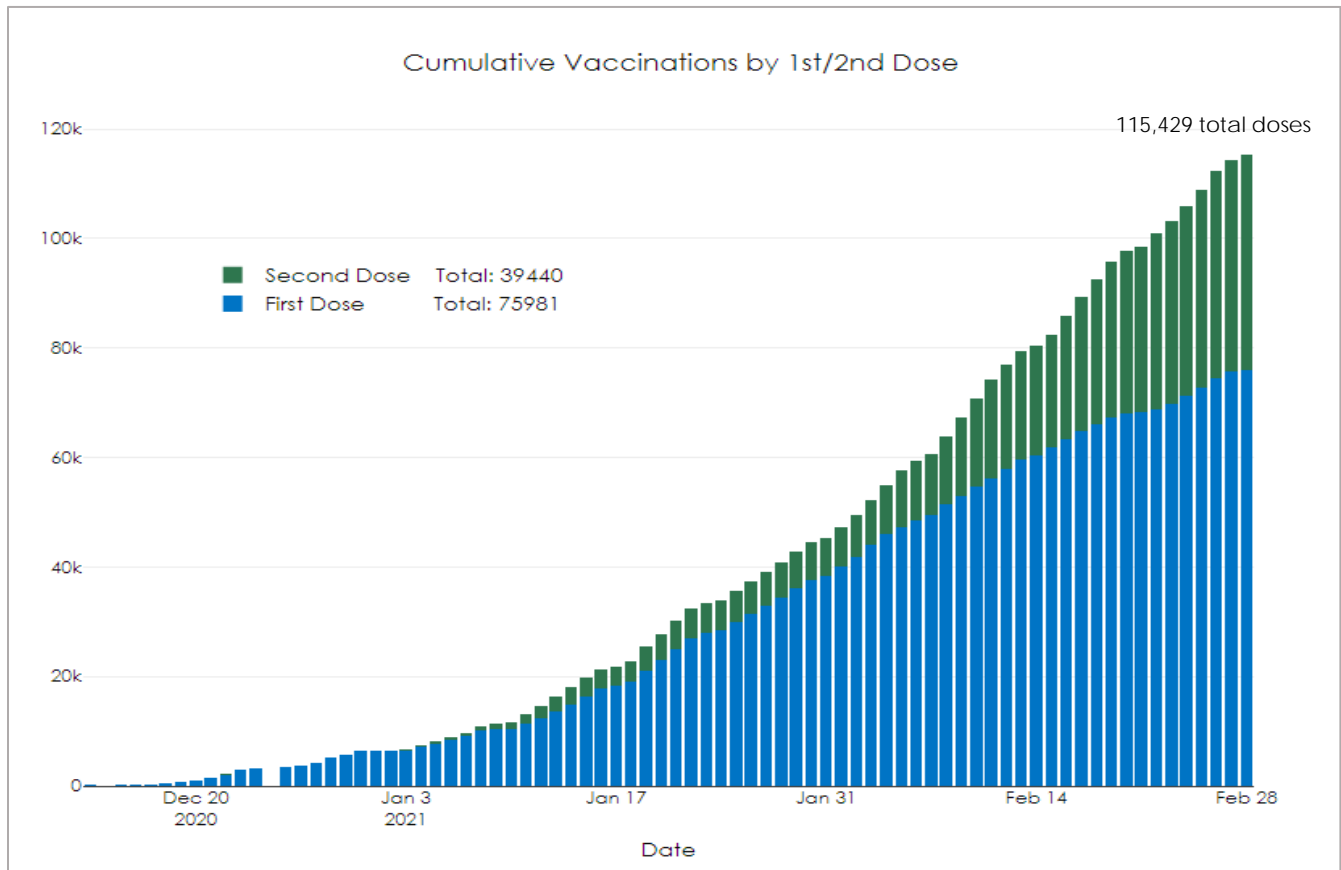


PLACER COUNTY COVID-19 UPDATE

March 5, 2021

Placer County Vaccination Progress

Placer County received its first allocation of COVID-19 vaccine in Dec. 2020. As of Feb. 28, 115,429 doses have been administered to Placer County residents, including 39,440 second doses. Currently, Public Health receives vaccine allocations on a weekly basis and uses some doses at its own clinic while reallocating others to health care partners including hospital systems, clinics and pharmacies.



***The vaccine data presented here is dynamic and subject to change*.**

Vaccines Administered to County Residents By Week			
Date Range	First Dose	Second Dose	Total Vaccines
01/25/2021 - 01/31/2021	9875	1356	11231
02/01/2021 - 02/07/2021	11162	4237	15399
02/08/2021 - 02/14/2021	10888	8947	19835
02/15/2021 - 02/21/2021	7918	10099	18017
02/22/2021 - 02/28/2021	7553	9243	16796
Cumulative To Date	75981	39440	115429

Allocations	Doses
Doses Allocated to Public Health as of 2/28	78370
Doses Retained by Public Health	39980
Doses Transferred to Other Providers	38390

*Administration data sourced from Snowflake/CAIR; allocation data from Placer County Public Health.

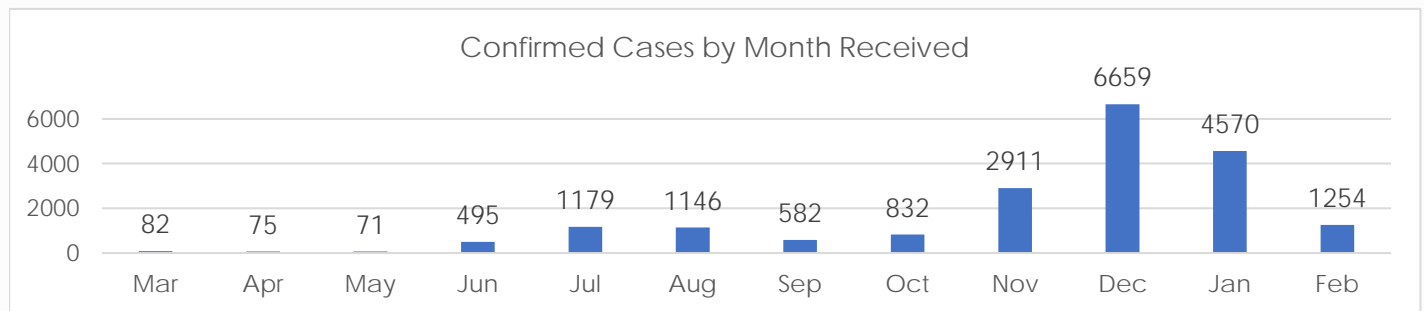
Placer County COVID-19 Cases at a Glance

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.

Our team of case investigators strive to interview those who have tested positive and their close contacts as soon as reported, and prioritized based on level of community transmission. These teams provide guidance and offer support to those who need to isolate and quarantine to help keep their families and communities safe.

What's happening now in Placer County?

Cases in Placer County have slowed significantly.



Placer County COVID-positive residents in local hospitals (on 2/28): 16 (3 in intensive care).

There were 19,856 confirmed COVID-19 cases in Placer County as of 2/28. Cases have slowed considerably in February compared to recent months. Data remain dynamic as cases are transferred to and from other jurisdictions based on residency and as cases previously reported in other counties are assigned to the original jurisdiction.

An individual who tests positive on multiple occasions is only counted as a single case. Public Health reports cases by episode date, which is the earliest of several dates (illness onset date, specimen collection date, date of death or date reported). As information is received by Public Health, episode dates will be updated and case counts will be adjusted to best approximate the date of illness onset. Data are dynamic and will change as cases are received, updated, and transferred.

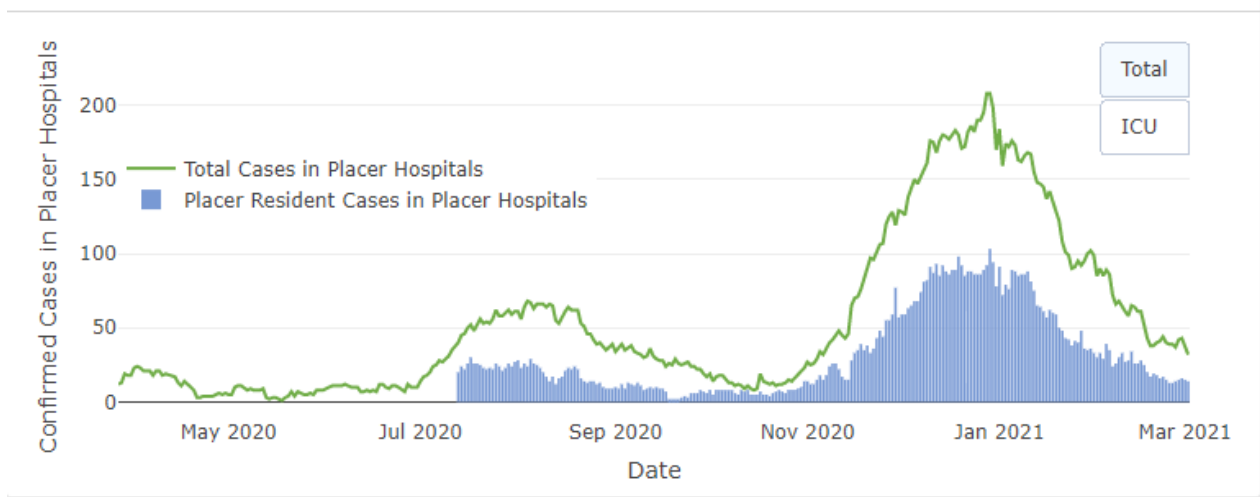
[View cumulative and new cases by episode date.](#)

California Department of Public Health (CDPH) monitors cases using a 7-day daily case rate, calculated as the average number of COVID-19 cases per day by episode date reported over a 7-day period, divided by the population of Placer County. This number is then multiplied by 100,000. The figure is lagged by 7 days to allow for receipt and transfer of additional results. [View a chart](#) of the 7-day average daily case rate.

Hospitalizations and Deaths

Placer County’s three hospitals report COVID-19 census counts to Public Health every day; these aggregated reports do not specify individual patient data. Therefore, these counts best describe hospital capacity trends and serve as an indicator for community transmission rates, but we do not have data to indicate how many Placer residents with COVID-19 may have been hospitalized outside of Placer County. This data does not include Placer County residents hospitalized in other counties. Placer County’s two largest hospitals lie near the Placer-Sacramento County border and provide care to residents of both counties, as well as other neighboring counties. Public Health began collecting residency information from hospitals in July. The chart below is now [available on the daily dashboard](#) and will be phased out of this report.

Confirmed COVID-19 Case Hospitalizations in Placer Hospitals⁷



*The data for 1/2 and 1/16 are likely undercounts, as we received incomplete hospital reports on those days.

As of February 28th, Placer County has received reports of 232 COVID-related* deaths.

Age Range	Number of Deaths	Cumulative %
18-44	1	0.4%
45-49	2	1%
50-54	4	3%
55-59	7	6%
60-64	9	10%
65-69	14	16%
70-74	28	28%
75-79	29	41%
80-84	42	59%
85-89	43	77%
90-94	30	90%
95+	23	100%
Total	232	--

- 127 (55%) were residents of long-term care facilities.
- 41% were under the age of 80; 10% were under the age of 65.
- At least 91% of those who died had at least one confirmed underlying health condition. (21 deaths are pending for this data).

*COVID-related deaths have COVID-19 disease or SARS-CoV-2 listed as a cause of death or a significant condition contributing to death on the death certificate. Public Health reporting is consistent with the case definition set forth by the Council of State and Territorial Epidemiologists and guidance issued by CDPH.

COVID Deaths by Month	Number of Deaths
March	2
April	6
May	1
June	2
July	6
August	17
September	20
October	7
November	25
December	80
January	54
February*	12
Total	232

*Some deaths from February have not been processed.

PLACER COUNTY COVID-19 UPDATE

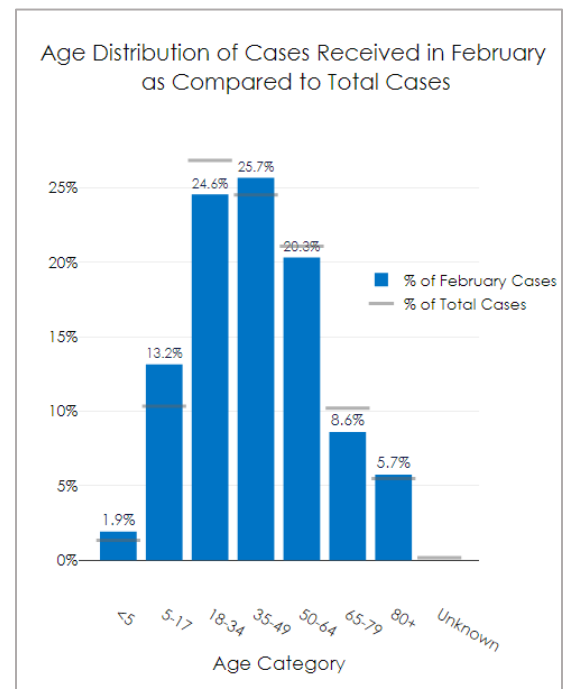
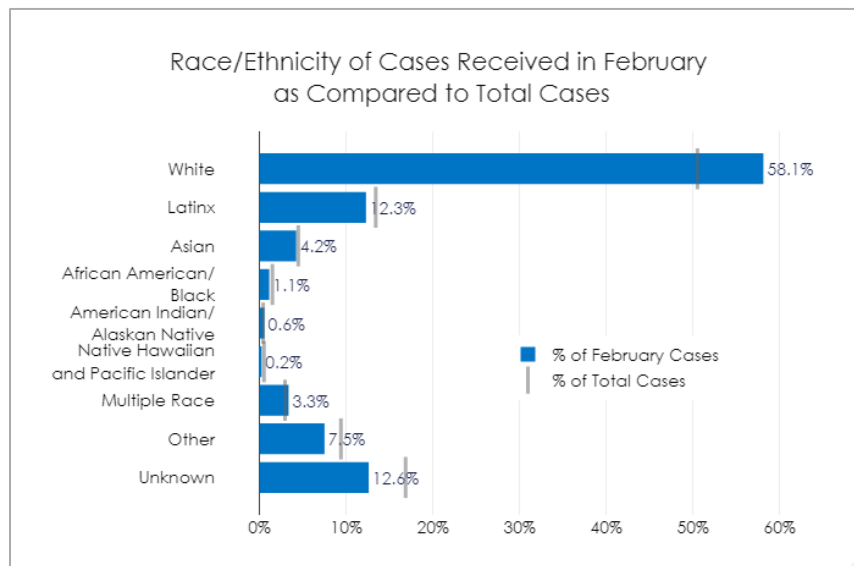
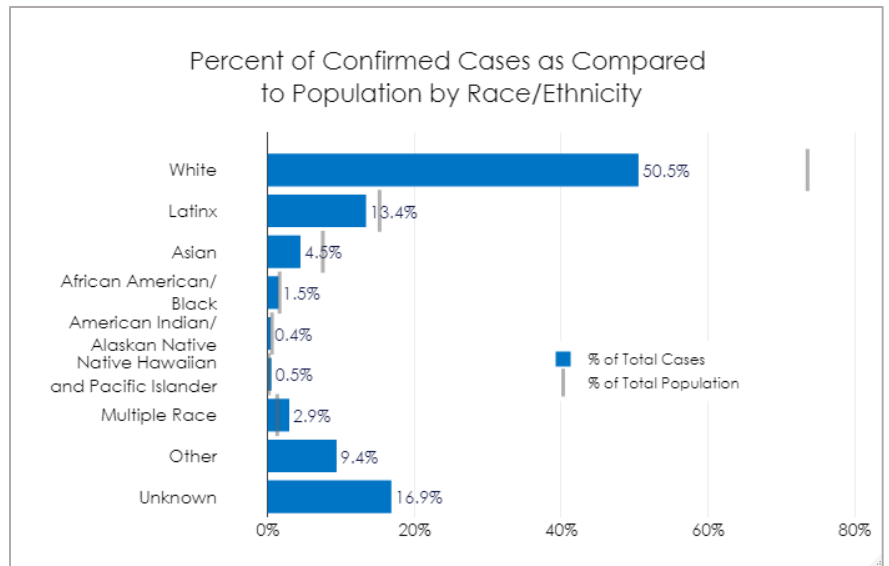
March 5, 2021

Descriptive Statistics

About one-fifth of race/ethnicity data remains unknown, although systematic data collection has improved. Placer County lacks race/ethnicity data for 17% of cases compared to 23% [statewide](#). Race/ethnicity data is sometimes provided by labs, but most often collected during the case interview. Some cases cannot be reached for interview and some decline to share this information.

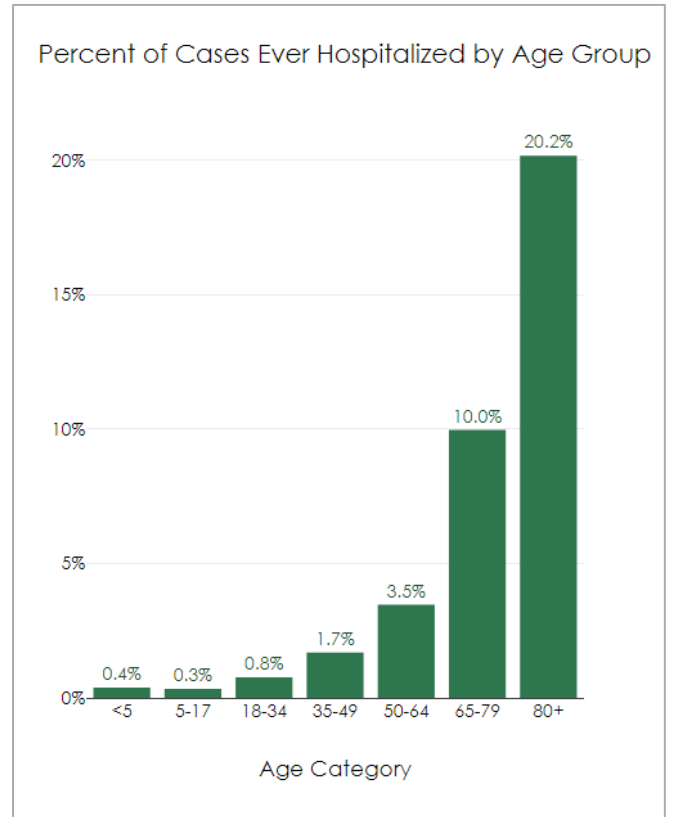
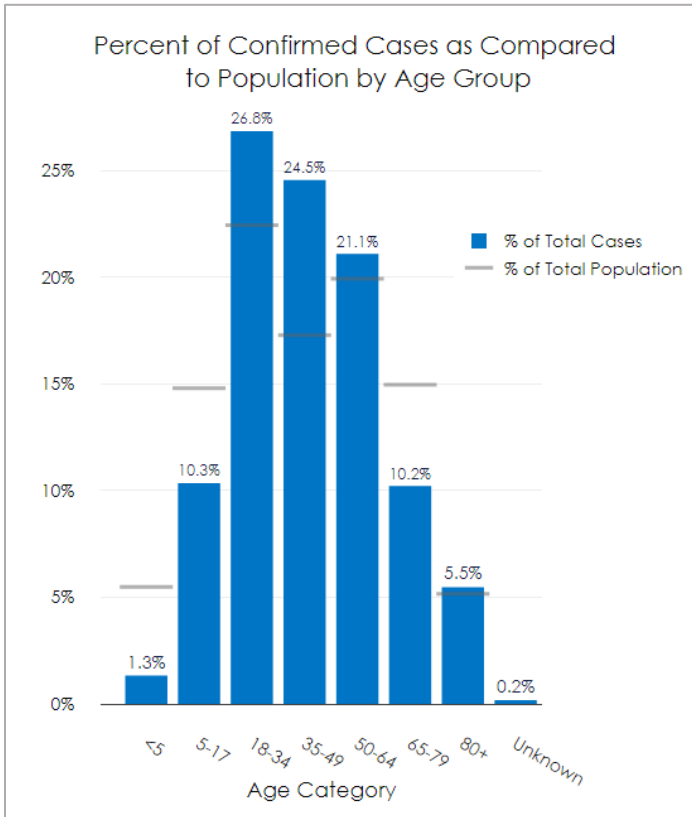
All hospitalization data below, including demographic breakdown, is an undercount of cases ever hospitalized. This data is dependent upon case interviews, which may happen prior to hospitalization, or hospital notification to Public Health.

Race/Ethnicity Distribution Among Confirmed Cases		
	February Cases	Total Cases
White	729	10033
Latinx	154	2662
Asian	53	887
African American/ Black	14	294
American Indian/ Alaska Native	7	83
Native Hawaiian and Pacific Islander	3	102
Multiple Race	42	584
Other Race	94	1865
Unknown	158	3346
Total Cases	1254	19856



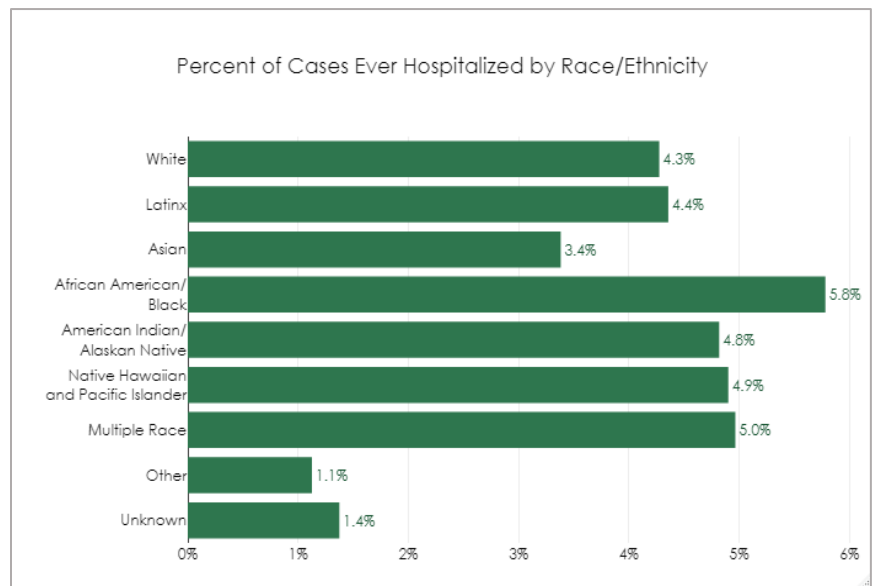
PLACER COUNTY COVID-19 UPDATE

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Race/Ethnicity Distribution and Hospitalization Among Confirmed Cases		
	Hospitalized Cases	Total Cases
White	429	10033
Latinx	116	2662
Asian	30	887
African American/Black	17	294
American Indian/Alaska Native	4	83
Native Hawaiian and Pacific Islander	5	102
Multiple Race	29	584
Other Race	21	1865
Unknown	46	3346
Total Cases	697	19856

A small number of hospitalized cases (approximately 10) were erroneously attributed to the unknown age/race categories in the prior monthly report. This has since been corrected.

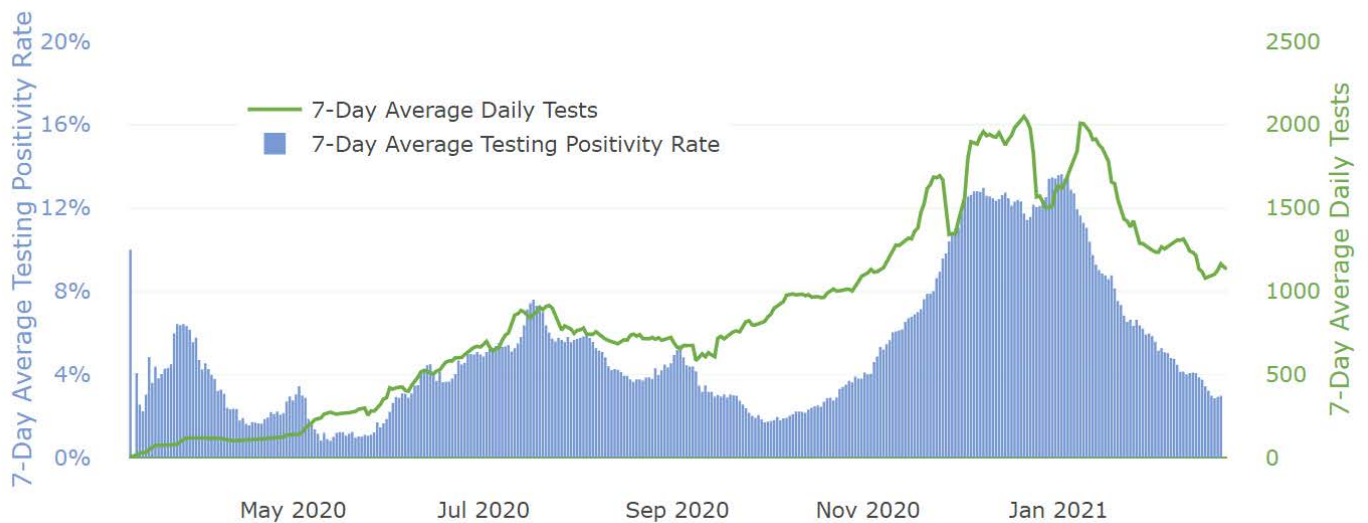
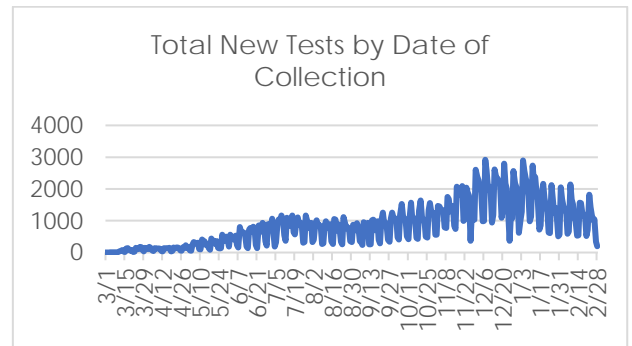
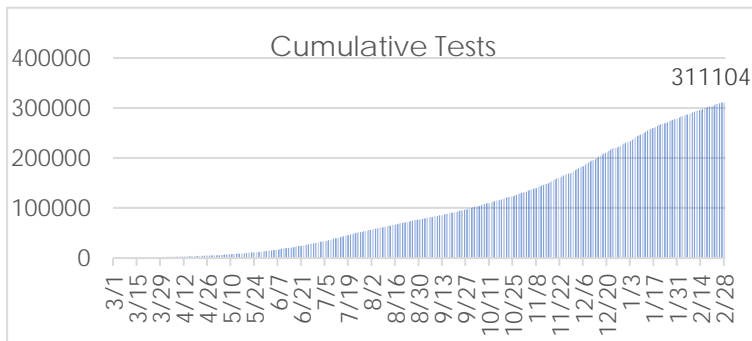


PLACER COUNTY COVID-19 UPDATE

March 5, 2021

Testing

As of Feb. 28, Placer County Public Health has received 311,104 total test results to detect COVID-19 infection. The 7-day average testing positivity rate is 3.0%. Reported tests only include molecular tests that detect viral RNA. They do not include rapid antigen tests or 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 tests reported in the last 7 days. The 7-day average testing positivity rate is variable for days as new test results are reported. The figures for daily tests will increase as new results are received.



The screenshotted graph above [is now available on the daily dashboard](#) and will be phased out of the monthly report.

Case Investigation Findings: February 1-28

Potential Exposure Settings*		
	Cases	%
Total Cases received by Public Health February 1-28	1,254	100%
Personal contact attempted for interview (includes non-response). (A virtual survey was sent to all case/contacts if a phone number was provided).	1,050	84%
Cases interviewed (additional responses provided by virtual survey). (Public Health strives to interview as many cases as possible. Cases are prioritized for an interview based on how many days have elapsed since the time of their test date and result date, along with risk factors, including age and vulnerable settings).	683	54%
<i>Those with at least one potential exposure setting among those with completed interview/survey:</i>		
	Count	
Reported close contact to a confirmed case*	277	
Household member	177	
Work	29	
School	14	
Healthcare setting (as employee or patient)	4	
Other individual or not specified	53	
	Count	
Reported attending a large gathering*	51	
Friend or family	18	
Work	2	
School	16	
Religious	6	
Travel	4	
Other gathering	5	

*Potential exposure settings are defined as indoor or outdoor locations in which cases came within 6 feet of a case for at least 15 minutes during the 2-14 days prior to symptom onset or test collection date for asymptomatic cases. Potential exposure settings are not confirmed sources of infection, and do not reflect all reported potential exposure settings. Persons may have visited more than one location. Responses are based on information volunteered on interview.

Congregate Settings

During the month of February 2021, there were 18 congregate living facilities (e.g., skilled nursing, long-term care, memory care, etc.) with active cases. Through the course of the pandemic these facilities have had 857 cumulative confirmed cases of COVID-19. These include total case counts for staff and residents. Each facility has had 1-197 cases who were linked to one another. Public Health and the CDPH Healthcare-Associated Infections Program continue providing consultation to these facilities in addition to their respective licensing institutions to control and prevent additional transmission of COVID-19.

During the past two months, 8,248 doses of vaccine have been administered by CVS and Walgreens to staff and residents at congregate care facilities in Placer County, including 5,129 first doses and 3,119 second doses.

[Click here](#) for the latest information about correctional facility cases.

FAQs

Why hasn't Placer moved to the red tier yet?

A county can move to a less restrictive tier in the State's Blueprint for a Safer Economy 1 of 2 ways:

1. Both the overall test positivity rate and adjusted case rate meet criteria for a less restrictive tier for two consecutive weeks; OR
2. Both the overall test positivity rate and the health equity quartile positivity rate are below 5% for two consecutive weeks, to move from purple to red tier (or <2% from red to orange).

Placer County has one week of meeting metrics in both these areas, and so if trends continue, the county may have the opportunity to move to the red tier as of the state's March 9 assessment.

There has been some confusion about other counties moving to red tier whose case rate might currently exceed that of Placer's, such as El Dorado. El Dorado had two consecutive weeks meeting criteria listed in the second scenario above, the 'health equity acceleration' method, whereas this past week was Placer's first week meeting criteria in either scenario (see the Monitoring/Threshold data on the following page). The case rate and positivity rates are lagged 7 days.

What vaccine data is available?

Since the last monthly report, Placer County Public Health's access to vaccination data through the state has improved, and we are now able to access data for vaccines administered to Placer County residents as well as vaccines administered in Placer County. Especially given that some vaccine prioritization is employment-based, some Placer residents may be vaccinated in other counties, just as residents of other counties might be vaccinated in Placer.

Public Health has begun to organize this data as shown on the first page of this report, and expects to add a vaccination tab to our daily COVID-19 dashboard in the next few weeks. Data should be considered preliminary.

What will be changing about vaccine distribution in the coming weeks?

The state has contracted with a third-party administrator, Blue Shield, to distribute vaccine and handle performance management. As a result, some of the providers who currently receive vaccine from Placer County Public Health will need to contract with Blue Shield to continue receiving vaccine. Providers offering vaccine are required to shift to the state's MyTurn system. Being in one of the final migration waves, Placer County expects to gradually shift to the MyTurn system over the next month, though we expect to offer second dose registration in PrepMod (the current state system used by the county) to those who already did their first dose registration through PrepMod.

Has the county received J&J vaccine? How will it be used?

Placer County Public Health has been notified that it will receive 1,400 doses of Johnson & Johnson. This is likely to be the only J&J allocation until later in March. The county plans to gradually implement mobile operations with J&J among at-risk populations where scheduling, transportation, and other factors might otherwise be a barrier to a second appointment (as J&J is a single dose, not two).

Monitoring/Thresholds

Every county in California is assigned to a tier under the state’s Blueprint for a Safer Economy reopening framework based on its testing positivity and adjusted case rate. After the initial placement process, counties must remain in a tier for at least 3 weeks before moving forward. Data is reviewed weekly and tiers are updated on Tuesdays. To move forward, a county must meet the next tier’s criteria for 2 consecutive weeks. If one or both of a county’s metrics land in a more restrictive tier for 2 weeks in a row, a county must move backward to the more restrictive tier. The [Health Equity Metric](#) can also affect movement.

State Monitoring Indicators for Placer County		
State Indicators	2/23 Tier Assessment	3/2 Tier Assessment
Adjusted case rate per 100,000 (7-day average, 7-day lag)	10.3	6.0
Testing positivity rate (7-day average, 7-day lag)	4.1	2.0
Health Equity Quartile test positivity (7-day average, 7-day lag)	5.9	3.1
Current overall tier	Purple	

[State Tier Legend:](#)

Adjusted case rate per 100,000 (7-day average, 7-day lag)	>7	4-7	1-3.9	<1
Testing positivity rate (7-day average, 7-day lag)	>8%	5-8%	2-4.9%	<2%

Preventing Infection

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

- Remember: The safest gathering is a virtual gathering. The next safest gathering is a small, outdoor, distanced gathering with everybody wearing masks; washing/sanitizing their hands; and not sharing food, utensils or other items.
- 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 6 feet).
- Maintain good hygiene practices by washing hands, using hand sanitizer, disinfecting frequently touched surfaces and covering coughs and sneezes.
- Find [Guidance for Confirmed Cases \(English\) \(Spanish\)](#) and [Guidance for Contacts \(English\) \(Spanish\)](#).