

Harrisonburg and COVID-19

Where are we now???

July 28, 2020





COVID-19 Cases in Virginia



Dashboard Updated: 7/28/2020, Data entered by 5:00 PM the prior day.

Total Cases*		Total Hospitalizations**		Total Deaths	
86,994		7,686		2,095	
Confirmed+	Probable+	Confirmed+	Probable+	Confirmed+	Probable+
83,732	3,262	7,640	46	1,991	104

Select Measure
(Affects Map and Bar Chart)

- ☒ Cases
- ☐ Hospitalizations
- ☐ Deaths

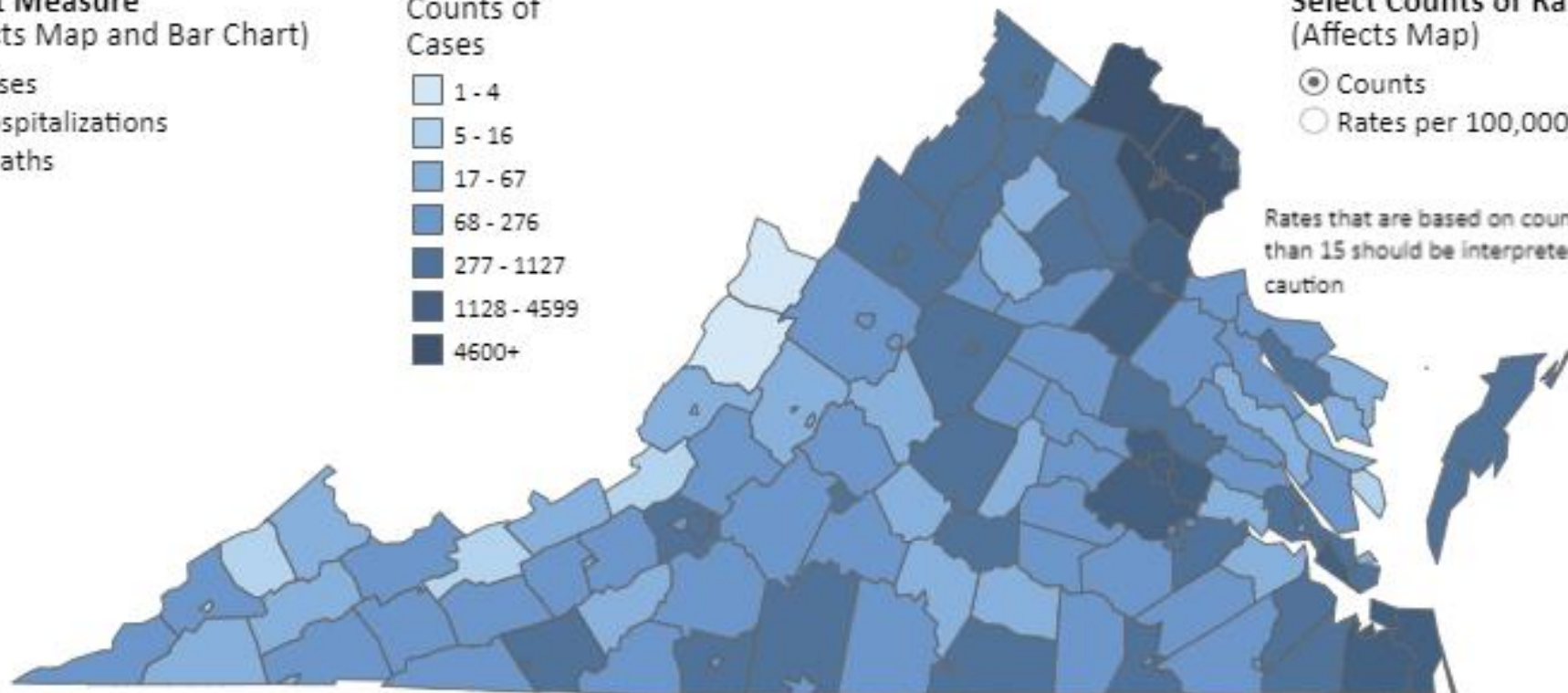
Counts of Cases

- 1 - 4
- 5 - 16
- 17 - 67
- 68 - 276
- 277 - 1127
- 1128 - 4599
- 4600+

Select Counts or Rates
(Affects Map)

- ☒ Counts
- ☐ Rates per 100,000

Rates that are based on counts less than 15 should be interpreted with caution



June 30

Health District	Locality	Case Count	Hospitalized Count	Death Count
Central Shenandoah	Augusta	185	7	2
	Buena Vista City	15	1	0
	Harrisonburg	939	71	24
	Highland	3	0	0
	Lexington	10	0	0
	Rockbridge	30	0	0
	Rockingham	720	73	10
	Staunton	73	8	0
	Waynesboro	82	6	0

July 28

Health District	Locality	Case Count	Hospitalized Count	Death Count
Central Shenandoah	Augusta	244	8	3
	Bath	4	0	0
	Buena Vista City	47	3	0
	Harrisonburg	1,035	78	29
	Highland	3	0	0
	Lexington	28	1	0
	Rockbridge	62	1	0
	Rockingham	870	93	16
	Staunton	137	10	0
	Waynesboro	164	8	2

Central Shenandoah Cases*

2,594

Confirmed+
2,331

Probable+
263

Central Shenandoah Hospitalizations**

202

Confirmed+
200

Probable+
2

Central Shenandoah Deaths

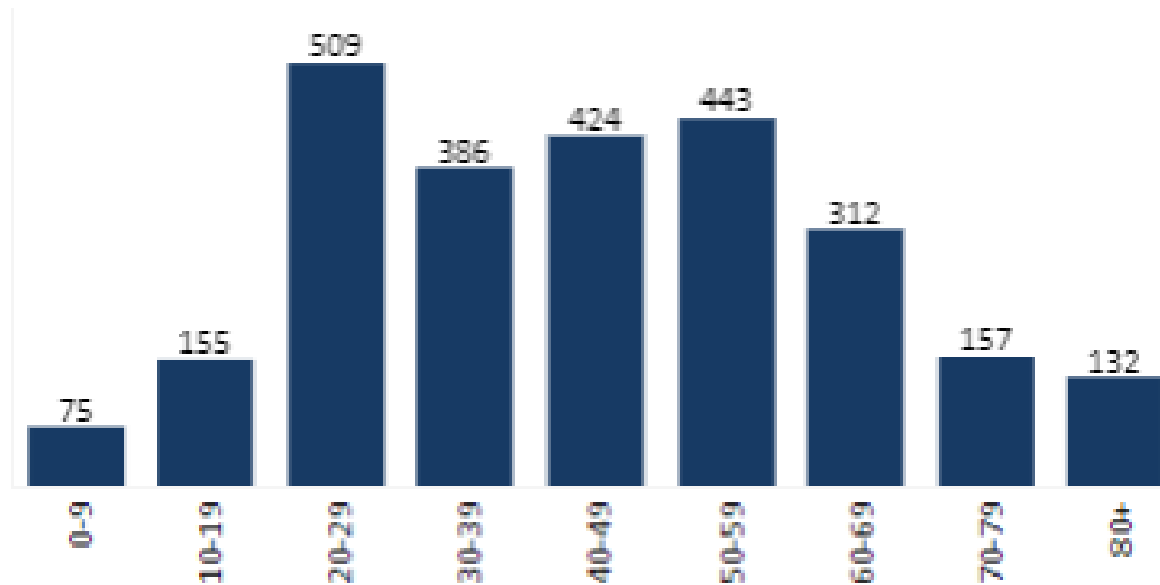
50

Confirmed+
48

Probable+
2

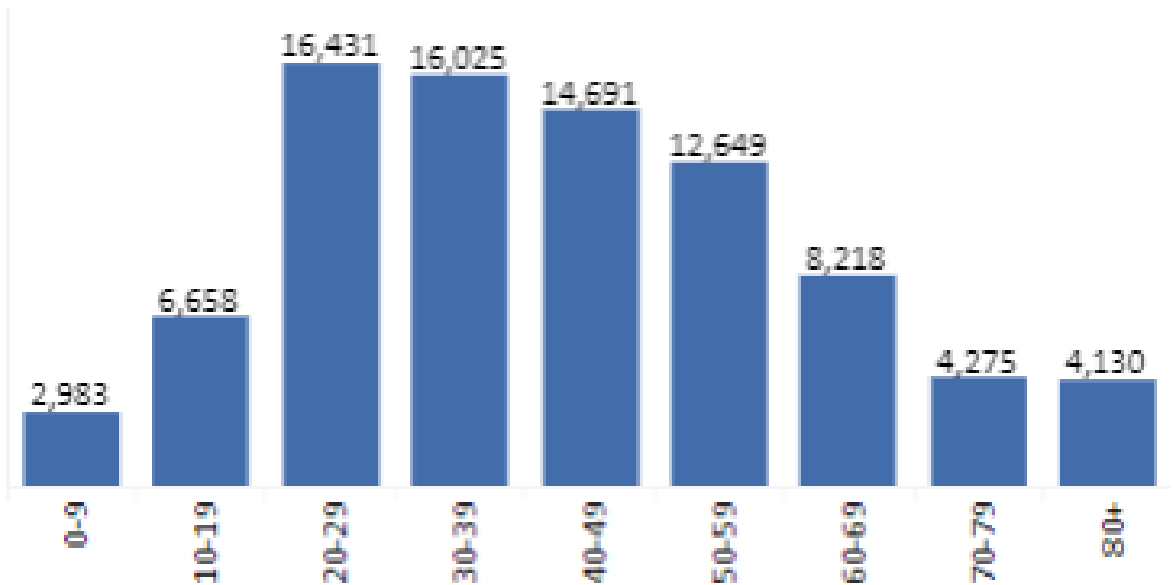
Cases by Age Group - Central Shenandoah

Not Reported: 1

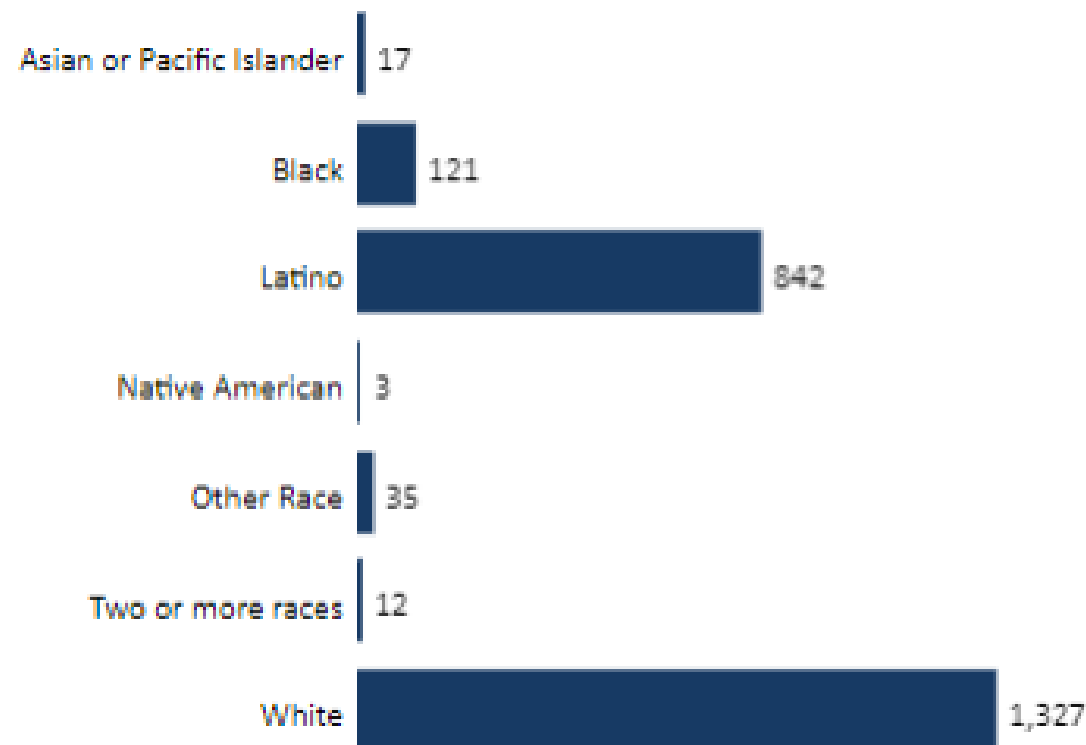


Cases by Age Group - Virginia

Not Reported: 934



Cases by Race and Ethnicity* - Not Reported: 237 Central Shenandoah

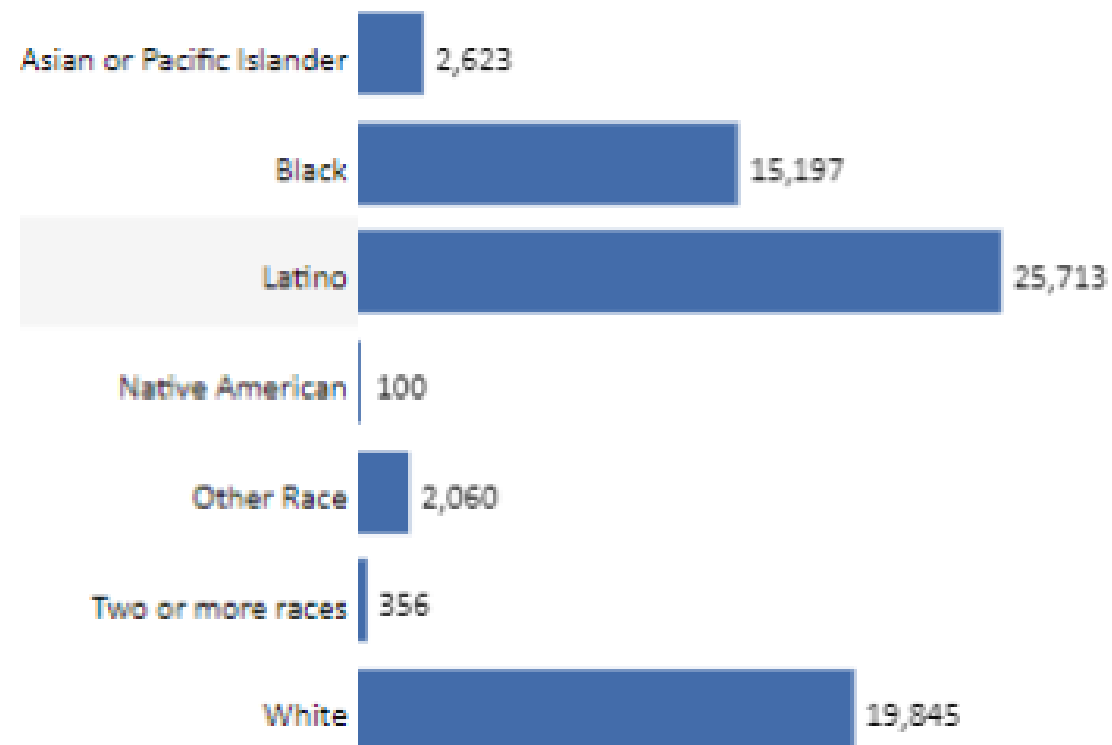


Cases by Sex - Central Shenandoah

Not Reported: 3



Cases by Race and Ethnicity* - Not Reported: 21,100 Virginia



Cases by Sex - Virginia

Not Reported: 491



All Health Districts
Testing Encounters PCR Only

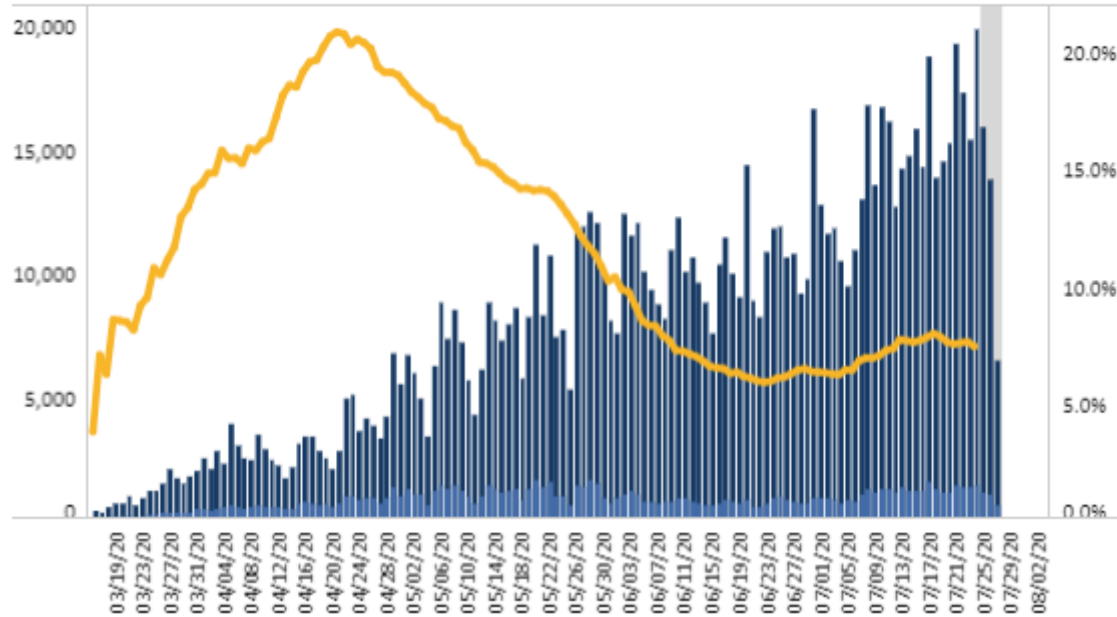
1,056,148

All Health Districts
Current 7-Day Positivity Rate PCR Only

7.3%

Number of Testing Encounters, Number of Positive
Testing Encounters, and Percent Positivity** by Lab
Report Date - All Health Districts, PCR Only

■ Percent Positivity, 7-Day Moving Average
■ Positive Testing Encounters
■ Number of Testing Encounters



Central Shenandoah
Testing Encounters PCR Only

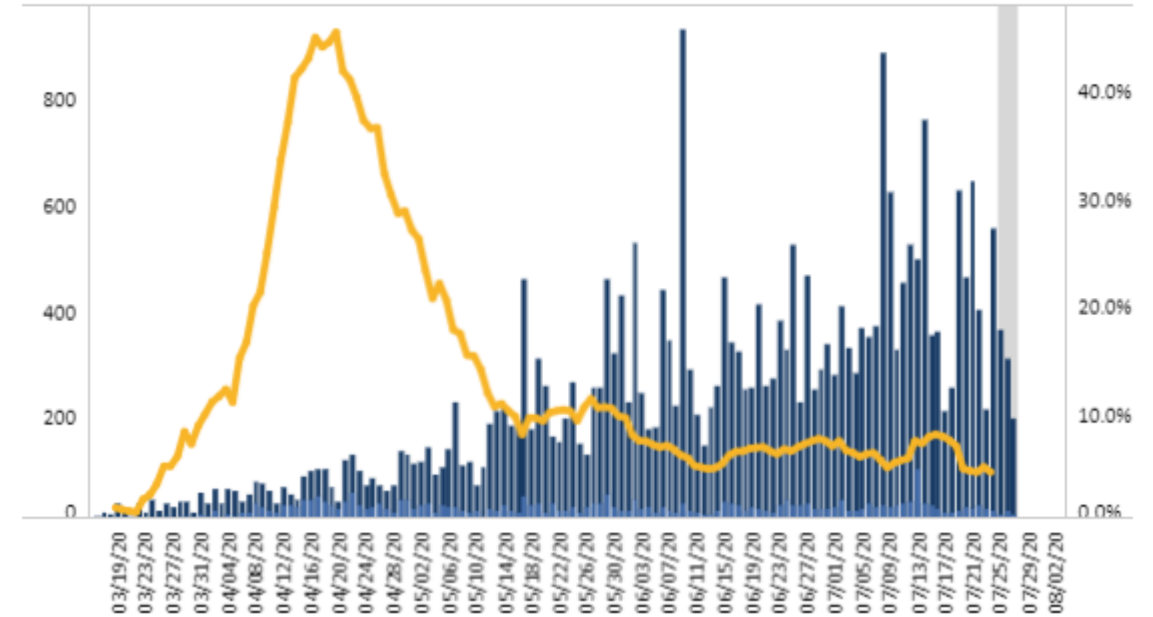
29,356

Central Shenandoah
Current 7-Day Positivity Rate PCR Only

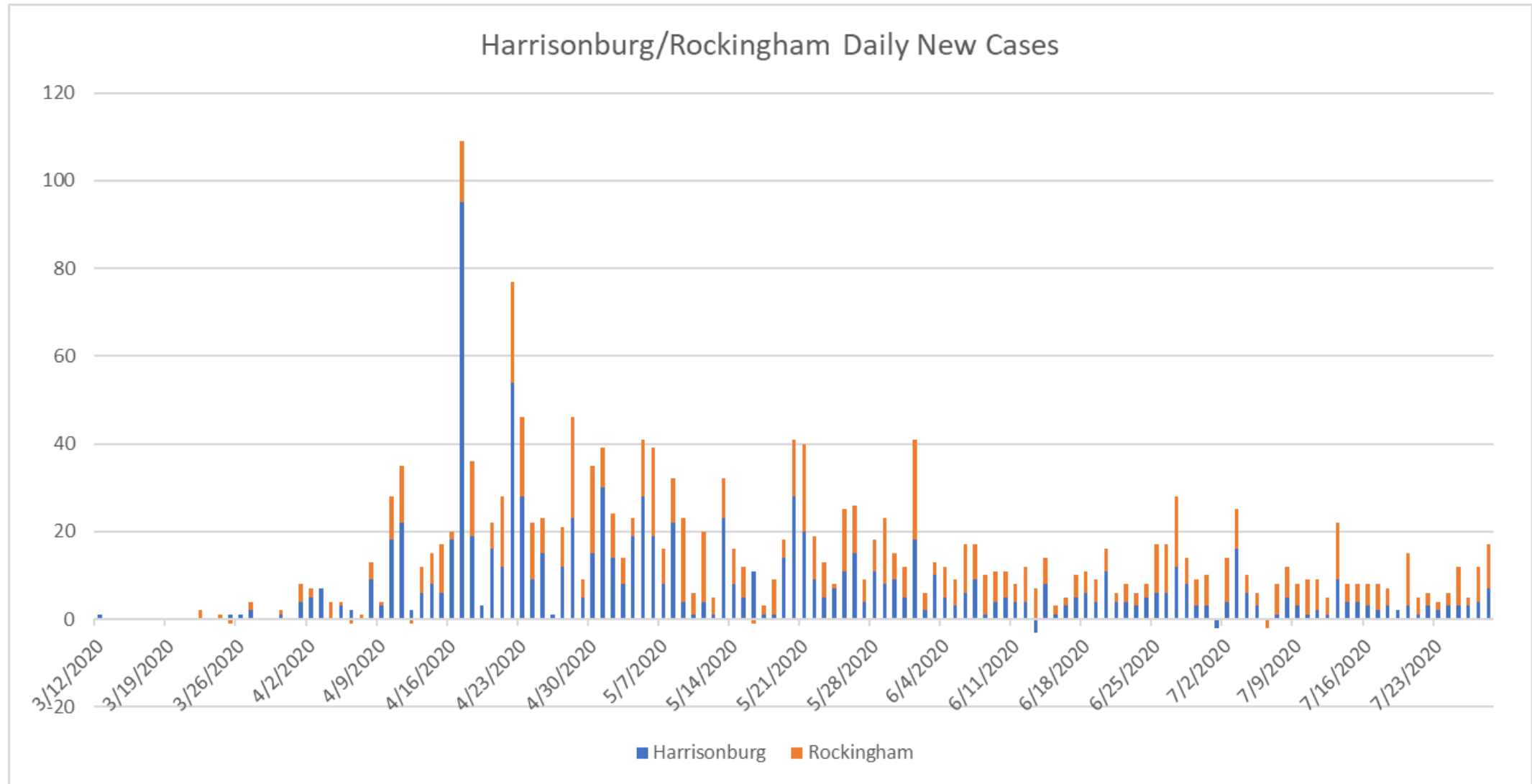
4.3%

Number of Testing Encounters, Number of Positive
Testing Encounters, and Percent Positivity** by Lab
Report Date - Central Shenandoah, PCR Only

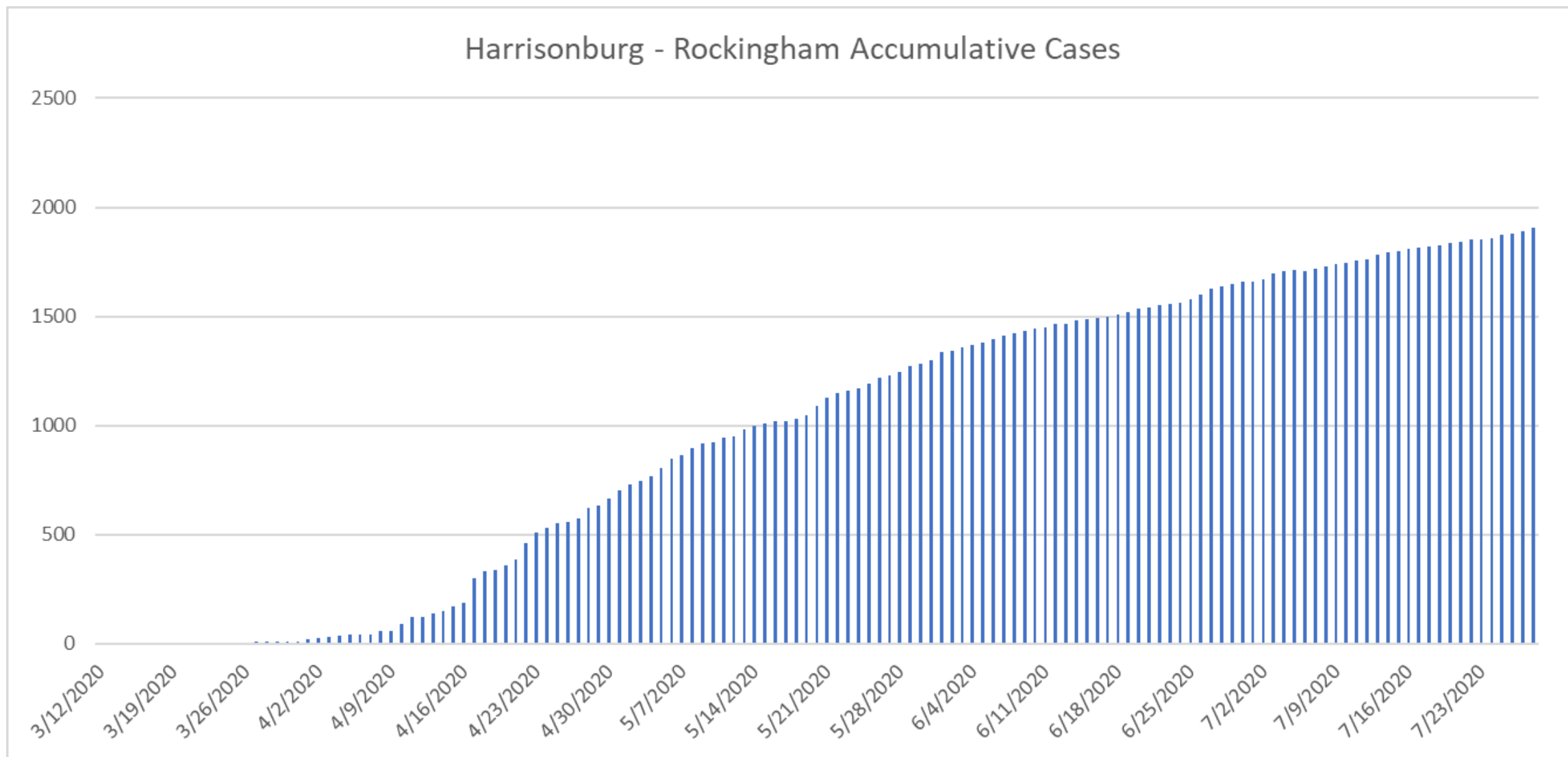
■ Percent Positivity, 7-Day Moving Average
■ Positive Testing Encounters
■ Number of Testing Encounters



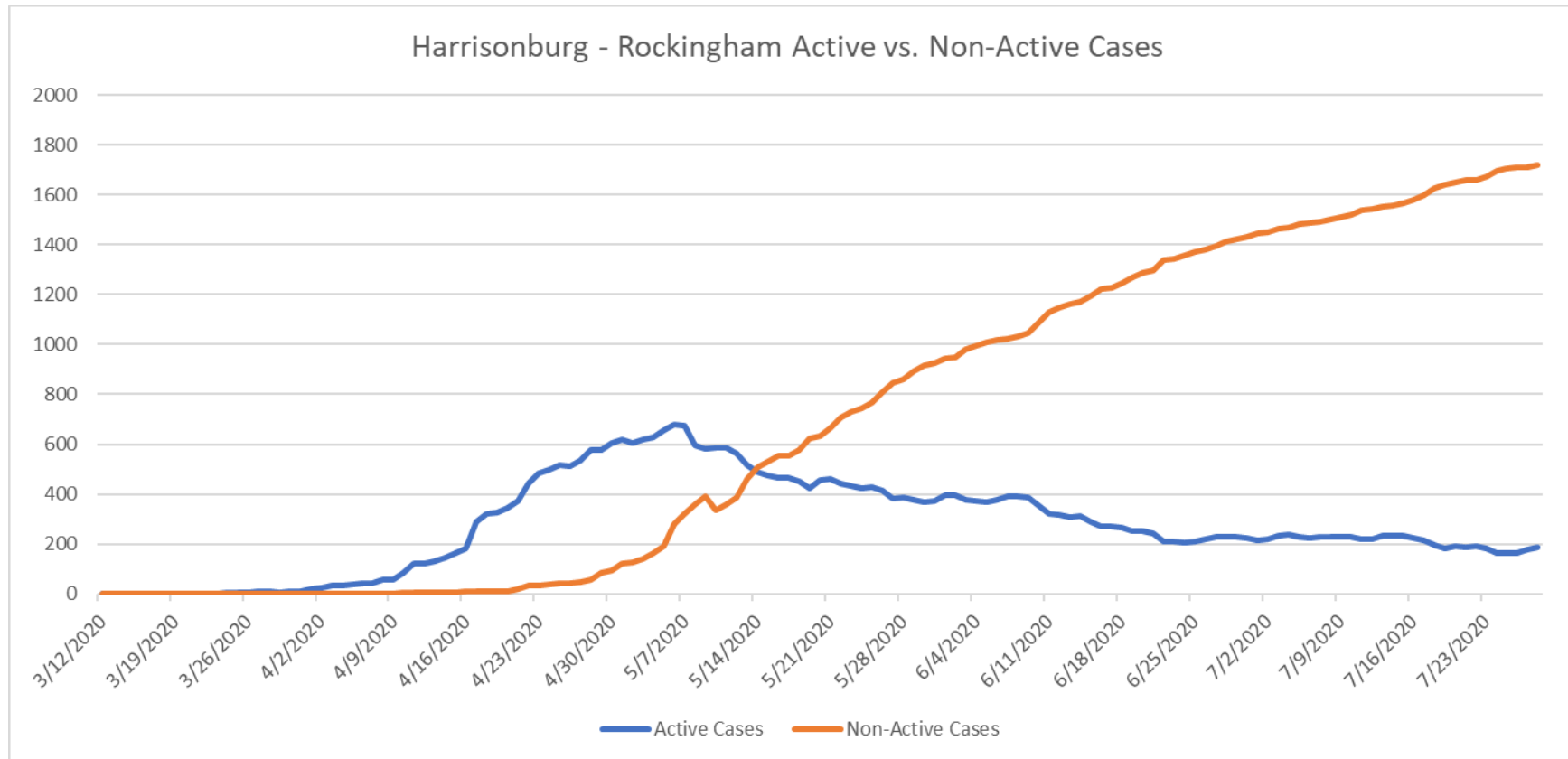
New Daily Cases



Accumulative Cases



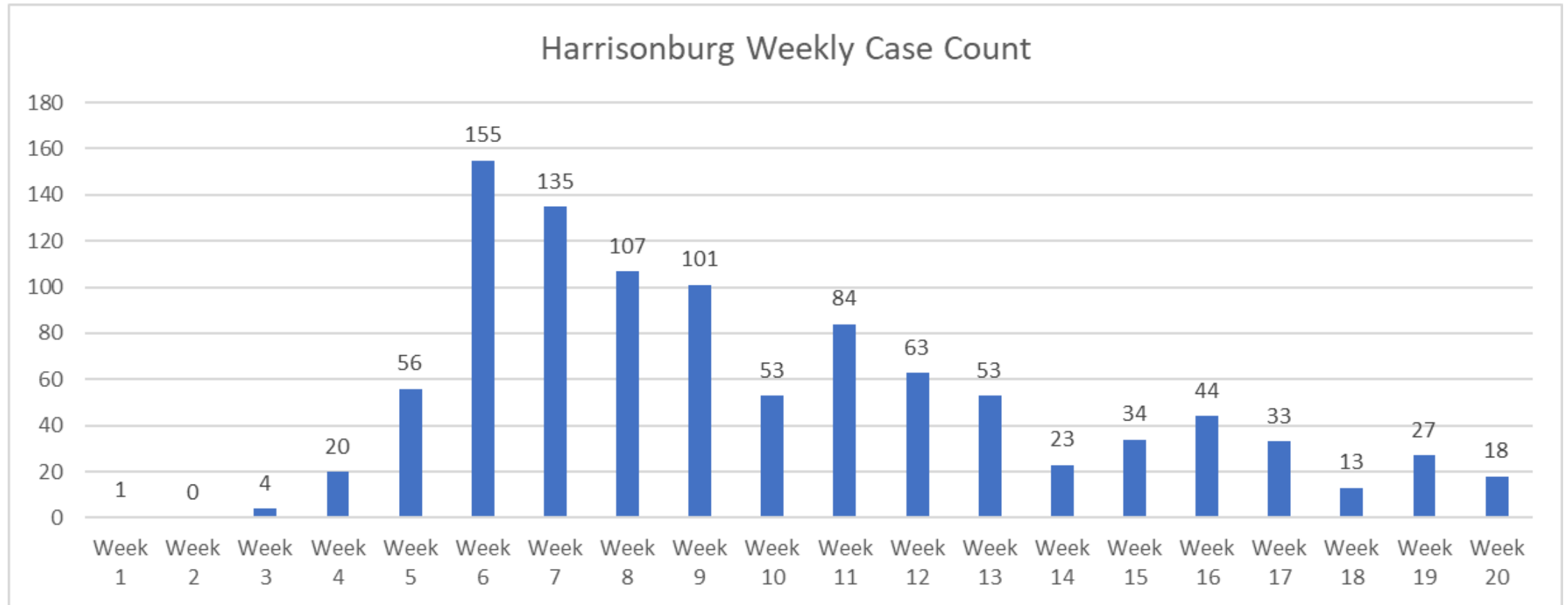
Active vs Non-Active Cases



Active Cases: 188

Harrisonburg Active: 68

Weekly Case Count





Where have we come???

April 24, 2020

New cases, last two weeks

METRO OR MICRO AREA	GROWTH IN CASES	RECENT CASES	PER 1,000
1 Marion, Ohio	FLATTENING	2,121	32.50
2 Pine Bluff, Ark.	STILL GROWING	671	7.50
3 Grand Island, Neb.	STILL GROWING	617	7.25
4 New York City area	FLAT OR DECREASING	141,558	7.09
5 Gallup, N.M.	STILL GROWING	489	6.76
6 Sioux Falls, S.D.	FLATTENING	1,449	5.45
7 Fairfield County, Conn.	FLAT OR DECREASING	5,126	5.43
8 Trenton-Princeton, N.J.	FLAT OR DECREASING	1,830	4.95
9 New Haven, Conn.	FLATTENING	3,881	4.53
10 Goldsboro, N.C.	FLATTENING	552	4.48
11 Boston	STILL GROWING	21,164	4.34
12 Albany, Ga.	FLAT OR DECREASING	661	4.32
13 Reading, Pa.	FLAT OR DECREASING	1,596	3.80
14 Gainesville, Ga.	STILL GROWING	716	3.54
15 Harrisonburg, Va.	STILL GROWING	449	3.32



New deaths, last two weeks

METRO OR MICRO AREA	GROWTH IN DEATHS	RECENT DEATHS	PER 1,000
1 New York City area	FLAT OR DECREASING	11,648	0.58
2 Fairfield County, Conn.	FLATTENING	437	0.46
3 Albany, Ga.	FLAT OR DECREASING	60	0.39
4 Hartford, Conn.	FLATTENING	457	0.38
5 Detroit	FLATTENING	1,580	0.37
6 New Orleans	FLAT OR DECREASING	439	0.35
7 Springfield, Mass.	STILL GROWING	218	0.35
8 Trenton-Princeton, N.J.	STILL GROWING	127	0.34
9 New Haven, Conn.	FLATTENING	294	0.34
10 Opelousas, La.	STILL GROWING	27	0.33
11 Torrington, Conn.	FLATTENING	53	0.29
12 Boston	STILL GROWING	1,408	0.29
13 Flint, Mich.	FLAT OR DECREASING	96	0.24
14 Bartlesville, Okla.	STILL GROWING	11	0.21
15 Lancaster, Pa.	STILL GROWING	114	0.21
78 Harrisonburg, Va.	STILL GROWING	9	0.07

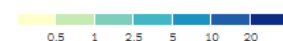


Limited to areas with at least 50,000 people. "Flattening" means that the number of new cases is still increasing, but the rate of growth is slowing.

July 27, 2020

New cases, last two weeks

METRO OR MICRO AREA	GROWTH IN CASES	RECENT CASES	PER 1,000
1 Lake City, Fla.	STILL GROWING	1,647	23.36
2 Victoria, Texas	FLAT OR DECREASING	1,232	12.37
3 Bakersfield, Calif.	STILL GROWING	10,398	11.60
4 Lake Charles, La.	STILL GROWING	2,389	11.37
5 Miami	FLAT OR DECREASING	68,943	11.12
6 Rio Grande City, Texas	FLAT OR DECREASING	684	10.60
7 Eagle Pass, Texas	FLAT OR DECREASING	614	10.50
8 San Angelo, Texas	FLATTENING	1,256	10.49
9 Corpus Christi, Texas	FLAT OR DECREASING	4,670	10.31
10 Panama City, Fla.	STILL GROWING	1,930	9.58
11 Yuma, Ariz.	FLAT OR DECREASING	1,989	9.38
12 Brownsville-Harlingen, Texas	FLAT OR DECREASING	3,973	9.37
13 Opelousas, La.	FLAT OR DECREASING	752	9.09
14 Lafayette, La.	FLAT OR DECREASING	4,417	9.03
15 Hermiston-Pendleton, Ore.	FLAT OR DECREASING	765	8.61
455 Harrisonburg, Va.	FLAT OR DECREASING	115	0.85



New deaths, last two weeks

METRO OR MICRO AREA	GROWTH IN DEATHS	RECENT DEATHS	PER 1,000
1 McAllen, Texas	FLAT OR DECREASING	306	0.35
2 Yuma, Ariz.	FLAT OR DECREASING	73	0.34
3 Gallup, N.M.	FLAT OR DECREASING	24	0.33
4 Orangeburg, S.C.	FLATTENING	27	0.31
5 Show Low, Ariz.	FLAT OR DECREASING	34	0.31
6 Mason City, Iowa	STILL GROWING	15	0.30
7 Rio Grande City, Texas	STILL GROWING	18	0.28
8 Eagle Pass, Texas	FLATTENING	16	0.27
9 El Centro, Calif.	FLAT OR DECREASING	46	0.25
10 Brownsville-Harlingen, Texas	STILL GROWING	98	0.23
11 Laredo, Texas	STILL GROWING	61	0.22
12 LaGrange, Ga.	FLAT OR DECREASING	14	0.20
13 McComb, Miss.	FLAT OR DECREASING	10	0.19
14 Corpus Christi, Texas	FLATTENING	87	0.19
15 Victoria, Texas	STILL GROWING	18	0.18
161 Harrisonburg, Va.	FLAT OR DECREASING	5	0.04



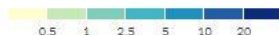


Where have we come???

April 24, 2020

Cumulative confirmed cases

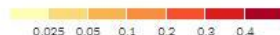
METRO OR MICRO AREA	POPULATION	CASES	PER 1,000
1 Marion, Ohio	65,256	2,161	33.12
2 New York City area	20.0 mil.	341,803	17.11
3 Albany, Ga.	153,009	2,099	13.72
4 New Orleans	1.3 mil.	15,388	12.11
5 Fairfield County, Conn.	943,823	10,008	10.60
6 Edwards, Colo.	54,993	489	8.89
7 Pine Bluff, Ark.	89,515	780	8.71
8 Grand Island, Neb.	85,088	711	8.36
9 Trenton-Princeton, N.J.	369,811	2,991	8.09
10 Gallup, N.M.	72,290	573	7.93
11 Boston	4.9 mil.	35,426	7.27
12 New Haven, Conn.	857,620	6,064	7.07
13 Sioux Falls, S.D.	265,653	1,763	6.64
14 Detroit	4.3 mil.	27,245	6.30
15 East Stroudsburg, Pa.	169,507	1,024	6.04
37 Harrisonburg, Va.	135,277	509	3.76



Limited to areas with at least 50,000 people.

Cumulative confirmed deaths

METRO OR MICRO AREA	POPULATION	DEATHS	PER 1,000
1 Albany, Ga.	153,009	157	1.03
2 New York City area	20.0 mil.	20,159	1.01
3 New Orleans	1.3 mil.	922	0.73
4 Fairfield County, Conn.	943,823	615	0.65
5 Detroit	4.3 mil.	2,506	0.58
6 Springfield, Mass.	631,761	302	0.48
7 Hartford, Conn.	1.2 mil.	559	0.46
8 Trenton-Princeton, N.J.	369,811	163	0.44
9 New Haven, Conn.	857,620	372	0.43
10 Greenfield Town, Mass.	70,963	30	0.42
11 Opelousas, La.	82,764	31	0.37
12 Torrington, Conn.	181,111	66	0.36
13 Flint, Mich.	406,892	144	0.35
14 Boston	4.9 mil.	1,710	0.35
15 Houma, La.	209,136	57	0.27
123 Harrisonburg, Va.	135,277	9	0.07



July 27, 2020

Cumulative confirmed cases

METRO OR MICRO AREA	POPULATION	CASES	PER 1,000
1 Gallup, N.M.	72,290	3,909	54.07
2 El Centro, Calif.	181,827	9,067	49.87
3 Yuma, Ariz.	212,128	10,299	48.55
4 Show Low, Ariz.	110,445	5,078	45.98
5 Marion, Ohio	65,256	2,821	43.23
6 Yakima, Wash.	251,446	9,958	39.60
7 Palestine, Texas	58,057	2,140	36.86
8 Sioux City, Iowa	169,045	6,083	35.98
9 Huntsville, Texas	87,220	2,831	32.46
10 Lake City, Fla.	70,503	2,122	30.10
11 LaGrange, Ga.	70,034	2,085	29.77
12 Miami	6.2 mil.	184,427	29.75
13 Victoria, Texas	99,619	2,938	29.49
14 Albertville, Ala.	96,109	2,707	28.17
15 Lake Charles, La.	210,080	5,616	26.73
145 Harrisonburg, Va.	135,277	1,876	13.87



Limited to areas with at least 50,000 people.

Cumulative confirmed deaths

METRO OR MICRO AREA	POPULATION	DEATHS	PER 1,000
1 Gallup, N.M.	72,290	214	2.96
2 New York City area	20.0 mil.	43,603	2.18
3 Trenton-Princeton, N.J.	369,811	612	1.65
4 Show Low, Ariz.	110,445	177	1.60
5 Albany, Ga.	153,009	239	1.56
6 Fairfield County, Conn.	943,823	1,402	1.49
7 Farmington, N.M.	125,043	178	1.42
8 Hartford, Conn.	1.2 mil.	1,661	1.38
9 Milledgeville, Ga.	53,171	71	1.34
10 Springfield, Mass.	631,761	813	1.29
11 New Haven, Conn.	857,620	1,095	1.28
12 Meridian, Miss.	100,948	124	1.23
13 Boston	4.9 mil.	5,960	1.22
14 New Orleans	1.3 mil.	1,465	1.15
15 Detroit	4.3 mil.	4,973	1.15
143 Harrisonburg, Va.	135,277	45	0.33





Where have we come???

April 24, 2020

Highest avg. daily growth rate of cases

METRO OR MICRO AREA	RECENT CASES	DAILY GROWTH RATE	CASES DOUBLE EVERY...
1 Sioux City, Iowa	287	101%	1.0 days
2 Marion, Ohio	2,121	98%	1.0 days
3 Goldsboro, N.C.	552	68%	1.3 days
4 Pine Bluff, Ark.	671	48%	1.8 days
5 Waterloo-Ced. Falls, Iowa	436	40%	2.0 days
6 Green Bay, Wis.	416	31%	2.6 days
7 Harrisonburg, Va.	449	24%	3.2 days
8 Albertville, Ala.	194	17%	4.4 days
9 Rockford, Ill.	233	17%	4.4 days
10 Bowling Green, Ky.	243	17%	4.4 days
11 Gallup, N.M.	489	17%	4.5 days
12 Columbus, Ohio	2,661	16%	4.7 days
13 Amarillo, Texas	250	15%	4.9 days
14 Grand Rapids, Mich.	714	15%	5.1 days
15 Salisbury, Md.	1,296	14%	5.2 days



Highest avg. daily growth rate of deaths

METRO OR MICRO AREA	RECENT DEATHS	DAILY GROWTH RATE	DEATHS DOUBLE EVERY...
1 Durham-Chapel Hill, N.C.	19	61%	1.5 days
2 Reading, Pa.	78	25%	3.1 days
3 Virginia Beach	36	19%	3.9 days
4 Atlantic City, N.J.	26	19%	4.0 days
5 Raleigh, N.C.	28	18%	4.2 days
6 Washington, D.C.	391	18%	4.3 days
7 Minneapolis-St. Paul	119	17%	4.4 days
8 Toledo, Ohio	52	16%	4.7 days
9 Salisbury, Md.	32	16%	4.7 days
10 Richmond, Va.	85	16%	4.7 days
11 Scranton Wilkes-Barre, Pa.	89	15%	4.9 days
12 Harrisburg-Carlisle, Pa.	19	14%	5.2 days
13 Boston	1,408	14%	5.2 days
14 Syracuse, N.Y.	20	13%	5.5 days
15 Sarasota, Fla.	50	13%	5.6 days
Harrisonburg, Va.	9	0%	—



Growth rates are averaged over the previous week. Limited to areas with more than 250 cases and 50,000 people. The table showing the average daily growth of the death rate is limited to areas with more than 20 deaths.

June 15, 2020

Highest avg. daily growth rate of cases

METRO OR MICRO AREA	RECENT CASES	DAILY GROWTH RATE	CASES DOUBLE EVERY...
1 LaGrange, Ga.	446	10%	7.2 days
2 Beaumont-Port Arthur, Texas	708	10%	7.3 days
3 Myrtle Beach, S.C.	829	8%	8.7 days
4 Fayetteville-Springdale, Ark.	2,261	8%	9.0 days
5 Greenwood, S.C.	187	8%	9.5 days
6 Burlington, N.C.	393	7%	9.8 days
7 Yuma, Ariz.	2,174	7%	10.4 days
8 Decatur, Ala.	341	6%	11.2 days
9 Gainesville, Fla.	175	6%	11.6 days
10 El Centro, Calif.	2,066	6%	12.2 days
11 Huntsville, Ala.	325	6%	12.4 days
12 Valdosta, Ga.	470	6%	12.6 days
13 McAllen, Texas	475	5%	13.1 days
14 Greenville, S.C.	1,614	5%	13.6 days
15 Lufkin, Texas	104	5%	13.7 days
280 Harrisonburg, Va.	185	1%	104.3 days



Highest avg. daily growth rate of deaths

METRO OR MICRO AREA	RECENT DEATHS	DAILY GROWTH RATE	DEATHS DOUBLE EVERY...
1 LaGrange, Ga.	12	17%	4.5 days
2 Yuma, Ariz.	34	13%	5.7 days
3 Burlington, N.C.	12	8%	9.5 days
4 Wheeling, W.Va.	8	5%	13.2 days
5 Hagerstown, Md.-W.Va.	11	5%	14.1 days
6 Winston-Salem, N.C.	16	5%	14.7 days
7 Sandusky, Ohio	6	5%	15.7 days
8 Peoria, Ill.	12	4%	16.6 days
9 Omaha	27	4%	18.1 days
10 Nacogdoches, Texas	4	4%	18.6 days
11 Pueblo, Colo.	5	4%	18.6 days
12 Spartanburg, S.C.	17	4%	18.8 days
13 Port St. Lucie, Fla.	15	4%	19.8 days
14 Show Low, Ariz.	26	3%	20.6 days
15 Chattanooga, Tenn.	8	3%	22.1 days
141 Harrisonburg, Va.	1	1%	95.4 days





Where have we come???

Summary

	April 24	July 27
Cumulative Confirmed Cases	37th	145th
Highest Average Daily Growth*	7th	280th
New cases, 2 weeks	15th	455th

Our Response

- Community Testing Sites
- Mask/Care Kit Distribution
- Fit Testing for Nursing Homes
- Assisted Nursing Home during an outbreak
- Messaging to the Community



Messaging



Harrisonburg, VA - Government

20h · 🌐

Take action to slow the spread of COVID-19 by wearing a cloth face covering in public spaces, keeping at least 6 feet of physical distance, & frequently washing your hands.

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

STOP THE SPREAD

Wear A Mask When Out In Public

Keep Six Feet Of Distance Between Yourself And Others

DETENGA LA PROPAGACIÓN

Use un cubrebocas siempre que se encuentre en un espacio público

Mantenga seis pies de distancia entre usted y otras personas

COVID-19 TESTING
THURSDAY, JUNE 11, 2-6 P.M.
AT THE CORNER OF DUKE DRIVE AND PAUL STREET

YOU WILL NOT HAVE TO LEAVE YOUR CAR. THERE IS NO COST TO BE TESTED. YOU SHOULD LEARN THE TEST RESULTS WITHIN A WEEK.



PRUEBAS DE DIAGNÓSTICO DE COVID-19

JUEVES 11 DE JUNIO DE 2 A 6 DE LA TARDE.

EN LA ESQUINA DE DUKE DRIVE Y PAUL STREET.

LE HARÁN LA PRUEBA POR LA VENTANILLA DE SU VEHÍCULO; USTED PERMANECERÁ SENTADO EN SU VEHÍCULO.

HABRÁ INTÉRPRETES PARA ESPAÑOL, ÁRABE, KURDO Y SWAHILI.

ES GRATIS.

LOS RESULTADOS LE LLEGARÁN EN EL TRANSURSO DE UNA SEMANA

اختبار لفايروس كورونا

الخميس 11 حزيران ، من الساعة 2 ولغاية الساعة 6 مساءً

عند زاوية دوق درايف وشارع بول

لن تحتاج إلى مغادرة سيارتك . وسيتم اختبارك من خلال نافذة السيارة

وسيتوفر مترجمون إسبان ، وعرب ، واكراد وسواحليون.

الاختبار مجاني

سيكون بإمكانك معرفة نتائج الاختبار في غضون أسبوع

COVID-19 Тестирование

Четверг, 11 июня, 2-6 вечера

На углу Duke Drive и Paul Street

Вам не придется покидать свою машину. Вы подъедете и будете проверены через ваше окно

Будут доступны переводчики Испанского, Арабского, Курдского и Суахили языков

Тестирование бесплатно

Вы узнаете результаты теста в течение недели

COVID-19 پشکینی

پۆژی پینچ شهممه کاترمێ ٢-٦ی ئیولیه له سوچی شهقامی Duke Drive و Paul Street تۆ سهیله کهت جی ناهێلێت و بێیته درمهوه. به سهیله ل دهخوهریت پۆ شوێنی مه بهست و کهسی دیلێ کرۆ دێت و پشکینیت پۆ دهکات.

ووگێزانی زمانی ئیسپانی و عهرهبی و کوردی و سواحیلی بهره دهستن پشکین به خۆراییه. نهنجای پشکینه کهت دفرانیت له ماوهی پهک ههفته دا.

UPIMAJI WA COVID-19

ALHAMISI, JUNI 11, 2-6 P.M.

KWENYE KONA YA DUKE DRIVE NA PAUL STREET

HAUTALAZIMIKA KUTOKA KWENYE GARI YAKO. UTAENDESHA NA KUPIMWA KUPITIA DIRISHA LAKO.

WAKALIMANI WA KIHISPANIA, KIARABU, KIKURDI NA KISWAHILI WATAPATIKANA.

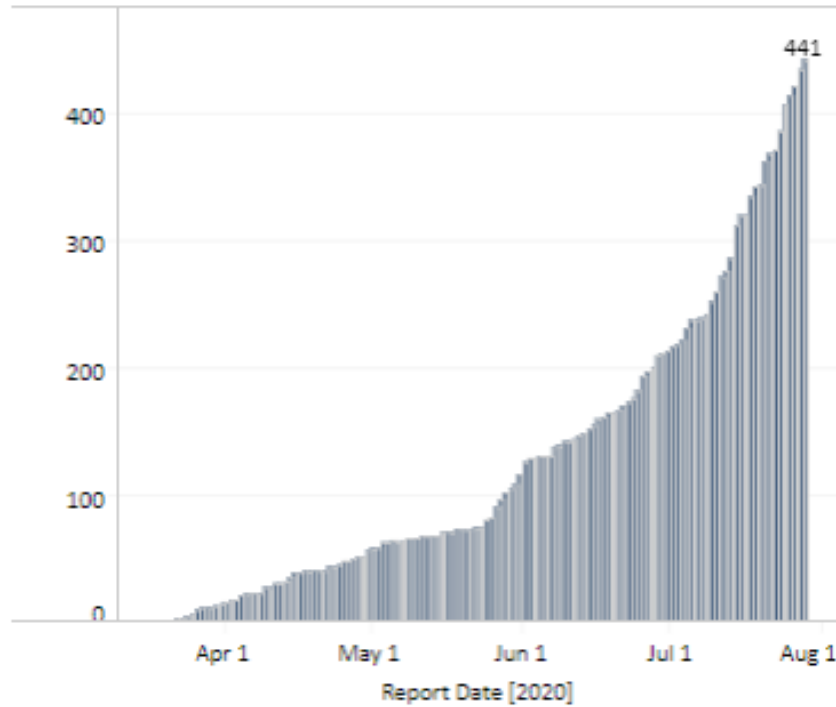
HAKUNA GHARAMA YA KUPIMWA

MATOKEO YAKO YATAJULISHWA KWAKO KWA MDA WA WIKI MOJA.

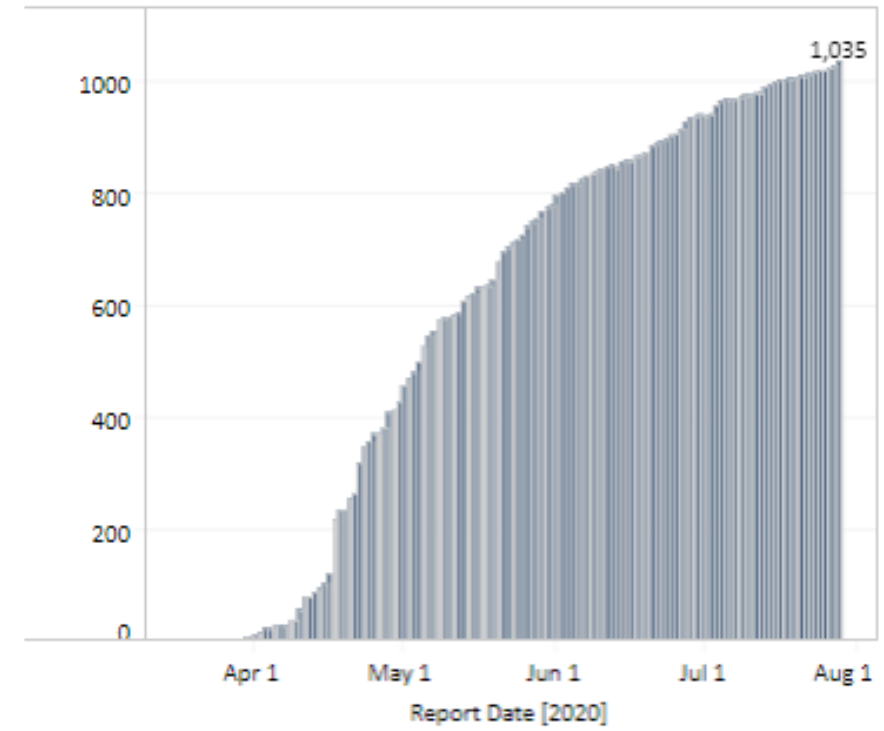


What we want to
avoid

Report Date Cumulative

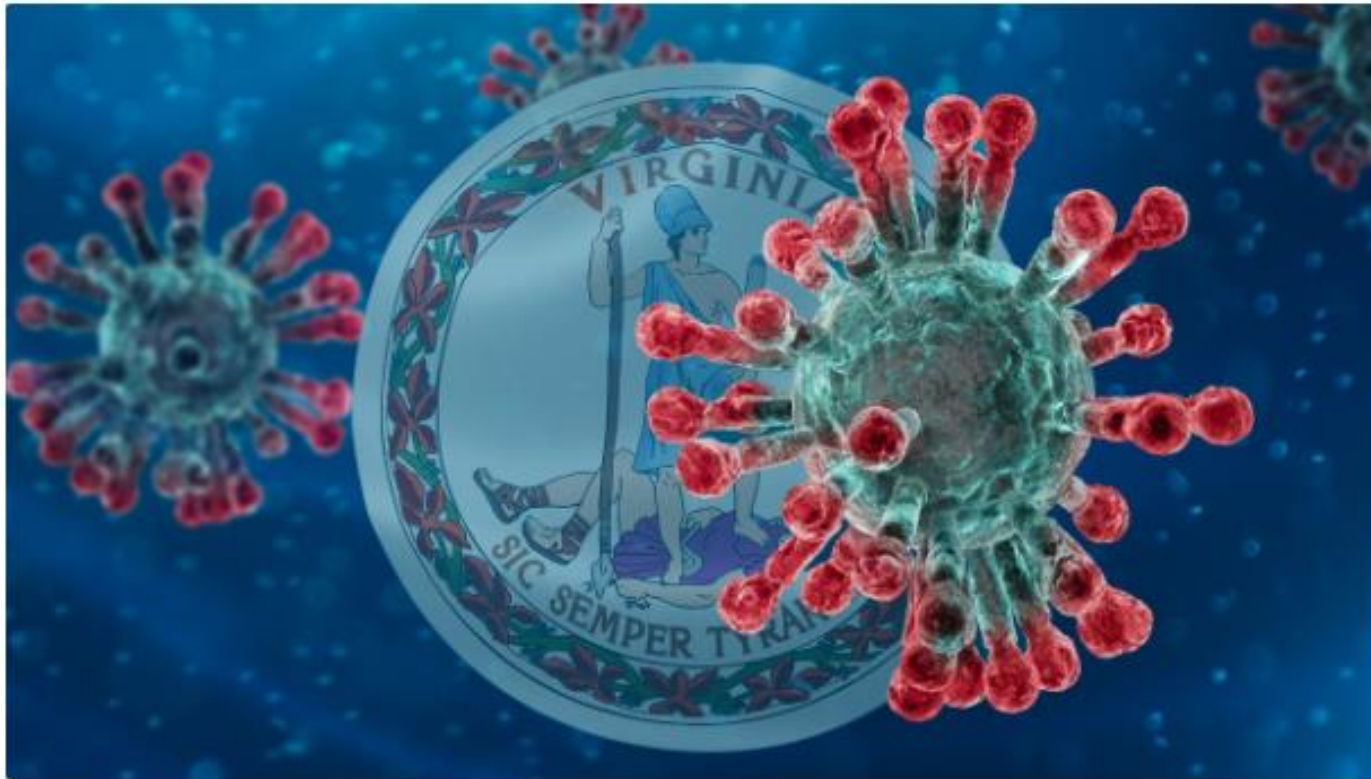


Report Date Cumulative - Harrisonburg



Flattening the Curve...what it looks like

Virginia Beach reports 329 new coronavirus cases in 24 hours; state total passes 83K



The Rebound

RELIEVE. RESPOND. REVIVE.

GETTING BACK TO WORK



**Resources for getting
back to work**

Daily News-Record

Northam Warns Restrictions May Return If Numbers Don't Improve

By **MAX THORNBERRY**

For the Daily News-Record

Gov. Ralph Northam took to Facebook over the weekend to warn Virginians if behaviors don't change and numbers don't look better he is prepared to put restrictions back in place.

Northam posted a status update on the social media site Saturday afternoon urging Virginians to wear masks and saying he would be watching trends over

the weekend. The state has seen a growing resurgence of cases in the Eastern region of the state and on Friday the Virginia Department of Health announced surging cases were creeping into Northern and Northwest Virginia as well.

"We will be watching the public health

See **NORTHAM**, Page **A7**



Ralph Northam ✓ @GovernorVA · Jul 25

We will be watching the public health data closely over the weekend—if the numbers don't come down, we may have to take additional steps to blunt the spread of this virus.

Wear a mask and practice physical distancing so we don't have to move back.

Be smart and stay safe.

Students bring COVID-19 back from Myrtle Beach trips

BY CAITLIN O'KANE

JUNE 23, 2020 / 1:30 PM / CBS NEWS



They Went To Myrtle Beach — And Brought Back COVID To Roanoke

Written By
Arianna Coghill

Originally
Published
June 24, 2020
2:55 pm EDT

SHARE

TWEET

LINK



Visitors sit on the sand on Myrtle Beach, S.C., on Saturday, May 2, 2020. Myrtle Beach is one of a handful of the state's beaches that have begun to open up public access points amid the continuing coronavirus outbreak, while others have opted to keep public access shut off due to health concerns. (AP Photo/Meg Kinnard)



Over 30 coronavirus cases in Preston County related to outbreak from recent Myrtle Beach trips

19 hrs ago

PRESTON COUNTY, [W.Va](#) (WDTV) - Preston County health officials said over 30 cases of COVID-19 in the county are related to the outbreak from recent travel to Myrtle Beach.

Virginia joins growing list of areas with COVID-19 cases after Myrtle Beach trips

BY ALEX LANG

JUNE 23, 2020 06:22 PM , UPDATED JUNE 24, 2020 02:54 PM



LOCAL

COVID-19 clusters in Kentucky linked to Myrtle Beach trips, Gov. Andy Beshear warns

Deborah Yetter Louisville Courier Journal

Published 5:42 p.m. ET Jun. 24, 2020





What to expect?

What can
increase the
numbers???

Apathy

Influx of population

The Different Phases

Facility Outbreaks

Where do we go from here???



Education



Evaluate



Monitoring



Refine/Modify

Harrisonburg

Accordius Health at Harrisonburg

Nursing Home

Outbreak Pending Cl..

4/8/2020

112

23

Harrisonburg Health and Rehabilitation Cen..

Nursing Home

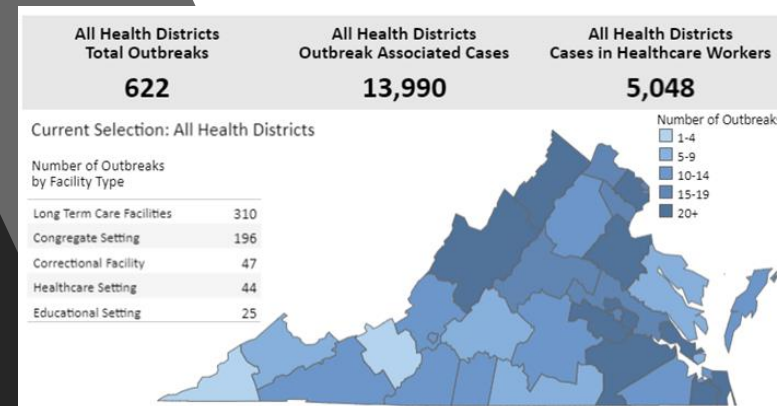
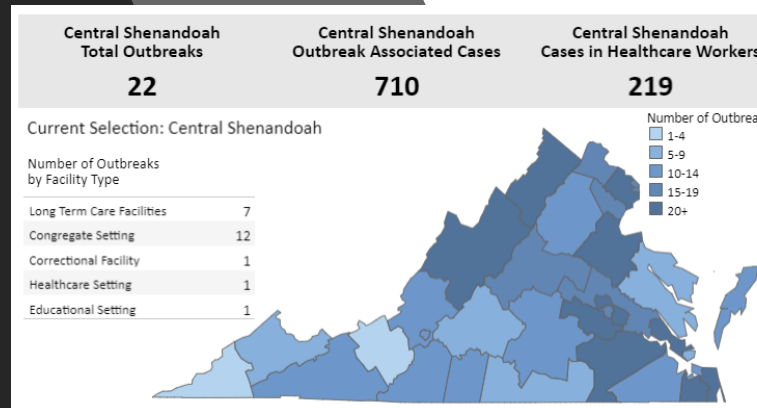
Outbreak Pending Cl..

5/27/2020

88

5

Facility Outbreaks



Cases and Deaths by Outbreak Facility Type - State Totals

Long Term Care Facilities	Cases	7,896
	Deaths	1,205
Congregate Setting	Cases	2,876
	Deaths	38
Correctional Facility	Cases	2,728
	Deaths	13
Healthcare Setting	Cases	374
	Deaths	12
Educational Setting	Cases	116
	Deaths	0

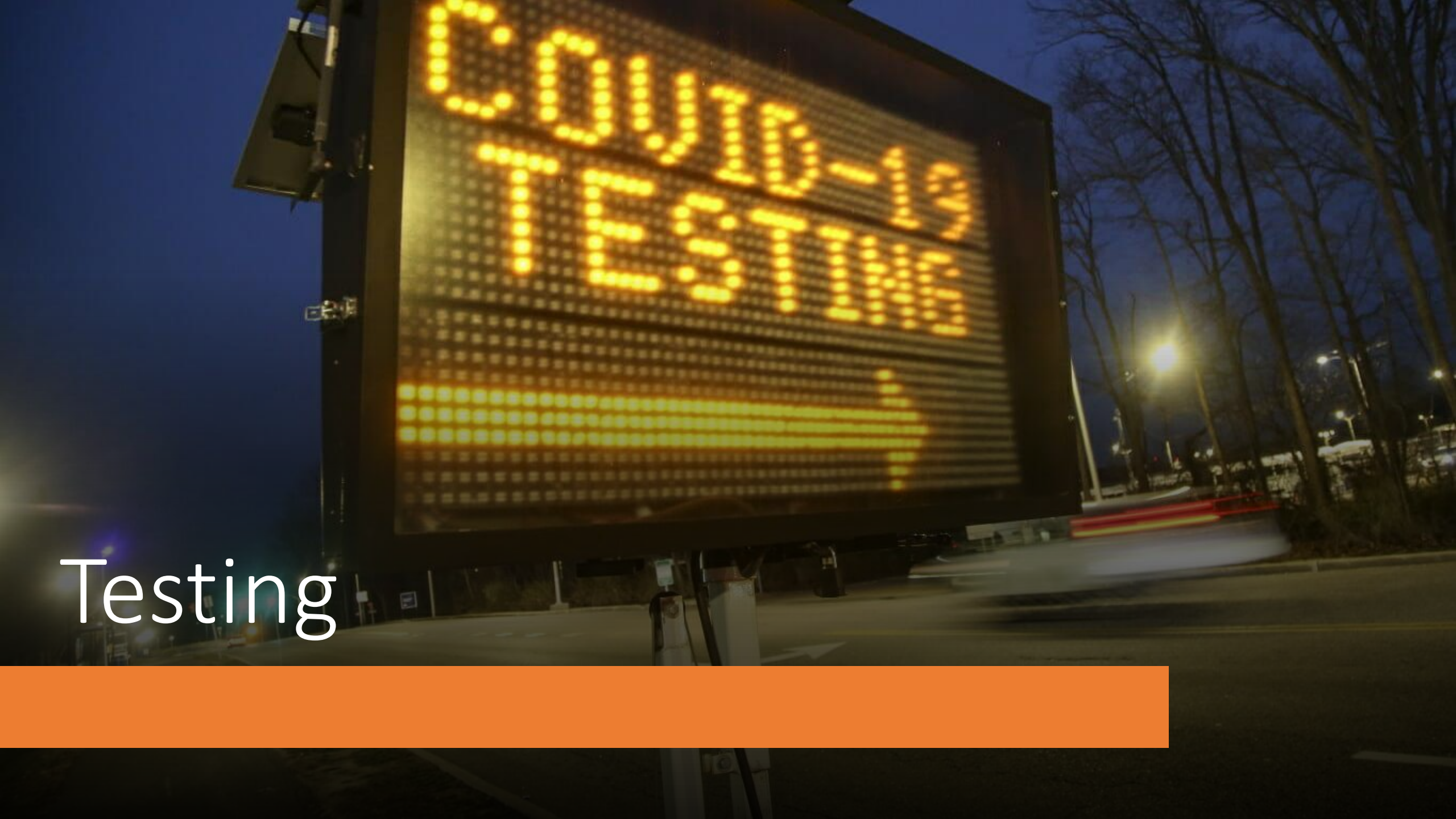
Colleges

JMU

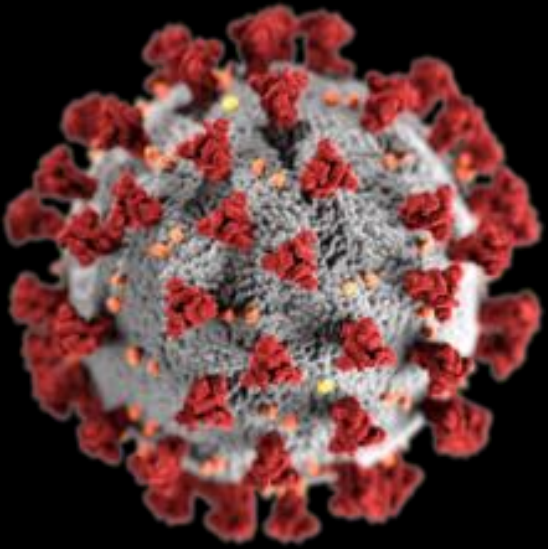
- Students moving in August 21-25

EMU

- Students moving in August 20



Testing



Harrisonburg and COVID-19

Where are we now???



Coronavirus Disease 2019 (COVID-19) and SARS-CoV-2 Virus : Update for Harrisonburg

Laura Kornegay, MD, MPH
Health Director, Central Shenandoah Health District
Virginia Department of Health

July 28, 2020

How Contagious Is COVID-19?

What's the R naught (R_0)?

Disease	R_0
Seasonal influenza	1-2
COVID-19	2-2.5 (estimate before use of distancing and other public health restrictions)
SARS-1 (2002-04)	3
Measles	12-18

Source: www.who.int/emergencies/diseases/novel-coronavirus-2019
https://wwwnc.cdc.gov/eid/article/26/7/20-0282_article

SARS-CoV-2 Transmission

- Respiratory droplets
 - Thought to be the main method of transmission via close person-to-person contact
 - SARS-CoV-2 can be spread by people who are not showing symptoms (asymptomatic)
- Aerosols (smaller-sized particles that stay in the air longer than droplets)
- Contaminated surfaces and other objects
- Zoonotic transmission
 - Involved in initial spread from animals to people, but is not a major route now

SARS-CoV-2: Environmental Stability

- Can survive for up to 72 hours on plastic & stainless steel, up to 4 hours on copper and <24 hours on cardboard
- Surfaces can easily be decontaminated with common household disinfectants
- As always, wash your hands with soap and water or clean them with a hand sanitizer or an alcohol-based hand rub
- Avoid touching your eyes, mouth, or nose

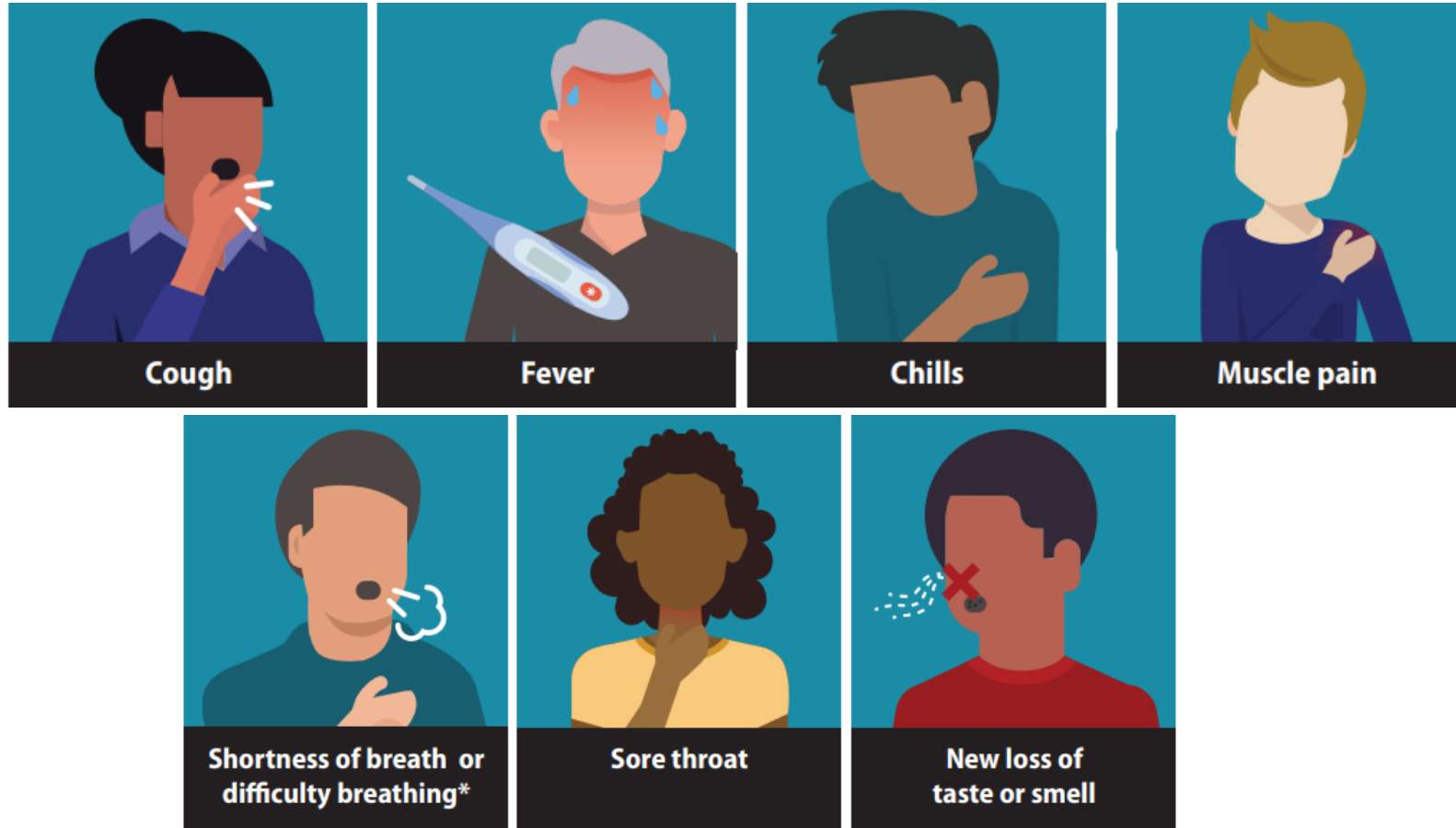
COVID-19 Incubation Period

- Disease incubation period is the amount of time between when an infection occurs and when symptoms of disease begin
- For COVID-19, mean incubation period is ~4-5 days and range is 2-14 days
- 97% of infected people have incubation period of <12 days

Pre-symptomatic and Asymptomatic COVID-19 Infection

- Some infected people can spread virus to others (be contagious) up to 2 days before developing symptoms
- Some of these people eventually become ill so they were initially capable of PRE-SYMPTOMATIC spread
- Others never develop symptoms and remain ASYMPTOMATIC throughout their entire illness
- Extent of pre-symptomatic/asymptomatic spread is not known

Symptoms of COVID-19 can range from none (asymptomatic) to mild to severe



Risk Factors for Severe COVID-19 Illness

- Older adults
- People of all ages with underlying conditions, including:
 - Chronic kidney disease
 - COPD (Chronic Obstructive Pulmonary Disease)
 - Obesity (BMI ≥ 30)
 - Weakened immunity, e.g., organ transplant, cancer treatment
 - Heart conditions, e.g., coronary artery disease, cardiomyopathy
 - Sickle cell disease
 - Tobacco smoking
 - Type 2 diabetes
- Other conditions that might increase severity risk include asthma, high blood pressure, neurologic conditions such as dementia, stroke and other cerebrovascular disease, and pregnancy

What are High-Risk Exposures to COVID-19?

- **Prolonged, close contact with person with known COVID-19**
 - Prolonged: >15 minutes in community setting
 - Close contact: <6 feet
 - Location: Exposure risk is greater indoors than outdoors
- Household members of COVID-19 patient
- Healthcare workers not using proper PPE

Note: There is now growing evidence of transmission risk from SARS-CoV-2-infected people who are *pre-symptomatic*, i.e., before their symptoms begin or from those who are *asymptomatic*, i.e., those who are infected but will NEVER develop symptoms

Isolation and Quarantine: Restrictions on Movement and Public Health Monitoring

ISOLATION is the separation of people with known or suspected COVID-19 from others who are susceptible. People in *isolation* need to stay home and separate themselves from others in the home as much as possible. (10 days plus 1)

.

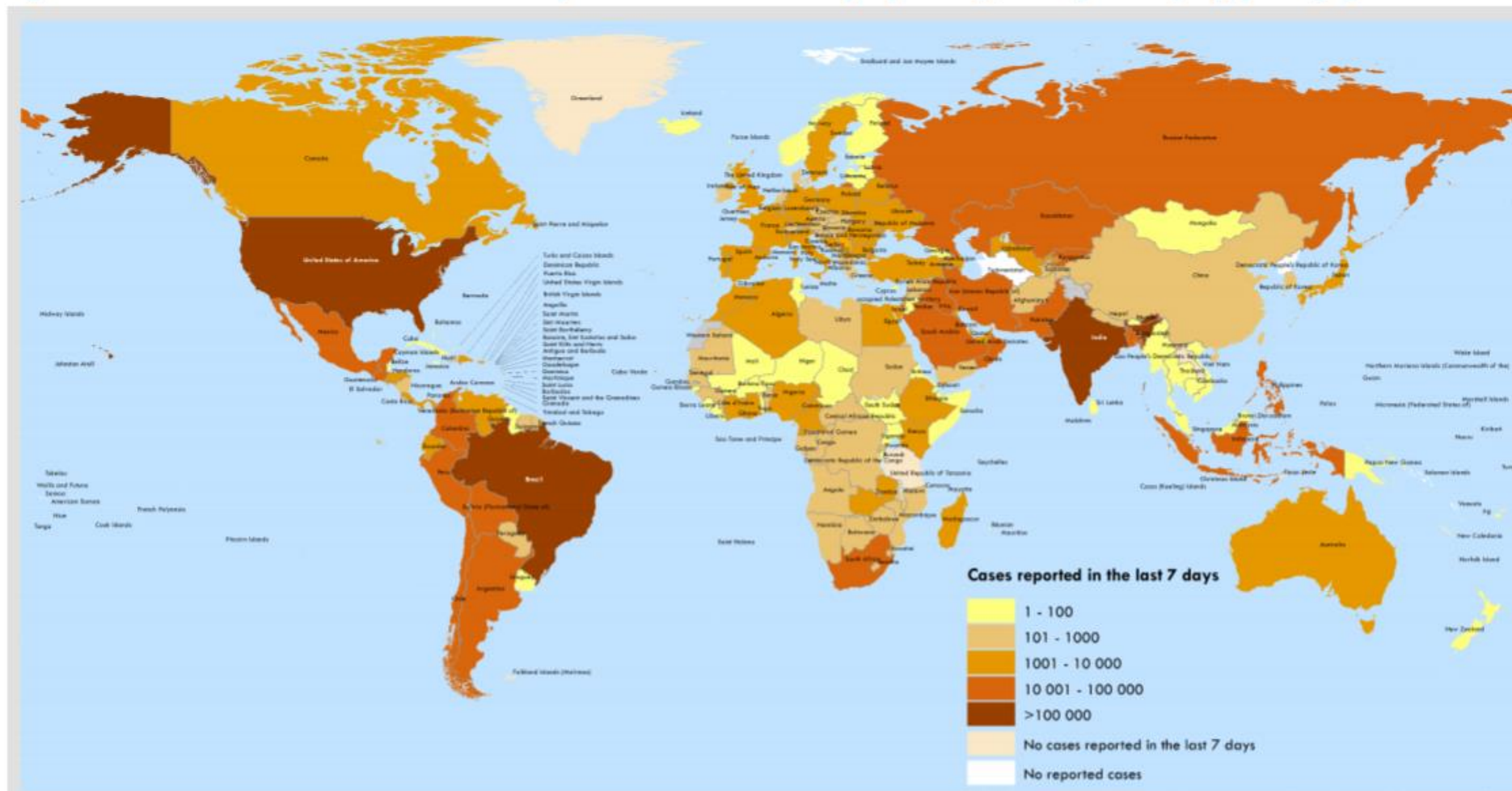
QUARANTINE is the separation of people who were in close contact with a person with COVID-19 from other people. People in *quarantine* should stay home as much as possible, limit their contact with other people, and monitor their own health closely in case they become ill. (14 days)



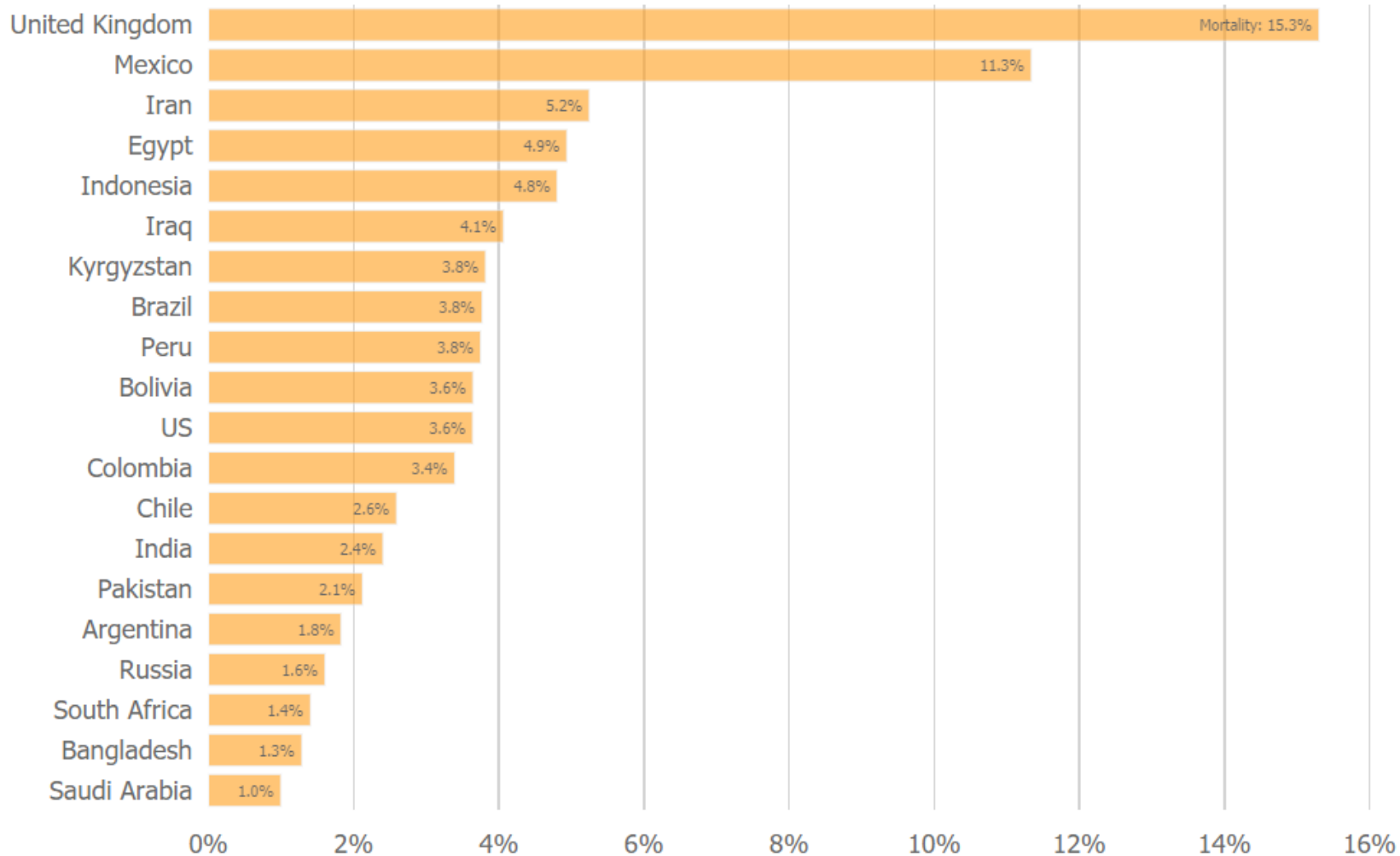
GLOBAL INFORMATION ON COVID-19

Recent COVID-19 Cases by Country, July 16-22

Figure 1. Number of confirmed* COVID-19 cases reported in the last seven days by country, territory or area, 16 July to 22 July **



COVID-19 Case Fatality Rates of 20 Heavily-impacted Countries



Global & U.S Confirmed COVID-19 Cases and Deaths as of July 21, 2020

Numbers rounded to nearest thousand		
<u>Location</u>	<u>Cases</u>	<u>Deaths</u>
Global (from W.H.O.)	14,563,000	608,000
United States (from CDC)	3,819,000	141,000

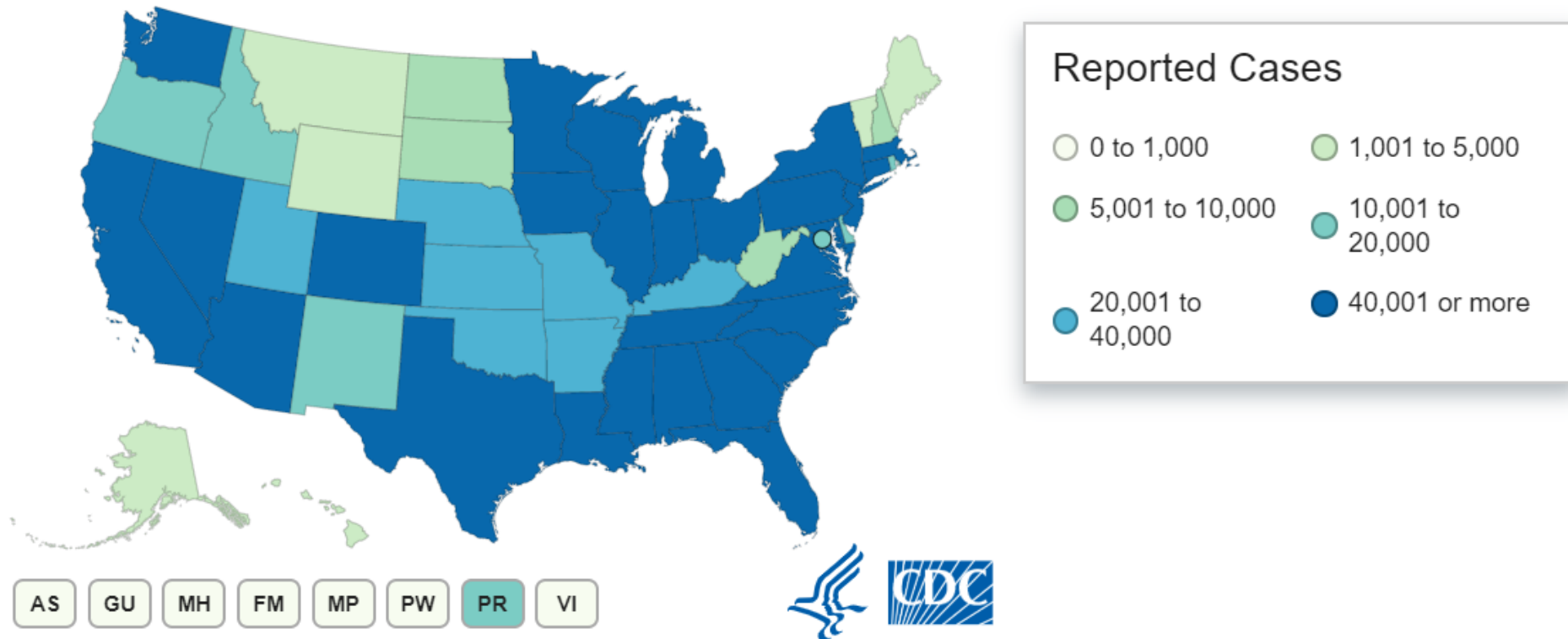
“The United States has 4% of the world’s population but, as of July 16 [2020] approximately 26% of its COVID-19 cases and 24% of its COVID-19 deaths.”

-- Blumenthal et al, New England Journal of Medicine, July 22, 2020

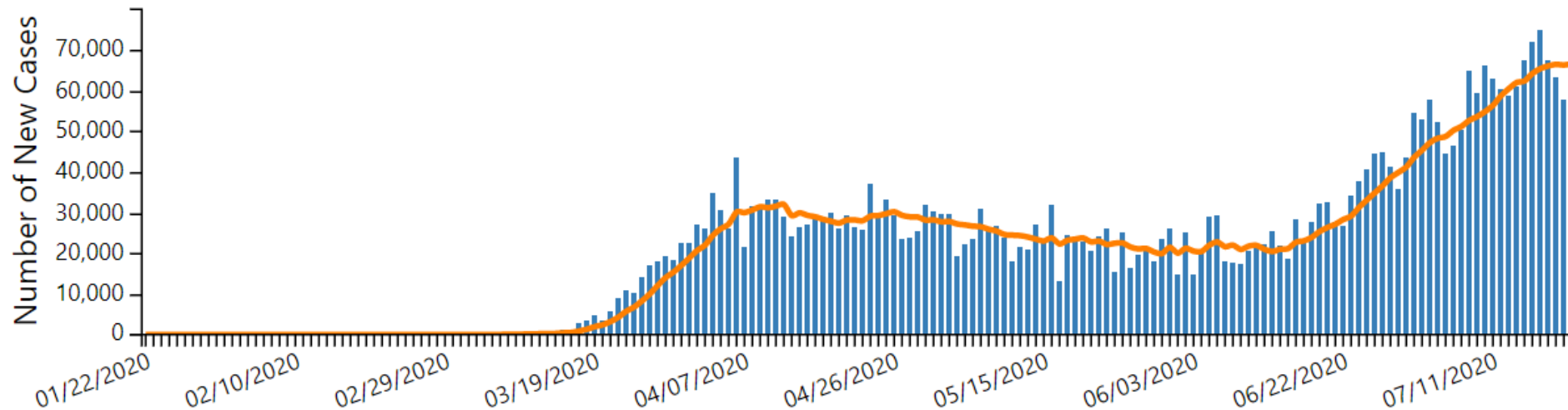


COVID-19 IN THE UNITED STATES

U.S. COVID-19 Case Counts by State or Territory

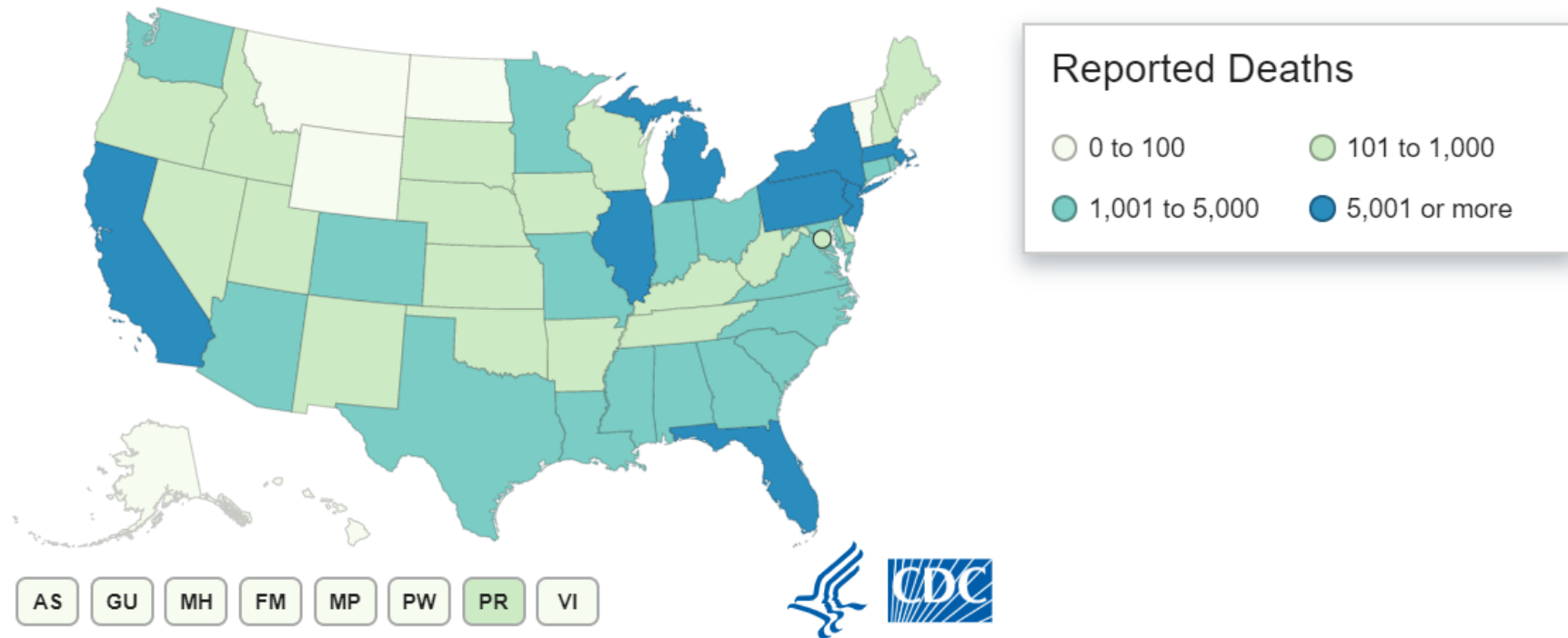


New U.S. COVID-19 Cases by Date of Onset, Jan. 22-July 21



Solid line represents 7 day moving average

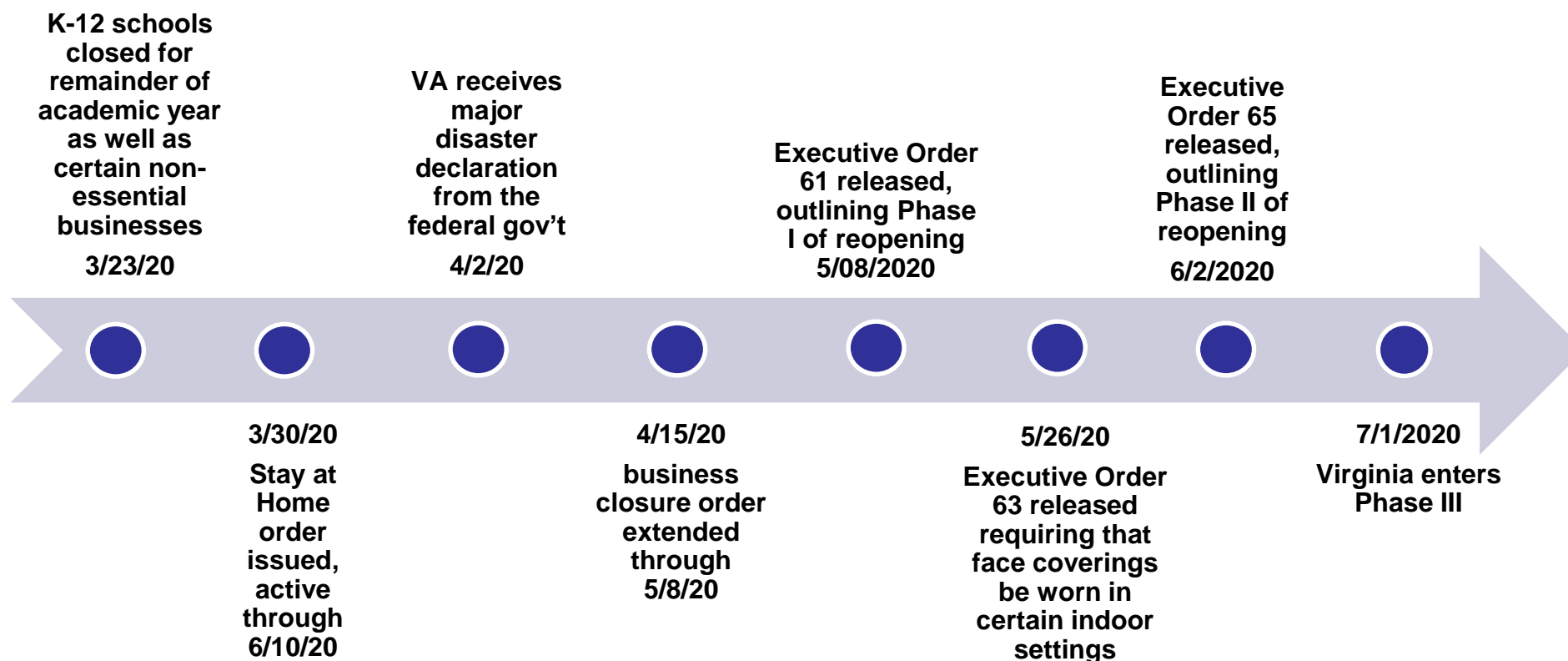
U.S. COVID-19 Deaths by State or Territory





VIRGINIA INFORMATION

Recent Key COVID-19 Events in Virginia





COVID-19 Cases in Virginia



Dashboard Updated: 7/28/2020, Data entered by 5:00 PM the prior day.

Total Cases*		Total Hospitalizations**		Total Deaths	
86,994		7,686		2,095	
Confirmed+	Probable+	Confirmed+	Probable+	Confirmed+	Probable+
83,732	3,262	7,640	46	1,991	104

Select Measure
(Affects Map and Bar Chart)

- ☒ Cases
- ☐ Hospitalizations
- ☐ Deaths

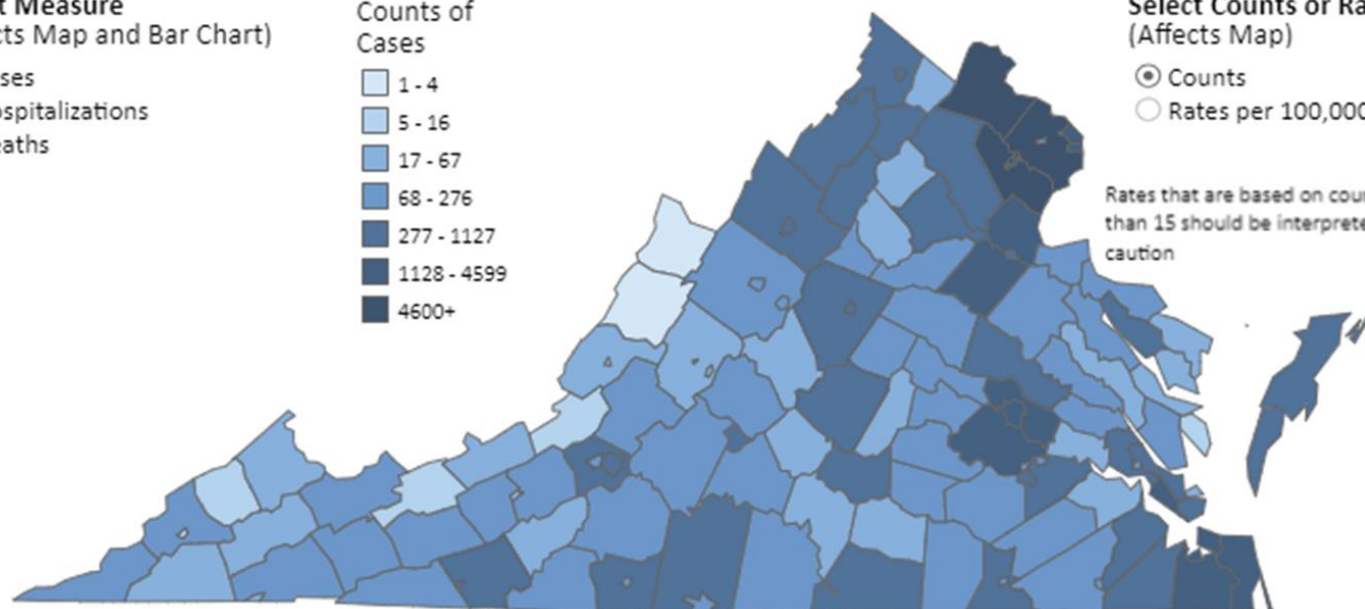
Counts of Cases

- ☐ 1 - 4
- ☐ 5 - 16
- ☐ 17 - 67
- ☐ 68 - 276
- ☐ 277 - 1127
- ☐ 1128 - 4599
- ☐ 4600+

Select Counts or Rates
(Affects Map)

- ☒ Counts
- ☐ Rates per 100,000

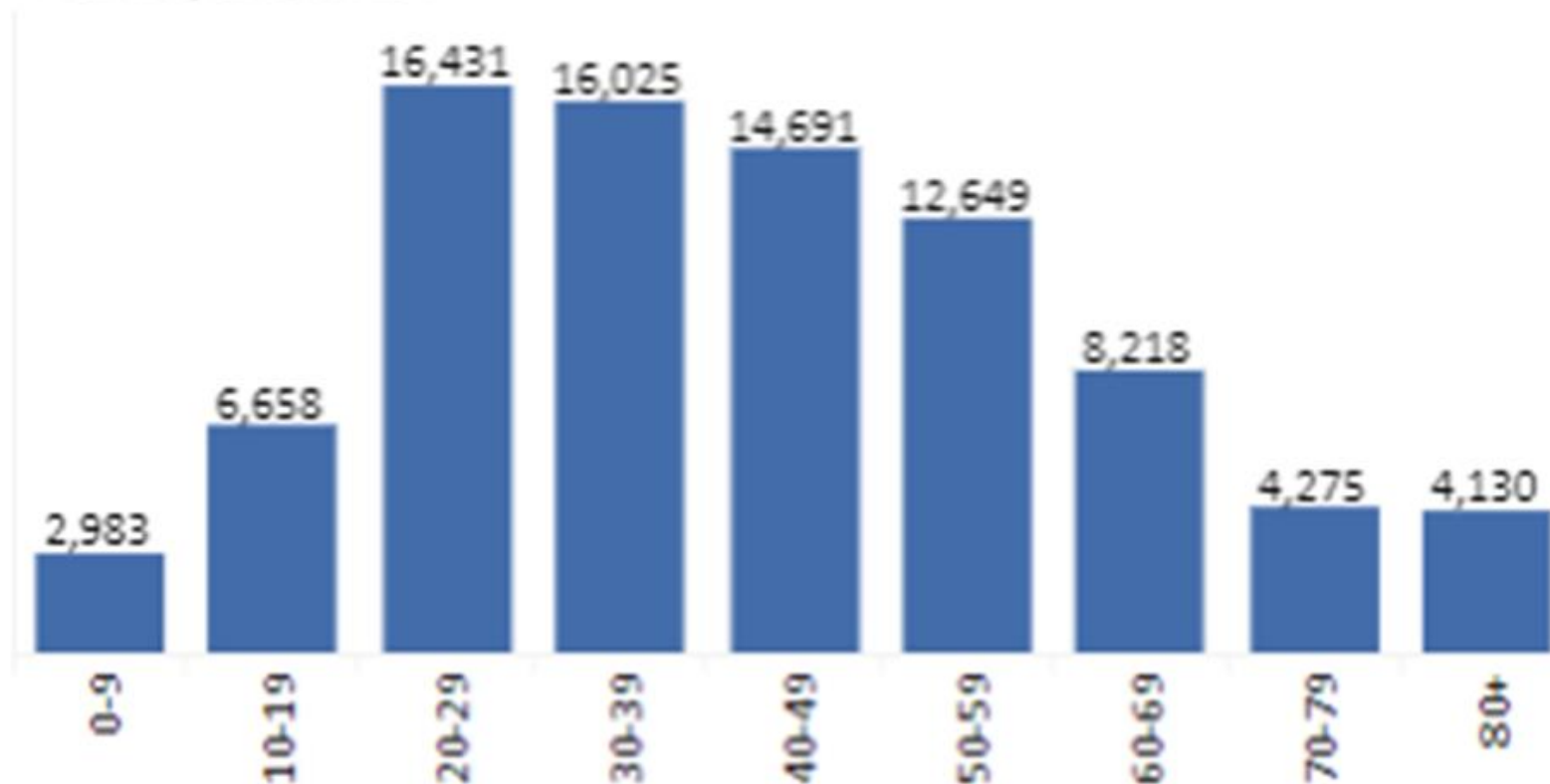
Rates that are based on counts less than 15 should be interpreted with caution



Virginia's COVID-19 Data by Age Group

Cases by Age Group - Virginia

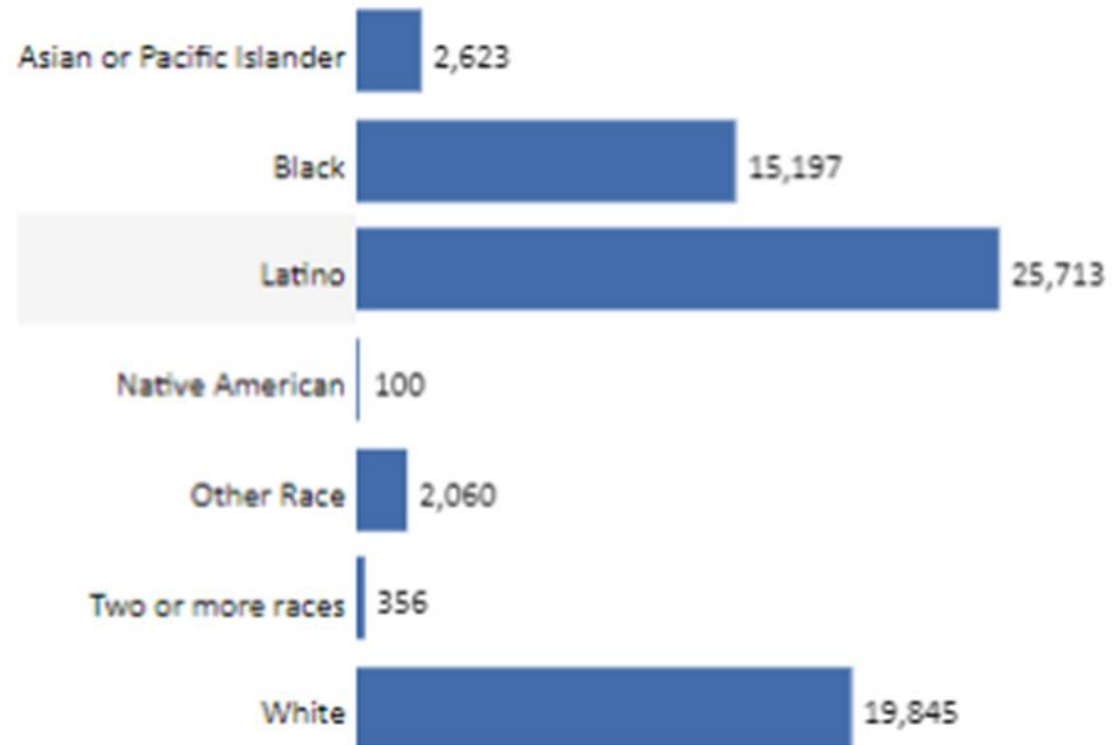
Not Reported: 934



data as of 7-28-2020

Virginia's COVID-19 Cases by Race & Ethnicity

Cases by Race and Ethnicity* - Not Reported: 21,100
Virginia



data as of 7-28-2020

Virginia's COVID-19 Facility Outbreak

Cases and Deaths by Facility Type

Cases and Deaths by Outbreak Facility Type - State Totals

Long Term Care Facilities	Cases	7,896
	Deaths	1,205
Congregate Setting	Cases	2,876
	Deaths	38
Correctional Facility	Cases	2,728
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Healthcare Setting	Cases	374
	Deaths	12
Educational Setting	Cases	116
	Deaths	0

VA Hospital & Healthcare Association Dashboard



COVID-19 in Virginia Hospitals

As of: July 23, 2020

Hospitalizations

Combined number of confirmed positive COVID-19 patients who are currently hospitalized, and hospitalized patients whose COVID-19 test results are pending.

1,218

The total number of confirmed COVID-19 patients who have been hospitalized and discharged.

10,479

Total number of currently hospitalized patients confirmed positive for COVID-19.

801

Total number of people currently receiving inpatient hospital care whose COVID-19 test results are pending.

417

Combined number of confirmed positive COVID-19 patients, and those whose COVID-19 test results are pending, currently hospitalized in the ICU.

257

Combined number of hospital patients, both confirmed for COVID-19, and those with test results pending, currently on a ventilator.

136

VA Health & Hospital Association Dashboard

Beds Available

Inpatient Bed Availability ⓘ

3,486

Beds Added under E052 ⓘ

3,695

ICU Occupancy

Current total ICU bed occupancy in Virginia hospitals, including COVID-19 and non-COVID patients. Last year's average ICU occupancy rate was 67%.

ICU Occupancy

77%

ICU Surge Beds

706

ICU Occupancy including Surge Beds

54%

Supplies

Number of Virginia hospitals experiencing difficulty in obtaining or replenishing PPE in the next 72 hours.

1

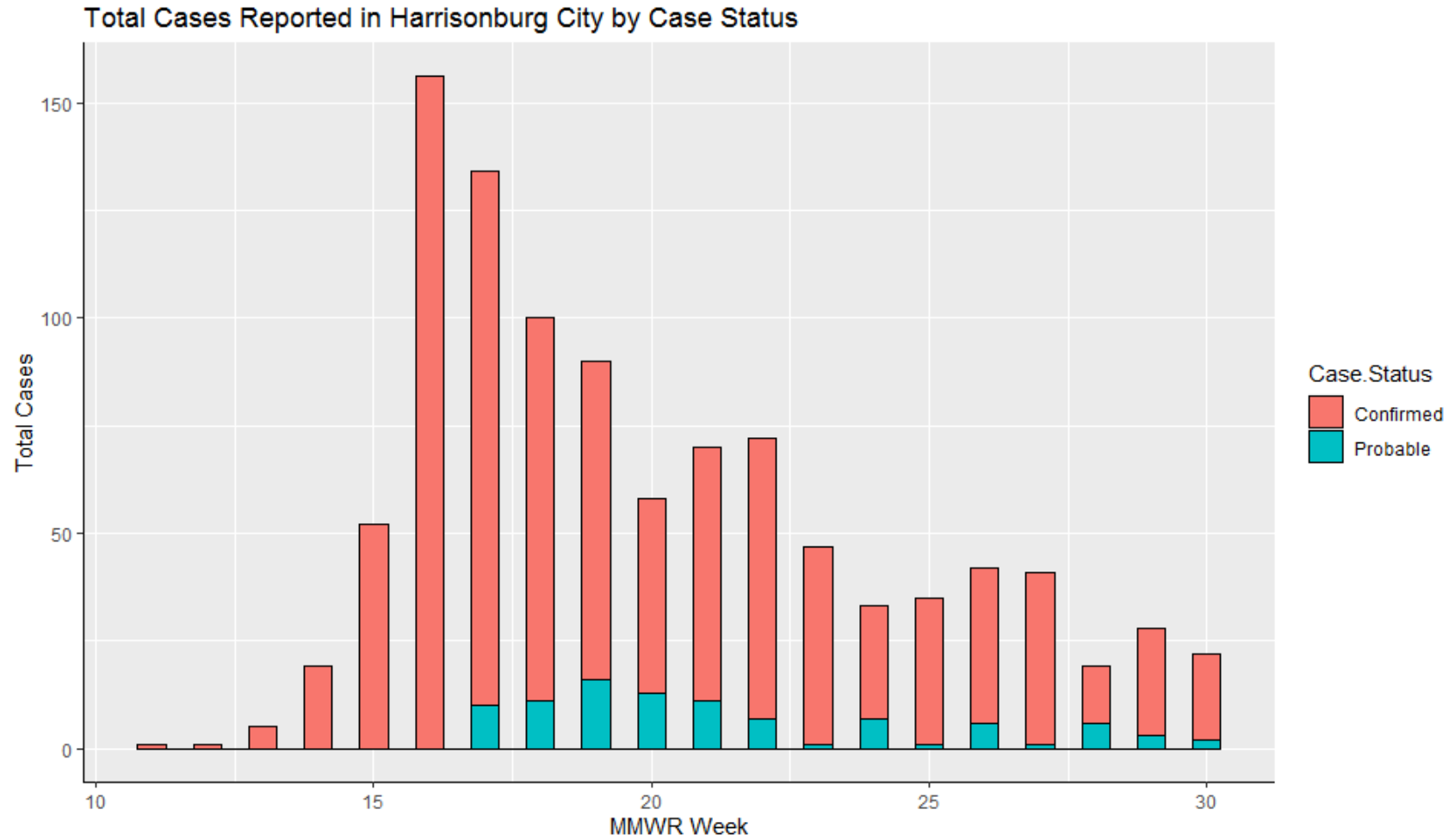
Number of Virginia hospitals experiencing difficulty in obtaining or replenishing other medical supplies in the next 72 hours.

www.vhha.com/communications/virginia-hospital-covid-19-data-dashboard/

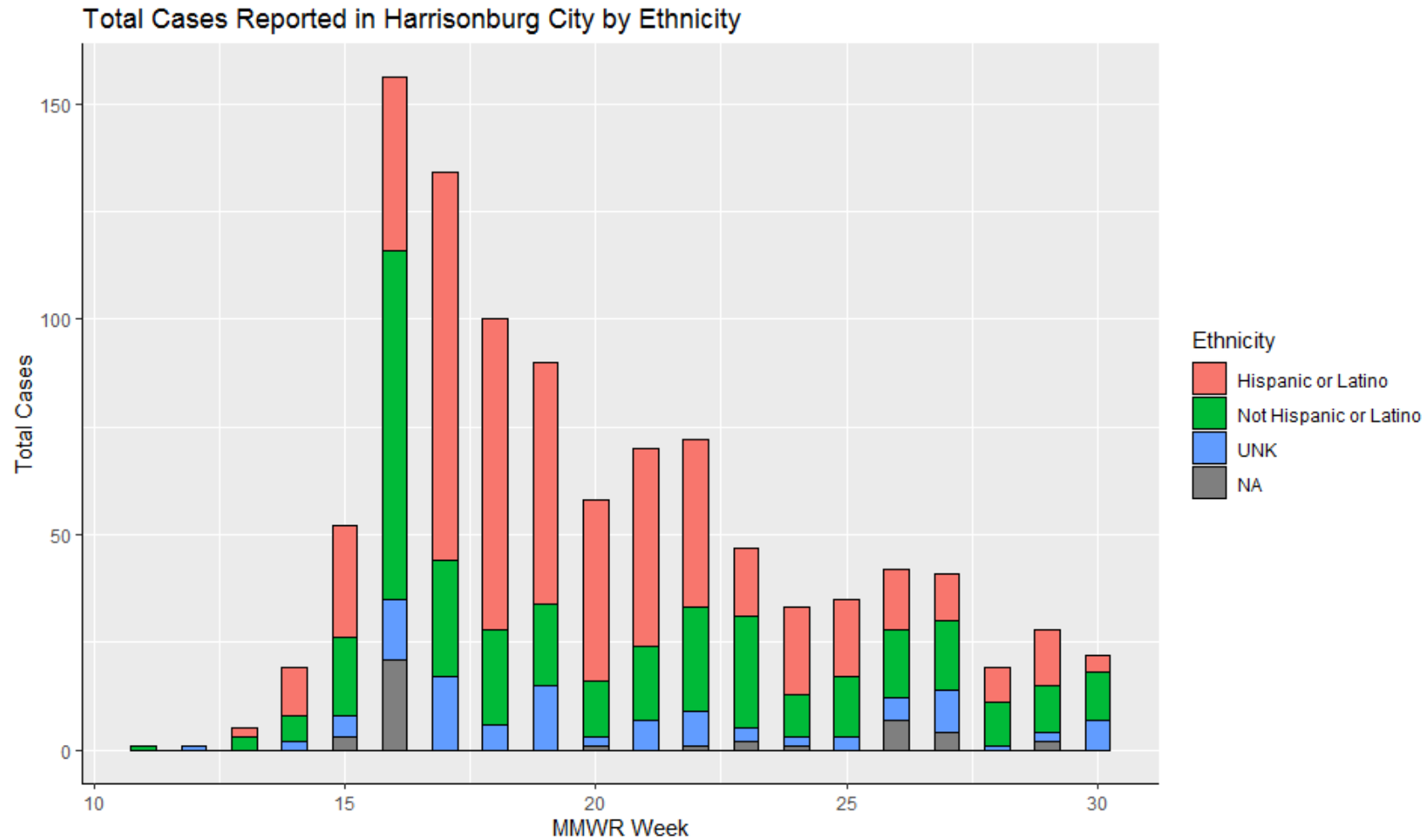
VHHA data as of 7/23/20

HARRISONBURG/CSHD UPDATES

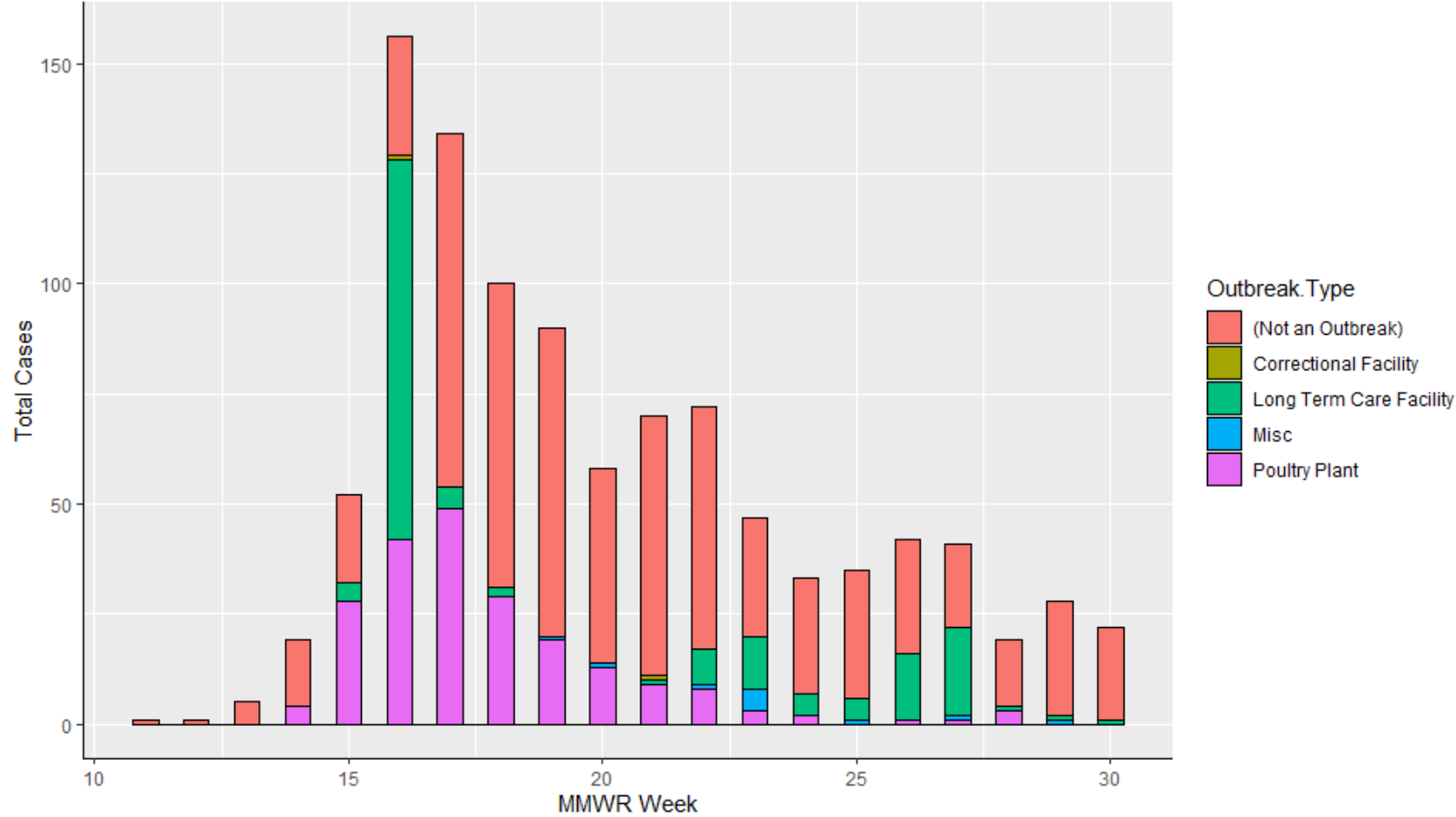
N=1,025 Confirmed=930 Probable= 95



N=1,025 Hispanic or Latino=528

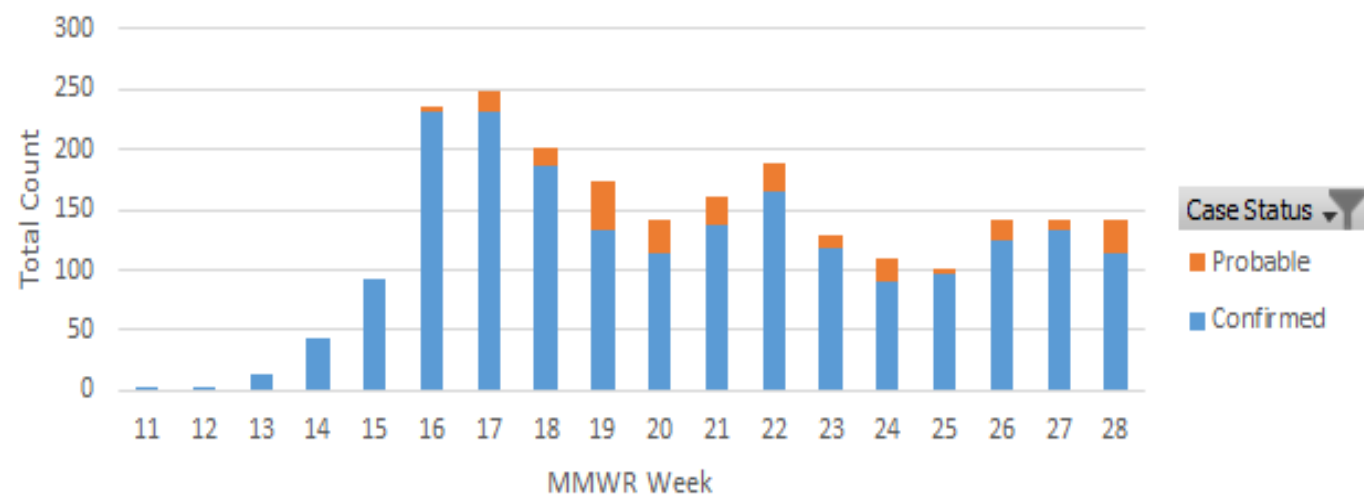


Total Cases Reported in Harrisonburg City by Outbreak Type



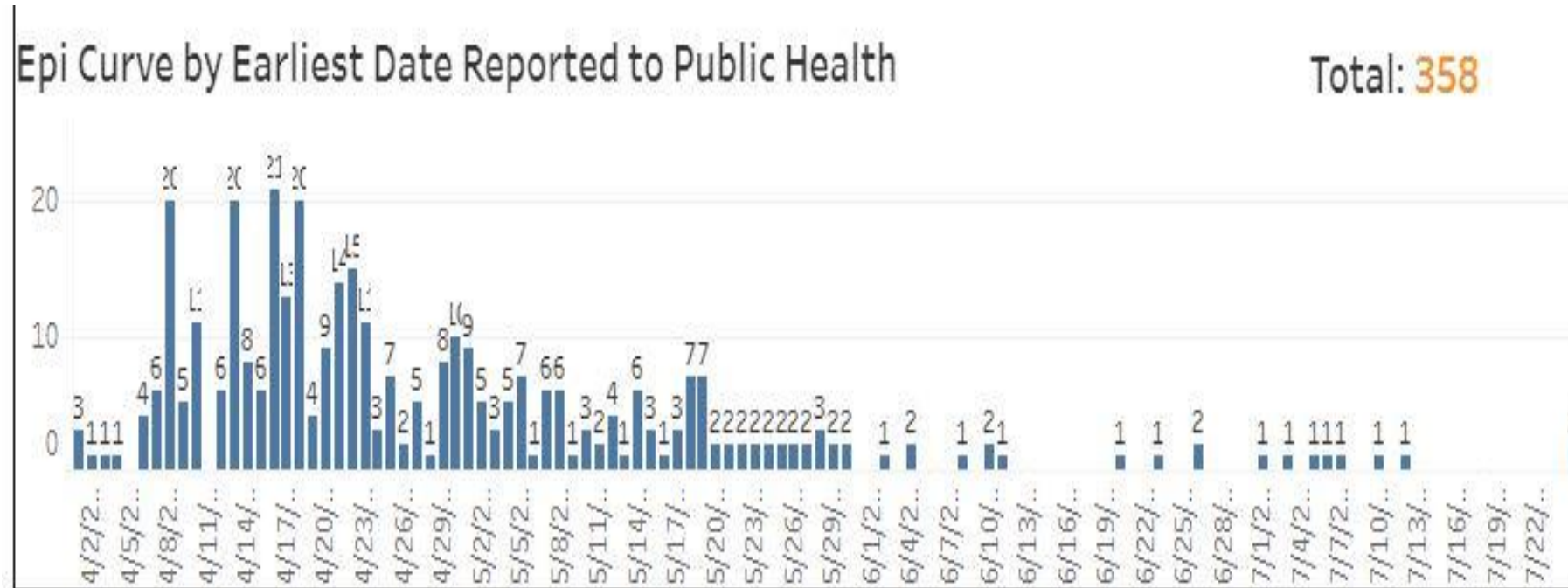
Total Cases in CSHD by MMWR Week

Total Number of Cases in the Central Shenandoah Health District by MMWR Week



MMWR Week

Aggregate Poultry Related Cases



Focus Areas

Community Testing Access:

May 19- July 7: 3,681 tests throughout district

Phased Re-opening of SNF's:

Baseline PPS with VANG

IPCA consultation with federal grant teams

Re-Opening of K-12 and Higher Education

Data Tools

Pandemic Metrics Dashboard Composite Index:

1. Cases
2. Deaths
3. % Positive Tests
4. Outbreaks
5. HCW Infections
6. ED Visits
7. Hospitalizations
8. Hospital Beds
9. PPE Supplies

PUBLIC HEALTH RESPONSE

How is VDH Responding?

- Facilitating testing of persons approved for public health testing and encouraging testing at other labs
- Investigating cases and, as local resources are available, investigating and tracing contacts of cases
- Investigating outbreaks and providing disease control recommendations
- Engaging with clinical providers, other state agencies and community partners to raise awareness and provide the most current information
- Providing guidance for clinical providers and local health departments for case investigation, infection control and testing

How is VDH Responding?

- Education and information
 - www.vdh.virginia.gov/coronavirus
 - Press releases
 - Statewide call center activated (877-ASK-VDH3)
 - Targeted outreach and education
 - Colleges and universities
 - Department of Education
 - Department of Emergency Management and local emergency managers
 - Virginia Hospital and Healthcare Association
 - Department of Corrections

COVID-19 Testing Availability

Virginia Public Health Lab (DCLS)	Private Labs	Community Testing
<ul style="list-style-type: none">• Molecular testing only• Reserved for patients meeting VDH public health priority investigation criteria• <u>VDH approval is required</u> - specimens should not be sent without approval• Specimen collection guidance available on DCLS website	<ul style="list-style-type: none">• List of private and commercial labs offering testing for Virginia residents is here• VDH approval is not necessary• Contact your lab provider to determine testing availability• Provide complete demographic information on testing request form	<ul style="list-style-type: none">• Provide improved access to testing• VDH approval is not necessary• Local health departments are working with community partners to set up testing sites and target hard-to-reach populations• Testing event details provided by local health department or partners

List of available testing sites in Virginia is [here](#)

Who Should Be Tested for COVID-19?

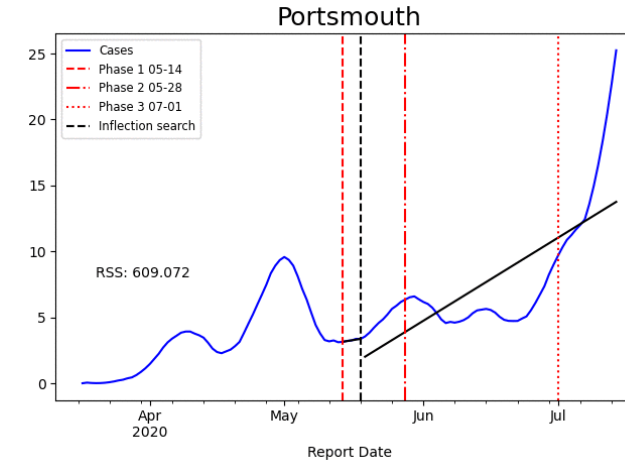
Table 1. VDH Recommendations for prioritizing SARS-CoV-2 testing

	<u>Private/Commercial Lab Testing</u>	<u>Public Health Lab Testing</u>
High Priority	<ul style="list-style-type: none"> • Hospitalized patients* • Healthcare workers and first responders with COVID-19 symptoms* • Un- or underinsured persons with COVID-19 symptoms* • Residents and workers with COVID-19 symptoms* in, or newly arriving to, congregate settings (e.g., long-term care facilities, prisons, jails, or behavioral health facilities) 	<ul style="list-style-type: none"> • Contact and outbreak investigations • Residents and workers with COVID-19 symptoms* in, or newly arriving to, congregate settings (e.g., long-term care facilities, prisons, jails, or behavioral health facilities) • Un- or underinsured persons with COVID-19 symptoms*
Priority	<ul style="list-style-type: none"> • Persons with COVID-19 symptoms* • Persons without symptoms <ul style="list-style-type: none"> ◦ Close contacts of cases** ◦ Prioritized by clinicians based on their best clinical judgment (e.g. for medical procedures) 	<ul style="list-style-type: none"> • Public health monitoring, including point prevalence surveys • Sentinel surveillance and seroprevalence studies • Community testing clinics

EPIDEMOLOGIC MODELING OF SARS-CoV-2 AND COVID-19: University of VA Biocomplexity Institute

New Scenarios: Local Surge Detection

- Uses inflection point to identify surges at LHD level
 - Intensity of surge still uncertain
- Surges identified in 10 LHDs



Hampton Roads

- Chesapeake
- Hampton
- Norfolk
- Peninsula
- Portsmouth
- Three Rivers
- Virginia Beach
- Western Tidewater

Other Areas of Virginia

- Thomas Jefferson
- Pittsylvania-Danville



BIOCOMPLEXITY INSTITUTE

Key Takeaways

- 10 LHDs are experiencing a surge
 - Eight in Hampton Roads area
 - Pittsylvania-Danville & Thomas Jefferson
- Surge Detection added to Scenarios
- Current Course + With Surge offer improved projections
 - Still difficult to model:
 - Policy decisions
 - Human behavior
 - New (unknown) phenomena
- Environment and parameters moving in wrong direction



Upcoming events:

- College / university
- K-12
- Autumn
- Hurricane Season
- Election Season
- The last half of 2020
- Influenza season

PREVENTION MESSAGES

Basic Prevention Measures



- Wash your hands often with soap and water
 - Use an alcohol-based hand sanitizer if soap and water not available
- Avoid touching your eyes, nose, and mouth with unwashed hands
- Wear cloth face covering in public
- Maintain at least 6 foot distance from others

Social Distancing

- Essential to prevent person-to-person spread
- Everyone should do their part
- Stay home whenever possible based on Phase I and II guidelines
 - Remain ≥ 6 feet from others
 - Wear cloth face covering when spending time indoors in public spaces
 - Wash hands frequently with soap and water or use alcohol-based hand sanitizer

Safe Cleaning and Disinfection



Calls to U.S. poison centers about cleaner and disinfectant exposures increased by 20%*

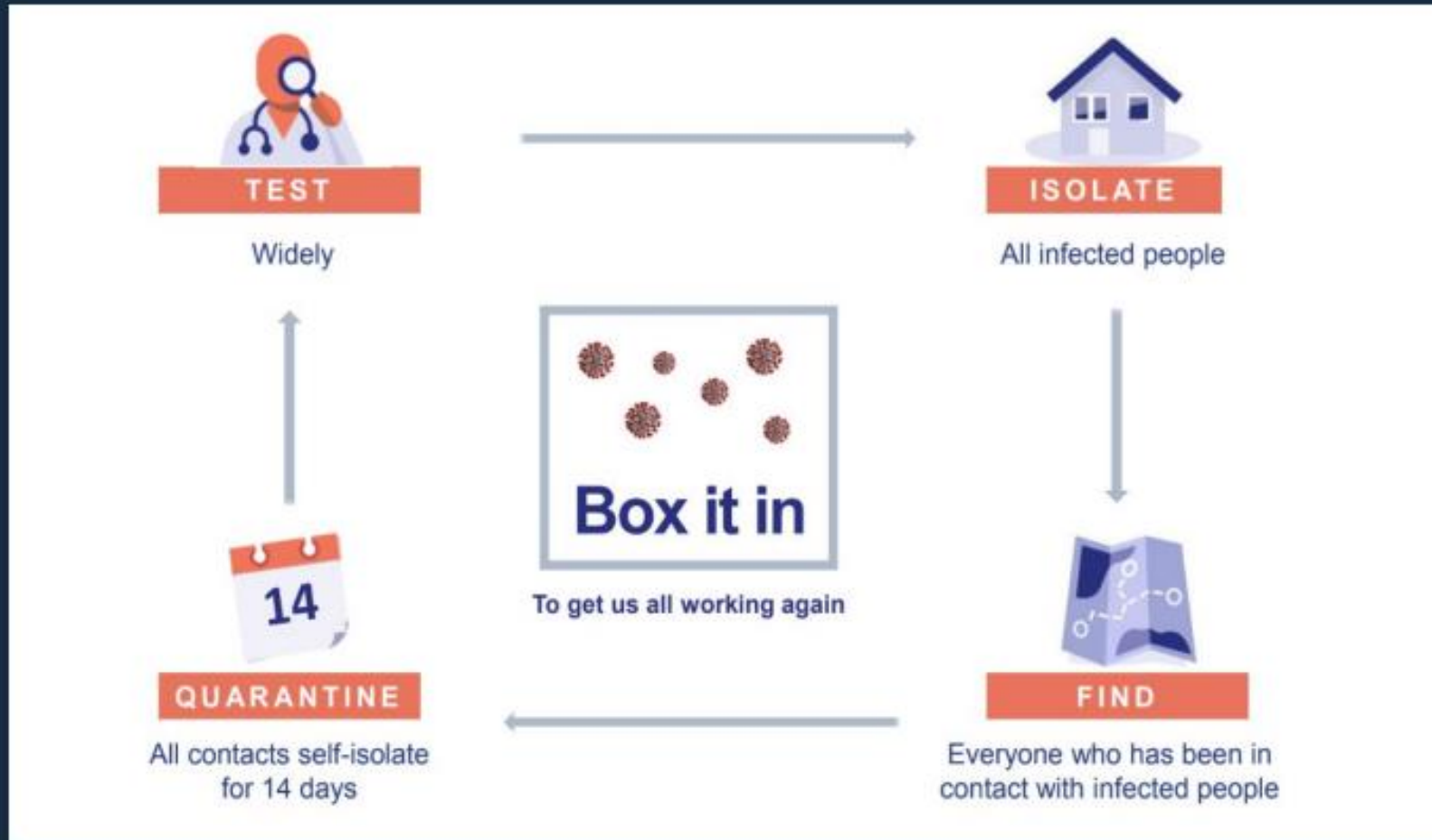
Prevent COVID-19 Spread and Clean Safely :

- Follow label directions
- Don't mix chemicals
- Wear protective gear
- Use in a well-ventilated area
- Store chemicals out of reach of kids

* Jan-March, 2020

cdc.gov bit.ly/MMWR_ChemicalExposures MMWR

This is how we get back to work



Take Home Messages about COVID-19

- The COVID-19 situation continues to evolve
- Much more to learn about the virus, immunity, & transmission factors
- Upcoming challenges include opening of K-12 education and higher education
- Decreasing transmission until vaccine is available is dependent on : personal behaviors (masking, social distancing, hand washing, staying home when sick or exposed) and public health measures (boxing in the infection)

"Now is the time, if
ever there was one,
for us to care
selflessly about one
another."

-Anthony Fauci





Thank you!