OVERVIEW OF CURRENT SITUATION (07/14/20 0630) Source: Johns Hopkins University & Medicine <u>https://coronavirus.jhu.edu/map.html</u>

 Cases
 / Deaths

 Worldwide:
 13,132,491/573,835

 Nationwide:
 3,364,918 / 135,616

 California:
 334,921 / 7,099

 Orange County:
 26,120 / 433 Source:
 Orange County COVID-19 Case Counts & Testing Figures

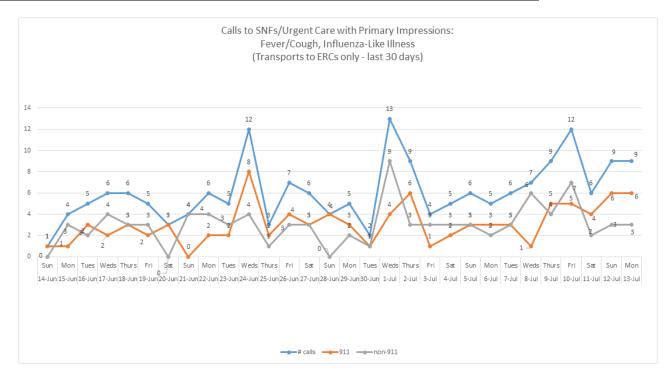
ORANGE COUNTY PUBLIC HEALTH (as of 7/14/20 1000)

Orange County COVID-19 Summary* click for full details	Sat 7/11/20	Sun 7/12/20	Mon 7/13/20	Tue 7/14/20	Wed 7/15/20	Thu 7/16/20	Fri 7/17/20		
Cases Reported to Date	23,901	24,715	25,255	26,120					
Deaths Reported to Date	421	423	424	433					
Tests Reported Today	6,890	4,199	6,791	10,288					
Cumulative Tests to Date	303,201	307,400	314,191	324,479					
*Data posted is always preliminary & subject to change. More information may become available as individual case									
investigations are completed. LOCAL DA	TA MAY B	BE DIFFE	RENT FRO	OM THE S	TATE WEB	SITE DAT	'A		

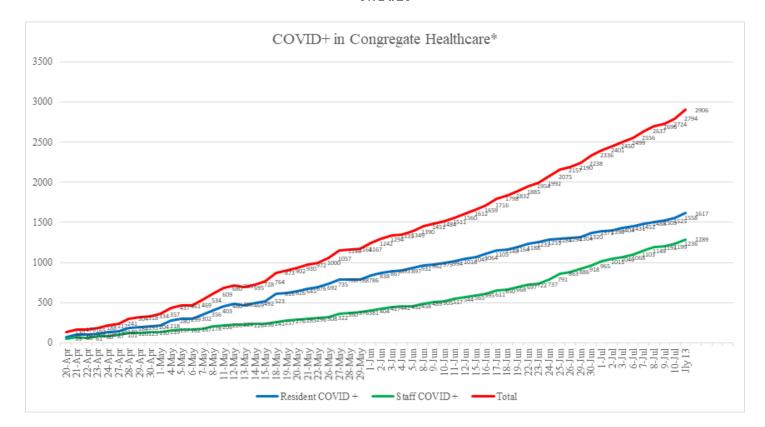
PUBLIC HEALTH UPDATE - 07/14/20

- Orange County is seeing a substantial increase in disease transmission.
- Over the past three weeks;
 - Testing Rate: increased 24% from 128 to 159 average tests per day per 100,000 population
 - Positivity Rate increased from 7.1% to 14.6%
 - Case rate average increased 239% from 70.9 to 240.6 per 100,000
 - Hospitalizations have increased 87% from 361 to 674
- The trends are very concerning and we can continue to expect the impact on the healthcare system to get worse in the coming days and weeks.
 - o Increased disease transmission always comes first;
 - Increased hospitalizations comes later as illness develops and worsens;
 - o Increased ICU need comes even later as illness continues to worsen over time.
- The current metrics show a clear reflection of the disease progression and we need a reduction in disease transmission to protect the hospitals
- Everyone in Orange County needs to adhere to the mitigation strategies to slow spread;
 - High risk persons (65 or older, or underlying health conditions) should stay home as much as possible
 - Stay home when sick
 - Isolation of cases and quarantine of all contacts (within 6 feet for 15 minutes or more)
 - Practice social distancing at all times; 6 feet or more
 - Wear face coverings when unable to maintain social distancing; high compliance is critical given asymptomatic transmission
 - Wash hands frequently
 - Avoid touching face
 - o Disinfect frequently touched surfaces often

SKILLED NURSING/ASSISTED LIVING/RESIDENTIAL CARE FACILITY - TRENDS



Reporting Date: 7/14/20 (71/73 SNFs reported)	Skilled Nursing Facility PPE – DAYS ON HAND*							
	0 - 3 days	4 - 7 days	8-14 days	15+ days				
N95 Masks	1	4	20	46				
Surgical Masks	0	4	21	46				
Eye Protection	0	4	19	48				
Gowns	0	4	22	45				
Gloves	0	6	20	45				
Alcohol-Based Hand Sanitizer	0	6	16	49				



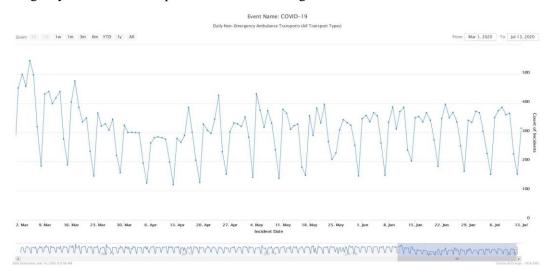
		Facility Outbreaks (as of 7/13/20 1700)
Facility Type by Licensing	#	An "Outbreak" is two (2) or more confirmed cases of COVID-19 in facility residents occurring within 14 days.
Category	π	
Skilled Nursing Facility	40	Advanced Rehab Center of Tustin, Alamitos West Health & Rehab, Alta Gardens Care Center, Anaheim Crest, Anaheim Healthcare Center, Buena Vista Care Center, Chapman Care Center, Country Villa Plaza, Coventry Court, Crystal Cove Care Center, French Park Care Center, Garden Grove Convalescent Hospital, Garden Park Care Center, Gordon Lane Care Center, Harbor Villa Care Center, Healthcare Center of Orange County, Huntington Valley Healthcare Center, Kindred Brea SAU, Laguna Hills Health & Rehab, Leisure Court Nursing Center, MainPlace Post Acute, Manor Care FV, New Orange Hills, Orange Healthcare & Wellness, Orangegrove Rehab Hospital, Pacific Haven Healthcare Center, Palm Terrace, Park Anaheim Healthcare Center, Park Regency Care Center, Rowntree Gardens, Sea Cliff Healthcare Center, Seal Beach Health & Rehab, South Coast Post Acute, St. Edna Subacute & Rehab, Terrace View Care Center, The Hills Post Acute, The Pavilion at Sunny Hills, Walnut Village, West Anaheim Extended Care, Windsor Gardens Center of Anaheim, Windsor Gardens Fullerton
Elderly Assisted Living	30	Acacia Villa, ActivCare Yorba Linda, Anaheim Crown Plaza, Ardent Care Assisted Living, Brookdale Anaheim, Brookdale Nohl Ranch, Brookdale San Juan Capistrano, Cambridge House, Carmel Village, Golden Leisure Home, Heathers McKinley, Heathers Wintergreen, Heritage Point, Huntington Terrace, Kamstra Care Home, Karlton Residential, Oakmont-Capriana, Pacific Shores Mission Viejo, Pacifica Royale, Seacliff Assisted Living, Silverado Newport Mesa, Silverado Tustin Hacienda, St Francis Home, Sunflower Garden, Sunrise Villa Bradford, Sunrise Yorba Linda, The Groves of Tustin, The Regency, Vivante on the Coast, Whitten Heights

EMERGENCY MEDICAL SERVICES STATUS

• 9-1-1 ambulance transport volume remains about 5-10% below normal average and continue to gradually increase.



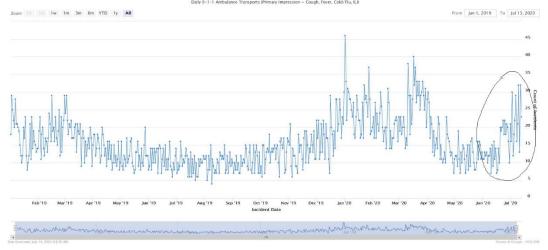
• Non-emergency ambulance transports continue to average about 30-35% below normal.



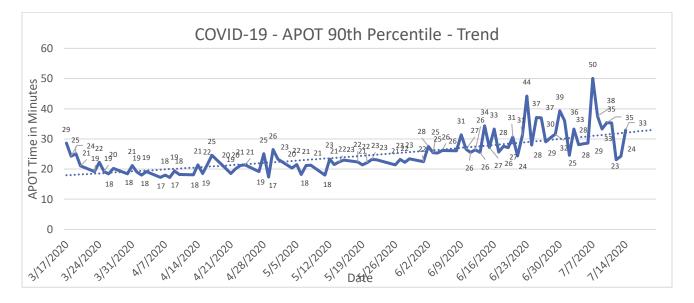
Primary Impressions of Cold/Flu/ILI by 9-1-1 EMS providers continue to trend higher over the last several days.

 Event Name: COVID-19

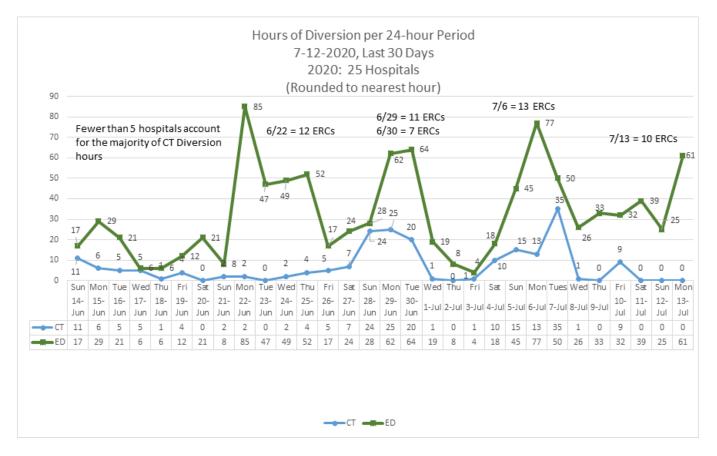
 Day 9-1-1 Ambudance Transports (Primary Impression - Cough, Forer, Cald Flu, LL)



- Ambulance Patient Offload Time (APOT) is defined as the time the ambulance arrives at the receiving destination (wheels stop) to the time that the ambulance crew physically transfers the patient to the ED gurney. Last 24 hours: Current Average APOT is <u>15m37s</u> / Current 90th Percentile APOT is <u>33m00s</u>.
- APOT increased over the last 24 hours after a decrease over the weekend. APOT has been trending higher over the last few weeks. This chart displays a daily trend since COVID-19 began.



Emergency Department (ED) Diversion & Computerized Tomography (CT) (ED closed to all ambulance transport due to no ED capacity or no CT available) for the last 30 days 6/14/20 – 7/13/20 below.



(26): Anaheim Regional, Anaheim Global, Chapman Global, CHOC, CHOC at Mission, Foothill, Fountain Valley, Garden Grove, Hoag-Irvine, Hoag-Newport Beach, Huntington Beach, Kaiser-Anaheim, Kaiser-Irvine, La Palma, Los Alamitos, Mission – Laguna Beach, Mission-Mission Viejo, Orange Coast Memorial, Orange County Global, Placentia Linda, Saddleback Memorial, Saint Jude, South Coast Global, St. Josephs, UCI, West Anaheim

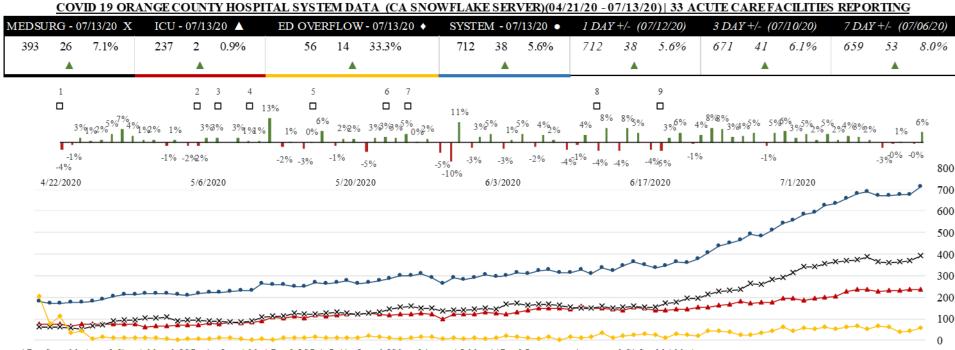
- Since 4/1/20 7/9/20, OC Hospitals have accepted 33 COVID+ interfacility transfers from Imperial County
- As of 7/14/20, hospitals reported there were 28 out-of-county patients, including 2 patients from Imperial County currently hospitalized.

			ALL HOSP	ITALS (33)			EMERGENCY RECEIVING CENTERS						
DATE	Census ALL	Occupancy %	COVID+ Hospitalized	COVID+ ICU	% ICU Beds Available	% ICU Ventilators Available	Census ALL	Occupancy %	COVID+ Hospitalized	COVID+ ICU	% ICU Beds Available	% ICU Ventilators Available	
7/2	3884	71%	584	187	34%	65%	3523	70%	567	179	35%	68%	
7/3	3814	61%	594	193	34%	64%	3485	60%	577	185	35%	68%	
7/4	3622	60%	624	197	40%	67%	3332	59%	607	189	41%	70%	
7/5	3551	59%	634	203	42%	67%	3267	58%	617	195	43%	70%	
7/6	3635	59%	659	224	40%	67%	3283	58%	644	216	41%	71%	
7/7	3801	62%	679	234	40%	66%	3448	61%	666	226	40%	69%	
7/8	3970	65%	691	236	37%	64%	3606	64%	674	229	37%	68%	
7/9	3916	63%	672	227	39%	65%	3547	62%	656	221	40%	69%	
7/10	3985	65%	671	231	38%	65%	3614	63%	660	225	39%	69%	
7/11	3871	63%	675	233	37%	65%	3510	62%	664	227	38%	69%	
7/12	3711	60%	674	235	43%	66%	3352	59%	663	229	44%	70%	
7/13	3658	59%	712	237	41%	65%	3309	58%	701	231	42%	69%	
7/14													
7/15													
7/16													
7/17													
7/18													
7/19													

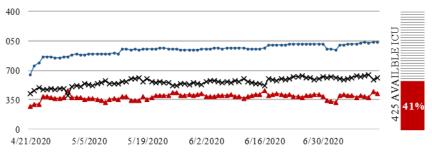
Orange County Emergency Medical Services Medical Health Operational Area Coordination (MHOAC)

Online at: http://www.healthdisasteroc.org/ems/archive

07/14/20

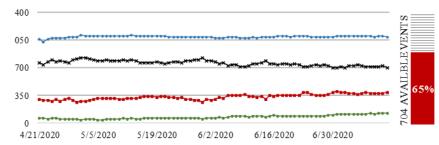


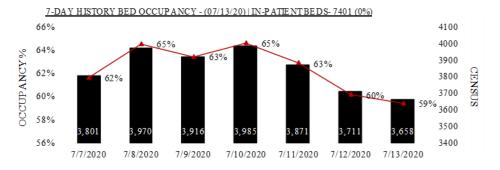
1.Face Covers Mandatory, 2. Cinco de Mayo, 3. OC Beaches Open, 4. Mom's Day, 5. OC Parks Parking Open, 6. OC Stage 2 Approved, 7. Memorial Day, 8. Re-open entertainment, etc., 9. CA Gov. Mask Mandate



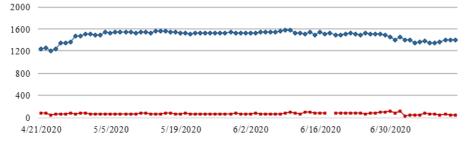


VENTIL ATORS - (07/13/20) | ● SY STEM- 1086 | ▲ AVAIL ABLE- 704 (65%) | X OCCUPIED- 382 | ●









\\ochca.com\hcashares\AOC\1 REAL EVENTS\COVID -19\3) MHOAC\DAILY POLICY GROUP

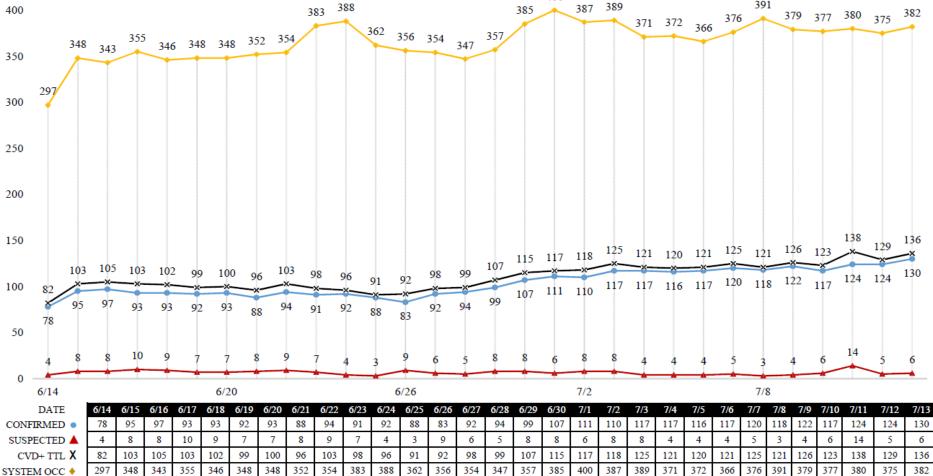
07/14/20

COVID 19 ORANGE COUNTY HOSPITAL SYSTEM DATA (CA SNOWFLAKE SERVER) VENTILATORS IN USE (06/14/20 - 07/13/20) | 33 ACUTE CARE FACILITIES REPORTING

400

383 346 348 348 352 354 348 343 29

450



CONFIRMED - Mechanical Ventilators in use for COVID Confirmed Patients - The number of patients hospitalized in an inpatient bed who have laboratory-confirmed COVID and are on a mechanical ventilator at the time the data is collected.

SUSPECTED - Mechanical Ventilators in use for Suspected COVID Patients - The number of suspected COVID patients hospitalized in an inpatient bed who are on a mechanical ventilator at the time the data is collected.

CVD+TTL - Mechanical Ventilators in use for Hospitalized COVID Patients - The number of patients hospitalized in an inpatient bed who have suspected or confirmed COVID and are on a mechanical ventilator at the time the data is collected. Added to SmartSheet April 21, 2020.

SYSTEM - OCC - The number of mechanical ventilators, including anesthesia machines and portable/transport ventilators, in use for patients with any diagnosis in the hospital - including Neonatal (NICU), Pediatric (PICU), and adult ICU units. As of April 21, 2020 NICU/PICU patients were added to ventilator reporting.

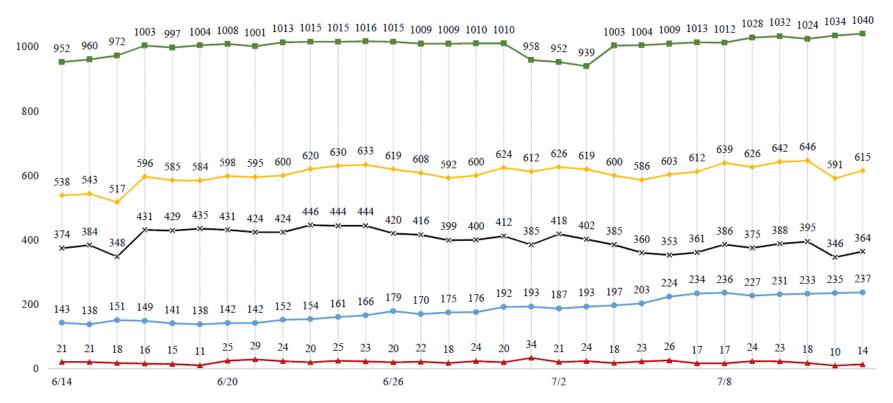
Orange County Emergency Medical Services Medical Health Operational Area Coordination (MHOAC)

Online at: http://www.healthdisasteroc.org/ems/archive

07/14/20

COVID 19 ORANGE COUNTY HOSPITAL SYSTEM DATA (CA SNOWFLAKE SERVER) OCCUPIED ICU BEDS (06/14/20 - 07/13/20) | 33 ACUTE CARE FACILITIES REPORTING

1200



DATE	6/14	6/15	6/16	6/17	6/18	6/19	6/20	6/21	6/22	6/23	6/24	6/25	6/26	6/27	6/28	6/29	6/30	7/1	7/2	7/3	7/4	7/5	7/6	7/7	7/8	7/9	7/10	7/11	7/12	7/13
CONFIRMED •	143	138	151	149	141	138	142	142	152	154	161	166	179	170	175	176	192	193	187	193	197	203	224	234	236	227	231	233	235	237
SUSPECTED 🔺	21	21	18	16	15	11	25	29	24	20	25	23	20	22	18	24	20	34	21	24	18	23	26	17	17	24	23	18	10	14
OTHER ICU X	374	384	348	431	429	435	431	424	424	446	444	444	420	416	399	400	412	385	418	402	385	360	353	361	386	375	388	395	346	364
SYSTEM OCC 🔶	538	543	517	596	5 8 5	584	598	595	600	620	630	633	619	608	592	600	624	612	626	619	600	586	603	612	639	626	642	646	591	615
SYSTEM TTL	952	960	972	1003	997	1004	1008	1001	1013	1015	1015	1016	1015	1009	1009	1010	1010	958	952	939	1003	1004	1009	1013	1012	1028	1032	1024	1034	1040

CONFIRMED - The number of laboratory-confirmed positive COVID patients that are in the ICU at the hospital. This includes all ICU beds (NICU, PICU, and adult). NICU and PICU patients were added to ICU reporting on April 21, 2020.

SUSPECTED - The number of symptomatic patients, with tests for COVID pending laboratory confirmation, that are in the ICU at the hospital. This includes all ICU beds (NICU, PICU, and adult). NICU and PICU were added to ICU reporting on April 21, 2020.

OTHER ICU - The number of non-COVID confirmed or suspected patients that are in the ICU at the hospital. This includes all ICU beds (NICU, PICU, and adult). NICU and PICU were added to ICU reporting on April 21, 2020. SYSTEM - OCC - The number of all staffed ICU beds occupied by patients at the time the data is collected. This includes all ICU beds (NICU, PICU, and adult). NICU and PICU were added to reporting on April 21, 2020. This is a calculated field. sum(ICU COVID Confirmed Patients', ICU Other Patients', ICU Suspected COVID Patients')

SYSTEM TTL - The number of all staffed ICU beds including surge/expansion beds used for critically ill inpatients. Note, the number of ICU beds provided should be higher than the number in the ICU Bed Occupancy field. Neonatal ICU (NICU) and Pediatric ICU (PICU) beds were added to ICU reporting as of April 21, 2020.

//14/20

Reporting Date: 7/12/20	Acute Care Hospital PPE – DAYS ON HAND								
(29/33 ACHs reported)	0 - 3 days	4 - 14 days	15+ days	Non Reported					
N95 Masks	0	6	19	4					
Surgical Masks	1	7	17	4					
Face Shields	0	7	18	4					
PAPR Hoods	5	8	8	8					
Eye Protection	1	5	19	4					
Gowns	0	10	15	4					
Gloves	4	8	13	4					

Reported Operational Status Acute Care Hospitals w/ Emergency Departments								
9/25 Reporting	Normal Operations	Modified Operations Using Internal Corporate Resources	Modified Operations Need Assistance					
	1	7	1					

Reported Service Category Status Acute Care Hospitals w/ Emergency Departments (#25)								
Status Item	Yes	%						
Command Center Activated	16	64%						
Surge Plan Activated	15	60%						
Canceled Procedures/Services	8	32%						
Supply Issues	12	48%						
CDPH Flex	11	44%						
Increased Morgue Capacity	pending							

- On a routine basis, the MHOAC tracks daily hospitalizations, census, occupancy and PPE availability as well as reviews epidemiologic data (doubling time).
- The criteria in the table below serve as objective measures to identify the need for hospitals to shift to crisis care strategies (i.e. activate surge plans) & uses the following assumptions:
 - o Increased pressure in hospitals & on the EMS system requires a shift to crisis care strategies
 - Low levels of PPE will come earlier than decreased capacity and cause an abrupt change in capacity.
 - Increased hospitalizations and low PPE could have a synergistic effect to reduce capacity.
 - Low levels of PPE is not just a marker of capacity but causes capacity issues.

Hospital Criteria for shifting to Crisis Care Strategies LEGEND									
		STATUS							
CRITERIA	Normal Operations	Modified Operations Under Control	Modified Operations Assistance Needed						
Rate of change in Hospitalized COVID-19 patients (doubling time over last 7 days)	Never to 4 weeks to double	4 weeks to 2 weeks to double	Less than 2 weeks to double						
Absolute COVID-19 Census in the hospital	Less than 500	500-750	>750						
Hospital census as a percentage of capacity	<80%	80% to 90%	>90%						
Supply of PPE available in the hospitals	>4 weeks	2 to 4 weeks	< 2 weeks						

07/14/20

Hospital Criteria for shifting to Crisis Care Strategies 7/14/20								
	STATUS							
CRITERIA	Normal Operations	Modified Operations Under Control	Modified Operations Assistance Needed					
Rate of change in Hospitalized COVID-19 patients (doubling time over last 7 days)		30 days						
Absolute COVID-19 Census in the hospital		712						
Hospital census as a percentage of capacity	59%							
Supply of PPE available in the hospitals		2 to 4 weeks						

- It is important to note that the basis of the table is that these are concepts and criteria that we use to judge how the system is being affected by the COVID-19 pandemic. The numbers and colors given are a guideline, not a hard and fast rule. For example, if in 2 weeks our hospitalized cases go up by a factor of 1.8 to a level of 740, we will still consider that to be very concerning and would not wait until the doubling time worsens or the census tops 750.
- Hospital Surge Plans are already activated to an extent, as conditions worsen (higher COVID-19 inpatient burden, Staffing struggles, PPE concerns) the crisis care strategies of
- Does this trigger a shift to crisis care strategies and an activation of surge plans? That number is one factor. Surge plans are already activated to an extent. Increased concerns (more factors in the worrisome category) means increased amount of surge as in the next question.
- What are the surge plans and crisis care strategies that would be implemented?
 -Modifying units, such as converting beds/rooms to ICUs and negative pressure rooms
 -Expanded beds also includes surge tents
 -Flexing nursing staffing ratios
- How was the 750-patient threshold determined? Initial surge capacity of the hospitals was around 1000 beds. We figured that if we were getting close to that number, we need to take extra steps beyond the initial ones. Again, the exact number is not as important as the concept of stress on the system.
- All hospitals are impacted. We initially saw the highest degree of hospital burden in the hot spots of the county (Anaheim and Santa Ana), but as COVID-19 has become more widespread we are seeing the burden shift to hospitals based on their size, not just location.

AGENCY OPERATIONS CENTER / LOGISTICS SECTION

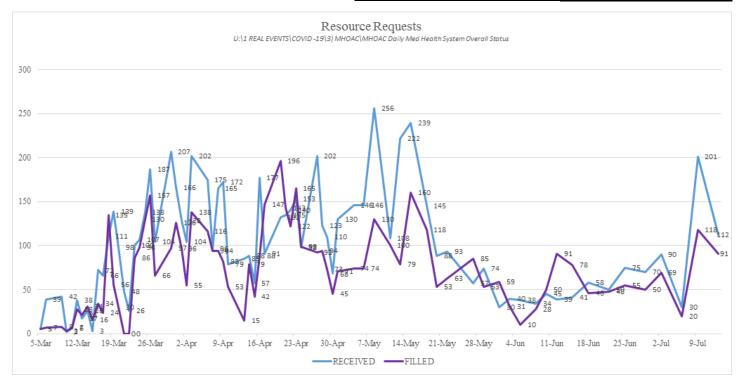
- AOC Activated at Level II; Hours of Operation Mon & Thurs 0900-1600; Warehouse Ops M-F 0900-1600
- As of 07/14/20 AOC Warehouse received a large shipment of over 150 pallets from CDPH
- SCARCE Resources: Gloves, Wipes

Total Activity									
INQUIRIES	RR RECEIVED	RR FILLED							
13,447 <mark>+118</mark>	6,794 <mark>+ 112</mark>	5,023 <mark>+91</mark>							

07/14/20

Logistics Daily Units Distributed 07-13-20								
N95 Mask	22,100							
Surgical Mask	15,800							
Gown	20,300							
Gloves	97,900							
Face Shields/Eye Protection	2,520							
Hand Sanitizer	79							
Other	29,699							
Total Units	188,398							

Inventory Report February 18 to July 13, 2020		
Medical Supply/Equipment Total Units Distributed		
N95 Mask	2,010,395	
Surgical Mask	1,019,095	
Gowns	207,325	
PPE-Suit	16,441	
Gloves	695,850	
Eye Protection	137,764	
Hand Sanitizer	207,325	
Other Items	703,367	
Total Units	4,997,562	



<u>ALTERNATE CARE SITE</u> *Site open indefinitely to support hospital/SNF decompression

Fairview (COVID-19+)		
Patient Census (as of 7/14/2020 07:30)	CURRENT	TOTAL
Orange County	13	43
LA County	2	16
Ventura County	0	1
Total patients CENSUS / TOTAL ACCEPTED	15	60
Patients Discharged		TOTAL
AMA		0
DISCHARGED		44
TRANSFERRED		0