

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

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

08/17/20

OVERVIEW OF CURRENT SITUATION (08/17/20 0830) Source: Johns Hopkins University & Medicine <https://coronavirus.jhu.edu/map.html>

Cases / Deaths
 Worldwide: 21,720,713 / 776,157
 Nationwide: 5,408,268 / 170,067
 California: 625,056 / 11,246
 Orange County: 43,925 / 810 Source: [Orange County COVID-19 Case Counts & Testing Figures](#)

ORANGE COUNTY PUBLIC HEALTH (as of 08/17/20 1000)

Orange County COVID-19 Summary* click for full details	Sat 8/15/20	Sun 8/16/20	Mon 8/17/20	Tue 8/18/20	Wed 8/19/20	Thu 8/20/20	Fri 8/21/20
Cases Reported to Date	43,367	43,709	43,925				
Deaths Reported to Date	809	810	810				
Tests Reported Today	11,515	7,822	6,907				
Cumulative Tests to Date	539,093	546,915	553,822				
*Data posted is always preliminary & subject to change. More information may become available as individual case investigations are completed. LOCAL DATA MAY BE DIFFERENT FROM THE STATE WEBSITE DATA							

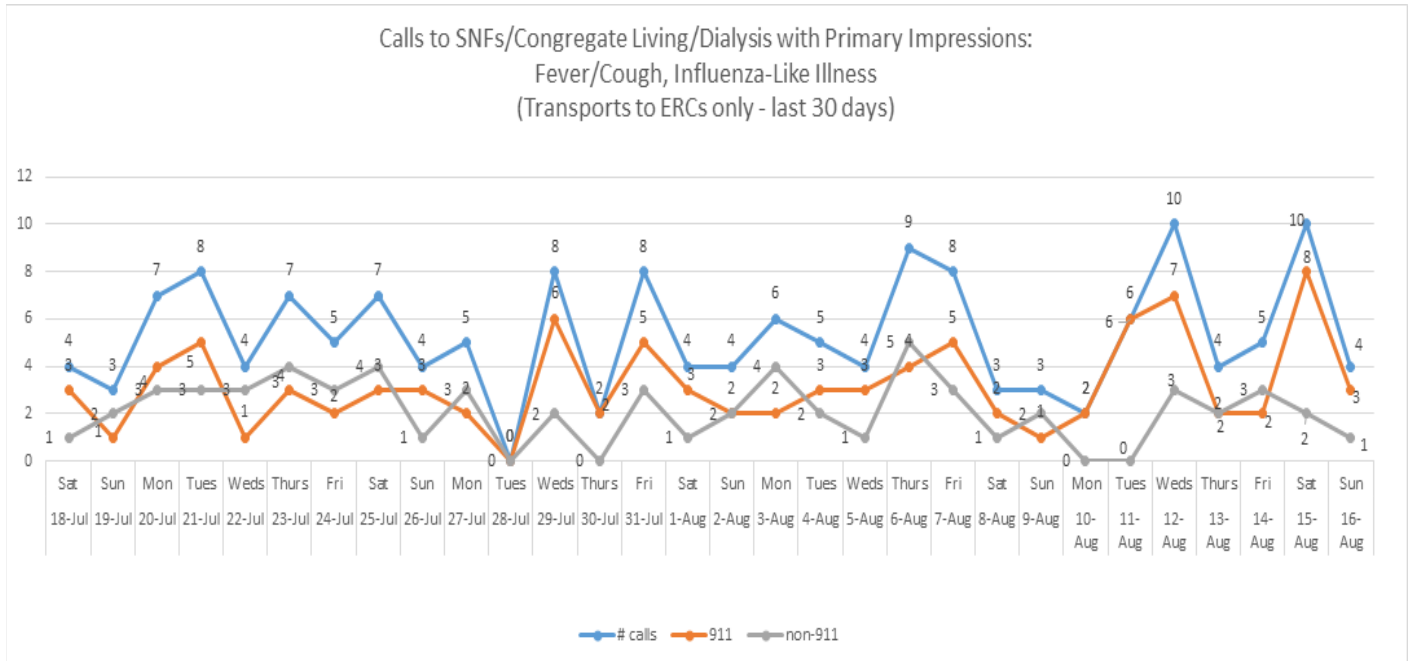
PUBLIC HEALTH REPORT (08/17/20)

- Hospitalizations continue to trend downward with the most recent report being 414 COVID patients, down from 671 one month prior. Patients in the ICU is also trending down with 132 in ICU, down from 231 one month ago.
- Based on current available data, Orange County is seeing improved metrics according to State monitoring data, including:
 - Testing volume above the threshold of 150 tests per day per 100,000, as of 08/12 at 190.
 - As of 08/12, 14 day case rate at 109 cases per 100,000 down from a high of 258 on July 10; the state target is <25 per 100,000
 - As of 08/12, testing positivity rate at 7.7%, down from a high of 14.9% on July 13; the state target is below 8%.
- The most important actions to prevent spread and reduce disease transmission are individual behaviors by the people of OC;
 - Stay home as much as possible, especially high risk persons (65 or older, or underlying health conditions)
 - 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
 - Disinfect frequently touched surfaces often

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SKILLED NURSING/ASSISTED LIVING/RESIDENTIAL CARE FACILITY – TRENDS

*Data Source: Orange County Medical Emergency Data System (OC-MEDS)



*Data Source: California Department of Public Health (CDPH)

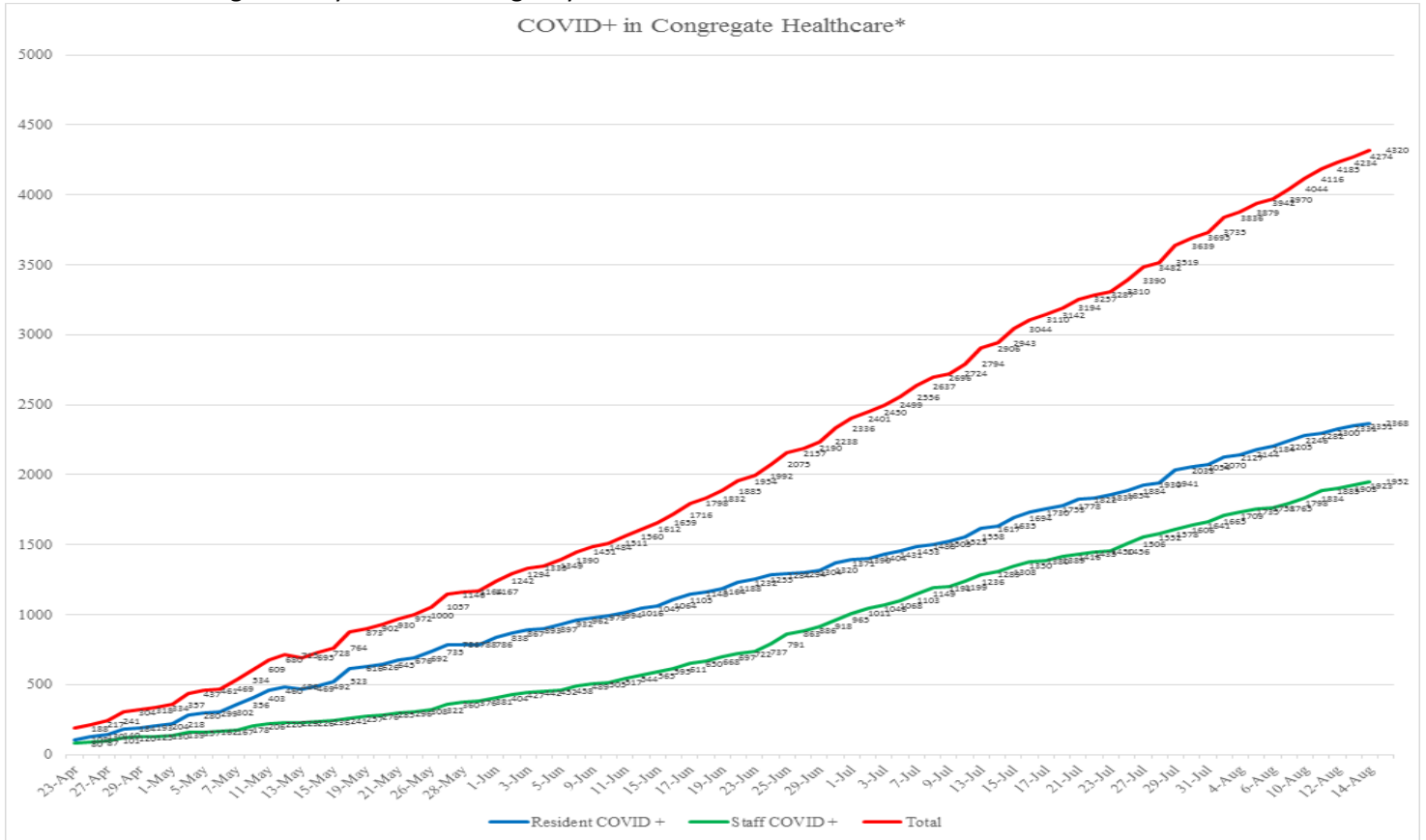
Reporting Date: 8/17/20 (73/73 SNFs reported)	Skilled Nursing Facility PPE – DAYS ON HAND*			
	0 - 3 days	4 - 7 days	8-14 days	15+ days
N95 Masks	0	5	21	47
Surgical Masks	0	3	16	54
Eye Protection	0	3	18	52
Gowns	0	3	16	54
Gloves	0	5	15	53
Alcohol-Based Hand Sanitizer	0	4	17	52

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*Data Source: Orange County Health Care Agency – Public Health



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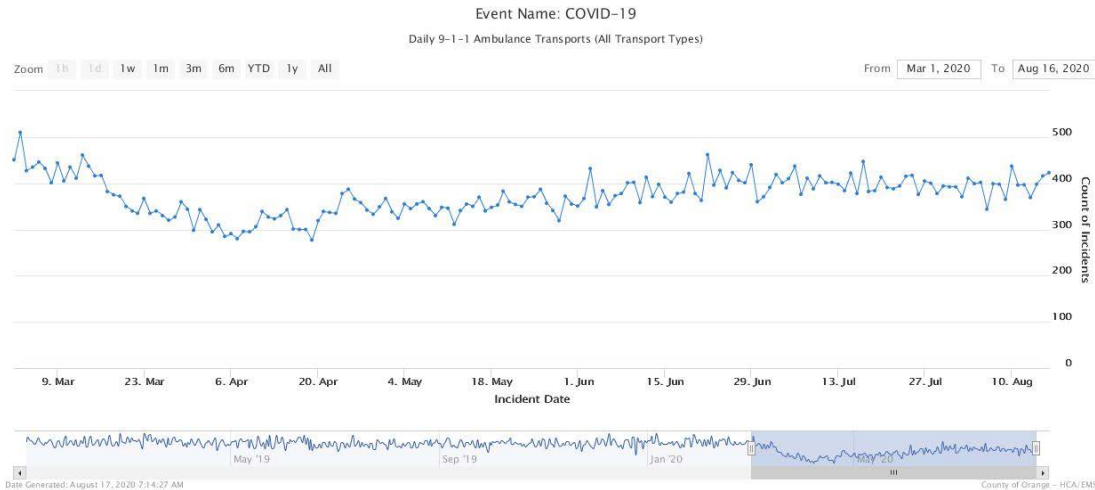
Current and Previous Facility Outbreaks (as of 8/16/20 1700)		
Facility Type by Licensing Category	#	An "Outbreak" is two (2) or more confirmed cases of COVID-19 in facility residents occurring within 14 days.
Skilled Nursing Facility	50	Advanced Rehab Center of Tustin, Alamitos West Health & Rehab, Alta Gardens Care Center, Anaheim Crest, Anaheim Healthcare Center, Anaheim Terrace, Beachside Care Center, Buena Vista Care Center, Chapman Care Center, Country Villa Plaza, Coventry Court, Crystal Cove Care Center, Flagship Healthcare 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, La Palma Nursing Center, Laguna Hills Health & Rehab, Lake Forest Nursing Center, Leisure Court Nursing Center, MainPlace Post Acute, Manor Care FV, Mesa Verde Post Acute Care Center, New Orange Hills, Newport Subacute Healthcare Center, 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, Town And Country Manor, Victoria Healthcare, Walnut Village SNF, Walnut Village Rehabilitation And Care Center, West Anaheim Extended Care, Windsor Gardens Center of Anaheim
Elderly Assisted Living	50	Acacia Villa, ActivCare Yorba Linda, Anaheim Crown Plaza, Arbor Palms Of Anaheim, Ardent Care Assisted Living, Atria Del Sol, Brookdale Anaheim, Brookdale Nohl Ranch, Brookdale San Juan Capistrano ALF, Cambridge House, Care Jeselle, Carmel Village, Crown Cove, Del Obispo Terrace, DelSol Home, Emerald Court, Golden Leisure Home, Harvest Retirement, Heathers McKinley, Heathers Wintergreen, Heritage Point, Hollybrooke Senior Living, Huntington Terrace ALF, Huntington Terrace MCU, Kaego's Richman Gardens, Kamstra Care Home, Karlton Residential, Oakmont-Capriana, Pacific Shores Laguna Hills, Pacific Shores Mission Viejo, Pacifica Royale, Park Plaza, Park Regency Assisted Living, Rowntree Gardens, San Clemente Villas By The Sea, Seacliff Assisted Living, Silverado Newport Mesa, Silverado San Juan Capistrano, Silverado Tustin Hacienda, St Francis Home, St Therese Residential Care, Sunflower Gardens, Sunrise Villa Bradford, Sunrise Yorba Linda, The Groves of Tustin, The Meridian at Anaheim Hills, The Regency, Valley View Gardens, Vivante on the Coast, Whitten Heights

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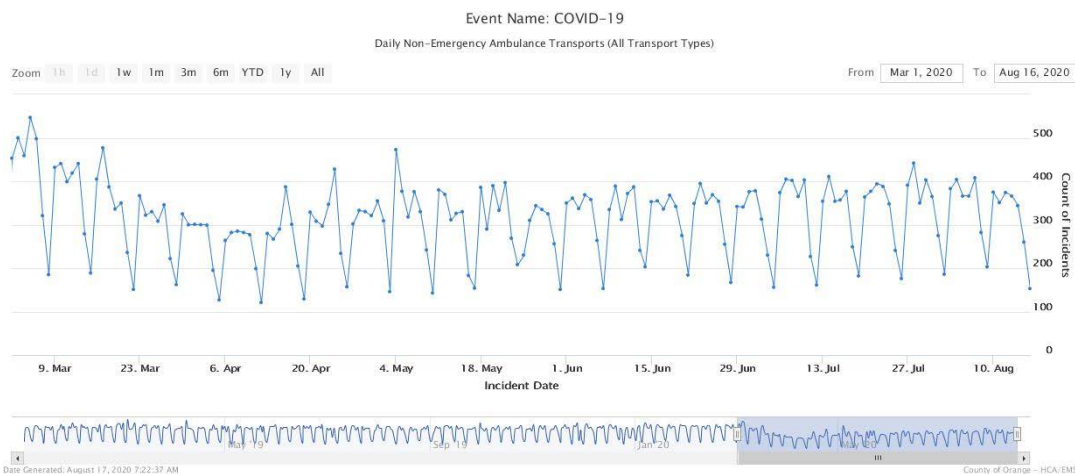
EMERGENCY MEDICAL SERVICES STATUS

*Data Source: Orange County Medical Emergency Data System (OC-MEDS)

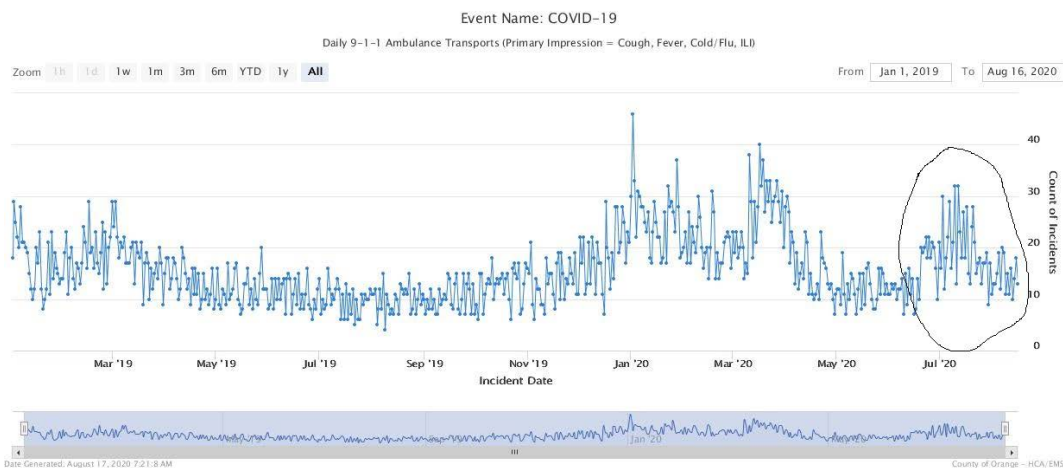
- 9-1-1 ambulance transport volume **edged a little higher over the weekend**. They are averaging about 15-20% below normal overall.



- Non-emergency ambulance transports **continued lower over the weekend**. They are averaging about 30% below normal.



- Primary Impressions of Cold/Flu/ILI by 9-1-1 EMS providers have been **slightly above baseline levels** for the last week.



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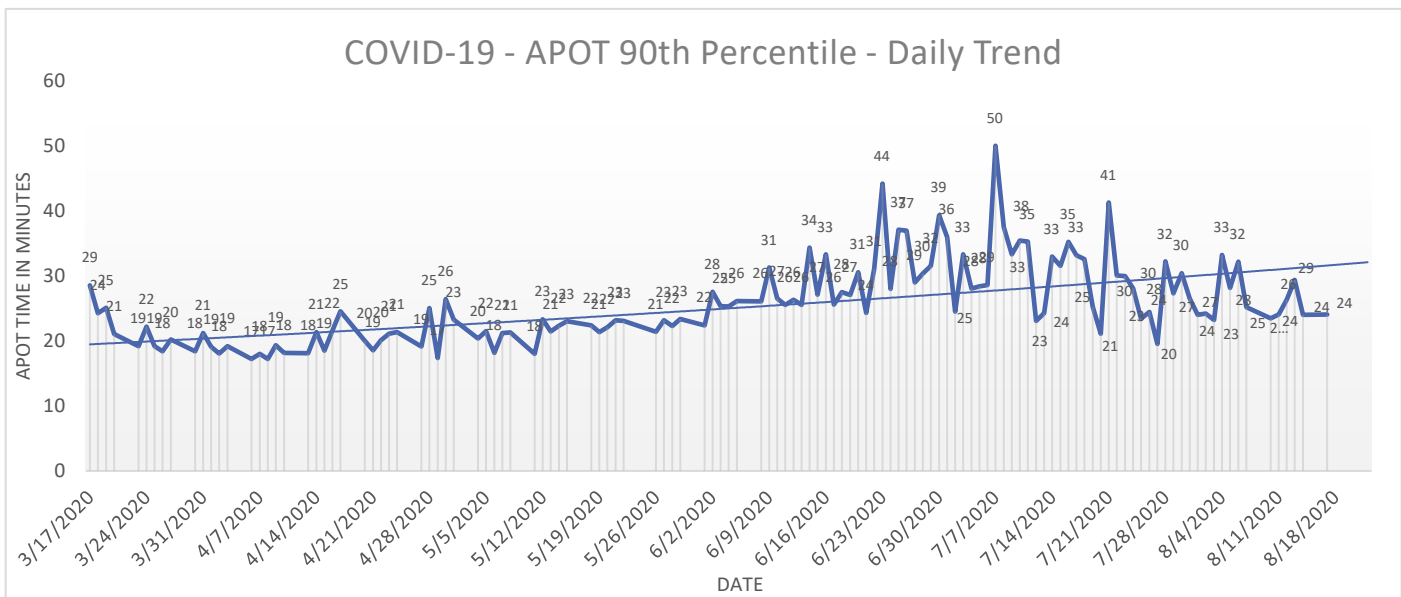
- Ambulance Patient Offload Time (APOT) is defined as the time the ambulance arrives at the receiving destination (wheels stop) to the time that the ambulance crew physically transfers the patient to the ED gurney. Last 24 hours: **Current Average APOT is: 12m12s / Current 90th Percentile APOT is: 24m08s**

The chart below displays a daily trend since the COVID-19 event began.

- Eight (8) ERCs had APOT times greater than thirty (30) minutes.
- One (1) ERC had APOT times greater than sixty (60) minutes.

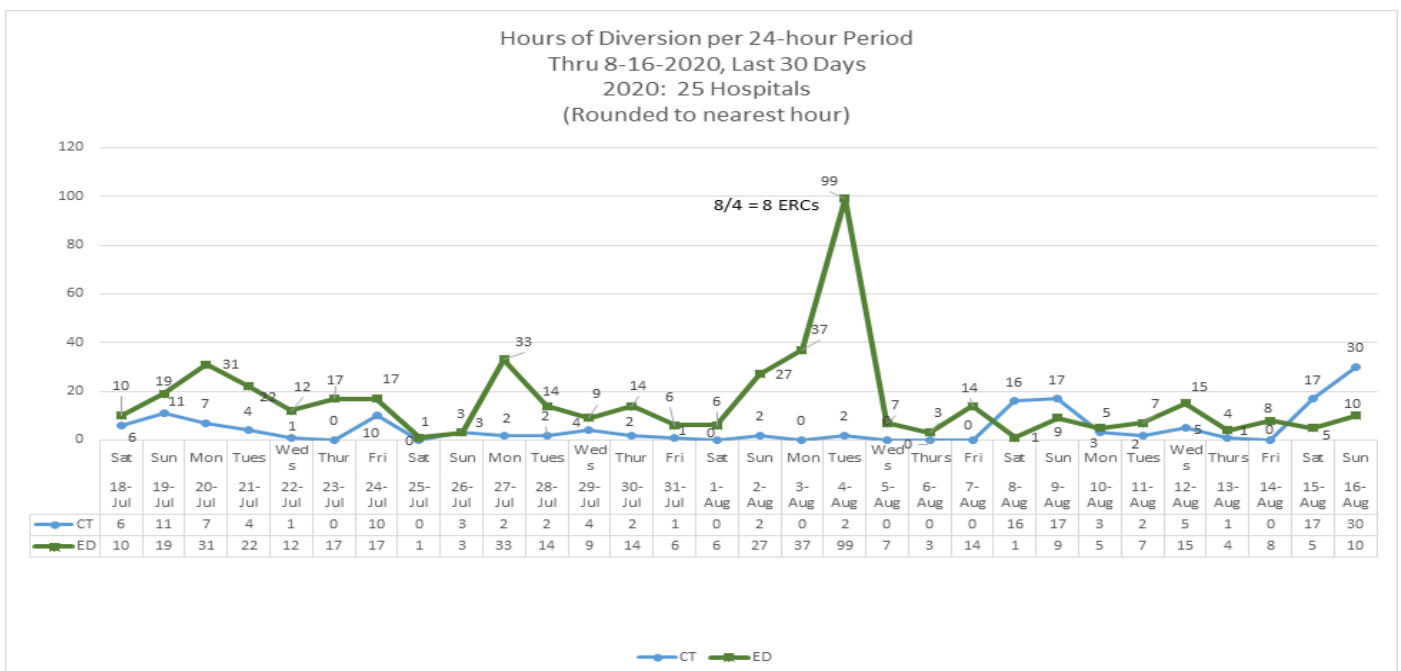
Note: a handful of ERCs were close to the 30 minute threshold, but were not over it.

*Data Source: Orange County Medical Emergency Data System (OC-MEDS)



- **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 7/18/20 – 8/16/20 below.**

*Data Source: ReddiNet



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08/17/20

(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

DATE	ALL HOSPITALS (33)						EMERGENCY RECEIVING CENTERS					
	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
7/25	3681	68%	687	201	40%	62%	3289	67%	679	199	41%	67%
7/26	3657	71%	661	204	39%	60%	3267	69%	639	202	40%	65%
7/27	3567	68%	640	203	40%	58%	3195	66%	617	200	41%	63%
7/28	3651	69%	626	204	37%	65%	3285	68%	607	201	38%	71%
7/29	3739	71%	592	189	38%	57%	3373	69%	574	188	39%	62%
7/30	3697	70%	593	191	34%	56%	3329	69%	575	190	35%	60%
7/31	3693	71%	546	169	34%	57%	3324	69%	531	169	35%	61%
8/1	3681	70%	554	171	34%	57%	3319	69%	537	171	35%	61%
8/2	3531	68%	555	175	35%	54%	3180	67%	537	175	36%	58%
8/3	3476	66%	539	167	34%	54%	3132	65%	522	167	35%	58%
8/4	3615	68%	536	172	34%	54%	3267	67%	517	172	35%	58%
8/5	3597	67%	517	171	36%	56%	3238	66%	501	171	37%	60%
8/6	3553	66%	511	177	34%	64%	3196	65%	495	175	35%	68%
8/7	3474	68%	491	167	32%	63%	3103	66%	470	165	33%	67%
8/8	3091	61%	487	163	43%	66%	2726	59%	466	161	44%	70%
8/9	3276	65%	468	152	33%	64%	2918	64%	447	150	34%	67%
8/10	3237	64%	441	141	36%	64%	2888	63%	421	139	37%	68%
8/11	3432	67%	440	141	32%	63%	3075	66%	421	140	33%	67%
8/12	3491	68%	438	143	29%	65%	3128	66%	418	142	30%	69%
8/13	3483	68%	436	152	31%	56%	3114	67%	416	150	32%	60%
8/14	3459	69%	434	138	31%	57%	3084	68%	408	137	32%	62%
8/15	3496	70%	422	133	30%	57%	3329	69%	419	133	30%	57%
8/16	3358	68%	414	132	29%	56%	3195	68%	411	132	29%	55%

*Data Source: California Department of Public Health (CDPH) – Snowflake server

*HHS significantly changed [reporting requirements](#) for hospitals effective 07/22/20.

Current data is posted on the CDPH website at:

<https://public.tableau.com/views/COVID-19HospitalsDashboard/Hospitals?%3Aembed=y&%3AshowVizHome=no>

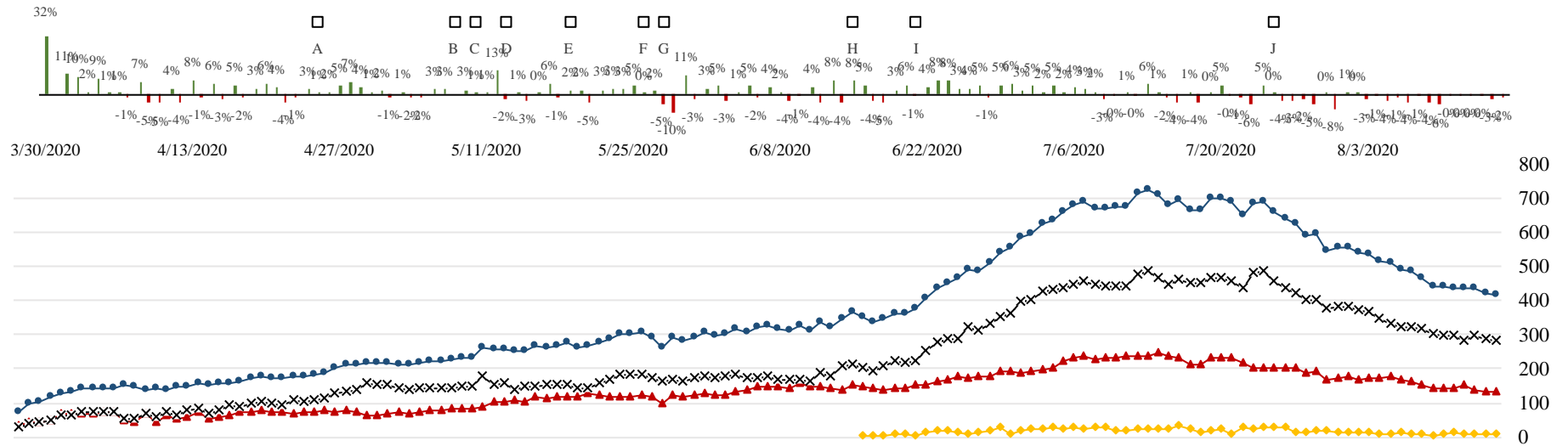
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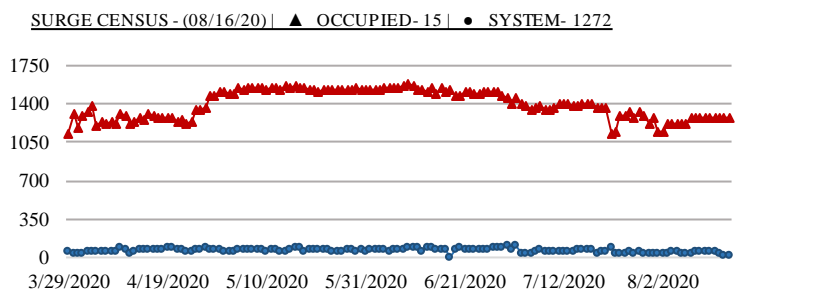
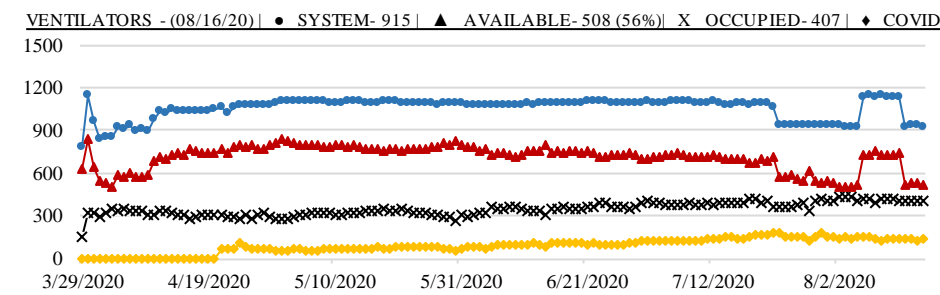
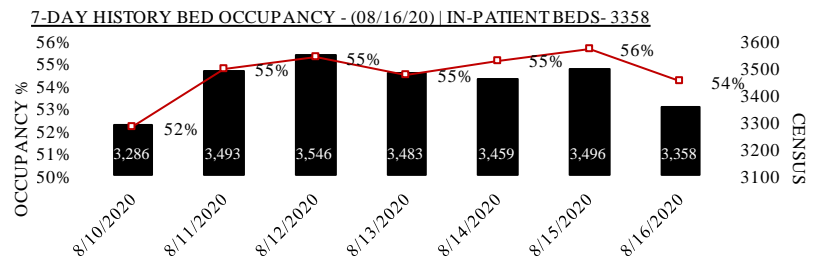
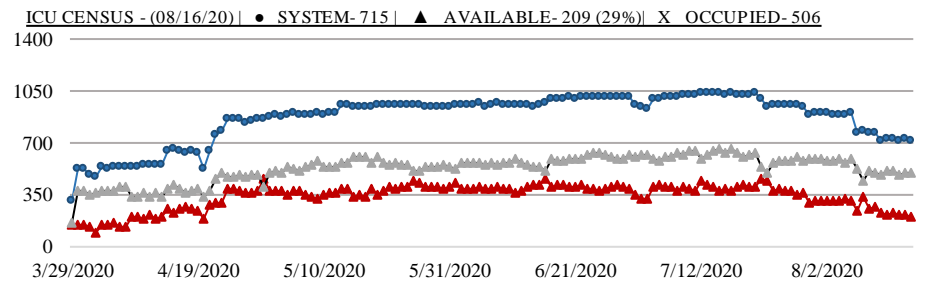
08/17/20

COVID 19 ORANGE COUNTY HOSPITAL SYSTEM DATA (CA SNOWFLAKE SERVER)(03/29/20 - 08/16/20) | 33 ACUTE CARE FACILITIES REPORTING

NON-ICU - 08/16/20 X			ICU - 08/16/20 ▲			ED OVERFLOW - 08/16/20 ◆			SYSTEM - 08/16/20 ●			1 DAY +/- (08/15/20)			3 DAY +/- (08/13/20)			7 DAY +/- (08/09/20)		
282	-7	-2.4%	132	-1	-0.8%	8	-1	-11.1%	414	-8	-1.9%	414	-8	-1.9%	436	-22	-5.0%	468	-54	-11.5%
▼			▼			▼			▼			▼			▼					



A.Face Covers Mandatory, B. Cinco de Mayo, C. OC Beaches Open, D. Mom's Day, E. OC Parks Parking Open, F. OC Stage 2 Approved, G. Memorial Day, H. Re-open entertainment, etc., I. CA Gov. Mask Mandate, J. Changes to data collection, Federal

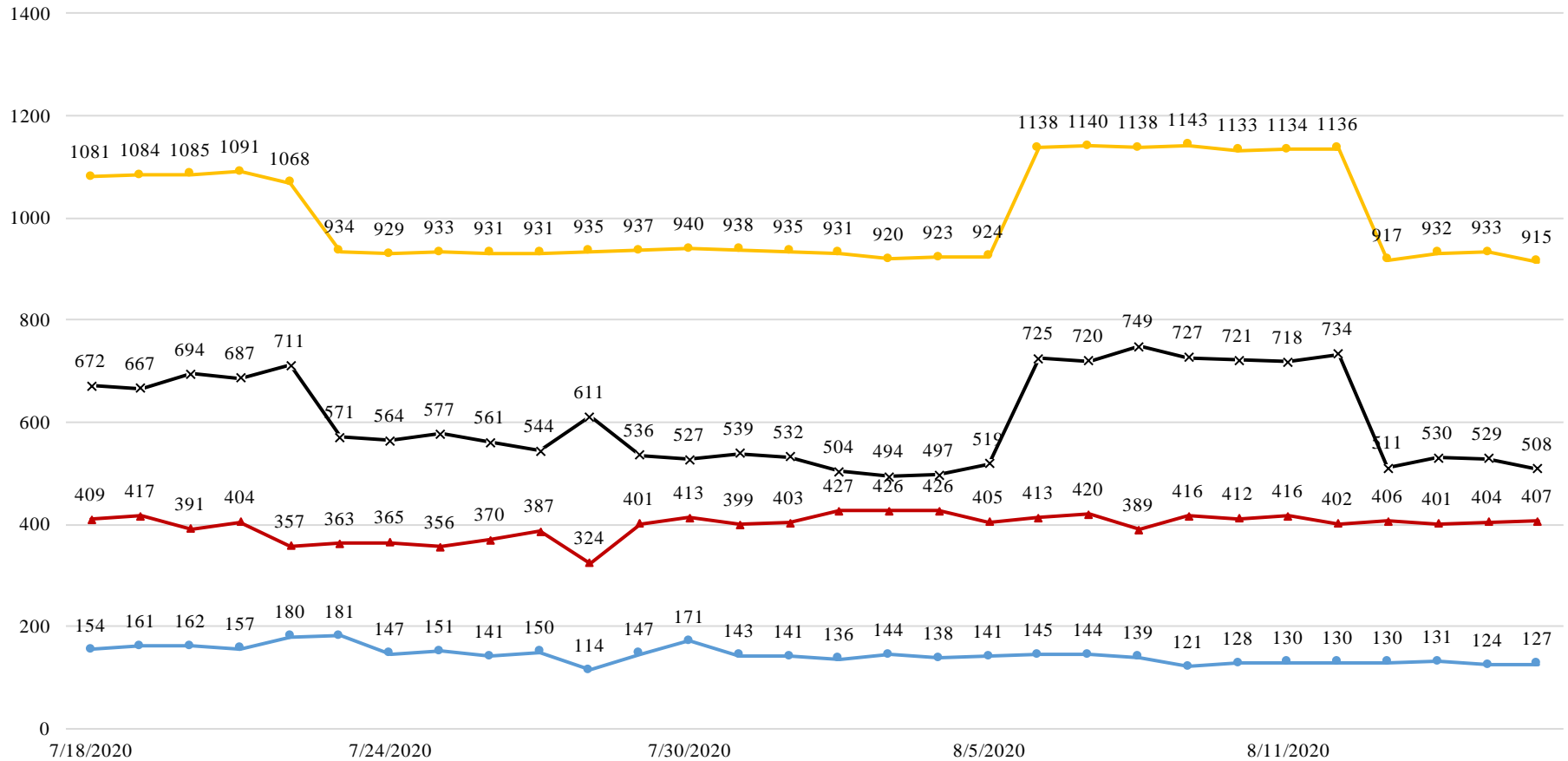


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08/17/20

COVID 19 ORANGE COUNTY HOSPITAL SYSTEM DATA (CA SNOWFLAKE SERVER)
VENTILATORS IN USE (07/18/20 - 08/16/20) | 33 ACUTE CARE FACILITIES REPORTING



DATE	7/18	7/19	7/20	7/21	7/22	7/23	7/24	7/25	7/26	7/27	7/28	7/29	7/30	7/31	8/1	8/2	8/3	8/4	8/5	8/6	8/7	8/8	8/9	8/10	8/11	8/12	8/13	8/14	8/15	8/16
COVID+ ●	154	161	162	157	180	181	147	151	141	150	114	147	171	143	141	136	144	138	141	145	144	139	121	128	130	130	130	131	124	127
SYSTEM OCC ▲	409	417	391	404	357	363	365	356	370	387	324	401	413	399	403	427	426	426	405	413	420	389	416	412	416	402	406	401	404	407
SYSTEM AVL X	672	667	694	687	711	571	564	577	561	544	611	536	527	539	532	504	494	497	519	725	720	749	727	721	718	734	511	530	529	508
SYSTEM TTL ◆	1081	1084	1085	1091	1068	934	929	933	931	931	935	937	940	938	935	931	920	923	924	1138	1140	1138	1143	1133	1134	1136	917	932	933	915

COVID+ = CONFIRMED AND SUSPECTED PATIENTS ON A VENTILATOR

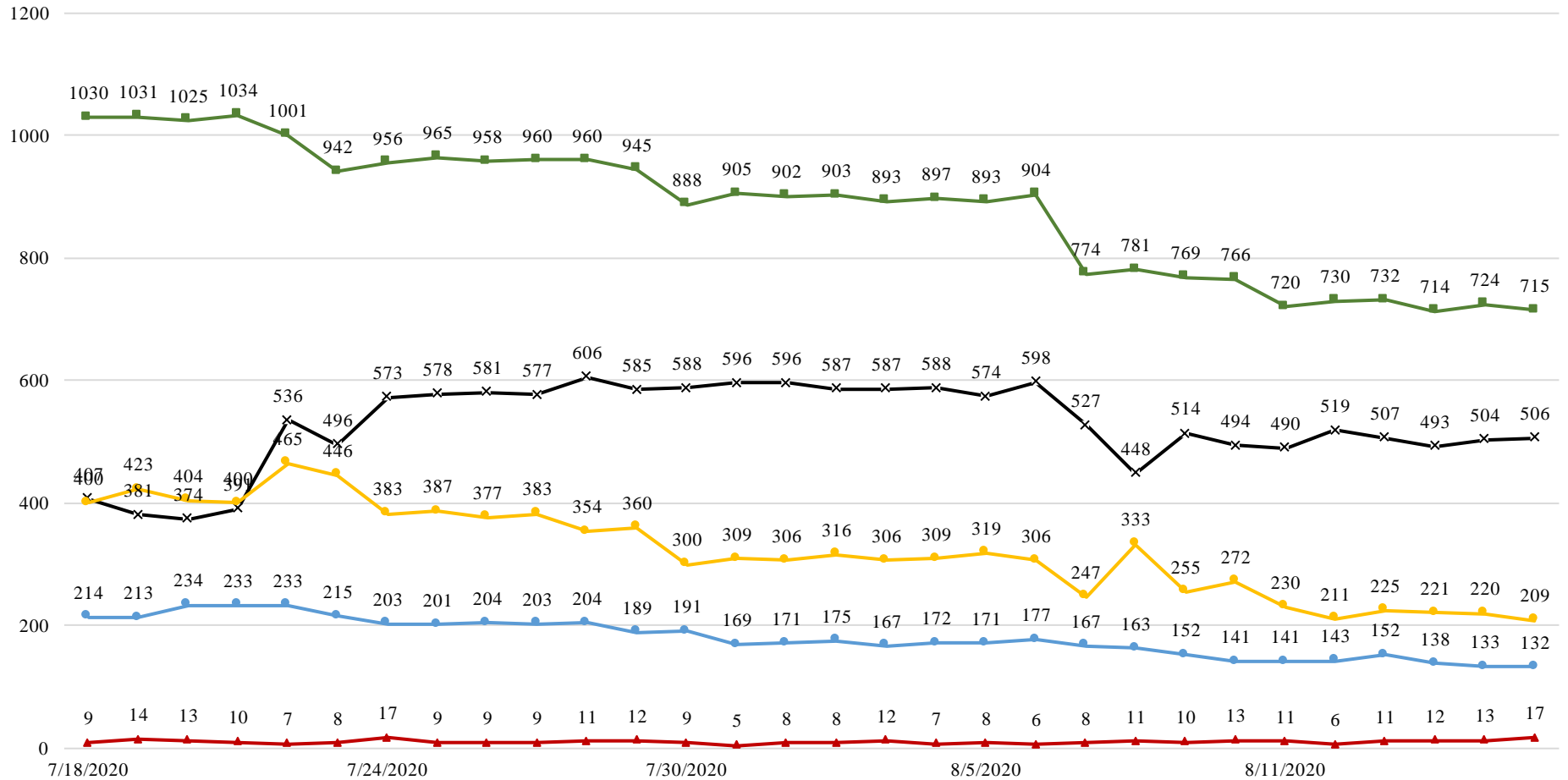
*OCC = VENTILATORS IN USE, INCLUDING COVID+ PATIENTS AND OTHER VENT PATIENTS

**AVL = AVAILABLE NON SURGE ICU BEDS

***TTL = TOTAL NON SURGE ICU BEDS

****CDPH updated how PPE and ventilator supplies are counted on 8/13/20.**

**COVID 19 ORANGE COUNTY HOSPITAL SYSTEM DATA (CA SNOWFLAKE SERVER)
ICU BEDS (07/18/20 - 08/16/20) | 33 ACUTE CARE FACILITIES REPORTING**



DATE	7/18	7/19	7/20	7/21	7/22	7/23	7/24	7/25	7/26	7/27	7/28	7/29	7/30	7/31	8/1	8/2	8/3	8/4	8/5	8/6	8/7	8/8	8/9	8/10	8/11	8/12	8/13	8/14	8/15	8/16
CONFIRMED	214	213	234	233	233	215	203	201	204	203	204	189	191	169	171	175	167	172	171	177	167	163	152	141	141	143	152	138	133	132
SUSPECTED	9	14	13	10	7	8	17	9	9	9	11	12	9	5	8	8	12	7	8	6	8	11	10	13	11	6	11	12	13	17
OCCUPIED	407	381	374	391	536	496	573	578	581	577	606	585	588	596	596	587	587	588	574	598	527	448	514	494	490	519	507	493	504	506
SYSTEM AVL	400	423	404	400	465	446	383	387	377	383	354	360	300	309	306	316	306	309	319	306	247	333	255	272	230	211	225	221	220	209
SYSTEM TTL	1030	1031	1025	1034	1001	942	956	965	958	960	960	945	888	905	902	903	893	897	893	904	774	781	769	766	720	730	732	714	724	715

*AVL = AVAILABLE NON SURGE ICU BEDS. PRIOR TO 7/22 DEFINITION DID NOT EXCLUDE NONSURGE.

**TTL = TOTAL NON SURGE ICU BEDS. PRIOR TO 7/22 DEFINITION DID NOT EXCLUDE NONSURGE.

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*HHS significantly changed [reporting requirements](#) for hospitals effective 07/22/20.

**CDPH updated how PPE and ventilator supplies are counted on 8/13/20. Count of PAPRs are no longer available.

This table has been updated based on data provided by hospitals using the new HHS data standards

Reporting Date: 8/16/20* (33/33 ACHs reported)	Acute Care Hospital PPE / Ventilator Supplies – DAYS ON HAND					
	30 days +	15-30 days	7-14 days	4-6 days	0-3 days	Not Reported
Ventilator Supplies**	2	2	11	2	1	15
N95 Masks**	13	7	5	0	0	8
Surgical Masks**	12	4	5	1	0	11
Face Shields**	10	5	6	1	0	11
Gloves**	6	11	6	0	0	10
Gowns**	8	10	5	1	1	8

*Data Source: ReddiNet

Reported Operational Status Acute Care Hospitals w/ Emergency Departments			
24 / 25 Reporting	Green	Yellow	Orange
	13	10	1

Reported Service Category Status Acute Care Hospitals w/ Emergency Departments (#25)		
Status Item	Yes	%
Command Center Activated	15	60%
Surge Plan Activated	16	64%
Canceled Procedures/Services	4	16%
Supply Issues	7	28%
CDPH Flex	13	52%
Increased Morgue Capacity	15	60%

- 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:
 - 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			
CRITERIA	STATUS		
	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

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Hospital Criteria for shifting to Crisis Care Strategies			
8/17/20			
CRITERIA	STATUS		
	Normal Operations	Modified Operations Under Control	Modified Operations Assistance Needed
Rate of change in Hospitalized COVID-19 patients (doubling time over last 7 days)	102 days		
Absolute COVID-19 Census in the hospital	414		
Hospital census as a percentage of capacity	68%		
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)
- 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
- SCARCE Resources: Gloves, Wipes

Total Activity		
INQUIRIES	RR RECEIVED	RR FILLED
14,143 +51	7,439 + 41	5,714 +42

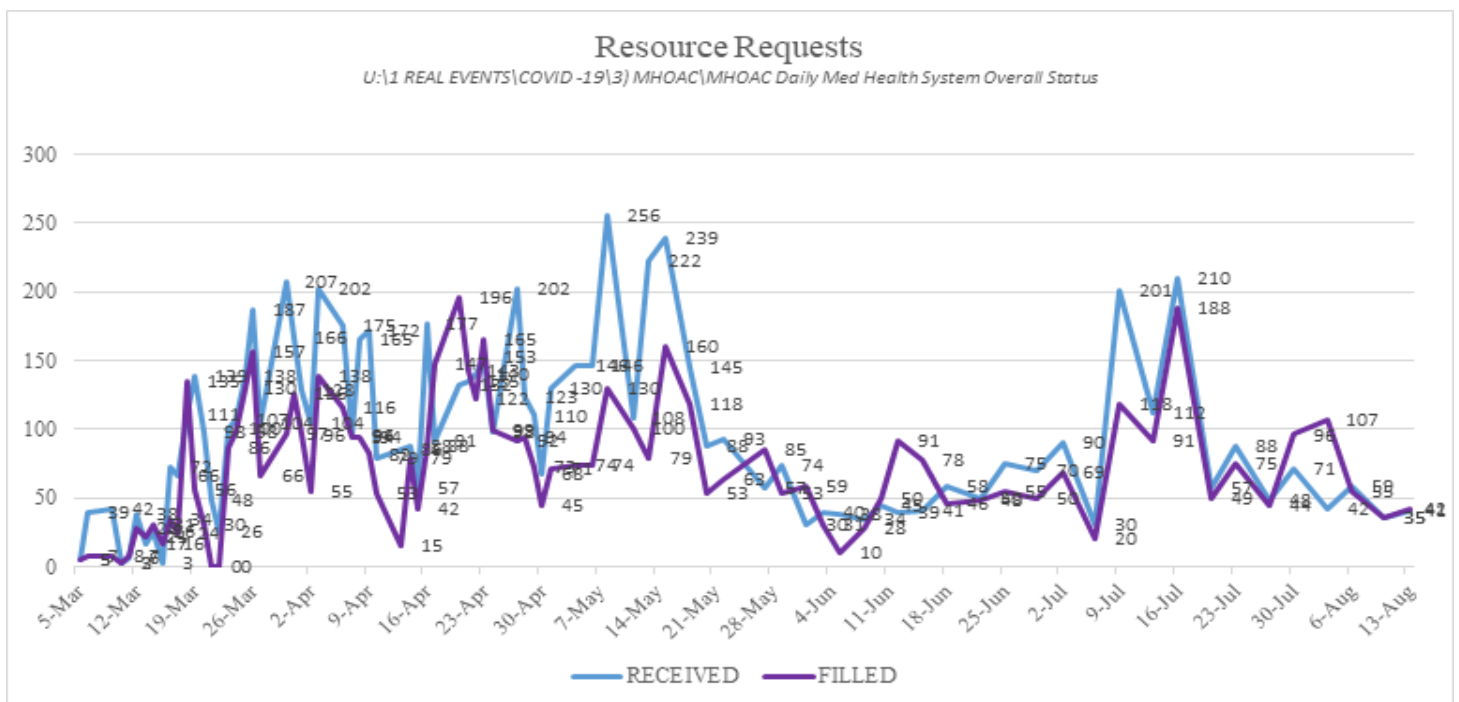
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Logistics Daily Units Distributed 08-13-20	
N95 Mask	1,005,380
Surgical Mask	6,500
Gown	9,750
Gloves	15,300
Face Shields/Eye Protection	600
Hand Sanitizer	200
Other	31,135
Total Units	1,068,865

Inventory Report February 18 to August 14, 2020	
Medical Supply/Equipment Total Units Distributed	
N95 Mask	4,116,120
Surgical Mask	1,329,675
Gowns	1,246,946
PPE-Suit	17,645
Gloves	1,725,550
Eye Protection	238,031
Hand Sanitizer	297,706
Other Items	762,597
Total Units	9,734,270



ALTERNATE CARE SITE

*Site open indefinitely to support hospital/SNF decompression

*Data Source: ReddiNet

Fairview (COVID-19 +)		
Patient Census (as of 8/17/2020 07:30)	CURRENT	TOTAL
Orange County	4	64
LA County	6	30
Ventura County	0	1
Total patients CENSUS / TOTAL ACCEPTED	10	95
Patients Discharged		TOTAL
AMA		4
DISCHARGED		81
TRANSFERRED		0