Tri-County Health Department
Board of Health Meeting
May 6, 2020

John M. Douglas, Jr, MD
Executive Director
Update on Transition to Governor’s Safer at Home Orders for Adams and Arapahoe Counties
Transition to Governor’s Safer at Home Orders

- TCHD Public Health Orders April 27 extended Governor’s Stay at Home Order for 12 days through May 8
- Order allowed non-critical businesses to provide curb-side pick-up
- Progress over past 10 days
  - Daily testing increasing
    - Can now be measured at county level
  - Capacity planning for contact notification increasing
  - Case numbers flat/slightly increasing
    - Likely due to increased testing, needs to be followed with caution
  - Continued decline in hospitalizations
  - Better guidance for businesses developed by CDPHE with local information from TCHD (eg, toolkit, FAQs)
For Immediate Release: May 5, 2020  
Contact: Samantha Decker Public Information Officer, Office: 303-783-7155 or sdecker@tchd.org

Tri-County Health Department Moving to Governor Polis’ Safer at Home May 9  
Businesses will be able to open at lower density and following best practices

Tri-County Health Department (TCHD) along with other Denver Metro health departments will allow its Stay at Home order to expire May 8 at midnight for Adams and Arapahoe counties. With that expiration, each of Tri-County Health Department’s counties—Adams, Arapahoe and Douglas counties—will be under the State’s current Safer at Home order. This means that on May 9, Critical Businesses can remain open, and many non-Critical Businesses can begin to open with some restrictions according to the state’s Safer-at-Home order.

“We want to thank our entire community for the unprecedented effort made by so many to enhance our social distancing and allow us to make our communities safer during the COVID-19 epidemic: this has clearly involved social, psychological, and economic hardship for many. While COVID-19 will continue to be with us for the foreseeable future, our hospitals now have sufficient capacity and medical equipment and we have the support systems in place to deliver the best healthcare we can if a surge should take place.” said John M. Douglas, Jr., MD, Executive Director of Tri-County Health Department. “I am grateful for the sacrifices that our community has made to slow the spread of COVID-19 and we must remain vigilant to continue that trend and keep our communities safe while we gradually re-open our businesses.”
Daily Trend of COVID-19 Hospitalizations and ICU Admissions

Does not include hospitalizations after initial case investigation

Counts of hospitalizations include ICU admissions.
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[Bar chart showing hospitalization trends by county from March 3 to May 7, with predominance in Arapahoe County.]
Daily COVID-19 Cases by County

Number of Cases

County
- (All)
- Adams
- Arapahoe
- **Douglas**
- Location Pending

Day of Report Date

- 3/6/2020
- 3/11/2020
- 3/16/2020
- 3/21/2020
- 3/26/2020
- 3/31/2020
- 4/5/2020
- 4/10/2020
- 4/15/2020
- 4/20/2020
- 4/25/2020
- 4/30/2020
- 5/5/2020

**Douglas**
Daily Trend of COVID-19 Hospitalizations and ICU Admissions

Does not include hospitalizations after initial case investigation

Counts of hospitalizations include ICU admissions

Measure Names
- Hospitalized
- ICU

County
- (All)
- Adams
- Arapahoe
- Douglas
- Location Pending

TCHD Website, 5/5/20
*Testing result for previous 7 days are most likely incomplete based on time necessary to process and report test results.*
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Daily Trend of COVID-19 Testing
in Douglas County

Average Number of Tests (by week)
in Douglas County

- April 26-May 2
  - Completed Tests: 210
  - Needed Test (based on testing goal): 219
- April 19-April 25
  - Completed Tests: 141
  - Needed Test (based on testing goal): 288
- April 12-April 18
  - Completed Tests: 57
  - Needed Test (based on testing goal): 372
- April 5-April 11
  - Completed Tests: 64
  - Needed Test (based on testing goal): 365

*Testing result for previous 7 days are most likely incomplete based on time necessary to process and report test results.
Daily Trend of COVID-19 Positivity Data and Daily Tests

Counties:
- (All)
- Adams
- Arapahoe
- Douglas

Measure Names:
- Total # Positive
- Total Tests

Testing Date [2020]

Number of Tests

Positivity

TCHD Website, 5/5/20
Next Steps in Testing

• Tracking on daily counts of testing by county
• Assess current/near future testing capacity
  • Determine current sites, particularly for community testing
  • Assess current and possible future # tests/day
  • Determine if additional testing sites need to be identified, created
• Assess communities who may need additional testing
  • Eg, high rates of positive tests with relatively low overall testing per capita
  • Testing need identified by contact notification
• Social marketing about
  • Testing criteria (to reverse earlier messaging not to test)
  • Availability
  • Eg, press conference with Aurora and Arapahoe Town Hall 5/7
Next Steps in Contact Notification

• Finalize internal structure to allow us to train, onboard, deploy, and supervise estimated 270 new staff (estimated 92 for Adam, 143 Arapahoe, 32 Douglas)

• Identify sources of staff (eg, redeployed from TCHD, volunteers, newly hired)

• Identify resources to hire new staff (eg, possible funds from county CARES Act allocation in Adams and Arapahoe Counties)
Enhancing Use of Face Coverings by the Public
Public Health Order for Face Coverings: Pros

• Use of non-medical grade face coverings is biologically plausible as a means of reducing viral transmission based on laboratory studies.

• Some belief that in SE Asian countries where they are widely used, they may have helped control the COVID epidemic but hard to tease out impact from other efforts.

• Modeling data by CU School of Public Health suggests that 50% use of face coverings that were 50% effective (a reasonable estimate based on lab studies) could, even with imperfect use, reduce infectiousness from asymptomatic persons by 13% and could thus be an important component of allowing us to relax social distancing measures and re-open businesses.

• Some communities (and some businesses) believe that conveying the importance of face masking as a legal order would enhance compliance and help make it more of a social norm.

• In that use of face coverings is believed to reduce transmission more than acquisition, mandated use could help protect workers (who are already required to wear face coverings) from members of the public (who are not).
  • This disparity was cited as a concern during our assessment of the recent outbreak among employees at the Walmart in Aurora which resulted in 11 cases and 3 deaths.

• Representatives of communities of color have noted that “mask wearing” by their members, especially young men, could be stigmatizing and attract attention of law enforcement, creating a disincentive to wear them unless there was a requirement to do so.

• Denver and Boulder plan have enacted such orders and doing so in more communities would enhance consistency. (At this point, Jefferson and Broomfield considered but do not plan on issuing orders.)
Public Health Order for Face Coverings: Cons

• Despite biologic plausibility, no community-based studies actually proving their effectiveness.
• A number of communities have enacted ordinances and public health orders requiring use of face coverings but there is no evidence yet of impact of these measures.
• The use of public health orders have become politicized. There is evidence of “public health order fatigue” among some members of the public and some indication that ordering a potentially useful step such as face covering would lead some who might otherwise be inclined to use them not to do so as an act of defiance.
• There is not a clear approach for enforcement. The business manager would be the first line of enforcement (as in “no shoes, no shirt, no mask, no service”) but support would be needed from other governmental entities (eg, public health, licensing and code enforcement, and law enforcement).
• Having orders in only some but not all communities in a county creates public confusion.
Public Health Order for Face Coverings:
Summary Considerations

• Given pros and cons, TCHD had been considering a two-pronged approach:
  • (1) a proactive social marketing and public education campaign in coordination with other LPHAs and with county governments
  • (2) an “opt-in” approach for those jurisdictions requesting such.

• However, over past week, EH staff conducted assessments of degree of use of face coverings at retail facilities across our 3 counties during busy times of the day, to gather baseline data.
  • Assessments of 48 stores (3000 persons) indicated high degree of compliance
  • Overall 77% of persons observed wearing face coverings, including 84% in Adams County, 74% in Arapahoe County, and 75% in Douglas County, and, among the cities who requested orders, 86% in Westminster, 80% in Northglenn, and 76% in Aurora.

• Given these new findings and the uncertainty as to how much better than 75% compliance we could get with a somewhat hard to enforce public health order, TCHD thinks it may be most appropriate to
  • enhance public education/social marketing efforts
  • develop a sustainable monitoring approach
  • hold on municipality-specific public health orders pending further evidence of their need
Efforts by TCHD to Promote Use of Face-Coverings/Masks

• Doing a campaign with all five Metro Denver public health departments and Larimer County.

• Campaign includes partner resources through our TCHD cities and counties and hospital partners.

• The campaign will utilize social media, newsletters, digital advertising, local cable etc.

• Goals:
  • Promote all prevention messages with an emphasis on masks
  • Normalize use of face coverings as part of the “new normal”
  • Emphasize benefit in protecting others
  • Clarify NOT medical-grade masks
Questions