



The COVID Pandemic: Milestones, Achievements, and Lessons Learned

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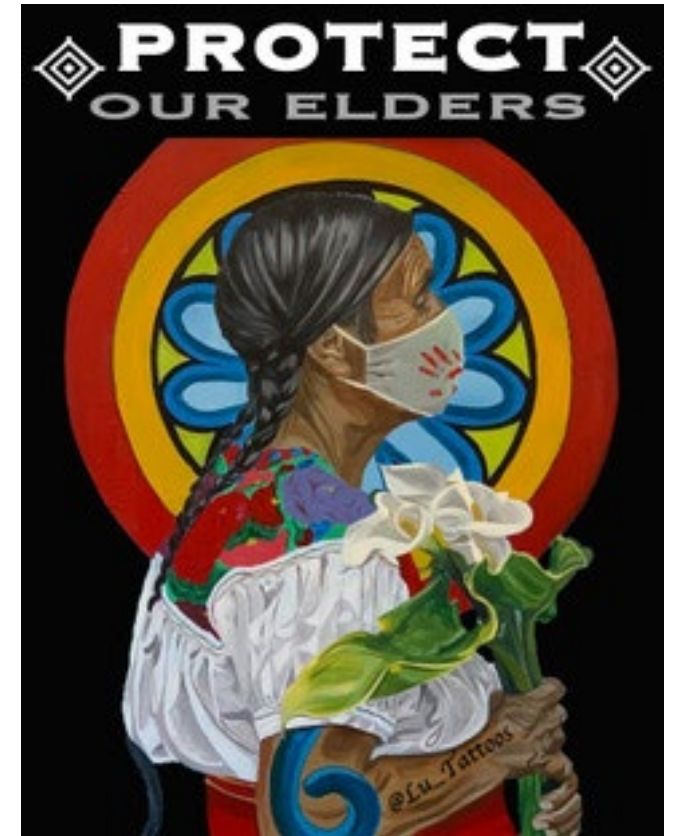


sonoma county
DEPARTMENT OF HEALTH SERVICES

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Overview

- **Cumulative impacts of COVID-19**
- **Intervention strategies**
 - Broad-level interventions
 - Health orders
 - Widespread communications around mitigation measures
 - Community partnerships
 - Innovative strategies and investments
 - Hard work by dedicated County teams
 - Vaccination
- **Current state of COVID-19, lessons learned and plans moving forward**



Raizes Collective Artist Campaign

Global Impacts of COVID-19

COVID-19 has caused more than **6.4 million** deaths worldwide and **1.03 million** deaths in the U.S.

- More people have died from COVID-19 than from AIDS or the 1918 flu pandemic
- The U.S. has observed **largest drop in life expectancy since World War II**
- There have been a disproportionate number of deaths among people of color

United States

- 91.1 million cases
- 1.03 million deaths

California

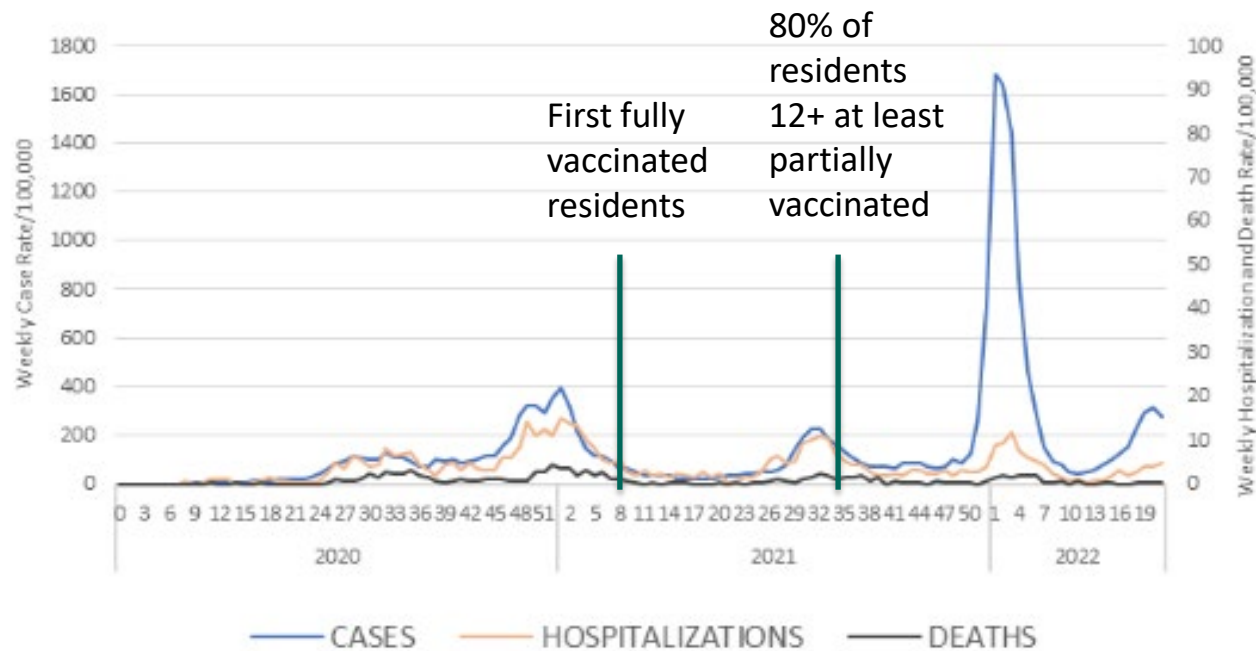
- 10.7 million cases
- 93,613 deaths

Sonoma County

- 102,776 cases
- 500 deaths

COVID-19 in Sonoma County

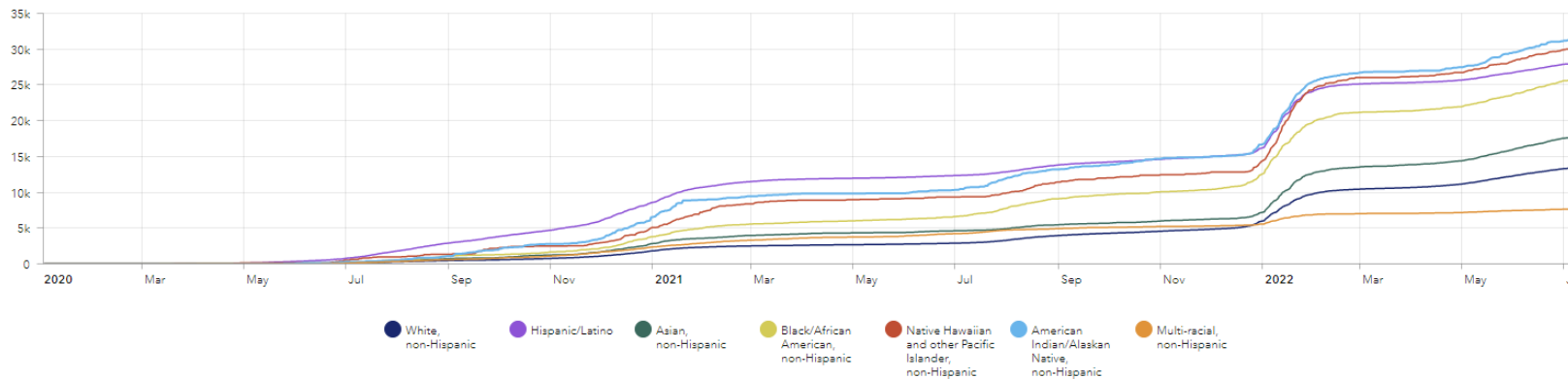
Rate of Cases, Hospitalizations and Deaths by Week
Sonoma County, 2020 - Present



- With the **9th highest vaccination rate** in the State, Sonoma County has experienced
 - **20% fewer cases** per 100K residents than California overall
 - **57% fewer deaths** per 100K than California overall

Inequitable Infection Risks

Cases per 100,000 population by Race/Ethnicity, Over all Time

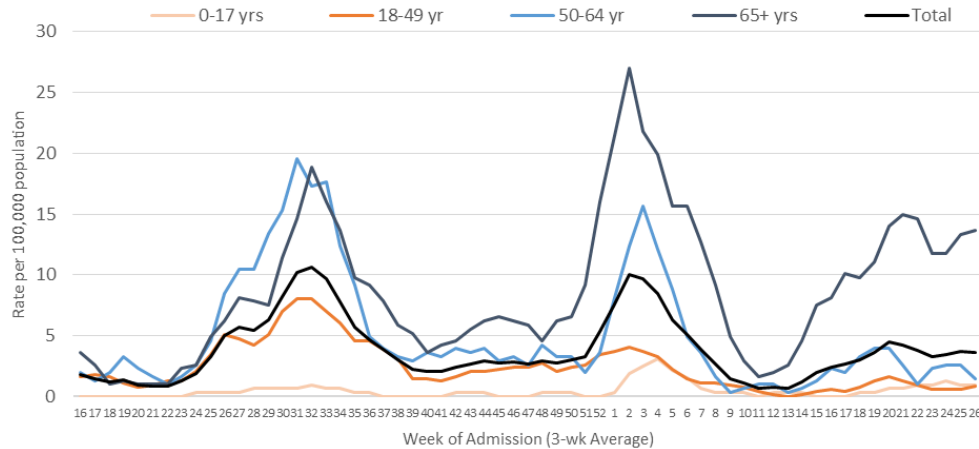


- American Indian/Alaskan Native, Pacific Islander, Latinx and Black communities experienced the highest rates of COVID-19
- **Essential workers, residents of color, and residents living in the lowest quartile of the Healthy Places Index have experienced disproportionately high case rates**
- Latinx residents have accounted for 43% of all cases while representing 27.3% of the population

COVID-19 Hospitalizations

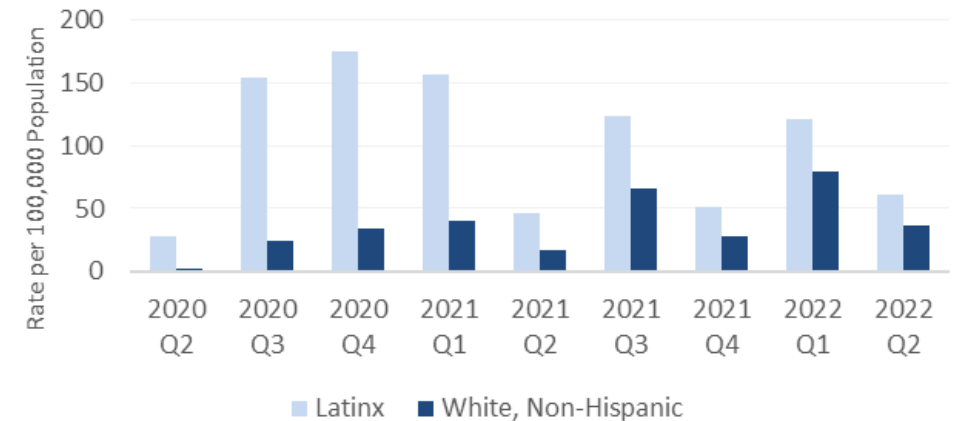
Hospitalization rates by age group

Hospitalization Rates by Age Group
Sonoma County, 3-week rolling average, 2020-2022



Age adjusted hospitalization rates by race/ethnicity

Age-adjusted Rates by Quarter, Selected
Race/Ethnicities



- **65+ year-olds have experienced the highest rates of hospitalizations**
 - 50- to 64-year-olds had a similar age-specific hospitalization rate during the Delta wave
- **Latinx residents have been hospitalized at higher rates** than white, non-Hispanic residents, adjusting for age

How did Sonoma County respond?

Our response helped prevent infection, promote equity, and preserve lives:

- Broad-level interventions
 - Joint and local health orders
 - Widespread communications around mitigation measures
- Community partnerships
- Innovative strategies and investments
- Hard work by dedicated County teams
- Vaccination

Joint and Local Health Orders

- The first health order limiting large gatherings was issued March 13, 2020, with the first shelter-in-place order commencing March 17, 2020.
- The County issued a total of 36 health orders focused on the following:
 - Mitigation measures to reduce spread (e.g., masking, testing, sheltering in place, limiting gatherings, quarantine/isolation, vaccination)
 - High-risk occupations (e.g., health care, law/fire/EMS, schools)
 - Precautions in congregate settings (e.g., SNF/RCFE, jails, shelters, schools)
- Current status
 - Shifting the remaining active health orders to strong recommendations
 - Continue monitoring data with ability to institute new health orders if needed

Communications around Mitigation Strategies

- Bilingual communication across multiple platforms included:
 - Facebook, Twitter, Instagram, videos, flyers, press releases, press conferences, and contests
 - Town hall meetings, community-based webinars, and targeted presentations to various stakeholders
 - Partnership with Leap Solutions to launch a vaccine stakeholder outreach campaign

GET YOUR COVID-19 VACCINE TODAY!
Everyone five years of age and older is now eligible
[Learn more](#)
SoCoEmergency.org

VACCINE PROGRESS!
One million doses!

THE FACTS
If you are vaccinated, you are:
2.5 X less likely to be infected
15.3 X less likely to be hospitalized
10.9 X less likely to die
Visit [SoCoEmergency.org/vaccine](#)

By the Numbers | Outreach

March 2021 – March 2022

Advertisements

→ **95** English and Spanish ads designed and distributed on print, digital and radio platforms

Videos

→ **148** English and Spanish recorded and distributed videos on social and with community based organizations

Flyers

→ **591** English and Spanish flyers, including 575 vaccine and testing clinic flyers and 16 informational flyers

Social Media

→ **273** English and Spanish postings, including 222 social messages and graphics, plus 23 FAQs and 28 community briefings

Press Releases

→ **88** English and Spanish

CAO COMMS TEAM COVID-19 OUTREACH

Community Partnerships

- **Meaningful relationships lead to healthier outcomes**
- **Community partners dedicated tremendous time and resources to:**
 - Sharing knowledge, lived experiences, and ideas for innovation with health officials
 - Collaborating on strategies to address barriers and reach the most vulnerable residents with health education, testing, vaccination, and financial resources
 - Overcoming barriers to implement health guidance



Community partners include, but are not limited to:

- Health Equity Workgroup
- BIPOC network(s) of community-based organizations, *Promotoras*, community leaders, and community health workers.
- CURA
- FQHCs/Hospitals/long-term care facilities
- Fire/law enforcement/EMS
- Homeless service providers
- Sonoma County Office of Education (SCOE)
- Businesses and city government
- Economic Development Board/Chamber of Commerce

Creating Community Centered Structures

- **Latinx Health Workgroup:**
 - Creation of the CURA project and vaccine equity framework
- **Community Vaccine Planning:**
 - Complementing community-lead clinics with DHS Field Services Team
 - Continuation of best practices at vaccine clinics
- **Promotoras Platicas:**
 - Hearing directly from the field and community
 - Promoting meaningful relationships that lead to healthier outcomes
 - Partnering with Lideres Campesinas, Comida Para Todxs, and Roseland CBI Promotoras



Lideres Campesinas



Comida Para Todxs
(Food For All)

Innovative Strategies and Investments

- In October 2020, recognizing the inequitable impacts of COVID-19, Board of Supervisors approved an initial **\$4 million** for an enhanced response:
 - Doubling pop-up testing sites in the hardest hit communities
 - Enhancing outreach to Latinx and indigenous language speaking communities through establishment of CURA and a bilingual hotline
 - Financial assistance to COVID positive who needed to isolate,
 - Expansion of alternate care sites/non-congregate care options with care provided by DEMA and Catholic Charities
 - Expanding education and marketing efforts
 - Expanding partnerships with business community
- In 2021, the Board allocated **\$9 million** for a rapid economic assistance program for those financially impacted by COVID.
- Other innovative investments included the **\$40-million** emergency rental assistance program established in October 2021 and an additional **\$34 million** in ARPA money to address the public health and economic impacts of the pandemic in the hardest hit communities, populations, and households in March 2022.



Coordinated Outreach Collaborative Promotoras



Roseland CBI Promotoras

Hard Work by Dedicated County Teams

- **Public Health Lab:** Lab staff processed more than 216,000 PCR tests and developed serology and genotyping capacity
- **Epidemiology:** Epidemiologists managed and analyzed data to help inform public health response
- **Testing/Field Services:** Public health staff conducted close-contact, outbreak, and bilingual/bicultural pop-up testing (use of data and health equity group input to determine neighborhood testing locations), and distribution of antigen tests to hardest hit communities
- **Contact Tracing/Case Investigation:** Bilingual/bicultural staff identified source of exposure and potential contacts to help reduce spread and provided support to connect cases with ACS/NCS, food, income support
- **Outbreak Management:** Team of nurses provided outbreak management and education in infection prevention for schools/childcare, healthcare, shelters and congregate settings, and worksites



Testing Teams



DHS Field Services Team

Vaccination

- **Public Health chose to prioritize the most vulnerable residents in its vaccine rollout:**
 - Older adults (75+, 65+) and medically vulnerable
 - SNF/RCFE residents
 - Essential workers and marginalized communities (e.g., agriculture/farmworkers, food service workers, unhoused, correctional facilities, and school clinics)
- **Vaccine equity**
 - Ongoing surveillance for distribution and receipt of vaccine by Healthy Places Index, race/ethnicity, and age
 - Through community partners, vaccine team prioritized outreach and vaccine events to reach the most vulnerable communities
 - Community Vaccine Planning; community lead clinics; continuing best practices at vaccine clinics

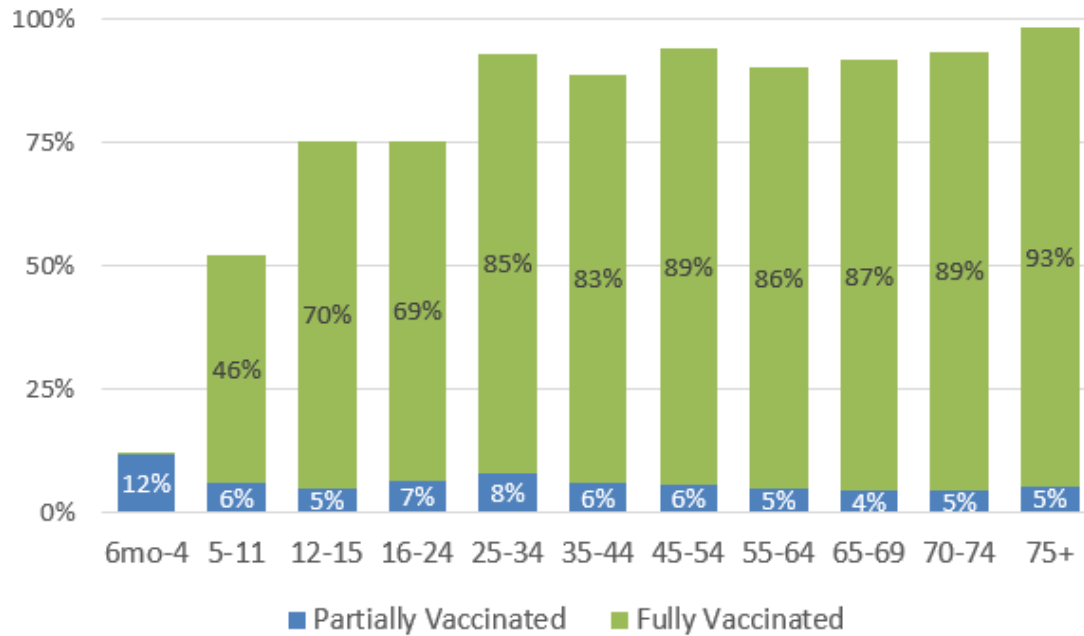


**PROTECT
YOURSELF, YOUR
FAMILY AND OUR
COMMUNITY**

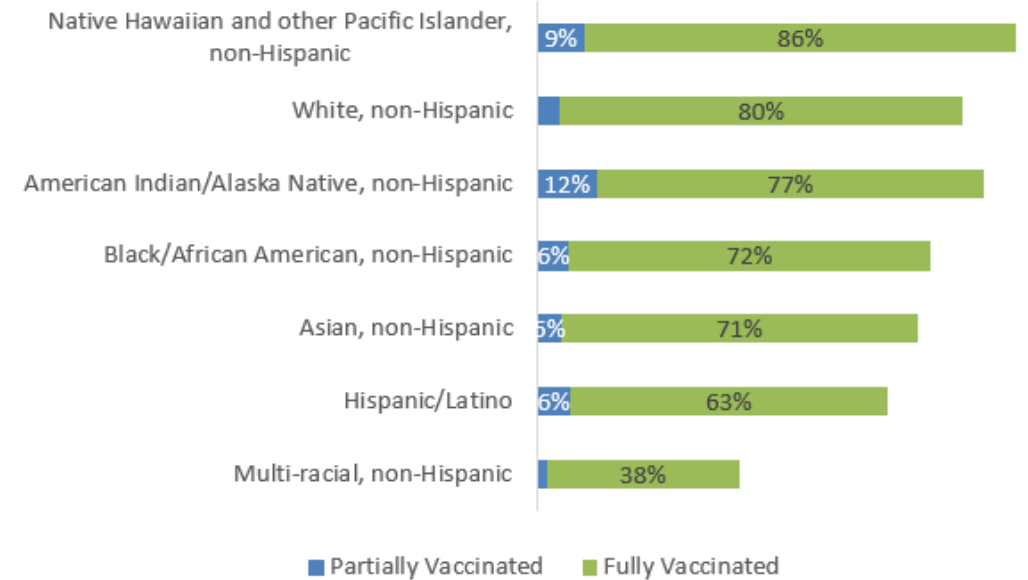


Overall Vaccine Administration

Vaccination Status, by Age Group



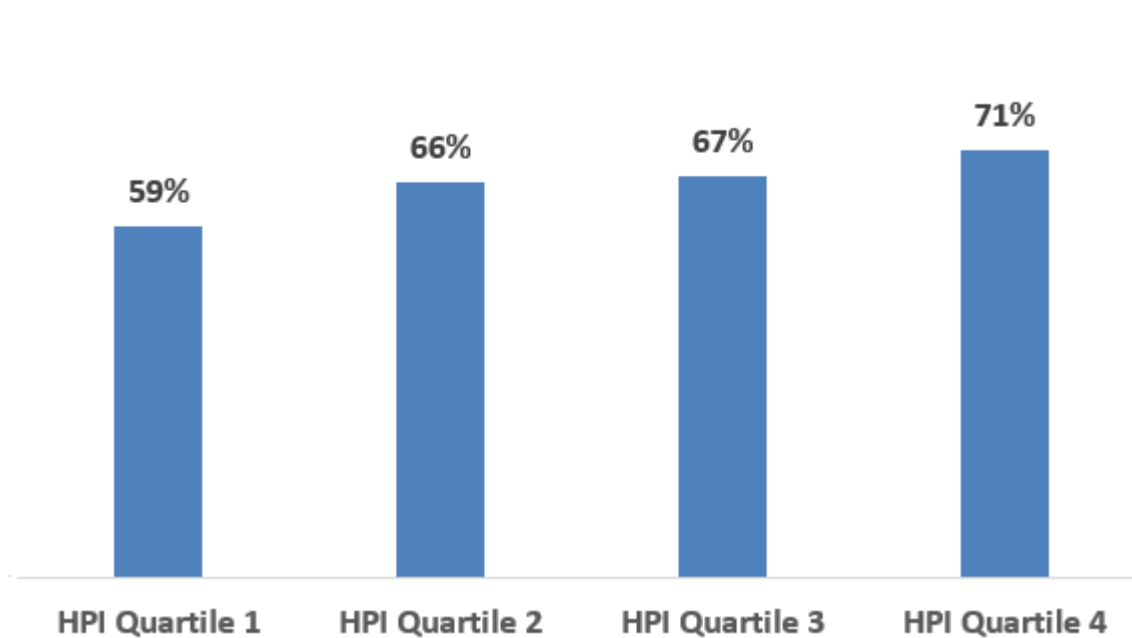
Vaccination Status, by Race/Ethnicity



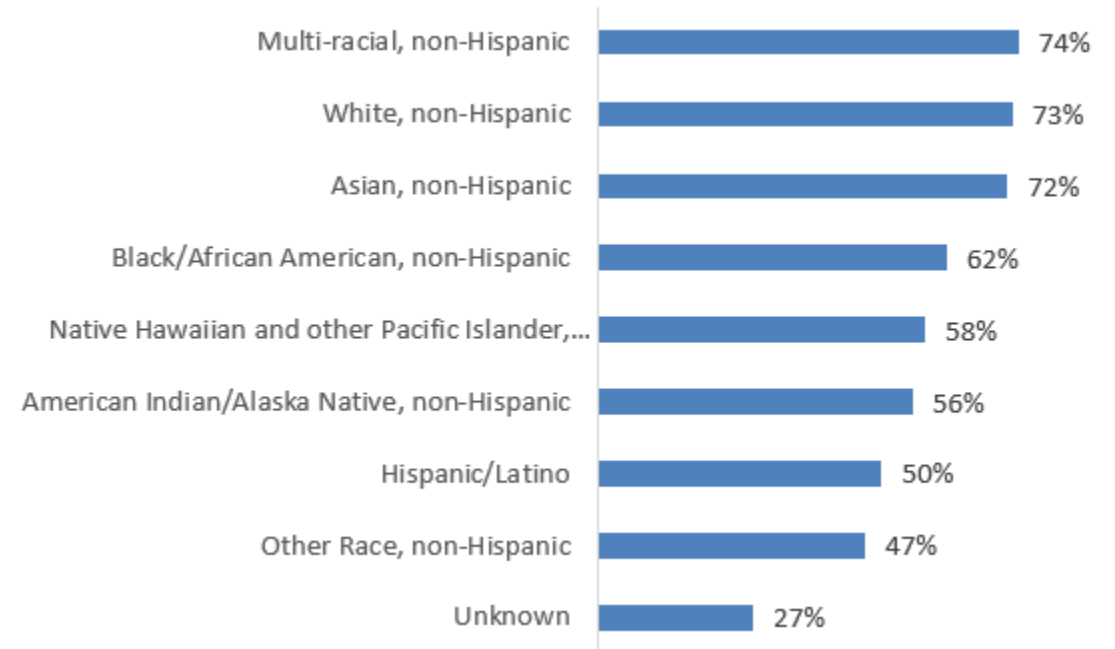
- **84%** of the total Sonoma County population is at least partially vaccinated (**78%** fully; **6%** partially)

Vaccine Booster Dose Administration

Proportion of eligible 5+ year-olds with booster dose, by HPI Quartile

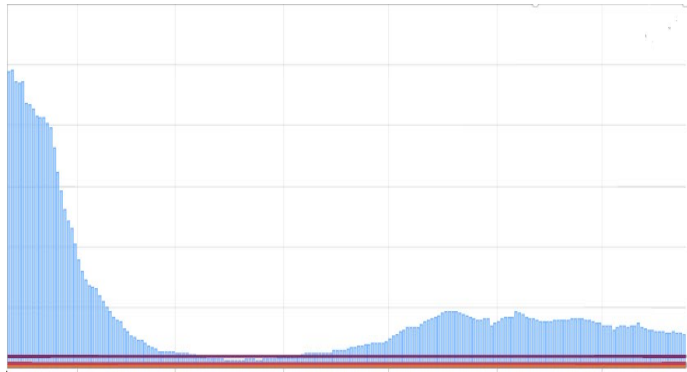


Proportion of eligible 5+ year-olds with booster dose, by Race/Ethnicity

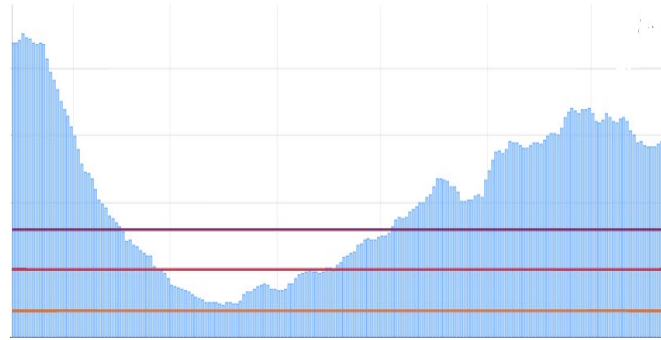


- **65.6%** of currently eligible 5+ year-olds have received their booster doses
- 79.8% of eligible adults aged 50+ have received their booster dose

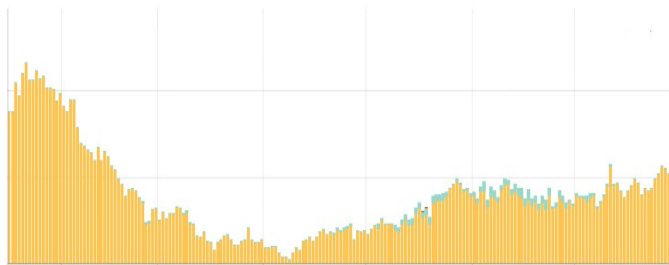
Current Countywide Trends: January 2022–Present



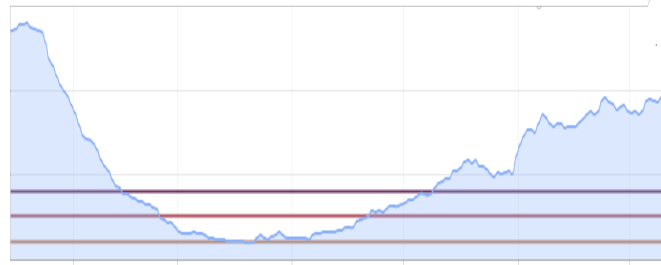
New cases per 100,000 residents, per day



Overall test positivity



COVID-19 hospitalizations



Lowest HPI test positivity

- **Metrics as of August 01, 2022:**
 - **26.8** new cases per 100,000 residents per day
 - **14.1%** overall test positivity
 - **16.5%** test positivity in lowest HPI quartile
- **45** people are currently hospitalized with COVID
- **76** people have died from COVID since Jan. 01, 2022

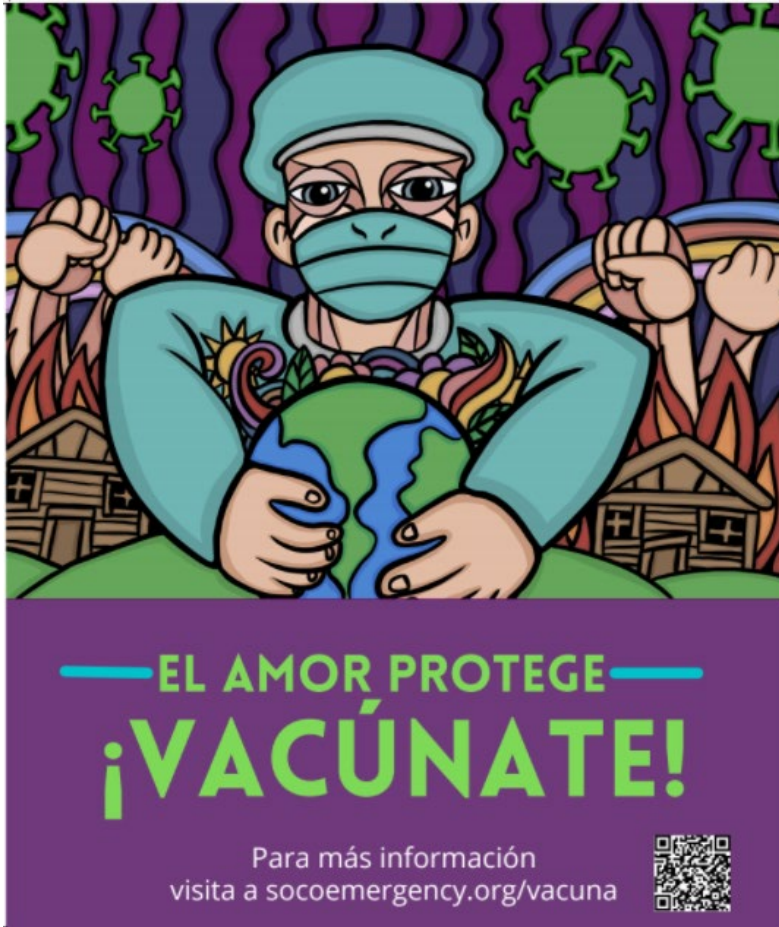


Pandemic Pearls

- **Data driven decision-making:** Data has informed all testing, vaccine, and PH policy decisions
- **Nimble response:** Constant pivoting allowed us to manage different needs/stages in vaccine effort
- **Expanded communication:** Info shared among CDPH, CHEAC, ABAHO, SCOE, fire/law/EMS, community stakeholders
- **Healthcare collaboration:** Worked with hospital-based systems, FQHCs, Jewish Community Free Clinic, SRJC student clinic, and pharmacies, creating an extensive vaccine access network
- **Trusted messengers:** CBOs, CHWs, and promotoras helped reduce disparities by going door to door to promote accurate information (combat misinformation) and provide resources
- **Active listening:** Input from community groups was essential in identifying gaps and areas for improvement in reaching different community sectors
- **Lessons to continue moving forward:** Community outreach and education through CHWs/promotoras will help extend health education in the community beyond our current hospital and outpatient model to improve health outcomes and reduce disparities in our community

Charting the Future

- COVID-19 is becoming endemic, part of our health landscape
- Ongoing close surveillance is necessary; expect continued cycles of mutation/variants and ongoing spread
- High levels of protection in the community; look towards future vaccines tailored for new variants
- Decreased resources necessitate streamlining interventions to maximize impact
- Continue to have an equity lens and target interventions for those who still face the greatest threats from COVID-19



<https://youtu.be/JWmdOXOgMRA>

