

OKALOOSA COUNTY COVID-19 KEY METRICS

Week 30

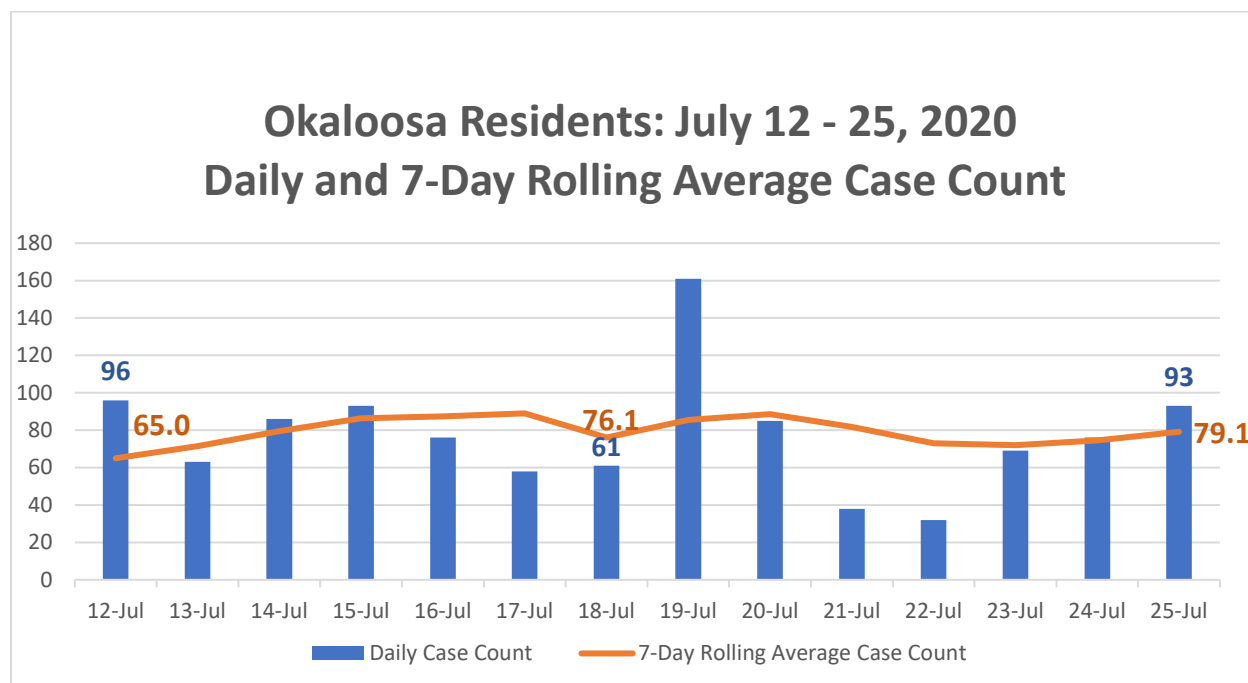
The DOH-Okaloosa reports key metrics for the county's COVID-19 status. These metrics are taken, for the most part, from the White House Re-Opening America Gating Criteria.

This information is updated weekly. As of July 25, 2020, 2,368 COVID-19 cases are reported for Okaloosa County, an increase of 555 cases since July 18, 2020.

Scorecard – Okaloosa County

14-Day Trend of COVID+ Resident Cases: This is measured by averaging the last seven days of resident cases and assessing the trend over the past 14-days.

- **CRITICAL:** Cases are increasing ($> 5\%$ change) during the 14-day period.
- **CAUTION:** Cases are flat ($0 - 5\%$ change) during the 14-day period.
- **STABLE:** Cases are decreasing ($> -5\%$ change) during the 14-day period.



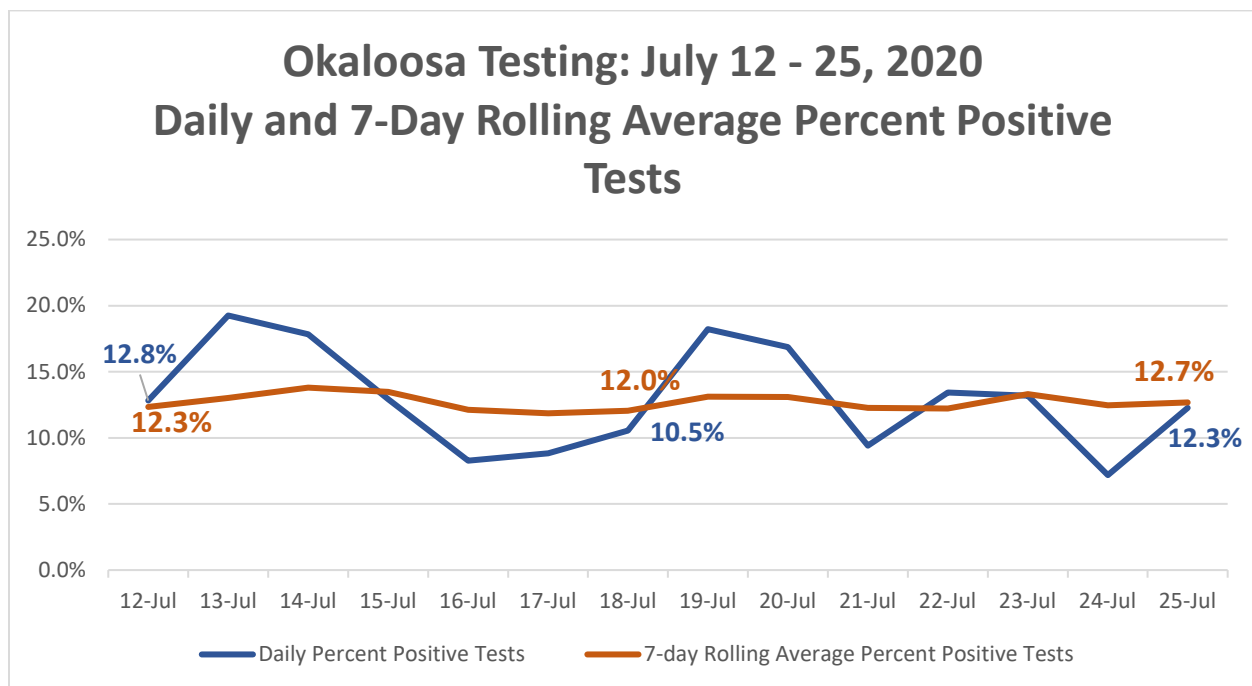
The 7-day rolling average of COVID-19 cases in Okaloosa County has increased greater than 5% during the first week of this 14-day period, but signs are

encouraging that we might be reaching a daily plateau of new cases per day in the second week. Case growth during the second week was just under 5%. This status remains critical for the 14-day period but there is evidence of a flattening in the second week.

STATUS: CRITICAL/CAUTION

Percent of COVID-19 Tests Positive: The metric measures what percentage of all diagnostic tests for COVID-19 are positive. This assesses testing performed by all providers. It is presented as a daily percent and as a 7-day rolling average percent. The metric is scored based on the 7-day rolling average percent positive tests. (A positive case is only counted once, even if tested multiple times and remains positive. Only FDA approved PCR or Antigen test results included. Antibody testing not reported.)

- **CRITICAL:** More than 10%.
- **CAUTION:** Between 5-10%.
- **STABLE:** Less than 5%.



The 7-day rolling average of percent positive tests for COVID-19 in Okaloosa County has remained above 10% in the last 14-day period. However for the first time in weeks we are seeing a flattening of this trend. This status remains critical.

STATUS: CRITICAL

% of Target Population Tested: This metric measures the County's progress toward reaching the state testing goal of at least 2% of the population per month. It is estimated that at least 4,092 tests must be performed each month to reach 2% of the Okaloosa's population. This is evaluated daily.

- **CRITICAL:** Less than 50% of monthly target
- **CAUTION:** Between 50-99% of monthly target
- **STABLE:** Meeting or exceeding monthly target

Through the 25th of July, 15,050 COVID-19 diagnostic test results from all providers were reported to the Department of Health in Okaloosa County. The county is exceeding testing expectations of 2% of the population per month. Testing is robust in Okaloosa County for PCR diagnostic testing. This status remains stable.

STATUS: STABLE

Infection Rate: This metric measures the average number of contacts exposed per case. This is reported weekly. This number should be less than one (1).

- **CRITICAL:** > 5 contacts per case
- **CAUTION:** 1-5 contacts per case
- **STABLE:** Less than 1 per case

This metric is not available at the time of publishing and will be updated in the Week 31 report.

Influenza-Like Illness: Activity levels are based on the percent of emergency department visits due to influenza-like illness (ILI) compared with past year activity at the same time of the year.

- **CRITICAL:** If activity is very high or high (>6%)
- **CAUTION:** If activity is moderate (>2% - <6%)
- **STABLE:** If activity is low (2% or less)

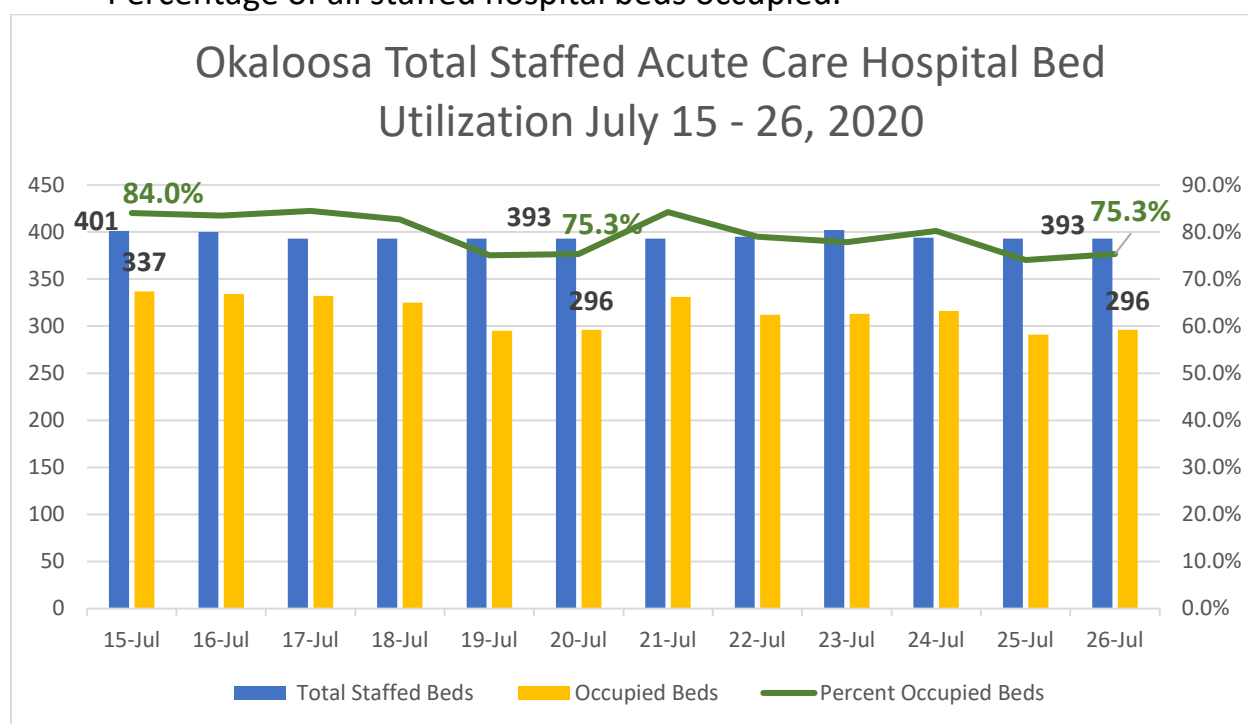
This metric is not available at the time of publishing and will be updated in the Week 31 report.

Hospital Bed Utilization:

Okaloosa County has three types of hospitals; acute care (3 – 393-401 staffed beds), psychiatric (1 – ~28 staffed beds) and rehabilitation (1 – ~30 staffed beds).

This analysis only assesses bed utilization in acute care hospitals which have the capacity to provide care to acutely ill individuals. Acute care hospitals are licensed for 470 beds in Okaloosa County. Staffed beds varied from a high of 401 to a low of 393 in the past week.

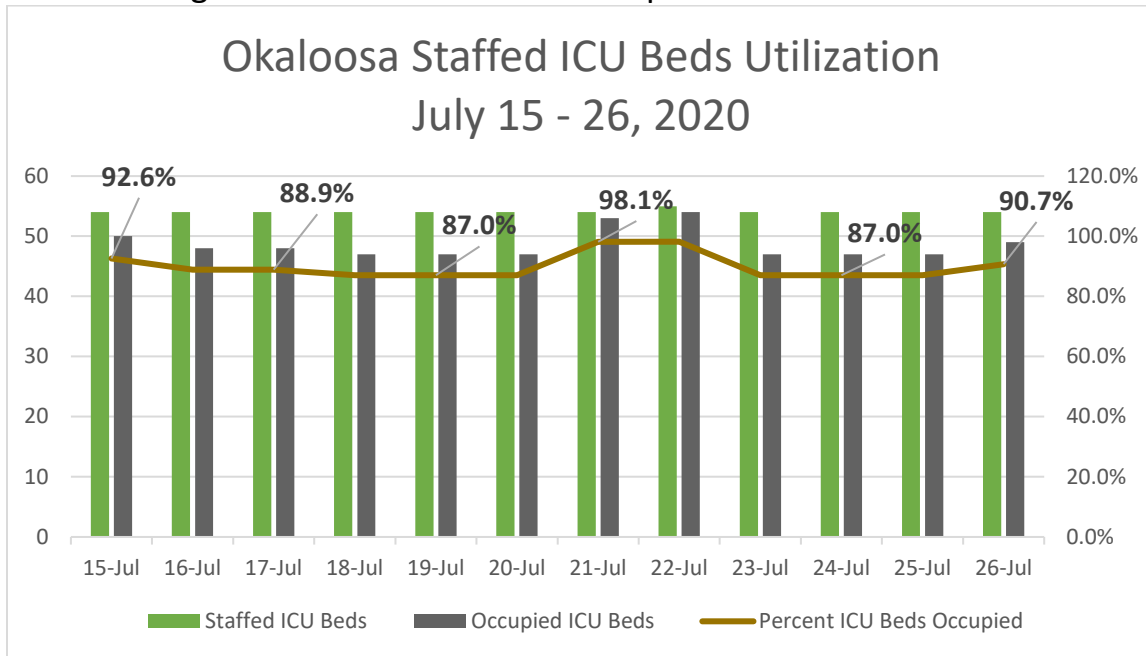
- **CRITICAL:** If staffed occupancy is more than 80% - Extremely Low
 - **CAUTION:** If staff occupancy is between 60% and 80% - Low Availability
 - **STABLE:** If staff occupancy is less than 60% - Normal
- Percentage of all staffed hospital beds occupied.



Total occupied beds in Okaloosa has declined since July 19, 2020. Surge actions taken by the three acute care hospitals at the end of Week 28 by restricting inpatient and outpatient elective surgeries has helped reduced hospital bed occupancy to low availability.

STATUS: CAUTION

- Percentage of all staffed ICU beds occupied.



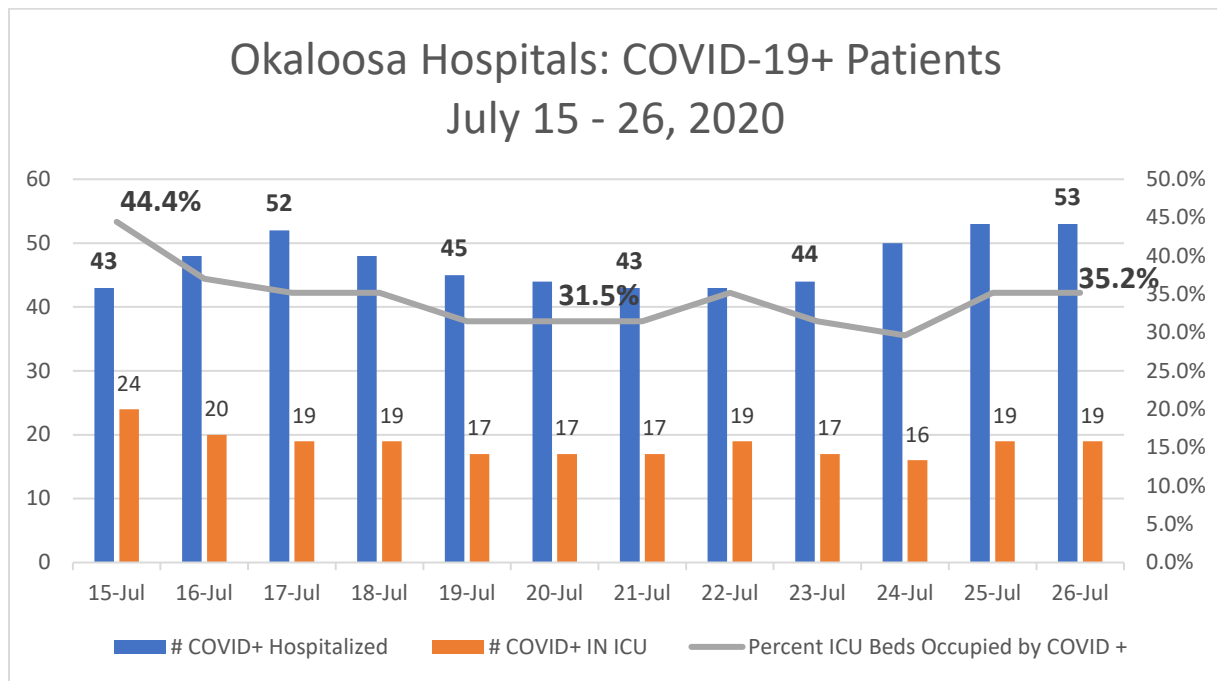
Since July 15, ICU bed utilization has remained above 85%. Two days in the past 14 saw Okaloosa County with only one ICU bed unoccupied. This status remains critical.

STATUS: CRITICAL

As of July 26, 2020, Okaloosa acute care hospitals report the following surge bed capacity:

Date	Surge Medical/Surgical Beds (<i>Staffed within 48 hours</i>)	Surge ICU Beds (<i>Staffed within 48 hours</i>)	Surge Medical/Surgical Beds (<i>Unstaffed</i>)	Surge ICU Beds (<i>Unstaffed</i>)
7/20/2020	25	18	40	62
7/26/2020	19	20	28	62

COVID-19 Hospital Admits: Number of COVID+ Hospitalized; Number COVID+ in ICU beds; Percent of ICU beds occupied by COVID+ patients.



Between July 15 - 26, 2020, Okaloosa averaged 47 COVID-19 positive patients per day in the hospital. These individuals occupied on average just over 33% of the county's ICU beds during this time period.

Long-Term Care (LTC) Facility Cases

Okaloosa has 22 long-term care facilities. As of July 26, 2020, nine long-term care facilities are designated in "outbreak" status with at least one case of COVID-19 in a resident or staff. That is a decrease by one facility since last week's report.

Okaloosa has five facilities with five or more COVID+ cases. As of July 26, 2020, 105 (increase of 18) COVID+ residents reside in our long-term care facilities. There are currently 71 staff members of Okaloosa's long-term care facilities infected with COVID-19.

Children

This analysis will be updated in Week 31.

Deaths

By July 25, 2020, Okaloosa County had 20 COVID-19 deaths to Okaloosa residents. This is an increase of five deaths since the Week 29 report. Four deaths were to long-term care residents, all over 85 years of age. There was one death to a person in their early 60's who lived in the community.

SUMMARY

Okaloosa has widespread ongoing transmission of the virus that causes COVID-19. The situation appears to be stabilizing although the number of cases per day is high and the positivity rate remains above 10%.

There is an ongoing need to maintain physical distancing (6 feet or more) and to wear cloth face masks. Cloth face coverings or masks should be worn in all public spaces, especially when maintaining physical distancing is difficult. Failure of most of the population to follow these two critical mitigation measures is significantly contributing to the spread of COVID-19 in Okaloosa County.

The community heard a lot of debate on cloth face coverings or masks in the past week. There is a growing body of evidence that cloth face coverings do work for this virus. WHO and the CDC recommend that all people wear cloth face coverings in public settings and when around people who don't live in the household, especially when physical distancing is difficult to maintain. **The masks are used for source control.** That is, they serve as a simple barrier to help prevent respiratory droplets (which carry the virus) from the mouth and nose from traveling into the air and onto other people when the person wearing the cloth face covering coughs, sneezes, talks, or raises their voice. This recommendation is based on current knowledge of the role of respiratory droplets in the spread of the virus that causes COVID-19. It is also paired with emerging evidence from clinical and laboratory studies that shows cloth face coverings reduce the spray of droplets when worn over the nose and mouth. Because this virus spreads with close contact (within 6 feet), the use of cloth face coverings is particularly important in settings where people are close to each other and physical distancing is difficult.

Below is a listing of recent studies supporting the use of cloth face coverings for source control:

- Rothe C, Schunk M, Sothmann P, et al. Transmission of 2019-nCoV Infection from an Asymptomatic Contact in Germany. The New England journal of medicine. 2020;382(10):970-971. [PMID: 32003551](#)
- Zou L, Ruan F, Huang M, et al. SARS-CoV-2 Viral Load in Upper Respiratory Specimens of Infected Patients. The New England journal of medicine. 2020;382(12):1177-1179. [PMID: 32074444](#)
- Pan X, Chen D, Xia Y, et al. Asymptomatic cases in a family cluster with SARS-CoV-2 infection. The Lancet Infectious diseases. 2020. [PMID: 32087116](#)
- Bai Y, Yao L, Wei T, et al. Presumed Asymptomatic Carrier Transmission of COVID-19. Jama. 2020. [PMID: 32083643](#)
- Kimball A HK, Arons M, et al. Asymptomatic and Presymptomatic SARS-CoV-2 Infections in Residents of a Long-Term Care Skilled Nursing Facility — King County, Washington, March 2020. MMWR Morbidity and mortality weekly report. 2020; ePub: 27 March 2020. [PMID: 32240128](#)
- Wei WE LZ, Chiew CJ, Yong SE, Toh MP, Lee VJ. Presymptomatic Transmission of SARS-CoV-2 — Singapore, January 23–March 16, 2020. MMWR Morbidity and Mortality Weekly Report. 2020; ePub: 1 April 2020. [PMID: 32271722](#)
- Li R, Pei S, Chen B, et al. Substantial undocumented infection facilitates the rapid dissemination of novel coronavirus (SARS-CoV2). Science (New York, NY). 2020. [PMID: 32179701](#)
- Furukawa NW, Brooks JT, Sobel J. Evidence Supporting Transmission of Severe Acute Respiratory Syndrome Coronavirus 2 While Presymptomatic or Asymptomatic [published online ahead of print, 2020 May 4]. Emerg Infect Dis. 2020;26(7):10.3201/eid2607.201595. [Link](#)
- Oran DP, Topol Prevalence of Asymptomatic SARS-CoV-2 Infection: A Narrative Review [published online ahead of print, 2020 Jun 3]. Ann Intern Med. 2020;M20-3012. [PMID: 32491919](#)
- National Academies of Sciences, Engineering, and Medicine. 2020. Rapid Expert Consultation on the Possibility of Bioaerosol Spread of SARS-CoV-2 for the COVID-19 Pandemic (April 1, 2020). Washington, DC: The National Academies Press. <https://doi.org/10.17226/25769>.
- Schwartz KL, Murti M, Finkelstein M, et al. Lack of COVID-19 transmission on an international flight. CMAJ. 2020;192(15):E410. [PMID: 32392504](#)
- Anfinrud P, Stadnytskyi V, Bax CE, Bax A. Visualizing Speech-Generated Oral Fluid Droplets with Laser Light Scattering. N Engl J Med. 2020 Apr 15. doi:10.1056/NEJMc2007800. [PMID: 32294341](#)
- Davies A, Thompson KA, Giri K, Kafatos G, Walker J, Bennett A. Testing the efficacy of homemade masks: would they protect in an influenza pandemic? Disaster Med Public Health Prep. 2013;7(4):413-8. [PMID: 24229526](#)

- Konda A, Prakash A, Moss GA, Schmoldt M, Grant GD, Guha S. Aerosol Filtration Efficiency of Common Fabrics Used in Respiratory Cloth Masks. *ACS Nano*. 2020 Apr 24. [PMID: 32329337](#)
- Aydin O, Emon B, Saif MTA. Performance of fabrics for home-made masks against spread of respiratory infection through droplets: a quantitative mechanistic study. medRxiv preprint doi: <https://doi.org/10.1101/2020.04.19.20071779>, posted April 24, 2020.
- Ma QX, Shan H, Zhang HL, Li GM, Yang RM, Chen JM. Potential utilities of mask-wearing and instant hand hygiene for fighting SARS-CoV-2. *J Med Virol*. 2020. [PMID: 32232986](#)
- Leung, N.H.L., Chu, D.K.W., Shiu, E.Y.C. *et al.* Respiratory virus shedding in exhaled breath and efficacy of face masks. *Nat Med*. 2020. [PMID: 32371934](#)
- Johnson DF, Druce JD, Birch C, Grayson ML. A quantitative assessment of the efficacy of surgical and N95 masks to filter influenza virus in patients with acute influenza infection. *Clin Infect Dis*. 2009 Jul 15;49(2):275-7. [PMID: 19522650](#)
- Green CF, Davidson CS, Panlilio AL, et al. Effectiveness of selected surgical masks in arresting vegetative cells and endospores when worn by simulated contagious patients. *Infect Control Hosp Epidemiol*. 2012;33(5):487-494. [PMID: 22476275](#)