



San Francisco Village

COVID - 19
Research and Advisory Team:
Report and Recommendations #39
December 6, 2020

Presented by SFV Members:
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This report contains a summary of updates on the status of Covid-19 that are more evident since our last report. Sources include: CDC, WHO, SFDPH, CA DPH, Science Journal, Nature Journal, New England Journal of Medicine, Journal of the American Medical Association, Scripps Research Institute, Johns Hopkins Coronavirus Resource Center, UCSF Medical Grand Rounds, STAT, Institute for Health Metrics & Evaluation, the Covid Tracking Project, other clinical journals, reports from public health professionals, and news media. This report is not intended to provide personal advice – for that please consult with your health care providers.

RECENT FINDINGS

1) How Safe is Eating in a Restaurant?

Indoor Dining: 2/10

The CDC considers indoor dining with reduced capacity and tables spaced at least 6 feet apart to be “higher risk.” That’s because COVID-19 spreads through respiratory aerosol droplets that fly into the air when an infected person coughs, sneezes, talks or breathes. Someone else could inhale those droplets and get sick. Since you take your mask off to eat or drink at a restaurant, the risk goes up. You’re enjoying the company of your friends, you’re eating, you’re chatting, you’re drinking – and, while you’re doing that, you and the people around you are potentially putting virus out into the air. The greater the number of people, the more likely someone in the restaurant has the coronavirus. And, even if they don’t know it, they can spread it to others

Outdoor dining: 9/10

The CDC considers outdoor dining less risky than eating inside. Within an outdoor environment, the virus can disperse, and so it’s not the recirculation of the same air. Outdoor dining is not risk-free, though. Social distancing is vital, since you’ll be going maskless for a period of time. But capacity should also be reduced for eating outdoors, and seating should be at least 6 feet apart. Staff need to wear masks at all times, and diners need them when they’re not eating or drinking, according to the guidelines.

Outdoor dining in enclosed spaces: 2/10

In colder weather, outdoor dining may be difficult in some places. To attract visitors and keep them warm, some restaurants are adding heaters or enclosures to their outdoor spaces. But these measures may actually be increasing the risk. Even with social distancing, enclosed outdoor dining – whether it’s in an igloo, tent or bubble – restricts airflow and essentially creates the same risky situation that exists with indoor dining. A smaller enclosure with just you and your dinner date may be safer, but with limited ventilation, the virus could still be transmitted.

Restaurant bathrooms: 2/10

Restaurants usually require visitors to wear masks when they're moving around, including when they go to the restroom. In that sense, bathrooms may be a little safer than sitting at your table with your mask off. But, sharing a bathroom could be risky. Traces of coronavirus have been found in feces, so it's possible that flushing a toilet could send aerosol droplets into the air.

The health experts recommend these tips to make the experience safer:

- **Avoid touching reusable menus**, especially plastic ones, unless they've been cleaned and disinfected. They could carry pathogens and potentially transmit the virus (and other illnesses).
- **Stay away from multiuse items**, like a touch screen ordering system, unless you can be sure it's cleaned and disinfected after each use.
- **Visit at off-peak times** so the restaurant is less crowded.
- **Don't stay for too long**, especially if you're dining inside.
- **Make sure tables are spaced out**. The CDC suggests seating should be at least 6 feet apart — and that includes bar seating.
- **Try to witness surfaces being cleaned**. Coronavirus particles can stay on surfaces. If particles end up on your hands and you touch your face, it might transmit the virus.
- **Leave if you're uncomfortable**. If anything makes you feel uneasy, it's probably best to head home.

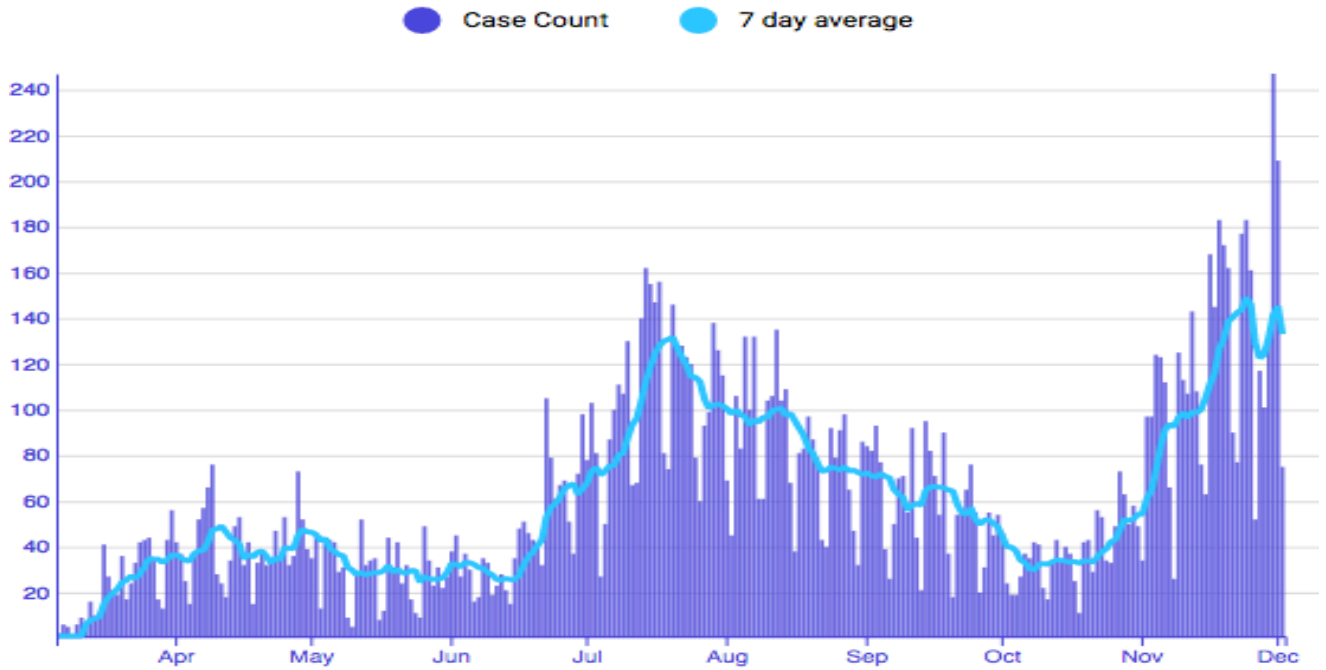
SAN FRANCISCO

Total Cases: 16,479

Deaths: 164

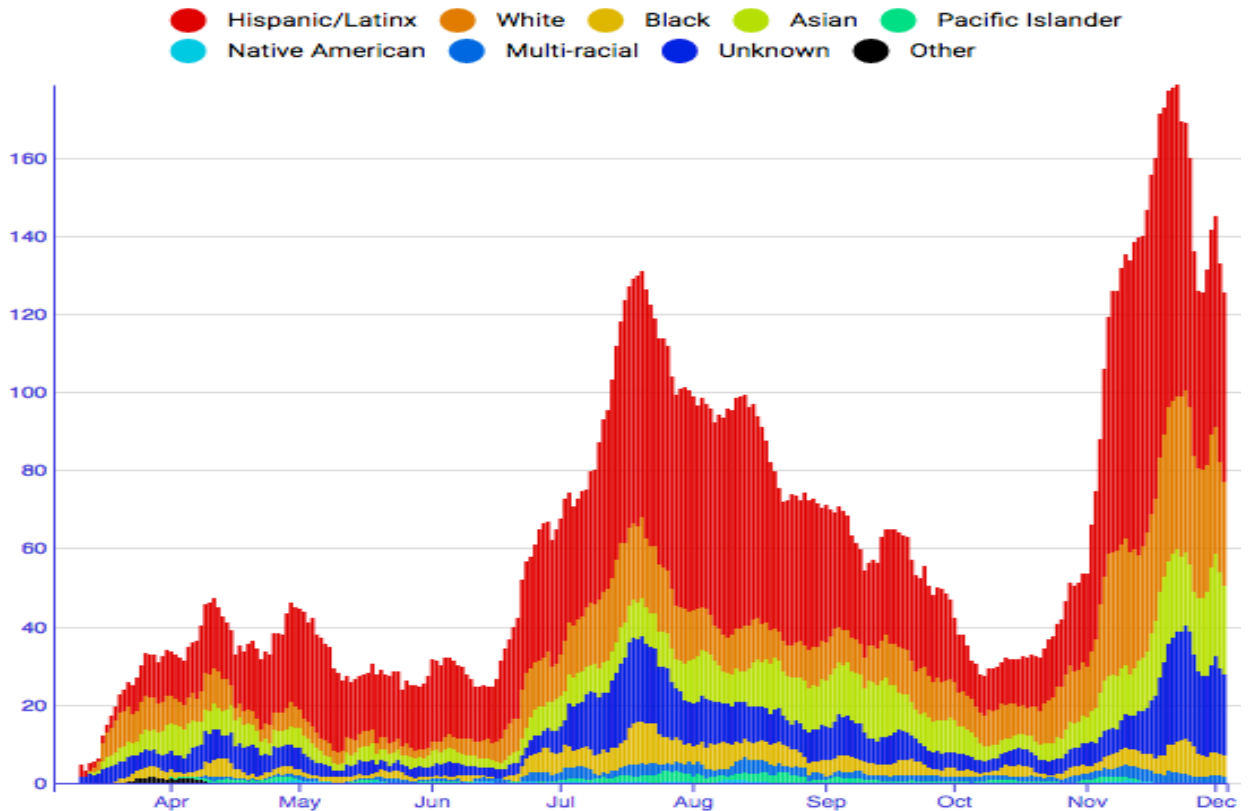
San Francisco's R number is at approximately 1.3. (R Number refers to the reproductive rate of a disease. To control and eliminate the spread of a disease, an R Number of <1 is required)

Weekly average Covid test positivity rate: 2.72%



SF COVID Cases by Race and Ethnicity (7 Day Average)

Data Updated Saturday 12/5 at 8:19 PM EST



SF Hospitalizations

COVID IN ICU - SAN FRANCISCO

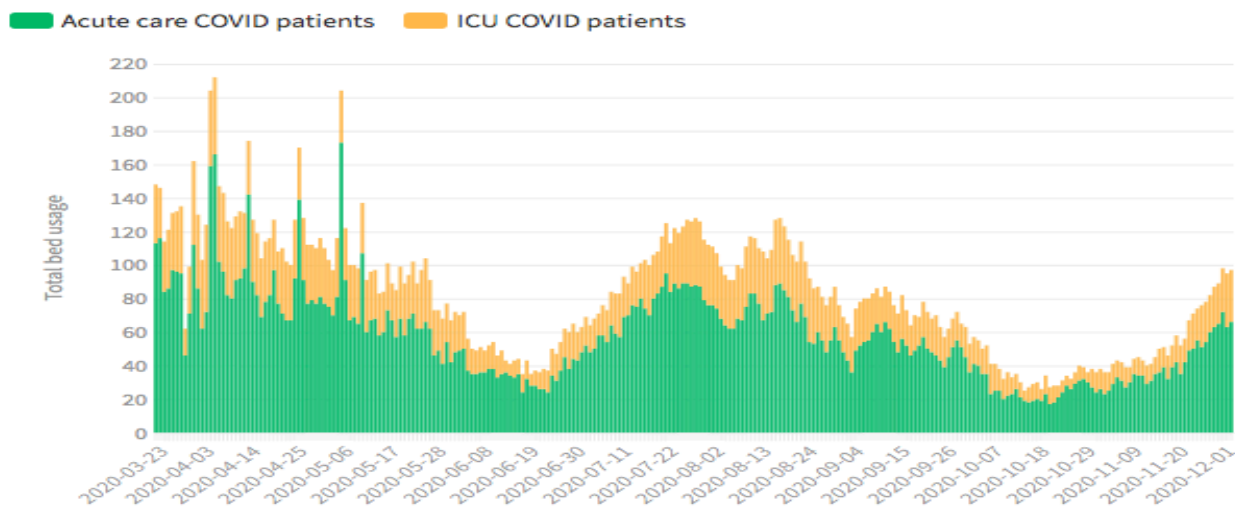
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Updated on 12/3

COVID IN ACUTE CARE - SAN FRANCISCO

66

Updated on 12/3



1) The Bay Area Will Fully Lock Down on December 6

Health officers from the central Bay Area announced today that the region would proactively enter into the state's most restrictive shutdown since March, closing down outdoor dining and limiting other businesses in much of the area as of Sunday, December 6.

At a press conference on Friday, health officers from the counties of Alameda, Contra Costa, Marin, Santa Clara, San Francisco, and the city of Berkeley announced that the shutdown will begin even before the state requires it. For Contra Costa, Marin, Santa Clara, San Francisco, and the city of Berkeley, the stay-at-home order will begin on the already-established curfew hour of 10 p.m. on Sunday. The new restrictions will remain in place across all these counties until January 4, 2021.

As part of that order, "all gatherings with members of other households are prohibited," residents must "stay home or at their place of residence except as necessary to conduct activities associated with the operation, maintenance, or usage of critical infrastructure." That said, "nothing in this order prevents any number of persons from the same household from leaving their residence ... as long as they do not engage in any

interaction with (or otherwise gather with) any number of persons from any other household.” In other words, a walk in the park is okay, but a walk in the park with your friend from a couple blocks over is not. As for grocery stores, bodegas, and other retail operations, they must all cut their capacity to 20 percent, and “the sale of food, beverages, and alcohol for in-store consumption is prohibited.” The same is true for on-site consumption of dishes or drinks at restaurants, which may continue to serve takeout and delivery meals and cocktails. Bars, wineries, and breweries must completely close.

2) San Francisco’s ability to contact trace could soon reach breaking point

San Francisco had been reaching about 80% of those who'd tested COVID positive. But, with the surge in cases, even with additional staff and new technology, they simply may not be able to keep up. Public health experts say contact tracing, contacting people tested COVID positive and tracking down the people they'd come into contact with, is a critical part of battling the pandemic. Until recently San Francisco had been talking to about 80% of COVID patients to track down and notify their contacts that they may have been exposed. Those contact tracers are now handling three and a half times the number of cases than a month ago.

In the last week San Francisco's Department of Public Health added an additional 100 contact tracers to the 200 the county already had in place and has adopted the state's mobile contact tracing platform. But, the surging number of COVID patients, and the increasing numbers of contacts means the team is struggling to keep up, and in danger of being overwhelmed.

CALIFORNIA

California COVID-19 By the Numbers

December 5, 2020

Numbers as of December 4, 2020

COVID-19 Cases

1,311,625 (+25,068)

Fatalities

19,791 (+209)

Ages of Confirmed Cases

147,807 0-17	780,365 18-49	246,393 50-64	135,981 65+	1,079 Unknown/Missing
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Gender of Confirmed Cases

665,309 Female	635,029 Male	11,287 Unknown/Missing
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Hospitalizations

Confirmed COVID-19		Suspected COVID-19	
9,430 Hospitalized	2,182 in ICU	843 Hospitalized	83 in ICU

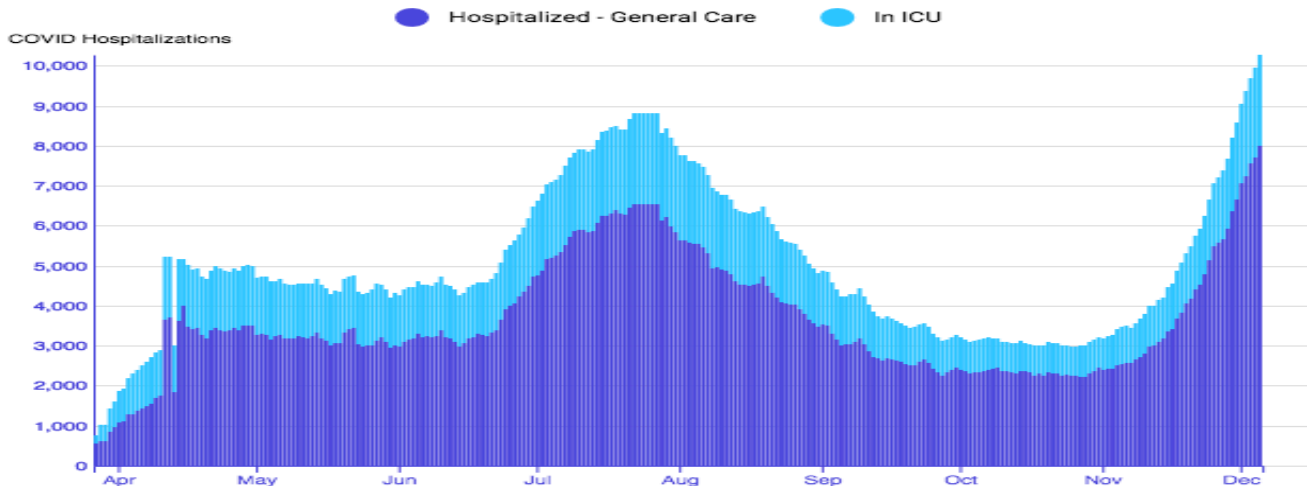
Your actions save lives.
covid19.ca.gov



California COVID Hospitalizations and ICU Usage

Data Updated Saturday 12/5 at 5:15 PM PST

TOTAL HOSPITALIZED 10.3K On 12/5/20 ↑ 325	TOTAL IN GENERAL CARE 8,008 On 12/5/20 ↑ 308	TOTAL IN ICU 2,265 On 12/5/20 ↑ 17	PERCENT IN ICU 22.0% On 12/5/20 ↓ 0.5%
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1) Tens of millions in California under stay-at-home order starting Sunday night

Southern California and San Joaquin Valley residents will be under a stay-at-home order after the intensive care unit capacity in the two regions fell below 15%, triggering a mandate issued by the governor earlier this week that aims to bring down the soaring number of Covid-19 hospitalizations.

The order goes into effect Sunday at 11:59 p.m. PT for the 27 million people in the regions, which includes Los Angeles and San Diego. That follows a proactive order issued by six San Francisco Bay Area jurisdictions on Friday for its almost 6 million residents. It also goes into effect Sunday.

Gov. Gavin Newsom on Thursday announced that any region that fell below the 15% ICU capacity threshold would be placed under stay-at-home orders. Southern California, the most populous of the five regions named by the governor, reported that its ICU availability fell to 12.5% on Saturday. In the San Joaquin region, capacity was 8.6%. California again had its highest number of new coronavirus cases and Covid-19 hospitalizations for one day on Saturday, reporting more than 25,000 confirmed new infections. More than 10,200 people are hospitalized.

Under the order, business that must close include bars, wineries, personal services like hair salons and barber shops, museums, movie theaters, playgrounds, amusement parks and indoor recreation facilities. Travel is prohibited except as necessary for permitted activities. Schools that are already open for in-person learning can remain open along with critical infrastructure businesses. Retail business may stay open but at 20% capacity, and restaurants are limited to take out and delivery only.

The order will remain in effect for at least three weeks and will only be lifted when a region's projected ICU capacity meets or exceeds 15%. This will be assessed on a weekly basis after the initial three-week period. The Bay Area order will be in effect until January 4, 2021, even though the region's ICU capacity was at 21.2% capacity Friday, according to a government website.

2) State Smashes Covid-19 New Cases Record on Friday, Sees 16% Jump In Single Day

The state reported a 16% jump in new daily Covid-19 infections, at 22,018. It's the second record high this week. The other was Wednesday's 20,759. On Thursday, there were 18,591 new infections. For comparison, California reported 4,566 new daily Covid infections on 11/4. One month later, that number has surged over 380%.

The state's current test positivity rate is now 7.3%, up from 7% just 24 hours earlier. That's very close to where it was during the pandemic's late July peak, at 7.5% despite the fact that the number of tests is up 10% since then. That usually decreases the positivity rate.

New deaths on Friday were up .7% from the day prior, a number that is sure to rise markedly as California moves into the darker part of December. The total number of Coronavirus-related deaths in the state will likely pass 20,000 in the coming week. Coronavirus-related hospitalizations also hit an all-time high on Friday, at 9,948. That's up 2.5% in 24 hours.

ICU beds occupied by Covid-infected patients are actually decreasing, as treatments for those with the virus improves. But that may not last for long, given that the number of patients now needing special care is a result of the new daily infections the state saw two weeks ago. That number was a little over 11,000. On Friday, the number of new infections was twice that, meaning according increases will be seen in hospitals and ICU wards 14 days from now.

3) California's stay-at-home order allows essential travel only. What does that mean?

Gov. Gavin Newsom is imploring Californians to stay home for at least the next three weeks and cinching already tight restrictions in areas where the COVID-19 pandemic has hospitals under the heaviest pressure. San Francisco city and county will preemptively put rules into effect starting 10 p.m. Sunday. It's expected to be in effect until Jan. 4. Dr. Mark Ghaly, the state's secretary of Health and Human Services, said the state is, in effect, telling, not asking, Californians to stop all nonessential travel. That includes canceling holiday travel plans, he added. "The message of the day is, as much as you can, be at home,"

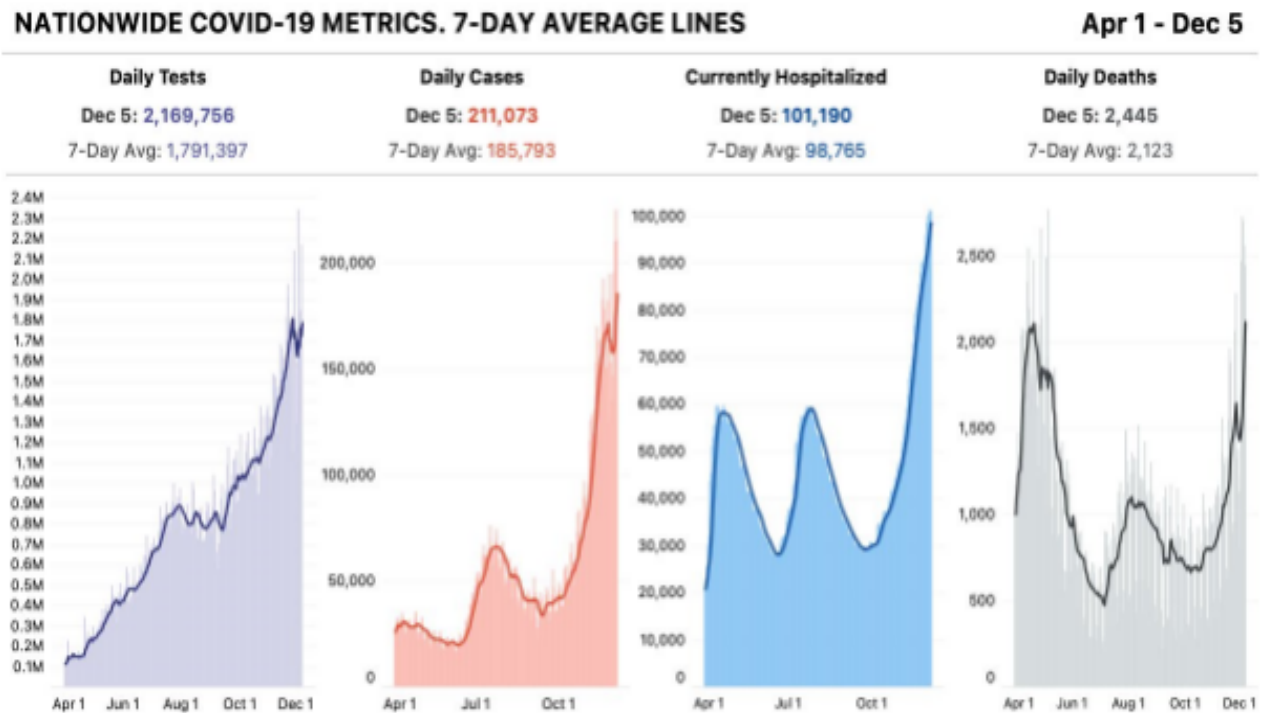
Ghaly said. State officials said: “Stay in your county if you can. Don’t drive more than 2-3 hours.” “You can travel for urgent matters or if such travel is essential to your permitted work,” they say, but “avoid traveling long distances for vacations or pleasure as much as possible.” However, he and Newsom also said that parks and beaches would remain open and that Californians could boost their mental health by hiking, running, fishing, practicing yoga, skiing, snowboarding and otherwise savoring outdoor activities.

Besides its travel elements, the new order “prohibits private gatherings of any size, closes sector operations except for critical infrastructure and retail, and requires 100% masking and physical distancing in all others.” Once in place, it is intended to remain in effect for at least three weeks.

UNITED STATES

Total Cases: 14,570,912

Deaths: 281,121



1) The US hit a record 7-day average of new Covid-19 cases as hospitals are further strained

More than 100,000 Covid-19 patients have been hospitalized nationwide for the past four days, according to the Covid Tracking Project. As of Friday, the US averaged 182,633 daily new cases over the last week, a record high for the country, according to Johns Hopkins University data. And the average number of daily Covid-19 deaths across a week hit 2,010 on Friday, the highest it has been since April. The US recorded 227,885 cases on Friday alone, the highest one-day count of the pandemic.

Hospitals across the United States are being put under immense pressure as the nation continues to hit record levels of new Covid-19 cases, adding more than 1 million new cases in the first five days of December. "Everywhere we're seeing a surge," said Dr. Carlos del Rio, an infectious disease physician and executive associate dean of Emory University School of Medicine. "And the biggest problem when you have a surge is, it's not the space, it's not the stuff, it's actually the staff. Staff are tired, sick and I'm worried we're running out of staff to take care of patients."

Experts fear a potential surge of infections linked to Thanksgiving gatherings that will further stress hospitals and frontline health workers. Dr. Shirlee Xie, a hospitalist and associate director of hospital medicine for Hennepin Healthcare in Minneapolis, said health care workers are "suffocating" in their patients' fear and in their colleagues' exhaustion.

2) CDC will decrease coronavirus quarantine time from 14 to 7-10 days

The Director of the US Centers for Disease Control and Prevention, Dr. Robert Redfield, informed Vice President Mike Pence and White House Coronavirus Task Force members on Tuesday that the CDC will soon issue new guidelines reducing the number of days close contacts should quarantine following exposure to a Covid-19 positive individual, two senior administration officials told CNN.

The new guidelines will recommend close contacts of those infected with the coronavirus should quarantine for 7 to 10 days after exposure,

down from the 14 days currently recommended, the official said. Individuals can end their quarantine after 7 days if they receive a negative test, or 10 days without getting tested.

The CDC updated its definition of a close contact with a Covid-19 patient in late October to include multiple, brief exposures. The current definition includes exposures adding up to a total of 15 minutes spent six feet or closer to an infected person. Previously, the CDC defined a close contact as 15 minutes of continuous exposure to an infected individual.

3) The US debate over which group should get vaccine priority is getting heated

With the coronavirus pandemic surging and initial vaccine supplies limited, the United States has a tough decision to make: Should the country's immunization program focus in the early months on the elderly and people with serious medical conditions, who are dying of the virus at the highest rates, or on essential workers, an expansive category encompassing Americans who have borne the greatest risk of infection?

Health care workers and the frailest of the elderly — residents of long-term-care facilities — will almost certainly get the first shots, under guidelines that the Centers for Disease Control and Prevention issued on Thursday. But with vaccinations expected to start this month, the debate among federal and state health officials about who goes next, and lobbying from outside groups to be included, is growing more urgent.

It's a question increasingly guided by concerns over the inequities laid bare by the pandemic, from disproportionately high rates of infection and death among poor people and people of color to disparate access to testing, child care and technology for remote learning.

Ultimately, the choice comes down to which is the higher priority: preventing death or curbing the spread of the virus and returning to some semblance of normalcy. "If your goal is to maximize the preservation of human life, then you would bias the vaccine toward older Americans," Dr. Scott Gottlieb, the former Food and Drug

Administration commissioner, said recently. “If your goal is to reduce the rate of infection, then you would prioritize essential workers. So, it depends what impact you’re trying to achieve.”

Adding to the complexity of any choice, the definition of “essential workers” used by the C.D.C. covers nearly 70 percent of the American work force, sweeping in not just grocery store clerks and emergency responders, but also weather forecasters, tugboat operators, exterminators, nuclear energy workers, those working in animal shelters and workers in laundry services. Some labor economists and public health officials consider the category overbroad and say it should be narrowed to only those who interact in person with the public.

An independent committee of medical experts that advises the C.D.C. on immunization practices will meet to decide which group to recommend for the second phase of vaccination. In a meeting last month, all voting members of the committee indicated support for putting essential workers ahead of people 65 and older and those with high-risk health conditions.

To find out your place in line, see this interactive graphic from the New York Times

<https://www.nytimes.com/interactive/2020/12/03/opinion/covid-19-vaccine-timeline.html>

4) First shipments of coronavirus vaccine will fall short

State health departments and governors' offices across the country are finally being told by the US Centers for Disease Control and Prevention and Operation Warp Speed how many doses of the coronavirus vaccine they will initially be receiving once the vaccine is authorized, and it's not enough. With the Pfizer vaccine emergency use authorization expected later this month, and perhaps also for the Moderna vaccine, states are learning there's not enough for them to fully vaccinate those designated as their first and top priority.

Earlier this week, the CDC's Advisory Committee on Immunization Practices recommended that the very first batch of Americans to get vaccinated should be frontline health care workers and residents of long term care facilities such as nursing homes. Together, they add up to

about 24 million people. Federal officials estimate about 40 million vaccines will be available by the end of the month if both Moderna and Pfizer get US Food and Drug Administration authorization -- only enough to vaccinate 20 million people, because two doses are needed for each person.

A CNN analysis of 27 states' vaccine data showed that none were getting enough vaccine in the first shipment to vaccinate all their first priority group, including health care workers and long-term care residents. CNN was able to confirm the expected size of the first shipment of vaccine for at least 45 states, and the number of people prioritized in a least 27 states. Now states must decide how they will ration the vaccine among their top priority groups and how the small first installment affects the timetable of when groups down the line can be vaccinated. Some states are already being forced to triage -- choosing which health care workers are a higher priority than others.

California must vaccinate 2.4 million healthcare workers first and Gov. Gavin Newsom said earlier this week that the state is only receiving 327,000 doses of the vaccine from Pfizer to start with. Since that covers just a fraction of the healthcare workers needed to get vaccinated, Newsom said Thursday the state would be trimming its list of top priority group of healthcare workers even further to decide who gets vaccinated first.

RECOMMENDATIONS

We have no new recommendations at this time.

But we do have a commendation – for Kate, Jill, Sarah, Jessica, Yousra, and Board members for their extraordinary leadership, vision, strategic and tactical abilities, commitment, and profound caring for SFV and its members during this year of unprecedented challenges.

Thank you all.