

COVID-19 and Public Health: A Discussion Session for Campuses

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Deputy Commissioner of Clinical Affairs

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Kentucky Public Health
Prevent. Promote. Protect.

COVID-19 Perspective

- SARS-CoV-2, COVID-19, did not exist as a human disease before late 2019.
- February 2020, the Lombardy region in northern Italy.
- Early March, the disease was spreading in Seattle, Washington and California.
- On March 6, the first Kentucky resident tested positive for COVID-19 and Gov. Beshear declared a state of emergency.
- On March 13, President Trump declared a national state of emergency.
- In March, modeling predicted unmitigated spread of COVID-19 could cause the death of 45,000 – 90,000 Kentuckians and 2 – 4 million Americans, roughly 1 – 2% of our state and our nation in a single year.
- Now the US has experienced the devastation in New York, followed by Louisiana, Texas, Florida, and Arizona.
- There is no vaccine, no cure, and no effective COVID-19-specific treatment.

Public Health Risk Reduction Tools

- Social Distancing
- Cloth Face Coverings
- Screening and Temperature Checks
- Hand and Surface Hygiene
- Contact Tracing

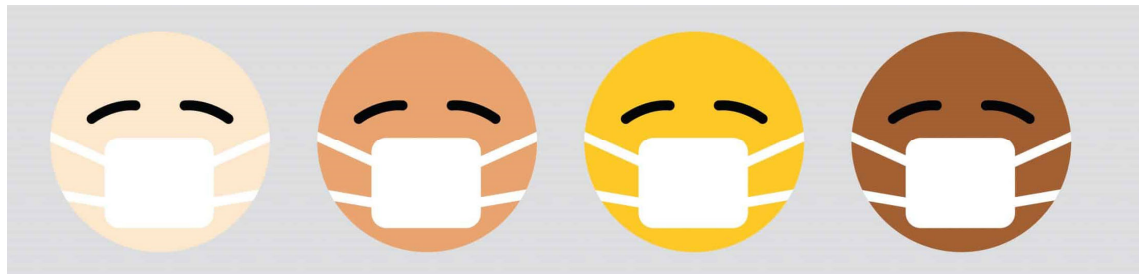
Social Distancing



- COVID-19 is primarily spread through viral particles carried in by respiratory droplets released from the nose and mouth when an infected person coughs, sneezes, talks, laughs, or sings.
- 20-40+% of the time, infected persons may have no symptoms of COVID-19 illness any time during their infection and spread the virus to others.
- Infected persons can spread viral particles for two days before symptoms manifest - called preinfection.
- Staying \geq six feet apart from others is an essential tool we have to mitigate this pandemic.

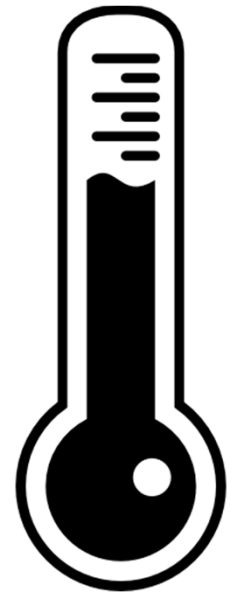
Cloth Face Coverings

- Since the coronavirus spreads by respiratory droplets, covering the nose and mouth is the way a person can prevent spreading the virus if they are not six feet away from others.
- Cloth face coverings provide the barrier needed to diminish the spread (surgical masks and N95 masks are not needed in schools except for certain nursing activities) and can protect the wearer to some degree.



Screening and Temperature Checks

- Although many people with COVID-19 infection are asymptomatic, more than 60% do have symptoms.
- Requiring persons with symptoms or active infection to self-isolate is essential to reduce disease spread.
- Fever is the most common symptom of COVID-19.
- Preventing a student or staff member with a temperature $>100.4^{\circ}$ to enter schools will substantially decrease the potential exposure of students and staff to this illness.



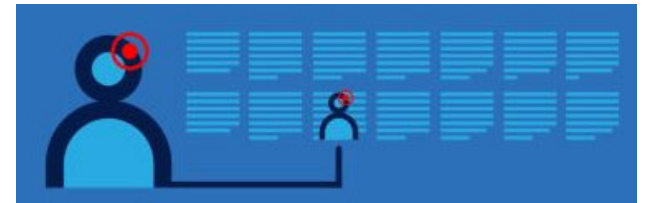
Hand and Surface Hygiene

- Viral particles transmitted in respiratory droplets live for variable time on objects and surfaces.
- Our hands frequently touch our eyes, nose, and mouth thereby increasing the risk of spreading infection.
- Frequent hand cleaning and sanitizing reduces the risk of transmitting disease.
- Frequently cleaning surfaces contaminated by respiratory droplets is also an important step to reduce transmission of disease.



Contact Tracing

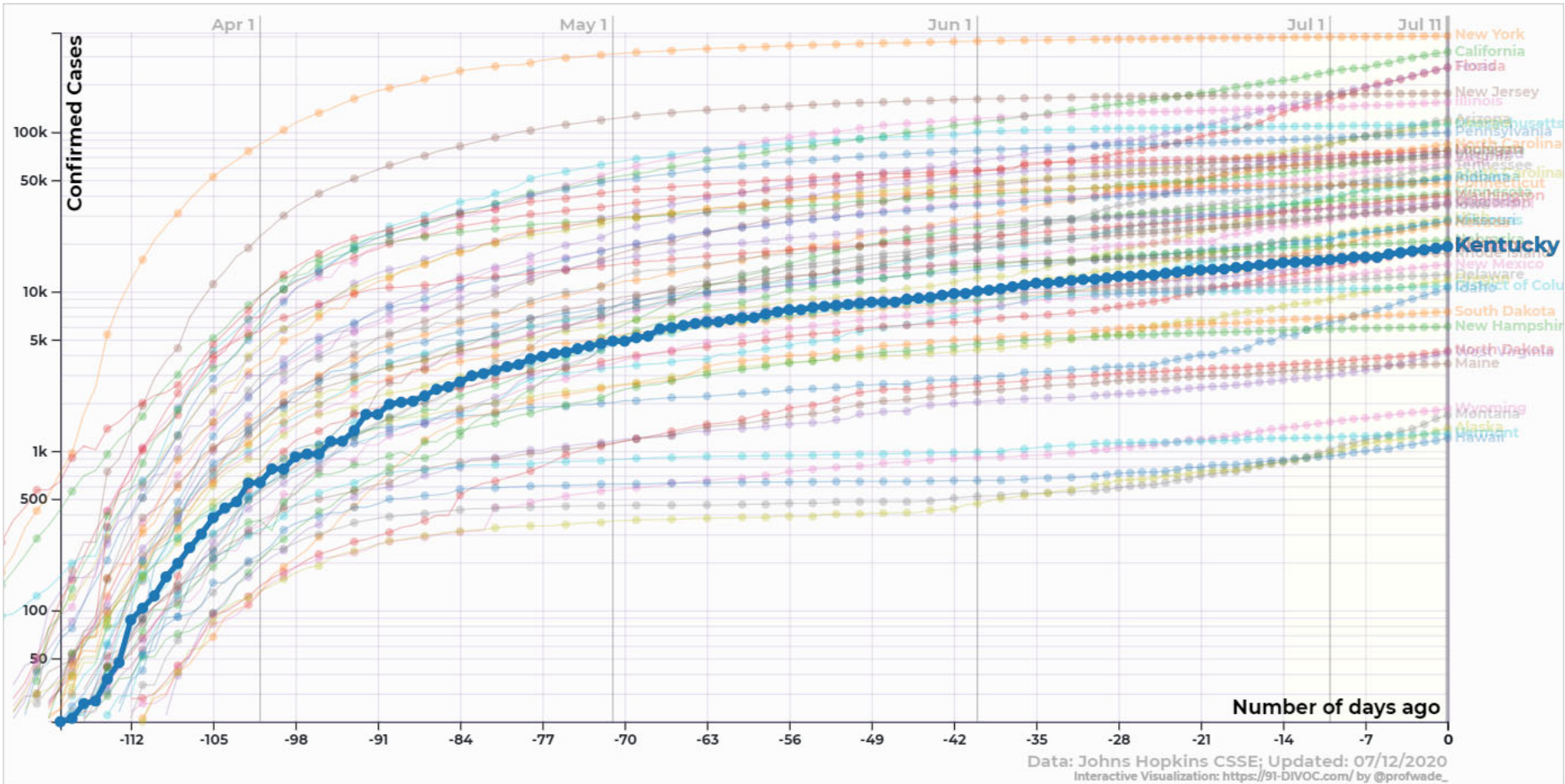
- Public health has used contact tracing for decades to **identify** a person with a communicable illness, **isolate** that person, and **quarantine** others with high risk exposure to the infected person to prevent disease spread.
- This technique has worked with measles, chicken pox, mumps, and multiple other illnesses seen in school settings.
- Having a plan to prevent exposure of your students and staff to COVID-19 should include preparing to assist contact tracers with their investigations.



Balancing Public Health with Other Concerns

- These tools are disruptive to our lives as we have known them.
- Until medical science produces a vaccine, treatment, or cure, these tools, however disruptive, are the ones available to reduce the risk of rapid COVID-19 spread with its associated overwhelming of the healthcare system and loss of human life.
- These tools require education, adaptation, patience, and tolerance.
- The Kentucky Department for Public Health and local health departments stand ready to advise and assist school systems in implementation of these tools.

Confirmed COVID-19 Cases by US States/Territories



Highlight: Kentucky
 Show: All States & DC
 Data: Total Confirmed Cases
 Scale: Log Linear

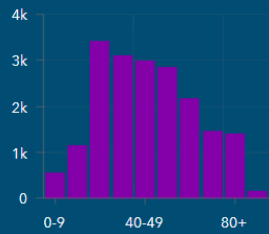
X-Axis: Days ago (right aligned), all data
 Y-Axis: Scale to Highlight and Cur. Max

KDPH COVID-19 Dashboard

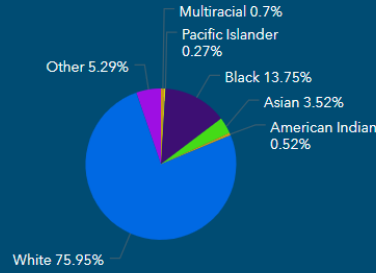
Cases

19,121

Cases by Age Group



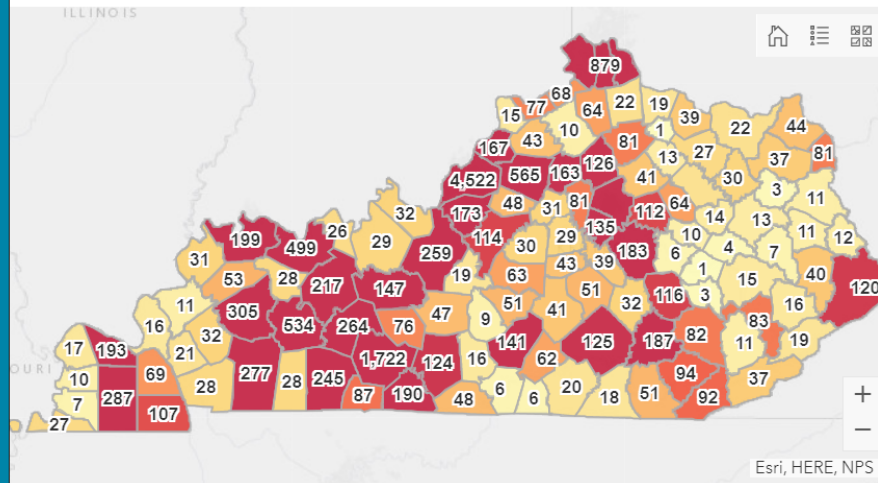
Cases by Race where race known



Race **Ethnicity** Sex

Cases by County

Click a county for more information

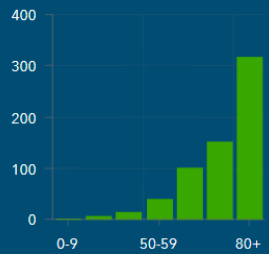


Case Map **Rate Map**

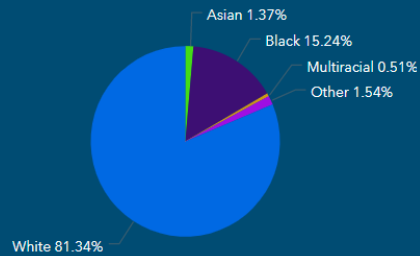
Deaths

622

Deaths by Age Group



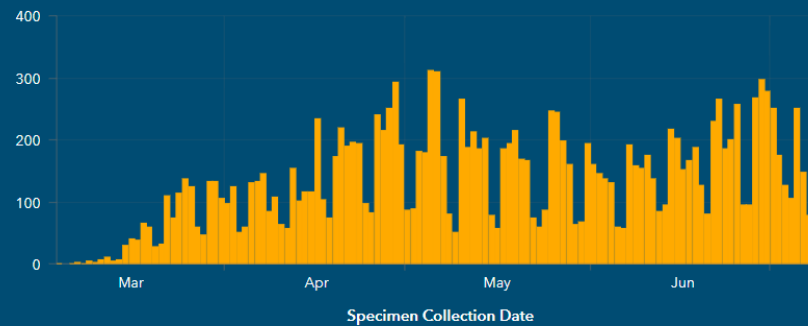
Deaths by Race where race known



Race **Ethnicity** Sex

Epidemic Curve

Specimens collected within the past week may not yet be reported



*switched to specimen collection date from illness onset date on 06/25 for more complete data

Total Cases by County List

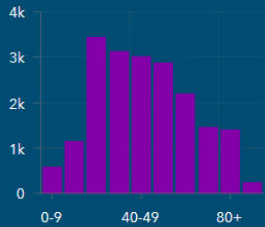
| |
|------------------|
| Jefferson: 4,522 |
| Fayette: 1,814 |
| Warren: 1,722 |
| Kenton: 879 |
| Boone: 712 |
| Shelby: 565 |
| Muhlenberg: 534 |
| Daviess: 499 |
| Campbell: 323 |
| Hopkins: 305 |
| Graves: 287 |
| Christian: 277 |
| Butler: 264 |
| Hardin: 259 |
| Logan: 245 |
| Ohio: 217 |
| Henderson: 199 |
| McCracken: 193 |
| Allen: 190 |
| Laurel: 187 |
| Madison: 183 |
| Bullitt: 173 |
| Oldham: 167 |
| Franklin: 163 |
| Grayson: 147 |
| Adair: 141 |
| Jessamine: 135 |
| Scott: 126 |

KDPH COVID-19 Dashboard

Cases

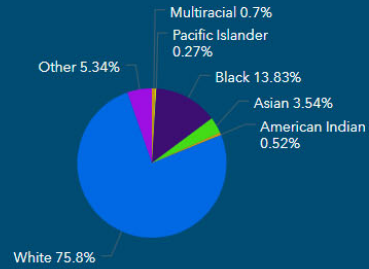
19,389

Cases by Age Group

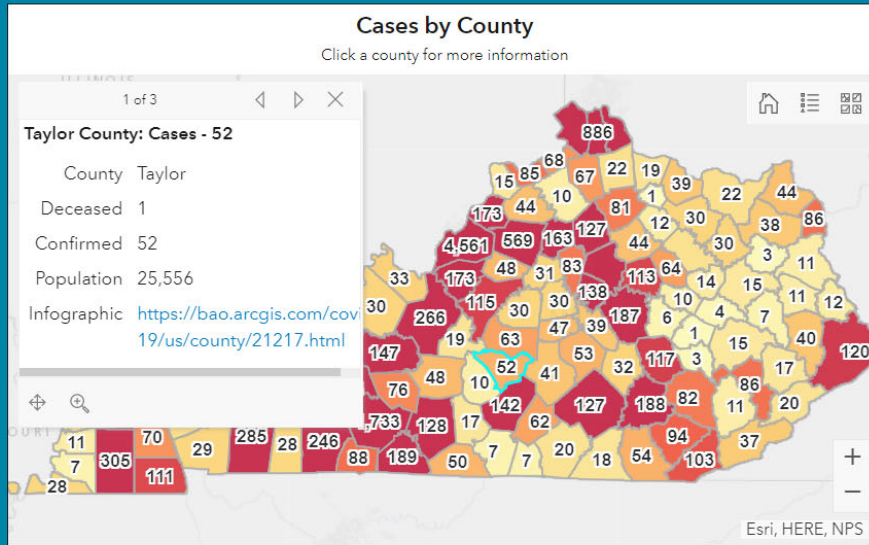


Cases by Race

where race known



Race Ethnicity Sex

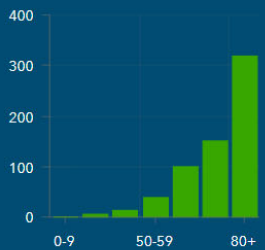


Case Map Rate Map

Deaths

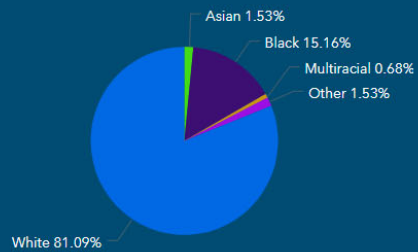
625

Deaths by Age Group



Deaths by Race

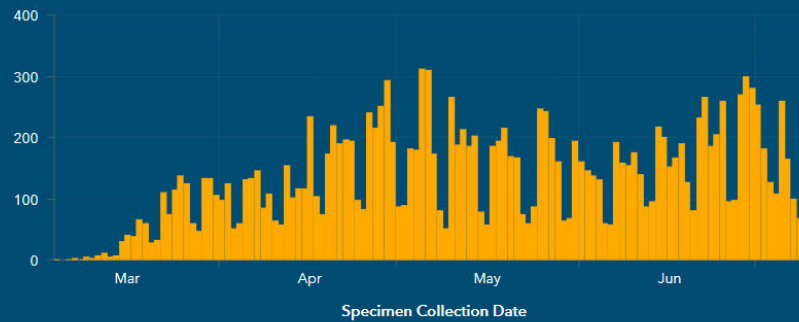
where race known



Race Ethnicity Sex

Epidemic Curve

Specimens collected within the past week may not yet be reported



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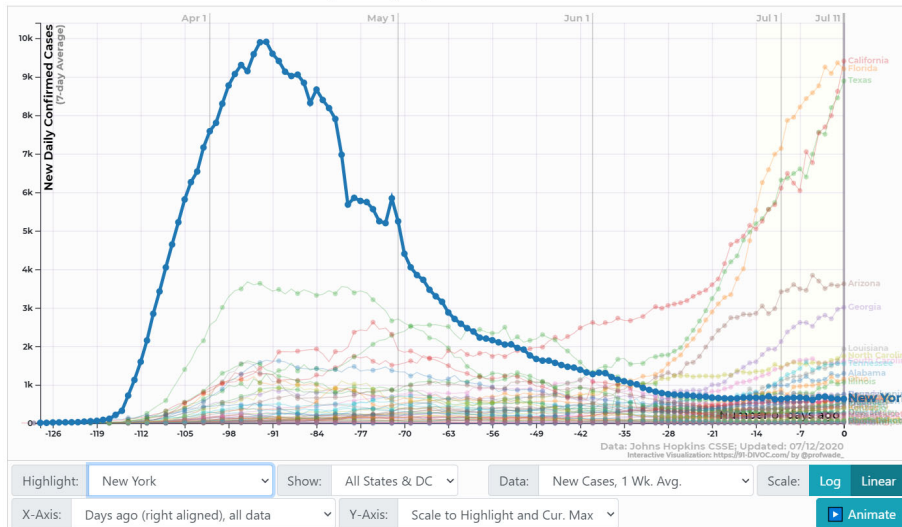
Total Cases by County List

| |
|------------------|
| Jefferson: 4,561 |
| Fayette: 1,834 |
| Warren: 1,733 |
| Kenton: 886 |
| Boone: 726 |
| Shelby: 569 |
| Muhlenberg: 537 |
| Daviess: 499 |
| Campbell: 330 |
| Hopkins: 305 |
| Graves: 305 |
| Christian: 285 |
| Hardin: 266 |
| Butler: 265 |
| Logan: 246 |
| Ohio: 218 |
| McCracken: 203 |
| Henderson: 203 |
| Allen: 189 |
| Laurel: 188 |
| Madison: 187 |
| Oldham: 173 |
| Bullitt: 173 |
| Franklin: 163 |
| Grayson: 147 |
| Adair: 142 |
| Jessamine: 138 |
| Barren: 128 |

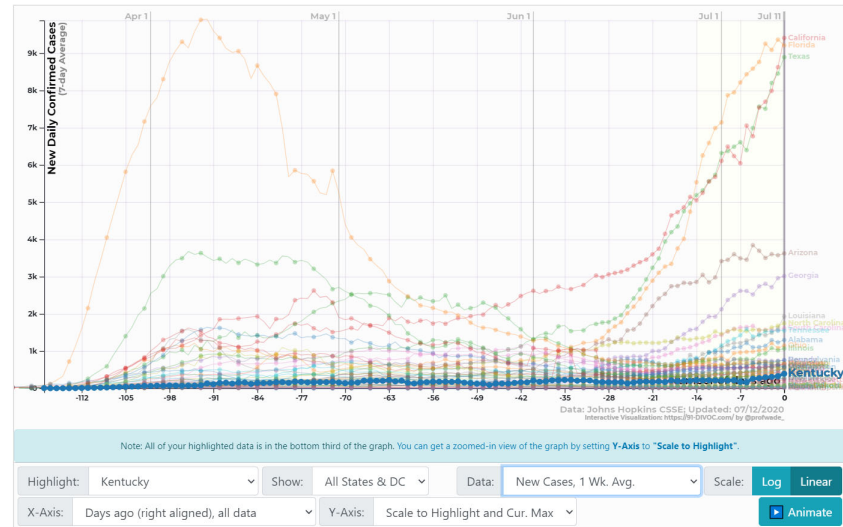
Early Pandemic: New York vs Kentucky

New York – An Ominous Warning

New Confirmed COVID-19 Cases per Day by US States/Territories



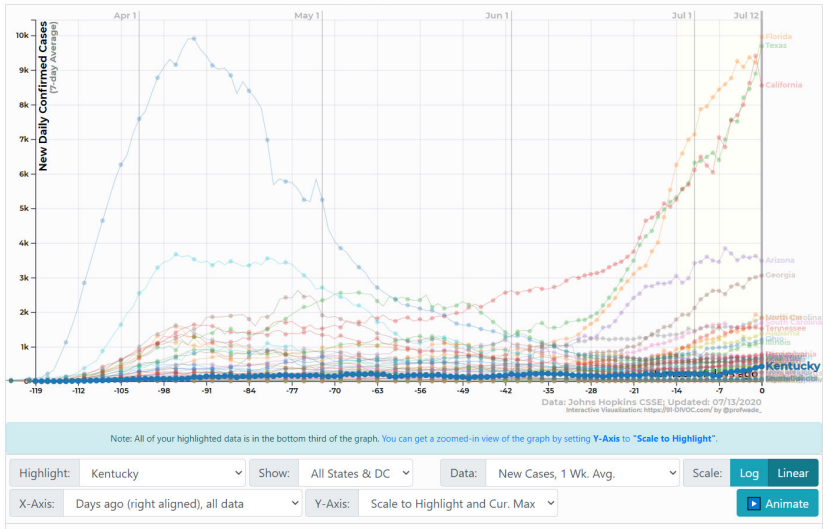
New Confirmed COVID-19 Cases per Day by US States/Territories



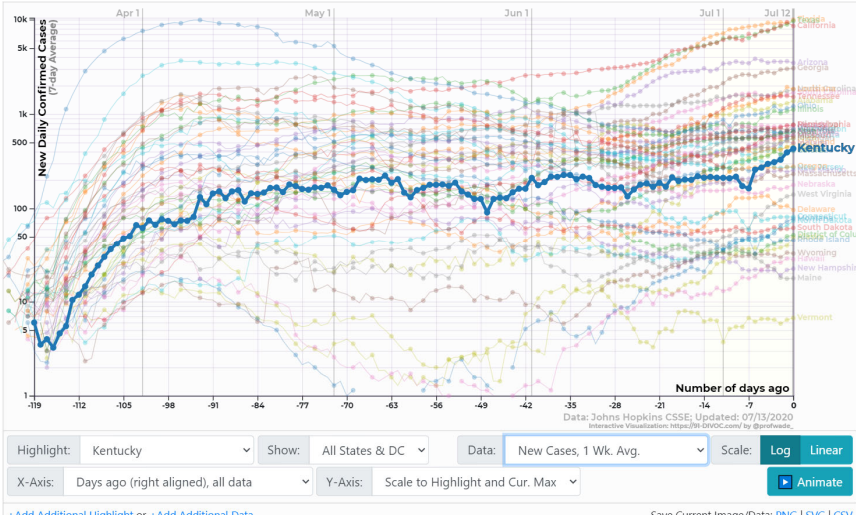
<http://www.91-divoc.com/pages/covid-visualization/>
Accessed 7/12/2020

Current Pandemic KY Spotlight Only

New Confirmed COVID-19 Cases per Day by US States/Territories



New Confirmed COVID-19 Cases per Day by US States/Territories



<http://www.91-divoc.com/pages/covid-visualization/>
Accessed 7/13/2020

Florida vs. Kentucky

Surge in FL After Public Health Orders Lifted

Positive test rate

FLORIDA

Save Share

A relatively high percentage (19.3%) of COVID tests were positive, which indicates that testing in Florida is limited and that most cases may go undetected. At these levels, it is hard to know how fast COVID is actually spreading, and there is risk of being surprised by a second wave of disease. Caution is warranted.



<https://covidactnow.org/>
Accessed 7/12/2020

Positive test rate


KENTUCKY

Save Share

A significant percentage (6.5%) of COVID tests were positive, meaning that Kentucky's testing meets WHO minimums but needs to be further expanded to detect most new cases. Identifying and isolating new cases can help contain COVID without resorting to lockdowns.



UK Gatton College of Business and Economics: Social-Distancing Slowed COVID-19



INSTITUTE FOR THE STUDY OF FREE ENTERPRISE

Did Social-Distancing Measures in Kentucky Help to Flatten the COVID-19 Curve?

Charles Courtemanche
Joseph Garuccio
Anh Le
Joshua Pinkston
Aaron Yelowitz

April 2020

*Institute for the Study of Free Enterprise
Working Paper 29*

University of Kentucky
244 Gatton College of Business and Economics
Lexington, KY 40506-0034
<http://isfe.uky.edu/>


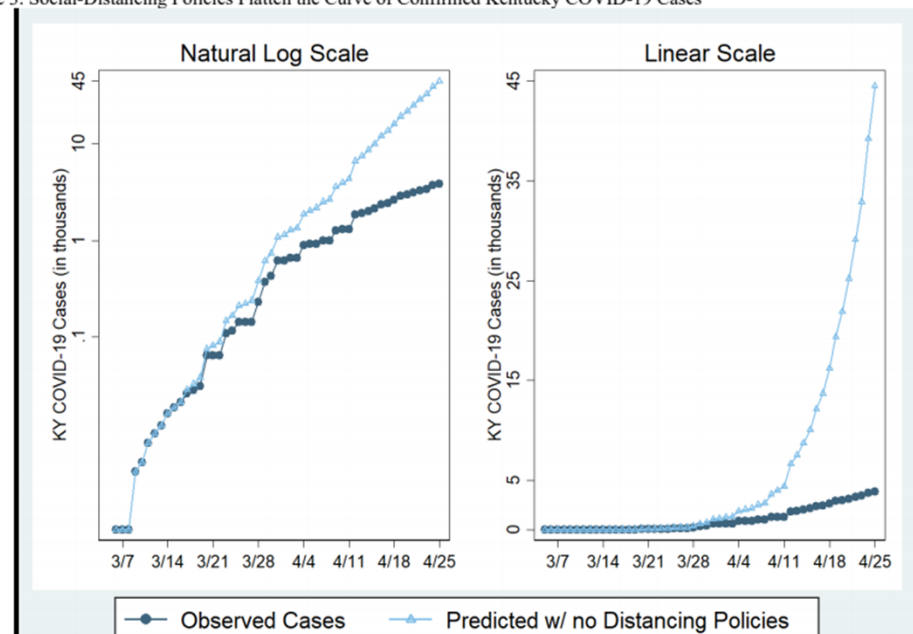

Gatton College of Business and Economics

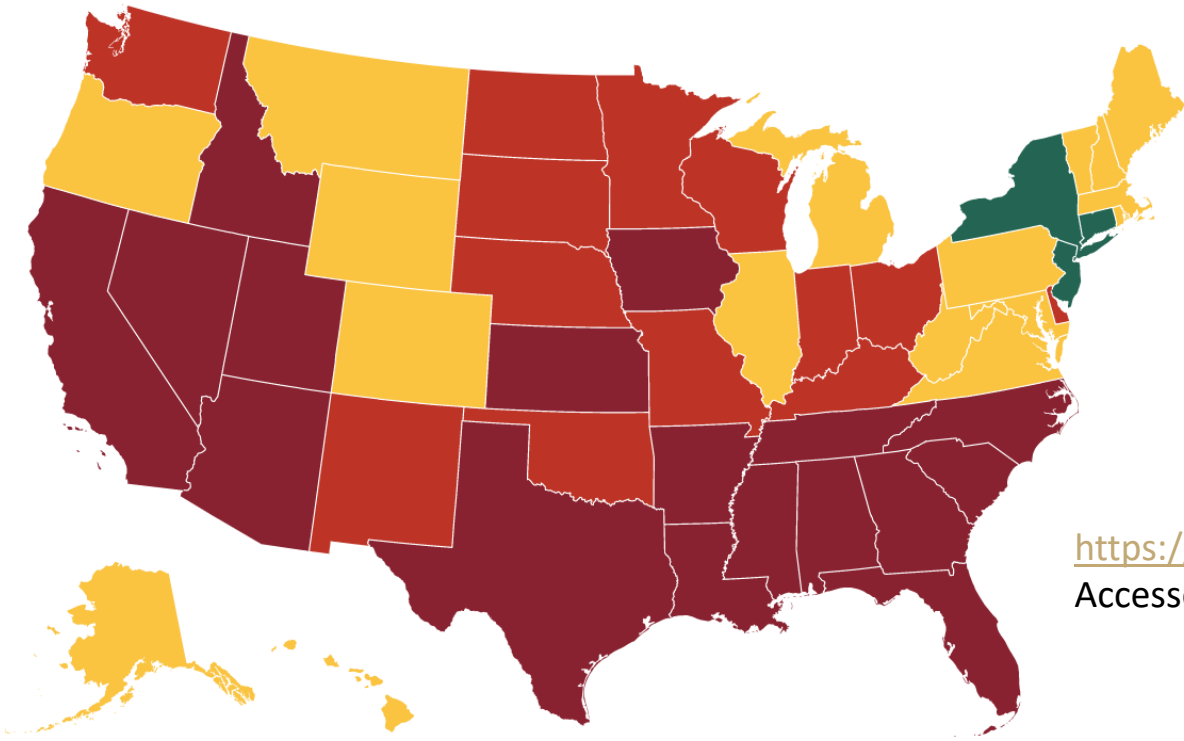
Figure 3: Social-Distancing Policies Flatten the Curve of Confirmed Kentucky COVID-19 Cases



Notes: Predicted cumulative cases each day in Kentucky with distancing policy variables set to 0 are derived from authors' event-study regression using daily county-level data from March 5-April 25 from the South and Midwest Census Regions, weighted by population.

Tracking Our COVID-19 Response

Each state's progress towards a new normal




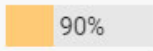





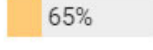
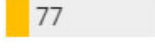
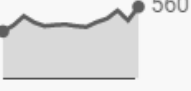

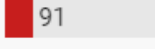


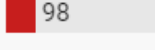




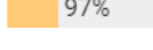
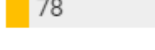



<https://www.covidexitstrategy.org/>
Accessed 7/12/2020

BRUISED RED
Uncontrolled spread

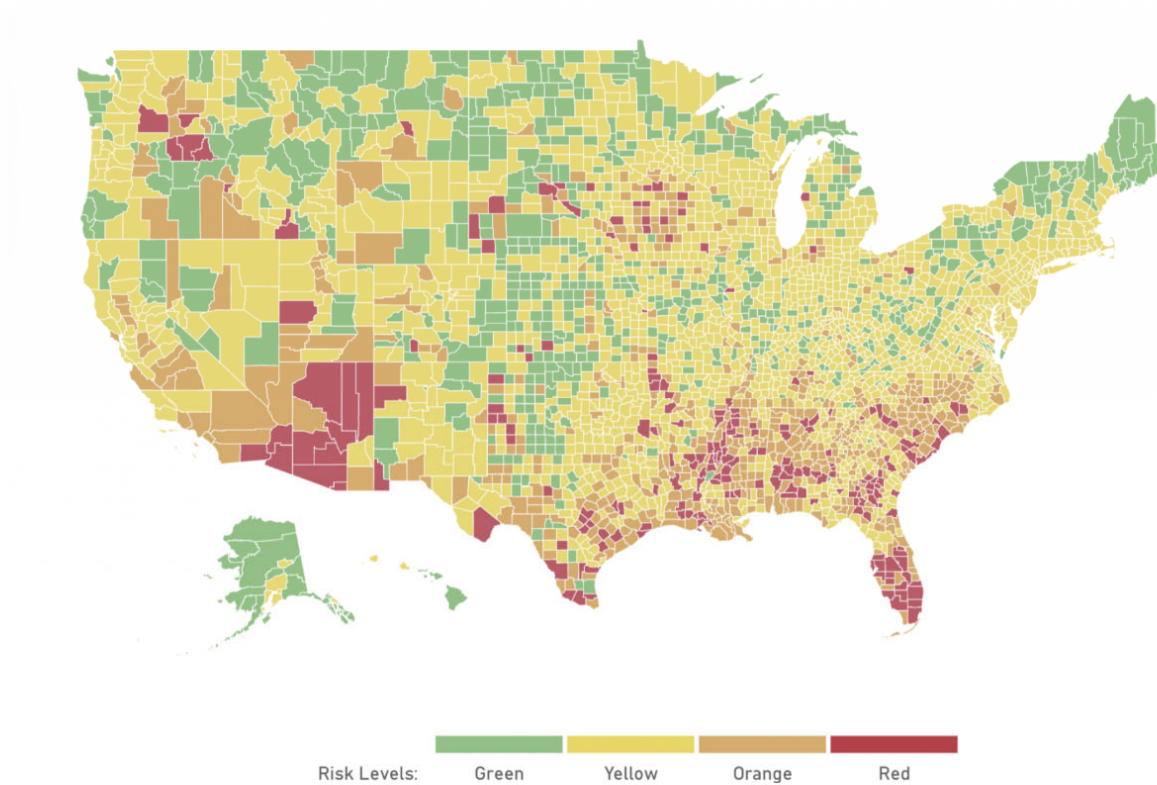
RED
Trending poorly

YELLOW
Making progress

GREEN
Trending better

| STATE NAME | 14-DAY TREND OF COVID+ | LAST 14 DAYS OF COVID+ (ROLLING) | INFLUENZA-LIKE ILLNESS | % OF TEST TARGET | ICU OCCUPIED | NEW CASES PER MILLION PER DAY | COVID+ RATE IS |
|------------------------|---------------------------|--|---------------------------|--|------------------------|---|---------------------------|
| Kentucky 😞 | 85% <i>Increasing</i> | 212  392 | Minimal <i>Level 1</i> |  90% | 78% <i>Elevated</i> |  88 | 6.5% <i>Increasing</i> |
| Illinois 😞 | 27% <i>Increasing</i> | 716  909 | Minimal <i>Level 1</i> |  157% | 55% <i>Normal</i> |  72 | 3.0% <i>Increasing</i> |
| Indiana | 45% <i>Increasing</i> | 358  521 | Minimal <i>Level 1</i> |  65% | 66% <i>Normal</i> |  77 | 8.0% <i>Increasing</i> |
| Missouri | 52% <i>Increasing</i> | 367  560 | Minimal <i>Level 1</i> |  96% | 61% <i>Normal</i> |  91 | 6.3% <i>Increasing</i> |
| Ohio | 46% <i>Increasing</i> | 786  1.1k | Minimal <i>Level 1</i> |  109% | 47% <i>Normal</i> |  98 | 6.0% <i>Increasing</i> |
| Tennessee | 114% <i>Increasing</i> | 724  1.6k | Minimal <i>Level 1</i> |  178% | 74% <i>Elevated</i> |  227 | 8.5% <i>Flat</i> |
| Virginia 😞 | 25% <i>Increasing</i> | 535  668 | Minimal <i>Level 1</i> |  97% | 68% <i>Normal</i> |  78 | 5.4% <i>Increasing</i> |
| West Virginia 😞 | 241% <i>Increasing</i> | 39  133 | Minimal <i>Level 1</i> |  118% | 75% <i>Elevated</i> |  74 | 4.2% <i>Increasing</i> |

HGHI Releases Guidance for COVID Suppression



COVID RISK LEVEL: **GREEN**

LESS THAN ONE CASE PER 100,000 PEOPLE

ON TRACK FOR CONTAINMENT

MONITOR WITH VIRAL TESTING AND CONTACT TRACING PROGRAM

#THEPATHTOZERO

COVID RISK LEVEL: **YELLOW**

1-9 CASES PER 100,000 PEOPLE

COMMUNITY SPREAD

RIGOROUS TEST AND TRACE PROGRAMS ADVISED

#THEPATHTOZERO

COVID RISK LEVEL: **ORANGE**

10-24 CASES PER 100,000 PEOPLE

ACCELERATED SPREAD

STAY-AT-HOME ORDERS AND/OR RIGOROUS TEST AND TRACE PROGRAMS ADVISED

#THEPATHTOZERO

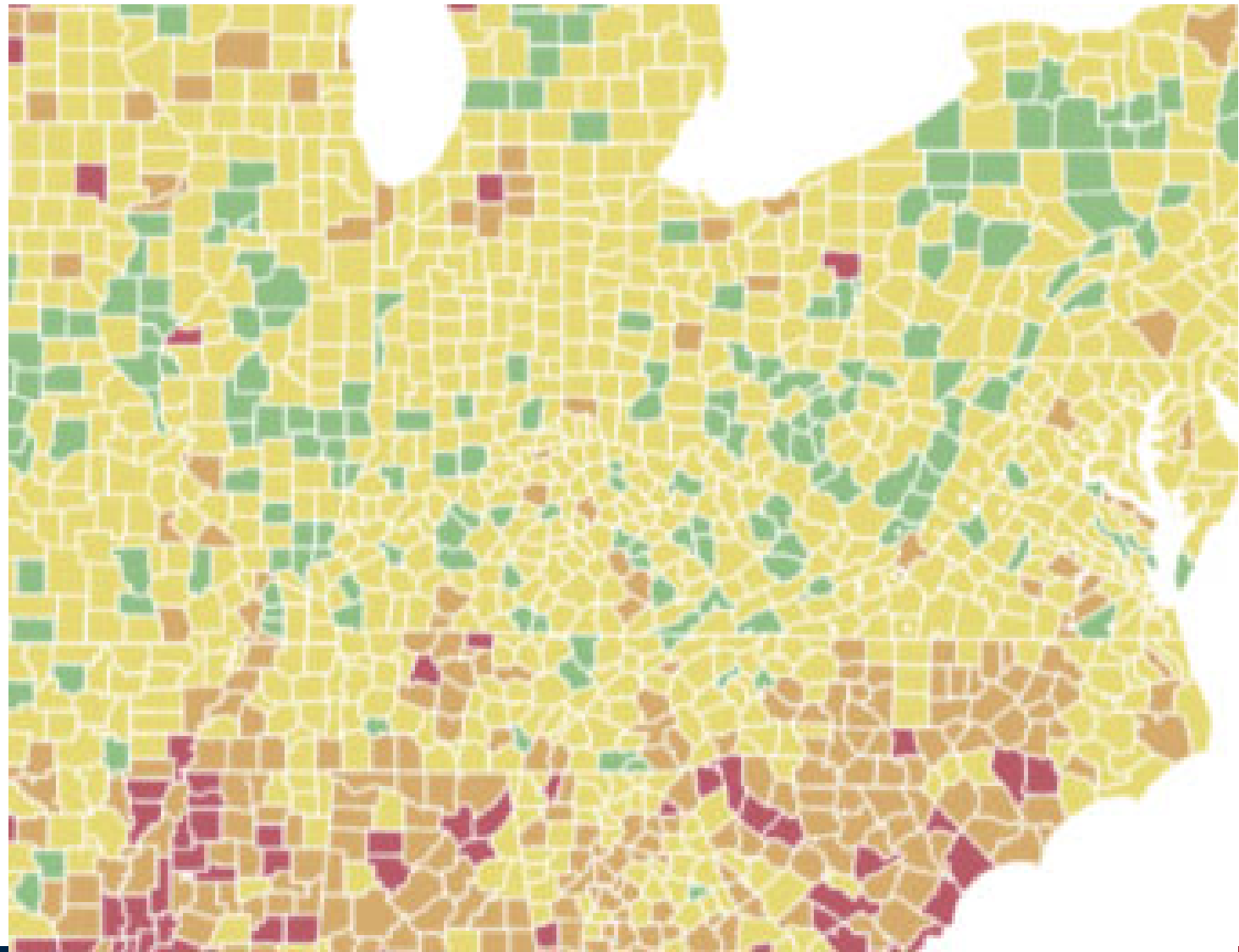
COVID RISK LEVEL: **RED**

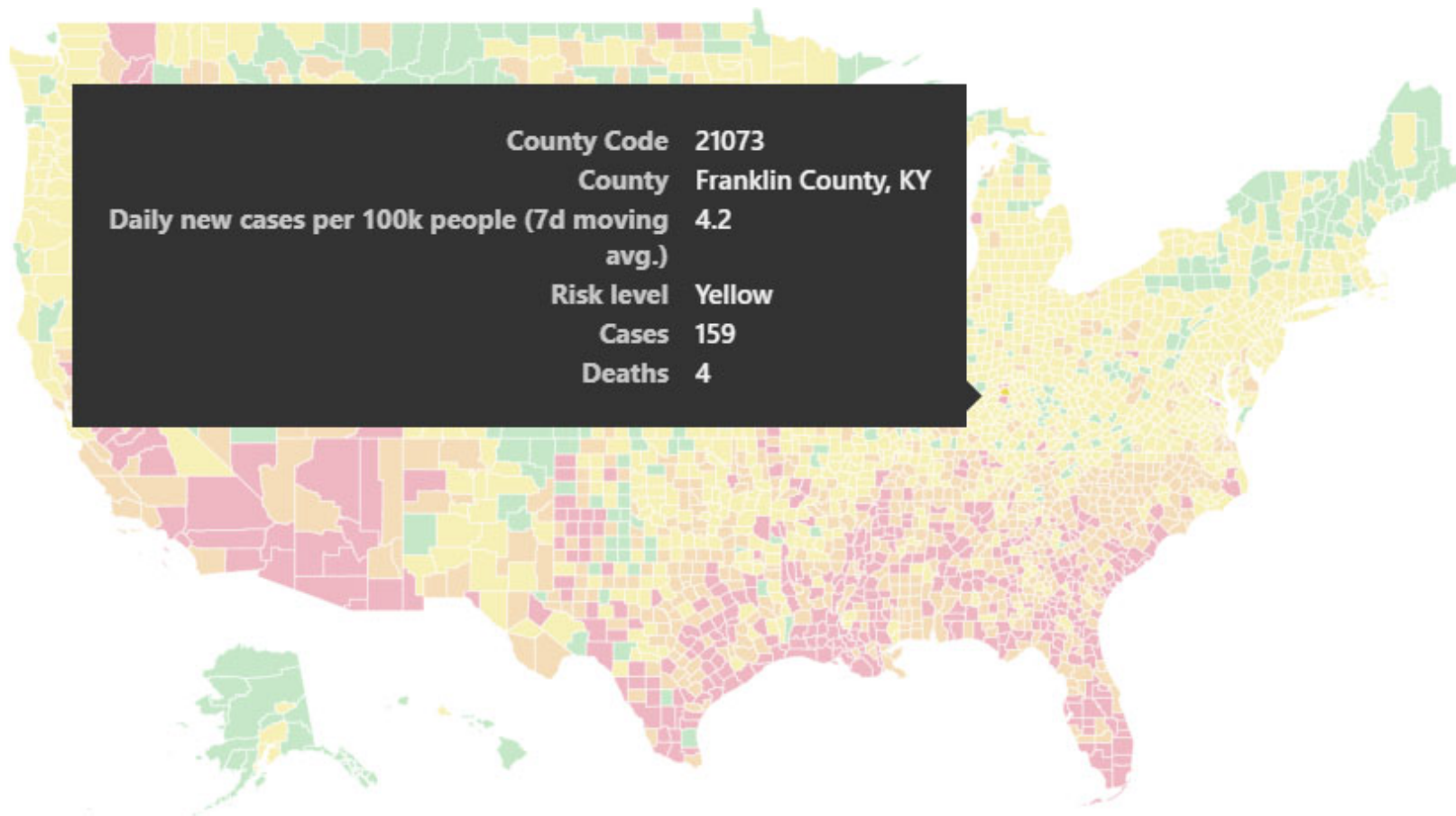
25+ CASES PER 100,000 PEOPLE

TIPPING POINT

STAY-AT-HOME ORDERS NECESSARY

#THEPATHTOZERO





TEAM KENTUCKY

#HealthyAtSchool

Guidance on Safety Expectations and Best Practices for Kentucky Schools (K-12)

Interim Guidance as of June 2020



kycovid19.ky.gov

connie.white@ky.gov

Questions posted

- Large scale events
- Masks
- Postsecondary “requirements”
- Off site internships
- Testing
- Off campus activity by students

kycovid19.ky.gov

connie.white@ky.gov