

Straight from the Source Issues can be found at: www.GPHOhio.org

Want our newsletter sent to you? Email us to get on the list! info@GeaugaCountyHealth.org

We need YOUR input to help keep Geauga County businesses open!

Click the link below to access a brief survey about business operations during COVID-19. https://www.surveymonkey.com/r/ Geauga Public Input COVID-19

COVID-19 Resources

CDC: <u>www.cdc.gov/coronavirus</u>
ODH: <u>www.coronavirus.ohio.gov</u>

ODH COVID-19 Call Center 1-833-4-ASK-ODH (1-833-427-5634) 9 a.m. to 8 p.m. 7 days/week.

Geauga County COVID-19 Hotline: (440) 279-1940



Follow us on Facebook for updates! Facebook @GPHOhio

Please be aware that comments are not monitored and questions should be emailed to Geauga Public Health.

PUBLIC HEALTH NEWS AND REPORTS

STRAIGHT FROM THE SOURCE

VOLUME 1 ISSUE 17 MONDAY, SEPTEMBER 14, 2020

Health Commissioner update:

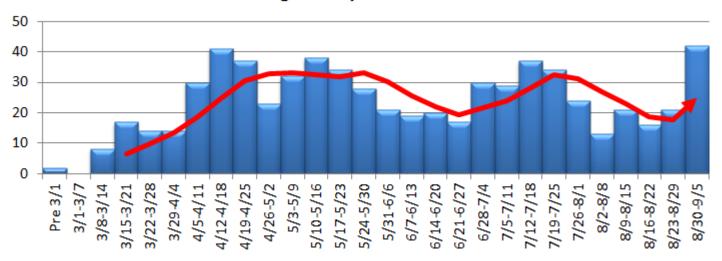
This issue is quite a bit fuller than past issues as there has been a gap in reporting for several weeks due to some staffing changes here at Geauga Public Health. I would like to start with a reminder that the data presented here are not intended to create fear but rather to simply inform the public about the most critical population health issue facing the public. Informed people are better able to make informed and responsible choices that will not only impact their own health but the health of others, and further downstream, the ability of our schools and businesses to operate. All this depends on the public knowing information that impacts them. This office will never "play games" with data to "control people" or to give them a false sense of security by downplaying a health threat. We have no underlying agenda. The data are what the data are. It is our job to share information.

On September 9, 2020, the revised **"Ten Essential Public Health Services"** was released. This is a national professional public health practice framework that has been around for a quarter century. It underscores the work of Geauga Public Health during these challenging times.

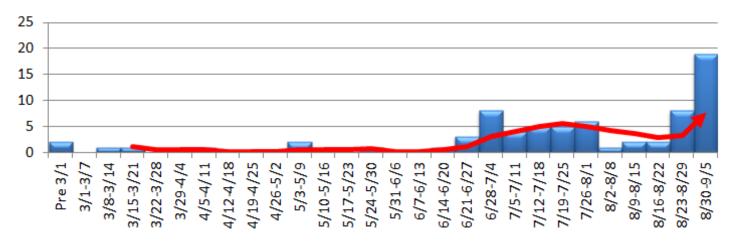
- 1. Assess and monitor population health status, factors that influence health, and community needs and assets
- 2. Investigate, diagnose, and address health problems and hazards affecting the population
- 3. Communicate effectively to inform and educate people about health, factors that influence it, and how to improve it
- 4. Strengthen, support, and mobilize communities and partnerships to improve health
- 5. Create, champion, and implement policies, plans, and laws that impact health
- 6. Utilize legal and regulatory actions designed to improve and protect the public's health
- 7. Assure an effective system that enables equitable access to the individual services and care needed to be healthy
- 8. Build and support a diverse and skilled public health workforce
- 9. Improve and innovate public health functions through ongoing evaluation, research, and continuous quality improvement
- 10. Build and maintain a strong organizational infrastructure for public health

The **Geauga County Board of Health** regular monthly meeting occurs on the 4th Wednesday of each month at 5:00pm in Building #8 at 470 Center Street in Chardon, Ohio. There is an opportunity for public comment.

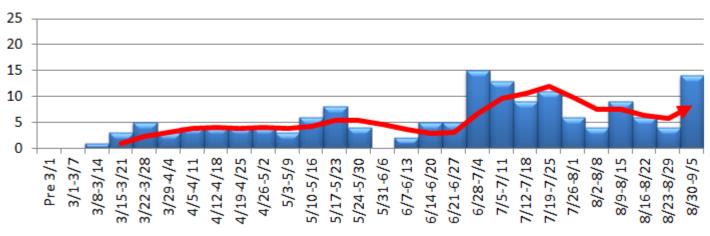
Geauga County COVID-19 Cases



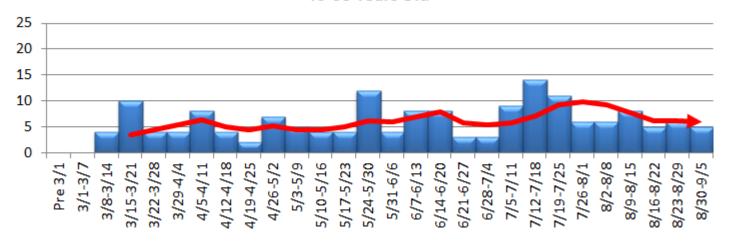
Geauga County COVID-19 Cases <20 Years Old



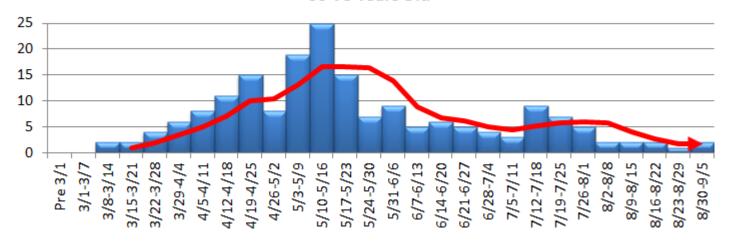
Geauga County COVID-19 Cases 20-39 Years Old



Geauga County COVID-19 Cases 40-59 Years Old



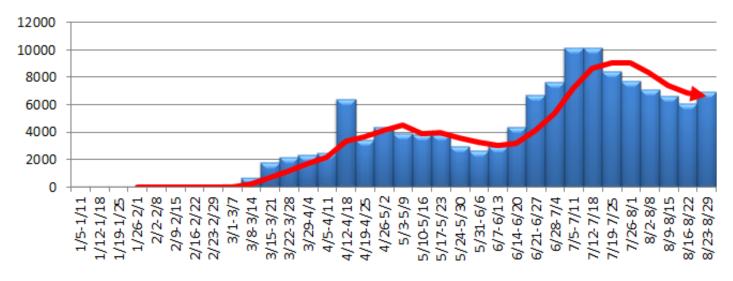
Geauga County COVID-19 Cases 60-79 Years Old



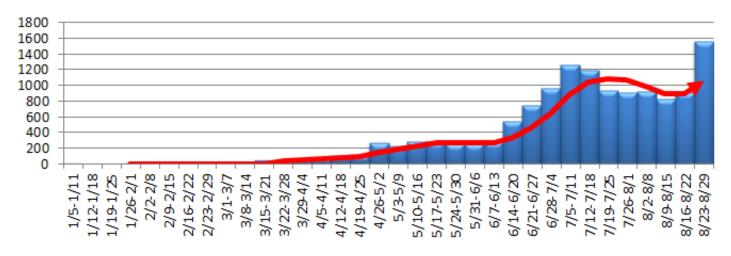
Geauga County COVID-19 Cases 80+ Years Old



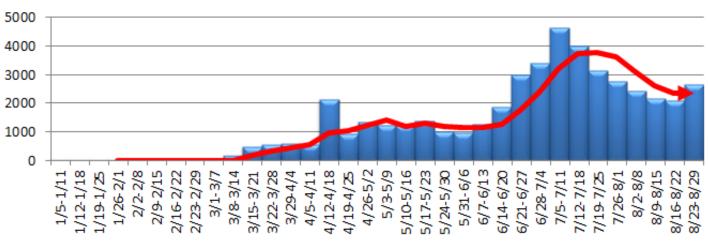
Ohio COVID-19 Cases



Ohio COVID-19 Cases <20 Years Old



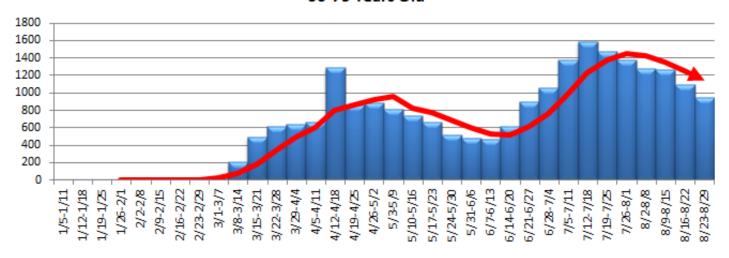
Ohio COVID-19 Cases 20-39 Years Old



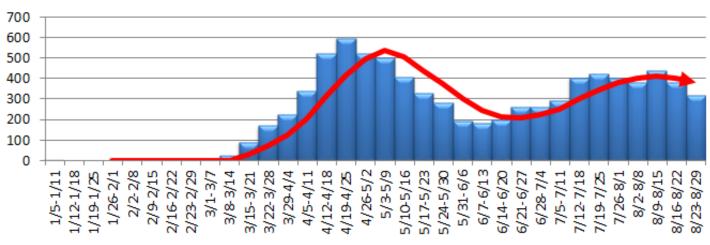
Ohio COVID-19 Cases 40-59 Years Old



Ohio COVID-19 Cases 60-79 Years Old



Ohio COVID-19 Cases 80+ Years Old



Summary of Alert Indicators

	INDICATOR	WHAT IT TELLS US
1	New Cases Per Capita	Flagged if greater than 50 cases per 100,000 residents over the last two weeks. Allows for counties with different population sizes to be appropriately compared.
2	Sustained Increase in New Cases	Flagged if increasing trend of at least 5 days in overall cases by onset date. Reflects disease spread in the population.
3	Proportion of Cases Not Congregate Cases	Flagged if proportion of cases that are not in a congregate setting goes over 50% in at least one of the last 3 weeks. Used as indicator of greater risk of community spread.
4	Sustained Increase in Emergency Room Visits	Flagged if increasing trend of at least 5 days in the number of visits to the emergency department with COVID-like illness or a diagnosis. Provides information on the health care seeking behavior of the population and a sense of how concerned residents are about their current health status and the virus.
5	Sustained Increase in Outpatient Visits	Flagged if increasing trend of at least 5 days in the number of people going to a health care provider with COVID symptoms who then receive a COVID confirmed or suspected diagnosis. Provides information on the health care seeking behavior of the population and a sense of how concerned residents are about their current health status and the virus.
6	Sustained Increase in New COVID-19 Hospital Admissions	Flagged if increasing trend of at least 5 days in the number of new hospitalizations due to COVID. Important indicator of hospital burden and disease severity.
7	Intensive Care Unit (ICU) Bed Occupancy	Flagged if percentage of the occupied ICU beds in each region goes above 80% for at least three days in the last week. Provides an indication of the capacity availble to manage a possible surge of severely ill patients.

COUNTY ALERT LEVELS									
LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4						
Public Emergency Active exposure and spread. Follow all current health orders.	Public Emergency Increased exposure and spread. Exercise high degree of caution. Follow all current health orders.	Public Emergency Very high exposure and spread. Limit activities as much as possible. Follow all current health orders.	Public Emergency Severe exposure and spread. Only leave home for supplies and services. Follow all current health orders.						
0–1 Indicators met; or low incidence threshold of under 10 cases per 100,000 over a two-week period.	2–3 Indicators met.	4–5 Indicators met; or if previously at Level 3, a county stays at Level 3 until it drops below the high incidence threshold of over 100 cases per 100,000 over a two-week period.	6-7 Indicators met for two consecutive weeks. The county will remain at Level 3 and be on a watch list the first week.						

As of 7/29/2020

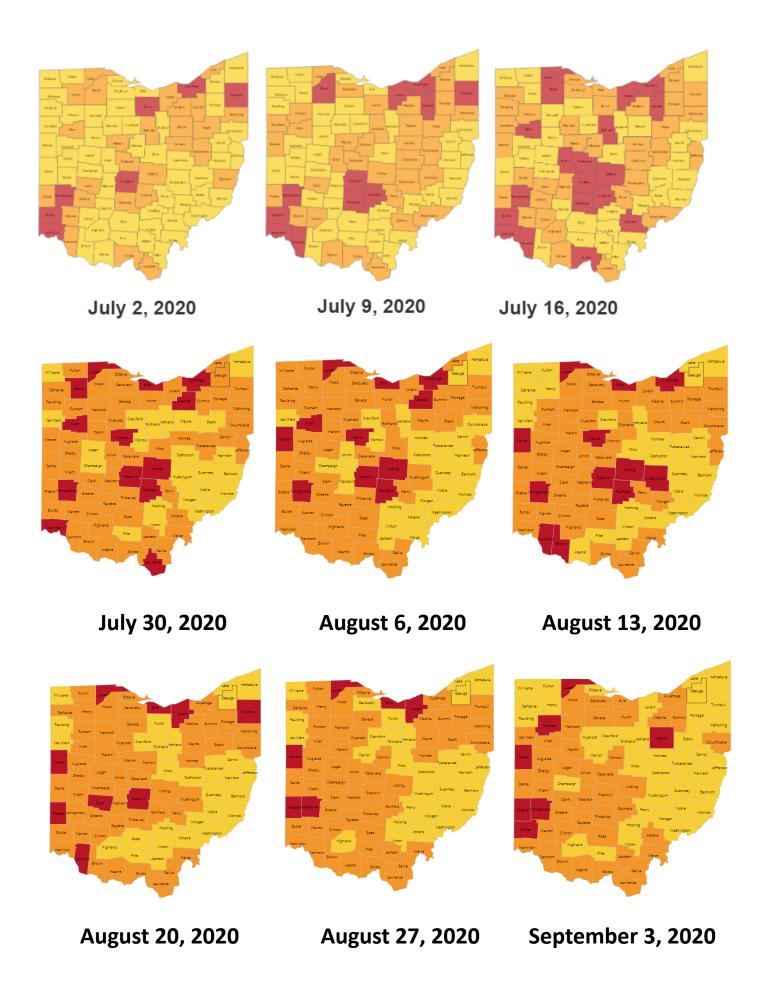




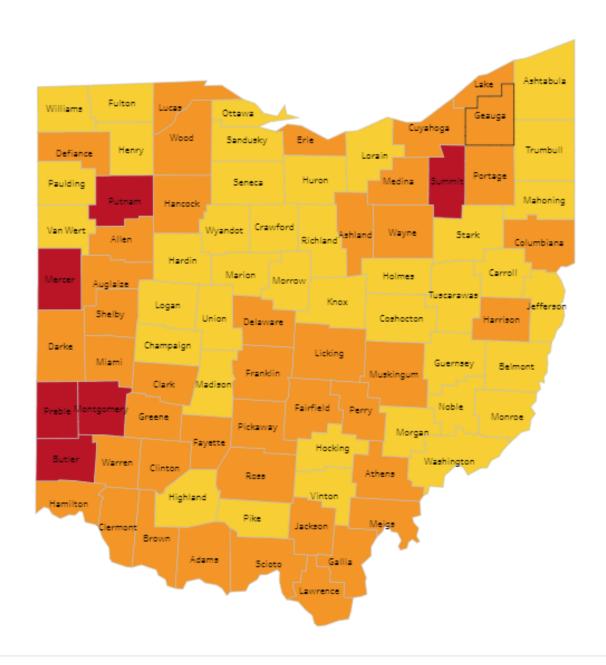


coronavirus.ohio.gov

Last week Geauga County moved from the Yellow Level (1) to the Orange Level (2). We triggered the first three of the seven indicators (Above boxed in Red). This assessment indicates the need to exercise a high degree of caution and reminds us all to follow the current health orders. Remember, all social gatherings not exempted in the state order are still limited to 10 people. There are many examples of activities and events that have been out of compliance with existing state orders. These events place the community at risk.



September 10, 2020

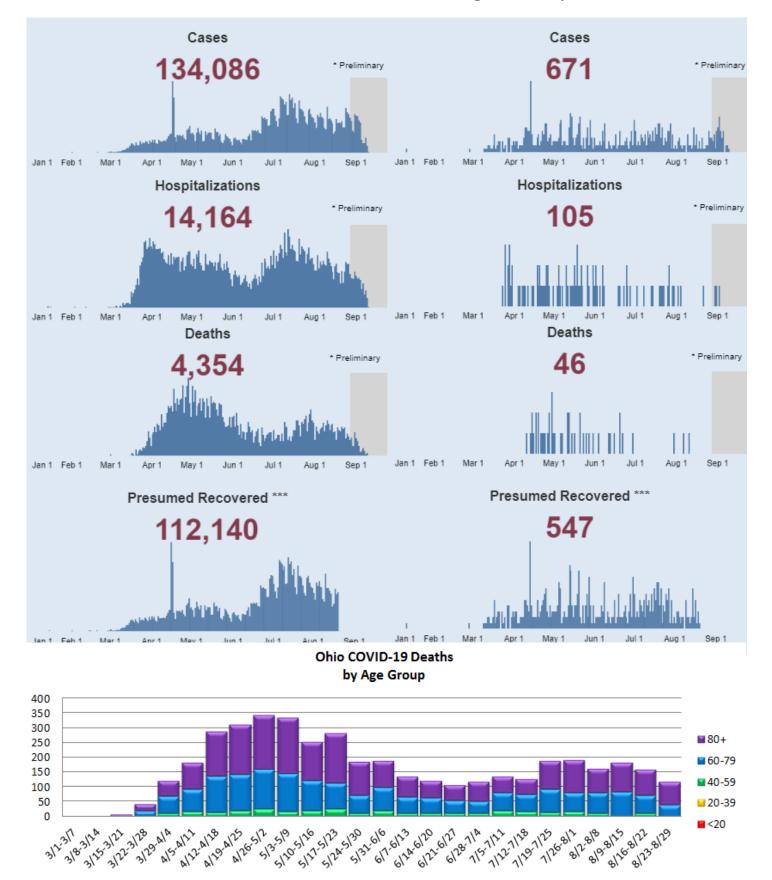


Level 1 Public Emergency: active exposure and spread.	Yellow	Level 2 Public Emergency: increased exposure and spread. Exercise high degree of caution.	Orange
Level 3 Public Emergency: very high exposure and spread. Limit activities as much as possible.	Red	Level 4 Public Emergency: severe exposure and spread. Only leave home for supplies and services.	Purple

COVID-19 Case Trends

Ohio Case Trends

Geauga County Case Trends

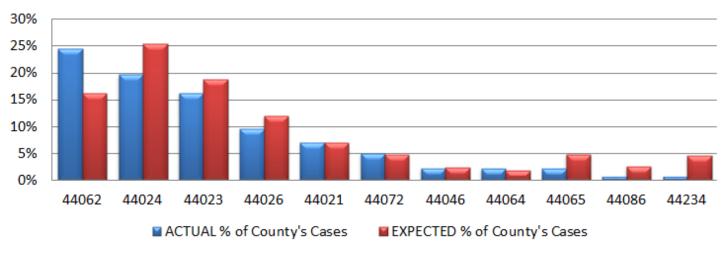


Leading Causes of Death in Geauga County (Data for non-COVID-19 are averaged from 2009-2018 from the CDC. They have been validated. These are the most current data. Data for COVID-19 are from 2020 ODRS as they did not exist in 2009-2018.)	Average Number of Deaths in Geauga County per Month	% of the Geauga County Population
Ischaemic Heart Disease (I20-I25)	8.9	0.009%
COVID-19	5.8	0.006%
Chronic Lower Respiratory Diseases (J40-J47)	4.0	0.004%
Malignant Neoplasm of the Lung and Bronchus (C34)	3.5	0.004%
Accidents (All types) (V01-X59, Y85-Y86)	3.3	0.003%
Cerebrovascular Disease (I60-I69)	3.1	0.003%
Alzheimer Disease (G30)	2.0	0.002%
Diabetes Mellitus (E10-E-14)	1.9	0.002%
Hypertensive Diseases (I10-I15)	1.4	0.001%
Influenza AND Pneumonia (J09-J18)	1.4	0.001%
Malignant Neoplasm of the Breast (C50)	1.1	0.001%
Malignant Neoplasm of the Pancreas (C25)	1.2	0.001%
Malignant Neoplasm of the Colon, Rectosigmoid Junction and Rectum (C18-C20)	1.0	0.001%
Intentional Self-Harm (Suicide) (U03, X60-X84, Y87.0)	1.0	0.001%
Nephritis, nephrotic syndrome and nephrosis (N00-N07, N17-N19, N25-N27)	0.9	0.001%
Septicemia (A40-A41)	0.9	0.001%

Addressing the Leading Causes of Death in Geauga County

- 1.) The majority of the leading causes of death are due to chronic diseases. They are not contagious. Individuals do not expose others to risks associated with these causes. Geauga Public Health and many, many partners throughout the county are involved in programming to reduce the prevalence of these chronic diseases by promoting healthy behavior choices among the population. Most are associated with one or more of the elements within the most recent Geauga County Community Health Assessment and Community Health Improvement Plan.
- 2.) Two of the non-chronic disease leading causes of death are accidents and intentional self-harm. Geauga Public Health and other entities in the county are engaged in programing to prevent accidental causes of death. The Geauga County Mental Health Board is the lead entity in the county that supports other agencies in the county to engage in programing to address mental health issues, including those that may result in suicide. While Geauga Public Health certainly recognizes mental health issues as public health issues, it does not engage in redundant programming. The Geauga County Mental Health Board has been a longstanding partner in the Geauga County Community Health Assessment and Community Health Improvement Plans.
- 3.) Two of the non-chronic disease leading causes of death are COVID-19 and Pneumonia/Influenza. These are communicable diseases. People infect other people. Unlike the other leading causes of death, for communicable diseases, people's behaviors have consequences for others. Currently COVID-19 causes four times the number of deaths in Geauga County than Influenza and Pneumonia combined. Geauga Public Health continues to share information with the public about the current level of community risk by posting case data. Geauga Public Health also continues to work with community partners to help plan how to reduce risks in a variety of environments, most notably our schools. The larger proportion of the public who choose to engage in evidence-based prevention strategies (masking, social distancing, hand hygiene, etc.), the smaller proportion of the population will be at risk of transmitting the virus to others. This will result in fewer infections and fewer negative health outcomes, including death.

Actual vs Expected COVID-19 Cases by Zip Code



The "EXPECTED" case data from the graph above is based on the population distribution across zip codes. It is not surprising that the majority of the nearly 300 complaints received follow the same trend, i.e. from zip code 44062 (Middlefield). Those complaints almost entirely involve individuals not wearing masks and not social distancing. When store managers were asked why they do not enforce their own masking policies, they cite a fear of acts of violence against their employees by the public as has been seen elsewhere by people protesting the state's mask mandate. Absent local legislative action, such as passing a local mask mandate, there is no ability to enforce the state's mask mandate by local law enforcement. Another remedy would be for the public to use this information as they decide where to conduct business.

News from the State:

PANDEMIC ELECTRONIC BENEFIT TRANSFER PROGRAM

Ohio children, who qualify for free or reduced-price meals but are currently learning remotely, will soon receive additional money to purchase nutritious foods through the Pandemic Electronic Benefit Transfer (P-EBT) program made possible by the Federal Families First Coronavirus Response Act. The Ohio Department of Job and Family Services will issue this second round of benefits later this month to eligible children. Ohio previously issued more than \$250 million in P-EBT benefits to more than 850,000 students through the program in the spring. Parents do not need to apply to receive these benefits. The benefits will be automatically loaded onto existing Ohio Direction cards or a preloaded card will be sent in the mail.

NON-CONGREGATE SHELTERING ORDER

In response to a barrage of rumors surrounding Ohio's latest non-congregate sheltering order, Governor DeWine stressed that there are no orders in Ohio to create "FEMA camps" to quarantine citizens against their will. "This is not in our order, and there is no truth to the rumor," said Governor DeWine. "Families will not be separated, and kids will not be away from their loved ones." The order, which was first issued on March 31 and then renewed on April 29 and August 31, creates a funding mechanism to allow for federal reimbursement for communities that choose to offer alternate locations for people to safely isolate or quarantine outside of their homes. If a citizen chooses to recover in a quarantine housing location, others in the household can remain at home and unexposed. This option has been used in a handful of cases in Ohio.

SEPTEMBER 10 WAS WORLD SUICIDE PREVENTION DAY.

These are challenging times. For some in our community the stress and anxiety can add to issues of depression and isolation. Citizens that resources are available for anyone who needs support due to stress, anxiety, sadness, or anger caused by the COVID-19 pandemic or other concerns. Ohioans can reach the Ohio Careline by calling 1-800-720-9616. Residents can also be connected to a trained crisis counselor via the Crisis Text Line by texting the keyword "4hope" to 741 741.

THE DEADLINE FOR COMPLETING THE 2020 CENSUS IS QUICKLY APPROACHING.

Ohio's self response rate is about 69.5 %. The census, which only takes about 10 minutes to complete, impacts the state for the next 10 years, including how federal, state and local funding is distributed and determines congressional representation. Ohioans can complete their census by either going to 2020Census.gov or calling 1-844-330-2020.

COVID-19 TRAVEL ADVISORY

Those entering Ohio after travel to states reporting positive testing rates of 15% or higher for COVID-19 are advised to self-quarantine for 14 days. Currently, those states include North Dakota, South Dakota, Kansas, and Alabama. Ohio's current positivity rate is 3.8%.

THE OHIO CORONAVIRUS WASTEWATER MONITORING NETWORK

In a new effort to help mitigate the spread of COVID-19, a network across Ohio is studying samples of wastewater to look for the presence of gene copies/fragments of the virus that causes the disease. The initiative is a collaboration between the Ohio Department of Health (ODH), the Ohio Environmental Protection Agency (Ohio EPA), the U.S. Environmental Protection Agency (U.S. EPA), the Ohio Water Resources Center (Ohio WRC) at The Ohio State University, and other participating universities, including The University of Toledo, Kent State University, and The University of Akron. As the network expands, sampling and analysis will include other universities with laboratory capabilities.

The increase of COVID-19 cases in communities is typically tracked by testing people with symptoms, an indicator that lags behind the actual spread of the disease. Because of this, there is a need to use early monitoring methods that estimate the disease's impact on the broader community. Research in the U.S. and elsewhere has shown that non-

infectious RNA (ribonucleic acid) from the virus that causes COVID-19 (called SARS-CoV-2) can be excreted in the feces of both symptomatic and asymptomatic infected people and can be detected in wastewater as many as three to seven days before those infections lead to increases in case counts or hospitalizations. As such, monitoring raw wastewater in sewage collection systems can provide an early warning of disease increase in a community. Community and public health leaders can use this early warning information to make decisions about protective actions to help limit further spread of the disease before cases begin to occur.

The sewage monitoring network will analyze wastewater samples for coronavirus RNA gene copies or fragments at key locations around the state. (Sample collection sites are shown on the map below.) The network will be expanded over the next few months to include additional wastewater collection sites.

Wastewater entering treatment plants is sampled for fragments of the virus RNA. The wastewater comes from homes in the treatment plant service areas and travels through pipes to the plant. A mixed wastewater sample (24-hour composite) is collected in an area where all the sewage from a service area enters the plant. This sample is analyzed by a laboratory to determine the number of virus gene copies present, related to the wastewater flow that occurred on the sample day and the population that contributed to the flow. Based on current research, these virus fragments are not infectious at this sample collection point. It is important to note that the water discharged from the treatment plants is treated to remove viruses and bacteria and is monitored to meet all state and federal discharge limits.

LINKS TO THE ORDERS FROM THE DIRECTOR OF THE OHIO DEPARTMENT OF HEALTH (AUGUST 13 — SEPTEMBER 14)

08/13/20 - Director's Order Requiring the Use of Facial Coverings in Child Education Settings

https://coronavirus.ohio.gov/static/publicorders/DO-K-12-facial-coverings.pdf

08/19/20 - <u>Director's Order that Provides Mandatory Requirements for Youth, Collegiate, Amateur, Club and Professional Sports</u>

https://coronavirus.ohio.gov/static/publicorders/Requirements-Youth-Collegiate-Amateur-Club-Pro-Sports.pdf

08/21/20 - Director's Order for the Testing of the Residents and Staff of all Residential Care Facilities

https://coronavirus.ohio.gov/static/publicorders/Testing-Residents-Staff-Residential-Care-Fac.pdf

08/25/20 - Director's Order that Provides Mandatory Requirements for Entertainment Venues

https://coronavirus.ohio.gov/static/publicorders/DO-Entertainment-Venue.pdf

08/28/20 - <u>Director's First Amended Order that Provides Mandatory Requirements for Youth, Collegiate, Amateur,</u> Club and Professional Sports

https://coronavirus.ohio.gov/static/publicorders/DO-Sports-First-Amended-08.28.20.pdf

08/31/20 - Director's Order on the Opening of Adult Day Care Services and Senior Centers

https://coronavirus.ohio.gov/static/publicorders/DO-Senior-Center-8-31-2020.pdf

08/31/20 - Director's Second Amended Order for Non-Congregate Sheltering to be utilized throughout Ohio

https://coronavirus.ohio.gov/static/publicorders/DO-Non-Congregate-Shelter-Second-Amended-08.31.20.pdf

09/04/20 - <u>Director's Order Requiring Reporting and Notification Regarding COVID-19 Cases in Kindergarten through Twelfth Grade Schools</u>

https://coronavirus.ohio.gov/static/publicorders/DO-K-12-Reporting.pdf