

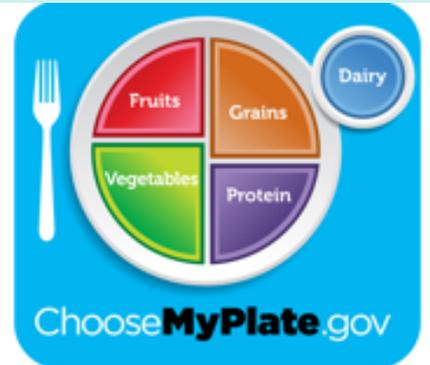
# HEALTH MATTERS NEWSLETTER



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# COVID-19 BLUEPRINT FOR A SAFER ECONOMY

California introduced the **Blueprint for a Safer Economy** framework on August 28, 2020 for loosening and tightening restrictions on activities, and changed their methodology from a 7-day lag to a 4-day lag on 11/16/2020.

The four tiers contained in the framework are based on testing positivity and a 7-day average of new cases per 100,000 with a 4-day lag. The State calculates new cases by first date of symptoms, and testing positivity by when the test was taken. <https://covid19.ca.gov/safer-economy/>

The Blueprint for a Safer Economy now includes a health equity metric which is used (along with other metrics) to determine the County's current status or tier. The purpose of the health equity metric is to ensure that the State and counties reopen their economies safely by reducing disease transmission in all communities, including those with fewer resources and more challenges. This State website outlines the equity metric and requirements including the targets that Santa Barbara County must meet for health equity: <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/CaliforniaHealthEquityMetric.aspx>

As of **11/16/2020**, [Santa Barbara County](#) is currently in **Widespread or Purple**.

County risk level	Adjusted case rate* 7-day average of daily COVID-19 cases per 100K with 7-day lag, adjusted for number of tests performed	Positivity rate** 7-day average of all COVID-19 tests performed that are positive	
		Entire county	Healthy equity quartile
<b>WIDESPREAD</b>  Many non-essential indoor business operations are closed	<b>More than 7.0</b> Daily new cases (per 100k)	<b>More than 8.0%</b> Positive tests	
<b>SUBSTANTIAL</b>  Some non-essential indoor business operations are closed	<b>4.0 – 7.0</b> Daily new cases (per 100k)	<b>5.0 – 8.0%</b> Positive tests	<b>5.3 – 8.0%</b> Positive tests
<b>MODERATE</b>  Some indoor business operations are open with modifications	<b>1.0 – 3.9</b> Daily new cases (per 100k)	<b>2.0 – 4.9%</b> Positive tests	<b>2.2 – 5.2%</b> Positive tests
<b>MINIMAL</b>  Most indoor business operations are open with modifications	<b>Less than 1.0</b> Daily new cases (per 100k)	<b>Less than 2.0%</b> Positive tests	<b>Less than 2.2%</b> Positive tests

# PREDICTING THE FLU SEASON

By Joy Kane, Senior Epidemiologist

As an epidemiologist, I often get asked to project the severity of this year's flu season. During a normal year, this is a challenging task. Granted the current pandemic, it is even more difficult to predict what may happen. Some years, the United States' flu season closely emulates what happens in Australia. While this may not be true this year, it is still worth noting trends from the Southern Hemisphere. Below is a summary of this year's Australian flu season.

"Summary of 2020 Australian Influenza Season" By Suki Teng, Epidemiology Student Intern

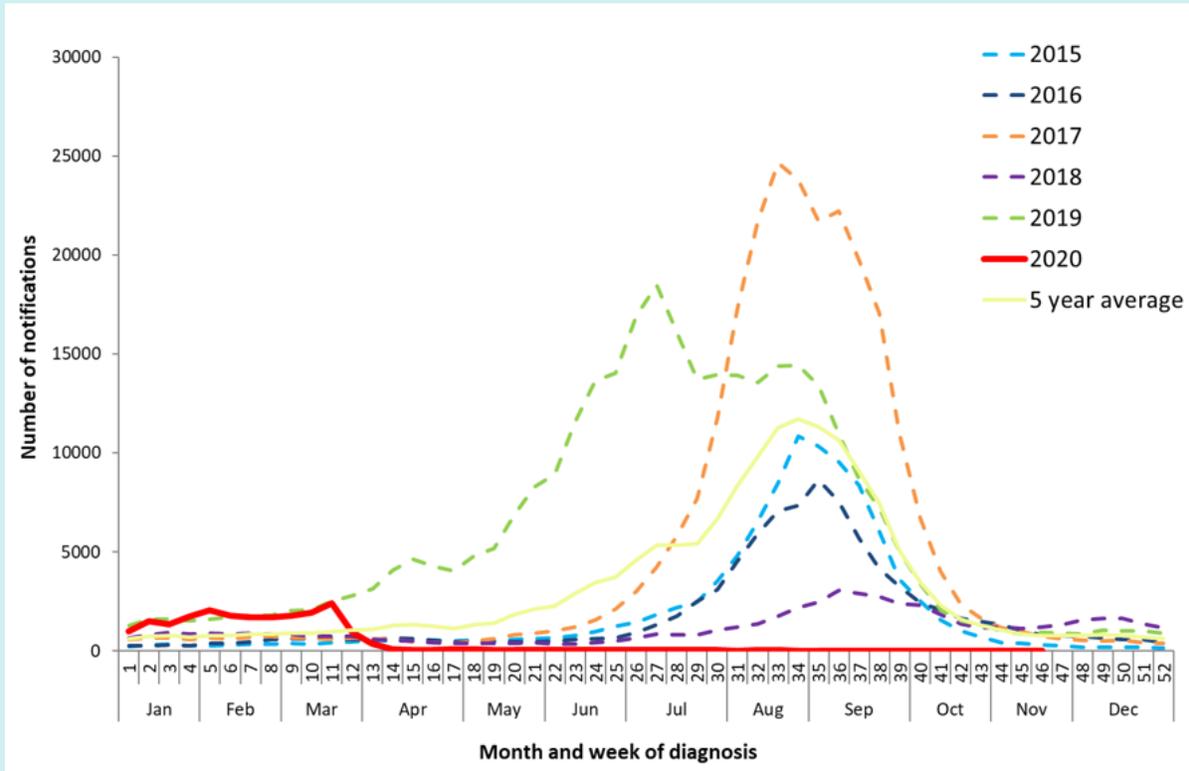
As the flu season in the Southern Hemisphere comes to an end, Australia is reporting a very low number of influenza cases for the year. Notifications of laboratory-confirmed influenza have substantially decreased since social distancing measures were implemented in mid-March and remained below usual levels. Influenza like illness (ILI) and other influenza activity indicators are lower than average for this time of year. Influenza A accounted for the greatest number of cases across all age groups. Among other respiratory viruses, rhinovirus was most frequently detected.

In Australia, the flu season generally runs from April to October and peaks usually from June to August. However, this year, following a high start to the inter-seasonal period, the country experienced lower levels of influenza and ILI activities than the last 5 years. The recent Australian Influenza Surveillance Report shows, in the year to date, 0.43% (1,996/469,323) of samples detected in sentinel laboratories were positive for influenza. Of these 81.7% were Influenza A, and 18.3% were Influenza B. There were 21,235 notifications of laboratory-confirmed influenza cases this year, as of November 15, down by nearly 93% compared to the same period in the year of 2019. Notification rates have been highest in children aged less than 10 years (115.6/100,000), while rates in adults aged 65 years or older (73.6/100,000) have been low. Among those tested positive, 36 (0.17%) laboratory-confirmed influenza-associated deaths have been notified, compared to 812 deaths in 2019 according to the data from Australian National Notifiable Diseases Surveillance System (NNDSS).

The reduction in cases is probably due to the closure of state borders and precautionary measures such as social distancing being taken for COVID-19 since March. This gradually ramped up to a more complete lockdown when pubs, restaurants, gyms, cinemas and other non-essential businesses were forced to close. Additionally, very few children have been attending school since mid-March, while they were encouraged to remote learn. However, it is important to note that data reported from the various influenza surveillance systems may not represent an accurate reflection of influenza activity due to the COVID-19 epidemic in Australia.

\*\*\* Continued on next page.

**FIGURE 1. NOTIFICATIONS OF LABORATORY CONFIRMED INFLUENZA, AUSTRALIA, 01 JANUARY 2015 TO 15 NOVEMBER 2020, BY MONTH AND WEEK OF DIAGNOSIS**



Source: Australian Government Department of Health - Australian Influenza Surveillance Report: <https://www1.health.gov.au/internet/main/publishing.nsf/Content/cda-surveil-ozflu-flucurr.htm>  
 All data are preliminary and subject to change as updates are received.

## EPIDEMIOLOGY CORNER

On November 10, 2020, the County released the pandemic Community Data Dashboard to empower residents and leaders with real-time information necessary to rein in COVID-19 and mount effective recovery efforts. The new dashboard builds upon previous Public Health Department dashboards and enhances the data with interactive charts for viewers to explore top priority data.

The dashboard, available on the Santa Barbara County [Public Health website](#), is the result of a robust public-private partnership facilitated by LegacyWorks with a wide array of community organizations and agencies, guided by a steering committee made up of public health experts and community leaders.

# THE ROLE OF THE EMS AGENCY IN A GLOBAL PANDEMIC

By Nick Clay, EMS Agency Director

The Emergency Medical Services (EMS) Agency is a program within the Community Health Division of the Public Health Department (PHD). The EMS Agency is primarily responsible for the developing and maintaining a healthcare system that is readily available to all residents and visitors, throughout the County. A key part of the EMS Agency is preparation and response to disasters. The Public Health Emergency Preparedness (PHEP) program, also known as the Disaster Preparedness and Response unit, is charged with ensuring disaster readiness of public health, healthcare, and long-term care partners. This includes training, exercising, and response activities for the PHD staff, and leadership of the Santa Barbara County Disaster Healthcare Coalition. The coalition membership of over 80 healthcare and long-term care agencies works collaboratively to assure the health and safety of our most vulnerable residents during disasters. To develop and maintain readiness, the coalition provides training, disaster planning assistance, and exercises, to assure a coordinated response between the EMS Agency, the PHD, and all members during disasters.

The PHEP team began focusing on the COVID-19 pandemic in mid-January as cases in China began to rise. Not long after, staff opened the Department Operation Center (DOC). The DOC is staffed by PHD staff, who are reassigned from their normal duties to fill these emergency response positions. The objective of the DOC is to support the critical needs of the PHD's various programs during an emergency. Early actions were focused on identifying and containing the disease, while developing educational materials for the public. As the pandemic has evolved, so has the PHD's response. Some highlights of our actions include developing plans for allocation of scarce medical resources, for robust COVID testing programs (exceeding the State's requirements), and for managing hospital surges. Much of this work occurred while other critical PHEP planning was taking place to provide free influenza vaccinations to the public. Over 3,000 residents were vaccinated, compared to last year's nearly 800 vaccinations. Considering the backdrop of the pandemic, this was an amazing accomplishment.

The team's work is far from done. At the time of the writing of this article (November, 2020) the Department is actively working to digest federal and state guidance on COVID vaccinations, and plan for the prolonged vaccination program that will ensue in the near future.

As the year (and this article) comes to a close, the EMS Agency wants to express our extreme gratitude for all of our partners. We could not accomplish the things we do without the efforts of our Public Health team, various County departments, community partners, and of course our healthcare partners. From the bottom of our hearts, thank you! Stay safe out there!



# Free Breast & Cervical Cancer Screening

Exámenes de detección  
del cáncer de seno y cuello  
uterino gratis.

Call us today!  
¡Llámenos hoy!

1 (800) 511-2300



 Department of Health Care Services  
Every Woman Counts Program  
dhcs.ca.gov/ewc

## EVERY WOMAN COUNTS NOW OFFERS VIRTUAL CLASSES

### Every Women Counts (EWC)

EWC provides free breast and cervical cancer screening and diagnostic services to California's underserved individuals. Its mission is to save lives by preventing and reducing the devastating effects of cancer for Californians through education, patient navigation, screening, diagnosis, treatment referrals, and evidence-based interventions, with special emphasis on the medically underserved.

The Tri-Counties Cancer Detection Partnership works with community organizations, area health departments, local leaders and health care workers to get the word out at free clinics, food pantries, churches, organizations serving new immigrants such as MICOP, and homeless.

Community Education, Referral, and Patient Navigation services are provided by regional staff and contractors to the general public.

### Upcoming December virtual classes for the public:

- December 2, 1:00 pm English
- Please pre-register to receive email with the link at <https://www.surveymonkey.com/r/EWC1202> or just scan:



Contact (805) 681-4783 for more information.

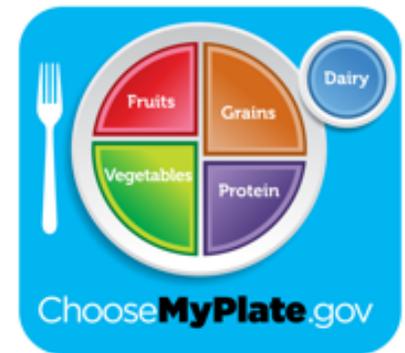
# BEING HEALTHY DURING THE HOLIDAYS

## Nutrition Services

The holidays are here! For many of us this means a change in our normal routine. This can make it harder to keep up with the healthy habits we have been trying to maintain during the year. This year our holiday celebrations may be a bit different, but hopefully everyone will find ways to carry out some version of their favorite family traditions, while remembering to practice social distancing, wearing a face covering, washing hands often, and cleaning surfaces regularly to prevent the spread of COVID-19.

Here are some ideas on how to enjoy those traditions, and maintain your health:

- Follow [MyPlate](#)
- [10 Tips for Healthier Holiday Choices](#)
- [Rethink your Drinks](#)
- Be Active
  - [Recommendations and Tips for Kids](#)
  - [Recommendations and Example for Adults](#)



Congrats if you can follow these suggestions most of the time, and don't worry if you are not perfect.

If most days you are able to: follow MyPlate, limit sweet drinks, and be active that is great!

Sharing special foods with family and friends over the holidays is important, and having the occasional treat or less healthy food in moderation is fine.

Nutrition Services wishes everyone a Healthy, Safe, and Happy Holiday Season.

For more information visit the Nutrition Services [website](#), or follow us on [Instagram](#) and [Facebook](#).

\*\*Please remember that if you have certain medical conditions these eating and exercise recommendations may not be appropriate for you, and you should speak with your healthcare provider.

## ADDITIONAL ISSUE CONTRIBUTORS

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