COVID-19 DAY 101 UPDATE
JUNE 19, 2020
SECRETARY DAVID R. SCRASE, M.D.
INVESTING FOR TOMORROW, DELIVERING TODAY.
AGENDA FOR TODAY’S PRESS BRIEFING

▪ COVID-19 in NM Update (with Q&A)
▪ Medical Advisory Team (MAT) Update (with Q&A)
  ▪ Discontinuation of home isolation and return to work guidance
  ▪ N95 Masks Conservation
  ▪ Remdesivir treatment
▪ Science Update (with Q&A)
▪ Gating Criteria for Reopening (with Q&A)
  ▪ Gating Criteria Update
  ▪ Modeling
  ▪ School reopening
▪ General Questions and Answers
NM COVID-19 DAILY & CUMULATIVE TESTS/CASES

NM Daily and Cumulative COVID-19 Tests

NM Daily COVID-19 New Cases and Running Total

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Total COVID-19 Positive Cases (6/17/2020)

- San Juan: 2,140
- Rio Arriba: 61
- Colfax: 8
- Union: 5
- Taos: 33
- Los Alamos: 16
- Santa Fe: 182
- Sandoval: 651
- Mora: 4
- Guadalupe: 20
- Quay: 4
- San Miguel: 16
- Harding, 1
- Torrance: 34
- Roosevelt: 53
- Lincoln: 6
- Lea: 55
- Otero: 61
- Chaves: 9
- Eddy: 48
- Valencia: 94
- De Baca: 30
- Doña Ana: 676
- Catron: 2
- Socorro: 55
- Grant: 16
- Hidalgo: 23
- Luna: 32

Total Cases: 9,316
Total Deaths: 452

Source: NM Department of Health. * denotes death occurred in county. Excludes cases in federal and state detention facilities.

COVID-19 Prevalence Rate (6/17/2020)

- San Juan: 2,968
- Rio Arriba: 61
- Colfax: 8
- Union: 5
- Taos: 33
- Los Alamos: 16
- Santa Fe: 182
- Sandoval: 651
- Mora: 4
- Guadalupe: 20
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Number of Cases per 100,000 Population
- San Juan: 31
- Rio Arriba: 31
- Colfax: 31
- Union: 31
- Taos: 31
- Los Alamos: 31
- Santa Fe: 31
- Sandoval: 31
- Mora: 31
- Guadalupe: 31
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Source: NM Department of Health. * denotes death occurred in county. Excludes cases in federal and state detention facilities.
Number of COVID-19 Hospitalizations and Intubations in NM

Hospitalizations

Intubations

- Hospitalizations
- Intubations

Data points for hospitalizations and intubations are shown on the chart for each date from March 23, 2020, to June 19, 2020. The number of hospitalizations and intubations are indicated by the height of the bars. The chart shows a steady increase in hospitalizations and intubations over the specified period.
7-Day Average of Daily COVID-19 Positive Cases, NMDOH Regions
6/18/2020

Source: NM Department of Health
Cases correspond to date of sample collection
There is a 6-day lag in case reporting
Mean Miles Traveled in New Mexico

Source: Descartes Labs

Pre-COVID-19 Mean Miles Traveled

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7-day Average of Mean Distance Traveled by NMDOH Region
6/16/2020

Date

Mean Distance Traveled (km)

Metro
Northeast
Northwest
Southeast
Southwest

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COVID-19 HIGH-RISK POPULATION TESTING

High-risk populations:
- Nursing home residents and staff
- Assisted living residents and staff
- Essential workers (food handlers, utility workers)
- Immigrants, refugees, asylees
- Native Americans
- People who are incarcerated
- Youth
- Undertested counties

Data for other high-risk groups, including African Americans and Asian Americans will soon be reported.

<table>
<thead>
<tr>
<th>High-Risk Populations</th>
<th>Population Total</th>
<th>COVID-19 Tests to Date</th>
<th>COVID-19 Positives Cases To Date</th>
<th>COVID-19 Positivity Rate (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>High-Risk Populations</td>
<td>363,283</td>
<td>41,412</td>
<td>7,639</td>
<td>18.45%</td>
</tr>
<tr>
<td>Total NM Population</td>
<td>2,097,000</td>
<td>271,553</td>
<td>9,933</td>
<td>3.66%</td>
</tr>
<tr>
<td>High-Risk Pop. as % of Total Pop.</td>
<td>17.3%</td>
<td>15.25%</td>
<td>76.91%</td>
<td>-</td>
</tr>
<tr>
<td>Non High-Risk Populations</td>
<td>1,733,717</td>
<td>230,141</td>
<td>2,294</td>
<td>1.00%</td>
</tr>
<tr>
<td>Non-High Risk Pop. % of Total Pop.</td>
<td>-</td>
<td>84.75%</td>
<td>23.09%</td>
<td>-</td>
</tr>
</tbody>
</table>
MEDICAL ADVISORY TEAM (MAT) UPDATE
DISCONTINUATION OF HOME ISOLATION AND RETURN TO WORK GUIDANCE (NMDOH)

- When an employee is diagnosed with COVID-19 they must remain isolated at home until isolation can be ended.
- Best approach to determining when isolation can be discontinued is based on when symptoms begin or, for those who don’t have symptoms, time since positive COVID-19 test.
- Relying on negative tests to allow someone to return to work can be problematic because people may intermittently shed non-viable virus after they are no longer infectious.
- Infectiousness typically lasts no longer than 9 days after onset of symptoms.

For persons with confirmed COVID-19 who had symptoms:

- Maintain isolation at home until:
  - At least 10 days have passed since symptoms first appeared; AND,
  - At least 3 days (72 hours) have passed with no fever; AND,
  - Symptoms have improved.

For persons with confirmed COVID-19 who did not have any symptoms:

- Maintain isolation at home until at least 10 days since the positive test.
REMDESIVIR TREATMENT FOR COVID-19

- So far, NM has received 3,109 vials of Remdesivir
- Enough treatment for 283-444 people in ICUs
- Information about Remdesivir distribution and treatment can be found on Medical Advisory Team website.

https://cvmodeling.nmhealth.org/medical-advisory-team/

Double-blind Randomized Control Trial: Remdesivir significantly decreased time to recovery

- Preliminary results demonstrate Remdesivir group median recovery time was 11 days compared to 15 days for placebo.
- Estimates of mortality by 14 days were 7.1% with remdesivir and 11.9% with placebo.
Battelle decontaminates thousands of N95 respirators using concentrated, vapor phase hydrogen peroxide.

Battelle can decontaminate same N95 multiple times without degrading performance.

288 NM facilities have Battelle agreements.

9,134 masks decontaminated in NM to-date (16th in US).
COVID-19 SCIENCE & MEDIA UPDATE
She declared a statewide health emergency on March 11th, when only four cases had been confirmed, and hospitals were offering free drive-through testing at hospitals just two days later.

As of early June, NM has administered more tests per capita than every state but RI and NY, a distinction that has helped prevent the virus from spiraling out of control in what is not only one of the nation’s poorest states, but one with an anemic hospital capacity.

As infection rates fell, some businesses were allowed to reopen with restrictions on May 16th. “We’re going to demand in New Mexico that science guide every decision we make,” Lujan Grisham said during a press briefing in which she also stressed the importance of wearing masks. “We don’t want to go backwards and shut everything down.”
Modeling compliance with COVID-19 prevention guidelines: the critical role of trust in science
Nejc Plohl and Bojan Musil
Department of Psychology, University of Maribor, Maribor, Slovenia

ABSTRACT
The coronavirus pandemic is one of the biggest health crises of our time. In response to this global problem, various institutions around the world had soon issued evidence-based prevention guidelines. However, these guidelines, which were designed to slow the spread of COVID-19 and contribute to public well-being, are (deliberately) disregarded by some individuals. In the present study, we aimed to develop and test a multivariate model that could help us identify individual characteristics that make a person more/less likely to comply with COVID-19 prevention guidelines. A total of 525 attentive participants completed the online survey. The results of structural equation modeling (SEM) show that COVID-19 risk perception and trust in science both independently predict compliance with COVID-19 prevention guidelines, while the remaining variables in the model (political conservatism, religious orthodoxy, conspiracy ideation and intellectual curiosity) do so via the mediating role of trust in science. The described model exhibited an acceptable fit ($\chi^2(1611) = 2485.84; p < .001, CFI = .91, RMSEA = .032, SRMR = .053$. These findings thus provide empirical support for the proposed multivariate model and underline the importance of trust in science in explaining the different levels of compliance with COVID-19 prevention guidelines.

Introduction
According to the World Health Organization (2020), the world is currently witnessing a global pandemic of the 2019 novel coronavirus (SARS-CoV-2) which causes the disease COVID-19. Current data, which likely underscore the actual prevalence of the disease (Lipsitch et al., 2020; Sohrabi et al., 2020), support this notion; as of now (May 17th, 2020), COVID-19 has spread to at least 213 countries and territories and has recently exceeded more than 4,750,000 confirmed cases and 313,000 deaths (Worldometer, 2020). Due to the highly contagious nature of the virus and the exponential growth of infections observed in many countries (e.g. Italy; Remuzzi & Remuzzi, 2020), a high level of compliance with prevention guidelines, such as those issued by the World Health...
Keeping at least one meter apart and wearing face masks and eye protection are the best ways to cut the risk of COVID-19 infection, according to evidence pooled from 172 studies in 16 countries.

An additional meter of distance further reduces transmission by 50%
SHUTDOWNS PREVENTED 60 MILLION CORONAVIRUS INFECTIONS IN THE U.S.


- Separate study from epidemiologists at Imperial College London estimated shutdowns saved about 3.1 million lives in 11 European countries, and dropped infection rates by an average of 82%, sufficient to drive contagion well below epidemic levels.

- Research suggests aggressive and unprecedented shutdowns, which caused massive economic disruptions and job losses, were effective at halting exponential spread of the virus.

WHO WALKS BACK JUNE 8 STATEMENT: "ASYMPTOMATIC SPREAD OF COVID-19 IS RARE"

- On June 8, WHO lead for the COVID-19 pandemic Dr. Maria Van Kerkhove made a statement suggesting that true asymptomatic transmission was minimal based on unpublished and published contact tracing reports from various countries.
- She suggested that tracing and containment efforts should be focused on following symptomatic cases.
- These comments generated strong pushback from outside public health experts, and on June 9 Dr. Van Kerkhove clarified that the actual rates of asymptomatic transmission are still unknown.
- In New Mexico, to date, ~24% of positive test cases have had no symptoms.
- She also drew a distinction between transmission by a case who never develops symptoms, and transmission by cases who are mildly symptomatic, or transmit before developing symptoms.
- The consensus remains that individuals without symptoms can and do spread COVID-19. Transcript for the virtual press conference on 6/8 may be accessed [here](#).
GATING CRITERIA UPDATE

HTTPS://CVMODELING.NMHEALTH.ORG/PUBLIC-HEALTH-GATING-CRITERIA-FOR-REOPENING-NM/
<table>
<thead>
<tr>
<th>Criterion</th>
<th>Measure</th>
<th>Initial Gating Value</th>
<th>Current Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spread of COVID-19</td>
<td>Rate of COVID-19 Transmission</td>
<td>1.05 or less</td>
<td>0.93 on 6/17/2020</td>
</tr>
<tr>
<td>Testing Capacity: general and targeted populations*</td>
<td>Number of tests per day (7-day rolling average)</td>
<td>5,000 / day</td>
<td>4,185 on 6/17/2020</td>
</tr>
<tr>
<td>Contact Tracing and Isolation Capacity</td>
<td>Time from positive test result to:</td>
<td>24 hrs</td>
<td>Week of 6/6 = 26</td>
</tr>
<tr>
<td></td>
<td>-isolation recommendation for case</td>
<td>36 hrs</td>
<td>Week of 6/6 = 33</td>
</tr>
<tr>
<td></td>
<td>-quarantine rec. for case contacts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Statewide Health Care System Capacity</td>
<td>Availability of scarce resources in 7 Hub Hospitals:</td>
<td>&lt;460</td>
<td>276 on 6/19/2020</td>
</tr>
<tr>
<td></td>
<td>-Adult ICU beds occupied</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>-PPE</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>7-day supply</td>
<td></td>
<td>7 hub hospitals have 7-day supply</td>
</tr>
</tbody>
</table>
### HOW WE REOPEN SAFELY

**Investing for tomorrow, delivering today.**

<table>
<thead>
<tr>
<th>State</th>
<th>14-Day Trend of COVID+</th>
<th>Last 14 Days of COVID+ (Rolling)</th>
<th>Influenza-Like Illness</th>
<th>% of Test Target</th>
<th>ICU Availability</th>
<th>New Cases Per Million Per Day</th>
<th>COVID+ Rate Is</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Mexico</td>
<td>-7% Decreasing</td>
<td>127</td>
<td>Minimal Level 1</td>
<td>135%</td>
<td>44% Normal</td>
<td>56</td>
<td>2.8% Flat</td>
</tr>
</tbody>
</table>

Notes: 14-day trend is red if increasing, yellow if flat, green if decreasing. ILI is influenza-like illness. ICU capacity is red >90%, yellow >70%, green <70%. Test target is based on a 500K/day goal. COVID+ rate is calculated [positive cases] / [total cases]. Increasing or decreasing describes the overall COVID+ trend. COVID+ % is red >15%, yellow >5%, green <5%. Table: covexitstrategy.org • Source: Multiple Sources (NYT, COVID Tracking Project, rt live, ILI, CDC) • Get the data • Created with Datawrapper
COVID-19 RATE OF SPREAD, AS OF 6/17/2020
NMDOH REGIONS (TARGET = 1.05 OR LESS)

- State = 0.93
- Metro = 1.25
- NE = 1.24
- SE = 1.28
- SW = 1.08
- NW = 0.66
New Mexico Case Count by Collection Date with 7 Day Moving Average – June 18, 2020

Positive samples collected during this time may not yet be reported.
New Mexico Case Count by Collection Date with 7 Day Moving Average – June 18, 2020

Positive samples collected during this time may not yet be reported.
Metro Region Case Count by Collection Date with 7 Day Moving Average – June 18, 2020

Positive samples collected during this time may not yet be reported.
Northeast Region Case Count by Collection Date with 7 Day Moving Average – June 18, 2020

Positive samples collected during this time may not yet be reported.

Source: Presbyterian Healthcare Services
Northwest Region Case Count by Collection Date with 7 Day Moving Average – June 18, 2020

Positive samples collected during this time may not yet be reported.

Source: Presbyterian Healthcare Services
Southeast Region Case Count by Collection Date with 7 Day Moving Average – June 18, 2020

Positive samples collected during this time may not yet be reported.
Southwest Region Case Count by Collection Date with 7 Day Moving Average – June 18, 2020

Positive samples collected during this time may not yet be reported.
Southwest Case Count by Collection Date with 7 Day Moving Average - 6/18/2020

Positive samples collected during this time may not yet be reported.

Source: Presbyterian Healthcare Services
“The curve is flattening, we can fully reopen...” (NOT!)

It’s like saying, “The parachute has slowed our rate of descent, we can take it off now.”

**EVEN THOUGH NM IS IMPROVING, WE MUST REMAIN VIGILANT AND REOPEN GRADUALLY.**

- Stay at home
- Wash hands, clean surfaces, cough into tissue/elbow
- Wear face coverings in public
- Maintain social distancing (minimum 6 feet)
Adults at Higher Risk of Serious Illness if Infected with COVID-19

- At-risk adults, as a share of all adults ages 18 and older
- Share of adults under age 65 at risk
- Older adults, as a share of all at-risk adults

Hospital Capacity: ICU beds per 10,000 residents

- ICU Beds per 10,000 Population

Health Experts Link Rise In Arizona COVID Cases To End Of Stay-At-Home Order

- AZ began easing restrictions on businesses in early May and lifted statewide lockdown after May 15.
- 1,584 average new cases/day over past 7 days.
- Since Memorial Day cases have more than doubled (19,900 – 43,443).
- Before lifting stay-at-home order, 5% of COVID-19 tests were positive. On 6/16, ~16% were positive.

Source: Arizona Department of Health Services
Texas coronavirus hospitalizations hit record highs for a full week

- TX was among first states to relax statewide stay-at-home order, allowing it to expire April 30.
- 2,417 average new confirmed cases/day over past 7 days.
- 2,947 COVID-19 patients in TX hospitals on Thursday, almost twice as many as Memorial Day.

[Graph showing cumulative cases of coronavirus in Texas with a note: On March 24, the state changed how it reported numbers resulting in a sharp increase in cases.]

https://www.texastribune.org/2020/06/18/texas-coronavirus-hospitalizations/
URGENCY AND CHALLENGE OF OPENING K-12 SCHOOLS IN THE FALL OF 2020

• To reopen schools as safely as possible and reduce chances schools are required to close again, policy makers should consider this framework:
  1. create conditions for a successful reopening,
  2. establish distancing at each school,
  3. prioritize children most at risk from missing school,
  4. ready a strong public health and environmental response,
  5. respect valid concerns of individual families and teachers, and
  6. link curricula, teaching strategies, and remote learning technologies.

THANK YOU

Dr. Mike Richards

- Dr. Richards established and served as Director of the Medical Advisory Team, creating a statewide delivery system to effectively manage the surge in COVID-19 cases and resources as they become scarce.
- Dr. Richards is returning to his full-time position as UNM after dutifully serving the state for 3+ months.
- The State of NM will continue to utilize the MAT for the duration of the pandemic.

Contributors to the UNM Global Health COVID-19 Briefings

- 68 people have contributed their efforts to the briefing on top of their already busy schedules. To meet some of the team click here.
- 1,000+ people receive these briefings.
- New updates available Su-Tu-Th evening online at the UNM library: https://digitalrepository.unm.edu/hsc_covid19_briefings/
NEW MEXICO
LINEA DE APOYO PARA TRABAJADORES DE SALUD Y PRIMEROS RESPONDIDORES

NEW MEXICO HEALTHCARE WORKER AND FIRST RESPONDER SUPPORT LINE

855-507-5509

855-507-5509