



July 1, 2020

COVID-19 TOWN HALL



Board of Pharmacy Update

Kam Gandhi

Executive Director | AZ Board of Pharmacy

Due to the Health Emergency, the Board will no longer take walk-ins. Board staff will still be available via phone, email and by appointment. For office directory click <https://pharmacy.az.gov/node/5226>.

Thank you for your understanding.

State and National Updates

Kelly Fine

Executive Director | Arizona Pharmacy Association

Worldwide Cases

Total Confirmed

10,499,833

Confirmed Cases by
Country/Region/Sovereignty

2,636,538 US
1,402,041 Brazil
653,479 Russia
585,481 India
314,162 United Kingdom
285,213 Peru
279,393 Chile
249,271 Spain
240,578 Italy
230,211 Iran
226,089 Mexico
213,470 Pakistan

Admin0 Admin1 Admin2

Last Updated at (M/D/YYYY)

7/1/2020, 5:33:52 AM

188

countries/regions

Lancet Inf Dis Article: [Here](#). Mobile Version: [Here](#).

Lead by JHU CSSE. Technical Support: [Esri Living Atlas team](#) and JHU APL. Financial Support: JHU and NSF. Click [here](#) to donate to the CSSE dashboard team, and other JHU COVID-19 Research Efforts. [FAQ](#). Read more in this [blog](#). [Contact Us](#).



Cumulative Confirmed Cases

Active Cases

Incidence Rate

Case-Fatality Ratio

Testing Rate

Hospitalization Rate

Global Deaths

511,909

127,425 deaths

US

59,594 deaths

Brazil

43,815 deaths

United Kingdom

34,767 deaths

Italy

29,846 deaths

France

28,355 deaths

Spain

Global Deaths

US State Level

Deaths, Recovered

32,032 deaths, 70,487

recovered

New York US

15,035 deaths, 30,213

recovered

New Jersey US

8,053 deaths, recovered

Massachusetts US

6,923 deaths, recovered

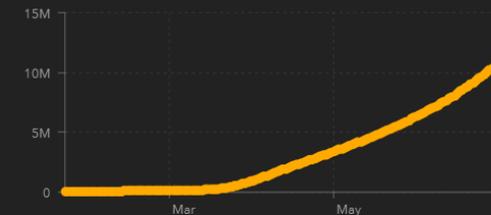
Illinois US

6,649 deaths, 67,552

recovered

Pennsylvania US

US Deaths, Recovered



Confirmed

Logarithmic

Daily Cases

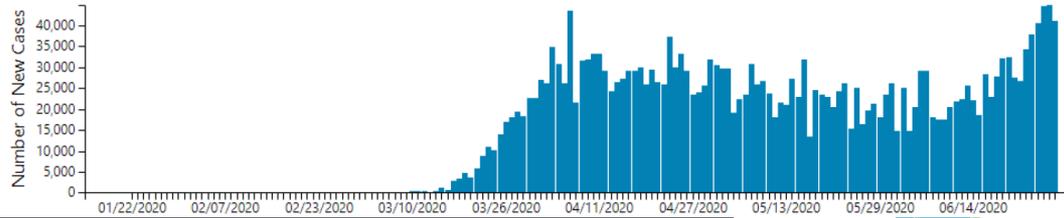
National Cases



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

New Cases by Day

The following chart shows the number of new COVID-19 cases reported each day in the U.S. since the beginning of the outbreak. Hover over the bars to see the number of new cases by day.

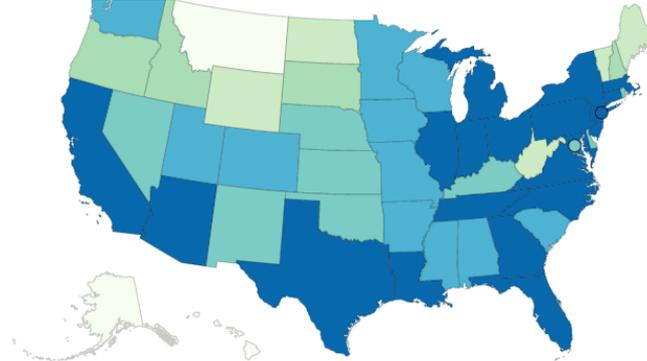


TOTAL CASES
2,581,229

35,664 New Cases*

TOTAL DEATHS
126,739

370 New Deaths*



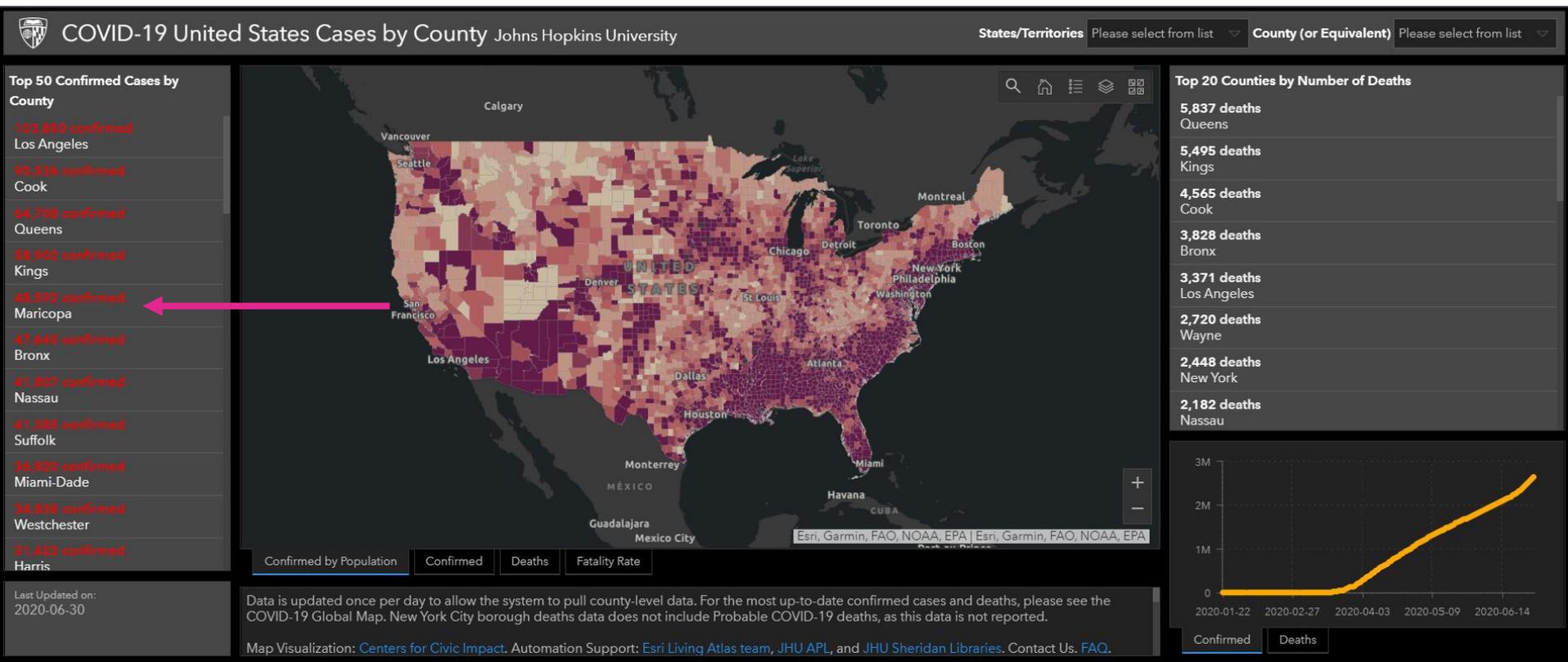
Reported Cases

- 0 to 1,000
- 1,001 to 5,000
- 5,001 to 10,000
- 10,001 to 20,000
- 20,001 to 40,000
- 40,001 or more

AS GU MH FM MP PW PR VI



US Cases by County





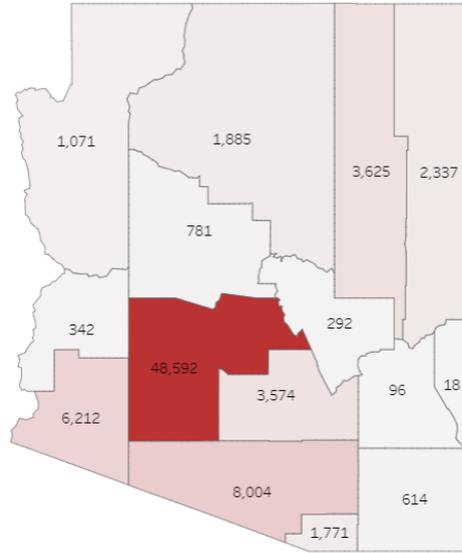
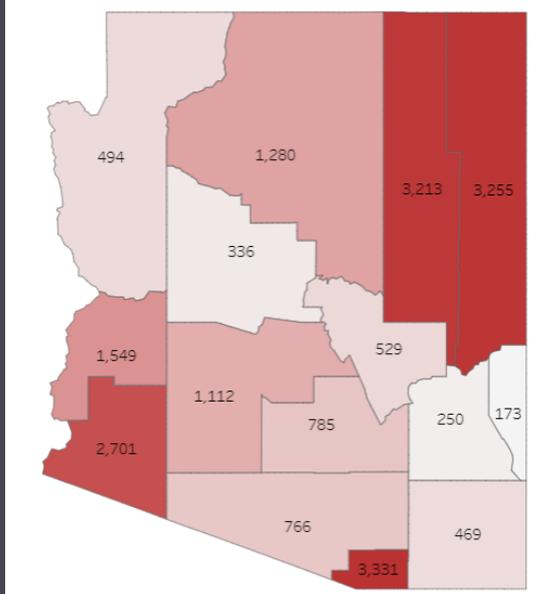
Show case counts or population rates in the map below?

Cases

Select a county to filter the other numbers.

Deaths will not be shown for counties with fewer than three deaths.

Rate per 100,000



Number of Cases 79,215	Number of Deaths 1,632	Number of COVID-19 Tests 701,834
Number of New Cases reported today* 4,682 2 day total	Number of New Deaths reported today* 44	Number of New Tests reported today* 23,471
Rate of cases, per 100,000 population 1,101.9	Rate of fatalities, per 100,000 population 22.70	Total Percent Positive** 9.9%
Total COVID-19 PCR Tests 531,922	New PCR Tests reported today* 20,913	PCR Percent Positive** 12.0%
Total COVID-19 Serology Tests 169,911	New Serology Tests reported today* 3,163	Serology Percent Positive** 3.2%

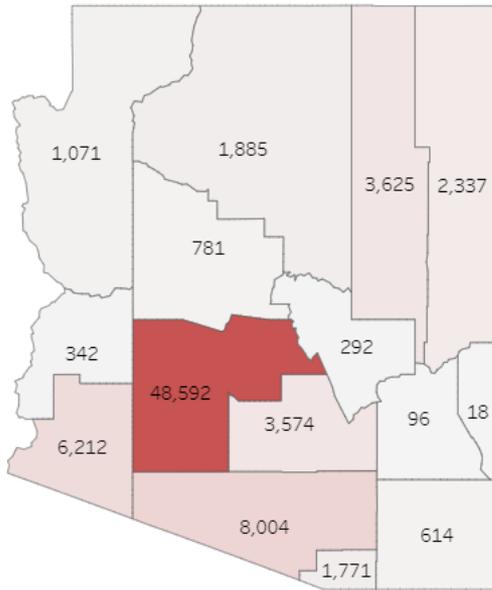
*Counts of new cases, deaths, and numbers tested reflect increases in the total numbers compared to the previous day.

Cases By Day

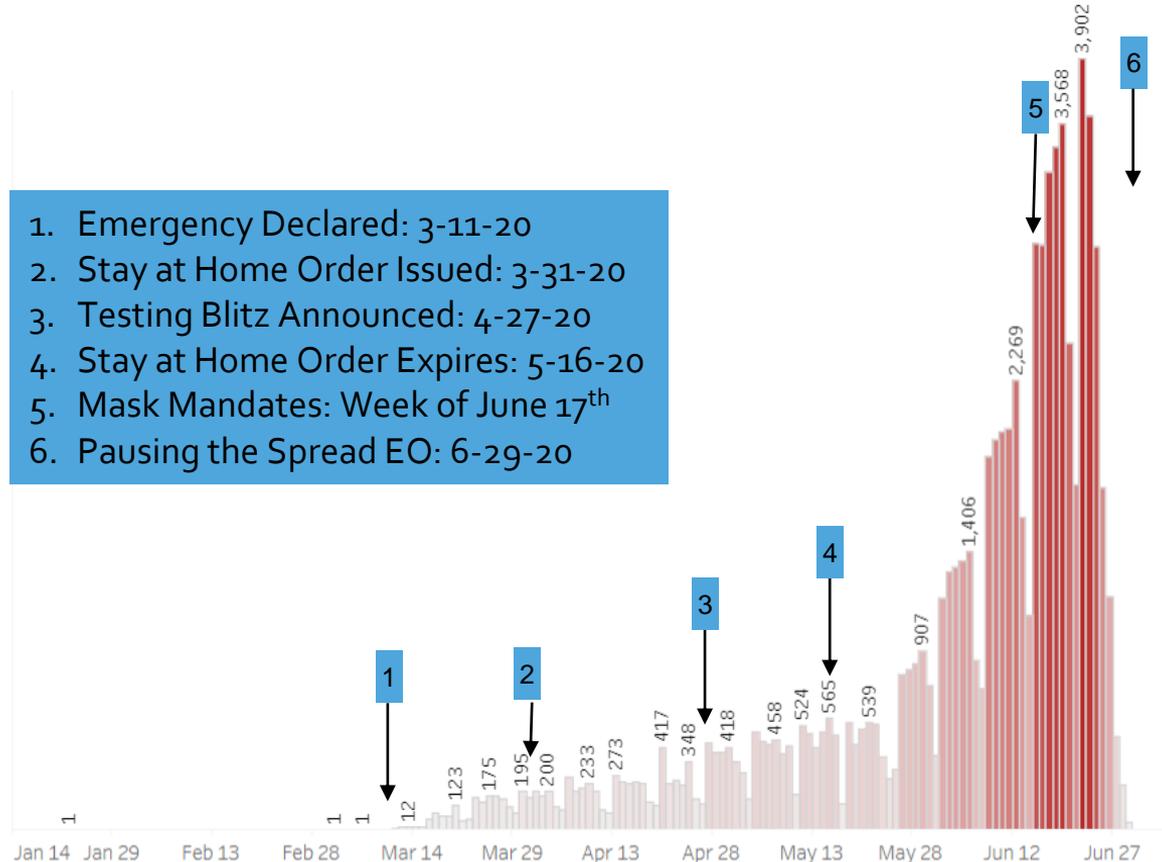


ARIZONA DEPARTMENT OF HEALTH SERVICES
Health and Wellness for All Arizonans

Illnesses in last 4-7 days may not be reported

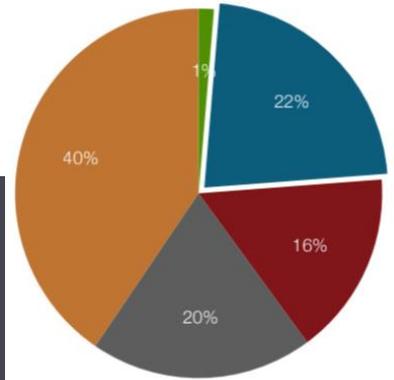


1. Emergency Declared: 3-11-20
2. Stay at Home Order Issued: 3-31-20
3. Testing Blitz Announced: 4-27-20
4. Stay at Home Order Expires: 5-16-20
5. Mask Mandates: Week of June 17th
6. Pausing the Spread EO: 6-29-20

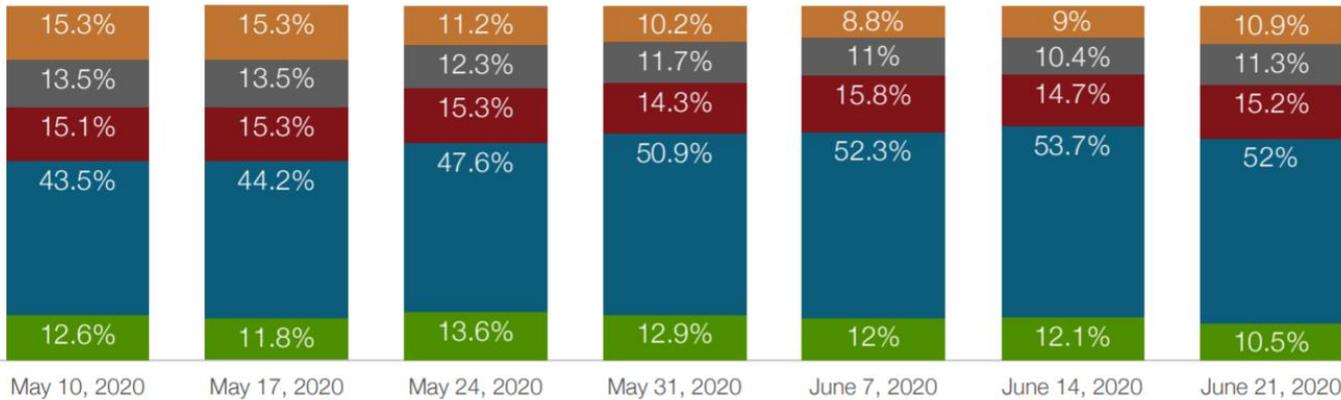


Weekly COVID Cases By Age

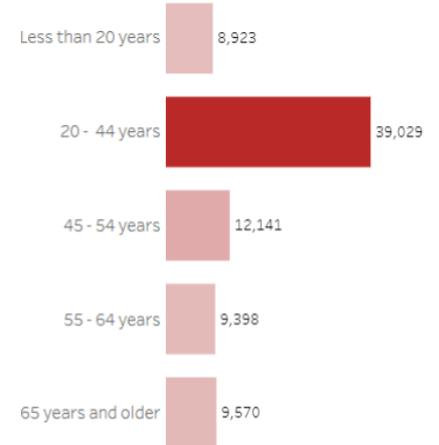
Hospitalizations



■ Less than 19 years
 ■ 20-44y
 ■ 45-54y
 ■ 55-64y
 ■ 65+



Cases by Age Group



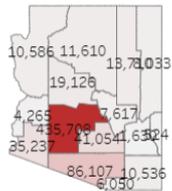
Laboratory Testing

All tests completed for COVID-19
701,833

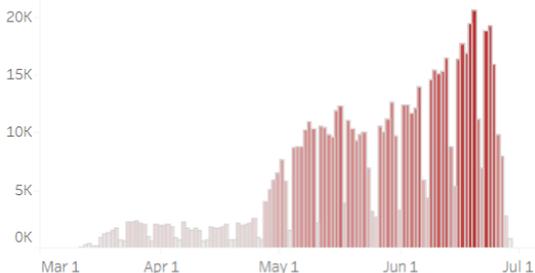
All tests reported yesterday in Arizona
24,076

Total % Positive COVID-19 All Tests
9.9%

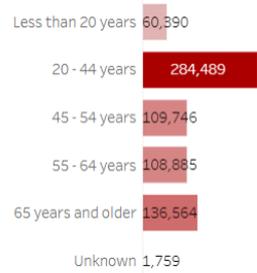
All tests by county
Select a county to filter the data.



All tests by date of collection



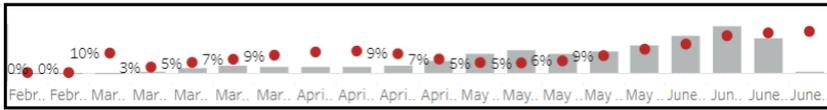
All Testing by Age Group



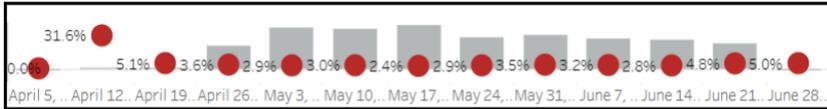
Date	Total % Positive	PCR % Positive	Sero % Positive
6/17/20	7.1%	8.7%	3.1%
6/24/20	8.6%	10.5%	3.0%
7/1/20	9.9%	12%	3.2%

COVID-19 tests completed and percent positive by week
Percent positive is defined as number of people with a positive test result, out of all people with COVID-19 testing completed in AZ.

Total % Positive COVID-19 PCR Tests
12.0%



Total % Positive COVID-19 Serology Tests
3.2%



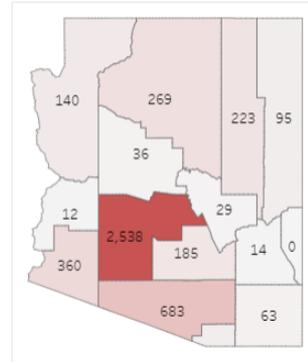
State ↑	New Cases ↑	Tests per 1,000 people ↑	Percent Positive ↑
	New daily cases Weekly trend	Daily Tests Weekly trend	Daily % positive Above threshold?
Arizona ↓	<p>+4,683 new</p> <p>THIS WEEK ↑ LAST WEEK ↑</p>	<p>1.8 tests per 1,000</p> <p>THIS WEEK ↑ LAST WEEK ↑</p>	<p>22.9% positive</p> <p>THIS WEEK ↑ LAST WEEK ↑</p>

Hospitalizations

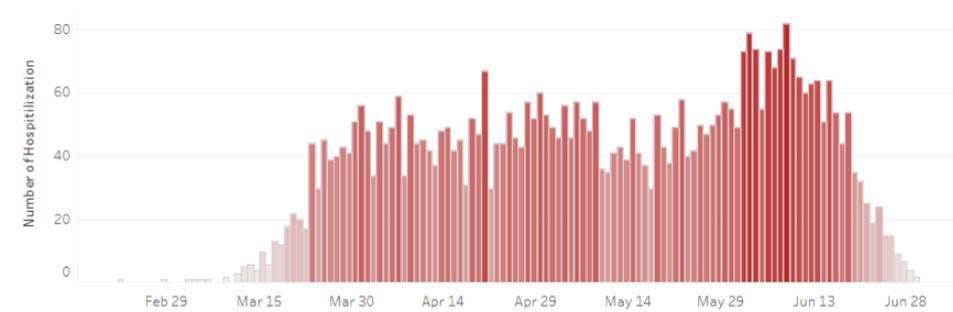


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Health and Wellness for All Arizonans

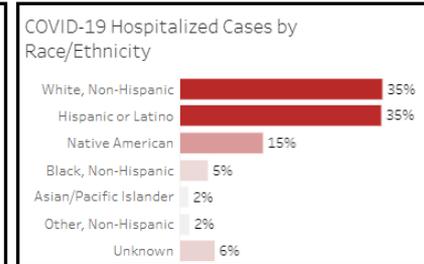
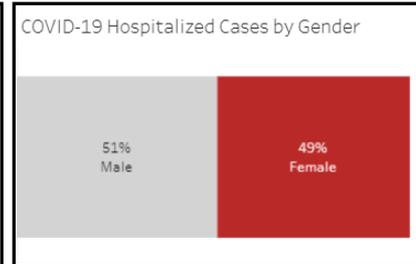
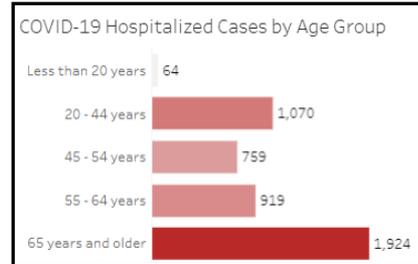
Number of Cases Hospitalized	Percent of Cases Hospitalized
4,736	6%



Number of COVID-19 Cases that are Hospitalized by Date of Hospitalization



Date	Total # COVID Cases In Hospital	% Cases
6/17/20	3,808	10%
6/24/20	4,250	7%
7/1/20	4,736	6%



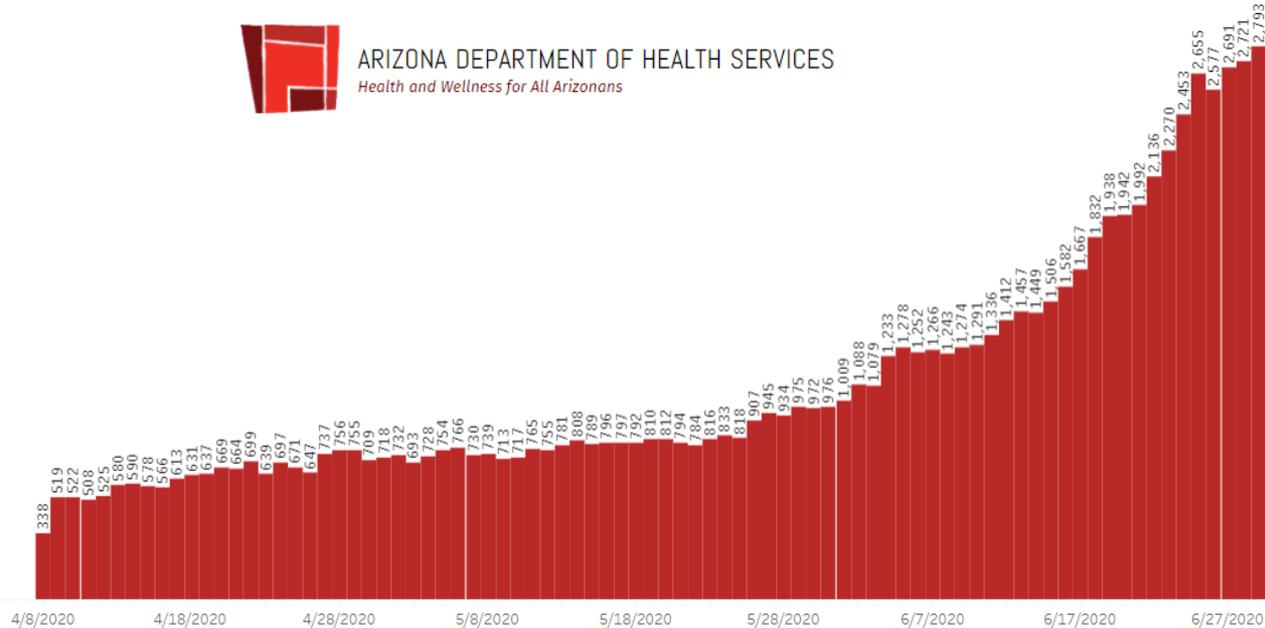
Inpatient Bed Usage Due to COVID-19

Number of Positive or Suspected **Inpatient COVID-19 Patients**

Hover over the icon to get more information on the data in this dashboard.



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*Does not include 2600 surge beds

ICU Beds in Use Due to COVID-19

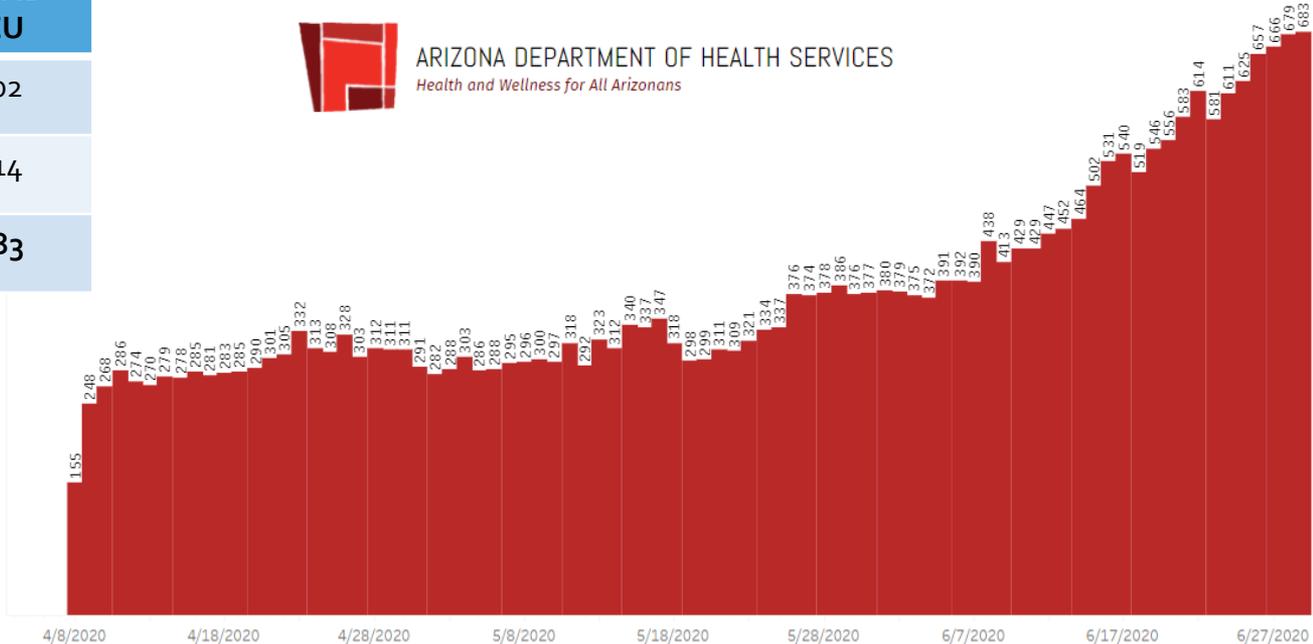
Number of **Intensive Care Unit (ICU) Beds in Use** by Positive or Suspected COVID-19 Patients

Hover over the icon to get more information on the data in this dashboard.

Date	Total ICU (in use%)	COVID ICU
6/15/20	1,307 (80%)	502
6/22/20	1,412 (84%)	614
6/29/20	1,435 (86%)	683



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*Does not include the 600 surge beds

Ventilator Usage Due to COVID-19

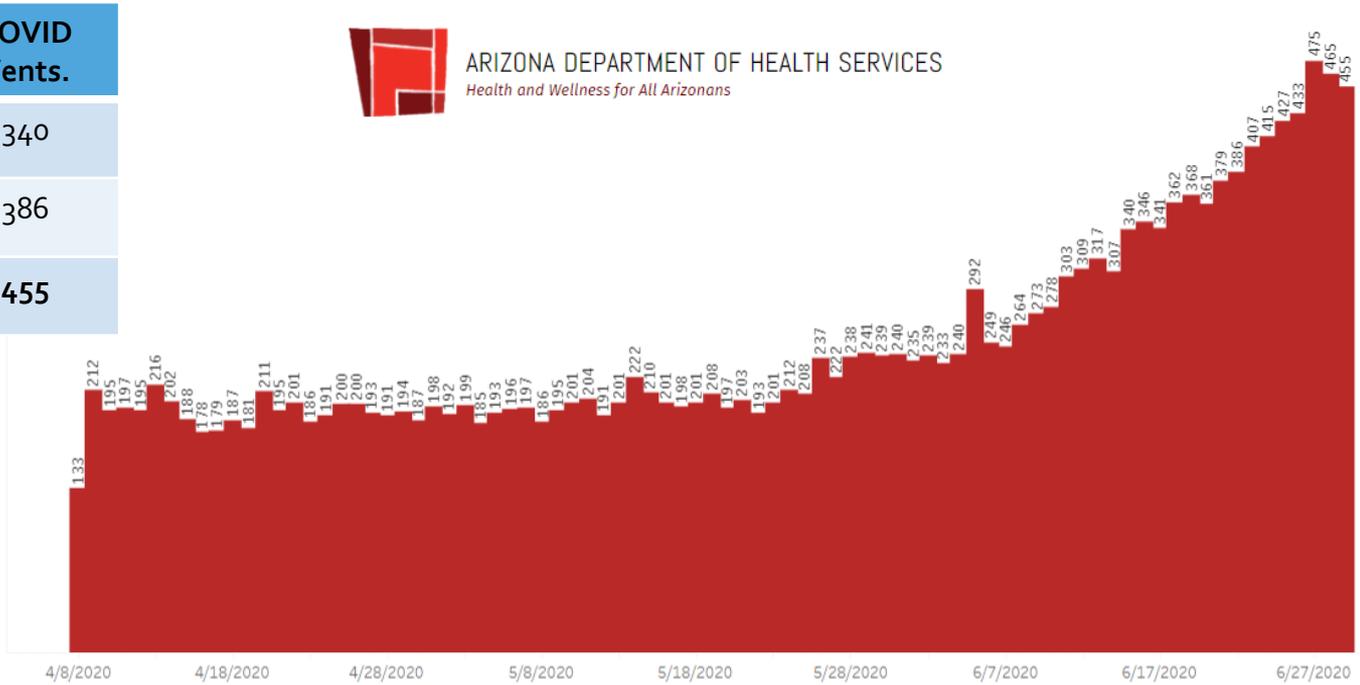
Number of **Ventilators in Use** by Positive or Suspect COVID-19 Patients

Hover over the icon to get more information on the data in this dashboard.

Date	Total Ventilators (in use%)	COVID Vents.
6/15/20	707 (38%)	340
6/22/20	716 (41%)	386
6/29/20	773 (45%)	455



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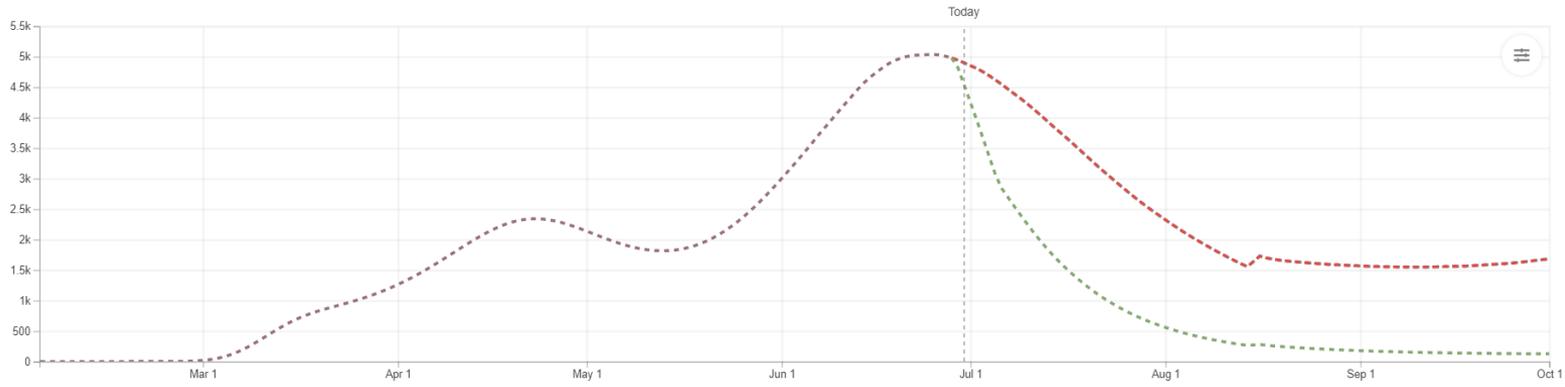




Daily infections and testing

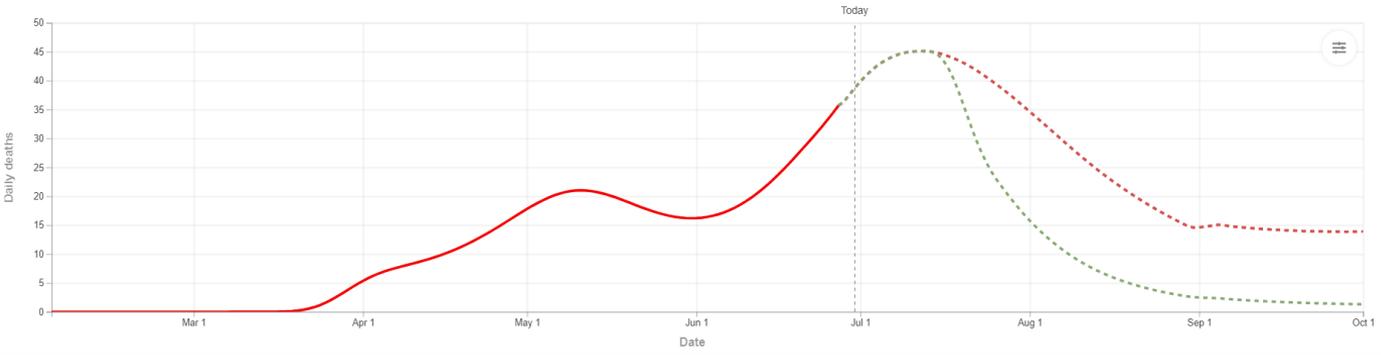
Estimated infections Confirmed infections Tests

Scenario



Daily deaths

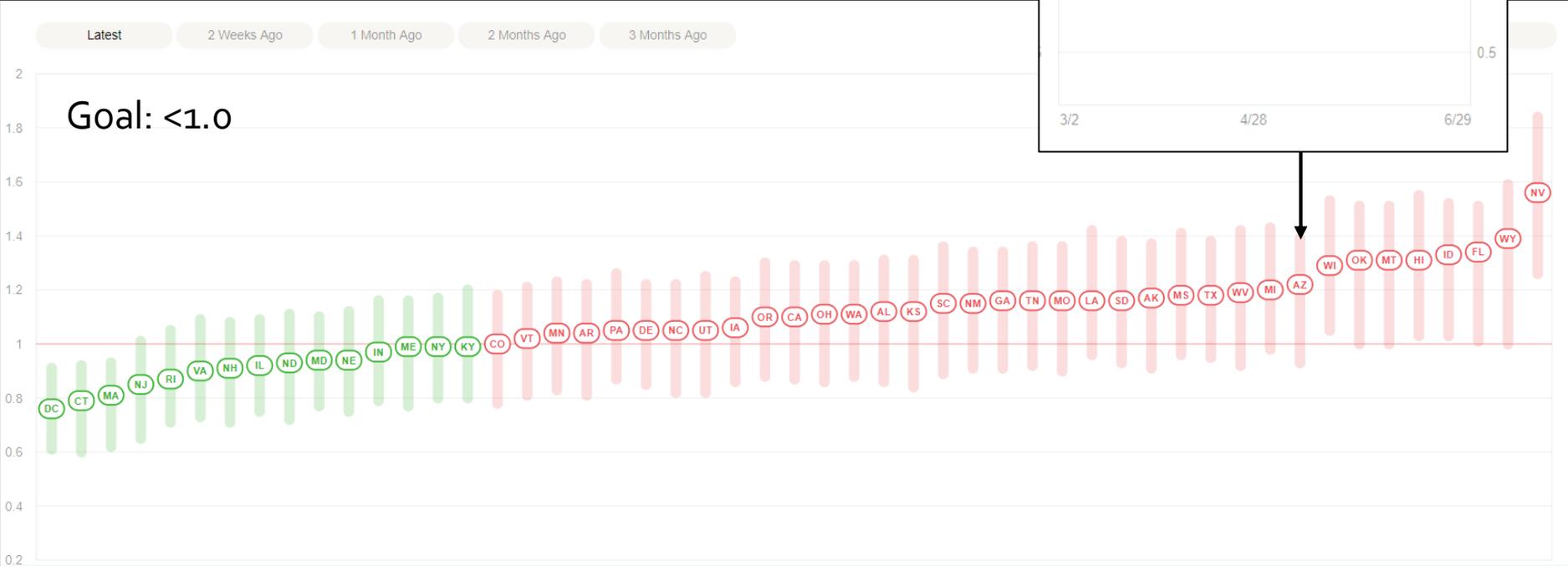
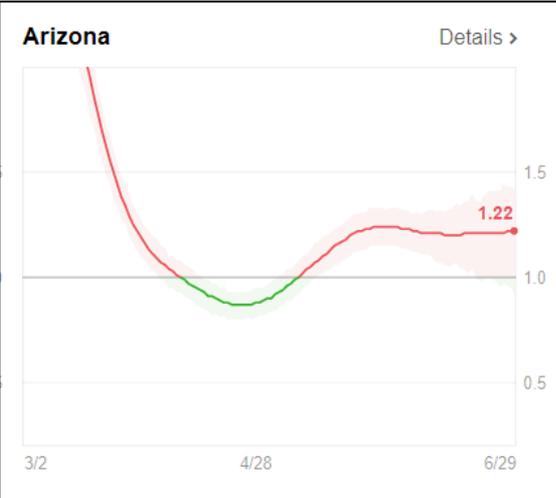
Scenario



#MaskUpAZ

STAY HEALTHY. | RETURN SMARTER. | RETURN STRONGER.

Effective Reproduction Number : R_t





OFFICE OF THE GOVERNOR
DOUG DUCEY

Good Samaritan Executive Order Extended

EO 2020-42

- Governor Ducey extended the Good Samaritan Executive Order 2020-27 that was set to expire on June 30th.
- The EO provides civil liability protections to health care institutions, treatment facilities, emergency medical care technicians, and health care professionals and volunteers who are registered and recruited through the Arizona Emergency System for the Advance Registration of Volunteer Health Professionals through the end of the calendar year.

ADHS Activates Crisis Standards of Care

STATE DISASTER MEDICAL ADVISORY COMMITTEE

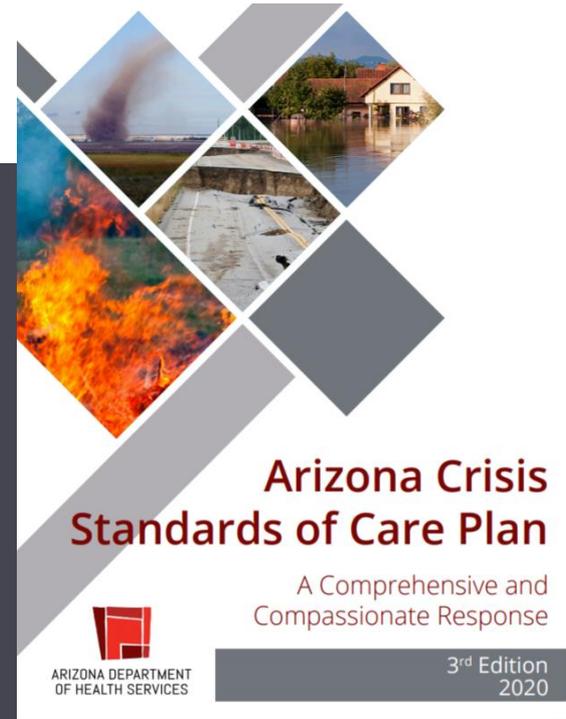
- Recommended implementation of Crisis Standards of Care on 6/26
- Establishing statewide standards of care ensures that all hospitals are providing the same level of care and patients are not treated by different standards.

ADHS WILL ACTIVATE CRISIS STANDARDS OF CARE

- Activate tactics to address space, staff, and resource constraints as necessary for the hospital's current situation.
- Prepare for surge and anticipate fully staffing hospitals.
- Cease all surgeries EXCEPT non-emergent, essential surgeries and procedures that do not impair the care of other patients.
- Activate Hospital Incident Command and meet with increasing frequency.
- Establish regular communication with local health jurisdiction.

Recent Approved Actions:

- 3/24/20: [Contingency PPE Guidance](#); [Liability Guidance](#); [Contingency Testing Prioritization Guidance](#); [Signed Decision Form](#)
- 4/1/20: [Crisis Standards of Care Staffing Guidance for Short-Term Acute Care Facilities](#); [COVID-19 Pre-Hospital Triage Guidance](#); [COVID-19 Guidance for Expansion of Healthcare Facility Staff](#)
- 6/12/20: [Remdesivir Allocation Guidance](#) & [Allocation of Scare Resources in Acute Care Facilities](#)



Crisis Indicators & Tactics for the State

Table 5—Conventional, Contingency, and Crisis Indicators for the State

<p>Conventional Indicators for the State</p> <ul style="list-style-type: none">• One or more counties/regions at capacity• Patient transfer may be impacted
<p>Contingency Indicators for the State</p> <ul style="list-style-type: none">• Local jurisdictions initiate resource requests• Medical countermeasure availability declining• One or more hospitals on diversion or damaged• Patient transfer across all or part of state is limited
<p>Crisis Indicators for the State</p> <ul style="list-style-type: none">• One or more counties/regions request state to implement CSC• Medical countermeasures depleted• Patient transfers insufficient or impossible statewide• Local jurisdiction resource requests unfillable or undeliverable• Multiple healthcare access points impacted

Table 8—Scripted Tactics for the State

<p>Conventional Tactics for the State</p> <ul style="list-style-type: none">• Place emergency operations/incident command staff on standby• Notify statewide partners of surge conditions
<p>Contingency Tactics for the State</p> <ul style="list-style-type: none">• Activate state EOCs• Participate in unified command with on scene operations and local EOCs• Process space, staff, and supply resource requests from local jurisdictions• Notify SDMAC committee of possible activation• Notify federal partners of medical surge
<p>Crisis Tactics for the State</p> <ul style="list-style-type: none">• Activate SDMAC to develop and implement CSC• Direct statewide public information activities• Activate state medical countermeasure, medical materiel, volunteer management, and alternate care site/system plans

Staffing Support & Supply Shortages

STRATEGIES TO MAXIMIZE MEDICAL RESOURCES

1. **SUBSTITUTE:** Use an essentially equivalent facility, professional, drug, or device for one that would usually be available.
2. **ADAPT:** Use a facility, professional, drug, or device that is not equivalent, but provides the best possible care.
3. **CONSERVE:** Use lower dosages or change practices, e.g., minimize use of oxygen by using air for nebulizers, when possible.
4. **REUSE:** Use single use items again, after appropriate disinfection or sterilization.
5. **OPTIMIZE ALLOCATION:** Allocate resources to patients whose need is greater or whose prognosis is more likely to result in a positive outcome with limited resources.

*Adapted from **The Guidelines for Use of Modified Health Care Protocols in Acute Care Hospitals During Public Health Emergencies**, September 2013, Kansas Department of Health and Environment

[CLICK HERE](#)

RECOMMENDED CSC EXPANDED SCOPES OF PRACTICE

1. EMTs and PAs may be supervised by a resident beyond their first year of residency (internship) in that resident's healthcare facility.
2. Residents beyond their first year of residency (internship) may function to the best of their ability in that resident's healthcare facility.
3. A licensed physician beyond their first year of training (internship) may not be constrained to practice in their assigned facility, but with advanced communication regarding specific needs, may go to another facility and practice under the supervision of a physician from the receiving facility.
4. Licensed Arizona RNs who have met the requirements may perform procedures defined by the Arizona Board of Nursing (ABN) Advisory Opinions in facilities where they have privileges.
5. Any out-of-state, licensed healthcare professional in good standing may be approved to practice by that professional's Arizona licensing board at that board's discretion during CSC.
6. Department of Defense (DOD) clinical professionals, under the supervision of an Arizona licensed clinical professional with similar clinical responsibilities, may use their competencies and privileges obtained through the DOD to exercise their documented skills to assist with healthcare needs of the community.
7. Federal clinical professionals, under the supervision of an Arizona licensed clinical professional with similar clinical responsibilities, may use their competencies and privileges obtained through their federal agencies to exercise their documented skills to assist with healthcare needs of the community.

EO 2020-43: Pausing of Arizona's Reopening

NEW EXECUTIVE ORDER

PAUSING OPERATIONS OF BARS, GYMS, MOVIE THEATERS, WATERPARKS, TUBING

- Effective today at 8pm, with a **targeted** reopening in one month
- In order to reopen the establishments must attest to adhere to all public health regulations, and post it for the public to see
- Enforcement will be led by local public health officials and local authorities



LIMITING MASS GATHERINGS

- Prohibited: Indoor or outdoor public events of 50 or more
- The Department of Liquor Licenses and Control shall cease issuing special event licenses
- Applicable statewide
- Cities and counties have the authority to approve larger events, but only if adequate safety precautions are implemented, including physical distancing measures

GUIDANCE FOR POOLS

- Public pools: municipal, hotels, motels
 - Prohibit groups larger than 10 from congregating together in or near the pool
- Private pools: apartments, condos, multi-housing complexes
 - Must post signage at all entrances requiring physical distancing and limiting groups larger than 10 from congregating in or near the pool





EO 2020-44: Protecting Public Health For Students and Teachers

CERTAINTY FOR ARIZONA SCHOOLS

DELAYING THE FIRST DAY OF SCHOOL

- Target date: August 17, 2020
- Continuously reevaluating this target date

KEEPING ARIZONA KIDS SAFE AND HEALTHY

- Work with Superintendent Hoffman to continue encouraging virtual check-ins.
- Encourage meal programs to continue for kids in need.



1. All schools shall delay the start of in-person classes for the school year that begins July 1, 2020, until August 17, 2020, but schools may begin the school year on their regularly planned start date prior to August 17, 2020 through distance learning.
 - a. If a school chooses to begin the school year on its regularly planned start date through distance learning, a district or charter school shall submit a distance learning plan as required by the Arizona Department of Education (ADE) no later than the start date of the distance learning program or August 14, 2020, whichever is earlier.
 - b. A school district or charter school may delay benchmark testing until the first six weeks after in-person classes are allowed to begin.
 - c. District and charter school students shall be considered as an AOI (Arizona Online Instruction Program) student for purposes of school funding calculations while participating in distance learning.
2. The Arizona Department of Education shall conduct an analysis of the need to waive the number of school days that schools are required to provide schooling and the impact of such a waiver. The analysis shall be submitted to the Governor, the Speaker of the Arizona House of Representatives, the President of the Arizona State Senate and the State Board of Education by August 31, 2020.
3. Schools who have implemented child care programs shall continue to offer those programs until the start of in-person classes.
4. Any provisions of this Executive Order that conflict with Executive Order 2020-41, *2020-2021 School Year, Prioritizing Kids and Schools During COVID-19*, govern while the start of in-person classes is delayed.

TESTING INITIATIVES

Convalescent Plasma

- Convalescent plasma is a treatment that some doctors are using for people with severe coronavirus disease 2019 (COVID-19)
- People who've recovered from COVID-19 have antibodies to the disease in their blood.
- Their blood can be collected and the plasma, containing the antibodies can be given to people with severe COVID-19 to boost their ability to fight the virus.
- If you've had COVID-19 and recovered from it, consider donating blood.



OFFICE OF THE GOVERNOR
DOUG DUCEY

STAYING CONNECTED WITH THE ONES WE LOVE MOST

GRANTS FOR ELECTRONIC DEVICES & TABLETS

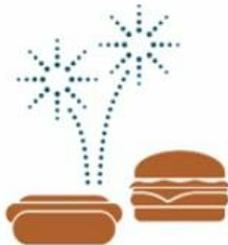
- For Long-Term Care Facilities & Skilled-Nursing Facilities
- Partnering with AARP
- \$10,000 per facility



UPDATED GUIDANCE FOR INDEPENDENCE DAY & BEYOND

HOUSE PARTIES, FAMILY GATHERINGS, POOL PARTIES & BBQs

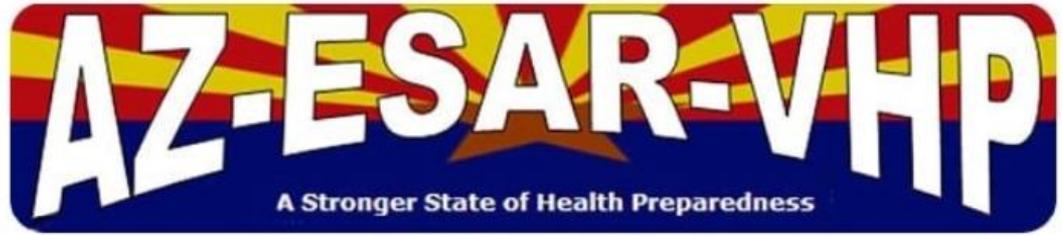
- Celebrate with your immediate household or daily contacts
- Protect your most vulnerable family members and friends: invite parents and grandparents to join through FaceTime or other video chat methods
- Stay outside when possible, stay hydrated, physically distance, and wear a mask





ARIZONA DEPARTMENT
OF HEALTH SERVICES

Arizona Emergency System for the
Advance Registration of Volunteer
Health Professionals (AZ-ESAR-VHP)



The mission of the [ESAR-VHP](#) program is to establish a national interoperable network of state based volunteer registration systems for managing volunteers at all tiers of response. Each system verifies the identity, credentials, certifications, licenses, and hospital privileges of health professionals who volunteer to provide health services during a public health emergency.

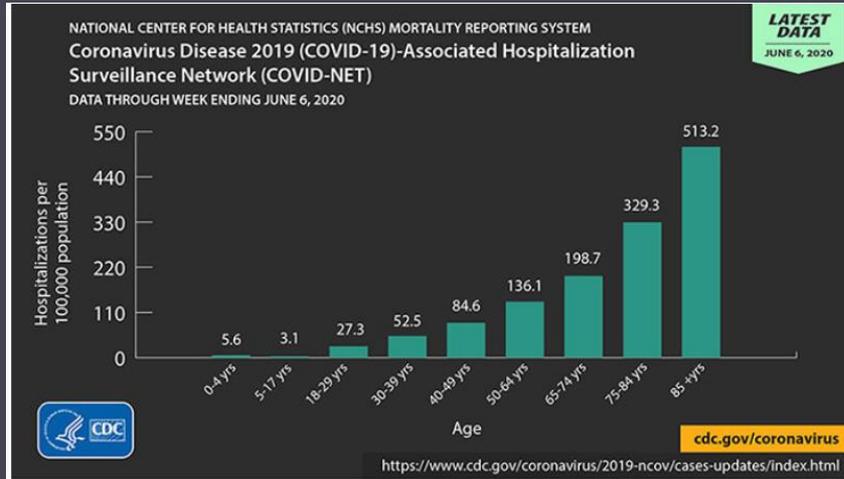
- Medical and non-medical volunteers
- Majority already live and work in AZ
- It is NOT an automatic fill for staff -it as a clearing house for potential health workers

You need to be prepared to:

- Give a description of the situation
- Determine if they will be paid or unpaid
- Details about the number of staff and job descriptions for each
- Time frame needed
- Plan for food, housing and other support
- Be able to integrate them into your system

CDC Expands List of Those at Risk for Coronavirus

- Among adults, the risk for severe illness from COVID-19 increases with age, with older adults at highest risk.
- In general, your risk of getting severely ill from COVID-19 increases as you get older. In fact, 8 out of 10 COVID-19-related deaths reported in the United States have been among adults aged 65 years and older.



CDC Has Information For Older Adults at Higher Risk

8 out of **10** COVID-19 deaths reported in the U.S. have been in adults 65 years old and older. Visit [CDC.gov/coronavirus](https://www.cdc.gov/coronavirus) for steps to reduce your risk of getting sick.

[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)

CDC Expands List of Those at Risk for Coronavirus

People of any age with certtain underlying medical conditions are at increased risk for severe illness from COVID-19:

- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Immunocompromised state (weakened immune system) from solid organ transplant
- Obesity (body mass index [BMI] of 30 or higher)
- Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
- Sickle cell disease
- Type 2 diabetes mellitus

DEA Warns Against Use of Certain Antibody Tests

- DEA recommends that clinical laboratories and health care providers stop using COVID-19 antibody tests that are listed on FDA's "[removed](#)" test list.
- There are 53 tests listed so far!

Manufacturer	Test	Status
ACCOBiotech SDN.BHD	ACCO COVID-19 IgM/IgG TEST	Removed - Should Not Be Distributed
Anhui Deepblue Medical Technology Co., Ltd.	COVID-19 (SARS-CoV-2) IgG/IgM Antibody Test Kit (Colloidal Gold)	Removed - Should Not Be Distributed
Artron BioResearch Inc./ Artron Laboratories Inc.	COVID-19 IgM/IgG Antibody Test	Removed - Should Not Be Distributed*
Atlas Link (Beijing)Technology Co., Ltd	NovaTest: One Step COVID-19 IgG/IgM rapid test	Removed - Should Not Be Distributed
Audacia Bioscience	CMC-19D SARS-CoV2 (COVID-19) Rapid Antibody Test	Removed - Should Not Be Distributed

Remdesivir Updates

183,560 vials will be shipped out to states this week.

- This is the last of the donated product -- ASPR has not held any vials in reserve.
- These are in lyophilized form and can be stored at room temperature and used in pediatric patients.
- Distribution from state health departments to hospitals may be delayed; some states may distribute this allocation immediately or distribution may extend further into July.

ASPR is working with Gilead and AmerisourceBergen to develop a plan for the 2,000,000 doses anticipated by the end of the year.

- No news yet on whether these doses will be donated or sold commercially.
- ASPR will remain involved in the allocation process.

Continue using the SDMAC [Remdesivir Allocations Guidelines](#).

Gilead plans to start trials of an inhaled version by August.

Dexamethasone

- [Demand For Dexamethasone Reportedly Raises Concerns About Future Shortages](#)
- [US Hospitals Hard Hit By Pandemic Ramping Up Use Of Dexamethasone](#)
- [Aspen CEO Says Company Could Provide 10M Dexamethasone Doses Within One Month](#)
- [More Data Support Theory That Antivirals Most Effective In Early COVID-19, Immunosuppressants In Later-Stage Disease](#)

Questions?