



****Extraordinary Assumptions: There are many different data sources in this report and not all of them match. This document is informational purposes only, the goal is to provide an overall picture of the current situation.**

Situation Summary

Friday, February 25, 2022 - Day 716 of the Pandemic as of 2:00 PM

COVID-19 by the Numbers

02/25/2022	Riverside	Imperial	Kern	Los Angeles*	Orange	San Bernardino	San Diego	San Luis Obispo	Santa Barbara	Ventura	California	United States	Global
Total Cases	584,381	54,292	188,432	2,659,569	539,631	555,238	735,406	51,264	84,760	171,163	8,344,869	78,595,529	430,257,564
Total Cases Per Capita	23,677	28,329	20,322	25,928	16,715	25,040	21,819	18,383	18,573	20,072	20,795	23,533	5,433
% of Total Cases/Population	23.68%	28.33%	20.32%	25.93%	16.71%	25.04%	21.82%	18.38%	18.57%	20.07%	20.80%	23.53%	5.43%
Recovered*	515,815	49,903	195,485	Not Reported	514,456	555,487	Not Reported	50,815	83,582	167,866	3,741,549	52,662,670	362,037,787
% of total recovered/population	20.90%	26.04%	21.08%	Not Reported	15.93%	25.05%	Not Reported	18.22%	18.31%	19.69%	9.32%	15.77%	4.57%
Total Deaths	6,119	871	423	30,167	6,520	6,479	4,988	434	651	1,401	41,043	939,654	5,922,049
Deaths Per Capita	247.92	454.48	45.62	294.10	201.95	292.19	147.99	155.63	142.65	164.29	102.28	281.35	74.79
% of Total Deaths/Population	0.25%	0.45%	0.05%	0.29%	0.20%	0.29%	0.15%	0.16%	0.14%	0.16%	0.10%	0.28%	0.07%
% of State's Cases	7.00%	0.65%	2.26%	31.87%	6.47%	6.65%	8.81%	0.61%	1.02%	2.05%	10.62%	18.27%	
Total Hospital Beds	3,541	199	1,093	19,514	6,023	3,707	6,522	443	604	1,170	67,156		
Currently in Hospitals	289	38	111	1,105	295	250	497	18	50	103	4,914		
Hospital Beds Available**	3,252	161	982	18,409	5,728	3,457	6,025	425	554	1,067	62,242		
Total Hospital ICU Beds**	152	9	53	826	219	204	288	16	28	57	2,822		
Currently in ICU	53	9	23	265	56	58	91	2	11	20	960		
ICU Beds Available	99	0	30	561	163	146	197	14	17	37	1,862		
Case Fatality Rate	1.05%	1.60%	0.22%	1.13%	1.21%	1.17%	0.68%	0.85%	0.77%	0.82%	0.49%	1.20%	1.38%
Population***	2,468,145	191,649	927,251	10,257,557	3,228,519	2,217,398	3,370,418	278,862	456,373	852,747	40,129,160	333,976,981	7,918,710,000
% of State Population	6.15%	0.48%	2.31%	25.56%	8.05%	5.53%	8.40%	0.69%	1.14%	2.13%	12.02%	4.22%	

Sources: CDPH, WHO, CDC, Local County Data, LA Times

The date for which case statistics and hospital data were reported. Hospital COVID data are self-reported through a portal managed by the California Hospital Association and pulled at 2pm. COVID case statistics are reported by local health departments to CalREDIE and are pulled at 2pm. Hospital data and case statistics are integrated by the California Department of Technology and made available through the Open Data Portal the following morning. CA Open Data Portal is at least 24 Hours behind although a backlog of new case reports at the State level has ostensibly been cleared, some County dashboards still contain notes that indicate data are missing. (*Many County sites do not report recovery rates or are only updating once a week) (** based on calculation)(***California Demographics from State Database Blueprint Data Chart 12-15-20 & census.gov)

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News – The collection of news articles are related to COVID-19. The inclusion or order of articles is not intended to reflect their importance, nor is it intended to endorse the political viewpoints or affiliations included in news coverage.

New Zealand Protest, an Echo of Canada's, Digs In and Turns Ugly

- Hundreds of demonstrators opposed to New Zealand's Covid-19 vaccine mandate are in their third week of encampment in Wellington, erecting tents, illegally parking vehicles and establishing communal kitchens and toilets in a deliberate echo of the Canadian siege.
- Initially, the New Zealand occupation had a carnival atmosphere, with a popcorn stand and a doughnut truck and a number of children brought in by their parents. New Zealanders joked that it was the country's only Omicron-era music festival: Officials blared Barry Manilow and James Blunt to try to drive out the protesters, who responded with some Twisted Sister of their own.
- In recent days, however, after the police moved to evict some protesters, the demonstration has grown more violent. On Monday, protesters threw feces at the police. On Tuesday, a driver tried to ram a car into a large group of officers, and three other members of the force required medical attention after protesters sprayed them with what a police statement called a "stinging substance."
<https://www.nytimes.com/2022/02/23/world/australia/new-zealand-protest-vaccine.html>

Africa transitioning out of pandemic phase of COVID: WHO

- Africa is transitioning out of the pandemic phase of the COVID-19 outbreak and moving towards a situation where it will be managing the virus over the long term, the head of the World Health Organization on the continent has said.
- "I believe that we are transitioning from the pandemic phase and we will now need to manage the presence of this virus in the long term," Dr Matshidiso Moeti told a media briefing on Thursday.
- "The pandemic is moving into a different phase ... We think that we're moving now, especially with the vaccination expected to increase, into what might become a kind of endemic living with the virus," she said.
- "Against the odds, including huge inequities in access to vaccinations, we've weathered the COVID-19 storm with resilience and determination."
- Moeti's optimism contrasts sharply with the warnings from WHO Director-General Tedros Adhanom Ghebreyesus, who has said repeatedly the pandemic is not over and that it is premature for countries to think that the end might be imminent.
- "Wherever you live, COVID isn't finished with us," Tedros said this week. He has cautioned that new coronavirus variants are likely and could undo the progress made so far, saying populations in Africa are among the most at-risk.
- According to the World Bank, the COVID-19 pandemic is estimated to have pushed up to 40 million people into extreme poverty in Africa, and every month of delay in lifting containment measures is estimated to cost Africa \$13.8bn in lost gross domestic product.
- It is worrying that only 11 percent of Africa's adult population has been vaccinated despite the continent receiving more than 670 million vaccine doses, Moeti said.
<https://www.aljazeera.com/news/2022/2/10/africa-transitioning-out-of-pandemic-phase-of-covid-who>

WHO announces new hub for training countries to make COVID jobs

- The WHO says it has set up a hub in South Korea to train low- and middle-income countries to produce their own vaccines and therapies, and is expanding its COVID-19 vaccine project to a further five nations.
- The new hub will share mRNA technology being [developed by the WHO and partners in South Africa](#), where scientists have been working to recreate the COVID-19 vaccine made by Moderna. That effort is taking place without Moderna's help.
<https://www.aljazeera.com/news/2022/2/23/who-announces-new-hub-for-training-countries-to-make-covid-jobs>

New Uganda law to impose fines on those who refuse COVID vaccine

- Uganda plans to impose fines on people who refuse to be vaccinated against COVID-19 and those who fail to pay could be sent to prison under an amendment of a public health law currently being reviewed in Parliament.
- Health Minister Jane Ruth Aceng told lawmakers on Monday that the amendment is important to repeal the obsolete provisions, revise the fines for offences committed and protect citizens.
- "The bill has a section on vaccination and immunisation as a public health measure to protect the vulnerable," she said. "When we introduce new vaccines, we need to get a mass of people so we create mass immunity. It is important that whoever is supposed to be vaccinated, is vaccinated."
- The East African country started administering COVID-19 vaccines nearly a year ago, but only about 16 million jabs have been administered in a population of 45 million. Officials are blaming widespread reluctance for the low coverage.
- This has led to the Parliament's Health Committee scrutinising the Public Health (Amendment) Bill 2021, which seeks to make coronavirus vaccination mandatory.
- "According to the proposal, those who do not get vaccinated against COVID-19 will be fined 4 million Ugandan shillings (\$1,139) for those who fail to get vaccinated or [receive] a jail term of six months," Parliament said in a statement on its website.
<https://www.aljazeera.com/news/2022/2/22/new-uganda-law-to-impose-fines-on-those-who-refuse-covid-vaccine>

Quebec to impose a 'significant' fine on unvaccinated residents

- The Canadian province of Quebec announced Tuesday that residents who have refused a Covid-19 vaccine will soon have to pay a fine. The fines will be a way for the unvaccinated to contribute to an overburdened public health care system.
- "Right now, these people, they put a very important burden on our health care network, and I think it's normal that the majority of the population is asking that there be a consequence," Quebec Premier François Legault said at a news conference Tuesday.
- "It's a question also of fairness for the 90% of the population who made some sacrifices -- and I think we owe them this kind of measure."
- The fine would not apply to those with a medical exemption, and no details have been announced. However, Legault said the amount to be levied would be "significant."
- Last week, Quebec announced that residents would have to be vaccinated to buy alcohol or cannabis. Quebec's health minister, Christian Dubé, said in a tweet that after the announcement, vaccine appointments spiked.
- "In just a few days, appointments for the 1st dose went from 1.5K per day to over 6K yesterday. Thank you to everyone who decided to get vaccinated. It is not too late to get your 1st dose. Protect yourself," Dubé said.
- Quebec, where nearly a quarter of all Canadians live, was one of the first provinces in Canada to introduce a vaccine passport. Proof of vaccination is required in order to eat in restaurants, go to the gym or attend sporting events.
<https://www.cnn.com/2022/01/11/americas/quebec-vaccine-mandatory-fine-canada-intl/index.html>

Why have Filipino nurses in the US been so hard hit by COVID-19?

- <https://youtu.be/cYWfsTwTHN8> - 25 Min Video
<https://www.aljazeera.com/program/the-stream/2021/4/27/why-have-filipino-nurses-in-the-us-been-so-hard-hit-by-covid-19>

Study suggests COVID-19 vaccines do not reduce fertility

- COVID-19 vaccination did not reduce the chances of conception in a study of more than 2,000 couples.
- However, infection with SARS-CoV-2 was associated with a short-term reduction in fertility in males.
- The results reinforce the safety of COVID-19 vaccination for couples trying to conceive.

<https://www.nih.gov/news-events/nih-research-matters/study-suggests-covid-19-vaccines-do-not-reduce-fertility>

CDC changes guidance and advises longer interval between vaccine doses

- The Centers for Disease Control and Prevention (CDC) on Tuesday issued new COVID-19 mRNA vaccine guidance, expanding the recommended time between the initial two vaccine doses to eight weeks for some people over the age of 12, particularly young men.
- The prior recommended interval between initial doses was three weeks for the Pfizer-BioNTech vaccine and four weeks for the Moderna vaccine. This timeline is still recommended by the CDC for individuals who are immunocompromised, over 65 years old or in need of rapid protection against the coronavirus
- CDC officials said they were reacting to research showing that the longer interval can provide more enduring protection against the coronavirus. Research suggests that 12- to 64-year-olds – especially males ages 12 to 39 – can benefit from the longer spacing, the CDC said.
- "mRNA COVID-19 vaccines are safe and effective at the FDA-approved or FDA-authorized intervals, but a longer interval may be considered for some populations," the CDC said. "While absolute risk remains small, the relative risk for myocarditis is higher for males ages 12-39 years, and this risk might be reduced by extending the interval between the first and second dose."
- Earlier this month, the CDC had said in a presentation that it was considering extending the time between initial doses, citing data that showed the antibody response was higher when the time between shots was longer. Despite the potential side effects, the CDC maintained that the benefits of the mRNA COVID-19 vaccines "far outweigh risk of myocarditis."

<https://www.theguardian.com/world/2022/feb/23/cdc-advises-longer-wait-between-first-and-second-vaccine-doses>

CDC to allow 70% of the country to lift mask mandates

- The Centers for Disease Control and Prevention is planning to announce changes to the metrics that the agency uses in recommending facial mask coverings.
- CDC to allow 70% of the country to lift mask mandates: The U.S. Centers for Disease Control and Prevention on Friday will change the metrics it uses to assess the risk of coronavirus spread, allowing some 70% of Americans to remove their masks indoors, two sources familiar with the plans told ABC News. Under the agency's new measures — which weigh case rates, hospitalizations and hospital capacity — a majority of counties in the nation will fall out of the "high" and "substantial" COVID-19 risk tiers and into the "low" or "medium" risk categories, for which the CDC no longer recommends people wear masks inside public spaces. The guidance will also apply to some schools. The requirement for face masks on public transportation will remain in place, according to the sources. The agency is expected to make the announcement formal this morning.

<https://www.sfchronicle.com/health/article/COVID-in-California-Maternal-deaths-rose-14-in-16945541.php>

UPDATE: Effective February 25, 2022, CDC is exercising its enforcement discretion to not require that people wear masks on buses or vans operated by public or private school systems, including early care and education/child care programs. CDC is making this change to align with [updated guidance](#) that no longer recommends universal indoor mask wearing in K-12 schools and early education settings in [areas with a low or medium COVID-19 Community Level](#). School systems at their discretion may choose to require that people wear masks on buses or vans.

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/face-masks-public-transportation.html>

One of California's biggest music festivals returns with no COVID restrictions

- Following a two-year pandemic hiatus, the California Roots Music and Art Festival plans to return to the Monterey County Fair and Event Center from May 26 to 29. But just like Coachella in Southern California, the organizers of Northern California's largest reggae music festival say there are no coronavirus safety measures in place due to the fluid nature of the pandemic and government policies that appear to be shifting weekly.
- "To be honest, we can't definitively say at this point. Currently, we have no restrictions," they said.
<https://datebook.sfchronicle.com/music/one-of-californias-biggest-music-festivals-returns-with-an-uncertain-covid-policy>

California canceled a \$456 million deal for N95 masks in 2020. Now it's getting sued

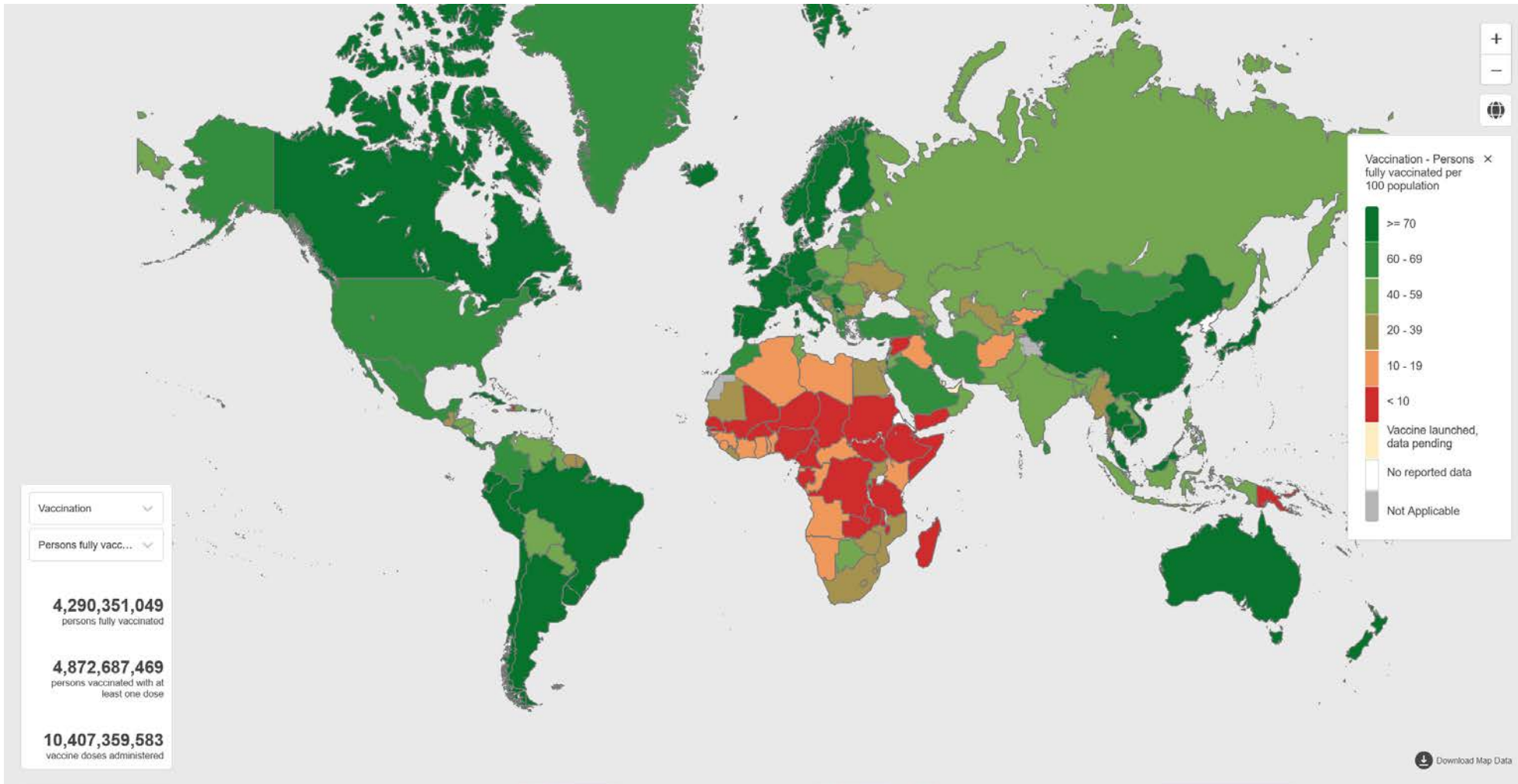
- Two years ago, during the frantic beginning of the COVID-19 pandemic, California officials approved a rush order for N95 masks and wired \$456 million to a startup supplier.
- The deal collapsed within hours after questions surfaced about the supplier's credibility, and the state was able to retrieve its money. But the fallout from the botched mask purchase continues to haunt the state.
- On Thursday the state was sued for \$5.9 million by banking giant JPMorgan Chase for legal fees the bank says it incurred after it helped halt the wire transfer to the supplier, Blue Flame Medical LLC.
<https://www.sacbee.com/news/politics-government/capitol-alert/article258780008.html>

California Proposal Would Require School COVID Testing Plans

- Proposed legislation in California would require all K-12 public schools to develop COVID-19 testing plans for students and staff and the funding for schools to do it, Sen. Richard Pan said in announcing it Tuesday.
- The legislation would also apply to pre-schools, childcare centers and afterschool programs.
- It would require the California Department of Public Health to work with school districts to develop a testing plan. The bill does not specify the frequency of testing or if it should apply to all students and staff or just the unvaccinated, leaving those decisions to each school district.
- Pan said the proposed funding for would be determined at a later date based on how much the state and federal governments have already dispensed for school testing and other data being collected.
- Under current guidance from the California Department of Public Health, school districts are encouraged but not required to conduct regular COVID-19 testing to catch infections early and reduce the spread of the virus. The state offers funding for testing, but many districts have said they don't have enough staff to carry out extensive testing programs
- With the current omicron wave subsiding, California health officials say they will reassess the need for a school mask mandate on Feb. 28, based on factors that include vaccination rates among children and hospital capacity. All students and staff are currently required to wear face coverings indoors.
- Gov. Gavin Newsom in October announced the nation's first coronavirus vaccine mandate for schoolchildren. But it likely won't take effect until this summer and allows exemptions for medical reasons and personal beliefs.
- Pan has proposed legislation that would eliminate the personal belief exemption in the school-based COVID-19 vaccine requirement, similar to a 2015 law that eliminated the personal-belief exemption for all other childhood vaccinations the state requires for schoolchildren.
<https://www.nbcbayarea.com/news/california/california-proposal-would-require-school-covid-testing-plans/2819996/>

Global Data

<https://covid19.who.int/>

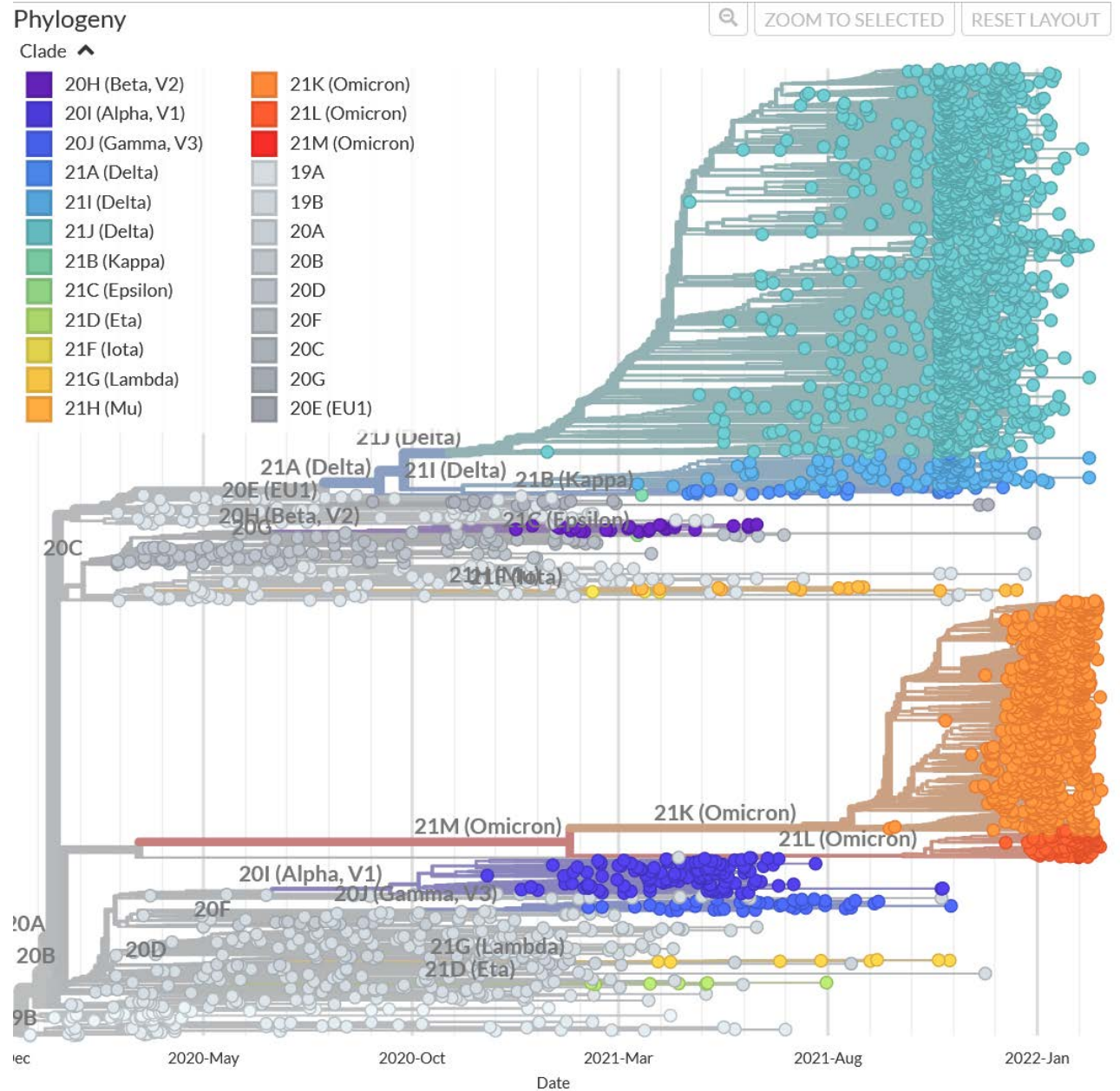


Genomic epidemiology of novel coronavirus - Global subsampling

Built with [nextstrain/ncov](#). Maintained by the [Nextstrain team](#). Enabled by data from [GISAID](#).

Showing 3318 of 3318 genomes sampled between Dec 2019 and Feb 2022.

<https://nextstrain.org/ncov/gisaid/global>





U. S. Data

https://covid.cdc.gov/covid-data-tracker/#cases_casesper100klast7days

TOTAL CASES
78,595,529

+77,458 New Cases

7 DAY CASE RATE PER 100,000
158.6

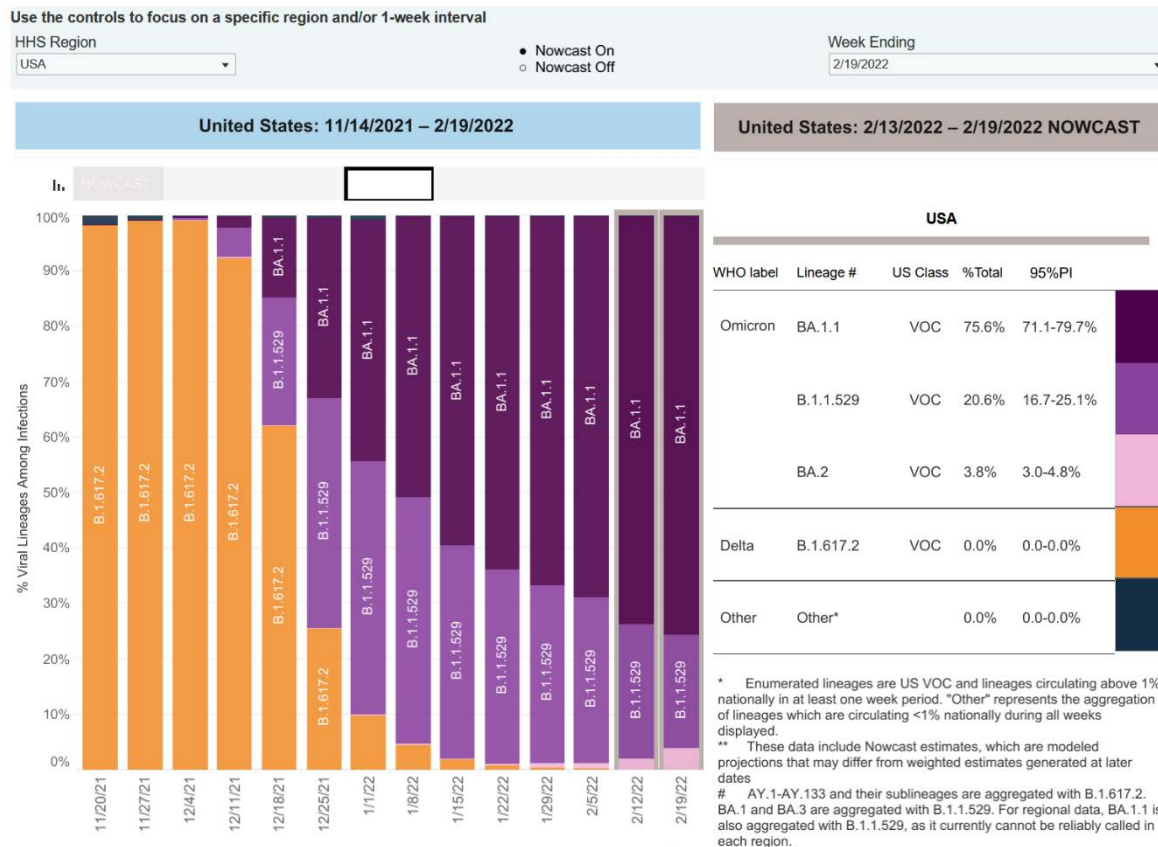
TOTAL DEATHS
939,654

+2,800 New Deaths

CDC | Data as of: February 24, 2022 5:52 PM ET. Posted: February 24, 2022 7:30 PM ET

Variant Proportions

<https://covid.cdc.gov/covid-data-tracker/#variant-proportions>



Health Department-Reported Cases of Multisystem Inflammatory Syndrome in Children (MIS-C) in the US

<https://covid.cdc.gov/covid-data-tracker/#mis-national-surveillance>

Last updated with cases reported to CDC on or before January 31, 2022*

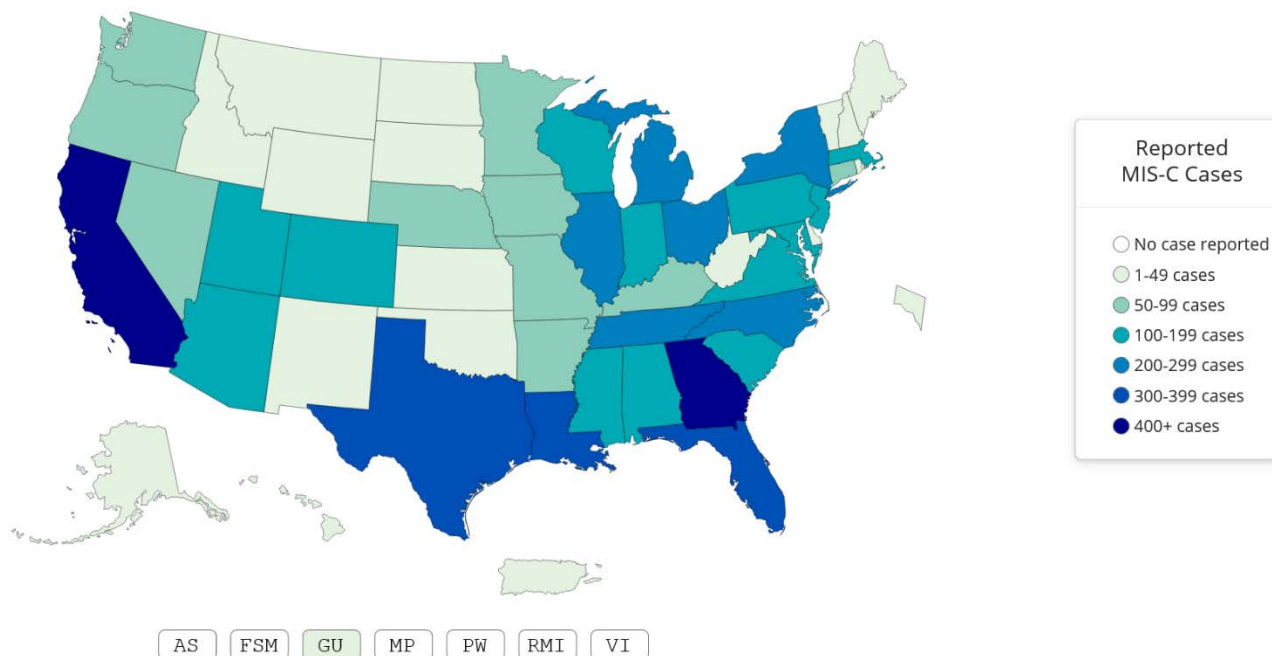
TOTAL MIS-C PATIENTS MEETING CASE DEFINITION*	TOTAL MIS-C DEATHS MEETING CASE DEFINITION
6,851	59

*Additional patients are under investigation. After review of additional clinical data, patients may be excluded if there are alternative diagnoses that explained their illness.

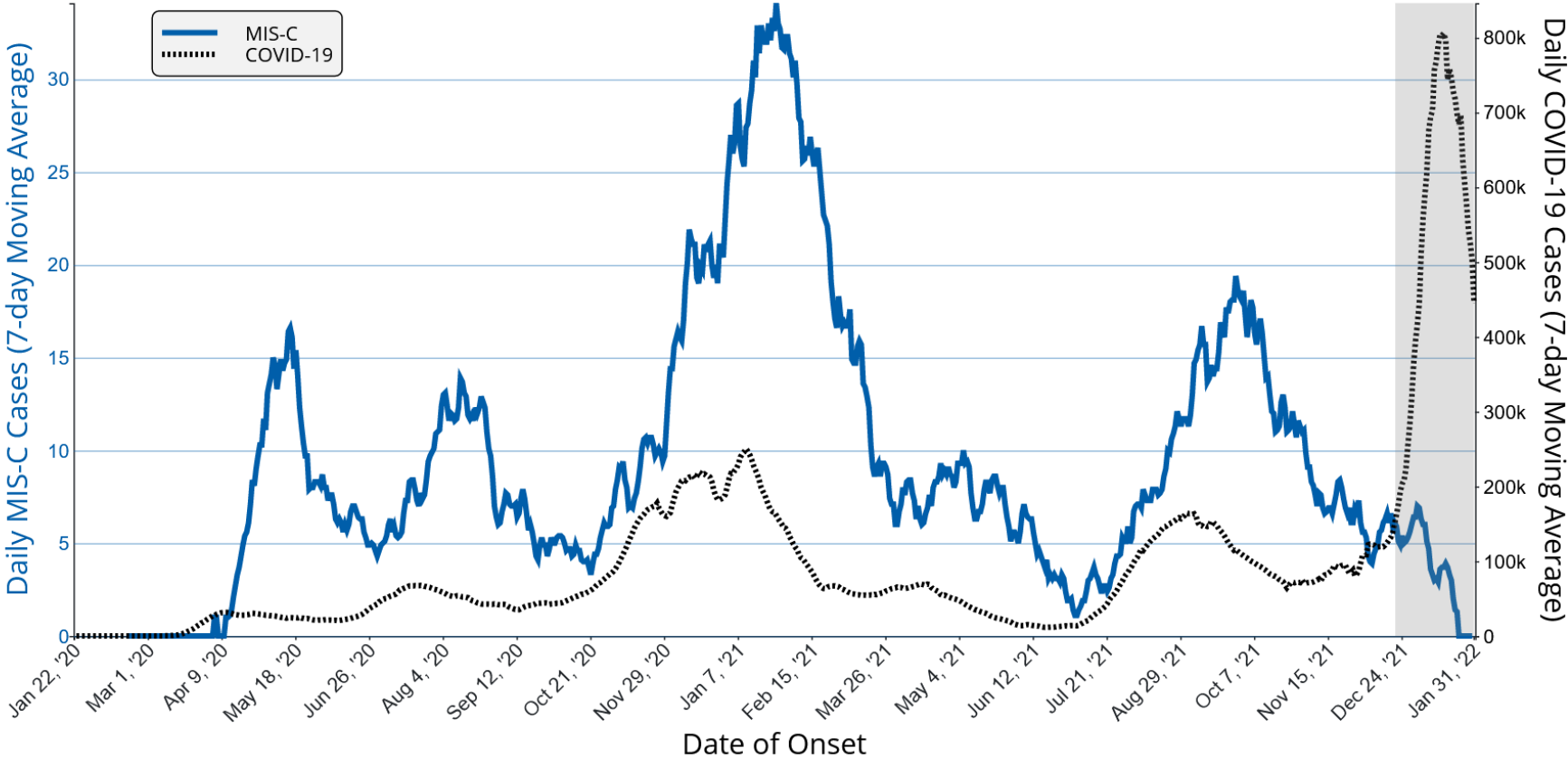
Summary

- The median age of patients with MIS-C was 9 years. Half of children with MIS-C were between the ages of 5 and 13 years.
- 59% of the reported patients with race/ethnicity information available occurred in children who are Hispanic/Latino (1,746 patients) or Black, Non-Hispanic (2,050 patients).
- 98% of patients had a positive test result for SARS CoV-2, the virus that causes COVID-19. The remaining 2% of patients had contact with someone with COVID-19.
- 60% of reported patients were male.

Reported MIS-C Case Ranges by Jurisdiction, on or before January 31, 2022*



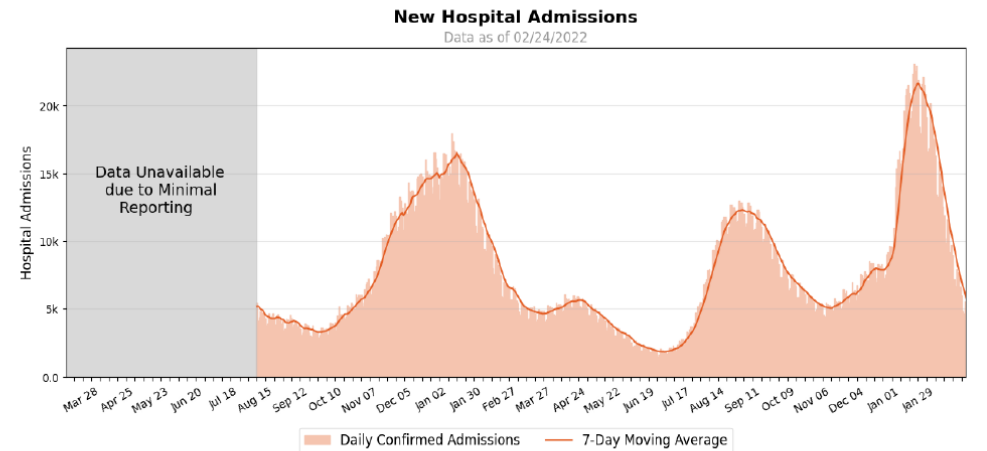
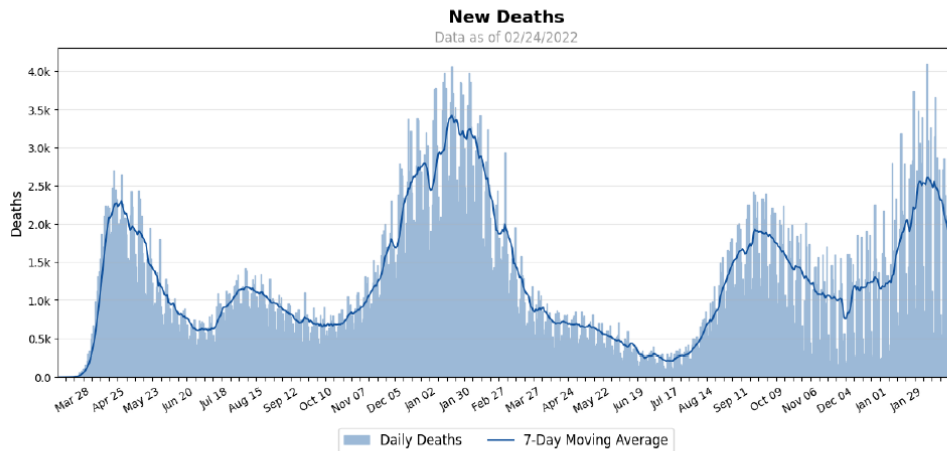
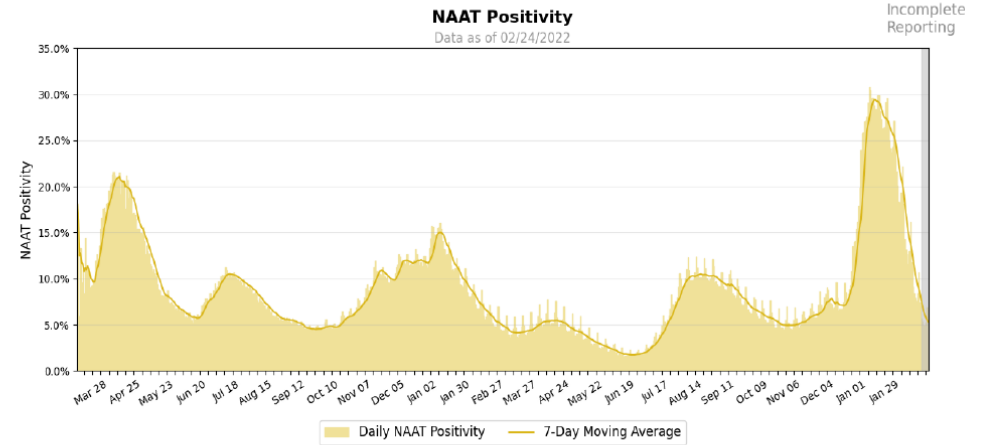
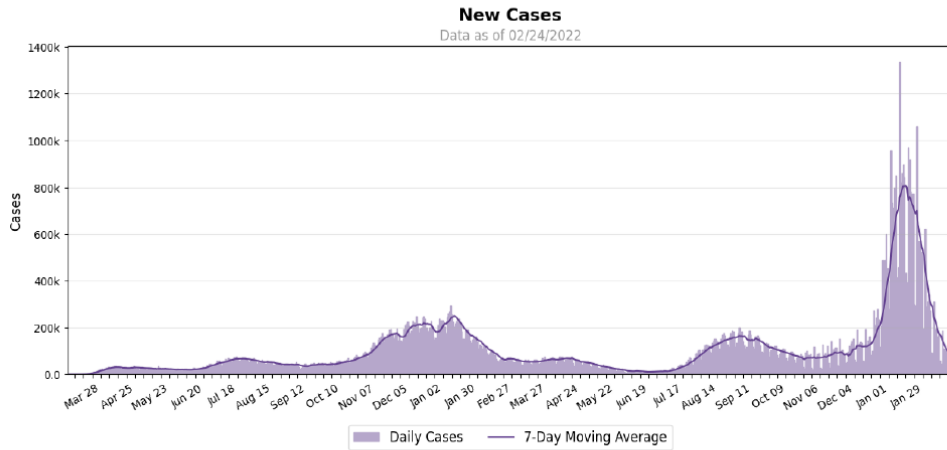
Daily MIS-C Cases and COVID-19 Cases Reported to CDC (7-Day Moving Average)



COVID-19 Community Profile Report 02-24-2022

<https://beta.healthdata.gov/Health/COVID-19-Community-Profile-Report/gqxm-d9w9>

NATIONAL TIME SERIES



Source: CDC state-reported data (cases and deaths), Unified Testing Dataset, Unified Hospital Dataset.

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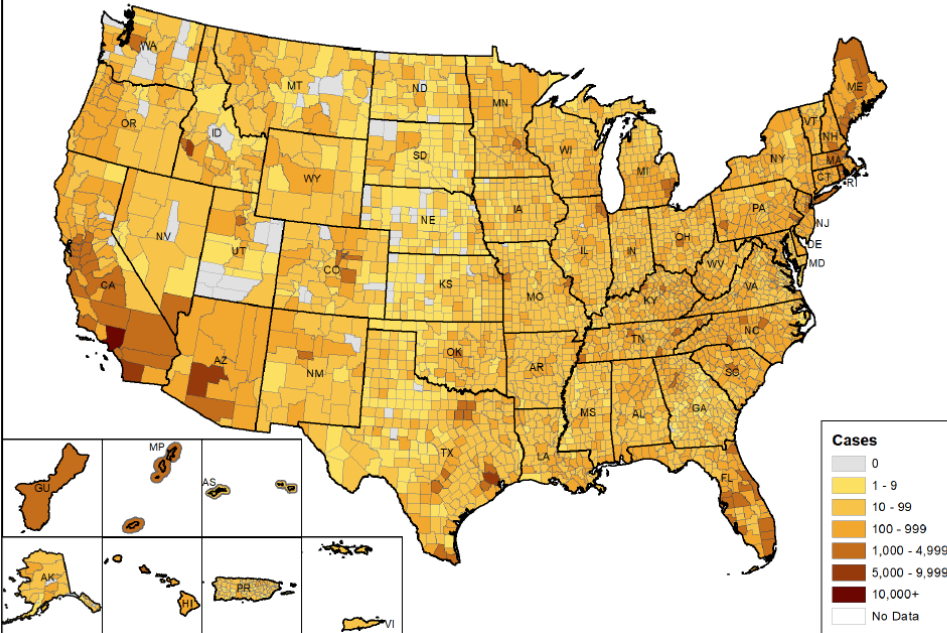
NUMBER OF NEW CASES AND DEATHS IN THE LAST 7 DAYS

Total Cumulative Cases: 78,595,529
New Cases in Last 7 Days: 526,458
Percent Change from Previous 7 Days: -37.7%

Total Cumulative Deaths: 939,654
New Deaths in Last 7 Days: 11,719
Percent Change from Previous 7 Days: -18.8%

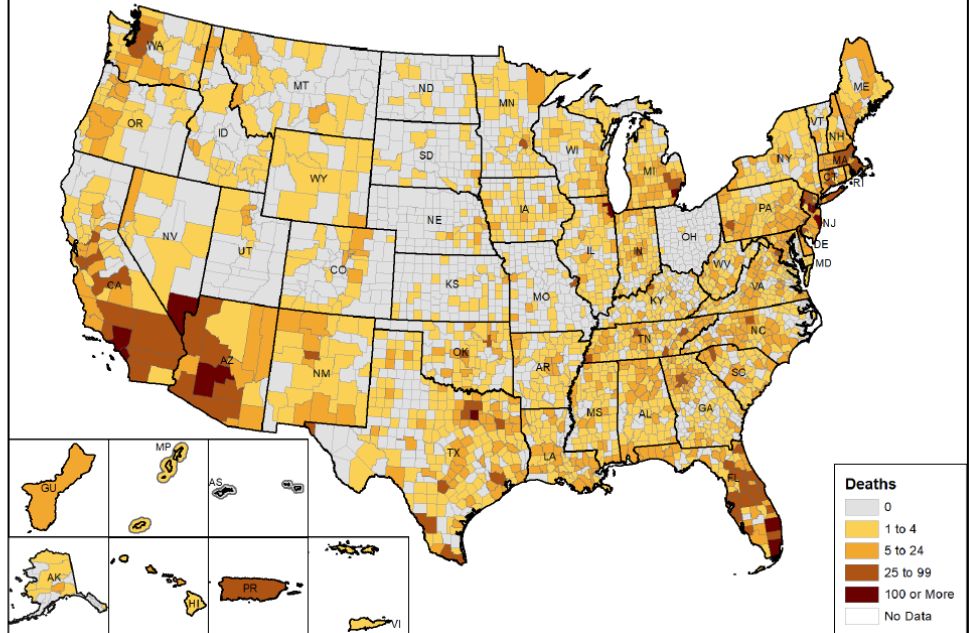
Date: 2/24/2022
 Source: CDC Aggregate
 County Data, CDC State-
 Reported Data (Territories)

Cases by County
 in the Week 17FEB2022-23FEB2022



Date: 2/24/2022
 Source: CDC Aggregate
 County Data, CDC State-
 Reported Data (Territories)

Deaths by County
 in the Week 17FEB2022-23FEB2022



Due to data delays, Washington county and state cases and deaths data has not been updated in the last week.

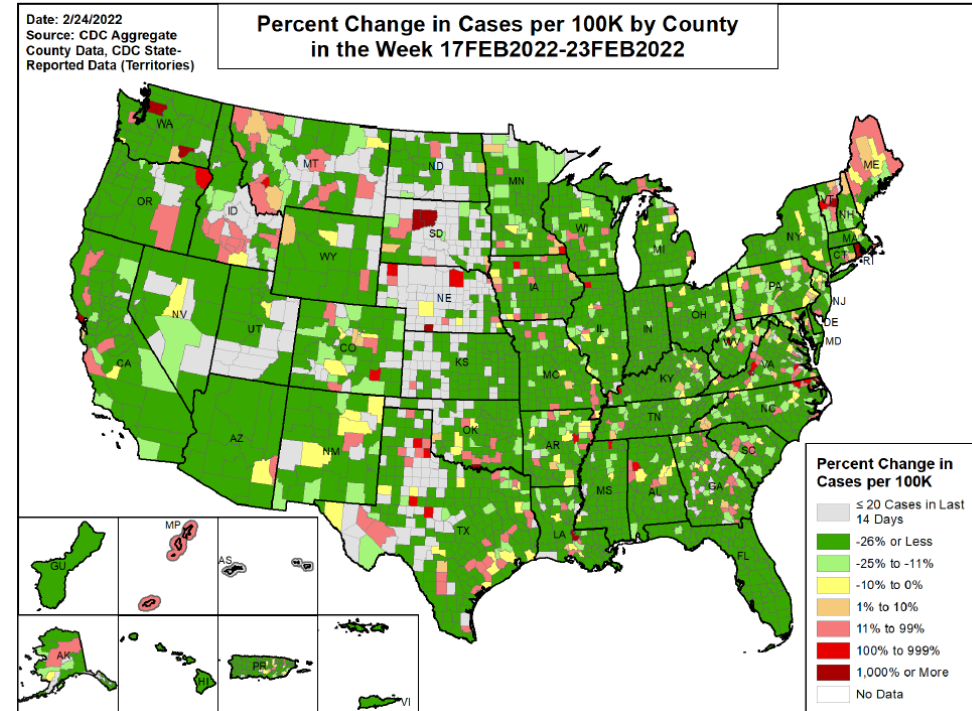
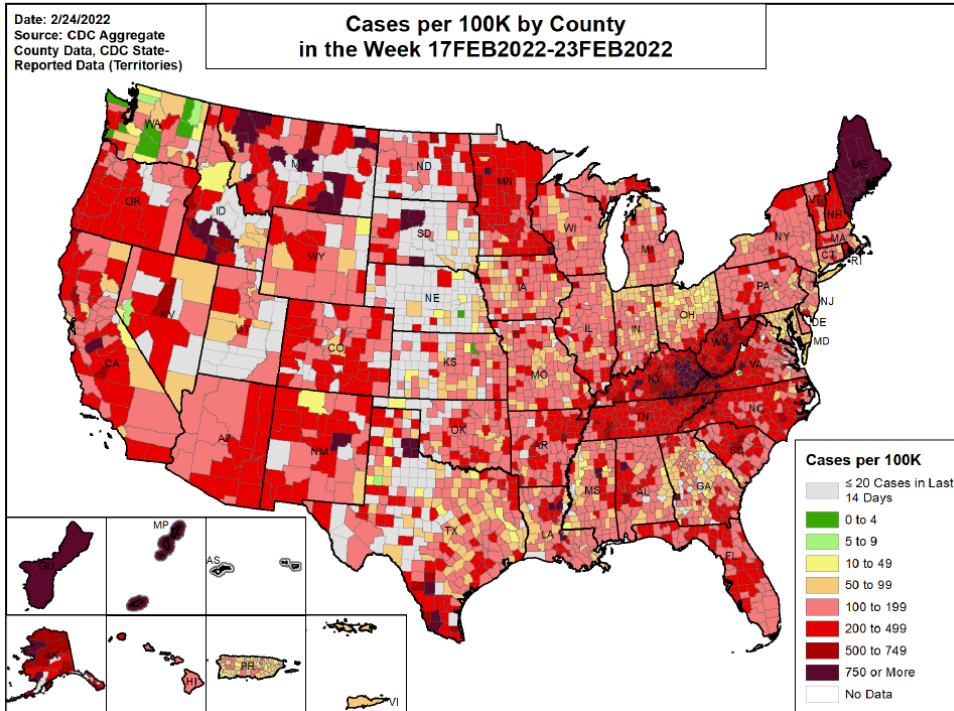
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CASE INCIDENCE IN LAST 7 DAYS AND COMPARISON TO THE PREVIOUS 7 DAYS

Incidence Rate in the Last 7 Days: 158.6 per 100,000

Percent Change from Previous 7 Days: -37.7%



Due to data delays, Washington county and state cases and deaths data has not been updated in the last week.

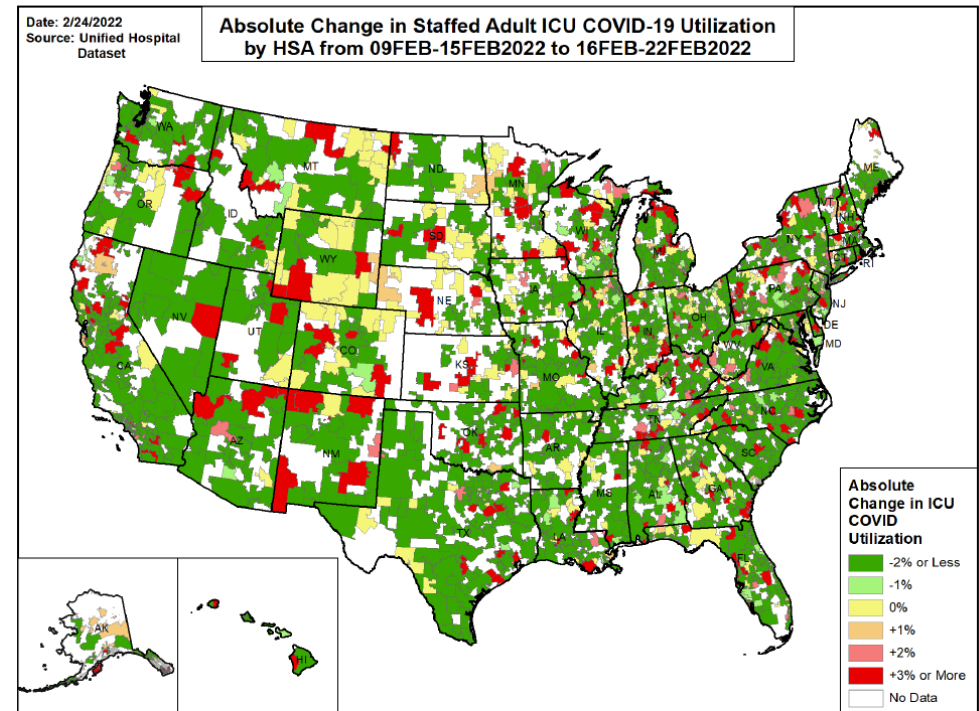
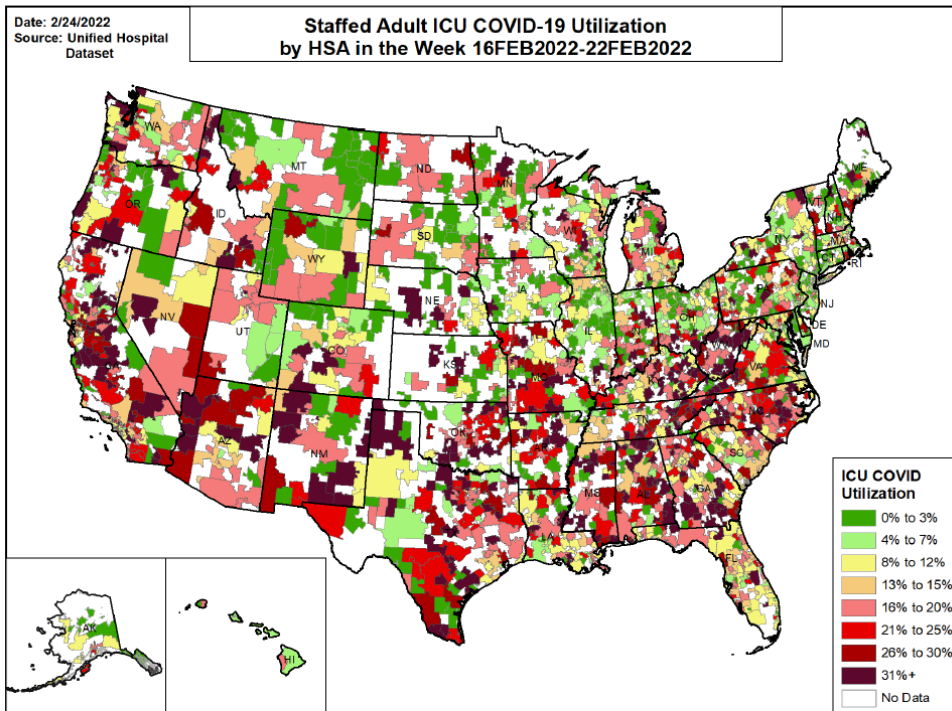
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STAFFED ADULT ICU COVID-19 UTILIZATION IN THE LAST 7 DAYS AND COMPARISON TO THE PREVIOUS 7 DAYS

Average Daily Adult ICU COVID-19 Patients over Last 7 Days:
11,333

Percent Change from Previous 7 Days: -26.3%



Source: Unified Hospital Dataset, excluding psychiatric, rehabilitation, and religious non-medical hospitals. Staffed adult ICU COVID-19 utilization indicates average percentage of staffed adult ICU beds occupied by confirmed COVID-19 patients within the given time period. HSA indicates Hospital Service Area. Hospitals are assigned to HSA based on zip code where known. In some areas, reports are aggregates of multiple facilities that cross HSA boundaries; in these cases, values are assigned based on the zip code for the aggregate. See Data Sources/Methods slides for additional details.

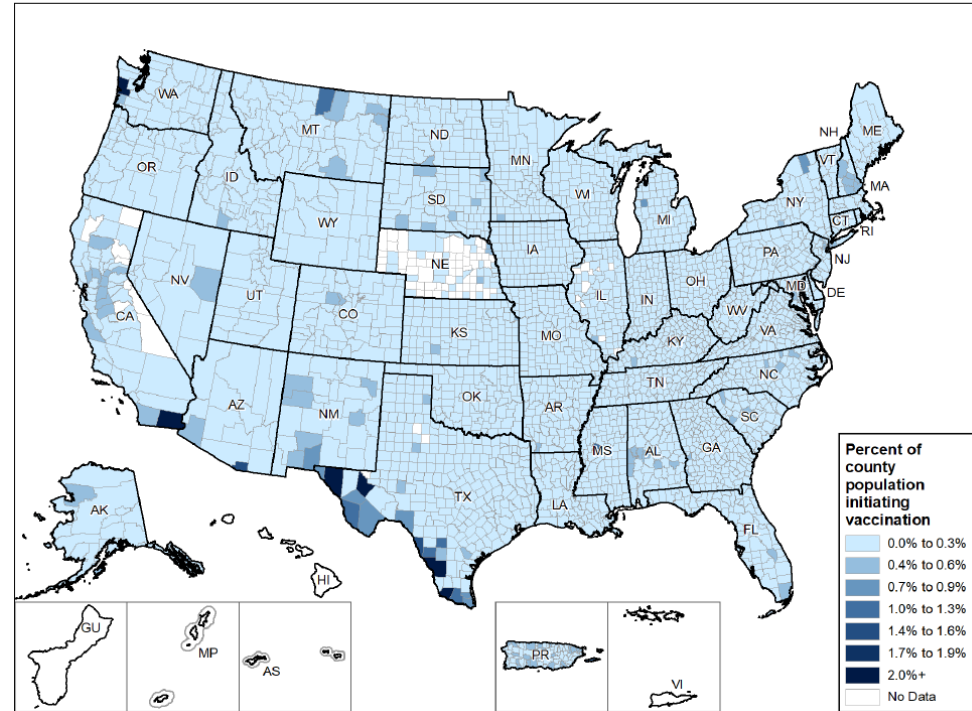
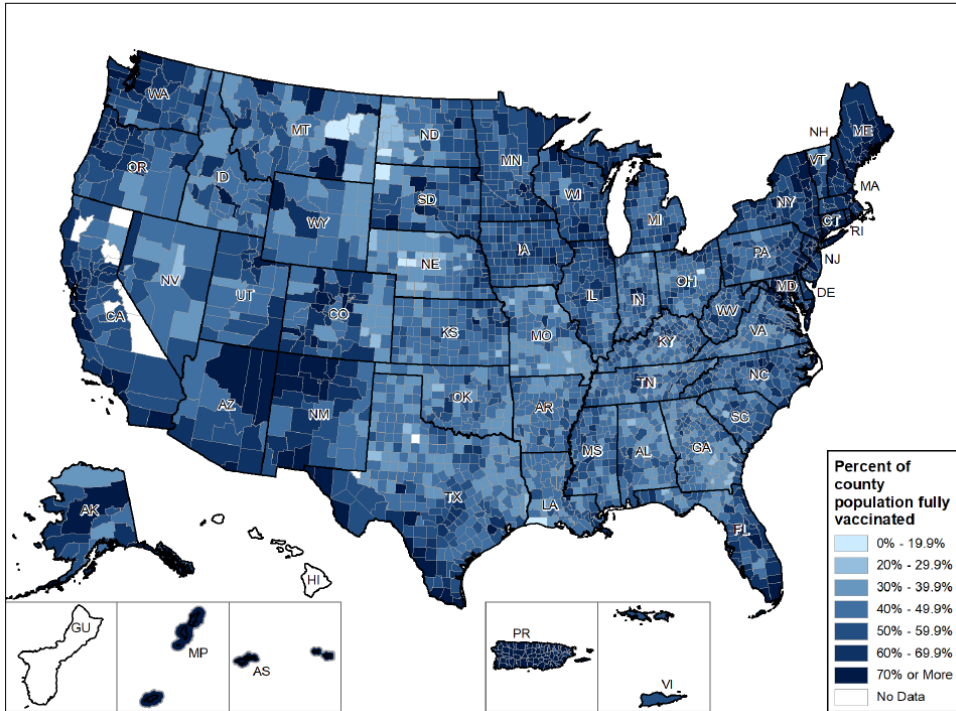
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VACCINATION RATES BY COUNTY

Percent of Population Fully Vaccinated: 64.8%
Percent of Population with at Least 1 Dose: 76.3%

Percent of Population Initiating Vaccination in the Last Week: 0.2%



Source: Unified COVID-19 Vaccine Dataset. Fully vaccinated indicates those who received the second dose of Pfizer-BioNTech or Moderna vaccines and those who received one dose of J&J/Janssen COVID-19 vaccine. Initiating vaccination indicates those who have received the first dose of the Pfizer-BioNTech or Moderna vaccines and those who have received a dose of the J&J/Janssen vaccine in the last week. Values reflect total by report date, not administered date. In instances where the number of people fully vaccinated is greater than those with at least one dose for a specific county, the county will have "no data" on the map of population initiating vaccination; see COVID Data Tracker for further information. The following states have $\leq 80\%$ completeness reporting vaccinations by county, which may result in underestimates of vaccination data for counties and CBSAs: VA (79%), VT (74%), HI (0%)

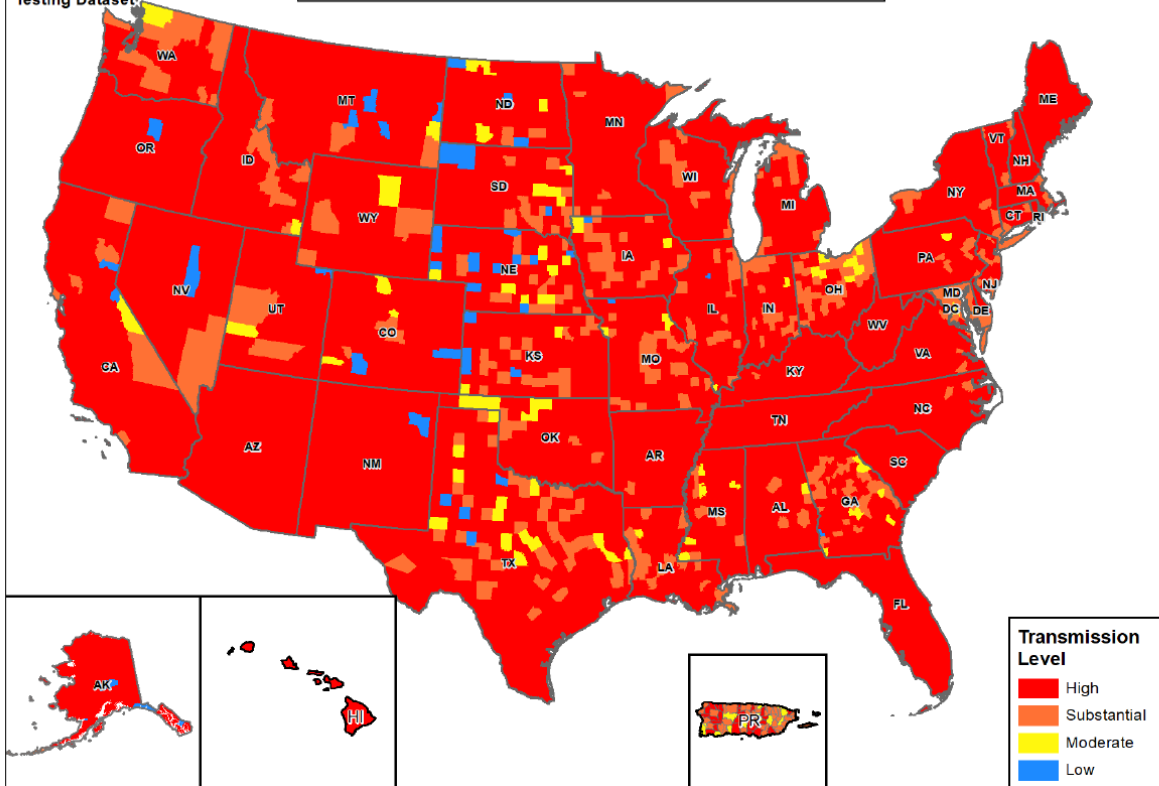
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COMMUNITY TRANSMISSION LEVEL

Date: 2/24/2022
 Source: CDC Aggregate
 County Data, Unified
 Testing Dataset

Community Transmission Level by County 23FEB2022



Source: CDC Aggregate County Dataset (cases), Unified Testing Dataset (tests)

Notes: Cases data from February 17-23, 2022, test positivity data from February 15-21, 2022. Combined Transmission Level is the higher threshold among cases and testing thresholds. See Data Sources/Methods slides for additional details.

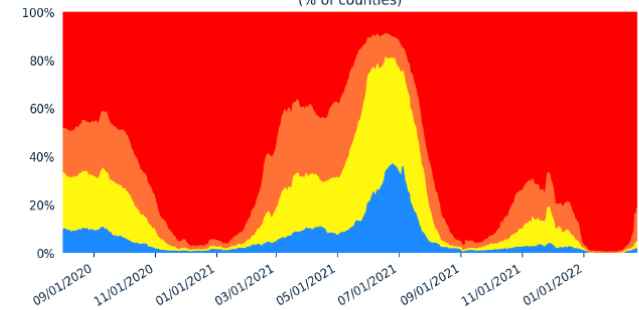
Counties by Community Transmission Indicator

Cases per 100k	0 to 9	10 to 49	50 to 99	100 +
# of counties (change)	77 (↑16)	149 (↑117)	586 (↑459)	2408 (↓592)
% of counties (change)	2.4% (↑0.5%)	4.6% (↑3.6%)	18.2% (↑14.3%)	74.8% (↓18.4%)
Test Positivity	0.0% to 4.9%	5.0% to 7.9%	8.0% to 9.9%	10.0% +
# of counties (change)	784 (↑481)	666 (↑313)	413 (↑109)	1357 (↓903)
% of counties (change)	24.3% (↑14.9%)	20.7% (↑9.7%)	12.8% (↑3.4%)	42.1% (↓28.0%)

Counties by Combined Transmission Level

Category	Low Transmission Blue	Moderate Transmission Yellow	Substantial Transmission Orange	High Transmission Red
# of counties (change)	48 (↑16)	96 (↑79)	449 (↑367)	2627 (↓462)
% of counties (change)	1.5% (↑0.5%)	3.0% (↑2.5%)	13.9% (↑11.4%)	81.6% (↓14.3%)
% of population (change)	0.0% (↓0.0%)	1.4% (↑1.0%)	21.3% (↑18.1%)	77.3% (↓19.1%)

Combined Transmission Levels Over Time
 (% of counties)



INITIAL PUBLIC RELEASE // SUBJECT TO CHANGE















COVID-19 By the Numbers

<https://www.cdc.gov/coronavirus/2019-ncov/cdcresponse/by-the-numbers.html>

COVID-19 RESPONSE BY THE NUMBERS As of February 22, 2022



Accessible www.cdc.gov/coronavirus/2019-ncov/cdcresponse/by-the-numbers.html

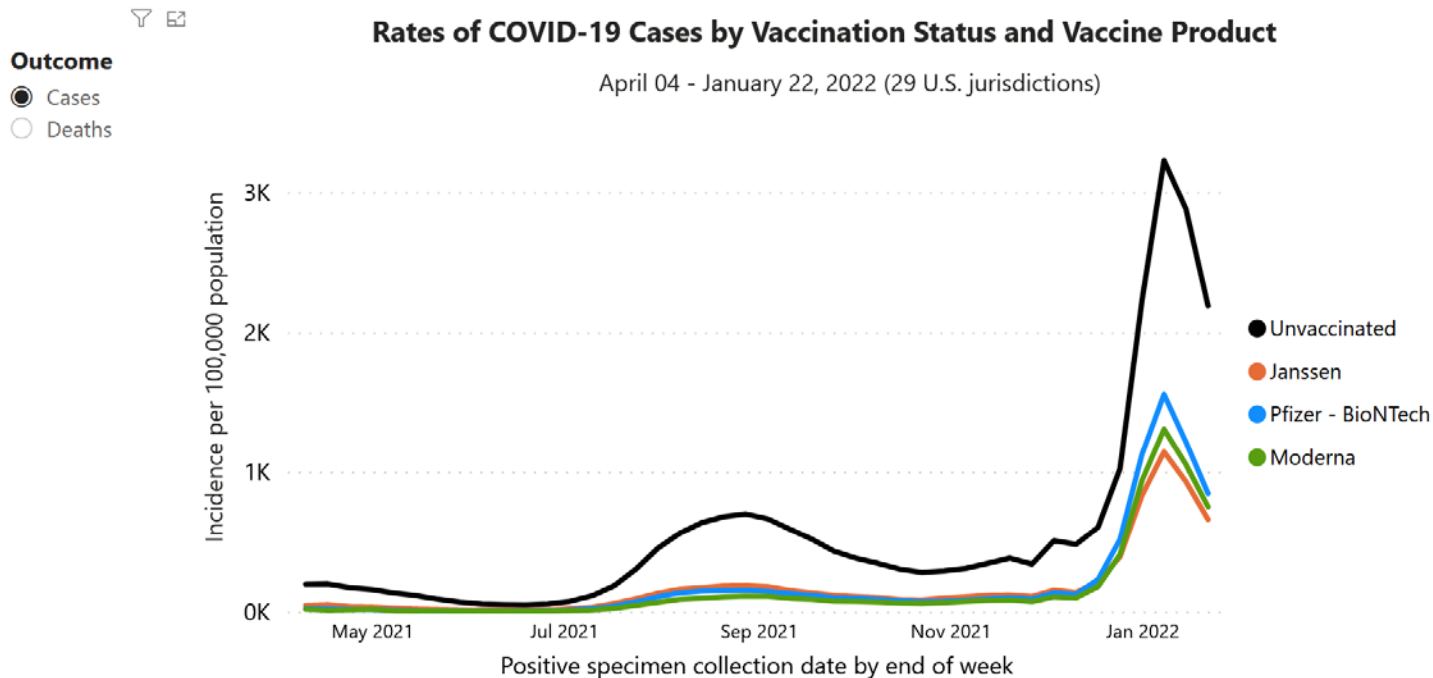
	10,000	CDC personnel supporting the outbreak response		60.49+ million	Times people have used CDC's online Coronavirus Self-Checker
	1,901	CDC deployers who have conducted 4,507 deployments to 357 cities across the United States and abroad		1.6+ million	Calls and emails to CDC-INFO
	414	COVID-19 studies published in CDC's Morbidity and Mortality Weekly Report (MMWR)		3.9+ billion	Times people have looked for information on CDC websites
	10,106	Documents providing information and guidance for government agencies, businesses, and the public		4.9+ billion	Social media impressions on 20,205 CDC response-related posts
	807+ million	COVID-19 tests conducted by public and private laboratories in the United States		100,939+	Inquiries from doctors, nurses, or other clinical staff and health departments received by CDC
	252+ million	People who have received at least one dose of a COVID-19 vaccine		214+ million	People who have been fully vaccinated with a COVID-19 vaccine

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

CS316565-A

Summary

- People who were unvaccinated had a greater risk of testing positive for COVID-19 and a greater risk of dying from COVID-19 than people who were fully vaccinated (see below for the most recent rates).
- Unvaccinated people in all age groups had higher case and death rates than fully vaccinated people in the same age groups.
- Case and death rates for people fully vaccinated with any of the three vaccine types (Moderna, Pfizer-BioNTech, Johnson & Johnson's Janssen) were much lower than for unvaccinated people.
- People who were fully vaccinated with an additional or booster dose had lower case rates compared with those without an additional or booster dose. Both of these groups had much lower risk of testing positive for COVID-19 and a lower risk of dying from COVID-19 compared with people who were unvaccinated.
 - People ages 65 and older had a larger overall benefit from receiving an additional or booster dose, compared with younger age groups.



Unvaccinated adults aged 18 years and older had:

2.4X <i>Risk of Testing Positive for COVID-...</i>	AND	14X <i>Risk of Dying from COVID-19</i>	in December, and
2.6X <i>Risk of Testing Positive for COVID-19</i>	in January,* compared to fully vaccinated adults.		

Source: CDC COVID-19 Response, Epidemiology Task Force, Surveillance & Analytics Team, Vaccine Breakthrough Unit

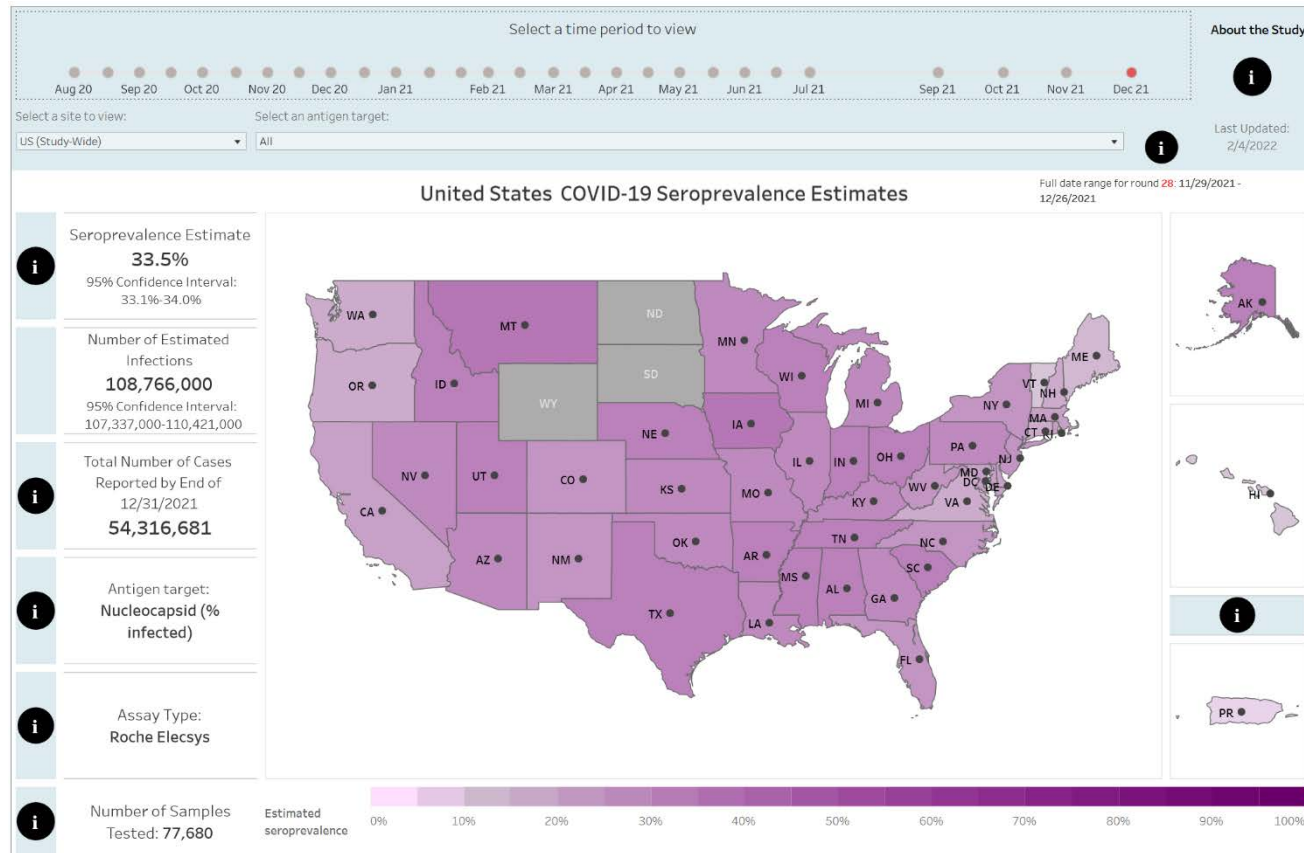
Nationwide COVID-19 Infection-Induced Antibody Seroprevalence (Commercial laboratories)

<https://covid.cdc.gov/covid-data-tracker/#national-lab>

The percentage of people with antibodies against a pathogen is known as seroprevalence. [This nationwide antibody seroprevalence survey](#) currently provides estimates of the percentage of people in the United States with resolving or past infection with SARS-CoV-2, the virus that causes COVID-19. These percentages do not include people who have been vaccinated against SARS-CoV-2 and have no history of infection. In contrast, the [nationwide blood donor seroprevalence survey](#) estimates the percentage of people ages 16 years and older that have developed antibodies against SARS-CoV-2 from vaccination or infection. Therefore, estimates differ between the two surveys. Note that in response to recent data, 23 jurisdictions in the nationwide antibody seroprevalence survey switched to an assay with increased sensitivity to detect past infection in September 2021, which could impact trends. This survey estimates the percentage of people that have detectable antibody indicating resolving or past infection with SARS-CoV-2, but not how much antibody is present. Therefore, the estimates do not necessarily indicate the percentage of people with sufficient antibody to protect against reinfection.

[Detailed methods and limitations of the survey have been published.](#)

View Footnotes and Additional Information



SARS-CoV-2 RNA Levels in Wastewater in the United States

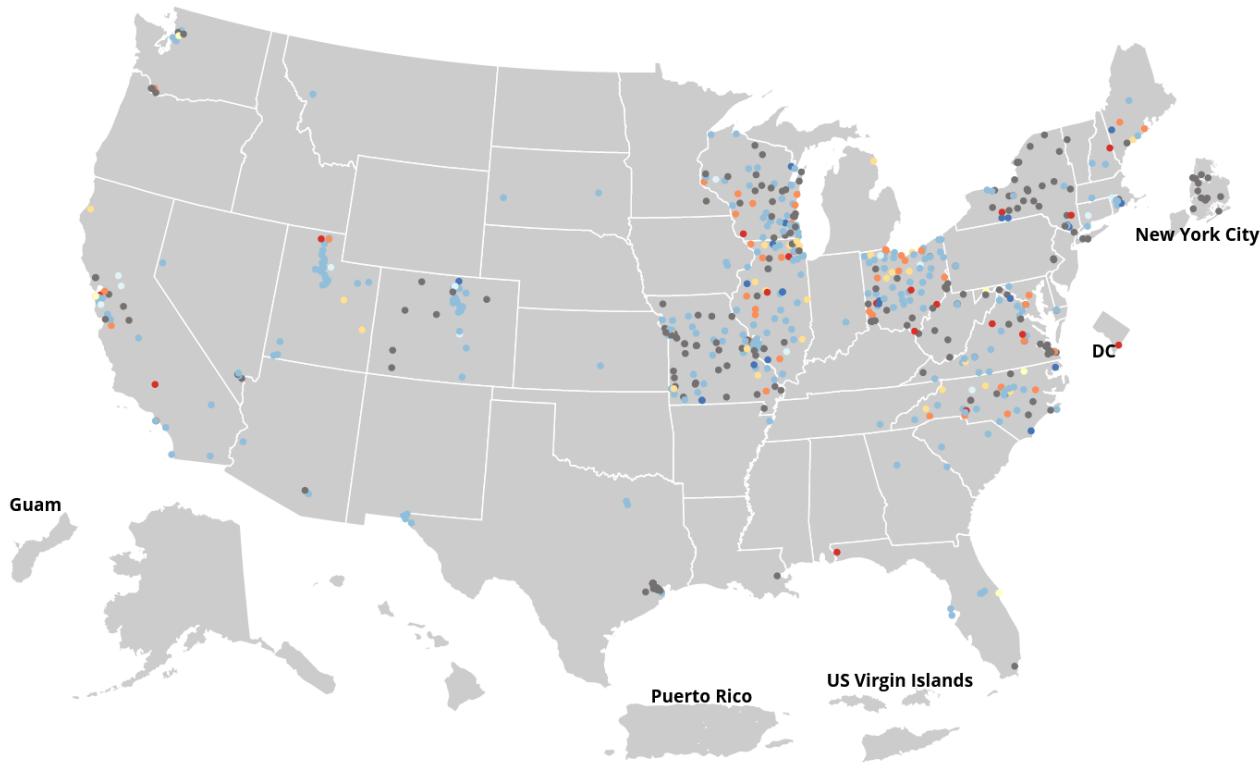
<https://covid.cdc.gov/covid-data-tracker/#wastewater-surveillance>

State or territory: County: [Reset Selections](#)

Time Period: Feb 07, 2022 – Feb 21, 2022

Major Cities On Major Cities Off

Map Metric:



SARS-CoV-2 RNA wastewater levels, United States:
15-day percent change by sewer shed

% change	Num. sites	% sites
-100%	24	6
-99% to -10%	273	65
-9% to 0%	17	4
1% to 9%	6	1
10% to 99%	34	8
100% to 999%	48	11
1000% or more	20	5

Total sites with current data: 422

[How is percent change calculated?](#)

Select legend categories to filter points on the map.

- -100%
- -99% to -10%
- -9% to 0%
- 1% to 9%
- 10% to 99%
- 100% to 999%
- 1000% or more
- No recent data

Dialysis COVID-19 Vaccination Data Dashboard

<https://covid.cdc.gov/covid-data-tracker/#vaccinations-dialysis-facilities>



COVID-19 Vaccination Coverage and Reporting among Patients in Dialysis Facilities, by State—United States



Partial vaccination: 1 dose of a 2 dose mRNA vaccination series. **Complete vaccination:** All doses required to be fully vaccinated (two doses of a two-dose mRNA series or one dose of a single-dose vaccine).

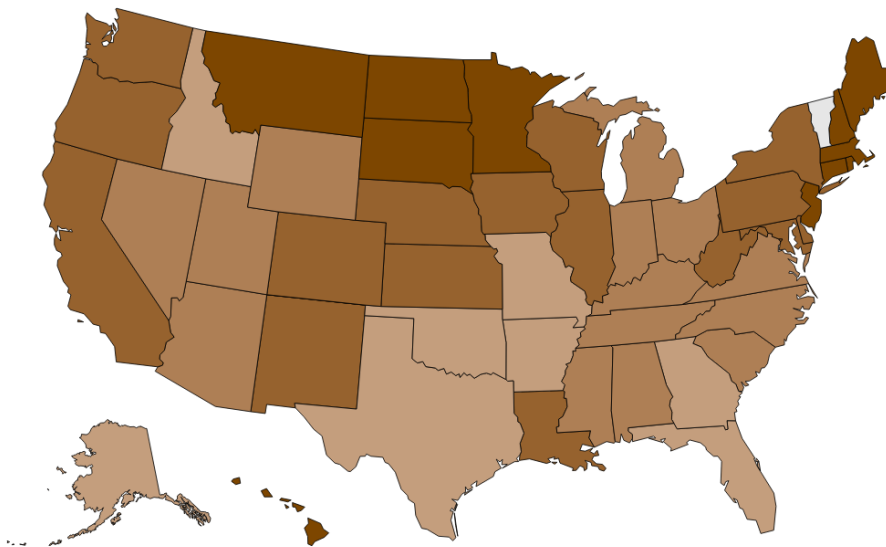
Select By Coverage

Complete

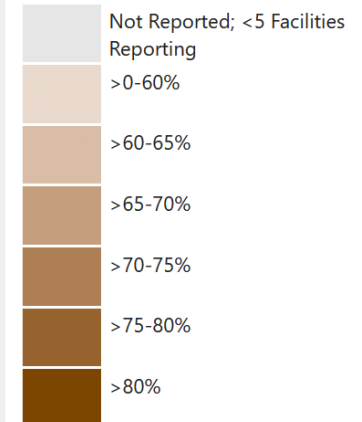
Select By Week

Latest Reporting Week

Percentage of Patients Receiving Complete Vaccination, 2/8/2022 - 2/15/2022



% of Patients Receiving Vaccination



All data can be modified from week-to-week by facilities. Exclusions: for best epidemiological understanding, data that appear inconsistent with surveillance protocols are excluded. Vaccination coverage is calculated as the total number of patients vaccinated divided by (the total number of patients minus the number of patients with medical contraindications or exclusions to vaccination) multiplied by 100. Differences in how each facility implements this COVID-19 vaccination data collection, including variation in which staff collect the data, may affect facility reporting patterns.

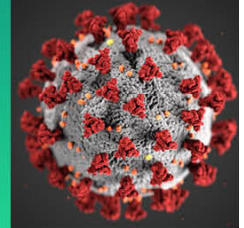
Data source: Centers for Disease Control and Prevention, National Healthcare Safety Network. **Accessibility:** [Right click on the graph area to show as table]

For more information: <https://www.cdc.gov/nhsn/dialysis/covid19/index.html>

Data as of 2/21/2022 5:30 AM

COVID-19 Science Update

COVID-19 Science Update



<https://www.cdc.gov/library/covid19/scienceupdates.html?Sort=Date%3A%3Adesc>

As of December 18, 2021, CDC has paused production of the weekly COVID-19 Science Update. We anticipate that production will resume in 2022.

[COVID-19 Science Update released: December 17, 2021 Edition 117](#)

[COVID-19 Science Update released: December 10, 2021 Edition 116](#)

CDC What's New & Updated

<https://www.cdc.gov/coronavirus/2019-ncov/whats-new-all.html>

- [2/25/22EARLY RELEASE: SARS-CoV-2 B.1.1.529 \(Omicron\) Variant Transmission Within Households — Four U.S. Jurisdictions, November 2021–February 2022](#)
- [2/25/22CDC Media Telebriefing: Update on COVID-19](#)
- [2/24/22COVID-19 by County](#)
- [2/24/22v-safe COVID-19 Vaccine Pregnancy Registry](#)
- [2/24/22Staffing Resources](#)
- [2/24/22Selected Adverse Events Reported after COVID-19 Vaccination](#)
- [2/24/22Requirement for Face Masks on Public Transportation Conveyances and at Transportation Hubs](#)
- [2/24/22How to Select, Wear, and Clean Your Mask](#)
- [2/24/22Coronavirus Disease 2019 \(COVID-19\)](#)
- [2/24/22Cases in the U.S.](#)
- [2/24/22Results from a Test-to-Release from Isolation Strategy Among Fully Vaccinated National Football League Players and Staff Members with COVID-19 — United States, December 14–19, 2021](#)
- [2/24/22Antigen Test Positivity After COVID-19 Isolation — Yukon-Kuskokwim Delta Region, Alaska, January–February 2022](#)
- [2/24/22Pediatric Emergency Department Visits Associated with Mental Health Conditions Before and During the COVID-19 Pandemic — United States, January 2019–January 2022](#)
- [2/24/22Pediatric Emergency Department Visits Before and During the COVID-19 Pandemic — United States, January 2019–January 2022](#)
- [2/24/22Overall US COVID-19 Vaccine Distribution and Administration Update as of Thu, 24 Feb 2022 06:00:00 EST](#)
- [2/23/22Archive of COVID-19 Vaccination Data Updates](#)
- [2/23/22COVID-19 County Check Tool: Understanding Community Transmission Levels in Your County](#)
- [2/23/22Social Media Toolkit : Variants](#)
- [2/23/22Families and COVID-19](#)
- [2/23/22Domestic Travel During COVID-19](#)
- [2/23/22Using Antibody Tests for COVID-19](#)

CDC Guidance

<https://www.cdc.gov/coronavirus/2019-ncov/communication/guidance-list.html?Sort=Date%3A%3Adesc>

[Prioritizing Case Investigation and Contact Tracing for COVID-19](#)

The page provides guidance to health departments regarding prioritization recommendations for contact tracing and case investigation. Date: 2/24/22

[Using Antibody Tests for COVID-19](#)

CDC has developed interim guidance for how healthcare providers, laboratories, and public health staff should use antibody tests. This guidance also has advice useful for people taking antibody tests, employers, healthcare workers, and people operating group residential facilities. Date: 2/23/22

[Operational Considerations for Routine Immunization Services during the COVID-19 pandemic in non-US Settings Focusing on Low- and Middle-Income Countries](#)

Learn COVID-19 operational considerations to implement immunization services in non-US countries with low or middle incomes. Date: 2/21/22

[Considerations for Case Investigation and Contact Tracing in K-12 Schools and Institutions of Higher Education \(IHEs\)](#)

Learn what administrators of K-12 schools and institutions of higher education should know about COVID-19 case investigation and contact tracing. Date: 2/17/22

[Interim Guidance on Developing a COVID-19 Case Investigation & Contact Tracing Plan: Overview](#)

Background on case investigation and contact tracing. Also presents key considerations for health departments developing an implementation plan. Date: 2/17/22

[Interim Guidance on Management of Coronavirus Disease 2019 \(COVID-19\) in Correctional and Detention Facilities](#)

COVID-19 guidance for correctional facilities and detention centers to ensure protection of incarcerated and detained persons, staff, and visitors. Date: 2/14/22

[Interim Considerations: Preparing for the Potential Management of Anaphylaxis after COVID-19 Vaccination](#)

Interim considerations for preparing for the initial assessment and management of anaphylaxis following COVID-19 vaccination. Date: 2/10/22

[Interim Guidance for SARS-CoV-2 Testing in Homeless Shelters and Encampments](#)

Find guidance and considerations for SARS-CoV-2 testing in homeless encampments and homeless shelters, including the types of tests to consider. Date: 2/9/22

[Contact Tracing for COVID-19](#)

This section provides steps and consideration that jurisdictions can use to develop a protocol for the tracing of close contacts. Date: 2/9/22



State Data

<https://covid19.ca.gov/>

The SMARTER Plan is the next phase of California's COVID-19 response

<https://covid19.ca.gov/smarter/>

What SMARTER stands for

We're using the lessons of the last two years to prepare for future COVID-19 surges or variants.

SMARTER stands for:

- **S**hots – Vaccines are the most powerful weapon against hospitalization and serious illness.
- **M**asks – Properly worn masks with good filtration help slow the spread of COVID-19 or other respiratory viruses.
- **A**wareness – We will continue to stay aware of how COVID-19 is spreading, evolving variants, communicate clearly how people should protect themselves, and coordinate our state and local government response.
- **R**eadiness – COVID-19 is not going away and we need to be ready with the tools, resources and supplies we will need to quickly respond and keep public health and the healthcare system well prepared.
- **T**esting – Getting the right type of tests—PCR or antigen—to where they are needed most. Testing will help California minimize the spread of COVID-19.
- **E**ducation – California will continue to work to keep schools open and children safely in classrooms for in-person instruction.
- **R**x – Evolving and improving treatments will become increasingly available and critical as a tool to save lives.

The SMARTER Plan is not just for COVID-19. We can use these strategies and systems for future emergencies. We'll improve the SMARTER Plan as we learn what works.

Tracking COVID-19

<https://update.covid19.ca.gov/#top>

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/ncov2019.aspx#>

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/CovidDataAndTools.aspx>

California Healthy Places Index

<https://covid19.healthyplacesindex.org/>

<https://map.healthyplacesindex.org/>

CDPH Statewide Guidance

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Guidance.aspx>

<https://schools.covid19.ca.gov/>



Office of Governor
GAVIN NEWSOM

Press Releases, Executive Orders,
Media Advisories, and Proclamations.

<https://www.gov.ca.gov/newsroom/>

How we'll measure success

We've set goals as part of the SMARTER Plan.

Shots	Ability to administer at least 200,000 vaccines per day on top of existing pharmacy and provider infrastructure
Masks	Maintain a stockpile of 75 million high quality masks and the ability to distribute them as needed
Awareness	Maintain ability to promote vaccination, masking, and other mitigation measures in all 58 counties . Support engagement with at least 150 community based organizations
Readiness	Maintain wastewater surveillance in all regions and enhance respiratory surveillance in the healthcare system while continuing to sequence at least 10% of positive COVID-19 test specimens. Ability to add 3,000 clinical staff within 2 – 3 weeks of need and across various healthcare facility types
Testing	Maintain commercial and local public health capacity statewide to perform at least 500,000 tests per day (PCR and antigen)
Education	Expand school-based vaccination sites by 25% as eligibility expands
Rx	Ensure local entities can order effective therapeutics within 48 hours

Data models

<https://covid19.ca.gov/data-and-tools/>

Cal/OSHA

<https://www.dir.ca.gov/dosh/>

<https://www.dir.ca.gov/dosh/COVID19citations.html>

<https://www.dir.ca.gov/oshab/oshab.html>

Vaccines

<https://covid19.ca.gov/vaccines/>

<https://myturn.ca.gov/>

News Releases

<https://www.cdph.ca.gov/Programs/OPA/Pages/News-Releases-2021.aspx>

California COVID-19 By the Numbers

FEBRUARY 25, 2022



VACCINES

50,460

Daily Average

83.0%

Of Population Vaccinated

71,427,115

Total Administered



TESTS

4.0%

Test Positivity



HOSPITALIZATIONS

4,914

Total

960

In ICU



CASES

10,314

Daily Average

23.6

New Cases
(Per 100k)



DEATHS

186

Daily Average

0.4

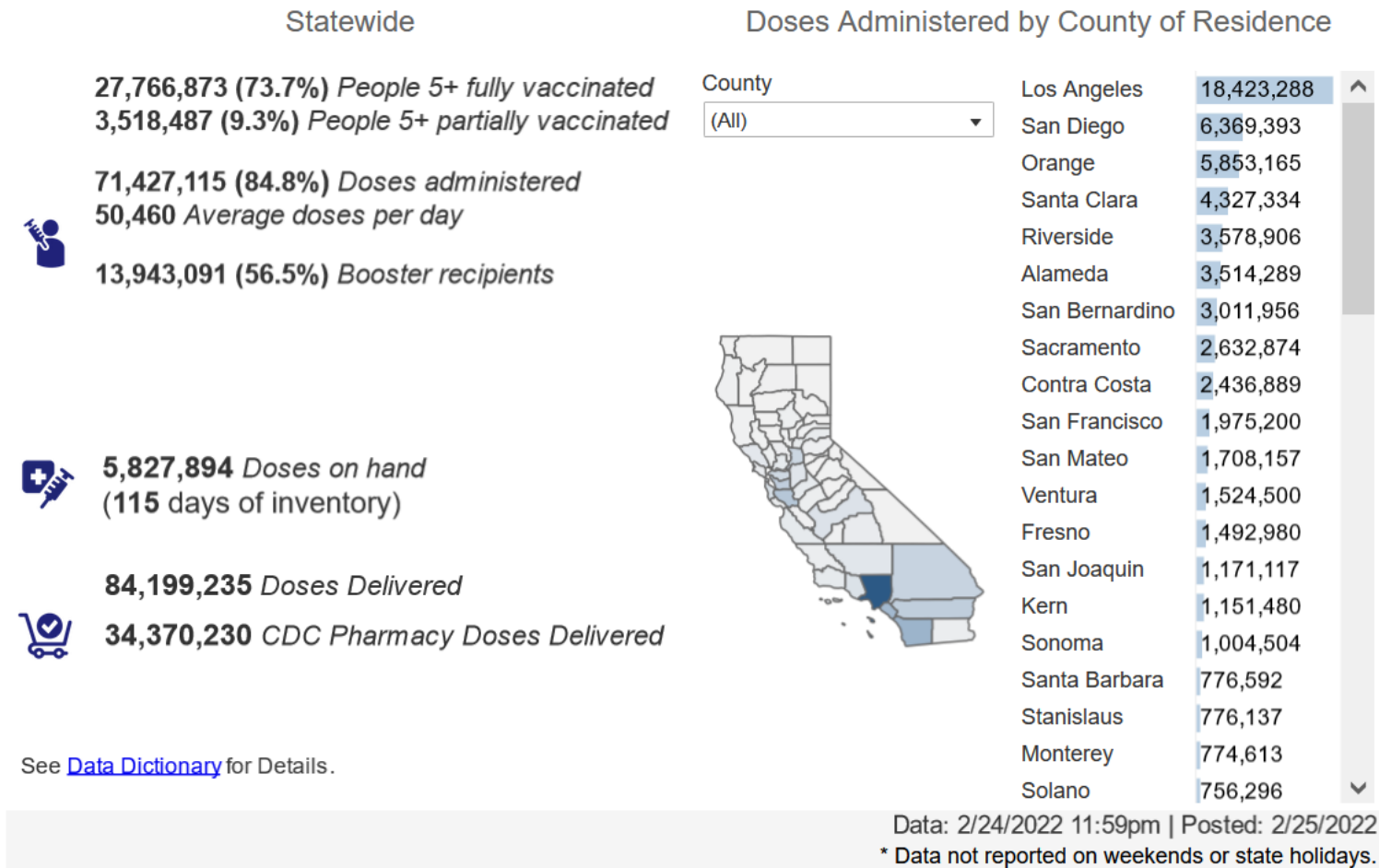
New Deaths
(Per 100k)

Vaccinations administered in California, by county of residence.

<https://covid19.ca.gov/vaccination-progress-data/>

Statewide vaccination data

This chart shows all vaccinations administered in California, by county of residence.



Regional ICU Capacity

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Regional-ICU-Capacity.aspx>

Regional ICU Capacity (Data as of 2/24/2022)

Region	% of Staffed Adult ICU Beds Available	% COVID+ in Adult ICU Beds	Number of Consecutive Days Under 10 % *	Date Health Order Effective	Date Health Order Set to Expire **
California Statewide	23.0	17.7	--	--	--
Bay Area	21.0	16.3	--	--	--
Greater Sacramento	20.9	17.9	--	--	--
Northern California	30.6	20.2	--	--	--
San Joaquin Valley	18.3	29.5	--	--	--
Southern California	24.4	16.2	--	--	--

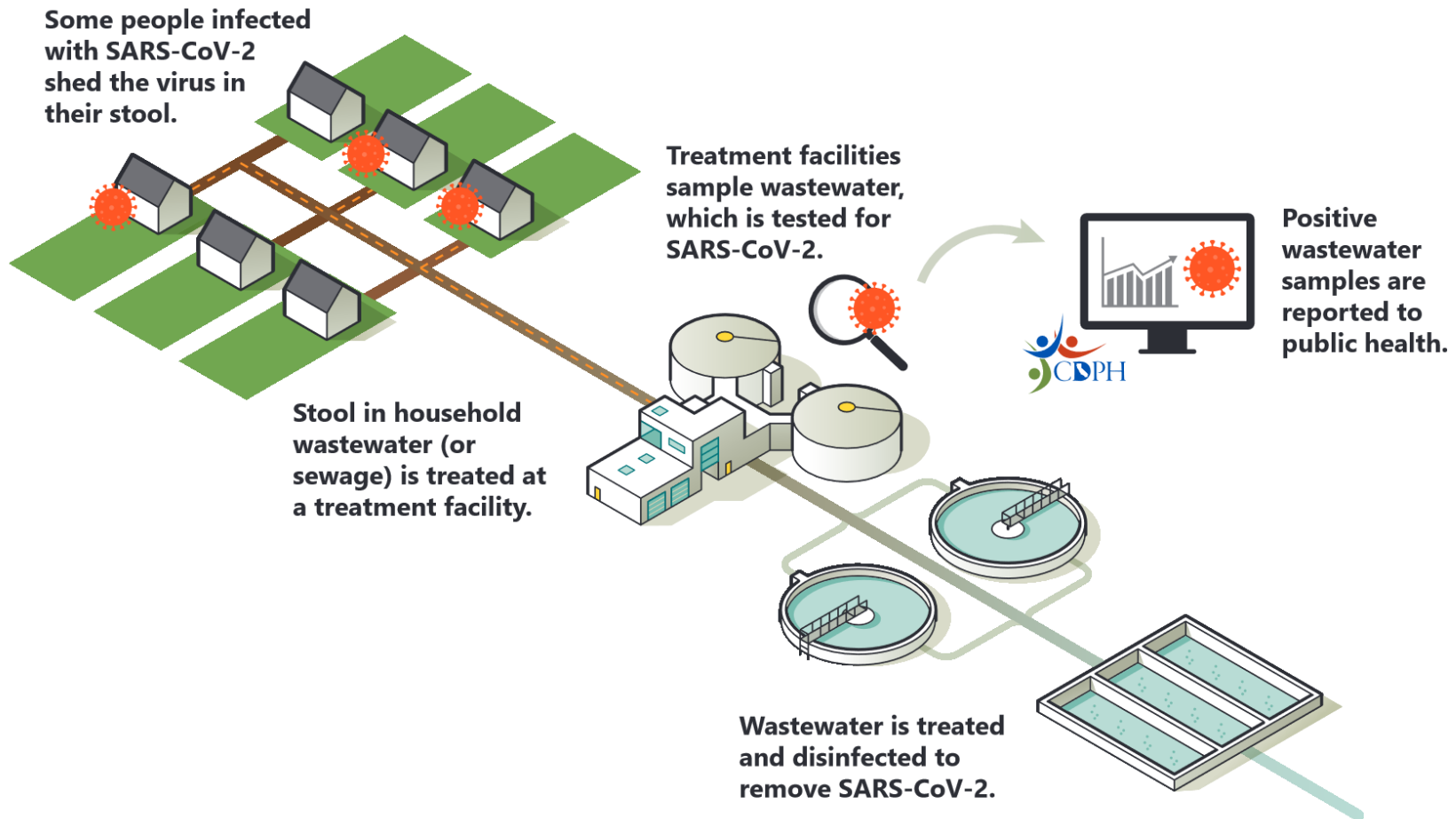
* Must be under 10% for 3 consecutive days to trigger Health Order.

** The region will be reevaluated seven days from the date the Health Order was triggered.

COVID-19 Wastewater Surveillance

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Wastewater-Surveillance.aspx>

Looking for SARS-CoV-2 in wastewater can help public health track the burden of COVID-19 in certain areas

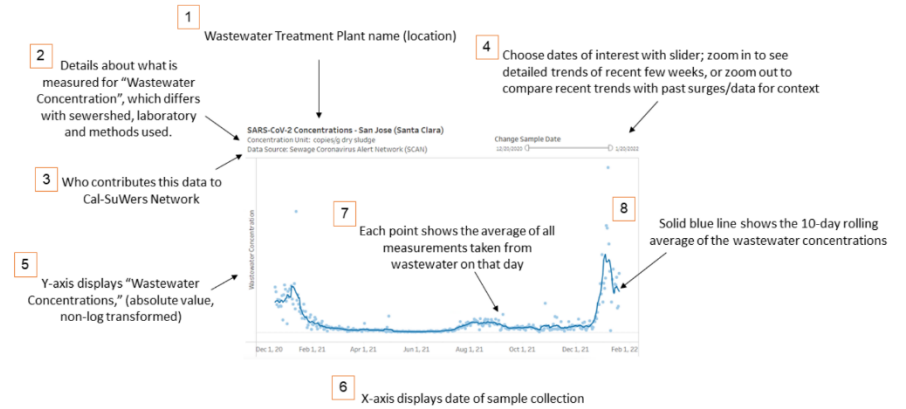


California Surveillance of Wastewater Systems (Cal-SuWers)

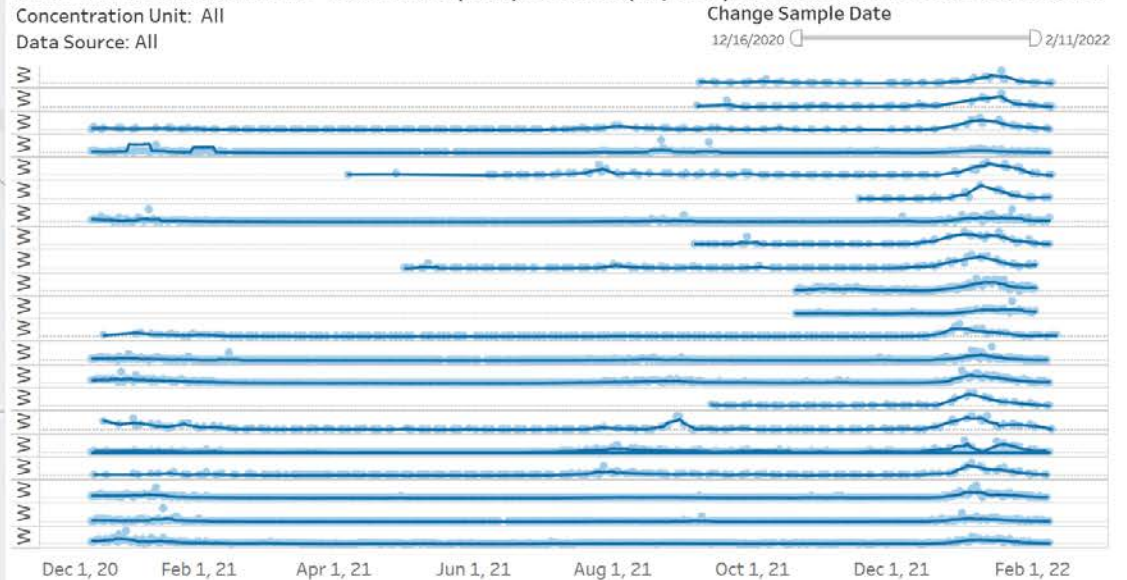
Click sewershed to view data



None



SARS-CoV-2 Concentrations - Bakersfield (Kern), Calexico (Imperial), Central Contra Costa and 18 more



← Undo → Redo ↶ Revert ↻ Refresh ⏸ Pause

Metrics Share Download Full Screen



Riverside County Data

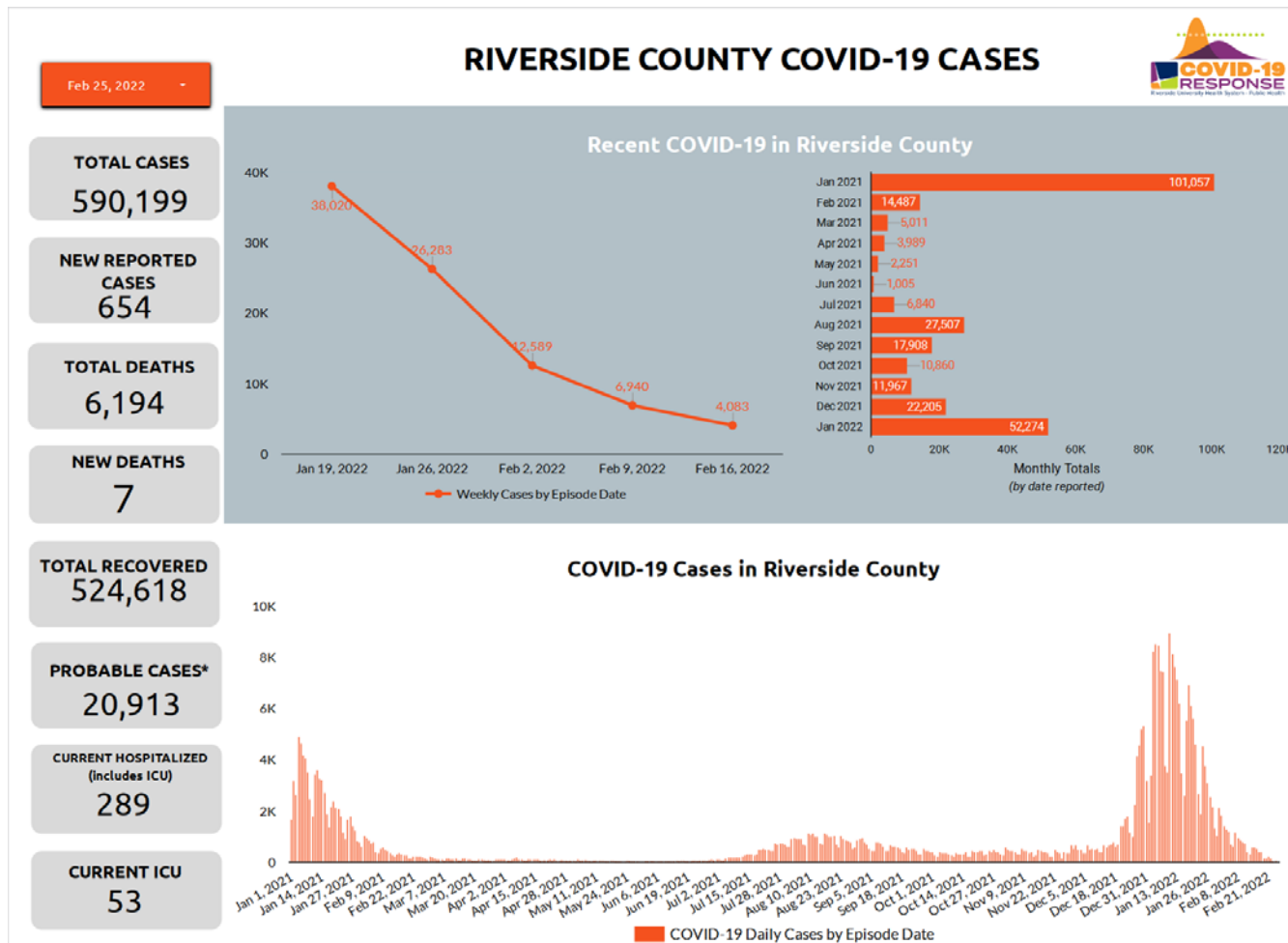
<https://www.rivcoph.org/coronavirus>

Dashboard -Click [here](#) for more detailed city/community data and reports

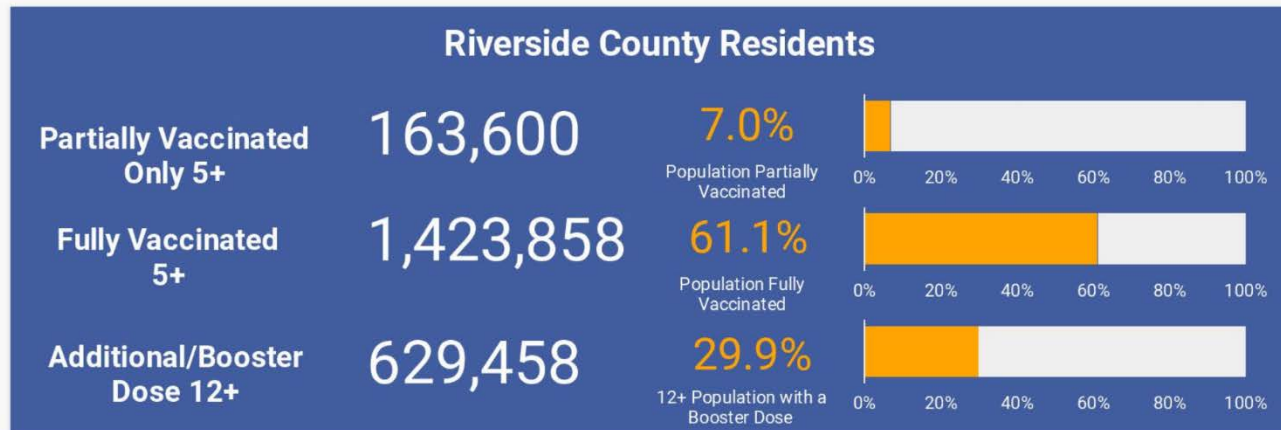
Confirmed 590,199 (+654)	Currently Hospitalized 289 Includes 53 in ICU	Deaths 6,194 (+7)	Recovered 524,618 (+8,803)	Zip Code & Community Data here
Daily Case Rate / 100k 22.2 (7-Day Avg & 7-Day Lag)	Positivity 8.4% (7-Day Avg & 7-Day Lag)	Daily Test Rate / 100k 388.7 (7-Day Avg & 7-Day Lag)		

RIVERSIDE COUNTY DAILY COVID-19 REPORT

<https://www.rivcoph.org/Portals/0/Documents/CoronaVirus/Reports/DailyEpidemiologySummary.pdf?x=1645825625186>



OPERATION RIVCO SHIELD
RIVERSIDE COUNTY COVID-19 VACCINE UPDATE
 February 25, 2022
(Data as of 02/24/2022)



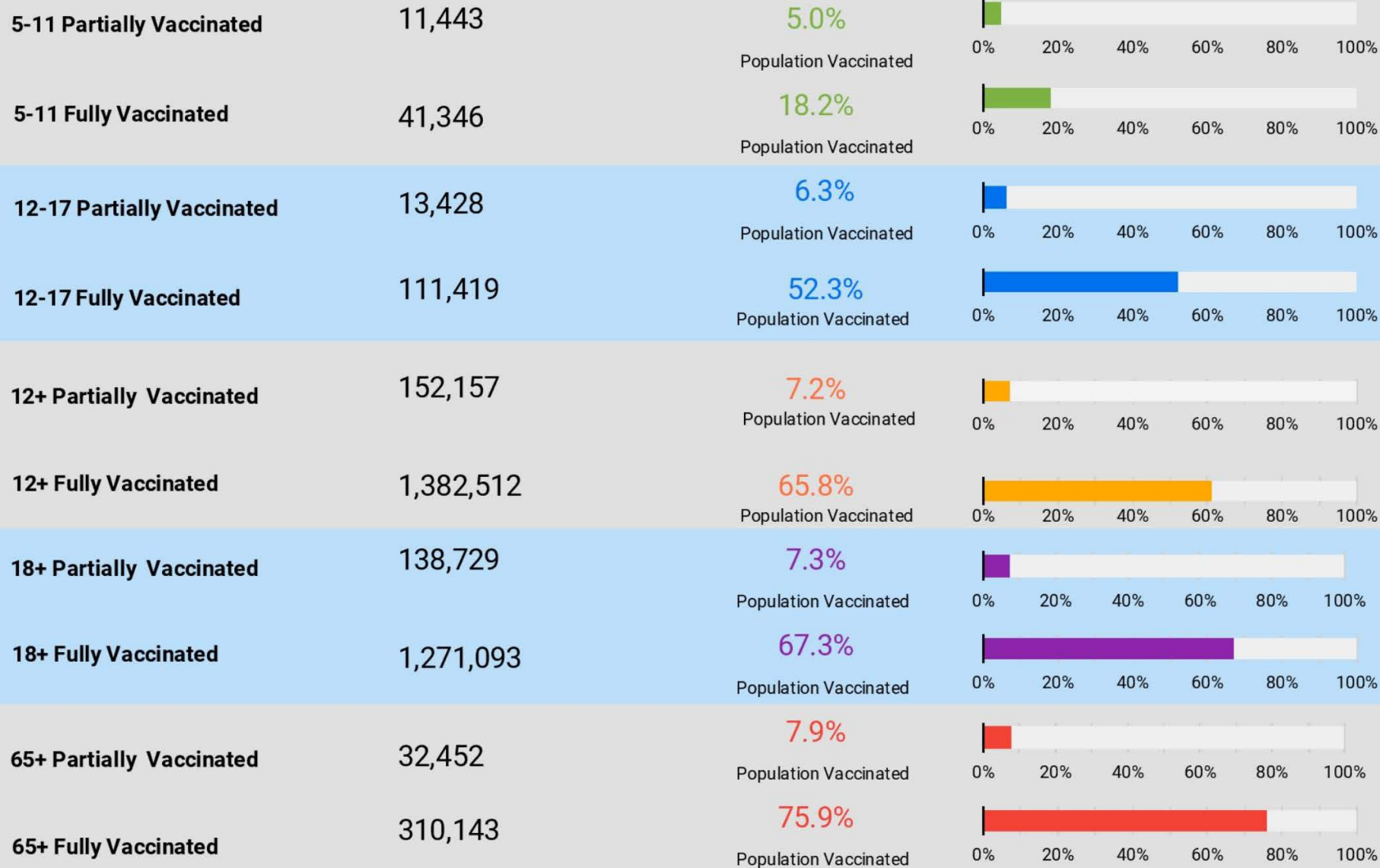
- CVS, Kaiser Permanente, and other multi-county entities and federal vaccine program providers are not counted in our doses received but are counted in doses administered.
- Total received includes vaccine doses that have been shipped but may not have arrived.
- Total administered includes Riverside County residents vaccinated out of the county and out of county residents vaccinated in Riverside County.
- Data are derived from numerous sources and should be interpreted with caution.
- California Department of Finance. Demographic Research Unit. Report P-3: Population Projections, California, 2010-2060 (Baseline 2019 Population Projections; Vintage 2020 Release). Sacramento: California. July 2021.



OPERATION RIVCO SHIELD

RIVERSIDE COUNTY COVID-19 VACCINE UPDATE

Percent Riverside County Population Vaccinated



RCCD COVID-19 Dashboard

<https://www.rccd.edu/return/Pages/Cases.aspx>

2/18/2022

RIVCO/ CA Updated

2/18/2022

RCCD Cases Updated

31,812

RCCD COVID Test To...

1832

RCCD Positives

-2.4%

RCCD vs Ca Rate Dif

-5.4%

RCCD vs Riv County Rate Dif



RCCD COVID-19 Positivity Rate

RCCD data is derived from Cleared4 and California and Riverside County Data is derived from California Health and Human Services Open Data Portal

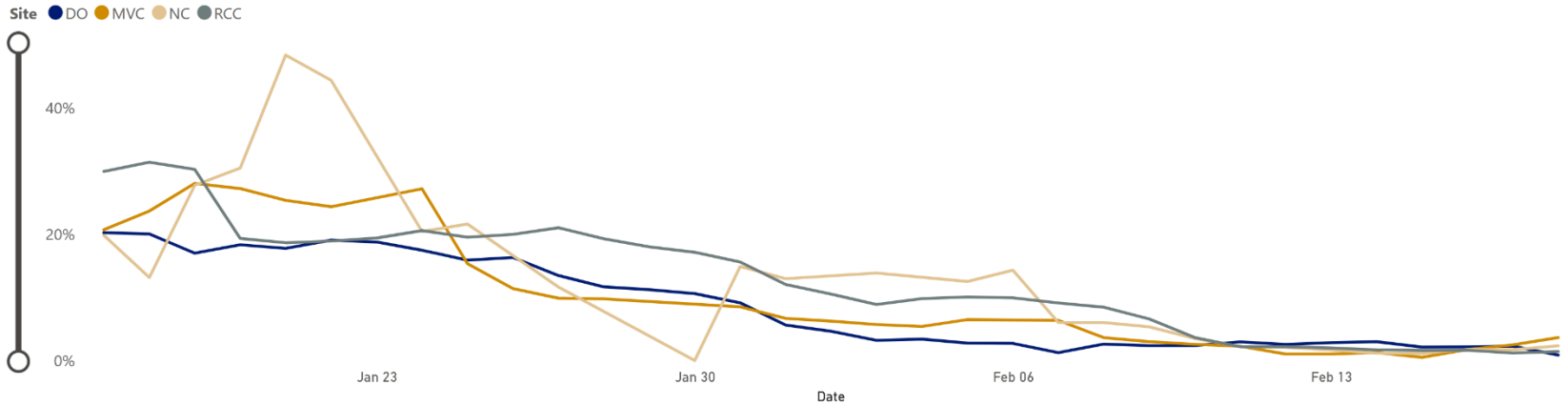
Type

Employee Student Visitor

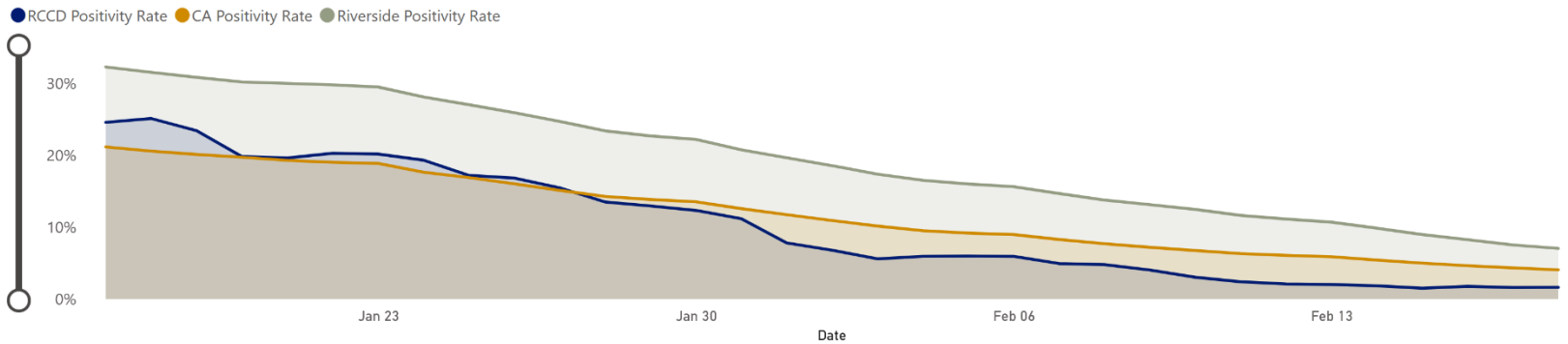
Site

DO MVC NC RCC

RCCD Positivity Rate by COL (Rol Avg Past 7-Days)



Positivity Rate by RCCD vs Riverside County vs California (Rol Avg Past 7-Days)



2/18/2022

CA/RIVCO Update Date



California/Riverside County/RCCD COVID-19 Data

	Total Tests	Total COVID-19 Reported Cases	Total Positive Rate	Last 7-Day COVID19 Cases	Last 7-Day Pos Rate
California	145,971,497	8,296,145	7.1%	59,443	4.1%
RIVCO	5,908,144	581,788	12.3%	3,193	7.0%
RCCD	53,873	861	5.6%	15	1.6%

2/17/2022

Cases Updated

2/18/2022

Rate Updated

Data for California and Riverside County is populated from California Health and Human Services Open Data Portal (update cycle 1/week) and data for RCCD is derived from Cleared4 testing numbers

<https://data.chhs.ca.gov/dataset/covid-19-time-series-metrics-by-county-and-state>

Weather

	Sat 2/26	Sun 2/27	Mon 2/28	Tue 3/1	Wed 3/2	Thu 3/3	Fri 3/4
San Diego Marine							
Orange/San Diego Beaches		Elevated Surf Rip Currents	Elevated Surf Rip Currents	Elevated Surf Rip Currents			
San Diego Coast San Diego, Oceanside							
San Diego Valleys Alpine, Escondido, Ramona	Wind		Heat Wind	Heat	Heat		
San Diego County Mtns Mt Laguna, Julian, Palomar Mt	Wind		Wind				
San Diego Deserts Anza Borrego, Ocotillo Wells	Wind		Heat	Heat	Heat		
Orange County Coast Laguna and Huntington Beaches	Wind						
Orange County Inland Anaheim, Irvine	Wind		Heat Wind	Heat	Heat		
Santa Ana Mountains Silverado, Santiago Peak	Wind		Heat Wind	Heat	Heat		
Inland Empire Ontario, Riverside	Wind		Heat Wind	Heat	Heat		
Riverside County Mtns Mt San Jacinto, Idyllwild	Wind		Wind				
Coachella Valley Palm Springs, Indio	Wind		Heat	Heat	Heat		
San Bernardino Mtns Wrightwood, Big Bear	Wind		Wind				
High Deserts Victorville, Lucerne Valley			Heat	Heat	Heat		

Risk Levels



<https://www.weather.gov/forecastpoints#>

Latest hazard threat table: <https://www.wrh.noaa.gov/sqx/event/dsstable.php>

All Areas



Impacts:

Heat stress for individuals that are over-exposed to the sun and heat, and for sensitive groups, as well.

Timing:

Monday through Wednesday

Confidence:

High

After a prolonged cool pattern, next week will see a significant warm-up, with temperatures 10-15° above normal for most locations. It will then cool back down next weekend.

San Diego Valleys, San Diego County Mtns, Orange County Inland, Santa Ana Mountains, Inland Empire, Riverside County Mtns, San Bernardino Mtns



Impacts:

Difficulty driving for high-profile vehicles, palm fronds and tree branches could be downed.

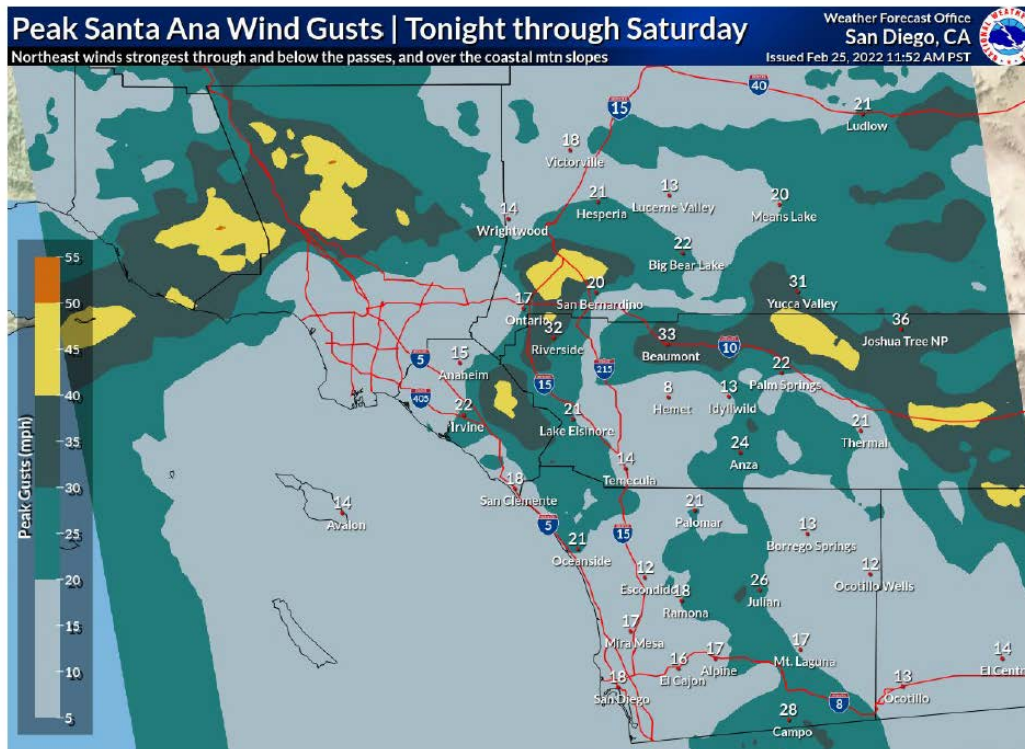
Timing:

Tonight through midday Saturday

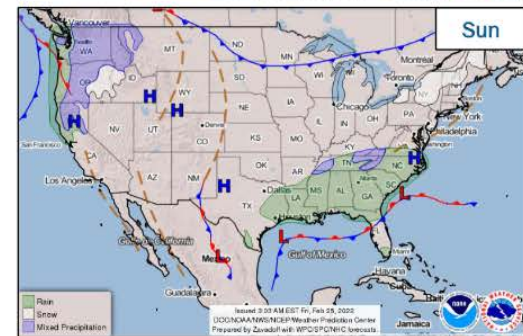
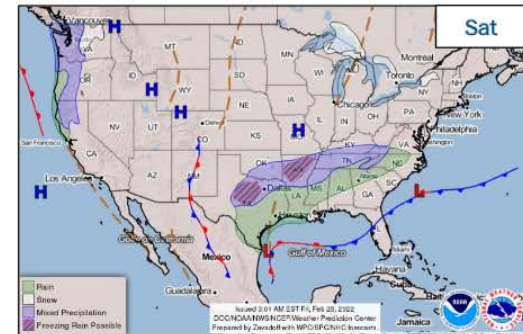
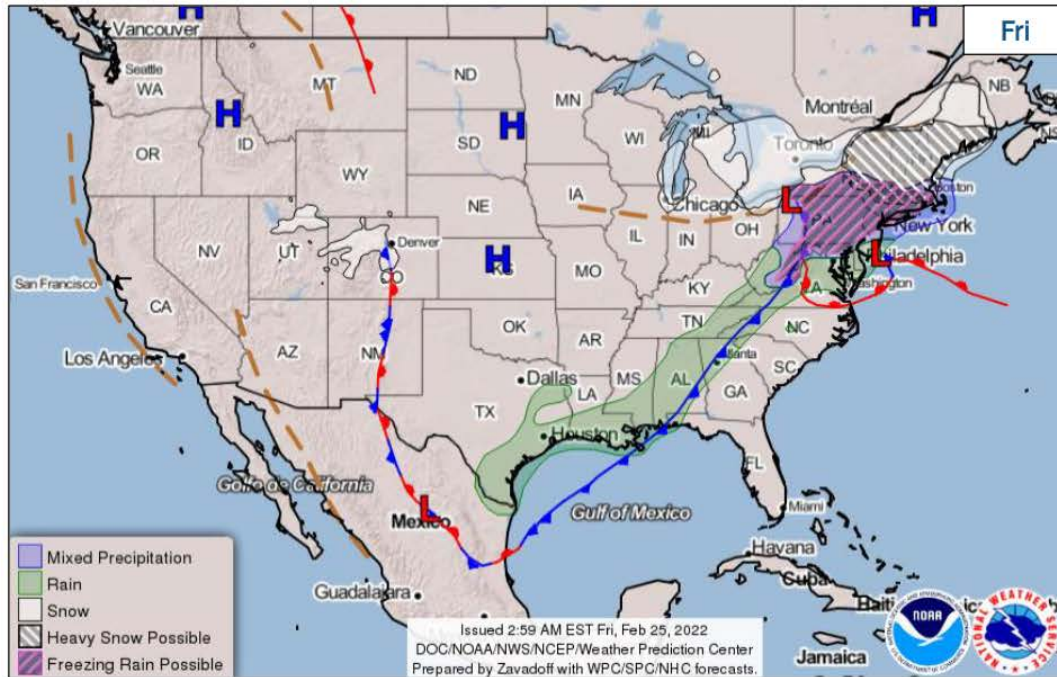
Confidence:

High

A modest Santa Ana event will bring gusty winds to the region. Strong wind gusts of 50-60 mph will be likely in areas near passes, canyons, and foothills. In the Inland Empire, gusty winds of 30-40 mph will be likely. There could be some blowing dust in the Inland Empire, and minor damage to trees.



National Weather Forecast



National Watch Center

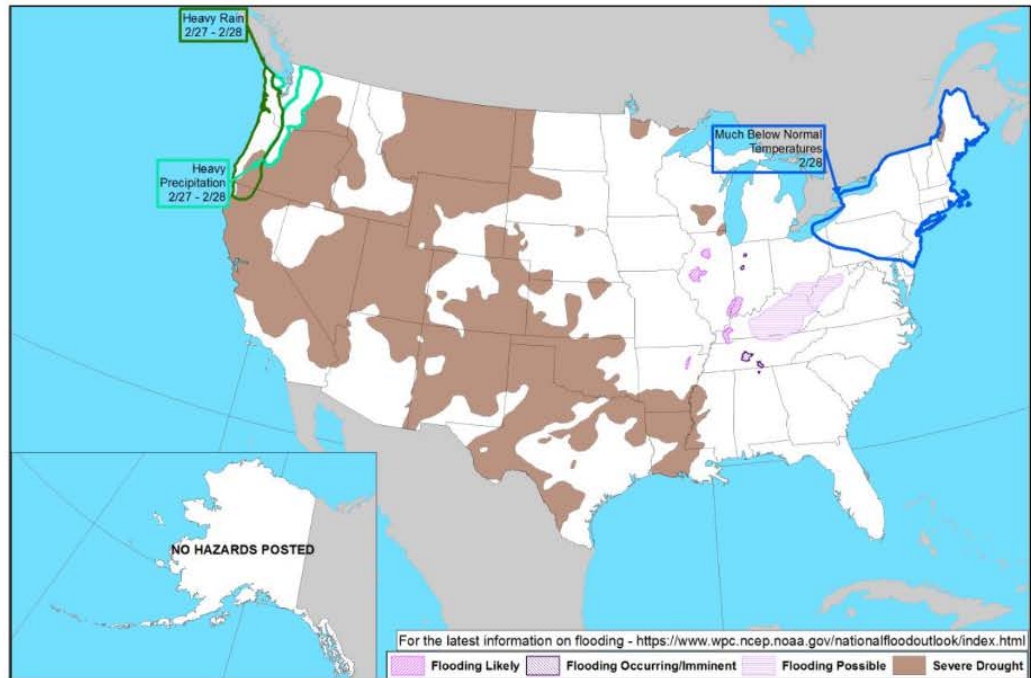
Forecast Snowfall



FEMA

National Watch Center

Hazards Outlook – Feb 27 – Mar 3

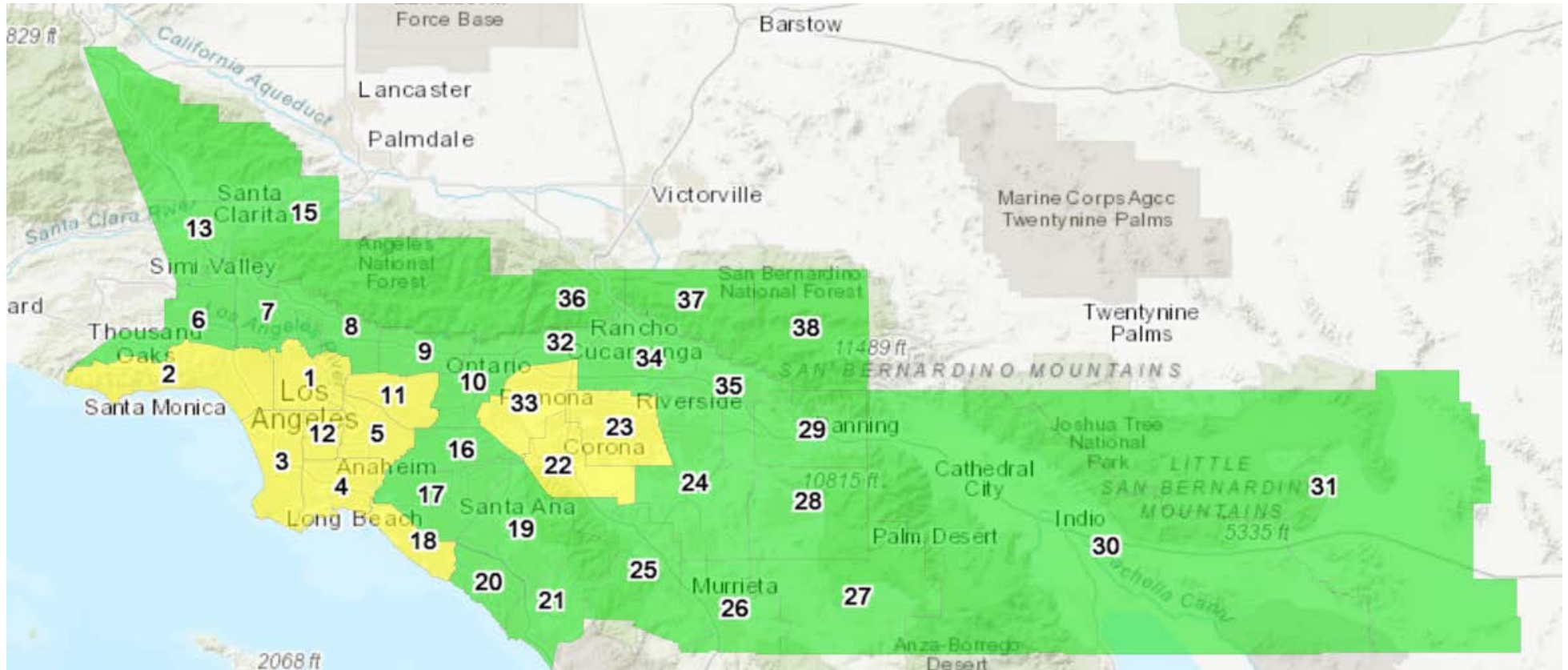


National Watch Center



Today's Forecast

<https://www.arcgis.com/apps/webappviewer/index.html?id=85c7770bac684749a631bd7b42eac1b7>



Legend

The Air Quality Index (AQI) is an index for reporting daily air quality that conveys how air pollution can affect public health. The AQI is divided into six levels of health concern:

- AQI Value
- Hazardous (301-500)
 - Very Unhealthy (201-300)
 - Unhealthy (151-200)
 - Unhealthy for Sensitive Groups (101-150)
 - Moderate (51-100)
 - Good (0-50)