



Situation Summary

Friday, April 1, 2022 - Day 751 of the Pandemic

Update as of 3:00 PM

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.

COVID-19 by the Numbers

04/01/2022	Riverside	Imperial	Kern	Los Angeles*	Orange	San Bernardino	San Diego	San Luis Obispo	Santa Barbara	Ventura	California	United States	Global
Total Cases	590,563	55,266	237,681	2,703,576	546,047	561,362	752,281	52,512	85,611	173,044	8,489,081	79,947,165	486,761,597
Total Cases Per Capita	23,927	28,837	25,633	26,357	16,913	25,316	22,320	18,831	18,759	20,293	21,154	23,938	6,147
% of Total Cases/Population	23.93%	28.84%	25.63%	26.36%	16.91%	25.32%	22.32%	18.83%	18.76%	20.29%	21.15%	23.94%	6.15%
Recovered*	583,855	51,391	237,860	Not Reported	536,781	558,060	Not Reported	52,731	84,740	170,793	8,761,513	65,246,951	424,228,801
% of total recovered/population	23.66%	26.82%	25.65%	Not Reported	16.63%	25.17%	Not Reported	18.91%	18.57%	20.03%	21.83%	19.54%	5.36%
Total Deaths	6,418	908	443	31,410	6,880	6,865	5,178	475	678	1,460	43,474	978,254	6,142,735
Deaths Per Capita	260.03	473.78	47.78	306.21	213.10	309.60	153.63	170.34	148.56	171.21	108.34	292.91	77.57
% of Total Deaths/Population	0.26%	0.47%	0.05%	0.31%	0.21%	0.31%	0.15%	0.17%	0.15%	0.17%	0.11%	0.29%	0.08%
% of State's Cases	6.96%	0.65%	2.80%	31.85%	6.43%	6.61%	8.86%	0.62%	1.01%	2.04%	10.62%	16.42%	
Total Hospital Beds	3,513	202	1,022	19,394	5,986	3,681	6,497	445	604	1,172	66,690		
Currently in Hospitals	52	6	26	287	96	51	130	7	15	24	1,270		
Hospital Beds Available**	3,461	196	996	19,107	5,890	3,630	6,367	438	589	1,148	65,420		
Total Hospital ICU Beds**	123	6	32	729	180	198	273	20	33	36	2,325		
Currently in ICU	9	3	8	82	14	14	31	1	2	2	220		
ICU Beds Available	114	3	24	647	166	184	242	19	31	34	2,105		
Case Fatality Rate	1.09%	1.64%	0.19%	1.16%	1.26%	1.22%	0.69%	0.90%	0.79%	0.84%	0.51%	1.22%	1.26%
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 CaREDIE 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 Mutant “XE” Omicron Variant May Be The Most Transmissible Version Of Covid Yet, According To WHO

- The CDC announced this week that the BA.2 Omicron variant, which is reportedly 30% more transmissible than the original BA.1 Omicron strain — has become dominant among new cases sequenced in the United States. That’s a startling rise for a variant that was less than 1% of all sequences as recently as January. But, just as Americans are hearing about BA.2, there’s already a newer, even more transmissible variant on the rise.
- There are actually three new variants that have been given designations. According to a recently-released [report](#) from the UK Health Services Agency, the two being called XD and XF are combinations of Delta and BA.1, or so-called “[Deltacron](#)” strains, which have been talked about [for months](#) but made no significant inroads in any country.
- Like the other two new arrivals, XE is a recombinant strain, meaning it is made up of two previously-distinct variants. But it is not a Deltacron mix. XE is actually made up of the original Omicron (BA.1) and the newer Omicron (BA.2) which has taken over in the U.S.
- According to WHO, which registered concern this week at what it calls “the recent significant reduction in SARS-CoV-2 testing by several Member States. Data are becoming progressively less representative, less timely, and less robust. This inhibits our collective ability to track where the virus is, how it is spreading and how it is evolving: information and analyses that remain critical to effectively end the acute phase of the pandemic.”
- To be clear, XE only accounts for a tiny fraction of cases worldwide. That may change, given that XE is thought to be about 10% more transmissible than the already more-transmissible BA.2. That means it may be roughly 43% more transmissible than the original Omicron that savaged the globe last winter.
- A new wave of infections from the now-dominant BA.2 has not materialized, even as restrictions have been eased. So hopefully the trend with XE, should it out-compete BA.2, will be similar. Only time — and good surveillance — will tell.
<https://deadline.com/2022/03/new-xe-covid-variant-omicron-most-transmissible-1234992060/>

As Shanghai expands COVID lockdown, life on hold in city of 26 million

- China's commercial hub of Shanghai ground to halt on Friday after the government locked down most of the city's 26 million residents to stop the spread of COVID-19, even as official numbers put local cases falling for the second day in a row.
- The city government late on Thursday extended an existing lockdown in eastern districts, just as western parts of the city were shut down as scheduled.
- Fresh official guidance indicated that many in China's most populous city will now be required to stay home as long as it takes to control the outbreak - instructed not to cross their doorsteps even to dispose of rubbish or walk their dogs.
- The lockdown, designed to stop an outbreak of the highly transmissible Omicron variant that started about a month ago, began on Monday and was originally due to last 10 days in total.
- Authorities said on Friday the city's daily tally of infections eased for the second day in the row: it reported 4,144 locally transmitted new asymptomatic cases and 358 symptomatic cases for Thursday, versus corresponding figures of 5,298 and 355 the previous day. Some residents however, have expressed skepticism about the daily tally, questioning how quickly positive cases are registered in the system. Shanghai publishes a daily list of addresses of where cases have been found, and some said their housing compounds were only included days after neighbors had tested positive - or not included at all.
<https://www.reuters.com/world/asia-pacific/shanghai-expands-covid-lockdown-life-hold-city-26-million-2022-04-01/>

Google's Ex-HR Chief Says Hybrid Work Won't Last

- Google's offices officially re-open on Monday, when the company starts requiring that employees come in three days a week.
- Here's an expert guess about what will happen next: That arrangement will last maybe three to five years — then Googlers will go back to five days a week, like the before times. That's the prediction of Laszlo Bock, who was Google's human resources chief from 2006 to 2016.
- Two years into the pandemic, the older generation of executives — even those inside Silicon Valley — aren't accustomed to managing workforces remotely. "Leaders find it really hard to lead virtually," Bock said.
- Bock now runs Humu Inc., an HR software maker, where big companies constantly ask him for advice on the best strategy for returning to office life. He tells them the research suggests a mixture (three days in, two remote) tends to work best. Indeed, an entire think-fluencing industry has sprung up around this "hybrid" future of office life. (Mostly from companies selling remote work tools.) But Bock doesn't think this will last.
- For one, he anticipates a lopsided system for employee evaluations. Under a hybrid model, workers who stay home will be at a disadvantage for nabbing promotions, better pay and plum assignments. "There will be some gamesmanship driving them back to the office as well," he said.
- Second — and maybe most important — the bosses want people back in. Executives at Google and other large companies are eager for a full return to office life, according to Bock. He imagines a slow, "boil the frog" transition. Here's how one unnamed executive put it to him recently: "We'll get everyone back into the office eventually. I just don't want to pick that fight now."
- Another mostly digital company, Meta Platforms Inc., has [offered remote](#) work to all its staff, perhaps to help make its case that the metaverse is really a thing.
- "Remember this is an elite problem," Bock said. Most employees in manufacturing, retail and the service sector — including many of the janitors and security guards inside Google offices — have been going to the office this entire time.
<https://www.bloomberg.com/news/newsletters/2022-04-01/google-s-ex-hr-chief-says-hybrid-work-won-t-last>

End of COVID may bring major turbulence for US health care

- When the end of the COVID-19 pandemic comes, it could create major disruptions for a cumbersome U.S. health care system made more generous, flexible and up-to-date technologically through a raft of temporary emergency measures.
- Winding down those policies could begin as early as the summer. That could force an estimated 15 million Medicaid recipients to find new sources of coverage, require congressional action to preserve broad telehealth access for Medicare enrollees, and scramble special COVID-19 rules and payment policies for hospitals, doctors and insurers. There are also questions about how emergency use approvals for COVID-19 treatments will be handled.
- The array of issues is tied to the coronavirus public health emergency first declared more than two years ago and periodically renewed since then. It's set to end April 16 and the expectation is that the Biden administration will extend it through mid-July. Some would like a longer off-ramp.
- Transitions don't bode well for the complex U.S. health care system, with its mix of private and government insurance and its labyrinth of policies and procedures. Health care chaos, if it breaks out, could create midterm election headaches for Democrats and Republicans alike.

- Medicaid, the state-federal health insurance program for low-income people, is covering about 79 million people, a record partly due to the pandemic. The nonpartisan Urban Institute think tank estimates that about 15 million people could lose Medicaid when the public health emergency ends, at a rate of at least 1 million per month.
- Virtually all of those losing Medicaid are expected to be eligible for some other source of coverage, either through employers, the Affordable Care Act or — for kids — the Children's Health Insurance Program.
- State Medicaid officials don't want to be the scapegoats. "Medicaid has done its job," said Matt Salo, head of the National Association of Medicaid Directors. "We have looked out for physical, mental and behavioral health needs. As we come out of this emergency, we are supposed to right-size the program."
- The end of the public health emergency would jeopardize telehealth access for millions enrolled in traditional Medicare. Restrictions predating COVID-19 limit telehealth mainly to rural residents, in part to mitigate against health care fraud. Congress has given itself 151 days after the end of the public health emergency to come up with new rules. "If there are no changes to the law after that, most Medicare beneficiaries will lose access to coverage for telehealth," the Kaiser Foundation's Cubanski said. A major exception applies to enrollees in private Medicare Advantage plans, which generally do cover telehealth. However, nearly 6 in 10 Medicare enrollees are in the traditional fee-for-service program.
- An area that's particularly murky is what happens to tests, treatments and vaccines covered under emergency use authorization from the Food and Drug Administration. Some experts say emergency use approvals last only through the duration of the public health emergency. Others say it's not as simple as that, because a different federal emergency statute also applies to vaccines, tests and treatments. There's no clear direction yet from health officials.
- The FDA has granted full approval to Pfizer-BioNTech's COVID-19 vaccine for those 16 and older and Moderna's for those 18 and older, so their continued use would not be affected.

https://cumberlink.com/live_well_in_the_cumberland_valley/end-of-covid-may-bring-major-turbulence-for-us-health-care/article_96f2e272-b0eb-11ec-bee2-a7f79044aa94.html

What an expert says you should consider before getting a 2nd Covid-19 booster

- On Tuesday, the US Food and Drug Administration expanded its authorization of the Pfizer/BioNTech and Moderna Covid-19 vaccines. Now, adults ages 50 and older are able to get a second booster if at least four months have passed since their first one.
- Within hours, the US Centers for Disease Control and Prevention came out with a statement that says it will also allow second boosters as well as guidance for people who initially received the Johnson & Johnson vaccine. These individuals who subsequently got a booster are now eligible for a second booster shot, too.
- Dr. Leana Wen: Prior to the announcements this week by the FDA and CDC, people with moderate or severe immunocompromise were already eligible for an additional booster dose. Now, a much larger group is eligible. "First, I want to emphasize the importance of getting the first booster dose. According to the CDC, about half of Americans eligible for that first booster have not yet received it. That includes an astonishing 1 in 3 people 65 and older."
- An Israeli study, published in the New England Journal of Medicine, found that while a fourth shot increased antibodies, it didn't boost protection much, and those who became infected were mildly symptomatic regardless of whether they had three or four shots. Complicating it all is that it's unclear how long the enhanced protection from the fourth dose will last.
- All this says to me that the question of whether people should receive a fourth dose is not straightforward to answer. This cannot be a blanket recommendation to everyone, but rather nuanced guidance that's tailored to each person's individual medical circumstance.

- Consider your medical risk factors. If you are elderly and have multiple medical conditions, you are more likely to become severely ill due to Covid-19. Certainly, if you are moderately or severely immunocompromised, that should tip the scales in favor of getting the additional booster dose now. On the other hand, if you are generally healthy, you are still very well-protected from severe illness due to the protection from the vaccine and the initial booster dose. It's not as urgent to get the booster, and there may also be an advantage to waiting.
- Right now, the level of Covid-19 in the US is pretty low. Experts have been keeping a close eye on BA.2 in case it causes another surge, but the current transmission rate in most parts of the country is the lowest it has been in months. Because the enhanced protective effect of the second booster may not last long, it might be better to wait until there are clear signs of a surge before getting it.
- In addition, there are studies underway to develop an Omicron-specific booster. If you haven't received any booster at all, I wouldn't recommend waiting for that variant-specific booster, but if you already received one, and especially if you are not particularly vulnerable, it may be reasonable to hold off for now.
- Another group of people who are probably better off waiting is those who were recently infected with Omicron. It's unlikely that those individuals who were vaccinated and infected will be reinfected so soon. Especially if they are generally healthy individuals, I'd also advise them to wait a little longer before getting the additional booster.

<https://www.cnn.com/2022/03/31/health/vaccine-covid-booster-omicron-wellness/index.html>

New England Journal of Medicine <https://www.nejm.org/doi/full/10.1056/NEJMc2202542>

California lifts COVID vaccine mandate for crowds at indoor mega-events

- Starting Friday, April 1, San Diego County, along with the state, will lift the vaccine or negative-test verification requirement at indoor mega-events, such as sporting events and concerts, and move to a strong recommendation.
- Here are the updated restrictions applying to indoor and outdoor mega-events:
 - Vaccine verification or proof of a negative COVID test
 - Strongly recommended at indoor mega-events.
 - Recommended at outdoor mega-events.
 - Capacity limitations
 - No restrictions at indoor or outdoor mega-events.
 - Physical distancing
 - No restrictions for attendees, customers, and guests at indoor or outdoor mega-events.

<https://www.cbs8.com/article/news/health/coronavirus/vaccine/california-lifts-requirement-of-negative-covid-test-and-vaccination-for-indoor-mega-events-starting-april-1/509-62d4a823-026d-4a34-a475-585ff269915d>

Deadline for COVID-19-era California rent relief program is March 31. Here's how to apply

- The deadline to apply for rent relief under a California COVID-19 program is this Thursday. So far, the state has approved more than 223,000 applications out of 506,796 for the Housing is Key program.
- About 76,000 applications were denied. Gustavo Velásquez, director of housing and community development, said these rejections have been primarily due to people earning over the income limit.
- Of the approved applications, nearly 35% are from Hispanic households – 12% of the applications were submitted in Spanish – and Velásquez believes this number could be higher if more people apply by the deadline.

- A proposed bill that would further help with rent relief also made its way past the Assembly on Monday. If passed by the Senate, [Assembly Bill 2179](#) would pause evictions for tenants who applied for state rent relief by the March 31 deadline and are waiting on their paperwork to be processed. The extended protections would go through June 30.
- Renters who don't apply to the program by this deadline won't receive any protections and could receive eviction orders as soon as the start of April.
<https://www.ksbw.com/article/deadline-covid-19-era-california-rent-relief-program-march-31/39587947>

RivCo Assemblyman, Senator express concerns over COVID vaccination bill


- Riverside County lawmakers from both sides of the aisle say they have reservations about a proposed state law due for hearings next month that would pave the way for children as young as 12 to receive COVID-19 shots without first obtaining their parents' permission.
- The proposed legislation, Senate Bill 866, the "Teens Choose Vaccines Act," was introduced in January by senators Richard Pan, and Scott Wiener. The measure would authorize waiver of parental consent to achieve what Wiener characterized as "the autonomy of young people to receive lifesaving vaccines, regardless of their parents' beliefs and work schedules."
- The bill was passed out of the Senate Rules Committee in January and received an initial hearing in the Senate Judiciary Committee earlier this month. The committee is slated to hear it again in April.
- Lawsuits challenging a similar law in Washington, D.C., the Minor Consent for Vaccinations Amendment Act, led to a federal judge two weeks ago issuing a temporary injunction halting further use of the measure, which permitted kids as young as 11 to receive COVID and other vaccinations without parental consent.
- The judge declared that the act threatened parental rights as far as them knowing what their children were injecting themselves with, while reimbursement for providers' costs could be billed directly to a family's medical insurers without the parents' knowledge.
<https://kesq.com/news/coronavirus/2022/03/31/rivco-assemblyman-senator-express-concerns-over-covid-vaccination-bill/>

CDPH - COVID-19 Public Health Guidance for K-12 Schools in California, 2021-22 School Year

- CDPH has posted an updated for the K-12 School guidance that will go into effect on Wednesday April 6, 2022.
- Updated K-12 Guidance reflects a change in quarantine use regardless of vaccination status or location of exposure as part of COVID 19 mitigation strategies, and retires/archives prior sections 8-9 of the framework. The current version of the guidance remains in effect through April 5.
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/K-12-Guidance-2021-22-School-Year.aspx>
<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Guidance-on-Isolation-and-Quarantine-for-COVID-19-Contact-Tracing.aspx>

		REQUIRED	STRONGLY RECOMMENDED	RECOMMENDED	OPTIONAL
Vaccinated & Unvaccinated	Public Indoor (Effective end of day February 28)	→	✓		
	Schools & Childcare (Effective end of day March 11)	→	✓		
	Health Care	✓			
	Long-Term Care	✓			
	Jails & Prisons	✓			

NOTE: Locals may have additional requirements beyond the state requirements based on local conditions including community vaccine rates or vaccination rates in schools and childcare facilities.



Global Data

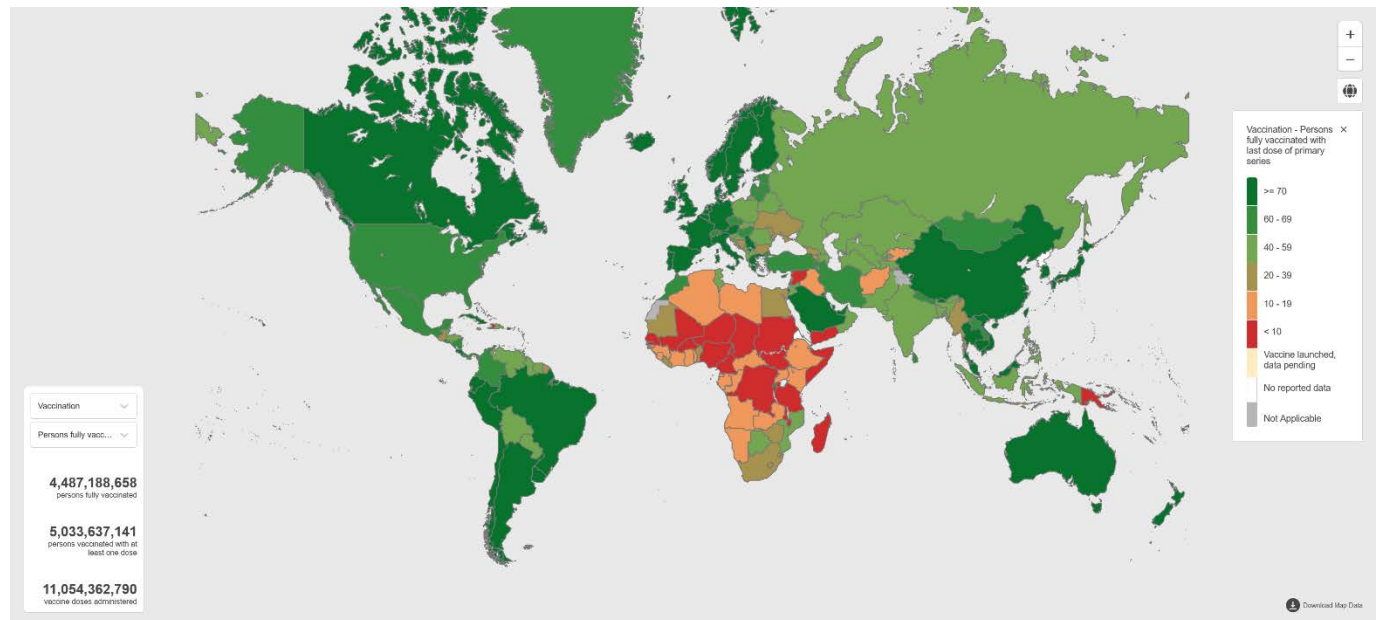
<https://covid19.who.int/>

Globally, as of 4:59pm CEST, 1 April 2022, there have been 486,761,597 confirmed cases of COVID-19, including 6,142,735 deaths, reported to WHO. As of 27 March 2022, a total of 11,054,362,790 vaccine doses have been administered.

Number of Vaccines Used



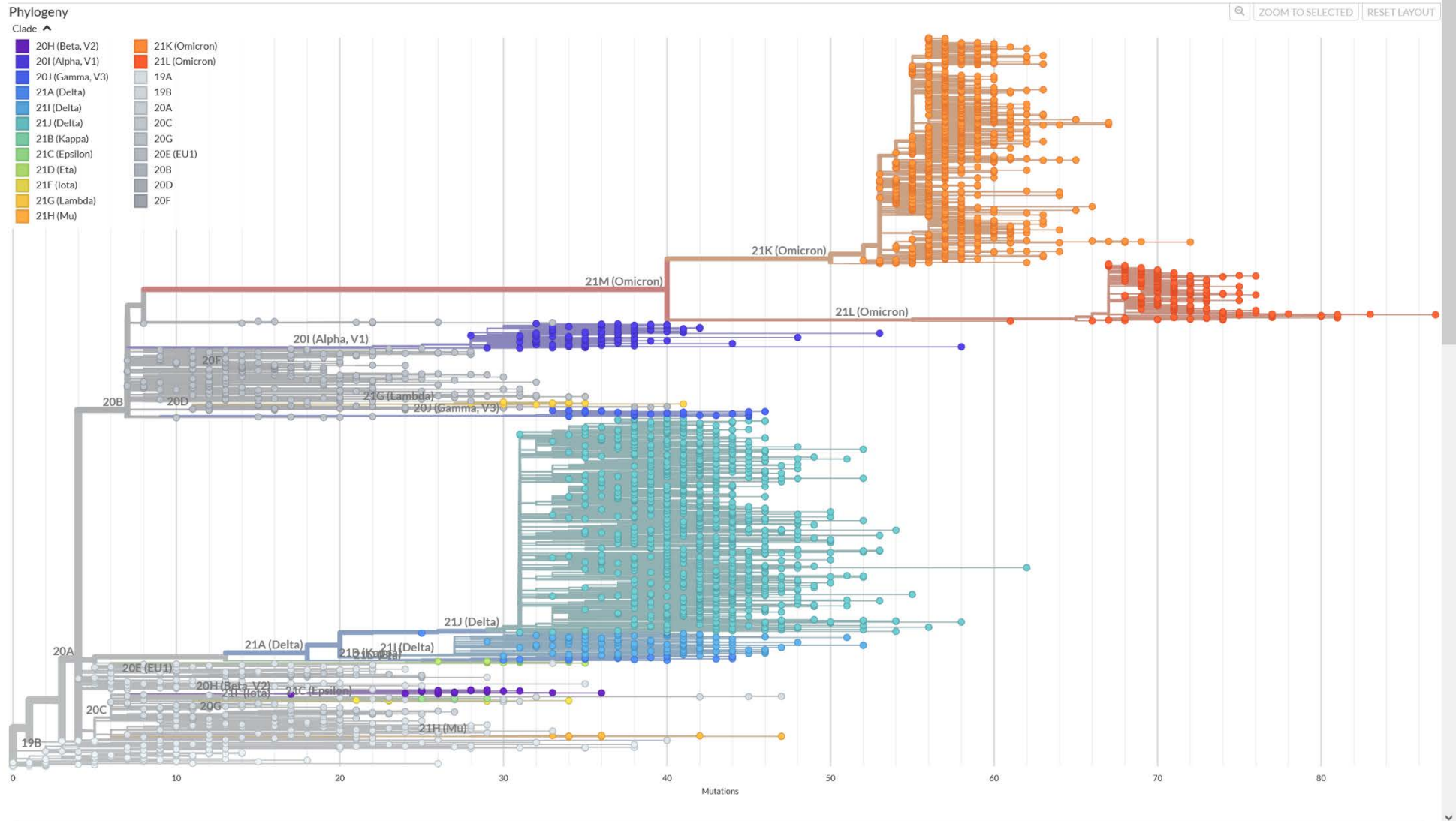
Number of Fully Vaccinated



Genomic epidemiology of SARS-CoV-2 with global subsampling

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

Showing 2985 of 2985 genomes sampled between Dec 2019 and Mar 2022.





U. S. Data

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

United States

At a Glance

Cases Total **79,904,464**
Case Trends

Deaths Total **977,495**
Death Trends

Current Hosp. **11,269**
Admission Trends

81.8% of People 5+ with At Least One Vaccination

TOTAL CASES
79,904,464
+40,568 New Cases

7 DAY CASE RATE PER 100,000
54.3

TOTAL DEATHS
977,495
+1,154 New Deaths

CDC | Data as of: Thursday, March 31, 2022 4:44 PM ET. Posted: Thursday, March 31, 2022 6:30 PM ET

Find local COVID-19 guidance
Community levels and prevention steps by county

[Check Your County](#) [All COVID-19 Topics](#)

Check Your County

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/covid-by-county.html>

All COVID-19 Topics

<https://www.cdc.gov/coronavirus/2019-nCoV/index.html>

What Prevention Steps Should You Take Based on Your COVID-19 Community Level?

Low	Medium	High
<ul style="list-style-type: none"> Stay up to date with COVID-19 vaccines Get tested if you have symptoms 	<ul style="list-style-type: none"> If you are at high risk for severe illness, talk to your healthcare provider about whether you need to wear a mask and take other precautions Stay up to date with COVID-19 vaccines Get tested if you have symptoms 	<ul style="list-style-type: none"> Wear a mask indoors in public Stay up to date with COVID-19 vaccines Get tested if you have symptoms Additional precautions may be needed for people at high risk for severe illness

Prepared by Justin Czerniak
justin.czerniak@norccollege.edu



COVID-19 County Check

Find community levels and prevention steps by county.

Select a Location (all fields required)

California

Riverside County

Go

< Start Over

Low

In Riverside County, California, community level is **Low**.

- Stay [up to date](#) with COVID-19 vaccines
- [Get tested](#) if you have symptoms

People may choose to mask at any time. People with symptoms, a positive test, or exposure to someone with COVID-19 should wear a mask.

If you are immunocompromised, learn more about [how to protect yourself](#).

March 31, 2022

Data Provided by CDC with updates every Thursday by 8 pm ET

[How are these data measured?](#)

Variant Proportions

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

Use the controls to focus on a specific region and/or 1-week interval

HHS Region

USA

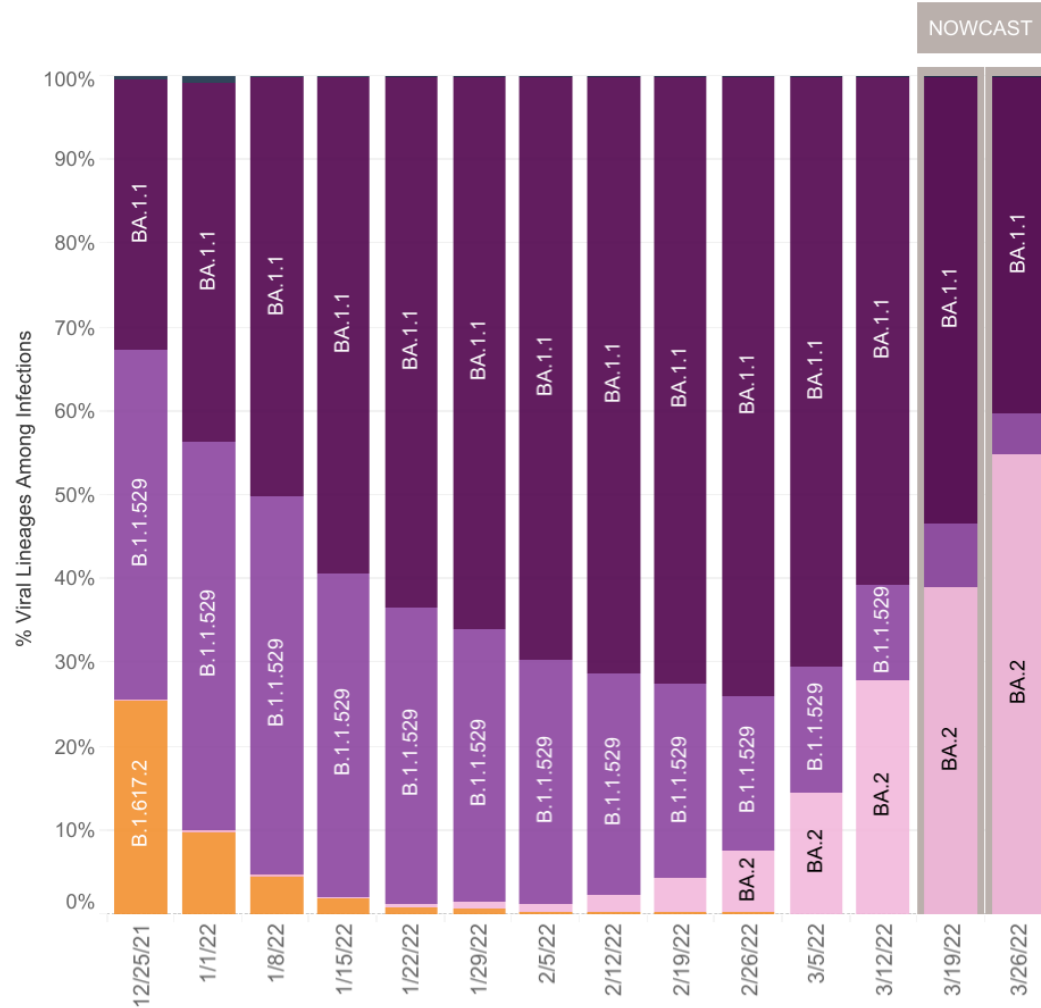
- Nowcast On
- Nowcast Off

Week Ending

3/26/2022

United States: 12/19/2021 – 3/26/2022

United States: 3/20/2022 – 3/26/2022 NOWCAST



USA

WHO label	Lineage #	US Class	%Total	95%PI
Omicron	BA.2	VOC	54.9%	50.8-59.1%
	BA.1.1	VOC	40.4%	36.4-44.5%
	B.1.1.529	VOC	4.7%	3.9-5.7%
Delta	B.1.617.2	VOC	0.0%	0.0-0.0%
Other	Other*		0.0%	0.0-0.0%

* Enumerated lineages are US VOC and lineages circulating above 1% nationally in at least one week period. "Other" represents the aggregation of lineages which are circulating <1% nationally during all weeks displayed.

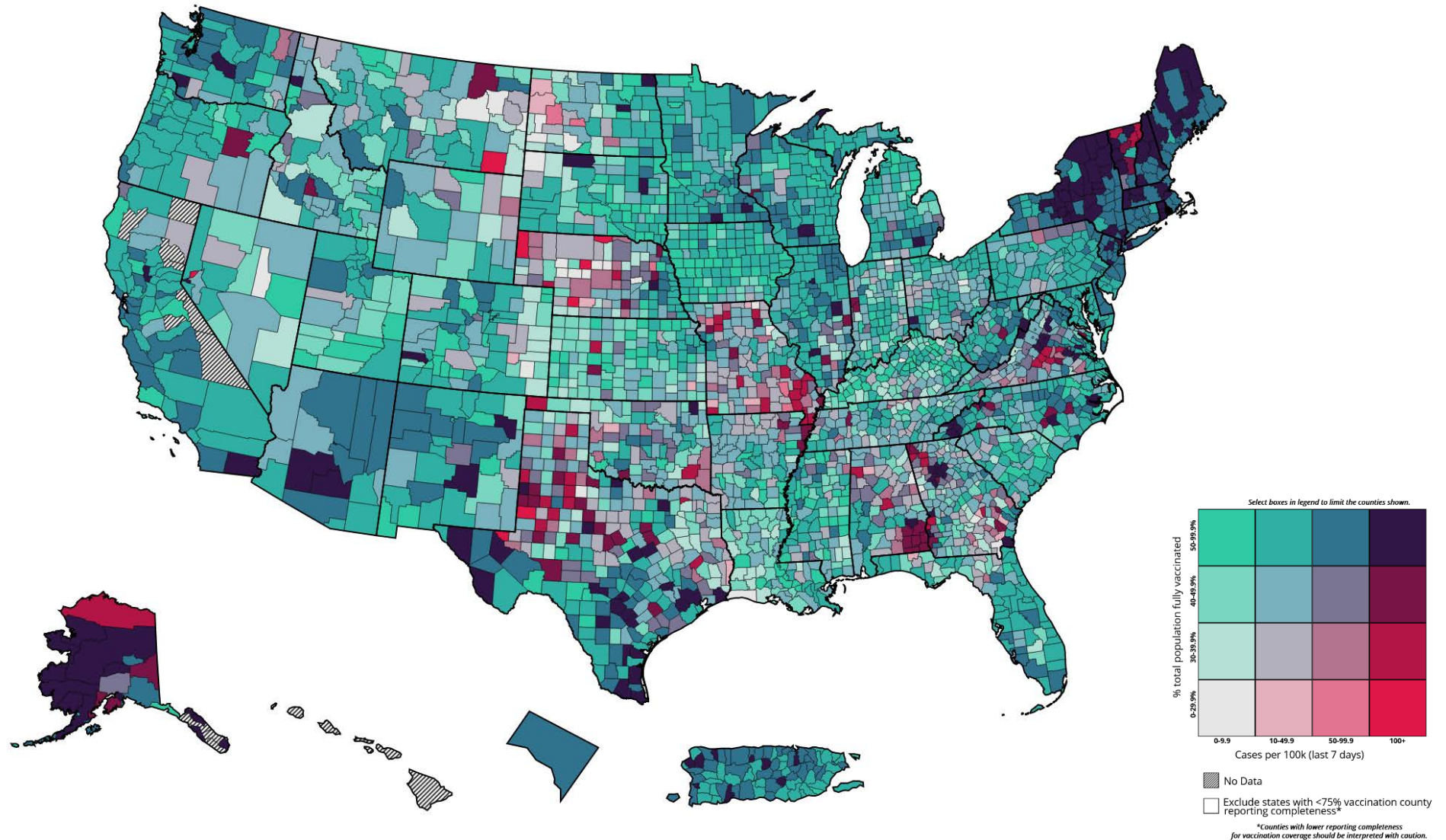
** These data include Nowcast estimates, which are modeled projections that may differ from weighted estimates generated at later dates

AY.1-AY.133 and their sublineages are aggregated with B.1.617.2. BA.1 and BA.3 are aggregated with B.1.1.529. For regional data, BA.1.1 is also aggregated with B.1.1.529, as it currently cannot be reliably called in each region.

County Vaccination Coverage and Other Outcomes

<https://covid.cdc.gov/covid-data-tracker/#vaccination-case-rate>

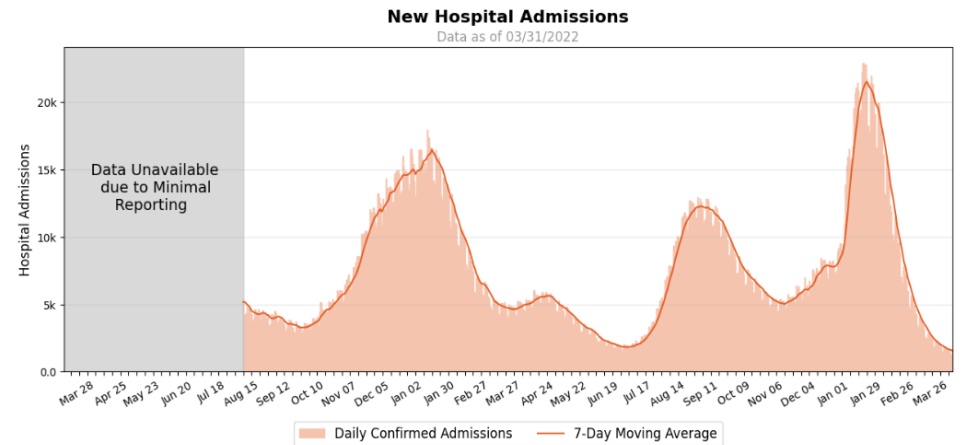
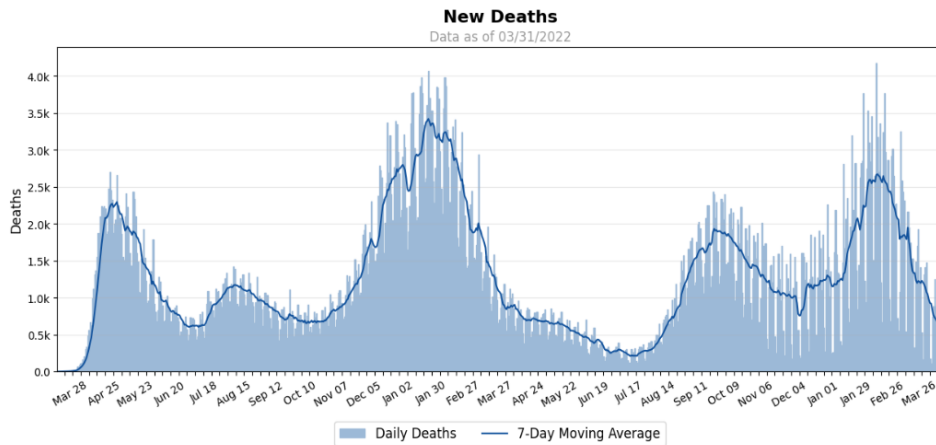
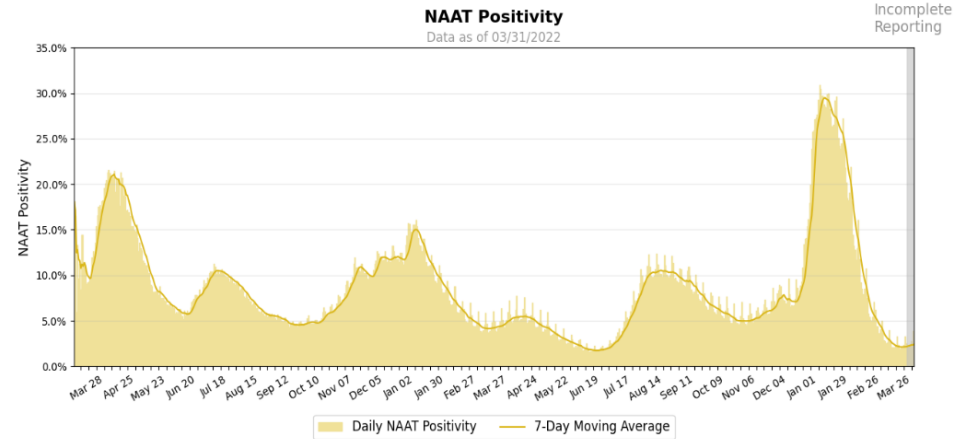
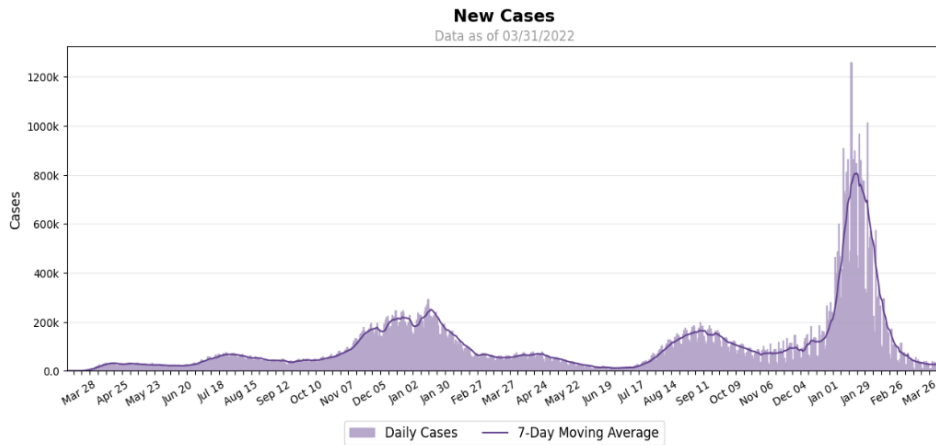
United States** COVID-19 Reported Cases per 100,000 Population (last 7 days)¹ and Percent of Total Population Fully Vaccinated²



COVID-19 Community Profile Report 03-31-2022

<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.

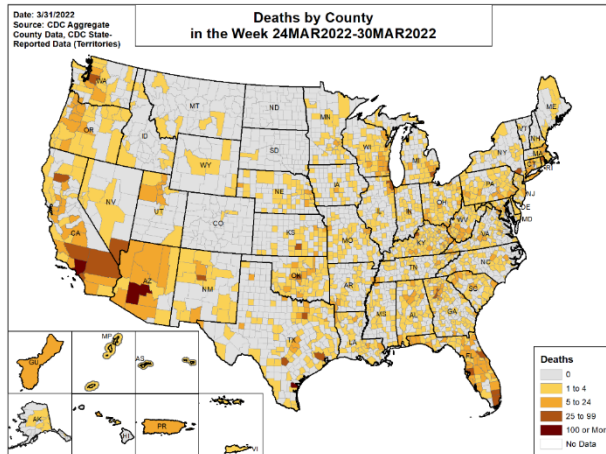
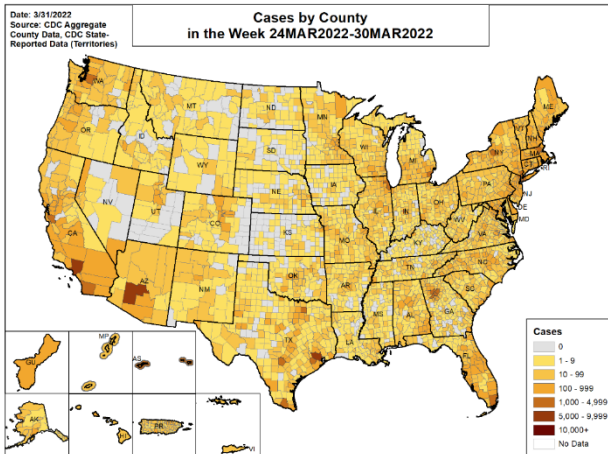
INITIAL PUBLIC RELEASE // SUBJECT TO CHANGE



NUMBER OF NEW CASES AND DEATHS IN THE LAST 7 DAYS

Total Cumulative Cases: 79,904,464
New Cases in Last 7 Days: 180,127
Percent Change from Previous 7 Days: -3.0%

Total Cumulative Deaths: 977,495
New Deaths in Last 7 Days: 4,387
Percent Change from Previous 7 Days: -14.4%



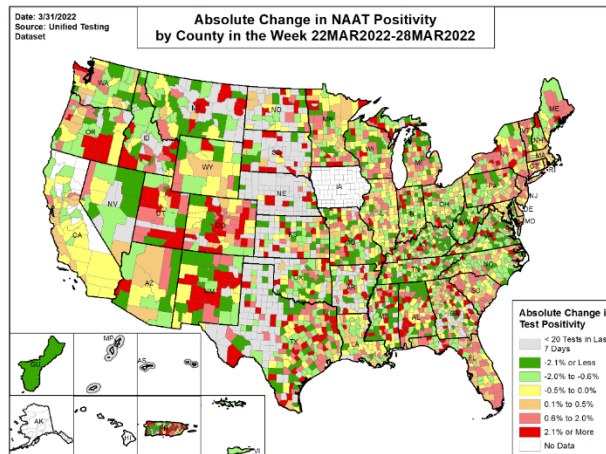
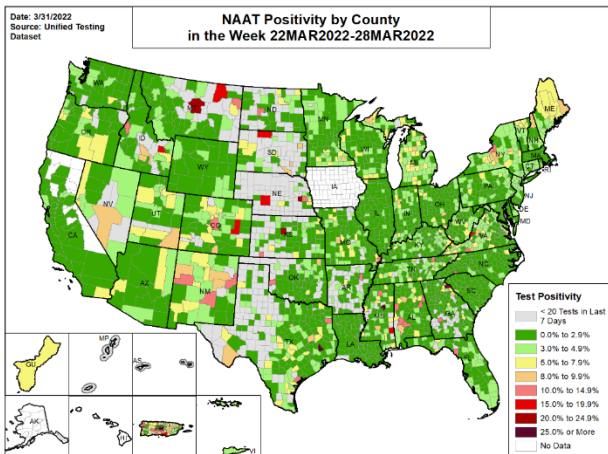
INITIAL PUBLIC RELEASE // SUBJECT TO CHANGE



NAAT POSITIVITY IN THE LAST 7 DAYS AND COMPARISON TO PREVIOUS 7 DAYS

NAAT Positivity in Last 7 Days: 2.4%

Absolute Change from Previous 7 Days: +0.2%



As of 2/17/2022, IA is no longer reporting negative test results; therefore, test volume and test positivity from this date forward is no longer presented.
 AK and HI testing data have at least 4 days with no or minimal reporting in the last week (by the data cutoff time for this report), which may result in missing values and inaccurate test positivity.

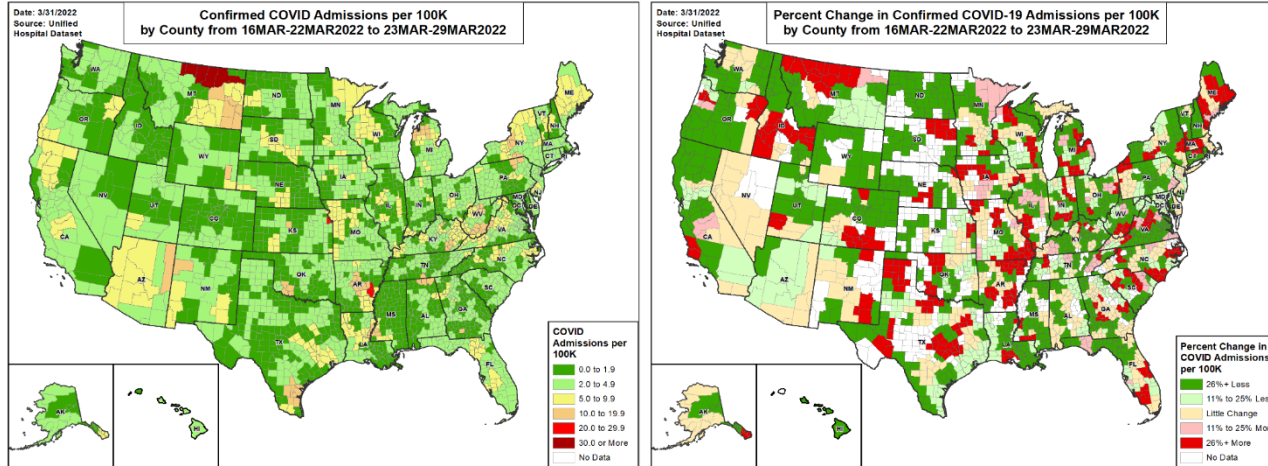
INITIAL PUBLIC RELEASE // SUBJECT TO CHANGE



HOSPITAL ADMISSIONS IN THE LAST 7 DAYS AND COMPARISON TO THE PREVIOUS 7 DAYS

Total Confirmed COVID-19 Hospital Admissions in Last 7 Days:
10,950

Percent Change from Previous 7 Days: -15.8%



Source: Unified Hospital Dataset, excluding psychiatric, rehabilitation, and religious non-medical hospitals. Confirmed COVID-19 admissions are all confirmed daily admissions reported within the last 7 days. County data is mapped from Health Service Areas, defined as a single county or cluster of counties that are generally self contained with respect to hospital care.

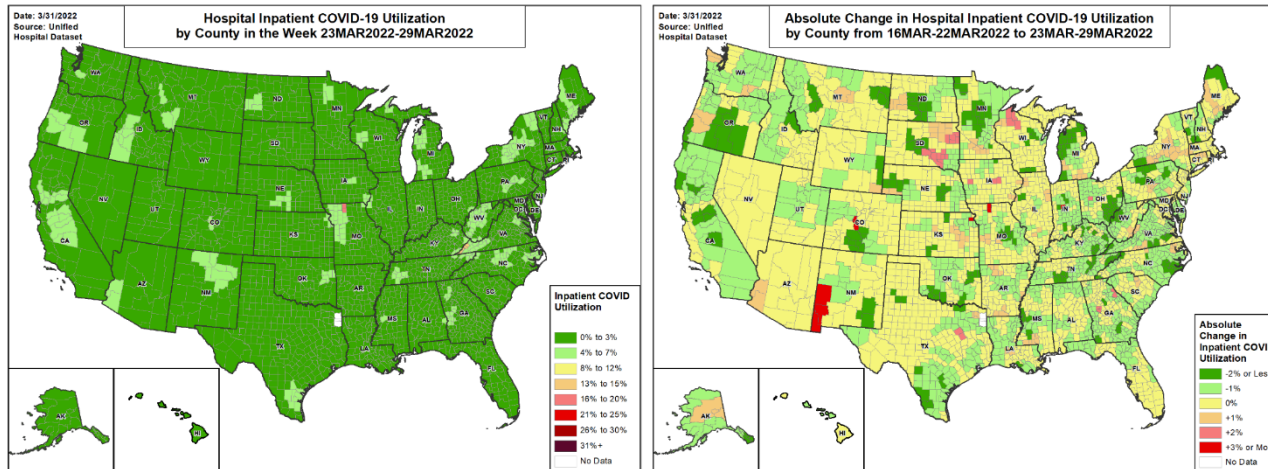
INITIAL PUBLIC RELEASE // SUBJECT TO CHANGE



HOSPITAL INPATIENT COVID-19 UTILIZATION IN THE LAST 7 DAYS AND COMPARISON TO THE PREVIOUS 7 DAYS

Average Daily COVID-19 Hospital Inpatients over Last 7 Days:
12,391

Percent Change from Previous 7 Days: -20.4%



Source: Unified Hospital Dataset, excluding psychiatric, rehabilitation, and religious non-medical hospitals. COVID-19 inpatient utilization indicates average percentage of staffed inpatient beds occupied by confirmed COVID-19 patients within the given time period. County data is mapped from Health Service Areas, defined as a single county or cluster of counties that are generally self contained with respect to hospital care. See Data Sources/Methods slides for additional details.

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 March 28, 2022



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

	10,265	CDC personnel supporting the outbreak response		61.11+ million	Times people have used CDC's online Coronavirus Self-Checker
	1,920	CDC deployers who have conducted 4,592 deployments to 365 cities across the United States and abroad		1.7+ million	Calls and emails to CDC-INFO
	433	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
	10,476	Documents providing information and guidance for government agencies, businesses, and the public		5.0+ billion	Social media impressions on 20,850 CDC response-related posts
	844+ million	COVID-19 tests conducted by public and private laboratories in the United States		102,607+	Inquiries from doctors, nurses, or other clinical staff and health departments received by CDC
	255+ million	People who have received at least one dose of a COVID-19 vaccine		217+ million	People who have been fully vaccinated with a COVID-19 vaccine

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

CS316565-A

CDC What's New & Updated

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

- [3/29/22CDC Recommends Additional Boosters for Certain Individuals](#)
- [3/29/22Cases in the U.S.](#)
- [3/29/22EARLY RELEASE: Effectiveness of Homologous and Heterologous COVID-19 Booster Doses Following 1 Ad.26.COV2.S \(Janssen \[Johnson & Johnson\]\) Vaccine Dose Against COVID-19–Associated Emergency Department and Urgent Care Encounters and Hospitalizations Among Adults — VISION Network, 10 States, December 2021–March 2022](#)
- [3/29/22Overall US COVID-19 Vaccine Distribution and Administration Update as of Tue, 29 Mar 2022 06:00:00 EST](#)
- [3/28/22Investigating Long-Term Effects of Myocarditis](#)
- [3/28/22COVID-19 Vaccine Equity for Racial and Ethnic Minority Groups](#)
- [3/28/22v-safe COVID-19 Vaccine Pregnancy Registry](#)
- [3/28/22Staffing Resources](#)
- [3/28/22Tribal Communities](#)
- [3/28/22Coronavirus Disease 2019 \(COVID-19\)](#)
- [3/28/22COVID-19 Travel Recommendations by Country](#)
- [3/27/22Stories from the Field: Examples of Successful Worker COVID-19 Vaccination Programs](#)
- [3/27/22Selected Adverse Events Reported after COVID-19 Vaccination](#)
- [3/27/22COVID-19 Hospitalization and Death by Age](#)
- [3/25/22Archive of COVID-19 Vaccination Data Updates](#)
- [3/25/22EARLY RELEASE: Use of At-Home COVID-19 Tests — United States, August 23, 2021–March 12, 2022](#)
- [3/24/22Contact Tracing Resources for Health Departments](#)
- [3/24/22COVID-19 Hospitalization and Death by Race/Ethnicity](#)
- [3/24/22Health Equity](#)
- [3/24/22COVID Data Tracker Weekly Review](#)

CDC Guidance

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

[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: 3/31/22

[Evaluation for SARS-CoV-2 Testing in Animals](#)

This is guidance for state public health veterinarians and state animal health officials to help guide decisions on testing animals for SARS-CoV-2. Date: 3/29/22

[Guidance for Reporting SARS-CoV-2 Sequencing Results](#)

Find guidance and examples for reporting SARS-CoV-2 sequencing results to state, local, tribal, or territorial public health departments. Date: 3/20/22

Science and Research

<https://www.cdc.gov/coronavirus/2019-ncov/science/science-and-research.html>

Journals and Studies



[Morbidity and Mortality Weekly Report](#)
[Results from COVID-19 outbreak investigations](#)



[Preventing Chronic Disease](#)
[Articles on COVID-19 and chronic disease](#)



[Emerging Infectious Diseases](#)
[Studies of COVID-19 since the beginning of the pandemic](#)

For Immunization Managers

<https://www.cdc.gov/vaccines/imz-managers/coverage/covidvaxview/index.html>

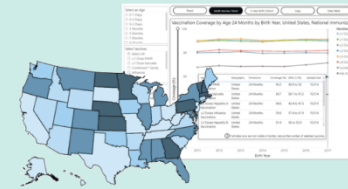
COVIDVaxView

Results from surveys among U.S. adults and parents and guardians of children ages 5–17 years on COVID-19 vaccine uptake, intent to be vaccinated, and knowledge, attitudes, and behaviors related to COVID-19 vaccination. These data supplement the COVID-19 administration data found on CDC's [COVID Data Tracker](#).

COVIDVaxView Interactive!

View survey results to monitor COVID-19 vaccination uptake and confidence in vaccination among adults and children using interactive maps, trend lines, bar charts, and data tables.

[COVIDVaxView Interactive!](#)



 Data Sources

 Publications

COVID DATA TRACKER WEEKLY REVIEW

CDC's home for COVID-19 data

An Interpretive summary of this week's data. Find maps and charts tracking cases, deaths, and trends of COVID-19 in the United States.

[More](#)

VaxView

Monitoring coverage for recommended vaccinations across the country helps CDC assess how well local areas, states, and the nation are protected from vaccine-preventable diseases. Find vaccination coverage data for all ages at:

- [ChildVaxView](#)
- [SchoolVaxView](#)
- [TeenVaxView](#)
- [AdultVaxView](#)
- [FluVaxView](#)

CORONAVIRUS DISEASE 2019 (COVID-19)

[More](#)



State Data

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



Office of Governor
GAVIN NEWSOM

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

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

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

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

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/>

CDPH Office of Communications

<https://www.cdph.ca.gov/Programs/OPA/Pages/News-Releases-2022.aspx>

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

Data models

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

Cal/OSHA

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

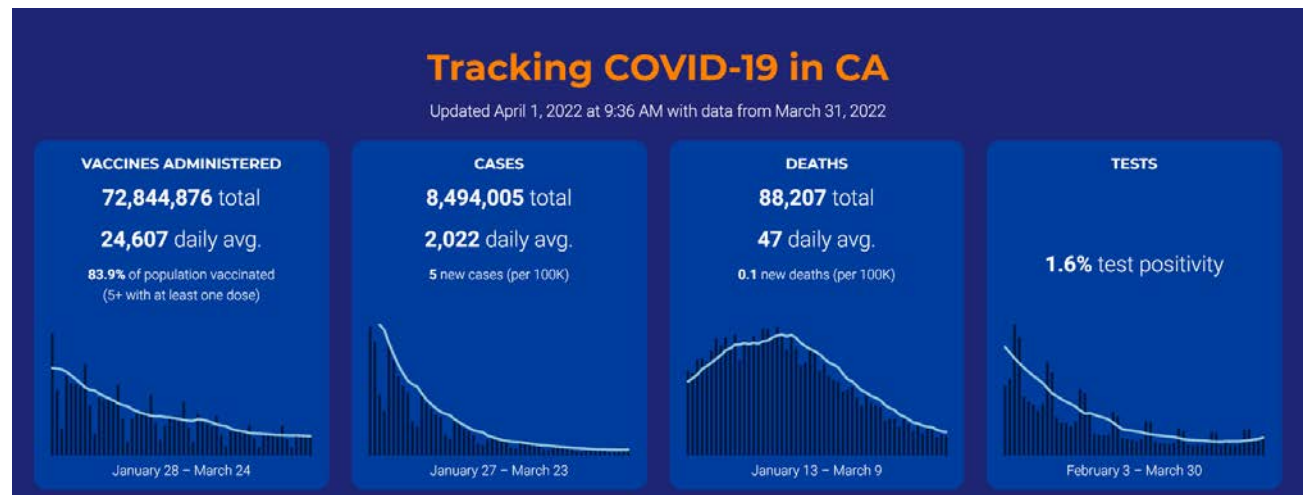
<https://www.dir.ca.gov/dosh/COVID19citations.html>

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

Vaccines

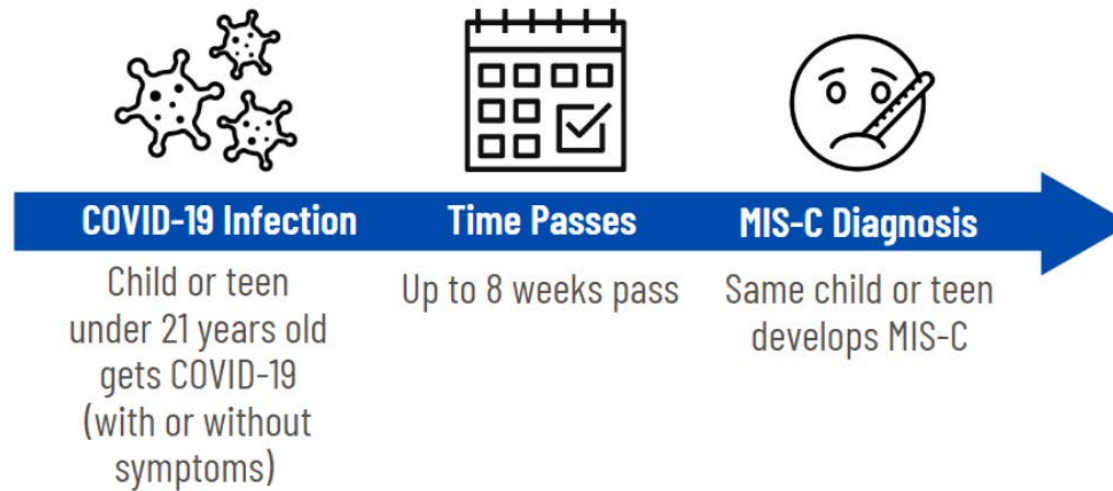
<https://covid19.ca.gov/vaccines/>

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



Multisystem Inflammatory Syndrome in Children (MIS-C)?

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



Signs & Symptoms

Symptoms of MIS-C include ongoing fever PLUS more than one of the following:

- Abdominal (stomach) pain
- Vomiting
- Diarrhea
- Skin rash
- Bloodshot eyes
- Dizziness or lightheadedness

Emergency signs of MIS-C that require immediate medical care include:

- Trouble breathing
- Pain or pressure in the chest that does not go away
- New confusion
- Inability to wake up or stay awake
- Pale, gray, or blue-colored skin, lips, or nail beds (depending on skin tone)



Riverside County Data

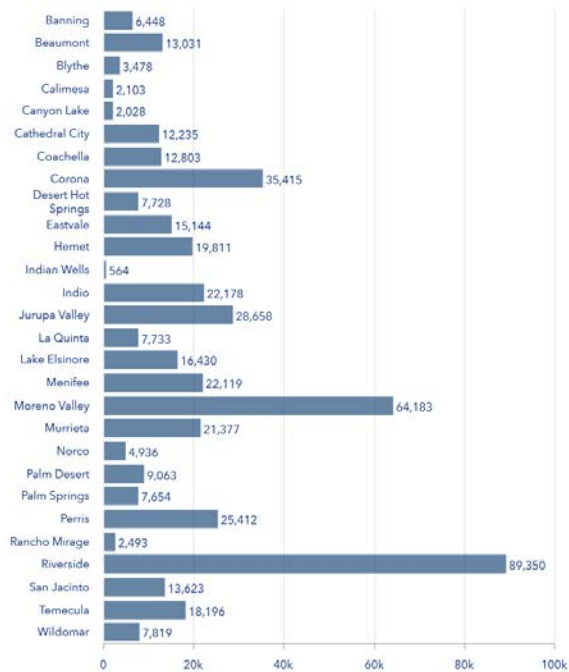
<https://www.rivcoph.org/coronavirus>

<p>Confirmed 597,511 (+157)</p>	<p>Currently Hospitalized 55 Includes 10 in ICU</p>	<p>Deaths 6,468 (+7)</p>	<p>Recovered 588,491 (+189)</p>	<p>Zip Code & Community Data here</p>
<p>Daily Case Rate / 100k 3.1 (7-Day Avg & 7-Day Lag)</p>	<p>Positivity 1.7% (7-Day Avg & 7-Day Lag)</p>	<p>Daily Test Rate / 100k 259.1 (7-Day Avg & 7-Day Lag)</p>		

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

Cases by City

Click on a bar for a city to see age, gender and ethnicity breakdown in the charts below



Cases | Deaths | Recoveries

City and Community

<https://coronavirus-countyofriverside.hub.arcgis.com/>

RIVERSIDE COUNTY DAILY COVID-19 REPORT

<https://www.rivcoph.org/Portals/0/Documents/CoronaVirus/Reports/DailyEpidemiologySummary.pdf?x=1648827838383>



RIVERSIDE COUNTY COVID-19 CASES

Apr 1, 2022 -

TOTAL CASES
597,674

NEW REPORTED CASES
163

TOTAL DEATHS
6,474

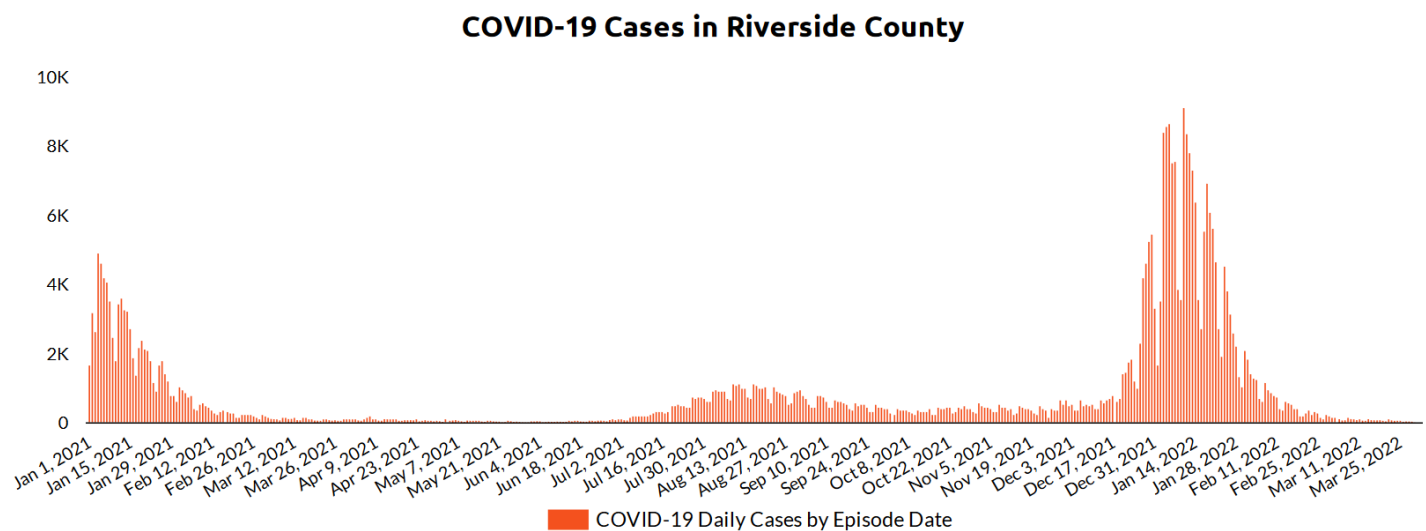
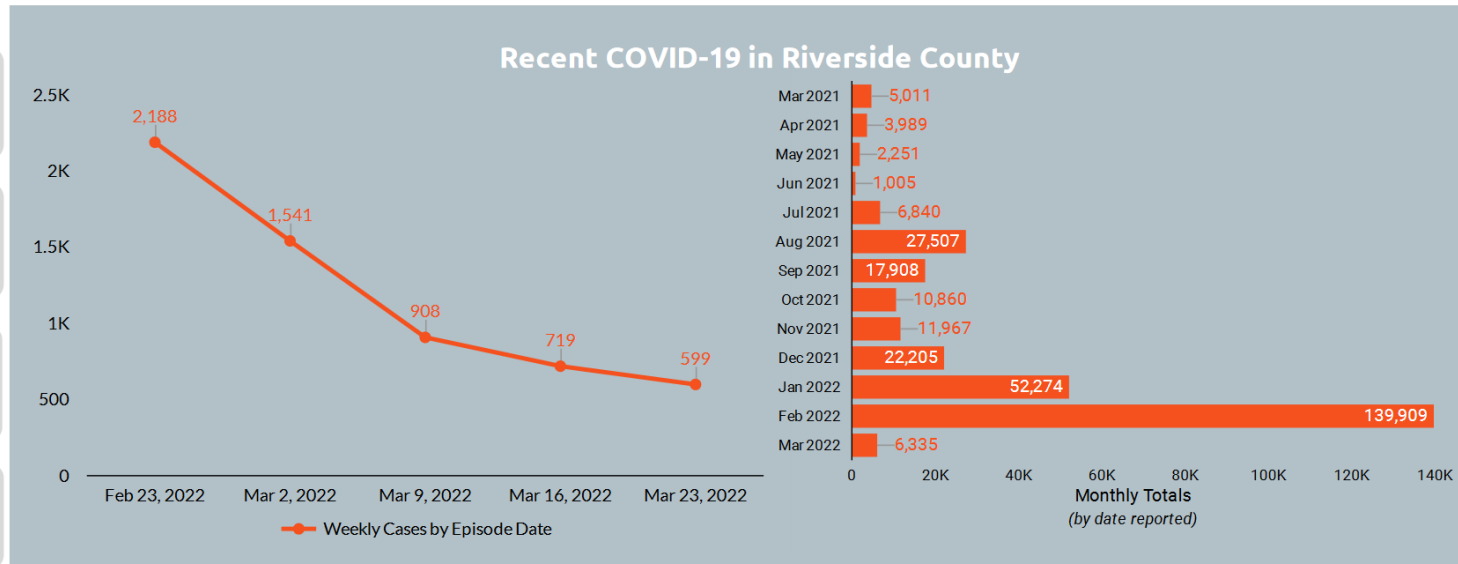
NEW DEATHS
6

TOTAL RECOVERED
588,652

PROBABLE CASES*
24,568

CURRENT HOSPITALIZED (includes ICU)
52

CURRENT ICU
9



RCCD COVID-19 Dashboard

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

3/25/2022
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	154,793,363	8,476,399	6.8%	13,961	1.3%
RIVCO	6,177,027	590,060	11.9%	477	1.6%
RCCD	110,740	899	3.1%	6	2.0%

California

RIVCO

RCCD

3/25/2022
Cases Updated
3/25/2022
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>

3/25/2022

RIVCO/ CA Updated



RCCD COVID-19 Positivity Rate

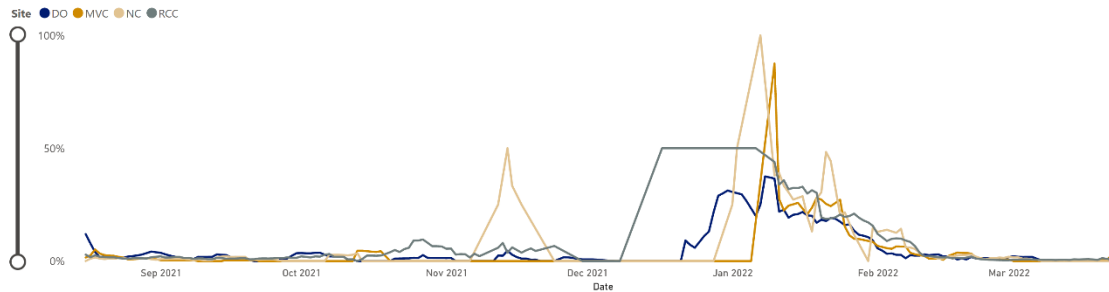
RCCD data is derived from Cleared4 and California and Riverside County Data is derived from California Health and Human Services Open Data Portal

type: Employee Student Visitor

Site: DO MVC NC RCC

3/25/2022
RCCD Cases Updated

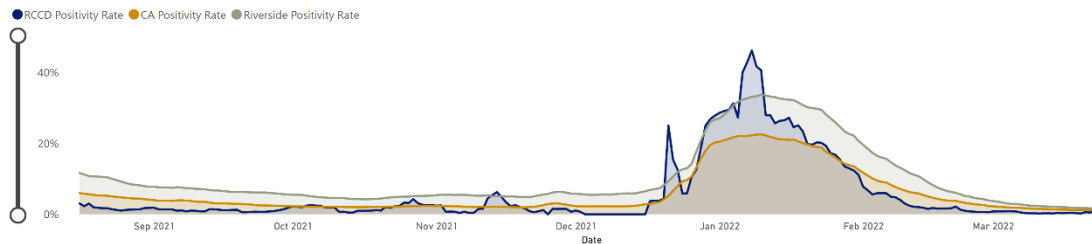
RCCD Positivity Rate by COL (Rol Avg Past 7-Days)



110,615
RCCD COVID Test To...

3383
RCCD Positives

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



0.7%
RCCD vs Ca Rate Dif

0.5%
RCCD vs Riv County Rate Dif



Weather

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

Latest hazard threat table:

<https://www.wrh.noaa.gov/sqx/event/dsstable.php>

Breezy and Cool this Weekend with a Significant Warm Up Next Week

KEY POINTS

- Breezy in the mountains and coastal waters Sunday, especially afternoon and evening
- Well above average temperatures expected next week

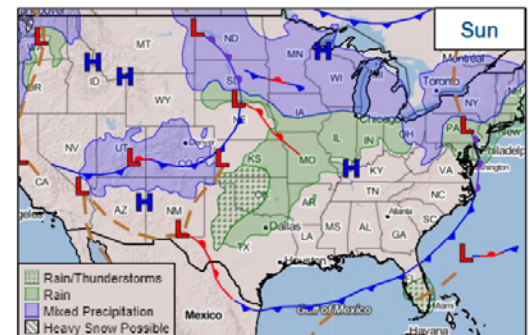
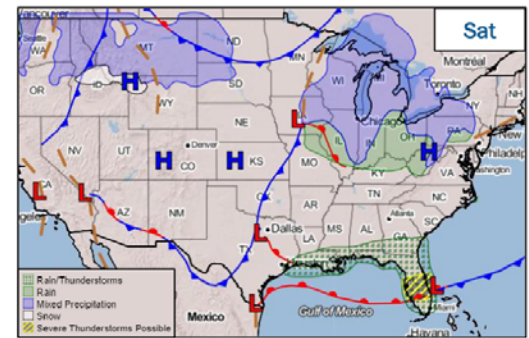
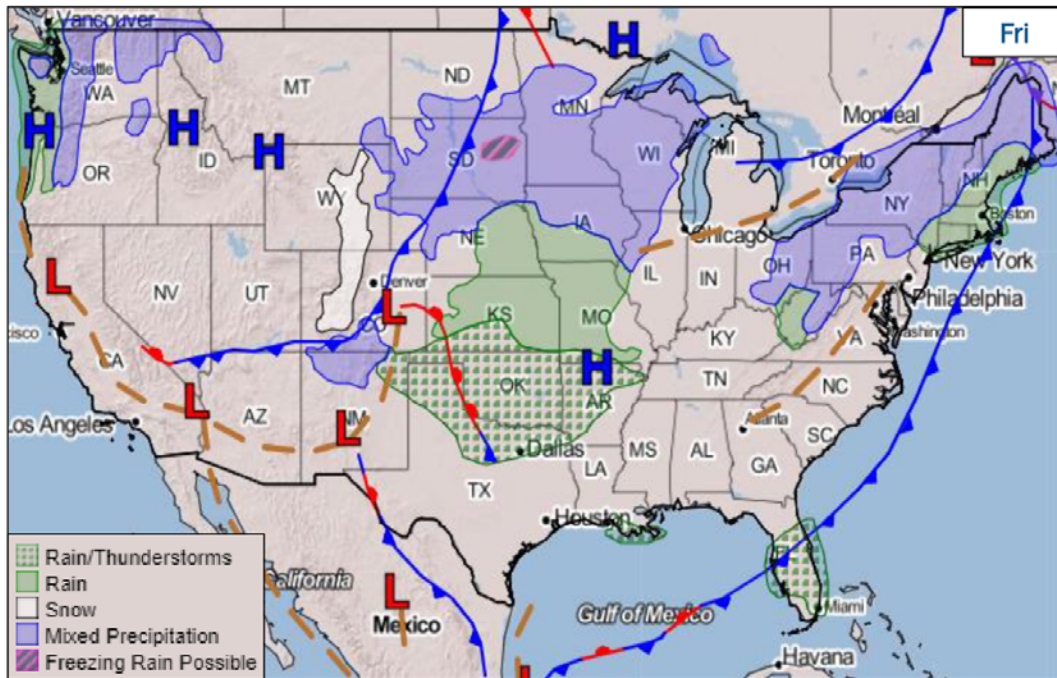
WEATHER RISK OUTLOOK

Risk levels incorporate potential impacts from weather hazards and likelihood of occurrence for a reasonable worst case scenario.

	Sat 4/2	Sun 4/3	Mon 4/4	Tue 4/5	Wed 4/6	Thu 4/7	Fri 4/8
San Diego Marine		Wind					
Orange/San Diego Beaches					Surf		
San Diego Coast San Diego, Oceanside					Heat	Heat	Heat
San Diego Valleys Alpine, Escondido, Ramona					Heat	Heat	Heat
San Diego County Mtns Mt Laguna, Julian, Palomar Mt		Wind					
San Diego Deserts Anza Borrego, Ocotillo Wells		Wind	Heat	Heat	Heat	Heat	Heat
Orange County Coast Laguna and Huntington Beaches					Heat	Heat	Heat
Orange County Inland Anaheim, Irvine					Heat	Heat	Heat
Santa Ana Mountains Silverado, Santiago Peak							
Inland Empire Ontario, Riverside					Heat	Heat	Heat
Riverside County Mtns Mt San Jacinto, Idyllwild		Wind					
Coachella Valley Palm Springs, Indio		Wind	Heat	Heat	Heat	Heat	Heat
San Bernardino Mtns Wrightwood, Big Bear		Wind					
High Deserts Victorville, Lucerne Valley		Wind		Heat	Heat	Heat	Heat
Risk Levels	Little to None	Minor	Moderate	Major	Extreme		

DETAILS

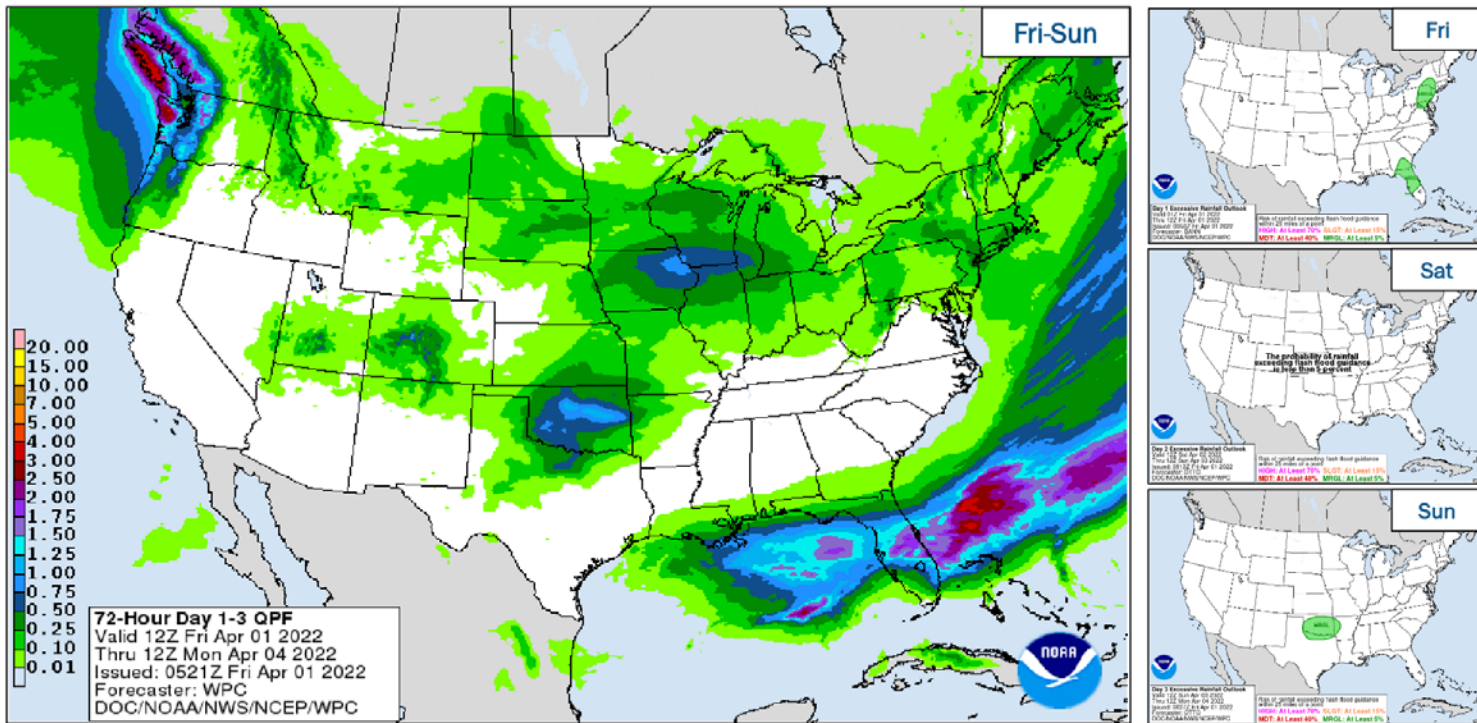
National Weather Forecast



FEMA

National Watch Center

Precipitation & Excessive Rainfall



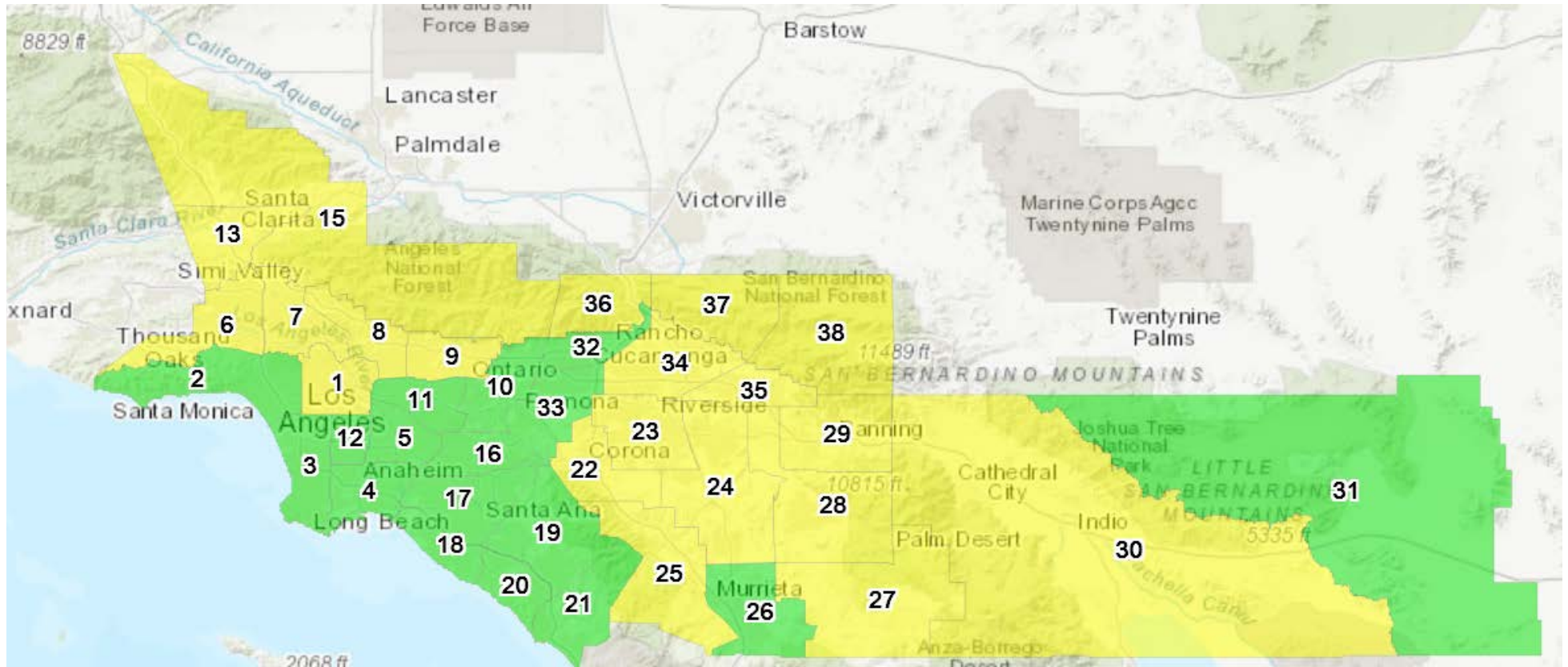
FEMA

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)