DAILY HIGHLIGHTS

Globally, COVID-19 cases have surpassed 29.73 million with more than 937,000 deaths.

The total number of cases in the U.S. increased from 6,571,867 as reported on Wednesday 9/16/2020 to 6,613,331 reported today. The number of deaths in the U.S. increased from 195,053 to 196,277.

The Assistant Secretary for Preparedness (ASPR) TRACIE and ASPR’s Pediatric Centers of Excellence are collaborating on a webinar series focused on the impact of the COVID-19 pandemic on children. The first webinar is focused on child health and wellness. Panelists will discuss resumption of routine care, missed immunizations and lead poisoning screening, sleep, and child neglect and abuse. The webinar will take place Wednesday, September 30, from 1:30-2:45 PM ET. Register HERE.

Governor Gavin Newsom announced that Washington and Oregon, members of the Western States Pact, will participate with California in piloting a project to test promising exposure notification technology. These states join other members of the Western States Pact, Colorado and Nevada, along with states and universities across the country, in piloting this technology. To read the full article, visit HERE.

There has been a large increase in the need for healthcare personal protective equipment (PPE) and specialty supplies due to the COVID-19 pandemic. This increase in demand has led to shortages in PPE and changes in how PPE is used and optimized. ASPR TRACIE, in collaboration with the COVID-19 Healthcare Resilience Working Group, is hosting this webinar to highlight PPE preservation strategies, trends, challenges, and lessons learned/promising practices. Presenters from the public and private sectors will discuss strategies to optimize the healthcare supply of respirators and PPE, such as implementing crisis capacity strategies, respirator and mask testing programs, disinfection and decontamination procedures, and acquisition and distribution policies. The webinar will take place Thursday, September 24, 2020 from 2:30-4:00 PM ET. Register for the webinar HERE.

UNITED STATES

COVID-19: U.S. at a Glance*  
- Total cases: 6,613,331  
- Total deaths: 196,277  
- Jurisdictions reporting cases: 55 (50 states, District of Columbia, Guam, Puerto Rico, the Northern Mariana Islands, and the U.S. Virgin Islands)

*As of April 14, 2020, CDC case counts and death counts include both confirmed and probable cases and deaths. This change was made to reflect an interim COVID-19 position statement issued by the Council for State and Territorial Epidemiologists on April 5, 2020. The position statement included a case definition and made COVID-19 a nationally notifiable disease.

A confirmed case or death is defined by meeting confirmatory laboratory evidence for COVID-19.

A probable case or death is defined by:
- i) meeting clinical criteria AND epidemiologic evidence with no confirmatory laboratory testing performed for COVID-19; or ii) meeting presumptive laboratory evidence AND either clinical criteria OR epidemiologic evidence; or iii) meeting vital records criteria with no confirmatory laboratory testing performed for COVID-19.

State and local public health departments are now testing and publicly reporting their cases. In the event of a discrepancy between CDC cases and cases reported by state and local public health officials, data reported by states should be considered the most up to date.

National Laboratory Testing Data
- Total tests reported: 100,269,291
- Positive tests reported: 8,166,086
- Percent of positive tests: 8%
CALIFORNIA

As of September 16, 2020, there were a total of 766,201 positive cases and 14,721 deaths in California.

Ages of all confirmed positive cases:
- Age 0-17: 78,506 cases
- Age 18-49: 459,903 cases
- Age 50-64: 144,721 cases
- Age 65 and older: 82,148 cases
- Unknown/Missing: 923 cases

Gender of all confirmed positive cases:
- Female: 386,895 cases
- Male: 372,752 cases
- Unknown: 6,554 cases

Lab tests reported statewide: 13,080,037

Twenty-five public health labs in California are testing samples for COVID-19. These labs include the California Department of Public Health's Laboratory in Richmond, Alameda, Butte, Contra Costa, Fresno, Humboldt, Imperial, Long Beach, Los Angeles, Monterey, Napa-Solano-Yolo-Marin (located in Solano), Orange, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Clara, Shasta, Sonoma, Tulare and Ventura County public health laboratories. The Richmond Laboratory will provide diagnostic testing within a 48-hour turnaround time. This means California public health officials will get test results sooner, so that patients will get the best care.

Click HERE to find your nearest testing site.
CONFIRMED CASES AND DEATHS BY COUNTY

**Counties with most reported cases**

- Los Angeles: 256,101
- Riverside: 55,811
- San Bernardino: 50,509
- Orange: 50,414
- San Diego: 43,447

**Counties with most reported deaths**

- Los Angeles: 6,303
- Riverside: 1,136
- Orange: 1,111
- San Bernardino: 838
- San Diego: 748

For an interactive version of this map online, click [HERE](#).

**766,201 Cases** in California

**14,721 Deaths** in California

**New Confirmed Cases in California by Date**

- As of 9/17/2020. Source: CDPH

**New Confirmed Deaths in California by Date**

- As of 9/17/2020. Source: CDPH
American Indians and Alaska Natives account for 0.5% percent of the population, 0.2% of COVID-19 cases, and 0.3% of deaths in California. This includes a total of 1,340 cases and 42 deaths among American Indian and Alaska Native people in California.

Latinos and African Americans are dying at disproportionately high rates in California. The proportion of COVID-19 deaths in Latinos is 1.3 times their population representation across all adult age categories.

Note: 31% of cases and 1% of deaths are of unknown race/ethnicity. As of 9/17/2020. Source: CDPH
Two sources for tracking American Indian and Alaska Native (AIAN) cases reported in California

Data from the Indian Health Service (IHS) include positive cases reported by Tribal and Urban Indian Health Programs.

Data from California Department of Public Health (CDPH) include all positive cases of AIAN diagnosed in California.

Age and gender distribution of confirmed COVID-19 cases and deaths in California

<table>
<thead>
<tr>
<th>Age Group</th>
<th>% Cases</th>
<th>% Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age 0-17 (23%)</td>
<td>10%</td>
<td>0%</td>
</tr>
<tr>
<td>Age 18-49 (44%)</td>
<td>60%</td>
<td>7%</td>
</tr>
<tr>
<td>Age 50-64 (18%)</td>
<td>19%</td>
<td>19%</td>
</tr>
<tr>
<td>Age 65+ (16%)</td>
<td>11%</td>
<td>74%</td>
</tr>
</tbody>
</table>

Note: Demographic percentages may not add up to 100% due to rounding. As of 9/17/2020. Source: CDPH

California COVID-19 threat level: **Slow disease growth**

**DAILY NEW CASES**

8.7 PER 100K

COVID NOT CONTAINED, BUT AT LOW LEVELS

**INFECTION RATE**

0.85

ACTIVE CASES ARE DECREASING

**POSITIVE TEST RATE**

3.6%

INDICATES ADEQUATE TESTING

As of 9/17/2020. Source: COVID Act Now
American Indian and Alaska Native (AIAN) data reported by California to the Centers for Disease Control and Prevention (CDC)

CDC data show that AIAN in California are testing positive for COVID-19 at rates lower than their proportion of California’s population and dying at rates that are higher. This includes a total of 3,016 cases and 86 deaths.
COVID-19 testing information from patients seen at a Tribal or Urban Indian Health Program in California

Note: This map shows patients by the regional location of the clinic where they were tested and NOT by the residence of the patients.

Number of positive cases identified by region

- **GREATER LOS ANGELES**
  - Positive: 4
  - Negative: 155

- **INLAND DESERT**
  - Positive: 208
  - Negative: 1,560

- **DELTA AND GOLD COUNTRY**
  - Positive: 86
  - Negative: 1,809

- **CENTRAL COAST**
  - Positive: 243
  - Negative: 2,718

- **CENTRAL VALLEY**
  - Positive: 169
  - Negative: 1,474

- **NORTH COAST AND CASCADES**
  - Positive: 345
  - Negative: 7,220

As of 9/14/2020. Source: IHS
American Indian and Alaska Native (AIAN) COVID-19 cases reported by local public health departments in selected California counties

Tribes do not need to issue a state of emergency to access FEMA resources.
Casino Closures (n=1)
1. Robinson Rancheria Resort and Casino

Casino Openings (n=65)
1. Agua Caliente Casino Palm Springs
2. Agua Caliente Resort Casino Spa Rancho Mirage
3. Augustine Casino
4. Barona Valley Ranch Resort and Casino
5. Bear River Casino
6. Black Oak Casino
7. Blue Lake Casino
8. Cache Creek Casino Resort
9. Cahuilla Casino
10. Casino Pauma
11. Cher-Ah Heights Bingo and Casino
12. Chicken Ranch Bingo and Casino
13. Chukchansi Gold Resort & Casino
14. Chumash Casino Resort
15. Colusa Casino Resort
16. Coyote Valley Casino
17. Desert Rose Casino
18. Diamond Mountain Casino
19. Eagle Mountain Casino
20. Elk Valley Casino
21. Fantasy Springs Resort and Casino
22. Feather Falls Casino
23. Garcia River Casino
24. Gold Country Casino and Hotel
25. Golden Acorn Casino
26. Graton Resort & Casino
27. Hard Rock Hotel & Casino Sacramento at Fire Mountain
28. Harrah's Northern California
29. Harrah's Resort Southern California
30. Havasu Landing Resort and Casino
31. Jackson Rancheria Casino
32. Jamul Casino
33. Konocti Vista Casino and Bingo
34. Lucky 7 Casino
35. Lucky Bear Casino
36. Mono Wind Casino
37. Morongo Casino, Resort & Spa
38. Pala Casino Resort
39. Pala Casino Resort and Spa
40. Pechanga Resort and Casino
41. Pit River Casino
42. Quechan Resort Casino
43. Rain Rock Casino
44. Red Earth Casino
45. Red Fox Casino
46. Redhawk Casino
47. Redwood Hotel Casino
48. River Rock Casino
49. Rolling Hills Casino
50. Running Creek Casino
51. San Manuel Indian Bingo and Casino
52. San Pablo Lytton Casino
53. Sherwood Valley Casino
54. Soboba Casino
55. Spotlight 29 Casino
56. Sycuan Resort and Casino
57. Table Mountain Casino
58. Tachi Palace Hotel and Casino
59. Thunder Valley Casino Resort
60. Tortoise Rock Casino
61. Twin Pine Casino
62. Valley View Casino
63. Viejas Casino
64. Win-River Casino
65. Winnemuhah Winn’s Casino

Updated 09/15/2020
Beginning in early September 2020, some Tribal early childhood education programs, such as Head Start, will begin reopening either in person, virtually, or in combination of both (i.e. hybrid program). Please check with local school districts, Tribes, or Lead Agencies for start dates.

If you have any questions or concerns please contact: Vanesscia Cresci at vcresci@crihb.org or Aurimar Ayala at aayala@crihb.org