COVID-19 MODELING April 2, 2020

Overview

- Goal: Develop multiple forecasting perspectives
 - Oliver Wyman Helen Leis
 - Columbia University Professor Jeffrey Shaman, Ph.D.
 - Northeastern University Professor Alessandro Vespignani, Ph.D.

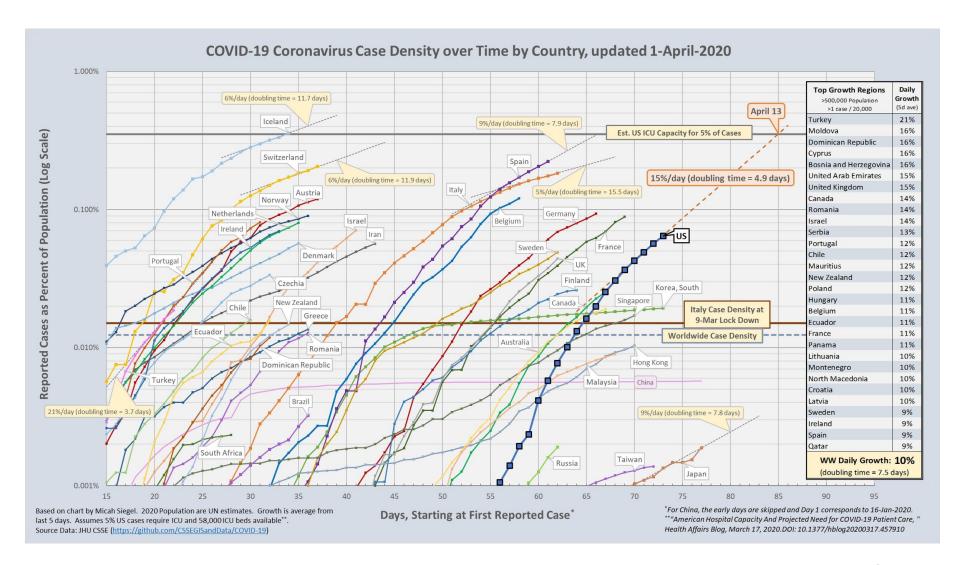
• Forecasting is imprecise:

- Focus on the near term: Forecasting is much less predictable the further out you model
- <u>Focus on ranges rather than specifics:</u> Forecasts are represented as a range of possible outcomes (i.e., likely, best & worst)
- <u>Consistent refinement:</u> Continually updating with new data and new assumptions
- <u>Appropriate Perspective</u>: Ultimately forecasts are developed for planning purposes and are not representative of definitive outcomes

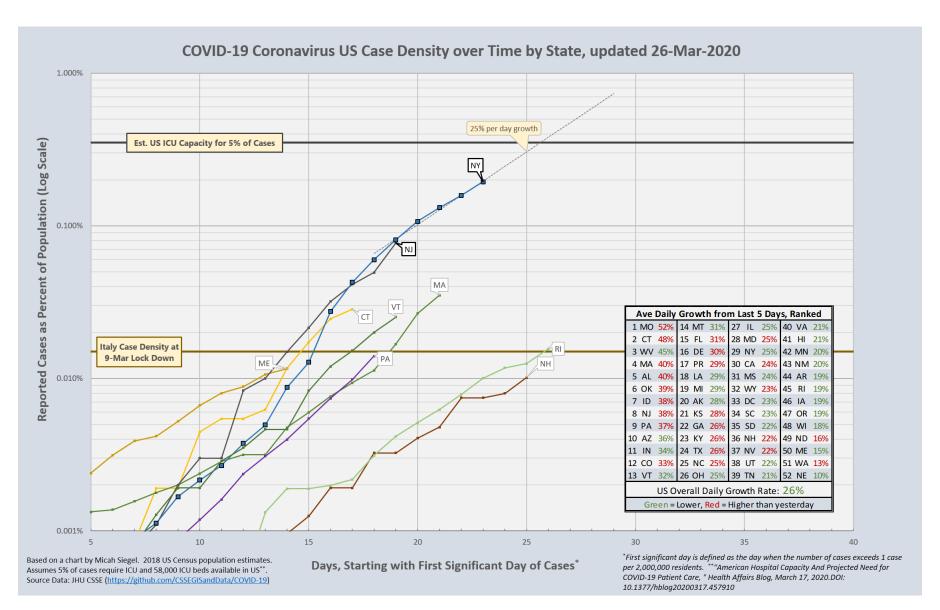
Ultimate Purpose of Forecasting: Medical Surge Planning

- Tracking the available staffed hospital beds
- Tracking the available ICU beds
- Tracking the available ventilators
- Tracking the supply of PPE

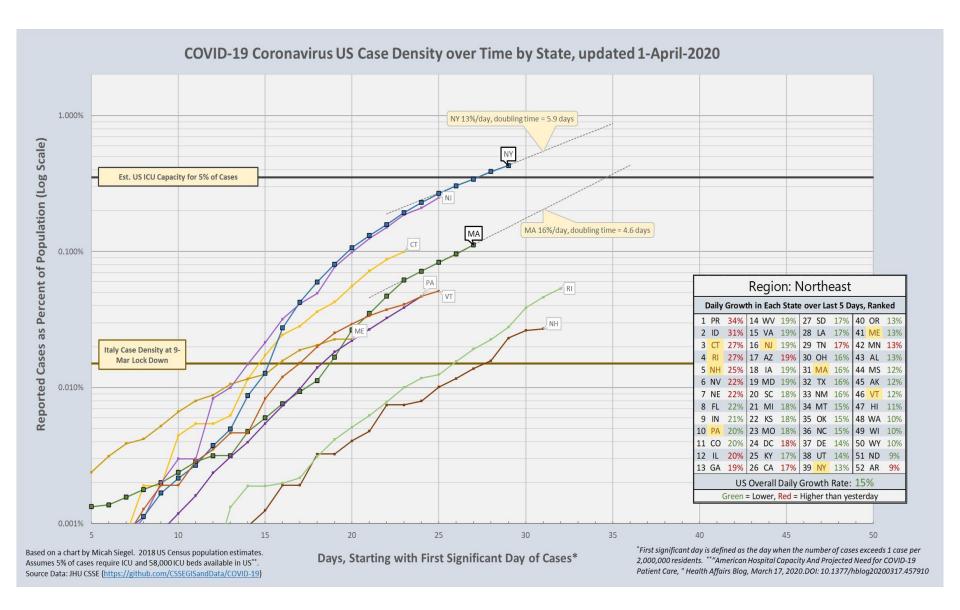
Comparison of Growth by Country



VT's Growth Rate Compared to Northeast States

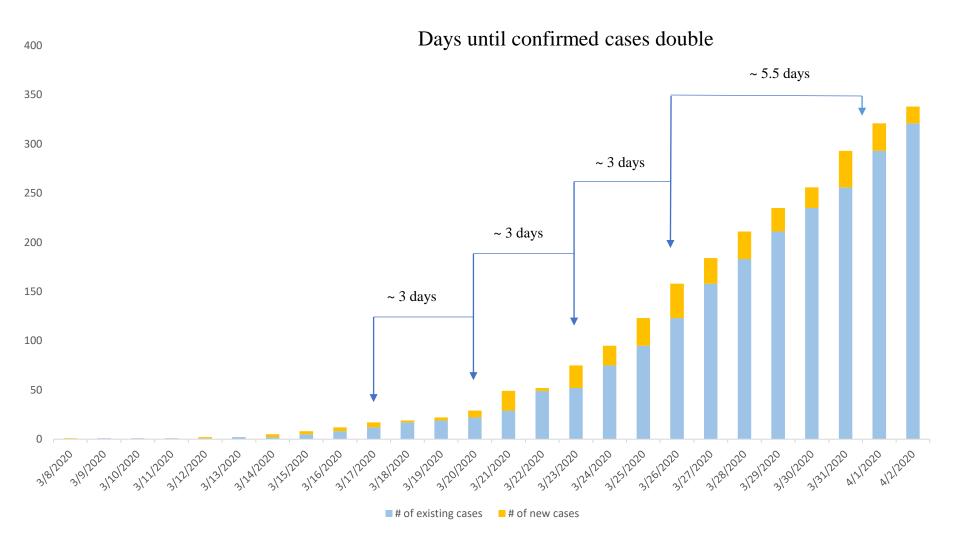


VT's Growth Rate Compared to Northeast States



Vermont's Daily COVID-19 Confirmed Case Growth

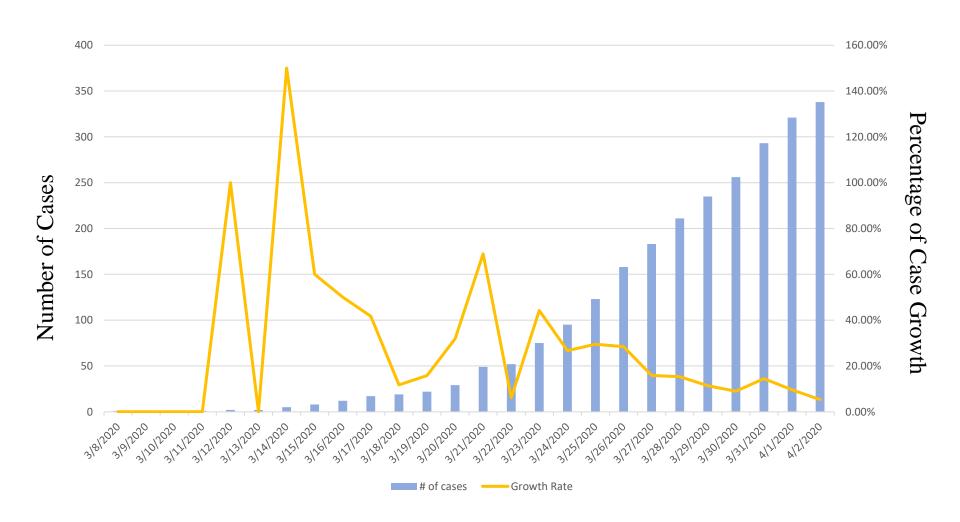
Source: Vermont Department of Health



Vermont's Daily Growth Rate Compared to Total Cases

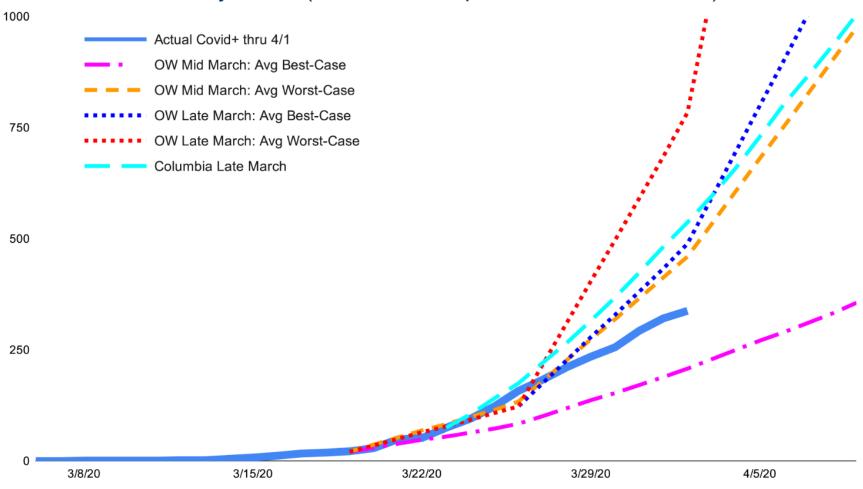
Source: Vermont Department of Health

Note: This chart notes the stability of Vermont's case growth rate as we approached and surpassed 100 confirmed cases.



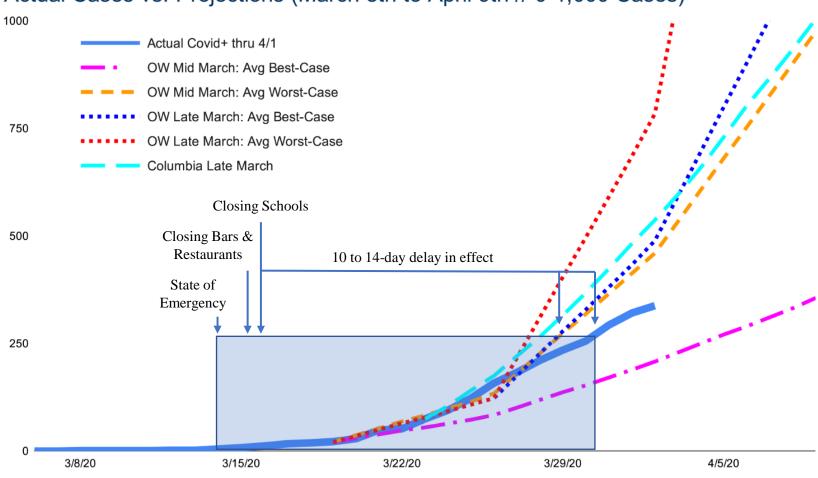
Close Look at Forecasting vs. Actual Case Count

Actual Cases vs. Projections (March 8th to April 9th // 0-1,000 Cases)



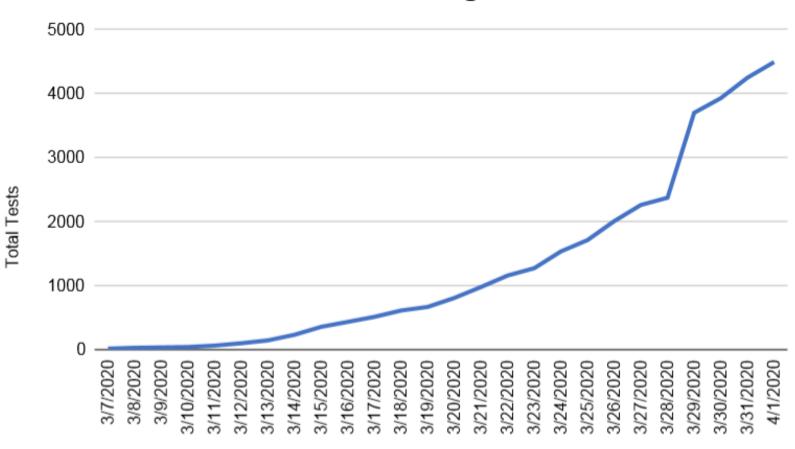
Days Until the Impact of Social Distancing is Seen

Actual Cases vs. Projections (March 8th to April 9th // 0-1,000 Cases)



Total Vermont Testing Over Time

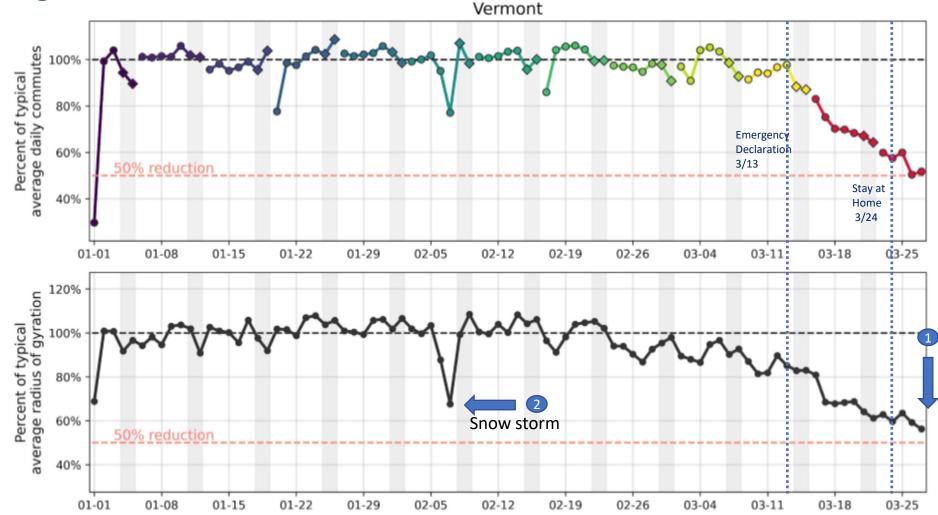
Total COVID-19 Testing - Vermont



Vermont's Mobility Reductions

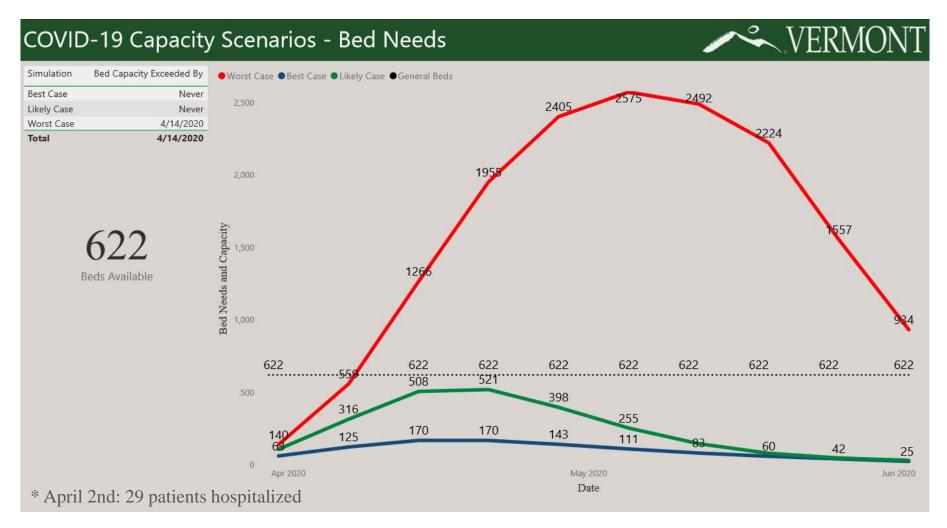
Key Points:

- 1 50% Reduction in physical movement with mitigation policies in place
- 2 Dip on Feb 7 is the snowstorm; this means people are moving around LESS than they did during the big snowstorm → this is very good



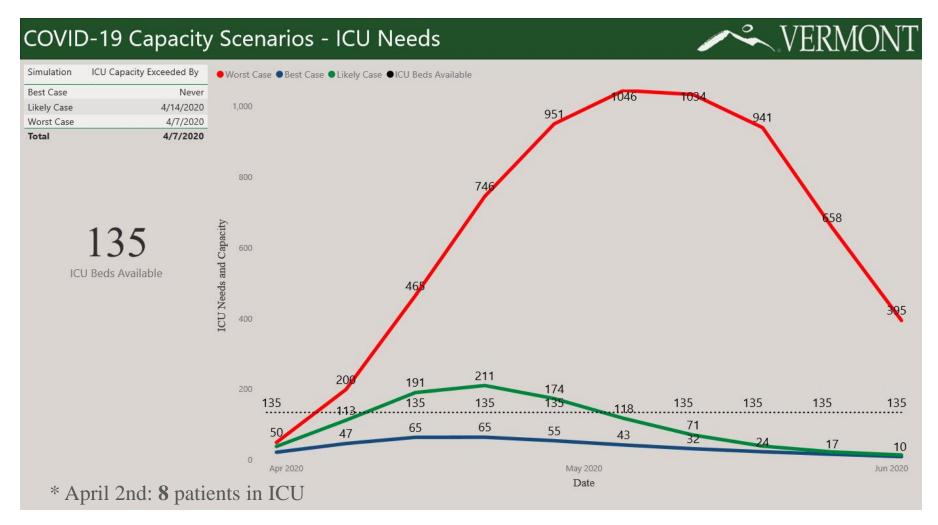
Source: Dr. Vespignani, Northeastern University

Hospitalization Needs – Likely, Best & Worst Note – Late March Trajectory



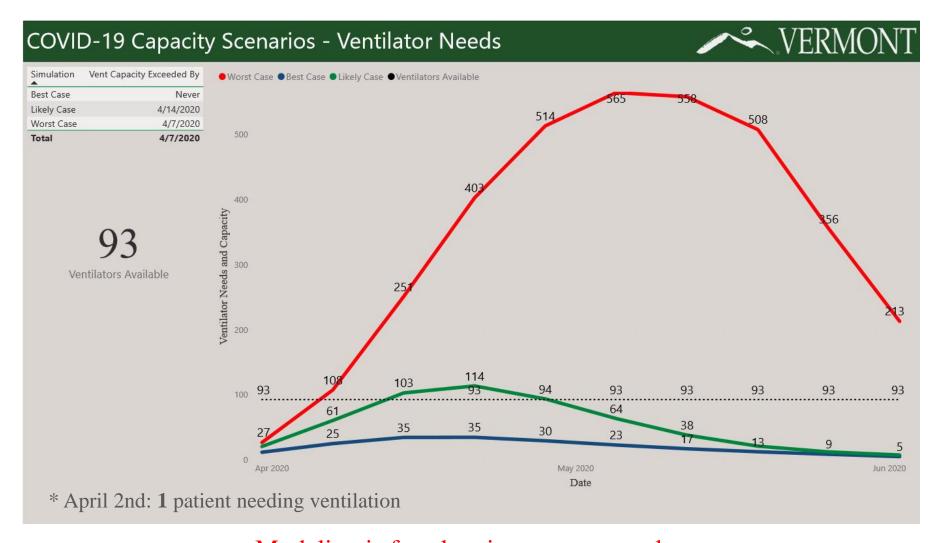
Modeling is for planning purposes only Not representative of definitive outcomes.

ICU Needs – Likely, Best & Worst Note – Late March Trajectory



Modeling is for planning purposes only Not representative of definitive outcomes.

Ventilator Needs – Likely, Best & Worst Note – Late March Trajectory



Modeling is for planning purposes only Not representative of definitive outcomes.



State Surge Framework

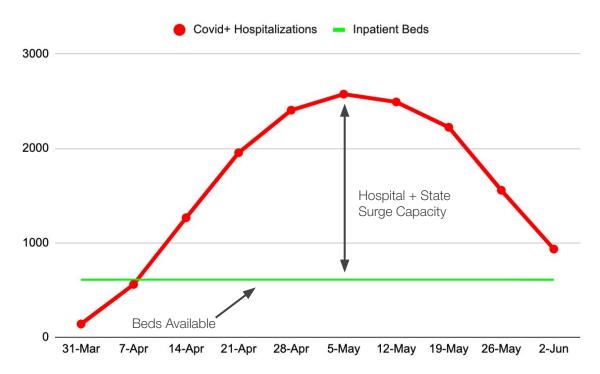
April 2, 2020

Inpatient Bed Gap - Planning for Worst Case



Current worst case estimates suggest Vermont will need 100s of additional beds at the height of surge.

However, current modeling does <u>not</u> point to worst case; flexibility is required



Modeling is for planning purposes only | Not representative of definitive outcomes

Overall Surge Capacity Framework



Steps	Description	Lead
1	Hospital Maximum : Hospitals plan for their maximum capacity for staffed beds, ICUs, vents, PPE, etc, within their health service area.	Hospitals
2	State Medical Maximum : Working with hospitals, State establishes targeted alternate care sites to address the projected state medical maximum surge.	State
3	Special Populations : Special consideration for COVID-19 care is needed for some populations, e.g., mental health. State is determining what additional resources are needed with some plans already underway, such as Woodside.	State
4	Isolation Sites : These facilities are for certain vulnerable populations such as homeless or others with special needs; those who are Covid-19+, recovering or exposed, but do not require hospitalization; and those that do not have a safe place to remain isolated (e.g., Goddard College). The State is working with municipalities and partners to decide the best options for Isolation Sites.	State Munis Community Partners

Medical Surge Facilities



Location	Туре	Beds	Med Lead	Support Lead
Essex Junction: Champlain Valley Expo	State	400	VTNG	VTNG
Rutland: Spartan Arena	State	150	RRMC	VTNG
Barre: Barre Civic Center	Regional	50	CVMC	State
St. Albans: Collins Perley	Regional	50	NMC	State
Burlington: UVM Patrick Gymnasium	Regional	150	UVMMC	State
Brattleboro: Brattleboro Memorial	Staged Surge Trailer	50	BMH	State
Windsor: Mt. Ascutney	Staged Surge Trailer	50	MAH	State

⁺ State has two portable hospital units to be deployed as needed.

Site Staffing Needs



Туре	Options
Medical	FQHCs; Medical Reserve Corp; medical and nursing faculty from higher ed; student health staff and school nurses; VTNG; med or nursing students
Mental health	FQHCs; Medical Reserve Corp; social service workers
Security	Retired LEOs; VTNG; State personnel; volunteers
Buildings & grounds	State BGS; VTNG; volunteers
Logistics & food	VTNG; State personnel; volunteers

https://www.vermont.gov/volunteer

