



5-Star State Certification Program **Zoom Session Q&A (12.15.2020)**

Questions & Answers in order of occurrence; this is merely a summary from the discussion, for the full discussion please go to the time stamp with each question in the video recording.

Were charts from PowerPoint comparing Colorado data with other states adjusted for population? [39:50]

Data is based on incidence rate, per 100,000 (needs to be confirmed). This data came from the CDC compare state tracker tool: https://covid.cdc.gov/covid-data-tracker/#compare-trends_newcases.

How might this change as we enter ski season, with influx of others from across US? [40:30]

- It is being considered in modeling with travel/vaccine for effects.
- Not necessarily concerned with travel, rather transmission that comes with travel. Travel is a process measure, we are more concerned with outcome measures, such as the impact on cases, hospitalizations, and testing.
- Impressed with Winter Park installing a reservation system to better manage flow. This is still a learning process on how to keep everyone safe. Skiing seems to be safe, but the before/after activities are more concerning, especially with tourists. Communities are sophisticated in their responses, so the state is watching the results of these types of programs (such as reservation systems).

Red does seem to be effective, but based on presentation, orange does not seem to be as effective. Is there concern that cases would increase as counties move back to orange? [41:59]

- This is a conversation each local government needs to have. Red Level has suppressive effect which is supported by numerous studies on the risks of various environments. Outbreak data is not effective in explaining where transmission occurs since only 1/5 of cases are traced. Studies have consistently shown that indoor environments, without masks are where most transmission occurs, although it is very difficult to trace. Modeling & boot-leather epidemiology shows that people being indoors, with members of different households are a common point of transmission.
- Red level is going to get cases down more quickly, but this program might make more sustainable change, so it is up to each local government on what the best approach is. It should be a strategic, community decision.
- Safety precautions may be enough to counteract since requirements for certified businesses are greater/stricter. Hopefully, that will be a benefit of the lessened control at the orange level.
- Implementation & compliance are also an important aspect.

What is entailed with the Written Reports [44:30]

A formed spreadsheet populated with which businesses have been certified.

Two-week decline of metrics from what date? [44:45]

This is not a specific date; when the county applies there must have been a sustained decline over the last two weeks. Whenever the decline starts, start the clock for the application.

What is the definition of Sustained Decline? Is it a statistically significant decrease? How is Sustained Decline measured? [45:20]

Average of 10 days over 14-day decline. Local Public Health Directors will be receiving updates on county metrics for assessment (cases, hospitalizations, & percent positivity). The point in time measure is helpful at orange/yellow levels. At red level, considering the trend line. Charts will be made available regularly to show this data.

For Counties metrics to apply, is it one of the three metrics? [47:15]

For a county to qualify, all three metrics (incidence, percent positivity & hospitalizations) must be at or lower than the dial level.

At what point will percentage of vaccinations affect the dial levels? Or will it naturally occur as herd immunity is reached? [47:58]

Infection rate will decrease because transmissions will decrease as the vaccine is distributed. How many people are sick & getting hospitalized should naturally decrease and should show in the data.

What is considered low or declining positivity? As level red county, numbers are improving, positivity is in orange but bouncing from 8% to 11%, will that qualify? Does it need to be below 10% or just a sustained decline? [48:30]

- A 5-10% positivity rate is less concerning
- Above 10% positivity rate, need to see that it is decreasing

Can a municipality apply without a county? [49:10]

Yes, but that is not preferred because of the economy of scale to run the program. We are hoping that there is a county or regional approach, but municipal applications will be accepted.

How long would certification be valid for? [49:58, check response with Daphne]

- So long as necessary metrics are maintained.
- Certifications would be invalid, if:
 - for example, you're in yellow and metrics jump into orange. If county is going to orange (skipping 2 levels), must operate at orange level or
 - 90% ICU Capacity...resources need to be conserved for disease control & hospital care

Do complaints need to go to CDPHE or the County administering program? [51:03]

- Initial thought is all complaints would go to CDPHE and CDPHE would communicate with the county.
- However, if a process for the county to accept complaints is already in place, CDPHE would work with that county on this process, so include this background in your application.
- Concern is to make sure there are checks/balances and that CDPHE is seeing complaints in order to support the county and the county isn't overwhelmed with non-essential complaints.

What constitutes citation for non-compliance? Ex. Food inspection report [52:00]

- Businesses that have gotten compliance check and actively (knowingly & intentionally) not complying.
- If a situation is being mitigated, the business will continue to operate. Day-to-day compliance checks are good to make sure system is working.

When will clock start for those business that have demonstrated ill-will toward compliance?

[53:05]

Intention that there would not be an official start date, but this could be tool to get businesses in compliance; include this idea in your application to start conversation.