



FOR IMMEDIATE RELEASE

January 27, 2021

Dallas County Reports 1,671 New Positive 2019 Novel Coronavirus (COVID-19) Cases and 40 Deaths, Including 274 Probable Cases

DALLAS -- As of 1:00 pm January 27, 2021, Dallas County Health and Human Services is reporting 1,671 additional positive cases of 2019 novel coronavirus (COVID-19) in Dallas County, 1,397 confirmed cases and 274 probable cases. There is a cumulative total of 222,409 confirmed cases (PCR test). There is a cumulative total of 29,638 probable cases (antigen test). A total of 2,092 Dallas County residents have lost their lives due to COVID-19 illness.

Dallas County Health and Human Services is providing initial vaccinations to those most at risk of exposure to COVID-19 and 23,794 doses of COVID-19 vaccine have been administered at the Fair Park mega-vaccine clinic, which started operations on Monday, January 11. With the additional allotment from the State of Texas for Week 7, there are a little over 4,000 doses remaining for the week.

The additional deaths being reported today include the following:

- A woman in her 20's who was a resident of the City of Dallas. She expired in hospice and did not have underlying high risk health conditions.
- A woman in her 20's who was a resident of the City of Dallas. She expired in an area hospital ED and had underlying high risk health conditions.
- A man in his 30's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 40's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 50's who was a resident of the City of Duncanville. He was found deceased at home and had underlying high risk health conditions.
- A woman in her 50's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 50's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Garland. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 60's who was a resident of the City of Dallas. He expired in an area hospital ED and had underlying high risk health conditions.
- A man in his 60's who was a resident of the City of Hutchins. He expired in an area hospital and had underlying high risk health conditions.
- A man in his 60's who was a resident of the City of Dallas. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Dallas. She was hospitalized in an area hospital and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Desoto. She had been critically ill in an area hospital and had underlying high risk health conditions.

- A man in his 70's who was a resident of the City of Mesquite. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of a long-term care facility in the City of Mesquite. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City or Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 70's who was a resident of the City of DeSoto. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
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- A man in his 70's who was a resident of the City of Sachse. He had been critically ill in an area hospital and did not have underlying high risk health conditions.
- A man in his 70's who was a resident of the City of Duncanville. He had been critically ill in an area hospital and had underlying high risk health conditions.
- A man in his 70's who was a resident of a long-term care facility in the City of Dallas. He had been critically ill in an area hospital and did not have underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Dallas. She expired in hospice and had underlying high risk health conditions.
- A man in his 80's who was a resident of a long-term care facility in the City of Mesquite. He expired in the facility and had underlying high risk health conditions.
- A woman in her 80's who was a resident of the City of Dallas. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 80's who was a resident of the city of Dallas. She was hospitalized in an area hospital and had underlying high risk health conditions.
- A man in his 80's who was a resident of a long-term care facility in the City of Dallas. He expired in hospice and had underlying high risk health conditions.
- A woman in her 80's who was a resident of a long-term care facility in the City of Mesquite. She expired in the facility and had underlying high risk health conditions.
- A woman in her 90's who was a resident of the City or Duncanville. She had been critically ill in an area hospital and had underlying high risk health conditions.
- A woman in her 90's who was a resident of a long-term care facility in the City of Desoto. She expired in an area hospital ED and had underlying high risk health conditions.
- A woman in her 90's who was a resident of the City of Dallas. She expired in hospice and had underlying high risk health conditions.
- A man in his 90's who was a resident of an independent living facility in the City of Dallas. He expired in hospice and had underlying high risk health conditions.
- A man in his 90's who was a resident of a long-term care facility in the City of Mesquite. He expired in the hospice and had underlying high risk health conditions.
- A man in his 90's who was a resident of the City of Dallas. He had been critically ill in an area hospital and did not have underlying high risk health conditions.

- A woman in her 90's who was a resident of a long-term care facility in the City of Mesquite. She expired in the facility and had underlying high risk health conditions.
- A man in his 90's who was a resident of a long-term care facility in the City of Dallas. He had been hospitalized and had underlying high risk health conditions.

Four cases of the SARS-CoV-2 variant B.1.1.7 have been identified in residents of Dallas County who did not have recent travel outside of the US. The provisional seven-day average of daily new confirmed and probable cases (by date of test collection) for CDC week 2 was **1,835**, which is a rate of **69.6** daily new cases per 100,000 residents. The percentage of respiratory specimens testing positive for SARS-CoV-2 remains high, with **27.5%** of symptomatic patients presenting to area hospitals testing positive in week 2 (week ending 1/16/21).

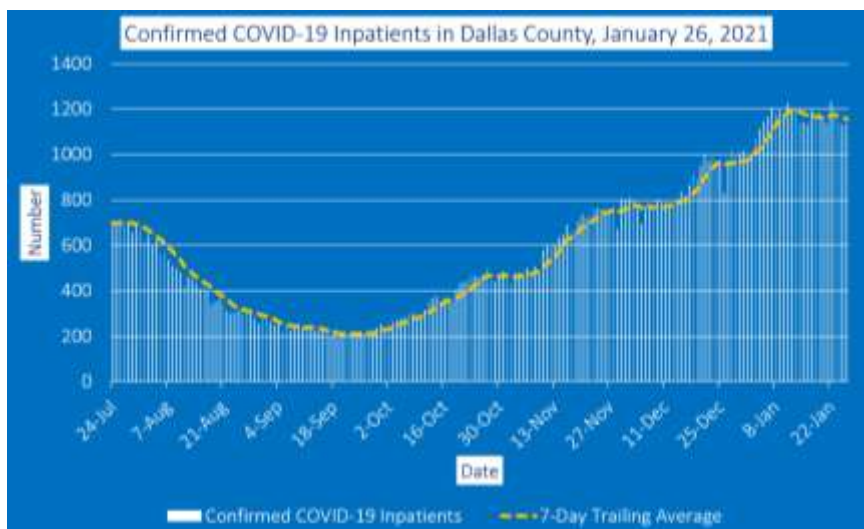
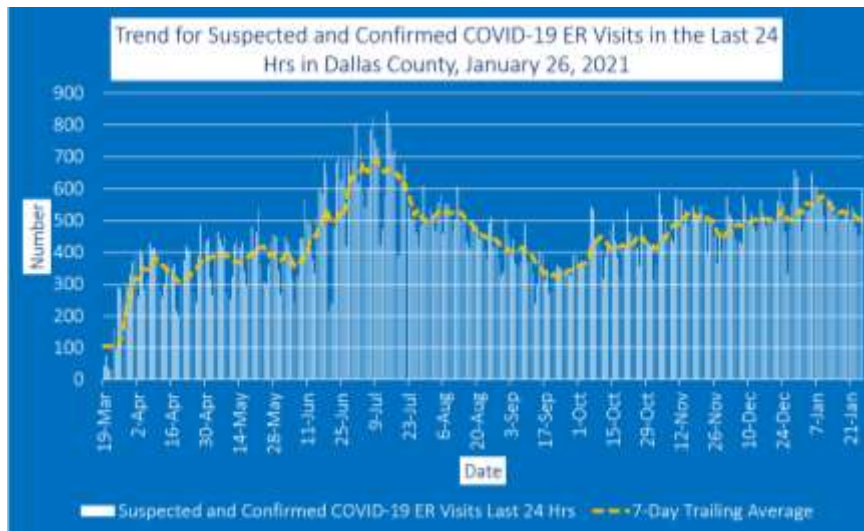
Over the past 30 days, there have been 8,567 COVID-19 cases in school-aged children and staff reported from 709 separate K-12 schools in Dallas County. One COVID-19 outbreak in a school in December originated with spread among 11 staff members, with transmission to 10 students, and subsequent additional SARS-CoV-2 infections documented among at least 13 household members of these students and staff. One death and one hospitalization occurred from this outbreak. A total of 420 children in Dallas County under 18 years of age have been hospitalized since the beginning of the pandemic, including 32 patients diagnosed with Multisystem Inflammatory Syndrome in children (MIS-C). Over 80% of reported MIS-C cases in Dallas have occurred in children who are Hispanic or Latino or Black.

There are currently 113 active long-term care facility outbreaks. A cumulative total of 3,705 residents and 2,120 healthcare workers in long-term facilities in Dallas have been diagnosed with COVID-19. Of these, 773 have been hospitalized and 417 have died. About 22% of all deaths reported to date have been associated with long-term care facilities. Twenty outbreaks of COVID-19 in congregate-living facilities (e.g. homeless shelters, group homes, and halfway homes) have been reported in the past 30 days. A cumulative total of 368 residents and 170 staff members in congregate-living facilities in Dallas have been diagnosed with COVID-19.

Of all confirmed cases requiring hospitalization to date, more than two-thirds have been under 65 years of age. Diabetes has been an underlying high-risk health condition reported in about a third of all hospitalized patients with COVID-19. New cases are being reported as a daily aggregate, with more detailed summary reports updated Tuesday and Friday evenings are available at: <https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus/daily-updates.php>.

Local health experts use hospitalizations, ICU admissions, and ER visits as three of the key indicators as part of determining the COVID-19 Risk Level (color-coded risk) and corresponding guidelines for activities during our COVID-19 response. There were 1,137 COVID-19 patients in acute care in Dallas County for the period ending on Tuesday, January 26. The number of emergency room visits for COVID-19 like symptoms in Dallas County was 600 for the same time-period, which represents around 21 percent of all emergency department visits in the county according to information reported to the North Central Texas Trauma Regional Advisory Council. Updated UTSW modeling predicts hospitalization could reach 1,600 by February 5, with cases remaining high at 2,700/day by the same date. ICU capacity remains heavily strained and hospital are still operating under surge planning. It is as important now as ever to follow public health guidance regarding masking, social distancing, and avoiding gatherings. You can find additional information on risk-level monitoring data [here](#).

On December 3, Trauma Service Area E (TSA E), which includes Dallas County and the greater Dallas-Fort Worth Metroplex, reached seven consecutive days where the percentage of COVID-19 confirmed patients in regional hospitals, as a percentage of available hospital beds, exceeded 15 percent. According to Governor Abbott's Executive Order GA-32 (GA-32), this makes TSA E an area with high hospitalizations and certain occupancy reductions are automatically triggered by reaching this threshold.





“Today we report another 1,671 COVID cases and 40 additional deaths, making this the deadliest day thus far in the battle against COVID. These deaths are a result of the high number of COVID cases that have been reported over the last several weeks. Increased deaths always follows increased infections. The decisions we make today will impact the number of COVID cases reported 10-14 days from now and the number of deaths reported at this time next month. It is up to all of us to make the small sacrifices that patriotism requires at this time to keep our community and our country as strong as possible in the battle against COVID.

We know that January and February will be our toughest months, but if we don’t lose our resolve and if we continue to wear a mask, socially distance, wash our hands frequently, avoid crowds and forgo get-togethers, the we will see improvement as more and more person are vaccinated in our community beginning in March and accelerating with each month. From the time of the first vaccine dose until the time when a person is 95% protected from COVID is about 30-43 days depending on the specific vaccine given. Therefore, the vaccine’s positive effect on our COVID numbers will be delayed for that amount of time as well.

I continue to work for more vaccine for our area and believe that we will see significant increase in vaccine in the coming weeks. Therefore, it is very important that we do our part to outreach and continue to sign up people on the Dallas County list and on other North Texas COVID vaccination lists. A link to all of those lists is below. You need not have special equipment to help your neighbors sign up the registration lists for these mass vaccination hubs and all of the lists are open to any Texan as part of the hub agreement with the State of Texas. A person living in one county can sign up on the list in another and you need not live in any particular city.

Any elected, civic, faith, or community leader can organize their own registration outreach effort or join an existing one. Outreach efforts simply require a location, an internet connection, some laptops, and a willingness to help neighbors sign up on the vaccination registry who otherwise are unable to sign up on their own through the internet or through the phone hotline. That registry must continue to grow if we are to keep up with the vaccines that I believe the Biden Administration will begin delivering in the coming weeks,” said Dallas County Judge Clay Jenkins.

All Dallas County COVID-19 Updates and Information can be found here:

<https://www.dallascounty.org/covid-19/> and all guidance documents can be found here: <https://www.dallascounty.org/covid-19/guidance-health.php>

Specific Guidance for the Public:

- [Dallas County COVID-19 Related Health Guidance for the Public](#)
- [Dallas County Measures for Protecting An Institution’s Workforce from COVID-19 Infection: Employer/Employee Guidance](#)
- [Dallas County Guidance for Individuals at High-Risk for Severe COVID-19](#)

The Centers for Disease Control and Prevention (CDC) recommends taking everyday preventive actions to help prevent the spread of respiratory diseases, including:

- Avoid close contact outside your home: Put 6 feet of distance between yourself and people who don't live in your household.
- Cover your mouth and nose with a cloth face cover when around others and continue to keep about 6 feet between yourself and others. The cloth face cover is not a substitute for social distancing.
- Stay home when you are sick, except to seek medical care
- Wash your hands often and with soap and water for at least 20 seconds and help young children to do the same. If soap and water are not available, use an alcohol-base hand sanitizer with at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Clean and disinfect frequently touched objects and surfaces daily using a regular household cleaning spray or wipes.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash. If you do not have a tissue, use your sleeve, not your hands. Immediately wash your hands.
- Monitor your health daily. Be alert for symptoms. Take your temperature and follow CDC guidance if symptoms develop.

Additional information is available at the following websites:

- CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC Travel Information: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>
- DSHS: <https://dshs.texas.gov/coronavirus/>
- DCHHS: <https://www.dallascounty.org/departments/dchhs/2019-novel-coronavirus.php>

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