



FOR IMMEDIATE RELEASE

January 29, 2021

Dallas County Reports 1,809 New Positive 2019 Novel Coronavirus (COVID-19) Cases and 30 Deaths, Including 315 Probable Cases

DALLAS -- As of 1:00 pm January 29, 2021, Dallas County Health and Human Services is reporting 1,809 additional positive cases of 2019 novel coronavirus (COVID-19) in Dallas County, 1,494 confirmed cases and 315 probable cases. There is a cumulative total of 225,282 confirmed cases (PCR test). There is a cumulative total of 30,211 probable cases (antigen test). A total of 2,159 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 28,425 first doses of COVID-19 vaccine have been administered at the Fair Park mega-vaccine clinic, which started operations on Monday, January 11. DCHHS is expecting an allotment of 9,000 doses from the State of Texas for next week's operations.

The additional deaths being reported today include the following:

- A man in his 40's who was a resident of the City of Dallas. He had been hospitalized 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 hospitalized 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 Grand Prairie. She had been hospitalized and had underlying high risk health conditions.
- A woman in her 60's who was a resident of the City of Farmers Branch. She was found deceased at home and had underlying high risk health conditions.
- A man in his 60's who was a resident of a long-term care facility in the City of Irving. He had been hospitalized and had underlying high risk health conditions.
- A man in his 60's who was a resident the City of Dallas. 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 Grand Prairie. She had been hospitalized and had underlying high risk health conditions.
- A man in his 70's who was a resident of the City of Irving. 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 a long-term care facility in the City of Dallas. She expired in hospice and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Grand Prairie. 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 an area hospital ED and had underlying high risk health conditions.
- A woman in her 70's who was a resident of the City of Grand Prairie. She expired in a facility 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 Garland. He expired in the facility.
- A man in his 70’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 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 a long-term care facility in the City of Mesquite. She expired in hospice and had underlying high risk health conditions.
- A man in his 80’s who was a resident of the City of Lancaster. He 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 Irving. 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 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 80’s who was a resident of the City of Mesquite. She had been critically ill in an area hospital and did not have underlying high risk health conditions.
- A woman in her 80’s who was a resident of the City of Coppell. She had been hospitalized 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 Dallas. She expired in a 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 expired in the facility 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 Dallas. She expired in the facility 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 Dallas. She expired in the facility.
- A woman in her 90’s who was a resident of a long-term care facility in the City of Dallas. 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 of Dallas. She had been hospitalized and had underlying high risk health conditions.
- A woman in her 90’s who was a resident of the City of Mesquite. 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 the City of Dallas. She 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.

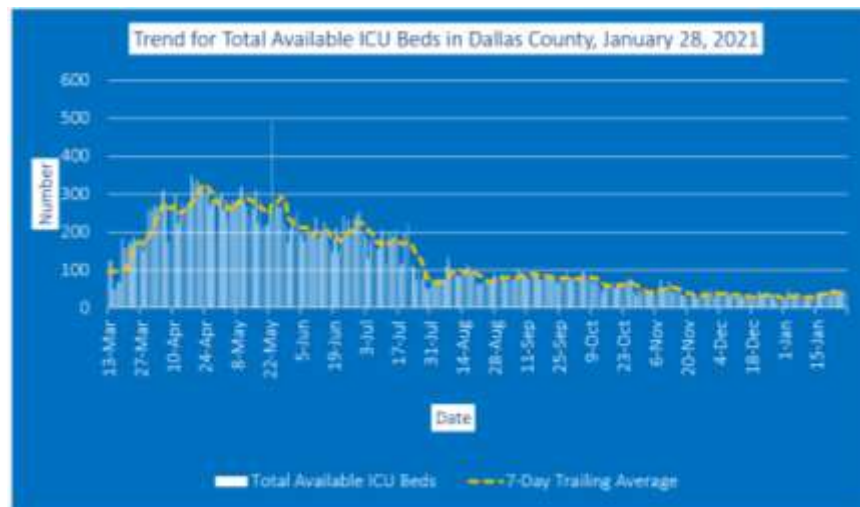
A total of 420 children in Dallas County under 18 years of age have been hospitalized since the beginning of the pandemic, including 32 patients diagnosed with Multisystem Inflammatory Syndrome in children (MIS-C). Over 80% of reported MIS-C cases in Dallas have occurred in children who are Hispanic or Latino or Black.

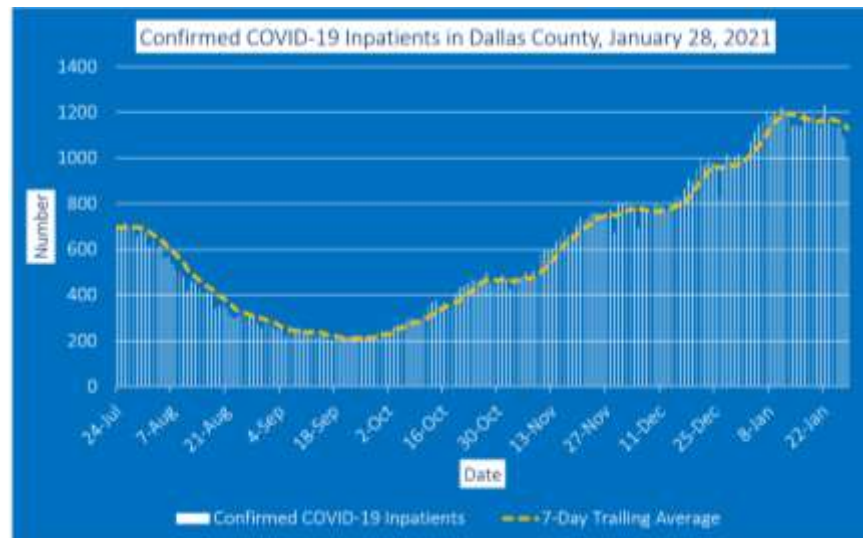
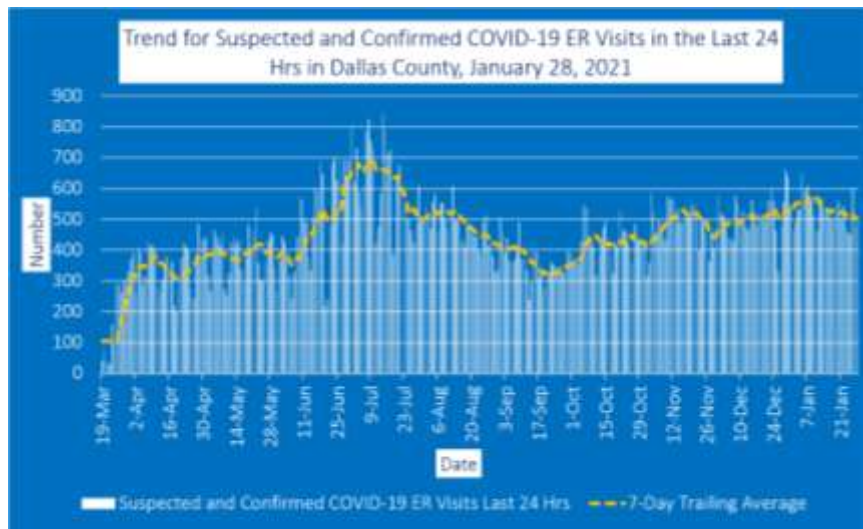
There are currently 113 active long-term care facility outbreaks. A cumulative total of 3,705 residents and 2,120 healthcare workers in long-term facilities in Dallas have been diagnosed with COVID-19. Of these, 773 have been hospitalized and 417 have died. About 22% of all deaths reported to date have 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 1,007 COVID-19 patients in acute care in Dallas County for the period ending on Thursday, January 28. The number of emergency room visits for COVID-19 like symptoms in Dallas County was 491 for the same-time period, which represents around 20 percent of all emergency department visits in the county according to information reported to the North Central Texas Trauma Regional Advisory Council. While we are encouraged to see a slight decrease, ICU capacity remains heavily strained and hospital are still operating under surge planning. Updated modeling from UTSW shows hospitalizations between 910-1,390 by February 9. While this is better than previous projections, this still shows immense strain continuing into the future. What we saw from previous surges is it takes many weeks for hospitalizations to reduce. Until we see substantial decreases in case counts and overall better control of the pandemic, hospitals will continue providing substantial care to COVID patients. 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 announced 1,809 new COVID cases and 30 deaths. Last week was our deadliest week thus far with 138 deaths. Sadly, with the deaths we had today, we are already at 163 deaths for the week with one day to go. We know January and February will be a dark winter for North Texas with COVID infections and deaths. The decisions we make today will have an impact on how fast our numbers will improve. There is a silver lining to the numbers today as Dallas County has dropped below 1,000 COVID hospitalizations for the first time since January 1.

Vaccinations continue and we expect to get larger amounts of vaccine in the coming weeks but vaccination alone will not turn around our numbers and strengthen our public health and economy. We must use all the tools

at our disposal, including wearing our mask, avoiding crowds, maintaining distance, washing our hands frequently and forgoing get-togethers. As vaccinations accelerate, we'll see more and more people who are vaccinated and move closer to herd immunity, but we are a long way away from that now. We must not lose our resolve to make the small sacrifices that patriotism requires to keep ourselves, our community, and our country as strong as possible until herd immunity can be reached. We can do this North Texas but it takes all of us working together. Have a safe and restful weekend," 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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