

Emergency Meeting Minutes from April 13, 2020

ATTENDEES (via Google Hangouts)

Commissioner Greg Miles, Commissioner Brad Horrocks, Commissioner Randy Asay, Dr. Richard Jolley, Mr. Terry Nelson, Mr. Keith Goodspeed, Ms. Shanna Wheeler, Ms. Jodi Tinker

Director Jordan Mathis, Mr. Scott Gessell, Ms. Raima Colledge, Dr. Karl Breitenbach, Mr. Jon Stearmer

ABSENT

Dr. John Mathis

AGENDA

The meeting was called to order at 4:03 pm. Prayer was given by Dr Jolley.

COVID-19 Situational Report

Director Mathis discussed the current situational report. The TriCounty area currently has a total of nine positive cases. Three are located in Duchesne County and six are located in Uintah County. We have zero hospitalizations and have conducted about 392 tests. Two (one from Uintah and one from Duchesne) of the positive cases are now recovered which means they are asymptomatic and are out of isolation. We have not listed recovery numbers yet, but we may look into doing that in the future.

Director Mathis presented information from the University of Washington model. The model continues to show trends for improvement in projected numbers for positive testing, hospitalizations and deaths. With any model there is a margin for error which is indicated. The University of Washington updates the model daily,

Defining Critical Board Communication Around COVID-19

Director Mathis addressed the issues that have come to light with communication to the board. Commissioner Miles showed some concern about not having more information in regards to individuals who test positive within his County. He feels like it is important to have some knowledge so the County can better prepare and can refute rumors. Commissioner Miles feels that at least city level information needs to be reported to at least the commissioners in order for them to make better decisions. Mr. Stearmer expressed his concern about how that information may be utilized. If the information is used to deploy a response to a specified area that could lead to a disclosure due to that response. Commissioner Miles stated that he envisions the information being used as a radar so they can put more prevention actions in place if the numbers continue to rise in that area. Mr. Stearmer noted that if there is a positive case any individual that may have been in contact with them is notified by TriCounty Health. There was discussion within the board on how much information is reasonable to pass on to the board. Due to HIPAA laws it is important to maintain privacy throughout this entire process.

We will continue to send out the UNIS alerts that go to both the board members phones and email, as well as, encourage board members to visit the TriCounty Health website. We will relay to the board any positives that may affect a substantial business within the TriCounty area to the board. In addition, we will work with GIS to add a layer to our current map to break counties into smaller sections. The board agrees with this approach.

Director Mathis mentioned the opinion piece that was posted via UB Media. It stated that TriCounty Health has not been transparent enough. Director Mathis wanted to know how the board felt about doing a rebuttal. Mr. Nelson stated he feels we should not focus on the negative media and continue with educating the public.

Special Session - April 16, 2020

Director Mathis stated that the Legislation is going into a special session on Thursday, April 16, 2020. They are going to be addressing Local Public Health Authorities, and we are concerned about some of their efforts they are addressing in this session. Director Mathis and Mr. Stearmer have drafted the following letter:

“RE: Legislative Request for Special Session in Response to COVID-19

Governor Herbert, President Adams, Speaker Wilson, and Respected Legislators:

We would first like to thank you for your leadership during this public health crisis that has impacted our nation, state, and communities. At times like these we recognize that without our state and local partnerships and collaboration, the efforts of local public health officers in our great state and communities would be less successful. As public health officers, we want you to know that we are working closely with our local elected leaders to balance the competing priorities of public health and the local economy while continuing to look for new and innovative ways that allow businesses to operate safely. Such efforts illustrate the importance of tailoring our public health response to our local circumstances; thus, demonstrating the importance of local control.

As you know this type of pandemic is an unprecedented global event that has created very unique challenges in our state. We are now operating under a public health emergency as defined in Utah Code §26-23b-102(6). This type of emergency requires that local communities have the flexibility to address local needs. Our state is very diverse and different areas have unique needs. In all circumstances, where local public health orders are issued, they are done in coordination and consultation with local elected leaders in order to ensure that community concerns are adequately addressed.

As Utah Code §26A-1-110 requires, all local public health officers are appointed with the consent of either the county executive (in the case of a county health department) or in accordance with a multi-county interlocal agreement (in the case of a multi-county health department). This requirement ensures that local public health officers remain accountable to local boards of health, county executives, or other multi-county boards made up of elected officials.

Local health departments continue to work in conjunction with their boards of health, county commissioners, mayors, and city and county councils, as well as within the statewide Incident Command Structure. We continue to work in good faith to establish new and improved communication pathways with state and local elected officials. We are all learning as we work through this situation and we ask that the Governor and Legislature exercise patience as we implement lessons learned to better effectuate our responses.

As we approach the upcoming Legislative Special Session, we encourage our state leaders to recognize the vast differences of our communities that make up this wonderful state. With this comes the critical need of local control and the ability to be nimble in addressing a worldwide pandemic at a local level. We implore the Legislature to continue to allow the flexibility that comes with local control and we, as local public health officers, pledge to promote enhanced coordination with our state partners.

Attached you will find some proposed language that will codify a process on a state (statute) and local (ordinance or agreement) level for dealing with future issues. We strongly feel that this language will put a process in place that will allow us to more nimbly address things on a local level. We humbly ask that you give this language serious consideration during your deliberations.

Proposed Language

26A-1-103 County health departments.

- (1) *The governing body of each county shall create and maintain a local health department which includes and serves all incorporated and unincorporated areas in the county.*

(2) The governing body of each county with a single county local health department shall pursuant to county ordinance adopt a process for the local health department to follow when necessary to issue orders that exercise physical control over property and over individuals as described in 26A-1-114 (b), (e), and (k).

26A-1-105 Multicounty local health departments.

(1) Two or more contiguous counties may, by executing an agreement pursuant to the provisions of Title 11, Chapter 13, Interlocal Cooperation Act, unite to create and maintain a local health department that does not combine the substance abuse authority and the mental health authority with the local health department.

(2) Any municipalities within counties comprising a multicounty local health department under Subsection (1) shall be served by the multicounty local health department.

(3) The governing body of each county within a multicounty local health department shall pursuant to the interlocal agreement described in (1) adopt a process for the local health department to follow when necessary to issue orders that exercise physical control over property and over individuals as described in 26A-1-114 (b), (e), and (k).

26A-1-105.5 United local health department -- Multicounty united local health department -- Election by county governing body -- Appointment of director.

(1) A county governing body may elect to:

(a) form a united local health department for the purpose of combining into a single entity the duties of:

- (i) the local health department;
- (ii) the mental health authority; and
- (iii) the substance abuse authority; and

(b) provide for the coordination of services for the populations served by the entities described in Subsection (1)(a).

(2)

1. (a) Two or more contiguous counties may, by executing an agreement pursuant to the provisions of Title 11, Chapter 13, Interlocal Cooperation Act, unite to create and maintain a multicounty united local health department.
2. (b) Any municipalities within counties comprising a multicounty united local health department under Subsection (2)(a) shall be served by the multicounty united local health department.
3. (c) The governing body of each county within a unified local health department shall pursuant to the interlocal agreement described in (1) adopt a process for the local health department to follow when necessary to issue orders that exercise physical control over property and over individuals as described in 26A-1-114 (b), (e), and (k).

(3) A united local health department created under this section shall administer the programs and

services of each entity listed in Subsections (1)(a) in accordance with: (a) this chapter;

(b) Title 17, Chapter 43, Part 2, Local Substance Abuse Authorities; and (c) Title 17, Chapter 43, Part 3, Local Mental Health Authorities.

(4)

(a) Notwithstanding Section 26A-1-110:

(i) the county governing body shall, in consultation with the board, appoint an executive director for a united local health department and determine the executive director's compensation; and

(ii) the county governing bodies of a multicounty united local health department shall, in consultation with the board, appoint an executive director for the multicounty local health department and determine the executive director's compensation.

(b) An executive director appointed under Subsection (4)(a): (i) shall serve as the local health officer; and (ii) may be removed for cause under Section 26A-1-111.

(5) The treasurer of a united local health department may establish and maintain funds in addition to the local health department fund established under Section 26A-1-119, if the additional fund is necessary to:

(a) provide substance abuse authority services or mental health authority services; and (b) comply with federal regulation or federal statute."

Mr. Stearmer discussed the main reason for this letter is to allow local authorities to decide what is best for their situations. No area is the same and it is difficult for a small community like ours to be held at the same standards of a large area like Wasatch County. Some of the legislation that is being discussed in the special session would take away authority from local authorities and that causes a lot of concern. There was discussion in regards to the letter and a consensus was made to move forward with the letter.

A motion was made to approve the letter with the signatures of Director Mathis, Board Chairman - Dr. Mathis, and the Commissioners - Asay, Horrocks, and Miles by Mr. Nelson and seconded by Dr. Jolley. Vote Unanimous. Motion carried.

Mobile Testing Update

TestUtah is planning on coming to TriCounty Health to do a mobile testing site. TestUtah is a new initiative sponsored through Silicon Slopes and in partnership with Utah State leaders and private corporations. Their goal is to increase the rate of COVID-19 testing so Utahns can have better access to testing and help stem the spread of COVID-19, to get us back to normal as quickly as possible.

Individuals will go to testutah.com and take a survey to see if they qualify for testing. If they qualify they will be given a QR Code and appointment time. Then they will come to the testing site (either TriCounty Health or Uintah Basin Health) and drive through for testing. Director Mathis explained that TestUtah will be providing tests, all needed supplies, PPE, and arranging for the courier to run the tests back and forth to the lab. We will be manning the site with TriCounty Health and Ashley Regional Medical Center employees. Any first responders and healthcare workers will have the first opportunity to test to make sure they are not vectors for the virus at this time in our community. Any positive results will go directly into our tracking system and we will contact them. If the test comes back negative we will not be notified. They are estimating about 2-3 days for results to be completed. We are hopeful that we can increase testing and have better surveillance on the disease. Good news is that about 95% test results coming back from other sites have been negative.

Dr. Jolley and Dr. Breitenbach both would like us to post the false positives and negative rates from TestUtah for the public. Mr. Stearmer will work with his staff to work on a contract for Ashley Regional Medical Center staff.

In addition, the state just received another 100,000 tests that can go out to healthcare providers around the state. These tests will need to be conducted through the Public Health Lab. We should be seeing an increase in testing in our area.

Local Order Update

We have had a few issues with our current order. We have a gym owner that doesn't feel that it is fair. He feels like hair salons should be shut down if gyms are. Director Mathis would like to move back from full closure of gyms and move to partial closure of salons. Bear River has released an order that allows gyms and salons to operate with specificity with mitigation with the amount of people allowed per square foot. Director Mathis would like to add that if they do stay open then masks should be required for both patrons and workers.

The restaurant order from the State expires on May 1, 2020 unless it is extended. Director Mathis would like for us to consider what our order should be for restaurants if it is not extended. Commissioner Horrocks, Dr. Jolley and

Mr. Nelson feels like we need to do a soft opening of restaurants. They feel like it is the best for our community and will help give some relief. Mr. Stearmer agrees, but states that we will have to follow State orders as long as they are in effect. There was discussion about having to follow the State order and the need for authorization to be more localized. The board feels like because we were forced to follow the State order it made it so we were put in a situation where we had to close down before it actually hit our area. This has put a real strain on our area.

Director Mathis would like to go toward an initiative that requires a mask while still maintaining social distancing and relax some of our mitigation processes. We should be able to monitor the situation based on our current numbers and the numbers we will get from our mobile testing. Unfortunately, masks and hand sanitizer is still hard to come by, but we may be able to get the community help with making masks for the businesses.

Di

A motion was made for Director Mathis and Mr. Stearmer to bring parody in regards to all establishments to the new order and present it to the board later this week was made by Mr. Nelson and seconded by Commissioner Horrocks. Vote unanimous. Motion carried.

Financial Update

Mr. Gessell stated that funding during situations like this typically lags behind about 3-4 weeks. The State of Utah is handling this in three different ways. They are allowing contracts that have nothing to do with COVID-19 be spent on COVID-19 efforts. Secondly, they are allowing new contracts specific to COVID-19 to be written. In addition, last week the State of Utah cut checks to Local Health Departments and ours equalled about \$230,000. These funds were given to us with no strings attached so that we can spend it as needed for COVID-19 efforts.

Mr. Gessell explained that COVID-19 will definitely affect our expenses, but the efforts from the State will give some relief. We continue to monitor our situation and have currently spent about \$40,000 for March. We will likely see a spike in April and May. As more information comes in he will keep the board informed.

Overtime for non-exempt employees will be paid out for their overtime which is a little different from our current policy. We will be managing employees' overtime to ensure we are wearing them out and to maintain financial responsibility during this crisis. Most of our essential employees are exempt from overtime so we anticipate that we will not be paying out a lot of overtime.

Employee Donation Idea

In light of COVID-19 many in our community are struggling due to unemployment. Director Mathis is proposing an employee donation program to assist during this time. We will set up a process for employees to voluntarily donate money which in turn will be donated to the local food pantries in the TriCounty area. We feel like we are fortunate to continue to have work and hope this is a way that we can give back. The board all agree and feel it is a nice gesture. We will move forward with our plan with the food pantry.

A motion was made to adjourn the meeting by Commissioner Asay and seconded Ms. Wheeler.

“Just remember when you wrestle with a pig, you both get muddy but the pig likes it.”