



**AITKIN
COUNTY**
EST 1857
HEALTH & HUMAN SERVICES
COUNTY BOARD MEETING MINUTES
March 24, 2020

Attendance

The Aitkin County Board of Commissioners met this 24th day of March, 2020, at 9:01 a.m. as the Aitkin County Health & Human Services Board, with the following members present: Commissioners Anne Marcotte, J. Mark Wedel, Don Niemi, Laurie Westerlund, and Bill Pratt. Others present included: County Administrator Jessica Seibert, Assistant to the County Administrator Angie Sahr, Public Health Supervisor Erin Melz, DP&C Public Health Nurse Brea Hamdorf, and Guests: ACH&HS Advisory Committee Member Luke Christensen, and Jennifer Eisenbart, Aitkin Independent Age. ACH&HS Director Cynthia Bennett attended by phone.

Agenda

Motion by Commissioner Westerlund, seconded by Commissioner Wedel and carried, all members present voting yes to approve the March 24, 2020 Health & Human Services Board agenda.

Minutes

Motion by Commissioner Westerlund, seconded by Commissioner Niemi and carried, all members present voting yes to approve the February 25, 2020 Health and Human Services Board minutes.

Bills

Carli noted that was nothing out of the ordinary for the monthly bills.

Motion by Commissioner Wedel, seconded by Commissioner Niemi and carried, all members present voting yes to approve the bills.

Health & Human Services Director Report, Cynthia Bennett, ACH&HS Director

Directors Update

Cynthia began by saying how amazing it is how everyone has pulled together and how proud she is of Aitkin County with the response of the COVID-19 pandemic. She gave a high level situation update regarding COVID-19. The latest report from MDH indicated that there are 235 cases in MN and 1 death. It's now in 31 counties. There are 89 cases in Hennepin County, 24 cases in Ramsey County, 18 cases in Dakota County, 16 cases in Olmsted County, and in the NE Region there are 2 cases in St. Louis County. Negotiations continue at the Federal Level over a Stimulus Bill. They are saying there will be an agreement today. We will then know what will be coming down into the State. Yesterday Anoka County handed out 100's of gallons of hand sanitizer at the fairgrounds. People were waiting in line in their cars for over an hour but they were happy to get the hand sanitizer. Questions have been coming in asking if you can get Corona Virus twice and the response that came from the CDC was that no you cannot. If you have been exposed and have the virus you cannot get it again. They are looking at that group of people for the workforce in the future and they are developing a new test to see if people have had it in the past so we can look to those individuals for work. She wants to assure everyone that we have the greatest confidence in our Public Health unit and our Emergency Response Team. Administration has done a fabulous job coordinating all of our efforts.

COVID-19 Update, Brea Hamdorf, Disease Prevention & Control Public Health Nurse

Brea began by letting us know this is just a brief recap of what is going on as she has been inundated with information. Corona Viruses are very common and considered a large family of viruses. Some Corona Viruses are found in people and some are found in animals and very occasionally the animal ones switch

to people and then the unknown happens. And that's what has happened here. Corona Viruses are very common and in fact 1/3 of the common colds are from a Corona Virus. COVID-19 was first identified in China in late 2019. It has since spread worldwide. Situation to date as of the afternoon of March 23, 2020 globally there is over 300,000 cases and 14,000 deaths, and in the US over 30,000 cases and 400 deaths. Here in Minnesota we have 235 confirmed cases and 1 death. The state updates those numbers every day at 11am. Symptoms are fever, cough, and shortness of breath. Occasionally you see sore throat, sore muscles and headache. They range from mild to very severe. How it spreads is person to person by people having close contact with one another and when someone coughs those droplets will travel up to 6 feet. It can either land on other surfaces or in another person's respiratory tract and that is how someone is affected by another person. It can also be spread from object to object but it is not the main source. The severity of COVID-19 is in most cases very mild with 14% to 15% of most cases of people infected will have a severe case needing some form of hospitalization. Of those 14%-15% about 5% will require intensive care. The estimated fatality of COVID-19 was 2.3% and has since increased to 3.4%. As compared to other diseases, Seasonal Flu has 0.1% fatality rate, SARS has a 10% fatality rate, and Ebola 50%. While as not as deadly as some of those very scary infectious diseases it is still quite more deadly than the seasonal flu. The severity really increases with age and other health conditions. What are the recommendations: Social Distancing is key you should remain at least 6 feet distance from others, washing hands often and correctly for at least 20 seconds. You can use hand sanitizer but it is preferred that you wash your hands. You want to cover your cough to prevent those spores from being put out into the air. You want to clean those high touch surfaces often so you don't transmit it to other people that way. Stay home if you are showing symptoms. There has been talk about facemasks. It is not recommended to the general public to use. It is for the sick to keep the germs in and not for the healthy to keep the germs out.

Commissioner Niemi mentioned that his wife received an email yesterday that Joanne Fabrics is handing out kits of fabric that has been cut out and ready to be sewn together. You take it home, sew them, and return them to the store and they will distribute. Brea noted that the CDC touched on homemade facemasks on their call yesterday and they are pushing that the homemade ones are not a replacement for the hospital ones. It's really a last resort for when you are out.

What has MN done so far? The goal is slow the spread and reduce the impact and we are seeing the executive orders coming in. MN Dept. of Health are reaching out to community groups and having calls multiple times a week through local public health, clinicians, emergency planning, and long term care to let people know what the current guidance is. Currently MDH lab, Public Health lab, and commercial labs are testing for COVID-19.

Executive orders to note: The Governor has declared this an emergency. He has closed schools, bars/restaurants to dine in services. Providing Unemployment to people out of work. Cancelled elective surgeries for healthcare and also veterinary centers. He preserved access to human services programs extending coverage for those who would have to re-apply for services during this time for a 3 month period.

What are we doing in Aitkin County? We are communicating with local media, collaborating with Riverwood Health Care, Law Enforcement, LTC and weekly meetings. Public health sharing resources with LTC, schools, and the jail and any guidance that comes out from the CDC they are sending out to make sure people know what to do. They are participating in multiple calls with MDH and CDC. They have developed a plan of action to be ready when that first call comes in and who the first to be notified, who calls who.

What can you do? Stay home when you are sick. If you have any respiratory symptoms they need to stay home even if they think it's just a cold because we really don't know at this point. If someone can manage symptoms at home they can, and reach out to healthcare if you get concerns but don't delay. Social distancing is key, you want to limit gatherings of 10 people or less and maintain social distancing of 6 feet, and void handshakes. Use only trust resources. Go to CDC or MDH for your information. Media sources aren't always 100% factual. MDH and Riverwood have hotlines.

Commissioner Westerlund stated that as a business owner (gas station) in the area she is seeing people coming up from the cities. She is concerned that she only has 4 employees and is worried for them. Is there talk about alerting people to stay home and not come up to their cabins? Erin stated that they are hearing that people are migrating north to their cabins. The recommendation is to social distance themselves. People are choosing their shelter at their cabins. Some people are already remotely working and they are choosing to work from their cabins. It has been a concern on local business owners to

provide for additional residents coming to our county as well as their own residents. We are working to extend education to gas stations, banks, pharmacy's, grocery stores to try to get some outreach and education with tips. Some are marking out 6 feet on their floor to remind people to distance themselves 6 feet from one another while in line. One of the most common questions we are getting is, why is this one different than other pandemics that we have seen such as H1N1? The biggest difference is we have no vaccination platform for this particular virus. With H1N1 we had a platform to make a vaccination to get out to the public in a quick manner. That is not the case with COVID-19. We are starting from scratch and at best guess they are predicting 12-18 months before we see a vaccination on the market if our current trials work. They do not have a known antiviral to reduce the symptoms for this virus. Another difference is with H1N1 it did not affect the older generation as it is with COVID-19. This is thought to be due to other exposures and vaccinations that the older generation had lending them less susceptible to H1N1. In this case, this is a brand new virus to everyone, young and old. The young are not getting hit as hard with COVID-19 but it is hitting our elderly very hard. The mortality rate is increasing with COVID-19. This will be different with different references that you read. Italy it was much higher and South Korea was lower. Just so you are aware, in South Korea the median age was in the 40's and Italy it was the 60's. Each country is experiencing a median age a little bit different than the next country. Every age group is experiencing the illness, it's just that the older age groups are seeing the severity. Just because you have a mild case doesn't mean you are not contagious.

Thank you for your patience while we try to get the information out. The information is changing daily. They are learning constantly what other countries are doing, what other states are going through, and listening to calls. We are trying to be a step ahead and to be prepared. It has posed difficulty while pushing information out because it can change tomorrow. We are doing the best we can with the information we get. If you get information next week and it's different than this week it's not because we were wrong, it was the information we had last week based on the CDC and MDH. They are attending multiple webinars and phone calls every day on the Local Level, State Level, and National levels.

Commissioner Niemi stated that as far as testing kits the Chief Medical Officer from Crosby Hospital was on the radio this morning. It sounded like there are an ample supply of testing swabs at local health care facilities. Brea stated that as far as testing swabs they do have an ample amount and they are sending them to the labs. It's the chemical reagents needed to test at the lab that are being reported that there is limited amounts. The labs are freezing the samples until they get the chemicals. Commissioner Wedel stated that it sounded like the testing has been expedited as well from 72 down to 24 hours and that was confirmed by Erin.

Erin stated that over the weekend, Mayo Clinic helped get caught up on testing here in MN. It was clarified with us that it was not the swabs locally that was on short supply it was the chemical reagents at the lab itself that has caused the nationwide shortage. Which has caused MDH to say they have 3 priority groups to be tested. It's the healthcare workers, people hospitalized, and people at congregate care groups such as nursing homes. With that said the numbers presented in the beginning of the presentation are only positive tests. With those priority groups being the only ones tested we know our numbers are much higher than that. We just don't have the positive test to confirm that. Thus why we continue with the recommendations.

Commissioner Westerlund asked how many times you would have to test a person before it will show up positive. Brea stated that there is certain criteria that doctors are going through to determine if they will test. It depends on what stage of the virus is at on if it will show up in the test. Early on symptoms or no symptoms the test may show negative but then on day 7 you develop more symptoms then the virus is more detectable. That's why they are recommending the 14 day window. You might also see someone who is symptomatic and they test positive their isolation time is for 7 days. The reason for that is they have already been in their incubation period and are already symptomatic so it's believed that by 7 days from now it will be at least 14 days by the time they were exposed and would no longer be contagious.

Administrator Jessica Seibert asked if Erin could review the timelines on when they are saying if you have had COVID-19 when employees can come back to work. You need to be 3 days fever free with no fever reducing medication, have noticeable decrease in your symptoms, and you want it to be at least 7 days from the onset of your symptoms. Whichever is longer.

Commissioner Niemi stated there was a viral expert on TV that has stated if it comes on quickly like a cold can it's probably not COVID-19. It's if it gradually comes on and gets worse that you might want to get checked. Erin stated they have found some guidance that compares influenza, COVID-19, common cold,

and allergies because all of that is going on right now. It compares symptoms, the onset, and how quickly it comes on. They are saying generally speaking it doesn't come quickly like other illnesses do. It's a slower progression.

In public health they have several plans that have to have been updated and exercised. They have an isolation and quarantine plan that they have updated, a mass dispensing plan, a sheltering plan which it has been their most recent work, pandemic flu plan, and a cop plan which is a continuation operations plan if we were to move forward with further shut down what would be our priority work areas and what staff we would need to provide minimum service.

Erin gave a shout out to Stacy Durgin-Smith for the work she has done making sure all the plans are updated. She had them there and ready when we needed them to do some minor planning and updated. Also a shout out to the entire Public Health Team. We wouldn't have been doing this work without them. They have been rock solid with some long evenings and short nights.

Committee Reports

HHS Advisory Committee Update

Luke Christensen was there representing the Advisory Committee. They met on March 4th, 2020. At their meeting they had a presentation from Hannah Colby the nurse involved with Statewide Holt Improvement Partnership. They are known for their farm to school program. Some key takeaways were since it has started from 2016-2019 it has contributed \$38,271 to our local producers with lots of money to expand. They have brought a lot of work into their website healthynorthland.org to spread the word to the community about how beneficial those programs are. The Health Improvement and Services Advisory Committee was going to do a community meal but it was cancelled. They are working on the by-laws to revise and bring up to date. They are working to adapt them to what has currently been proven successful. He also spoke on behalf of AEOA and Arrowhead Transit. Dial-a-ride will still continue services as long as they still have volunteer drivers. As far as the volunteer medical rides they are still sustaining those that need to go to dialysis, medical appointments, etc. The workforce center closed to the public but staff are still in the office. People can't come in to use their computers or resources but they can call on the phone and they can help.

Commissioner Wedel asked Luke the status of the CENSUS takers. He stated they are low on people but they are getting the word out that you can do it online and don't have to wait for someone to come to your door. They have delayed some of their canvassing that was supposed to start April 1st. They are looking to gear up the mobile questionnaire assistance program.

AEOA Update

Commissioner Westerlund stated AEOA hasn't met as they are trying to keep their employees safe and offering remote work.

CARE Board

Commissioner Westerlund stated CARE hasn't met as well.

CJI Update

They met but Commissioner Westerlund couldn't make the meeting.

NEMOJT Update

Commissioner Niemi stated NEMOJT is closed right now.

Lakes & Pines Update

Commissioner Niemi stated Lakes and Pines didn't meet.

The meeting was adjourned at 9:55 a.m.

Next Meeting – April 28, 2020