

**BEFORE THE LOCAL BOARD OF HEALTH
PACIFIC COUNTY, WASHINGTON
1216 W. Robert Bush Drive
South Bend, Washington**

**Friday, May 22, 2020
4:30PM**

or as soon thereafter as possible

**SPECIAL/EMERGENCY MEETING
AGENDA**

The matter listed within the Special Meeting Agenda was distributed to each County Commissioner for review.

Call to Order

Public Comment (*limited to three minutes per person*)

ITEMS REGARDING GENERAL BUSINESS

- 1) Consider adoption of Resolution No. 2020-1 in the matter of applying for a variance to move to Phase 2 of the Governor's COVID Pandemic Safe Start Washington-A Phased Approach to Recovery Order and acknowledge Health Officer's letter

The Board may add and take action on other items not listed on this agenda and order of action is subject to change.

The hearing facility is "barrier free" and accessible by those with physical disabilities. Aids will be provided upon request for those with language/speaking or hearing impediments, but requests need to be received at least five (5) business days prior to this hearing. Such requests may be filed in person at the Commissioners' Office at the address noted above or at 360/875-9337.

**BEFORE THE LOCAL BOARD OF HEALTH
PACIFIC COUNTY, WASHINGTON**

RESOLUTION NO. 2020-1

**IN THE MATTER OF APPLYING FOR A VARIANCE TO MOVE TO PHASE 2
OF THE GOVERNOR'S COVID PANDEMIC SAFE START WASHINGTON-A
PHASED APPROACH TO RECOVERY ORDER**

WHEREAS, Governor Inslee and the Washington State Department of Health recognize that there are currently counties with less than 10 new cases of COVID-19 per 100,000 residents over the past two weeks, and

WHEREAS, these counties have the opportunity to apply for a variance to move from phase 1 to phase 2 of the Governor's Phased Approach to Reopening Washington Plan, and

WHEREAS, Pacific County has had one new case of COVID-19 case reported in the last two weeks making the County eligible to apply for this variance; and

WHEREAS, Pacific County has had a total of 9 confirmed positive COVID-19 cases, and one death. The first case of COVID-19 identified on April 10, 2020, contracted the disease while visiting family back east, was hospitalized there, and sadly, died there. The first case, nor her immediate family members, were present in Pacific County during her infectious period. Prior to receiving reports of four positive cases linked to an outbreak at a seafood processing plant located in Clatsop County, Oregon, there have been only three other cases in Pacific County. To date, there has been no documented transmission of disease related to the County's identified cases, and

WHEREAS, this success can be attributed to the County's effective case identification and contact tracing efforts, along with a robust isolation and quarantine/isolation housing and case management program, and

WHEREAS, one of the requirements for applying for the variance includes submission of a signed recommendation from the local public health officer to the local board of health, and

WHEREAS, Pacific County's Health Officer, Dr. Steven Krager submitted a letter of recommendation to the Pacific County Local Board of Health recommending the Board of Health request a variance move to phase 2, including all of the phase 2 modifications contained in the phase chart which is attached hereto and hereby incorporated by reference, and

WHEREAS, another requirement for applying for the variance includes submission of a letter from local hospitals certifying that they have adequate bed capacity to serve their community and adequate PPE supplies to keep their workers safe, and

WHEREAS, Willapa Harbor and Ocean Beach hospital have submitted letters certifying as such, and

WHEREAS, the variance request must include a document describing the following:

1. COVID-19 testing site information.
2. Data on median number of days from onset of illness to COVID-19 specimen collection date.
3. Testing date afro each of the previous four weeks.
4. Local health department’s resources to perform case and contact investigations.
5. Information on isolation and quarantine facilities.
6. Resources for supporting persons in home isolation/quarantine.
7. Local health department’s capacity to perform outbreak investigations in congregate living situations and workplaces.

WHEREAS, the Pacific County Health Department, with support of the County’s Emergency Operations Center, has prepared a plan as required which is attached hereto and hereby incorporated by this reference.

NOW, THEREFORE, BE IT HEREBY RESOLVED that the Local Board of Health of Pacific County, Washington hereby applies for a variance to move fully to Phase 2 of the Governor’s Safe Start Washington-A phased Approach Recovery.

PASSED by the following vote this 22nd day of May, 2020 by the Local Board of Health meeting in special/emergency session at South Bend, Washington, then signed by its membership and attested to by its Clerk in authorization of such passage:

_____ YEA; _____ NAY; _____ ABSTAIN; and _____ ABSENT

ATTEST:

LOCAL BOARD OF HEALTH
PACIFIC COUNTY, WASHINGTON

Marie Guernsey, Clerk of the Board

Frank Wolfe, Chair

Lisa Olsen, Commissioner

Michael Runyon, Commissioner

PACIFIC COUNTY VARIANCE PLAN: MOVING FROM PHASE 1 TO PHASE 2

Pacific County has had a total of 9 confirmed positive COVID-19 cases, and one death. The first case of COVID-19 identified on April 10, 2020, contracted the disease while visiting family back east, was hospitalized there, and sadly, died there. The first case, nor her immediate family members, were present in Pacific County during her infectious period. Prior to receiving reports of four positive cases linked to an outbreak at Bornstein Seafood processing plant across the river in Astoria, Oregon in mid-May, we only had three other cases in Pacific County. To date, we have had no documented transmission of disease related to our identified cases. We attribute that success to our effective contact tracing efforts, and robust isolation and quarantine/isolation housing and case management program. The last confirmed positive case in Pacific County received test results on May 8th. This individual was identified through screening related to the outbreak at the seafood processing plant in Clatsop County, Oregon. All cases and contacts are now released from isolation and quarantine, all with negative tests and/or no symptoms.

Pacific County local government fully activated our Emergency Operations Center (EOC) under a unified command of the Health Department, Emergency Management, and the Shoalwater Bay Tribe on March 17, 2020. The EOC remains activated, however, we are operating virtually for the majority of the week.

Following a weekend of recreational clam digging, in which hundreds of people converged upon our Long Beach peninsula, and given the County's demographics, limited health care capacity, and draw as a tourism destination, our health officer, with support of the EOC, the mayors of our four cities Shoalwater Bay Tribe, and the County Commissioners, elected to close hospitality lodging, beach approaches, and recreational clam digging prior to the Governor's Stay Home-Stay Healthy order. This proved to be an effective measure to reduce the amount of people coming from out of the area. Not only were there noticeably fewer people in the streets and on our beaches, traffic count reports provided by the Washington State Department of Transportation confirmed a 50-75% reduction in traffic from the same time last year. Pacific county residents, for the most part, have elected to adhere to both Governor Inslee's Proclamations and our local public health orders. All of these actions have been instrumental in keeping the incidence of novel coronavirus low in our communities, and slowed the spread related to the limited cases that have been identified. These choices have been very difficult and have had a tremendous economic impact on our largely tourism-based economy, however most agree the actions taken were effective in limiting the COVID-19 disease in Pacific County. We have created a dashboard to track local data using the metrics provided by DOH (See the Attachment A-Pacific County Data Dashboard Template-it has not been fully populated yet. At the time of this application we are in the process of moving data from other sources into this format). As the economy begins to re-open, and we begin a slow, phased re-opening of our hospitality lodging (See Attachment B-Health Officer Order-Phased Reopening Plan), we will be actively monitoring our dashboard to evaluate impacts and drive our decision making as we move forward.

Currently, we have adequate testing capability and are able to test anyone with symptoms quickly. Experienced health department staff are conducting case contact and investigation, as well as isolation/quarantine housing and case management support services. Our current investigation capacity is adequate and we have worked hard to develop plans to ramp up should there be a surge in cases. Since March, we have met with healthcare providers including our two hospitals three times per

week to check in regarding needs and to collaborate on projects including drive through testing and alternate care facility planning. Both Hospitals have provided letters in support of our variance request and certifying adequate bed and PPE capacity. Our EOC logistics division has established avenues to obtain supplies including PPE for local providers and our hospitals have set up systems with labs to ensure tests/testing supplies are replenished regularly. We conduct daily check ins with our congregate living facilities and have provided outreach and education to canneries and other large congregate workplaces. We have provided support and technical assistance where needed to assure they have comprehensive health and safety protocols in place, as well as emergency response plans should there be a case identified in their facility.

We are ready and prepared to move forward to Phase 2. We will continue to monitor the health of our community and assure plans and relationships are in place to respond quickly in any way necessary.

COVID-19 TESTING SITES

COVID-19 testing sites in your county (clinic, hospital, health department, pharmacy, drive up, etc.) and our efforts to promote/advertise those sites. In addition, specifically identify sites that serve persons with low-income, no insurance, or underserved and the hours and days of those services.

Pacific County, along with our two local hospital partners (Willapa Harbor Hospital and Ocean Beach Hospital) and the Shoalwater Bay Tribe, are offering drive-through testing events every Monday, Tuesday, Wednesday, and Friday. In order to best serve the community, the drive-through events are located at two sites located in the primary population centers of the county. Two days a week the clinic is held in the north Pacific County area (South Bend), and the other two days the clinic is held in south Pacific County (Long Beach). We are in our eighth week of drive through testing and have been able to offer testing to anyone who is symptomatic for the past five weeks. We have the capacity to increase our testing hours at each of our drive-through events or expand to add an additional day of testing every week if the demand for testing increases.

In addition to the drive-through testing events, residents can access testing through their private providers at the Shoalwater Bay Tribal clinic, Family Health Center at North Beach, Valley View Medical Clinic, or at one of our two hospitals through their ER and outpatient clinic after hours and during the weekend. In addition, there are several out of county providers who provide testing for Pacific County residents. These providers are primarily located in Clatsop County (across the river from Pacific County in Oregon), or by Grays Harbor County or Lewis County private providers.

All of our sites serve low-income, uninsured, and underserved populations. Tests conducted at the Drive Through Testing site are conducted free of charge. The tests are processed through the hospital labs who also handle billing to insurance or their uninsured program depending on the patient's insurance status. Health Department employees screen and schedule drive through testing appointments over the phone and use the Language Line as needed to provide interpretation services. Bilingual staff from the health department are also available to provide interpretation services and translation of educational materials, testing instructions, and other related publications. Interpreters and/or language line are also used to assist non-English speakers that are tested through the hospital or other private provider.

Drive Through Clinic Schedule

Day	Hours	Location
Monday	1-4 pm	South Bend
Tuesday	1-4 pm	Long Beach
Wednesday	9-12 pm	South Bend
Friday	9-12 pm	Long Beach

The Pacific County EOC Operations Section is finalizing plans for a mobile strike team (MST), which can be deployed to conduct testing in congregate living facilities, skilled nursing facilities, remote and/or isolated communities, and large congregate workplaces like seafood processing plants in case of an outbreak or to accommodate other special needs.

The availability of testing has been heavily promoted county-wide using various social media platforms including several Facebook pages (health dept, sheriff's office, emergency management, hospitals), and local websites. We have placed "Got Symptoms, Get Tested" posters and large banners in English and Spanish at gas stations, post offices, pharmacies, and in high visibility areas throughout the community.

Flyers were sent home to families accessing the school meal program, and also distributed at grocery stores to include in bags. Our newspapers have also run feature stories of the testing events and we have run ads in the papers and on the radio advertising testing availability.


**¿Tienes síntomas?
Hágase la prueba.**

COVID-19 auto servicio para pruebas disponibles para CUALQUIERA con síntomas.
 Llame a la EOC del Condado de Pacific para hacerse una cita. Lun-vie 8:00-4:00

875-9407 or 642-9407


**Got Symptoms?
Get Tested.**

COVID-19 Drive through testing available to ANYONE with symptoms. Call the
 Pacific County EOC to get screened for an appointment. Mon-Fri 8:00-4:00

875-9407 or 642-9407

MEDIAN NUMBER OF DAYS FROM ONSET OF ILLNESS TO TESTING FOR CASES

The median number of days from onset of illness to COVID-19 specimen collection date for the cases identified in your county over the past 4 weeks. The ideal target is a median number of days ≤ 2 days.

When a person calls they are screened through our call center for any symptoms within the past 72 hours and then are generally scheduled for an appointment within 24 hours of requesting a test. Each site is open to anyone, regardless of where they live in the county, however given the distance to travel (50 miles between population centers) in our large, rural county many choose to wait to test until the next available day at the location closer to their home. Depending on when a symptomatic person calls for an appointment, and where they live, some, on occasion, choose to wait 48 hours to access the next drive-through testing site closer to their home. Individuals who are scheduled for a test are

instructed to contact their provider or call 911 if symptoms worsen and would have availability to be tested at the ER or through a private provider should the situation become emergent. Regardless of where they receive testing, individuals are also instructed to quarantine themselves at home until after they have received their test result. Our new data dashboard will include a specific tracking of number of days between date test was requested and the date the test was conducted. Initially test results were being reported back within two days. For the past two weeks results have not been received for closer to four to five days. We attribute this delay to the overall increase in testing statewide.

The median number of days from onset of illness to COVID-19 specimen collection date for the positive cases in Pacific County from 4/17 through 4/23/2020 was

FOR EACH OF THE PREVIOUS FOUR WEEKS-THE NUMBER OF NEGATIVE AND POSITIVE TESTS

For each of the previous four weeks, report the total number of COVID-19 tests reported for your county, the number of negative and the number of positive test results, percent positive and what 50 times the number of positive tests would be. In addition, report the percent positive of all tests for the four week period. (Note: the ideal target is to perform about 50 tests per case and have a percent positivity no more than 2%).

Date	Total # of Tests	# of Negative Tests	# of Positive Tests	Percent Positive	50X the # of positive tests
4/18-4/24	46	43	3	6.5%	150
4/25-5/1	44	44	0	0	0
5/2-5/8	33	28	5*	15%	250
5/9-5/15	53	53	0	0	0
TOTAL FOR 4 Week Period	176	168	8	4.8%	400

*All 5 positive tests were identified and linked to an outbreak at a seafood processing facility in Clatsop County, Oregon. Two of the five cases were a married couple living in the same household.

These are tests conducted through the drive-through events and those reports received from other labs and/or providers. We know that private providers outside of the county (primarily Clatsop, Grays Harbor, and Lewis), also conducted testing on residents in Pacific County and not all of our providers outside of the county consistently report total tests conducted to us. Because of this, we know that the total numbers of tests conducted on Pacific County residents is likely higher than what we have been able to track. Over the course of the past 4 weeks, we have received 8 total positive results. 50 times that number is 400 tests. While the total number of tests conducted over the same time period (176) is lower than 400, it should be noted that we have been offering testing to everyone who is symptomatic for the past 5 weeks. So, the number of tests conducted hasn't been limited by our capacity to test, but rather by lack of demand for more testing by the community. If you remove the five cases linked to the outbreak in the seafood processing plant, the number of tests we have reported does exceed 50X the number of positive tests threshold (3 positive tests, 176 tests reported

CASE INVESTIGATION AND CONTACT TRACING

The calculation showing how many cases and contact tracers are needed for the county's population, assuming a minimum of 15 contact tracers for every 100,000 population. Show the calculation.

$$21,640 \text{ population}/100,000 \times 15 = 3.25 \text{ Contact Tracers Needed}$$

The number of health department staff trained and ready to perform case investigation and contact tracing, as well as their job classifications. The total number should be equated to full time equivalent staff.

Our current contact tracking capacity is our three Public Health Nurses. They are trained and ready to perform case investigation and contact tracing. Two of the three have been working in our communicable disease program for more than 20 years. The total FTE is 2.9 FTE.

The number of other county/city government staff trained and ready to perform case investigation and contact tracing. The total number should be equated to full time equivalent staff.

Currently there are two other county staff trained and ready to perform contact investigation. One is the current county administrator who is an RN and the previous director of the health department for more than 20 years. The other is the recent health department director, who is also a RN, who retired at the end of January, but is back working on contract during the pandemic. This would equate to 2.0 FTE.

We share a public health officer with Clark County. Clark County has a plan to hire approximately 80 staff to support contact tracing. Clark County has agreed to allow us to "buy" contract tracing capacity should we have a huge surge in cases.

The number of volunteers or non-governmental employees trained and ready to perform case investigation and contact tracing. The total number should then be equated to full-time equivalent staff.

We have three recently retired public health nurses all with CD investigation experience who have indicated a willingness to volunteer to support contact tracing efforts should the need arise. They would require minimal training to be ready to perform in this capacity. Assuming each would work 3 days a week this would equate to another 1.8 FTE. Additionally, we have approximately 13 other retired RNs who have indicated willingness to volunteer with the Health Department in the community. These nurses may require a bit more training since they may not have any communicable disease investigation experience.

Subtotal of those trained and ready, using full time equivalent number

4.9 Full Time Equivalent Staff trained and ready to perform case investigation and contact tracing.

The number of persons (from all sources) in the pipeline to be trained by June 15, 2020. The total number should be equated to full-time equivalent staff.

We will be offering training to the three retired public health nurses prior to June 15th. This equates to 1.8 additional FTE. Other retired nurses from our community will be trained just-in-time. During that training period we would reach out to Clark County for the additional capacity needed.

The gap between the minimum of 15/100,000 and the trained and to-be-trained personnel, using the full time equivalent number. A plan for filling the gap, which could a request for staff trained by the State.

There is no gap, however given we only have, and according to the calculation only need, a few staff, we remain vulnerable if any become ill or there are other urgent situations that need attention.

Our plan is to use our public health nursing staff to its fullest capacity, then use our other trained County staff. If we exhaust our local resources we would reach out to Clark County as mentioned above. Finally, if the need exceeds that capacity we would request support from the State Department of Health and/or National Guard.

If the local jurisdiction is making use of non-local health jurisdiction resources for this purpose, those other entities supplying the resources (e.g. community non-profit, volunteer organization, Washington State Department of Health, etc.) must provide a letter certifying that they have the resources noted to assist the local health jurisdiction with case and contact investigations.

See Attachment C: Letter from Clark County Health Officer-Dr. Melnick

The total number of cases identified over the past four weeks and the percentage of cases reached by phone or in person within 24 hours of receipt of positive lab result.

Using the previous 4-week report period of 4/18-5/15/2020: 8 positive cases. All (100%) were contacted well within the 24 hours of receipt of positive lab result. Average initial contact time was within 4 hours.

The total number of close contacts identified over the past four weeks and the percentage of contacts reached by phone or in person within 48 hours of receipt of positive lab report on a case.

70 contacts were identified and all (100%) were reached by phone within 48 hours. All were reached within 4 hours of the interview with the positive case.

ISOLATION/QUARANTINE FACILITIES

The number and type of isolation/quarantine facilities secured to house persons with COVID-19 who do not have a home or otherwise wish to isolate or quarantine themselves outside of their home, if it becomes necessary.

For each facility list: the facility name, type (hotel, apt building, university dorm, county fairgrounds, etc.), the number of rooms/people for isolation, the number of rooms for quarantine, the time period for which the space has been secured, and if there is a clause for extension/renewal and the terms of that extension; and services provided (e.g. housing, food, etc.) and by whom (e.g. motel/hotel, a non-profit, etc.

Currently, we are utilizing two sites for quarantine/isolation housing in south Pacific County. We were unable to secure a location in north Pacific County. However, we do have transportation available for individuals needing to be transported to the isolation/quarantine sites. We are utilizing individual hotel rooms for quarantine and isolation which helps with the ability to maintain social distancing from others. However, as hospitality lodging re-opens in Pacific County, we imagine that we will be unable to continue to utilize one of these sites. The current sites are as follows:

Heidi's Inn Hotel- Ilwaco, WA

- Potential Rooms Available: up to 20 individual hotel rooms for isolation/quarantine
- Possibility to scale up to the 20 units as needed
- Hospital located within one-minute drive
- Expect that we will no longer be able to rent individual rooms as of June 1, 2020 when hospitality lodging re-opens. We may have to consider renting the entire hotel if the need arises.
- Currently, Health Department staff provide groceries and other supplies to individuals in isolation/quarantine. Also, a vendor service agreement was entered with Coastal Community Action Program to provide prepared meals.

Ocean Park Retreat Center- Ocean Park, WA

- Retreat center with congregate spaces as well as four cabins which can be used for quarantine purposes
- Located within 15 minutes from hospital
- As long as summer camps do not resume, we should be able to utilize this facility until the beginning of July 2020 when the retreat center has private events

We are currently exploring the use of RVs for quarantine/isolation housing as hospitality lodging in Pacific County begins to open back up. We are exploring the possibility of purchasing or leasing 3-4 units that could be utilized for isolation or quarantine. We have identified sites that would be appropriate for to locate these units. We are waiting for clarification regarding requirements/eligibility for reimbursement from our various COVID funding sources for of these type units. We have received approval for Federal Public Assistance Funds to “back fill” the Commerce funds once those funds for quarantine/isolation housing and support services are exhausted.

SERVICES PROVIDED FOR IN-HOME ISOLATION OR QUARANTINE

Describe how the health department provides or links persons in home isolation or quarantine with needed services they cannot otherwise obtain without going out for on their own (e.g. food, medications, etc.).

In the description include: who does the work (e.g. health department case investigator, contract with specific agency, etc.), how referrals are made to that agency, if other than the health department and how it is ensured that the referral agency connects with the client.

Pacific County Health Department is utilizing some of the WA State Department of Commerce Emergency funding for COVID 19 response to provide case management services. Case management services are provided for those able to isolate or quarantine at home, or those who need housing to do so. Case management services include providing groceries and meals to individuals who are in quarantine/isolation/or currently experiencing homelessness. On referral from a public health nurse (contact tracer), a care coordinator contacts individual who may need assistance with food, water, medication, or shelter due to COVID 19. Current Health Department Care Coordinators conduct an intake and assess individuals for a wide-variety of needs. We have contracted with our Coastal Community Action program for support through the meals-on-wheels program, and we also offer grocery shopping. We have not been providing gift certificates to individuals as most of them are

needing to isolate/quarantine and therefore should not be out in public. We also can pick up medications for individuals who order and pay for them over the phone prior to being retrieved by health department staff. If behavioral health services are needed, we could contract with a local provider or reach out to the mobile crisis team for assistance. Additionally, the Health Department has arranged for transportation through a local provider. Transportation is available to transport individuals from doctor offices or hospitals to non-medical quarantine/isolation sites. Once immediate needs are met, case managers also work with individuals to identify other needed resources such as health care coverage, rental or utility assistance, etc. and make additional referrals as needed. The Health Department has translation services available via the language line. We have translated documents, used bilingual staff and language line to meet special needs of the populations we serve.

OUTBREAK INVESTIGATION CAPACITY

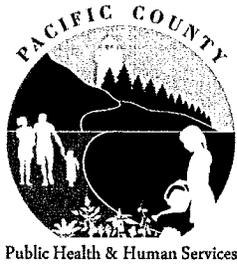
Describe the health department's capacity to conduct outbreak investigation in congregate living settings (e.g. skilled nursing facilities, jails, multiple-family housing buildings) and workplaces (e.g. food processing facility, manufacturing plant, office building, etc.).

These plans should describe: the number and type of staff trained to conduct outbreak investigations, resources to conduct testing, and any community or state resources relied upon to conduct these investigations.

Outbreak investigation would be led by our mobile strike team (MST). We are in the process of assessing the response to each of our eight congregate living facilities, including one skilled nursing facility. The MST follows the incident command system and is staffed with an on-scene commander, public information officer, facility liaison, and testing team made up of our three public health nurses. Depending on the response required and the needs of the facility we are responding to, we have the ability to increase our response with hospital staff that currently support our drive through testing events. This would include infection control nurses, medical assistants, and a clinic manager. In order to prevent an outbreak in a congregate living facility, our lead CD nurse conducts daily surveillance calls to each facility to assess the health of residents and staff, helping to ensure proper procedures are followed, and be a resource to these facilities. Testing, PPE, and other supplies needed by the MST can be sourced through our EOC logistics division. Daily surveillance calls to all congregate living facilities have been a part of our outbreak prevention in congregate living facilities since April 6th.

The MST is also configured to respond to congregate work facilities. Seafood processing plants are the primary concern. Initial education was provided to help facilities keep employees safe. Following the provided education, surveys were administered and collected to better understand what measures have been implemented at each facility. We are confident that appropriate actions have been taken to limit an outbreak.

Depending on the congregate living or work facility response required, limiting factors of our MST include testing supplies and PPE. We can quickly source these materials from our drive through testing supplies, but the size of the response or multiple responses could quickly outpace our on-hand supplies.



PACIFIC COUNTY Public Health and Human Services

South Bend (360) 875-9343 / Fax (360) 875-9323
1216 W. Robert Bush Drive / PO Box 26 South Bend, WA 98586

Long Beach (360) 642-9349 / Fax (360) 642-9352
7013 Sandridge Road Long Beach, WA 98631

5/21/20

Pacific County Board of Health

Frank Wolfe, Chairperson

Lisa Olsen, Vice-Chair

Mike Runyon, Commissioner

The COVID-19 pandemic has caused significant disease in Washington State. While Pacific County has not been spared, transmission has occurred at a slow rate and many cases were likely infected outside the county. Nine total cases have been reported to Public Health. The County response has been comprehensive, mobilizing a robust team through the emergency operations center, augmenting the critical work of our department and Communicable Disease team.

As part of the response to the pandemic Pacific County Public Health and Human Services has enhanced case and contact investigation capability, increased testing capacity for COVID-19 in the county by hosting drive through testing, and developed a plan to effectively isolate and quarantine known cases and contacts.

As a result of Governor Inslee's Proclamation May 19th, more counties are able to apply for a variance that would allow them to move from Phase 1 to Phase 2 of the Reopening Washington Plan. Counties are eligible to apply if they have less than 10 cases per 100,000 residents over the past two weeks. Pacific County has had one case reported in the last two weeks. This is a rate of 4.6 cases per 100,000 residents per 14 days.

Given this lack of evidence of significant current community transmission of COVID-19 in Pacific County, our increase in public health capacity and the ability of our local hospitals to respond to a potential increase in cases with sufficient PPE supplies and bed capacity, I am recommending that Pacific County request a variance that includes all of the Phase 2 modifications in the plan to Reopen Washington.

Regards,

A handwritten signature in cursive script that reads "Steven Krager".

Steven Krager, MD MPH
Deputy Health Officer, Pacific County

All correspondence received by Pacific County may be subject to public disclosure under Chapter 42.56 RCW

Pacific County is an Equal Opportunity Employer

**BEFORE THE BOARD OF COMMISSIONERS
PACIFIC COUNTY, WASHINGTON
1216 W. Robert Bush Drive
South Bend, Washington**

**Friday, May 22, 2020
4:30PM**

or as soon thereafter as possible

**SPECIAL/EMERGENCY MEETING
AGENDA**

The matter listed within the Special Meeting Agenda was distributed to each County Commissioner for review.

Call to Order

Public Comment (*limited to three minutes per person*)

ITEMS REGARDING GENERAL BUSINESS

- 1) Consider adoption of Resolution No. 2020-020 in the matter of applying for a variance to move to Phase 2 of the Governor's COVID Pandemic Safe Start Washington-A Phased Approach to Recovery Order

The Board may add and take action on other items not listed on this agenda and order of action is subject to change.

The hearing facility is "barrier free" and accessible by those with physical disabilities. Aids will be provided upon request for those with language/speaking or hearing impediments, but requests need to be received at least five (5) business days prior to this hearing. Such requests may be filed in person at the Commissioners' Office at the address noted above or at 360/875-9337.

**BEFORE THE BOARD OF COUNTY COMMISSIONERS
PACIFIC COUNTY, WASHINGTON**

RESOLUTION NO. 2020-020

**IN THE MATTER OF APPLYING FOR A VARIANCE TO MOVE TO PHASE 2
OF THE GOVERNOR'S COVID PANDEMIC SAFE START WASHINGTON-A
PHASED APPROACH TO RECOVERY ORDER**

WHEREAS, Governor Inslee and the Washington State Department of Health recognize that there are currently counties with less than 10 new cases of COVID-19 per 100,000 residents over the past two weeks, and

WHEREAS, these counties have the opportunity to apply for a variance to move from phase 1 to phase 2 of the Governor's Phased Approach to Reopening Washington Plan, and

WHEREAS, Pacific County has had one new case of COVID-19 case reported in the last two weeks making the County eligible to apply for this variance; and

WHEREAS, one of the requirements for applying for the variance includes submission of a signed recommendation from the local public health officer to the local board of health, and

WHEREAS, Pacific County's Health Officer, Dr. Steven Krager submitted a letter of recommendation to the Pacific County Board of Health recommending the Board of Health request a variance move to phase 2, including all of the phase 2 modifications contained in the phase chart, which is attached hereto and hereby incorporated by reference, and

WHEREAS, the Pacific County Board of Health at its special meeting on the 22nd day of May, 2020, voted unanimously and adopted Resolution No. 2020-1 to move forward with a variance request, and

WHEREAS, another requirement for applying for the variance includes submission of a letter from local hospitals certifying that they have adequate bed capacity to serve their community and adequate PPE supplies to keep their workers safe, and

WHEREAS, Willapa Harbor and Ocean Beach hospital have submitted letters certifying as such, and

WHEREAS, the variance request must include a document describing the following:

1. COVID-19 testing site information.
2. Data on median number of days from onset of illness to COVID-19 specimen collection date.
3. Testing date afro each of the previous four weeks.
4. Local health department's resources to perform case and contact investigations.
5. Information on isolation and quarantine facilities.
6. Resources for supporting persons in home isolation/quarantine.
7. Local health department's capacity to perform outbreak investigations in congregate living situations and workplaces.

WHEREAS, the Pacific County Health Department, with support of the County's Emergency Operations Center, has prepared a plan as required which is attached hereto and hereby incorporated by this reference.

NOW, THEREFORE, BE IT HERBY RESOLVED that the Board of County Commissioners of Pacific County, Washington hereby applies for a variance to move fully to Phase 2 of the Governor's Safe Start Washington-A Phased Approach Recovery.

PASSED by the following vote this 22nd day of May, 2020 by the Board of Pacific County Commissioners meeting in special/emergency session at South Bend, Washington, then signed by its membership and attested to by its Clerk in authorization of such passage:

_____ YEA; _____ NAY; _____ ABSTAIN; and _____ ABSENT

ATTEST:

BOARD OF COUNTY COMMISSIONERS
PACIFIC COUNTY, WASHINGTON

Marie Guernsey, Clerk of the Board

Frank Wolfe, Chair

Lisa Olsen, Commissioner

Michael Runyon, Commissioner

WASHINGTON'S PHASED APPROACH

Modifying Physical Distancing Measures as we Reopen the State

INDIVIDUALS AND BUSINESSES SHOULD FOLLOW ALL REQUIREMENTS LISTED ABOVE DURING ALL PHASES

	Phase 1	Phase 2	Phase 3	Phase 4
High-Risk Populations*	Continue to Stay Home, Stay Healthy	Continue to Stay Home, Stay Healthy	Continue to Stay Home, Stay Healthy	Resume public interactions, with physical distancing
Recreation	Some outdoor recreation (hunting, fishing, golf, boating, hiking)	Outdoor recreation involving 5 or fewer people outside your household (camping, beaches, etc.)	<ul style="list-style-type: none"> - Outdoor group rec. sports activities (50 or fewer people) - Recreational facilities at <50% capacity (gyms, public pools, etc.) - Professional sports without audience participation (horseracing, baseball, etc.) 	Resume all recreational activity
Gatherings (social, spiritual)	<ul style="list-style-type: none"> - None - Drive-in spiritual service with one household per vehicle 	Gather with no more than 5 people outside your household per week	Allow gatherings with no more than 50 people	Allow gatherings with >50 people
Travel	Essential travel and limited non-essential travel for Phase 1 permissible activities	Essential travel and limited non-essential travel for Phase 1 & 2 permissible activities	Resume non-essential travel	Continue non-essential travel
Business/Employers	<ul style="list-style-type: none"> - Essential businesses open - Existing construction that meets agreed upon criteria - Landscaping - Auto/RV/boat/ORV sales - Retail (curb-side pick-up orders only) - Car washes - Pet walkers 	<ul style="list-style-type: none"> - Remaining manufacturing - Additional construction phases - In-home/domestic services (nannies, housecleaning, etc.) - Retail (in-store purchases allowed with restrictions) - Real estate - Professional services/office-based businesses (telework remains strongly encouraged) - Hair and nail salons/barbers - Pet grooming - Restaurants/taverns <50% capacity table size no larger than 5 (no bar-area seating) 	<ul style="list-style-type: none"> - Restaurants/taverns <75% capacity/table size no larger than 10 - Bar areas in restaurant/taverns at <25% capacity - Movie theaters at <50% capacity - Customer-facing government services (telework remains strongly encouraged) - Libraries - Museums - All other business activities not yet listed except for nightclubs and events with greater than 50 people 	<ul style="list-style-type: none"> - Nightclubs - Concert venues - Large sporting events - Resume unrestricted staffing of worksites, but continue to practice physical distancing and good hygiene

* High-risk populations are currently defined by CDC as persons 65 years of age and older; people of all ages with underlying medical conditions (particularly not well controlled), including people with chronic lung disease or individuals with severe asthma; people who have serious heart conditions; people who are immunocompromised; people with severe obesity; people with chronic kidney disease undergoing dialysis; and people with liver disease; people who live in a nursing home or long-term care facility.

PACIFIC COUNTY VARIANCE PLAN: MOVING FROM PHASE 1 TO PHASE 2

Pacific County has had a total of 9 confirmed positive COVID-19 cases, and one death. The first case of COVID-19 identified on April 10, 2020, contracted the disease while visiting family back east, was hospitalized there, and sadly, died there. The first case, nor her immediate family members, were present in Pacific County during her infectious period. Prior to receiving reports of four positive cases linked to an outbreak at Bornstein Seafood processing plant across the river in Astoria, Oregon in mid-May, we only had three other cases in Pacific County. To date, we have had no documented transmission of disease related to our identified cases. We attribute that success to our effective contact tracing efforts, and robust isolation and quarantine/isolation housing and case management program. The last confirmed positive case in Pacific County received test results on May 8th. This individual was identified through screening related to the outbreak at the seafood processing plant in Clatsop County, Oregon. All cases and contacts are now released from isolation and quarantine, all with negative tests and/or no symptoms.

Pacific County local government fully activated our Emergency Operations Center (EOC) under a unified command of the Health Department, Emergency Management, and the Shoalwater Bay Tribe on March 17, 2020. The EOC remains activated, however, we are operating virtually for the majority of the week.

Following a weekend of recreational clam digging, in which hundreds of people converged upon our Long Beach peninsula, and given the County's demographics, limited health care capacity, and draw as a tourism destination, our health officer, with support of the EOC, the mayors of our four cities Shoalwater Bay Tribe, and the County Commissioners, elected to close hospitality lodging, beach approaches, and recreational clam digging prior to the Governor's Stay Home-Stay Healthy order. This proved to be an effective measure to reduce the amount of people coming from out of the area. Not only were there noticeably fewer people in the streets and on our beaches, traffic count reports provided by the Washington State Department of Transportation confirmed a 50-75% reduction in traffic from the same time last year. Pacific county residents, for the most part, have elected to adhere to both Governor Inslee's Proclamations and our local public health orders. All of these actions have been instrumental in keeping the incidence of novel coronavirus low in our communities, and slowed the spread related to the limited cases that have been identified. These choices have been very difficult and have had a tremendous economic impact on our largely tourism-based economy, however most agree the actions taken were effective in limiting the COVID-19 disease in Pacific County. We have created a dashboard to track local data using the metrics provided by DOH (See the Attachment A-Pacific County Data Dashboard Template-it has not been fully populated yet. At the time of this application we are in the process of moving data from other sources into this format). As the economy begins to re-open, and we begin a slow, phased re-opening of our hospitality lodging (See Attachment B-Health Officer Order-Phased Reopening Plan), we will be actively monitoring our dashboard to evaluate impacts and drive our decision making as we move forward.

Currently, we have adequate testing capability and are able to test anyone with symptoms quickly. Experienced health department staff are conducting case contact and investigation, as well as isolation/quarantine housing and case management support services. Our current investigation capacity is adequate and we have worked hard to develop plans to ramp up should there be a surge in cases. Since March, we have met with healthcare providers including our two hospitals three times per

week to check in regarding needs and to collaborate on projects including drive through testing and alternate care facility planning. Both Hospitals have provided letters in support of our variance request and certifying adequate bed and PPE capacity. Our EOC logistics division has established avenues to obtain supplies including PPE for local providers and our hospitals have set up systems with labs to ensure tests/testing supplies are replenished regularly. We conduct daily check ins with our congregate living facilities and have provided outreach and education to canneries and other large congregate workplaces. We have provided support and technical assistance where needed to assure they have comprehensive health and safety protocols in place, as well as emergency response plans should there be a case identified in their facility.

We are ready and prepared to move forward to Phase 2. We will continue to monitor the health of our community and assure plans and relationships are in place to respond quickly in any way necessary.

COVID-19 TESTING SITES

COVID-19 testing sites in your county (clinic, hospital, health department, pharmacy, drive up, etc.) and our efforts to promote/advertise those sites. In addition, specifically identify sites that serve persons with low-income, no insurance, or underserved and the hours and days of those services.

Pacific County, along with our two local hospital partners (Willapa Harbor Hospital and Ocean Beach Hospital) and the Shoalwater Bay Tribe, are offering drive-through testing events every Monday, Tuesday, Wednesday, and Friday. In order to best serve the community, the drive-through events are located at two sites located in the primary population centers of the county. Two days a week the clinic is held in the north Pacific County area (South Bend), and the other two days the clinic is held in south Pacific County (Long Beach). We are in our eighth week of drive through testing and have been able to offer testing to anyone who is symptomatic for the past five weeks. We have the capacity to increase our testing hours at each of our drive-through events or expand to add an additional day of testing every week if the demand for testing increases.

In addition to the drive-through testing events, residents can access testing through their private providers at the Shoalwater Bay Tribal clinic, Family Health Center at North Beach, Valley View Medical Clinic, or at one of our two hospitals through their ER and outpatient clinic after hours and during the weekend. In addition, there are several out of county providers who provide testing for Pacific County residents. These providers are primarily located in Clatsop County (across the river from Pacific County in Oregon), or by Grays Harbor County or Lewis County private providers.

All of our sites serve low-income, uninsured, and underserved populations. Tests conducted at the Drive Through Testing site are conducted free of charge. The tests are processed through the hospital labs who also handle billing to insurance or their uninsured program depending on the patient's insurance status. Health Department employees screen and schedule drive through testing appointments over the phone and use the Language Line as needed to provide interpretation services. Bilingual staff from the health department are also available to provide interpretation services and translation of educational materials, testing instructions, and other related publications. Interpreters and/or language line are also used to assist non-English speakers that are tested through the hospital or other private provider.

Drive Through Clinic Schedule

Day	Hours	Location
Monday	1-4 pm	South Bend
Tuesday	1-4 pm	Long Beach
Wednesday	9-12 pm	South Bend
Friday	9-12 pm	Long Beach

The Pacific County EOC Operations Section is finalizing plans for a mobile strike team (MST), which can be deployed to conduct testing in congregate living facilities, skilled nursing facilities, remote and/or isolated communities, and large congregate workplaces like seafood processing plants in case of an outbreak or to accommodate other special needs.

The availability of testing has been heavily promoted county-wide using various social media platforms including several Facebook pages (health dept, sheriff's office, emergency management, hospitals), and local websites. We have placed "Got Symptoms, Get Tested" posters and large banners in English and Spanish at gas stations, post offices, pharmacies, and in high visibility areas throughout the community.

Flyers were sent home to families accessing the school meal program, and also distributed at grocery stores to include in bags. Our newspapers have also run feature stories of the testing events and we have run ads in the papers and on the radio advertising testing availability.



¿Tienes síntomas?
Hágase la prueba.

COVID-19 auto servicio para pruebas disponibles para CUALQUIERA con síntomas. Llame a la EOC del Condado de Pacific para hacerse una cita. Lun-Vie 9:00-4:00

875-9407 or 642-9407

* Los síntomas incluyen: fiebre, tos, falta de aire, dificultad para respirar, escalofríos, dolor de cabeza, pérdida de sabor, dolor de garganta, pérdida del gusto o el olfato, fatiga, náusea y/o diarrea.



Got Symptoms?
Get Tested.

COVID-19 Drive through testing available to ANYONE with symptoms*. Call the Pacific County EOC to get screened for an appointment. Mon-Fri 9:00-4:00

875-9407 or 642-9407

* Symptoms include: fever, cough, shortness of breath, difficulty breathing, chills, loss of taste, muscle pain, headache, sore throat, new loss of taste or smell, nausea, or other mild symptoms.

MEDIAN NUMBER OF DAYS FROM ONSET OF ILLNESS TO TESTING FOR CASES

The median number of days from onset of illness to COVID-19 specimen collection date for the cases identified in your county over the past 4 weeks. The ideal target is a median number of days ≤ 2 days.

When a person calls they are screened through our call center for any symptoms within the past 72 hours and then are generally scheduled for an appointment within 24 hours of requesting a test. Each site is open to anyone, regardless of where they live in the county, however given the distance to travel (50 miles between population centers) in our large, rural county many choose to wait to test until the next available day at the location closer to their home. Depending on when a symptomatic person calls for an appointment, and where they live, some, on occasion, choose to wait 48 hours to access the next drive-through testing site closer to their home. Individuals who are scheduled for a test are

instructed to contact their provider or call 911 if symptoms worsen and would have availability to be tested at the ER or through a private provider should the situation become emergent. Regardless of where they receive testing, individuals are also instructed to quarantine themselves at home until after they have received their test result. Our new data dashboard will include a specific tracking of number of days between date test was requested and the date the test was conducted. Initially test results were being reported back within two days. For the past two weeks results have not been received for closer to four to five days. We attribute this delay to the overall increase in testing statewide.

The median number of days from onset of illness to COVID-19 specimen collection date for the positive cases in Pacific County from 4/17 through 4/23/2020 was

FOR EACH OF THE PREVIOUS FOUR WEEKS-THE NUMBER OF NEGATIVE AND POSITIVE TESTS

For each of the previous four weeks, report the total number of COVID-19 tests reported for your county, the number of negative and the number of positive test results, percent positive and what 50 times the number of positive tests would be. In addition, report the percent positive of all tests for the four week period. (Note: the ideal target is to perform about 50 tests per case and have a percent positivity no more than 2%).

Date	Total # of Tests	# of Negative Tests	# of Positive Tests	Percent Positive	50X the # of positive tests
4/18-4/24	46	43	3	6.5%	150
4/25-5/1	44	44	0	0	0
5/2-5/8	33	28	5*	15%	250
5/9-5/15	53	53	0	0	0
TOTAL FOR 4 Week Period	176	168	8	4.8%	400

*All 5 positive tests were identified and linked to an outbreak at a seafood processing facility in Clatsop County, Oregon. Two of the five cases were a married couple living in the same household.

These are tests conducted through the drive-through events and those reports received from other labs and/or providers. We know that private providers outside of the county (primarily Clatsop, Grays Harbor, and Lewis), also conducted testing on residents in Pacific County and not all of our providers outside of the county consistently report total tests conducted to us. Because of this, we know that the total numbers of tests conducted on Pacific County residents is likely higher than what we have been able to track. Over the course of the past 4 weeks, we have received 8 total positive results. 50 times that number is 400 tests. While the total number of tests conducted over the same time period (176) is lower than 400, it should be noted that we have been offering testing to everyone who is symptomatic for the past 5 weeks. So, the number of tests conducted hasn't been limited by our capacity to test, but rather by lack of demand for more testing by the community. If you remove the five cases linked to the outbreak in the seafood processing plant, the number of tests we have reported does exceed 50X the number of positive tests threshold (3 positive tests, 176 tests reported

CASE INVESTIGATION AND CONTACT TRACING

The calculation showing how many cases and contact tracers are needed for the county's population, assuming a minimum of 15 contact tracers for every 100,000 population. Show the calculation.

$$21,640 \text{ population}/100,000 \times 15 = 3.25 \text{ Contact Tracers Needed}$$

The number of health department staff trained and ready to perform case investigation and contact tracing, as well as their job classifications. The total number should be equated to full time equivalent staff.

Our current contact tracking capacity is our three Public Health Nurses. They are trained and ready to perform case investigation and contact tracing. Two of the three have been working in our communicable disease program for more than 20 years. The total FTE is 2.9 FTE.

The number of other county/city government staff trained and ready to perform case investigation and contact tracing. The total number should be equated to full time equivalent staff.

Currently there are two other county staff trained and ready to perform contact investigation. One is the current county administrator who is an RN and the previous director of the health department for more than 20 years. The other is the recent health department director, who is also a RN, who retired at the end of January, but is back working on contract during the pandemic. This would equate to 2.0 FTE.

We share a public health officer with Clark County. Clark County has a plan to hire approximately 80 staff to support contact tracing. Clark County has agreed to allow us to "buy" contract tracing capacity should we have a huge surge in cases.

The number of volunteers or non-governmental employees trained and ready to perform case investigation and contact tracing. The total number should then be equated to full-time equivalent staff.

We have three recently retired public health nurses all with CD investigation experience who have indicated a willingness to volunteer to support contact tracing efforts should the need arise. They would require minimal training to be ready to perform in this capacity. Assuming each would work 3 days a week this would equate to another 1.8 FTE. Additionally, we have approximately 13 other retired RNs who have indicated willingness to volunteer with the Health Department in the community. These nurses may require a bit more training since they may not have any communicable disease investigation experience.

Subtotal of those trained and ready, using full time equivalent number

4.9 Full Time Equivalent Staff trained and ready to perform case investigation and contact tracing.

The number of persons (from all sources) in the pipeline to be trained by June 15, 2020. The total number should be equated to full-time equivalent staff.

We will be offering training to the three retired public health nurses prior to June 15th. This equates to 1.8 additional FTE. Other retired nurses from our community will be trained just-in-time. During that training period we would reach out to Clark County for the additional capacity needed.

The gap between the minimum of 15/100,000 and the trained and to-be-trained personnel, using the full time equivalent number. A plan for filling the gap, which could a request for staff trained by the State.

There is no gap, however given we only have, and according to the calculation only need, a few staff, we remain vulnerable if any become ill or there are other urgent situations that need attention.

Our plan is to use our public health nursing staff to its fullest capacity, then use our other trained County staff. If we exhaust our local resources we would reach out to Clark County as mentioned above. Finally, if the need exceeds that capacity we would request support from the State Department of Health and/or National Guard.

If the local jurisdiction is making use of non-local health jurisdiction resources for this purpose, those other entities supplying the resources (e.g. community non-profit, volunteer organization, Washington State Department of Health, etc.) must provide a letter certifying that they have the resources noted to assist the local health jurisdiction with case and contact investigations.

See Attachment C: Letter from Clark County Health Officer-Dr. Melnick

The total number of cases identified over the past four weeks and the percentage of cases reached by phone or in person within 24 hours of receipt of positive lab result.

Using the previous 4-week report period of 4/18-5/15/2020: 8 positive cases. All (100%) were contacted well within the 24 hours of receipt of positive lab result. Average initial contact time was within 4 hours.

The total number of close contacts identified over the past four weeks and the percentage of contacts reached by phone or in person within 48 hours of receipt of positive lab report on a case.

70 contacts were identified and all (100%) were reached by phone within 48 hours. All were reached within 4 hours of the interview with the positive case.

ISOLATION/QUARANTINE FACILITIES

The number and type of isolation/quarantine facilities secured to house persons with COVID-19 who do not have a home or otherwise wish to isolate or quarantine themselves outside of their home, if it becomes necessary.

For each facility list: the facility name, type (hotel, apt building, university dorm, county fairgrounds, etc.), the number of rooms/people for isolation, the number of rooms for quarantine, the time period for which the space has been secured, and if there is a clause for extension/renewal and the terms of that extension; and services provided (e.g. housing, food, etc.) and by whom (e.g. motel/hotel, a non-profit, etc.

Currently, we are utilizing two sites for quarantine/isolation housing in south Pacific County. We were unable to secure a location in north Pacific County. However, we do have transportation available for individuals needing to be transported to the isolation/quarantine sites. We are utilizing individual hotel rooms for quarantine and isolation which helps with the ability to maintain social distancing from others. However, as hospitality lodging re-opens in Pacific County, we imagine that we will be unable to continue to utilize one of these sites. The current sites are as follows:

Heidi's Inn Hotel- Ilwaco, WA

- Potential Rooms Available: up to 20 individual hotel rooms for isolation/quarantine
- Possibility to scale up to the 20 units as needed
- Hospital located within one-minute drive
- Expect that we will no longer be able to rent individual rooms as of June 1, 2020 when hospitality lodging re-opens. We may have to consider renting the entire hotel if the need arises.
- Currently, Health Department staff provide groceries and other supplies to individuals in isolation/quarantine. Also, a vendor service agreement was entered with Coastal Community Action Program to provide prepared meals.

Ocean Park Retreat Center- Ocean Park, WA

- Retreat center with congregate spaces as well as four cabins which can be used for quarantine purposes
- Located within 15 minutes from hospital
- As long as summer camps do not resume, we should be able to utilize this facility until the beginning of July 2020 when the retreat center has private events

We are currently exploring the use of RVs for quarantine/isolation housing as hospitality lodging in Pacific County begins to open back up. We are exploring the possibility of purchasing or leasing 3-4 units that could be utilized for isolation or quarantine. We have identified sites that would be appropriate for to locate these units. We are waiting for clarification regarding requirements/eligibility for reimbursement from our various COVID funding sources for of these type units. We have received approval for Federal Public Assistance Funds to “back fill” the Commerce funds once those funds for quarantine/isolation housing and support services are exhausted.

SERVICES PROVIDED FOR IN-HOME ISOLATION OR QUARANTINE

Describe how the health department provides or links persons in home isolation or quarantine with needed services they cannot otherwise obtain without going out for on their own (e.g. food, medications, etc.).

In the description include: who does the work (e.g. health department case investigator, contract with specific agency, etc.), how referrals are made to that agency, if other than the health department and how it is ensured that the referral agency connects with the client.

Pacific County Health Department is utilizing some of the WA State Department of Commerce Emergency funding for COVID 19 response to provide case management services. Case management services are provided for those able to isolate or quarantine at home, or those who need housing to do so. Case management services include providing groceries and meals to individuals who are in quarantine/isolation/or currently experiencing homelessness. On referral from a public health nurse (contact tracer), a care coordinator contacts individual who may need assistance with food, water, medication, or shelter due to COVID 19. Current Health Department Care Coordinators conduct an intake and assess individuals for a wide-variety of needs. We have contracted with our Coastal Community Action program for support through the meals-on-wheels program, and we also offer grocery shopping. We have not been providing gift certificates to individuals as most of them are

needing to isolate/quarantine and therefore should not be out in public. We also can pick up medications for individuals who order and pay for them over the phone prior to being retrieved by health department staff. If behavioral health services are needed, we could contract with a local provider or reach out to the mobile crisis team for assistance. Additionally, the Health Department has arranged for transportation through a local provider. Transportation is available to transport individuals from doctor offices or hospitals to non-medical quarantine/isolation sites. Once immediate needs are met, case managers also work with individuals to identify other needed resources such as health care coverage, rental or utility assistance, etc. and make additional referrals as needed. The Health Department has translation services available via the language line. We have translated documents, used bilingual staff and language line to meet special needs of the populations we serve.

OUTBREAK INVESTIGATION CAPACITY

Describe the health department's capacity to conduct outbreak investigation in congregate living settings (e.g. skilled nursing facilities, jails, multiple-family housing buildings) and workplaces (e.g. food processing facility, manufacturing plant, office building, etc.).

These plans should describe: the number and type of staff trained to conduct outbreak investigations, resources to conduct testing, and any community or state resources relied upon to conduct these investigations.

Outbreak investigation would be led by our mobile strike team (MST). We are in the process of assessing the response to each of our eight congregate living facilities, including one skilled nursing facility. The MST follows the incident command system and is staffed with an on-scene commander, public information officer, facility liaison, and testing team made up of our three public health nurses. Depending on the response required and the needs of the facility we are responding to, we have the ability to increase our response with hospital staff that currently support our drive through testing events. This would include infection control nurses, medical assistants, and a clinic manager. In order to prevent an outbreak in a congregate living facility, our lead CD nurse conducts daily surveillance calls to each facility to assess the health of residents and staff, helping to ensure proper procedures are followed, and be a resource to these facilities. Testing, PPE, and other supplies needed by the MST can be sourced through our EOC logistics division. Daily surveillance calls to all congregate living facilities have been a part of our outbreak prevention in congregate living facilities since April 6th.

The MST is also configured to respond to congregate work facilities. Seafood processing plants are the primary concern. Initial education was provided to help facilities keep employees safe. Following the provided education, surveys were administered and collected to better understand what measures have been implemented at each facility. We are confident that appropriate actions have been taken to limit an outbreak.

Depending on the congregate living or work facility response required, limiting factors of our MST include testing supplies and PPE. We can quickly source these materials from our drive through testing supplies, but the size of the response or multiple responses could quickly outpace our on-hand supplies.