

**Okanogan County Board of Health Meeting
May 12, 2020**

Board of Health Members:

District #1 County Commissioner - Chris Branch (CB)
District #2 County Commissioner - Andy Hover (AH)
District #3 County Commissioner (Chair) - Jim DeTro (JD)
Patricia Stanton - City of Okanogan Representative
Mariann Williams, ARNP - Board Member
James Wright - Board Member
Kris Erlandsen - Board Member

Okanogan County Public Health Administration

Dr. John McCarthy - Health Officer (McC)
Lauri Jones - Community Health Director (LJ)
Dave Hilton - Environmental Health Director (DH)

Other Identifiable Attendees:

Dr. Jennifer Thill - Chief Medical Officer, Mid Valley Hospital
County officials and the public: At last count, there were 71 participants online from Okanogan County and the public.

***Note:** These notes have been taken by an Okanogan County Watch volunteer from a ZOOM audio meeting of the Okanogan County Board of Health. Notes have been taken verbatim when possible, and otherwise summarized. Note taker's comments or clarifications in italics. These are not officially approved Board of Health minutes, which are posted on the Board's website, normally at a later time. Most speakers did not identify themselves, so unless the voice was easily recognizable identified, speaker was uncertain. In particular, Cmr. DeTro and Hover's voices were not easily distinguished, as they normally are in person or with a better connection. Some of the speakers used first names only.*

Meeting Summary:

1) Private sewage issue. 2) Proposed Covid-19 variance request to Governor for moving to Phase 2: Public Health Officer recommendation to wait until county can show ability to comply with necessary requirements will be more likely to succeed; Background, recent statistics in Okanogan County; Point of Care testing ability, Contact Tracing identified as necessities; Confusion re State directives vs local joint resolution regarding hospitality closures; Experimental nature of moving to Phase 2 & need for exit plan if necessary; small business vs big box store inequities; how county cases are counted; Public Health and Branch advocate for coming together as a community rather than arguing about compliance and inequities; suggested goal of collaborating with other counties to request necessary supplies from state after research on population-based demographics for specific needs; Mid-/valley Hospital input re necessity of proven preventive hygiene; Meeting Adjourned.

1:33 - JD: Brief discussion of the Agenda. 52 Participants online.

Public Input Opened:

Stacie, from Okanogan Community Coalition: Cannot stay in the meeting, but before leaving would like to make this comment: Lauri has been a coalition board member for over 10 years. She has been on numerous committees and has done a great job. I want to send this out - we will continue to coordinate with public health - making masks - getting the word out - we are here to help you.

JD - Thank you. Not often that we get a positive input.

Business Items:

Minutes approved from 4/14/2020

Financial reports - Question : Financial Impact of Covid Crisis - How is it affecting Pub Health, both - we'll be having a report later in the meeting. While the septic program, cost of Env health programs were put on hold. It has impacted us - pretty dramatically upfront, but now virtually exploded. Revenue wise we are in pretty good shape.

1:40 - 67 participants on line

Lauri - Two sources of funding through public health funds for Covid. Part is for emergency preparedness, but called Covid response, which allows us to use those funds. There is a federal portion we'll have to file. Totally \$150,000. I think it will replace the contract amendment for June which we would have had for regular emergency funds.

Contract #11 is approved, no more discussion.

Private Sewage issue: Summary

JD - Someone named Ann called a board member (apparently Jim DeTro) because she wanted him to look at her septic system. While there, a contractor came. Her septic pump was pumped and didn't fail. The drainfield failed. So Dave (Hilton?) came and looked at it. They dug a hole, and evidently, it didn't perc.

Unknown person: This is not correct.

Logistics discussed. Options are to up behind the house or come down to the area closest to HW 20. Details discussed to solve the problem and various options, problems discussed by individuals who did not give names. Various opinions were given as to cost, dispute as to whether a pressurized system was better.

1:48: 71 participants on line

Various options that the Department has decided against were reviewed and explained. Ann says the cost is far higher than the Dept is saying and questions why she should have the additional expense. Her contractor (AC Morgan) was saying a new drain field would be only \$7,000 and what the county wants would be \$20,000.) Eventually, she is advised to contact the

county for a list of contractors and compare prices on the various options. The county offers to assist her when she has made further decisions.

COVID-19 VARIANCE PLAN: MOVING FROM PHASE 1 TO PHASE 2

Background and recent statistics on Covid-19 in Okanogan County

Lauri Jones - Wants to thank Emergency Management for help with all this. Several staff working overtime for about 2 months, communicating with health officers several times a day. Thanks Chrystal, who has her office here and has been tirelessly helping us with releases, etc. Maurice (Goodall) has worked 7 days a week himself.

She has discussed with BOCC what it would take to move from Phase 1 to Phase 2, under Governor's plan. While we have a smattering of Covid cases, we can trace those being a result of travel from one county or state to another. When we look at what it would look like to move up, I've showed Dr. McCarthy the letters from Mid-Valley, Three Rivers, and North Valley hospitals.

LJ: First, we have been fortunate to be isolated geographically. This has worked in our favor. We are spread out in a large geographic area. Already socially isolated. By the time the Governor Introduced his original order, we were far ahead.

AH - Between the 3 letters, the hospitals have only treated 1 Covid case.

LJ - Not true. Within the last week, we've had 2 hospitalized, one for 9 days. Two were shipped to Central WA Hospital. (May 11th update from Mid-Valley.)

AH - So you have an updated copy.

LJ - Updated today. They assured they have adequate PPE. I will share: our EMS having the appropriate PPE and enough of it is of concern. While the requirement calls for hospitals, we know our EMS first responders have been trying to access PPE. Maurice has tried, Crystal has tried. Twisp makes cloth masks, but they are not N95's.

AH or JD - Smoke Jump base is making cloth reusable gowns. The state has issued some supplies. We have surgical masks, N95 masks.....doesn't mean they are getting everything they want. Lifeline has things backordered, and has to pay when they order. Everything is maintaining. We can reach out to the state and get what we want.

Woman's voice - The range is whatever the lowest is. A couple of weeks' supply is about what they have.

LJ - As we look forward into what Phase 2 might look like, I'd like Dr. McCarthy to chime in. Do we have the Phased approach document, 1,2,3?

Person on phone asks to have people muted so we can hear.

Dr. McCarthy -These are the things we need at this time:

1) We are looking at testing and immediate response this weekend. So if someone calls and their employer says he's putting them back to work.... Say they got tested in Brewster. (Hard to follow.) That's one part. **Making sure we can quickly get an answer** as to their Covid status.

2) Adequate contact tracing so other people can get tested.

Contact Tracing

LJ - Wants to explain: **contact tracing isn't a new term. It's been used longer than I've been in Public Health.** All clinics are supposed to notify public health when any one of a several diseases are treated. Required to notify us. At that time, we start our case investigation. We are doing that under the authority of our health officer, dept of health, state board of health. This is not a new concept. You are hearing this for the first time becausecontact tracing is not a new term. It is not a political term. It's what we do every day in Public Health. Brian Pyper has done this every day since he got here. This is just unique and different because it's a new virus. We are not doing anything different - asking to quarantine, and if you are positive, you are asked to stay in home except to seek medical treatment.

As we look forward to re-opening, (joke about hair cuts) We still have to ensure the public safety. This is the mission of public health. Prevent and Promote. With that in mind, we are going to consider moving from Phase 1 to Phase 2 under Dr. Mc Carthy's direction.

McCarthy - We reset the clock every time we get a new case. I can tell you Spokane is asking to address this as a region rather than county. We have some risks with the packing sheds that they don't have in other places. How to get the right balance - we will have to accept some infection, but must be diligent in tracking them down. We could appeal to Governor and Public Health to move to Phase 2, but it wouldn't go real well because we just had a couple of cases.

JD - Are you telling us to apply?

Testing Ability

McC - We need more testing ability . So if someone in Oroville doesn't have a ride (*to be tested?*) and is working in a shed, how can it be decided? We need it soon.

LJ - I had a phone call this AM from a state who is packaging up the test. We have 1,000 on the way. We want to save it for health care worker and nursing homes. **There's not enough for agriculture.** Gebbers Farms has been diligent in staying in touch at least every week. When workers come by helicopter they are quarantined for 14 days. If we have a person tested who works for Gebbers, they request the person be quarantined. They are keeping in touch with Maurice too. They are the largest growers in the County. 1500 workers coming by end of May. Mac Gebbers was getting them tested before coming into the area. Coordinating with H2A program. The last thing they need is any disruption in their workers or sheds, with cherries coming up.

McC - We have some exemplars who can show others how to do it (referring to agricultural mitigations) But if we have some that are doing it and not doing it well, it will be a more difficult situation - if they are being judged by different criteria. **We need to work as a community to have a standard.**

State vs Local regulations, "Soft Openings"

JD (or AH ?)- The other day I saw the plan that Mark Miller put up. You authorized him to "soft open" because of his plan. Could we do that for more small businesses? For example, a gal with an insurance business in downtown Omak. It's her and her sister. If someone's house burns down, how is she supposed to why couldn't she apply with a plan and say one person at a time in my business....?

McC - There are local regulations and state regs. In terms of saying we are going to buck the state's regs, I am not comfortable with that. The example you gave of an outdoor activity.... the state has given permission. I do not want to draw lines. I want to see how we can protect and stay with Governor's plans. One answer - yes, as long as it doesn't cross the line. The other answer - I don't want 45 different plans coming across my desk every day.

AH - The Gov said outdoor rec is ok, and someone says this is what I want to do....so it's essential vs nonessential businesses. That's where the medical science I don't think rings true. Example - golf courses. All large businesses have people who walk into their store. I've asked people in the Methow who say people are having larger than usual business. But some can't even open. I don't understand the science.

McC - This is political, not medical. There isn't any scientific specific study what we've done. Regarding excepting Walmart because it has drugs and essentials - I understand the dichotomy.

AH (?) - I know. And that's why we say we should try to push for Phase 2 because all these businesses can Accomplish this. I can go with Phase 2, but we have to all agree that we have a plan. It can 't say that we are going to sit here and drink our beers, etc. That won't work well. So how do we say this is ok, but not sitting and eating dinner.

McC - Everyone has the same goals. Not more disease, not staying closed. We are trying to figure out how to thread that needle.

AH or JD - Our domestic violence counts are 100% higher now.

McC - Yes, and mental illness. There was a suicide of a friend's brother this week. There are costs either way. Costs if we do not open, others if we don't. This is what we must decide.

(JD?) Are you saying...????

McC - I am open to looking at Phase 2, if people put together a good phase 2. In the Methow people are saying we have a great plan - we won't advertise, we'll do cleaning, etc. I notice there are folks in the Methow who are doing this. But what is happening is that the good players are being punished and the bad players are.....A sledge hammer won't make the difference.

LJ _ Asks speakers to please identify themselves for the sake of those on their phones and computers.

Joint County Resolution on Closing Down (not extended) as Compared with Governor's Order: Confusion

AH - That leads me into the next part of this: We had a joint resolution that said everyone is closed down. A lot of people took that to mean they were closed completely, going according to the governor's order. And the resolution ended, but they are still under the Stay Home Stay

Health order . **People calling - did you open up the county? NO...but what I'm curious about - do you know where the piece is that gives the guidance on the Hotels/Motels so we can point to it?**

McC - Not aware of any place that says that. A tricky thing in the plan. When people were coming to valley, we were importing disease - this is why the US has such a high number. We don't want to transport it into Winthrop, packing sheds, north County, etc. . With the stay at home order and joint a resolution - which says it's really hot right now, let's not let people come in....but that fell away. The exact wording doesn't preclude....you can go hunting and fishing . **But stay at home. It is intended to not bring people into our communities.**

AH - So it's kind of muddy.

CB - Honestly, it didn't take me very long to figure that out. If I don't WANT to believe it, it takes a long time. **We should have known what we adopted, and I think we know what we adopted.** The state order was basically about essential travel.

After reading this article (*to which he refers several times, below*) See:

https://www.erinbromage.com/post/the-risks-know-them-avoid-them?campaign_id=9&emc=edit_nn_20200511&instance_id=18384&nl=the-morning®i_id=81363800&segment_id=27239&te=1&user_id=dd291c3b44dd530ef2d4b0a878619960 I realized what happens when something comes out of your mouth.

The thing is that WE KNOW what we told those folks when we did the order. We closed, with these exceptions according to the state's order. We can put this in simpler words by far. When we put the order out, we closed these businesses but here are the exceptions. For example, service station - you stand there and you see more people. More people get around each other.

Tracing and Monitoring

(CB) And when Lauri talks about tracing, this was started 118 years go. This is why I suggested that if people understood what things are going on....the argument is more that we are willing to take this risk to spread this disease exponentially to have businesses open, an experiment - one thing I ask is that if we have this experiment, where is the monitoring where we say " Oh, you are right. This is serious."

Branch: We Are Actually Conducting an Experiment and Must Think of the Consequences; Extend Our Order and Apply for Exception Later

If we have 10 diseased people in Okanogan County, we've already spread the disease. We can say all day long people talk to each other and they are not getting sick, when actually it's an experiment. We need to devise a way whereby we can withdraw if needed. The Mayor of Winthrop wants the highway closed. She's very concerned.

You can say, if they can't take the game stay home, or whatever. People also want to know if we can reinstate our order so people understand. It's all about the messaging and I'd prefer the order was changed so it's understandable. In the recitals at the beginning - you can even say 10,000 droplets and 50 mph - that's what we are talking about. Then people have to really think about what they think is true, believe, and don't believe.

I've heard all these arguments for weeks. If we do something and we open the doors according to the rules, we have other problems....and we continue to communicate with the state....we have to PROVE we are capable of controlling - (*he refers to the same article on particles from sneezes, virus.*) For example, "So you came here. You violated the law. We won't put you in jail, but we want you to look around you." I think we understand the small business stuff - it's not fair. But I can't sit here and say that because it's unfair.... we can't say it's better/worse for our environment. That's not how we reason. When we do this, let's acknowledge how big the problems are. How does Public Health do their job and open up the businesses?

We can't sit here and keep arguing. I would feel a lot better making the application (*for an exception, moving to Phase 2*) when we have those questions answered. It can't be just the medical people, because they are medical. If we come up with moreif we keep having cases, isn't that the.....

Small Business vs Big Box question

LJ - When we look at the most recent cases. I can tell you 99.9% where they came from. People coming in from other areas, out of state, and south of us where they have 250 (?) cases. Even if we have a Stay Home Stay Healthy order, people say, oh, but our family isn't involved, we can go and have a vacation.

The thing that bothers me that is that at big boxes people don't have masks. But we have small businesses that can do a real job at controlling things. I think truly there are certain businesses that could do it. But how do we accomplish that moving forward, and we tell X that they have a good model, but we tell Z that you do not.

CB - I would go back to KNOW WHAT IT MEANS. The more understanding we have about how it gets spread, (*cites the article again*) - you know that information, you can see what it iswhy would I make you wear a mask? most of the disease is contracted in your home. Someone in family went out, you are using the same stuff, etc. If we know those kind of thingsand if we want to keep referring to the governor's order.... the fact is that the governor is the one who is saying it..... maybe it should be the Health officials. We agreed because they told us what it meant.

How do we count our county cases?

Question from someone: Is the 99.9% you counted...did you count as in the county or not? Is it considered because sometimes they are contracted outside the county and then brought back? How is that counted?

Mc C - It becomes our case because they will transmit it to others. That's what the reservations are saying - people will bring it in. American Samoa (*which has sealed itself off from the world and has no cases*) is the only place.... We will not do that. If we let someone in from NY, we will have it.

CB - We let it happen.

AH - Either OK county could say no, stay out, or other counties can say we'll keep you in our county.

CB - You missed my point. I don't know that we can do anything. They are our cases ...people...we created a situation....we put a date on it (*ending date of joint order?*) I am not saying we are wrong, just saying if we get down to the bone here. ... If we agree we want to open tourist business...

JD - I want a path forward to opening all businesses because if we bankrupt every business, we will have no.....

(AH?) All the tourist stuff has already been open. Like people that fix bikes. I am saying that those businesses have been open.

Return to the basic issues: Point of Care Testing and Contact Tracing (vs people will just go back to work)

Mc C - It's true in Spokane, but it is also local people who aren't going to the movies. So let's get back together. We do not have point of care testing. We are building contact tracing.....

(Kris Erlandsen?). - I've heard through the potential for the variance and the criteria we'd need to hit. What is your view as to when we can actually hit any of those bench marks?

McC - I look at ...(?) The state will open up before we do. The state needs to acknowledge that there is no way Okanogan will get to zero. Same as Kittitas. For 10 days, we had it under our belt, then we had cases. Under current Phase 1, it will be impossible to get to Phase 2.

(Kris?) - This is my point. You and the Commissioners are going to have to....**DeTro is right. At some point, people are not going to listen to you . People will go back to work....**

JD - I used that analogy (his favorite example of the cure being worse than the disease - Fawn Ck fire - when it went from Buck creek to Lake Creek, USFS did an 8,000+ acre burn to stop a much smaller fire. The analogy is that the suicides, bankruptcies, etc are to save one (*death?*) ...when I see people talk about it, the so-called experts, they say you cannot eradicate it. Corona virus has been around in cattle for 40 years. It just happened to cross-mutate and get into people. I have a friend who has a bottle that says Corona virus from (*a date decades ago.*)

CB - What I was getting at - we are arguing these situations. Let's say yeah, Jim DeTro is right.... so how can we do this? A lot of counties can't do that. If we are going to go forward, we have to argue the case with the Governor. If someone else has a more radical case, I won't argue with them. **Send another letter that says this is too little, too late, but we are heading in the same direction. We have to prove we can take care of business - and we have to convince the Governor and Health officials there - Say we want to try this, and prove we can do it.** I can see a fire. I can't see a virus...I don't see it (*the comparison?*)

Mc C - We just don't have the critical elements yet. What we need in this community is point of care testing and good contact tracing. This isn't McCarthy talking, it's people across the nation. And you need to have enough PPE, We don't have it, but we are pretty close. And with contact, we are moving there. **BUT WE DO NOT HAVE ENOUGH TESTING AT THIS POINT.**

(?) Number of machines?

LJ- Tribe has 2, we have one.

CB - Can we chip away?

Public Health - What can we do?

McC - let them know we need tracing - and how good are these contact tracers?

Lauri - right now, the 20 who have signed up are medical practitioners. We could get up to 40. Looking at a good number.

CB - So you are also sending this collective message to the Governor?

McC - Absolutely. **The state hears from us about this on a regular basis.** They say, we are trying too. You can beat a dead horse.....

LJ - WSAC (*Washington State Association of Counties*) is asking....

CB - I know. I (*attend?*) the meetings. But it doesn't tell what we need to get there. We just say, "You are telling us what to do."

AH - But what I heard was that if we can't have a new case in 3 weeks, it's a moot point. Other than taking care of people, we will never get to where we can apply for a Phase 2 variance.

McC - I don't believe the state has made a mistake. Think they've made it so that when we can open up, we will be ready. If we can keep the virus revamped down until we get the stuff we need....they did a good thing.

AH - How many tests does OK county need to have in order to keep you happy?

McC - I'd like to have enough tests so that if you are working on a line, you get tested before... (?) There are places where it is available. (*Chat about airlines, other*) What you want to know if you have the disease or not....there will be people we miss - but then they become sick and all their contact will have point of care.

JD - Friends.....11 of them tested positive, but

McC- We are doing well, learning a lot, but **it's been present here in this country for 110 days. That's not very long. Science is not that fast.**

LJ - That (?) would be isolation Some people run a fever, and some don't

McC - lists several criteria ...you want the person taking care of your wife to be asymptomatic for 3 days? I'd want a little more than that. You don't want to have this disease. (??) breaking up , too soft.)Generally a couple of weeks or months, usually shorter. (*Duration of hospitalization?*)

LJ - One person was hospitalized for month and a healthy 30-year old was hospitalized for 9 days.

CB - If something is coming through..... We need to know whether the level of care is at "X" level.

LJ - We kept makingstate said that whereas it would have been (?) Every week we would request testing and were denied. If I ordered 2, 500, we should get 1000 by end of week. I do believe that testing will be showered our way at some point. My fear is that as we bringing migrant workers, H2A workers..... we will need to be having more education than we have been.....

Many talking, cannot identify.

AH - Why aren't we ordering 44,000 tests?

McC - points out we only have one person for the testing.

Coming Together as a Community is the Answer, Rather than Non-Compliance and Arguing

LJ - We can either say, " I don't care about anyone else, I'm going to go and do my own thing because I have a right to do it" Or we can say, how can we get out of this mess with the best health and the best economy? We can say "This is what we need you to do: If your employer has to have employees, use a mask, etc. etc. If we can get together as a community, we can stop this spread. If we could have this kind of compliance....**reminds me of a spoiled kid: "I'm going to do whatever I want and the hell with everyone else...."**

CB - That means that everyone in this room needs to do it. We can't walk through this door and just do what we want. Honestly, If I go out and say we are going to do this to cure it, but then I bring a lawsuits etc.... Last night on the phone - someone who has a right to say what they want to say - "In the world I'm in , they all believe this is a bunch of bunk."

But we as leaders have to tell people we have a problem and this is what we need to do. We are not joining other counties writing letters because the message isn't right. The message needs to be that we need these resources to get there. **I want a joint letter that says we agree with what he (*The governor?*) says, but when the \$\$ comes through, this is what we need.**

JD/AH (?) How much are testing machines?

LJ: We can't access them. We were told they were all taken by the Dept of Defense... private contractors, sell to the highest bidders.

AH - I respect everything you saybut in this conversation I've heard we don't have enough tests, can't get them. We only have a few cases. We need more machines, but they are a lot of money and we can't get them. We could formulate a plan that says we need 50,000 tests, two machines, etc.and this can't happen.

Establishing A Goal

McC - We could get the supplies. **The fastest way is to say, "This is what we need in order to get to Phase 2 and to collaborate with other counties to say this. I think a year from now you could walk into a meeting or Walmart, etc. and get a test.**

No one wants more diseases, everyone wants to open. It's reasonable to say what do we need in order to open? Again, the outdoor recreation facility who says, "This is how we can do it .." Yes, this is perfect. **You won't be the spreading point for disease. That's what we all need to do. Discover how we can NOT be the spreading point for disease.**

CB - You created a goal here. We could get that goal established, and when people call us we have a goal to get the right situation, right equip, right personnel. We have this strategy in mind.

(Another county employee, male) I don't like to grasp at phantoms. We have recognize the issues. We are coming up short. My question - is there some way to identify either a %age or otherwise what we need? How many machines do we need? We need to set a bar. I know the variety of people we have - some more vulnerable, some not....can we draw a mark on the wall and see where we are headed?

McC - I can't do this, but there are other smart people who could. We could say everyone in the hospital could be tested. Everyone in a close environment in a packing shed. You could do this, but I am not qualified to do this.

?? When one machine.....swabs,

LJ - You need a reagent. The only reason Brewster is doing that; they kept their own *(Avid? Covid?)* analyzer. We were going to give some other county a box of swabs because they also serve people from Okanogan County.

McC - We are 110 days into this, we are (?) days until we get an analyzer,**We can get there, but we are not there yet.**

LJ - Keep in mind this is nationwide. In 110 days, we have over 80,000 people dead, in the past 10 years of influenzas, this was 60,000 in a whole 12 months. **All it would take to overburden our health care system is a doubling of our cases.**

CB - On those facts that we push out, we need to be on another page...give facts about how it's spread...we spend a lot of time spinning our wheels on these arguments. **Going forward, determining the metrics on what we need.....can we figure out who that is? And in the meantime, if we can't get it, we can't still say what we need.** Number of tests and machines.

McC - I would bet there is a population-based demographic.

Mid-Valley Hospital Input:

Dr. Thill (Heads up Mid-Valley Hospital): Thanks from us at Mid-Valley.

Without getting too technical..Mid valley, as well as 3 Ricers and North County.... We have the machines to test, but not the cartridges. But because Wa state did such an incredible job of flattening the curves so quickly, we were not candidates for getting the cartridges that are being made.

The companies that make them are hired by FEMA. There are two types of testing. PCR testing - swab in nose for actual virus - and antibody, from the blood. Virus has only been out in the world for the past 4 or 5 months. Science is not that fast. **Now where we can detect virus or antibodies, we have no idea how that equates to infectivity.** I may come in contact and may develop the antibodies because I have an incredible immune system; but I have not been transmitting to others. We can't say you are safe or not safe to go back.

Yes, testing is great. But we also need to remember that there are lots of ways to prevent diseases. That is what we need to concentrate on now. No matter how good we are, we may have done education on STD's, etc, but the difference is that there are treatments out there for these. They are not as scary because we have the treatments, etc. *(and no treatments for Covid.)* But from everything we have done through centuries, we do know how to prevent the spread....handwashing, disinfecting, 6 feet away with masks, etc. We are working hard to get this testing but it won't come soon - **If we want to move to Phase 2, we need to focus on how to prevent the spread. But if we don't get people onboard, it won't help.** I am at Safeway, being crowded in line. I have a mask, but.... **We need to get community members on board. A lot of people don't know** ...But if we can come to some consensus on good hygiene, maybe there should be more focus on that and get people to open businesses while we are trying to get equipment.

AH - Have been getting a lot of questions about events at the AgriPlex. So we should say not, because we will be into Phase 4 never?

McC- Don't think the fair, etc. will be anything that would be acceptable. Not having thought about it, the answer is no.

JD - I can tell you the kids will say, "Hell, no!"

McC - We can nod heads, or we can come up with some solution. I don't think the answer to the Fair is yes. Others have had graduations, etc in some creative way.

JD - When we put the fair off for the fire camp, Wow! *(Reference to Okanogan Complex Fire, I believe, referring to public objection.)*

JD - Final thoughts or comments? (NO.) Meeting is adjourned.

McC - Thinks the meeting was well-managed and thanks others.

Note: *(The next meeting is back at the Commissioners' Hearing room, to which the BOCC must travel - which may have contributed to the abrupt adjourning of the meeting.)*