Board of Okanogan County Commissioners  
July 14, 2020

Present:

Jim Detro (JD) - BOCC Chair, Dist. 3  
Chris Branch (CB) - BOCC Chair, Dist. 1  
Andy Hover (AH) - BOCC Chair, Dist 2  
Lanie Johns (LJ) - Clerk of the Board

Citizens following via Zoom

NOTE: These notes were taken by a County Watch volunteer via ZOOM. Every attempt is made to be accurate. Notes are verbatim when possible, and otherwise summarized. Today, only a summary is available for AM session due to county zoom quality. Note taker comments or clarifications are in italics. These notes are published at https://countywatch.org and are not the official county record of the meeting. For officially approved minutes, normally published at a later time, see the Okanogan County Commissioners’ website at https://www.okanogancounty.org.

Summary, 7/14/2020 AM BOCC session: County's sound system not working well. Speakers & Comm'rs too muffled, broken, or faint, so only a summary is available. Hover/Branch too muffled; Lanie and DeTro broken; speakers too faint. 30 minutes on Fairground, fair finances, fair cancellation, campground prices/issues, remodeling of Agriplex for court, new water truck; Executive Session, potential litigation. (Appellant informed he could appeal a decision and paid $300, but Hearing Examiner determined he was barred from appealing; fee will be refunded.) Discussion about whether CARES funding can be used for depreciation of machinery, lost work, and associated Covid costs. Hover emphasizes paperwork for reimbursement of CARES expenses must be done well in advance of application deadline. Lauri Jones working on 3-year work plan.

Summary, 7/14/2020 PM, Board of Health Notes: Answering citizen comments: Hover states Public Health will receive 25% of the county's $2.3 million CARES Act funding, McCarthy states BOH recommendation re school openings unknown yet; Admin details of CARES funding - necessary to look to future needs of Public Health; How to Compensate Pub Health Employees working nearly 24/7 who cannot take time off as compensation. Additional staff needed. Alternative care facility to Confluence hospital
being looked at, due to numbers. Younger, sicker cases showing up. Confluence and 3 Rivers will be drive-through testing Wed/Thurs. Still awaiting surge from July 4 activities. Gebbers' isolation camps being monitored; many cases among fruit workers. Fire camps to be monitored. Questions re accurate number of active cases; McCarthy says we need to double or triple the testing. Huge increase in inquiries re septic systems, building issues, restaurant complaints, etc - taking a toll on Environmental Health availability and service. Discussion - can anyone who wants to be tested be tested?

AM Session - Only a summary is available, due to county system problems.

Notes, PM session: 1:30 - Board of Health meeting

Introductions:
Chris Branch - (CB) BOCC, District 1, 509-422-7101
Andy Hover - (AH) BOCC, District 2 509-422-7102
Jim DeTro - (JD) County Commissioner, District 3 509-422-7103
Patricia Stanton - (PS) City of Okanogan Representative
Mariann Williams, A(MW) RNP Board member
James Wright - (JW) Board member
Kris Erlandsen (KE) - Board member - on Zoom
Dave Hilton - (DH) Environmental Health Director, Admin team
Lauri Jones - (LJ) Community Health Director
Dr. John McCarthy, MC - Health Officer
Jill - Public Health staff

Citizens on Zoom at beginning of meeting:
Melanie Rowland Methow Valley Citizens' Council
Lorah Super Methow Valley Citizens' Council
Karen Frisbee - Oroville chamber of commerce
Katie Haven - Member of the public
Marcy Stamper Methow Valley News
Rebecca Meadows - Pateros/Brewster Long Term Recovery
Teagan Levine - Member of the public
Isabelle Spohn - Okanogan County Watch

Business: Additions to Agenda
Certain Budget issues - How to cover needs in budget. Re grocery camera system - Lauri had to get this to protect herself from threats being made. It's at her house. Will gladly give it back when it is no longer needed. AH - Needed for public health? LJ - It is. It is for the agency. No different than when I take my laptop home.

Public Comment:
1. Isabelle Spohn, Twisp: requests that Public Health issues be given top priority in use of CARES funds. Cmr. Hover replies that BOCC has dedicated 25% of the $2.23 million to Covid Health issues.

2. Rebecca Meadows, Long-Term Recovery: asks where the Board of Health stands on schools reopening. Dr. McCarthy states that it's unknown at this time.

Admin reports/actions, Draft minutes, Financial Reports.

Budget discussion:

AH - CARES Act funding: I just got out of auditor's office. Want to make sure that expenses Covid-related have to get...talked about special section for Covid funding so that auditor can pull them right out. So overtime would be an expense NOT in your normal budget. Supplies, etc - You can move them from one part to another

Talked with Clerk of Board - She is doing the Administration. Okanogan County was awarded 2.23 million $$. Of that, we have committed 25% to Covid Health. Cmr. Branch, "I called Senator Murray's office." (Loud Woman's Voice over Zoom: "God Damn It.") Silence. Cmr. Branch asks that all be muted.

AH - I asked if $$ went to public health, if they would think of a time extension for Covid health. If Public Health comes up with a scope of work for epidemiology, anything above and beyond budget, then county can contract with Public Health, you bill us for it on the contract...technically, it's expense for the county. Still need to check with Commerce.

LJ - In Grant county, they did a budget. That's how I got Tim Hargrave as Communicable disease assistant. Problem is that we do need that money to extend.

AH - Hope scope of work is multi-year. Ask commerce if we contract for multi-fund, ...etc. we make sure you achieve the scope of work

Enviro Health person who would be a plan reviewer. This is where schools come in. It's really draining us. Those are the kind of things we have on there. Had to purchase a computer plus health space software for contract tracing. And that's what I"m working on now. If I know I can have someone for 3 years - we all know this is not going away. I understand the feds had to put a date on it. But we need support and ability to carry that forward. Have always been tighter than a drum. For us to spend $$ we don't have - that is not how we operate. We already have other entities we are utilizing such as EMS who are not being supported. EMS are going though PPE, yes, we are getting their work, but there will be huge shortage How can we support them also thru CARES act $$?
AH - all these entities need to get their expenses together right now - we have an October deadline. Right now, computers, software - be sure to submit in that packet - these are above and beyond our budget, so we can get it submitted or reimbursed.

Branch - (can't hear.)

LJ - Jill, Dave, and I will work on that. Have already been working on that, because spending $$ I don't have isn't how we've worked.

AH - If we obligate more of our funds to make up that short fall and then County would reimburse.

**How to Compensate Employees working nearly 24/7 who cannot take time off as compensation; need for additional staff**

LJ - Speaking of reimbursement, we are exempt employees. What Brian and I have done is look at our time, from last 4 months, March - end of June. Normal hours, even if you are exempt. From 160 - 180 hours for Brian, who doesn't list all his time. Brian and I have worked nonstop 7 days a week for at least 5 months. Can we include in the CARES ACT.? My total for last 4 months is 300+ hours.... etc. Brian - 116 hours which is over and above.

John McCarthy - Have to say how critical the work with Lauri has been. I call routinely after hours, before hours, on the weekend. I look at this and say it's absurd for a non-exempt status. Request that you appreciate the hours of work she puts into this. Working with me, webinars, etc. She has never complained. As a board, I would specifically suggest that this be recognized and paid for.

LJ - We have a health officer that is contracted at a minimal monthly - in fact, he took a reduction. He has worked equally hand in hand as many hours as I have. I think his compensation should also be compensated as overage. If I could do this, I think I would keep - my nerves (she gets choked up) - I can't do this without him, and I passed way too much to him for over the past 5 months. He is fragile - we need to move forward in our hiring. I have 2 people who have lined up who can step in next 2 weeks. He has worked every week end, He is at a breaking point, and they could give him a break..

John McCarthy - I don't need anything. I'm very comfortable. We need to relieve the people who are working their butts off. I would suggest that you emphasize your staff...I don't talk with Brian enough....I want to stress that it's very stressful for Public Health. Going to ..... 

AH - to LJ - You are asking to be compensated?
(Voice) - Laurie is correct. Keeping up with a minimal force, it burns them out. Laurie needs more than just compensation, but a long-term solution. So we hire an extra nurse. Need to find some way to compensate, not only with public funds. Not time off - she can't take it off. If we had someone with nursing...... Communicable disease area to give them a break. Something needs to be done long-term. They are running ragged, but no solution at this point.

AH - We have enough $$ to move someone into Public Health. I think we are ready If you can come up with something, we can get it done quickly.

CB - Also we need to look at the compensation. All staff in Oroville were at one point.

*Somedone talks about hourly salary. Several people talking over each other.*

(Unknown voice) - the auditor ......

CB. We can look at that. We can make the commitment without knowing.

LJ - Would like Board of Commissioner's permission to include in CARES act scope of work. Not sure how soon we can get additional help.

AH - Beyond today, if you are saying ok I want a contract for "x "amt, more $$, I want a separate contract above and behind my pay - for extra work - then that is easily identifiable.

LJ - With CARES you can go back to March ..... 

AH - It would be, actually - we can talk to you about it.

Normal situation is you get time off, but we can't do that.

Several people talking.

LJ - What I was told about people in similar position- yes there is ordinary, normal, and typical. RE CARES Act - I have been spending all this $$ on CARES Act -related activities. Was not thinking of long term - by then, we would have infrastructure, so that maybe I could give him a day off..

AH - It's valid - just how to you get from A to Z.

JD - Maurice as EM manager...... people are gonna - I don't know - do we need to talk to Civil Deputy to be sure we are not....to check to see if CARES act can be segued into this.
AH - If for accrued time, I can see it's CARES actual.....

LJ- We can't afford to do that.

CB - Auditor very important, maybe more than attorney.

AH - Can't open up a can of worms. This is an odd circumstance.

CB - Additionally, Health has been underfunded for a long time. With Maurice, there are times when it doesn't....when it comes to emergencies....this kind of emergency is far outside that.

LJ - Wanted to bring it to attention of board.

AH - Need scope of work as soon as possible.

LJ - Can do by Monday. I have a partial working on it as far as Identifying the needs. It's hard to get your normal stuff done.....

AH - *(something about computers being trackable.)*

Voice - gives a few details.

AH _ We can talk with auditor at this point.

Voice - didn't know About that.

AH - State auditor will pull it apart and be very picky.

JD - OK.

LJ - to Erlandsen: Any comments, costs?

KE - No. Good job.

LJ - The work is just beginning!

**COMMUNITY HEALTH UPDATE - Lauri Jones**

New: North Central accountable Community of Health has a grant which the Okanogan TRI *(??)* Received. They have built us a web page. Very exciting. Have recognized the
lack of capacity we have in keeping stuff on the web page, etc. Jenn Tate contracted from Earth and Sky to make a web page, L&I info, questions, FAQ sheet - if a business wants to print something, Economic Alliance info is on there. They will hold our numbers every night. It will be a web page. Attached to Emergency Management, will have a link. Asking that every city, town, county have a link to this web page so you don't have to sift through everything. There was presentation at OCOG.

So it will be nice - takes pressure off us to get all these things off our plate. They will monitor Facebook, Instagram, and Twitter. As you may know, we have a hot spot in the South County. Have been working week after week with Gebbers. It's getting crazy because Confluence hospital had 20, and 7 were on ventilators. We are not only looking at alternative care facility. We are seeing sicker, younger people. The ones that got in the nursing homes - we needed to do a little more. (?) Confluence and 3 Rivers will be drive-through testing, even hours Wed, Thurs, Fri. FHC also working with us - there are 2 more weeks until cherries are off.

AH - Is that where a lot of the cases are coming from, - the workers?

LJ - Yes. Gebbers is trying to isolate those that are sick. They have a couple of isolation camps. We need people to monitor them. We need to touch in with them every day. We need to get a handle on this. I don't know we have seen the increase from July 4th just yet. Seeing more cases through the county - I think we are probably up around 235 tonight.

AH - 235 is not the number of active cases. That's about 1/2. But when you look at 235, that is really only from the start in our county. I know a lot people are - (can't hear.)

LJ - Another thing we'll show is the county within that last 14 days. People ask why aren't you tracking the people who have recovered? No time to do that.

CB - I think there are folks who would do a testimonial.

LJ - We want that. Can't give an accurate # - we talk to them within the 14- day period. One person didn't want to go back to work after 14 days - he is tired, weak, no energy but he's past his 14 days. A 15-year old may feel better the next day.

AH - Can you say the number of active cases within the past 21 days?

LJ - Yes. We look at 14 because that's what we do to get to Phase 3.

AH - Talking more of a relative number, but after 21 days you might be a lot better. Or maybe within last 30 days?
LJ - Yes. That's an easier number (30, I think.)

CB - Just the total number isn't that revealing.

LJ - But important to us, because I will not consider a case until I have a case with the state report etc. Sometimes we find out they live in Chelan or Bridgeport - Sometimes takes a week.

CB - The letter is very long ... we can't get away from numbers, but the meaningful conversation with the public - the experiences you actually have with the disease. Without that, you will get all the rumors, etc. etc. Just something I talk with people who have (????) Another thing we need to look at - a little further out - with young people whose immune system may be affected - the people who are studying it, if you talk with them, in a pandemic that actually happens. It is the immune system that kills them. I think it's worth getting that kind of info out.

LJ - One comment. Interesting article - MERS was way more virulent, killed more men than women. Why? MERS was a middle eastern virus. Think about the culture and what the men and women do. Women covered nose and mouth. Couldn't figure it out. What they looked at later... was the fact that the women covered their faces.

AH - But that doesn't make sense if we say cloth masks don't protect.

LJ - I am no expert on MERS - but it was very deadly.

Voice - In fire season.

LJ - DNR contacted me. We have to have someone to help with fire season fire camps. Will they have isolation/quarantine facility at one end?

Voice - It certainly hampers your ability to control fires. Talks abut Wenatchee.

AH - Something about a private company...

JD - They (private companies?) don't want to go into a fire camp. Want to be outside.

LJ - One final thing. We meet with the EMS MPD, Dr. Smith MPD for our area. Biggest issue we fear - it will put a burden on our health care system. Already seeing that. We have an amendment to our TRI contract....EMS can't be paid unless they transport to hospital. If we check with people who think they might need to go to ER. We can send EMS who do a health check, they can do a stat monitor on finger, listen to lungs, talk them down a bit, give sats on room air, let's talk about what we can do to keep you in your house.
CB - People in Wenatchee did a lot, a good job.

LJ - Thought we need to use this for COVD now. Lifeline Aero & Methow, and ??? Signed ...Only had to use them twice.

CB - Great to use their services when they

QU - other communities besides Brewster?

LJ - Travel. They go to Spokane to see kids, and my aunt and uncle and so and so came and they came from CA and we had a great time. And by the way, we went out to eat....etc.

McCarthy - that's the conversation we had across the region. That type of ubiquitous thing where when we opened up, everyone said we can all do what we want. Other communities too.

LJ - And those were not linked to Agriculture.

ENVIRONMENTAL HEALTH UPDATE - Dave Hilton

Food Establishments: With new orders on food establishment, etc. you always get the tattle-tales. We get reports. A store called in. Customers refused to use masks. To avoid issues, I tell them - Post it: ] "No mask, No service."

Enforcement: So those who have confirmed they are not participating, we do a course call first, and if they are still blowing us off a week later, we are reporting to L&I. It's state driven at this point. If it turns into a health risk, we"ll have to (unintelligible.) He thinks they will pay attention.

DH - Insane work level at this point. I do very little Covid. 126 phone calls in same day. Keeps filling up . If you get complaints..... I get calls about: Want to buy property, septic, well approved, test holes, etc. Crazy. They don't read anything we provide. Then people get the test hole dug and never turn in the application (Loud Laughter from DH.)

JD - I got a comment. Comment on phone. A former employee. You call and it goes to recorder; you get "1", if you know extension dial it now. #2 is for septic. Why couldn't we say if you need to talk to Lauri, here is extension, etc. ?

DH - Isn't it on the website?
LJ - Not mine.

DH - People get mad at a long message. I get several calls a year about birth certificates, etc. People don't want to wait for the phone message. Some things are at the end.

LJ - There's reason we made Septic #2. Every one laughing. Long laughter.

DH - I'm getting a different type of call now. People used to be wanting work done. But now, they are calls that they could answer questions themselves from the website, application, etc. I cleared the phone last Thursday, and it was filled up again by Monday night. Unbelievable. If you can't reach me, that's why.

DH - Also towards the end of this month LJ and I will both be gone.

LJ - Not to the ends of the universe,

Voice - I didn't think LJ had permission to leave at all. This will be tricky.

DH - Just a heads-up.

LJ - I'll be gone last week in. *(DH will be back end of week she's gone???)*

LJ - Has a memorial thing. Unavoidable. Andy will be answering Dave's phone??*(Laughter.)*

Crystal - Any comments? *(No. Chat is disabled.)*

**NOT ENOUGH TESTING BEING DONE**

LJ - To Erlandsen. Any comments, questions, etc?

KE - I do. Thinking, I'm curious - Do we know the differential in the amount of testing from the beginning to what is going on now? For instance - was there 100 per day prior and 1,000 now?

LJ - Crystal is keeping that data. Based on test numbers. We are reporting on # of tests twice a week. Trying to do nightly. We want to do at least 50 a day. Doing lots of testing.

Crystal - 50 for every positive case. *(Note - 50 tests per new case is the standard given on the updates on Inslee Dashboard for Covid-19 for each new case. For today, Wa state dashboard indicated Okanogan County is doing 4 per each new case.)*
McCoy - We need to double or triple our numbers. We are not doing enough testing at this point. I'll keep harping on this. Everyone here needs to know that we need to do more.

Question - What is the issue about not doing enough testing?

CB - Making connections?

LJ - PPE, staff time for drive-throughs so they don't come to clinic. Are you doing outside or inside? (Everyone laughs at response.)

CB - Someone was in quarantine. He was complaining that he couldn't get tested on weekends. A few people commented they were sorry, but the fact was they couldn't test on weekends.

AH - But there is no instantaneous response anyway.

LJ - Everyone who is tested who is symptomatic is asked to quarantine anyway. We encourage the clinics, hospitals, drive-throughs to test. Anyone who wants to be tested.

McCoy - We are doing the most in southern part of county. Worried about community spread, virus moving all over - it will be more difficult to trace from person to person then. Northern part of county - don't need to be as aggressive. (He needs to sign off again for other business.)

LJ - We are responsible for getting kits, etc. We have distributed thousands. It's a staffing issue, PPE issue, trucking issue. They (?) have to provide us with that information (???)

Turn-around time: Quest: we didn't get it since 7 days; UW: 2 days max. Sometimes 24 hours. It took 24 hours for Dave. Quite speedy for the most part.

Question - one participant has raised hand. Melanie Rowland.

Rowland: I wanted to confirm what I think I just heard. It is possible to be tested if you don't have symptoms?

LJ - Our priority is people who are symptomatic or have been exposed to a positive. If you have been active and running around without mask, etc with no symptoms, that might be reason enough. But if you haven't been going out, etc. there would be no reason to be tested.
#1 priority - Symptomatic/exposed to a positive case.
#2 priority- Anyone possibly exposed to positive - been running around at Walmart, etc. without a mask.

Voice - Let's adjourn.
Second.
JD - We are adjourned.

**BOCC returns to Commissioners' Hearing Room, note taking ends.**