

Tacoma-Pierce County

Board of Health



Special Meeting Agenda - REVISED

June 17, 2020

3-5 p.m.

3629 South D Street, Tacoma, WA 98418

Board of Health Clerk, (253) 798-2899

Remote Attendance Only

Dial in 253-343-0639

Access Code: 821 057 429#

Board Members

Catherine Ushka, Chair

Derek Young, Vice Chair

Keith Blocker

Bruce Dammeier

William Hirota, MD

Patricia Johnson

Dave Morell

Doug Richardson

I. CALL TO ORDER

II. ROLL CALL

III. COMMENTS BY THE PUBLIC

During the duration of the declared public health emergency, public comments will only be accepted via email at director@tpchd.org. Public comments may be submitted any time prior to the adjournment of the Board of Health meeting. All written public comments will be made part of the record. Public comments received prior to noon on the date of the Board of Health meeting will be provided to Board members prior to the meeting.

IV. COVID-19: Disease Update - Public Health Strategy

[Anthony L-T Chen, Director of Health]

V. Encouraging use of face coverings

Resolution No. 2020-4647 – A resolution of the Tacoma-Pierce County Board of Health, Pierce County, Washington, encouraging the residents of Pierce County to use face coverings or masks when they are in public spaces.

[Nancy Sutton, Deputy Director]

VI. Racism: A Public Health Crisis

Resolution No. 2020-4648 - A resolution of the Tacoma-Pierce county board of health, pierce county, washington, declaring racism a public health crisis and directing the health department to take specific actions

[Sebrena Chambers, Strengthening Families, Division Director]

VII. Executive Session

Executive Session to discuss agency litigation in accordance with RCW 42.30.110(i).

VIII. Adjournment

COVID-19

Disease Update

Public Health Strategy

Anthony L-T Chen, MD, MPH
Director of Health
June 17, 2020

Outline

Safe Start Phase 2.

- Current disease status and trends.

Phase 3 Planning.

Overall public health strategy for response to COVID-19:

- Major components of plan.
- Budget request.
- Budget status.

Safe Start - Staying in Phase 2

- Low rate of new positive cases – Target: <25 cases/100,000 population for 14 days.
 - Currently 19.6/100,000
- Hospitalization for COVID-19 – Trends – still flat.
- Outbreaks - Target: 2 or fewer - Trends - under target.
- Healthcare system readiness – Meeting target for bed occupancy.
- Low rate of positive tests – Target: Average 2%
- Rapid case and contact investigations – Targets: 24 and 48 hours.
- Protections for high risk populations – Target: No more than 2 outbreaks per week.

Safe Start - Getting Ready for Phase 3

Continue to meet phase 2 requirements already met.

- Low case numbers.
- Few outbreaks.
- Hospital capacity to meet a surge.

Make progress on areas not met in phase 2.

- Increase testing.
- Reducing time from symptom onset to specimen collection.
- Daily monitoring.

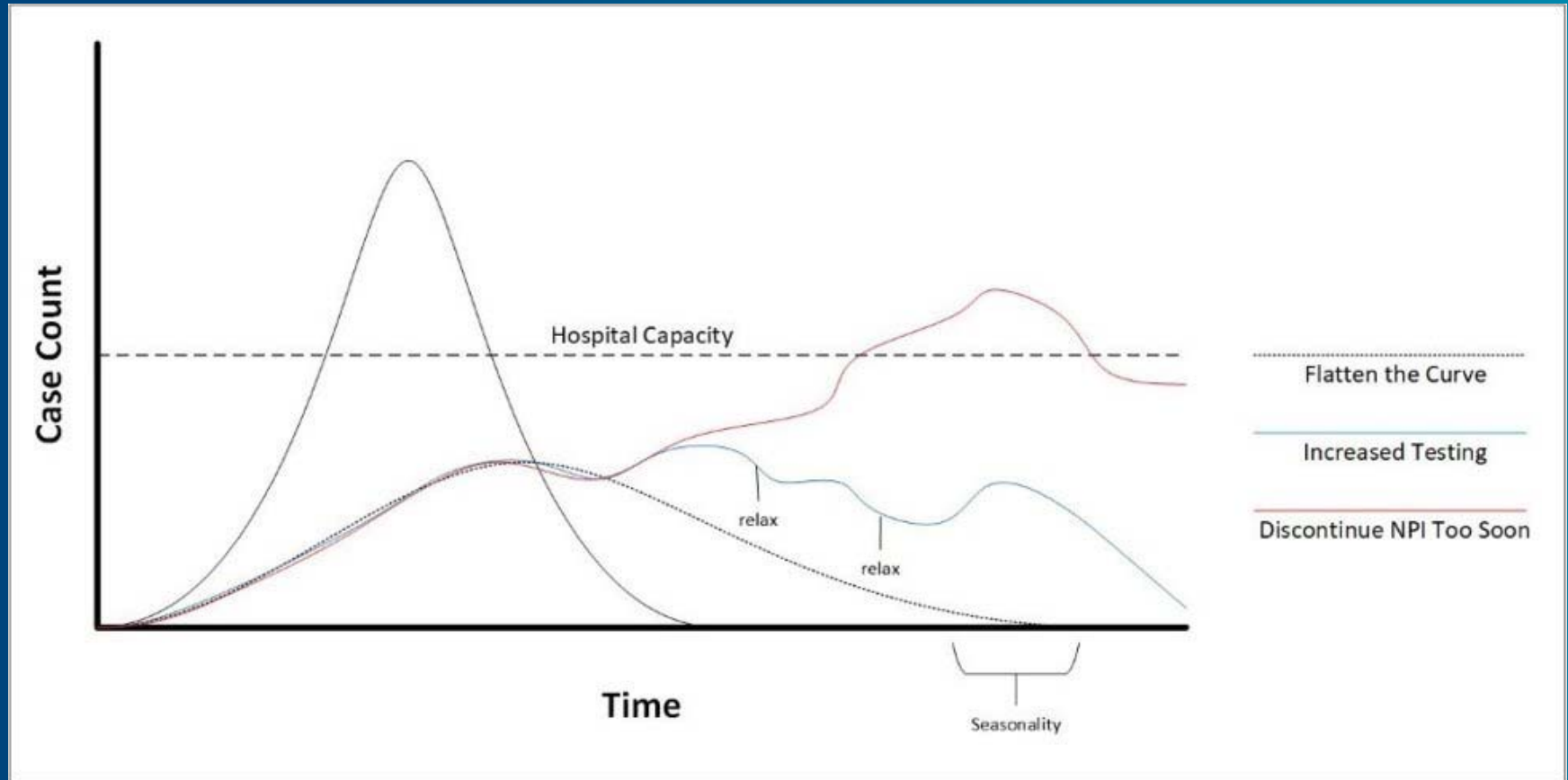
Respond quickly to any new requirements.

Protests and COVID-19 Concerns

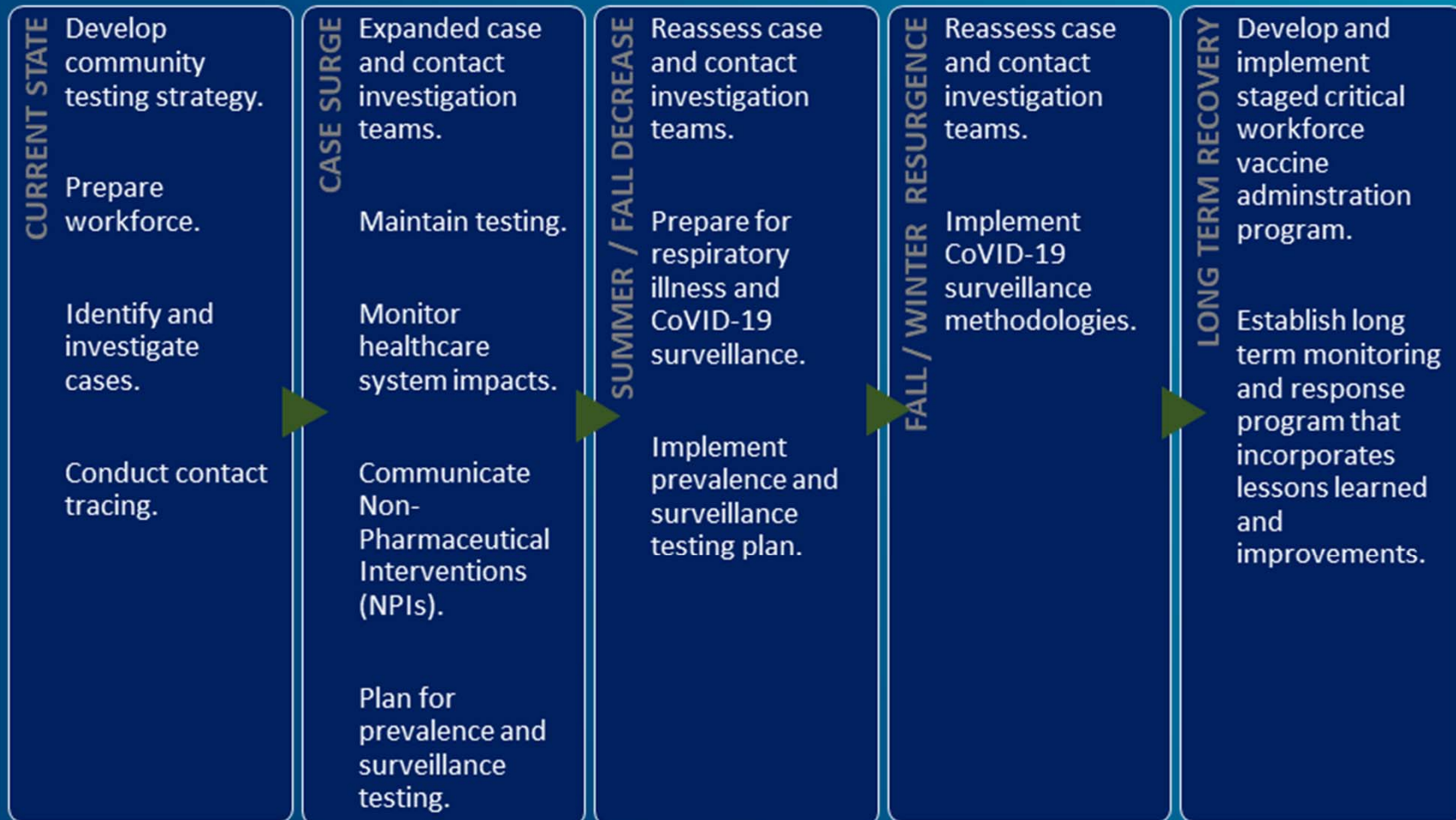
Public Health Response

- “Protest safely” messages – Blog posts and social media.
- Making PPE available to organizers.
- Revised testing messages – “If you attended a large gathering.”
 - Kroger site.
 - Provider Advisory.
 - FAQ.
- Monitoring test results carefully.

Managing Waves of Disease



COVID-19 Strategic Planning Stages



Planning Stages Status

1. Current State	2. Case Surge	3. Summer/Fall	4. Fall/Winter	5. Long-Term Recovery
In maintenance	Operational	In planning	In planning	In planning

Current State – Spring and Summer

Robust public health response key components:

- Testing strategy.
- Strong case investigation and contact tracing.
 - Expand workforce.
- Strong messaging and modeling of safe behaviors.

Increasing Testing

Areas of focus:

- Increase lab capacity in local healthcare systems.
- Increase accessibility of testing in local healthcare systems.
- Support universal testing in high-risk facilities through technical assistance and supplies.
 - Connect to community testing capacity.
- Community-based testing options for impacted communities.
 - Data-driven and equitable.
 - Mobile and fixed locations.
 - Involve community leaders in design.
- Drop teams (test, consult and train on site - for high risk).

Investigation Team Update

- Manage current caseload. Approved to hire 45 staff.
 - Various roles: Investigators, contact tracing, facility response teams, data entry, administrative, supervisors, and program management.
 - New hires will replace some department staff returning to regular duties (restaurant inspectors, on-site permits, disease investigation).
- CREST 1.0 data base in pilot status.
- CREST 2.0 planned for July.
- Surge Planning.
 - First training June 3. Two more trainings scheduled in June.
 - Results: More than 80 newly trained staff by end of June.
 - Coordinating with county to identify a larger work location.

Case Surge Summer to Fall

Safe Start Phases 2 and 3

As the community reopens throughout the summer, we will:

- Monitor healthcare systems and impacts.
- Surveillance of NPI adjustments in disease transmission.
- Continue and expand case and contact investigations.
- Support isolation and quarantine.
- Maintain increased testing and prepare for more testing options.
- Prepare for any additional fall testing.

Respiratory Illness Season Fall and Winter

Phases 3 and 4 (potentially):

- Expand case and contact investigations.
- Support isolation and quarantine.
- Increase testing options in the community.
- Monitor healthcare system capacity and testing.
- Surveillance of all respiratory illness.
 - Immunizations for flu season and essential workforce.

Respiratory Illness Season Continued

- Support immunizations, including flu.
- Strong marketing and reinforcement of benefit of covering face in public.
- Review and plan to implement additional non-pharmaceutical interventions, if needed.

Long-Term Recovery

- Monitor advances in technology.
- Participate in the County Office of Disaster Recovery.
- Plan for and respond to population health effects from COVID-19 including:
 - Social and economic impacts on health.
 - Health disparities.
 - Community engagement.

Long-Term Recovery

- Prepare for COVID-19 vaccine.
- Medical countermeasures plan.
- We have trained and exercised this plan over the last 10 years.
 - Mass vaccination.
 - Costs.
 - Supplies.
 - Staffing.
 - Supply chain.
 - Agreements for locations to vaccinate.
 - Will develop additional options like drive-through models.
 - Address concerns about a new vaccine.

CARES ACT Funding

- Department has a 12-18-month plan to track, respond to and contain the disease.
- Funds available through Dec. 31, 2020.
- Pierce County received \$158 million in federal CARES Act funds.
- Council allocated \$67 million to public health response.
- We submit funding requests through DEM to support implementation and action.

Public Health Revised Budget Plan

Category	Amount	Agency
1. Diagnostic Testing – Supports - Increase testing and lab capacity to 300 tests per day based on Governor’s current guidance for Phase 2. - Follow developments for valid and reliable serologic testing and implement when FDA approves.	\$13,165,000	PC DEM

Proposals Submitted	Proposal Total	Date Submitted	Approval Status	Approval Date
Testing Kits (500,000)	\$2,500,000	May 14	Approved	May 15

Progress

- Created a contract scope of work.
- MHS, CHI-F, CHC and Sea Mar have shown interest in RFP opportunity.
- Now waiting on healthcare proposals to submit with funding request.

Public Health Revised Budget Plan Continued

Category	Amount	Agency
2. Countywide COVID-19 Surveillance – Supports - Increase systems to address increasing needs to monitor disease trends, analyze, share and report information during a pandemic. - Research future technology – Waste stream surveillance project.	\$3,000,000	Health Dept.
	\$5,000,000	PC DEM

Proposals Submitted	Proposal Total	Date Submitted	Approval Status	Approval Date
20 Surveillance Staff, for 7 months	\$1,297,110	May 22	Pending	
Progress				
5 staff approved for 7 months. 3 staff to start 6/15/20.	\$352,000	May 22	Partial approval	June 10

Public Health Revised Budget Plan Continued

Category	Amount	Agency
3. Case Investigation and Contact Tracing -Supports • Provide infrastructure to investigate approximately 350 cases per day and 1,400 associated close contacts outside of the home. • 45 staff to manage current capacity as county opens in Phase 2. • Surge – Up to 250 staff trained & available for assignment. • Scalable. Budget assumes 10x increase from current capacity.	\$16,200,000	Health Dept.

Proposals Submitted	Proposal Total	Date Submitted	Approval Status	Approval Date
IT Equipment – laptop packages, cell phones, software	\$515,040	May 14	Approved	May 27
IT Infrastructure to support expanded workforce	\$170,850	May 22	Pending	
45 staff requested:	\$3,316,400	May 22	Approved Approved	Two parts. June 3 June 8
• 15 Investigation team members for 6 months	\$749,000			
• 30 Investigation team members for 6 months	\$2,567,400			

Public Health Revised Budget Plan Continued

Category	Amount	Agency
4. Isolation and Quarantine Housing -Supports • Provide temporary care for individuals with COVID-19 symptoms who can't quarantine or isolate in their homes. • Includes wrap-around supports for individuals and families who can isolate in their homes.	\$10,000,000	PC-DEM

Progress

- Temporary Care Center has been open since April. Recently reduced contract capacity from 120 to 60.
- Added capacity for 4 people with behavioral health needs to isolate in a recovery facility.
- Developing contract to strengthen support for people to maintain isolation or quarantine in their own home.

Public Health Revised Budget Plan Continued

Category	Amount	Agency
5. Proactive Testing and Disease Prevention -Supports Establish and deploy drop teams to test people in congregate facilities and underserved and underinsured.	\$4,210,000	Health Dept. PC DEM

Proposals Submitted	Proposal Total	Date Submitted	Approval Status	Approval Date
Mobile Testing Units, Contracted Medical & Support Staff, Supplies. Planning and contracting in progress.	\$2,419,170	May 28	Approved	June 8

Public Health Revised Budget Plan Continued

Category	Amount	Agency
6. Personal Protective Equipment -Supports Stage 1-5 Secure PPE for the activities above and continue to provide to priority tiers WA Department of Health established.	\$3,715,000	PC-DEM

Proposals Submitted	Proposal Total	Date Submitted	Approval Status	Approval Date
Various types of PPE. DEM ordering and distributing per plans.	\$3,715,000	May 14	Approved	May 29

Public Health Revised Budget Plan Continued

Category	Amount	Agency
7. Public Education with Equity Focus Community needs assessment, communications staff, project coordination, translation and publication.	\$435,000	Health Dept.

Proposals Submitted	Proposal Total	Date Submitted	Approval Status	Approval Date
Staff costs, Needs Assessment	\$435,000	May 14	Approved	May 29

Progress

- Near final contract from PC Finance.
- Tacoma-Pierce County Equity Action Network guiding engagement and policy solutions.
- Listening and planning sessions with four disparately impacted community members.
- Clarified bidding process. Drafting RFPs for contracts of > \$3,000.
- Secured around \$9,000 in funding from local rotaries to support community outreach.

Public Health Revised Budget Plan Continued

Category	Amount	Agency
8. Health Department COVID-19 Response Costs • \$14M total - \$2.725M in costs payable from other sources (includes \$1.5M state, \$866K FEMA at 75%, \$359K grants that permit billing for emergency response). • Initial estimate based on assumed staffing needs of 120 as of May 1. This cost projection is under review.	\$11,275,000	Health Dept.

Progress

- Proposal includes actual and anticipated costs not covered by other COVID-19 funding sources from Mar 1 through Dec. 30.
- Responded to questions, provided additional information. Under consideration by Pierce County Finance Department.

Why This Matters

Funding our public health strategy protects the health of our community and promotes economic recovery.

Our strategy:

- Supports commerce, education, religious and social service partners.
- Improves community health.
- Reduces health disparities.
- Finds and responds to disease in our community.

Questions?

Resolution No. 2020-4647

Encouraging use of face coverings

Nancy Sutton
Deputy Director
June 17, 2020

Why are face coverings important?

- Stop droplets and help prevent other people from getting sick.
- Protect the health of others since many people with COVID-19 don't show symptoms.
- Help keep up our progress and continue to prevent the spread of disease.



Wear The Face mask.

- On May 19, Health Department issued a face covering policy and procedure for employees, volunteers and visitors.
- Effective June 8, the Governor required all employees to wear face coverings at work.
- Other organizations created workplace face covering policies.



Board of Health Resolution

- Encourages residents to wear face coverings in public.
- Health Department will implement a public education and social marketing campaign.
- Board Members will encourage all residents to wear face coverings and follow other recommendations to reduce COVID-19 spread.



Face coverings don't work for everyone.

Exceptions to this resolution:

- Children under age 2.
- Children under age 12 who need adult supervision on safe use of face coverings.
- Individuals with physical disabilities that prevent easy wearing or removal of a face covering.
- Hearing impaired individuals who use facial expression and mouth movement as part of communication.
- Individuals advised by a medical professional that wearing a face covering poses a risk to their health.
- Individuals with breathing problems.
- Members of marginalized communities who don't feel safe wearing face covering.

Resolution 2020-4647

RESOLVED BY THE TACOMA-PIERCE COUNTY BOARD OF HEALTH

- Residents are encouraged to wear face coverings or masks in outdoor or indoor public areas, especially when they cannot maintain a physical distance of 6 feet from others.
- Department will plan, secure funding and implement a public education and social marketing campaign to promote use of face coverings.
- Board members will use their influence and communication channels to encourage all residents of Pierce County to wear face coverings as described.

RESOLUTION NO. 2020-4647

A RESOLUTION OF THE TACOMA-PIERCE COUNTY BOARD OF HEALTH, PIERCE COUNTY, WASHINGTON, ENCOURAGING THE RESIDENTS OF PIERCE COUNTY TO USE FACE COVERINGS OR MASKS WHEN THEY ARE IN PUBLIC SPACES

WHEREAS, on February 29, 2020 the Governor of the state of Washington issued Proclamation 20-05 declaring a public health state of emergency for all counties in Washington State due to the novel coronavirus COVID-19; and

WHEREAS, on March 23, 2020 the Governor issued Proclamation 20-25 which extended the state of emergency, established the Stay Home, Stay Healthy order, and prohibited all people from leaving their homes except for those engaged in or obtaining essential services; and

WHEREAS, the Governor subsequently provided a Safe Start four phase recovery plan to restart business and modify physical distancing requirements when disease activity is adequately suppressed and readiness in key areas is achieved; and

WHEREAS, on June 5, 2020, the Secretary of Health approved Pierce County's application to move to Phase 2 of the state's Safe Start recovery plan, which allows for modified restrictions on businesses and other areas of public life; and

WHEREAS, effective June 8, 2020, the Governor required all employees to wear face coverings at work if they are not working alone or can't maintain physical distance; and

WHEREAS, we do not want to act in ways that could risk our hard fought progress and even with the relaxed restrictions, it's more important than ever to engage in activities to prevent the spread of disease, such as maintaining physical distance of six feet from others, practicing good hygiene, staying home when sick, and wearing a facing covering; and

WHEREAS, given the widespread community transmission of COVID-19, wearing a face covering over the nose and mouth designed to prevent the spread of respiratory droplets provides an extra layer of protection, especially when one cannot easily keep physical distance from others; and

WHEREAS, wearing a face covering protects the health of others in our community because a significant portion of people who have COVID-19 do not show symptoms and therefore the virus can spread before people realize they are sick;

WHEREAS, the Centers for Disease Control and Prevention and the Tacoma-Pierce County Health Department recommend that all people wear face coverings when in public; and

WHEREAS, exceptions to this resolution are made for: children aged two years or less; children aged 12 years or less who need adult supervision on safe use of face coverings; individuals with physical disabilities that prevent easy wearing or removal of a face covering; communication with hearing impaired individuals who use facial expression and mouth movement as part of communication; individuals who have been advised by a medical professional that wearing a face covering poses a risk to their health; individuals with breathing problems; and members of marginalized communities who do not feel safe wearing face coverings; now, therefore, be it

RESOLVED BY THE TACOMA-PIERCE COUNTY BOARD OF HEALTH that the residents of Pierce County are encouraged to wear face coverings or masks when they are in outdoor or indoor public areas, especially when they cannot maintain a physical distance of six feet from others; and further, be it

RESOLVED that the Tacoma-Pierce County Health Department in its COVID-19 emergency response will plan, secure funding, and implement a public education and social marketing campaign to promote use of face coverings and other measures to prevent the spread of COVID-19; and further, be it

RESOLVED that members of the Tacoma-Pierce County Board of Health will use their influence and communication channels to encourage all residents of Pierce County to wear face coverings in public, practice good hygiene and sanitation, limit travel, and follow recommendations to reduce the spread of COVID-19.

TACOMA-PIERCE COUNTY BOARD OF HEALTH

Catherine Ushka
Chair, Board of Health

June 17, 2020
Date of Adoption

ATTEST:

Patricia Darden
Clerk, Board of Health

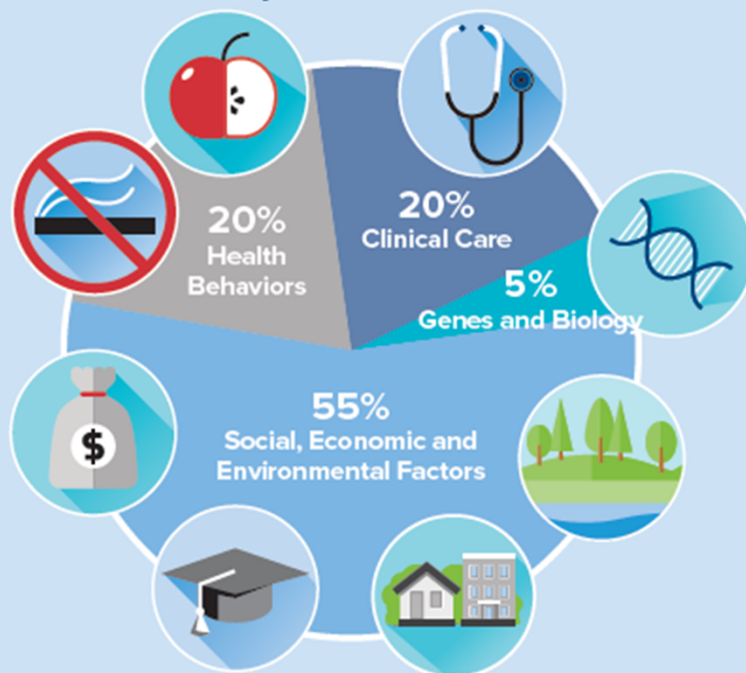
Racism: A public health crisis

Sebrena Chambers
Racism and Resilience Response Team
June 17, 2020

What Makes Us Healthy?

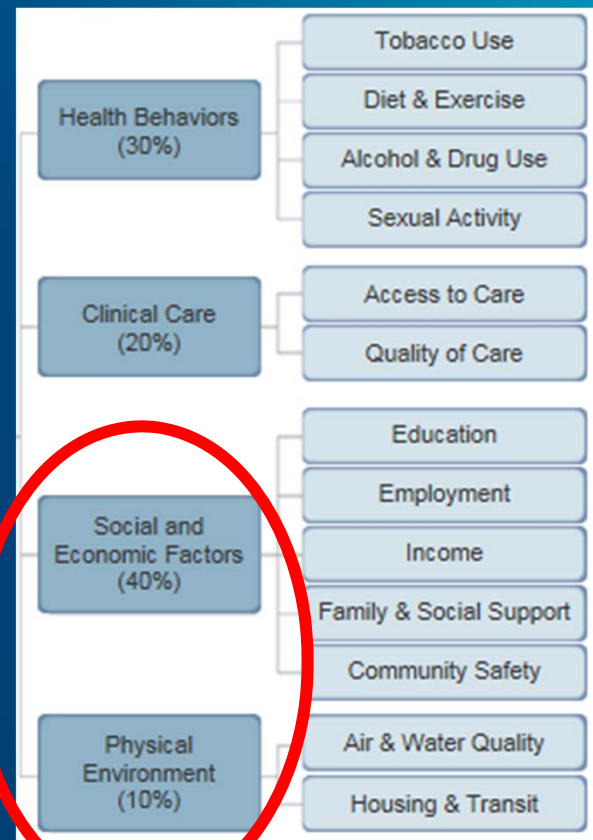
Health Starts Where We Live,
Learn, Work and Play.

What makes us healthy?



Adapted from <http://www.cdc.gov/socialdeterminants/FAQ.html>

RWJF County Health
Rankings:



What Is Race?

A race is a grouping of humans based on shared physical or social qualities into categories generally viewed as distinct by society.

The term was first used to refer to speakers of a common language and then to denote national affiliations.

By the 17th century, the term began to refer to physical traits.

Race is a social construct, an identity which is assigned based on rules made by society.

Race does not have an inherent physical or biological meaning.

Racism—Not Race—Causes Poor Health Outcomes

***Institutional racism:** differential access to goods, services and opportunities of society by race.*

***Personally mediated racism:** prejudice and discrimination where prejudice means differential assumptions about the abilities, motives and intentions of others by race and discrimination is the differential actions toward others according to their race.*

***Internalized racism:** acceptance by members of stigmatized races of negative messages about their own abilities and intrinsic worth.*

Jones, C.P. (2000). Levels of racism: a theoretic framework and a gardener's tale. Am J Public Health;90:1212–1215.

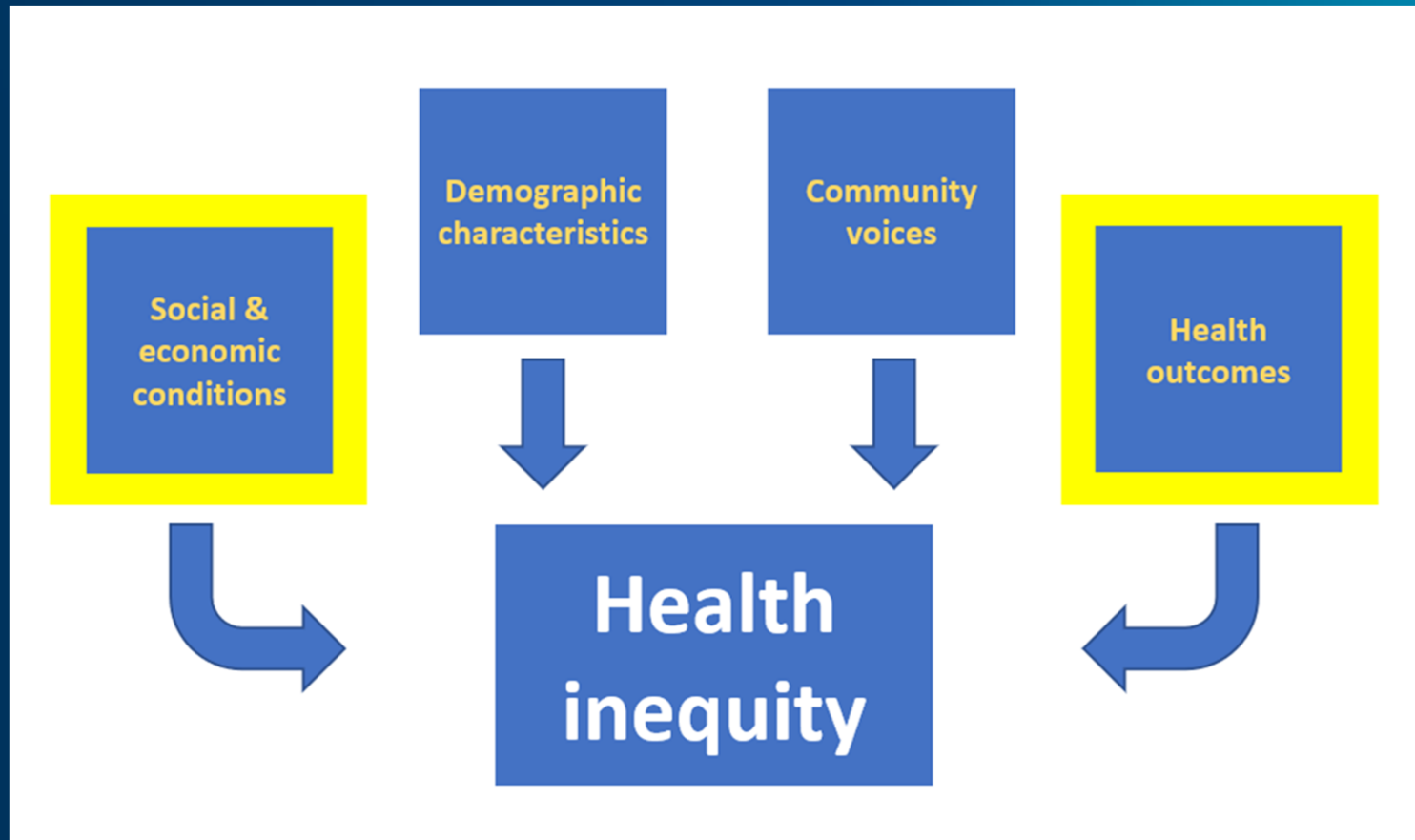
Health Equity and Anti-racism

Key takeaways: Adverse social, economic, and environmental conditions create health inequities.

Racism creates and perpetuates health inequities.

All Pierce County communities experience health inequities directly resulting from systemic, institutional racism.

Health Equity and Ant-racism Framework

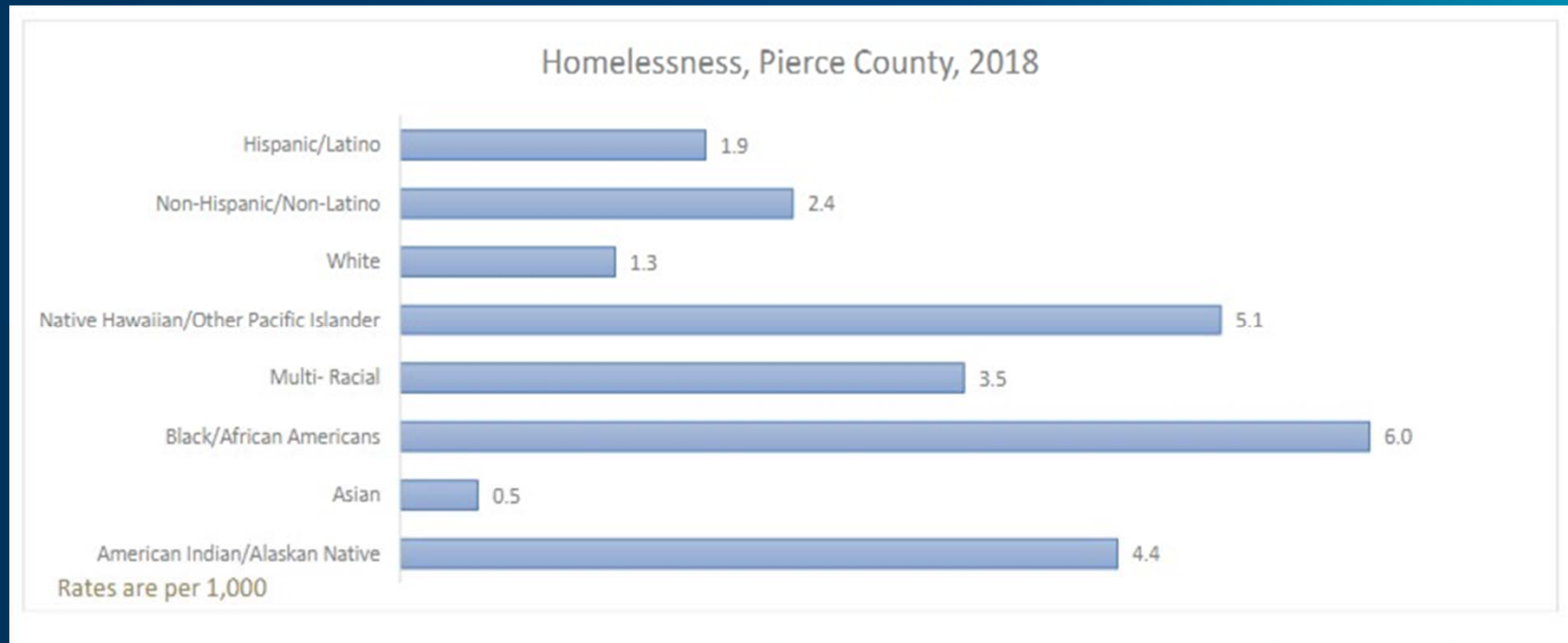


Institutional Racism Impacts Generations

Historical practices still affect Black families' ability to accumulate wealth:

- Lower wages for similar work.
- Not preferred or selected for high paying jobs.
- Family separation because of male incarceration rates.
- Denial of small business and mortgage loans.
- Restrictions on purchasing homes in wealthy areas.
- Education systems linked to property taxes.

Homelessness

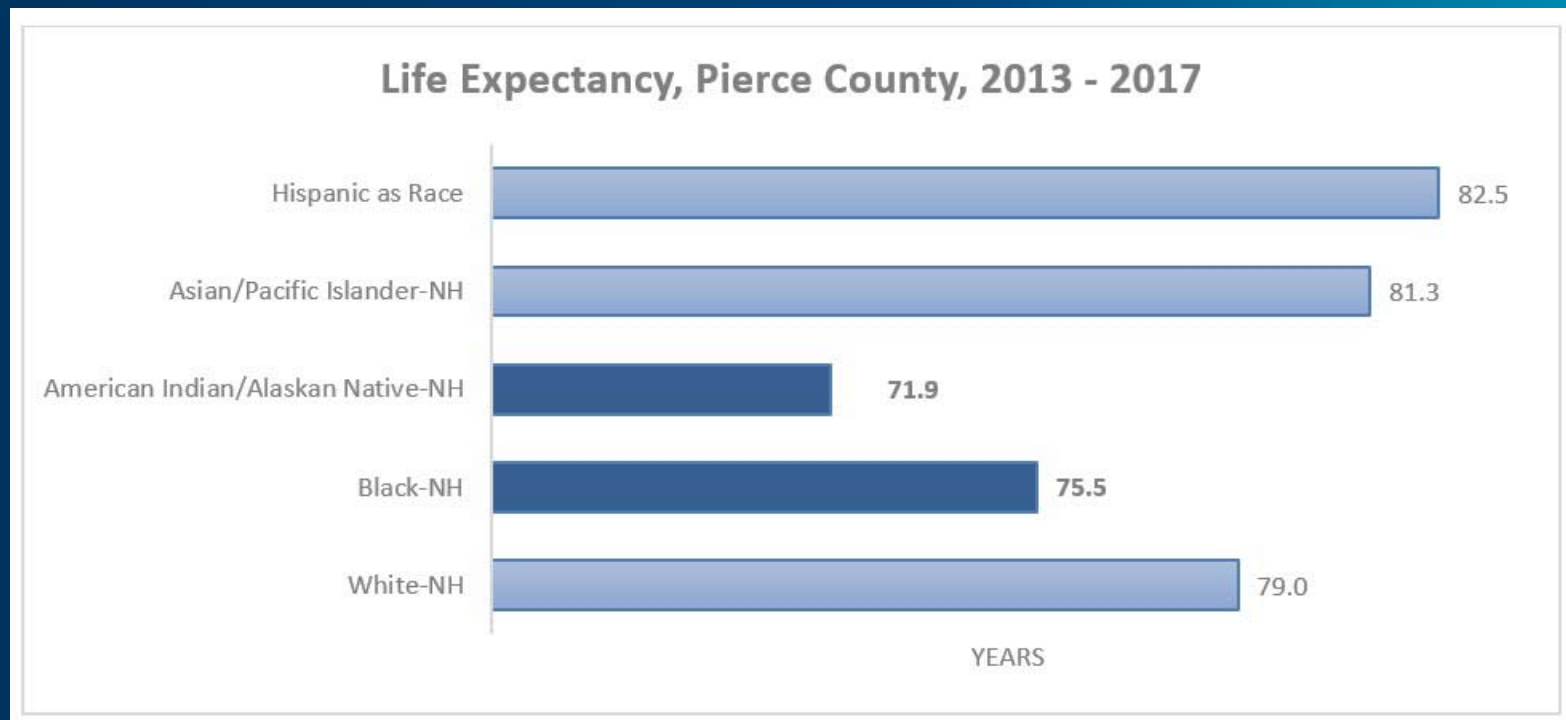


Physical Health Outcomes

Among Pierce County Black/African Americans:

- Infants were 2.1x more likely to die than White infants.
- Babies were twice as likely to have low birth weight than White babies.
- Diabetes-related deaths were 4th leading cause of death (Whites: 6th).
- Had 2-3x higher rate of COVID-19 cases than Whites.

Life expectancy.



Risk for COVID-19 Illness

Black/African Americans are at higher risk for COVID-19 illness. Their risk increases if they:

- Are older or have underlying health conditions.
- Have compromised immune systems.
- Are front-line workers (health care, grocery, delivery, farm labor etc.)
- Lack safe and stable housing.
- Live in low-income households.
- Are in rural communities.
- Have disabilities.
- Are immigrants, refugees and/or with limited English-speaking ability.
- Are LGBTQ.

Positive Change is Happening in Pierce County

Positive changes for Blacks/African Americans is happening as a result of community and public health efforts. They include:

- Improved breastfeeding rates.
- Improved high school graduation rates.
- Improved birth outcomes and first-time mother support.
- Increased youth leadership and diversion programs.
- Reduced marijuana use.

Change Begins at The Health Department

The resolution asks for your support to:

- Assess internal policies and procedures to address and reform structures and processes that contribute to race based decisions and actions.
- Reshape our discourse and agenda so that we all actively engage in anti-racist work, particularly anti-black racism.
- Review our budget and make recommendations for funding changes, allocations or re-allocations that fund the work of transforming systemic racism as a means of resolving disparities by changing the systems that cause them.
- Partner with community to co-create solutions.
- Promote policy and system level changes within Pierce County to move beyond equity only and undo racist structures.

Questions?

RESOLUTION 2020-4648

A RESOLUTION OF THE TACOMA-PIERCE COUNTY BOARD OF HEALTH, PIERCE COUNTY, WASHINGTON, DECLARING RACISM A PUBLIC HEALTH CRISIS AND DIRECTING THE HEALTH DEPARTMENT TO TAKE SPECIFIC ACTIONS

WHEREAS, racism is a system of structuring opportunity and assigning value based on the social interpretation of how one looks (which we call "race"), that unfairly disadvantages some individuals and communities and unfairly advantages other individuals and communities; and

WHEREAS, the health impacts of racism clearly exemplify the definition of public health crisis proposed by the Boston University School of Public Health, which is that "The problem must affect large numbers of people, it must threaten health over the long-term, and it must require the adoption of large-scale solutions"; and

WHEREAS, businesses, healthcare providers, and government agencies have structures built on past overt racist policies, long standing and unquestioned for so long, they have the effect of disadvantaging groups of people based on their race; and

WHEREAS, these structures of racism built into our education, employment, real estate, healthcare, law enforcement, judicial, and behavioral health systems have resulted in persistent negative and disproportional effects on Black/African American and other people of color; and

WHEREAS, the deaths of Black/African American people across the United States, including the recent deaths of Manuel Ellis, Said Joquin, George Floyd, Breonna Taylor and countless others both within Pierce County and across the nation have contributed to an environment that is persistently unsafe for our Black/African American communities; and

WHEREAS, multiple studies show race, income, and zip code have a bigger impact on health than personal behavior, medical care, or genetic code; and

WHEREAS, the documented unjustified deaths of people of color across the United States have led to increasing public awareness, particularly within white communities, of inappropriate tactical engagement strategies, and of historic and ongoing systemic racism that harms all people of color but more so and most persistently black people; and

WHEREAS, The Institute of Medicine concludes in Unequal Treatment, 2003 "The majority of studies... find that racial and ethnic disparities remain even after controlling for socioeconomic differences and other health care access factors."; and

WHEREAS: "Evidence continues to accumulate, highlighting racism as a driver of multiple upstream societal factors that perpetuate racial inequities in health...", as outlined in "Racism and Health: Evidence and Needed Research", April 2019; and

Tacoma-Pierce County

Board of Health



WHEREAS, Black/African Americans in Pierce County have significantly higher rates of death for cancer, diabetes, pregnancy-related conditions, and homicide compared to White residents; and

WHEREAS, Black/African Americans in Pierce County average 3.5 years less of life expectancy than Whites; and

WHEREAS, strong research ties the stress of daily racism to poor infant health outcomes, and Black/African American infants in Pierce County are 2.1 times more likely to die than White infants; and

WHEREAS, the current COVID-19 pandemic has exacerbated the racial disparities within Pierce County's Black, Native Hawaiian and Other Pacific Islander, Latinx, and American Indian/Alaskan Native communities; and

WHEREAS, the cumulative result of these racist systems and structures has contributed to an environment that is persistently unhealthy and unsafe for our Black/African American communities and for people of color; and

WHEREAS, unfair and race-based inequities will continue unless we undertake the uncomfortable but necessary work to dismantle the institutions and systems that perpetuate racism, violence, poverty, and injustice; and

NOW THEREFORE, BE IT RESOLVED:

Tacoma-Pierce County Board of Health declares racism is a public health crisis and charges the Health Department to:

- Assess internal policies and procedures to address and reform structures and processes that contribute to race based decisions and actions.
- Reshape our discourse and agenda so we all actively engage in anti-racist work, particularly anti-black racism.
- Review our budget and make recommendations for funding changes, allocations or re-allocations that fund the work of transforming systemic racism as a means of resolving disparities by changing the systems that cause them.
- Partner with community to co-create solutions.
- Promote policy and system level changes within Pierce County to move beyond equity only and undo racist structures.

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Chair, Board of Health

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