

BONNEVILLE COUNTY

1250 Hollipark Drive Idaho Falls, ID 83401 OFFICE (208) 522-0310 FAX (208) 525-7063

NOTICE OF SPECIAL MEETING

BOARD OF HEALTH - EASTERN IDAHO PUBLIC HEALTH

Notice is hereby given that Eastern Idaho Public Health's Board of Health will hold a special meeting via video conference on Thursday, August 20, 2020, at 7:00 a.m. at its Bonneville County office, 1250 Hollipark Drive, Idaho Falls, Idaho. The meeting room will accommodate seating for approximately 15 people. Social distancing will be required and masks must be worn. Any person who does not wish to social distance or wear a mask will not be allowed to enter and is invited to observe the meeting through live streaming. No outdoor viewing option will be available. No verbal public comments will be accepted during the meeting. Written public comment can be submitted to EIPHBoard@eiph.idaho.gov before noon on Wednesday, 8/19/20, for consideration at the meeting.

AGENDA Thursday, August 20, 2020 7:00 a.m.

Join Via Zoom https://zoom.us/j/92685214239

Dial In: (720) 928 9299 Webinar ID: 926 8521 4239

1.	Call to Order and Roll Call	Chairman Reed
2.	Approval of August 13, 2020 Board of Health Minutes (Action)	Chairman Reed
3.	Report from Idaho Association of District Boards of Health's Executive Council Call Bill Leak	
4.	Review of Public Comment	Chairman Reed
5.	Reports from Hospitals re: ICU and Overall CapacityA. Idaho Falls Community Hospital B. Eastern Idaho Regional Medical Center C. Madison Memorial Hospital	Chairman Reed
6.	COVID-19 Update and Review of Data	Seri Rackow & James Corbett
7	Discussion & Possible Revision to EIPH COVID-19 Regional Response Pla	an (Action) Chairman Reed



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SPECIAL MEETING

BOARD OF HEALTH MEETING MINUTES
August 13, 2020
5:30 p.m.
Zoom Meeting

PRESENT: BOARD OF HEALTH MEMBERS

Bryon Reed, Commissioner, Chairman (Zoom)
Bill Leake, Teton County, Trustee (Zoom)
Lee Miller, Commissioner (Zoom)
Ken Miner, Commissioner (Zoom)
Shayne Young, Commissioner (Zoom)
Barbara Nelson, MD, Vice Chair (Zoom)
Greg Shenton, Commissioner (Zoom)
Brent Mendenhall, Commissioner (Zoom)
Wayne Butts, Commissioner (Zoom)

STAFF MEMBERS

Geri Rackow James Corbett Angy Harwood (Zoom) Cheryl O'Connell (Zoom)

Steve Thomas Amy Gamett (Zoom)

1. Call Board Meeting to Order

Chairman Reed called the meeting order at 5:30 p.m.

2. Approval of August 6, 2020 and August 10, 2020 Board of Health Meeting Minutes

MOTION: Commissioner Miner made a motion to approve the August 6, 2020 and August 10, 2020

BOH meeting minutes.

SECOND: Commissioner Dr. Barbara Nelson ACTION: MOTION CARRIED UNANIMOUSLY

3. Review of Public Comment

Chairman Reed reviewed and responded to the public comments received. Topics included people not in favor of mandates, hospitalizations, opening of schools, school sporting events, EIPH Response Plan and High Risk level, and masks. Discussion followed.

4. Dialogue with Medical Professionals re: Threat of COVID and Community Response Efforts

Dr. John Landers, Dr. Kelly Anderson, Dr. Ken Krell, Dr. Boyd Southwick, Dr. Jared Morton, and Dr. Barbara Nelson provided information regarding the threat of the virus and the effects it could have on the schools, mental health, the economy, and the community. Input was also provided by local hospital administration, Dr. Tim Ballard (EIRMC), Casey Jackman (IFCH), and Dr. Rachael Gonzales (MMH).

5. Reports from Hospitals re: ICU and Overall Capacity

a. Eastern Idaho Regional Medical Center (EIRMC)

Dr. Tim Ballard reported EIRMC is busy with trauma and burn patients and the ICU has been full for several days. They have expanded the bed capacity for COVID patients and currently have 20 COVID patients. Healthcare workers are healthy and masking staff is important. EIRMC is managing PPE supplies adequately. EIRMC fully supports the mandating of mask when social distancing is not possible.

b. Idaho Falls Community Hospital (IFCH)

Casey Jackman reported IFCH is not currently overtaxed but need to be cautious of resources including staff.

c. Madison Memorial Hospital (MMH)

Dr. Rachael Gonzales reported that Madison Memorial Hospital currently has no COVID inpatients. She commented on healthcare workers infected with COVID-19, noting that the majority of these cases are community acquired rather than being acquired from the workplace.

6. Review/Revise EIPH COVID-19 Regional Response Plan

Ms. Rackow reviewed and clarified the currently metrics, active cases, and reviewed the importance of mitigation strategies. The goal is to maintain hospital capacity, keep the economy open, and get children back in school. Mr. Corbett reviewed the metrics by county and clarified hospital total bed occupancy. Ms. Rackow and Mr. Corbett reviewed proposed changes to the EIPH Regional Response Plan in the High Risk (Orange) Level, which includes:

- Metric 1 Active Rates: remove county-specific rates; change to rate of 50/10,000 for the entire
 district
- Include the following language for Metric 2 Outbreaks: Outbreaks that reduce services or could create rapid increase in hospitalizations

MOTION: Dr. Barbara Nelson made a motion to approve the proposed changes to the High Risk

Level of the EIPH COVID-19 Regional Response Plan as presented.

SECOND: Commissioner Young

ACTION: MOTION CARRIED UNANIMOUSLY

- 7. <u>Discussion and Vote regarding potential actions to protect life, health, and safety within the District as to the COVID-19 pandemic, to include consideration of orders that include, but are not limited to, mandating face coverings and limiting social events and gatherings in Bonneville, Clark, Custer, Fremont, Jefferson, Lemhi, Madison and Teton Counties</u>
 - Review and discussion of the COVID-19 data for the district.
 - Lemhi County has exceeded the active rate of 15/10,000 population for five days.
 - Ms. Rackow recommends an Order of Restriction for Clark County as they have had an increase in cases in the last several days, with a current rate of 82.8/10,000.
 - Ms. Rackow reviewed the draft Order of Restriction for Lemhi and Clark Counties, which includes a
 requirement for masks to be worn when physical distancing is not possible, as well as a limitation on
 events/gatherings.

MOTION: Commissioner Mendenhall made a motion to issue an Order of Restriction for Lemhi

County effective immediately and the Order of Restriction for Clark County effective at

12:01 a.m. August 16, 2020.

SECOND: Commissioner Young

ACTION: MOTION CARRIED UNANIMOUSLY

Commissioner Reed adjourned the meeting at 7:45 p.m. The next meeting is scheduled for Thursday, August 20, 2020 at 7:00 a.m.

Commissioner Bryon Reed, Chairman	Geri L. Rackow, Secretary

Recent and Proposed Revisions to EIPH's COVID-19 Regional Response Plan 8/18/20

At the EIPH Board of Health meeting on August 13, 2020, the following changes were made to the High Risk (Orange) Level of the Plan.

High Risk Level Metric 1:

Removed the active rate of 20/10,000 by county

1. RATE OF ACTIVE CASES > 20/10,000

POPULATION, SUSTAINED FOR 3 DAYS

*DUE TO SMALLER POPULATIONS, A RATE OF 30/10,000 WILL BE USED

Approximate active cases by county

to reach above rate:

- * Bonneville County. 240
- Clark County (WILL BE HANDLED ON A CASE-BY-CASE BASIS)
- Custer County 14 *
- Fremont County......27
- Jefferson County......60
- * Lemhi County.....24 *
- Madison County.....80
- * Teton County 24

(IDAHO'S CURRENT ICU ADMISSION RATE IS 1.5% OF ALLPOSITIVE CASES. BASED ON THIS CURRENT RATE, THE ABOVE NUMBERS OF ACTIVE CASES COULD YIELD 7 ICU ADMISSIONS EVERY 10 DAYS IN EASTERN IDAHO. ADDITIONAL ADMISSIONS

Approved Change:

THE COLLECTIVE RATE OF ACTIVE CASES FOR THE ENTIRE EIPH REGION > 50/10,000 POPULATION, SUSTAINED FOR 3 DAYS

(Idaho's current hospitalization rate is 4% of all positive cases. Based on this current rate, the above numbers of active cases could yield 46 hospital admissions every 10 days in Eastern Idaho. Additional admissions may result from non-residents of our district.)

Proposed addition for consideration at 8/20/20 Board of Health Meeting:

An individual county that reaches the > 50/10,000 threshold will be reviewed by the EIPH Board of Health for potential movement to the High Risk Level. Additionally, if the active rate of cases for the entire health district reaches the > 50/10,000 threshold, the entire district would be considered for movement to the High Risk Level.

High Risk Level Metric 2:

Language changed from "OUTBREAK(S) OCCURRING AT" to "OUTBREAKS THAT REDUCE SERVICES OR COULD CREATE RAPID INCREASE IN HOSPITALIZATIONS"