

KNOX COUNTY BOARD OF HEALTH MINUTES
October 14, 2020; from 5:00 p.m. to 7:45 p.m.
Knox County Health Department
Via Zoom Meeting and Public Forum

Present:

Martha Buchanan, MD, Secretary
Dianna Drake, PharmD
Maria Hurt, DNP
Glenn Jacobs, Knox County Mayor
Patrick O'Brien, MD
Ani Roma, Citizen Representative
James Shamiyeh, MD
Marcy Souza, DVM
Lisa Wagoner, RN; Representing Superintendent Bob Thomas, Knox County Schools

Absent:

Jack E. Gotcher, Jr., DDS, Chair

Others Attending:

KCHD: Katharine Killen, Roberta Sturm, Kelsey Wilson (zoom host), Narda Cappuccilli (recorder)

Knox County: David Sanders, Esq. representing Knox County Law Department

University of Tennessee Knoxville: Dr. Matt Harris, Dr. Spencer Gregg, Jacob Randolph

I. CALL TO ORDER

At 5:00 p.m., Dr. Buchanan announced that Chair Dr. Gotcher would be absent, as he was in surgery. She stated there was a quorum and the floor opened for nominations to chair the meeting. Dr. O'Brien nominated Dr. Souza, to chair the meeting and Mayor Jacobs seconded. Dr. Buchanan motioned for the nominations to cease, with Dr. Souza's agreement to chair, Dr. O'Brien seconded.

II. ESTABLISHMENT OF A QUORUM

Dr. Buchanan requested Ms. Cappuccilli take roll call, to confirm the establishment of the quorum. Nine Board members were in attendance, therefore there was a quorum, Dr. Gotcher was absent.

Dr. Buchanan motioned that Dr. Souza chair the meeting; Dr. O'Brien seconded. A vote was taken, which passed unanimously, 9 to 0.

III. PUBLIC FORUM

- A. Kevin Hill – social behaviors vs. good health preventions and therapeutics
- B. Richard Cunningham – request to rescind the mandates
- C. Julie Grubaugh – suggested creation of community formed committee to address social media information circulating, to translate science into 'regular speak'; volunteered with sister Elizabeth Hanson
- D. Christine Cruz – shutting down society vs virus as a threat

Dr. Buchanan verified, the very reliable PCR test is the gold standard test for detecting COVID-19, in addition to being used throughout medicine to test for extensive various diseases.

She confirmed you cannot amplify a virus that is not there; the manufacturer sets the cycle threshold, which is also a standard in PCR testing. It is the best test we have available currently, to which Dr. Shamiyeh agreed.

Ms. Roma inquired how widely is the PCR test used and confused why is there pushback?

Dr. Buchanan confirmed the PCR test is being used nationally, as well as world-wide to detect COVID. She stated laboratory science is complicated.

IV. APPROVAL OF MINUTES FROM SEPTEMBER 30, 2020 MEETING

Motion made by Dr. O'Brien and seconded by Dr. Drake, to accept the minutes as written. The motion passed, via roll call vote, 8 affirmatives and Dr. Buchanan abstained, as she was not in attendance, on September 30, 2020.

V. SET THE AGENDA

Motion to set the agenda was made by Dr. Shamiyeh, seconded by Dr. Hurt, which passed via roll call vote, unanimously, 9 to 0.

VI. DISCUSSION WITH MATT HARRIS, ASSOCIATE PROFESSOR OF ECONOMICS, UNIVERSITY OF TN

Dr. Harris introduced himself as an economist, whose research and expertise is in health and labor economics, to discover why people make the choices they make, allocate the resources they do and how peoples' decisions change based on world changes, which affects outcomes we care about. Broadly categorizing changes into two categories, one is policy environment, to include regulatory changes and changes in government spending to mitigate economic damages; and the second is when individuals and organizations begin changing their behavior in response to the threat of COVID-19, in advance of and sometimes independently of government or policy changes, he referred to as 'avoidance behaviors'.

In comparing sales tax receipts in Knox County, from August 2019 to August 2020:

- Clothing stores - Down 20%
- Restaurants and bars - Down 15%
- Gas stations - Down 15%
- E-commerce – Up 22%
- Building materials, Garden supplies – Up 15%
- Sporting goods and hobbies – Up 11%
- Grocery stores – Up 10%

Overall, sales tax receipts for the year in Knox County are up 13%, over last year.

This recession is different in that we are not experiencing widespread economic devastation, but pronounced patterns and substitution, with remarkable patterns of redistribution. Individuals have changed the way they've spent their money and changed how they spent their time in response to the pandemic. Knox County's record unemployment claims are up 6.5%, but these are well below the state average of 8.5%, whereas Davidson and Shelby, are at 10% and 13% respectively.

People most vocal, are usually those who have been the most adversely affected. Science continues to understand the long-range long-term ramifications of COVID-19 and secondly, assessing the impact of a particular regulation is difficult, as there is no such thing as a counterfactual Knoxville, as well as the varied details, which make comparisons difficult. Circumstances like a pandemic, when reviewing the dynamics of policy responses, matter a lot, comes back to

avoidance behavior. Various studies have shown: private self-regulating behavior explains over three quarters of the decline in foot traffic in discretionary industries; and local, national and global information about the trajectory of case counts and death counts, impacted the public as much as the stay-at-home orders, which was reflected in retail traffic. Individuals are making choices in response to the world they see, regardless of the policy environment that's in place, which is important as you loosen restrictions. There are trade-offs to the choices we make, not all the consequences for the trade-offs are immediately obvious, but must be considered, when making good policy and moving forward.

Masks have been proven in reducing infection rates, they are good for the GDP, and will avoid more intense restrictions; but the economic impact points to not setting off a chain of avoidance behaviors, where people voluntarily stay home and not engage in the services sector, nor retail. You can do business with a mask on! People are more likely to engage in risky behaviors when there is peer pressure or stigma, which will affect infection dynamics, avoidance behaviors and ultimately economic impact; only the magnitudes are uncertain.

VII. KNOX COUNTY HEALTH DEPARTMENT BENCHMARK PRESENTATION by DR. BUCHANAN

Dr. Buchanan reviewed the current local situation and the five benchmarks, available on the health department's website as follows:

- 64 new confirmed cases since yesterday's report.
- 11,234 confirmed and probable cases of COVID-19 in Knox County since March 2020.
- 527 probable cases.
- 10,457 of our cases are inactive, giving us 1,5214 active cases.
- 401 individuals have been hospitalized at some point in their illness.
- 63 Knox County residents are currently hospitalized, our highest number since March 2020.
- 90 deaths in Knox County, one death within the last 24 hours.

Benchmark 1: Sustained reduction of stability in new cases for 14 days / Red

The last eight days were flagged either 'yellow' or 'red'. The first four days presented with 'yellow' flags, followed by four 'red' flags, indicates continued increase in cases.

Benchmark 2: Community-wide sustained and increased diagnostic testing with consistent or decreased test result reporting turnaround time / Yellow

Over the 14-day evaluation period, four consecutive 'red' flags were noted for lab lag time. Over the past two weeks, lab turnaround time is averaging about 2.5 days. Regarding testing, we did have three 'red' flags, but not on consecutive days.

We are now using the TN Department of Health's data, which we are also using for the percent positivity rate, noticed by the increased numbers on the test conducted chart.

Benchmark 3: Sustained or increased public health capability / Green

KCHD has initiated investigations of all new cases within 24 hours and close contacts within 48 hours, which is a hard-fast goal of KCHD's and has been consistent since March 16, 2020, with our current epi support team.

Dr. Buchanan stated for this process to work, she requested individuals and businesses in our community, to please cooperate with the basic investigations by our health department staff.

Benchmark 4: Health care system capabilities remain within current and forecasted surge capability / Yellow

During the past 14 days, we have noted a continuous upper trend in hospitalizations; in the past eight days noted consecutive 'red' flags for ICU hospitalizations and in-patient requiring ventilation. Both metrics reflect a continuous upward trend, based on our published metrics that illustrate statistically significant shifts in the data.

After speaking with our hospital partners, they stated their benchmark should be represented as yellow, because they are currently below surge capacity and have adequate staffing capabilities for the current number of patients.

Benchmark 5: Sustained or decreased COVID-19 related death rate for identified positive or probable cases / Green

Over the past two weeks, Knox County has seen six deaths; with four, within the last seven days. It is a 'cautious green' as we anticipate this number to increase with the growing number of hospitalizations.

Supplemental Data:

Chart 1: New COVID-19 Daily Cases per 100,000 Population

This chart will show the seven and fourteen-day trend line. As of today, for the seven-day trend, we are at 23 cases per hundred thousand; and for the fourteen-day trend, shows 20 cases per hundred thousand.

Chart 2: COVID-19 Percent Positive Tests

This data is directly from the TDH-Tennessee Department of Health. Our current daily positivity rate average is 9.76 percent, which continues to be concerning. This graph will also depict a seven-day trend line, for prospective.

VIII. UNIVERSITY OF TENNESSEE MEDICAL CENTER AT KNOXVILLE DATA UPDATE by DR. SHAMIYEH

Dr. Shamiyeh presented data from the University of Tennessee Medical Center and some regional data on COVID hospitalizations, see attached PowerPoint.

Knox County Key Data Points:

- District hospital COVID-19 inpatient census experiencing significant growth
- Dramatic new case identification in Knox County, but even more so in surrounding counties, including more vulnerable age demographics
- New hospitalizations dropped or stayed relatively level (THA District), but there is an assumed delay in reporting due to contract tracing protocols at TDH, we have transitioned to a situation in which best reflection of hospitalizations, is daily hospital census
- Case counts and hospital census are concerning, in context of approaching flu season, student dismissals, and holiday season, when COVID-19 transmission is expected to increase
- Phenomena observed, not isolated to Knox County or East TN, same trends being seen at national and global levels

IX. EDUCATIONAL INSTITUTIONS PRESENTATIONS

A. UNIVERSITY OF TENNESSEE

Dr. Gregg spoke about the situation at UTK and their plans. See attached PowerPoint.

- 62 active cases, 59 are students, 3 are employees
5 new cases, as of yesterday
341 people isolating, 111 are students living in campus dorms
196 are students off campus and 34 faculty
- Identified new cluster within an Army ROTC programs, exposure happened during meetings on 10/10/20; with two individuals testing positive and 26 close contacts identified and contacted.
- Continuing comprehensive testing strategies on campus, including pooled saliva testing of on-campus residential facilities; with 671 students participating with 46 students referred for additional testing, 11 of those have had positive follow-up nasal swab PCR testing. Make-up testing resulted in 12 of the 455 tested were referred for further diagnostic testing.

- Strong compliance among students is extremely important, to prevent a potential surge. Reminder that through their student conduct and student housing contract, students have been reminded of their responsibilities.
- UTK is encouraging students to get tested before leaving campus for the holidays and appealing to their parents to encourage the same outcome.

B. KNOX COUNTY SCHOOLS

Lisa Wagoner presented information about Knox County Schools' COVID data and their process. See attached PowerPoint.

Dr. Buchanan asked if they have found resistance to testing by their student's families, due to the required 14-day quarantine, to which Ms. Wagoner replied affirmatively.

Mayor Jacobs inquired about the status of flu vaccinations for the schools. Dr. Buchanan responded due to COVID-19, it was determined that there was not a way to provide a safe environment within the schools, to offer the in-school flu vaccines, that we have had in the past. As an alternative, we have been holding several community clinics, some of them held at schools, between the hours of 3 pm to 6 pm, offering flu mist and flu shots to the family and children, free of charge. This is in addition to the same availability in our clinics. Also hoping local pediatricians will be vaccinating.

Ms. Wagoner stated that Kroger had completed visiting all sites providing flu shots to KCS staff.

X. FINALIZATION OF POTENTIAL METRICS by DR. BUCHANAN

Proposed Metrics for COVID-19 Mitigation Policy: Escalation and Recession. See attached PowerPoint.

Next Steps:

- Metric Approval
- Discussion on how to implement metrics to include order of policy suspensions

Dr. Buchanan made one recommendation to increase the seven-day escalation barrier to 28 days, providing more stability, more assurance the number is accurate; this is also consistent with the recession barrier. Positivity rate is very dependent on testing volume, which needs to be strongly emphasized to the community. She asked how the Board defines 'escalation', what would be the next steps and how realistic are those? Questioning if the next steps would be tolerated, and the impact to our economy and community, as well as the psychological and social well-being of our community.

Dr. Shamiyeh questioned what the recession cutoffs might be and how would we use this information, are they a firm guidance or a very well-defined entry point for discussion? He suggested utilizing five new cases per hundred thousand and five percent positivity rate is more realistic and achievable. Dr. Buchanan agreed, as the current three percent is low, noting the recommendations came from the White House Task Force information, which are being used nationally, as standards.

Ms. Sturm suggested that the categories of 'testing volume' and 'positivity rate', could be combined on the metrics.

Dr. Buchanan stressed not using just one piece of information to provide guidance and make decisions, but a combination of all the data and trends.

Dr. Shamiyeh suggested a clean simple revision to a recession barrier of five percent, with five per hundred thousand and escalation barrier of ten percent and ten per hundred thousand.

Ms. Sturm noted adding an important caveat, to exclude any known clusters, as these would be independent cases.

Discussion included how to increase testing in the community, to provide more accurate numbers. Dr. Buchanan stated that is when staffing becomes a challenge, as well as community uptake. Dr. O'Brien suggested utilizing the National Guard for event support.

Dr. Buchanan noted the health department is currently providing very limited drive-through testing, as it requires more staff, more risk is involved and the PPE is hot to wear, especially in the summer heat; for staff safety, we moved testing inside to provide walk-in, no appointment needed, with a brief registration process and a quick progression. She also stated the importance of the health department's epidemiology experts input to the metrics; we establish for our community.

Dr. Shamiyeh addressed the dynamic hospitalization capacity as a potentially a moving target, with variation in staffing; looking at the health care system in our region, which significantly serves all citizens, including Knox County residents and patients in the outlying area.

Discussion continued regarding trending, with the concept of stratifying yellow into two categories of 'yellow rising' and 'yellow falling'; with some absolutes, per Dr. Shamiyeh.

XI. REVIEW and DISCUSSION

A. COVID-19 FACE COVERING REGULATION, NO. 2020-1

Dr. Souza shared a study from Arizona, from January 22 to August 7, 2020; published October 9, utilizing CDC research, addressing incidence after implementation of mitigation measures, research confirming when the public health measures were put in place, they do work.

She also noted public concerns about masks not being required in polling locations, with early voting. Dr. Buchanan clarified that polling stations are not included in the mask mandate, as they are technically a 'government location', whereby the regulation does not apply.

B. COVID-19 CURFEW REGARDING THE SALE AND CONSUMPTION OF ALCOHOLIC BEVERAGE REGULATION, NO. 2020-5

This regulation will need to be renewed otherwise it will expire at 12:01 am tomorrow.

Dr. Buchanan reported there have been 12 complaints to the health department and nine complaints to KPD, regarding bars being open after the 11 p.m. curfew; education has been provided, no citations nor closings have been issued. There are repeated complaints about the same locations, but noted most establishments are complying and want to keep their patrons and community safe.

Ms. Roma reminded the public to call 311, to report any business in violation, which will route the complaint more quickly to the correct entity.

Dr. Shamiyeh made a motion, based on significant rise in case counts and hospitalizations, to extend this regulation, for two additional weeks, as written; Dr. Hurt seconded.

The vote was taken which passed via roll call vote of 8 to 1, Mayor Jacobs voted no.

C. COVID-19 SOCIAL GROUP TRANSMISSION SUPPRESSION REGULATION, NO. 2020-6

Dr. Drake made a motion, Dr. Hurt seconded to extend this regulation for two additional weeks also. The vote was taken which passed via roll call vote of 8 to 1, Mayor Jacobs voted no.

XII. MEETING SCHEDULE for 2020

Discussion was initiated due to Veterans Day, November 11, falling on a projected meeting date and Knox County government is closed for the holiday. The next schedule meeting is Wednesday, October 28 at 5 p.m. The results of further exploration of alternate dates for the following meeting, will be provided at that time. It was noted the option of calling an emergency meeting, with a 48-hour notice.

Dr. Buchanan also noted that Knox County Commission is considering changing the ordinance regarding the Board of Health, which may impact the ability to continue with virtual meetings, in addition to the October 30th state deadline via Governor Lee.

XIII. APPROVAL OF PROPOSED BOARD OF HEALTH LETTERHEAD

Dr. Buchanan noted the reason for the creation of the letterhead to provide communication from the Board chair, to clarify roles and responsibilities. Dr. O'Brien moved to vote on the approval of the letterhead, Dr. Buchanan second the motion, which passed unanimously, via roll call vote, 8 to 0; Ms. Wagoner was not available.

XIV. OTHER BUSINESS

Dr. Buchanan stated that Knox County Commission has two resolutions, which were sent to Board members today, one is regarding the creation of an advisory board on health and the economy. The other resolution is changing the Knox County ordinance to add language specific to the Board of Health, how we operate; with the declaration of an emergency, it would require that we would meet in person, if Knox County Commission is meeting in person; to allow public forum also in the same manner as Commission and county residents would have three or five minutes to speak. The sponsor of both resolutions is Commissioner Kyle Ward, reach out to him directly or the Knox County Law office with any questions. Two readings are required to change the ordinance, the first is scheduled for October 26, the second reading would take place in November; therefore, if the ordinance passes it will go into effect late November or early December 2020.

Dr. Shamiyeh has signed into shared 'electronic forum', inquiring if the Board can interact utilizing this resource, confirming with public record approval?

Mr. Sanders interjected that since the Board's initial discussion regarding the shared 'electronic forum', the law office had received an advisory opinion from the Office of Open Records Council, an office of the State, that deals with open meetings and public record issues, their rulings are not binding, but very persuasive. In that context, there was a separate Board of Knox County that they said could not make use of an electronic forum, the ruling was that a resource, such as that, was only available to elected bodies, not appointed bodies. The law office will be contacting the Office of Open Records Council, for clarification. Therefore Mr. Sanders stated the Board should not rely on this forum for communication yet.

Dr. Shamiyeh thanked Dr. Buchanan and her team for continuing the two weekly media briefings, which projects the current state of information and continues to educate the very fatigued public.

He stated his surprised of the last two weeks of escalation, which may become more of a regional issue, whereby ultimately anything regionally would come from the State level, from a public health policy perspective and our state has taken a different approach, from other states. Dr. Buchanan, in review of the state, currently noted Davidson and Shelby counties have some significant limitations still in place. Hamilton County presently, only has a mask mandate in place. Globally, some countries have opened-up and had to close back down, it's effective, as opposed to having hundreds of people hospitalized and die. That's the dilemma, that's where we are.

X. ANNOUNCEMENTS

Next Zoom meeting: Wednesday, October 28, 2020 at 5 p.m.

XI. ADJOURNMENT

There being no other business, Dr. O'Brien moved to adjourn the meeting, with a second by Dr. Shamiyeh. The meeting was adjourned at 7:45 p.m.

Respectfully submitted,



Martha Buchanan, MD, Senior Director and Public Health Officer
Knox County Health Department
Secretary, Knox County Board of Health