

KNOX COUNTY BOARD OF HEALTH MINUTES
September 23, 2020; from 5:00 p.m. to 7:00 p.m.
Knox County Health Department
Via Zoom Meeting

Present:

Martha Buchanan, MD, Secretary
Dianna Drake, PharmD
Jack E. Gotcher, Jr., DDS, Chair
Maria Hurt, DNP
Glenn Jacobs, Knox County Mayor
Patrick O'Brien, MD
James Shamiyeh, MD
Marcy Souza, DVM
Lisa Wagoner, RN; representing Superintendent Bob Thomas, Knox County Schools

Absent: None

Others Attending:

KCHD: Charity Menefee, Kelsey Wilson (zoom host), Narda Cappuccilli (recorder)
Knox County: David Sanders, Esq. representing Knox County Law Department
University of Tennessee Knoxville: Dr. Spencer Gregg

I. CALL TO ORDER

Chair Dr. Gotcher called the meeting to order at 5:00 p.m.

II. ESTABLISHMENT OF A QUORUM

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

III. KNOX COUNTY COMMISSION CHAIR LARSEN JAY

Chair Larsen Jay was unavailable to attend this evening's meeting.

IV. APPROVAL OF MINUTES FROM SEPTEMBER 16, 2020 MEETING

Motion made by Dr. Souza and seconded by Dr. Shamiyeh, to accept the minutes as written. The motion passed via roll call, 9 to 0.

V. SET THE AGENDA

Motion to pass made by Dr. Souza, seconded by Dr. O'Brien, which passed via roll call vote unanimously, 9 to 0.

VI. 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:

- 55 new confirmed cases since yesterday's report.
- 9,340 confirmed and probable cases of COVID-19 in Knox County since March 2020.
- 407 probable cases.
- 7,902 of our cases are inactive, giving us 1,768 active cases.
- 345 individuals have been hospitalized at some point in their illness.
- 33 Knox County residents are currently hospitalized.

- 77 deaths in Knox County, one death within the last 24 hours.

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

Last week we saw two ‘red’ flags, but not on consistent days; overall data indicates statistical decreases and trending in right direction. We are averaging 116 new cases per day.

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, we did have a three-day ‘yellow’ trend in lab turnaround time, but not on consecutive days; since September 4, it has remained around a two-day average.

Regarding testing overall, the number of tests conducted continues to trend up, but noted a slight downward trend over the last few weeks; some ‘red’ days were viewed but those were on weekends, when testing is less widely available in our community. Over past 14 days, there have been an average of 562 tests done in Knox County per day, although the State notes slightly higher numbers. We may be transitioning to using the State’s data over the next week, for consistency; since we are considering also using the percent positivity rate, based on State data. We continue to be very concerned that folks are not getting tested when they should be, people are not seeking testing because they don’t want to be in isolation or quarantined.

To effectively evaluate this benchmark, we plan to closely focus on this data for the next three to four weeks, to determining the trend. Our current percent positivity rate, based on Tennessee Department of Health data, is 8.2 percent; last week it was about 12 percent, this information will be added to our website, soon.

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. We have added 12 new team members to our Epi Support team, which will enable us to continue to initiate investigations within the desired time frame.

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

During this time frame, no consecutive flags were detected. After speaking with our hospital partners, they stated their benchmark should be represented as yellow.

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

Over the past two weeks, Knox County has seen nine deaths.

Dr. Buchanan then showed 2 slides of COVID data related to recent new cases and age distribution, see attached PowerPoint.

Slide #1 – COVID-19 Cases by Date and Age Category

Evident that most of cases are from older high school grades children, in Knox County, with fewer cases in middle and elementary school.

Slide #2- COVID 29-Cases by Date and Age Category: 5 to 10, 11 to 13 and 14 to 17 years

The 18 to 22-year-old age group is where most cases had been detected is now decreasing, a trend we hope continues, and know UT does as well.

VII. 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.

Key data points from PowerPoint Presentation:

- 3rd highest week of case growth since the beginning of the pandemic
- Dramatic decline in 11-20 age group new positive cases; possibly attributable to decline in testing volume
- Positivity rate remains above all recommended thresholds (White House, CDC, WHO) since August 30, 2020 with stable test volumes since August 2, 2020
- District hospitalizations growing significantly, but Knox County hospitalizations remain level and manageable

Discussion included the noted decreased testing in the 11 to 20 age group, with consensus there are no barriers to getting the tests done, but rather some parents are intentionally not getting their children tested and college-age folks choosing not to get tested, confirmed by UTK.

VIII. EDUCATIONAL INSTITUTIONS PRESENTATIONS

A. Dr. Gregg from the University of Tennessee Knoxville (UTK) spoke about the situation at UTK and their plans. See attached PowerPoint.

- Significant drop in active cases in last few weeks, possibly reflective of overall recovery and less new active cases or the lack of testing requested by students through the Student Health Center shows fewer individuals electing to be tested overall.
- Systematic testing across campus began last week with wastewater testing. Traces of the virus were discovered at some residence hall facilities, which was expected as positive students are isolating in some dorm rooms and there is evidence that previously infected individuals can continue to shed the virus gastrointestinally, even after they've recovered and are no longer considered to be infectious. Wastewater testing will continue throughout the semester to determine baselines and observe trends, whereby redirecting focus and resources as needed.
- Pooled saliva testing has begun in some residence halls allowing estimates of what percentage of residents are positive for the disease, then determined who needs further diagnostic testing with the provider obtained nasal swab PCR test.
- Taken together, results from this comprehensive strategy of wastewater testing, pooled saliva testing, nasal swab PCR testing and contact tracing efforts on campus better understand and manage the health of our university community.
- University of Kentucky research study with UTK, asking UTK quarantined students to participate in by taking nasal samples on days: 3, 5, 7, 10 and 14 of their quarantined periods. The hope is to better narrow down the window from exposure, that we know individuals can potentially test positive for the disease; Dr. Birx, from the White House Task Force, had requested UTK take this on during her recent visit. UT hopes with this date they could better inform CDC guidelines around quarantine and hopefully result in limiting the overall number of days for the quarantine period, which is currently 14 days.
- Discussion followed with Dr. Shamiyeh strongly agreeing that the rapid sharp decline in active UTK cases can only be explained by a decrease in testing, a reluctance of wanting to be tested; whereby previously testing 50-60 students, currently as low as one test on one day.
- Dr. Buchanan inquired if there was any potential of expanding the research study outside the university for other folks in quarantine, to other age groups. Dr. Gregg will provide Dr. Crawford's information to the health department, as he is overseeing UTK's testing efforts.

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

IX. DISCUSSION OF POTENTIAL METRICS BY DR. SHAMIYEH

See attached PowerPoint.

Goals of Establishing Community Metrics:

- Inform the public
- Set expectations and provide stability
- Create standard for current situation
- Provide context to individual data points that are changing
- Encourage testing and mitigation
- Set goals for mitigation policy relaxation
- Set barriers for more restrictions

Discussion included Dr. Buchanan responding to Dr. Gotcher’s inquiry of last week, in that no evidence was discovered that Williamson County used any data driven evidence to recently lift their mask mandate. Also Dr. Shamiyeh confirmed that the Tennessee Pledge is not a metric driven decision-making document. Herd immunity was defined by Dr. Buchanan and the challenge of not knowing how long immunity lasts with COVID-19; in our country we achieve herd immunity through vaccination. The herd immunity percentage is currently estimated at best 10% in our country, to be effective as herd immunity it would need to be between the 50 to 90% range, per John Hopkins research.

X. COVID-19 FACE COVERING REGULATION, NO. 2020-1, REVIEW AND DISCUSSION

- a. Complaints have stabilized, no citations nor fines have been issued by KPD, Sheriff’s Office or KCHD, as this is not the intent of this regulation
- b. Dr. Souza shared the Tennessee Pulse Survey, conducted by the UTK Baker Center and College of Social Work, since May 2020, statewide responses; found at core19.utk.edu
 - 75% responded the CDC/Health Department as their source trusted about benefits of wearing a face covering
 - 74 to 75% responded their support of a mask requirement in local community

XI. OTHER BUSINESS

Board members discussed a video narrated by Knox County Mayor Glenn Jacobs. Mr. Sanders clarified for Dr. Gotcher, that the County cannot create a regulation, ordinance, or such, that conflicts with state law; that is firmly established.

Dr. Buchanan mentioned the resolution brought forth by Commissioners Biggs and Ward, to be discussed on Monday, September 28, Knox County policies related to regulations of the Board of Health; if someone wanted to attend the meeting to represent the Board of Health, as Commissioner Chair Jay is agreeable. Everyone on the Board was supportive of Dr. O’Brien attending, as he offered to answer any questions on the Board of Health’s behalf. Dr. Buchanan will attend the meeting via zoom.

Dr. Gotcher mentioned an article from JAMA, relating the study of 9,000 patients studied and only one patient was traced back to the hospital to possible exposure to COVID-19; indicating hospitals are very safe environments for non-COVID-19 diagnoses, with the utilization of masks, effective PPE and the fastidious care by hospital personnel.

XII. ANNOUNCEMENTS

Next Zoom meeting: Wednesday, September 30, 2020 at 5 pm.

XIII. ADJOURNMENT

There being no other business, Dr. Shamiyeh moved to adjourn the meeting with a second by Dr. Drake. Meeting was adjourned at 7:00 p.m.

Respectfully submitted,



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