

KNOX COUNTY BOARD OF HEALTH MINUTES
September 30, 2020; from 5:00 p.m. to 7:00 p.m.
Knox County Health Department
Via Zoom Meeting

Present:

Dianna Drake, PharmD
Jack E. Gotcher, Jr., DDS, Chair
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: Martha Buchanan, MD, Secretary

Others Attending:

KCHD: Charity Menefee, Roberta Sturm, Kelsey Wilson (zoom host), Narda Cappuccilli (recorder)
Knox County: David Sanders, Esq. representing Knox County Law Department
University of Tennessee Knoxville: Chancellor Donde Plowman, Jacob Randolph

I. CALL TO ORDER

Chair Dr. Gotcher called the meeting to order at 5:00 p.m.
Introductions were made to new Board member, Ms. Ani Roma, the recently approved Citizen Representative, by the Knox County Commission. Ms. Roma introduced herself as a teacher for Knox County Schools and a local business owner.

II. ESTABLISHMENT OF A QUORUM

Dr. Gotcher 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. Martha Buchanan was absent. Everyone briefly introduced themselves and welcomed newcomer, Ms. Roma.

III. APPROVAL OF MINUTES FROM SEPTEMBER 23, 2020 MEETING

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

IV. SET THE AGENDA

Dr. Gotcher acknowledged a request made to move Agenda Item #14 *Public Forum Discussion* to the front of the agenda, as Mayor Jacobs would like to participate in the discussion earlier in the meeting. Motion to pass made by Dr. Shamiyeh, seconded by Dr. Drake, which passed via roll call vote, unanimously, 9 to 0.

Motion was made by Dr. Shamiyeh, seconded by Dr. Souza, to add the discussion of the frequency of upcoming meetings to bi-weekly, which passed via roll call vote, unanimously, 9 to 0.

Motion was made by Dr. Souza, seconded by Dr. Drake, to approve the amended agenda, which passed via roll call vote, unanimously, 9 to 0.

Mayor Jacobs offered his staff to accommodate the public forum preparations, whenever it is determined to be scheduled. The public forum, which is included in the first meeting of the month, allocates a total of 30 minutes, and allows three minutes per speaker, after stating their name and address, for the record.

Dr. Shamiyeh raised the discussion that anything requiring action can be viewed in two-week intervals. Dr. Drake made a motion, seconded by Dr. O'Brien, to modify the Board of Health to meet bi-weekly, which passed via roll call vote, unanimously, 9 to 0. Clarification was made that the next meeting would meet on October 14, including the public forum. The Mayor excused himself from the current meeting.

V. KNOX COUNTY HEALTH DEPARTMENT BENCHMARK PRESENTATION by CHARITY MENELEE

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

- 57 new confirmed cases since yesterday's report.
- 9,885 confirmed and probable cases of COVID-19 in Knox County since March 2020.
- 429 probable cases.
- 8,714 of our cases are inactive, giving us 1,516 active cases.
- 369 individuals have been hospitalized at some point in their illness.
- 36 Knox County residents are currently hospitalized.
- 84 deaths in Knox County, one death within the last 24 hours.

Ms. Menefee mentioned the discrepancies between the Health Department case numbers and those listed by the State of Tennessee Department of Health, following a discussion with the State, discovered they are geo-coding all of their cases which provides additional data versus the jurisdictional data. This will be addressed and revised tomorrow, based on our jurisdictional data, which is the true data; this is the inactive and active case counts only.

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

In last 14 days, we have only seen one 'yellow' flag; overall data indicates trending in right direction. We are averaging 77.9 new cases over the last seven days and 87.8 cases over the past 14 days.

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 one 'red' flag noted for lab turnaround time, but since mid-August the lag time has decreased, and the turnaround time is consistently around two and half days. Regarding testing, we did have five 'red' flags and one 'yellow' flag; the 'red' flag days were on weekends, when testing is less widely available in our community. Since August 1, the number of tests conducted has continued to decrease, but the average testing volume has remained above around the 4,000 mark. We would prefer to see this trend upward, rather than down, as we observe currently; with such low testing volume, it does not give us an accurate picture of what is happening in our community.

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 additional new team members to our Epi Support team, which will enable us to continue to initiate investigations within the desired time frame and returning our KCHD team members to their normal job assignments.

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

During this time frame, we saw one 'yellow' flag followed by three consecutive 'red' flags for hospitalized COVID patients; one 'yellow' flag for ICU patients and four 'red' flags for ventilated patients, but they were not on consecutive days.

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 eleven deaths; with five of those deaths, within the last seven days.

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, we are at 12 cases per hundred thousand.

Chart 2: COVID-19 Percent Positive Tests

This is data we are pulling directly from the TDH-Tennessee Department of Health. Our daily positivity rate as of Sunday, Sept. 27 was 6.92 percent. This graph will also depict a seven-day trend line, for prospective.

Ms. Menefee stated the PCR is the gold standard test for diagnostic side, it is the only way to have a confirmed case according to the Tennessee case definition, it must be a PCR positive. She predicts we will see more antigen testing upcoming, with kits being given to long-term care facilities and other locations. For Tennessee, the case definition, if you are an antigen positive, would place you in a probable case category. Questions arise challenging accuracy, especially if it's for an asymptomatic person, versus a symptomatic person. The antibody testing is what should be used for surveillance, and not diagnostic testing, per CDC, TDH and WHO.

VI. 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.

One slide was dedicated to Myocarditis, inflammation of the heart muscle, and its connection to COVID-19.

Key data points from PowerPoint Presentation:

- Lowest week-over-week new cases since week of August 16th
- Declining new cases in 11-30 age group explains almost all variation in total new cases
- Positivity rate remains above all recommended thresholds (White House, CDC, WHO), since August 30, 2020 with stable test volumes since August 2, 2020; unclear as to whether current testing pool represents the population sufficiently
- District inpatient census escalated this week, but unclear if this is a one-time event or beginning of larger trend

VII. EDUCATIONAL INSTITUTIONS PRESENTATIONS

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

- 1420 Recoveries as Sept. 30, 2020
75 active cases, 72 are students, 3 are employees
12 new recoveries and 8 new cases, today

313 people isolating, 276 are students, 102 are students living in campus dorms, 174 are off campus and 37 faculty

- Sharp decreases noticed in new cases, self-isolating and quarantining.
- Huge reduction in number of testing requested by students through the Student Health Center, shows fewer individuals electing to be tested overall.
- Continuing systematic testing via pool saliva testing and wastewater testing. Initiated saliva pool testing collection of 574 samples in two residence halls, 26 were positive, to be tested further by PCR nasal swab test, as needed. Positivity rate was under 4 percent in these two dorms, in comparison to Massey dorm, at 10 percent, where every person was tested, in the 'Massey - Isolated Dorm'. Weekly wastewater testing in 39 campus buildings, including all residence halls and Greek houses shows fluctuations in results, testing will be monitored closely.
- Some restrictions have been lifted on campus, although testing has decreased.
- Update on the collaborative study with University of KY is expanding to add South Carolina, Alabama and Virginia Tech. The study tests students who have been identified as close contacts. They are asked to quarantine and provide self-nasal tests on specific days, to identify if the fourteen day period is necessary; 1,000 samples are need for the research, per Dr. Brix.

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

VIII. DISCUSSION OF POTENTIAL METRICS BY CHARITY MENEFFEE AND ROBERTA STURM

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

Discussion included discovery of other Tennessee or national metropolitan areas creating metrics, such as this; Memphis very recently published a document that will be explored further and report back to the Board. Dr. Shamiyeh mentioned that the state of West Virginia had a conceptually similar metrics to our proposal, as does Shelby County, TN; which are based on information related to the White House Task Force and other data sources. Dr. Buchanan will be reviewing this information, and leading further discussion, at the next meeting.

Dr. Shamiyeh suggested further discussion on the number of metrics considered and the interaction between them, as well as the hospitalizations. Also, noting the tension between recommendations and what may be realistic, stressing the balance between those factors. Hopefully the 'online forum' will be available to the Board soon, whereby they can publicly discuss information and work on this metrics prior to the next meeting, October 14, within the Sunshine Law provisions.

Dr. Gotcher mentioned an interest to compare caseloads verses releasing restrictions statewide, with the Governor's recent release of mandatory requirements.

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

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; masks and education have been provided.

X. COVID-19 CURFEW REGARDING THE SALE AND CONSUMPTION OF ALCOHOL BEVERAGES IN CERTAIN ESTABLISHMENTS REGULATION, NO. 2020-5, REVIEW AND DISCUSSION

311 reported eight specific location complaints; KPD continues to focus on ‘the Strip’ area of Cumberland Avenue and provides education, no citations have been issued. Chief Thomas and KPD have been impressed with the progress local business owners have made in the last two weeks; reported, and positively acknowledged by Dr. O’Brien. Dr. Shamiyeh anticipates the potential clarity of this regulation to be reflected in the data, within two weeks. Dr. Gotcher sent a ‘shout out’ of appreciation, to the large group letter, signed by over 90 local businesses, sent to the Board thanking them for their work and pledging to stay the course with the Board of Health, recognizing how difficult it must be for many of the small business owners. Dr. O’Brien made a motion to extend Regulation No. 2020-5 for an additional two weeks, creating the originally intended 28-day cycle, which would sunset on October 15, 2020 at 12:01 a.m.; second by Dr. Shamiyeh. The vote passed via roll call vote, 7 to 1, with Dr. Drake voting against the extension.

XI. COVID-19 SOCIAL GROUP TRANSMISSION SUPPRESSION REGULATION, NO. 2020-6, REVIEW AND DISCUSSION

Ms. Menefee reported no citations have been issued for this regulation, by the Health Department, nor any of our partners, that we are aware of. Dr. Shamiyeh encouraged extending this regulation to support both regulations No. 2020-5 and No. 2020-6, working conjointly for the 28-day cycle.

Dr. O’Brien made a motion to extend Regulation No. 2020-6 for an additional two weeks, creating the originally intended 28-day cycle, which would sunset on October 15, 2020 at 12:01 a.m.; second by Ms. Roma. The vote passed via roll call vote, unanimously, 8 to 0.

XII. DISCUSSION OF KNOX COUNTY RESOLUTION, R-20-9-907

Mr. Sanders stated the resolution passed Monday night, was an aspirational statement of the Knox County Commission, but it does not affect this board in any manner. The resolution does not impose anything, nor does it affect the regulations of the board.

Dr. Hurt differentiated between the two very different terms ‘unelected’ and ‘unaccountable’, both of which were used to refer to the Board of Health members at the Knox County Commission Meeting, held September 26, 2020. She confirmed that the Knox County Board of Health is not elected, nor is any other Board of Health national wide. Quoting Dr. Gotcher, “so they are not pulled into the political fray.” Dr. Hurt clarified that each Board member is accountable to their profession, certifying bodies, oaths, state boards, and to the County Commission, as each person was vetted, voted, and appointed by such body. Board of Health members have high standards, indicated by their professions and the laws that govern each of us.

Dr. Shamiyeh stated that essentially the Board will be criticized for overreacting, under reacting or if everything goes perfectly; as each Board members feels the entire weight of the situation on their shoulders. He is encouraged with the direction of the Board, in creating the metrics, to examine the data and making scientifically driven decisions. The Board is committed to do their best, with their training and to represent their professions, to the best of their ability.

Dr. O’Brien encouraged everyone to have patience, be positive and to work together; also, in appreciation for the multitude of emails, sent to the Board; those that are helpful, supportive and those that are not.

XIII. OTHER BUSINESS

Dr. Shamiyeh in response to a specific email question, stated what has been observed when the overall census increases, the percentage of people in the intensive care unit, relatively speaking, decreases. THA data is about in the 27 to 30 percent range.

Dr. Gotcher received an email from a prominent local business leader, looking at the business side of the Board's decision making, suggesting when the Board has a proposal, would it be possible to have dollar impact, an estimated economic statement. Ms. Menefee stated that we would need to contact the University of Tennessee to assist that request, as the health department does not have an economist on staff; with anticipation that time may be an issue, considering the state of emergency.

XIV. ANNOUNCEMENTS

Next Zoom meeting: Wednesday, October 14, 2020 at 5 pm.

XV. ADJOURNMENT

There being no other business, Dr. Drake moved to adjourn the meeting with a second by Dr. O'Brien. 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