

ALLEN COUNTY DEPARTMENT OF HEALTH
Executive Health Board Meeting – Special Session
March 12, 2020

The special session of the Board of Directors of the Allen County Department of Health was called to order in the Discussion Room located at 200 East Berry Street, Fort Wayne, IN, at 1:15 p.m. pursuant to the notice sent to all Directors in accordance with the bylaws.

The following Directors were present: William Pond, Patti Hays, Tom Dykstra, Ted Sobol, Mary Hess, Debra Lambert, and James Cameron.

Dr. Pond presided over the meeting. Jennifer Miller took notes for the proceedings.

Dr. Pond called the meeting to order at 1:15 p.m.

Introduction of meeting needs and Situation Updates:

Dr. Pond asked the board members to introduce themselves. Mindy Waldron, Department Administrator asked the public limit all comments to five minutes. She said if time for the meeting is running short, public comments may halted but written comments to board will be accepted.

Mindy asked that all those in the audience practice social distancing for the meeting. She asked everyone to please sit every other seat if possible and cover coughs as needed.

Dr. McMahan thanked everyone for coming on such short notice. She said the board has had to wrestle with some difficult decisions in the past and this is no different. She said thank you to all community leaders who have been meeting and talking about how to best address these issues. She said everyone has been working around the clock.

Dr. McMahan said the number one goal for this pandemic is the health care system must remain viable and social distancing is key.

Dr. McMahan continued by saying there are important definitions she wanted everyone to understand and the first one is the importance of the role of social distancing. And secondly, why limiting or cancelling some events might be needed. “Ultimately the decision is my responsibility but I have come to appreciate guidance from other folks. And I do understand, there is a lot to consider,” she said.

Dr. McMahan provided a situation update to the board. She said on March 11 COVID-19 was declared a pandemic. “Person to person transmission has been confirmed,” she said, “We believe it has ability to spread easily from person to person.” Approximately 130,000 people are infected worldwide. The US currently has 1,323 infections and currently Allen County has zero cases.”

“Because this is a new virus, our entire community is susceptible right now. Past experience shows that eventually the vast majority of citizens will become infected. The questions is can we control and influence the timing of the infection – as of now we can’t prevent infection –but can we possibly stagger exposure and potential infection so that we do not overwhelm health care?”

Dr. McMahan shared a graph that illustrates the impact of controlling the timing of the spread of a Pandemic in a community. She said that staggering the control of exposure is the only way to stop the overload of the health care system. “Health care must stand,” she said, “But how does a community do this with the least disruption on the social and economic well-being of a community?”

Erika Pitcher – Director of Community Health and Case Management – Provided some definitions for the board. She said the World Health Organization (WHO) Defines a Mass gathering as planned or unplanned event where the number of attendees is enough to strain public health resources of a community, state or nation. She said WHO defined a large venue as a permanent facility that annually seats or serves an average of more than 2,000 individuals within the grounds of the facility per day of operation (both people attending the event and those working at it-including volunteers too – are included in this number.)

Erika also provided some examples from other communities that have cancelled mass gatherings.

- Seattle banned gathering of more than 250 people through the end of March. This ban includes community, civic, faith based, leisure, parades, concert, festivals and fundraising events.
- San Francisco banned gatherings of more than 1,000 people through April 21st.
- Ohio Governor Mike DeWine says he will issue a public order limiting mass gatherings as part of a state effort to stop the spread of COVID-19.

Dr. Cameron asked, “What will it look like if we exceed health care facilities capacity?”

Dr. McMahan replied, “Not only will our facilities be beyond capacity but our doctors’ offices will be as well. Patients will not be treated for other conditions that are normally treated. We want to make sure people have access to treatment for all reasons. I want you to be treated. I don’t want something to stand in the way of that.” she said. Dr. McMahan continued, “Hospitals have set up phone systems for you to call if it is not an emergency. Those numbers need to be utilized. It will not take very much to overwhelm the system. People need to be treated. I am not trying to be overly dramatic.”

Patti Hays asked, “Do schools and places of employment count as mass gatherings?” Erika said no they do not. Laura Maser offered some definitions for the board. She said Indiana State law allows the Health Commissioner to close schools, churches, and public gatherings. She added

that the Health Commissioner is able to close non-essential public gatherings but there is no express naming of business.

Mindy Waldron said the School Advisory group has been meeting. Public schools and nearly all private schools are represented. She said they have discussed the potential closings to proper procedures for cleaning. She said they have discussed the pro and cons of many situations. The group is on the same page and will continue to meet and make plans.

Mary Hess said she agrees there are a lot of pros and cons in terms to closing school and there are a lot of things at stake. "We must meet the needs of children. We are looking for the wisdom of healthcare," she said. James Cameron agreed and said the needs of families are very important. "We have to keep that in mind," he said.

Dr. Jeffrey Boord, Parkview Health Systems, said Dr. McMahan mentioned something earlier for consideration that we need to think about as we face this pandemic. "Keep in mind our children rely heavily on the school system --as do our parents. Closing schools would have a significant impact on our work force. Parkview Health System is a large employer – this could have significant impact on us if a school system closed. Given good hygiene guidelines schools could reduce the spread," he said.

Dr. Cameron introduced some ideas that could have impact on limiting full closer of schools. He said that buses are a big gathering place to share germs. One way to stop the spread of germs is eliminate bussing. Another way to reduce spread is to reduce students moving around. Remaining in a home room for the entire day with a class size less than 30 would also help. Adding space between students would work as well. Emphasizing hand washing throughout the course of day is important and having teachers pay close attention to students with reminders about covering coughs and other measures, would help as well. Eliminating the cafeteria and having lunches come to the students would help as well. This means not serving hot lunch. Cold lunches would come to the students. Dr. Cameron also recommended eliminating recess. "This would prevent co- mingling and would be another mechanism that might help prevent outbreak," he said.

Dr. McMahan said these are all good ideas. "These are big decisions. We must have use evidence based methods," she said.

Hospital Systems

Speakers

Dr. Scott Stienecker, Dr. Jeffrey Boord – Parkview Health System.

Dr. Vishal Bhatia, Lutheran Health Network

Dr. Stienecker said in his presentation that the COVID-19 virus is expanding in circles around the world. The curve in overall disease is flattening in China but it is still rising the rest of the world. "What does the time line look like in order for the disease curve to start flattening in the rest of

the word? I anticipate it might be two months or more. Limiting social events would be helpful,” he said.

Dr. Stienecker continued, “Think about the natural history of disease. Most people who are exposed develop symptoms five days later. Some people just 2-4 days later. Some are asymptomatic. Most health systems see patients one week into exposure and by day eight some patients are on ventilators – which lasts for 2-3 weeks. Each patient will consume about a month of resources for a hospital.”

“The WHO’s pandemic flu plan was updated 2017; we are on page 108 of plan. There is pretty clear guidance on what to do. We should limit all non-essential domestic travel. Ten weeks ago we did not know this virus existed. Human testing is starting, a tremendous amount has been accomplished in these 10 weeks. So where are we? The key to reducing the spread is social distancing-- remote learning and remote working. Quarantine and Isolation,” said Dr. Stienecker.

Dr. Stienecker added, “What are the most important things we do? Protect the medical system and the transportation of goods. We must slow the disease spread and allow medications and vaccines to catch up. Everywhere they implemented pandemic plans we are seeing improvements --by implementing social distancing for 2-4 incubation periods or 4-8 weeks. This is part of pandemic plan. Everywhere they implemented this plan it has been pretty effective. “

Deb Lambert asked, “What number of patients will it take to overwhelm system?” Dr. Boord replied, “There is not an easy answer. It depends on how ill are they? And what do they need? If 50 patients require hospitalization and are critically ill – that would be very difficult. That would be harder. Patients in ICU – requiring a ventilator-they are sick for weeks. We only have so many ICU beds. We don’t have 100 extra nurses. An ICU suite full of patients consumes and incredibly high number of resources. It does not take a lot of critically ill patients to overwhelm us.”

Dr. Pond said, “For the people here. What happens if we have 1/3 of the population of Allen County come down with this? What is our capacity? It makes all the difference in the world to spread out the infections. We don’t have 100 extra beds in our community that we can use at once. We only have so many beds and personnel.”

Dr. Boord said, “We have emergency plans to expand capacity. We will do everything possible to expand our services. But there are limits and so much supply. We are already experiencing serious PPE shortages. We are going to reach our limits.”

Dr. Bahatia, Lutheran Health Network, said “We are in this together. We both have a very high level of concern.” Dr. Bahatia said agrees with all comments that have been made. “We are continuously preparing. You realize how quickly our resources are taxed. We are almost always running at capacity. When people are in the ICU you need well trained, experienced people. We can take things in waves. Twenty patients deplete our resources very quickly.”

Dr. Pond said, “If we make decision to spread this out over a long period of time. We can weather this. If we don’t – it is not likely.” Dr. Boord replied, “Absolutely.”

Dr. Cameron asked, “Is there a number of critical patients that would overwhelm our resources for all systems?” Dr. Boord replied, “Assuming you have full staffing, 80-90 percent beds are always occupied. 10-20 beds may be available. 40 extra people could fill up capacity we have at the moment. Patients stay ill for such a long period. It’s not three days it is three weeks. “

Dr. Cameron said, “We have been asked to make sure the system still functions. Who are in these beds normally?” Dr. Bhatia replied, “Pediatric, cardiac, others with severe infections. Patients with flu, surgical and trauma patients. You name and we have it. We are taking precautions. Clinically this starts stressing the system. “

Dr. Dykstra said, “Thank you for your hard work. Dr. Stienecker, from my standpoint, we are talking about people in Allen County. Several critically ill patients in this county where we are asking Parkview or Lutheran to take them. Also consider EMS providers – Super high risk. I have respect that for them. The risk they take –should one of those staff get sick staffing becomes really difficult. My goal is to keep them safe as possible. If the curves flatten – when do we say restrictions can be pulled back?”

Dr. Stienecker said, “Considering what is happening in other countries-- China in December started implementing basics. They are in flat portion of infections. We are now in March. I am expecting to see China taper off. I think they have made that turn. That is three months. South Korea is no different. They are still going to be on same trajectory. Taiwan, Germany have a very flat curve. Iran had no restrictions and they are seeing a lot of deaths. China and other successful countries have done whatever is needed –social distancing, snow days, and work from home. Preserve infrastructure. Decrease all non-essential travel.”

Dr. Boord responded, “Operationally we may have to cancel elective procedures in order to respond to public health needs. Because of critical staffing needs – we may have to close some clinics to divert some to the hospital full time. Pulmonary specialists may have to staff hospital ICUs.”

Dr. Dykstra, “We need to make guidelines. When Indy makes those decisions – it pressures us to follow. Should we follow that? Do we have to follow them?”

Dr. Boord said, “This public health threat is not a short term threat that is going to last a month. We have a limited window to take actions. Social distancing measures are important --so we can substantially provide health care. Timing means now --not in a few weeks. It has to be rigorous. It cannot be small half measures.”

Dr. Stienecker said, “We need to keep trucking. Factories need to keep making staff. We must preserve all of those.” Dr. Bahatia said, “We need to follow expert’s advice.”

Discussion:

Public comments – Dr. Pond said, “For public comments- in the interest of time we are going to limit them to five minutes. We would like as many people as possible to speak.”

Dr. Pond said, “Schools play such integral part of our community, let’s start with them.”

Schools

Speakers

Charles Cammack- Fort Wayne Community Schools

Dr. Phil Downs- Southwest Allen Community Schools

Charles Cammack said, “We take our community seriously. We want to cooperate as much as we can. We are studying this close. There are lots of moving parts. One school closing has a lot of implications. We are looking at what our options are. Should we close, there are challenges for parents and employees. Our principal concern is for seniors and juniors. What would we provide? We are cancelling large events and activities of 250 or more. We are following council from Dr. McMahan and Mary Hess. We will be respectful and mindful of these decisions.”

Dr. Dykstra said, “Has it been discussed that educating children about COVID-19 will lead to education of parents? This is a great way to get word out.”

Charles said, “We took steps yesterday to do this. We shared all of this with staff and principals. Teachers will share this information as well. It is also critical that nurses share this information as well. Parents who work for us also have kids in school. They share information as well.”

Dr. Dykstra asked, “If our board recommended it –could you educate every student every day about COVID-19? Would you be open to that? Kids are scared. Would they be able to learn about that every day?”

Charles Cammack replied, “What is taught must be age appropriate. We don’t want to panic people or kids. That’s serious.”

Patti Hays asked how the schools meet summer time nutritional needs of students. “Are those mass gatherings? How are we going to do that?”

Dr. McMahan replied there was a meeting scheduled next week to look at that. “What does that look like? That is not going to look like it used to,” she said.

Dr. Phil Downs asked to comment on some of Dr. Cameron’s suggestions.

“Keeping kids in one classroom is not going to be practical-- if they have to be six feet apart. There is not enough space. Many buses have 2-3 students in a seat. Routes are full. If you consider these ideas: this is a surprise. The idea of no recess – that is a pressure release valve. We need to vet all of these,” he said.

Large Venues

Speakers

Randy Brown – Coliseum, Dan O’Connell – Visit Fort Wayne, Kelly Updike- Embassy Theater, Bart Shaw – Grand Wayne, Susan Mendenhall– Arts United, and Michael Franke – Komets (Fort Wayne Civic Theater, Clyde Theater represented but did not speak.)

Randy Brown said there is large group consortium in Fort Wayne that could share and educate other venues on the how to implement best practices. “First and foremost, is the health and safety of our guests and employees. We are in step with you. We have a national event coming soon to the coliseum. We ask for a reasonable time period that we can roll out anything you require of us. We want to help educate the public and have as safe as environment as possible for the hospitality-tourism industry.”

Dan O’Connell said many clients are taking cancellations because of concern for everyone. “We are taking this seriously. Many are looking to CDC guidance. They want guidance from Local Health Department sooner rather than later. They want to know what situation is. We are a conduit of information for clients and visitors. We need reasonable amount of time to impellent anything.”

Dr. Pond asked, “What is a good time frame?” Dan replied, “Forty-eight hours. Many people are concerned about this weekend and next weekend.” “Are there cancellation fees?” asked Dr. Pond.

Randy Brown replied, “We are giving our guests the opportunity to cancel without penalty. Almost 50 percent of events have cancelled. The alpaca event is no longer open to public.”

Dan O’Connell asked the board, “Hosting 250 people doesn’t apply to a lot of our venues. Maybe a couple of events. What about those groups?” Dr. McMahan said, “We want our board to weigh in on this.”

Kelly Updike said, “We have about 55 conventions a year that vary in size from 250-1000 people. We are mostly in that smaller range.”

Michael Franke, Komets, said, “We are doing a lot of things in precautionary manner. Hundreds of fans came to last night’s game and asked, Could we sign a waiver to come to future games? We will do whatever we are told to do. I traveled a lot recently. Airports are full. As a person who was diagnosed with a serious illness years ago, I should be one of the people who are most concerned. I also know as my physician told me- You have to live life. That is what I am doing. That is what I hope this board will do.”

Dr. Dykstra asked Randy Brown, “If distance was a restriction – could guests come? But they have to sit every other seat?” Randy Brown replied, “That would vary on event. We change the set up for every event. We would comply the best that we can.” Michael Franke said, “If we

could arrange social distancing we would do it. That would take staffing – yes it would. Maybe a much smaller group of people would attend an event.”

Dr. Cameron asked Mindy Waldron, “What would one exposure mean for the Department of Health?”

Mindy replied, “For one case we reach out to a number of people: where the person works, where they have been, their family contacts, everywhere they have been. This contact investigation spider webs out and determines if each contact is at low risk or if they need to be quarantined. If you multiply that by a number of cases—well we are staffed to do a few. But we still have the TB folks and all of the other 80 reportable diseases we need to follow. We would be overwhelmed.”

Dr. Cameron asked Dr. McMahan, “What is the time it takes for someone to be exposed to the virus? “Five minutes,” said Dr. McMahan. She continued, “This virus – there are a certain amount of people with asymptomatic transmission. You can feel well and go to an event and still be transmitting the disease. “

Dr. Dykstra said, “We don’t want to close everyone down if we don’t have to. We want to be open to other options.”

Susan Medenhall said, “From the arts and cultural perspective we value your guidance. We want to protect the health of all we serve and our families. If we could know how long a reduction might need to take- that would be very helpful- 14 or 28 days – that is very important information. “

Eating establishments

Speaker

James Khan- Baker Street, The Hoppy Gnome, Gnometown Brewing Co., Proxiomo.

James said, “First of all my prayers are with you. What you have to do is extremely important. This decision affects people in many ways. If you go too far – you are villains. If you don’t go far enough – you are still villains.”

He continued, “I represent an industry that is a large part of the community. Based on how we define mass gatherings of 250 people– how we clarify what that means, makes a difference. We can’t social distance patrons. That is so difficult. The economy should not super seed our health system. But we also have to consider what is extreme. Our margins are very tight. It could be that for a two- week closure we could not recover.”

James said, “We have roughly 11 million in revenue every year and our expenses are over 10 million a year. We are always running on tight margins. Most of that revenue comes in a six hours a week from Friday and Saturday night from 6-9 p.m. It relies on our ability to have a mass amount of people in a small amount of time.”

Dr. Pond asked, "Is there a way to get the food to people who come and stay separated from patrons?" Dr. McMahan added, "Could something look different?"

James said, "We have already started looking at doing that. Again you are in my prayers and I want to stress please consider the long term consequences of what we define. Mass gathering of 200 people -- Is that 50 people in different groups of 4? So do we have to break the up? Baker Street is 95 percent reservations driven. We can plan for that. Hoppy Gnome -- 80 percent of our business is not from reservations."

Patti Hays asked, "Is there restaurant insurance for something like this?" James said, "We have the most amount of insurance possible. My agent is investigating to see if this includes as act of god. Not sure about pandemics. I don't know if this is an act of god or poor hygiene."

Dr. Pond asked, "Is it better to close entirely or issue restrictions of social distancing?" James said, "With social distancing, we could sustain business. A three month shut down would mean 1.8 million dollars is not going to employees. That's an average 30 thousand per employee."

Dr. McMahan said, "We need to think about this. I am glad you raised those questions. If our overall goal is to keep health care standing. Early implementation is important. We do know this needs to be early -- and robust. Could we phase this in? Does your threshold change? At some point we may have to say go home. Can we agree? Phasing this in is an overall goal. Number one is health care. Number two is to keep you open." James said, "Healthcare is number one."

Dr. Cameron said, "What we have seen in other countries. This has to happen before we overwhelm the system." James said, "In our industry, I feel we are strictly regulated. We are constantly taking measures to make sure we are not passing illness. We are in a good position to do this. We have a good guidelines already based on public health regulations." Dr. McMahan replied, "Although adherence to guidelines is good, this is a case with a novel virus and there is no herd immunity. All patrons would be vulnerable."

Dr. Pond thanked James for coming to speak and said, "You are very articulate. We want to work with you."

Government

Speakers

Allen County Commissioner Nelson Peters

Beth Dlug, Director of Elections for Allen County

Commissioner Peters said, "This is not day for platitudes but the Department of Health staff have been working tirelessly to try and create order to a very chaotic situation. I was just on a

call with the CDC and elected officials. I was heartened to hear the questions that were being asked-- we have been already answering. We are treading uncharted water and one of the best things we can do is assure others there are solutions to this situation. We need to be patient. Tomorrow is not going to look like today. There may be some inconveniences. We will continue to support the Department of Health and their efforts and decisions from this board. Thank you for your effort."

Commissioner Peters continued, "We are doing good things. Solutions are being driven by this group. Part of our counsel is -tomorrow won't look like today does. How we do business is an interesting situation to address. What can we do to be helpful? How are we going to respond as a community? Every company operation has begun to develop a micro plan. We continue to ensure people deal with this so people can be served. "

Beth Dlug said Election Day is May 5. In person satellite voting begins April 7. High risk people are encouraged to vote by mail. She said, "There is strategic timing to all of this. Some other states have had their elections. We are right in the middle. They don't cancel federal elections."

Dr. McMahan asked, "Is drive through voting allowed?" Beth said, "There are no statues in place that would allow this. We are in uncharted territory. We are committed to working with Department of Health and the Secretary of State's office to do whatever we can. We can't postpone elections. It is hard to postpone. There are June conventions and a series of things that happen."

Dr. Pond asked, "Is Social Distancing possible? Is Hand Sanitizer available when voting?"

Beth said, "Yes. We are thinking about all of this and asking what we can do? 80,000 show up in May 5th primary. Depending what is going on – I certainly would not want participation to go down. Anyone who can should mail a ballot."

Dr. Pond said, "Thank you so much for giving questions and answers. We ask others to do that well."

Faith Based Community

Speakers

Roger Reece -Associated Churches, Wallace Butts- Love Church Ministries
(Fort Wayne-South Bend Dioceses, represented but did not speak)

Roger said, "Pastors are concerned about Sunday morning gathering and worship. We have been meeting in groups to push information out about social distancing. We are beginning to apply these practices. It is certainly going to be difficult. Pastors are not ready to close at this point. They understand they will need places to mourn and care for the congregants. We must also have other ideas like utilizing streaming as much possible. We are also forming teams. Each parish congregation wants to assist health care workers with what might be helpful. We are mindful and prayerful."

Roger said on the other side of this Associated Churches, Community Harvest and other food banks have been in communication and are looking at what drive through distribution might look like. “Community Harvest is going towards that – which means a whole lot of other problems. Associated Churches will be advising clients and volunteers about social distancing. Drive thru may not be appropriate. So we actually have a lot of families we are trying to figure out how best to serve,” he said.

Wallace Butts said, “I am a little bit biased. We have a large event tomorrow--a fund raiser for our causes which covers a large part of budget. Not just for my organization but others – limiting gatherings has a huge effect on that. Grocery stores can have a lot more people. Isn’t there a lot more opportunity for passing? What makes a smaller venue so scary?”

Dr. Pond said, “My wife orders on line so I can’t answer that.” Wallace said, “A lot of people can’t do that. The indigent population are disconnected.”

Dr. Pond asked, “Can we rely on Faith Based community to come up with a way to social distance from each other so that would also meet the needs of your organization? We want you to continue to do this – so we can also continue with ours. “

Dr. McMahan said, “In a grocery store people are moving. But that may look different in a bit.”

Dr. McMahan said, “What if we came up with a letter that explains how transmission occurs in 5 minutes or less to anyone who is spaced less than 6 feet from someone is at risk? We could write a letter and you could send it to your donors so they understand what is happening. For a fundraiser – I would be happy to make a letter to explain this.”

Wallace said, “Thank you for what you are doing. I know how hard you are working and we want to be a part of the solution. Dr. McMahan has been proactive. We already made a list to send out to groups.”

Smaller Venues

Caleb Kimmel, World Baseball Academy

(Business Weekly – Country Winery – represented but did not speak)

Caleb Kimmel said, “I represent a smaller venue –the World Baseball Academy. Thank you for leadership. Health is more important than anything. Can we get more guidance on what the number of 250 means? Is this per square feet? Specific criteria would be very helpful.” He went on to explain that they often have participants spread out over a large area. Knowing how to plan for that would be helpful.

Public Comment

Speakers – Bob Ash

Mike Mushett- CEO of Turnstone

Bob Ash said he was a concerned citizen whose wife is currently in a long term nursing facility. He said he was concerned about the workers going into these facilities. He wanted to know if their personal items were sanitized on entry to the facility. “How do we know these things are being done?” he asked.

Deb Lambert explained that long term care institutions are licensed and are getting a lot of guidance in this area. And to address questions about staff –she said the vast majority of these facilities have guidelines for employees. She said there is protocol for making sure employees are clean and personal protective equipment is used. “We have protocol. Fort Wayne is very blessed. Most nursing homes are a part of a preparedness group. We are getting a lot of information to them and making sure they learn all of this.”

Mike Mushett, CEO of Turnstone, said “Saturday night is our second largest fundraiser of the year. We need time to implement any restrictions. We recognize health is Number one – we look to you for guidance.”

Board Discussion

Dr. McMahan said, “As a reminder this is not a flu virus. There are 370,000 people in Allen County. There is asymptomatic spread. There is a mortality rate is 23 times higher than the flu. You have no vaccine – you have no treatment. This is the first non-influenza pandemic that we have had. I am trying to make sure you understand why we are doing this. This is different. I understand everything that is said today. Early intervention works.”

Dr. Dykstra asked, “How long does it take to get test results?”

Erika replied, “State run tests have about a 24 hour turn around. Private tests could take 3-5 business days.”

Schools

Dr. Pond said, “Schools – what do want to do?”

Mary Hess said, “I would like some more information if we should take a tiered response? Are those things that we know will help? Or do we just need to say – we just need to do this quickly? “

Mindy commented that the schools have not had time to deliberate. “Can we gather group together to talk about this?” she asked. Dr. Cameron asked “Can they gather tomorrow? Will they be able to give detailed plan in terms of how that will be rolled out?”

Mary Hess said, "That's one part of problem. It is a practical problem too. Sometimes things are not possible."

Patti Hays said, "High School students can't stay in the same room. This decision has actual implications – I am willing to work over the weekend. We have seen a growth and that will change by Monday. Hesitating one day – changes 40 percent of contacts. This is a hard decision. I struggle with pushing it out."

Dr. McMahan asked, "Do you want to wait for a case to close? Or do we pull the trigger and have a closure?" Mary Hess said, "Some ideas could already be implemented."

Dr. Cameron said, "In an ideal situation. We would close."

Mary Hess said, "We need some additional guidance. We are already looking into things like distributing lunch. We don't want to close if we don't have to. There is price to pay for closing. There is a price to pay for these decisions. For instance - All those who will go without pay."

Dab Lambert said, "Someone will be watching these kids. Are we going to expose those older folks caring for the children? A lot of people don't have friends and family to do this. They will lose their jobs."

Dr. Pond said, "99.8 of children survive this. Would it be reasonable to continue a working group over weekend and ask them to come up with guidance? Or say if over 50 percent of schools in state close – than we should too? If we have multiple cases in schools in Allen County then these are triggers – then we should close?"

Patti Hays asked, "How many tests do we have? Are kids being tested? I would love to over react. Or our recommendation is extreme. Do we take the coliseum and covert it with cots?"

Dr. McMahan said, "That won't work. They have to be hospitalized."

Dr. Cameron said, "Could we make this suggestion by Sunday night?"

Dr. Dykstra said, "We can't test everyone."

Dr. Pond said, "Would it be reasonable to continue to have a working group and ask by Sunday morning that the group makes recommendations? Including how to serve lunches and handle no recess- if that is possible? Educators – if they stay open they will do it under these guidelines? And then do we say if we have three students or teacher cases in schools then all schools will close, if 50 percent of schools close in state – we close."

Motion passed (6-1). Pond, Dykstra, Sobol, Cameron, Hess, and Lambert voted yes. Patti Hays voted no

Deb Lambert said, "We need concrete recommendations."

Dr. Pond said, "I agree completely. By Saturday evening we will get a list of things for them to consider. "

Dr. Pond asked, "When will we relax conditions?" Dr. Pond asked Dr. Stienecker, "Where should we be on the curve when we relax conditions?"

Dr. Stienecker said, "We have to look at other communities to see what is expected. Then we will know what works and what doesn't. "

Dr. Pond said, "Is 2-4 incubation periods reasonable?" Dr. Stienecker said, "Yes."

Dr. Pond asked, "Are we in consensus that in 2-4 incubation periods we reevaluate? Determine if new restrictions are needed or if we relax them?"

Laura Maser asked "For all restrictions?"

Dr. Pond said, "Yes every restriction would be reevaluated."

Laura Maser said, "So in 28 days we would meet to see what restrictions would be relaxed and what would not? Would schools be separate?"

Dr. Pond said, "Yes - at that point we could change restrictions."

Dr. Pond asked for the board to vote on meeting in 28 days to reevaluate restrictions. Motion passed MPU.

Non-Essential Travel

Laura Maser commented on the Health Commissioner's legal ability to limit non-essential travel. She said, "The public health authority has authority to do a lot of things. No true reference to business, inter-community travel. Types of things made within various entities. Dr. McMahan does not have broad authority to limit travel. "

Patti Hays asked, "Can we give her recommendations?" Laura Maser replied yes.

Dr. Pond said, "We recommend avoiding non-essential travel."

Dr. Dykstra said, "Do we need to say what that is? Any area that is considered at risk?"

Patti Hays said, "We suggest you don't go to spring break? Cook at home. Unless you really have to do it – you should not be out and about?"

Dr. Dykstra said, "That's more specific than I thought."

Patti Hays said, "You need to be specific. Someone might not be treated for a heart attack because someone else was in the ICU bed. You cannot be isolated. Your decisions impact the entire community. You are putting everyone else at risk. "

Dr. Pond said, "It is our recommendation then to avoid non-essential travel."

Dr. Pond said, "So our recommendation is non-essential travel be eliminated?"

Deb Lambert asked, "Should we have business travelers self-isolate when they return?"

Patti Hays added, "Isolate for 14 days?"

Dr. Stienecker said, "Some people have no symptoms."

Dr. Pond said, "So we are recommending all non- essential travel be delayed."

Dr. Dykstra said, "I think we should be more specific. Non-essential travel is strongly discouraged."

Venue Closings or Restrictions

Dr. Pond asked the board if we could rely on the faith working group to come up with suggestions for places of worship. "Can we have a specific recommendations for size of venue and number of people in the next 72 hours?"

Dr. Pond asked the board to consider any recommendations for Elections. "We want to make sure we are working with them to make sure elections go off on time," he said.

Patti Hays said, "We need larger venues and no nursing homes as venues."

Dr. Cameron asked, "Are we able to get more machines? "

Mindy Waldron asked, "Or are we able to vote outside?"

Beth DeLug replied, "We can extend hours, and add more machines. I also need people to work machines. Most workers are elderly." Dr. Pond said, "We will not micro manage that."

Deb Lambert asked, "Can we define what a mass gathering is?"

Dr. Pond asked the board to consider venue size- Not only limits on how many people in a group but what limits should be placed on the physical size of a location.

Dr. McMahan said, "Let's limit this to 50."

Dr. Stienecker said, "There is no judgement or guidance from other places – nothing to present. I have no date on this." Dr. Cameron said, "So we close everything, or use a number?"

Deb Lambert said, "Should we say 250 within one square acer?"

Laura Maser said, "You need to give thought to saying just 250 people, even within a certain area. There are many different concerns here."

Dr. Pond asked the board members for recommendations on a number gathering should be limited to. Ted Sobol said 250. Dr. Cameron said 50. Patti Hays – said 50.

Patti Hays said, “There is merit of people having discussion on this. These are variables that we need to discuss this?” Dr. Pond replied “How long can we wait to do this?”

Deb Lambert asked, “Can we put limits on a percentage of people? Say 50 percent of fire marshal recommendations?”

Dr. Dykstra said, “These are events. We are not closing buildings.”

Dr. Pond said, “The easiest thing is to stop it. We want them to continue to operate.”

Dr. Dykstra said, “Do we need a number? I can’t tell you one from the other. Less is more. We could talk different situations forever.”

Dr. Cameron said, “One exposure, in one establishment means the department of health has to do a contact investigation. You are pushing their limits event more.”

Mindy Waldron said, “This is the biggest decision you are going to make. Are we that rushed? Can we invest a little more time and discuss what this is about? Can we quantify this more? What you decide, scares me. We have to police what we say.”

Dr. Pond asked, “Can we meet Monday evening again to discuss more?”

Dr. McMahan said, “We need to move quickly.”

Dr. Pond said, “All issues are reasonable. We need to look at each one.”

Dr Stienecker added, “Indiana has a handful of cases right now and five people of interest. Now that we have begun to more broadly order tests – you have this time to deliberate.”

Dr. Pond said, “We need to meet then on Monday. And deliberate more?”

Deb Lambert said she would like to issue a long term care facility decision for visitor restrictions. She would like the board to issue specific guidance for long term care facilities.

Deb said, “Our community shut down all visitations already. We do have a separate door for entry doors for anyone who is passing- so their family can be with them.”

Dr. Pond said the board will need specific recommendations to vote on Monday.

Dr. McMahan said, “Any recommendations? Don’t go to the nursing home. Don’t go. Fully explain that.”

Dr. McMahan asked if the board could convene a list of what it is needed to do before Monday’s meeting.

Dan O'Connell asked if the board if they could please issue a hard number on capacity and size of venue at Monday's meeting.

Dr. Pond asked groups who still wanted to comment to please put comments in writing and send them to Mindy Waldron.

The board made plans to meet on Monday, March 23 at 5:45 p.m.

Meeting concluded at 4:06 p.m.

Respectfully Submitted,

Matthew Sutter, MD
Health Commissioner

William Pond, MD
Board President