1. **ADMINISTRATIVE BUSINESS**

   Called to order 0820

   1.1 Roll Call

   1.2 Approval of the Minutes

      None to address. Please see latter PSH meeting of the day.

2. **PUBLIC COMMENT ON ITEMS NOT ON THE AGENDA**

   None seen

3. **COMMITTEE BUSINESS**

   3.1 **CoVid 19 Virus Presentation – Missoula Public City-County Health Department**

      Ellen Leahy, the Health Officer for the City/County Health Department, also is serving as the liaison officer to incident commend in response to the new Coronavirus, which is being called COVID-19. Ellen noted the transition of the name of the virus; COVID-19 is the newest one. She mentioned that you will see present at the meeting some members of our community-wide stakeholder group, and would like to thank the council for this forum as an opportunity to address the public. Superintendent of Missoula County Public Schools (MCPS) Rob Watson is also here and available for questions. Ellen noted that hospitals, the University, nursing homes, EMS services, CEOs of large local companies, etc. are all part of the stake holder group.

      Ellen introduced Cindy Farr, who is regularly the Health Promotions Officer. Cindy oversees infectious disease and is serving as the incident commander for this COVID-19 response. And Adrienne Beck who is the head of the Office of Emergency Management is also present.

      Ellen turned the meeting over to Cindy who expressed that the reason for being here today is to discuss what they are seeing, the status of the virus and the current response and what you [the public] can do to protect yourself. There are no current cases in Missoula or in Montana, but they are preparing as it is not a matter of "if" it comes to
Montana, but "when". As everyone knows, there is a large spike in Washington State. Montana now has the ability to test in the state level, but on a very limited capacity. Any testing that gets done has to come through the healthcare provider who then contacts the Health Department who consults with them on patient history, symptoms, and travel. From there the Health Department then evaluates that information to see if they are a good candidate for testing. If they test people who have not had other diseases ruled out, they will run out of re-agent and not have the ability to test the people who need to be tested.

Cindy stated that the people should know that those surgical masks and N95 masks are not going to protect you [the public] from this virus. They should only be used by those already experiencing symptoms of a respiratory illness to prevent you from spreading the illness to someone else. Cindy noted that wearing the mask may potentially increase your risk of getting a disease. The virus is spread by droplets from coughing or sneezing. When if those particulates land on a mask you may be using, each time you reapply the mask, you are re-exposing yourself to those germs. The purchasing of masks by those not in need of them is also limiting the supply for EMS and infected patients who do need them. Similar to the flu and other respiratory illnesses if you are not already infected, please refrain from purchasing or using a mask. There is some discussion and perhaps disagreement within the medical community that the disease can be spread through airborne pathogens.

Once exposed, the incubation period for the virus is 2-14 days before you start exhibiting symptoms. It is believed that symptoms last for 2 weeks to 1 month. The vast majority of subjects who are experiencing the disease are not experiencing really bad outcomes. The exception to that is to those who are over 60 years of age and/or those who have other respiratory conditions. The higher number of deaths in WA state is due to an outbreak in a nursing home.

Cindy asked if there were any questions on that part before moving on. Heidi West asked - just for comparison - is there any idea what the idea of the mortality rate is next to the common flu? Cindy added a caveat to this answer that any information we have is coming from China, who has a different healthcare system then we have here in America, so here in the US, it may look different. Right now they believe the mortality rate is somewhere between .5% - 2.5% of those infected. Compared to the fatality rate of the common flu, this is about 10 times higher.

Cindy noted that precautions they are wanting people to take are exactly the same as for the common flu. Wash you hands frequently with soap and water for 20 seconds. Try to avoid touching your face. This virus can live on surfaces for several days. So if you have surfaces that are touched a lot (like door knobs), disinfect those frequently. Cover your cough. If you are sick, stay home. Do not come to work, do not send you kids to school.

In the Health Department one thing they are doing - they have set up the Incident Command Structure or ICS. The ICS officer is Alicia Johnson, she will filter all information from the media to the right people. The number is 258-INFO (4636) which is staffed by live people Monday-Friday from 8 am-5 pm. Information is also being updated on their website: missoula.co/cviruses.
can be done through that center and the Health Department will be monitoring the calls after hours and will staff later times and weekend times if needed. It was established very quickly and will expand if necessary.

Cindy turned the meeting over to Adrienne Beck, the Director of the Office of Emergency Management (DES), to discuss how they are coordinating with community partners. Adrienne first noted that the Health Department is in charge of the COVID-19 issues and they will be taking the lead on determining how to respond - they will know who to contact and who the key stakeholders are to be informed and involved in making decisions to best handle the virus on a local level. DES’s role in this is to first provide the framework for the ICS to ensure they have the resources they need to make their goal successful. Providing the call center and then identify the people that need to provide information and get information from that center. The second main goal is to work with the Health Department to ensure that the stakeholders (those overseeing a lot of employees or those likely to be exposed or at highest risk), those with a role to play, those with decisions to make, that they have a voice to make the best decisions possible.

Cindy requested that the public help them by notifying the Health Department if they have traveled to the following countries in the last 14 days: China, Japan, Iran, S. Korea and Italy. Please contact the Health Department so they can assist you by letting you know what you can do to monitor yourself for symptoms and which of those that you should be watching out for. Julie Merritt asked if they should contact them on the number on the screen? Yes they can (406-258-INFO). Sandra Vasecka asked what symptoms should people be looking out for? Cindy noted that runny nose, cough, a low-grade fever, chills, mostly lower respiratory symptoms; especially deep hacking and typically a non-productive cough and a fever over 104 - though the fever does not always present. The big difference between the cold and flu is that those are upper respiratory illnesses, but COVID-19 is more of a lower respiratory virus. A key symptom, Ellen noted, is shortness of breath, which may present itself prior to any other symptom.

Bryan von Lossberg noted the ICS and the coordination around all the agencies thought it would be good to highlight some of those partners. He noted many of those that were present at last evening’s meeting with stakeholders including U of M President Bodnar, Mayor Engen, Superintendent Watson, hospital directors, etc. Also those efforts also include wrapping in Mountain Line, the assisted living centers. He noted Ellen’s comment that “this isn’t anyone’s first rodeo so to speak”. Could you speak to those partners and the fact that the infrastructure is in place to respond to this? Ellen noted that they have a long standing advisory team in place that we meet with hospitals at least quarterly face-to-face to discuss how we are prepared, even if there is nothing going on, and how can the Heath Department be of assistance. What they do that has been underway since becoming aware of the virus is frequently holding Health Advisory Assessment Team (HEAT) meetings. Cindy stated that there are various HEAT teleconference meetings set up to discuss with various parties and entities. There is a larger sphere of people including schools, various conferences for various parties; long-term communication with all the stakeholders in the community.

Mirtha Becerra expressed thanks to the presenters for all this information. She had heard that children are more immune to this virus - and less likely to contract it? She asked presenters to address that it isn’t affecting them as much? Do the schools have a system in place? Mirtha also asked where the closest testing facility is, she had heard that the
response time to confirm a case was a concern? Cindy noted (again primarily with info largely coming from China) that this is affecting older people much more severely than children. It is presently unknown if that is due to not as severe symptoms that just aren’t being reported or if they are not contracting it at all. It is very clear that is much less present in children. Cindy noted that the state lab in Helena is the closest testing facility. If they have someone who needs to be tested, they will first consult with the provider and DPHHS and obtain a sample, the courier picks it up and it is sent to the state lab, then run it and we would have results within 24 hours. That is considered a "presumptive positive" result from the state lab and from there it will be sent for additional testing to the CDC for a confirmed positive. It will be treated as positive if it is a presumptive positive from our lab. Ellen stated that this is not a screening test, it is a diagnostic tool and many things would need to be ruled out first. Ellen also advised: when you present any respiratory symptoms to a provider, and you suspect it is contracted from travel, please call your them ahead of your visit so they can best prepare for you. They want to be prepared before you walk in. The general precaution is to then use the provided masks and hand sanitizer while visiting the health care provider's office.

Heidi West noted that healthcare provider system in the US is a tiered system. If you think you have been exposed and you don’t have health care, who is going to pay for the testing? The Testing does not have a cost at this point. It will be similar to other outbreaks; if you don’t have a provider or health care, please call the Health Department and they can help get into Partnership health, an FQHC on a sliding fee scale, or they can help get you into other needed local services.

Gwen Jones asked based on prior viruses like H1N1, etc. is there any timeline of when we might see this locally? Are we looking at 1-2 months or when we see it escalate to when we see it descending? Ellen stated that it isn't something that can be answered at this time. Learning how fast it was spreading on the West Coast of the US was a trigger for the Health Department to activate their current plans. It is fairly contagious. The Health Department is currently preparing and looking for its presence locally. Cindy noted that there are 12 manufacturers that are working to develop a vaccine. H1N1 went on for 1.5 years. They have no idea if it can sweep through and go away or if it is going to continue to go around. Ellen added that spikes are expected in any respiratory disease. There is a bit more concern about the longer incubation period then there is with the fly and that it is already out there but not presenting itself yet.

Amber Sherrill noted that MCPS goes on spring break in about a week and asked if there are any suggestions around this max exodus and a lot of travel. How do you see these things coming back in after people leave and then come back in? Cindy quoted a common saying that "the next outbreak is only a plane ride away." There are definitely concerns about it. She strongly advised that people think about whether or not it is worth taking that trip to spring break. Non-essential travel to other countries is something you should really consider not doing. Part of the reason we say that is not because of what's going to happen here, but you aren't sure what's happening there either. Given how fast news are spreading and that there is no local control over how other countries are handling this virus. Take all travel into serious consideration at the moment. Ellen added there are no travel restrictions at this moment, but the recommendations for those 5 countries are in effect. You will be in someone else’s jurisdiction, different rules, different ways that the apply isolation or quarantine and you will be required to abide by those rules. The cruise ship is a great example of that. Sandra also added that some airlines
are in the process of cancelling flights. Ellen added that you should take the time you have now to think in advance and prepare for and look at what you can do digitally. If you have requirements for attendance in schools, be prepared, or to work. Don't force people to be present among concerns of illness. How can those benefits be applied locally?

MCPS Superintendent Rob Watson was invited at this time to add anything in those regards since he was present. Rob noted that he did not have much else to add, but he does appreciate the community meeting and the partnership with the Health Department and the University and the stakeholders that were present and the input from that meeting; it was well appreciated. MCPS does not work in isolation and any decisions they may will be in conjunction with the Health Department.

Gwen Jones asked Rob about the use of hand sanitizer and cleaners, noting that the supply in Missoula is quite low. Can schools spread the message of washing hands with soap and water, as that is a more effective tool? Rob noted that the schools are focusing on procedures and processes - all schools - to really look at them and the potential of moving barriers to washing hands. When elementary students go to lunch, can they stop at the bathrooms first to wash hands. Watson and his team are looking at the elements needed to put those procedures into play.

Discussion only

4. **ADJOURNMENT**

Thank you to all for being here and for the open communication. We have a great team here. 8:50