



# **Burleigh-Morton COVID-19 Task Force**

## **MEETING SUMMARY**

### **Friday, October 23, 2020**

### **10:00 AM – Microsoft Teams Meeting**

Renae Moch called the meeting to order at 10 AM and welcomed participants.

#### **Presentation of Data/Current Statistics**

- The goal to reduce cases to less than 5% continues. Numbers continue to climb since October 9<sup>th</sup> with Burleigh-Morton (B-M) increasing from 8.64% 14-day rolling average positivity rate to 11.64% while the state increased from 7.5% to 9.81% positivity rate.
- Guiding Metrics as of 10/22/20 as compared to 10/8/20 shows Burleigh's case numbers per 10,000 residents increasing from 63.87 to 81.6 and Morton increasing from 74.4 to 91 placing both in the critical risk level. Testing per 10,000 residents in Burleigh has increased from 84.62 to 108.5 while Morton has increased testing from 82 to 107. The 14-day rolling average percent of positive tests in Burleigh increased from 8.54% to 11.6% and Morton from 8.94% to 11.80%.
- Active cases have increased 59% since 10/9/20. Active positives total 1,417. The age group 30-39 has surpassed the 20-29 group with the largest number of active cases. Those hospitalized due to COVID are 156 with a total history of 1351 cases. 12.15% of staffed beds are available statewide. Burleigh's 74 deaths so far in October have surpassed the total September number.
- B-M risk levels have increased from the yellow, moderate risk, to orange, high risk, level. Protocols were adjusted appropriately lowering group capacity levels from 50% to 25% and cancelling gathering where social distancing cannot be maintained. Face coverings are required. The red critical risk level will be reached if positive cases reach over 15%.

#### **Rapid Point of Care and Saliva Tests – Cody Schulz**

- When kits become available, they will be distributed to areas with over 5% positivity rates with 75% of kits going to long-care facilities, visitors and staff or residents.
- 25% of kits will go to local public health units to use as seen fit and include schools, teachers, childcare facilities, prisons and other areas. A priority will be made for teachers to protect school staff. Plans are currently being made.
- Every state is getting allocations according to population. 150 million total kits. 100 million to states and 50 million set aside for high priority areas of positivity rates, natural disaster areas and long-term care facilities.
- Kits are nasal swabs that show results in 15-minutes and recommended for symptomatic individuals to supplement current testing rather than replacing it.
- State IT department is updating testing for records and notifications for keeping recorded metrics and to be completed by end of next week.

#### **Contact Tracing/Testing Update – Erin Ourada:**

- Was a back-log due to increase in daily positives.
- Focused on notifications over contact tracing due to staffing limitations.

- Close contacts will again be traced when IT data upgrades are completed allowing staff to continue contact tracing.
- Schools/Universities, hospitals and Long-Term Care facilities are exempt from gap in contact tracing.
- Concerns with extending the gap in contact-tracing were voiced. Currently any close contact would have to ask the person with an active case to release a letter regarding their COVID-19 status if proof of tracing was desired.
- Burleigh testing sites and times have been adjusted due to weather. NDDOH outdoor testing sites at Burlington Dr. location cancelled.
- Monday, October 26 at the Bismarck Event Center. Extended testing time offered with assistance from NDDOH (9 AM-2 PM)
- NDDOH is working with Bismarck Event Center to continue with testing event on Mondays and Fridays. Coordination is in progress.

**Updated from Schools/Colleges/Universities:**

- Representatives for BPS, MPS, BSC, UMARY AND UTTC reported.

**Business Community Update – Brian Ritter:**

- The business community and hospitals have stated their support of a local masking mandate due to continued concern with business staffing issues and hospital availability rates decreasing.
- A consensus of attitudes considered that anti-masking equaled anti-economy.

**Action Items:**

**Last meeting items:**

- Two members connected on mutual subject.
- COVID STOPS HERE campaign information was placed on website.
- Percentage of hospital bed availability trend line item was tabled.

**New items:**

- A motion to change the frequency of meetings to be scheduled by as needed was made by Brian Ritter and seconded by Mayor Bakken. The motion passed when members were asked if any opposed and no member opposed. Future meetings will be called and noticed as needed to provide updates moving forward.

Mayor Bakken thanked all in attendance for the work they have done. He stated that the work is not done and asked all to be on reserve for meeting again if needed.

**Adjourn:**

Meeting adjourned at 11:14 A.M.

Respectfully submitted,

Sandra Bogaczyk for Renae Moch, MBA, FACMPE

Bismarck-Burleigh Public Health Director, Task Force Coordinator

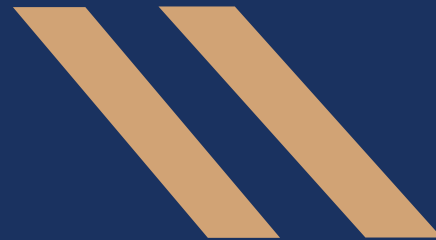
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# **Burleigh-Morton**

## **COVID-19 Task Force Meeting**

### **Friday, October 23, 2020**

### **10:00 AM**



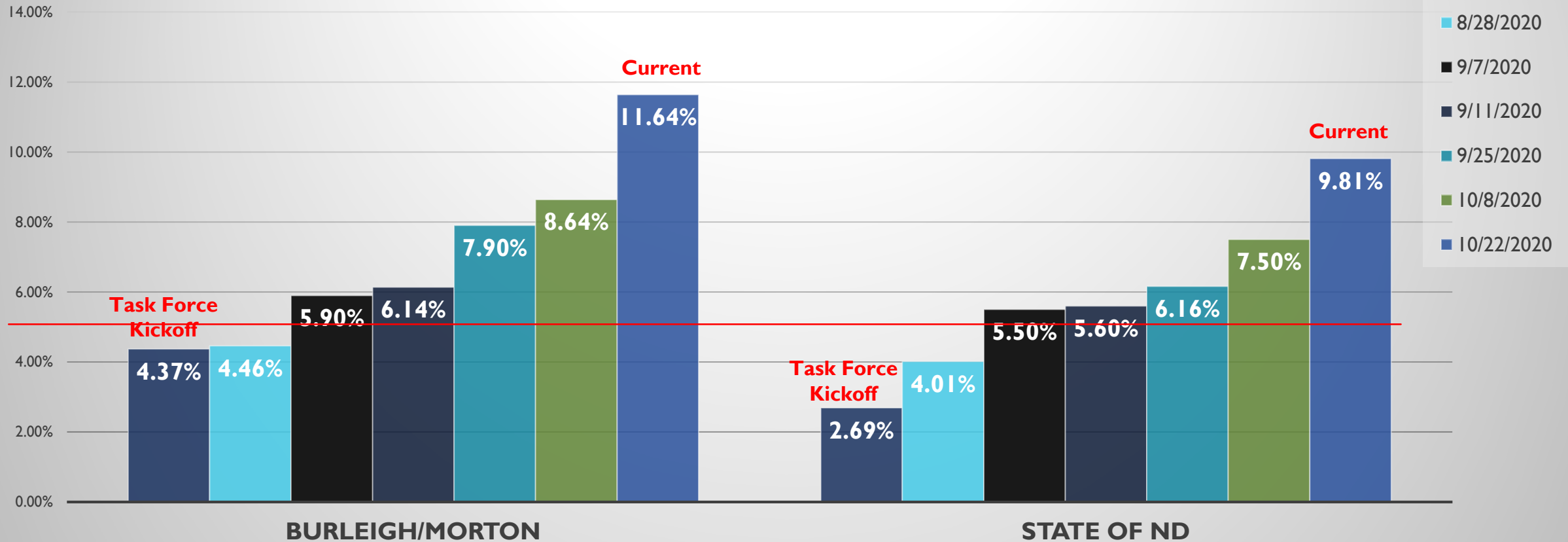
# TODAY'S AGENDA

- **Welcome & Call to Order**
- **Presentation of Data/Current Statistics**
- **Rapid Point of Care & Saliva Tests**
- **Contact Tracing/Testing Update**
- **Updates from Schools/Colleges/Universities**
- **Business Community Update**
- **Action Items**
- **Adjourn**

# TASK FORCE GOAL: PREVENT & MITIGATE COMMUNITY SPREAD OF COVID-19 IN BURLEIGH AND MORTON COUNTIES.

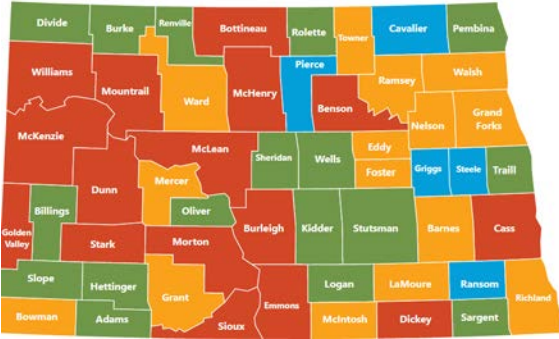
**New Metric:** Decrease Burleigh/Morton County COVID-19, 14-day rolling average % of positive tests to less than 5%.

## 14 DAY ROLLING AVERAGE POSITIVITY RATE





## RISK LEVEL



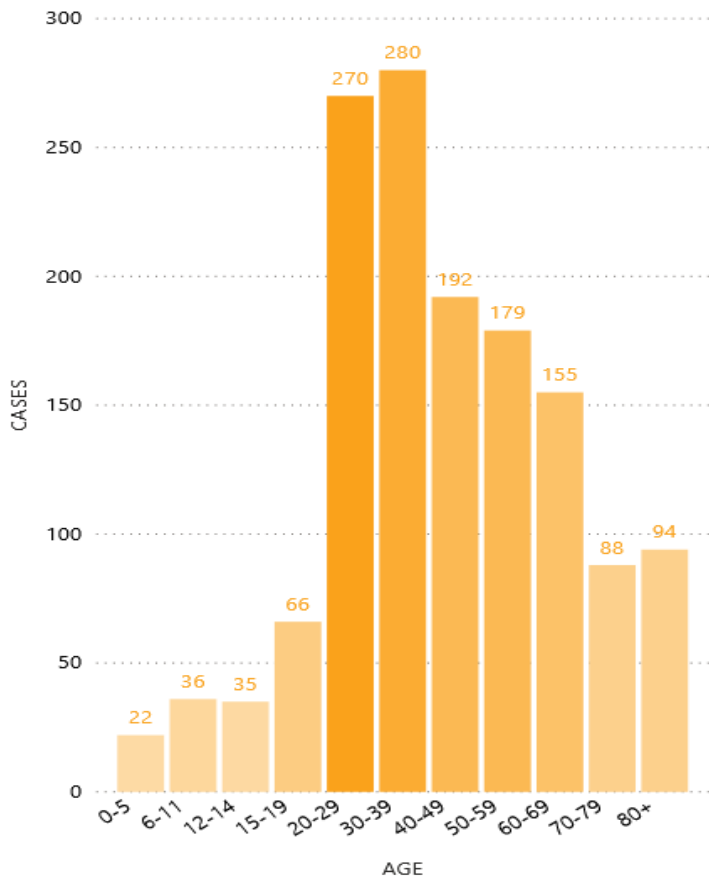
# Guiding Metrics as of 10/22/20

Gating Criteria 14 Day	Critical	High Risk	Moderate Risk	Low Risk	New Normal
<b>Active Cases Per 10,000 Residents (14-day Rolling Average)</b> Avg # of Active Cases last 14 days/County Populations X 10,000	Over 40	30-39	20-29	10-19	Less than 10
<b>10/22/20 = BURLEIGH</b>	<b>81.6</b>	<b>(63.87 on 10.8.20)</b>			
<b>10/22/20 = MORTON</b>	<b>91</b>	<b>(74.4 on 10.08.20)</b>			
<b>Tests/10,000 Residents (14-day Rolling Average)</b> Avg # of Tests last 14 days/County Populations X 10,000	Under 20	21-30	31-40	41-45	46 or more
<b>10/22/20 = BURLEIGH</b>	<b>(84.62 on 10.8.20)</b>				<b>108.5</b>
<b>10/22/20 = MORTON</b>	<b>(82 on 10.8.20)</b>				<b>107</b>
<b>14-day Rolling Average Percent of Positive Tests</b> Sum of Positives for Last 14 days/Total # of Tests	Over 15%	10-14.99%	5-9.99%	2 – 4.99%	Less than 2%
<b>10/22/20 = BURLEIGH</b>	<b>11.60%</b>		<b>(8.54% on 10.8.20)</b>		
<b>10/22/20 = MORTON</b>	<b>11.80%</b>		<b>(8.94% 10.8.20)</b>		

- The ND Health Criteria and health indicator measures will be used to guide decisions regarding county risk levels.
- These measures provide a framework for decision making.
- Additional factors will be taken into consideration to determine the county risk level on a recurring basis which may include: **population density, hospitalization rates, current active cases within a county.**

# BURLEIGH-MORTON ACTIVE POSITIVE CASES

AGE COMPARISON



PRESS FOR ACTIVES

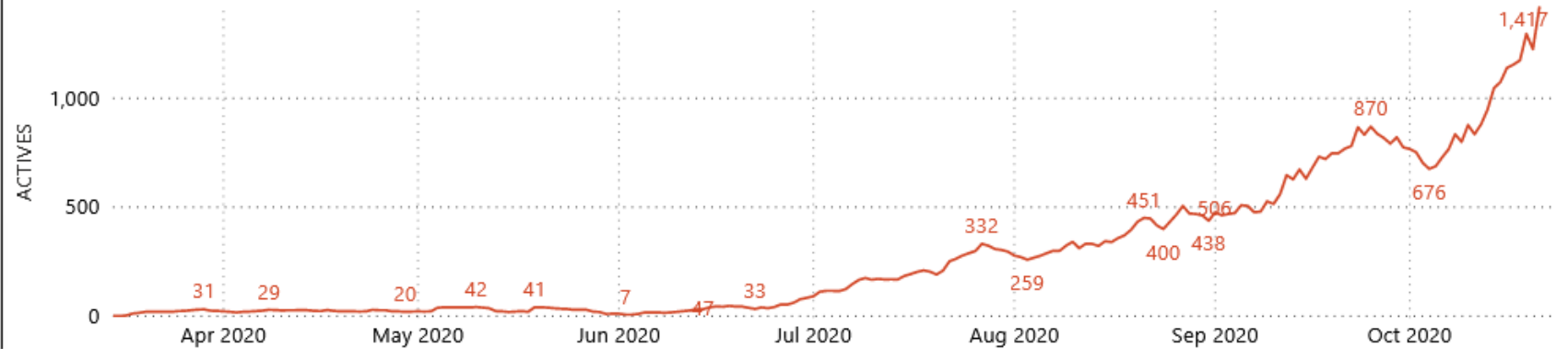
PRESS FOR POSITIVES

Active cases increased by 59% since last meeting 10/9/20.

ACTIVE POSITIVES

1,417

ACTIVE POSITIVES



## HOSPITALIZED DUE TO COVID

➔ Hospitalized **DUE** to COVID includes people who are hospitalized because of COVID.

### CURRENT

TOTAL HOSPITALIZED  
156

NON-ICU  
133

ICU  
23

### CUMULATIVE

TOTAL HOSPITALIZED  
1,351

NON-ICU  
1069

ICU  
282

## HOSPITALIZED WITH COVID

➔ Hospitalized **WITH** COVID includes people who are hospitalized because of COVID plus individuals who are hospitalized for other reasons and test positive for COVID.

### CURRENT

TOTAL HOSPITALIZED  
276

NON-ICU  
238

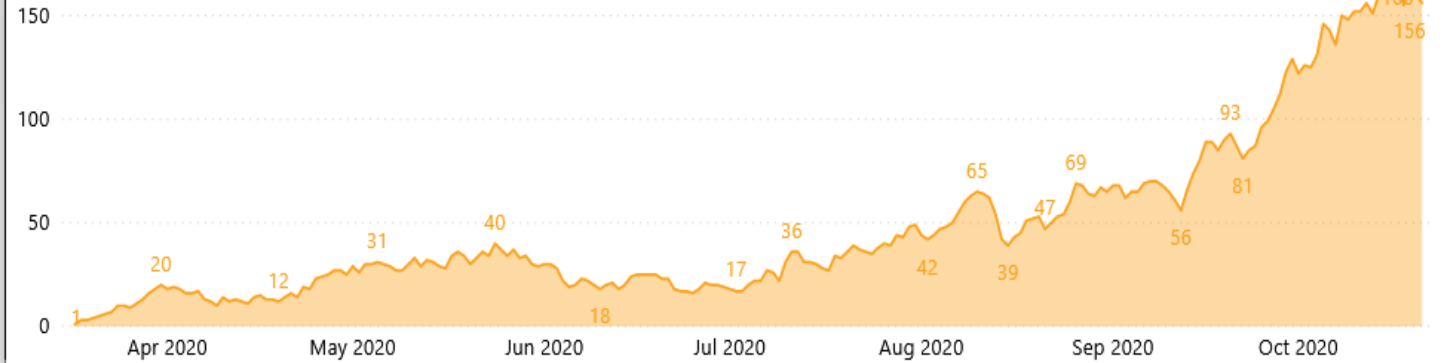
ICU  
38

## STATEWIDE

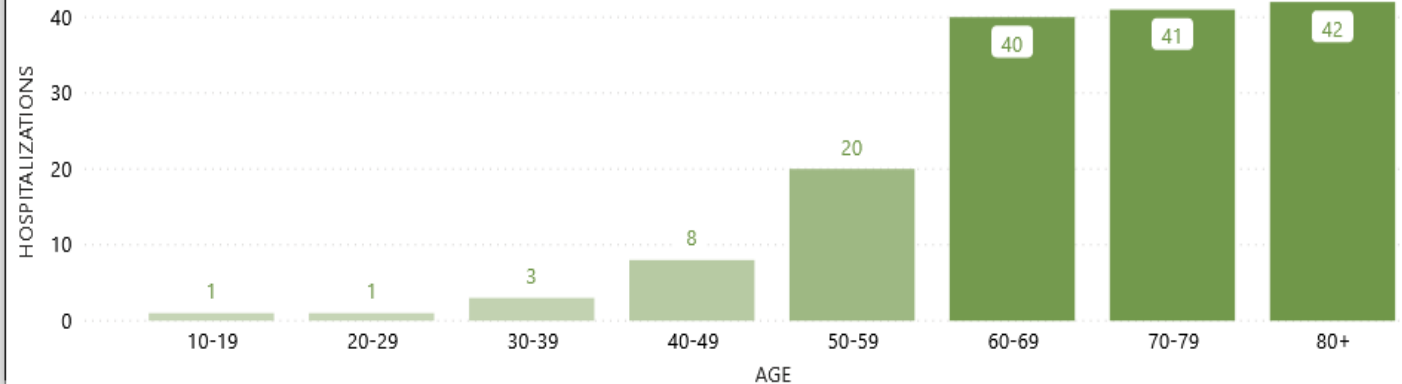
TOTAL STAFFED BEDS  
1,885

% of STAFFED BEDS AVAILABLE  
12.15%

### CURRENTLY HOSPITALIZED DUE TO COVID



### CURRENTLY HOSPITALIZED DUE TO COVID BY AGE





# COLOR CODED HEALTH GUIDANCE

Gating Criteria	Critical Risk Severe Threat to Public Health	High Risk	Moderate Risk	Low Risk	New Normal
<b>Protocols for Risk Levels.</b>	<p>Only essential services open.</p> <p>All other businesses closed.</p> <p>Face coverings required.</p>	<p>25% of capacity with a cap of 50.</p> <p>Cancel gatherings where social distancing cannot be maintained.</p> <p>Face coverings required.</p>	<p>50% of capacity with a cap of 100</p> <p>Maintain social distancing guidelines.</p> <p>Face coverings strongly encouraged.</p>	<p>75% of capacity with a cap of 200</p> <p>Maintain social distancing guidelines.</p> <p>Face coverings strongly encouraged.</p>	<p>Community is open with continued monitoring among high-risk individuals and sources of congregate community spread.</p>
<b>Active Cases Per 10,000 Residents (14-day rolling avg.)</b>	Over 40	30-39	20-29	10-19	Less than 10
<b>Tests/10,000 Residents (14-day rolling avg.)</b>	Under 20	21-30	31-40	41-45	46 or more
<b>14-day Rolling Average Percent of Positive Tests</b>	Over 15%	10-14.99%	5-9.99%	2 – 4.99%	Less than 2%

# RAPID POINT OF CARE & SALIVA TESTS

- Distribution Plan
  - Cody Schulz



# CONTACT TRACING – ERIN OURADA

## To reduce the backlog and shorten notification times:

- Close contacts will no longer be contacted by public health officials; instead, positive individuals will be instructed to self-notify their close contacts and direct them to the NDDoH website, where landing pages will be created with video and written resources explaining the recommended and required actions for both positive patients and close contacts. The exception is contact tracing for health care settings, K-12 schools and university systems which will continue as usual.
- The state is building a process to deliver automated notifications to positive individuals. Currently, the system only delivers automated notifications to individuals with negative test results. Positive patients will still receive a follow-up call from a case investigator after their initial automated notification.

# TESTING – RENAE MOCH

- Due to weather, NDDOH outdoor testing sites at Burlington Dr. location cancelled
- To meet demand, BBPH will host a testing event **Monday, October 26** at the **Bismarck Event Center**. Extended testing time offered with assistance from NDDOH (**9 AM-2 PM**)
- NDDOH is working with Bismarck Event Center to continue with testing event on Mondays and Fridays. Coordination is in progress.
- Changes to Testing Schedules – [Where can I get a test?](#)

# SCHOOLS/COLLEGES/UNIVERSITIES UPDATES

- BPS
- MPS
- BSC
- UMARY
- UTTC

# **BUSINESS COMMUNITY UPDATE**

**Brian Ritter, Bismarck-Mandan Chamber EDC**

# ACTION ITEMS & ADJOURN



- **Action Items from Last Meeting**
- **New Action Items**