EXECUTIVE DAVE SOMERS: Good morning, everyone. So as we look towards reopening, I just wanted to share my perspective a little bit about how far we’ve come and also how much farther we need to go yet. One of the biggest challenges in planning for recovery to COVID-19 is the fact that we don’t really know how long it will last or what might stop it. At the far end of the spectrum of possibilities is the chance of herd immunity and this might occur when enough people have had the disease that it no longer is such a widespread threat. In this scenario, enough people would have developed antibodies from having the disease to prevent the virus from widespread impacts and we can then go back to life as usual. Unfortunately, research has not yet shown whether this virus and our body’s reaction to it will allow for herd immunity. So it’s not a given. This assumes most people get the disease and something that is a threat to our vulnerable populations also. Next best scenario really is the development of a vaccine. In most cases vaccines can take years or decades, really, to develop. Right now there are people working around the clock, as we know, to develop an effective vaccine, we’re very hopeful that one will be coming sooner rather than later. But the major challenge on this front is that even once a vaccine is developed and proven both effective and safe, it must still be manufactured in huge quantities. The best case scenario, but this is at least a year or two away, that's a long time in the life of a virus and an even longer time for the economy to be under such pressure. There have been some encouraging signs for some vaccine developers, but seeing an effect in the laboratory is a long way from seeing an effective vaccine in humans that's widely available.

Another effort taking place simultaneously really is the development of effective and safe treatments. Much like the vaccine development process, finding an effective treatment usually takes years of work. We know that there are some very smart people working hard to see if any existing drugs that are approved for other uses might also be used to treat COVID-19. This would be one of the fastest and most promising paths forward since treatment with an existing drug would make manufacturing much easier and quicker than a vaccine. Though it's still probably at least a year or two away at the very earliest.

In the absence of herd immunity, a vaccine, or an effective treatment, we only have a few tools to help us keep people safe and keep our healthcare system from collapsing and being overwhelmed and that is social distancing. It worked during previous pandemics of this scale and it's being shown to work today. We have flattened the curve. And thanks to everybody in Snohomish County and the state for really incredible efforts along that line. More people are alive today and more people have been spared the disease in Snohomish County because everyone has practiced very good social distancing measures. This is not something that government can dictate without the will and support of our neighbors, friends and family. So again, thank you.

We’re so accustomed to problems being overcome relatively quickly that we sometimes forget how long major medical advances may take. As a biologist I know how tricky this work can be. Infectious nature of polio was identified 1908 but it took more than 45 years for there to be an effective vaccine that was widely available. The first case of AIDS in the U.S. was in 1981 and a vaccine has not yet been developed, but there are very effective treatments. We don't really know yet how the COVID-19 pandemic will end. But we do know that the one effective thing we can do is stay at least six feet away from people who don't live in our household, wear a mask when you are in situations where you may be in close contact, wash and or sanitize your hands frequently and follow all the other recommendations made by our medical professionals.
If you must go out. Be careful, we must still respect the potential impact of COVID-19 on people in our community and our healthcare system, particularly the most vulnerable. But COVID-19 as we know can attack any of us. We’ve flattened the curve, but we have not yet defeated COVID-19. That’s going to take a lot more cooperation from everyone, and some very creative work from researchers, so keep it up Snohomish County and we really are so grateful for researchers and medical care workers, first responders and everybody that’s really on the front lines of this. So thank you. So we'll get through this together. So with that, I'll turn it over to Council Chair Nate Nehring.

Nate Nehring: Thank you, Dave. Appreciate it. And I’d just like to begin by thanking executive Somers for inviting me to join you today and for the opportunity to share about some of the work that we’re doing at the county council and also in the realm of economic development in response to the pandemic. So while the COVID-19 pandemic has caused quite a bit of social and economic disruption throughout Snohomish County, our local leaders have really come together to work hard to fight the spread of the disease and to support our residents and businesses through this time. I'm really proud of the work that we've done. But as we all know, there's still much to do. We have a great uphill battle in front of us to recover our economy and to support our neighbors who have been negatively affected by this crisis. At the County Council level we’re working diligently with the county executive and our community partners to appropriate much needed funding for COVID relief. The county share of the CARES act funding from the federal government will help to relieve some of the hardships that our communities are facing.

In particular, we need to make sure that the direct effects of this public health crisis do not overwhelm our medical systems. We need to make sure that our small businesses can survive this crisis and continue to provide the goods and services that our community relies on. And we need to ensure that people can stay in their homes. So the Council is working very closely with residents, community organizations and businesses to ensure that the county is assisting in every way that we can. Because each council member represents a specific geographic district within the county. It allows for each member to utilize the connections that we have in our communities and gain a better sense of what the needs are on the ground. So in addition to budget and policy work, we've had the opportunity to hear quite a bit from residents regarding questions about the county's response, state guidelines for businesses, access to resources and many other issues.

Each council member has been working hard to connect these individuals with the information that they need. We're happy to address questions and concerns and provide information to anyone who needs it. So I'd encourage anyone with questions, please reach out to either my office or the office of any of the council members and we'll do what we can to assist. I know we’ve had some council members helping to provide coordination on human and social services and partnership with executive Somers’ office. And other members are helping to address the needs of businesses and workers who are struggling. And in regards to supporting businesses and workers, I'm honored to be working alongside executive Somers and our business and community partners in co-chairing the economic and workforce recovery task force. The goal of this effort is to identify ways in which Snohomish County can best support our businesses and workers as we move toward economic recovery. Council is playing a key role in this effort to advisory groups, which has been organized within each Council district. These groups are composed of small businesses, nonprofits and community leaders, and they aim to identify what
those specific needs are on the ground within our communities and then relay those needs and ideas and requests on to the economic and workforce development task force for implementation.

So the advisory group that I've been helping to coordinate and North Snohomish County includes representation from small business to agriculture to aerospace and several other key sectors. We’ve met and created a report with findings and recommendations which identify some of the challenges that businesses are facing and ideas for how we can support those businesses moving forward. And we look forward to sharing these ideas along with the findings from other areas of the county as the economic and workforce development task force progresses.

So I'd like to give a special thank you to each of our businesses, our community organizations, our citizens and others who are participating in the economic recovery efforts. I think it's just so important that as government we take the time to listen to what those needs are from the people who are just directly facing the hardship and then work as hard as we can to address those needs. I also want to say thank you to my fellow council members as well as executive Somers for both their individual and collective efforts to support our communities and move Snohomish County forward during this difficult time. And thank you again for the chance to share this morning. I'll now turn it over to Dr. Spitters.

**Chris Spitters:** Well, good morning, and thank you Councilmember Nehring and Executive Somers and thanks for both of your leadership and collaboration in this unprecedented and difficult ongoing public health and social and economic crisis that seems to have left no person untouched. And so today I’d just like to catch, catch us up on a few of the public health items related to the outbreak.

First a follow up on a question from last week about the dates of onset in individuals whose positive COVID-19 serology results have been reported to the health district. Of the 104 positive serologic test results, again, the positive serology indicating presence of antibodies to COVID-19, we have the two individuals who reported illness in December that we discussed last week. As you recall their illness may or may not have been due to COVID-19. Then we had our first detected case in mid-January, and then the other 101 positive results followed those other three with roughly, you know, three to four per week through February and then things really increased up in early March and mirror the shape of the curve in the PCR-confirmed cases that that peaked in mid, mid March and subsequently came down. The availability of serology certainly must lead many people to want to know if they're immune to the virus and if this is a means for checking on that. And many of us had respiratory illnesses in December, January, February, March, and we wonder if those might have been COVID-19. So that curiosity is natural. There’s, for your own personal health, there’s no urgent need to contact your healthcare provider and get a test. It’s certainly something you should feel free to discuss with your healthcare provider about the potential benefits and information it would provide, just urge you to remember that we don't know whether the presence of antibodies provides durable, lasting strong immunity to COVID-19. So even if you are tested and positive, we would encourage people to continue to follow social distancing and personal hygiene guidance.

Now moving over to some data. We're now at over 3,000 cases cumulatively in Snohomish County with about 130 deaths due to COVID-19. Looking at the recent case reports, you know, that's that's where things have been. Where are they going? Last week we averaged about 25
to 30 case reports coming in per day. So far over the weekend and early this week, we were down in the 15 per day range. Again, these are somewhat variable depending on timing of testing and the turnaround time from the laboratory, but in general at worst we've plateaued at a low level around 20 cases per day. But maybe the recent developments suggest that things have come down a little bit further. Our goal is to see things get down around 10. Ten cases per day would make us feel very comfortable for a move into phase two, if you will, of the safe return plan.

As the number of cases decline, that's permitted our epidemiology and investigation staff to clear out the backlog of cases that had not been investigated and that number's down to about 160 as of yesterday. We continue to work with the State Department of Health to share the workload for investigating Snohomish County cases as well as to train up staff and Medical Reserve Corps volunteers to do the augmented contact investigations that we've been discussing. And we'll be working on getting that rolling this week. So those declining case counts and that increased contact investigation capacity are two of the key ingredients for us in trying to move forward to begin to reopen up society, while at the same time not having a surge of cases that will cause suffering, death and also potentially overwhelm the healthcare system.

Last I just wanted to mention the upcoming holiday is a great time for all of us to look forward to, hopefully a long weekend and time with friends and family. But remember to keep your time with friends and family, those who are not in your own household, distance-based. So relying on the usual electronic means to get together with your family and friends that you don't directly live with. And certainly, you know, we want people to enjoy recreational opportunities and such, but to do so wisely. If you go somewhere and it looks crowded or the parking lot's full we encourage you to find another destination or go back home. Try to stay close to home. Try to stay in your home neighborhood. And of course as executive Somers mentioned, when you go out if you're going to be indoors or in outdoor places where you can't guarantee that six-foot buffer between you and others who are not in your household, please wear a face cover.

So, with that, those are my comments for the morning and I'll turn it back over to Kari.

**Dave Somers:** So looks like our first question is, has Snohomish County applied for a variance from the state to enter the next phase of reopening early. No, we have not. And I don't think we meet the criteria as kind of one of the top three counties in the state. We've not discussed that. But the answer to that is no. Dr. Spitters do you have any other?

**Chris Spitters:** No. Yeah, you covered it. We're getting close. But we're not there. We do have the paperwork. We're looking over it and formulating a plan for how, you know, how we'll complete that variance request and work with the county to submit it when the, when the time is right when we can meet the indicators that are the criteria for that transition

**Dave Somers:** Next question for you, Dr. Spitters. What does the county need in terms of people to get up to the level of contact tracing you hope to reach and are you looking to hire people to do that?

**Chris Spitters:** Yeah. Well, our response to that is similar to what it's been in recent weeks. We've reassigned many people within the health district and also trained up a group of Medical Reserve Corps volunteers and I think we're approaching with equivalent of about 30 full time equivalents, which we think ought to be adequate to do these investigations and the day-to-day follow up on the people in isolation and in quarantine. We may end up using also some
Dave Somers: So the next question is, under a new state proposal, the state would require local jurisdictions to pay for state purchased PPE. How would this new proposal impact the ECC process for distributing PPE and has the county assessed potential effects on local health care providers long-term care facilities and other facilities in need of PPE. Well, we are in discussions with the state on this. We think it's very bad idea to reimburse the state. I know we are also looking at how we disperse our CARE Act funds and we’re going to be in a workshop with the county council this afternoon about making sure that we're taking those federal resources, also, and making sure we’re well equipped, or as well-equipped as we can be with PPE and testing capacity and other things for moving forward. But again, this is something that the state has not done in the past, and we don’t think it’s a very good idea and it’s also going to create some confusion about who’s paid for what and it’s just really rather cumbersome. So we’re asking the state not to do that. And we’ll have further news on that. And Dr. Spitters or Nate, I don't know if you have any other comments on that.

Chris Spitters: I just want to

Nate Nehring: The only thing I – Go ahead, Dr. Spitters.

Chris Spitters: Please Councilmember Nehring, go ahead. I was just thanking executive Somers for taking on the issue.

Nate Nehring: Yeah, I think executive Somers summarize it well. The only thing I would add is that each Council member did provide direction yesterday to sign on to a joint letter with Skagit, Island, San Juan, and Whatcom counties to the governor’s office expressing concern over this.

Dave Somers: Any other questions?

Joint Information Center: This is Kari in the Joint Information Center. We’ll give it another minute, in case folks are typing in their questions, just to make sure we don’t miss anybody. So we’ll hold a minute here. And please make sure you’re submitting your questions to everyone so that all of our speakers can see them.
Dave Somers: How is the County doing with procuring PPE? Are shortages is still an issue? And Dr. Spitters, you want to take a first cut at that?

Chris Spitters: Yeah, I confess to being a step or two removed from the details of that. I think that the swabs, the specimen collection kits for testing remain a challenge, as do N95 masks. Beyond that, I can't speak to a specific individual pieces or categories of PPE. Certainly I think the situation's much better than it was a month ago thanks to DEM and the work they've been doing in running that part of the operation. So things are better but they're not perfect. They're not as we would wish they'd be, we wish they would be, and we continue to look for improvement in those specific areas where there are still some residual shortages.

Dave Somers: And I'll just add that my understanding of PPE is we're well supplied for the time being for healthcare workers, care facilities and that there's still some question about, as we move into reopening efforts, broader use of PPE. We're getting questions from our businesses about the ability for things like N95 masks and we're still sorting out the guidance on that. But if everybody wants the highest quality stuff, you know, there's clearly not enough, but we think that we're well supplied for first line responders at this point in time, and we hope that continues, but it is very much better than it was a month ago.

Let's see, do we feel like the county is actually getting close to what it needs to have in place to put in the variance request and move into phase two? You know, I think that we're really hopeful that we stay on the trajectory we're on so that when the, the three week kind of period that the government set for looking at Phase two, that when we hit that that we're able to go into it carefully. I don't see and have not heard any information to indicate that we're going to be ready for a variance prior to sort of that period of time, but we'll keep a close look on it and if it looks like we're, we would meet the criteria, then we would certainly apply for such a variance. But we're not there yet.

Doctor you can feel free to.

Chris Spitters: Yeah, I'll just, thank you executive Somers, I'll just elaborate a little bit. I think our chief rate limiting step of the different categories of criteria are the case counts. So that's something we can all contribute to. We're trying to adhere to the social distancing in the days and weeks ahead to try to push that number of new case reports down a little bit closer to 10, I think, is our, is our goal. We've built up the contact investigation capacity. Certainly, we need to now implement that and see that that's going well. Testing capacity at the, at the current level of case reporting, I think we meet criteria, although I'd like to see more tests available in the county than we currently have that is, you know, a fair favorable finding. Hospital capacity looks favorable. And then the other area where we face some challenges is the number of outbreaks. Most of our outbreaks, well, really, all of our outbreaks here in long term care facilities. And no single one of these sets of criteria is a deal breaker or a dealmaker, but our two challenges I think are in the long term care facility disease activity and then the overall number of cases reported daily. So we'd like to continue working on that to see that come down to where we can eclipse the target for opening that is associated with those two. I think those are our two biggest challenges.

Dave Somers: And we're really spending quite a bit of effort on working with our businesses throughout the county to make sure that they're prepared. They understand probably what's going to be required and what they're going to need to put in place to open up. We all want be reopen. This is hurting everybody, some very much more than others, but it's hurting us all and
will for some time. So our efforts and focus has really been on making sure that everybody’s prepared and has the measures and things that they need to really reopen when the time comes, and hopefully sooner rather than later.