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**HORIZON COMMUNITY HEALTH BOARD**  
**Virtual Meeting**  
**Meeting Based out of Douglas County Services Center – Horizon Public Health Offices**

**Monday, June 8th, 2020**  
**9:00 a.m.**  
**Minutes**

**Present:** Douglas: Heather Larson, Jerry Rapp, Charlie Meyer  
Grant: Dwight Walvatne, Doyle Sperr  
Pope: Gordy Wagner, Larry Lindor  
Stevens: Jeanne Ennen, Bob Kopitzke  
Traverse: Dave Salberg, Todd Johnson  
Community representatives: Deb Hengel, Dennis Thompson

**Staff:** Ann Stehn, Horizon Public Health Administrator  
Betsy Hills, Horizon Public Health Assistant Administrator  
Greta Siegel, Horizon Public Health Assistant Administrator

**Guests:** Kristin Erickson, Minnesota Department of Health, Nurse Consultant

The meeting was called to order at 9:02 a.m. by Commissioner Larry Lindor.

**Approve Agenda**

Motion by Bob Kopitzke, second by Jerry Rapp to approve the agenda. Motion carried unanimously via roll call vote.

**Approve minutes of May 11th, 2020 Horizon Public Health board meeting**

Motion by Dave Salberg, second by Jeanne Ennen to approve the May 11th, 2020 minutes as presented. Motion carried unanimously via roll call vote.

**Performance Management Council Report on May 6<sup>th</sup>, 2020 Meeting: Ann Stehn**

Ms. Stehn informed the board that the Public Health Accreditation board reached out to re-schedule a virtual site visit with Horizon Public Health. A site visit via virtual technology is possible by the end of 2020 for national accreditation.

Ms. Stehn provided an overview of the Individual Feedback Survey Summary. The information presented was for the time frame of October 1, 2017 through March 31, 2020. The individual feedback survey results show a majority of positive responses from clients. The individual feedback survey asks questions about the services the client received and

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the quality of service provided. HPH Administration is pleased with the vast majority of positive responses from clients' served.

Ms. Stehn also showed the board the HPH Performance Management Dashboard. There are new performance measures that are being tracked and measured. Although the current environment is focused on COVID-19, HPH staff continue to identify and track and measure new performance measures. In addition to these added measures, HPH is tracking data elements in the Contact Investigation process during the COVID-19 pandemic.

### **COVID-19 Situation and Response**

Ms. Stehn presented a COVID-19 update to the board. As of Sunday, June 7<sup>th</sup> there are 47 cases in Douglas, 10 in Pope, 5 in Grant, 5 in Traverse and 1 in Stevens. HPH staff have been conducting case investigation and contact tracing since May 13, 2020. There are 5 HPH registered nurses that are trained in case investigation and contact tracing. The case investigation and contact tracing is primarily completed through phone calls. Overall, HPH is having very good success in reaching individuals through the case investigation and contact tracing process. A new model for case investigation and contact tracing is coming soon. This new model will be a regional response coordinated by the MN Department of Health and HPH is considering assigning 2 staff members to the regional model at either 0.60 or 0.80 FTE. In this model, HPH staff would take care of HPH county cases first and then help with additional county cases as time allows. The anticipated start date of this model is mid-June. There is a funding model being developed so it will be likely that HPH will receive funds for the staff time that are involved in case investigation and contact tracing in this regional model.

HPH has received 8 requests for essential services out of 62 case investigations. The ICU rate has peaked and plateaued and the hospitalization numbers have started to decline in most recent days. Total MN deaths due to COVID-19 are at 1,115. Age demographics of all confirmed cases shows that the majority of positive cases are between 20-39 years (39%). The COVID-19 deaths are a much higher percentage in the elderly population.

HPH is launching a COVID-19 dashboard to provide additional information on positive COVID-19 cases in the 5 counties. The purpose of this dashboard is to highlight local data. The dashboard has been created with a free software offered to Public Health Departments in the U.S. for 6 months. The cost will be \$500 per year after those initial 6 months. This data dashboard has potential to be used for accreditation and performance management data in the future. This COVID-19 data dashboard will be updated weekly on Wednesdays and will be launched on our website on Wednesday of this week (June 10<sup>th</sup>).

Ms. Stehn presented the Horizon Public Health COVID-19 Statistics dashboard to the board. The HPH data on this dashboard shows the number of total confirmed cases, total hospitalizations, total cases in the ICU, and total deaths. The median age of confirmed cases in the HPH counties is 34.8 years. There is also a graph that shows the cumulative confirmed cases as well as the positive cases per day. Another graph shows the confirmed COVID-19 cases by each Horizon County. Another data graph shows the Horizon Confirmed COVID-19 cases by age (percentage) and this data indicates that a majority of the confirmed cases in the HPH counties have been from 21-30 years of age. An additional graph details the likely exposure of Horizon Confirmed COVID-19 cases. 40% of likely exposure is from community transmission with a known contact, 18% exposed via community but unknown contact. A graph detailing the rate of confirmed cases per 100,000 shows the prevalence as a rate since the populations in all 5 counties vary significantly. At this time, looking at the rate per 100,000 indicates that Douglas and Traverse counties have a very similar rate although their number of confirmed cases is much different.

The number of tests completed per county is a data point that is not tracked at this point. There are many variables that make it difficult to accurately track the number of tests completed on residents of specific counties. Individuals can be tested in a county that they do not reside in and mass testing further complicates collecting this information. A question from the board was asked about tracking the number of cases that have recovered. Ms. Stehn shared that at the state level they are currently using a calculation to report the number of cases recovered and not actual reports from individuals. Because of this calculations it makes it more difficult for HPH to report this figure accurately. HPH will continue to consider this data point and determine how it can be accurately reported.

### **Horizon Public Health Return to Work Strategy and Office Closure Status: Administrative Team**

Ms. Stehn presented information regarding HPH staff returning to work considerations. Currently, 80% of HPH staff are working full-time from home. A vast majority of in person services are currently waived but uncertain when these

waivers will end. Video conferencing/chat/instant messaging has been established through Zoom software throughout the organization. County Offices continue to be generally closed and open by appointment only. HPH shares reception services in 4 of 5 counties. Most of the HPH member counties are opening in phases and is meeting with clients by appointment only. In the Morris office where these is not shared reception services the door to the office will remain locked with a buzzer in the foyer for clients and sneeze shields were ordered.

The most recent Executive Order 20-74 continues to state that anyone that can work from home must continue to do so. The majority of HPH staff working from home are client serving staff and at some point they will need to resume these services. There are a number of considerations for Horizon as a workplace in this new environment. A survey was given to all staff at HPH to determine what working arrangement would be preferable to them post COVID-19 (specifically stating Horizon has not decided on a future model). Survey results indicated that 50.7% of employees would prefer a flexible schedule that allows work from home and the office, 27.4% prefer to work exclusively from home, and 21.9% prefer to work exclusively in the office.

Another consideration is that the HPH office environments are different across our 5 counties. The Douglas office has challenges in that the current cubicle setting does not allow for social distancing. Face to face clinic services also will likely need to be moved into larger spaces. The Hospice area is the most challenged for space and distancing issues. The other locations have primarily individual offices and clinic spaces that can accommodate distance requirements. Reception shields have been ordered for locations that will need them.

Innovative Office Solutions provided a consultation meeting to HPH Administration in regards to the Douglas County office space. Workplace zones can be identified as high traffic and high touch versus low traffic and low touch in helping to determine the needs of each work area.

The status of current services provided by HPH was explained by Ms. Stehn. WIC face to face client services are waived until June 30<sup>th</sup>. Case Management and MN Choices is currently able to use telephonic/virtual services with no end date known at this time. Hospice is seeing clients face to face and using some virtual technology as well. Family Health received guidance last week to try to move towards face to face visits but is allowed to continue to provide and bill for virtual visits. Environmental Health continues to work in the public. The Health Education program has seen an effect on most of their grants due to community partnerships and collaborations affected by COVID-19.

Ms. Stehn shared there are currently three options to consider when evaluating where HPH should be heading. One option is to return to normal operations at some point (pre-COVID-19 pandemic). A second option would be to consider what is needed (example: infrastructure/policy/supervision) for continued work from home on a part-time basis. The third option would be allowing staff to be based out of their home on a full-time basis. There are a variety of administrative considerations for each option and benefits and challenges. This will continue to be explored and researched. Consensus of the board was to make sure to communicate with both our attorney and insurance provider.

A summary of the thoughts of the Horizon Board on changing the HPH workplace strategy was provided by Ms. Stehn. HPH is learning a lot due to the current situation. The board is directing Administration to continue to examine and gather more information about changes to the work environment and to work with the Personnel Committee going forward. The board encourages HPH Administration to proceed cautiously and gather more information and data to make a final decision.

Ms. Stehn then asked for a motion to direct Horizon Public Health to follow the policies of the counties that each office is located in in regards to opening up. Most of the counties are in a phased process of opening up their buildings to clients with visits arranged by appointment only. The Morris office location will continue to keep their door locked and clients are able to ring the doorbell in the foyer if assistance is needed.

Motion by Bob Kopitzke second by Dave Salberg to abide by the policies of the host counties during COVID-19 and leave Morris office location as is with a locked door and client meetings by appointment only. Motion carried unanimously via roll call vote.

#### **Employee Screening: Betsy Hills**

Ms. Hills shared information regarding employee screening for COVID-19. Each county has implemented different protocols regarding screenings of their staff. The reason for employee screenings is to keep employees that are ill out of

the office. Currently, HPH is asking employees to do a self-screen of their temperature and other symptoms each day. The hospice program is submitting this screening information to their Supervisor on a weekly basis. It is important to screen the hospice staff due to the fact that they continue to go into client homes and skilled nursing facilities. HPH plans to continue to ask staff to self-screen and not report to the office if any symptoms are evident and to leave the office if symptoms arise during the work day.

#### **Personnel Issues**

*Accept Kathleen Thoennes (casual) Resignation effective May 19, 2020:*

Kathleen Thoennes was a casual home health aide for the hospice program and worked very limited hours in the past year when needed.

*Accept Cheryl Peterson Resignation effective June 30, 2020:*

Cheryl Peterson was a 30 hour/week Hospice Home Health Aide and has submitted her resignation effective June 30, 2020.

Motion by Charlie Meyer, second by Dennis Thompson to approve the resignation of Cheryl Peterson and Kathleen Thoennes, Hospice Home Health Aides, effective June 30th, 2020 and May 19, 2020. Motion carried unanimously via roll call vote.

*Approve Hospice Home Health Aide Position(s):*

Ms. Hills shared that it has been difficult to fill the Hospice Home Health Aide positions as they are currently classified. The HHA 30 hour per week position is needed to be filled to meet client's needs. Different strategies have been discussed to meet this need temporary. Ms. Hills is requesting the ability to have flexibility regarding this position but asking to fill the HHA position at 30-40 hours/week.

Motion by Dwight Walvatne, second by Gordy Wagner to approve a benefit-earning Hospice Home Health Aide position at 30-40 hours/week. Motion carried unanimously via roll call vote.

#### **Financial Issues**

***Approve payment of warrants and Electronic Wire Funds Transfers for May 2020:***

The May 2020 warrants in the amount of \$217,503.85 and Electronic Wire Funds Transfer in the amount of \$400,000.00 were approved on a motion by Jeanne Ennen, a second by Bob Kopitzke and all voting aye. Motion carried unanimously via roll call vote.

***2020 YTD Asset Listing Summary Report: Treasurer Ennen***

The May 2020 asset report was presented by Treasurer, Jeanne Ennen. The year to date report shows that HPH received \$84,241.53 more revenues than expenditures in the month of May. Year to date revenues exceed expenditures by \$318,328.93. Total assets increased by \$101,564.03 from the previous month. Total HPH assets on 5/31/20 equals \$6,658,664.69.

Motion by Todd Johnson, second by Dwight Walvatne to approve the May 2020 Asset Listing Summary Report. Motion carried unanimously via roll call vote.

***Resolution 20-10 accepting May 2020 Hospice donations:***

Ms. Siegel presented Resolution 20-10 accepting May 2020 Hospice donations.

#### **RESOLUTION 20-10**

**BE IT RESOLVED** that the Horizon Community Health Board hereby accepts the May 2020 donations to Hospice of Douglas County in the amount of \$1,431.80.

Dated this 8<sup>th</sup> day of June, 2020.

Motion by Charlie Meyer, second by Jerry Rapp to adopt Resolution 20-10 as presented. Motion carried unanimously via roll call vote.

**Set July Finance Committee Meeting**

