
Meeting Minutes

Call to order

A meeting of Foothills Health District was held via remote meeting on April 17, 2020 at 10:32 AM.

Attendees included: Michael Kurland, Donna Gibson, Helen Symons, Fran Fortino, Thomas Martin, Robby Armenti, Mark Bushee, Rebecca Jones, Janet

Members not in attendance included Michael Archbald, Nicholas Cockoros, Laura Barrus,

Next Meeting date: April 17, 2020 at 10:30 AM

Approve of Minutes of Emergency Meeting of April 17nd, 2020.

Status of State Grant and related

Janet: check arrived for 50,000\$, deposited Wednesday; she sent attachment that showed Excel sheet to keep track of money and where it's going.

18,750\$ Check sent to Northampton;

32,250\$ remains. Anticipate a second disbursement.

Discussion related to tracking money used for COVID-19 in each town and once things calm down seeing what can be applied to the grant money.

Michael will look at invoice when it is available.

Costs will likely be primarily for contact tracing, CTC tracing might impact this.

Status of Memorandum of Understanding between Foothills and Northampton and related

Mark was in contact with Northampton regarding notification process. Northampton will notify the foothills via phone and Mark will run reports in maven to monitor cases as a backup.

Jenny Meyer, tweaking communications and sharing, seems to be working well. Hasn't been new cases so hard to assess the process

The System/process:

Multiple backups

Only for lab confirmed cases

Email

Northampton will call each day w new cases

Mark is running reports several times a day

Michael had cases last week and saw it run through the system well

Robby: Westhampton: brought up cases in Westhampton that seemed to fall through the cracks probably because they were probable and not lab confirmed

Donna- are doctors using the clinical checklist system to report "probable" cases

Rebecca will reach out to physicians, and create a fax/email that will explain to clinicians/physicians how to report probable cases.

What is physician's responsibility—required to report positive cases.

The gap is identified for contact tracing for non lab confirmed probable cases: ? money to trace these patients and contacts.

Donna: payment used to be nurse follow up but now emergency follow up; 1500.00 and should always be able to do

In recent times, cases for f/u so rare the case gets followed up by the state. Right now the understanding is contact tracing is only for test positives.

Michael: MAVEN is limited to test positives—this is a question

Mark: contacts get put into MAVEN in addition to positive cases

A gap in services is that (is this true) the public health nurse isn't following probables, and isn't checking on patients at home

- MDs are determining which patients need to go to hospital and who can stay at home, do social services as well as medical ones—this is an assumption, would be worth making sure doctors are able to do this.

6pm each night Contact tracing daily "yes" or "no", eventually if no answer they will take over (?)

PIH experience with Ebola, so has learned contact tracing. Using that experience

1700 volunteers; tracing is difficult in the more dense areas.

Coming in to pick up slack if Northampton gets overwhelmed. April 30 yeses and blanks will be taken up, active no's will be left alone.

Mark:

Liasons with DPH, have changed a few times. Want a contact from each town, each town has just one, Mark can send contact info into them. Ie, clarifications on funeral home, burials,

Zip code issue is common; put into the website that the numbers could be off.

Ie because Williamsburg has 6 zip codes, a South Deerfield case Whately; difficult;

They want to go by town to keep track; small towns will not be correct.

Today was original budget for state grant.

Tracing webinar next Tuesday.

Tom: info gathered for a contact; if exposed, confirmed.

15 min +

State will send guidance from Ron O'Connor to define essential services. Hard to determine what has been updated.

For instance a place in Pittsfield was operating, supposedly making masks, BoH was overruled in shutting it down. Mark will provide updated information.

Location of Public Health Nurse for District

Tabled until a later date

Emerging concerns

Helen: town meetings and elections are coming up; concerns about physical layout for voting.
Voting machine cannot leave the building; voter has to put ballot into the machine themselves, so try to figure out where to put the machine.

Gloves, mask, products to wipe machine;

Can have part of process of voting outdoors, can have machine a couple of feet into the building. Also a good model for a vaccine station.

Towns can use 1/12 of budget without town meeting but not then need to have the meeting.

Grab and go lunch program out of Dunfee school; Mark will check it out.

Also, libraries will need these supplies.

New business

None

Adjournment