

Jen Andrew

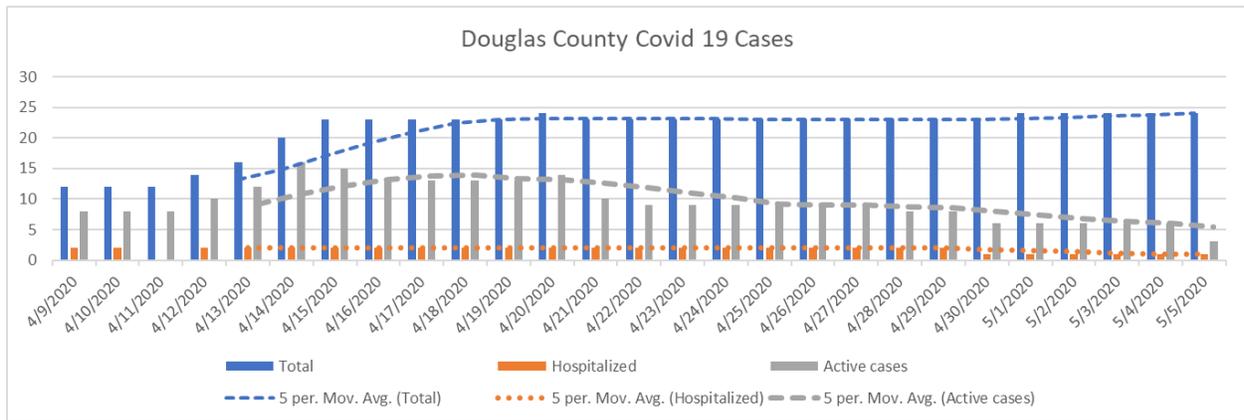
Office of the Governor

Jennifer.j.andrew@oregon.gov

In accordance with the “Prerequisites for Phased Reopening of Oregon”, please accept this document as Douglas County’s completion of those prerequisites.

The Prerequisites require a variety of measures, some at the state, some at a regional and some at a county level. Please consider the following for the county and regional level.

Declining prevalence of hospitalizations. (Measure 1b) Douglas County has not had more than 5 hospitalizations at any time in the past 28 days and thus this measure does not apply to Douglas county. Please see Appendix A for more details.



Adequate testing. (Measure 2) Douglas County is able to test far more than 30 people per 10,000 residents per week at multiple locations through the county. Please see Appendix B for more details

Lab	Daily	Weekly	TAT	Weekly per 10,000 persons per week
Providence	40	280	1 day	25.7
Cow Creek	10	70	Less than 1 day	6.5
Lab Corp	50	350	2-3 days	32.1
MMC Abbot	10	70	Less than 2 hours	6.5
Quest Drive through	100	700	2-3 days	64.2
OSPHL			1-3 days	Not included in the total
Total	210	1470	2 hours to 3 days	134.8

Contact Tracing. (Measure 3) Douglas County has assembled and has begun to employ a cadre of contact tracers. These contract tracers are from the county and represent the culture and languages from Douglas County. We have identified 18 individuals (16.5 per 100,00) who are already engaged or

willing to join our team. We are able to track at least 95% of cases within 24 hours. Please see Appendix C for more information

Isolation Facilities (Measure 4) Douglas County has used several local hotels during this Covid 19 pandemic, most recently to house cases and contacts from the Shutter Creek outbreak. Douglas County has a long history of excellent outbreak investigation and has plans for addressing outbreaks in any group setting. Please see Appendix D for more information

Sector guidelines (Measure 5). Announced today

Sufficient health care capacity (Measure 6). Our local hospitals report very low census and have much unused capacity. See Appendix E for more details.

Sufficient PPE capacity (Measure 7). Our local hospitals have PPE supplies that will meet the stated guidelines and that the county has sufficient PPE supplies to support our EMS system. See Appendix F, G and H for more details.

Please let us know if you have other questions or need further information.

Appendix B

Adequate Testing in Douglas County

Testing in Douglas County is available at Mercy Medical Center, at a drive through clinic in Roseburg and Reedsport, and at various clinics throughout the county.

We have had adequate testing for several weeks and have capacity to test every symptomatic person and any asymptomatic person who, after consultation with their provider, want a test. The tests are provided at our drive through at no cost to the patient.

Our drive through format allows us to test many people in a short time and are able to deploy testing on site if needed.

Lab	Daily	Weekly	TAT	Weekly per 10,000 persons per week
Providence	40	280	1 day	25.7
Cow Creek	10	70	Less than 1 day	6.5
Lab Corp	50	350	2-3 days	32.1
MMC Abbot	10	70	Less than 2 hours	6.5
Quest Drive through	100	700	2-3 days	64.2
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Appendix C

Douglas County Contact Tracer Plan

DPHN has already recruited and deployed a contact tracing team for the few cases that we have had. With re-opening and a change in the investigative guidelines, we anticipate a greater need for contact tracers. Douglas County and DPHN will expand our contact tracer teams with personnel who will do case investigations, contact tracing, isolation and quarantine support, and will manage all case data.

Two or more teams will be set up using currently available staff and volunteers. This could be a full-time endeavor that can last 6 months or a year. The proposed employment arrangements, pay rates, supervision and length of service are not yet defined, per a recent conversation with OHA.

Each team will include:

- A qualified team lead;
- Two trained case interviewer/contact tracers
- Two social service support
- One logistic/supply/courier
- Language interpreter capabilities (either bi-lingual or access to language line)

The team lead will manage the data using Orpheus.

The interviewers/tracers will use Microsoft Dynamics software provided by the state.

Job descriptions:

- Team leads: a person with public health or medical experience. Manage case investigation efforts and supervise team members. Data entry and communications with DPHN Lead Epidemiologist.
- Case investigators/contact tracers: persons who have been trained on Covid-19 disease, interviewing techniques, HIPPA requirements, and patient confidentiality.
- Social service support: persons with experience in social service delivery systems; knowledge of housing, mental health, food, etc. Connect cases and contacts with support services.
- Logistics: person capable of driving, purchasing, and delivering items needed for activities of daily life, such as food, clothes, personal care items, etc.
- Interpreter: primarily bi-lingual in languages found in the community, primarily Spanish. Will interpret for the case investigators and support team members.

The following personnel are available and willing to serve in these roles. Most team members are already working with DPHN and the others are willing to join, depending on the employment details. See legend below.

We expect that as employment opens up in other areas, some of these individuals may move back to their regular jobs and we would hire new personnel to fill these positions.

Last name	First name	Credentials	Additional Languages	Title
Stensland	Jude	FNP (Ret.)		Contact tracer
Hofford	Barb	RN, BSN		Contact Tracer
Post	Marcella	RN		Contract Tracer
Ogden	Anita	RN		Contact Tracer
Cormack	Christine	CNP		Contact Tracer
Alexander	Susan	RN		Contact Tracer
Dove	Teresa	Den. Hyg.		Contact Tracer
Kercher	Deanna	Den. Hyg.		Contact Tracer
Cobb	Melody	Psych		Social Services
Dannenhoffer	Robert	MD		Public Health Officer
Mahoney	Brian	MPH	German, Swahili	Epidemiologist
Turpen	Laura	MPH	Mandinka	Lead epidemiologist
Rutledge	Christin	MPH		Epidemiologist
Becker	Vanessa	MPH		Epidemiologist
Garcia	Anna		Spanish (certified)	Social service
Dannenhoffer	Katie			Logistics
Gandy	Kim			Project management
Bright-Jones	Becky			Logistics, Accounting
Hector	David			IT, accounting

Currently employed by DPHN

Currently working with DPHN currently deployed from Aviva

Interested in working in this project, depending on employment details

Appendix D

Outbreak Investigations

Douglas County and DPHN have long experience in investigating outbreaks in nursing homes, schools and other facilities, having performed over 40 outbreak investigations in the past 5 years.

In the Covid 19 era, we have not yet had any large outbreaks in Douglas County, but will be ready for outbreaks as they occur. We have had three small Covid 19 outbreaks that were handled quickly and successfully.

Douglas County maintains the local public health authority and employs the health officer and health administrator. Douglas Public Health Network (DPHN), a local not for profit organization, contracts with the county to provide public health services.

- DPHN has a team of 5 experienced disease investigators and current ORPHEUS users.
- Douglas County has an experienced and deeply involved health officer
- DPHN staff has a 24/7 call system and scheduled epi staff working on weekends to handle case reports and outbreaks. All Covid 19 case investigations began within 8 hours of receipt.
- DPHN has an established and trained “epi strike team” to respond to a large outbreak and has plans to expand our cadre of contact tracers.
- The public health officer conducts twice weekly briefings with each of the county medical facilities and has established relationships with the school superintendents and business leaders.
- DPHN conducts regular drive through screening clinics and can collect up to 30 specimens in an hour.

The proposed process is as follows:

- Upon notification of a single case at a large employer, nursing facility, school or other facility, the epidemiologist will initiate a case investigation and will investigate whether the case has other contacts or potential cases in the institution.
- On consultation with OHA, DPHN and the public health officer will decide on a strategy for testing, isolation, quarantine and possible closure.
- If testing is recommended, DPHN will work with that institution to conduct testing.
- We have access to a nearly unlimited number of tests from Quest Labs, from Providence and from OSPHL and are able to conduct large scale testing at affected sites.
- Douglas County Environmental Health will be involved to ensure adequate environmental measures at the affected institution.

Appendix E

Mercy Medical Center Capacity

Attached is a one week snap shot of our census data for May 1 through May 6, 2020.

This is an average census of 66 per day.

We are able to accommodate a usual census of 120 patients or up to 173 with our covid ward opened.

Therefore, we have a surge capacity of 58 patients under normal operations with the resumption of elective procedures resulting in an additional bed surge capacity of 81% available.

	CENSUS		
	Total	Acute	Birthing Center
1	73	68	5
2	70	69	1
3	76	74	2
4	85	81	4
5	79	75	4
6	80	77	3

Appendix F

Corona Virus Issue

COVID 19 Stock					
Lawson #	Description	Man. Cat.	SOH	UOM	DOH
Mouth/Eyes					
244776	Mask Procedure Pleated	AT70021	22,700	EA	34
621085	Mask Cone	AT7509	1,050	EA	32
205557	Mask Cone N95 Small	M1860S	280	EA	56
191691	Mask Cone N95 Regular	M1860	2,256	EA	135
133839	Mask Duckbill N95 Small	46827	280	EA	56
138641	Mask Duckbill N95 Medium	46727	700	EA	53
393320	Mask Procedure Pleated with Eye Shield	AT7511-WE	925	EA	33
342489	Face/Eye Shield	48300	828	EA	124
360300	Eye Glasses Safety Small	3699	178	EA	30
360299	Eye Glasses Safety Medium	4699	381	EA	33
235666	Mask Surgeon Pleated Tie	AT71235	4,150	EA	42
403865	Mask Surgeon Pleated w/Eye Shield EarL.	AT74631	1,100	EA	37
Gowns					
597704	Gown Iso X-Large Yellow	MLN30035Y	25,600	EA	45
CoverAll					
229667	CoverAll XL	NONCV150XL	125	EA	47
Gloves					
572601	Glove Exam Nitral Small	88LC02S	830	BX	29
572602	Glove Exam Nitral Medium	88LC03M	2,190	BX	30
572603	Glove Exam Nitral Large	88LC04L	470	BX	24
572604	Glove Exam Nitral X-Large	88LC5XL	80	BX	27
Hand Sanitizer					
184244	Hand Sanitizer	9651-24	505	EA	51
154996	Hand Foam	6032729	468	EA	35
Head/Feet					
551448	Cap Bouffant 24"	4190B	9,500	EA	43
538777	Shoe Cover XL Blue	SMS4722B	43	BX	29
Wipes					
156908	Wipes - Purple Top	Q55172A	48	EA	6
419606	Wipes - Gray Top	P13872	228	EA	46
390512	Wipes - Orange Top	P54072	0	EA	0
	Gowns Reusable		1000	EA	40
	Outside Sourced KN95		5000	EA	35

5/7/2020 8:31 AM

Appendix G

From: Tara L. Blohm <tblohm@luhonline.com>

Sent: Thursday, May 7, 2020 12:56:28 PM

To: BOB DANNENHOFFER <bob@DouglasPublicHealthNetwork.org>

Subject: Lower Umpqua Hospital

Sandy Teeter is on the road, so she wanted me to respond to your question about PPE. We have at least 14 days of PPE on hand. Please let me know if you need anything else from me.

Happy Thursday!

Tara Lyn Blohm, Chief
Nursing Officer Risk
Manager
Lower Umpqua Hospital
541-271-6311
tblohm@luhonline.com

Appendix H

PPE type	Style/size	Daily use	Current Inventory	Days Supply
N95 (each)	Small			
	Medium		100	
	Large			
	Regular		52	
	Medium/large		10	
	Universal	22	961	
	Total	22	1123	51
Masks (each)	Procedure		1541	
	Procedure with eye shield			
	Other			
	Total	35	1541	44
Gloves (box)	Small	200	3800	
	Medium	400	13900	
	Large	400	13800	
	Xlarge			
	One size		11700	
	Total	1000	43200	43
Gowns (each)	Small			
	Medium			
	Large		27	
	X-Large		226	
	XX-Large		43	
	Other		358	
	Total	4	654	163
Faceshields (each)		4	278	
Splash Shields (each)				
Safety Glasses (each)			26	
Goggles (each)			100	
Total			404	101

Douglas County amendment, Phase 1 Prerequisites Checklist, Item 2c

In addition to testing done at the hospital and various provider offices, we do twice weekly drive through testing centers at the county fairgrounds and weekly or as needed in Reedsport. We have arranged with Quest lab for the tests provided at our drive through clinic to be provided to the patient at no charge to the patient. We have verified that in the over 400 patients tested, none have received a bill for the test or the collection. For patients who cannot or do not drive, we have arranged for Non-emergent medical transportation for the patient.

The underserved population is a grave concern, as this pandemic seems to disproportionately affect people of color, immigrants and the poor. We have worked closely with our local FQHC's (Aviva (with 6 clinics in the County) and SouthRiver (2 clinics)) and our rural health clinic (Evergreen) to provide service for the underserved. They have been great partners and can do testing at their clinics and have ready access to our drive through testing clinic.

When the contact tracer program gets going, I hope there is a strong focus on the underserved population, especially those who are homeless.