



King County

1200 King County
Courthouse
516 Third Avenue
Seattle, WA 98104

Meeting Agenda Board of Health

Metropolitan King County Councilmembers:

Joe McDermott, Chair
Jeanne Kohl-Welles, Kathy Lambert, Vice Chair
Alternate: Rod Dembowski

Seattle City Councilmembers:

Andrew Lewis, Tammy Morales, Teresa Mosqueda, Vice Chair; Alternate: Lorena Gonzalez

Sound Cities Association Members:

David Baker, Susan Honda, Vice Chair
Alternates: Krystal Marx; Janice Zahn

Health Professionals: Bill Daniell, MD, MPH; Christopher Delecki, DDS, MBA, MPH, Vice Chair
Non-Voting: Butch de Castro, PhD, MSN/MPH, RN, FAAN

Director, Seattle-King County
Department of Public Health: Patty Hayes

Staff: Susie Levy, Board Administrator (206) 263-8328

4:00 PM

Monday, June 15, 2020

Virtual Meeting

SPECIAL MEETING REVISED AGENDA

PUBLIC NOTICE: To help prevent the spread of the COVID 19 virus, all Boardmembers and staff will be participating in the June 15, 2020 Board of Health Special Meeting remotely. The live feed of the meeting will be streaming on the Council's website and on KCTV channel 22.

To show a PDF of the written materials for an agenda item, click on the agenda item below.



Sign language and communication material in alternate formats can be arranged given sufficient notice (206-1000).

TDD Number 206-1024.

ASSISTIVE LISTENING DEVICES AVAILABLE IN THE COUNCIL CHAMBERS.



To join online paste the following link into the address bar of your web browser:
<https://kingcounty.zoom.us/j/96172223371> to join online.

Join by Telephone

Dial: US : +1 253 215 8782

Meeting ID: 929 7546 1336

Password: 998289

HOW TO WATCH/LISTEN TO THE MEETING: There are two ways to watch or listen in to the meeting:

1) Stream online via this link <https://livestream.com/accounts/15175343/events/4485487> or input the link web address into your web browser.

2) Watch King County TV Channel 22 (Comcast Channel 22 and 322(HD), Wave Broadband Channel 22)

1. **Call to Order**
2. **Roll Call**
3. **Announcement of Any Alternates Serving in Place of Regular Members**
4. **Chair's Report**

Discussion and Possible Action

5. Resolution No. 20-09

A RESOLUTION supporting King County's application to the Washington State Department of Health to enter Phase 2 of the Safe Start Reopening Plan.

Kirsten Wysen, Policy Analyst, Public Health- Seattle King County
Dennis Worsham, Prevention Division Director, Public Health- Seattle King County
Rachel Smith, Deputy County Executive, King County Executive Dow Constantine

Adjournment



Signature Report

Resolution

Proposed No. 20-09.1

Sponsors

1 A RESOLUTION supporting King County’s application to
2 the Washington State Department of Health to enter Phase
3 2 of the Safe Start Reopening Plan.

4 WHEREAS, on February 29, 2020, Governor Inslee proclaimed a state of
5 emergency within the State of Washington due to COVID-19, and

6 WHEREAS, on March 1, 2020, King County Executive Constantine proclaimed a
7 state of emergency within King County due to COVID-19,

8 WHEREAS, on March 23, 2020, Governor Inslee imposed a Stay Home - Stay
9 Healthy Order throughout Washington State prohibiting all non-essential businesses in
10 Washington State from conducting business, and

11 WHEREAS, on May 1, 2020, Governor Inslee announced the Safe Start Plan
12 which implements a phased approach to re-opening to all aspects of public life, and

13 WHEREAS, King County is currently in a modified phase one of the Safe Start
14 Plan, and

15 WHEREAS, based on current key indicators, the King County Local Health
16 Officer recommends moving King County to Phase 2 of the Safe Start Plan, and

17 WHEREAS, the King County Board of Health must endorse this recommendation
18 before King County Executive Constantine submits the Phase 2 application to the State
19 Department of Health, and

20 WHEREAS, the King County Board of Health endorses the recommendation of
21 the Local Health Officer that moving to Phase II is appropriate;

22 NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF HEALTH OF
23 KING COUNTY:

24 The King County Board of Health endorses King County's application to move to Phase

25 2 of Governor Inslee’s Safe Start Plan, and requests that the King County Executive
26 submit the attached application.
27

BOARD OF HEALTH
KING COUNTY, WASHINGTON

Joe McDermott, Chair

ATTEST:

Melani Pedroza, Clerk of the Board

Attachments: A. King County Safe Start Application Moving from Phase 1 to Phase 2

King County Safe Start Application
Moving from Phase 1 to Phase 2

DRAFT June 12, 2020



King County

Contents

I.	Local Approval Process and Required Documentation	3
II.	Targeted Metrics	3
III.	Local Hospital Documentation	4
IV.	Application Narrative.....	5
V.	Appendixes	18
	Appendix A: Recommendation from King County Local Health Officer	18
	Appendix B: King County Board of Health vote, resolution/motion and vote totals	18
	Appendix C: Letter from King County leadership.....	18
	Appendix D: King County Hospital PPE Responses	19

I. Local Approval Process and Required Documentation

Please see:

Appendix A: Recommendation from King County Local Health Officer

Appendix B: King County Board of Health vote, resolution/motion and vote totals

Appendix C: Letter from King County leadership pursuant to guidance from Secretary Weisman

Appendix D: King County Hospital PPE Responses

II. Targeted Metrics

The State's metrics and King County's progress towards meeting them are identified in the chart below, many of these are also available online in the Key Indicators of COVID-19 Activity Dashboard, <https://www.kingcounty.gov/depts/health/covid-19/data/key-indicators.aspx>.

Two of the three COVID-19 activity targets are met and while the reproductive number estimate is at 1.1, it is within the confidence intervals. Both hospital readiness targets have been consistently met. The testing metrics are below the targets but are improving and trending in the right direction. The case contact tracing metrics (based on the approximately two-thirds of current cases managed by PHSKC and the remainder during surges managed by DOH) are meeting or are close to meeting the targets for cases and contacts reached within the specified time intervals, but not met for case and contact daily follow-ups. PHSKC began a pilot test for daily monitoring on June 9, 2020 to determine staffing levels needed for daily check-ins. The pilot project is continuing, and a system of daily monitoring is planned to start in July. The DOH contact tracers working in King County began daily symptom checks on June 6. PHSKC is also considering texting platforms to achieve daily monitoring. The number of outbreaks is above the target at 5 per week versus 3 outbreak. In the last four weeks, there has been a downward trend from 17 during the week of May 10 to 5 in the week of May 31.

Based on this combination of metrics, as well as a careful analysis of syndromic surveillance data, the Local Health Officer supports moving from a modified Phase 1 to a Phase 2 Safe Start re-opening.

	Description	Target	King County Actual
Disease activity	Total number of cases over the last 14 days per 100,000 residents	<25 per 100k	23.7
	Effective reproductive number	<1	1.1
	Rate of hospitalization per 100,000 residents in the past 14 days compared to the prior 14 days	Flat or decreasing	Decreasing
Testing capacity	Number of people tested for each positive result over the last 7 days	≥50	44.6
	Number of days (median) between illness onset and test date over the last 7 days	≤2	2.2
Health care readiness	Percent of beds occupied across hospitals	≤80%	69.7%

	Percent of hospital beds serving COVID-19 patients	≤10%	2%
Case and contact investigations	Percent of cases reached by phone or in person within 24 hours of receipt of positive lab test report	90%	87%
	Percent of contacts reached by phone or in person within 48 hours of receipt of positive lab test report on a case	80%	89%
	Percent of cases being contacted daily (by phone or electronically) during their isolation period	80%	Partially met, DOH cases are contacted daily starting June 6. PHSKC pilot test launched June 9th for daily contacts.
	Percent of contacts being contacted daily (by phone or electronically) during their quarantine period	80%	Partially met, DOH contacts are contacted daily starting June 6. PHSKC pilot test launched June 9th for daily contacts.
Protecting high-risk populations	Number of outbreaks reported by week (defined as 2 or more non-household cases epidemiologically linked within 14 days in a workplace, congregate living, or institutional setting)	3 for very large counties (>1 million)	Week of May 31: 5 Week of May 24: 6 Week of May 17: 11 Week of May 10: 17

III. Local Hospital Documentation

All 28 hospitals in King County report to WA HEALTH, that data was used to answer each of the questions below.

- The percent of licensed beds occupied by patients (i.e., hospital census relative to licensed beds).**
The percent of licensed beds occupied by patients in King County hospitals is 69%.¹
- The percent of licensed beds occupied by suspected and confirmed covid-19 cases (ideal target is <10%).**
The percent of licensed beds occupied by suspected and confirmed COVID-19 cases is 2%.²
- That the hospital is reporting, and will continue to report daily, including on weekends, all data requested by the Washington State Department of Health into WA HEALTH, and for how many days in the last 2 weeks did they report into WA HEALTH.**

¹ Public Health – Seattle & King County, Key Indicators of COVID-19 Activity in King County, <https://www.kingcounty.gov/depts/health/covid-19/data/key-indicators.aspx>

² Ibid.

The King County hospitals will continue to report daily, including on weekends, all data requested into WA HEALTH. They reported data 14 days in the last 2 weeks into WA HEALTH.

4. The hospital has at least a 14-day supply on-hand for all of the following PPE, including N95 respirators, surgical masks, face shields, gloves, and gowns.

For the 17 major acute care hospitals which are expected to care for the vast majority of COVID-19 positive inpatients in King County, data completion over the past week of available data in WA Health, using a criteria of 80% data completeness, including bed capacity, staffing, equipment, supplies, and COVID-19 Statistics, 92% of facilities reported at a level equal to or greater than 80% data completeness.

5. If or when they are using PPE conservation strategies, they must certify that no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in [this guidance](#).

Please see Appendix D for email confirmations that King County hospitals are using appropriate PPE conservation strategies.

IV. Application Narrative

1. Provide a brief summary of the epidemiology of COVID-19 in the county, including populations disproportionately affected by COVID-19 and proportion of cases without an epidemiologic link to other cases.

In King County, Washington, on June 11, 2020 there were 8,584 confirmed cases and 571 confirmed deaths since the first COVID-19 case was reported on February 28, 2020. The current doubling time is 52 days for confirmed cases and 54 days for deaths. In the first week of June, 271 new cases were reported, 2 percent lower than the previous week's total of 276 and 21% the level of the peak case number of 1,299 in the week of March 23, 2020. The most recent week is the lowest new incidence since the week of March 2, 2020. More information at the King County Daily COVID-19 Outbreak Summary website.³

The populations disproportionately affected by COVID-19 in King County include older adults, long term care facility residents, people with underlying health conditions, men, residents of low-income communities, and persons of Hispanic ethnicity, Black race, indigenous people and people of color (BIPOC).⁴ Of the 571 deaths in King County from COVID-19 to date, 77% have been age 70 or older. Maps of COVID-19 case residences and places of residence where there are more people with underlying health conditions and low incomes are very similar.⁵ Men account for 53% of COVID-19 deaths in King County.

Among measured race/ethnic categories, Pacific Islanders in King County have the highest

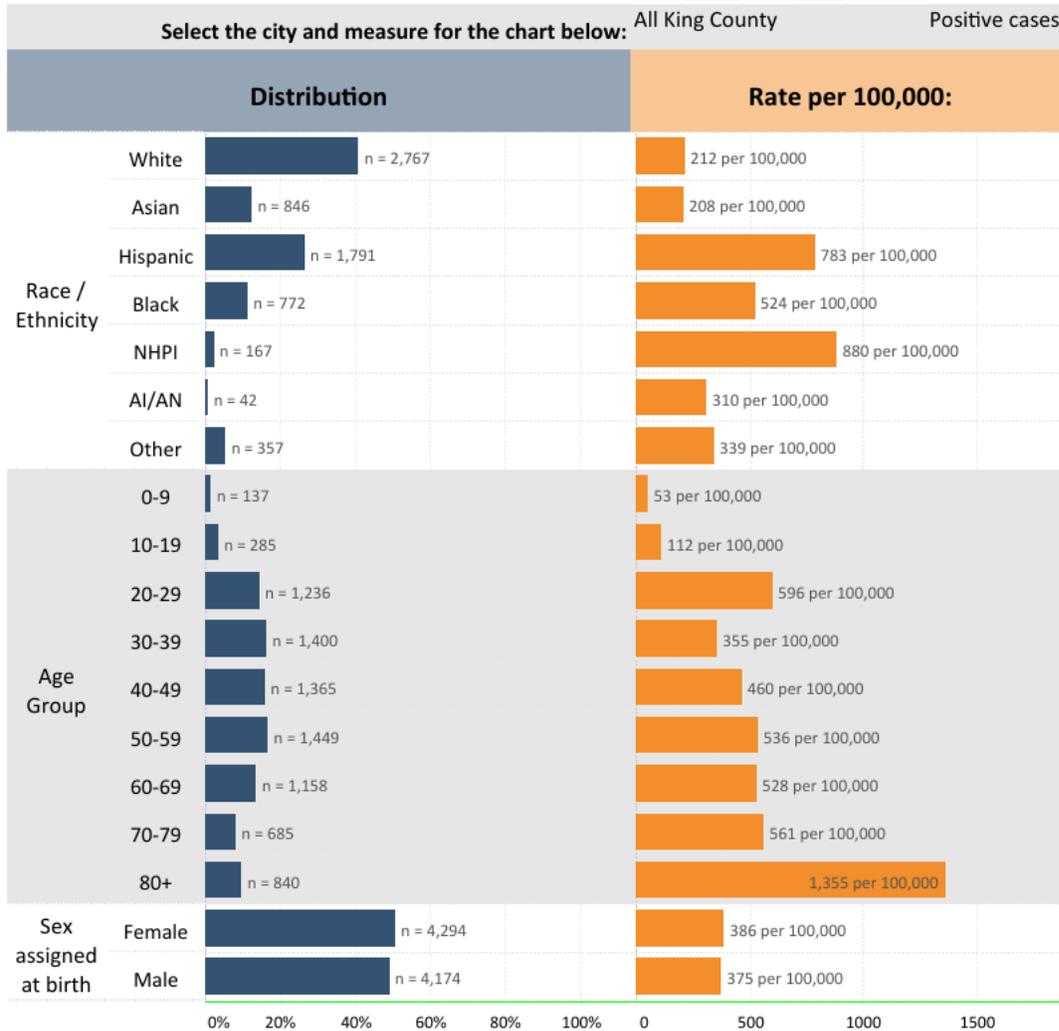
³ Public Health – Seattle & King County, Daily COVID-19 Outbreak Summary, <https://www.kingcounty.gov/depts/health/covid-19/data/daily-summary.aspx>

⁴ Ibid.

⁵ Communities Count, COVID-19 Vulnerable Communities Data Tool, <https://www.communitiescount.org/covid19vulnerable>

age-adjusted case rate at 880 per 100,000 (167 cases); Latinx residents are experiencing a case rate of 783 per 100,000 (1,791 cases); Black residents have a rate of 524 (772 cases); American Indians have a rate of 310 (42 cases); White residents have a rate of 212 (2,767 cases) and Asian residents have 208 cases per 100,000 Asian residents (846 cases). More information and data limitations are available at Public Health-Seattle & King County's COVID-19 Outbreak Summary Data Dashboard and in the chart and map that follow.⁶

The percentage of cases with a suspected exposure from household transmission is 35%, presumed community transmission is 15%, unknown exposure is 14%, workplaces other than health care is 16%, close contact with a confirmed case is 7%, long-term care facility related is 6%, homeless shelter or living homeless is 3%, health care workers are 2%, lost to follow up are 2%, travelers from out of the state are 1% and schools/childcare settings are 0.3%.



Race is missing for 1,817 records, age is missing for 4 records, and sex is missing for 88 records.

⁶ Public Health – Seattle & King County, Daily COVID-19 Outbreak Summary, <https://www.kingcounty.gov/depts/health/covid-19/data/daily-summary.aspx>



This page displays the geographic differences in testing, positivity, hospitalizations, and deaths.

How to use this page:

- Darker shades of blue on the map indicate a higher rate for the selected measure in that geographic area.
- Hover over areas on the map for more details.
- The buttons can be used to switch between 4 different maps: city/town (largest geographic unit), health reporting area, ZIP code, and census tract (smallest geographic area unit).
- Choose a measure to display the rate of testing, positivity, hospitalizations, or deaths.

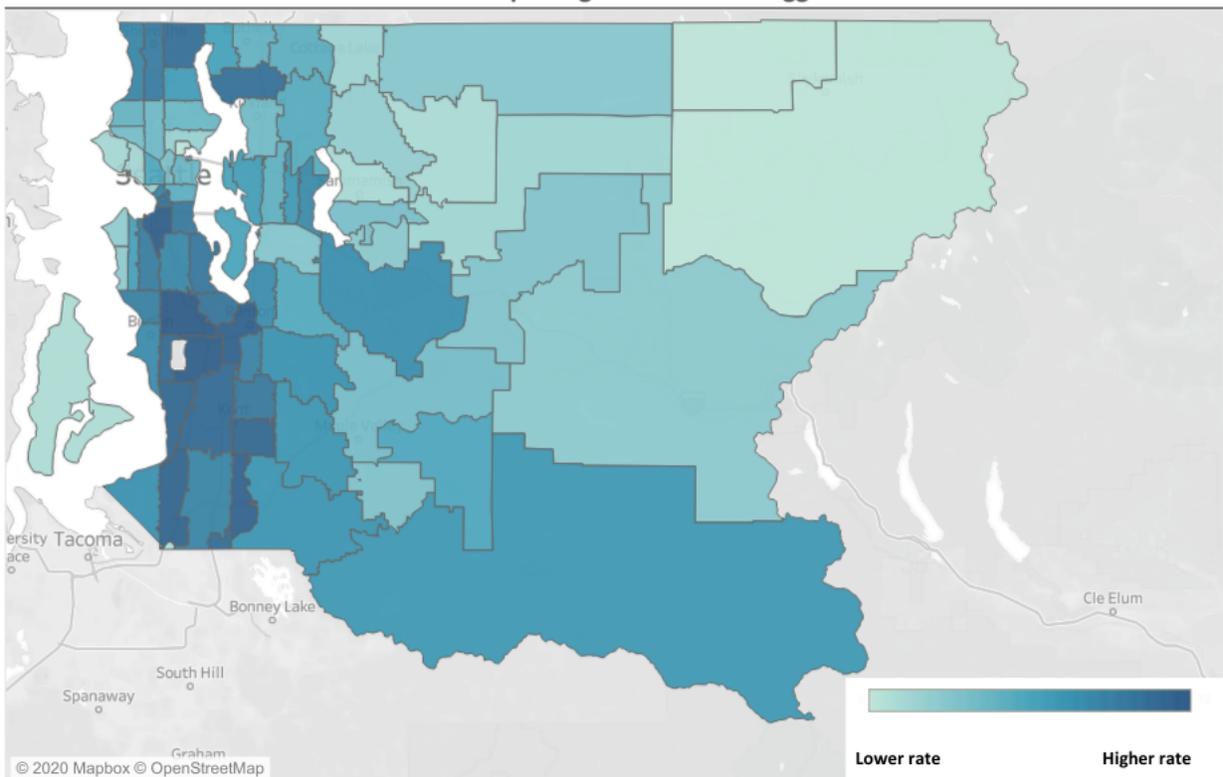
Health reporting areas (HRAs) are neighborhoods that closely align with city boundaries and were created to aid in considering issues related to health status or health policies. More information on HRAs is available here:

<https://www.kingcounty.gov/depts/health/data/community-health-indicators/definitions.aspx>

Note: Records missing addresses or with incorrect addresses are excluded.

City	HRA	ZIP	Census	<input type="radio"/> Tested <input checked="" type="radio"/> Positives <input type="radio"/> Hospitalizations <input type="radio"/> Deaths

Current map shows the **rate of positive cases by ZIP code**.
Select another map using the icons and toggles above.



Overall King County rate of positive cases: 384.4 per 100,000 residents

2. Provide a summary narrative of the COVID-19 testing sites in your county (clinic, hospital, health department, pharmacy, drive up, etc.) and your efforts to communicate with the public about the need to get tested and promote/advertise those sites. In addition, specifically identify sites that serve persons with low-income, no insurance, or underserved and the hours and days of those services.

Public Health – Seattle & King County, the health care delivery system and other partners work together to make COVID-19 testing widely available and testing capacity is growing. For example, on June 13 and 14, 2020, free drive-through COVID-19 testing and essential supplies (e.g., cleaning supplies, diapers, toiletries) will be available all day in Renton and Federal Way locations. On June 10, the greater Seattle Coronavirus Assessment Network (SCAN) resumed testing of home-based, self-collected samples for COVID-19.

The King County COVID-19 call center, 206-477-3977, is available seven days per week from 8 am to 7 pm to assist people without a healthcare provider to access testing sites. The County and partners carry out community outreach and provide public information about the need to get tested. Public Health – Seattle & King County hosts weekly calls in English and Spanish with community-based partners which emphasize public health messages to reduce the spread of COVID-19, including an emphasis on access to testing. Testing is the topic of several widely viewed blog posts on Public Health Insider.⁷ Information for the public on where testing is kept up to date at: <https://www.kingcounty.gov/depts/health/covid-19/care/testing.aspx>

The following locations provide free or low cost COVID-19 testing – regardless of immigration or insurance status. They are open to anyone who cannot access a COVID-19 test through their regular health care provider. Their hours vary and include weekday, evening and weekend options.

Agency	Site	Address	Languages Spoken On-site
City of Seattle	Aurora (North Seattle)	12040 Aurora Ave N., Seattle, WA 98133	Interpretation available
	SODO (South Seattle)	3829 6th Ave South Seattle, WA 98108	Interpretation available
HealthPoint	Kent Urgent Care	219 State Ave N. (#100) Kent, WA 98030	Spanish; interpretation available
	Auburn	123 Auburn Ave Auburn, WA 98002	Russian, Spanish, Ukrainian; interpretation available
	Renton Office	955 Powell Ave SW Renton, WA 98057	Spanish; interpretation available

⁷ “COVID-19 Testing is Increasingly Available in King County,” *Public Health Insider*, May 12, 2020, <https://publichealthinsider.com/2020/05/12/covid-19-testing-is-increasingly-available-in-king-county/>

Agency	Site	Address	Languages Spoken On-site
International Community Health Services (ICHS)	International District Clinic	720 8th Ave S. Seattle, WA 98104	Cantonese, Mandarin, Toisanese, Vietnamese; interpretation available
	Shoreline Clinic	16549 Aurora Ave N. Shoreline, WA 98133	Cantonese, Korean, Mandarin, Vietnamese; interpretation available
Neighborcare Health	Meridian (North Seattle)	10521 Meridian Ave N. Seattle, WA 98133	Amharic, Somali, Spanish, Tagalog, Vietnamese; interpretation available
	Rainier Beach (South Seattle)	9245 Rainier Ave S. 2nd Floor Seattle, WA 98118	Amharic, Arabic, Cham, French, Malay, Somali, Spanish, Tagalog, Tigrinya, Vietnamese; interpretation available
	High Point (West Seattle)	6020 35th Ave SE, 1st Floor Seattle, WA 98126	Amharic, Arabic, Cambodian, Oromo, Russian, Somali, Spanish, Ukrainian; interpretation available
	Vashon Island	10030 SW 210th St Vashon Island, WA 98070	Interpretation available
SeaMar Community Health Centers	South Park	8720 14 th Ave S Seattle, WA 98108	Spanish; interpretation available
	Federal Way	31405 18 th Ave S Federal Way, WA 98003	Korean, Spanish; interpretation
University of Washington Mobile Clinic	Rainier Beach High School	8815 Seward Park Ave S Seattle, WA 98118	Interpretation available
	South Seattle College	6000 16 th Ave SW Seattle, WA 98106	Interpretation available
	Auburn City Adventist Church	402 29 th St SE Auburn, WA 98002	Interpretation available
Vashon BePrepared	Vashon Island	Call for appointment	Spanish interpretation available

3. The *median* number of days from onset of illness to COVID-19 specimen collection date for the cases identified in your county over the past 4 weeks. The ideal target is a median number of ≤ 2 days.

The median number of days from onset of illness to COVID-19 specimen collection is 4 days over the past 4 weeks.⁸

4. For each of the previous 4 weeks, report the total number of COVID-19 tests reported for the county, the number of negative and number of positive test results, percent positive, and what 50 times the number of positive tests would be. In addition, report the percent positive of all tests for the four-week period. The *ideal* target is to perform about 50 tests per case and have a percent positivity no more than 2%.

- a. Week 1 (May 31 to June 6, 2020): Total # of tests, # of negative tests, # of positive tests, percent positive, by test collection date. Ideal target: 50 times the number of positive tests.

Total # of tests	# of negative tests	# of positive tests	% positive	50 x # of positive tests
Week 1: May 31 to June 6, 2020				
10,009	15,057	252	1.6%	12,600

- b. Repeat for weeks 2, 3, and 4.

Total # of tests	# of negative tests	# of positive tests	% positive	50 x # of positive tests
Week 2: May 24 to May 30				
11,873	11,584	289	2.4%	14,450
Week 3: May 17 to 23, 2020				
12,077	11,898	302	2.5%	15,100
Week 4: May 10 to 16, 2020				
12,739	12,386	425	3.3%	21,250

- c. For the 4 weeks: total # positive tests/total # of tests = percent positive.

In the last 4 weeks, since May 10, 2020, there have been 1,268 positive tests out of 51,994 total tests which is 2.4% positive.

5. The local health jurisdiction’s resources to perform case investigations and contact tracing using *statewide standardized* COVID-19 case and contact investigation protocols.

- a. The calculation showing how many case and contract tracers are needed for the county’s population, assuming a *minimum* of 15 contact tracers for every 100,000 population.

Show the calculation: county population/100,000 x 15 = #.

King County’s population is 2,252,782/100,000 x 15 = 338.

⁸ Public Health – Seattle & King County COVID-19 Key Indicators Dashboard, <https://www.kingcounty.gov/depts/health/covid-19/data/key-indicators.aspx>

- i. **The number of health department staff *trained and ready* to perform case investigations and contact tracing, as well as their job classifications. The total number should then be equated to full-time equivalent staff.**
Public Health – Seattle & King County currently has 22 individuals trained and performing contact tracing (22 FTEs) and another 83 staff are involved with case and outbreak investigations (83 FTEs). DOH contact tracers fill the gap for King County contact tracing during the county’s transition to build more capacity in July. Job classes include Disease Research Investigative Specialists, Education Specialists, Administrators, Program/Project Managers, Public Health Nurses, Administrative Specialists, Nurse Practitioners, Epidemiologists, Research Assistants, Health & Environmental Investigators, Veterinarians and Regional Health Administrators.
- ii. **The number of other county/city government staff *trained and ready* to perform case investigations and contact tracing. The total number should then be equated to full-time equivalent staff.**
There are now 0 other city/county staff trained and ready to perform case investigations and contact tracing, but the City of Seattle has offered more than 75 FTEs and several will be trained in upcoming months.
- iii. **The number of volunteers or non-governmental employees *trained and ready* to perform case investigations and contact tracing. The total number should then be equated to full-time equivalent staff.**
PHSKC will contract with federally qualified health centers, such as SeaMar Community Health Centers (up to 10 FTEs), to offer more in-language contact tracing capacity. PHSKC is recruiting additional non-governmental employees through the King County Jobs website and through the Public Health Reserve Corps.
- iv. **Subtotal of those trained and ready, using the full-time equivalent number.**
105 FTEs at the health department, plus DOH case investigators and contact tracers, and the training process for other county/city staff is underway.
- v. **The number of persons (from all sources) in the pipeline to be trained in the next 4 weeks. The total number should then be equated to full-time equivalent staff.**
27 new FTEs will be trained in the next 4 weeks.
- vi. **The gap between the minimum of 15/100,000 and the trained and to be trained personnel, using the full-time equivalent number. A plan for filling that gap, which could include a request for staff trained by the state.**
Because of the high need for contact tracing, PHSKC is acting to scale up contact tracing staff quickly. PHSKC will continue to deploy staff as required to respond to COVID-19 and has developed the capacity to add and train approximately 20 new contact tracing FTEs weekly and training capacity is continuing to grow. PHSKC is discussing with the City of Seattle the potential for training and utilizing between 75-100 FTEs.
- vii. **If the local health jurisdiction is making use of non-local health jurisdiction**

resources for this purpose, those other entities supplying the resource (e.g., community nonprofit, volunteer organization, Washington State Department of Health, etc.) must provide a letter certifying that they have the resources noted to assist the local health jurisdiction with case and contact investigations.

Washington State Department of Health is assisting with case and contact tracing.

- b. **The total number of cases identified over the past 2 weeks and the percentage of cases reached by phone or in person within 24 hours of receipt of positive lab test report (the *ideal target* is 90%).**

The total number of cases identified in King County over the past 2 weeks is 697. 336 had contact tracing from PHSKC and 361 had contact tracing from DOH. PHSKC contacted 87% within the first 24 hours and 89% within 2 days.

- c. **The total number of close contacts identified over the past 2 weeks and the percentage of contacts reached by phone or in person within 48 hours of receipt of positive lab test report on a case (the *ideal target* is 80%).**

The total number of close contact identified over the past 2 weeks by the PHSKC-followed cases was 941 and 89% were reached by phone within 48 hours of the case interview.

- d. **For cases, are you currently reaching out to them *daily* throughout their isolation period via a combination of phone calls and electronic means (e.g., text) to check on their overall status and ability to successfully isolate? If so, for how long have you been doing the daily contacts and what percent of your cases over the last week have you made daily contact with (the *ideal target* is 80%)?**

King County is pilot testing daily check-ins with cases and is exploring texting options. The pilot project began on June 9, 2020 in preparation for scaling up daily check-ins starting in July for all cases. In the interim, PHSKC reaches out every two days to cases during their isolation period.

- e. **For contacts, are you currently reaching out to them daily through a combination of phone calls and electronic means (e.g., text) to check on symptom development and their ability to successfully self-quarantine? If so, for how long have you been doing the daily contacts and what percent of your contacts over the last week have you made daily contact with (the *ideal target* is 80%)?**

DOH assists King County contact tracers with case contacts. DOH began daily check-ins with contacts on June 6, 2020. Texting options for contact daily monitoring are also being considered.

- f. **Does the department conduct full case and contact investigations 7 days a week, every week?**

Yes.

6. **The number and type of isolation/quarantine facilities secured to house persons with COVID-19 who do not have a home or otherwise wish to isolate or quarantine themselves outside of their home, if it becomes necessary. For each facility list:**

- a. Facility name
- b. Type (e.g., hotel/motel, apartment building, university dorm, county fairgrounds, etc.).

- c. Number of rooms/people it can house for:
 - i. isolation,
 - ii. quarantine, or
 - iii. either isolation or quarantine
- d. Number of cases and contacts currently in your isolation and quarantine facilities
- e. Time period for which the space has been secured
- f. If there is a clause for extension/renewal of that space, the terms of that extension
- g. Services provided (e.g., housing, laundry, food, etc.) and by whom (e.g., the motel/hotel, a nonprofit, etc.)

Facility name	Type	# of rooms for isolation, quarantine or either	# of cases or contacts in the facility, 6/12/20	Secured until, and extension clause	Services provided and by whom
Aurora 1132 N. 128th Street Seattle, WA	Hotel	24 beds for isolation or quarantine	12	King County owned	See responses to 6.g. below
Eastgate (assessment and recovery) 13620 Eastgate Way Bellevue, WA 98005	Modular structure, in standby	70 isolation, 70 quarantine	0	August 2021, no extension clause	
Issaquah 1801 12th Ave, Issaquah, WA 98027	Hotel	100 for isolation or quarantine	26	March 2021, extension in discussion	
Kent 1233 Central Ave N, Kent WA	Hotel	83 for isolation or quarantine	3	King County owned	
Shoreline (assessment and recovery) 19030 1st Ave NE Shoreline, WA 98155	Modular structure, in standby	70 isolation, 79 quarantine	0	June 2020, extension in discussion	
SoDo (assessment and recovery) 1045 6th Ave South Seattle, WA	Warehouse, decommissioned	150 isolation, 150 quarantine	0	June 2023, extension possible	
White Center 206 SW 112th St. Seattle, WA	Modular dorms, in standby	32 for isolation or quarantine	0	King County owned	

Responses to question 6.g.: All sites have county-provided health care, behavioral health services, food, support filling prescriptions, clothing (if needed), laundry, as well as transportation and housing navigation (if needed) at beginning and end of stays.

7. **Describe how the health department provides or links persons in *home* isolation or quarantine with needed services they cannot otherwise obtain without going out for on their own (e.g., food, medications, etc.). In this description, include:**
- a. **Who does this work (e.g., health department case investigator, contract with specific agency, etc.)?**
PHSKC staff in partnership with the Red Cross provide King County residents in home isolation or quarantine with needed services, such as food, medications, basic medical supplies and essential items, such as diapers and disinfectant wipes.
 - b. **How are referrals made to that agency, if other than health department?**
A single point of contact at PHSKC (the Isolation & Quarantine Coordinator in the Health and Medical Area Command) emails four designated contacts at the Red Cross when services are needed. The Red Cross staff work with a network of volunteers to deliver the services. PHSKC serve as a back up to make deliveries when volunteers are unable to do so.
 - c. **How it is ensured that the referral agency connects with the client?**
Volunteers from the Red Cross pick up gift cards and shopping lists from PHSKC staff, make the food or medication deliveries and return receipts to the PHSKC staff. The staff record the deliveries in a database that is shared with the case investigators.
8. **Describe the health department’s capacity to conduct outbreak investigations and technical assistance in congregate living settings (e.g., skilled nursing facilities, jails, multiple-family housing buildings, etc.) and workplaces (e.g., food processing facility, manufacturing plant, office building, etc.). These plans should describe:**
- a. **The number and type of staff who are trained to conduct outbreak investigations.**
PHSKC has 83 staff working on clusters/outbreak investigations in congregate settings. This includes 12 FTEs focusing on long-term care facilities and 28 FTEs focusing on shelters and organizations serving people living homeless. The types of staff include disease investigators, public health nurses, administrative staff, veterinarians, education specialists and others.
 - b. **Resources to rapidly conduct testing of all residents and/or workers at the facility. Include if the department retains a reserve supply of sample collection kits and, if so, how many are held in reserve. Also note who conducts the testing and, if you use outside resources to do that, details about the arrangement(s).**
The PHSKC COVID-19 Mobile Assessment Team (MAT) which can be deployed to various settings experiencing outbreaks consists of 1 supervisor, 1 public health charge nurse, 1 health care assistant, 4 part-time agency nurses, and 2 Community Health Services home visiting public health nurses. This team may be expanded if needed.

Testing in homeless service sites is conducted by the MAT, Harborview Medical Center, Medical Teams International, Neighborcare Health, PHSKC Mobile Medical Van, and the Seattle Flu Study. PHSKC serves as the coordinating body and is responsible for convening partners, establishing the testing strategy, maintaining a shared reactive and proactive testing schedule, and assigning partners to test at specific homeless service sites and encampments.

PHSKC is also coordinating testing across all long-term care facility (LTCF) types, serving as the coordinating body establishing the testing strategy, maintaining a simultaneous reactive and proactive testing schedule, and assigning partners to test at LTCFs. Testing is conducted by health system partners including University of Washington, CHI-Franciscan, Multicare, Kaiser Permanente and others; the Seattle Fire Department, Puget Sound Fire, and MAT. PHSKC is coordinating with state agencies and long-term care facilities to implement the DOH testing order to complete testing in all nursing homes and all Assisted Living Memory Care units. Point prevalence surveys have been completed in all 52 nursing homes in King County and 19 of the 58 memory care units. PHSKC is contacting all other Assisted Living Memory Care units to offer technical assistance and connecting these facilities to testing partners; none of these facilities has yet received test kits and PPE from DOH for this purpose. When they do, it will ease demand for these items from PHSKC. PHSKC has nearly completed a pilot to test 60 of the 1,200 Adult Family Homes in the County. Key partners in this effort include Seattle Fire Department, the Adult Family Home Council and the State Long Term Care Ombudsman.

PHSKC has on hand or expected in upcoming weeks adequate supply of nasal and nasopharyngeal swabs and viral transport media to meet County-supplied services for the next 3 months, expecting moderate increases in testing (n=10,650 as of 6/2, with 10,000 more delivered the week of June 7). We however do not have enough PPE (specifically, fit tested N95 masks and gowns) for a significant surge in facility-based testing.

c. Any community or state resources relied upon to conduct these investigations.

The health department is working with WA DOH staff on developing processes for investigations, including procedures for conducting investigations of businesses with employees from other local health jurisdictions/states and businesses that operate in more than one county or state, such as the fishing industry. The state Department of Labor & Industries and its Division of Occupational Safety and Health is a key partner in outbreak investigations as well.

9. For each of the last 4 weeks, report the number of outbreaks, the facility name, and type using an outbreak definition of 2 or more non-household cases epidemiologically linked with 14 days in a workplace, congregate living, or institutional setting, and for each facility, the number of cases associated with that outbreak.

In the last 4 weeks, PHSKC has investigated 39 outbreaks: 15 in long-term care facilities, 8 in congregate living settings, 6 in workplaces, 3 in childcare centers, 4 in supportive housing facilities, 1 in an outpatient facility and 1 in homeless shelter. Lists of the long-term care facilities are available online in the Long-term Care Data Dashboard.⁹

Type of facility	Week of May 10	Week of May 17	Week of May 24	Week of May 31
Long-term care facility	7	5	0	3
Congregate living housing (shared kitchen/bathroom)	4	4	0	0

⁹ PHSKC, Long Term Care Data Dashboard, <https://www.kingcounty.gov/depts/health/covid-19/data/LTCF.aspx>

Type of facility	Week of May 10	Week of May 17	Week of May 24	Week of May 31
Workplaces	1	1	3	1
Childcare centers	1	0	2	0
Supportive housing	3	1	0	0
Outpatient facility	0	0	0	1
Shelter	1	0	1	0
Total	17	11	6	5

10. If COVID-19 is disproportionately affecting low income communities or communities of color in your county, what are your plans to protect these populations?

In King County, COVID-19 both affects everyone and has been disproportionately affecting low-income and communities of color. The infection rates for Pacific Islanders are 4.1 times higher than for White residents; 3.7 times higher for Latinx, 2.5 times higher for Black, 1.5 times higher for American Indians and 2% lower for Asian residents. In absolute terms, Whites have experienced the greatest number of COVID-19 infections, with 2,767 White people affected. The number of Latinx residents with COVID-19 is second highest at 1,791 cases, Asian residents have had 846 infections, Black residents have had 772 cases, 167 Pacific Islanders have had COVID-19 and 42 American Indians have.¹⁰

When COVID-19 cases are shown on zip code or census tract maps of King County, they are disproportionately higher in locations with lower average incomes.

The COVID-19 response in the county has addressed the greater risks of communicable disease faced by low-income and communities of color in the following ways:

- COVID-19 public information is offered in 33 languages online at www.kingcounty.gov/covid.
- Weekly webinars for community and faith-based organizations.
- Weekly webinars in Spanish for community-based organizations.
- Webinars in partnership with the City of Seattle were offered in 8 languages.
- Anti-hate and anti-stigma toolkit is available online.
- Additional culturally-specific outreach and communications campaigns are in place with Pacific Islanders, Latinx, Black and American Indian community-based organizations to reach more County residents in these communities.
- Outreach, in partnership with the Department of Community and Human Services and community-based organizations, has been extensive among people living without housing and housing has been secured when needed.
- In the Long-Term Care Facilities response, adult family homes, which are often operated by lower income and/or people of color, have been a focus of COVID-19 containment and mitigation work.

Communications and intervention strategies co-created with people affected and at risk of COVID-19 have been developed and PHSKC plans to continue to work in 50/50 partnerships, including

¹⁰ PHSKC Race and Ethnicity Data Dashboard, <https://www.kingcounty.gov/depts/health/covid-19/data/race-ethnicity.aspx>

compensation, with Black, Indigenous and People of Color and with all residents in low-income and in rural areas.

In addition, the Pandemic Community Advisory Group was convened in early March 2020, as one new way the health department can work directly with representatives from community, business, and government sectors who are working together to help slow the spread of COVID-19 by accelerating the use of mitigation strategies. Committed to two-way communication, the Advisory Group meets weekly to share information and urge action within their respective networks. The Advisory Group informs Public Health on what they are seeing on the ground – both challenges and opportunities. The Advisory Group works to help prevent, interrupt, and respond to misinformation and stigma. Meeting materials are at: <https://www.kingcounty.gov/depts/health/covid-19/workplaces/pandemic-community-advisory-group.aspx>

The County is also working with partners to stand up a paid public education campaign to specifically target populations that are disproportionately being infected by COVID-19.

These strategies will emphasize community strengths and demonstrated resilience in the face of health and other harms.

V. Appendixes

Appendix A: Recommendation from King County Local Health Officer

To be added on Monday morning.

Appendix B: King County Board of Health vote, resolution/motion and vote totals

To be added on Monday afternoon.

Appendix C: Letter from King County leadership

To be added on Monday afternoon.

DRAFT

Appendix D: King County Hospital PPE Responses

From: Juaton, Christopher <cjuaton@seattlecca.org> On Behalf Of McDonnell, Terry
Sent: Tuesday, June 2, 2020 11:04 AM
To: Barnhart, Scott <n-sbarnhart@kingcounty.gov>
Subject: Seattle Cancer Care Alliance Response: Hospital attestation to support King County Phase 2 application
Importance: High

Dear County Executive Constantine:

The Seattle Cancer Care Alliance certifies that according to the current PPE conservation strategies, no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse, or extended use, according to the DOH guidelines found here: <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Warmly,

Terry McDonnell, DNP, ACNP-BC
Vice President of Clinical Operations & Facilities / Chief Nurse Executive
O: (206) 606-2266



825 Eastlake Ave. E.
P.O. Box 19023
Seattle, WA 98109-1023
www.seattlecca.org



On 6/2/20, 9:58 AM, "DeBord, Thomas" <Thomas.DeBord@overlakehospital.org> wrote:

Dear County Executive Constantine:
Overlake Medical Center and Clinics certifies that the hospital and clinics are following all recommendations for PPE conservation strategies for our staff and providers as outlined in the PPE guidance on reuse or extended use in this attached guidance: <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,

Thomas A. DeBord, FACHE
Chief Operating Officer

Overlake Medical Center

Thomas A. DeBord, FACHE
Chief Operating Officer
Overlake Medical Center
p: 425-688-5479
c: 330-289-0246

From: Theresa Braungardt <Theresa_Braungardt@Valleymed.org>
Sent: Tuesday, June 2, 2020 9:51 AM
To: Barnhart, Scott <n-sbarnhart@kingcounty.gov>
Cc: Deborah Hunt <Deborah_Hunt@Valleymed.org>; James Park <James_Park@Valleymed.org>
Subject: Hospital attestation to support King County Phase 2 application

Dear County Executive Constantine:

UWM|Valley Medical Center (Public Hospital District No. 1 King County) certifies if or when the hospital(s) use PPE conservation strategies no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance:<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,

Theresa Braungardt

Theresa Braungardt, MN, RN, NE-BC
Senior Vice President, Patient Care Services/
Chief Nursing Officer
UW Medicine, Valley Medical Center
400 South 43rd St
Renton, WA 98058
425-228-3440 x5517
cell 253-394-3279



From: Chapman, Katerie <Katerie.Chapman@virginiamason.org>
Sent: Tuesday, June 2, 2020 9:49 AM
To: Barnhart, Scott <n-sbarnhart@kingcounty.gov>
Cc: VM Command Center <VMCommandCenter@virginiamason.org>
Subject: PPE Attestation
Importance: High

Dear County Executive Constantine:

Virginia Mason Medical Center certifies that when the hospital uses PPE conservation strategies, no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance: <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,
Katerie Chapman
Incident Commander

Katerie Chapman
Senior Vice President and Hospital Administrator

1100 Ninth Ave., GB-ADM | Seattle, WA 98101
(206) 341-1208 phone | (206) 233-6976 fax
VirginiaMason.org

From: "Woolley, Russell" <RussellWoolley@chifranciscan.org>
Date: Tuesday, June 2, 2020 at 9:45 AM
To: "Barnhart, Scott" <n-sbarnhart@kingcounty.gov>
Cc: "Newton, Eileen (Tacoma)" <EileenNewton@chifranciscan.org>, "Reindel, Dena" <DenaReindel@chifranciscan.org>, "Black, Toni" <ToniBlack@chifranciscan.org>, "Ananth, Aparna (Tacoma)" <AparnaAnanth@chifranciscan.org>
Subject: PPE Attestation Highline Medical Center

Dear County Executive Constantine:

Highline Medical Center certifies if or when the hospital(s) use PPE conservation strategies no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance: <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,

Russ

Russell J. Woolley
Chief Operating Officer

CHI Franciscan Health, Highline Medical Center
16251 Sylvester Rd SW Seattle, WA 98166
Office: 206.431.5237 RussellWoolley@CHIFranciscan.org



King County Executive Dow Constantine
King County Chinook Building
401 5th AVE. Suite 800
Seattle, WA 98104
Dear County Executive Constantine:

EvergreenHealth certifies if or when the hospital use PPE conservation strategies no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance:<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

At times N95's may be stored in clean plastic containers or breathable paper bags and are moving to all breathable bags.

Sincerely,
Ettore Palazzo, MD, Mary Shepler, RN, BSN, MA, NEA-BC,
Chief Medical & Quality Officer Chief Nursing Officer



June 2, 2020

Dow Constantine, King County Executive
King County Chinook Building
401 5th Ave. Suite 800
Seattle, WA 98104

Dear Executive Constantine,

Harborview Medical Center certifies if or when the hospital uses PPE conservation strategies, no staff person is wearing any one N95 respirator or surgical mask for longer than one shift and that they are following PPE guidance on reuse or extended use in this guidance:

<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,

Paul Hayes, RN
Chief Executive Officer
Harborview Medical Center
PO Box 359735
Seattle, WA 981

Dear County Executive Constantine:

St. Francis Hospital certifies if or when the hospital(s) use PPE conservation strategies no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance:

<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>

Sincerely,

Dino Johnson RN, MHA, BSN
Chief Operating Officer
St Francis Hospital
34515 9th Ave. S. Federal Way, WA 98003 | MS 21-01
P 253.944.4312 | I 125.4312 | F 253.944.7988

From: Erik Walerius <ewaleriu@uw.edu>
Date: Tuesday, June 2, 2020 at 9:13 AM
To: "Barnhart, Scott" <n-sbarnhart@kingcounty.gov>
Subject: Hospital attestation to support King County Phase 2 application

Dear County Executive Constantine/ Scott Barnhart:
UW Medicine certifies if or when our hospitals use PPE conservation strategies no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that we are following PPE guidance on reuse or extended use in this guidance:<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,
Erik Walerius
Erik Walerius

Chief Supply Chain Officer
Supply Chain | **UW Medicine**
7543 63rd Ave NE, Bldg 5B | Box 359795 | Seattle, WA 98115
EMAIL: ewaleriu@uw.edu **WEB:** uwmedicine.org



From: Janet Huff <Janet.Huff@cascadebh.com>
Date: Tuesday, June 2, 2020 at 8:47 AM
To: "Barnhart, Scott" <n-sbarnhart@kingcounty.gov>
Subject: hospital attestation regarding PPE reuse & conservation

Dear County Executive Constantine:

Cascade Behavioral Health Hospital certifies if or when the hospital uses PPE conservation strategies that no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance: <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,

Janet Huff, RN

Director of Risk and Quality
Cascade Behavioral Health Hospital
12844 Military Road South
Tukwila, WA 98168
Ph: 206-248-4541
Fax 206-243-7002

"Excellence is doing ordinary things extraordinarily well"
-John W. Gardner

From: "Yanchura, Renee (Tacoma)" <ReneeYanchura@chifranciscan.org>
Date: Tuesday, June 2, 2020 at 8:28 AM
To: "Barnhart, Scott" <n-sbarnhart@kingcounty.gov>
Cc: "Newton, Eileen (Tacoma)" <EileenNewton@chifranciscan.org>
Subject: PPE Attestation St. Elizabeth Hospital

Dear County Executive Constantine:

St. Elizabeth Hospital certifies if or when the hospital(s) use PPE conservation strategies no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance: <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,

Renee Yanchura
VP of Operations/ COO
St. Elizabeth Hospital
1455 Battersby Ave.
Enumclaw, WA. 98022

Renee Yanchura
VP Operations
Chief Operating Officer
St. Elizabeth Hospital

From: Shannon Stone <sh0905stone@yahoo.com>
Date: Monday, June 1, 2020 at 7:24 PM

To: "Barnhart, Scott" <n-sbarnhart@kingcounty.gov>

Subject: Kindred Hospital

Dear County Executive Constantine:

Kindred Hospital LTAC certifies if or when the hospital uses PPE conservation strategies, no staff person is wearing any one N95 respirator or surgical mask for longer than one shift. We are following PPE guidance on reuse or extended use in this guidance: <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,

Shannon Stone, DNP, RN
CCRN-K, SCRNP, PCCN-K, CNML, NEA-BC
Chief Clinical Officer

Kindred Hospital of Seattle
1334 Terry Ave
Seattle, WA 98101
915.497.8934 cell

June 2, 2020

Dear County Executive Constantine:

Kaiser Permanente Washington) certifies if or when the hospital uses PPE conservation strategies no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance: <https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,


Janet O'Hollaren, MHA
Chief Operating Officer
Kaiser Permanente Washington



2 June, 2020

Dear County Executive Constantine:

Swedish Health Services certifies the hospital(s) use PPE conservation strategies so that no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use as per this guidance:
<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,



Lynn Welling, MD
Regional Chief Clinical Officer
Swedish Health Services

From: McDonald, Ruth <ruth.mcdonald@seattlechildrens.org>
Sent: Tuesday, June 2, 2020 1:28 PM
To: Planning Section Chief - HECC <PlanSC.HECC@nwhrn.org>
Cc: Lindsey, Katherine <katherine.lindsey@seattlechildrens.org>
Subject: FW: TIME SENSITIVE - ACTION NEEDED: Hospital attestation to support King County Phase 2 application
Importance: High

Dear County Executive Constantine:

Seattle Children's certifies if or when the hospital(s) use PPE conservation strategies no staff person is wearing any one N95 respirator or surgical mask for longer than one shift, and that they are following PPE guidance on reuse or extended use in this guidance:
<https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/PPE-Reuse.pdf>.

Sincerely,
Ruth A. McDonald

Ruth A McDonald, MD
VP and Chief Medical Officer Hospital Operations (interim), Seattle Children's
Professor of Pediatrics, University of WA



MultiCare Health System

820 A Street, Tacoma, WA 98402

PO Box 5299, Tacoma, WA 98415-0299 ~ multicare.org

June 2, 2020

TO: Public Health – Seattle and King County
SUBJECT: MultiCare’s King County hospitals meet DOH criteria

MultiCare Health System attests that all MultiCare Hospitals in King County including MultiCare Auburn Medical Center and MultiCare Covington Medical Center meet the following criteria from the Washington Department of Health’s COVID-19 County Variance Plan: Moving from Phase 1 to Phase 2, Section 1c:

- i. We have the ability to accommodate a 20 percent increase in suspected or confirmed COVID-19 hospitalizations.
- ii. We report on a daily basis, including weekends, the data requested by DOH that we have access to. We are diligently working on collecting the remaining data.
- iii. We have a 14-day supply on-hand of PPE, including N-95 respirators, surgical masks, face shields, gloves and gowns. Please note that some of our glove supply is stored with our vendor.
- iv. We are using PPE conservation strategies. Those practices are in compliance with DOH guidance on PPE reuse including directing staff to not wear a mask longer than one shift.
- v. COVID-19 patients account for fewer than 10 percent of our inpatient population.

Thank you.

William G. “Bill” Robertson
President and CEO
MultiCare Health System



King County

King County Board of Health

Staff Report

Agenda item No:

Date: June 15, 2020

Prepared by: Susie Levy

SUBJECT

A Resolution supporting King County's application to the Washington State Department of Health to enter Phase 2 of the Safe Start Reopening Plan.

SUMMARY

On May 1st, Governor Jay Inslee announced the Safe Start Reopening Plan which implements a phased approach to re-opening all aspects of public life. The State's plan creates four phases that gradually increase activities based on the prevalence of disease and the ability to mitigate community transmission of the virus. King County is currently operating under a modified Phase 1, which allows for limited openings for recreation, social activities, and business. Nearly all types of activities that are allowed in Phase 2 are currently allowed in the modified Phase 1 at lower capacities and with 30-minute time limits for indoor real estate, professional services, and retail services.

Dr. Jeff Duchin, King County Health Officer, has determined that the County has sufficiently met key indicators and recommends that King County apply to move to Phase 2. The attached application outlines the key metrics required by the state for consideration, including King County's status on each metric and the County's ability to mitigate community transmission.

The King County Board of Health has a specific role in reopening the county. A county's ability to move into each phase of reopening is dependent upon meeting specific benchmarks as identified by the state. The process outlined in the Safe Start Reopening Plan includes:

- The Local Health Officer makes a recommendation when key criteria are sufficiently met to move forward to the next phase.
- The local board of health is tasked with passing a resolution to support the recommendation and application of the local health officer.
- The County Executive submits the application to the state.

The attached resolution serves to meet that requirement, and if passed will be submitted with the application to the state by the Executive.

ATTACHMENTS

1. Resolution XX
2. Application for Phase 2