



Town of Beaufort, NC

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Town of Beaufort Board of Commissioners Special Meeting: COVID-19 4:00 PM Wednesday, November 04, 2020 - Zoom Minutes

Call to Order

Mayor Newton called the meeting to order at 4:00.

Roll Call

Mayor Newton conducted Roll Call and declared a quorum present for the meeting.

Members Present: Commissioner Hagle, Commissioner Hollinshed, Commissioner McDonald, Commissioner Harker, Commissioner Carter

Agenda Approval

Items for Discussion and Consideration

1. COVID-19 Update

Mayor Newton introduced Mr. Sam Gibbs, Deputy Secretary, North Carolina Department of Health and Human Services.

Sam Gibbs thanked Mayor Newton for the invitation to speak. Mr. Gibbs spoke about known hotspots throughout the state. He said that in the spring, COVID was focused around congregative living facilities like nursing homes. At that time, there was an overall shortage across the state of PPE and testing capabilities. He explained that at this time, there is no shortage of PPE or testing capabilities. He noted the next outbreak was in the agriculture field. The state worked closely with the Department of Agriculture. He pointed out that the virus spreads easily and early intervention is key.

Mr. Gibbs explained that the virus has moved to rural North Carolina which, up to this point, has been pretty shielded from the outbreak. He said that if you look at Carteret County and Beaufort's numbers, you will see that they are steadily going up. Another area a lot of spread is coming from is small gatherings. He blames this in part to COVID fatigue. He said another area of spread is religious gatherings.

Mr. Gibbs said the best way to slow the spread is to follow the three Ws – wear a mask, wait six feet apart, and wash hands frequently. Until we get a vaccine to help with herd immunity, noting 60-70% of the population would need to be immune, those preventative measures are key. The state's focus has been educating people, noting that wearing a mask isn't necessarily for the

individual as much as it is the community. He noted a lot of advertising regarding the three Ws. Mr. Gibbs said that 95% compliance with mask wearing would help tremendously with stopping the spread of the virus. He pointed out the younger generation likes to congregate and highlighted a need to target those groups.

Mr. Gibbs then discussed a new smartphone application, SlowCOVIDNC. The application is compatible with both Android and iPhones and works through Bluetooth. The app uses Bluetooth similar to a radio frequency that allows the phones to exchange random codes. If one particular phone has been exposed to COVID, the application will push notifications to other phones that have been in close proximity to a confirmed positive COVID case. The application was initially launched at the higher education level when universities were resuming classes. He said that over 300,000 people have downloaded the app at this time.

Mr. Gibbs then discussed a special unit that was formed in the Unified Command Center called the Op-9 Team. It's 9 counties that were hotspots initially. They used some CDC guidelines, cases per 100,000 population. He explained that while Beaufort has nowhere near 100,000 residents, if you scale the number, Beaufort is at about 236/100000; the state is at 135. He noted that Beaufort is considerably higher than the rest of the state. The CDC recommends keeping that number below 100/100,000.

Mr. Gibbs then referenced a letter recently sent to counties and municipalities with high case rates. He applauded Beaufort's efforts early on in the pandemic. He explained that municipalities have the authority to take additional measures. He said that enforcement is a big one and added that the state has an anonymous tip line for people to file complaints for noncompliance with mask mandates. Another option would be implementing more restrictive curfews. He added that bars are open at limited capacity and people frequently congregate at these spaces. Third, he suggested reaching out to community leaders. He then told the Board about a faith-based toolkit that is available online to help educate and inform religious leaders. He then told a story of a conversation with a church pastor with a young (29 years old) member of his congregation who contracted COVID-19 passed away before the birth of his child. He emphasized that the most effective way to get people's attention is through personal stories. He noted that most people who get COVID will be fine, however, we do not know who will be affected and who will not. Mr. Gibbs then shared his own experience with COVID-19 when his daughter contracted the virus and had to be hospitalized for five days with a double pneumonia. He said that the more stories we share of personal experiences, the more people will take the virus seriously.

Mr. Gibbs said that he would be happy to help the Town in any way possible. He said that the things we do now as we approach the winter months will largely impact the state's ability to fully reopen.

Mayor Newton thanked Mr. Gibbs for his time and asked the commissioners for any questions.

Commissioner Hagle did not have any questions, but said that this should be a county effort, not just the Town of Beaufort.

Commissioner Hollinshed did not have any questions and thanked Mr. Gibbs for the update.

Commissioner McDonald had no questions.

Commissioner Harker did not have any questions. She then thanked Mr. Gibbs for taking the time to communicate with the mayor and keep him informed.

Commissioner Carter had no questions and thanked Mr. Gibbs for participating in the meeting.

Mayor Newton thanked him again for his time.

Mr. Gibbs wished the Board a safe holiday season. He added that the state is working on pushing out guidance on safe holiday gatherings that should be coming out soon.

Mayor Newton introduced Stephanie Cannon, Health Director, Carteret County Health Department.

Ms. Cannon thanked the Board for the opportunity to speak. She noted that the health department is experiencing COVID fatigue but explained that COVID is not going away any time

soon. She shared that she hoped to reiterate simple, powerful actions that the community can take to slow/prevent the spread of COVID-19

Ms. Cannon said that as of today, Carteret County has 1,417 confirmed cases with 5 COVID hospitalizations at Carteret Health Care. The majority of confirmed cases are in the 25-49 year and 50-64-year age groups. Together the two represent roughly 60% of confirmed cases in the county. In the month of October, those age groups represent 60% of confirmed cases. In October, she noted an increase in cases in the 65 and older category. Overall that age group represents about 18% of confirmed cases. In October that age group represented 23% of confirmed cases. One age group less impacted is the 0-17 age group – 11% overall and in the month of October. She noted school system efforts to screen staff and students for potential exposure, requiring masks, implementing social distancing when possible, and promoting frequent handwashing, cleaning and disinfecting. Currently investigating clusters in churches. HD working with churches to put things in place to hold services in a safer manner. Also noted increase in long term care and congregate living facilities. Working with those entities to provide testing support and infection prevention measures.

Continues to see household spread of the virus. They encourage infected persons to isolate themselves from other household members if possible. Along with HHS, using same metrics to track trends in Carteret County.

COVID like illness in ED in region (region 2) published in a weekly report that is released on Thursdays. The week ending 10/24 the number of COVID like syndromic cases coming into Eds in region 2 decreased. However, she noted that most people recover at home and do not seek care. Does not provide a full picture

Positivity rate. County uses state report. The week ending October 31st had a positivity rate of 8.6% which is the highest rate since the start of the pandemic. The four weeks prior positivity rate hovered around 7%. The state goal is to have the rate below 5%.

Hospitalizations at Carteret HealthCare. October 14th high of 12 as of today, 5 hospitalized at Carteret Healthcare.

Total tests completed. All major labs (LabCorp, Quest, Mako, etc.) electronically feed into the state system which provides a good snapshot of the number of tests completed in Carteret County per week. In the month of October, Carteret County averaged roughly 1,200 tests per week. That number does not include rapid tests which are handled differently, so in reality the total number of tests completed weekly should be higher than 1200. The state's goal is 5% of the population per month which would be about 3500; the county is testing closer to 4800 per month.

Contact tracing weekly success rate for Carteret County. Since July, HD has partnered with state sponsored Carolina Community Tracing Collaborative (CCTC). CCTC is doing contact tracing for the county. Based on the last report, contact tracers assigned to Carteret County continue to exceed the statewide goals for contacting close contacts within 24 hours. CCTC is doing well making contact, however, there are a lot of individuals in the community who refuse to share information with the contact tracers. She emphasized that it is very important to notify those close contacts and explained that the information collected is protected. When notifying potential contacts, the source of exposure is not given to the individual.

Prevention measures the community could put in place. Follow the three Ws. Stay at home when you're sick. Avoid large gatherings. Quarantine if you have been exposed. Following the governor's executive orders. Getting community buy in can slow the spread of the virus. As a community we can do better. She pointed out that as the weather gets cooler, people tend to gather inside. HD strongly encourages the public to practice the 3 Ws. Encourage businesses to buy in to the 3 Ws.

Mayor asked for any questions.

Commissioner Hagle had no questions and thanked Ms. Cannon for the information. He agreed that the community needs to work harder at following the guidelines.

Commissioner Hollinshed had no questions.

Commissioner McDonald said that he is aware of the stats that the Health Department puts out. He asked what steps the county is requiring or encouraging for facilities such as grocery stores or other businesses within the city limits and other communities.

Ms. Cannon said that more people are wearing masks now than they were in July. She believes that there could be a more robust education campaign to work with businesses and assist in implementation. She emphasized following the 3 Ws and noted that a holistic approach would make a big difference. She added that the foundation is there, but there is room for improvement.

Commissioner Harker thanked Ms. Cannon for the update. She asked if the county has created a campaign to notify business owners that they are willing and available to help. Ms. Cannon said that there has not been a large full court press. She explained that the Health Department fields a lot of complaints – especially regarding permitted facilities such as restaurants. In those cases, the Health Department goes to the location and informs owners of the complaints and educates them on the three Ws. She said that they remind them of governor's orders and noted that some have been receptive. A lot of complaints are about noncompliance with mask wearing and lack of social distancing. She added that a good portion of complaints are coming from tourists. She then mentioned an upcoming media campaign which will consist of radio ads, newspaper ads, etc. to target the community overall. She said she would like to partner with the Chamber of Commerce to help get the word out to businesses.

Commissioner Hagle informed Ms. Cannon that he is on the Board with the Chamber of Commerce. He said the Chamber office has been very diligent in the office and he feels that the Chamber would be happy to assist. He indicated that he would reach out to the appropriate person to facilitate the conversation.

Commissioner Carter had no questions but did note an increase in people wearing masks.

Commissioner Hagle asked Ms. Cannon how many complaints the health department has received. Ms. Cannon said that since the beginning of the pandemic, there weren't many complaints as most businesses were closed. She said that complaints started coming in more frequently in May and noted that the governor's orders are not enforceable by the health department. The majority of the complaints the health department has received have been in regard to restaurants and hotels. She further indicated that several tourists indicated that they will not return to Carteret County for this reason. Commissioner Hagle asked how many complaints the department has received. Ms. Cannon said that she estimates collectively over several months, 100 or so.

Mayor Newton thanked Stephanie for participating in the meeting and for all of the department's hard work. He mentioned the key metrics that we watch – the hospital, and introduced Mr. Harvey Case, President of Carteret Health Care.

Mr. Case shared his background. He's been in the position since January of 2020. He reminded the Board that the initial reports in January/February time frame projected based on the population of 70,000, 21,000 infected, 4200 hospitalized, 200 or more people with ICU/ventilation needs, concerns of a national shortage of PPE, ventilators, medications, labor. He reminded the Board of the unknowns, lack of vaccines, etc. He admitted that there was a lot of fear among medical professionals initially.

Mr. Case shared the hospital's approach and noted that they prepared for a worst-case scenario. Immediately, Carteret Healthcare began seeking PPE, ventilators, testing capabilities, etc. The hospital developed conservation strategies for PPE, implemented best practice guidelines, and even had to make the decision to stop elective care and visitation. Nonessential employees were sent home and screening tents were set up in order to pre-screen people coming into the facility. They further created isolation teams and locations in the event there was a large number of COVID patients. Mr. Case added that he worked closely with NC Department of Health and Human Services as well as Stephanie Cannon with the Carteret County Health Department.

Mr. Case said that although the last 30 days have been an overall high, the area is still well below the early predictions. He said that there were currently 5 patients hospitalized at Carteret

Healthcare, and noted that throughout the duration of the pandemic there have been a total of 77 hospitalizations, or roughly 6% of total confirmed cases. Mr. Case explained that the hospital conducted approximately 28,000 Pre-operative tests 2,800 with 10 positive cases. He said that could be indicative of a certain group of the population, perhaps those who follow guidelines a bit more closely than others. There have been 40 positive staff members out of 1,150 employees. He explained that employees are tested quite frequently, and the positive staff cases have been traced back to community exposure.

The ability to test people in a timely fashion is huge for a hospital. Over time, the hospital has used 4 testing methods. Currently, the hospital is using Abbott's ID NOW. Although the system is relatively new to Carteret Health Care, there are approximately 1,000 rapid tests available on site. He also mentioned a new test, Cepheid 4plex, that has the ability to detect both the flu and COVID-19. He said the hospital is in good shape as far as PPE is concerned and noted the ability to access PCR or LabCorp testing. In the event the tests need to be sent off, they receive the results within 24 hours.

Mr. Case explained the challenge relates to potential problems in the winter, noting a combination of flu and COVID outbreaks, the dynamics could change considerably. If the hospital needs to transfer patients out when it reaches capacity, there is a high likelihood other hospitals would be equally strained. He is hopeful that the flu vaccine is effective this year and noted the additional measures (mask wearing, social distancing, frequent hand washing) should also help.

Mr. Case then discussed concerns related to staffing, particularly with nursing as there is a national shortage of nurses. He explained that a large focus is to avoid overwhelming hospital staff. He said they are actively recruiting nurses, as well as adding contract nurses.

Mayor Newton asked if there were any questions from the Board.

Commissioner Hagle had no questions and thanked Mr. Case for the update and for all he and the staff are doing.

Commissioner Hollinshed asked where statistics are placed on the chart when someone is transferred out. She expanded, if they have been in the hospital at Carteret, but then go to Vidant, where are they statistically? They are still technically hospitalized.

Mr. Case said that most patients do not get transferred out. If they do, they could go to Vidant or Raleigh. If they have an unfavorable outcome and the primary residence is here, they are included in the local statistics.

Commissioner Hollinshed asked where they are tracked if they do not die. For example, say you transfer ten patients out, where do they get tracked? She said that is just something to consider.

Commissioner McDonald asked what other tests are given if you test a person that has a low-grade fever and determine they have COVID.

Mr. Case said that it depends on what environment they are in. In the Emergency Department, if they are not admitted, they most likely go home and quarantine and recover there. If they are admitted, they go through an array of testing in order to determine the best path for clinical care.

Commissioner Harker thanked Mr. Case for all of his hard work throughout the institution.

Commissioner Carter asked Mr. Case about the hospital's ICU capacity. Mr. Case said that there are 10 licensed ICU beds. The hospital can put a COVID patient in ICU, though not all COVID patients require ICU level of care. He explained that the hospital has also set up a 24-bed COVID unit. If the hospital has 6 or more COVID patients, that unit is opened in order to isolate from the remainder of the facility.

Commissioner Carter then asked if the hospital has access to the medications necessary to treat COVID. Mr. Case confirmed.

Mayor Newton thanked Mr. Case for participating in the meeting and introduced Dr. Rachel Noble with UNC.

Dr. Rachel Noble, UNC Institute of Marine Science, gave a presentation on the progress of COVID-19 Wastewater Research. Her team is the lead on a 2-million-dollar project that was funded through the NC Collaboratory through CARES Act funds.

Dr. Noble explained that there are several clinical testing methods: individual, pooling and wastewater surveillance. Individual testing is the standard nasal swab. The “pooling” system could be used in a large office or warehouse setting. She used an Amazon Distribution Center as an example. Each day, workers come into work and nasal swabs are collected. Rather than testing each swab individually, they are mixed together and tested as one group. Through that mechanism, there is a considerable cost savings. If there is a positive result in that group, then the group members are tested individually. Wastewater surveillance is focused on sewage coming into the wastewater treatment plant. In the case of Beaufort, it serves about 4,000 individuals. They are able to look at the wastewater and identify signals of SARS Coronavirus-2. This reduces the amount of resources required to conduct aggregate testing. She emphasized that wastewater testing is not a replacement for any of the testing methods mentioned earlier in the meeting.

Dr. Noble explained that she would not be going over the molecular science behind the testing but would be happy to answer any questions via email at another time.

Dr. Noble then explained that when people go to the restroom, if infected, even if they are asymptomatic, they are still shedding SARS coronavirus viral RNA. She explained that there are 10,000,000 copies of the virus in just a gram of fecal matter from an infected person. She explained that infected persons are likely to continue shedding the virus in fecal matter longer than that of respiratory samples.

Dr. Noble added that through their collaboration with the NC Department of Health and Human Services, North Carolina has been selected as one of eight states to participate in the CDC’s National Wastewater Surveillance System.

Whenever considering the numbers of the virus in wastewater, there are a lot of other factors that feed into it. She explained that wastewater can indicate a peak or wave of infections in the community, prevalence in the community, and help identify hotspots which will be useful when distributing vaccinations (once available). Dr. Noble further added that this technology is being used at dormitories with a few universities across the state. It helps hone in on which students they should be testing. In dormitories, they work on the lateral that feeds into the main stem wastewater system as it leaves the building, so they are able to identify positive cases in the building rather than the wastewater system as a whole.

Dr. Noble then discussed the trends in SARS-CoV-2 in Beaufort Wastewater Influent Precede Spikes in Cases. She explained that spikes in cases were preceded by wastewater concentration values. She noted a lag time in wastewater detection to clinical case data of roughly five to eight days. She pointed out another spike in wastewater concentration and hypothesizes that Beaufort could see a spike in cases in the beginning of November. She then showed a graph of similar data for another area currently being studied and pointed out a spike that coincides with university reopening.

Dr. Noble further explained the key knowledge gaps and areas of investigation. She noted that they are interested in the dynamics that a rural area has to offer. If used properly, social and mitigation strategies, how could they have a benefit? As a society, we are not taking advantage of the fact that these areas have great things going for us – we can go for a walk or bike ride and interact with people. There is plenty of outdoor space, a marine and coastal area that features sunlight and salt – two things that are known to kill the coronavirus almost instantly. She pointed out that we hear more frequently about metropolitan areas than rural communities as the majority of studies are being conducted there.

Carteret county has something unique to bring to the table. They are trying to build new approaches for septic systems and package treatment plants. She noted that estimates are approximately 60% of homes are on septic systems or onsite wastewater systems. She said that they are also hoping to reduce the overall cost of analyses and include other pathogen threats.

Dr. Noble then acknowledged several contributors to the study, noting that it was not a complete list. She said that concludes her presentation. Mayor Newton asked if she had time to entertain questions. She confirmed.

Commissioner Hagle said that he had a lot but would save them for another time.

Commissioner Hollinshed asked if they could go right to the source to get the samples. Dr. Noble said that you can but noted that it becomes a bit of a privacy issues. She said that there are groups that have gotten special permission to do work in certain householes, to target nursing homes, and to target jails. She said that once you get to a population of less than 500, you begin to get into these privacy issues. Dr. Noble said that they hope in the future to have special technology to do it "in line" without having to knock on doors to ask permission to take samples.

Commissioner McDonald asked for clarification regarding Dr. Nobles earlier comments regarding salt and sunlight killing the virus. Dr. Noble confirmed that UV lights, specifically UVC, kills the virus. She said that sunlight is a great way to do that, but you would need to be in a lot of sunlight for it to be effective. She then explained that salt, at the concentration in the ocean, about 29 parts per thousand, iradicates the virus in minutes. In order for that to be effective, she noted that one would need to go for a swim in the ocean. She said that you couldn't spray salt air in a home and expect that to remove the virus.

Commissioner Harker said that the presentation has been fascinating. She asked if samples were collected prior to treatment. Dr. Noble confirmed and explained that there is a device that separates any solids from the influx of the wastewater, and from there a fluid stream is then tested. Commissioner Harker said that the samples are coming in from everywhere, so there is no way to track the exact source of the infection, but that it could indicate a spike in cases in the area. She then asked if there is any way to trace it back to the source. Dr. Noble said that there are a few ways to do that. She explained that you could hone into pump stations which service specific neighborhoods. She said you could use areas coming out of neighborhoods provided they serve more than 500.

Commissioner Harker asked if the chemicals that we are using are effective in killing the virus. Dr. Noble said that it is, noting work being done on treated effluent that comes out of the treatment plant. She said that they can actually detect the virus in that, but that there is an indication across all of the research that none of the virus that comes through that process is in tact, it's just fragments of the RNA floating around. Noone to date has been able to show that there is any infectious particle. She noted that if you had a sewage spill along a roadway along a mainstem pipe with a problem, that is untreated raw sewage and would not fall into that category.

Commissioner Carter asked about the viral concentration, noting that the viral concentration did not seem comparable to the spikes. She asked if the higher concentration indicates a higher spike, or if it is just telling of a spike coming. Dr. Noble said that when you talk about a wastewater treatment plant, you need to remember that there is a lot of water that comes into it when it rains, as well as shower water, etc. So, what comes out of a home and goes into the treatment plant is not all waste from a toilet. She explained that as a result, you get a signal that is diluted by a lot of excess water. She said that is something that they are actively working to attend to.

Mayor Newton thanked Dr. Noble for joining the meeting. Mayor Newton then asked Mr. Day to go over the rules for public comment. Mr. Day then asked anyone wishing to make a public comment to type "public comment" into the chat function. There were none.

Mayor Newton then asked the Board for any comments or guidance.

Commissioner Hagle said that he would like to increase education efforts. He said that the town could make contact with every business and encourage them to put up signage and to ask customers to comply with wearing masks. He said that a concerted effort could go a long way without a more stringent, enforced shutdown or something. He said that he was recently in a restaurant and noted that most people had masks on, even without signage in front. He said that there are some businesses that do have signs saying mask required and said that he felt similar efforts would help overall. He added that these efforts should expand beyond Beaufort.

Commissioner Hollinshed said that this was a good forum. She said that she would like to see a business forum where the businesses tell us what their challenges are. She noted that a lot of these businesses have been running at 50% capacity and are getting ready to go into cold weather where outdoor dining facilities may not be available to them. She said that we should find out how we can help them, rather than the town telling them what to do. Commissioner Hagle agreed. Mayor Newton said that this might be a good thing to include the Chamber of Commerce in. Commissioner Hagle said that he would be in touch with the Chamber. Commissioner Hollinshed said that we should see what the businesses' vision is going forward. Mayor Newton agreed and pointed out that many of the businesses have gone above and beyond.

Commissioner McDonald agreed with Commissioner Hagle and Commissioner Hollinshed. He said that when making a decision, the Board should consider that sunlight and saltwater is what brings people to Carteret County. He said that the town needs to be very careful in how this information is presented to the public.

Commissioner Harker said that she has been around town and has seen a lot of people following the social distancing guidelines but noted that there is still room for growth. She agreed with Commissioner Hollinshed regarding the business community. She said that she has heard a lot about the COVID Creep. She said that she has been told that people have been coming here because of the additional measures the town has put in place. She then mentioned churches and the toolkit mentioned earlier in the meeting. She asked if the town could include the toolkit on the town website. She encouraged everyone to continue following the 3 Ws and encouraged everyone to get the flu shot.

Commissioner Carter said that the issue she sees is that some people want to defy the law and refuse to wear a mask. She said that it does create issues for businesses and noted that if business owners say something to patrons, they either get angry or refuse to wear a mask.

Mayor Newton said that the town is in contact with the people that presented tonight on a daily basis. He said that the town has a lot of talent to draw upon to get good information. He noted that he may not always have the answers, but he will find the answers.

Adjourn

Mayor Newton asked for a motion to adjourn. *Commissioner Hagle made a motion to adjourn. The motion passed unanimously.*

Voting Yea: Commissioner Hagle, Commissioner Hollinshed, Commissioner McDonald, Commissioner Harker, Commissioner Carter

Chair

Board Secretary