



Coronavirus Ad Hoc Committee
 June 2, 2020 – 3:00 PM
 Zoom Meeting
 2020 Hampton Street, Columbia, SC 29204

Yvonne McBride	Paul Livingston	Joe Walker	Dalhi Myers	Chakisse Newton
District 3	District 4	District 6	District 10	District 11

Committee Members Present: Paul Livingston, Chair; Yvonne McBride, Dalhi Myers and Chakisse Newton

Others Present: Jim Manning, Allison Terracio, Ashiya Myers, Ashley Powell, John Thompson, Leonardo Brown, Kimberly Williams-Roberts, Michelle Onley, Dale Welch, Clayton Voignier, Brittney Hoyle-Terry, Angela Weathersby, Tyler Kirk and Christine Keefer

1. **Call to Order** – Mr. Livingston called the meeting to order at approximately 3:00 PM.
2. **Adoption of Agenda** – Ms. McBride moved, seconded by Ms. Myers, to adopt the agenda as published.

In Favor: McBride, Livingston, Myers and Newton

The vote in favor was unanimous.

3. **Coronavirus “Blue Ribbon “Resiliency” Committee (Discussion)**
 - a. **Goals**
 - b. **Objectives**
 - c. **Membership**
 - d. **Selection Process**

Mr. Livingston stated there was some discussion, at a previous meeting, about a Coronavirus Resiliency Committee like the Blue Ribbon Ad Hoc Committee, which would include community stakeholders. He wanted to have a discussion to determine if the committee wants to move forward with the creation of the committee.

Ms. Newton stated, as a person that joined Council after the formation of the Blue Ribbon Committee, it would be helpful to her to be provided a brief overview of how the committee has worked in the past, so she can apply it to this situation.

Mr. Livingston stated the committee consisted of citizens, who were directly impacted by the 2015 Flood, Council members, and community stakeholders.

Mr. Manning stated, in addition, there was a 36-member committee that looked at the transportation needs. The committee initially took up the matter of the bus system, and culminated in the referendum.



There also was a group made up of environmentalists, home builders, and developers that came up with 21 recommendations, which led to 20 ordinance/policy changes. Finally, there was a committee made up of two (2) Council members, two (2) Administrative Staff members, and two (2) City of Columbia representatives that worked on business licensing issues.

Ms. D. Myers noted, having served on the Blue Ribbon Committee, there were constituent organizations that were very helpful.

Ms. Newton stated, for clarification, this board would serve in an advisory capacity to Council. Based, on the information shared, it seems like it would be a good thing to do, as this is a pandemic that has left no corner of our community untouched. To the extent that we have formal feedback mechanisms, so those in the community can reach out to us, in addition the constituents that reach out to us on an individual basis.

Mr. Livingston stated what we need to consider now is the process we want to use to come up with specific goals/objectives, and also the selection of members (i.e. specific expertise, etc.).

Ms. McBride stated she is supporting the suggestion of a committee. We initially talked about having a committee, but because of the timing, we had to organize the ad hoc committee. The other component was that we wanted to ensure there was Council representation on the committee. The other component was that this committee would be different from the transportation committee. She noted that it is going to be important to engage people with expertise to provide resources and advice. In addition, to utilize the existing committee.

Mr. Livingston suggested setting a specific date to have members of this committee to make recommendations about potential participants.

Melissa Nolan, a professor at the University of South Carolina, stated she would love to assist the County with their efforts.

Ms. McBride stated we already have PRISMA and the University of South Carolina on board. She would suggest we engage the United Way and DHEC.

Mr. Livingston inquired about a suggested size for the committee. At some point, he would like to share the individuals/groups we would like to consider for the committee and start reaching out to them. For example, we could have a deadline of Friday to submit names, and then we can have a discussion about those names/agencies. In the meantime, we can start working on some objectives/goals. He noted that Ms. D. Myers has been talking about those already, so we should be able to pull those together with relative ease.

Ms. Newton stated we have talked about public health participation, and she believes they absolutely need to be there. She would also like to suggest having some members from the non-profit community who serve a broad swath of our community, and see situations on the ground. We also would probably have some kind of business representation, as well.

Mr. Livingston suggested he work with Ms. D. Myers regarding the goals of the committee. People who have specific objectives or membership requirements they think we want to achieve, submit those to Ms. D. Myers or himself.

Ms. McBride stated she would like to also have us consider the format, and she will submit something regarding that.



Mr. Manning stated, for clarification, Mr. Livingston requested committee members to make recommendations, but he would suggest including full Council. Additionally, until he had some idea of what the mission of the group is, he would have no idea what name or organization to submit for consideration.

Mr. Livingston responded he will send something out to Council regarding the goals/objectives of committee, so the Council members will know who to suggest to serve on the committee.

4. **Council COVID-19 Guidance, Recommendations and Requirements for Citizens/Businesses in the unincorporated areas of the County** – Mr. Livingston stated we know there are CDC regulations, and other regulations, but he inquired if Council wanted to make a statement about what we would like to recommend or suggest for the citizens of Richland County.

Ms. McBride inquired if we had a group looking into recommendations coming from small businesses.

Mr. Livingston responded in the affirmative. This is more about deciding whether we want to say to businesses, “Please make sure you do social distancing” or whether we want to communicate anything to citizens in the unincorporated area.

Ms. McBride stated she thinks we wanted to communicate, but, in terms of what we were going to communicate, would be based on our research using the public health standards. Her understanding was that once the research was done, we would review it and make recommendations of what Council thought was the appropriate message to provide to the businesses.

Ms. D. Myers stated she is concerned with timing. A lot businesses are reopening, and need some idea of what the County recommends, if anything. She looked at the recommendations that were provided by staff and noted that they did not have any public safety included. Most of it dealt with our employee core, and the Richland County facilities. She would like to see some recommendations, from staff, as to what we would recommend for businesses to prevent the spread of this virus. As we all know, has been peaking in the wrong direction in Richland County, and the State. She would like to see us put some timelines around it, and give staff some clear guidance as to what we are expecting back.

Mr. Livingston stated, for clarification, Ms. D. Myers is referring to businesses and the public.

Ms. D. Myers responded in the affirmative.

Mr. Livingston requested to task staff with that, and whatever kind of input Council needs to provide, we will provide to finalize something as soon as possible.

Ms. McBride stated she thought that was already done. She was waiting on the report of the recommendations.

Mr. Livingston responded that was done with the focus on our staff, and the public coming to our facilities, not so much in terms of the public and businesses operating outside of the County.

Ms. McBride stated she was under the assumption we were looking at Richland County, and the small businesses, as well as staff.

Mr. Brown stated, in those conversations, the strategy you see within the plan, are consistent with, when you are out in public to wear face coverings, whether for employers or entities in the community. The



same guidance also applies to how you maintain your cleanliness, with both internal and external agencies. The guidance for social distancing is also consistent across internal and external agencies. His understanding is that Council may have had some thoughts on some additional guidance specific to certain areas that may have not been routinely addressed by CDC and DHEC. He thought one of the conversations that was trying to be addressed was whether or not Council, or the County, would strongly encourage to wear face coverings, while out in public. Whether there would be some type of specific level of requirements versus general guidance.

Mr. Livingston stated there was a perception that the community and businesses need to hear something specific from Council. The idea was for Council to draft something and send it out, in terms of recommendations and requirements.

Ms. McBride stated she was under the assumption that we were looking at best practices, and based on the space, you can only have so many citizens within a restaurant. These restaurants should mark a distance of 6 feet, and all the workers need to wear masks or put up shields. She was looking for best practices, based on our research, to come back before us. Then, we would look at those things and find those that were most practical, and was in the best interest of Richland County.

Mr. Livingston stated we can easily ask staff to bring back those best practices, and then we can decide what we want to send out to our citizens and businesses.

Ms. D. Myers stated, like Ms. McBride, she thought that was what was in the works. If we are asking staff to bring back to us guidance for Richland County, and not just the Richland County owned facilities, she would request that we put some guidance around what areas we are looking at, because obviously we were not clear enough the last time. And, a timeframe around what we would like for them to do. They may not be able to do everything within a timeframe, but we can certainly have some goals set as to what we are looking for. We are getting to a point now where businesses are opening back up, and people are walking around as if there is no pandemic. She thinks there is an urgency that is not tracking with our activity.

Ms. McBride stated she thought that was the purpose of us hiring TetraTech, and to help us develop these types of strategies. She is a little disappointed. It seems that each time we are repeating, and then having to come up with new things rather than a comprehensive plan. She assumed that getting the consultants, and working together, we would come up with a comprehensive plan.

Mr. Livingston stated let's move forward and request the Administrator to come up with some best practices, as it relates to information to the public and businesses regarding the pandemic, in terms of recommendations and requirements from Council.

Mr. Manning stated one thing he is concerned about, in this conversation, is that he has received in one of the multitude of packets, for the Council to review, a potential six (6) week opening plan for the County. He thinks we need to be very guarded about putting out a plan for people in unincorporated Richland County, and how they do, and the way, they do business that (a) that would be ahead of us having our own plan, and (b) anything, in the plan we put out for them, would not be totally consistent with the plan for the County.

Mr. Livingston inquired if Mr. Brown felt he had enough information to determine where we are trying to go on this item.



Mr. Brown responded he believes he can look at the resource library we have provided for the body, pull out the best practices, and provide the body with the best practices and recommendations.

Ms. D. Myers stated, there are some best practices that would be applicable to people inside a building, but might not apply to a public park. Since Richland County operates those parks, she would expect that some of what we are doing is going to be in coordination with the parks, library and other agencies that are different from what we operate. It is not just us taking people's temperatures, engaging in social/physical distancing, and wearing face coverings, but are there spaces that are different from the spaces that Richland County operates where people need a different kind of guidance. She does not believe those nuisances are reflected in the document we have received. She is requesting that not only do you pull things out from the document provided, but look at best practices for all the spaces that would be impacted in unincorporated Richland County.

Mr. Brown stated, from what he is hearing, it would be a part of what would be our next maturation. We would go and involve all of those other areas that are impacted by what Richland County Council (i.e. parks). His understanding is the parks are generally under the jurisdiction of the Recreation Commission, so we would be in partnership with the Recreation Commission to determine what their plans were, so we could understand, from their perspective, what they thought was in the best interests of the people they serve. He requested some consideration, or thought, as to, if the Recreation Commission has best practices, or guidance, which may be slightly different than the County. For example, what if they do not recommend or have any guidance on face coverings, whereas, as an organization, Richland County does, for outside agencies. He inquired if that is something where we would see ourselves recommending that, and saying this is Richland County's position on it. In other words, how do marry our thoughts and guidance with those of the other agencies, which we may not have jurisdiction over, but we are impacting them, and they are impacting us.

Mr. Livingston responded we look at those differences, and Council will decide what they think should happen. We cannot demand what these agencies do, but we can still provide our perspective.

Ms. D. Myers stated she would agree with that, and would also point out, for those constituent agencies, that are labeled "Richland County", to the extent that, if something goes wrong, and there is no guidance, or inconsistent guidance, and there are events that occur in those spaces, the entity ultimately sued will be Richland County. The taxpayers will then be who is on the hook for that. She would be careful with the freedom we are giving agencies to decide. Her concern is, if there is no guidance, and someone said the lack of guidance allowed space for people to come in uncovered and spread what they knew was a deadly virus, there might actually be lawsuits based on this. She thinks it is important for us to look at all of the spaces that touch, and concern, people in Richland County, and put the best guidance out, from the County's standpoint, both morally and legally, to make sure we are doing the best that we can do to give guidance. She would suggest that we are in coordination with those, but remember where the obligation lies, at the end of the day.

Ms. McBride stated she would like to support what Ms. D. Myers stated, and that we must remember we would be providing guidance.

5. **County Reopening** –Mr. Brown stated Council had expressed on a couple of occasions the opportunity to engage members of the local public health and medical space. In our most recent conversation with Dr. Ossmann, as he reviewed our rough draft plan, he thought that we would be somewhere in between Phase I and Phase II. One of the questions received was, from a professional standpoint, what they thought about where Richland County stood within its plan. The other thing he wanted to point out, there is, and has been for a while now, a thought that was projected, related to using data, to determine



when organizations may be ready to reopen on some level. As he listened to Dr. Ossmann, and others, have this conversation, early on, in the conversation about the peak of the virus, and then the downfall of the virus, there were some initial thoughts of how things would go. The guidance that was given was, going forward, after you hit your peak, and you think about reopening, you should consider looking at a trend of so many days (i.e. 14 days) of downward positive tests. Since then, there has been some movement, in terms of what focus an organization should utilize in terms of its metrics. Positivity rate has been a much more robust part of that conversation. One of the things he would say, as you think about the guidance you are going to provide for the community, and your staff, that, at this point, if we only utilize a 14-day downward trend, as the data driven metric that will determine when we can open back up, he is concerned, as the County Administrator, that may be a long time from now. It does not seem that a 14-day downward trend will be happening anytime soon. We are not on a downward trend, in terms of positive cases, by themselves. Looking at the flat number, you do not see a downward trend. He is going to be asking for some consideration, as to other metrics, coupled with the single number that we could utilize, but not just utilizing that as a single driver. If we do that, he is afraid we will not be opening up for quite some time. He requested Dr. Ossmann to provide information, and communication, about looking at the solid positive numbers, in conjunction with looking at the positivity rate, as an additional criteria, to be utilized.

Ms. D. Myers stated, it seems to her, the change in the CDC recommendation was political, and not epidemiological. She would like some insight into that, as we are weighing whether or not that is how we should be making changes here at Richland County.

Dr. Ossmann introduced Dr. Scott Sasser, who is the lead physician for PRISMA, in the Midlands, and is leading the response

Dr. Sasser stated they appreciate the opportunity to have, and to contribute, to the conversation, as we partner with you, as we move forward in the community, across the Midlands, and the Upstate.

Dr. Ossmann noted that he believes Mr. Brown has had discussions with Dr. Nolan about this, as well, but early on in the pandemic, when the initial phased reopening plans came out, the prediction was that you would get a sharp curve, and sharp curve down. You would eventually reach a point with very few cases in the community, but what we have seen is you get a sharp curve up, then cases came down, and we have been relatively flat for the last 4 weeks, in South Carolina, and Richland County. Then, with a slight uptrend in the last several days. Some of that uptrend in the number of cases is due to the fact that we are testing at a much greater rate than we were. There is probably also an uptrend of cases, as we relax social distancing, and some of the non-pharmaceutical interventions that were in place in March/April, which was really keeping people apart. He thinks we are operating off of new and evolving information, so while the phased requirements for reopening seem applicable in March, he does not think the data has gone in that particular direction to make that component useful. He thinks there are many parts of the document that can be used, but the gating has not turned out to reflect what is actually happening with the virus. He does think it is important to look at some other gating criteria, as well. Much to your points, the reopening could be a long way off if we do not adjust the gating criteria appropriately. Some of the things they are looking at, inside the acute care health system, are the number of patients we have in the hospital, the number of patients we have in the ICU, and their capacity to care for additional patients. Our numbers have been relatively flat since the beginning of May. Meaning, in the Midlands, we are usually ranging between 40 – 50 patients in the hospital each day that has COVID. That is not 40 – 50 new admissions, but a total census of 40 – 50. We feel comfortable, at that level, that we can continue to provide care in the community for things that are non-COVID, and we can manage a reasonable number of new COVID patients coming in the door. The other thing that is helpful, is to look at the positivity rates. Meaning, how many tests are positive compared to the total number of tests. That number is



controlled for the number of tests that you do. He thinks, as we test more people, the number becomes more and more reliable. In addition, targeting testing in the communities where we know there are a few factors at work. For example: under testing, lack of routine healthcare resources, and areas where we know, based on prior testing, there is a high positivity rate. This was a point of collaboration they discussed with Mr. Brown, and his team. Dr. Nolan was brought into the conversation. He thinks that will be a fruitful relationship, moving forward. Based on that, he thought the steps taken in Phase I and II, which were presented in the draft plan, were very good. The challenge was really with the gating criteria, and where we were as far as the disease course. That is why we are maybe shifting the focus away from the absolute decline in the number of cases, for a two-week period, and focusing on elements that are more objectively measured.

Ms. D. Myers inquired about the status of where we are, as a County, in terms of productivity, working the way we are working now. In essence, what is the level of loss productivity, or loss man hours, as a result of the emergency nature we got people out of the facilities, and the lag in providing necessary equipment for them to effectively complete their day-to-day tasks. Secondly, in so far as the recommended gating criteria, staff has clearly had conversations with the doctors and the team from the University of South Carolina; therefore, what is the Administrator recommending, as a hybrid reopening criteria, rather the 14-day limitation? Thirdly, where are we in terms of standing up testing around Richland County? She stated she is not going to feel comfortable giving staff the green light reopening the Richland County facilities with the testing at its current status, which is why she keeps saying we need to stand up some type of testing. She knows there are going to be people that push back and say you cannot test everybody. There are counties across the United States that are doing a better job of testing, and she would like to see us doing that so we know where we need to be quarantining people. Lastly, in the best of all possible worlds, as Administrator, when would he like this reopening to take place?

Ms. McBride stated she has concerns about the testing. The testing is as good as the areas you test in. She is concerned that some of the hot spots are not being tested. She inquired how we get to those communities that need to be tested. While she would consider some type of hybrid reopening, it is so important that we test, and we test in the right areas, so we can get a more accurate response to the testing. Until we are able to do that, she maintains that she has concerns.

Mr. Brown responded Ms. D. Myers and Ms. McBride raised a good point about testing. He has also had conversations with Dr. Ossmann, and we have discussed the process for getting those testing sites requested. Council will be hearing from him, regarding those areas. We will be going through the process that we have in place locally, as well as, trying to get some additional opportunities we have discussed with our internal team with DHEC.

Mr. Livingston stated what would be helpful for him is to come up with a reasonable goal for testing, so we have something to shoot for, and we know where we are moving to.

Ms. McBride stated, if we are going to test in communities, we have to find the means of getting the word out. In several areas, she knows they have tested, but they did not have the people coming out because they did not know about the testing. There has to be a different type of messaging that will reach out to the communities. She stated that is going to be very important, if we are going to get people to come out to be tested. We also have to think beyond the drive-thru testing because many people do not have cars, so we have to take the test to the communities.

Mr. Brown stated he wants to open in an environment where employees feel as though their best interest are being looked after. He also wants to be cognizant of what the policymaking body's



expectations are of when we will reopen. He does not have a specific thought, right now. He wanted to communicate to the committee, if we were following the guidance that it would be a 14-day downward trend, that the way things are looking now, it does not look like that is going to be anytime soon, based on the numbers. He was trying to inform the committee how that could delay any opening, if we were going to utilize that as a metric.

Mr. Livingston responded that we should look at the percentage of positive rate, the number of patients in ICU, and some of the other metrics Dr. Ossmann mentioned to come up with what we think might be the best factors to use.

Ms. D. Myers stated she will follow-up and restate the questions in writing, so that Mr. Brown will have them, in order to respond. She thinks they are critical, from a path forward standpoint, in terms of getting a vote to move past where we are now with Richland County.

6. **Update: Council Coronavirus Economic Relief Program** – Mr. Livingston inquired if there were any objections to getting this information at the regular Council meeting.

Ms. McBride inquired if it is necessary to take action in the Council meeting, or is that just an update.

Mr. Livingston stated, based on the conversation, at the last meeting, Council expected Council action to approve awarding.

Ms. McBride stated she has a number of questions, but we are out of time.

Mr. Livingston directed her to proceed with her questions.

Ms. McBride stated she does not know who made the decisions, and who is reviewing the grants. She read the report, but then it was confusing because it appears they have an advisory group reviewing the grants.

Ms. A. Myers responded the committee make-up was included in the documents, when Council approved the grant program in April. Both of the committees are made up of employees, to include, members from our Community and Government Services Department, Grant Management Department, and TetraTech.

Ms. McBride stated she read it as TetraTech was reviewing it, and making decisions.

Ms. D. Myers noted that she also is a little confused because she specifically recalls saying she agreed with the make-up of the committee, but her recommendation was that there be Council representation on the vetting committee, and she does not say that.

Mr. Livingston responded that he remembers information about the make-up of the committee, but he does not remember the part about Council representation.

7. **Adjournment** – The meeting adjourned at approximately 4:02 PM.