



KING COUNTY

1200 King County Courthouse
516 Third Avenue
Seattle, WA 98104

Signature Report

Resolution 20-09

Proposed No. 20-09.2

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

Resolution 20-09

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

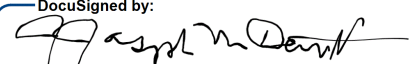
Resolution 20-09

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

Resolution 20-09 was introduced on and passed by the Board of Health on 6/15/2020,
by the following vote:

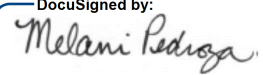
Yes: 10 - Mr. Baker, Dr. Daniell, Dr. Delecki, Ms. Honda, Ms. Kohl-
Welles, Ms. Lambert and Mr. McDermott
Excused: 3 - Ms. Mosqueda, Mr. Lewis and Ms. Morales

KING COUNTY BOARD OF HEALTH
KING COUNTY, WASHINGTON

DocuSigned by:

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Joe McDermott, Chair

ATTEST:

DocuSigned by:

8DE1BB375AD3422...

Melani Pedroza, Clerk of the Board

Attachments: A. King County Safe Start Application Moving from Phase 1 to Phase 2, as amended on
June 15, 2020

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

June 15, 2020



King County

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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 1.2, it is within the confidence intervals. Both healthcare system readiness targets have been consistently met. Both of the testing targets are met. One case contact tracing metric (based on the approximately two-thirds of current cases managed by PHSKC and the remainder during surges managed by DOH) is close to being met (cases reached within 24 hours) but the percent of cases being contacted daily is not being met. A system of daily contacts for cases is in development and is expected to take place routinely shortly. 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 contact metrics are being met or are partially being met. DOH contact tracers working in King County began daily symptom checks on June 6. PHSKC is currently evaluating at least three options that would enable us to fully meet the daily monitoring goal that maximizes our resources and is being shaped by the experiences of those who are being isolated and quarantined. The three options include daily phone calls, using a text messaging platform, or using community health workers who are also supporting the care coordination efforts as part of this response. More than likely, it will be a hybrid approach of at least 2 of the three options. The number of outbreaks is above the target at 5 per week versus 3 outbreaks. 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	24.8
	Effective reproductive number	<1	1.2
	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	57.2

	Number of days (median) between illness onset and test date over the last 7 days	≤ 2	1.7
Health care readiness	Percent of beds occupied across hospitals	$\leq 80\%$	69.7%
	Percent of hospital beds serving COVID-19 patients	$\leq 10\%$	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%	Not met, a pilot test for daily contacts was launched June 9 cases; while that scales up, cases are contacted every 2 days.
	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 and 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.

1. 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 69.7%.¹

2. The percent of licensed beds occupied by suspected and confirmed covid-19 cases (*ideal target is <10%*).

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>

The percent of licensed beds occupied by suspected and confirmed COVID-19 cases is 2%.²

3. **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.**

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 14, 2020 there were 8,797 confirmed cases and 574 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 574 deaths in King County from COVID-19 to date, 78%

² Ibid.

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.

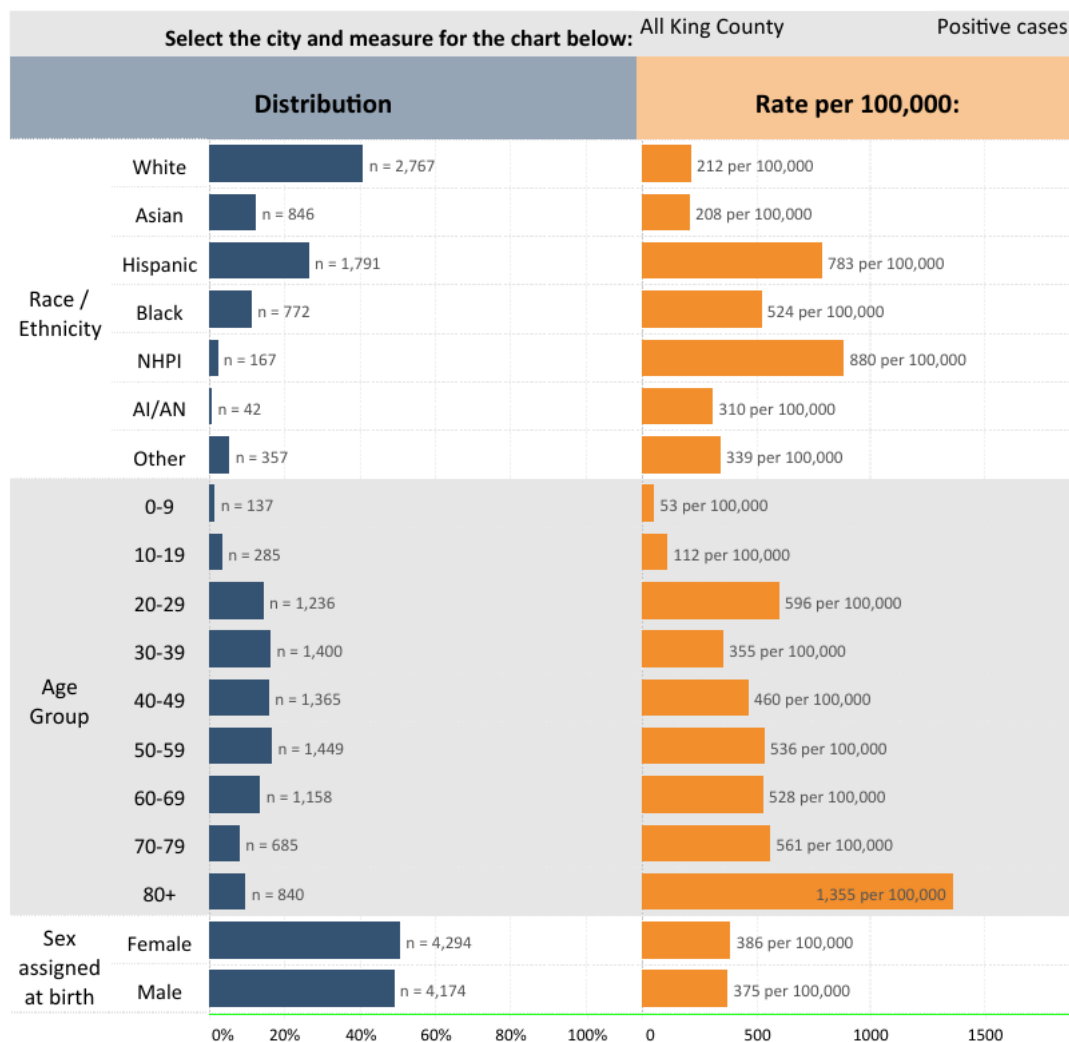
have been age 70 or older. Maps of COVID-19 case residences and places of residence where there are more people with underlying health conditions and low incomes are very similar.⁵ Men account for 53% of COVID-19 deaths in King County.

Among measured race/ethnic categories, Pacific Islanders in King County have the highest age-adjusted case rate at 891 per 100,000 (169 cases); Latinx residents are experiencing a case rate of 813 per 100,000 (1,859 cases); Black residents have a rate of 538 (792 cases); American Indians have a rate of 332 (45 cases); White residents have a rate of 215 (2,812 cases) and Asian residents have 210 cases per 100,000 Asian residents (852 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%, unknown exposure is 18%, presumed community transmission is 17%, workplaces other than health care is 10%, close contact with a confirmed case is 6%, long-term care facility related is 4%, homeless shelter or living homeless is 3%, health care workers are 3%, lost to follow up are 3%, travelers from out of the state are 1% and schools/childcare settings are 0.6%.

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

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



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



Public Health - Seattle & King County COVID-19 Outbreak Summary

King County

Update date
6/10/2020
12 PM

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

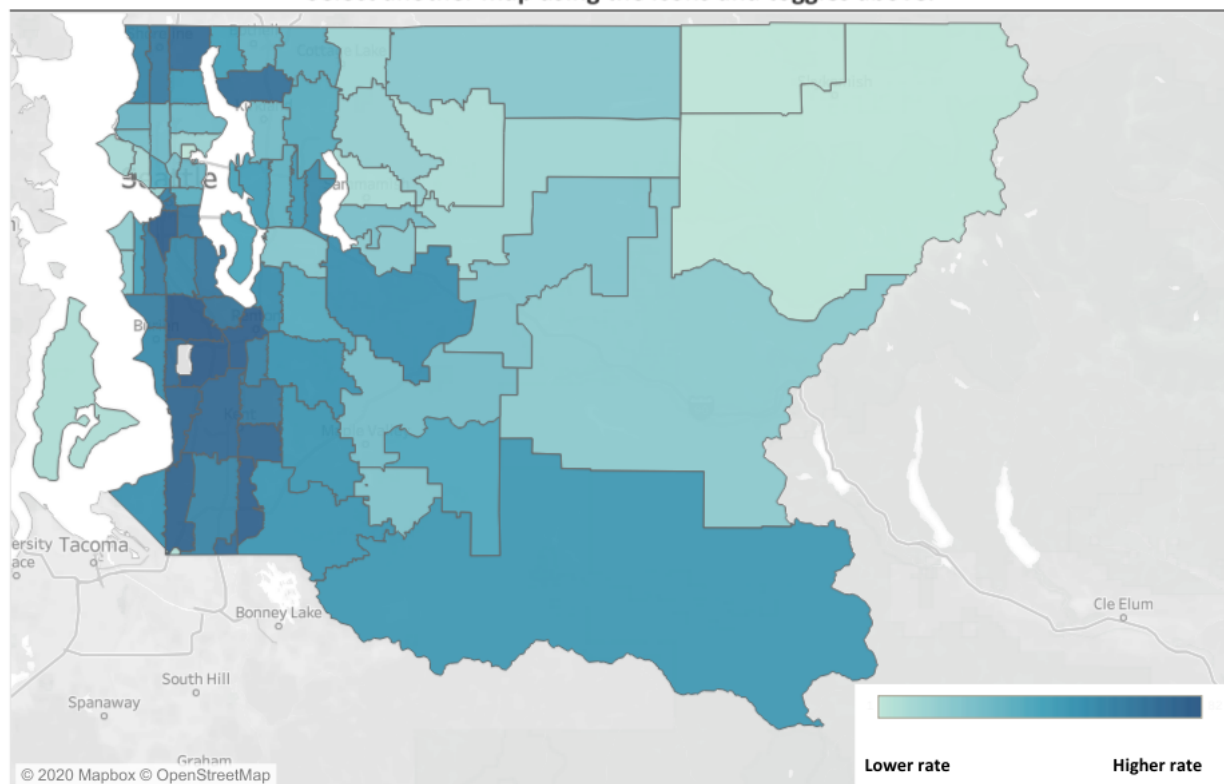


Census



☐ Tested
☒ Positives
☐ Hospitalizations
☐ 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) were 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 1.7 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: June 7 to June 14, 2020				
22,273	21,998	275	1.2%	13,750

- 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 31 to June 6, 2020				
15,159	14,908	251	1.7%	12,600
Week 3: May 24 to May 30				
11,878	11,586	292	2.5%	14,450
Week 4: May 17 to 23, 2020				
12,497	12,183	314	2.5%	15,100

- 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 1,132 positive tests out of 61,807 total tests which is 1.8% 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: $\text{county population}/100,000 \times 15 = \#$.
King County's population is $2,252,782/100,000 \times 15 = 338$.

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 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 has added 6 FTEs since applying to modified phase 1 and we anticipate interviewing an additional 20 people by June 18. PHSKC is committed to deploying staff as needed to respond to COVID-19 and has developed the capacity to add and train approximately 20 new contact tracing FTEs weekly moving forward.
- 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 has started a pilot for contacting cases daily, although it has not yet been expanded to all cases yet. PHSKC is considering at least three options in order to fully meet the daily monitoring goal that maximizes our resources and is being shaped by the experiences of those who are being isolated and quarantined. The three options include daily phone calls, using a text messaging platform, or using community health works who are also supporting the care coordination efforts as part of this response. More than likely, it will be a hybrid approach of at least 2 of the three options. While we work to expand fully to daily check-ins, PHSKC reaches out to 100% of cases every two days during their isolation period.

- d. 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%)?**

King County has started a pilot for contacting contacts in self-quarantine daily, although it has not yet been expanded to all contacts yet. DOH assists King County contact tracers with case contacts and DOH began daily check-ins with contacts on June 6, 2020. PHSKC is considering at least three options in order to fully meet the daily monitoring goal that maximizes our resources and is being shaped by the experiences of those who are being isolated and quarantined. The three options include daily phone calls, using a text messaging platform, or using community health works who are also supporting the care coordination

efforts as part of this response. More than likely, it will be a hybrid approach of at least 2 of the three options. While we work to expand fully to daily check-ins, PHSKC reaches out to 100% of contacts every two days during their isolation period.

e. 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	Modular structure, in standby	70 isolation, 79 quarantine	0	June 2020	

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
Shoreline, WA 98155					
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 7 FTEs investigating workplaces, 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 physicians, disease investigators, public health nurses, administrative staff, veterinarians, education specialists and others.

The **COVID-19 Workplace Investigation Team (WIT)** is made up of 4 senior staff from PHSKC, supported by two CDC workplace investigation experts. In addition, the Department of Human Resources' Safety and Claims staff with industrial hygiene certification and contact tracers also support this work. The WIT is tasked with contacting employers of confirmed cases to (i) identify businesses with potential workplace transmission, (ii) perform contact elicitation with the employer, and (iii) assess steps that employers have taken to reduce the risk of transmission within the workplace and (iv) provide technical assistance when necessary. On-site investigations may be conducted when there is evidence of workplace transmission and opportunities to improve infection prevention and control (IPC) measure to decrease transmission.

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.

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).

Both WIT and MAT are available to rapidly respond to outbreaks at facilities in King County.

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
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?

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

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; 3.8 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 2,812 White people affected. The number of Latinx residents with COVID-19 is second highest at 1,859 cases, Asian residents have had 852 infections, Black residents have had 792 cases, 169 Pacific Islanders have had COVID-19 and 45 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 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>

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

Office of the Director

401 Fifth Avenue, Suite 1300
Seattle, WA 98104-1818

206-296-4600 Fax 206-296-0166

TTY Relay: 711

www.kingcounty.gov/health



Local Health Officer Recommendation to the Board of Health

I have determined that King County adequately meets key criteria that measure the county's ability to manage and appropriately respond to the current level of disease activity as required by the Washington State Department of Health in order to enter Phase 2 of the Safe Start plan. For the indicators that we are not yet meeting, we are either trending in a positive direction or are very close to the target. For these reasons, **I recommend King County move to Phase 2 as permitted by the State Department of Health.** A summary of the permitted activities is in the chart below. These activities are subject to change based on future modifications or clarifications from the state Department of Health.

Activity Area	Phase 2 Permitted Activities and Limitations
Card rooms	Activities allowed: All card rooms or similar activities. Limitations: All card rooms are subject to Phase 2 guidance which generally restricts the card room designated area to the lesser of 25% capacity or 50 individuals. The restaurants or taverns area of the facility is required to follow the Phase 2 guidance , which restricts capacity to 50% and prohibits bar service. Games are also limited to 25% occupancy per table. Limitations on capacity does not include staff.
Construction	Activities allowed: All construction, including new work and where social distancing may not be maintained. Limitations: All construction activities are subject to Phase 2 guidance .
Domestic services	Activities allowed: Any worker (hourly, salaried, independent contractor, full-time, part-time, or temporary) who is paid by one or more employer and provides domestic services to an individual or household in/about a private home as a nanny, house cleaner, cook, private chef, or household manager. Limitations: All domestic services are subject to Phase 2 guidance .
Drive-in theaters	Activities allowed: All drive-in theaters. Limitations: All drive-in theaters are subject to Phase 2 guidance .
Fitness	Activities allowed: Staffed indoor fitness studios and facilities, including but not limited to gymnastics, weight and resistance training, martial arts, yoga, and similar instructor-led fitness services, as well as staffed indoor tennis facilities. Limitations: All fitness activities are subject to Phase 2 guidance which generally limits to groups of five participants or less.
Higher Education	Activities allowed: All non-lecture based higher education and workforce training, including where social distancing may not be maintained.

	Limitations: All higher education activities are subject to Phase 2 guidance .
In-store retail	Limitations: All retail activities are subject to Phase 2 guidance which restricts customer occupancy to 30% of a building's occupancy or lower as determined by the fire code.
Library Services	Activities allowed: All public libraries, public library systems, institutional and governmental libraries, and libraries at institutions of higher education. Limitations: All library activities are subject to Phase 2 guidance which limits services to mail or curbside pick-up and libraries remain otherwise closed to the public.
Manufacturing operations	Limitations: All manufacturing activities are subject to Phase 2 guidance .
Outdoor recreation	Activities allowed: Staffed outdoor tennis facilities; guided ATV, paddle sports, and horseback riding; go-cart tracks, ORV/motocross facilities, and participant only motorsports; gondolas; zoos and aquariums; guided fishing, and all other similar activities. Limitations: All outdoor recreation activities are subject to Phase 2 guidance and are generally limited to groups of five participants or less, in some instances up to 12 individuals or three households are permitted.
Personal services	Activities allowed: All personal services including Cosmetologists, Hairstylists, Barbers, Estheticians, Master Estheticians, Manicurists, Nail Salon Workers, Electrologists, Permanent Makeup Artists, Tattoo Artists, Cosmetology Schools and Esthetics Schools. Limitations: All personal services are subject to Phase 2 guidance which restricts customer occupancy to 50% with the exception of one to one services in an enclosed room.
Pet grooming	Activities allowed: All pet grooming services including any location provided by an individual, or at a retail, veterinary, or other facility. Limitations: All pet grooming services are subject to Phase 2 guidance which restricts client occupancy to 50%.
Professional photography	Limitations: All professional photography services are subject to Phase 2 guidance which restricts services to appointment only and for one client (and family member, if client is a minor) at any given time. Group sessions are not allowed unless the group consists of immediate family only.
Professional services	Activities allowed: Accountants, architects, attorneys, engineers, financial advisors, information technologists, insurance agents, tax preparers, and other office-based occupations that are typically serving a client base. Limitations: All professional services are subject to Phase 2 guidance which restricts guest occupancy to 50% of a building's occupancy with the exception of one to one service in a fully enclosed room.
Real estate (residential and commercial)	Activities allowed: All real estate brokers, firms, independent contractors and industry partners. Limitations: All real estate activities are subject to Phase 2 guidance which generally restricts out of office activities to appointment only and with no more than three people; office activities require reservations for in-person customer services and guest occupancy is limited to 50% of a building's occupancy.

Religious and faith organizations	Activities allowed: All religious and faith-based organizations may operate services including worship services; religious study classes; religious ceremonies; religious holiday celebrations, weddings, and funerals. Limitations: All religious and faith based activities are subject to Phase 2 guidance which generally restricts indoor services to the lesser of 25% capacity or 50 individuals and in-home services/counseling is restricted to no more than five individuals. Outdoor services are permitted for up to 100 individuals. Limitations on capacity does not include an organization's staff, but does include volunteers.
Restaurants and taverns	Limitations: All restaurant and tavern operations are subject to Phase 2 guidance which prohibits any bar seating and restricts indoor customer occupancy to 50% of a building's occupancy or lower as determined by the fire code. Outdoor dining is allowed at 50% of capacity and does not count toward the building occupancy limit; additional outdoor seating will be allowed provided it follows Public Health – Seattle & King County's best practices and a restaurant secures any municipal permit that may be required.
Social and recreational gatherings	Limitations: Individuals may gather with five or fewer people from outside their household per week.
Sporting activities	Activities allowed: Golf; professional sporting activities indoor and outdoor; outdoor youth team sports and outdoor adult recreational team sports, excluding school-connected or administered team sports and junior hockey. Limitations: All sporting activities are subject to Phase 2 guidance (golf and other sporting activities). Non-professional sporting activities are generally limited to groups of five participants or less; for team sports that can mean limiting to groups of five in separate parts of the field if separated by a buffer zone. Professional sporting activities may generally operate, including up to 50 people for back office operations, for full team practices and spectator-less games and competitions.

Public Health – Seattle & King County will continue to reevaluate King County's data and needs as outlined by the state's Phased Reopening Plan. Please see the full application to review our summary of the epidemiology of COVID-19 in King County, the county's key metrics, and our work to ensure appropriate response, including addressing the needs of communities disproportionately impacted by the pandemic.



Dr. Jeff Duchin
Local Health Officer
Public Health – Seattle & King County

June 15, 2020

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

To be added after the BOH meeting.

Appendix C: Letter from King County leadership



King County

June 15, 2020

John Wiesman
Secretary, Washington State Department of Health
101 Israel Rd. SE
Tumwater, WA 98501

Dear Secretary Wiesman:

We write to request King County move to Phase 2 as provided for in Washington State's Safe Start Phased Reopening Plan. King County's request is made with the full support of Public Health – Seattle & King County Director Patty Hayes, Local Health Officer Dr. Jeff Duchin, and the County Board of Health.

King County adequately meets key criteria outlined by the Washington State Department of Health as measurements of our readiness to enter Phase 2 of the Safe Start plan. For the indicators that we are not yet meeting, we are either trending in a positive direction or are very close to the target. A summary of the permitted activities is in the chart below, albeit it's subject to change based on future modifications or clarifications from the Department of Health.

We will continue to reevaluate King County's data and needs as outlined by the Safe Start Washington Phased Reopening Plan. Please see the full application to review our summary of the epidemiology of COVID-19 in King County, the county's key metrics, and our work to ensure appropriate response, including addressing the needs of communities disproportionately impacted by the pandemic.

We in King County are eager to safely and thoughtfully resume additional economic activity based on the guidance offered through the Washington's Safe Start Phased Reopening Plan. Keeping our residents safe and reducing the risk of COVID transmission are among our highest priorities.

Upon your approval, all Phase 2 activities would be permitted in King County; a summary of those activities is listed below and is subject to change as guidance consistent with modifications or clarifications from the Department of Health.

Activity Area	Phase 2 Permitted Activities and Limitations
Card rooms	Activities allowed: All card rooms or similar activities.

Activity Area	Phase 2 Permitted Activities and Limitations
	Limitations: All card rooms are subject to Phase 2 guidance which generally restricts the card room designated area to the lesser of 25% capacity or 50 individuals. The restaurants or taverns area of the facility is required to follow the Phase 2 guidance , which restricts capacity to 50% and prohibits bar service. Games are also limited to 25% occupancy per table. Limitations on capacity does not include staff.
Construction	Activities allowed: All construction, including new work and where social distancing may not be maintained. Limitations: All construction activities are subject to Phase 2 guidance .
Domestic services	Activities allowed: Any worker (hourly, salaried, independent contractor, full-time, part-time, or temporary) who is paid by one or more employer and provides domestic services to an individual or household in/about a private home as a nanny, house cleaner, cook, private chef, or household manager. Limitations: All domestic services are subject to Phase 2 guidance .
Drive-in theaters	Activities allowed: All drive-in theaters. Limitations: All drive-in theaters are subject to Phase 2 guidance .
Fitness	Activities allowed: Staffed indoor fitness studios and facilities, including but not limited to gymnastics, weight and resistance training, martial arts, yoga, and similar instructor-led fitness services, as well as staffed indoor tennis facilities. Limitations: All fitness activities are subject to Phase 2 guidance which generally limits to groups of five participants or less.
Higher Education	Activities allowed: All non-lecture based higher education and workforce training, including where social distancing may not be maintained. Limitations: All higher education activities are subject to Phase 2 guidance .
In-store retail	Limitations: All retail activities are subject to Phase 2 guidance which restricts customer occupancy to 30% of a building's occupancy or lower as determined by the fire code.
Library Services	Activities allowed: All public libraries, public library systems, institutional and governmental libraries, and libraries at institutions of higher education. Limitations: All library activities are subject to Phase 2 guidance which limits services to mail or curbside pick-up and libraries remain otherwise closed to the public.
Manufacturing operations	Limitations: All manufacturing activities are subject to Phase 2 guidance .
Outdoor recreation	Activities allowed: Staffed outdoor tennis facilities; guided ATV, paddle sports, and horseback riding; go-cart tracks, ORV/motocross facilities, and participant only motorsports; gondolas; zoos and aquariums; guided fishing, and all other similar activities. Limitations: All outdoor recreation activities are subject to Phase 2 guidance and are generally limited to groups of five participants or less, in some instances up to 12 individuals or three households are permitted.
Personal services	Activities allowed: All personal services including Cosmetologists, Hairstylists, Barbers, Estheticians, Master Estheticians, Manicurists, Nail

Activity Area	Phase 2 Permitted Activities and Limitations
	Salon Workers, Electrologists, Permanent Makeup Artists, Tattoo Artists, Cosmetology Schools and Esthetics Schools. Limitations: All personal services are subject to Phase 2 guidance which restricts customer occupancy to 50% with the exception of one to one services in an enclosed room.
Pet grooming	Activities allowed: All pet grooming services including any location provided by an individual, or at a retail, veterinary, or other facility. Limitations: All pet grooming services are subject to Phase 2 guidance which restricts client occupancy to 50%.
Professional photography	Limitations: All professional photography services are subject to Phase 2 guidance which restricts services to appointment only and for one client (and family member, if client is a minor) at any given time. Group sessions are not allowed unless the group consists of immediate family only.
Professional services	Activities allowed: Accountants, architects, attorneys, engineers, financial advisors, information technologists, insurance agents, tax preparers, and other office-based occupations that are typically serving a client base. Limitations: All professional services are subject to Phase 2 guidance which restricts guest occupancy to 50% of a building's occupancy with the exception of one to one service in a fully enclosed room.
Real estate (residential and commercial)	Activities allowed: All real estate brokers, firms, independent contractors and industry partners. Limitations: All real estate activities are subject to Phase 2 guidance which generally restricts out of office activities to appointment only and with no more than three people; office activities require reservations for in-person customer services and guest occupancy is limited to 50% of a building's occupancy.
Religious and faith organizations	Activities allowed: All religious and faith-based organizations may operate services including worship services; religious study classes; religious ceremonies; religious holiday celebrations, weddings, and funerals. Limitations: All religious and faith based activities are subject to Phase 2 guidance which generally restricts indoor services to the lesser of 25% capacity or 50 individuals and in-home services/counseling is restricted to no more than five individuals. Outdoor services are permitted for up to 100 individuals. Limitations on capacity does not include an organization's staff, but does include volunteers.
Restaurants and taverns	Limitations: All restaurant and tavern operations are subject to Phase 2 guidance which prohibits any bar seating and restricts indoor customer occupancy to 50% of a building's occupancy or lower as determined by the fire code. Outdoor dining is allowed at 50% of capacity and does not count toward the building occupancy limit; additional outdoor seating will be allowed provided it follows Public Health – Seattle & King County's best practices and a restaurant secures any municipal permit that may be required.

Activity Area	Phase 2 Permitted Activities and Limitations
Social and recreational gatherings	Limitations: Individuals may gather with five or fewer people from outside their household per week.
Sporting activities	Activities allowed: Golf; professional sporting activities indoor and outdoor; outdoor youth team sports and outdoor adult recreational team sports, excluding school-connected or administered team sports and junior hockey. Limitations: All sporting activities are subject to Phase 2 guidance (golf and other sporting activities). Non-professional sporting activities are generally limited to groups of five participants or less; for team sports that can mean limiting to groups of five in separate parts of the field if separated by a buffer zone. Professional sporting activities may generally operate, including up to 50 people for back office operations, for full team practices and spectator-less games and competitions.

Please have your staff contact April Putney, Director of Governmental and External Relations, at 206-263-1905 if you have questions about our request or application materials.

We appreciate the partnership of the Department of Health and your continued leadership and collaboration. Thank you for your timely consideration of this proposal.

Sincerely,



Dow Constantine
King County Executive



Claudia Balducci
Metropolitan King County Council Chair

Enclosure

cc: King County Councilmembers
ATTN: Carolyn Busch, Chief of Staff
King County Board of Health
ATTN: Susan Levy, Board of Health Administrator
Rachel Smith, Deputy County Executive
April Putney, Government & External Relations Director, Office of the Executive
Patty Hayes, Director, Public Health – Seattle & King County
Dr. Jeff Duchin, King County Local Health Officer

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

King County Safe Start Application Modified Phase 1 to Phase 2, 6.15.20

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

King County Safe Start Application Modified Phase 1 to Phase 2, 6.15.20

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,

A handwritten signature in black ink, appearing to read "Paul Hayes", with a stylized flourish at the end.

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,

A handwritten signature in black ink, appearing to read "Lynn Welling".

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