

To: Ravalli County Board of Health and County Health Officer

6 April 2020

From: James R. Olsen

Subject: COVID-19 and Public Participation

Dear Members of the Board of Health and County Health Officer,

It has been difficult to figure out how to make an input to this board or the County Health Officer. The county website and the Public Health Page does not tell the public how to make an input. Since the administration building has been closed, and the meeting scheduled for April 8 was only announced Friday – the public has been left without an obvious way to provide prior input.

Given the level of anxiety surrounding COVID-19, I cannot stress enough how important it to make accessing this constitutional right obvious to the public at this point; you are in charge, you have the duty to protect the public health, and you have the authority to control our lives. Ravalli County has a public which has diverse and useful knowledge; it would be beneficial to make sharing this wisdom and knowledge more readily available to the Board and County Health Officer:

- 1) Specific and clear methods for public input to the Board of Health AND the County Health Officer prior to any significant decision.
- 2) The method and process of participation in your deliberations.

I understand live streaming is available and the county website will be updated to make it clear to the public how to log on.

The question will arise: What is an emergency? And, does an emergency relieve you of public participation? While the emergency declarations by the Governor and County Commissioners may be an emergency, the agenda items for the April 8 meeting are not an emergency.

Here is one definition given in an appealed case: “An emergency is any event or occasional combination of circumstances that calls for immediate action or remedy; pressing necessity; exigency; a sudden or unexpected happening; an unforeseen occurrence or condition. Existing and continuing conditions are never considered emergencies.”

The Stay at Home Directive and its enforcement clause is not sudden – it has been in place. The need to make sure our medical capacity will handle an increase in need has been evident and foreseeable since January – even though the timing and size has an inherent uncertainty.

Two letters are attached to this input that have been submitted to the County Commissioners previously. The first is an essay and recommendations for action based on a week plus review of the data regarding COVID-19; it is based on references from various sources including peer reviewed journals, the CDC, and WHO. The second is shorter – an update on the first input – and urges the County to prepare for and implement the best practices, providing data that suggests that it could be a life and death issue for some in Ravalli County.

Please provide answers to the following questions:

What is your plan for a uniform, best practice, processing and treating patients?

What is your plan for ensuring medical capacity?

Do you have a projection for Ravalli County – a range of possible scenarios?

Have you estimated the requirement for:

Reagent RNA Test Kits.

Antibody Test Kits.

Availability and turnaround time of tests and test labs.

Urgent care facilities.

Hospital beds.

ICU beds.

Ventilators.

Medical Personnel protective equipment.

Have you considered the capacity and competing demands on any out-of-county facility or labs?

Are you in contact with providers who are in hot zones and other who have treated COVID-19 to learn from their experience?

Have you instituted cross training for all health care providers as a reserve to handle a COVID-19 surge.

Do you have a survey of the current inventory of beds, ventilators, and safety equipment in Ravalli County from whatever facility?

Do you have a defined process for handling someone with symptoms related to COVID-19, including things such as when to test, isolation or not while waiting for a test?

Have you publicized information on:

how members of the public can improve their immune response,

a checklist of symptoms,

specific guidance for when to contact medical providers,

what to do if they have no funds,

and assurances that they retain the right to choose or deny medical treatment?

Unfortunately, attempts to work to deal with COVID-19 are complicated by the fact that the Stay-at-Home Directive appears to be unconstitutional in that it ignores the right to assemble to practice religion and political activities. A separate input will be made on that subject.

Best Regards.



James R. Olsen

Also, on behalf of:

Hollie Rose Conger

Sue McCreary

Kris Bayer

William Moffit