

Dear Governor Newsom,

I am writing on behalf of the Mendocino County Board of Supervisors to thank you for your ongoing commitment to public health and safety during the current pandemic. We agree that elevated case rates are a serious concern and that all reasonable measures must be taken to reduce the number of new cases. We are confident that our Public Health staff are fully committed to this goal and we are appreciative that you acknowledged the actions of our Health Officer and staff during your press conference on August 17. However, we are concerned that rigid statewide restrictions may not be appropriate in all situations. We respectfully suggest that our local Public Health Officer, in consultation with California Department of Public Health staff, is uniquely qualified to make case specific decisions, based on local data and experience, to impose greater or lesser restrictions than those mandated by the State.

Significant uncertainty exists concerning COVID-19 but it is unmistakably clear that this is not a short lived phenomenon. As we move forward in the coming months we must strive to identify the right balance between restricting social and business activity and preventing the transmission of COVID-19. Mendocino County is a beautiful place to live but as elected officials we are faced daily with the challenges of providing critical services with limited financial resources. We are acutely aware that poverty is a leading determinant of community health and that in Mendocino County our high per capita ranking on many negative indicators places our residents at increased risk. These concerns have only been exacerbated with increased rates of suicide, violent crime, domestic violence, opioid overdose, and calls for mental health assistance as a result of the social and economic disruption of the last several months.

We have received numerous letters from small business owners, many women owned, of whom many are single mothers, who are struggling to save their businesses and provide for their families. They attest to the stringent safety protocols they employ. Many practitioners in several of these businesses receive 1,600 hours of instruction with an emphasis on hygiene and infectious disease and are certified by the State. Many of them have invested thousands of dollars to reconfigure their work spaces to improve hygiene, increase air circulation, mitigate close contact and otherwise reduce the risk of transmission. Many are sole proprietors who see one client at a time by appointment. There is simply no comparison to their urban counterparts.

Applying the same standards to a rural county with low population density, few congested workplaces, limited public transportation and limited commuting, is unlikely to achieve the same results as in an area with high population density, many congested work places, high reliance on public transportation and heavy intercity commuting. We fully support closure of businesses that are identified as posing a risk to public health. But we are concerned that closure of businesses without supporting data may worsen individual and community public health outcomes.

The increased case rate is certainly concerning but it is important to recognize that beginning in January Mendocino County began planning for a significantly greater surge than anything seen to date. Mendocino County secured facilities for isolation, quarantine and alternative care sites and developed extensive plans for surge capacity for hospital beds, ICU beds and ventilators. Our three local hospitals are prepared to surge to 100, 200, or more beds dedicated to Covid-19 patients. Because our hospitals are part of a larger regional network, they are able to move equipment and personnel within the system on an as needed basis.

In March, based on modeling, we were told that 40% of our population, or 36,000 people would contract Covid-19 and that 3,600 would require hospitalization with 1,800 in ICU, and that 450 would die. We were told our only choice was if we wanted the surge to hit in one or two months and overwhelm our healthcare system or be spread out over a year to give our healthcare system a chance to cope.

More recently, based on modeling, we were told that by the end of August we would have 53 people hospitalized. In fact, on August 31, we had three patients hospitalized with Covid-19 with none on ventilators and none in ICU. Despite the recent increase in cases our healthcare system is not remotely at risk of being overwhelmed and with surge plans in place is prepared to go well beyond current capacity.

Of significant concern, although Latinos make up approximately 26% of the population, over 75% of all cases identified by ethnicity are Latino, including many mono lingual Spanish speakers. We are very appreciative of the assistance of the State in providing bi-lingual case investigators and contact tracers and are committed to allocating the resources to address this dramatic health disparity.

We fully support reliance on data and science to guide us in making decisions related to the safe opening of our economy. Local data consistently shows that our increased case rate is primarily a result of family and community gatherings. In contrast, we are not aware of any data that points to re-opening specific business sectors as being responsible for the increased case load.

Therefore, in recognition of the significant variance in local conditions that influence the risk of COVID-19 transmission, we respectfully request your consideration of empowering our local Health Officer to make case specific decisions regarding local business restrictions. We believe this will result in improved public health outcomes while also benefiting the local economy and individual business owners.

Sincerely,

John Haschak
Chair

CC:

Sandra Shewry, Acting Director CDPH,
Dr. Erica Pan, Acting State Public Health Officer,
Senator Mike McGuire,
Assembly Member Jim Wood,
CSAC,
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