

**COVID-19 Tribal Leadership Session Minutes  
June 23, 2020**

Angie Gorn, CEO, NSHC	Reba Lean, NSHC	Mark Peterson, MD, Medical Director, NSHC
Kelly Bogart, NSHC	Megan MacKiernan, NSHC	Cameron Piscoya, NSHC
Kristen Timbers, NSHC	Carol Charles, NSHC	Megan Alvanna-Stimpfle
Axel Jackson, Shaktoolik	Charles Swanson, Native Village of Koyuk	Blanche Garnie, Teller

\*Over 40 participants attended today's meeting.

AGENDA ITEMS	DISCUSSION/RECOMMENDATION
Introduction to Meeting – Angie Gorn, NSHC CEO	<p><b>Today's Reminder:</b></p> <ul style="list-style-type: none"> <li>- Please keep phone muted unless speaking or asking a question</li> </ul> <p>1) Medical Staff Briefing 2) Changes with Governors mandate for travel 3) Comments and Questions</p> <p>Note- Any questions may be sent to Reba Lean at <a href="mailto:rlean@nshcorp.org">rlean@nshcorp.org</a> anytime or text to 907-434-1927 and they will be answered during the 11:00 am call.</p>
Updates	<p><b>Angie gave update on press release:</b></p> <ul style="list-style-type: none"> <li>- We did announce a 7<sup>th</sup> case for the region</li> <li>- This person diagnosed and identified outside of Nome even though they are a resident of Nome</li> <li>- They are currently working elsewhere in the state of Alaska</li> <li>- When those happen those are counted in the Nome Census count</li> <li>- Public Health nursing is investigating the case and contacts all the close contacts</li> <li>- State officials did say the patients infectious period was limited to their current location and has no length to the Bering Strait or Norton Sound region</li> <li>- It is a resident of the region but has been diagnosed and identified outside of the region within the state of Alaska</li> <li>- We will see that result in our confirmed case</li> </ul>
Medical Staff Briefing – Dr. Mark Peterson, NSHC Medical Director	<p><b>Dr. Mark Peterson gave medical staff update on the following:</b></p> <ul style="list-style-type: none"> <li>• <b>Alaska:</b> We are at 778 resident cases, 16 new cases in the previous 24 hours listed, the non-resident cases are 19, most of those were in the Dillingham seafood industry, 502 recovered, 12 deaths, 264 active resident cases, 13 hospitalization</li> <li>• <b>ANMC:</b> 0 inpatient, 62 outpatient, 12 employees</li> <li>• <b>NSHC:</b> 8,055 total number of tests done, 3,321 total number of unique patients tested in the region, 6,630 negative, 7 positive, 1,419 pending, 5 recovered, two active</li> </ul> <p><b>Village percentages:</b></p> <ul style="list-style-type: none"> <li>- Brevig: 20%</li> <li>- Elim: 22.5%</li> <li>- Gambell: 15%</li> <li>- Golovin: 28%</li> <li>- Koyuk: 23%</li> <li>- Little Diomedes: 25%</li> <li>- Nome: 43.5%</li> <li>- Saint Michael: 23%</li> </ul>

	<ul style="list-style-type: none"> <li>- Savoonga: 19%</li> <li>- Shaktoolik: 15%</li> <li>- Shishmaref: 18.5%</li> <li>- Stebbins: 14%</li> <li>- Teller: 50%</li> <li>- Unalakleet: 23%</li> <li>- Wales: 26%</li> <li>- White Mountain: 30%</li> <li>- Average region wide: 30%</li> <li>- That is outstanding and want to commend everyone that has gotten out to get tested</li> <li>- If you haven't please do get out and add to our percentages</li> <li>- Want to thank staff for all the hard work they are doing to make this happen as well</li> </ul> <p><b>Statement from Dr. Peterson:</b></p> <ul style="list-style-type: none"> <li>- We are going to have more cases coming into the state and need to be vigilant</li> <li>- The key element in all of this is getting tested</li> <li>- We are going to be encouraging all people that are going out to fish to get tested</li> </ul> <p><b>Schedule for meeting this week:</b></p> <ul style="list-style-type: none"> <li>- Senator Sullivan Wednesday June 24<sup>th</sup> and to call in earlier because we will start right at 11am</li> <li>- Thursday June 25<sup>th</sup> subsistence</li> </ul>
<p>Question and Comments</p>	<ul style="list-style-type: none"> <li>o <b>Are we still counting the one false positive case?</b> <ul style="list-style-type: none"> <li>▪ <b>Dr. P:</b> So 7 total cases. 5 have completely recovered 2 active one in region and one outside the region that is a resident of our region.</li> <li>▪ <b>AG:</b> That is a good question. I know others have asked the same. Norton Sounds has not come out and said the 5<sup>th</sup> case is a false positive. I think our goal was to share the results of the tests and to be as transparent as we could be with the information that we were aware of. The state does not go back and subtract that or change the way that it recorded, and it is still recorded as a positive.</li> </ul> </li> <li>o <b>Why would the state continue to count the false positive in their positive numbers?</b> <ul style="list-style-type: none"> <li>▪ Dr. P: I will clarify this. There is no way of knowing whether a test result is a false positive or a true positive. There is no way to know that in medicine, no test can you know that. There is only presumption or assumption. But in this case where we are reporting hard data, any positive in the state is going to be written as a positive because the reality is the case that we had it's very possible that there was a low level of viral load that was positive the first time and by the time the additional test were done the viral load was to low or not enough collected in the nose to turn positive. One can make an argument that was a true positive. Yes one could make an argument that it could have been a false positive. That's one situation where doing some antibody testing could possibly clarify further if it has been a false positive. That would take one or two months of antibody testing to really know. If the antibodies never developed in that individual one would look back and</li> </ul> </li> </ul>

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say this really seems like it was a false positive but by then removing it from the statistics just doesn't make sense because you are so far out. And you still don't know for sure because not everybody is going to build antibodies. We don't know but in reporting the data which the state has elected to (which makes sense) is just reporting any positive as a positive. What we're doing is sharing all the information, letting you know that it is a possibly of it being a false positive is certainly there but we are going to treat it as a true positive. Nobody is really keeping score on this and we do want to keep our numbers low as possible but so much of it is out of control with the numbers. The risk is too high to assume something is not a positive and then they are mingling with other people and other people are getting infected. It would be an unfortunate situation.

- **Are you counting the airport percentage in the Nome total?**
  - MM: It is based on what their address is in Cerner. Whatever home city they list as their address in the medical record that is where we are crediting their test too and were comparing the number of people who live in that community based on state and other data compared to the number of people who list that community as their home and who have been tested.
  - Dr. P: It's not where you get the test but what your address is in the medical record.
- **4<sup>th</sup> of July celebrations in the villages, what are other village communities going to do?**
  - Shaktoolik has not meet yet but will meet and discuss.
  - White Mountain is going to give each household picnic supplies and little toys for each kid and will not be having any gatherings.
  - Teller want to have activities but are going to take out the close contact races like tug-a-war, 3 leg race, the ones where you have to touch each other.
- **Has there been any work from ANTHC about specialty clinic in Nome?**
  - Dr. P: We are hoping to have the specialty clinics up and going soon hopefully by this summer but no later than this fall.