STATE OF KANSAS)
WYANDOTTE COUNTY)) SS SPECIAL SESSION, THURSDAY, OCTOBER 29, 2020
CITY OF KANSAS CITY, KS)

The Unified Government Commission of Wyandotte County/Kansas City, Kansas, met in Special Session, Thursday, October 29, 2020, with ten members present online. Bynum, Commissioner At-Large First District; Burroughs, Commissioner At-Large Second District; McKiernan, Commissioner Second District; Ramirez, Commissioner Third District; Johnson, Commissioner Fourth District; Kane, Commissioner Fifth District; Markley, Commissioner Sixth District; Walters, Commissioner Seventh District; Philbrook, Commissioner Eighth District; (arrived at 5:08 p.m.) and Alvey, Mayor/CEO presiding. Townsend, Commissioner First District; was absent. The following officials were also in attendance: Doug Bach, County Administrator; Ken Moore, Chief Legal Counsel; Bridgette Cobbins, Unified Government Clerk; Alan Howze, Melissa Sieben, and Emerick Cross; Assistant County Administrator's; Juliann VanLiew, Director of the Health Dept.; Dr. Allen Greiner, Local Health Officer; Dr. Erin Corriveau, KU Medical Center/Deputy Health Officer; Elizabeth Groenweghe, Chief Epidemiologist; Susan Caman, Health Department CHIP Coordinator; Nicole Garner, Planning & Operations Manager at the Health Department; Rebecca Goins, Health Operations Coordinator in the Health Department; Wesley McKain, Temporary CARES Fund Administrator at the Health Department; Gunnar Hand, Director of Planning and Urban Design; and Jamie Granger,

MAYOR ALVEY said before I call the meeting to order, I want to announce that due to COVID-19, we have individuals attending remotely. All participants joining by phone should mute their phones when not speaking to avoid background noise. During the meeting, please make sure that you announce yourself by name and title every time you speak so that the public participating knows who is speaking. This is critical given the number of remote participants in his current guidance from the Kansas Attorney General.

MAYOR ALVEY called the meeting to order.

ROLL CALL: McKiernan, Ramirez, Johnson, Kane, Markley, Walters, Bynum, Burroughs, Alvey.

NOTICE OF SPECIAL SESSION of the Unified Government of Wyandotte County/Kansas City, Kansas, to be held Thursday, October 29, 2020, at 5:00 p.m. by way of Zoom and online for a presentation on the Board of Health, a COVID-19 Update, and the Central Area Plan Overview presentation.

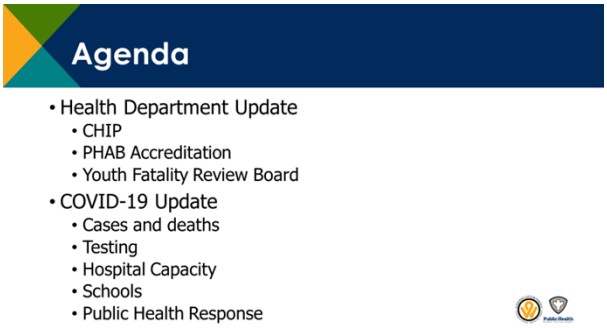
Due to COVID-19 the public will be able to observe or listen to the meeting live on YouTube or UGTV or through Zoom.

CONSENT TO MEETING of the governing body of Wyandotte County/Kansas City, Kansas, accepting service of the foregoing notice, waiving all and any irregularities in such service and in such notice, and consent and agree that we, the governing body, shall meet at the time and place therein specified and for the purpose therein stated.

Mayor Alvey said we have three presentations tonight; the Board of Health, COVID-19, and the Central Area Plan. I will turn it over to Administrator Bach to introduce staff.

Doug Bach, County Administrator, said the first part of the presentation tonight is one that we have been doing for the past couple of years as consistent to come back as the Unified Government Commission also serves as our County Board of Health. Our Health Department likes to make a report to you about activities going on within the department. We're going to give a short presentation regarding that this evening and then move on to an update regarding the overall situation regarding COVID which really is taking the predominant share of time that's going on within the Health Department. That will be the first part of the presentation.

There are many things going on, so we wanted to make sure you are all aware of it as we move through this. I will turn this over to our Director of Health Juliann VanLiew.

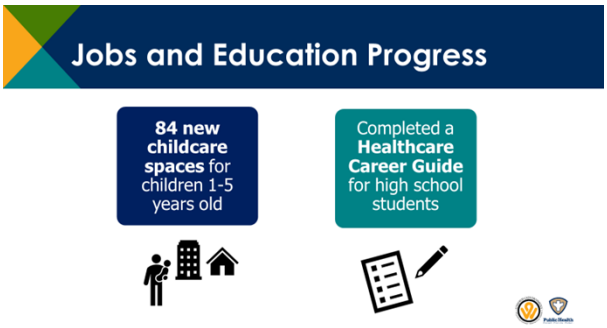


Juliann VanLiew, Health Department Director, said as Doug mentioned, we will be splitting this up in two parts, so we'll start with some updates on non-COVID things that we're very excited to get to talk to you about and then we will give you a robust update on COVID-19.

To start off we're going to give you an update on our Community Health Improvement Plan and to do that, I'm going to hand it over to Susan Caman who is our new fulltime CHIP Coordinator.

Susan Caman, Health Department CHIP Coordinator, said in today's presentation I will be providing an update on CHIP activities, but the Action Teams and Subcommittees have been meeting this last half of the year. I want to begin by providing a refresher on CHIP Structure and how my role fits into that broader structure.

At the Center of the graphic we have the Unified Government Departments and specifically the Health Department to provide an overarching support to the plan. My role as CHIP Coordinator provides direct technical assistance and support to the action teams and subcommittees involved in CHIP work in our community. This can translate to providing the lactation, coordination, raising resources by connecting partners, applying for grants, and also a very important piece is evaluation of the plan to ensure that's it is implemented as intended and we're actually conducting that right now. We're doing a CHIP year annual review—year two annual review process. We'll be coming out with a booklet for CHIP year three at the end of this year/early next year as well as doing an update to our Community Health Dashboard.

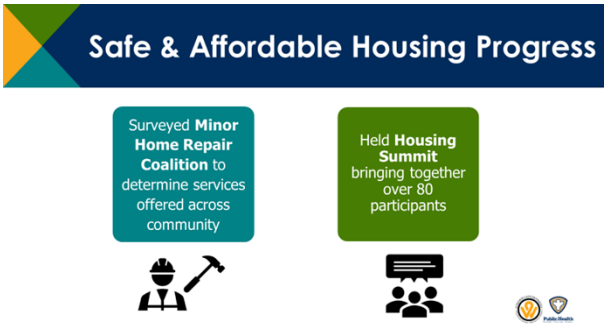


In these next four slides I wanted to highlight each of the priority areas of our Health Improvement Plan and just bring it to a couple of initiatives that the action teams and subcommittees have lead. Starting with jobs and education which covers several different book and areas, one of them being childcare, improving access and the affordability of childcare spaces in our community. This is led by the Family Conservancy through their Start Young programs and this year they have been able to create 84 new childcare spaces and when you add this number to what was accomplished last year, it's close to 270 new childcare spaces for children 1-5 years old in our community which is a crucial need right now.

The Post-Secondary Training Subcommittee partnered with the Healthcare Access Action Team to develop a Healthcare Career Guide for high school students highlighting local opportunities and local employers and this guide will be disseminated through high school counselors to our students.

We have Violence Prevention which broadly focuses on creating safer, more connected neighborhoods and one of the key projects of violence prevention is the Stories on Stories project in Clifton Park this year. You can see pictures of the service day in which they partnered with Habitat for Humanity. This is really a collaborative effort. MOCSA is involved, the UG SOAR is involved and the Parks & Rec Department, among other community groups. The goal is to restore community spaces by bringing local artwork onto vacant buildings and structures.

We also have the REVIVE program which a program for youth survivors of violence and this is in partnership with KU Med, ThrYve Program, UG Community Corrections and other community groups. It connects youth survivors of violence to support services while they're at KU Med's Emergency Department to prevent any future violence. Thus far, the program has had 17 referrals here in our community.



We have Safe & Affordable Housing in which they just had their second annual Housing Summit. It brought together over 80 participants and it was held virtually. The focus here was to discuss strategies to prevent and reduce evictions during the pandemic, also a great momentum and good recommendations from that group.

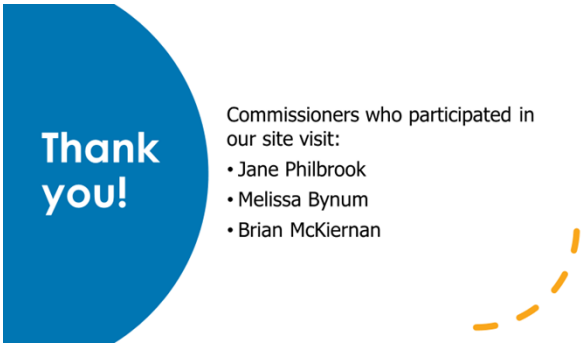
The group also surveyed the Minor Home Repair Coalition to determine—establish a community baseline for services offered and any population served to see if there are any gaps in prevention and how we can improve those going forward.

Lastly, we have the Health Care Access Action Team and they partnered with the Community Health Counsel of Wyandotte to implement a Health Communication Campaign to highlight the importance of establishing a primary care home within the county and they actually tailored the messages to include the importance of that during COVID-19. The messages were offered in four different languages and was incredibly successful. It had a meal component and that reached over 80,000 households in our community and had an online component that had over 160 impressions online and 80% of the views of those impressions came from the Spanish content which is definitely a population we want to reduce barriers to accessing health care in our community.

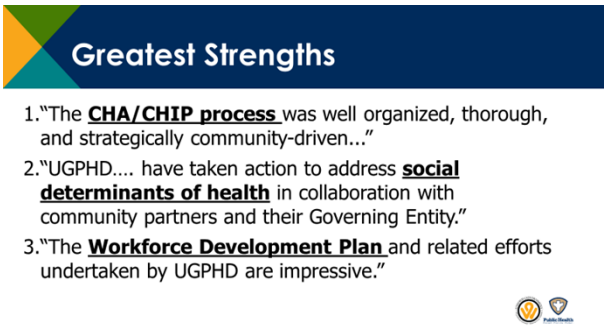
The group is currently conducting a Care Coordination Assessment between primary care providers and behavioral health providers in our community and this is to assess referrals between both entities and assess what referral platforms are being used and how these referrals are occurring to make sure that we are connecting patients between providers and clinics as they need to be.

That concludes my presentation for this evening on CHIP. I will now hand it over to Nicole Gardner who is the Planning & Operations Manager at the Health Department. She will be providing an update on PHAB Accreditation.

Nicole Garner, Planning & Operations Manager at the Health Department, said despite facing a pandemic we still managed to hold our site visit earlier this fall and that was held September 14th-16th.

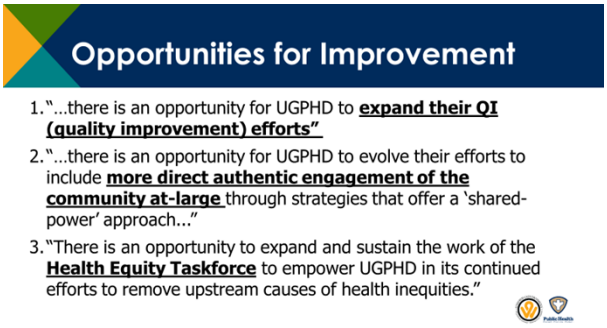


Before we begin to talk about our site visit, I want to first thank our commissioners who participated in the site visit. Those commissioners where Jane Philbrook, Commissioner Melissa Bynum and Commissioner Brian McKiernan. Thank you so much for your overall collaboration and support.

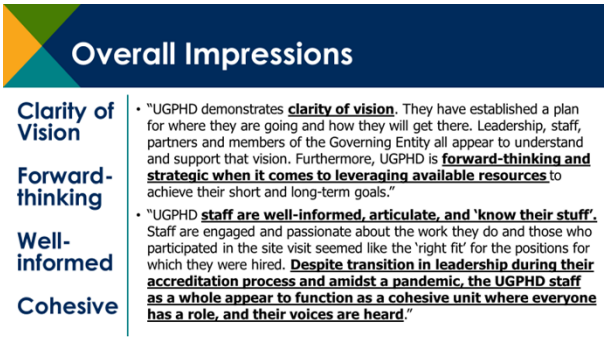


Here is what the Site team deemed as our strengths. First, the CHIP process was well organized, thorough, and strategically community-driven. They also determined that we address the overall

social determinants of health in collaboration with community partners and their governing entity. Lastly, the Workforce Development Plan was impressive.



They also identified areas of opportunity prior to the overall site visit. The first one was expanding the overall quality improvement process. The next area of opportunity was more direct authentic engagement of the community at-large. The last one was overall Health Equity Taskforce and really expanding that and seeing that work with the overall UG.



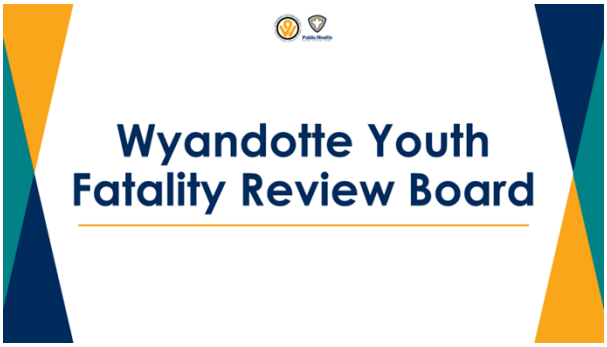
Here is the overall impressions of the overall processes. I want to take time to read this. "The UG Public Health Department demonstrates clarity of vision. They have established a plan for where they are going and how they will get there. Leadership, staff, partners and members of the governing entity all appear to understand and support that vision. Furthermore, the Unified Government Public Health Department is forward-thinking and strategic when it comes to leveraging available resources to achieve their short and long-term goals."

"The UG Public Health Department staff are well-informed, articulate, and know their stuff. Staff are engaged and passionate in the work they do and those who participated in the site visit seemed like the right fit for the positions for which they were hired. Despite the transition in

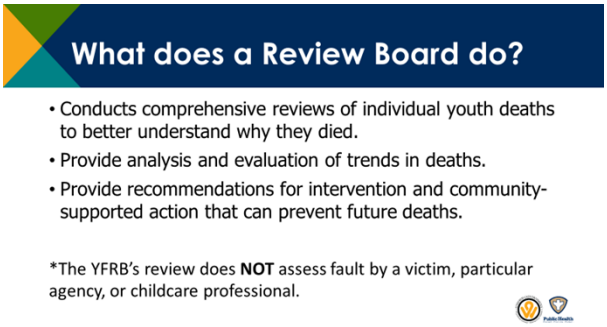
leadership during their accreditation process and amidst a pandemic, the UG staff as a whole appears to function as a cohesive unit and everyone has a role and their voices are heard."

The next steps in the accreditation process is to actually submit the report and, hopefully, we'll get accredited.

Ms. VanLiew said just so folks know, that will happen in November so we will be coming to you hopefully late next month with a determination. **Ms. Garner** said I would like to turn this over to Rebecca Goins who is going to talk about youth fatalities.

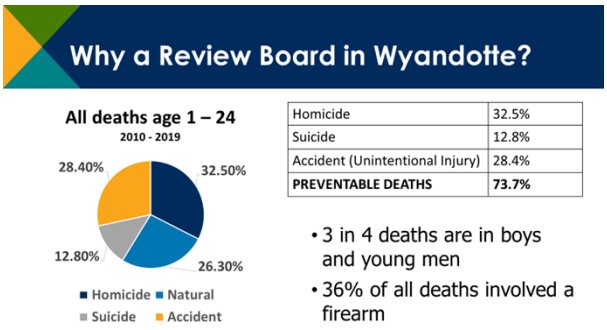


Rebecca Goins, Health Operations Coordinator, said one of the main projects that we are excited to be working on is the Wyandotte County Youth Fatality Review Board.



I want to go into just very high level what our Review Board does. The main thing I want to emphasize here is that it might sound a bit intimating for there to be a Review Board about something because that implies that a process is being studied. The whole point of a Review Board, particularly the part we're trying to focus on, which is the tragedy of a child or a youth death is that we want to understand points of prevention that could have occurred to prevent that death. Individual cases are brought to a group and that multi-disciplinary and confidential group discusses what went wrong, to put it simply, but also what were the gaps and how agencies could have stepped in or what impeded an agency from being able to step in.

As I mentioned, this is not punitive, it's not to point blame or to choose any agencies of dropping the ball or any wrong doing. It's more so to figure out what lead your agency being unable to interact with this person in the way that it wished it could. So, we all come together in a room and we review that, and all these conversations are meant to provide recommendations and, again, illustrate and highlight the gaps and points of intervention that could prevent future tragedies.



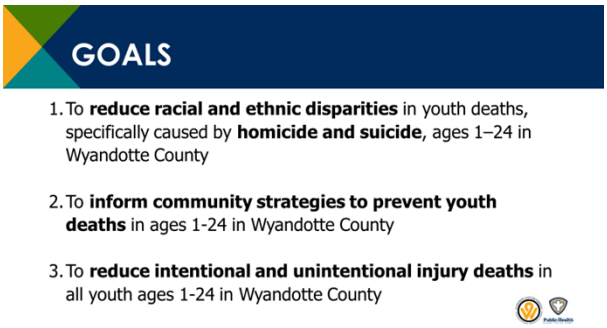
I wanted us to just take a look at some preliminary data now that I have started with vital statistics of youth and child deaths and we're going to be focusing on ages 1-24. Some are already focused on earlier years, one year postpartum. As you can see here that almost one-third of the deaths in

our county are due to homicide. When we look at this and we compare it to the national and the state level, it's bad, it's really bad. On the national level it's 9% of all deaths in the same exact age range are due to homicide and so we can see quite clearly that Wyandotte has a serious issue with violence.

Then we also look at suicide and we also look at unintentional injuries. These also are very high percentages and most, I guess, inspiring; I don't want to bring everybody down about the homicide, is that when you add all these up, that essentially tells us that three-fourths of all youth deaths in this age range can be prevented. So, that's hopeful and that's the point of what our Review Board would do is trying to figure out what lead this individual to be more at-risk of either using violence or being a victim of violence or what led someone to be more at-risk of a mental health issue and leading to suicide.

Just really quickly, I want to clarify what natural causes of death means. You probably can see it, it's the 26.3% and I don't want you to think that it's natural for someone between the ages of 1-24 to die, it's totally not. Young people shouldn't die, but these are classified this way because it implies there is some sort of medical condition. Maybe it was asthma, maybe it was a neurological condition, so I just wanted to throw that out there. As far as unintentional injuries, most of these are usually motor vehicle crashes which, obviously, you know are preventable for safety, safer driving practices and things like that.

I do want to highlight most of these deaths are boys and young men, but particularly most of these deaths are Black and Latin mix boys and young men and so there is a serious racial disparity with who is dying.



This leads into a really great survey that I'm so grateful that our stakeholders were interested in doing. I really just wanted to get a sense of what did actual Wyandotte community folks whether

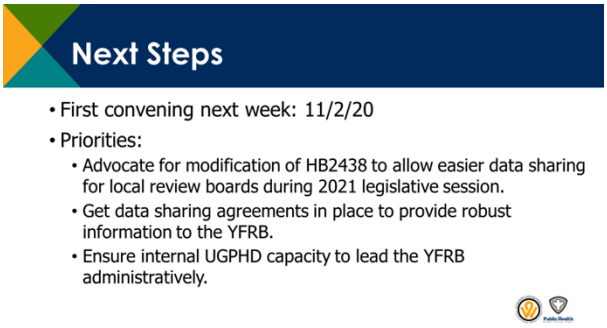
they're in community-based organization, whether they're working in churches, whether they're working with people or they're just normal people, parents. I wanted to know what did they want out of a Review Board, what was important to them for the Review Board to focus on. We had 132 respondents from our community which is a great number and these respondents covered a wide range of different sectors coming from faith-based organizations, coming from Trible organizations, also parents and just community-based organizations. We will get to specific names in other slides.

I ran the gamut from education to medical personnel and the number one goal that everyone was really strongly in support of was to reduce racial and ethnic disparities in deaths. This was the number one goal that the majority wanted. It was like 72 people out of 132 voted that this was very important and the other two were the other top three. Of course, two and three are no-brainer, but number one, focusing on racial and ethnic disparities is very important to our community members.

As I mentioned, to get into more detail about who specifically was interested, we had a lot of people give feedback during this survey saying I want to be on this board, I want to be on this board, and we had them drop their organization name. In the strong interest column here, you can see—and this is just like 10% of the people that we heard from, but this is just a few groups who—multiple people from that organization wrote down their organization.

Also, we have a meeting coming up next week with some key players and this is the already engaged column. We're meeting with the DA, we're meeting with all three hospitals at the table, we're meeting even with the National Center for Fatality review, so she is going to be coming in. We have this meeting next week where we will actually talk about, okay, you are our core members, we literally cannot function without you all, so we really need to be onboard before

we add in the AdHoc members who also have an interest and how can we go about this. How can we open up these data sharing and communication lines.



As I mentioned, we're convening next week and we're still figuring out the makeup of the board and, as I mentioned, we have a diverse group of respondents. We do have a need for an advocacy for a change in our state statute. As I mentioned, we're going to be discussing how to open up data sharing lines, but this is actually an obstacle for us because sharing between agencies for case information is not state protected. I just want to let you all know that coming from the UG, this will be on the policy agenda to change the state statute to make it easier for us on the county level to have those data sharing agreements with these agencies because, as I mentioned, we need that individual case information to find out the risk or protector factors for each individual death that occurs. I believe that's it, so I'll pass it on to Juliann.

Ms. VanLiew said it was nice to get to talk about some non-COVID things just a little bit. There are a lot of folks in the Health Department who are kind of plugging along keeping other projects going and it's great to be able to highlight that.

Mayor Alvey said we have some hands raised, so I'm going to ask Commission if they have any comments or questions on this part of the presentation.

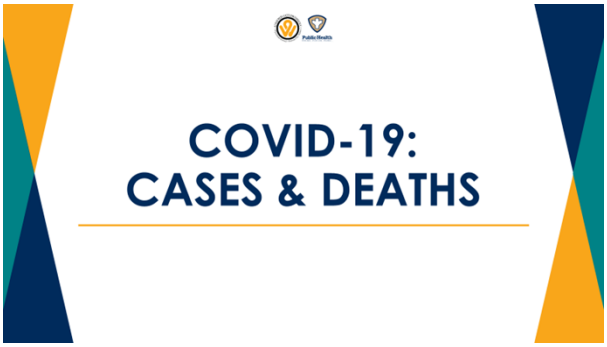
Commissioner McKiernan said this will go back to Becky. You put up Why a Review Board in Wyandotte slide the percentages of deaths by different causes and you alluded to comparisons to some national numbers. Do you have or can you get for us those national numbers for those same categories so that we have a comparison between our percentages and some other reference? **Ms.**

Goins said yes. I actually mentioned that I had been working on this since June really, so I have done a lot of research and I have those numbers that right now I could say verbally, but I also had infographics and a one pager to send out. Juliann has those that she can send them to you directly or to the group. **Ms. VanLiew** said absolutely. We'll get those out this evening. **Ms. Goins** said this info is very stark, I will warn you.

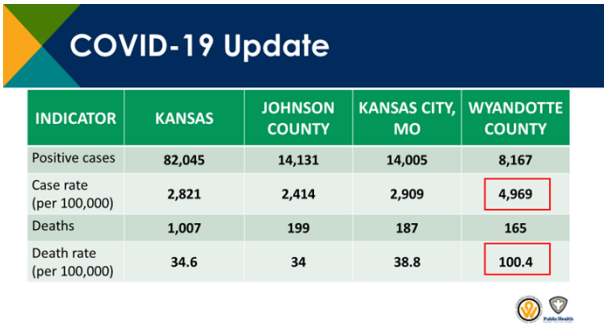
Commissioner Ramirez said thank you for putting that together. I think the Review Board is something very important especially in my district and in part of my community there has been a lot of youth deaths and that's not just in my district, but around the county so I think this is an amazing idea to help us chart a path and figure out what we can do and what is missing. I thank you for that and I am open to help and assist in any way, I would love to help with this. You know, I work with children. Children are kind of a sweet spot for me and I want to make sure our kids in Wyandotte are safe and they're happy and that they are having fun, so I would love to help in any way that I can. **Ms. VanLiew** said that's wonderful Commissioner. Thank you very much for your interest.

Commissioner Bynum said, Becky, with regard to the Fatality Review Board, the Kansas City Kansas Public Schools have launched their anti-violence initiative and the Unified Government has come alongside them, but I don't see them listed on your list of organizations. **Ms. VanLiew** said the intent is they absolutely will be. We've done some sort of real preliminary conversations, but I didn't want to put them down there as committed because I don't have them kind of locked down yet, but your point is absolutely correct. Education needs to be represented very robustly and that is our intention.

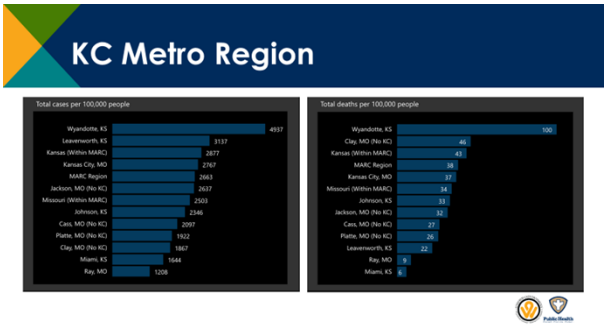
Mayor Alvey said, Juliann, proceed.



Ms. VanLiew said we're going to do our first section of COVID, an update on cases and deaths in our county.

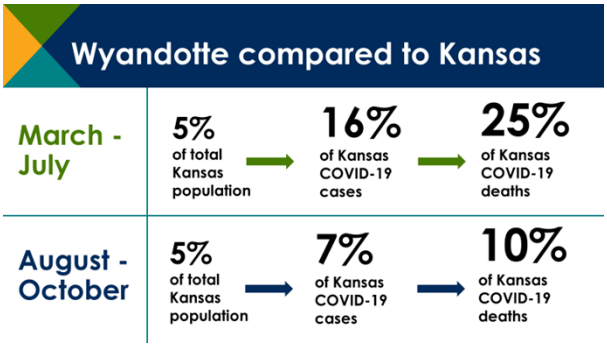


I'm bringing you a slide that I know looks familiar. A reminder for our audience that in public health we use case rates per 100,000 population to compare ourselves to one another. The important parts being here over in these red boxes demonstrating that our case rate per 100,000 is near 5,000 compared to Kansa—or Johnson County or KCMO. Obviously, significantly higher and perhaps even more concerning our death rate being three times as high as the state of Kansas and as Johnson County.



This slide show similar data in a different way, but again, here you can see, unfortunately, we continue to lead in case rates as well as death rates well beyond our surrounding jurisdictions. The

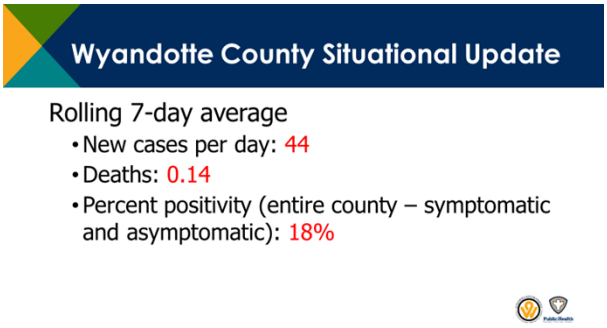
point here being that, of course, we're still experiencing a very disproportionate burden of COVID in our community.



However, there are some things that are working and we're going to talk about that throughout the presentation. One way that we've broken it down here this evening is we're kind of thinking a little bit about COVID as being in two phases to date.

If we look at the first phase of COVID being March-July, that was before the majority of our health orders were in place. Our health orders began to be in place near the end of June specifically for masks as well as other ones in July. You can see that we in Wyandotte County comprise 5% of Kansas total population and in that time period of March-July we were attributable for 16% of cases and 25% of deaths. So, again, obviously way out ahead of our other counties.

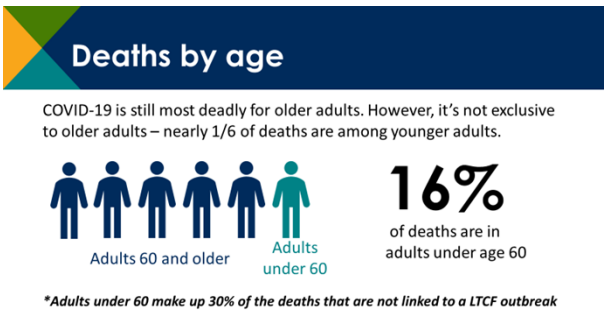
However, we did put significant public health measures in place and we really started to see the result of those in the last several months. So, between August-October if we look at the same data, of course, we have the same percent of Kansas population, but we now are attributable to 7% of cases in the state and 10% of deaths. This is due obviously to a number of factors. It is very hard to pinpoint very specific causes, but we will talk a little bit more about the mask mandate and other things that we put in place, but the truth is that we have put mechanisms into place in our community that others in Kansas did not and we have seen those play out in our favor. We are thoroughly convinced that the things we are doing are helping us to be in a better spot right now than perhaps some of our rural counties, unfortunately, in Kansas.



We traditionally talk about our 7-day rolling average, and again, as a reminder, that's just because from one day to the next there is variation in the data. Over the last 7-days we're averaging about 44 cases a day. This is typical for us over the last several weeks so we're really hovering anywhere between 35 and 45 or 35 and 50 cases per day; so not nearly as well as we would like to see of course, but not necessarily spiking again as some of our other jurisdictions are.

Death average for the last 7-days is also down. We did have a fairly significant spike a couple weeks ago that was largely attributed to, unfortunately, one long-term care facility outbreak that we now have a little bit better under control, but of course those long-term care facilities continue to be a point of interest for us and we continue to work with them closely.

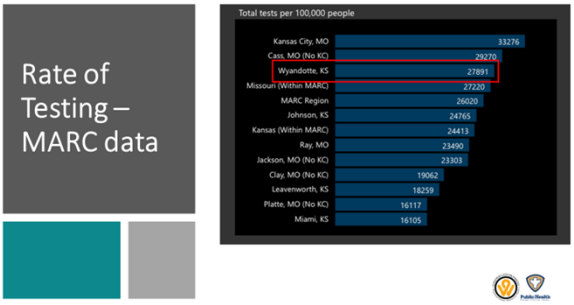
We'll circle back to percent positivity later in the presentation, but just as an overall county we continue to be on the 7-day rolling average of 18% positivity. I just want to make sure folks understand because I've heard some rumors of misconception of what this number means. This does not mean that 18% of folks in our community have COVID. This means that of everyone who is tested on any given day, 18% of those folks have their test results come back positive. So, again, as a reminder; that includes folks that are getting tested because they have symptoms or close contact as well as those who are getting tested now who are asymptomatic and do not have a close contact.



Lastly, in this initial part of the update, I wanted to touch briefly on deaths by age. There is also somewhat of a conception around the country that is merely only something that you need to be concerned about if you're an older person or if you have preexisting health conditions. While, yes, those populations are absolutely at higher risk, we do want folks to know that if you look at all deaths in Wyandotte County attributable to COVID, 16% of those are under the age of 60, so we do have a fair number of folks in their 30s, 40s and 50s who have passed away.

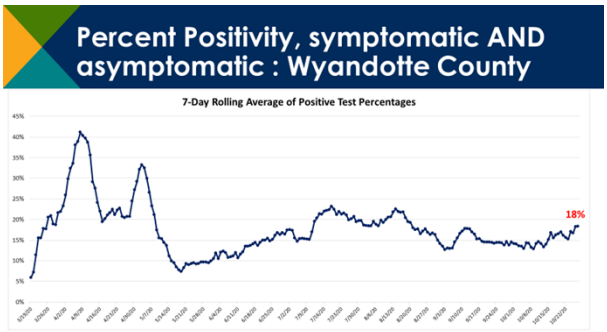
Additionally, you can see down here, if you remove death links to long-term care, which of course are very important deaths, we do not mean to minimize them, but if you take that out of the equation and look purely at cases that we believe are attributed to community spread, then 30% of those deaths are under the age of 60. We make this point again just to drive home to our community that this is something serious for all ages and all health conditions.

I'm going to go ahead now and throw this over to Dr. Corriveau who is going to give us an update on testing.

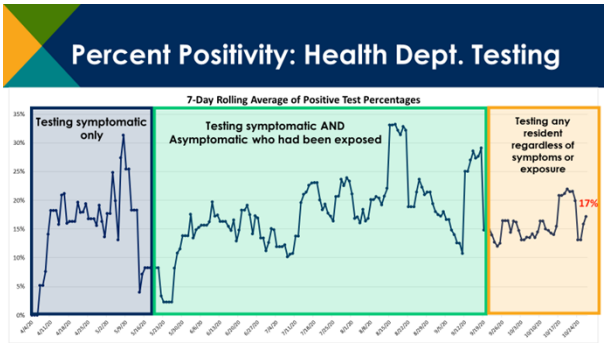


Dr. Erin Corriveau, KU Medical Center/Deputy Health Officer, said some good news. In terms of our testing for COVID-19, we're actually doing really well. We're up here third in the metro area, so we are continuing to test a lot of people. Of course our testing site has moved over

to the old K-Mart location. We've seen actually an uptick in testing in the past couple weeks which has been really excellent, and we continue to have various popup sites throughout the community.



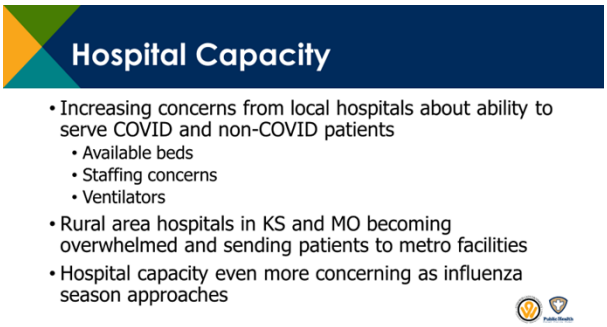
Again, regarding our percent positivity as Juliann has just explained what that is. We have here a graph of throughout the pandemic our 7-day rolling average of positive—our percent positively. We see up here about 18%. We kind of say that we're on this fluctuating plateau at this point. I do also want to make the point that this is all the testing in Wyandotte County and what I mean by that is that is our testing that is at the Health Department and also various hospitals and doctor offices and other locations around the county.



This slide we see our percent positivity for just the Health Department testing and so that was throughout the pandemic and were here at our Health Department and now over at the old K-Mart site. Interestingly, we now, over toward the right of the slide, are testing everyone who wants to be tested for COVID-19 regardless of symptoms or exposure to the disease. We started that three or four weeks ago. Prior to that we were only testing those who had symptoms or those people who knew they had been exposed.

One thing that concerns us very greatly is that we do not see a decrease, a very big decrease, in our percent of positivity. We expected to see that when we started testing anybody who wanted to be tested regardless of symptoms, so we believe that shows us that we have a tremendous amount of community spread within Wyandotte County.

I want to talk for just a minute on hospital capacity.



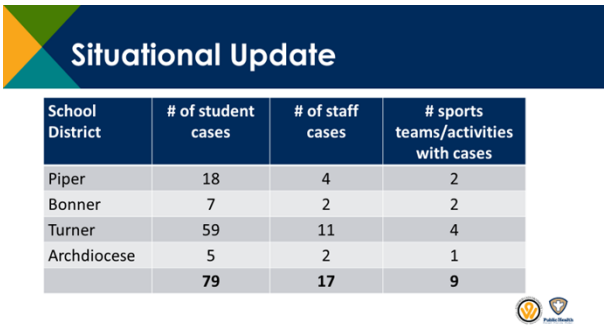
We have received some calls and news from surrounding hospitals that is concerning to us and we wanted to let the community, commissioners and Mayor know about that. Dr. Greiner and I have been in very close touch, especially with the hospitals within Wyandotte County throughout this pandemic. Over at KU Hospital, Dr. Steve Stites who leads a group of CMOs at various hospitals throughout the metro area and they talk frequently about their capacity, bed capacity, ICU capacity and also ventilator capacity. It has come to our attention within the last couple of weeks that many of the hospitals have been counting ICU beds that were for neonates and also for pediatric patients that really couldn't be used to have a COVID positive adult come into the hospital and use that particular ventilator. So, unfortunately, we've been made aware that we had an over estimation of the number of ICU beds and ventilators that we had in the community.

We have seen the stress play out. We're having some issues, unfortunately, with difficulty in transferring patients, for instance, into KU Hospital. We've had to transfer patients around to different community hospitals. We've had this issue in rural Kansas as well and so it's very concerning to us. There are efforts happening right now to make this reporting far more accurate. We're working very closely with our hospitals and our elected officials throughout the metro area to ensure that we have an accurate count of what we have available for the community.

Again, I do want to say that this is concerning to us. I believe this is something that is going to be influencing the way we think about that, that level of community stress, because clearly we want to ensure that we have proper hospital capacity and especially ventilator capacity should we need it in the future.

I'm going to turn it here to Dr. Greiner.

Dr. Allen Greiner, Local Health Officer, said we just want to go over things that are going on in schools and give you a situational update on that.



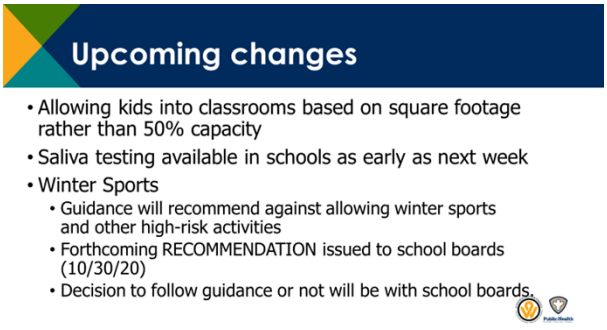
We've worked really, really closely with the superintendents here in the county and meeting once or twice a week on a regular basis for months now and I think that has really led to some great

planning and excellent efforts on all their part to keep students safe and work really hard to get students back in school to some extent but do it safely.

We had very, very few cases—of all these cases we're going to present here that have anything to do with transmission occurring in school. What mostly is happening is students, we believe, are getting exposed and then getting COVID in community settings. Again, that's another reason we think there is lots and lots of community spread going on, but when we do have those cases, we do often have to quarantine other students because those other students were in close contact with the student who is the case.

You can see here in the different districts. We've had the most student cases in Turner, and we've had the most staff cases in Turner as well. You may have heard, we had one elementary school that did have to temporarily close down just because of the number of cases. That was actually the only place where some in-school transmission, we believe, has been confirmed and has occurred in all of our settings which is good. Overall we're very happy with that.

We've had some cases among sports teams. You can see that there. There is a total of 9 and we've had some of those teams that have also had to quarantine and make some changes in their plans.



We are going to make some upcoming changes. Again, we're working very closely with the schools on this. They have concerns about some of the performance of some of their students who are having to do quite a bit of virtual learning and believe that could be improved with more in-class activity. We have had an agreement with them and in our cores talked about having them work toward a 50% capacity or a 50% density of kids in the spaces. If they were doing things in school, we're going to make changes to that within days here so that they can have more kids. We will still try to have what we talk about as a 6-foot distancing sort of thing and talk about 36 sq. ft.

possibly with a combination for room walls and things like that. We believe they could safety get more kids in schools and so we're working to do that.

We've also got our new saliva testing now ready to go and available. In fact, that's going to ship out as early as Monday to school nurses so they can start to test kids that popup with symptoms and those tests will be picked up by delivery drivers each day and we'll get those results back within 24 hours and I think that will give us another edge.

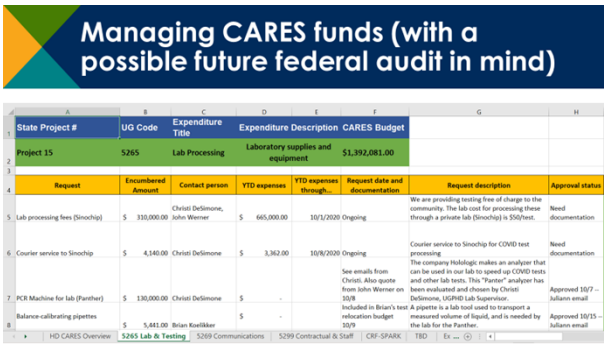
We've worked to try to figure out what to do with winter sports and we will be doing something very similar to Johnson County. You may have seen the news that the Johnson County Health Department came out with a statement that they are strongly recommending against winter sports and other high-risk school activities. It is a recommendation. It will not be an order and we'll be talking with the school superintendents about this in more detail tomorrow.

Our other orders will not be changing. We'll still be have our mask order in place and we'll have social distancing orders there that in some ways affect certain activities that students are doing regardless of whether something is a recommendation or ordinance. We feel like this is the best route to go given what Johnson County is doing and given what has happened with sports over the course of the fall. We will also change a few things in our orders because we don't want to have a ban on any of the fall sports anymore if it doesn't fit well and is not consistent with this new recommendation.

Now it goes to Wes McKain to talk about CARES Fund.

Wesley McKain, Temporary CARES Fund Administrator at the Health Department, said we got a substantial outlay from the CARES Fund, the largest single source of funding I've ever seen at the Health Department in my eight years. So, Juliann asked me to step in and kind of be

an air traffic controller for the money. There is also a lot of people working on that money at the Health Department and so a lot of it has been kind of coordinating in roles and things like that, so I have a very short presentation to just show you that I think we're doing an okay job.



This is just a—one of my primary concerns with this money is that there is a lot of people that it's accountable to. That was one of the most interesting things. Federal Government, obviously, although we have no idea how or when or where the state government, the SPARK Committee, you all the Commission, the Internal Cares Committee and other folks who we have to ask for advice and things like that. James Bain, our Attorney, and other UG staff has been amazing in helping us understand this funding source. Budget has been great, and Purchasing has been great and so they've been very helpful to us.

This just gives you—we got the money in these big buckets. You can see part of our challenge. We've got a $1.4M lab processing bucket and you know that's it. That's our line item. There are thing under that and so we're working to track the requests, the COVID justification. Everything that is being approved is getting approved by Juliann unless otherwise indicated.

The one innovation we've done to make sure this money is spent well and also before the deadline; we've put in place CARES Fund Manager role which is—in a lot of parts of our budget we have these big buckets of responsibility and money. Test site relocation for our COVID testing, vaccine distribution helping to get prepped for that, the public communications and then there's lots of other ones.

Where that's possible, we have designated a staff person internally to be a CARE Fund Manager, we've flattened the spending hierarchy like the authorization hierarchy. There's already a lot of cooks in the kitchen honestly with this money. Sometimes I have to talk to several people to see if the expense is allowable or not, so the CARE Fund Manager we asked them to prepare a

budget. They do so in advance if they can and then they submit it to me and then to Juliann to take a look at and then she approves it all at once. Instead of her having to, for instance, our test site—Brian who is our CARE Fund Manager on that and is doing a wonderful job, he has 30-40 things he has to buy for that and so Juliann—I didn't want Juliann or anybody to be getting 30 or 40 emails to authorize and so he put it together. Juliann looked at it, approved it, and it's working great. He's spending—once those approvals are in place, then Brian doesn't have to talk to anyone unless there is an extraordinary or new thing that he needs to do his job there, he doesn't have to talk to us. It's been approved, he gets a credit card and he can spend what he needs. That is what we have had to do to get this money spent before our deadline. It's going well.

There's just a couple slides here to show you what the money is being spent on. COVID test site. The old K-Mart is a great space. It has been transformed and you can see some of the costs there. It wasn't cheap, rent and utilities, we had to redo the whole internal space, put infrastructure in place to make sure people can use the internet and make phone calls and all that kind of stuff.

Actually our biggest single expense, COVID related expense, I wasn't surprised, but I thought it was interesting, is public communication. We have spent a lot of money trying to educate everybody in Wyandotte County about COVID in all the languages that are spoken and written

and a lot of media, so Dave Reno and Janell have been spearheading that. There are CARES Fund Managers for that and have been doing a great job.

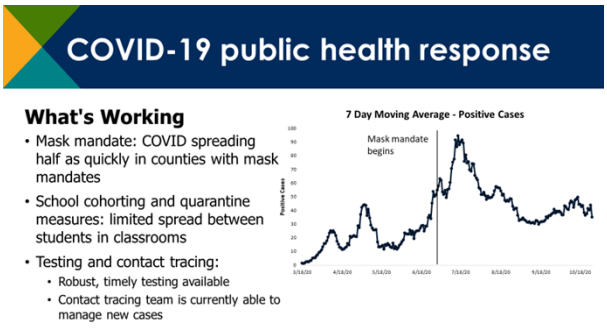
Image credit: Kansas City Star

The last one, our second biggest one is contracted staff. We've added 30 perhaps, maybe even more contracted staff. You can see here our testing staff on the left and then one of our disease investigators, Victor, who helps us out with some of the marketing is there on the right. We've added all of these staff and we'll continue to utilize them in 2021 as well.

That's it for me. I just wanted to give you a really quick flavor of what we're doing. The last thing is a month and a half ago if I had to give this presentation, there were so many unknowns that I would have been pretty nervous, but I can tell you that with two months out I feel very good about it. I feel like we're going to hit our deadline. Our money is being spent well. I feel very comfortable about it.

Ms. VanLiew said Wes has truly stepped into an entirely new line of work and is managing $10M quite wonderfully, so appreciate you.

We're going to pivot to our last section here. We've got another handful of slides just to talk a little bit more about what's working and what we need to improve—continue to improve on in our community, so I'm going to swing it here to our Chief Epidemiologist Elizabeth Groenweghe.



Elizabeth Groenweghe, Chief Epidemiologist, said I'm going to be talking a bit about some of the interventions and responses that we've had here at the Health Department to help mitigate and control the spread of COVID in Wyandotte County.

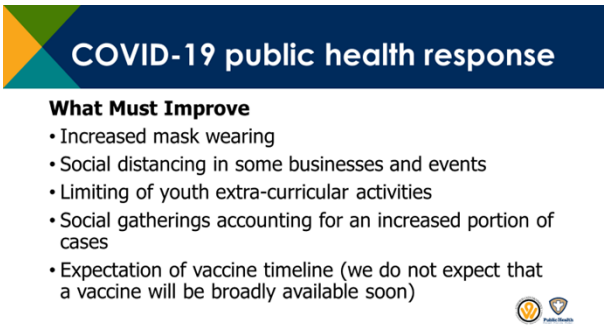
First, I wanted to talk a bit about what things seem to be working well. As I'm sure you all know we have a mask mandate in Wyandotte County so all residents are required to wear a mask anytime they will be out in public or around other residents. We really think this has been an important control measure in Wyandotte County, so there is data showing that COVID spreads half as quickly in counties that have a mask mandate as counties that don't; particularly rural counties in Kansas are seeing a huge surge in cases recently because they don't have a mask mandate.

You can see on the right here we have a graph that kind of shows when we initiated our mask mandate. That's the vertical line there and there was an increase in cases shortly after that because it does take a few weeks for us to see the impact of the mask mandate, but then after that spike there, we saw a very noticeable decrease in the number of COVID cases. We do think that the mask mandate is working well and it's an intervention we plan to keep in place.

We've also seen, as Dr. Greiner mentioned previously, not very much transmission of COVID going on within the school buildings which is really great. It seems like the cases we are seeing in the schools are not spreading within the schools and they're acquired outside in the community as opposed to in the schools. We really think that's because the schools are doing a great job of cohorting and also initiating quarantine when necessary. Those two actions together

really seem to be controlling the spread of COVID within the schools. I really want to thank our school partners for doing such a good job with that.

Finally, as Dr. Corriveau mentioned previously, we're doing a really good with testing. Testing is very widely available within Wyandotte County. The turnaround time is great and then we're doing a really good job with contact tracing as well. Anyone who is diagnosed with COVID, we receive that lab very promptly and it's assigned to an investigator who follows up and does all the contract tracing to quickly quarantine any contacts so that will help mitigate the spread as well.



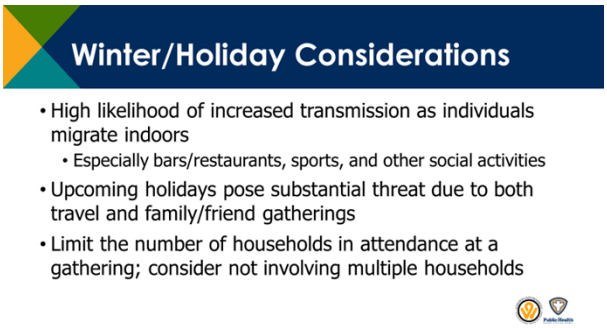
There are some areas that we need to continue to work on in Wyandotte County. I mentioned it seems like the data showing us the mask wearing and the mask mandate is working; however, I think that people are getting kind of fatigued and tired of COVID. I know that I'm personally getting tired of this COVID and so we're seeing a little bit less of the mask wearing. There are certain businesses and events where we're getting complaints about people not wearing masks and people not social distancing. All those kinds of the things are a concern as people are starting to get tired of COVID and maybe aren't being as stringent with the mask wearing and social distancing as they were a couple months ago.

We also think it's important to continue to limit the youth extra-curricular activities, especially sports and contact sports, which is why we will be issuing that recommendation about youth extra-curricular activities and sports. It's something we all need to work together on.

Within the last couple months as well, we've seen a lot of cases associated with social gatherings; things like weddings, birthday parties, baby showers, bachelorette parties, all of these different social gatherings. People want to get back to normal and live their normal lives and do those kind of activities, but unfortunately, those kind of activities do contribute to the spread of COVID in our community. We've seen quite a few outbreaks that are traced back to these

gatherings of family and friends. We continue to discourage people from getting together with groups of people that aren't part of their regular bubbles or social circles.

Finally, I wanted to just kind of touch on the expectation of a vaccine. I think that some people in the community are viewing a vaccine as the magic bullet that's going to come and everything is going to be great and COVID is immediately going to go away, but the reality is that we still don't know the timeline for the vaccine. There's still a lot of unknowns. An effective vaccine is still probably months away and it's going to take time for that vaccine to be widely distributed out to the community and there's going to be people that refuse the vaccine as well. So, with all those factors in mind, I think it's important to kind of limit our expectations that a vaccine is going to be this magical for us to get out of this.

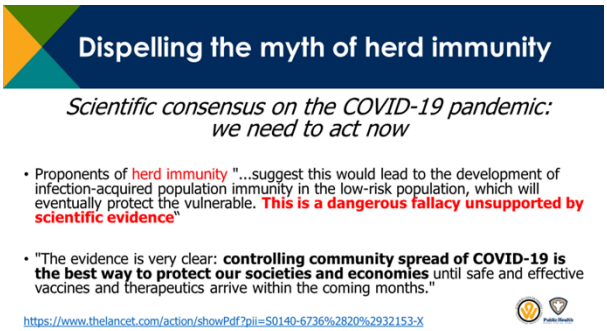


I also wanted to touch on holidays and social gatherings because, to be honest, these next couple months are going to be a challenge for our community. There's a lot of things that we do during the holiday season that increase the likelihood of transmission of COVID. It's cold outside right now and so people are spending more time indoors and then people might want to gather for social activities indoors; things like restaurants and bars, things like that.

People also travel a lot for the holidays and maybe go out of state, out of town to visit family and friends. They get with other groups of people that they don't normally see on a day-to-day basis. All of those factors together could be bad news for COVID spread. We really want to try to encourage people to limit all of those activities as much as they can. You know, limit the number of people that you get together for the holidays and especially the number of households. I know that a lot of people get together for Thanksgiving, Christmas, other holidays and they might have multiple generations all together. This year that might not be a good idea. You don't want

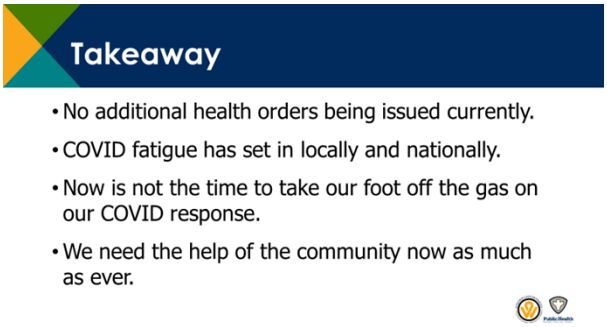
to accidently infect grandma with COVID or something like that, so unfortunately, we really discourage that kind of stuff this year.

Finally, I'm going to turn it over to Dr. Greiner. He has a couple other items that he would like to touch on for the end of our presentation.



Dr. Allen Greiner, Local Health Officer, said we just wanted to mention as well that this topic of herd immunity that folks may have heard about in the press and other places, we feel like the scientific evidence is very clear that we're incredibly far away from a situation where we would have enough immunity out in the community that spread would dissipate. There's really no evidence of any modern pandemic or epidemic that has controlled itself through this kind of situation where people got the disease. The one way things have been controlled is through vaccination which does create an immune response and we hope there will be a safe and effective vaccine soon, but as Elizabeth said just a second ago, that's probably a ways off and I'm sure many of you have talked to folks that you know who have a lot of hesitancy about the safety and effectiveness of the vaccine. Even when the safe and effective ones are here, it's going to be a big effort to do that work. We think that's the thing, as well as the change in behavior that Elizabeth talked about in-depth, that's going to get us where we need to go.

There was a really nice article published in the *Lancet* that the URL is at the bottom of the screen here, if you're interested in looking at that, that really lays out the science around this issue and also does something that other groups have done that sort of makes a declaration to sort of say, look, the science is in favor of working toward behavior change and working on finding new therapy's and finding a safe and effective vaccine. We wanted to just put that out there because we feel like it's important in our work to address this head on.



Takeaways; we are not going to have any additional new orders. We will have some new arrangements with the school districts that we talked about before. We have a new recommendation coming out about winter sports. We know COVID fatigue has set in locally and nationally. We are all tired. We all want this to get better. We know some of the methodologies that can get us there now and we have to keep pressing forward with encouraging folks to get engaged in what makes sense. We've seen other countries get this under control with these behavior change things and hopefully that and an eventual safe and effective vaccine gets us there.

We need the community to help us. We've all got to work together, and we've got to keep fighting together and just be careful and protect each other in the coming months. It could be a rough winter ride, so we hope we all can keep working together. I think this county has done something pretty remarkable in terms of how we've handled this compared to some other places both in the metro and in our quad state region.

Thanks everyone. I think that's it from us.

Mayor Alvey said thank you all from the Health Department. Excellent presentation. I want to say a special thanks for this clear picture of where we are with COVID in our county and the kinds of things we need to do to move forward. I think especially as we move forward. I know you are in regular contact with our school districts and as they take on this responsibility to determine how to handle, for instance, fall sports; that's a very great responsibility and they're going to need your guidance and the data that is available so they can make informed decisions because of COVID fatigue and it's so hard to tell our kids what they're not able to do.

I keep telling everybody my mom decided to come out of the nursing home for my daughter's wedding since she missed her other granddaughters wedding and she went back and had to quarantine for two weeks which means she couldn't get out of her room which means she

could not walk. She was willing to make that sacrifice and then as soon as her quarantine was over for coming out for a day, there was a spread in the facility and the entire facility then was quarantined, so now she will be four weeks basically in her room not able to come out.

The sacrifices that people are making are—we're not used to this. It's just not something we see unless you've joined the military and been on maneuvers and been out there, you just don't have to put up with this kind of stuff.

We need encouragement, but the bottom line is we need to continue to have clear assessments of where we are, the data of the international scientific community needs to help inform us the experience happening elsewhere. I think it's interesting that some of the places in Europe that closed down for a while and then reopened, now they're closing back down again. Throughout all this, our goal has been to accommodate as much normal activity as possible and yet protect people and that's a difficult thing to balance.

I think the message I want to emphasize is mitigation measures work. Wear a mask, maintain social distancing, stay away from large gatherings especially indoors trying to keep that 6 feet away because the evidence suggests that even if you have multiple two or three minute exposures to someone over a certain period of time, that's enough time to take in the bio material that could cause a serious infection. If somebody gets infected, they have no idea what affect it will have on them. It could be asymptomatic; it could be death. There's a wide range of chronic conditions that can develop in-between.

We just need, again, to continue to communicate to our public that we want to keep them safe and if we would simply follow these protocols, we improve everyone's chance of survival. Thank you all for an excellent presentation.

Commissioner Burroughs said I too agree that fatigue is setting in. I would like to go back to the slide that had the number of outbreaks within the school districts, if that could be put back up if at all possible. I too want to thank staff. I can only imagine the amount of fatigue that has set in under these most trying of times and the challenges you are dealing with. Please know that many of us are thinking about you and respect the work and the information and the support you have given to many of us in the community. Please know that you're not on this island by yourself. There's many of us watching and hoping for the very best with the guidance you are providing.

I would like to state that I truly believe the school superintendent's in our community have stepped up to the challenge of trying to provide the safest environment they possibly can, not only for the students and the staff and teachers, but also for the community as a whole. The question is, to what extent are we asking them to stand in the way of additional requests by angry parents or parents that are very concerned about the very mental health of their children. I would hope that they would collectively come together with their concerns and meet Dr. Greiner with yourself and others to discuss a multitude of concerns.

To my colleagues on the Commission; ultimately we have a tremendous responsibility for setting the direction of how we're going to deal with an outbreak that none of us have witnessed in modern times that I'm aware of. I would just state that we too need to be bold in how we move forward to protect the citizens of our community and, most importantly, to communicate and support one another that are getting bombarded with these questions and these requests.

Mayor, you said it, the fatigue is setting in. We have continued to see a rise. The Governor today ordered flags half-mast yesterday for those that have been impacted and died by the coronavirus. That's not lost on many of us that have lost family and friends due to this pandemic. I would just state that this communication is extremely important that we look at what our other countries are doing, but more importantly, what other states are doing at this particular time. I have a colleague in Illinois who stated that they just yesterday shutdown the bars and really just closed down their economy because of the outbreak again. That raises much concern because of the economic impact it has on us locally, but at the same time, I might call that bold leadership. That's a decision that has to be tough to make.

To my colleagues, we need to be mindful that this information is extremely important, we need to have concise, accurate information provided by our public health officials and for that I am grateful. I would hope that if we should move forward, that whatever communication we have, that we involve our superintendent's to give them the tools necessary to address the concerns they are getting bombarded with.

To our business owners that may be online and to our constituents that may be online, please know that we're taking this issue very seriously. Your public health is extremely important to each and every one of us and we'll make the decisions whether they're popular or not, but we have been charged with making those decisions for the betterment of our community.

With that, I would just ask that once again that we continue to keep this line of communication and this transparent communication open and that it be as accurate and concise as possible. Again, thank you everyone who has joined in tonight to be part of this conversation.

Mayor Alvey said seeing no more hands, we are ready to go to our next presentation on the Central Area Plan Overview.

Mr. Bach, County Administrator, said I think our next section will be presented by Gunnar Hand. This is one as the Commission has authorized, our Planning Department goes out and looks at different areas of the community as we go through and study where the future of that part of the community will be—community will go or the direction we would like to see it go and how we would like to see it shaped from a planning perspective.

Tonight Gunnar is presenting this item to you as an update to give you a more detailed presentation during this Special Session timeframe. The item is on your agenda for approval later on. We thought it would be better to be able to spend a few more minutes on it now rather than trying to spend a half hour on it during the Commission meeting and do a presentation. From that standpoint we can dig into it a little bit now and then, hopefully, if everything is as you see we will be requesting approval of it tonight during the Commission meeting.

Gunnar Hand, Director of Planning & Urban Design, said as you all know we've been updating the Central Area Master Plan for the last year plus. It was delayed a little bit due to the COVID-19 pandemic. We heard the draft of this, if you recall, at your August meeting. We decided to

take an extra month based on the amount of comments we got back both from the Planning Commission, the Board of Commissioners, as well as some public comments to really shape it up and get it right.

Tonight if he hasn't been switched over already, we have Jamie Granger with Interface Studio, the consultant for this project, who will give an update. If you recall in the August meeting, we sort of went broadly over the four major goals; community housing, Central Avenue, and mobility. We're going to dive a little bit deeper into the implementation actions that we're focusing on, kind of like the baker's dozen of all of those different strategies we think would be the most impactful and immediate right now.

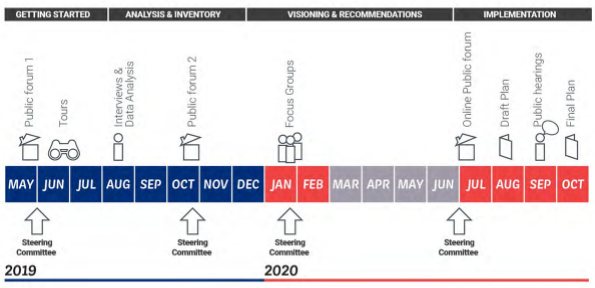
So, we have Jamie Granger with us. He's going to present his screen and then we will be able to answer any questions you might have about the master plan. Again, it will be at the end of the agenda for vote as well as public comment. I think we have a couple people from the community who wants to speak up on this item on our agenda during Planning & Zoning. With that, I will pass it to Jamie, and he can give you about a 10-15 minute presentation.

Jamie Granger, Interface Studio, said I appreciate the time tonight to show the Central Area Master Plan. Just a quick reintroduction. I'm Jamie Granger, Associate at Interface Studio Urban Design and Consulting Firm based out of Philadelphia, lead consultant for the Central Area Master Plan.

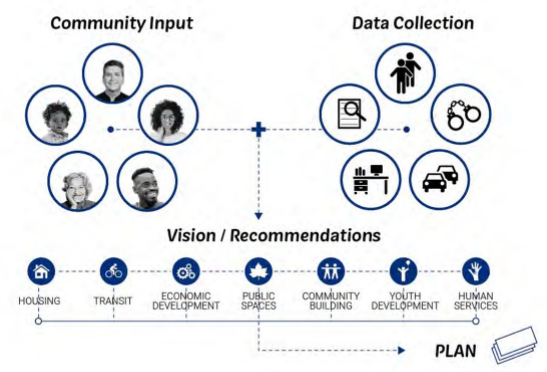
Hopefully, you all were able to look at the draft plans through the course of the past few months. We shared some of the details of that a couple months ago. As Gunnar alluded to, we're hoping to spend the time tonight to really just refresh about some of the planning process, but also things that have changed as well as talk about some of priority action items and implementation.

The area we're talking about for the Central Area Master Plan is really to the southwest of downtown bounded by some major highway infrastructure. The northern boundary is really State and then kind of cuts out of the downtown area. We actually adjusted the study area a little based off of some of your input from the last time we met.

Schedule



Again, I won't dwell on this too much as Gunner already talked about it. The process really started in earnest probably the summer of 2019 leading up to a spring completion. Obviously, things changed, took a few months off, retooled some of the outreach, eventually went online and eventually developed the draft plan.



Just a little bit about our process. It's really community driven and also data driven. We try to learn as much from the community as possible, do a lot of research, and that's really the framework for the vision and recommendations ultimately to make a plan.

Outreach by the numbers

- Interviews: 34 individuals from 11 organizations
- Public Events: 4
- Special Events: CABA Central Avenue Parade table/tent
- Neighborhood Meetings: 9 (CABA, Cathedral, Prescott (2), St. Joseph's Watchdogs, Strawberry Hill (2), WCAC, Livable Communities
- Focus Groups: 4 (Housing, Business, Mobility, Residents)
- Online Survey: 186 views – 79 participants

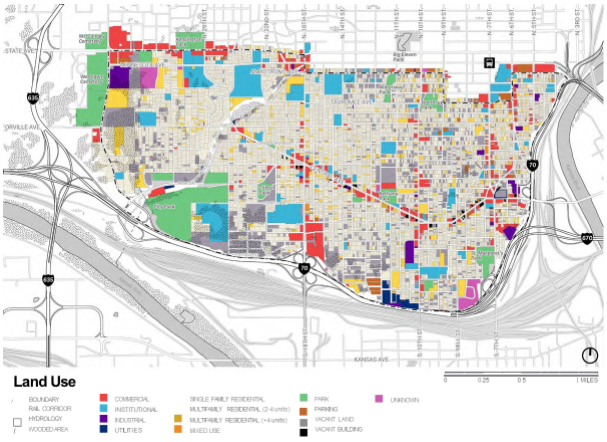
A little bit more about the outreach. We try to reach as many people as possible in a variety of different medians. We did this through individual and group interviews. We had some public events. We went to special events like the Central Avenue parade. We met with all the neighborhood groups, some of which multiple times. We had some focus groups around some important topics and then as I already talked about we moved some of the engagement online and got some input in that respect as well.

I will note that all of the outreach was bilingual in both English and Spanish. All the in-person events had Spanish speakers, so we really tried to reach as many people and diversity of people within the neighborhood.

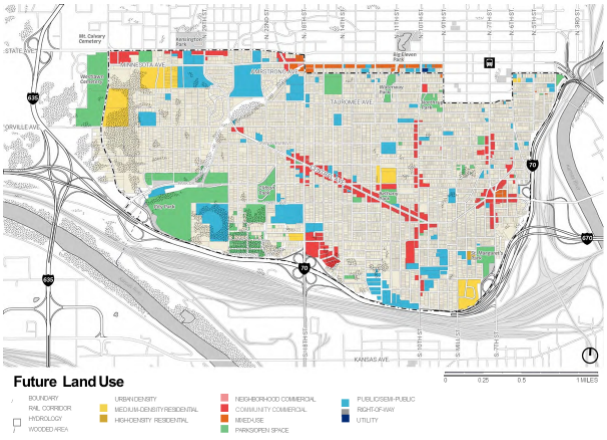
Ultimately, that public input and existing conditions from the analysis we did we developed a vision for a strong community. There are four separate goals that are helping to support that vision. The first is empower residents to build community through shared neighborhood improvements. The second is to establish Central Avenue as the social, cultural, and employment center of the neighborhood. The third is to provide housing that is suitable for a range of life stages and economic circumstances and then the fourth is design a mobility network that gives options and promotes a sense of community.

The last time we met we went into particular action items for each one of these goals. Again, tonight, we don't want to go over things we've already talked about, so we're going to kind of focus on things that are either new or are priority action items one of which is the Future Land Use Plan.

This is really framework for future development to help ensure that development really takes into account the visions and goals of the community.



The current land use of the Central area is pretty diverse. You can see the number one use within the neighborhood is really that single-family housing, the light yellow. You can see some particular commercial quarters coming out with a variety of different uses, places Central or 7th, but you also see a lot of vacancies which is the light grey color parcels.

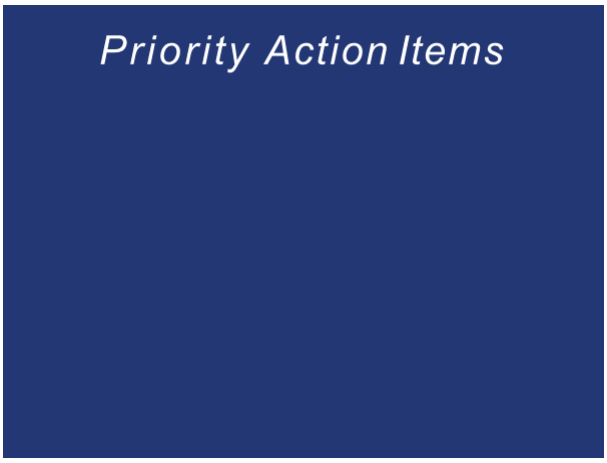


When looking at the future land use, you can see it's much more simplified. The residential character of the community is still maintained. Commercial activity is really focused on a few key corridors. You also notice there are no vacancies. Obviously, this is aspirational, but it's really trying to rethink how to repurpose some of those vacant lots in more productive ways either through new housing or community open space.

I do want to call out a few key development sites that came up in the process. The first being 7th & Central, the large vacant property there. The future land use calls it as a mixed-use development really to reinforce a lot of activities happening on Central on that end.

The second being Bethany Park and former Bethany Hospital site and how that's really integral to the community and can help support the community through open space, commercial activity and new residential development.

The final key development site is Alcott Arts Center and surrounding community on 18th Street. It came up in a lot of the public outreach, really concern about some proposed developments there that are really different than the existing contacts. So, this future land use really proposes maintaining the existing residential character of that area.

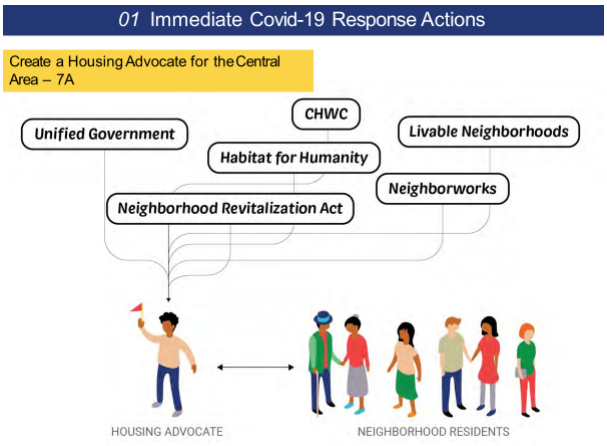


Next we're going to get into priority action items. These are really pulled from the master plan as particular action items that are either most important, things that really already have some grounded motion. Things that we can really get implemented soon as the process and plan is adopted, but also things that are really important that should be implemented as soon as possible due to COVID or other issues.

We outlined them and we pulled from the master plan various different action items and grouped them into a few different categories. You'll notice that the text in the color bar are referenced to those action items within the plan.

The first group is the Immediate COVID-19 Response Actions. This slide is really referenced to things the UG is already working on, some legislation to help support businesses through additional outdoor space, open streets closed to vehicular traffic. You know, things that can really help support businesses in the residential community.

We also see a big opportunity with La Placita which is the market that happens in Bethany Park to really build up the market as safe space for residents to engage and really help support some of the businesses within the Central area and on Central Avenue in particular.

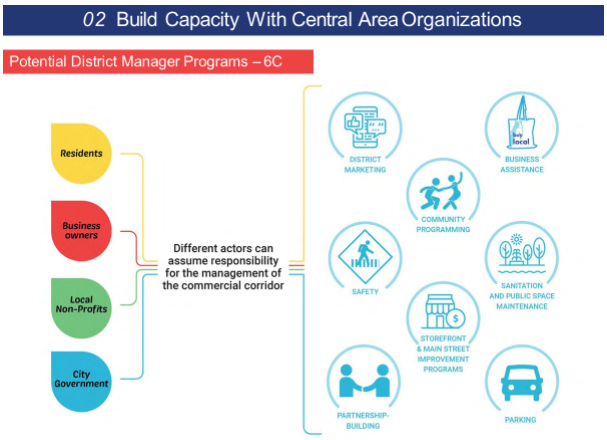


The third is to Create a Housing Advocate for the Central Area. When we ask specifically on the online survey how COVID is affecting people's housing situation, almost 50% of residents it is

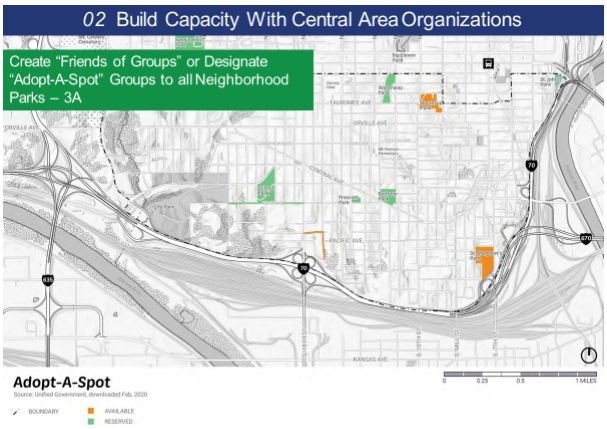
impacting in some way and almost 30% said they had difficulty paying utilities. So, having an advocate that can really coordinate and be a liaison between residents and existing programs is going to be really important.

The second priority action group is to Build Capacity with Central Area Organizations. Throughout the process we met with all of the neighborhood organizations, some higher capacity than others, but these neighborhood organizations do really great work. A lot of the improvements in the community can really be attributed to them, but there are capacity issues. People put in a lot of their free time dedicated to these neighborhood groups, so how can we build up capacity and bring more people into the fold.

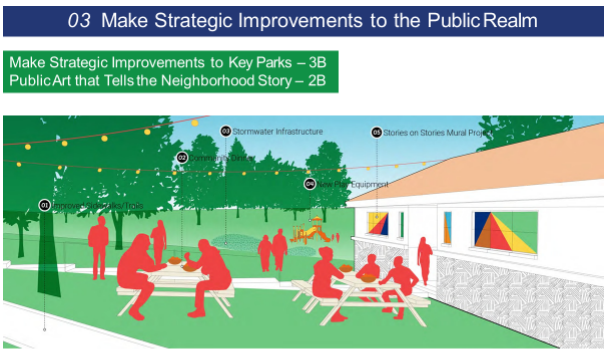
Some of the action items are to identify specific neighbors or have smaller scale neighborhood events and really bring as many people into the process as possible.



There is also a capacity—questions on the business corridor on Central Avenue, CABA, Central Avenue Betterment Association, really plays that role as district manager, but there are capacity issues with their organization as well. They do a lot of great work really supporting businesses, having events, but how can we get more resources for them to take it to another level.

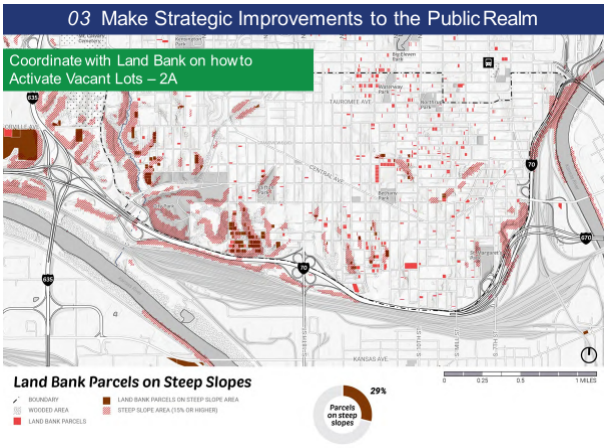


A lot of cities have had pretty good success with particular organizations devoted to physical spaces in the form of friends of groups or working within the UG's already Adopt-A-Spot program to really get specific attention to parks throughout the neighborhood.

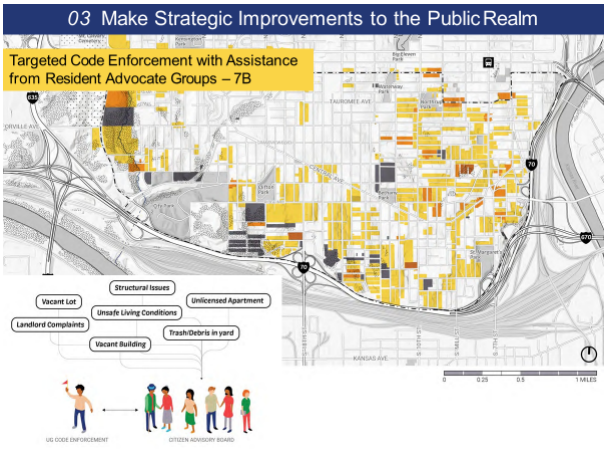


The next priority action group is to make strategic improvements to the public realm. The first step to this is really in Clifton Park. There is already some existing plans, improvements to Clifton Park, so it's really about implementing and it's building off—you know, referencing back to what we heard earlier tonight in the CHIP presentation about the Stories for Stories Mural project which

is already taking place within Clifton Park. So, having a multitude of different things happening in a concentrated space can really double their impact.

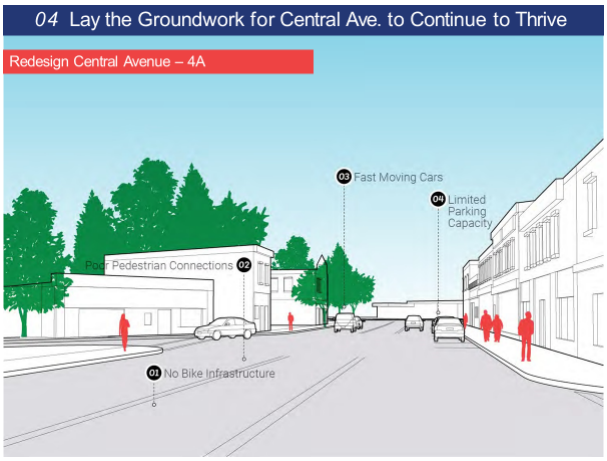


Another opportunity is to coordinate with the Land Bank on how to activate vacant lots. We talked about in the Future Land Use Plan different uses for these vacant properties, but a good deal of the vacant properties that are within the Land Bank holdings probably aren't desirable development sites either due to steep slopes or other issues. The questions becomes what is a long-term use for these properties. It's really about starting a conversation between the neighborhood groups and the Land Bank about those long-term uses.

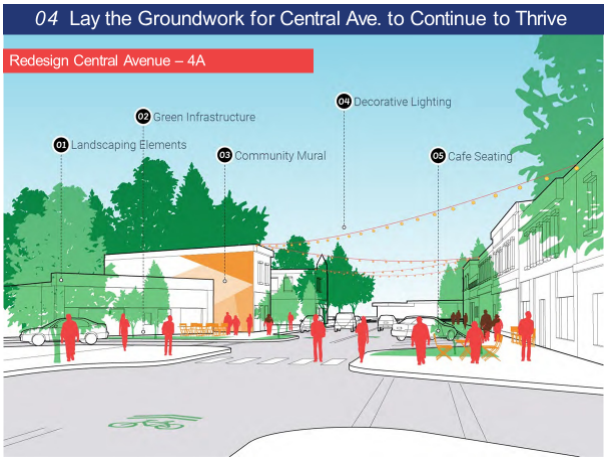


Throughout the process we heard one of the major issues and things residents wanted addressed is really a clean and maintained space addressing vacant land and vacant properties. So, having a priority action targeted code enforcement with assistance from resident groups. Part of our early analysis was a block by block condition survey on a (inaudible) scale really breaking it down into

blocks that were either trending up or trending down. So, really using that analysis as kind of an initial first step in a framework for some targeted code enforcement all while working with resident advocate groups who are really the eyes and ears of the community and understand the local context.

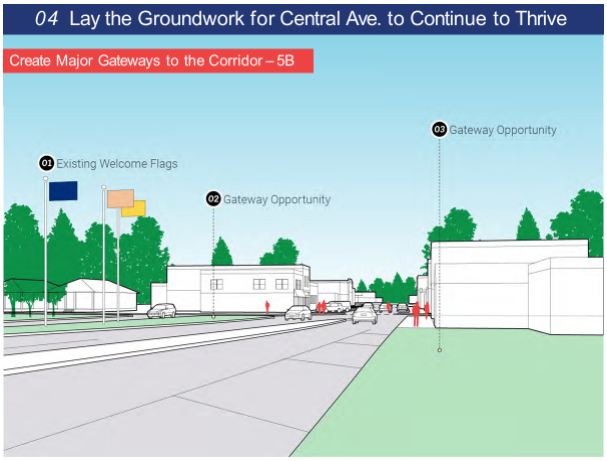


The fourth is to lay the groundwork to Central Avenue to continue to thrive. There has been serious momentum on Central Avenue over the past decade. Obviously, COVID has affected commercial corridors specifically across the country, so it's really thinking about specific things that can take place on Central Avenue. Hopefully, once things return back to normal the corridor can really hit the ground running.

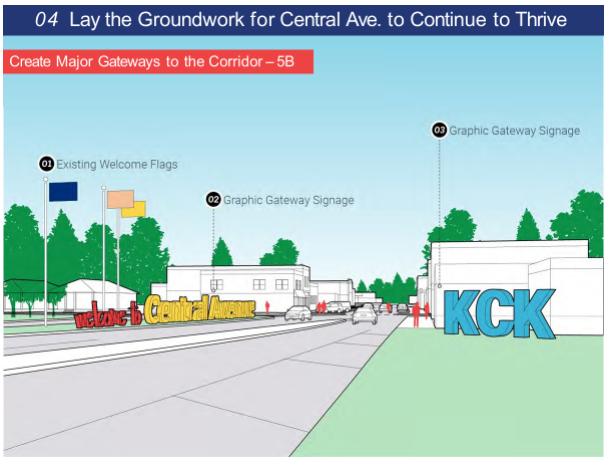


We talked about this a little bit the last time we spoke, the redesign of Central Avenue. It's really thinking about the actual physical space of the street, reallocating some of the underutilized street space, particularly the center turn lane to provide additional parking to help support businesses,

but also pedestrian improvements and really change the character of the street to a more feeling of a commercial corridor rather than a place that's really just made for passing through.

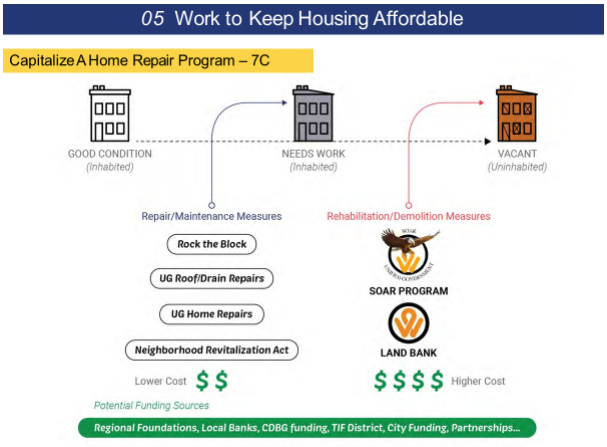


The second is to create a major gateway to the corridor. There's two really key places. One being 18th & Central and the other being east of 6th & Central. This is an opportunity to help really define the corridor and build up its identify as a diverse commercial corridor.

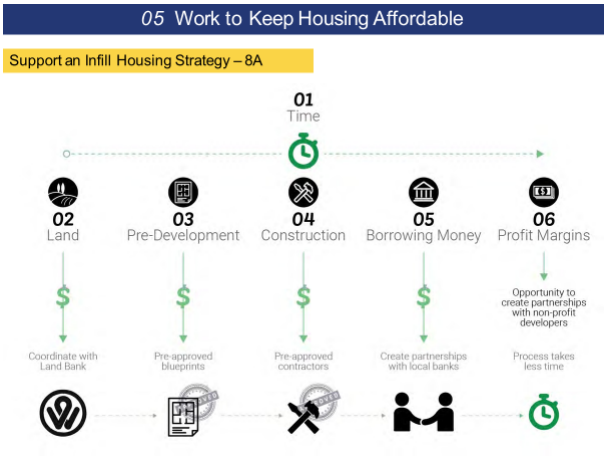


It can be really graphic and really draw people's attention when they first arrive to Kansas and Central Avenue.

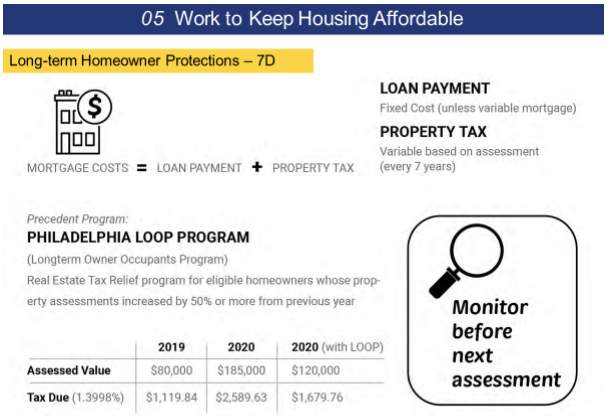
Then lastly in this group, thinking about Bethany Park, the Bethany Community Center and the Bethany Hospital site. You know there is really integral to the broader community, but also, Central Avenue is really something that really stitches the east and west sides of the corridors. There are a lot of different visions and opportunities for this site. So it's really—we're advocating to just start conservations between everyone involved to ensure that the community vision is implemented, and everyone is heard throughout the process.



The fifth priority action group is to work to keep housing affordable. The first opportunity is really to maintain the affordability that's already existing within the Central area, this is you know, the already existing housing stock. How can we provide resources to maintain the housing so they don't become vacant and inhabited, eventually require money to be torn down and ultimately it will probably be developed at something at a higher price point. It's really trying to maintain that naturally occurring affordability that already exists within the Central area.

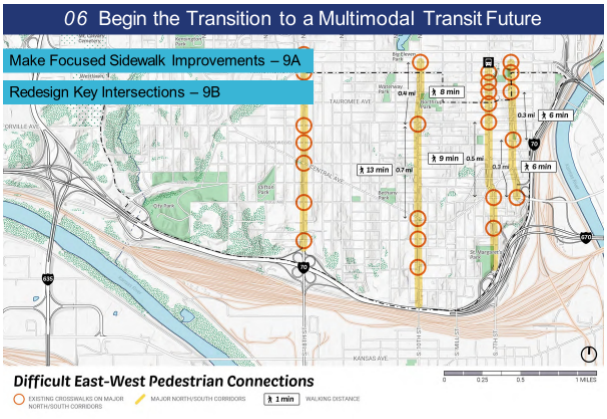


The second opportunity is in regard to new housing and supporting an infill housing strategy. It's really about taking advantage of existing Unified Government programs to the lower the barrier of entry, provide less red tape, and kind of streamline the process to ultimately allow housing to be brought to market at a more affordable price point. There are also opportunities to coordinate with non-profit developers as well.



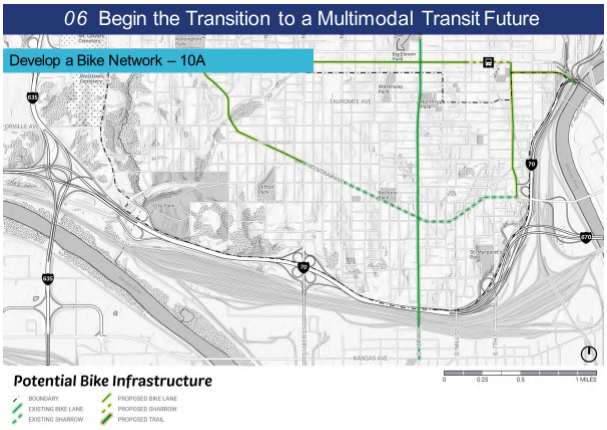
Finally, thinking about protection for long-term homeowners. We heard throughout the process kind of fears from residents who own their homes because of raising properties. Property taxes could ultimately push them out. It's not necessarily something that is an immediate issue, but it's something that you can monitor through a series of metrics and really see how this will impact residents the next time properties are reassessed.

The Philadelphia Loop Program is a good precedent program that really caps property tax increases for long-term homeowners to really prevent displacement.



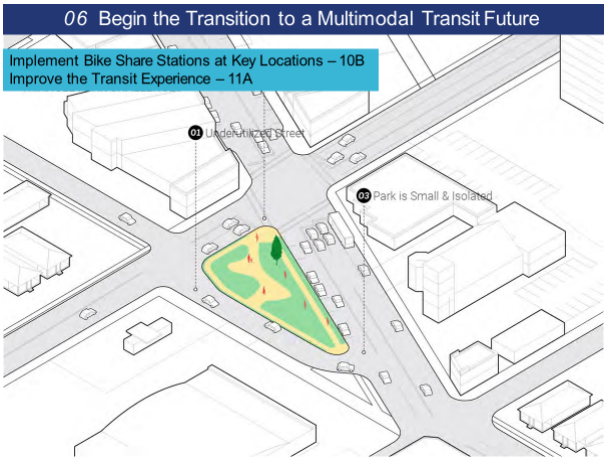
The final action group is to begin the transition to a multi-model transit future. The Central area is a driving community, 94% of the residents drive to work, but there really was a strong desire to begin that transition and provide different opportunities.

The first is to make focused sidewalk improvements and when asked, residents specifically, they targeted sidewalks adjacent to schools and reach to schools as the most important. There is also some opportunities to redesign some key intersections particularly on 10th and 7th. As you can see walking north on either of those streets, you have to go almost half to three-quarters of a mile before you get to a pedestrian crossing.

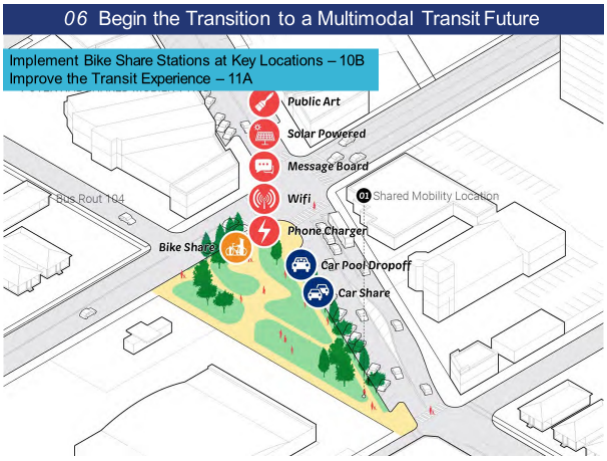


The next is to develop a bike network. Within the Central Area Master Plan we developed a pretty robust bike network that's really aspirational to work towards, but the question is really where do you start and it's really building off the existing network on 10th & Central. There are already existing plans for a two-way cycle track on 6th, so that's a really good opportunity to implement something pretty soon. But, there is also an opportunity to extend Central as well as add bike

infrastructure on Minnesota which has an excessively wide street and bike facilities wouldn't change the overall nature of that street.



Finally, thinking about how to coordinate some of these mobility improvements in concentrated areas to really double their impact. One opportunity is to implement bike share stations in key locations. This is an already existing Unified Government program so it's really about implementing within the Central area. Improving the transit experience through improved bus shelters; things like that.



But can you really combine some of these efforts into other amenities, also bike infrastructure and park improvements and this particular space in Lally Park where it's really a crossroad of the existing bike infrastructure and bus transfer point as well to really create this multimodal transit hub.

Hopefully, as I mentioned at the beginning, you were able to look at the draft between the last time we spoke and this time, so hope you have a pretty good understanding of the draft master plan. Thank you for your time this evening and I would be happy to answer any questions.

Commissioner McKiernan said you know I want to say thank you to everybody that participated in this project. First of all, Jamie, thanks to you and your colleagues. You all in your many trips to our area spent some time and really invested. You tried to get to know us, you tried to get know our community, you tried to get to know our residents and what they wanted and needed, and so we appreciate your efforts. Speaking of that, we have to thank our community partners for this. I see that some of them are here with us on Zoom tonight, but the community really did engage in this and put some thought into what they thought into what they thought would be the best possible future for this particular area of our town.

I think we've established a great collective vision, but as in all visions like this, the proof will be in the pudding. The proof will be how well can we actually implement this. Some of the things that you suggested are going to take resources, monetary resources from the Unified Government, especially as it relates to infrastructure. We're going to have to find out how we can marshal those resources to help accomplish this vision.

The other thing that you suggested was that maybe some of the resources and maybe some of the things that are needed to realize this vision are not necessarily monetary resources, but policy and procedure resources. How can we, and I know Gunnar and his crew have already during COVID, started to do a great job of this about reimagining how we operate and maybe some small changes like what they've done in terms of being able to go out on the public sidewalk, the adjacent

green space with restaurants, maybe we need to consider to—continue to consider how we can implement those. They're relatively no cost and yet they could have a giant impact on how the neighborhood functions.

Sometimes we're going to run into a crossroads and we're going to have to develop the ability to be really nimble. Sometimes we're going to need to have the backbone to stay the course and keep to our vision when the market doesn't necessarily agree with our vision. But, at other times, I think we need to be ready to pivot. If we see an opportunity come up that will have a tremendous broad community impact, we need to be ready to at least think about it, if not embrace it, even if it doesn't fit in exactly with the vision we've laid out in this master plan.

I look forward to trying to work on this to realize this vision, to improve the Central area for everybody who lives there, including me, and so thanks again for your work. I really appreciate what you've done.

Commissioner Burroughs said, Jamie, if I may ask, we talked about Central Avenue. There's three, four major corridors that feed in outside our western—I'm sorry, eastern side coming from Missouri. We talked about a business on 18th Street. Are we looking at 18th, 10th and 7th as a major feed off of and into Central Avenue in those discussions, Jamie? **Mr. Granger** said yes, those are really the key corridors both from a transit perspective and they have various levels of commercial activity on them to really tie into the Central Avenue commercial district. We spent a lot of time talking about Central Avenue and you know this is not saying that it's the only commercial corridor, but really I think residents made it pretty loud and clear it's probably the most important. When you think of the larger Central area, it's really the one corridor that kind of connects all those different disport neighborhoods so that's why the focus was mostly on that. It's not to say that some of those other commercial corridors aren't equally as important.

Commissioner Burroughs said thank you for that Jamie. The reason I was asking is because those arterials also lead into Kansas Avenue as well as Grandview Blvd. as well as Minnesota and State Avenue which are major corridors also. I appreciate your work. Thank you. This has been very informative, and I sincerely appreciate your efforts, your work, and those in the community that have participated in bringing forth this information.

Commissioner Johnson said I echo my appreciation for the work that you've done Jamie on this as we're trying to create vision for our community one area at a time and so this kind of buttress up on the work that we've already done in the northeast and is now moving to the south there. I completely agree with what Commissioner McKiernan has said and I think (inaudible) doesn't necessarily fit what has been planned. I certainly agree with what he said, and I want to double down on that. If those opportunities come that can bring the type of things that will improve our community, we need to be openminded and be able to pivot as he said.

The final thing I will say, and it is a concern, as we're trying to good money into the urban areas of our community, and maybe this is more so to Gunnar and to our staff and others. The issue of crime, certainly graffiti continues to be an issue we deal with and it is disheartening and I'm just saying this just in general, not looking for a solution per se tonight, but I think it needs to be said that after we put good money into certain areas of our community, for our community to benefit, to better the quality of life and then only to have it desecrated, so to speak, by persons who don't appreciate the amount of investment that has gone in. Sometimes hundreds of thousands, if not millions of dollars of investment, is disheartening. I think while we're looking at these plans, we also need to take a deep instance position as well to make sure that we're protecting the investments that we are moving with at the same time. I just want to make sure that's out there for the record.

Mr. Granger said I think these planning documents are always meant to be flexible. I don't think there's—we always understand that it's not going to implemented exactly to the T and when opportunities arise, you should really take advantage of that. I think that's without saying.

I didn't mention crime specifically in the presentation tonight, buy you know it's really addressing—some of that is really embedded in a lot of the different goals throughout the plan. We talk about vacancy; we talk about economic opportunities on commercial on Central Avenue and group housing conditions; all of those things kind of play into that. So, while it might not be called out specifically, it's kind of embedded throughout the document.

Mayor Alvey said thank you so much. That concludes our Special Session. We will reconvene at 7:00 p.m. for our regular Commission meeting.

MAYOR ALVEY ADJOURNED
THE MEETING AT 6:40 p.m.

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Bridgette Cobbins
Unified Government Clerk

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