DHW CONNECTION
A newsletter for the employees of the Idaho Department of Health & Welfare

SPECIAL LEGISLATIVE SESSION TO ADDRESS ELECTION, CIVIL LIABILITY DURING THE PANDEMIC

Gov. Brad Little issued a proclamation earlier this week outlining the issues to be considered by the Idaho Legislature during a special legislative session that will start on Monday, Aug. 24.

The Governor's proclamation calls for a special legislative session to address the COVID-19 pandemic in Idaho, including election law changes that are needed to facilitate a safe and secure November election during the pandemic.

It also calls for the Legislature to establish temporary and consistent standards for civil liability related to COVID-19 that will help Idaho's economy recover in a safe and responsible manner while encouraging careful planning, care and safety in responding to the pandemic.

Full details on the bills to be considered are outlined in the Governor's proclamation here.

Each of the topics chosen for the special session were recommended by the Idaho Legislature after study and analysis by legislative working groups that identified the topics and recommended them to the Governor for consideration.

The Idaho Constitution gives the Governor the authority to call a special legislative session, and the Governor is required to specify the subjects for consideration. Special legislative sessions by law are of a limited duration and by recent tradition last only a day or two.

Gov. Little chose not to include two legislative proposals in his proclamation – one related to public health district authorities and another on education funding. Governor Little said further discussion on both topics is merited, and public discourse will continue during the general legislative session beginning in January. Both topics do not require immediate action by the Legislature at this time.

Gov. Little said the valuable advice and counsel of public health officials should continue to inform school officials' decisions on safe school operations during the pandemic. He supports school leaders and public health officials working closely together on the safe reopening of schools.

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FIRST DHW CUSTOMER EXPERIENCE PROJECT UNDERWAY

CELEBRATING KINSHIP FAMILIES THROUGH AN ART AND EXPRESSION CONTEST

DR. CHRISTINE HAHN RECOGNIZED BY THE ADA COUNTY MEDICAL SOCIETY

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The doors to the Joint Finance Appropriation Committee (JFAC) chambers while the committee was in session at the Idaho Capitol building in January 2020.

DHW CONNECTION

Editor & Public Information Manager:
Niki Forbing-Orr

Designer:
Kyle Struchen

Director of Communications:
Kelly Petroff

Director:
Dave Jeppesen

Deputy Directors:
Lori Wolff
Lisa Hettinger

Email us at:
communications@dhw.idaho.gov

Communications Committee:
Matt Clark, Lori Gilbert, Gretchan Heller, Beth Kriete, Cathy Libby, Jon Meyer, Janet Sanabria, Jacque Smithley, Ryan Soukup, Cindy Stevens, Shannon Tolman

DIRECTOR'S Update
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I hope you will take time to read about the DHW's kinship program in this issue of the DHW Connection, as well as in my August 18 Director's Update. The details are available on page 6.

Part of the program and our celebration of the families is an Art and Expression Contest called **My Family. My Story**. When you read the entries, I promise they will touch your heart. (Previous entries are available at https://211.idaho.gov/)

Kinship families are grandparents or other adults (e.g. Godparents, aunts, uncles, etc.) who are raising a child or children when the parents are unable to do so. Just when the grandparents might be planning for retirement, they open their homes and hearts to children who need someone to simply love and care for them. I can't express enough my gratitude to these caregivers, and we know, through the **My Family. My Story. contest** ... the children feel the same.

Starl, age 7 (2019 My Family. My Story. entry)

I don't have to live in a car anymore.

I have a house with a mom and my own bed.

I have clothes.

I have my grandparents.

I have love.

Haylen, age 6 (2019 My Family. My Story. entry)

I have a good time with my family.

They always take care of me and keep me happy.

We are moving forward one step at a time to the future.

We love each other very much.

God keeps (the) promise.

I am thankful for the kinship families. They have made a commitment to the future of Idaho. It may sometimes be hard, or even heartbreaking, but they are the heroes the children need. If you missed my video on Tuesday, please view it here: https://youtu.be/6sF0OwJI83s

Dave Jeppesen,
Director

ASK THE BIG BOSS

The future of ITSD at DHW

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QUESTION:

Are there near-term plans for DHW ITSD to be absorbed by the Office of Information Technology Services (ITS)? In doing research, it appears that agencies lose their ability to establish priorities or conduct project management once under ITS. Will DHW and its divisions, bureaus, and programs become "just another customer"?

Submitted by: Jeremy S. Peterson - CO 1st

ANSWER:

One of the Governor's initiatives is IT Modernization, aimed at increasing efficiency in IT services across state agencies and enabling agencies to focus on being IT consumers rather than IT providers.

Eight agencies were consolidated in Phase I of this effort, with additional agencies under consideration for Phase II. At this time, ITS does not have any plans to include DHW in the next phase of the modernization initiative.

All of us recognize DHW is a very large and extremely complex agency, one that relies heavily on the capabilities of ITSD. Future plans for modernization that may include DHW will need to be able to address the complexity and critical nature of our technologies. Additional legislative direction also may need to be considered.

Should it make sense for ITS to "absorb" DHW's ITSD team, it will only be after specific plans and agreements are put in place to ensure we continue to enjoy the level of service and prioritization required for the successful delivery of services in meeting the needs of our residents in Idaho.

Answered by Andrew Masters, ITSD administrator

FIRST DHW CUSTOMER EXPERIENCE PROJECT: IMPROVE THE KATIE BECKETT ELIGIBILITY PROCESS

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Customer experience (CX) represents the impression our customers have about us based on their personal experiences, or their personal journey. DHW wants to make sure that all of our customers have favorable experiences with us. They should feel helped and heard.

As part of DHW's Strategic Plan, specifically Goal 4: Strengthen the public's trust and confidence in the Department of Health and Welfare, DHW is committed to improving customer experiences. One of those is the DHW website, which is currently being reimagined, and one of those is the Katie Beckett application process.

Katie Beckett is a Medicaid eligibility category for children living at home with long-term disabilities or complex medical needs, who may be eligible for Medicaid services even if their family income is above Medicaid federal poverty guidelines.

Before we begin improving the Katie Beckett application process, it is important to understand how those families who applied felt about the process.

DHW issued a survey to "Katie Beckett" families to determine a baseline Customer Effort Score (CES). The response rate for the survey was 13.5 percent.

CES determines how much effort those families felt they had to exert to get their eligibility determined. Specifically, we asked the families (on a scale of 1 to 5, with five being Strongly Agree) if they agreed with the following statement: The Idaho Department of Health and Welfare made it easy for me to apply and be assessed for a Katie Beckett waiver. The final CES score is: 3.11, which means there is room for improvement.

Other survey responses indicated that:

- Most families found out about the process through a doctor, nurse, or friend.
- Most families said it took 2-3 months for eligibility to be determined.
- On a scale of 1-10 (with 10 being the best) rating the helpfulness of DHW employees (and those contractors or vendors who represent DHW), the average score was 5.62.

When asked how DHW can improve the Katie Beckett application process, the themes included: communications (including website and a better online process), a shorter application and less paperwork, and more information sharing during the process.

Now that DHW has the results, the CX Committee is getting to work. First step: improve the process on the new website. Keep watching the *Connection* for more details on the website and the work of the committee.

RESOURCES AVAILABLE TO THOSE PARENTING CHILDREN WHOSE PARENTS ARE UNABLE TO CARE FOR THEM

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Submitted by Jen Haddad, Heidi Smith, and Lindsay Klein, FACS

At DHW, we are celebrating and honoring Idaho's kinship families. Kinship care is when significant adults (e.g. grandparents, Godparents, etc.) in the lives of children take on the responsibility of parenting when the child's parents are unable to take care of them.

Why is kinship care important?

- According to the Annie E. Casey Foundation, 1 in 11 children live with a relative or significant adult at some point before turning 18.
- In 2018 in Idaho, there were 10,574 grandparents responsible for their grandchildren under 18 years old. This does not count for the thousands of children living informally with relatives.
- In SFY 2020, 2,934 children in Idaho were in foster care. Of those, approximately one-third were placed with either relatives or with a person who has a significant relationship with the child.

Idaho recognizes the unique and dynamic challenges that caregivers often experience when faced with the challenge of raising a child unexpectedly.

Relative caregivers are often not eligible for the support received by non-relative caregivers, including foster care stipends, access to low-cost childcare, access to medical services, ease in enrolling children in school, legal guardianship; and/or access to vouchers for clothing, bedding, and personal items. The majority of kinship caregivers are not receiving assistance they are eligible for with children they are caring for, and many of them are unaware that such help even exists.

The department is actively working to create enhanced resources and support for caregivers, and a key objective and priority for the department is outreach and resource coordination for kinship caregivers. In an effort to provide further support to kinship caregivers and families, Idaho applied for and received a federal kinship navigation grant. The overarching goal for the grant funding is to identify kinship families and provide individualized supports to prevent children from entering formal foster care by supporting placements that promote family stability, safety, and well-being. The department has applied for a second federal grant, which will serve as a continuation of current grant activities.

Art and Expression Contest (My Family. My Story.)

Since 2012, the department has sponsored an art and express contest (called My Family. My Story.) for the children in kinship care. It is an art and expression contest that has been open to children and youth who either currently are or have previously been in kinship care in Idaho.

This contest celebrates relatives and significant adults who open their hearts and homes to children and youth. The purpose has been two-fold – to recognize the contributions of kinship providers and help children feel connected with other children who are in similar circumstances.

This year, we will be expanding the contest to include Idaho's kinship providers, as well as our community partners who help serve and support kinship families. Previous entries have included everything from drawings from young children telling us what they love about their families to personal stories and artwork reflecting personal growth and family dynamics.

There is a panel that will select the winners for all categories. We will have contest winners for each category of the entries – for children/youth, kinship providers, and for community partners/agencies who serve and support kinship families. Winners will be announced in September, and all winners will receive a prize. To see previous entries or to get more information on the contest – or if you are a caregiver or know someone who is that might benefit from our resources – please call 2-1-1 or visit https://211.idaho.gov/.

Drawing by Belinda, age 7, for the 2019 My Family. My Story. *art contest. "I love to live with my grandpa and grandma. We do a lot of fun things together."*

DHW EPIDEMIOLOGIST RECOGNIZED FOR WORK ON IDAHO'S COVID-19 RESPONSE

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Dr. Christine Hahn, medical director for the Division of Public Health and the state epidemiologist, was named one of two 2020 Physicians of the Year by the Ada County Medical Society (ACMS). She accepted the award on July 31, 2020.

Dr. Hahn is a specialist in infectious disease who has served as Idaho's state epidemiologist since 1997. "She has played a visible and important role shaping the state's response to COVID-19, often standing alongside Gov. Brad Little in press conferences," the ACMS website says.

"We are so pleased Dr. Hahn received this much deserved recognition for the work she's been doing for Idaho's response to COVID-19," said Elke Shaw-Tulloch, administrator for the Division of Public Health and Dr. Hahn's supervisor. "Her guidance and expertise during this global pandemic has been critical to protecting Idaho communities. She is outstanding at blending her infectious disease knowledge, national experience and recognition, medical skills, and love and appreciation for Idaho."

Learn more about the ACMS and the award, and see a video highlighting the reasons Dr. Hahn was chosen for this award: https://www.adamedicalsociety.org/2020-Annual-Member-Meeting

PERSI ACCOUNT STATEMENTS TO BE DELIVERED MID-AUGUST

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PERSI will mail Base Plan account statements to members in mid-August. Statements reflect unaudited account data as of the end of PERSI's most recent fiscal year on June 30, 2020.

Each member's statement will provide specific information regarding his or her retirement, separation, and death benefits. These statements also provide information about the member's accrued service credits and an estimate of projected benefits.

Members should review the credited service section of their statements and report any discrepancies to PERSI. This is also a good time for members to review their beneficiary designations to ensure they still reflect their wishes.

Online statements are available on myPERSI. Members with questions should call the PERSI Answer Center at 1-800-451-8228 or 208-334- 3365, weekdays from 8:00 AM to 5:30 PM MT.

NOTE: *Members should not confuse these statements with Choice 401(k) Plan statements.*

#MaskUpIdaho

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The Office of Communications hopes you are keeping up with the most recent information on COVID-19 shared through our social media channels. The most recent DHW Voice blogs are focused on rumor control and sharing accurate, updated information.

- COVID-19: A Q & A
- COVID-19 Q & A
- COVID-19 Facts vs. Fiction
- Emergency funding for childcare providers
- Supporting teachers and students as schools reopen
- Face coverings are protective, research shows

Current social media campaigns are focused on #MaskUpIdaho. Examples below:

COVID-19: A Q&A

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(Originally published August 11 and 18 at dhwblog.com)

In our endless desire to make sure Idahoans have accurate, current, and relevant information about COVID-19, we're continuing to answer questions we have received through the Department of Health and Welfare's (DHW) social media accounts, in emails, and in our daily lives as we all live with the coronavirus in our communities. Here are some we've collected recently.

I've heard that hospitals make more money treating COVID-19 patients, so they are labeling more patients as COVID-positive than they are actually treating for COVID-19. Is this true?

This is not true. There is a false rumor circulating that hospitals are misrepresenting COVID patient data to increase federal reimbursements for patient care. It is true that the Coronavirus Aid, Relief, and Economic Security (CARES) Act increased reimbursements to hospitals for Medicare patients with COVID-19 due to the high cost of COVID-19 patient care.

However, it is not true that healthcare providers have an incentive to misrepresent a patient's COVID-19 status. To begin with, a misrepresentation of a patient's COVID-19 status would be fraudulent, exposing the provider to civil and even criminal liability.

Second, the clinicians who decide whether to diagnose patients with COVID-19 have no economic incentive to do so. The way physicians in hospital systems are compensated for the services they provide is not based on what Medicare or other payers reimburse the hospital system for the care. A diagnosing physician is paid the same amount for services provided to a patient with or without a COVID-19 diagnosis.

Third, Medicare's increased reimbursements typically do not cover the increased costs of providing care to COVID-positive patients. COVID-positive patients often suffer more intense symptoms and potential complications than non-COVID patients. These patients often require a combination of medications and sometimes a ventilator for many days to support breathing. Even COVID-19 patients whose disease does not become more severe require more expensive care, including increased use of personal protective equipment, seclusion, and more rigorous disinfection routines. The modest increase in Medicare reimbursement does not come close to covering the cost of care.

Finally, Medicare is the only payer that has increased hospital reimbursement for COVID-positive patients. Therefore, for the vast majority of patients under age 65, there is no increase in funding for hospitalized COVID-19 patients.

The number of tests being done seems to be going down. Why would that be?

It's difficult to say why the number of tests is decreasing, but as far as we can tell, the demand has decreased as the number of new cases has started to decline.

I have heard so many things about the time it can take for someone to get a COVID-19 test result – anywhere from less than a day to more than two weeks. Can you tell us what the average turnaround time is in Idaho, and why there is so much variability in the length of time it takes?

The current statewide average turnaround time between when the specimen was collected and when the state is notified is 2-3 days. However, that average may not necessarily indicate the time it takes providers to notify patients of their results. It's also important to remember that 2-3 days is an average. Some results will be delivered more quickly, and some will take much longer.

Increasing testing capacity in Idaho is top priority. Several initiatives are in progress, but there are still several reasons test results can take longer to be delivered. Locations of providers and the labs they choose to send samples to can increase the time it takes for a person to get their results. Providers can send samples to any lab they choose, and they may send to a regional, out-of-state lab, or they can send to the state lab in Boise. Simply put, it takes longer for samples in rural areas to reach a lab.

The timing for when a specimen is sent to a lab can have an impact on the turnaround time. For example, a person's sample could be collected in the morning but then sent to the lab later in the day if all the specimens from that provider are sent in one batch.

Providers may have their own processes for notifying patients. People with positive results might be notified before people with negative results, for example.

It can be difficult for providers to contact patients as well, since many people don't answer phone calls from numbers they don't recognize. Even if you usually disregard calls from numbers you don't recognize, it might be a good idea to answer those if you are waiting on test results.

COVID-19: A Q&A

Continued

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Is hydroxychloroquine considered an effective treatment for COVID-19?
Hydroxychloroquine and chloroquine have not been shown to be safe and effective for treating or preventing COVID-19, according to the FDA, citing reports of serious heart rhythm problems in patients with COVID-19 treated with hydroxychloroquine or chloroquine.

Anyone considering using hydroxychloroquine should consult with a medical professional before beginning to use it. The U.S. National Institutes of Health recommends against using hydroxychloroquine except for people in clinical trials due to lack of evidence of clinical benefit and increased risk for abnormal heart rhythms and other side effects with the use of this medicine.

How are COVID-19 deaths counted? Can you compare the number of deaths caused by COVID-19 to those caused by flu in Idaho?
The COVID-19 numbers for confirmed deaths include people who have died with positive PCR laboratory testing results. Probable deaths include people who have died without a positive PCR lab test, but who either had COVID-like illness and evidence of exposure to the virus, or the death certificate listed COVID-19 or SARS-CoV-2 as contributing to the person's death.

COVID-19 has caused more deaths in Idaho in a very short period than flu has been reported to cause over several seasons.

In less than six months, Idaho has logged 273 deaths related to COVID-19 as of Aug. 17.

Reported flu-related deaths rarely top more than 100 in a single season, which typically lasts from October to May.

Reported flu deaths in Idaho, 2016-2020

- 2019-2020: 39 deaths
- 2018-2019: 58 deaths
- 2017-2018: 101 deaths
- 2016-2017: 72 deaths

It will be very important this fall, when flu season begins and COVID-19 is still circulating, for everyone 6 months and older to get an annual flu vaccine, and to keep following the COVID-19 guidelines – wear a mask and keep six feet between you and everyone else in public, stay home if you feel sick, and wash or sanitize your hands frequently.

Which hand sanitizers are dangerous to use?
The FDA is tracking this pretty closely, and there are several that the agency has urged people not to use because they use ingredients that are not safe, such as methanol. The FDA has a list that it updates regularly at this website: https://www.fda.gov/drugs/drug-safety-and-availability/fda-updates-hand-sanitizers-consumers-should-not-use#products

Regular handwashing with soap and water also works to clean and sanitize your hands as we all do our part to slow the spread of COVID-19.

A reminder
To slow the spread of COVID-19 in Idaho, we all need to work together. Remember to:

- Keep at least six feet between you and others in public
- Wear face coverings in public places (the Centers for Disease Control and Prevention advises the use of simple cloth face coverings to slow the spread of the virus and help people who may have the virus, and do not know it, from transmitting it to others)
- Stay home if you are sick
- Wash your hands often
- Cover coughs and sneezes
- Disinfect surfaces and objects regularly

Resources
Stay up-to-date with the latest and most accurate information on COVID-19 at the following websites:

CDC Coronavirus Disease Website
Idaho's Coronavirus Website
Idaho Rebounds Website
One.Idaho.gov

DHW also posts lots of information, including daily updates on the numbers on Twitter, Facebook, and Instagram.

IN THE NEWS

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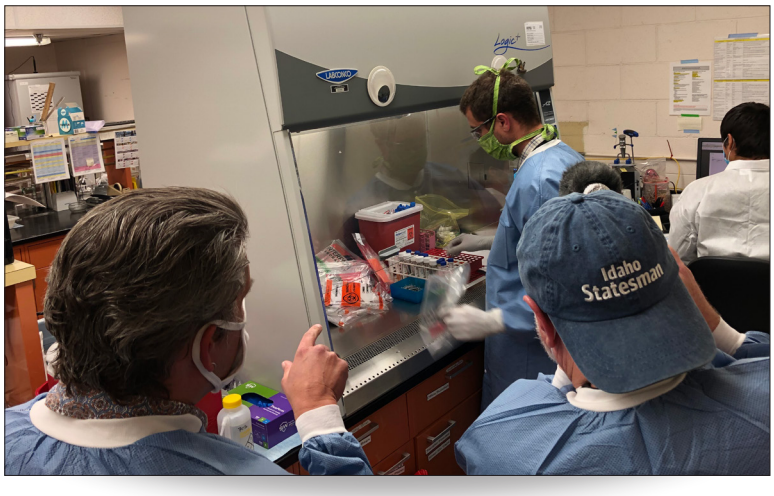
COVID-19

- **Governor says Idaho will stay in Stage 4 for two more weeks, but presses for school reopenings (Aug. 6):** Idaho didn't meet its COVID-19 criteria for moving out of Stage 4 reopening restrictions, Gov. Brad Little announced, but he pressed to reopen schools for the fall nevertheless. Little said the state has seen some improvements in its metrics in the past two weeks. "We have sufficient health care workers, personal protective equipment, ventilators and ICU beds. We are meeting the demands for testing of our health care workers. We are seeing downward trends in overall case counts, as well as our percent positivity rates," he said. "Emergency room visits for those with COVID-like symptoms are on the decline." The state, however, reported 692 new confirmed and probable cases on Thursday, one of the highest daily tallies so far. As of Monday, the latest day reported, 242 patients were hospitalized.
- **Long-term care facilities account for nearly 55 percent of Idaho's coronavirus deaths (Aug. 7):** Residents of Idaho's long-term care facilities make up at least 54 percent of the state's total deaths from COVID-19 but only about 4.5 percent of the total number of confirmed cases. The Idaho Department of Health and Welfare released its weekly update Friday on COVID-19 cases in the state's long-term care facilities, and the numbers continue to trend upward.
- **Idaho was last state to apply for pandemic relief for school-lunch students. Here's why (Aug. 7):** A prioritization of other programs and issues over data collection are what Idaho Department of Health and Welfare Deputy Director Lori Wolff said led to a delay in the state's application to be part of a relief initiative that benefits students who qualify for a federal school-lunch program. Idaho was the last state to apply for the federally funded Pandemic-EBT program, which was part of the coronavirus relief act that came out of Washington, D.C. It provides families with students on free or reduced-price school lunches funds that can be used to buy food.
- **Over 1,000 cases of COVID reported at Idaho nursing homes. 'More needs to be done.' (Aug. 9):** A Statesman analysis of state and federal data finds that COVID-19 has infected staff and residents at 78 percent of Idaho's 82 nursing homes. The Statesman also has found that the Idaho Department of Health and Welfare's records don't include 13 nursing homes that have been reporting active COVID-19 outbreaks to the CDC. In addition, seven nursing homes reported outbreaks to the CDC that appear to be stable or resolved, but have never shown up in the state's record of outbreaks. Another 28 nursing homes have notified the CDC of larger outbreaks than what the state is reporting. The Idaho Department of Health and Welfare is "aware there are differences in the CDC list compared to our list, and DHW staff are reviewing it and are reaching out to LTCFs (long-term care facilities) that indicate different information to CDC," spokesperson Niki Forbing-Orr said in an email. "DHW staff are in regular contact with the local public health districts and are confident that the state's list accurately reflects the current impact of COVID-19 outbreaks in LTCFs that have been reported."



Dr. Christopher Ball, Idaho Bureau of Labs, is interviewed by KTVB (left) and the Idaho Statesman (right) about COVID-19 testing.

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COVID-19 Continued

- **Masks now mandatory in several East Idaho counties (Aug. 11):** In several of east Idaho's counties, masks are now mandatory and large events are restricted as eastern Idaho begins to reel with high COVID-19 caseloads that much of the state has already seen in recent weeks. A weekend surge of cases pushed three counties — Fremont, Jefferson and Teton — above the threshold in a regional coronavirus response plan that calls on regional health officials to issue more stringent restrictions. That surge prompted Eastern Idaho Public Health's board of county representatives to issue the legal mandates in a unanimous vote Monday night. The mandates are effective immediately.
- **State launches helpline for those struggling with effects of COVID-19 (Aug. 11):** The Department of Health and Welfare and the Office of Emergency Management announced a new COVID-19 crisis hotline to support community members who may be struggling. The COVID-19 pandemic has caused a lot of stress for people, whether it is food security, housing, loss of their job or other mental health support. The new COVID Help Now Line is a free resource for people who may be struggling in any way.
- **Idaho long-term care facilities face severe labor shortage, some on brink of closure (Aug. 13):** The Idaho Health Care Association estimated that Idaho's elder care facilities need at least 1,500 caregivers, 750 nurses and 500 other support staff. Some facilities are unable to find enough nurses, others can't find enough caregivers and some are desperate for housekeepers or kitchen staff. According to data collected by the Centers for Disease Control and Prevention from nursing homes nationwide, 96 nursing homes and long-term care facilities have reported having a shortage of either nursing staff, clinical staff, aides and other staff members.
- **Idaho wanted to test 151,000 people a week for COVID. It is falling 125,000 short (Aug. 16):** With testing already short of desired levels, health care leaders have expressed fear about the ability to combat the virus come fall, when schools are poised to reopen and mark the beginning of a season already fraught with illness and respiratory viruses. Questions about whether a child's fever or flu-like symptoms are a normal fall sickness or the beginnings of a coronavirus outbreak at school hinge on the availability of testing. With testing still limited, parents and school administrators may struggle to answer those questions.
- **Idaho targets $10M to long-term care for fast-rising COVID-19 patient load (Aug. 17):** The number of Idaho long-term care facility residents with COVID-19 swelled from 400 to 750 in the past three weeks, already well on its way to the 900 mark it was projected to reach by December. So Idaho's allocating another $10 million of its CARES Act funds to long-term care facilities, including funding to increase the number of COVID-only facilities from the current two to up to 25 statewide. The current two are Twin Falls Manor and a COVID-dedicated wing within Arbor Valley of Cascadia in Boise.

OTHER

- **Community crisis response providers discuss new collaborative effort (Aug. 6) :** This collaborative has come together, following the Idaho Department of Health and Welfare's realization that law enforcement has primarily been the go-to agency when it comes to crisis response. The goal is to all work together in an effort to lessen the amount law enforcement has to get involved, also discussing their newly implemented program of a mobile crisis response unit. The mobile crisis response unit is currently being used and agencies will continue to meet to discuss this collaborative effort.
- **Red Onions Linked to Salmonella Outbreak (Aug. 6):** The Idaho Department of Health and Welfare is warning Idahoans of a national outbreak of Salmonella caused by contaminated red onions. As of Aug. 5, there were 665 confirmed cases of Salmonella in 45 states, including 26 in Idaho. Public health officials recommend that any onions in your pantry should be thrown out.
- **Judge: Transgender birth certificate law violates injunction (Aug. 7):** A federal judge ruled Friday that a new Idaho law barring transgender people from changing their birth certificates to match their gender identities violates her 2018 injunction directing the state to allow such changes. The judge's ruling grants a motion filed by the plaintiffs challenging the law that asks the state to clarify how the law will be implemented. While the question of the law's constitutionality wasn't before the court in that particular motion, Dale held the law is "directly at odds with the clear intent and mandate of the Injunction" she imposed in 2018.
- **Research shows air pollution – like Idaho's wildfire smoke – can make COVID-19 worse (Aug. 13):** Coronavirus and wildfire smoke may wreak similar havoc on the lungs, but what works to ward off one doesn't necessarily work for the other. The cloth or surgical face masks that have become widespread — and, in Boise and Ada County, mandatory while in public — are effective in trapping respiratory droplets exhaled by the wearer that could spread coronavirus. However, those masks are not effective at filtering out the tiny, harmful particles in wildfire smoke.
- **Nampa's suicide rate for 2020 twice that of last year's (Aug. 14):** Nampa's suicide rate for 2020 is double what the city saw at this point in 2019. The city's police department has recorded 16 suicides this year as of Aug. 8, compared to eight at this time last year and 12 for all of 2019. Lee Flinn, director of the Idaho Suicide Prevention Hotline, said she did not know what could be the cause of the increase, but said Idaho has struggled with high suicide rates for a long time. Idaho has the fifth-highest suicide rate nationwide, Flinn said.

"IN THE NEWS" are featured snippets compiled from Idaho news sources, including the Idaho Press, KTVB, Idaho Statesman, Times-News, Post-Register, Lewiston-Tribune, East Idaho News, and more.