



RESILIENT LOUISIANA COMMISSION

CO-CHAIR DON PIERSON

CO-CHAIR TERRIE STERLING

Energy Task Force

May 18, 2020

Meeting called to order at: 4:00 p.m.

Task Force Members Present:

- Rhoman Hardy (Co-Chair)
- Shane Hilton (Co-Chair)
- Mayor Jennifer Vidrine
- Mayor Nic Hunter
- Mayor Jeff Hall
- Matt Jewell
- Blake Canfield
- Randy Pierce
- Jody Montelaro
- Karl Weber
- Brian Bond
- Tyler Gray
- Elizabeth Ellison-Frost
- Nick Piatek
- Chip Little
- Rochelle Michaud-Dugas
- Laura Ferrell

- Welcome Introduction
 - Roll was called and quorum was confirmed.
 - May 11th meeting minutes were approved by the members.
- **Opening Remarks:**
 - Co-Chairs provided a quick review of the Charge 1 final report submittal. Noted that there were common themes across the different task forces Charge 1 recommendations such as employer and consumer safety.
 - This week members change focus to Charge 2 and how to build a more resilient energy industry for Louisiana. The sub-teams have already done a good job identifying the “what and why” now it’s time to transition to “how to implement the suggested plans”.
- **Guest Speaker:**
 - Rhoman Hardy introduced this week’s guest speaker, Edgardo Tenreiro – CEO Baton Rouge General. Mr. Tenreiro provided a viewpoint on the COVID-19 crisis from someone who has been very involved in the response since the beginning and a perspective on what was needed for the medical community, testing and financial impacts to the hospitals/ medical facilities.
 - Learned very early on that PPE was going to be an issue and that a surge of equipment was going to be necessary. Made a request for donations of PPE. The community and local industry came through on this request and were able to get a lot of needed PPE.
 - Within Baton Rouge General, knowing that the virus wave was coming, they were able to triple ICU beds and cross train nurses to provide ICU care.
 - Testing was another roadblock they were seeing. Realized early in the Pandemic that not having sufficient testing would create a major problem. Worked with LSU virologists who had been researching tests since January to develop tests.
 - Utilized many lessons learned from other cities that were already experiencing surges of COVID-19. By the time the wave of the virus hit Baton Rouge, they already had learned a lot from how it was handled in New York and New Orleans and were able to apply those techniques locally.
 - Already beginning plans for how to handle a second wave if one hits. As the economy begins to reopen, need to have plans in place to not overwhelm the hospitals.
 - Unintended consequence of the COVID-19 virus is the impacts of people being cooped up at home and not necessarily taking care of their health. There are a lot of ICU patients who are not COVID-19 patients but rather heart attack or stroke, but due to the virus did not seek care when necessary.

- Impacts of the virus on the local population – they found that over 80 years of age, the mortality rate was highest (~19%), whereas patients under 29 years of age was 0%. The virus also seems to disproportionately attack males over females and African Americans over other races.
- Beginning to study the numbers behind the antibody tests. Need to understand who has had the virus. A lesson learned from New York was that about 10% of the hospital employees had the virus without even knowing it.
- How is the hospital keeping employee's safe? There are specific symptom screens performed. Look for a combination of symptoms, not just a temperature check. Ask for visitors to be screened as well. Visitors are asked to wear masks, use alcohol dispensers when entering the building and maintain good hand hygiene.
- Financial Impacts were felt on the medical facilities during the pandemic. Emergency Room visits and surgeries plummeted. While overhead remained the same at the facility, but they were losing approximately 5-10 million a month due to lack of typical procedures, this created a hardship on the healthcare system.
- Question from the group – Was there a spike in mental health cases?
 - Have not seen a spike yet. This is usually delayed as typically seen with floods, so know that it is likely coming. Its known that for every 1% increase in unemployment rate there is a 1% increase in suicide.
- Question from the group – has there been an uptick in drug overdose?
 - No, not that they have seen.
- Question from the group – Has there been a resurgence in typical care?
 - Yes, the typical surgeries are back up and there is also a backlog that was known to be coming. The hospital has not seen an uptick in ER visits.
- Question from the group – What should the industry consider when reopening?
 - Currently learning from other nations who have been reopening, that the resurge of cases are not like the first. This is not a disease that will be eradicated. This is not something that society can just do away with. It is a very difficult disease to contain and it spreads easily. Need to make sure we do not overrun the hospitals (reason for the lockdowns). Will need to learn to live with the disease. Do this by maintaining good hand hygiene, masks, social distancing, and contact tracing.
- **Review of Action & Closing Remarks:**
 - Guidance was provided to the members to meet in their sub-teams and review their Charge 2 recommendations. Need to clean up the recommendations and focus on what is the highest priorities for making a resilient industry.
 - Share Legislative Report with members for their review. There are many similarities with the Legislative Report and sub-teams charge 2 recommendations.

- Action Items for the week include:
 - Sub-teams are to revise their charge 2 recommendations and get the first drafts to Nicole by end of week.
 - Nicole to change the weekly meeting from Monday afternoon to Tuesday in lieu of the Memorial Day Holiday.
 - Sub-team leads prepare to present the refined recommendations at Tuesday May 26th meeting for the rest of the members reactions, comments and approval.
- Acknowledgement and adjournment