



**TESTIMONY ON  
COVID-19 OUTCOMES FOR COUNTIES**

Presented to the Senate Local Government Committee  
and the House Local Government Committee

By  
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On behalf of the County Commissioners Association of Pennsylvania (CCAP), representing all 67 counties in the commonwealth, thank you for the opportunity to participate in this joint Senate and House Local Government Committees hearing on the outcomes for local governments as a result of the COVID-19 pandemic.

My name is Kevin Boozel and I am a Butler County commissioner and current CCAP president. I am pleased to testify today on behalf of Pennsylvania's counties and share our perspective as we both look back on the COVID-19 pandemic over the last year and a half and continue to wade through its impacts as the Delta variant surges through many communities across the commonwealth.

Our local county officials continue to provide steadfast front-line response to the COVID-19 pandemic and have been doing so since the virus hit Pennsylvania in early March of 2020, while now also administering relief programs and funding to aid in our economic recovery efforts. Throughout this ordeal, counties across the commonwealth have been unwavering leaders in public health response and assuring that critical services continue to be provided to their communities in a time of great uncertainty and need.

As we reflect on our experiences, we see many areas in which counties have risen to the occasion, even stepping in to lead when response efforts from the state and federal governments lacked clear communication and collaboration. During the uncertainty, counties capitalized on their ability to act nimbly and meet unique public health emergency needs on the ground, in everything from quickly standing up mass testing and vaccination clinics to administering aid and grant programs to those most in need. Counties, required to have specific plans in place based on the National Incident Management (NIM) model, have been prepared to respond to a public health emergency since the days of the H1N1 outbreak. We continue to monitor and respond to changing conditions, collaborate with our local government counterparts and seek to be a source of aid to our residents in administering human services and other vital services in our communities. Above all, our counties remain committed to developing solutions, working together with their local health providers, emergency responders, business community and residents to figure out how to move forward in the face of these ever-shifting challenges.

Our emergency response message to the General Assembly, on behalf of our 67 counties, has been and continues to be this – a comprehensive, collaborative process must be developed that brings counties, the legislature and the administration to the table to *collectively* assess changing conditions and determine what is best for the health, safety and economy of the residents of the commonwealth. This pandemic required a whole-of-government response so that all are working cooperatively, from the same playbook. However, too often since this pandemic started, counties have been left on the sidelines and later notified of new procedures or needs, then having to pivot and act quickly to execute plans they were not invited to weigh in on. Eventually, counties were able to have vital joint discussions with the Administration, the Department of Health and PEMA, but even this took some time of continual outreach and requests. The value of counties' on-the-ground knowledge and impacts of state and federal

proposals have been no more than an afterthought, leaving counties frustrated and struggling to get data and answers, and to figure out what roles and responsibilities we have been handed and what to tell our constituents.

As I mentioned, counties are required to have emergency response plans, including plans to respond to public health emergencies, and we have relied on those plans to guide local response to COVID-19. We pushed through those initial frenzied days with steadfast emergency response efforts and showed that local response works. At each new turn, counties adapted and jumped into action. Counties developed local solutions for testing and vaccine distribution on short notice and when other options reached capacity. Counties sorted out administration and distribution of new grant and relief funds with changing guidance on uses, restrictions and reporting requirements while keeping in mind those uses that would meet the greatest local needs. And maybe proving to be most important factor in moving forward, counties figured out how to work together with others, building local coalitions that would meet their residents' needs – in health care, long-term care, schools, businesses and more.

All of these new initiatives have come on top of continuing to provide existing services in spite of difficult conditions. Caseworkers have continued to investigate child abuse. We continue to see increased need for mental health and substance abuse services. Several counties still own their own nursing homes and are working tirelessly to protect their residents and their employees in light of various shortages including staffing, testing and personal protective equipment (PPE). Jails and prisons, facing those same shortages, have been dramatically impacted as congregate settings prone to quick viral spread, requiring close monitoring and adaptation to changing conditions. The county court systems also required swift reworking to keep county staff safe, yet continue to do the required work, including virtual hearings, extending the time until a hearing and other solutions that made the courts safer and more efficient. Election directors have worked overtime to process an unprecedented number of mail-in ballot applications and to protect the health of voters and poll workers during the three elections that have taken place since the pandemic began.

The list goes on and all of this occurred simultaneously while we experienced shortages in PPE testing and contact tracing, changing guidelines, staffing shortages and other obstacles resulting from the very complex environment brought on by the pandemic. But the world keeps turning, and counties serve a vital function in ensuring that many necessary services continue for the people of Pennsylvania in the face of these very challenging conditions.

Some of our continuation of services was made possible through the ability to hold meetings remotely, using technology to live stream public meetings and allow for remote participation. However, lack of broadband internet highlighted disparities in access. To address connectivity issues that many take for granted, some counties sought larger meeting spaces to accommodate social distancing or held meetings outdoors, even through the winter, to ensure the continuity and transparency of their county governance responsibilities. Additionally, the ability to administer care via telehealth options, implemented with little notice, provided a lifeline to many, especially those in desperate need of mental health or substance use treatment.

Counties have proven to be strong partners with the state in providing important services to the residents and communities of Pennsylvania. We have an opportunity to move forward together in collaborative and positive ways, ensuring better outcomes for all Pennsylvanians. But to do that, we need the trust of our partners and we need better communication and cooperation as decisions are being made, to seek solutions *with* counties. We urge consideration of regional collaboration to make important decisions carefully with intergovernmental as well as interbranch input, so that counties can be directly involved and provide local expertise about their communities as we continue the dual charges of response and recovery. We have seen how a disjointed approach causes confusion and fractioning, and we continue to urge a collaborative approach that allows local officials to weigh in on these very important decisions.

Thank you for your consideration of these comments. I would be pleased to answer any questions you may have.