



City of Jonesboro

Municipal Center
300 S. Church Street
Jonesboro, AR 72401

Meeting Minutes City Council

Tuesday, April 21, 2020

5:30 PM

Municipal Center

1. CALL TO ORDER BY MAYOR PERRIN AT 5:30 P.M.

2. PLEDGE OF ALLEGIANCE AND INVOCATION

3. ROLL CALL BY CITY CLERK DONNA JACKSON

Councilmember Gene Vance joined the Council meeting via zoom at 5:42 p.m.

Present 11 - Ann Williams; Charles Frierson; John Street; Mitch Johnson; Gene Vance; Chris Gibson; Charles Coleman; Bobby Long; Joe Hafner; David McClain and LJ Bryant

Absent 1 - Chris Moore

4. SPECIAL PRESENTATIONS

[COM-20:018](#)

PROCLAMATION BY MAYOR HAROLD PERRIN RECOGNIZING CRIME VICTIMS' RIGHTS WEEK, APRIL 19-25, 2020

Attachments: [Crime Victims Week Proclamation](#)

Mayor Harold Perrin said, the first item I want to cover, please, is a proclamation from Captain Lynn Waterworth. We will not meet until May 5, 2020 on our next meeting. We do it every year. This is a proclamation for Crime Victims' Rights Week, April 19-25, 2020.

Read

[COM-20:017](#)

PRESENTATION BY DR. SHANE SPEIGHTS ON THE COVID19 VIRUS

Attachments: [JBcouncilmeeting](#)

Dr. Speights said, first of all, thank you for having me, letting me speak to you tonight. Maybe even answer some questions you may have. Bear with me because I recognize some of this is going to be new information and I'm going to give you a bit of background. There is obviously a lot that has going on with this since started back in January, February. So, just kind of bear with me as we get started through this, but I'll go ahead and just jump right into it. In terms of what this is, COVID-19 is a virus and this is just kind of the family of the strain of viruses. People get confused and say, well, I've heard it's a common cold virus too. Well, it's got cousins that are common cold viruses and that is not the one that is wreaking havoc for us and it is related to the SARS virus. It is also a way to the MERS virus, which has caused epidemics around the country. This is certainly a new strain that we are seeing that started in China from what we can tell back at the end of November. So, it is a virus. It is not a

bacteria. It is not a fungus. The why that is important is because it requires a host. It has to be able to reproduce within a body. It can't do that on its own. And, so, how do you get infected by this virus? Well, it goes, it gets into your body through the nose, the eyes, the mouth. It moves into the lungs and that is where it reproduces. Unfortunately, with this virus, we find that it can get into the bloodstream and it can spread into and affect the heart, the kidneys, the brain, the liver, and even the bowel at some levels. The issue with this virus and the biggest problem we are having now is that it is highly contagious. It is an extremely contagious respiratory virus. We are finding out more and more that it can hang out on surfaces for more than we initially thought. It was 72 hours or longer. Now, there is some studies that show up to nine days. It can hang out in the air for a couple of hours and for people that are coughing or sneezing out into the air, it can live on surfaces, as I said, for quite a while. We are saying it is kind of a sneaky virus and what I mean by that is you can get infected by it and your body doesn't pick up on it so your body doesn't map a response immediately that allows the virus to actually reproduce and then spread to other hosts and so that is where you get the term asymptomatic spreader. It can actually get into your body and it can actually replicate before your body even knows it. And, so it has got an interesting way of kind of avoiding your body's defense mechanisms. The groups that are the highest risk for this for severe disease or individuals over the age of 65 or really anybody that takes a medication prescribed by a physician for any reason, whether that be high blood pressure, heart problems or any of the things listed there. We know those groups right there are at a higher risk. Asthma is one of those that we are also seeing that is a new group that is kind of emerging. And, oddly enough, there is a strange group of young individuals that have no medical issues at all that for the most part are in really good health and what happens in those individuals is actually the body over responds. The body gets really mad and creates this huge immune response and then it just starts basically breaking itself down and so the body starts attacking itself and so that it is called Cytokine storm, and that is an issue that we are seeing that we don't see with most viruses. So, that is alarming.

So, what do we do for COVID-19 to protect ourselves? Well, you have seen most of this. This has been put out by the CDC. It has been out in a lot of the media, publications, and things in terms of handwashing. Don't touch your face so the virus can't move in. The wearing of a mask in public is something that the CDC put out just in the past few weeks and that protects you as well as others around you. You have heard a lot about social distancing I am sure and the idea behind that is to limit the number of people the virus can infect. We don't have a lot of ways to actually treat this so these are the best tools. Testing, unfortunately, has been very limited and we haven't really done a great job as a country in terms of getting the test that we need and getting into the needed areas. I think that is getting better. I think it is certainly a lot better what it is today than what it was even just a few weeks ago. There is an antibody test that is out, but basically it can tell you if you have been infected because there are a group of individuals who got infected by this and maybe didn't have many symptoms at all. We are going to recognize they were sick. We are not quite sure how reliable that is. It is still a fairly new test and there is still a lot of information coming out about it. As I mentioned, there that Dr. Fauci, who is kind of our national infectious disease expert, he kind of weighed in on it just earlier this week about that test.

So, how do we fight this virus? Well, we don't have any medications right now. There is about 300 different trials going on. Obviously, we launched into a bunch of research, but research takes time and you have to go through multiple trials and you have to get lots of people on board and you have to give some people the medicine and some people get a sugar pill and so that doesn't always work out well, but we have got some

ideas. There is a drug called remdesivir which was actually created to fight the Ebola virus that is showing some really good promise in terms of slowing the spread and actually fighting COVID-19. There is a lot of medicines that we already have out there that we have been trying just to see if they can be repurposed. Some medicines we use for HIV. You have heard a lot about the hydroxychloroquine. A new study just came out today out of the VA that showed there is actually more deaths with that drug than without it and so that is some disappointing news as we were hopeful that there would be some good information regarding that. In terms of a vaccine, we don't have a vaccine. We have three vaccines right now that are promising that have moved into human trials and we are hopeful that those will be available by early to mid-2021. It takes a while for use to create a vaccine and then to grow it because that is what we do and you want to make sure the vaccine is safe and effective because it is something you are going to push out to 350 million people. So, you want to make sure that it is done right the first time. So, it just takes a while to get that. So with no medications and no vaccine, what we are left to do but to limit the spread of the disease. Really, that is all we have got. This is not uncommon in a pandemic, especially when it is a brand new virus that the human body has never seen.

At least 6 feet or more apart is the current CDC guidance. Obviously, the handwashing and wearing the mask and social distancing policies, which most every state in the country has adopted and the flattening of the curve, which I will talk about in just a second because I think that bears some discussion. So, I have had people ask me a lot, are you immune after you get infected? So, after I get sick with this, am I good? Has my body created a memory cells so to speak? Well, in theory, yes, but there is some evidence coming out that it says it really depends. It really depends on how your body responded. For some people, they do have an immunity. For some people, not so much which goes back to the real need for a vaccine and an effective treatment. Following some information out of South Korea, about 116 individuals that are still recovering that tested positive. We are not sure, actually, you know, what that means or what that is going to translate into.

I thought this was a great slide. And, I have used this before as I have discussed, you know, what this is and why so important to flatten the curve. What I want you to understand about this is certainly, at the very beginning back here at the very beginning, we say someone gets infected right about this area here. Let's say we do nothing. Let's say we just say, okay, look, we don't have vaccines, we don't have medicine so everybody is just kind of on their own. Then, the virus that gets passed around and people get sick and they get sick quickly. And, then the peak subsides and you will see it comes and it goes quickly. This is if you put social distancing measures in place. The gray curve is. It flattens it out and so this is the flattening of the curve. What I want you to pay attention to is the number of people here and the number of people here are the same. It is actually the same number of people under each one of these curves. You just change how many people get infected at a certain time, and why is that important? Well, it is the overload on the healthcare system. We only have so many ventilators. We only have so many ICU beds. We only have so many ICU doctors. The other thing that I want to point out too is right here is the peak. So, right here is the peak if you do nothing. You move the peak down the road so the peak becomes here, the better job you do social distancing. Well, why is that a big deal? Well, if we can move the peak, we buy ourselves time. We buy ourselves time to do research. We buy ourselves time in terms of creating a vaccine and in terms of maybe repurposing some of our medications to see if they will really work. So when you hear about flattening the curve and #flatteningthecurve, this is why this is such a big deal. It gets confusing for the general public, and so we try to put out as much good information as we can to hopefully make it clearer. But, this is why we want to

flatten it as much as we can. Even though in the end, the same number of people get infected, it's just a longer period of time. I will talk about this in a second and some of you are probably already realizing this. Does this mean that the virus hangs out in our community longer? Unfortunately, yes, that is exactly what happens. So, the virus when it comes in here, people get infected and they get over it and it is a shorter amount of time. It is much longer when you flatten the curve.

Just a quick update in terms of where we are nationally, we are at about 788,000 infections in the United States, with about 40,000 something deaths. I'll talk about that in just a second. This map, I think, is good because it shows you where the geographic spread is. It shows you where all of the cases across the country are and I'll come back to that in just a second. How do we look compared to other countries? This just came out earlier this week. We are starting as a country to flatten our curve. Now, there is a caveat there and it's kind of an asterick there as we as a country are starting to flatten our curve and I'll talk more about that in a second as well. What this graph depicts though, if you see the stars, now, stars are where national lockdowns occurred. Now, the United States is a big country and each state has their own ability to make these decisions and so it was different for the United States. These individual countries made their own decisions and so what's interesting is you will see the earlier and the only one depicted on this graph is New Zealand who started it early and was able to flatten their curve and to drop their numbers fairly quickly. Everyone watches China because China is the one where the virus originated and that gives us an idea of what we can expect or what other countries can expect where it goes up, it goes down. You have a second peak. It goes down. You have a third peak and they are just now reopening their country. So, we will see what happens there as they loosen all of their social distancing requirements.

In terms of the United States, about 95 percent of the population is under some lockdown right now. That is about 306 million people. Today, we have about 43,000 deaths over the last three months. The first one was reported at the end of February so compared to our influenza seasons, which can vary depending on if you have a bad one or not, normal deaths are between 25,000-45,000 over a season, which is about seven months. What I want you to take a look at now is in the top right corner. You will see that map of the United States that is based on geographic population. So, that is the population density of the United States where everybody lives. Now, look at the map below which we just looked at. You can see where the spread of the disease is. It should be no surprise to you that the more dense the area is in terms of the population, that is where the hotspots are so to speak in terms of the spread of the virus. And, again, what we are trying to do, as we are in the United States, for the most part, we are flattening the curve in the United States with what we have been doing.

Now, moving onto Arkansas. Let's get more of a granular level of what it looks like for us. Social distance in the governor's approach, as well as, Dr. Nate Smith, is their targeted approach has been working. We do have cases on the rise, but it has been slower. It has been slowing down quite a bit. For those of you who watched the governor's press conference today, you will see that there was a significant uptick in the last two days in terms of cases primarily in the prison system. The prison system is important to realize what is going on there because that is a micro environment. That system is similar to other systems like nursing homes or extended care facilities. And so, looking at what goes on in those areas can give us an idea of what would happen in other areas where you have clusters of people together in a specific area. Now, there is isolation that occurs in the prison system that you try to remove them. The other piece about the prison system, which I think is important, they were testing pretty much everybody so even individuals that didn't have symptoms were getting

tested which is something we don't do in the general public right now. Most of you are aware from the governor's press conference last week that right now, we have a target date of May 4, 2020, which is our phase one target date. I'll talk a little bit about that. This is based on the White House's proposal that was released the end of last week in terms of being able to restart our economy and move forward, which is something we must do. A lot of it's heavily dependent upon testing and contact tracing and we will talk more about that. Here we are in the state of Arkansas. I apologize this was as of yesterday, I believe. It shows 43 cases. We actually have 45 cases in Craighead County now. This is the age distribution, which I think is important. You will see that the largest percentage of people are between the ages of 25 and 64. So, a lot of your working class individuals are the ones that have the disease now. But it is true, the individuals with the most severe disease are the ones that take a medication or are over the age of 65, specifically over the age of 80.

When we talk about the actual Arkansas numbers cases by day, this is what the numbers look like and again it is about a day or two behind. Right now as of the press conference this afternoon and as the information I got from the ADH about 30 minutes ago, we were at 2,200 cases for the state of Arkansas. This is the same information depicted in an aligned graph form and here is a copy of the presentation from the governor from yesterday showing each day the new cases over seven day rolling average. What's interesting and not surprising is you will see it goes up. It goes down. It goes up. It goes down. Some of this is actually based on the release date of the test. So as we have test, we send them off to the lab and we get batches of them back. Sometimes that is why you will see the increase in the numbers there. Drilling down even further to Craighead County, this is what our trend line looks like. I was really concerned at March 28th when we showed up there at the parking lot of the Best Buy right after the tornado had hit about the congregation of people and what we were going to see in terms of an outbreak, I do believe there has been some bump based on that. If you look here, this is where we were trending along in Craighead County fine just kind of holding our own and then this is where the tornado hit and this is where you had people out helping neighbors, helping each other, which is what we do if that's part of our community. It is not surprising to see a little bit of a ball. Now, some of this is just normal. So, this is going to be a natural increase just based on the spread of the virus. Some of this is probably attributed to what happened during the tornado event and the little bit of cleanup, excuse me, large cleanup that occurred throughout there after. The nice thing about it, the good thing, I'm glad of is we did not see a spike in the number of cases so we did not see a significant spike. And, this just continues to trend like this. This is just more in line graph form. Again, you will see it comes up. We plateau. It comes up. We plateau. It comes up with plateau. This is a typical trend line. How does this compare to what national data looks like in terms of where we are as a stage and where we might peak. I'll be honest with you. There is about four or five different models out there that show different numbers and it is all based on different information in terms of what do we do as a state or what do we do as a community suddenly over the next several months.

This one shows a peak of April 30th in terms of peak resources will be used. This one has been moving forward. This model itself has been moving forward every few days. They keep pushing it out, but again, that is not a surprise as we do a good job of social distancing. We push the peak out more and so you will see it come out more this direction as we continue to do a good job as a state and as a community. This again, this model is the model actually used by the White House follows and a lot of individual organizations and institutions are following I have got mixed emotions about it. I know the governor spoke about it today and I agree with him in some regard on that. This one, and I am not sure where they got this data from, this one actually says

that in the state of Arkansas that we should look at relaxing our social distancing after June 22nd, which, of course, is not what our plan is right now. The governor is planning for May 4th to start back.

In terms of when do we really expect to see our first peak and I think that is important to delineate. We will have other peaks. Our first peak probably will come more earlier than May. There is some discussion about June. One model that shows July and I am still not quite sure where they are getting that from. Some of it depends upon what happens and what happens May 4th and what happens moving forward after that. Crittenden County, I have got this here because that is interesting. Crittenden County is kind of a light bulb certainly in our area in terms of cases and where that comes from is the crossover of the individuals that live in Memphis. Memphis, itself, almost has the same number of cases as the entire state of Arkansas. So, you have got a geographic area that basically holds this almost the same number of cases as our entire state. That means that they have in Memphis, significant community spread of person to person and that is not that far away from us. It is just kind of something to remind you, as a reminder, if we are successful and we are for the most part, if we are successful in flattening the curve, that means we prolong the presence of the disease in our community, but we don't overwhelm our health care system, which is something that we have to be very diligent about watching for it. So, and had this happened a week ago, I had to actually speak to this. I've got questions about well now that we peaked, what do we do now? Well, well, we is contextual. We haven't peaked yet. We, in the state of Arkansas, we are hoping to peak soon and we are hoping to get on the back side of it. We, in Craighead County, have not peaked. We are hoping to soon and be on the back side of it. The White House has put out guidance. The Arkansas Department of Health has a workgroup is going on right now. Dr. Nate Smith, I have been in contact with him frequently. He is a part of that group. There is also an economic group that has pulled together. We are hopeful that we will have more guidance within the next week from them because really, we are less than two weeks away from May 4th when the go live date should be from the governor to move forward to reopen the state and restart our economy which is desperately needed that I know. The worry that we have, certainly in the science and healthcare field is that there is public misconception, for whatever reason, the virus is gone. I can come out of my house. I can go back to normal. We can do the things we were doing before. And, you are starting to hear more about that from the Director of the CDC, from Dr. Fauci, that it would be a grave mistake and certainly put us back in a position that we were in just a month and a half ago. Which is why the city and the county and the state approach has to be united and has to be uniformed and it has to be consistent.

So, how do we do this? How do we make this happen? There is specific guidance that has come out for each workforce segment. Screening, testing, and contact tracing has to be viable. The Arkansas Department of Health is working diligently to hire people for this. When we see an increase in cases above a certain threshold, we are going to have to back down. I have kind of described it as two steps forward and one step back. That is going to be really hard for people who have been, for the most part, you know, cooped up in their house for the last several weeks. How long is this going to take? It is probably going to take a while because we are not close to getting a vaccine and we are still not sure about any good treatments and so, it kind of puts us in a bind because we start looking for cases to fall. The major concerns we have are compliance. Again, my whole family is tired of being in the house. I'm here at the breakfast table. Our testing is not that good yet. And, we are still working on putting a system in place for tracking. The second peak is a concern that could be higher than the first. And, we are not quite sure what will happen this fall. If you look back at history, which again, we are hopeful we don't repeat, the Spanish Influenza in 1918 had

its worst death rate occur in the fall after the virus first showed up in the spring. It dampened itself down in the summer and then, kind of came back with a vengeance in the fall. And, so, that is worrisome and we will kind of have to wait to make sure we do a good job of staying on top of it.

Just real quickly and I am not sure if many of you have seen this or are familiar with it, this is the White House "Gating" criteria. And, specifically, this is what the governor spoke to that we don't meet right now. So, we, as a state, don't meet this downward trajectory in terms of documented cases for that 14 day period. Some of that now, has been thrown off by the prison population. So, it will be interesting how we navigate that.

In terms of Phase One, ideally, if everything goes well like everybody hopes, May 4th we will move into Phase One. What does that mean? Well, it means that vulnerable individuals still have to shelter in place. They define a vulnerable individual as anyone with a chronic condition, so if you take a medication prescribed by a doctor for a chronic condition, or an elderly individual, which by definition of the World Health Organization is anyone 65 and older. Those individuals are still supposed to shelter in place. It talks about individuals in public and how you manage yourself in social situations. It talks about the number of ten. It talks about avoiding socializing in groups of ten or more. It talks about non-essential travel.

For the employer standpoint, and this is where you get into what is the City of Jonesboro and this council have to do to try to help make sure we do this right. Certainly continue to encourage telework, but return to work in phases. It is something that we are even discussing. I just got off of a meeting before here with our senior team here at NYIT on how do we do this? Avoiding common areas. Again, travel is a question. For specific employers, it talks about schools and organized youth activities. They are to remain closed at this point. So, that means your K-12 and certainly your undergrad will continue to be closed for the rest of the semester into the summer. It talks about large venues and places of worship. I have been asked to speak to a group on Thursday of local pastors and preachers to explain to them what this might look like and how do they change things within their own places of worship to make it safe for their parishioners and their individuals who are coming for services. Elective surgeries, I know both hospitals are looking forward to getting this back. Bars are to remain closed.

So, I realize that was kind of fast and furious. I am happy to answer any questions. But, what does this mean for Jonesboro? At the end of the day, we have to make sure we protect those at the highest risk. So, what do those policies and procedures look like for the different groups within the city. You think about the individual, the firefighter, or E911 operator who is 66 or those in Streets and Maintenance in terms of maintaining social distancing. I might say for the most part, we have done a great job. I have been in contact routinely with the Jonesboro Fire Department, as well as, the Jonesboro Police Department. They don't hesitate to contact me if they have questions about individuals who might be sick or might be infected or came into contact with someone who was infected and I think that is fine because I think it is important to have good information out there. Churches and places of worship are obviously excited about getting back as well. And, so, those are discussions left up individually to make sure that they do that safely. How do we host public events? And, what is the general public guidance that the city is putting out for the populace and the county putting out for the population? This is hard. This is hard. This is probably hard for you guys. I mean, I went to school for 4 years to understand viruses and microbiology before I ever went to medical school. And, so, for me, some of this stuff just makes sense, but it hard for the average person. It is hard for me to sit

sometimes and explain it to my own family. So, how can we make this information palatable and understandable for the general public so that we don't put ourselves in a situation that would be worse than when we started? And, so, that is kind of a quick update. That is kind of where I was. I am happy to answer any questions specific. I know that is a lot to digest at one quick setting. I do these updates for the city and the county every week. I have been doing that probably for the past six weeks or so to provide an update for them. You guys got it all out at once. I apologize, but hopefully that gives you some idea as to the situation where we are now.

Mayor Perrin asked, any questions ladies and gentlemen? Councilmember David McClain said, I appreciate you making that presentation. It was really good. Should we be putting something out as far as education to the public? As a city, should we continue to a one page info graph that helps explain that to people, to make it understandable? I think you did a great job making it clear to me why we should continue to have things in place. Should we do something? Maybe, Mayor, we get Bill or somebody to put something out every so often explaining these are the reasons why we are doing social distancing, these are the reasons why we need to continue to implement these things. Should we do something along those lines? What are some of your recommendations to us to help us make it clearer to citizens around town? Dr. Speights said, so, any education like that is going to be important. It is going to be vital. There are going to be so many questions. There are still questions on the medical side and the research side. I am reading stuff almost every day, every hour right now and it is like "wow, we didn't know it did that." There is a lot of new research coming out. There are a lot of questions that I have.

With that being said, I think the information that we do know is solid, we should put that out there in a format that the public can understand. My hesitation right now, to answer your question, yes. I know the governor and their working group is in the middle of creating guidelines and a specific overview of how the state of Arkansas should look. He mentioned that even in his press conference last Friday. When he was asked if this would be a county and a city approach or would it be statewide and I believe, and so I don't misquote him, the answer was that there would be overall guidelines by the state, but obviously, it is not a one size fits all for every city and every county. I think you can never go wrong by putting out good information and good education. I think that some of this stuff I just described to you guys, I think is important in terms of look, the virus didn't go away. It is still smoldering in our community and people are going to get sick. We are trying to do the best job that we can in the absence of a vaccine and in the absence of good medications. We are trying to limit the number of people that get sick, specifically in high risk groups. So, I do think that education is important and I am happy to help with that as well. Councilmember McClain said, thank you.

Mayor Perrin said, I will say one thing gentlemen. We do have, Councilmember McClain, we do have the COVID-19 on our website. Obviously, the CDC and the Department of Health, all of that he covered on some of those slides in there. But, he is right. There are so many things that are moving so quickly on that if he feels like there is something that we need to put on our post, on our website or whatever, that is good. I know, I think he has been on channel 24 if I am not mistaken and talked about it. But, it would be good for us, and we stay with Dr. Speights every week. I can assure you of that. And, talk about this and I am always there on Monday when he gives a report to the county, County Judge Marvin Day and Anthony McCoy and all of that. It was a good question and we will certainly put anything that he feels like needs to be on our website, we will be happy to do that.

Councilmember John Street said, Mayor, Dr. Speights, it was down and dirty, but it was a very, very good explanation and a lot of people are having a difficult time understanding this. Would it be possible to present the presentation he just gave us on channel 24, a few times a day so people could watch that at their convenience and maybe sit there and they could watch it twice to get a little better understanding of it? Mayor Perrin said, absolutely. We could do that and I think he may already have that filmed. If not, we can film him doing that with the slides as he talks, we will show each one of them and we can run that. Any changes to that we could make them as soon as he wants us to do that. So, great idea. We will get Bill Campbell with Dr. Speights if that is okay with you Dr. Speights? And, we can film that presentation. That is a good point. Councilmember Street said, Mayor, there is one other thing. I hear this from people that they equate this to no more dangerous than the flu. Could Dr. Speights address that? Dr. Speights said, yes sir. I will be happy to. I hear that a lot too and I have to stop. That may be a separate segment on why this is not the flu. One of the great things about the flu is that we have a vaccine. The other thing is that we have medications. We have really good medications for the flu and so that really limits the number of people who have severe disease or that even die from the flu because of that. You know, people don't realize this either. We had a flu pandemic back in 2009. There was an H1N1 pandemic. People don't even realize this. The CDC did a phenomenal job of getting test kits out within about two to four weeks across the country and we even shipped them overseas to people who needed them. The reason why is that we already had a platform. We already did annual flu testing so when you went into see your doctor, they could do a flu swab just like they do a strep strain or a mono swab. And, so, we already had a platform available. Plus, we already had flu medications. So, all we had to do was test them and see if they worked against this pandemic flu, which they did. And, because it happened in April, kind of like we are running this too, because the H1N1 happened in April, we were able to rapidly turn around and use the same vaccine manufacturing process and get a vaccine out for the fall. So, when it came back in the fall, we had a vaccine that we were ready for. This is a completely different virus. Our human bodies have never seen this virus. You have never seen this strain before. So, creating a vaccine takes a year or up to 18 months depending on which way we go and make sure that there are no problems with it. We don't have any medications for it. So, that kind of puts us behind the 8 ball. The other thing is, gosh, it spreads so rapidly and it spreads kind of like the flu. One of the slides I had up there, we are at about 42,000 deaths in just three months. So, in a bad flu year, we have about 45,000 deaths over seven months. And, so, we are hopeful that we don't see that. That this doesn't become, you know you can call it a really bad flu, but really, this is a separate entity. It is certainly a separate virus. It is not even in the same family. So, it is a different viral family and it just behaves differently. Usually, once you have gotten the flu, you get antibodies and you don't get sick with the same flu again. This virus is showing that you can even have symptoms after you have gotten over it before. So, we are scratching our heads over why that is. There are still a lot of questions and not a whole lot of answers. Does that help? Councilmember Street said, yes sir. Thank you for your guidance and your expertise on this matter. It is difficult for all of us. Dr. Speights said, yes sir, I understand.

Councilmember Joe Hafner asked, Dr. Speights, a question I have and I don't want to get ahead to what we are going to be talking about with the curfew, but, obviously, as you are saying, this is something new. We haven't dealt with it before. In your opinion, are people taking it serious enough because, you know, you go to the grocery store that is busy during the day and maybe not even half of the people are wearing a mask. How do we deal with that? Dr. Speights said, yes sir, it is a mixed bag. I think the best thing that we can do is educate. I really do. I don't see it and the governor got asked this today and I agree with him. I don't see it being mandated that you are going to

make people wear a mask. I think you try to put out the best information that you can, the best guidance and say, hey look, this is the deal. You know, and let them make their own choices. My son and I ran by Home Depot this weekend. Of course, we were both wearing masks and we had alcohol wipes. But, there were a lot of people there that weren't wearing masks. There was a group full of teenage girls running around my neighborhood just last week. I mentioned this to the Mayor. I am more worried about the juvenile spread because you know, they are not in school. They are not in High School. They are not in Jr. High. They are not in college. And, they are just social at that age anyway so they are grouping up and just running all over. They spread it quicker because they have less symptoms and they can be super spreaders of it. So, that kind of worries me. But, I think the best thing we can do overall is to continue to put out good education and guidance. I think people really won't take it seriously until we start having a lot more cases really bad. This sounds bad, but until we have more cases where people die here. I have heard it before, you can talk about New York and you can talk about Italy, you can talk about those places and it is not here and that is true. We just want it to become that. I am afraid and I feel bad for you guys in the position that you all are in trying to navigate this. But, we have got to do something, you know, for the economy. We can't continue this way. So, economically, we have to move forward in some form or fashion. How do we do that as safely as possible and protect the populations that we need to that are most vulnerable? So, maybe it is that we hammer those groups really hard and say, hey look, if you are on this list, you shouldn't be out and about at Kroger or you shouldn't be out without a mask on. You should carry hand sanitizer with you. There is a lot of different ideas that are being circulated now on how best to approach that. So, does that help? Does that answer your question? Councilmember Hafner said, it does. It does. I mean because and like I said, not to jump ahead on our agenda, but in your opinion, is the curfew an effective way to help slow the spread? Dr. Speights said, so here is my stance. My stance is anything we can do to slow the spread that is reasonable, then we should do that. But, I am very cognoscente of the economic impact. I am very cognoscente of restrictions of trade. I would not be for things like that because on the medical side, we are talking about the opposite piece in terms of, gosh, people, you know, are at home now and they have been that way for weeks and the social isolation. I've got medical students, you know, we did this immediately. So, they are all in their apartments doing online learning and it gets lonely and there is a whole different psychology that occurs with that. And, again, from an economic standpoint, certainly a rural state like Arkansas, we have got to get people back to work in some manner. So, how do we do that safely? It is going to take some innovative ideas to say, okay, we can do this and this that really negatively affect commerce, but it gets to where we need to to limit the interactions of the people and to protect the people that we need to protect the most. When early on when this was happening, I was really concerned about our fire department to be honest with you. And, I was worried because they were making all of these medical calls and they all cohabitate there. And, so that is all you need for one whole crew to get out. We don't have a lot of depth from what I can tell on the fire or police department. So, we don't need to lose those individuals that are really on the front lines of protecting us. That is a round about answer and I apologize. I am trying to be cognoscente of the discussion. Councilmember Hafner said, I appreciate that. Thank you.

Councilmember Bobby Long said, I have got just a few questions for you. You are talking about flattening the curve and how that helps from overloading our hospital system. I have just a couple of questions and one term that I would like for you to expand upon. One: Do we have any hospital census data that would let us know how close we are to reaching that overload capacity? And two: When we start talking about pushing that curve out, the same number of people are going to get it. It is just how

compact on that curve are we going to be? But, it seems to me that, because the virus isn't going to go away, it is going to be out there when we open our community back up. So, how do you address, right now, everyone is staying at home or social distancing. We open up the economy. We come back in. Spikes happen. We tell everybody to go home again. And, then in the fall, the same thing happens again and it just seems like we are putting ourselves in a situation to where we just have this rollercoaster of opening up, shutting down, opening up, shutting down and we never ever get to the point where this virus has an immune population that it cannot host in. So, given that, can you explain the option for term herd immunity?

Dr. Speights said, yes sir, absolutely. That is a great question by the way. Let me back up on your first question. Your first question was about the hospitals and I meet every week with all of the CEO's of all of our hospitals in northeast Arkansas, including our two major hospitals here, St. Bernards and NEA Baptist. So, that is a CEO working group that is talking specifically about COVID-19. They talk about tests and how their testing capacity is. They talk about bed numbers and there is actually a statewide system called haveabed. And, so, that is an electronic system that they can go onto, those individuals in that system and they can actually look at where the bed status is for each hospital in the entire state. And, so, to your point, we know how many ICU beds we have. We know how many ventilators we have. We know what kind of our surge capacity is for lack of a better term. It is a great utility. We have just added we had them and it was requested for northeast Arkansas to add another column to say on a worst case scenario, how many patients could you take if had to. Because our earlier conversations, we were seeing this spike around the country and around the world was that we were going to need some overflow capacity. And, so, I was working with Arkansas State University to create a secondary facility if our two major hospitals became overloaded in terms of how we might manage that surge because we knew that Memphis, St. Louis, and Little Rock weren't going to take any. So, that is a weekly meeting that is hosted by the hospital CEO's. I don't know the exact number right now. I can tell you that our bed numbers are fine. We do have COVID cases in our region. We do have COVID hospitalizations in our region. Again, because of HIPPA, I can't get into a lot of details there, but we have capacity right now. We have plenty of capacity which is a great thing. I will speak about herd immunity. So, to your point, as we open things back up and we open up the economy and we start to move forward, then what we have to watch and we have to partner with our hospitals to watch the hospitalizations. And, as those numbers start creeping up, we have got to know when to pull back on what are requirements are, what our policies are. Because we can't get into a position of all of a sudden now we get to this point and it is too high and we try to pull back but we don't have enough hospital resources. I think that is certainly what every state and region is grappling with now is how do you set that threshold.

I am hopeful that the state guidelines that come out in the next week or so will kind of point to that because really, nobody has said, okay, if you have reached this point, you should pull back. You hit the nail on the head. People are going to be fatigued by this and that is one of my worries is that once we start losing things and things start going back to normal so to speak and you say, oh, wait a minute, you have got a huge rise in cases, you have got to back off. People are going to say, nah, no, nothing happened the last time, I have not bought into this. And, so, that is a concern. The virus doesn't care, it is just looking for the next host. In terms of herd immunity, it varies from virus to virus. The measles, for example, you have to have about 95% of the population has to be infected or has to have some sort of immunity for the measles to not pass around which is why you will see some outburst here and there or outbreaks here and there. Our best guess now is that between 50-65% of the

population needs to be infected with this virus to create some type of herd immunity. Though, we are not exactly sure if that is the right number. That is kind of the number you see in the literature being thrown around. So, half of the population or more needs to be infected by it. So, how do we move forward and again, no vaccine, no medicines and really allow for half of the population to get infected or make it for the group that gets infected is not the high risk group. How can we have it so that the group that gets infected of the individuals who have the least likelihood of ending up on a ventilator and ending up in the hospital? It is not a good virus when you get it anyway. It is awful from what I understood and get reports from actual patients, they feel horrible, a lot of them do in terms of the muscle aches and the fevers and things like that. But, some people have mild symptoms. But, how do you get those people infected, largely your workforce, and protect the others. That is kind of the strategies that we are looking at from a state and a region in terms of well those 65 and older and those that take a medication. We need to kind of keep that population away from everyone else as we start to reopen. Did that answer your question at all or did it help? Councilmember Long said, it did. It did. I was, back when you were giving your presentation and we were talking about social distancing and keeping people away from one another and doing all of that, it just seems there are other options if we look at that one being, you know, herd immunity. And, I totally understand because my mom and dad are 75 years old. I understand it, but they are taking precautions and they are doing those things that they should do. And, I totally understand about certain populations need to be more careful than others. I also have to grapple with are we just in a roller coaster because when you say vaccines are 18 months away and some maybe even two years, I don't see us on this rollercoaster for two years going partially open and then pulled back and then partially open and then pulled back. So, there has to be something else available out there.

Dr. Speights said, I am hopeful to kind of pick up on that thread. I am hopeful that we will do a better job of finding some sort of medication to at least block some of the effects of it too. So, maybe, one of these medications that we have already got out there, we can recycle and we can use and maybe, you won't get as sick with it. And, so, the other piece is too, we don't really know. Because it is still a new virus, it has only been circulating over very little time. The best thing that we can do and I said this in the beginning, the best thing that we as a community and we as a state can do is to look at other states and other communities and see what they did. Because they are going to see it before we do. One of the luxuries about living in Arkansas is that we can see what happens in other areas before it really hits us and we can respond better. I think that is probably why our curve is flatter in this state because as it was blowing up in the northeast, I think that is when our governor said we need to do a better job of containing this sooner. And, so, we put measures into place before other places would have considered it. I think that saved us a lot, I really do. I think the governor has done a good job. I think Dr. Smith has done a good job under the circumstances. This is a hard deck to be dealt to begin with. Councilmember Long said, it is. Thank you so much. I appreciate your answers.

Mayor said, thank you Dr. Speights. Mr. Campbell will get with you and we will get that video and get it on channel 24 this week. Okay. Dr. Speights said, thank you. Mayor Perrin said, thank you. Thank you very much.

Read

5. CONSENT AGENDA

Councilmember Chris Gibson motioned, seconded by Councilmember Dr. Charles Coleman, to remove RES-20:045 from the Consent Agenda so that RES-20:045 could

be discussed due to questions from the public. All voted aye.

Approval of the Consent Agenda

A motion was made by Councilperson Charles Frierson, seconded by Councilperson Charles Coleman, to Approve the Consent Agenda. The motioned PASSED

Aye: 11 - Ann Williams; Charles Frierson; John Street; Mitch Johnson; Gene Vance; Chris Gibson; Charles Coleman; Bobby Long; Joe Hafner; David McClain and LJ Bryant

Absent: 1 - Chris Moore

[MIN-20:031](#)

MINUTES FOR THE CITY COUNCIL MEETING ON APRIL 7, 2020

Attachments: [CC Minutes 04072020](#)

This item was passed on the consent agenda.

[RES-20:035](#)

RESOLUTION BY THE CITY COUNCIL OF THE CITY OF JONESBORO, ARKANSAS, TO PLACE A MUNICIPAL LIEN ON PROPERTY LOCATED AT 1403 OAKHURST, JONESBORO, ARKANSAS 72401, OWNED BY A+ PROPERTY MANAGEMENT, LLC

Attachments: [1403 Oakhurst](#)

This item was passed on the consent agenda.

Enactment No: R-EN-040-2020

[RES-20:046](#)

RESOLUTION BY THE CITY COUNCIL OF THE CITY OF JONESBORO, ARKANSAS AUTHORIZING MUTUAL AID ASSISTANCE AGREEMENT WITH CRAIGHEAD COUNTY FOR WORK ASSISTING WITH THE TORNADO EMERGENCY

Attachments: [Jonesboro - Craighead County debris mutual aid agreement](#)

This item was passed on the consent agenda.

Enactment No: R-EN-041-2020

ITEMS REMOVED FROM THE CONSENT AGENDA FOR DISCUSSION PURPOSES

[RES-20:045](#)

A RESOLUTION AUTHORIZING THE CITY OF JONESBORO, ARKANSAS TO ACCEPT THE APPORTIONMENT AND TO ENTER INTO AN AGREEMENT WITH THE U.S DEPARTMENT OF TRANSPORTATION, FEDERAL TRANSIT ADMINISTRATION (FTA), FOR THE EXECUTION OF THE 2020 FTA FORMULA 5307 CARES ACT FUNDING FOR THE JONESBORO ECONOMICAL TRANSIT (JET).

Attachments: [CARES Act 5307 Split Letter \(002\)](#)
[RES-20-045-Public Questions Lack 04212020](#)

Mayor Perrin said, before we get a motion, again, if you all will remember, we have asked people to send things in and I would like to ask if we could get an approval, but if you could pull RES-20:045 so that I can answer some questions that has been

submitted to me.

Councilmember Chris Gibson motioned, seconded by Councilmember Dr. Charles Coleman, to remove RES-20:045 from the Consent Agenda so that RES-20:045 could be discussed due to questions from the public. All voted aye.

Mayor Perrin said, before we do that if I can, again, and I apologize, but I want to answer these questions if I can. I will be brief on those. The first question was when the money, \$3,277,057 is received, will the total amount be deposited into the JET budget? If not, where and what account will it be deposited into? On these grants, we have not received the final regulations, but if it runs like any other grant, it is required that we will spend those funds and then we will ask for reimbursements again from ARDOT. It would be in the JET account, not in general funds. The second question is when some of the money is to be used on a project/item, does each of the projects/items money that is allocated have to be approved by the Finance and Administration committee and the City Council first? The answer to that is definitely yes. You all would approve the grants, but we would also as expenditures come in, we would ask you to do that and go through that. The third question is who is the person that is going to be accountable for the usage and delegation of that money? That would be the same system that we now do on purchase orders before we spend any money for any item that goes to a certain project. The fourth question is how is the public going to be able to see how this money is spent and to see the balance on a regular basis? In that case, we would obviously probably set that up on a quarterly basis. I think monthly may be too often for that. Now, let me tell you what we have done so far and that would kindly help with all of these questions. I contacted Michael Black, the Director of JETS, and told him to start putting a master plan together. He is doing that now. The first thing that is done is that we have pulled all of our data on our GIS map of every bus stop that we have. We also know if any of them have sidewalks leading to those bus stops. We have also looked at the bus stops themselves to see if they are too little or should be larger because of again, COVID-19, and not only that, having more people to be able to sit down at those bus stops. The other thing we pulled is all of the vehicles which under the 5307 money with the Federal Transit Authority is that you keep those buses for I believe it is seven years or 250,000 miles and that would go for not only our buses but our paratransit. So, I would anticipate within the next month or so, we will come up with a draft of a master plan that we could present to the Finance Committee to show them that, but that would have to be after we get our guidelines from the federal government because we have not received all of the guidelines yet. But, we do know that you can use this money for operating expense, capital improvement, and several things. So, it is going to be a pretty good grant for Jonesboro. I don't anticipate that the \$3 million would be spent in any one year, depending on if there is a deadline. Because, if we need to build more sidewalks to our bus stops, that is going to take some time to take that out for bid. The other thing is that if we needed more bus stops, we would have to bid those out, get those prices, and bring those back in. Also, if you purchased new vehicles, again, you have to go by ARDOT and the Federal Administrations guidelines which means that you would submit that into them. Once they are approved, they have to be manufactured, then they have to come back to ARDOT. They have to be inspected before we ever take delivery. That takes somewhere between probably 6-8-9 months just to get that done. So, again, this would be a great grant for Jonesboro. The citizens will know exactly what we are doing with this money and we want to use this money very wisely. I think a lot of those issues were brought up at the last Finance Committee. I know Chairman Hafner asked some of the questions on that, particularly about the sidewalks that are leading to some of these bus stops. I have driven around and looked. And, again, some of the stops only has a grass area. You can see a trail

leading to that. Some are not logistically located, let me say that. If you go back and logistically locate those bus stops, then that will tell me that route will need to increase better time wise in order to do that. We also have and a press release will be coming out hopefully this week in the fact that with Arkansas State University's help, you can go on an app and see these buses, see where they are at, see the time and how long it will take to get to that next bus stop. And, that is going to be a great thing for Jonesboro. So, I have answered all of the questions from the public that they have asked.

Councilmember John Street motioned, seconded by Councilmember Chris Gibson, to adopt RES-20:045. All voted aye.

A motion was made by Councilperson John Street, seconded by Councilperson Chris Gibson, that this matter be Passed . The motion PASSED with the following vote:

Aye: 11 - Ann Williams;Charles Frierson;John Street;Mitch Johnson;Gene Vance;Chris Gibson;Charles Coleman;Bobby Long;Joe Hafner;David McClain and LJ Bryant

Absent: 1 - Chris Moore

Enactment No: R-EN-042-2020

6. NEW BUSINESS

[RES-20:047](#)

A RESOLUTION ALLOWING THE MAYOR TO EXTEND A CURFEW DUE TO THE DECLARATION OF A LOCAL EMERGENCY

Attachments: [Against Curfew Williams 04172020](#)
[Against Curfew Locke 04202020](#)
[Against Curfew Waller 042020](#)
[Against Curfew Robertson 042020](#)
[Against Curfew Martin 04202020](#)
[For Curfew Warner 04202020](#)
[Against Curfew Weinstock 04212020](#)
[Against Curfew Kriner 04212020](#)
[Against Curfew Sullivan 04212020](#)
[For Curfew Casteel 04212020](#)
[Against Curfew Martin 04212020](#)
[For Curfew Evans 04212020](#)
[For Curfew Daniyal Khan 04212020](#)
[For Curfew Schloemer 04212020](#)
[For Curfew Ewart 04212020](#)

Mayor Perrin said, I have got something that I would like to read to you if I can. This goes along pretty clear with I think with what Dr. Speights had done, but I would like to read that and let this be a part of the record because there have been some emails concerning certain violations, if you will, based on the current curfew that was adopted. We all agree that we want to get past this. But, we are really not past it at this time. We all have businesses that we want to reopen and everyone to get back to work. We, obviously, want to embrace our at-risk loved ones and go out and eat. We might not all want to go out at midnight, but we have enjoyed that privilege of our lives and should

we choose to use it. Our governor has created a timeline that matches deadlines and attainment goals for COVID-19 cases in Arkansas. At the hub of northeast Arkansas, Jonesboro has been recognized as a potential hotspot. We are 50 miles from Memphis, which has as many cases of coronavirus as the entire state of Arkansas. Our curfew has impacted few, but served many. It has served our police department in keeping this virus out of our police force is critical a mission as we have faced. It has served our health workers. Our hospitals are treating many COVID-19 cases as we speak, and I can think of nothing worse than threatening the health and the safety of our first responders and health workers by playing politics with this virus. According to the Arkansas Municipal League (AML), a curfew such as the one we have implemented is constitutional. It is not a violation of civil rights. It is a national and state and local emergency. Curfews are included in CDC best practices, at the same level of closing schools and public gatherings. Curfews have been encouraged by both state health officials and approved by Governor Hutchinson. Jonesboro is one of 14 cities and counties, at this present time, in Arkansas that have a curfew at this time, plus many in the surrounding states. Curfews are as much a part of America as every other measure that has been taken to reduce the spread of COVID-19. This is not a matter of civil rights, it is a matter of civil responsibility. This is not an issue for politics. My only concern is about the people of Jonesboro. I have been your Mayor for almost 12 years, and I have always put the people first and I always will. It is clear that every hour that we do not spread COVID-19 prevents the spread at other hours. I think by most of the measures that we have available, we are showing success, but only if we maintain our discipline. Governor Asa Hutchinson has set targets to phase in reopening of our economy, restoring our ability to move as we do so desire, piece by piece. With the Governor's target date of May 5th in mind to implement Phase 1, I would like to extend Jonesboro's night curfew from 10-5 until that date, subject to the Council's approval of Resolution 20:047. A few days prior to May 5th, we will evaluate data as you have just heard that it moves quiet frequently and quiet fast and talk to our experts about whether we should extend the curfew or not. So, that is my comments that I wanted to make on that and we will go back to RES-20:047.

Councilmember John Street motioned, seconded by Councilmember Charles Frierson, to adopt RES-20:047.

Councilmember Bobby Long said, Mr. Mayor, I appreciate your comments. I also think that something needs to be put into the record. As you know, this has been, it has hit a nerve with quiet a lot of people. I think that their voice also needs to be put into the record. I would just like to read a few words. Sometimes elected officials have a do something mentality and sometimes this can drive elected officials to act too quickly with little supporting validating data to enact measures that seemingly are disproportionate to the problem being addressed. Bertrand Russell said that neither man, nor a crowd, nor a nation can be trusted to act humanely or to think sanely under the influence of great fear. I think this is true both of the public and the elected official. It seems like in times of crisis, elected officials are so easily persuaded to take away certain freedoms and liberties, but at the same time, the general public are willingly handing them over. I think both attitudes are harmful and can cause more long term damage than any virus. Ben Franklin said that those who would give up liberty to purchase a little safety deserve neither liberty nor safety. We are told that we are at a tipping point of having a massive outbreak, but in Craighead County we have 45 cases per 100,000 residents. That is 0.00045 of our population or 4/100ths of one percent. And, I think it is important that we understand it. We don't understand what the data points are that we are monitoring that make up that tipping point. We were told there is one, but we don't know what data people are looking at that make up that tipping point. Also, what thresholds were we approaching that caused alarm? We were told that the

curfew that was enacted was enacted to slow the spread of COVID-19 to protect our police officers and fire personnel. We were told that the main perpetrators were teens. We were even given an example of such an incident where one had to be broken up. I would like some help in understanding the data that supports that given the following: From my understanding, individuals under 18 already have a curfew and groups like that can be broken up without instigating a curfew. It would seem also, one of my main concerns, it seems that the curfew only creates more opportunity for interaction with possible carriers by making it illegal to be on the streets between 10 p.m. and 6 a.m. even if I am obeying all traffic laws and there would be no other reason to pull me over. The CDC has put into place a six foot rule and contact would be greater than 10 minutes. It would seem that our police officers are even more at risk because now they are pulling people over that they normally would not pull over. It seems to me that is counterproductive to what the curfew is actually trying to do. The time of the curfew from 10 p.m. to 6 a.m. really doesn't make sense to me if the reason is to slow the spread when a fraction of the stores are not open and a limited number of police are actually patrolling. We can't measure the success of the curfew because Chief Elliott stated that no data was collected prior to the curfew on the number of groups being broken up so we have no baseline to see if we are getting better. We have no data that I am aware of indicating that any viable contractions by any police officer occurred as a result of interaction between the times of 10 p.m. and 6 a.m. Even if our police force were to have a wave of infections, it is much less possible to determine the origins much less the time. So, I am not for sure, but I don't think we even know what threshold we have to drop below for the curfew to be lifted. So, here we are, voting on whether to extend a curfew that was, in my opinion and several others, enacted on presumptions. I totally understand you wanting to protect the people of Jonesboro, but I think we need to do it based on data. To me, any proof of continuation of a curfew of any kind should be based on objective data showing why the curfew should be enacted with a stated goal that when reached, a curfew would be lifted. And, to my understanding, there is no such data in this case. In this case, we have no exit strategy. In a time when Arkansas is talking about opening back up, we are ratcheting down and it just doesn't make sense.

Mayor Perrin said, thank you for your comments. I will try to address some of them if I can if I may. First of all, when we enacted this curfew the last time, there were I think 30 cases. In two weeks, it is now up to 45 and it moves up every day that I look at that map, every hour through the Department of Health. The second thing is when we adopted this curfew, I don't know of any cases we had in our hospitals here. I can tell you, but not under a confidentiality, I can tell you that we have COVID-19 cases in both hospitals in Jonesboro this day. We also have a death that we did not have then. We also had an employee within the City of Jonesboro again, who was, tested positive on that. Also, we have another one as of today that had to be quarantined. We just hope and pray that they do not have COVID-19. You are also dealing with something that has never been dealt with before. And, I think what Dr. Speights was saying was to try to set statistics or guidelines to slow down the growth and spread of COVID-19. I think that this curfew would help do some of that. I am only asking this curfew to go to May 5, 2020 which is the next council meeting. And, then, we will come back with additional data and if that is the case, we don't need the curfew, then we don't put the curfew in.

Councilmember Mitch Johnson asked, Mayor, can you explain the advantage of having a curfew when it seems to me when I am coming home from work, and all of these home improvement stores, I mean to me, it looks like the people are out during the day. So, it looks like to me that the chance of spreading this virus is more is going on during the daytime hours. What is the advantage to having a curfew that is going to

prevent it any better at night then something we don't have in place to protect us during the day? I would like to go on a little bit more.

Mayor Perrin said, as I have said before, this virus doesn't have a time. It doesn't tell you whether it is 10 at night, 6 in the morning or 4 in the afternoon or 8 in the morning. In what I was trying to say was in visiting with Dr. Speights, I think he covered some of it. But, is that anytime we can have that, just trying to curtail that and if we can have any time on that and some cities have even gone to the stay at home order which we obviously don't want to do that. We may have to do that at some point in time. I don't know that, depending on that. That state of California and others have already gone to require that if you are in public, you will be wearing a mask. Now, I have been to Academy. I have been to Kroger. I have been to all of these places and you are right. That the volume on that, even though I got letters from Walmart and some of the others saying that we are going to try to put them within 6 feet apart and we are going to try to let so many in per square foot of our store, we are also going to have areas where you go to shop and some of those things and when I went and looked at that, at the people that is outside was not 6 feet apart. They were all talking to each other, getting ready to go into the store and so one of the things I am going to do and have not had an opportunity to visit with Carol Duncan. I would like to write a letter to some of these large box stores, if you are talking about those, to ask them and to suggest, not require, but suggest that their employees, the main thing I am seeing is their employees are not masked as well as the customer. And, so, we will have to do several things in order to prevent of this COVID-19.

Councilmember Mitch Johnson said, I am not out at the night time hours. I don't know if the convenience stores are staying open or if they are closing, but I guess the things that come to mind for me is in my situation, I am a single person. I work an 8-5 job because I am an essential person and so I am left to scrape and scrap to get food and things like that on my time away from work. So, I think about the people at the night time jobs. And, if they have to leave an 11 p.m. job and go right home and, again, I don't know what the convenience store hours are, suppose those people don't have an opportunity to stop and get something if those convenience stores are open because we are telling them they can go to and from work. You can't be out doing anything.

Mayor Perrin said, well, I can tell you someone that can tell you better than me and that is the Chief.

City Attorney Carol Duncan said, I can say that I have advised that convenience stores can remain open specifically for that purpose. And, any police officer that has asked, and I think the Chief is going to speak, we have advised the same thing. We don't want to harm the people, like you say, that are getting off work and need to stop or that have a lunch break and need to run over to the convenience store to grab something to eat. Those people are not who we are targeting, I don't believe. I will let the Chief speak to it further.

Councilmember Chris Gibson said, so, in my mind, would it not be more intelligent for us to pass a non-congregation ordinance or resolution for those hours rather than a curfew?

Councilmember Mitch Johnson said, and, don't we already have something like that in place with the governor saying no more congregations of more than 10. Believe me, I certainly don't want to tax our officers because I know we have fewer on the streets at night than we do in the daytime. I am just trying to think of this from all realms and not just jump and say we have got to do this.

Police Chief Rick Elliott said, thank you Mayor for allowing me a few moments to speak on this issue. First, I would like to commend the residents of Jonesboro for complying to the curfew that has been enacted. We have not had many problems. We have had very few arrests. As far as getting out on the street at night leaving work, we understand that businesses close at 10 and it may be 11 or 12 o'clock before you get things cleaned up and have to get out of there and head home. It is not an issue. There are a lot of people who travel throughout the town, may leave and go across town, whatever. We are not stopping every vehicle on the street at night because it is past 10 o'clock curfew time. So, common sense factors in on this. You are not going to find a bunch of residents that have been pulled over for pulling out of the driveway. So, if you are going stir crazy at midnight and decide you are going to drive across town, the chances are you are probably not going to get stopped. Now, if you have gathered on the parking lot at Sears to chit-chat with your friends, then, you are probably going to be dealt with. And, that is one of the problems we face, especially with our youth who have been confined during this issue is that they get out late at night and want to gather up in large quantities and therefore, potentially spreading this virus. And, instead of us spending time busting up huddles here and there, we need to be out patrolling buildings that are getting broken into because our economy has suffered due to the lack of jobs and people are out having to support themselves by out stealing. So, times are tough and we are starting to see a spike in our criminal activity taken place. And, then, we still have our criminal element that we have to deal with at night also. So, Dr. Speights mentioned Memphis, TN and we do have a large criminal element that does come out of that Memphis area to Jonesboro in spite of a pandemic episode that has taken place. So, we have to deal with that during all of this and those stabbings and shootings and drug dealings has not slowed down in spite of a pandemic or tornado. We are still having to deal with those issues also. So, the key take away is that at 10 o'clock, there is not really anything open at night anyway. There may be a few convenience stores that someone can stop at and get some gas or a soda on the way home from wherever they are going. Your Waffle House and everything like that, everybody is closing down and then again, it is take away only if they are open. So, we have not stopped or wrote anybody for stopping by a Waffle House, grabbing a to-go order, or stopping to top off your tank of gas before you go home. Again, it is the prevention of a groups and gatherings of people on different lots and locations and parks and things like that to help curtail the spread of this virus. There is a population in any community that cares less about the virus or the spread or anything else and unfortunately, we have to deal with those people. If we have a tool that we can use to help keep people off of the streets, then it is a little bit better for all of us because if they become infected and spread, then it is going to affect all of us one way or another at some point in time.

City Attorney Carol Duncan said, if I can speak to the curfew that we already have. I know there has been a lot of questions about when we talk about youth, why can't we just enforce the curfew we have and I think it is important to remember that when we talk about youth, we are not necessarily talking about under the age of 18. I mean, you can still be a teenager if you are 18 or 19. They are still teenagers. So, when we say groups of teenagers, a lot of times, that is still 18-19, then of course, 20, 21, 22 year olds. That is kind of the gatherings of youth that we have been talking about and dealing with primarily. It is not people who would be affected by the existing curfew. And, Chief, you can correct me if I am wrong, but that is just what was reported to me. Chief Elliott said, you are correct.

Councilmember Dr. Charles Coleman said, Mayor, I think the doctor has already answered a lot of these questions. At the same time, I do respect everybody that has

had statements, but I think we need to go ahead and vote this up or vote it down and be done with it or we will be here all night.

Ms. Duncan said, I do want to ask one thing about the desire of the council. I know when we were talking about rezonings, we expressed to the public that we would read any public comment that was submitted. I don't know the desire of the council. We have over 15 emails in favor of the curfew and over 7 against the curfew, that is an approximate number based upon what we printed before coming to the meetings. So, I don't know what the desire of the council is. I know you received most of these I believe. A lot of them were copied to the entire council when people sent them, but what is your desire as far as reading those public comments.

Councilmember Coleman said, I think we need to go ahead and vote and then if you want to read the comments after that, then fine. Councilmember Johnson said, I don't think we need to read the comments afterwards, but I am finding it difficult to believe that you have received so many positives, when I haven't received a single positive. I have received numerous negatives. Once again, I am not saying that it is a bad thing, I am saying is that we vote a lot of our stuff on public opinion which is what we should do. We are elected by the people and we are here to represent those people's feelings and I weigh that pretty heavy on comments I get, like I said, I have not had anybody call me or send me any single email other than what was forwarded to me from the city that is in favor of this. Councilmember Long said, that is exactly right. I have had over 250 negative comments and probably two positive. I spoke with a lady yesterday at TSC that was totally against it. She got off at midnight by the way. And, I talked to a lady prior to the meeting that voiced her opinion in rejection of this. So, I am not sure where those were coming from as well because it has been about 100 to 1. Ms. Duncan said, again, I am asking if you would like for me to read these.

Councilmember Charles Frierson said, I move the previous question. Councilmember Johnson said, you don't even have a motion on the floor, Mr. Frierson. Councilmember Frierson said, I move to approve the resolution then. Councilmember Ann Williams seconded the motion. Mayor Perrin said, I have a motion and a second to approve RES-20:047. A roll call vote was taken: AYE – McClain, Hafner, Bryant, Street, Williams, Coleman, Vance, Frierson; NAY – Long, Johnson, Gibson; Moore was absent. The motion passes on an 8-3 vote.

Mayor Perrin said, let me say this again. There has been a lot of good comments there and everybody has opinions. I understand that. A lot of good comments were made tonight and we will certainly take those under consideration again if we have to come back and put another curfew on.

A motion was made by Councilperson Charles Frierson, seconded by Councilperson Ann Williams, that this matter be Passed . The motion PASSED with the following vote.

Aye: 8 - Ann Williams; Charles Frierson; John Street; Gene Vance; Charles Coleman; Joe Hafner; David McClain and LJ Bryant

Nay: 3 - Mitch Johnson; Chris Gibson and Bobby Long

Absent: 1 - Chris Moore

Enactment No: R-EN-043-2020

7. UNFINISHED BUSINESS

ORDINANCES ON SECOND READING

[ORD-20:012](#) AN ORDINANCE ADOPTING BY REFERENCE THE BASE LEVEL ENGINEERING (BLE) STUDIES FOR THE ST. FRANCIS, CACHE AND L'ANGUILLE WATERSHEDS

Attachments: [Cache BLE Report](#)
[Cache Discovery FRR](#)
[L'Anguille BLE Report](#)
[L'Anguille Discovery FRR](#)
[St. Francis BLE Report](#)
[St. Francis Discovery FRR](#)

Mayor Perrin said, I am sure that you all want to hold it at second reading. Yes, was stated by several members of council. Mayor Perrin said, thank you.

Held at second reading

ORDINANCES ON THIRD READING

[ORD-20:006](#) AN ORDINANCE TO AMEND SECTION 117-139(C) OF THE CITY OF JONESBORO ZONING CODE

Attachments: [Salvage Yards Changes 03032020](#)

A motion was made by Councilperson Mitch Johnson, seconded by Councilperson Chris Gibson, that this matter be Passed . The motion PASSED with the following vote.

Aye: 11 - Ann Williams;Charles Frierson;John Street;Mitch Johnson;Gene Vance;Chris Gibson;Charles Coleman;Bobby Long;Joe Hafner;David McClain and LJ Bryant

Absent: 1 - Chris Moore

Enactment No: O-EN-017-2020

[ORD-20:008](#) AN ORDINANCE TO THE CITY OF JONESBORO TO PLACE VARIOUS TRAFFIC SIGNS AT DESIGNATED LOCATIONS AS DETERMINED BY THE TRAFFIC CONTROL COMMITTEE

A motion was made by Councilperson Chris Gibson, seconded by Councilperson Gene Vance, that this matter be Passed . The motion PASSED with the following vote.

Aye: 11 - Ann Williams;Charles Frierson;John Street;Mitch Johnson;Gene Vance;Chris Gibson;Charles Coleman;Bobby Long;Joe Hafner;David McClain and LJ Bryant

Absent: 1 - Chris Moore

Enactment No: O-EN-018-2020

8. MAYOR'S REPORTS

Mayor Harold Perrin reported on the following items:

The first where you saw you got the Northeast Arkansas Industrial Development Commission Report. I thought it was a good report. It talked about the number of creation of jobs that was done last year on the funds that we make a contribution to them. It also had people here in town, companies, that added onto their facilities here in Jonesboro. So, I thought it was a very good report. I wish that we could have Mark Young here to really go in depth on that, but I think the report is self-explanatory itself.

I will move onto March's financials. I think you all have received those. The first three quarters of the year, we are doing good, the first three quarters. However, when this COVID-19 started. I set down with Chief of Staff Mike Downing and Finance Director Steve Purtee. Steve is going to join us here in just a moment because we have calculated and have looked at some of the projects that we think are going to, excuse me, the revenue that we are going to be losing based on this COVID-19, as well as the tornado. So, Steve, are you with us? Mr. Purtee said, yes sir Mayor, I am. I am available. Mayor Perrin said, I think you sent out to the committees the format that you are going to cover. Am I correct on that? Mr. Purtee said, no sir, that format will be provided following this meeting. Mayor Perrin said, okay. Mr. Purtee said, I apologize that this was not coordinated with our clerk prior to the meeting. Very quickly, I wanted to just provide an overview of those March financials. The key measure that I wanted to bring up was the fact that our surplus position for the first three months is approximately \$1.3 million ahead of our budget projections. We had what I would consider a very encouraging first quarter comparing that to our budget projections. However, now we turn our attentions to the COVID-19 pandemic impact. We have visited with various groups and relative to trying to form a foundation for an analysis. Your office contacted Secretary Walters of the Department of Finance and Administration. We also spoke with the executive leadership of the Arkansas Municipal League and we have also been keep abreast of the studies that have been provided to us by the National League of Cities. With all of this communication, we wanted to try to begin formulating a process of how this might impact our revenues for the City of Jonesboro. Based upon this analysis, we potentially estimate that we would incur a financial shortfall in revenues ranging anywhere from the high of 50% to a low of just near of 30%. Actually, the Arkansas Municipal League has projected, through a poll that they did for the local leaders that the impact would be about 26.5%. So, what we did was we took our financials for that period of April through October of 2019, looking at our sales activity revenues. During that period, our revenues would normally be approximately \$24 million. We applied not only a 50% analysis, but a 26.5% analysis, obviously, those would be ranging with negative shortfalls of approximately \$12 million to a level of \$6 million at the lower ratio. If you look at our first quarter again at \$1.3 million in surplus, and then if you further factor in the remainder of our budget for 2020, we expect to end the year at about a \$2.6 million deficit before considering any shortfalls or estimates relating to the pandemic. So, if you couple these together, we will be staring at a shortfall in revenues of approximately \$14 million down to a level of \$9 million. So, then, we wanted to take a look at our current reserve position. If you will recall, we operate with a reserve position of about \$30-31 million on average. Obviously, that includes about 15% of our budget expenditures and that equates to about \$7.8 million. Additionally, we have set aside just under \$4 million for our STIP projects. So, all told, this leaves us about \$19 million in available reserves to absorb any deficits or shortfalls of revenues. Based on our current level of expenditure, our run rate, if you will is about \$4.5 million monthly with regard to our expenditure level. So, at \$19 million, we have approximately 4.5 months of reserves available to support operations before any consideration for revenues. And then, if you factor in that we could potentially lose \$14 million in deficit position, relating to not only our budget deficit, but also the shortfall of revenues, this could take our revenues down to a

period of or a point of about \$5 million at the lowest or \$10 million at the 26.5 shortfall percentage. This leaves us at a coverage position of about 1 month to 2.5 months of operating cushion. We wanted to briefly provide this analysis. We will provide this to you via email. We will also post it on our city website. We want to be sure to remember that this analysis is only centered on revenue shortfalls. It does not consider any expenditure changes relative to our 2020 budget. Nor, does it consider any impact that would be sustained from the tornado event as well that might occur with our revenues. So, we will continue to monitor this and we will be sure to bring back any actual results to our council as we find those. But, again, we will provide this information to you via electronically. Thank you.

Mayor Perrin asked, does anybody have any questions? And, again, we will get this spreadsheet to you, but we just felt like we need to start planning now of what it would be if again, the worst case scenario of a 50% reduction in revenue down to what the Arkansas Municipal League survey stated. Their projection came back at 26.5%. So, again, we would hope that we would end up in that scenario of 3, but we don't know that which would still give us 2.2 months of operating costs on that. Also, in that regard, I just have a few items. But, at the last session in Little Rock, the Legislature at their fiscal session, reduced our state turnback by 15%. The House and Senate passed that. So, you will see a drop in our state turnback and Steve is aware of that and we have already been calculating that now. The other thing is that you know with the tornado, Steve and I and many and Mike are working with the Arkansas Municipal League on our claims which is our flight station which was totally destroyed. In addition to that, there were some automobiles there that belong to that operation out there at the airport. And, then also, we had some other planes we are working with on that. The thing that is good in our AML policy is, and I am real pleased with this, I will be bringing you all at the next council meeting, a lease because these people had to be relocated very quickly on the type of operation that they do. And, so, I will be bringing you a lease on that. In our policy, we have two things that really stand out. One is we have a \$500,000 of business recovery or what is called business continuation. There is a deductible to that, but Steve and I and Mike will be working very closely with the AML on that. In addition, they also have a loss of revenue up to \$3 million which is good that we could use to offset some of this loss of revenue that we have been talking about. There is a formula for that. So, we are working with AML very closely to make sure that we get every dime that we can. In regards to the tornado, if you all will remember when it started and let me just say this, I cannot thank all of the people who were involved in that cleanup operation. I think the governor made a statement the other day that within two weeks, we had a majority of all of the cleanup done. I think, probably the first day or day and a half if I am not mistaken, we were taking all of that to Legacy Landfill. When you do that, then you are paying right at, I think it is \$38.75 a ton going across that scale. I had talked with Becky Keough, the Director of the Department of Environmental Services, and she was willing to give up her \$2.50 that went to the state. That still left \$36 a ton on that. So then we asked her could we get an emergency order from ADEQ in one day to open up at our old landfill, which is the pit, the digging pit across the street from the other landfill that we have on Strawfloor Road. I cannot believe that we got that in one day. And, so, we had to calculate what that cost would be. We estimated with all of the loss with 300 homes or more and the things that would have had to be gone to Legacy, it could have gone up to about \$1.6 million in tipping fees. When word got out, we had the county, ARDOT, and the city as well as some private individuals, non-profits hauling this stuff off to our landfill and our estimated cost will be somewhere around \$70,000-\$100,000 to put a two inch clay cap once we get through with all of the pickup. So, we saved a great deal of money there. I talked to AJ Gary today who is over the 911 Board which used to be over ADAM. All the documentation from the county and the city has been sent to Denton, TX to FEMA

and we are hoping and praying that we get the federal declaration which means that we could recoup 75% of every dollar that we expensed on all of our overtime, fuel, truck utilization, excavators, everything that we used in there. We think that will hit the federal because the airport, in itself, will probably put that way over the threshold. So, I did talk to Senator Boozman today by phone with Mark Young about the airport and the fact that now is a good time, if in fact, they would like to modernize the airport facility out there. We definitely are going to need some money from the Federal Transportation Authority. So, we now, have another call scheduled with this staff to see what they can do to help us and get a pretty good size of money coming in to help us with the airport. We don't know if we can or not, but there have been airports in the United States that were either hit by hurricanes or tornadoes and they are looking at that to see how much money we can get from the Federal Transportation Authority. So, that was a very good conversation that we had with Senator Boozman. He had asked about the federal declaration. I told him that it was in Denton, TX and I am sure he will be making a call over there on that. Also, tomorrow, we will open our bids for our Veteran's Village. I hope those bids come in good. So, as soon as those bids come out, then we will send those to you to show you what we have got and what we got from our grant and decide which way we will be going on our Veteran's Village. That is all I have. I didn't want to put a lot on there because we have been doing a lot of paperwork on claims as well as calculating the loss of revenue to make sure that we will always keep this city in a cash flow position and also try to maintain a reserve at all times for our people. So, again, with that, that is all I have unless you have any questions to me.

[COM-20:014](#)

2019 ANNUAL REPORT FOR THE NORTHEAST ARKANSAS INDUSTRIAL DEVELOPMENT COMMISSION

Attachments: [Annual Report 2019 Letter City](#)
[NAIDC Annual Report 2019](#)

Read

[COM-20:015](#)

MARCH 2020 FINANCIAL REPORTS

Attachments: [Observations March 2020](#)
[Statement of Changes in FB, Required Reserve and STIP Balances March 2020](#)
[Cash Deposit Collateralization Report March 2020](#)
[Revenue Report March 2020](#)
[Expenditure Report March 2020](#)
[Combined Sales Tax Report March 2020](#)
[Combined State Turnback Report March 2020](#)

Read

[COM-20:019](#)

CITY OF JONESBORO ESTIMATE OF COVID-19 REVENUE SHORTFALL PRESENTED BY FINANCE DIRECTOR STEVE PURTEE

Attachments: [City of Jonesboro Estimate of COVID-19 Revenue Shortfall](#)

Read

[COM-20:016](#)

JONESBORO AIRPORT COMMISSION FINANCIAL STATEMENTS ENDING MARCH 31, 2020

Attachments: [JAC Jonesboro Airport Financials 03_2020](#)

Filed

9. CITY COUNCIL REPORTS

Councilmember John Street said, Mayor, you answered the two questions that I had in my mind already and your presentation so I have nothing further.

Councilmember LJ Bryant said, Mayor, I would just say briefly, thanks for your leadership and I know that everyone on the Council does what they think is best. I know we all want what is best for Jonesboro. Sometimes we disagree, but I know everybody says their very best when they come to the council meeting so I appreciate everybody's service. Mayor Perrin said, thank you.

Councilmember Joe Hafner said, I think it is going to be an interesting meeting in two weeks. I hope we have some good data at that one. Thank you.

Councilmember David McClain said, yeah, I have a couple of items. The Nominating & Rules Committee went on before the Council meeting and I would like to suspend the rules and walk-on RES-20:039 and RES-20:048. Councilmember Joe Hafner seconded the motion. All voted aye.

[RES-20:039](#)

RESOLUTION BY THE CITY COUNCIL OF THE CITY OF JONESBORO, ARKANSAS TO MAKE APPOINTMENTS TO THE JONESBORO BEAUTIFICATION COMMISSION AS RECOMMENDED BY MAYOR HAROLD PERRIN

Councilmember David McClain motioned, second by Councilmember Joe Hafner, to suspend the rules and walk-on RES-20:039. All voted aye.

A motion was made by Councilperson John Street, seconded by Councilperson Joe Hafner, that this matter be Passed . The motion PASSED with the following vote:

Aye: 11 - Ann Williams;Charles Frierson;John Street;Mitch Johnson;Gene Vance;Chris Gibson;Charles Coleman;Bobby Long;Joe Hafner;David McClain and LJ Bryant

Absent: 1 - Chris Moore

Enactment No: R-EN-044-2020

[RES-20:048](#)

RESOLUTION BY THE CITY COUNCIL OF THE CITY OF JONESBORO, ARKANSAS TO MAKE APPOINTMENTS AND REAPPOINTMENTS TO BOARDS AND COMMISSIONS AS RECOMMENDED BY MAYOR HAROLD PERRIN

Councilmember David McClain motioned, second by Councilmember Joe Hafner, to suspend the rules and walk-on RES-20:039. All voted aye.

A motion was made by Councilperson Chris Gibson, seconded by Councilperson Ann Williams, that this matter be Passed . The motion PASSED with the following vote:

Aye: 11 - Ann Williams;Charles Frierson;John Street;Mitch Johnson;Gene Vance;Chris Gibson;Charles Coleman;Bobby Long;Joe Hafner;David McClain and LJ Bryant

Absent: 1 - Chris Moore

Enactment No: R-EN-045-2020

Councilmember Gene Vance said, just two quick things. I apologize for my battery running down at the last meeting as I was finishing what I was saying. And, the second thing, I apologize for being late today. I consider myself fairly good with technology, but obviously not.

10. PUBLIC COMMENTS

11. ADJOURNMENT

A motion was made by Councilperson Mitch Johnson, seconded by Councilperson Gene Vance, that this meeting be Adjourned . The motion PASSED with the following vote.

Aye: 11 - Ann Williams;Charles Frierson;John Street;Mitch Johnson;Gene Vance;Chris Gibson;Charles Coleman;Bobby Long;Joe Hafner;David McClain and LJ Bryant

Absent: 1 - Chris Moore

_____ **Date:** _____

Harold Perrin, Mayor

Attest:

_____ **Date:** _____

Donna Jackson, City Clerk