## Chautauqua County Board of Health MINUTES

## Meeting Date/Time:Thursday, July 16, 2020 @ 6:00 p.m.Location:Virtual Meeting via ZoomScribe:Sherri Rater

## ATTENDENCE:

BOH Members	P/A	BOH Members	P/A	Others Present	Title
Dr. Erlandson	Р	Elisabeth Rankin	Р	Christine Schuyler	Secretary, Public Health Director, HHS
Dr. Khan	Р	Natasha Souter	Α	Mark Stow	Director of Environmental Health, HHS
Dr. Kidder	Р	Dr. Tallett	Р	Dr. Berke	County Physician
Dr. Ney	A	Mark Tarbrake	Р	Sherri Rater	Scribe
Andrew O'Brien	Α			Bill Boria	Senior Water Resource Specialist

Call to order	The meeting was called to order by President Tom Erlandson at 6:04 p.m.
Privilege of the	None.
-	NORE.
Floor	
Approval of June	Tallett made a motion to approve the June 18, 2020 meeting minutes, 2 <sup>nd</sup> by Tarbrake. All in favor; motion
18, 2020 Minutes	carried.
Old Business:	Erlandson – I have been in contact with Ken Dahgren with the Tobacco Policy Council to discuss options for
Tobacco Policy	Chautauqua County to develop local regulations.
Update	Schuyler - Currently we do not have local licensing. If we go this route it would require an amendment to sanitary
-	code. Once drafted it would be reviewed and approved by the Board of Health, then sent to the NYSDOH for final
	approval. After that we would have to develop the corresponding policies to go with it. Normally we would have
	our legal division assist with drafting an amendment to the sanitary code.
	Tallett - We've talked about when a retailer changes hands the new retailer would have to reapply for a license
	and if it is, say within a certain distance from a school, the license would not be approved.
	Schuyler - Similar to the tanning salons and tattoo facilities – Chautauqua County in the past went ahead and
	created our own regulations before the State did. We could certainly do that with tobacco. This would take some
	time now since we are up to our eyes in COVID.
	Berke – We are looking at a problem that was identified 60 years ago by the surgeon general where the report
	indicated a link to tobacco and the rising increase in lung disease. 470,000 Americans a year die prematurely due
	to tobacco related illnesses. Chautauqua County has a disproportionate number of smokers in relation to the
	numbers across the state.
Tobacco Policy	
	Viene medice a medice to be significant a local tables as note; it lies as me measures as a stable T-U-M-MU in former
Update (cont'd)	Khan makes a motion to begin developing a local tobacco retail licensure program; second by Tallett; all in favor;

COVID-19 cases to orders th death is and pub has pass case list from the the origi medicall time befine We have younger distancir seen dir goes to washing yourself contacts reopenir return to Tuesday	er: As you know we have been seeing an uptick in cases. We currently have 46 active cases. Two new oday, one under the age of 18 and one in their 40s. We have 765 cases under quarantine and isolation that we are following. One thing that I would like to clarify regarding the most recent COVID-19 related is that the decedent was listed under the recovered patients. The term recovered in reference to COVID-19 polic health means discharged from monitoring by the local health department. The time period for isolation is sed and so the time of infectious period for COVID-19 has passed and they are removed from the active
younger distancir seen dir goes to washing yourself contacts reopenir return to Tuesday	t. There are some long term complications related to the illness. If that person develops complications e original infection, such as pneumonia, they are not fully recovered medically from all complications from inal COVID infection. We have seen this throughout the world, especially because persons may not lly recover from the complications or may have been placed on ventilators and can remain so for a long fore succumbing to the complications of the disease.
significa to the vir their clos of people traveling informat messagi this is th departm you coul	The seen an increase in positive cases in young people in the county, state and nation. I feel we have some r folks who have been cooped up for a long time and are now out and about, are not abiding by our social ing recommendations or the mask requirements and that is beginning to show in our numbers. We have rect colorations with some graduation parties and other gatherings among friends and families. That just bolster our message of the importance of wearing a face covering, maintaining six feet of distance, g hands frequently, monitoring your symptoms and staying home if you have symptoms and isolating f from your family if you are feeling ill. Staff has been working hard with all of these cases and so many s to trace. We are managing, but it is difficult. Especially with the courts and some of the other offices ng, we had pulled staff from these areas to help with contact tracing and now we are losing them as they their normal jobs. We are using the CommCare System, which is the state's contact tracing system. Next y we will be signing on to the virtual contact tracers to assist our staff with travelers coming into NYS from he now 22 states that are listed in the Governor's travel advisory, which now includes Ohio. We have a ant number of travelers that we are monitoring. That will be the first group of people that will be pased on irtual tracers. It is critically important that our staff focus on disease investigation - the positive cases and use contacts. The travel advisory has created a whole onslaught of questions and concerns. We have a lot le self reporting, complaining about friends, neighbors, strangers, anyone they may have heard will be g somewhere. Quite often these complaints are incomplete. If we have inadequate or incomplete tion, we cannot and will not following up on these complaints. We are putting some standardized jing on our website and phone tree to answer some of the questions we are getting. The bottom line is that nents that is about filling out the forms at the airports and if you
<u>Erlandso</u> Schuyle	on – How is that being communicated to them? or - We are responsible for monitoring them if they self report to us or if we are notified of them through the OH through an airport screening. NYSDOH is monitoring all of the direct flights from the states that are on

	the travel advisory at all of the incoming airports in NYS. There is no monitoring by any other mode of transportation other than NYC Penn/Union Station. We are really just trying to get the word out to everyone that this is what you need to do and how you need to self quarantine. Staff cannot continue to speak personally to everyone that is staying at a hotel, cottage, etc. Our responsibility is to educate and make the information
	available. <u>Tarbrake</u> – What percentage of active cases are 25 and under.
	<u>Schuyler</u> – Off the top of my head, I couldn't tell you.
	Tarbrake – You mentioned the spike and the correlation with younger people.
	<u>Schuyler</u> - We can break that down for you. Bree Agett, our Epidemiology Manager, is back from maternity leave and has been working on some of these statistics. We do know that there is a weekly positivity rate and the state is monitoring this. We have gone from the last week in June where we were at .4% positive cases to the week including the 4 <sup>th</sup> of July we were at 1.5%. There is a reporting delay from the time that someone is tested. That can be usually anywhere from 3-5 days but it certainly can go longer from some of the bioreference labs that are being used.
	Tallett - I have definitely noticed an increase in the amount of out of state plates recently.
	Schuyler - Yes, people are out and about. There is a significant amount of graduation parties and other parties. Sadly though those young people, who feel invincible, will usually get little to no symptoms. With younger people, we are seeing symptoms of loss of taste and smell and not the classic fever, cough and respiratory symptoms. They don't realize the consequences of not isolating and the impact that they can have on their grandparents and parents if they were to pass it onto them.
	Berke – The reportings we are seeing where the hotspots are that the average age is going down with respect to the cases that are occurring. Florida is now reporting an increase in hospitalizations and deaths from older people because the younger crowd is bringing it home to them. The initial wave as we saw in NYC and in the west coast with nursing homes and the elderly was to be expected. Now what we are seeing is a second wave of the younger folks because they are out and about and not paying attention and now they are driving again the risk to elderly and those with underlying health conditions. This is a serious problem.
	<u>Kidder</u> – With the increase in cases and outbreaks going on, is the guidance with who we are testing changing and if so how is the County getting the message to the public and the medical professionals? As a testing center, I get a lot of questions from outside doctors asking who we are supposed to be testing as these outbreaks continue. As doctors, we sit in on a lot of meetings and I don't think there is a consistent message on who to test as these
	outbreaks continue. <u>Berke</u> – There is no national coherent policy which is one of the problems. Initially there was a mismatch in demand and actual supply of material. Now we have enough testing materials, but we don't have labs that can process the large number of test that we are doing. I just had a patient that it took 9 days to get a test result back
	from the labs which makes it almost a useless test. Obviously we want to test people at risk, contacts of people
COVID-19 cont'd	who are significantly at risk, otherwise people do not need to be tested, they need to quarantine and be monitored. Right now we are testing all people who are going to elective surgeries; nursing home staff is still testing staff once a week.
	<u>Schuyler</u> - The most recent guidance on testing prioritization came out on July 2 <sup>nd</sup> and that went out to all healthcare providers. 1. Symptomatic individuals particularly if they are in the high risk population. 2. People under 21 years of age who have symptoms consistent with the multi system inflammatory syndrome in children. 3.

[	
	People who need testing prior to receiving medical care (elective surgeries). 4. Individuals who are a known close contact of a positive. 5. Individuals who are subject to precautionary or mandatory quarantine. 6. Individuals who are employed as health care workers, first responders, or in any position within a nursing home or long term care facility or other congregate care setting. 7. Individuals who are employed as an essential employee that directly interact with the public while working. 8. Individuals who are employed by an essential business such as food production, manufacturing or any business that has been designated to reopen in whichever phase the county is in 9. Individuals who participated in recent protest activities. 10. Individuals who present with a case where the facts and circumstances are determined by the clinician in consultation with state or local health officials warrant testing.
	One thing we are trying to clear up with the public is that if you are a close contact of a positive, a negative test such as on day 5 does not negate the full 14 day quarantine as you could still contract the virus up until and including day 14 of the quarantine.
	Khan – Pediatrician offices are getting inundated with people who want to get tested ASAP and the next day they are out posting pictures on Facebook because they are out partying and so I hope that this median that you are using gets the message out that folks realize that the quarantine period of 14 days, regardless of the testing, has not changed and that disease can still occur beyond 14 days and that 14 days is minimum. I've had some folks who wanted tested and then wanted tested again two days later because their employer requested it and so I'm glad you brought that up that quarantining is important.
	<u>Kidder</u> – It is important to reiterating to callers that testing is actually taking 7-11 days to return, which gives them the expectation that they are going to quarantine for at least that period and through the 14 days. <u>Schuyler</u> – NYSDOH put out a COVID-19 next steps publication and it really does accurately cover what we are trying to get out there to someone who is being testing. I did have a conversation with the medical director of WellNow Urgent Care centers this week and he felt the information they are giving out was consistent with that. I
	reviewed the information they have been giving out and it wasn't quite consistent, so I did send them the NYS information and asked them to put this new guide in with their testing material handouts. I spoke practice managers from various practices across the county this week and shared the document when them. I think it is important that we have a consistent message. We've got to do something to decrease the volume of calls that our staff is getting as well.
	<u>Berke</u> – Basically we've got a bunch of kids back from college that think this is party time, are notified that they've had an exposure and want to be tested immediately, the parents are all freaked out calling offices because they want a get out of jail free card when they have put their families at risk, businesses at risk. We have been getting reports of people being tested two days after exposure which is useless and in their mind they've been tested so 'I can go back to work at my summer job'. This is nationwide and we were hoping we wouldn't be seeing this type of
COVID-19 cont'd	activity here. <u>Kidder</u> – A message from the social media in terms of quarantine and testing turn around time would be good. <u>Schuyler</u> – Just this week, I did three new videos for Facebook and voice for radio trying to get some simple messages out there. One was about remembering three simple things: wash hands, stay six feet away and cover your face. Another one is about businesses and that they do not need to close just because an employee tests
	positive. We also put one out from Bill Nye the science guy about the importance of masks. Berke – What media platform gets the message to these folks? Facebook, Instagram, TicTok, Twitter Tallett - They only believe what they are going to believe. Recently a 30 year old died and his dying words to his

nurse were 'I guess it wasn't a hoax'. Rankin – This week I got some really good help from your office on free testing. People are thinking they can just go in and get a free test. From what I learned from you is that the closest place for free testing is in Erie County otherwise your insurance will be billed for it. Schuyler – Access to free testing is definitely an issue here. We have never had a state run free testing site for anything. The closest has always been Erie County. The other thing that we have been discussing is the antibody testing and that we are in an area of low disease prevalence which makes an antibody test basically invalid. Erlandson – Are the virtual contact tracers existing staff? Schuyler – The virtual tracers where hired by the State as part of the CommCare system. The state hired these contact tracers and then called them virtual because they could be located anywhere. The contact tracers for our area will be familiar with our area and are generally from around the WNY region. They have a supervisor who is a State employee who interacts with our disease investigation staff. We are keeping track of the positives and their close contacts internally. We are really pushing the travelers out to the virtual tracers. Erlandson – To what extent has our staff been asked to be involved with regard to school related decisions? Schuyler – I have been asked by a handful of districts to personally meet with them. Our role as the local health department is consultation. We really have no say in what the state puts out for their guidelines. The state guidance instructs schools to contact LHD in the event of a positive case. Before COVID, we've always had regular meetings with the school nurses so we are going to be restarting that and have an educational session with the school nurses. We are fortunate that we have had an ongoing relationship with the school districts with immunizations and things like pertussis. COVID will now just be a bigger part of this going forward. Berke – Schools have robust state guidelines and it is actually guite impressive the guidance they have been given. They are all just waiting to see what comes out of the Governor's Office in August. Schuyler – We will continue to work with the districts as best we can and continuing our relation with the school nurses as best that we can. Erlandson – Are there any actions the Board could provide? Schuyler – We are preparing the 2021 budget – every municipality across the nation is going to struggle this year. If there was ever a year that I think the work of public health should be appreciated, this is it. I am going to be advocating that we cannot cut. If anything we need more staff. There could be a time when the Board should have a say with the County Legislature. Elisabeth Rankin is our Legislature representative for the Board and I think that you appreciate the work that we are doing and will support it. Berke – Erlandson and Rankin I have a recommendation – I don't know if you realize that Christine and her people are working 7 days a week. They deserve a real ata boy from the Board and also the Legislature. They are really doing remarkable work and the hours they are putting in – it's really quite back breaking. Khan – I second that. Rankin – I agree; they deserve that. Schuyler – On that note, Mark Stow is retiring later this month and so this is his last board of health meeting. I would really like to thank and commend him as the environmental health director and as a sanitarian and senior sanitarian in years past. Mark has demonstrated some awesome leadership, he has been great to work with; I know I have been able to count on him whenever I needed him. He knows the environmental health programs and is very well respected at the state level and by his colleagues. He will be sadly missed. Boria – Mark has been a great supervisor for all of our staff.

<u>Stow</u> – I am humbled and thank you for those kind words – I think that Chautauqua County is lucky to have such collaboration and support from our Board of Health which is not always the case across the state. I've enjoyed my time immensely. It is never a boring job; there is always a challenge around the corner; never a dull moment and I've enjoyed working with all of you folks. <u>Tarbrake</u> – My experience as a Legislator, Mark was an invaluable resource to me as chairman of the Human Services Committee and Legislator and solve the below that you gave me Mark
Services Committee and I really appreciate all of the help that you gave me Mark. <u>Stow</u> – The board should know that we had a rabid raccoon about a week ago so rabies is still ever present in the county. I am always impressed by the good people that Christine is able to get on this board. Thank you all.
Some other discussion was had on the Mark Stow's retirement and how he will be missed. <u>Schuyler</u> – Right now, with COVID-19 budget restrictions, there is a hiring freeze, we have an ad hock budget committee that we have to go through for any vacancy. Mark's position refill was approved and we hope to have someone hired as early as next week.
<u>Schuyler</u> – The board may be seeing some COVID-19 enforcement actions because we have been given some authority to act on what is considered a public health nuisance so some of these issues regarding employers not following the orders for their employees or customers to be wearing masks and various infractions such as that we may have to take the stand and come before the Board.
none
None
<u>Stow</u> – This is a limited seasonal use property where the owners want to put in a holding tank in lieu of a permanent full septic system until North Harmony gains sewer service on Victoria Road, which is scheduled in phase two. Currently the sewer service in that area is in phase one of development. We recommend approval of this request with the standard language and that they must disconnect when North Harmony gains public sewer service. <u>Tallett</u> – motion to approve as requested; second by Khan, motion carried.
Schuyler - We have been talking about the methadone clinic that has been approved in the Dunkirk area. I had a nice conversation with Geno Russi who is the Vice President of Hispanic United of Buffalo/Acacia, who is heading up the project. They are at the architect stage right now and hope to be open for services by mid to late fall. They also have a medical van so they can provide mobile services. They will be hiring staff and will offer a full gamut of medication assisted treatment, so not just Methadone, but also Suboxone and Vivitrol as well as mental health services. He is looking forward to partnering with us and the health and mental healthcare providers in the county. We did talk about our federally qualified health center and that we want to have good collaborative services so the most holistic services can be made available as well as what is right for each person. The conversation went well; we exchanged cell phone numbers and so I had a good feeling from my discussion with him.

HABS	<ul> <li>makes it is a financial issue for UPMC Chautauqua. This mobile unit in Dunkirk could be a good thing.</li> <li><u>Erlandson</u> – I'd like to give an update on harmful algae blooms. There is a pilot study with the DEC and the Army Corp of Engineers to combat HABs in Chautauqua Lake. There is a virtual public information session on July 28th if you are interested, you can hook into that.</li> <li><u>Boria</u> – HABS are starting to heat up around the lake, particularly in the Lakewood area. We have some isolated blooms on Long Point State Park and some around Bemus Point as well.</li> <li><u>Erlandson</u> – There are now four phosphorus sensors active in the lake as part of the Bowling Green State</li> </ul>
Adjournment Future Meeting Dates	University effort. The fourth sensor was just put in in the Dewittville area. The next meeting is scheduled for August 20, 2020 at 6:00pm which will be an added meeting. The board discussed and decided it is in the best interest to schedule an August meeting and if there is nothing to discuss we will cancel. Motion to adjourn by Tallett. Meeting adjourned at 7:23pm. August 20, 2020; September 17, 2020; November 19, 2020.