

Chautauqua County Board of Health  
MINUTES

**Meeting Date/Time:** Thursday, July 15, 2021 @ 6:00 p.m.

**Location:** HRC Building, Basement Floor Meeting Room, 7 North Erie Street, Mayville, NY 14757

**Scribe:** Sherri Rater

**ATTENDANCE:**

BOH Members	P/A	BOH Members	P/A	Others Present	Title
Dr. Erlandson	P	Elisabeth Rankin	P	Christine Schuyler	Secretary, Public Health Director, HHS
Dr. Khan	P	Dr. Tallett	P	Bill Boria	Environmental Health Director, HHS
Dr. Kidder	P	Mark Tarbrake	A	Sherri Rater	Scribe, Administrative Assistant to Commissioner, HHS
Dr. Ney	P			Roy Harvey	Public
				Ida Golden	Public
				Kathleen Abbate	Public
				Jamie Broda	Public
				Diana Porebski	Public
				Greg Bacon	Public, Dunkirk Observer/Post Journal

<b>Call to order</b>	The meeting was called to order at 6:05 p.m. by President Lillian Ney.
<b>Privilege of the Floor</b>	<p><b>Dr. Ney:</b> I received an e-mail which included that I share its contents with you. The correspondence talked about a global agenda taking place against humanity and the hope that we are unaware of the information rather than potentially complicit to supporting crimes against humanity. It also said that there is an active case for Crimes Against Humanity against the CDC, the WHO, the NIH and others that began July 4<sup>th</sup> in Germany and there are some websites available to get this information out. I do feel that we do not have an obligation immediately to discuss this issue, talk about it, or make any counter claims but I think I can share everyone's concern with misinformation and I can also share that our mission at the Board of Health is to uphold public safety and the science that's behind it. On the way up, I was listening to a remote lecture at Chautauqua and I want to recommend it to everyone. It was a scientist who was speaking at the Chautauqua Institution on questioning science. It was very interesting and so, with that, I think we will move to the privilege of the floor.</p> <p>1.) <b>Ida Golden of Ashville</b> I would like to take a moment to recognize the Board and the tough positions you find yourselves dealing with. I hope that you are open to receiving all developing information even if it goes against the directives passed down to you from the State Officials. Be true to the community you serve. I come before you with a sense of duty to correct misleading statements I received regarding my previous communication at the previous Board of Health meeting. First off, I want to bring to your attention that clinical trials are ongoing. Claiming it is over is</p>

**Privilege of the Floor cont'd**

false and misleading and it does not (inaudible) patient informed consent. A Board of Health member stated that clinical trials are over. FDA.gov Pfizer fact sheet for 12 years and older last updated June 25, 2021 page four states the vaccine is still being studied in clinical trials. Secondly VAERS was touted as being misunderstood claims and erroneous. The VAERS was created in 1990 provide a national safety monitoring system. In 2009 the CDC and FDA utilized VAERS to timely identify clinically significant adverse events following the introduction of the H1N1 vaccine and to determine the associated risks. Pfizer and Moderna reporting procedures to adverse events is for a doctor or a patient to contact VAERS by phone or online. As of June 18<sup>th</sup> VAERS reports 6,113 deaths and over 387,000 adverse effects. VAERS is an integrated and integral element in monitoring significant patterns of adverse events. Listening to you speak of your plans for vaccine passports, putting people on lists, medical segregation, planned targeting of low vaccinated areas reminds me of Germany in the 1940s. We will be judged by our actions. Is there anyone among you who will stand against these medical segregation passports? Also, an observation was made during the main meeting that flus and RSV cases are down therefore masks worked. Unfortunately that is not how scientific studies work. There are many outside factors to consider like plastic barriers, distancing. It is irresponsible to inflict restrictions with faulty information. It is illegal to mandate EUA medical therapies for businesses, employment and education. These EUA medical therapies are being forced on business owners to comply or be fined; on employees, comply or lose your job; on children, comply or homeschool. Lastly, researchers at Washington University School of Medicine in St. Louis published study findings May 24, 2021. The study concludes mild COVID-19 induces lasting antibody protection. All the more reason for young, healthy people not to get the shot. As time goes on it is more evident that natural immunity has far less unknowns than vaccines. I thank you for hearing me.

**2.) Diana Porebski of Gerry**

First I want to start off by saying I deeply respect so many people at this table. I think you are all intelligent, compassionate and caring. You are warriors. But you all have been lied to. You have been misguided and it's horrible watching what has happened to people inside the system who don't see anything but what is being put in front of them. I have been non-stop doing my own research day in and day out since April 2020. God has called me to do this work because I left the system. I was a social worker and used to be respected in my field until someone thought I was a Trumper. So my whole perspective changed overnight in this community because I started to speak out and I tried to warn everybody that this was coming. I sent information. I asked that you please look at it; that you please understand what is happening before you commit crimes against humanity. Before you are a physician who is part of Nuremberg 2.0 which is happening right now in Germany. The case has begun; you can go on the website and see the physician and what he or the lawyer have started with the faulty PCR test. So anybody at this table thinks a PCR test is meant to diagnose a virus, you are incorrect. Kerry Mullis, who strangely died in 2019 just before COVID, said it was never meant to diagnose an illness ever. It is meant to find a whole bunch of nothing. And if you haven't (inaudible) amplifications, it is a high 90's % false positives. So, what were you running your PCR tests at? Over 35%? Some say over 25%. All they find is fragments of something that's been in your body; that's it. And he did this with Anthony Fauci back during the AIDS epidemic. They used the same faulty PCR test. They got everybody to think they had AIDS and then they rolled out the deadly treatment of AZT. Look at the history; learn it yourself; he's done this before. We are in a genocide if you do not understand that. If you do not understand that what has been injected into people is experimental Geno therapy that has never been tested on humans before in history and all of the ferrets that have similar lungs that we do, died in the studies and so they stopped testing on animals until they rolled it out to humans worldwide just last year. There has been over 9,000 cases of death that was reported in the VAERS which we all know is between a 1-10% reporting rate. So multiply that. How many

**Privilege of the Floor cont'd**

people have died? In the United Kingdom 15,000 people have been entered into the VEARS system. 300 children between 12-18 that have died from this vaccine since it rolled out. They are seeing instances of myocarditis; 800 instances. I stand on the corner with a megaphone on Saturdays and my flag trying to do the job that this county health department is not doing. You all need to learn the information, look at something other than what the government is telling you to look at. Go to alternative sources. If you don't know who Dr. Sherri Tenpenny is and you're a physician and you're prescribing this or suggesting this, you are committing crimes against humanity. She has 20 mechanisms of injury of this vaccine and she is doing a live webinar again for physicians and there are now over 40 mechanisms of injury for this vaccine. Do you know that it's a software? It is an operating system so when they want you to put the easy pass on your phone? If you do not understand what that means, that means that it is pairing the vaccinated people with their iPhones. They can track every single thing that you do; your breath, your sweat, if you had sex that day; that is where we are going. Please learn this information. This is not conspiracy theory. Have you heard of the Chinese social credit score? That is where this is going. That is the easy pass; that is the excelsior pass. I physically watched someone scan someone who had two Pfizer vaccines with an EMF detector and the person passed an electromagnetic frequency coming off the body. I have mine here if anybody wants me to scan you to see if you got a placebo. Thank God that we are in clinical trials so there are placebos going around in this world. We all need to pray. We all need to stop this nonsense. It's madness and it stops with us. Will you wake up to what's really going on? God bless you all. I want to be part of the healing; I'm a healer; I'm a light worker; I'm good at what I do. We need to come together as humans. This is a global attack on the human race. They are trying to bring in transhumanism if you don't know what that is you need to look it up. It is a real thing. The PCR tests have nanoparticles and graphene oxide on the tips. That's why they wanted you testing everybody. To implant this crap in the blood barrier in our children. I appreciate the time; I could go on for days. Please learn the information. I implore you. They will come for you. They came for doctors and nurses years after Nuremberg. There's time; wake up; help our community; thank you.

3.) **Kathy Abbate of Ashville**

This is the first time I have ever been to a meeting like this and and I'm here to learn. I'm just here to understand what your role is, what you are doing for our community and if you are advisors of if you actually make rules. So my first question is this, how are each of you appointed to the Board and what are the qualifications required of you to be a board member? Can you answer the questions now or do you have to answer them later? I don't know what your process is.

**Schuyler:** Normally the questions are answered later.

**Abbate:** That's fine. I have sheets that I can pass out. Like I said, I am just trying to understand what this Board is. The second is what are your roles and responsibilities as it pertains to our counties response to the government/CDC guidance in regards to the COVID-19 vaccine and other COVID-19 mandates? So I'd like to understand what your role is on that and what you do. I've only watched one of your meetings on Zoom and that meeting was the only meeting to understand a little bit about what you do. The third is, are you planning on sending and I know there's a grounds full of people that want to know this. Are you planning on sending local people door to door in Chautauqua County to ask whether those residents are vaccinated or not? If the answer is yes, how will you determine what doors to knock on and what will they actually be saying to any resident who chooses to open the door? Also, if this is going to happen in our county how will people be able to opt out of someone coming to their door should they feel their privacy and Constitutional rights are being violated? So, it's all of the news, you guys are well aware that that is what they are doing in many parts of the United States and there are many of us that are very concerned about that, violating our own personal

<p><b>Privilege of the Floor</b> cont'd</p>	<p>decisions and our medical freedoms. And so I have copies and I also have my email there if anyone wants to respond to my email I would really appreciate it.</p> <p>4.) <b><u>Jamie Broda of Jamestown</u></b>  Over the weekend we buried my aunt who suffered a massive heart attack after getting the vaccine.  <b><u>Ney:</u></b> I am sorry for your loss.  <b><u>Broda:</u></b> She was only 58 years old and had no prior heart issues, she had just been in pre-op surgery a week before and passed all of her with flying colors and a couple days later she dropped dead and I think it really hit me then that this is really happening and half of my family has got the vaccine and they are talking about boosters and how many other people are we going to have to bury before we say something's not right. The information is out there, it's just not being shoved in our faces like the vaccine is and if we don't collectively decide to get together and do something. I have to homeschool four of my kids and then I still have to do my taxes and then I have to pay for homeschooling. I'm from Buffalo so being out here it's like it's a whole different world of the way people think and the way things are. But I can say that something needs to change otherwise people are going to be harming people and they are not going to know what they are doing and it's not going to be intentional. It's not going to be I hate people I don't want people alive, it's going to be I really don't know what I'm doing because the information I'm being told is just on one side it's one way and on one side it's the other way. I talked to my cousin about it over the weekend and everything he sees is polar opposite from what I have researched myself and if a year ago you would have asked me if I would've been here I would have said absolutely not and I probably would have got the vaccine if I didn't actually start looking into things for the sake of my children. So I just want you to know that I literally buried my aunt so I hope that people decide to stop listening to what everyone says and make your own decisions in your head based on the information that you receive.</p>
<p><b>Approval of May 20, 2021 minutes</b></p>	<p>Tallett made a motion to approve the May 20, 2021 meeting minutes, 2<sup>nd</sup> by Erlandson, all in favor, motion carried.</p>
<p><b>New Business:</b>  Agreements to Settle</p>	<p><b><u>Boria:</u></b> We quit issuing drinking water related fines during COVID, which is the bulk of our fines in Environmental Health. We just started up again with those but before we did so we gave several warnings to resume submitting monthly reports and collect required bacteria samples. We have a list of water related fines that were reviewed.</p>
<p><b>Old Business:</b>  COVID-19</p>	<p><b><u>Schuyler:</u></b> Bree Agett, our Epidemiologist put together some data for us through July 14<sup>th</sup>. Slides were shown on a screen and are included in Attachment A of the meeting minutes.</p> <p><b><u>Kidder:</u></b> We are getting fewer and fewer positive cases. Do you know, is the age trend shifting to younger people?</p> <p><b><u>Schuyler:</u></b> Right. The unvaccinated are where our cases are. What is not included in our vaccination data are any Chautauqua County residents who were vaccinated outside of NYS or by the VA healthcare system. Because of this, I seriously think that we have a higher population that have been vaccinated then what is recorded. We did put a press release out and asked that anyone who wanted to give us their information, could do so through our website or they can call us so that it can be uploaded into the State system.</p> <p>We don't know what to anticipate this fall, but the Delta variant is very troubling. It is more easily transmitted and people are younger and seem to be sicker quicker – that is what we are seeing with states with low vaccination rates.</p> <p><b><u>Ney:</u></b> In regard to the schools, that is not under the local board of health as far as whether or not children have to be vaccinated.</p> <p><b><u>Schuyler:</u></b> No government entity has the ability to mandate vaccine that is under emergency use approval. Right now we are seeing where there are some private employers who can require vaccination, but any public entity cannot require vaccination for something that is under emergency use approval.</p>

COVID-19 cont'd

**Ney:** The SUNY system has said that university and college students must have a vaccination prior to coming back in the fall.

**Schuyler:** Guidance has been issued by SUNY and it does say if the vaccines receive full approval then they will be mandated. Some private colleges have made it mandatory to be vaccinated. As far as a remote option for unvaccinated individuals, that would be up to the college. There are continuous clinical trials on the vaccine occurring worldwide. This vaccine has now been given to 3.54 billion people across the world. We are still holding vaccination clinics. We have drive-thru and walk-in clinics offering Pfizer, Moderna, and Johnson and Johnson.

**Kidder:** Do you know if the schools themselves will offer vaccine clinics prior to school starting?

**Khan:** This is something that has to come down from the NYSDOH and then the schools will have to sign off on it. I don't think the schools will host their own clinics unless the wide accepted approval comes down the pike because it will be how many doses to allocate so that if you show up with 150 doses and only 5 people show up so that has to be straightened out. The other thing that has come up with the schools is the distancing and masking mandates. I don't think that is going to change this fall because we don't have the age approval for younger kids to be vaccinated and even if it does occur not everybody is going to jump right on and get their kids vaccinated. With the delta variant being more active I doubt that the distancing and mask requirement in the schools will change.

**Schuyler:** The state just yesterday said that a close contact for quarantine purposes is within the three foot rule and not the six foot rule. We do expect further guidance as it gets closer to the school year. There are various funding streams that come from the federal and state governments. One that the County has accepted is \$4.4 million to use to work with the school districts to ensure that some sort of screening and testing program is in place and we will be working with the schools. My vision for that is we will work with BOCES to establish a sustainable communicable disease program within the schools in conjunction with us as the LHD. We have worked very hard to get the ICE-8 program started through the community schools co-ser and that really is a sustainable source that has a lot of prevention and education programming, shared medical directors for the school districts, and other benefits for the schools that opt in. Instead of just using this money to contract someone to test or screen, I would like to use this as startup funding to include a communicable disease program in that co-ser so it qualifies for state education aide in the future. This would also include providing education, training and support to school nurses with one of our nurses fully dedicated to the schools as well as a project coordinator that will work with the schools. This would not just be for COVID-19, but also for other communicable diseases such as influenza, RSV, and strep and the MRSA we see with sports such as wrestling. There has never really been any such program in place. Jamestown is the only district with a school based health center which requires licensure as an actual diagnostic and treatment center with NYSDOH and this program would complement that. This would enable the schools to use our lab license and so they could have testing equipment in the schools so if for example, you have a parent that is working and can't get the child to the doctor, you could run tests right there.

**Khan:** That will be tremendous for our county for parents not to have to miss a 1/2 day of work to get their kids into the doctor. That's public health 101.

**Schuyler:** yes, and part of that is to get a mobile clinic to be able to go out into the community to provide education, necessary immunizations and needed services.

**Ney:** Regarding COVID and the healthcare personnel. There are states and communities that have been really overwhelmed since early on in the pandemic. It's all well and good to say we are fine right now, our caseloads are down, but there are places where nurses and hospital personnel are really struggling. One of my mentees who works in a large hospital system in a big city, she said that the ICU workers are begging for a transfer into a different unit because it was such an agonizing experience both physically and emotionally with so many patients

COVID-19 cont'd

dying. Over the country, there has been a lot of resignations and I don't know what we are going to do with the lack of healthcare workers. We thank all the healthcare workers and you and your staff for doing the work. I think this shortage is going to be a crisis.

**Tallett:** Like a PTSD type of thing and as you say with unvaccinated areas and the delta variant what it is doing is hitting the younger population and they are dying more quickly and so not only is it more effective, it's more lethal.

**Rankin:** Regarding the COVID fatalities, are they just because of COVID or is it COVID along with other ailments like someone who already had heart or lung issues so would they have had a fatality anyway and then they got COVID or is it just COVID itself.

**Schuyler:** The data comes from the death certificates, so the physician that certifies the death certificate certifies the cause of death. If COVID is listed as the cause or a contributing factor, then that is included as a COVID death.

**Ney:** Right, so if someone died from kidney disease or was a diabetic, smoked, things like that, there are higher risk factors and are more likely to succumb to the illness.

**Schuyler:** That is typical with a lot of viruses and those that have underlying health conditions, their immune systems are already compromised, they can't fight off the infections that normally healthy people could and the pneumonia that the coronavirus causes is very nasty. Right now we don't know the long term effects. This is a good segue to talk about our next item. Vicki Cummings, a county resident, wanted to tell her story about long haulers and so one of our Public Health Nurses interviewed her on June 24, 2021. We will put that up here tonight for the Board. The video can be viewed here: <https://www.youtube.com/watch?v=UWO-82OqXfA>.

**Kidder:** I will tell you that I have seen several patients that are young, healthy, no underlying health conditions who even had a fairly mild case of COVID during the acute period who are suffering from some of these symptoms related to the long COVID and so we are doing a lot of research and education to make ourselves aware of what to look for. We don't really know treatment yet; research is ongoing, but how to best treat symptomatically, how to coordinate care with cardiologists if in that realm. There's a lot of neurological and postural orthostatic tachycardia 'POTS' syndrome, chronic fatigue syndrome and it's really difficult to treat and it's hard as medical professionals not to know how to treat these people and I feel like we have a decade ahead of us to better understanding this and we don't know how long "long COVID" is going to last. Right now we are seeing six months to a year and as we progress we could learn that it hangs with these people longer than that.

**Tallett:** The other sad thing is that not only are they having to fight the disease, they are having to fight the insurance companies to get the money that they are owed.

**Ney:** Has anyone heard about long haul COVID and then had a vaccination after three months and their long haul symptoms improved?

**Kidder:** I haven't had patients who have told me that. I don't have than many long haulers, but I did take a deep dive into the long hauler research and the studies are obviously ongoing but the preliminary results on some of the more severe long haulers who were subsequently vaccinated were that a good percentage of them improved after vaccination. So they are still trying to figure out how and why and what the mechanisms are. Very interesting and we've got a long way to go.

**Schuyler:** Vicki has since been vaccinated after the acute infection was over. She didn't seem to think there was a lot of improvement with her long haul symptoms but I have read research that others have been helped.

**Rankin:** People need to be aware that this is not over. People are not using their hand sanitizer, have put their masks away and are just not being as careful as they were and we are not done with this. My family always has our hand sanitizer and masks available to us just in case.

**Schuyler:** No we are not done. We've still got a long way to go. COVID has become much of a vaccine

COVID-19 cont'd

preventable disease somewhat similar to what we see with the influenza vaccination. No vaccine is 100% but if you were to get the infection the odds of you being severely ill, hospitalized, or dying are greatly decreased.

**Kidder:** I worry about Chautauqua County and I don't know what wave we are in with the delta variant, maybe the fourth wave, but I look at this beautiful zero number of cases and it feels amazing and I remember sitting in these meetings back in April and May 2020 thinking we just had 2 cases and we are seeing it bad throughout the country and sure enough, we catch up with the trend late here so I'm worried about what's coming down the pipeline with Delta.

**Khan:** If you look at the percentages locally, we stand a little bit higher with COVID vaccine than the influenza vaccine. And not everyone gets the flu vaccine and so we see cases left and right whether they go to the doctor or not. So it is highly likely that we will get flare ups as people head indoors. If these figures were closer to 70% you may see a little more of a decrease, but 45%-even 50% is just not enough.

**Schuyler:** We did go onsite to all of the 18 school districts and the BOCES sites to offer vaccine prior to school letting out this summer.

**Ney:** I think the message is to protect little kids. I understand parents concern let's say for an 8 year old. I was thinking that I had my polio vaccine about 65 years ago and no one knew what the long term effects would be. Well obviously we came out okay, my sisters and I, but I am just saying that there is an unknown factor there and so I think the best way to protect the little kids so we don't have to worry about what we are going to do with them this minute, is to vaccinate everyone else and then they are not going to get it.

**Schuyler:** The other source of funding that is coming to municipalities is the American Recovery Plan. We did put together a wish list for public health. One of the things we are asking for funding for are more Detera medication disposal pouches which is the only evidence based pouch system out there for medication disposal. We are looking to partner with Prevention Works who currently has a grant where they give these pouches to Hospice, OFA, Chautauqua Center's Pharmacy and a few other places, but we need to have that more widespread so we are reaching people who have prescriptions to dispose of before they get into the wrong hands. The state just came out with their opioid annual report for 2020 which the data is more from 2018-2019. They look at the opioid burden in the state by measuring opioid overdose deaths, non-fatal opioid ED visits and hospital discharges involving opioid overdose. Looking at the top 16 counties in NYS in descending order, #1 was the Bronx and #2 was Chautauqua. The crude rate they were looking at is to be equal or greater to 317.9 per 100,000 population. I believe the Bronx was 510 and Chautauqua County was I believe 504. Niagara County came in at #16 and they were at the 317.9 mark. When you look at the tremendous burden that substance misuse is taking on our society as a whole, it definitely is an area that we must focus on as part of our recovery.

**Ney:** the national average was up 30% from 2019 for substance abuse. Does the County Legislature know that we are #2 in the State?

**Schuyler:** I will send a link out to the Legislature with this information.

**Schuyler:** As you know, addressing the social determinants of health is so important and what we are seeing is the lack of housing, the poverty, pandemic education - kids that have not had social interaction and have been homeschooled. There are kids that have just fallen off the radar since March 2020. Our SCR reports are up to where they were pre-pandemic. I expect that to get worse once school opens up and we have more mandated reporter's eyes on these kids again. So, I am hopefully that the County will use some of this money to beef up our programing for mental health and substance abuse. Not just services, but prevention and early intervention. I've asked for some funding for Strong Starts Chautauqua. I believe that we need to make that a sustainable systems change to identify these kids that are at such high risk in utero and make sure that the early intervention is in place right away. Another thing that Bill came up with and that we are asking for is to waive Environmental Health permit,

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fees for two years. A lot of our local businesses have taken huge financial hits. A lot of them aren't even open but they still have to pay for their permits and fees, so that would bring relief at least for a few years to about 1,400 facilities. We are talking about restaurants, hotels, motels, tattoo facilities, campgrounds, mobile home parks. Another thing we put in for is a waste water virus monitoring project where we would work with the South and Center Chautauqua Lake Sewer District to coordinate a 6-12 month virus sampling program to run virus analysis in wastewater. It would be a pilot project that we could use as needed with future viruses so we would already have protocols in place.

**Ney:** So it could be at SUNY Fredonia or someplace like that?

**Boria:** Alfred State is doing sampling in their dorms and so Dr. Erlandson, myself and Tom Walsh, the Director of the South and Center Sewer District, toured the facility and were able to get some information from them. We would like to establish a similar system here in case we need it. So we would have contracts in place and have some experience under our belts. It would be just a small pilot project.

**Erlandson:** What they are doing at Alfred State is quite unique. They are doing this in their dormitories and so if you do find the virus it would be easy to hone in on it. Tom Walsh, Bill and I were talking about where we might do that and Cummings Engine was a suggestion. It is expensive. Samples have to be taken and later picked up from the lab in Syracuse. South and Center does have four composite samplers that can periodically collect samples over a 24 hour period and so we could do this on a fairly short notice.

**Schuyler:** We also learned the importance of having an adequate supply and the right kind of Personal Protective Equipment (PPE), so we will be putting in a request to replenish the County's PPE supply annually so we don't have expired material in case we have another pandemic.

**Khan:** Now would be a good time to remind providers to stock up on these supplies. Right now there is adequate supply available for ordering and not wait until fall. I don't think the smaller practices order ahead of time but now is a good time to stock up before the demand is heavy.

**Schuyler:** We have a ton of requirements from the State and Feds for after action reporting for everything that we have done throughout this pandemic and so we are looking to issue a RFP to get a consultant to help through that process. Those are a few of the things that are on the radar that will hopefully be approved by the County Executive and the Legislature. We are also in the middle of County budget time as well. I feel it is critically important that we build back up our public health infrastructure that has been torn apart over the years and now is the time to do that.

**Kidder:** One thing we have been talking about among the physicians groups are lessons learned on the difficulties we had mobilizing quality volunteers during this pandemic and how do we get ahead of that before the next wave or the next pandemic or crisis. It was like hitting your head against a brick wall with all of these people ready and willing to help and no pathway for us to get them.

**Schuyler:** That is also on our list is to get an active medical reserve corp. We have been trying to do that for years and there wasn't any interest.

**Kidder:** No one could imagine what the pandemic would require.

**Schuyler:** Exactly and so now is the time to do that. We had so many issues even with County Government and trying to bring people on board. There is a lot of work still to do.

We are also offering Hepatitis A at the drive through COVID-19 vaccination clinics. We are still seeing a tremendous amount of Hepatitis A in the community.

**Tallett:** Is it from one source?

**Schuyler:** It is multiple sources at this point throughout every area of the county. A lot of it, we feel, stems from



COVID-19 cont'd	<p>the IV drug use, sharing needles, and also men having sex with men and the social interactions that take place allowing disease to quickly spread. But when restaurant workers or other frontline people are infected, you see community spread and so we are recommending that everyone get vaccinated against Hepatitis A.</p> <p>Another thing we are working on is bringing back several positions that we cut back in 2020. Since 2010 we have had a 20% reduction in the public health workforce in this county. That follows the national and state trend; public health and prevention have been cut everywhere and I think we are at a tipping point where people are realizing the importance of public health and I'm hoping that those positions that we are asking for will go through. Another area where we are having difficulty with staffing is at the County Jail. The inmates are sicker than we have ever seen and the vast majority also have mental health and substance abuse issues, they are coming in with serious physical and mental health conditions. I was talking with administration from UPMC Chautauqua today who said the people who are coming in the ER are so much worse off than what they used to be. They feel it is because people have not been getting routine healthcare and taking care of themselves and have been getting behind on their medications. We have definitely have been seeing that at the jail as well. We have been short a fulltime RN position since January. So we've had a lot of overtime and will continue to try and recruit.</p>
<b>Old Business:</b> Tobacco Policies	No update
<b>Old Business:</b> Village of Mayville Water	<p><b>Boria:</b> As I mentioned at the last meeting the Village of Mayville received a \$1 million grant to install a treatment plant on one of their contaminated wells. A granular activated carbon treatment system has been installed. We were hoping to get it up and running by the end of June but due to a backorder of parts that was delayed. It has been tested within the last week and found no PFNA and so they are doing their job. We are waiting for a few other samples to come pack and so we should have it up and running next week. The State is still very invested in helping the Village during this process.</p> <p><b>Tallett:</b> What was the problem with the Village of Brocton boil water order?</p> <p><b>Boria:</b> They had a water line leak and they did not have valves that were able to isolate the leak and so they had to turn the water supply off to the entire village in order to fix it. That stems from poor maintenance, no valve exercising, which is one of the things we are trying to address county wide.</p> <p><b>Schuyler:</b> Bill's staff did an excellent job running samples and getting that boil water order lifted over the weekend.</p>
<b>Other:</b> Meeting Schedule	Discussion was had as to whether or not we should keep the meetings at 6:00pm. There was talk about the possibility of moving the meeting to Jamestown during the lunch hour or keeping it in the evening but starting earlier. It was agreed that the meeting time of 6:00pm is ideal.
<b>Other:</b> Membership	<p><b>Schuyler:</b> Andy O'Brien has resigned from the Board. As you all know, Natasha Souter's vacancy is still open. We do have a candidate, Nancy Rosario, who is a Dunkirk resident that is bilingual and so we are happy to have found someone in the City of Dunkirk. According to our bylaws we have to have three licensed physicians, a member from each of the cities in the health district which is Jamestown and Dunkirk and so we really were having a hard time finding someone in the City of Dunkirk. The other new member that we think may be joining us is Mark McConnon of Westfield. As you all know we had a veterinarian, Dr. Hewes, on our board for many years and with all the rabies, tick born disease and various other things, I feel there is great value having a veterinarian on the Board. That would bring us back up to nine. We are hoping to bring Mark and Nancy on by next month.</p>
<b>Other:</b> Methadone Clinic	<p><b>Schuyler:</b> I toured the new Dunkirk Methadone clinic last week and was very impressed. Acacia really seems to know what they are doing. They have these facilities in the Bronx as well. The gentleman in charge of the operation has roots in the Dunkirk community and is very passionate about the area. It's a top notch facility. No expense was spared when it comes to the security, meeting all of the regulations that need to be met in order to</p>

<p><b>Other:</b> Methadone Clinic cont'd</p>	<p>operate. It is in the old Weise Hardware building on the corner of Main and 3<sup>rd</sup>. Half of the space is for the clinic and the other half is currently wide open space. They want to work with the community to find out what other services are needed there. They can offer the whole gammet including mental health services and peer recovery. They do that in Buffalo. They also have supported transitional housing in Buffalo. They seem genuinely interested in becoming a partner in the community. They work closely with the federal qualified health center (FQHC) in Buffalo and so I asked them to get in touch with the administration at TCC, our local FQHC. I am very hopeful that this is going to make a huge impact in our community.</p> <p>Now with the recovery funding that is coming down I expect there is going to be other separate funding sources coming for mental health and substance abuse treatment modalities. Right now there are at least three applications going in for homeless, transitional housing options. Chautauqua Opportunities, Salvation Army Anew Center for Domestic Violence, UCAN Mission and STEL. I have asked the County to consider using some of the American recovery funding to contribute some sort of a match to these applications. I think that would really demonstrate the County's willingness to partner and also to show the County recognizes this need. One of the things we would ask is that the shelters contract with us for emergency housing. We realize that we need facilities with proper HVAC systems and other pandemic requirements and so that is why I am asking the County fund a portion from the grant.</p> <p><b>Tallet:</b> We have a new pain management physician, Dr. Javaid Malik, at Brooks whose clinic is getting busier and busier. The concept is to get people off long-term analgesics and it seems to be working very well. The clinic is located in Brooks Memorial Hospital.</p> <p><b>Ney:</b> Everything that we learn points us to a strong correlation between Mental Hygiene and Health and Human Services Departments. They are so linked and can't have separations and silos. I asked at another meeting, how could we be #2 because we have had a lot of efforts and then we end up here with these statistics and it's very demoralizing. Someone at the meeting said we have to collaborate more because we don't seem to be making headway.</p> <p><b>Schuyler:</b> We have talked to the federal drug agents that handle the drug trafficking and ODMAPP people and have been told that because we are in the middle between Buffalo, Erie, Pittsburgh and now we've got two casinos and research has always shown that along with the gambling comes a lot of other vices and issues like prostitution, trafficking, drugs, etc., our area is prime. We have a lot of work to do, but we have a lot of people willing to do the work. I do think we are at a new place with cooperation from our County Mental Hygiene Department. A new director has not been chosen to run that department yet. Everyone that I have spoken to is on board with working closely with us and our community partners.</p>
<p><b>Adjournment</b></p>	<p>Motion to adjourn by Tallett. Meeting adjourned at 7:41pm</p>
<p><b>Future Meeting Dates</b></p>	<p>9/16/21, 11/18/21</p>

# COVID-19 Case Update

Today's Date: 7/15/21

Data Updated through: 7/14/21

## COVID-19 Statistics for July 14, 2021

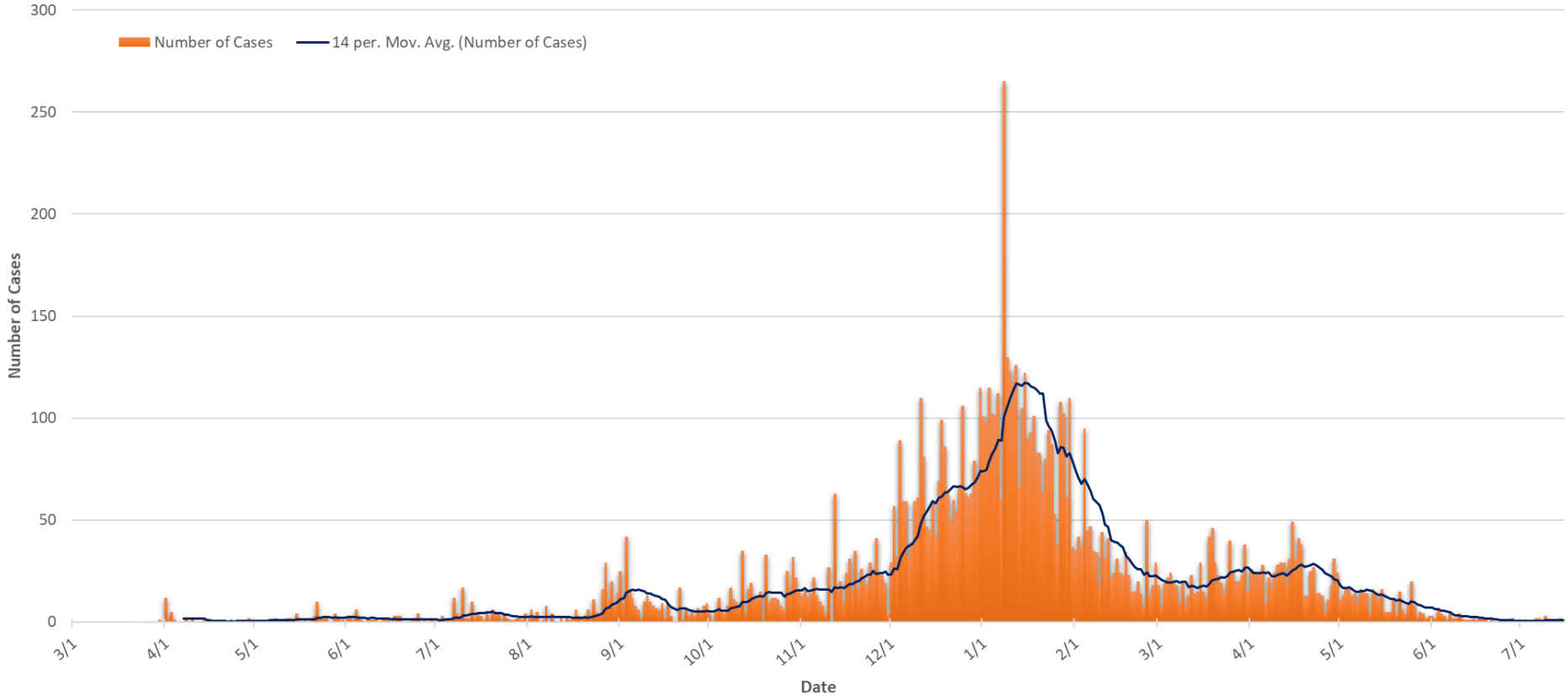
(updated at 11:45 on 7/15/2021)

Total Cases	New Cases	New Deaths	Active Cases	Total Recovered	Currently Hospitalized	Total Deaths	People in Quarantine	7-Day Average % Positive*	CDC Level of Community Transmission
9308	0	0	7	9144	0	157	20	0.6%	LOW

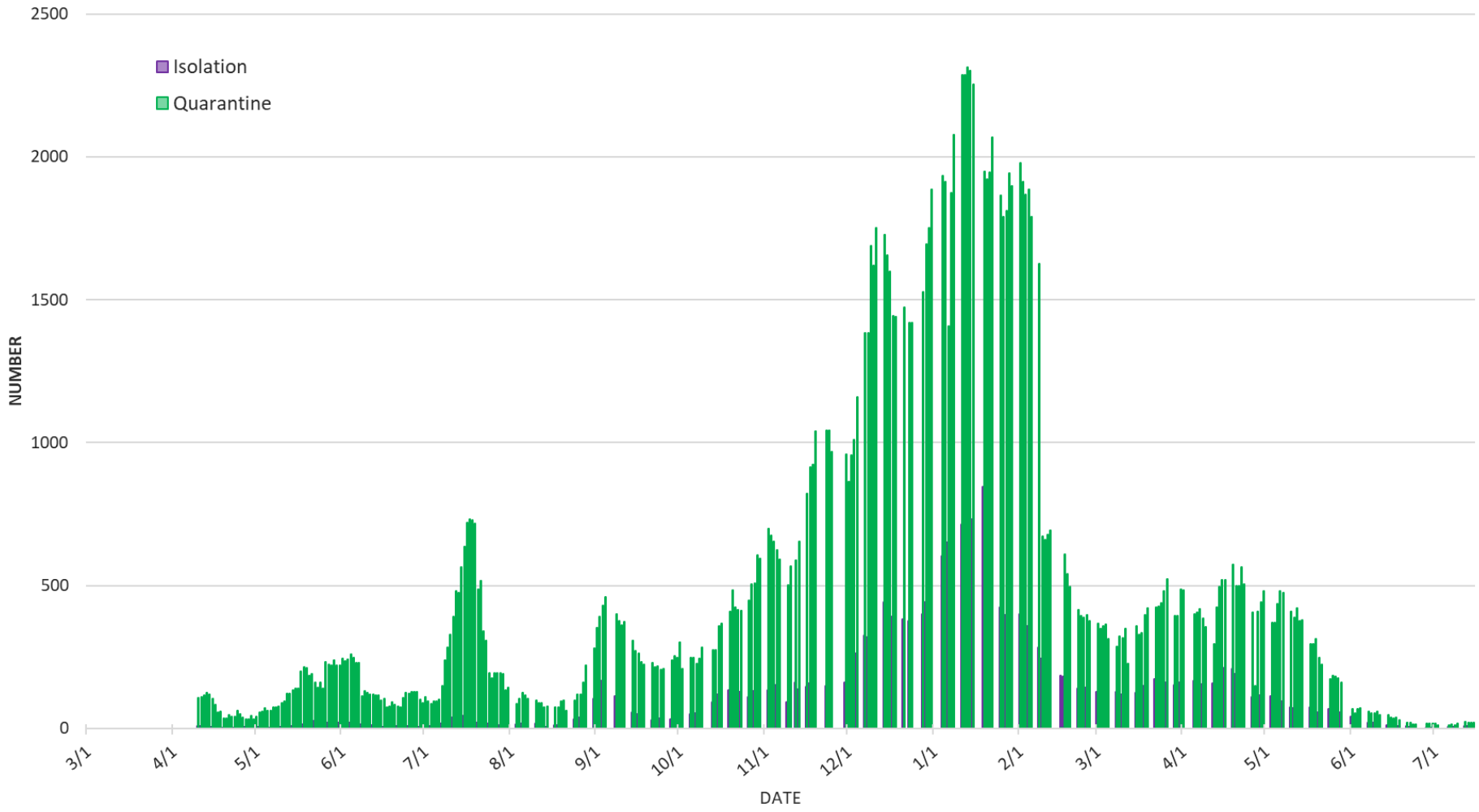
\*<https://forward.ny.gov/percentage-positive-results-county-dashboard>

CDC COVID-19 Integrated County View: <https://covid.cdc.gov/covid-data-tracker/#county-view>

# Number of COVID-19 Cases in Chautauqua County by Report Date



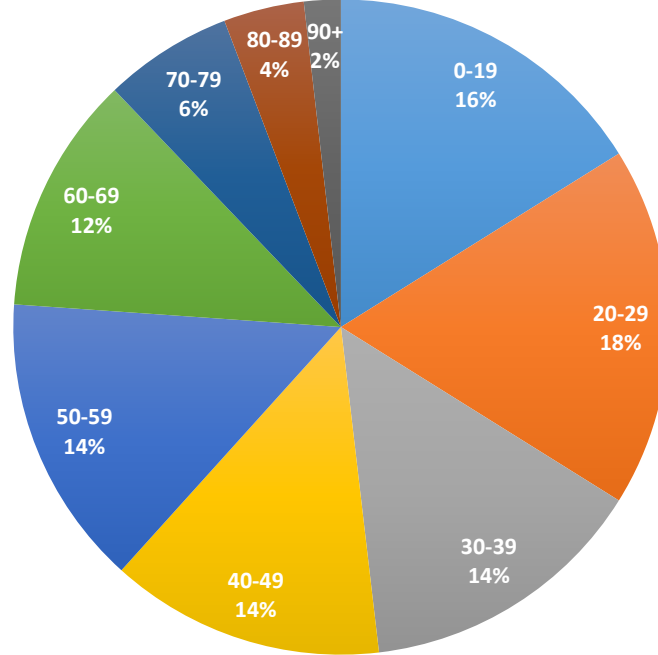
# Number of People in Chautauqua County in Isolation or Quarantine Over Time



### COVID-19 Cases by Known Age

Age	Number	Percent
0-19	1468	15.77%
20-29	1617	17.37%
30-39	1299	13.96%
40-49	1233	13.25%
50-59	1313	14.11%
60-69	1071	11.51%
70-79	578	6.21%
80-89	362	3.89%
90+	165	1.77%

### Chautauqua County COVID-19 Cases by Age Group



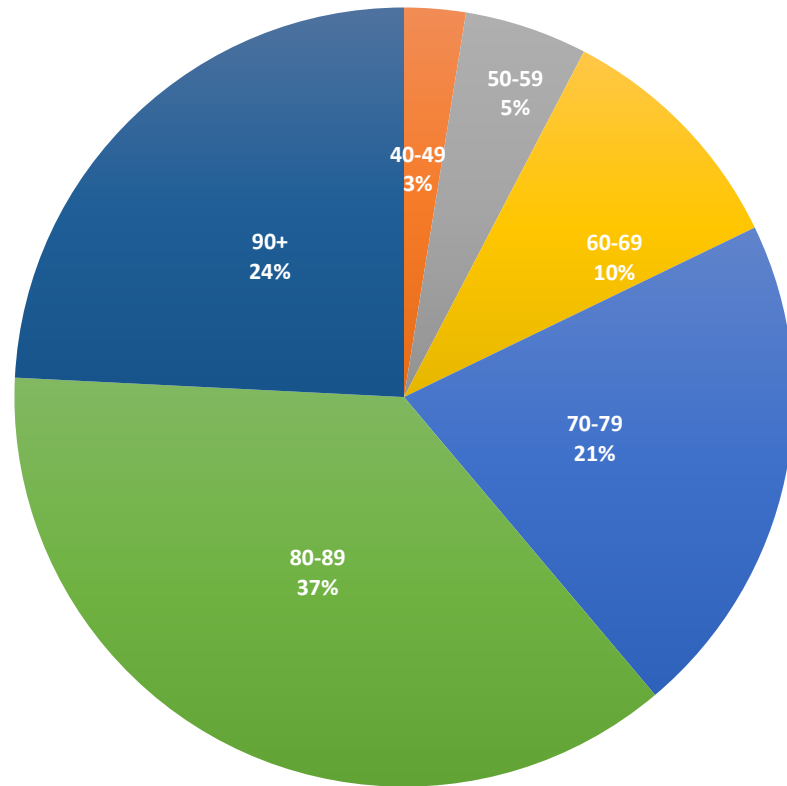
### COVID-19 Cases by Presence of Symptoms at Time of Interview

Symptoms	Number	Percent
Yes	5403	72.92%
No	2006	27.08%
Symptoms Known	7409	

### Fatality Rate by Age Group

Age Group	Total Deaths	Fatality Rate
All Ages	157	1.69%
0-39	0	0.00%
40-49	4	0.32%
50-59	8	0.61%
60-69	16	1.49%
70-79	33	5.71%
80-89	58	16.02%
90+	38	23.03%

### Chautauqua County COVID-19 Fatalities by Age Group



NYS Fatality Rate: 1.7%

US Fatality Rate: 1.8%

Source: CDC COVID Data Tracker

[https://covid.cdc.gov/covid-data-tracker/#cases\\_deathsper100klast7days](https://covid.cdc.gov/covid-data-tracker/#cases_deathsper100klast7days)

# COVID-19 Vaccination Update

Today's Date: 7/14/21

Data Updated through: 7/10/21

## Chautauqua County Residents Vaccinated Through 7/10/21

	2-Dose Series		1-Dose Series	Total First Doses	Total Fully Vaccinated
	First Dose	Second Dose	Single Dose		
Number of Doses	51996	48543	5747	57743	54290
Percent of Total County Residents	40.64%	37.94%	4.49%	45.13%	42.43%

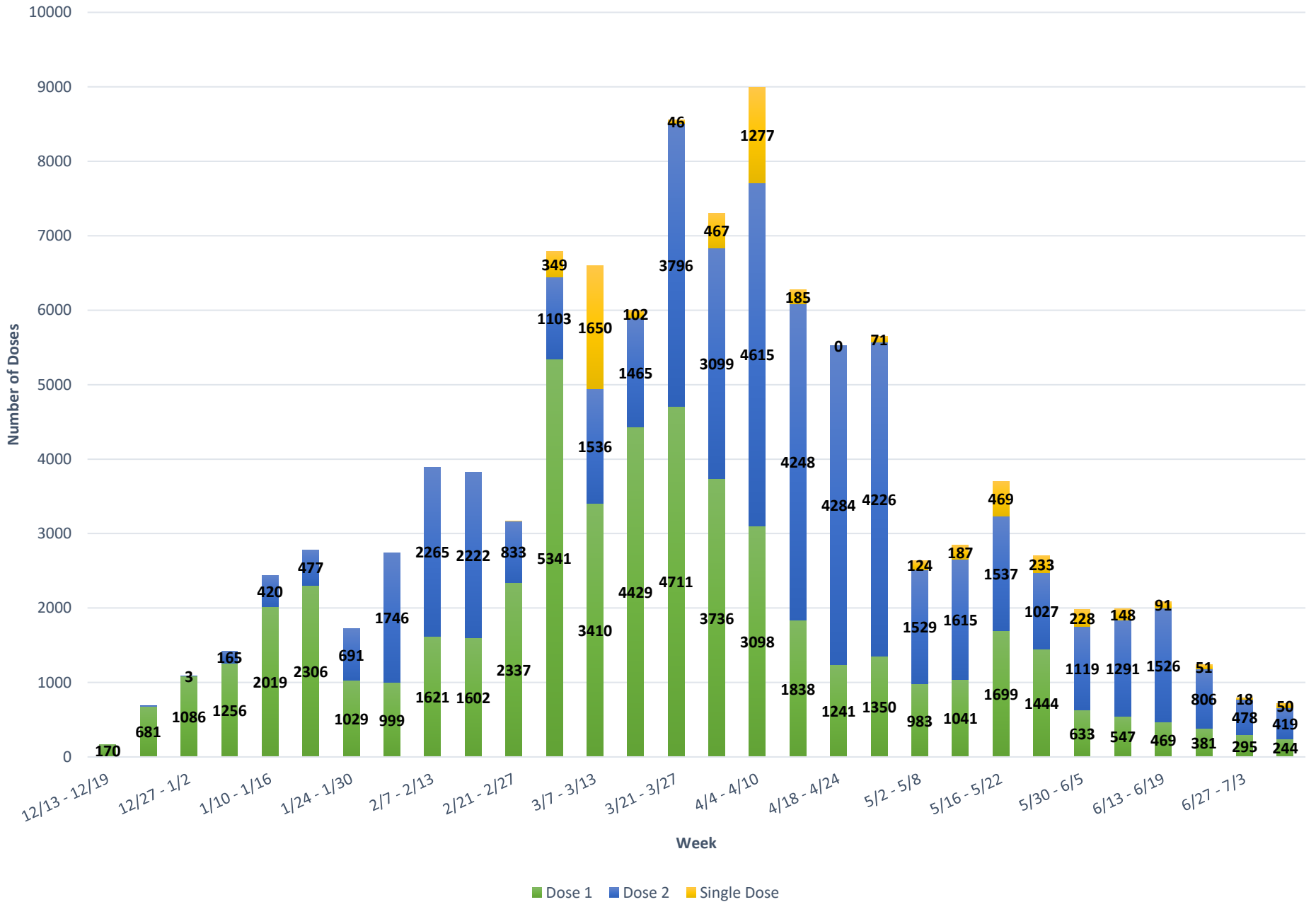
Preliminary data through 7/10/2021; subject to change as facilities correct data as needed. These numbers will be updated weekly.

## Number and Percent of Chautauqua County Residents With at Least One Dose of Vaccine by Age Group through 7/10/21

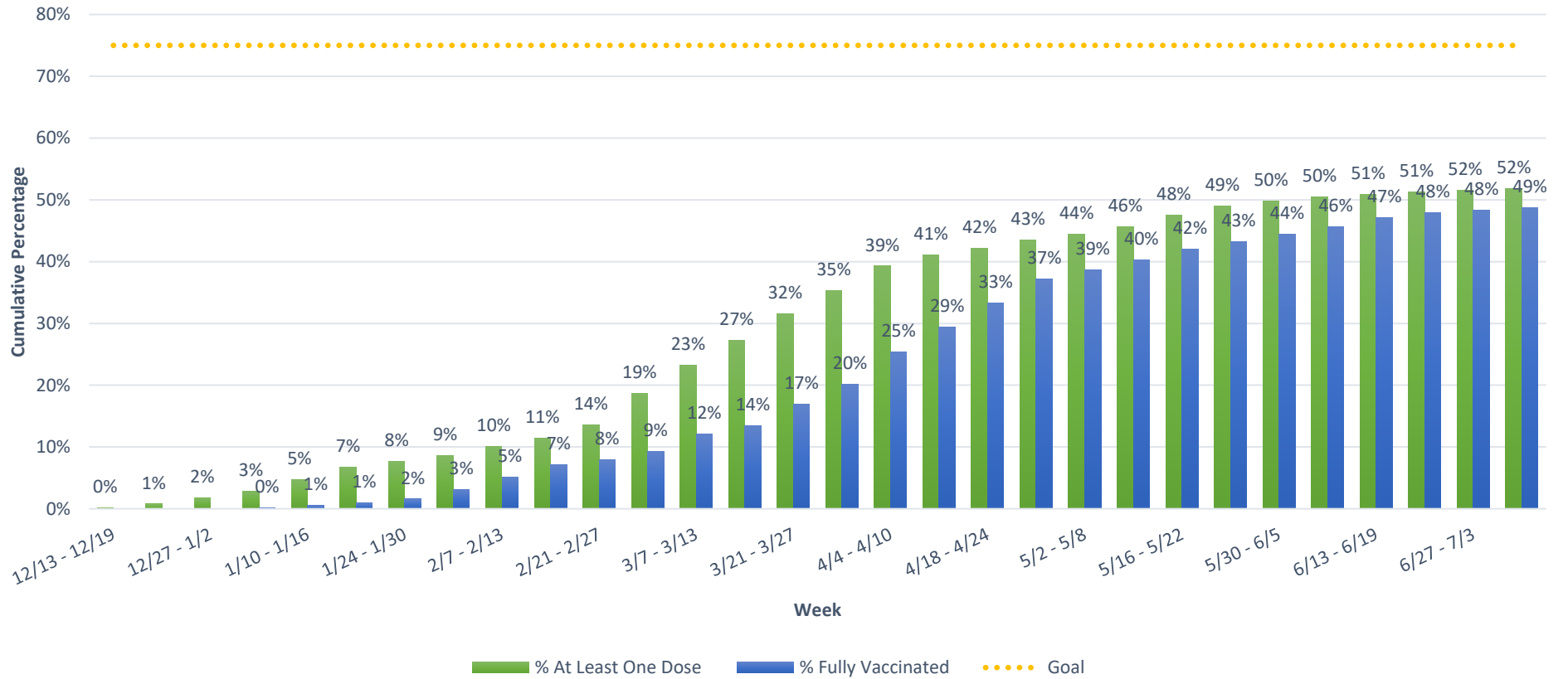
Age Group	At Least One Dose	
	At Least One Dose	% of Population
12+ (All <u>Eligible</u> Residents)	57743	52%
18+	54904	54%
65+	19097	75%
All Ages (Total Population)	57743	45%



## COVID-19 Vaccinations Among Chautauqua County Residents by Dose and Week



## Cumulative Percentage of Chautauqua County Residents Ages 12+ Vaccinated by Week



## Race

### Chautauqua County Residents Who Have Received COVID-19 Vaccine by Race, through 7/10/21

Race	At Least One Dose		County Population
	Count	Percent	
<i>White</i>	48174	89.3%	94.1%
<i>**Other Race</i>	4068	7.5%	2.4%
<i>Black or African-American</i>	891	1.7%	3.6%
<i>Asian</i>	442	0.8%	0.9%
<i>American Indian or Alaska Native</i>	320	0.6%	1.0%
<i>Native Hawaiian or Pacific Islander</i>	43	0.1%	0.1%
<b>Total</b>	53938	100.0%	

Source: NYSIIS, accessed 7/10/21. Data are preliminary and subject to change.

Race not listed for 3805 residents for first dose

\*Population data is 2019 5-year ACS data for total residents

\*\*Other Race categories do not perfectly align between registration and census data

### County Residents with at Least One Dose of Vaccine by Race

Race	Through 7/10		Through 6/19		Change from Prior Week
	Count	Percent*	Count	Percent*	
<i>White</i>	48174	39.8%	47352	39.2%	0.68%
<i>**Other Race</i>	4068	130.4%	3931	126.0%	4.39%
<i>Black or African-American</i>	891	19.1%	858	18.4%	0.71%
<i>Asian</i>	442	38.3%	432	37.5%	0.87%
<i>American Indian or Alaska Native</i>	320	25.7%	310	24.9%	0.80%
<i>Native Hawaiian or Pacific Islander</i>	43	33.6%	40	31.3%	2.34%
<b>Total</b>	53938		52923		

Source: NYSIIS, accessed 7/10/21. Data are preliminary and subject to change.

Race not listed for 3805 residents for first dose

\*Population data is 2019 5-year ACS data for total residents

\*\*Other Race categories do not perfectly align between registration and census data

## Ethnicity

### Percent Vaccinated by Ethnicity, Compared to Rate of Ethnicity in County

Ethnicity	At Least One Dose		Percent of County Population
	Count	Percent	
<i>Not Hispanic or Latino</i>	47089	93.2%	92.50%
<i>Hispanic or Latino</i>	3419	6.8%	7.40%
<i>Total</i>	50508	100.0%	N/A

Source: NYSIIS, accessed 7/10/21. Data are preliminary and subject to change.

Ethnicity Data was not available for 7235 first doses

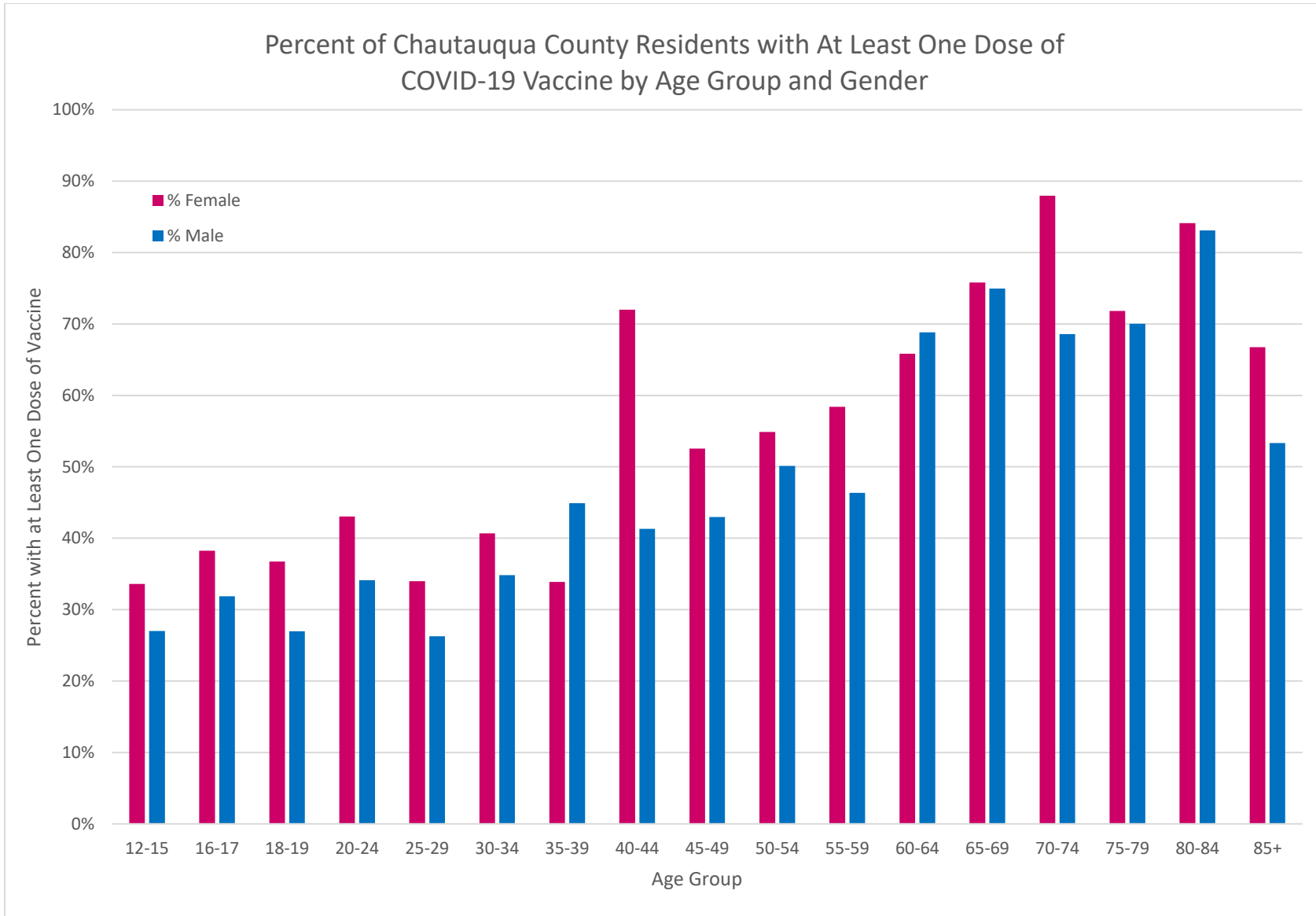
### Chautauque County Residents Who Have Received at least one dose of COVID-19 Vaccine by Ethnicity, through 7/10/21

Ethnicity	Through 7/10		Through 6/19		Change from Prior Week
	Count	Percent of Residents*	Count	Percent of Residents*	
<i>Not Hispanic or Latino</i>	47089	39.6%	46370	39.0%	0.60%
<i>Hispanic or Latino</i>	3419	35.6%	3255	33.9%	1.71%
<i>Total</i>	50508		39578		

Source: NYSIIS, accessed 7/10/21. Data are preliminary and subject to change.

Ethnicity Data was not available for 7235 first doses

# Age



Population Data is from the U.S. Census Bureau, 2018 1-year ACS estimates. Only data for individuals identifying as male or female are provided by age group; other categories not available. Data for ages 12-14 are projected estimates. Vaccination data is for Chautauqua County residents from NYSIIS, through 7/10/21.

## Chautauqua County Residents with One Dose of COVID-19 Vaccine by Age Group and Gender



**Vaccinations by Age Group through 7/10/21**

	Dose 1		Dose 2		2018 population	% At Least One Dose
	#	%	#	%		
12-15	1701	2.95%	1524	3.14%	5684	29.93%
16-17	1138	1.97%	1032	2.13%	3254	34.97%
18-19	1374	2.38%	1107	2.28%	4303	31.93%
20-24	2995	5.19%	2432	5.01%	7752	38.64%
25-29	2437	4.22%	1997	4.11%	8090	30.12%
30-34	2803	4.85%	2232	4.60%	7345	38.16%
35-39	3032	5.25%	2439	5.02%	7770	39.02%
40-44	3262	5.65%	2648	5.45%	5989	54.47%
45-49	3550	6.15%	2877	5.93%	7331	48.42%
50-54	4420	7.65%	3618	7.45%	8289	53.32%
55-59	5497	9.52%	4541	9.35%	10433	52.69%
60-64	6437	11.15%	5401	11.13%	9480	67.90%
65-69	6199	10.74%	5387	11.10%	8148	76.08%
70-74	4839	8.38%	4207	8.67%	6120	79.07%
75-79	3463	6.00%	2969	6.12%	4837	71.59%
80-84	2168	3.75%	1959	4.04%	2574	84.23%
85-89	1423	2.46%	1283	2.64%	3908	62.13%
90-94	740	1.28%	664	1.37%		
95-99	234	0.41%	204	0.42%		
100+	31	0.05%	22	0.05%		
	57743	100.00%	48543	100.00%		

**Chautauqua County Residents with at Least One Dose of COVID-19 Vaccine by Age Group through 7/10/21**

	Through 7/10		Through 7/3		Change from Prior Week
	At Least 1 Dose	Percent with At Least One Dose	At Least 1 Dose	Percent with At Least One Dose	
12-15	1701	29.93%	1671	29.40%	0.53%
16-17	1138	34.97%	1128	34.67%	0.31%
18-19	1374	31.93%	1359	31.58%	0.35%
20-24	2995	38.64%	2968	38.29%	0.35%
25-29	2437	30.12%	2413	29.83%	0.30%
30-34	2803	38.16%	2777	37.81%	0.35%
35-39	3032	39.02%	3009	38.73%	0.30%
40-44	3262	54.47%	3246	54.20%	0.27%
45-49	3550	48.42%	3533	48.19%	0.23%
50-54	4420	53.32%	4398	53.06%	0.27%
55-59	5497	52.69%	5480	52.53%	0.16%
60-64	6437	67.90%	6412	67.64%	0.26%
65-69	6199	76.08%	6179	75.83%	0.25%
70-74	4839	79.07%	4823	78.81%	0.26%
75-79	3463	71.59%	3459	71.51%	0.08%
80-84	2168	84.23%	2162	83.99%	0.23%
85-89	1423	62.13%	1422	62.08%	0.05%
90-94	740		740		
95-99	234		233		
100+	31		31		
	57743		57443		