

MINUTES
Tompkins County Board of Health
September 13, 2011
12:00 Noon
Rice Conference Room

Present: Dr. James Macmillan, President; Mr. Patrick McKee; and Mr. Michael McLaughlin, Jr.

Staff: Ms. Liz Cameron, Director of Environmental Health; Ms. Sigrid Connors, Director of Patient Services; Ms. Brenda Grinnell Crosby, Public Health Administrator; Dr. William Klepack, Medical Director; Mr. Frank Kruppa, Public Health Director; Mr. Jonathan Wood, County Attorney; Ms. Shelley Comisi, Keyboard Specialist; and Ms. Patty Stamm, Administrative Assistant

Excused: Mr. Will Burbank; Mr. Brooke Greenhouse; Dr. Erin Hall-Rhoades; Ms. Janet Morgan; and Ms. Sylvia Allinger, Director of CSCN

Absent: Dr. William Tyler

Privilege of the Floor: No one was present for Privilege of the Floor.

Dr. Macmillan unofficially called the regular meeting of the Board of Health to order at 12:14 P.M.

Approval of August 9, 2011 Minutes: Due to lack of a quorum, the August 9, 2011 minutes could not be approved at this meeting.

Financial Summary: Ms. Grinnell Crosby distributed and reviewed the August 2011 financial summary, which is at about 66% into the fiscal year.

Ms. Grinnell Crosby reported the 2nd Quarter State Aid claim has been filed, as well as explaining how increased or decreased revenues affect State Aid. She also reported some budget items are being driven by grants at the present time due to year-end spending that needed to occur in order to complete the grants.

Ms. Grinnell Crosby stated spending is down some, particularly in Community Health; most of this is a result of staff leaving related to the CHHA divestiture. She also stated the WIC grant ends at the end of this month, adding those expenditures will go up considerably which will result in the need for a budget adjustment to that program.

Administration Report: Mr. Kruppa reported:

- **RFP:** The RFP process for the CHHA is moving forward. September 9th was the last day to submit RFP's – 2 proposals were received. The committee is now reviewing those proposals and is scheduled to meet on September 21st when they will determine their next step: make a recommendation, look to arrange interviews, or decide whatever step is necessary to facilitate their decision making. He added they still hope to send a recommendation to the Health & Human Services Committee for their scheduled October meeting in hopes of

having their recommendation for a final decision by the full Legislature by their 2nd meeting in October.

- **Regarding the Jungle situation:** The Health Department has been in communication with DSS in their efforts regarding this situation. Currently, the big issue is how to provide human services to these people who will be removed from that location, as well as the law enforcement issues that exist. At the present time, it appears that everything has been tabled. Mr. Kruppa added the Health Department will be available as a resource if they are called in for any decision making.
- **2012 Budget:** The Health Department is currently in the presentation phase with the Legislature and is scheduled for Monday, 9/19, for the presentation. Currently, the County Administrator has included all OTR's (restoring positions that would have been eliminated, using one-time fees for the CHHA and roll-over dollars for equipment) in the tax cap budget. The CSCN OTR to move staff to 37.5 hrs. was recommended by the County Administrator within his 5.4% budget which is over the tax cap. Mr. Kruppa added they were able to find a significant savings of about ½ million dollars in the Pre-K mandated program. He pointed out this will not be a reduction in services. Several things have brought this together, i.e. staff has been able to stabilize the program; all of the effort that goes into the early intervention work is reducing costs later on in Pre-K; Bernie Bus Service is no longer being used - a contract is in place with the Ithaca City School District to bus the students within their district for services provided by the Health Department at half the previous cost of Bernie Bus (this will save approximately \$150,000 a year).

Medical Director's Report: Dr. Klepack elaborated on "transition of care issues" he had referred to in his report and the challenges that occur when moving from a nursing home to a hospital or hospital to nursing home, home care, or back to a primary care physician, etc. Some of these issues relate to the timeliness of information transfer such as the number of medications people are on and the difficulty in reconciling what they were previously on in one setting and what they are going to be on in the new setting, etc. He has discussed this with Melissa Gatch regarding the Health Department's CHHA. He has also spoken with the head of the VNS agency, as well as CMC. He stated they are trying to do some collaboration and get to a point where some added resources can be applied to this situation. Ms. Connors stated she felt electronic medical records were a critical piece of the transition of care issue, adding if everyone in the transition process had access to the discharge information, there would be a much quicker reconciliation, especially in the case of medications. Mr. Kruppa stated there is a County initiative going on now, being led by COFA, related to health care reform dollars being used for transition care. The funding model is fee structure and increasing fees for those who are participating in the program. CMC admission rates are below the standard which would allow them to qualify to apply, so the community as a whole is moving forward with this ongoing process.

Dr. Klepack also explained that MOLST forms are for people who are at a point in their life where their quality of life is such that they really want to limit intervention. Previously a DNR form was used, but this has now transitioned to the MOLST forms which are more specific in terms of a person's desires. It is meant to serve as a common communication device and can be updated whenever a person chooses. In response to questions from Mr. McLaughlin regarding the MOLST form, Dr. Klepack stated it is

recognized by all the medical institutions. The DNR form is still valid and does not have to be replaced, but any new forms being created should be on a MOLST form as of September 1, 2011. It is a bit complicated and likely would require the assistance of a physician filling it out. Mr. McLaughlin questioned if this form could be added to the Health Department website and Ms. Connors stated she would look into a link for the form. She said that as a rule this is generated by the health care provider who is signing off. Ms. Connors added this is not a Living Will document, but rather a person working with their physician to specify things they want done, especially in end-of-life, terminal situations.

Division for Community Health: Ms. Connors reported:

- One of the things they do with their CHHA patients, as well as Maternal Child caseloads is the assignment of a priority level, either 1, 2, or 3. In the case of priority level 1, TCHD needs to be accessible or serving the client within a 24 hour period. In the case of the flooding as a result of Tropical Storm Lee on Thursday, September 8th, they were able to determine very quickly the patients who needed to be seen. A report can also be run by zip codes to determine if a client is in a vulnerable place where they might need to be evacuated. She added they were also looking for information from local nursing homes regarding their vacancy rate since they were looking for other places for folks from Broome/Tioga Counties to be evacuated to. All of these emergency preparedness activities were started years ago as a result of the 9/11 incident and are now part of their daily routine.
- **Re CHHA:** Ms. Connors reported that as of Wednesday, September 13th, there will be three of their eight nurses left and then as of mid-October, there will be two of the eight nurses left. There are two Team Leaders picking up visits now, which makes up the equivalent of one position. They are at a reduced level of services and this has been communicated to the hospital, VNS, and the other hospitals in the area. Referrals continue to be received, but can only be taken on a limited basis. VNS, the other community-based CHHA, now has five nurses and is able to take on more clients.
- **Flu shots:** Starting September 21st, the Health Department will start taking calls for appointments for flu shots here in our facility. Due to the shortage in nursing staff, as well as support staff, they are not able to have outreach clinics in the general population. Although they will be doing flu shots in congregate senior citizen settings, about 20 total, starting next week and continuing on through October. Less vaccine has been ordered this year due to the availability of flu vaccine throughout the community. Costs of the flu vaccines will be \$25.00. Ms. Connors stated she felt as time goes by, the message of the Health Department will focus more on education and outreach of everyone, every year getting a shot, but not necessarily through the Health Department.
- **WIC Budget:** Ms. Connors reported that the WIC budget, which starts October 1st, was submitted to the State. There was a reduction in the amount of dollars received in the budget so all positions were not able to be kept at the same level. However, the State is giving WIC COLA money, which should be received within the first six month of the grant year. One staff member will have a reduction in hours until the COLA money becomes available.
- **Handouts:** Mrs. Connors also distributed information regarding ticks: "A GUIDE for preventing LYME DISEASE" and a handout of laboratories that will test ticks

from the general public since the State Health Department no longer will be offering free tick identification services.

Children with Special Care Needs: Ms. Allinger was not present for today's meeting.

County Attorney's Report: Mr. Wood discussed how the CAP budget works and how it relates to the Health Department budget. The CAP budget is 2.9% (most of the Health Department OTR's fall within this budget); however the OTR for the increase in hours in CSCN is in the County Administrator's recommended budget (5.4%).

Briefly, under NYS law, the County Administrator makes a recommended budget. If the Legislature fails to act (needs 8 votes) by a certain date in December, that becomes the County budget. Under the law, the Legislature is only allowed to adopt a budget that is within the cap (2.9%). The law also allows them to exceed the cap, but a local law has to be passed prior to voting to exceed the cap. Mr. Wood stated at the last Legislature meeting, a resolution was passed to have a public hearing on a local law to exceed the cap. This would prepare the Legislature to adopt such a local law in the event they exceed the cap. This leaves the Legislature with choices: (1) vote to exceed the cap and adopt the County Administrator's recommended budget; (2) vote for a budget that is below the cap; or (3) pass a law allowing the Legislature to exceed the cap and then adopting something close to the County Administrator's budget. In order to pass the law they need 9 votes. Mr. Wood added that if they pass the local law, it is likely they will have enough votes (8) to pass the County Administrator's budget at 5.4% meaning the Health Department is likely to get the additional CSCN hours.

Environmental Health Report: Ms. Cameron reported:

- Tompkins County's public water supplies came through the flooding fairly well; one mobile home park is under a cautionary "Boil Water Notice."
- Hydrilla has been detected in the inlet to Cayuga Lake. The Health Department is preparing comments on the NYS DEC permit application for the herbicide.
- In July, the maximum penalty that can be imposed for Sanitary Code Violations has been increased in most cases to \$2000. Current penalties will be reviewed with the fee policy.
- Note: Follow-up with the Ithaca Waste Water Treatment Facility clarified that no raw sewage was discharged into Cayuga Lake during the flood.

Monthly Financial Report Presentation: Due to the lack of Board members, this presentation was moved to the October BOH meeting.

Resolution #11.19.22 – Ms. Marie VanDeMark, T-Newfield, Violation of Tompkins County Sanitary Code, Article VI (Sewage): Due to lack of a quorum, no vote could be taken on this enforcement action today. Carried over to October BOH meeting.

Gas drilling update: Mrs. Cameron reported:

- Regarding the Advisory Panel: Dr. Macmillan signed a letter today requesting Health Department representation on the panel. Local government representation has been added to the panel. Ms. Cameron expressed concern that there is not anyone on the panel who understands the impact on health departments and the resources needed or how the mechanisms would work to transfer resources.

- The final SGEIS draft is out with comments due December 12th. Ms. Cameron stated they will be getting something to Board member in October or November for their consideration to submit. She added she will be working separately with Dr. Klepack on a letter to submit from the Health Department with more detailed comments.
- DEC has announced they are going to issue regulations in October that would implement the recommendations in the SGEIS. This will be another document to review with comments due mid-December.
- The Water Resources Council is actively developing their comments; a lot of those comments are related to public health. Ms. Cameron is actively involved in this.

Dr. Klepack stated the new impact statement still does not address a lot of their concerns regarding the human health issue. He distributed a handout of one Pennsylvania hospital's experience with what they have been seeing with the Marcellus Shale drilling. He emphasized this is not a study, rather an observation and the experience of this hospital. He stated this allows us to identify some unexpected areas that people in Tompkins County should be thinking about. Dr. Klepack stated he would further review this document at the October BOH meeting.

Adjournment: At 1:20 P.M. Mr. McLaughlin moved to unofficially adjourn the meeting, seconded by Mr. McKee, and carried unanimously.