

MINUTES
Tompkins County Board of Health
July 10, 2012
12:00 Noon
Rice Conference Room

Present: Will Burbank; Amy DiFabio, MD; Brooke Greenhouse; James Macmillan, MD, President; Patrick McKee; Michael McLaughlin, Jr.; Patricia Meinhardt, MD; and Janet Morgan, PhD

Staff: Sylvia Allinger, Director of CSCN; Liz Cameron, Director of Environmental Health; Sigrid Connors, Director of Patient Services; Brenda Grinnell Crosby, Public Health Administrator; William Klepack, MD, Medical Director; Frank Kruppa, Public Health Director; and Shelley Comisi, Keyboard Specialist

Excused: Jonathan Wood, County Attorney

Guests: Carol Chase, Sr. Public Health Sanitarian; and Steven Kern, Sr. Public Health Sanitarian

Mr. McLaughlin, Vice President, called the regular meeting of the Board of Health to order at 12:08 p.m. The gavel was passed to Dr. Macmillan upon his arrival immediately following the call to order.

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

Approval of June 12, 2012 Minutes: Dr. Morgan moved to accept the minutes of the June 12, 2012 meeting as written; seconded by Dr. DiFabio.

Dr. Morgan suggested on page 3, bullet 3, the first sentence be changed to read as follows: "...a relationship is established and the physician is *potentially* liable."

The minutes, as amended, carried unanimously.

Financial Summary: Ms. Grinnell Crosby distributed the Financial Summary for June 2012. Although she had nothing major to report, she noted:

- On page 2, the actual spending for Division for Community Health at 30% is a result of decreased expenditures related to the Certified Home Health Agency which was fully budgeted for 2012.
- Near the bottom of page 3, Public Health Work State Aid Revenue reimbursement for the 1st Quarter is an anomaly at 8.41%. A significant amount of year-end grant revenue was received which reduced State Aid reimbursement. Eventually that should start catching up.

Ms. Grinnell Crosby discussed the net impact of grant money versus State Aid money:

- If an eligible service is provided and spending is more than the grant, then the Department receives 36% of eligible expenses beyond the grant. If it is an ineligible service considered optional by the State under Article 6, the Department does not receive State Aid.

- Lead and immunization programs are considered core services and reimbursable when spending is more than the grant.
- A grant not eligible for State Aid reimbursement is the Healthy Neighborhoods Program. The State classified the program as Residential Housing, an optional service.
- This year the work performed by Administration staff is spread over all programs, eligible or ineligible, so a portion of staff time is not eligible for reimbursement.

Administration Report: Mr. Kruppa:

- Distributed the list of individual contact information for Board members to review and edit. Once finalized, the list will be posted on the Health Department's website.
- Noted the remaining portion of his report would occur during the budget discussion at the end of the meeting.

Medical Director's Report: Dr. Klepack reported:

- The report from the Institute of Medicine (IOM) discusses integrating primary care and public health. With the Supreme Court's recent decision upholding the Affordable Care Act (ACA), there may be a driving force behind it. At some point there needs to be a venue for primary care providers and the public sector to jointly discuss issues and determine what is practical. The report recommends bringing together collected data, targeting programs, and bolstering graduate medical education to develop a workforce able to integrate primary care and public health into a meaningful program.
- The document on hydrofracking outlines the current concerns from a particular group of scientists and engineers. There are many voices, but he thought this report would be of interest to review.

Highlights from the questions/discussion among Board Members regarding health care:

- The ACA will affect the Department's decision making about public health programs.
- The direct impact of the ACA will be seen when it is actually implemented. If more people are insured, they will have greater access to services in existing medical facilities.
- The future of the Department may be heading toward less and less direct services with the focus being on health promotion, education, and community partnership building within the core public health areas.
- Public health is in the business of population based health care. It gathers meaningful data that helps to augment the understanding of the health of the nation and where research should be targeted.
- Although more people will be going to private practitioners, there will be individuals who do not want to see their primary care physician for some services because they do not want to be recognized. STD clinics, syringe exchange programs, etc. will be needed.
- There will still be a need to outreach to disadvantaged people and homeless people.
- The IOM report on integrating primary care and public health is the beginning of a process that may have profound policy implications.

- The IOM often responds to a request from Congress to answer a question by bringing together disinterested experts to analyze and create an informed opinion. These reports carry a lot of weight; considered to be an unbiased opinion.

Highlights from questions/discussion on hydrofracking:

- The Department does not receive official updates on hydrofracking.
- The State has a plan which officials are enacting on their timeline.
- Municipalities are holding local meetings because of their land use authority; that authority can make an impact on hydrofracking.

Division for Community Health Report: Ms. Connors:

- Circulated a letter from the Director of Patient Services of Hospicare thanking the Department for the medical equipment and supplies received from the Home Health Care unit. Other groups offered supplies included the Ithaca Free Clinic and the American Red Cross.
- Stated there have been up to 100 reported cases of pertussis to date.

Ms. Connors answered questions from Board Members:

- With the departure of Jack Moss, the Department is orienting Melissa Gatch, who has over 25 years of nursing experience, for the position of tuberculosis nurse.
- The Strategic National Stockpile (SNS) has antivirals and antibiotics available for distribution. Within the State are regional distribution centers to deliver those resources according to the event. Mr. Kruppa added the local SNS meeting is held once a year for county participants to plan for an incident. The County is working on improving its emergency response plan with the Department playing a role in the planning.
- There are more cases of pertussis this year than last year. It has been cyclical the past 10-12 years.

Mr. Kruppa reported the revisions to the County Charter and BOH Bylaws, necessitated by the change from a Certified Home Health Agency (CHHA) to a Licensed Home Care Services Agency (LHCSA), have moved through the Committees. The Legislature is currently considering the changes and has scheduled a public hearing on July 17th.

Children with Special Care Needs Report: Ms. Allinger reported:

- Franziska Racker Centers has reopened their classrooms on Wilkins Road after being closed for the past year because asbestos was found during construction. During the school year, classrooms were set up in school districts around the County. From the end of school in June until the beginning of summer services on July 2nd, their staff worked on reopening the facility. There were a few “bumps” in getting the toddlers to their classrooms, but those problems have been resolved.

County Attorney’s Report: Mr. Wood was not present at the meeting.

Environmental Health Report: Ms. Cameron reported on the hydrilla situation:

- The herbicide, endothall, was applied to the Cayuga Inlet area. Staff has been monitoring the results; there have been no detections of the chemical at Bolton Point water supply intake.

- Fluridone, a systemic herbicide used at a low concentration of 3 ppb (parts per billion), will be applied continuously for 6 weeks.

Ms. Cameron answered questions from Board Members:

- There is a Hydrilla Work Plan that will be modified as necessary to eradicate the hydrilla in 5-8 years. The funding is uncertain. Currently, the funds are available for the herbicide application. Monitoring the lake itself for hydrilla is expensive and not funded at this point.
- Endothall was a one time herbicide application; fluridone is a continuous drip application. There are 3 secured locations that can be controlled remotely for the fluridone drip. Fluridone pellets will be used in isolated areas with little water movement.
- The endothall application closed the inlet for one day; no closures are necessary for fluridone.
- The Division developed the water quality monitoring plan. The drinking water standard is not chemical specific for fluridone; however, the unspecified organic contaminant (UOC) maximum contaminant level (MCL) is 50 ppb, and fluridone is applied at the much lower level of 3 ppb. Staff will be checking to make sure there is no accumulation.

Mr. Burbank commented the Legislature will be considering a new local law making it a ticketable offense for failing to remove plant or animal material attached to watercraft. The State does not have a law; however, this type of legislation exists in Warren County and in other states.

Division for Community Health: Ms. Connors reported the packet of information required for the operation of the LHCSA was mailed to the State for review. The following policies were developed and or revised as a part of that process.

Approval of Medical Equipment and Appliances Policy & Procedure: Ms. Connors stated this policy lists the types of equipment used by staff with additional information about mercury based equipment. She noted mercury thermometers were eliminated by the Division for Community Health some time ago.

Dr. Morgan moved to accept the policy as written, seconded by Mr. Greenhouse, and carried unanimously.

Approval of revised Staff Orientation & Continuing/Mandatory Education Policy/Procedure: Ms. Connors explained the policy was revised to meet licensing requirements. It provides guidelines for orienting new staff and establishes annual educational goals.

Dr. Morgan moved to accept the revised policy as written, seconded by Mr. Greenhouse.

Mr. Greenhouse asked whether the required hours of training for staff were based on internal standards or other standards. Ms. Connors responded: (1) the Public Health Educator is a State standard, and (2) the WIC standard is based on the federal/state WIC Program. The policy was worded to set a minimum goal. The Division wants to assure more continuing education for staff, but has been limited by funds.

The vote on the revised policy, as written, carried unanimously.

Approval of Emergency Standing Orders for Client Home Visits: Ms. Connors stated the *Emergency Treatment Guidelines* were reviewed and approved for immunization clinics in February, 2012. A page was added covering home visits. She noted a nurse's response is the same for both settings.

Dr. Morgan moved to accept the policy as written, seconded by Mr. Greenhouse, and carried unanimously.

Approval of Scope of Services: Provides a description of services.

Approval of Supervision of Services: Describes the chain of command and supervision responsibilities.

Dr. Macmillan suggested combining the two policies for discussion.

Dr. Morgan moved to accept the policies *Scope of Services* and *Supervision of Services* as written, seconded by Mr. Greenhouse, and carried unanimously.

Resolution #12.9.15 – Blue Frog Coffeehouse, V-Lansing, Violation of Part 14-1 of the New York State Sanitary Code (Food Service): Ms. Cameron reported this is a food temperature violation. The Blue Frog recently closed so it is no longer in operation. She suggested keeping the fine, but striking the second requirement from the resolution because the coffeehouse has closed and will not be maintaining temperature logs.

Mr. McLaughlin moved to accept the resolution as written; seconded by Dr. Meinhardt.

Mr. Greenhouse asked about the Stipulation Agreement. Ms. Cameron explained the Blue Frog was under Board of Health orders for a previous violation so there was no need for the stipulation process.

Dr. DiFabio asked what happens if the operator opens another facility. Ms. Cameron responded the staff in the food program knows the operator so a permit condition would be included requiring her to maintain temperature logs.

Mr. Burbank expressed concern about collecting the fine. Ms. Grinnell Crosby noted the operator has not complied with the payment plans set up for her first violation.

A discussion ensued regarding the amount of the fine.

Ms. Cameron stated this food out of temperature violation was not specifically a violation of the conditions of the previous resolution requiring temperature logs; therefore, the fine of \$400.

Mr. McLaughlin asked whether the fines follow the individual or corporation should it change names and reopen a different facility. Ms. Cameron said there is authority to withhold a permit based on a poor history.

Mr. McLaughlin moved to accept the amended resolution which keeps the penalty of \$400 and deletes the second requirement about maintaining temperature logs, seconded by Dr. DiFabio, and carried unanimously.

Resolution #12.9.12 – Wendy's #1-005, C-Ithaca, Violation of Part 14-1 of the New York State Sanitary Code (Food Service): Mr. McLaughlin moved to accept the resolution as written, seconded by Dr. Morgan, and carried unanimously.

Adjourn to Executive Session: At 1:10 p.m. Mr. Greenhouse moved to adjourn to Executive Session for the purpose of discussing the proposed 2013 budget, seconded by Dr. Macmillan, and carried unanimously.

Dr. Meinhardt moved to approve the tentative budget to include adjustments made by the Public Health Director to balance the budget, seconded by Dr. Macmillan, and carried unanimously.

Out of Executive Session: At 2:08 p.m. Mr. McLaughlin moved to adjourn from Executive Session, seconded by Dr. Macmillan, and carried unanimously.

Adjournment: At 2:10 p.m. Mr. Greenhouse moved to adjourn the meeting, seconded by Mr. McLaughlin, and carried unanimously.