

MINUTES

Tompkins County Board of Health
February 28, 2017
12:00 Noon
Rice Conference Room

Present: Will Burbank; Edward Koppel, MD; James Macmillan, MD, President; Michael McLaughlin, Jr.; Susan Merkel; and Janet Morgan, PhD

Staff: Karen Bishop, Director of Community Health; Liz Cameron, Director of Environmental Health; Brenda Grinnell Crosby, Public Health Administrator; William Klepack, MD, Medical Director; Frank Kruppa, Public Health Director; Deb Thomas, Director of Children with Special Care Needs; and Shelley Comisi, Administrative Assistant II

Excused: David Evelyn, MD, MPH, Board of Health Member; Brooke Greenhouse, Board of Health Member; and Jonathan Wood, County Attorney

Guests: Susan Dunlop, Community Health Nurse, Health Promotion; Michelle Hall, Director of Women, Infants and Children; Samantha Hillson, Director of Health Promotion; Jan Lynch, Tompkins County Community Mental Health Services Board; Skip Parr, Senior Public Health Sanitarian

Call to Order: Dr. Macmillan called the regular meeting of the Board of Health (BOH) to order at 12:00 p.m.

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

Introductions: Mr. Kruppa introduced the Tompkins County Health Department (TCHD) staff members in attendance and welcomed Community Mental Health Services Board member Jan Lynch.

Approval of January 24, 2017 Minutes: Mr. McLaughlin moved to approve the minutes of the January 24, 2017 meeting as written; seconded by Dr. Koppel. The minutes carried with Ms. Merkel abstaining.

Financial Summary: Ms. Grinnell Crosby referred to the financial summary in the packet consisting of two separate reports. The 13th period remains open for expenses and revenues that are applicable to 2016 to be posted. She will include this report until the County formerly closes the books for 2016. The second report is for January 2017. Since it is early in the year there is nothing significant to report.

Administration Report: Mr. Kruppa initiated a discussion on the potential relationship between the BOH and the Community Mental Health Services Board (CSB). The CSB has been sending representatives to hear about BOH activities and report back to their membership. Mr. Kruppa asked whether the BOH has an interest in a reciprocal relationship. The CSB meets the first Monday of the month at 5:30 p.m. at the Mental Health Building at 201 East Green Street.

Board members expressed their interest in pursuing a relationship with the CSB. They agreed to begin with members volunteering to attend CSB meetings on a rotating basis with an opportunity to report about their experiences at the following BOH meeting. Ms. Merkel volunteered to attend the March 6th meeting; Mr. McLaughlin offered to be the alternate representative. For future meetings, Mr. Kruppa will have his assistants coordinate participation. He believes once the two boards become familiar with one another, then conversations about working together in a meaningful way will be possible.

On another subject, Mr. Kruppa informed Board members that there has been no response from the State to their letter regarding payments to Early Intervention (EI) providers. During his recent trip to Albany to testify before the State Legislature's joint budget committees, it was evident there are legislators who are aware of the issues with the fiscal agent. Considering the fiscal agent's performance, Assemblyman Gottfried, Chair of the Assembly Committee on Health, questioned the rationale for continuing the contract. Another meeting will be held with Assemblyman Gottfried; State Senator Hannon, Chair of the Senate Health Committee; and Assemblyman Cahill, Chair of the Assembly's Committee on Insurance to discuss a resolution to the long term problems. In the short term, payments are being made to providers. Hopefully, our voice is making a difference.

Medical Director's Report: In the discussion about opioid use, Dr. Klepack described the difficulty in finding data about opioid overdoses. In terms of data that can be ascertained from death certificates, the drug that was involved is often unknown. Due to the expense of tracking down and testing drug(s), it is not practical to investigate that information for a death certificate. The overall lack of data about opioid use confounds the issues that are important when talking about (1) interventions that would be helpful and (2) targeting groups who would benefit from treatment. He will continue his research.

Dr. Klepack reported it is mandatory for physicians who prescribe a narcotic or controlled substance to check the NYSDOH registry that monitors the dispensing of those drugs to patients. It seems to have had some favorable impacts in reducing "doctor shopping" for narcotics and controlled drugs. According to Mr. Kruppa, OASAS providers (substance abuse providers) in the community have seen a dramatic shift from prescription drugs to other street drugs because it has become more difficult to obtain those other drugs. Both Dr. Klepack and Mr. Kruppa noted there is data being collected that will look at the impacts of the registry.

Noting the challenge of finding comprehensive substance use data, Mr. Kruppa briefed the Board on some sources for collecting that data:

- The medical examiner group for the county is meeting to discuss how the cause of death is reported on death certificates. The number of deaths related to overdose in the community is less than 20; however, the number is trending upward.
- A team at Mental Health will start looking in our databases to try to present a profile on what substance abuse looks like in Tompkins County.
- Bangs Ambulance is continuing to track the Narcan they administer when they respond to calls. They started keeping that data a couple of years ago.
- The Tompkins County 911 Center has made significant changes on how they are capturing data.
- Cayuga Medical Center has always been a good source for information.
- As the data is collected and refined, it will be used by Public Health and Mental Health departments to determine what interventions would be best in terms of having the largest impact on addressing substance use within the community. While opioids are dangerous and in the news every day, alcohol abuse is the number one issue so the focus needs to be on the larger picture of substance use.

Division for Community Health Report: Ms. Bishop reported:

- The incidence of influenza is classified as widespread across New York State, predominantly type A. Unfortunately there have been six pediatric deaths across New York. Locally, staff has responded to two influenza outbreaks. They were successful in cohorting the sick people at a facility for seniors and worked well with Cayuga Medical Center on infection control to disrupt ongoing transmission in the hospital unit where the outbreak occurred.
- A new tuberculosis (TB) case brings the number of cases to three active pulmonary cases and one new suspect case that our Communicable Disease (CD) team is investigating with Dr. MacQueen, our TB consultant.
- Michelle Hall is the new WIC Director. It is delightful to be able to introduce her to the Board.

Children with Special Care Needs Report: Ms. Thomas corrected a clerical error on the CSCN Statistical Highlights spreadsheet. The first yearly *Totals* column should be changed from 2016 to 2017.

County Attorney's Report: Mr. Wood was not present for the meeting.

Statewide Health Emergency Preparedness Exercise: Mr. Kruppa announced TCHD is participating in a statewide exercise. The scenario for the exercise started with a novel flu in Suffolk County that is spreading throughout the state. Each day for two weeks different counties are participating as the infectious disease rolls through their region. The actual exercise date for Tompkins County is Monday, March 6th from 9:00 a.m. to 1:00 p.m. With a focus on isolation and quarantine, staff has been reviewing and updating plans and documents. Mr. Wood as the

Tompkins County Attorney will participate and review documents to ensure TCHD actions are related to Public Health Law.

Mr. Kruppa responded to questions with the following remarks:

- This is the first time that isolation and quarantine have been components of an exercise. The first steps are around self isolation. Plans must consider the wraparound services (food, water, medications, etc.) for people because they cannot leave their home. Other populations having special needs to be addressed are people with disabilities; people who do not speak English; and people who have pets and service animals.
- If a person does not comply, Public Health Law provides the authority to the Public Health Director to require compliance. Law enforcement would be called upon in that situation.
- The State planned this exercise that requires the participation of public health departments and hospitals. Area colleges have been notified about the exercise but will not be participating. These partners could be included in future exercises that are planned locally.

Environmental Health Report: Ms. Cameron reported on some issues that staff has been addressing:

- Staff dealt with a manure spill from Sunnyside Farm in Cayuga County. The farm is located about 15 miles from Cayuga Lake. They had a problem with the liner in their manure storage lagoon which caused a discharge to the creek. Remediation included spreading the manure on area farms. With the snowmelt, runoff containing manure entered Salmon Creek. After New York State Department of Environmental Conservation (DEC) had visual confirmation that the runoff had entered Cayuga Lake, EH staff put out a press release with DEC and worked closely with Bolton Point as they monitored their intake. It is now resolved with no known impacts in Tompkins County. Mr. Kruppa commended Ms. Cameron, staff member Adriel Shea and their team who worked on this issue. They were the first ones who thought about notifying the public through a press release. Ultimately, DEC signed on for a joint press release with TCHD. Ms. Cameron expressed her appreciation that Mr. Kruppa handled the media calls while she and her staff handled the technical aspects.
- Mothers Out Front is a non-profit organization that has contacted TCHD regarding their concerns about the expansion of the Borger Gas Compressor Station in Ellis Hollow. It is not technically an expansion; it is an increase in use within their existing permit. Staff has been listening to the group's concerns about air quality, water quality and the health of residents. At this point, TCHD does not see a role and does not have the resources to study the impact on air quality. The DEC is the agency responsible for ensuring that national air quality standards are met. She has been reviewing available documents and hopes to speak with DEC officials. The compressor station's permit does indicate monitoring requirements but she has not seen the results.
- Food Not Bombs is a non-profit organization that wants to provide food to anyone at no charge. Several weeks ago they set up in Dewitt Park to serve food but did not have a temporary food service permit from TCHD. The group was not receptive to inspector

René Borgella's explanation to them that this is a matter of public health. We are in discussion with NYSDOH on options that are reasonable yet still protecting the public.

Resolution #EH-ENF-16-0027 – Apollo Restaurant, C-Ithaca, Violation of Subpart 14-1 of the New York State Sanitary Code (Food): Ms. Cameron noted the restaurant had several food out of temperature violations. EH staff is working with them to help them understand proper food preparation procedures.

Dr. Morgan moved to accept the resolution as written; seconded by Ms. Merkel; and carried unanimously.

Resolution #EH-ENF-17-0001 – Casper's, V-Groton, Violation of Subpart 14-1 of the New York State Sanitary Code (Food): Ms. Cameron explained EH staff had contacted the owner of Casper's about renewing his permit application; however, he did not complete the process until after his permit expired. This is a follow-up enforcement action because the facility was operating without a permit for a period of time.

Mr. McLaughlin moved to accept the resolution as written; seconded by Dr. Koppel; and carried unanimously.

Resolution #EH-ENF-17-0004 – Fraternal Order of Eagles #1253, C-Ithaca, Revocation of Waiver from Clean Indoor Air Act (CIAA): Ms. Cameron reported EH staff received a number of complaints about smoke in the facility during the past year. Since the facility is not in compliance with the requirements of the waiver, TCHD does not recommend renewing the waiver. Responding to a question about whether the Eagles could fix the problem to meet the standards and then reapply for a waiver, Ms. Cameron said she would have to look at the requirements of the law. They might not be able to reapply.

Dr. Morgan moved to accept the resolution as written; seconded by Dr. Macmillan; and carried unanimously.

Review and Approval of Temporary Residence Program Revised Inspection Policy: Ms. Cameron informed the Board that TCHD has been working with local code enforcement officers to avoid duplicating our efforts to inspect temporary residences (any hotel/motel in Tompkins County). If the Ithaca Fire Department inspects a place, then TCHD might not need to conduct its own inspection. The regulations and guidance from New York State do not require an annual inspection. TCHD is proposing to conduct an inspection once every three years. Mr. Kruppa commented that he is supportive of the proposed policy.

Ms. Cameron referred to page 2, sentence 3.4 that reads, "Inspections for additional operations (i.e. Food Service, Swimming Pool, Public Water, etc.) will continue to be conducted annually." Staff recommends deleting that statement because it is unnecessary. Although staff will continue to conduct inspections as required for permits or operations, some inspections are not required to be done annually so the language should be modified or removed.

Mr. McLaughlin moved to modify the policy by deleting sentence 3.4; seconded by Dr. Koppel. The vote to approve the *Temporary Residence Program Revised Inspection Policy*, as modified: Ayes – 5; Abstention – 1 (Dr. Morgan).

Infection Control Policy and Procedure (revised): Ms. Bishop directed attention to the summary of changes for the policy.

Dr. Koppel referred to “1.a. Employee Screening” on page 1 talking about medically screening all TCHD employees prior to employment and reassessing them annually; however, the Annual Health Assessment in the *TCHD Health Requirements Training Grid* shows that some employees do not have to complete an annual assessment. Ms. Bishop thanked him for pointing that out. All employees are medically screened prior to employment but not all employees are reassessed annually. By regulations, all staff members in CHS are required to have that assessment. She will clarify paragraph “1.a” to reflect the requirements.

Dr. Morgan asked whether #3 under “References” on page 4 that cites the *Division for Community Health, Universal Precautions Policy* is the same as the *TCHD Universal Precautions Policy* that is referred to elsewhere in the policy. Ms. Bishop replied it is the agency’s policy so she will make that correction.

Ms. Merkel moved to approve *Infection Control Policy & Procedure*, as edited; seconded by Dr. Koppel; and carried unanimously.

Employee Health Policy (revised): Ms. Bishop stated one of the critical statements in this policy is found in the “Policy” section, pages 2-3, paragraph (3) that describes Medical exemption to rubella and or rubeola immunization...” A statement was added that the medical exemption must be in accordance with the Advisory Committee on Immunization Practices (ACIP) so that it meets those standards.

Dr. Koppel expressed concerns that the annual employee health assessment is invasive for employees. Some health problems may not have any effect on whether or not an individual is able to perform the responsibilities of the job. Having recently discussed this issue in his workplace, Dr. Koppel has a form that he could share with TCHD.

After a brief discussion regarding the purpose of the health assessment form, Mr. Kruppa recommended TCHD staff reevaluate the form. Further discussion of the policy was tabled. It will be revisited at a later meeting.

Adjournment: At 1:34 p.m. Dr. Macmillan moved to adjourn the meeting.