

CATTARAUGUS COUNTY BOARD OF HEALTH

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Joseph Bohan, MD, President

Joseph Eade, Vice-President

Giles Hamlin, MD
Zahid Chohan, MD
Sondra Fox, RN
Richard Haberer
James Lapey
Georgina Paul, FNP
James Snyder

MINUTES

July 3, 2013

The 817th meeting of the Cattaraugus County Board of Health was held at St. Bonaventure Clubhouse Restaurant, Route 417, Allegany, New York on July 3, 2013.

The following members were present:

Joseph Bohan, MD

James Lapey

Joseph Eade

James Snyder

Richard Haberer

Also present were:

Kevin D. Watkins, MD, MPH, Public Health Director

Kathleen Ellis, Administrative Officer

Karen Manners, Secretary to Public Health Director

Thomas Brady, County Attorney

Linda Edstrom, County Legislator

Paula Stockman, County Legislator

Donna Vickman, County Legislator

Carl Edwards, County Legislator

Eric Wohlers, Environmental Health Director

Raymond Jordan, Sr. Public Health Sanitarian

Patti Williams, Supervising Community Health Nurse

Debra Nichols, Public Health Educator

David Porter, Hearing Officer

Rick Miller, Olean Times Herald

The meeting was called to order by Dr. Bohan. The roll was called and a quorum declared.

Mr. Eade made a motion to approve the minutes of the June 4, 2013 meeting. It was seconded by Mr. Lapey and unanimously approved.

Dr. Bohan reported that the Cattaraugus County Legislature has appointed Dr. Zahid Chohan as a member of the Board of Health. Dr. Chohan resides in Olean and has been a staff member at Olean General Hospital since1992, currently he is the Chief of Surgery performing both general and vascular surgery. He obtained his medical education in Pakistan and his surgical training in the United States. He is Board Certified by the American College of Surgeons and is presently the

President of the Cattaraugus County Medical Society. Dr. Bohan gave a brief summary of Dr. Chohan's community affiliations. He is a member of the Board of Directors for the Rehab Foundation, the YMCA, and a member of the Board of Directors of the Olean General Hospital. He also is a Clinical Instructor for the Department of Surgery at the State University of New York at Buffalo. It is a privilege to have Dr. Chohan as a member of the Board of Health. Since Dr. Chohan is not in attendance today, he will be introduced at a future meeting.

Mr. Lapey stated that Dr. Bohan will serve as President for the remainder of the year and the committee would like to nominate Mr. Joseph Eade as Vice-President of the Board of Health for 2013. It was seconded by Mr. Snyder and unanimously approved. Mr. Eade commented that he has been a Board member for a number of years and would be happy to serve as Vice-President.

Director's Report: Dr. Watkins introduced Mrs. Patti Williams, Supervising Community Health Nurse, to the Board. She is filling in for Mrs. Susan Andrews and will give the Nursing Division report. He also introduced Ms. Deb Nichols, Health Educator.

Dr. Watkins congratulated Mr. Eade for being elected Vice-President and thanked him for his service of over 20 years on the Board (since 1992).

Dr. Watkins stated that mosquito breeding can occur anywhere where there is standing water available. Examples are numerous and include tires, garbage drums, garbage cans, pails, plant pots, clogged rain gutters, bird baths, storm drains, unchlorinated swimming pools, swimming pool covers, or discarded appliances containing water. Mosquito breeding also occurs in natural water-filled areas not subject to wind or wave action (standing water). These areas may be temporary flooded areas, wetlands, flooded depressions, or stream edges where quiet water pools exist.

These mosquitoes, commonly called floodwater or temporary pool mosquitoes, generally are not disease carriers, but can be a nuisance, prohibiting the ability of residents to enjoy the outdoors. Large numbers of floodwater mosquitoes emerge about two weeks after heavy rains and can fly up to 20 miles from where they hatch, particularly along prevailing winds.

The mosquitoes are attracted to people by carbon dioxide and perspiration. They have a peak biting time of just after sunset and again just before dawn, but will feed anytime in or near wooded areas if disturbed.

Surveillance activities for immature (larvae and pupae) mosquitoes have begun within the department with the State's assistance.

Last year there were a number of human cases of West Nile Virus (WNV), WNV is a mosquito borne infection that can cause very serious illnesses and in some cases death. Although the chances of getting sick are very low (1/5), some individuals may experience symptoms such as a fever, a headache, body aches, joint pain, vomiting, diarrhea or a rash, but the majority of people will have no symptoms (4/5). Individuals that are at greater risk of developing neurological symptoms are individuals who are 60 years old and older, have certain illnesses or medical conditions such as cancer, diabetes, hypertension, kidney disease and people who have received organ transplants.

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Recovery from these illnesses sometimes occurs without any type of treatment but those that have complications, have to go into the hospital for a period of time. There are no vaccinations or antiviral treatments for WNV, normally the recommendation is to use over the counter pain relievers to reduce fever and symptoms. Those who have to be hospitalized often are given intravenous fluid treatment, pain medication and nursing care.

Last year there were approximately 5,674 WNV cases in the United States. Seventy percent of those cases reported were in six states: Texas, South Dakota, Mississippi, Oklahoma, Louisiana and Michigan. Out of those 5,674 cases there were 286 deaths. Even though only 1% of individuals normally will have a neuro-invasive attack of WNV, 2,873 were diagnosed with neuro-invasive WNV and 2,801 were non-neuroinvasive, which is somewhat alarming. In NYS last year, there were 107 human cases and of those, 61 were neuro-invasive and 46 were non neuro-invasive there were 9 deaths associated with WNV in NYS; there was one individual in Cattaraugus County that was diagnosed with non neuro-invasive WNV.

With the wet and hot weather forecasted for the next several weeks, there is strong consideration to conduct an aerial application of larvicide. In the last 3 years, we have not sprayed larvicide for mosquitoes because we did not experience the wet weather that we are now experiencing. We will continue to monitor pooling areas and make a decision on whether to spray, although we do not have daily surveillance information as in the past, we were able to get out to our normal surveillance sites in the past two weeks, and noticed an increase in the larvae and pupae numbers in those pooling areas.

Dr. Watkins went on to say that residents should know that studies have shown that larvicide has very minimal or no adverse affect on their health, vegetations or animals. Larvicide spraying is conducted over large bodies of water and not directly over their homes although there may be some residual if there are high winds. There will be a public notice of when and where aerial spraying will be conducted and individuals concerned, should wash any vegetation prior to consuming. Those with respiratory conditions may want to stay indoors during spraying in case their condition is exacerbated secondary to the spraying.

Dr. Bohan questioned why volunteers could not conduct mosquito monitoring and surveillance. Mr. Wohlers stated that using volunteers is a great idea, but there is no money in the budget for supplies to set the traps; also they would not be trained to count and identify the mosquitoes to send to the State Lab for testing which is also very time consuming. There have been an increased number of complaints and if spraying occurs the municipalities that would participate would be the towns of Allegany, Carrollton, Great Valley, Olean, Portville and the cities of Olean and Salamanca. Because of budget cuts, the towns of Hinsdale and Randolph are not participating this year. Mr. Wohlers added that the larvicide has to be applied at an optimal time in order to be effective. The spray contractor was contacted yesterday and even if we wanted to spray, there is a shortage of product right now.

Dr. Watkins stated that local health departments are undergoing a new certification process called Public Health Accreditation which the State will use to measure performance against a nationally defined standard and recognize health departments that meet those standards. The main goal of the Public Health Accreditation is to advance the quality and performance of all health departments

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throughout the state and nation. In order to receive this accreditation we will need to fulfill at least three prerequisites: 1) the Community Health Assessment 2) the Community Health Improvement Plan and 3) the Strategic Plan. In 5-10 years, health department's federal and state funding will be tied to their accreditation status with a reevaluation every 3-5 years. The setback in achieving accreditation is the cost, which would be approximately \$20,000 for a county with our population size, but we are hoping to receive grant funding to reduce that cost. Cattaraugus County has completed Step 1 of the process which entailed an on line training and orientation session about the public health accreditation process. Dr. Bohan wanted to know if more personnel was needed in order to undertake this project, Dr Watkins stated that currently staff is stretched to their maximum and although we could certainly use more staff, we will do our best to work with what we have in order to get the task completed.

Dr. Watkins stated that the Community Health survey was completed on 6/21/13. The P² Collaborative of Western New York is tallying the surveys. He handed out a copy of the preliminary report that was released on 7/1/13. The Community Health survey will assist us in both the Community Health Assessment (CHA) and Community Health Improvement (CHI) plan. The CHA will give the State a description of the community's demographics and other pertinent information about the health, environment and social economic factors of our community. In developing the CHI plan we will need to collaborate with our local health care providers (hospitals), governmental and non governmental agencies and business to identify local health priorities and plan and implement strategies for local health improvements that will contribute to improving the health status of our community.

NYSDOH has required local health departments, hospitals and community partners to assess the health challenges within our community, identify local priorities, and develop and implement plans to address those priorities. We were asked to select two priorities from the State's five priorities Prevention Agenda 2013 list: Our choices includes the following: 1) prevent chronic diseases, 2) promote a healthy and safe environment, 3) promote healthy women, infants and children, 4) promote mental health and prevent substance abuse, and 5) prevent HIV, STD's, vaccine preventable diseases and healthcare associated infections. After we have chosen two, we will decide upon a focus area and chose measurable objectives in order to meet our target goals.

In the preliminary health survey that was distributed throughout the community, the top 5 priorities identified amongst the participants included exercise/activity, jobs, smoking/tobacco use, nutrition and transportation which indicates that the Health Department and hospital may want to focus our CHI plan on preventing chronic disease and promoting a healthy and safe environment.

Ms. Nichols gave a brief summary of the preliminary report. She stated that in the last two years a consortium was formed that consisted of consumers, CEO's, faith based organizations, school officials, community agencies, county government entities, etc. who participated in community conversations about their concerns in Cattaraugus County. In the Health survey, the top three health issues that were identified from the participants included health insurance, obesity/overweight, and physical activity.

Ms. Nichols stated that there was a discussion about health insurance at a meeting held with Olean General Hospital, Olean Medical Group, Universal Primary Care and other providers. There is

growing concern that deductibles and coverage in the Affordable Care Act law is going to drastically change, which is causing anxiety amongst residents who currently have insurance.

Ms. Nichols added that through the Community Transformation Grant an Activity Specialist was hired to work with day cares, preschools and elementary schools in Olean, Salamanca and Gowanda. The Activity Specialist will focus on integrated physical activity within the three schools. Also, there is an effort to see healthier snacks, more water and less or no sugary beverages in schools and sporting events.

In conclusion, Ms. Nichols said that the Health Department and the local hospitals have chosen two priority areas from the State's Prevention Agenda list, which are1) prevention of chronic disease, with a focus on prevention of obesity, especially in children, and 2) promote a healthy and safe environment.

For prevention of chronic disease, the hospital is focusing on diabetes prevention and managing diabetes and the health department is concern with cardio-vascular disease because it is the number one cause of death in Cattaraugus County. Complications that come with diabetes and cardio-vascular disease can be tied to obesity and perhaps tobacco use.

Ms. Nichols said that the Board already promotes healthy and safe environments by monitoring the environment of the residents of Cattaraugus County, which is our second priority. In addition to that, we have a tremendous falls prevention program in existence that we are expanding because we are finding so many people that fall and break a hip and the complications can be devastating. Many organizations are involved in developing the Community Health Assessment and Community Health Improvement Plan and also for the Accreditation.

Mr. Lapey commented that the Board should recognize that Ms. Nichols is a valuable employee of the Health Department. Mr. Brady also added that Ms. Nichols has for several years now participated in the annual Bike Safety Rodeo and healthy foods fair in Salamanca. For several years she has come and stood all day serving healthy foods to kids and their families who might not otherwise have those healthy foods. This year it was probably 100 children. Dr. Bohan added that her enthusiasm is contagious and the Board appreciates it. Dr. Watkins also added that it goes beyond Ms. Nichols, she is a valuable member of the Health Department, but the other health educators are just as enthusiastic about their work and go above and beyond to reach the number of individuals that need to be educated regarding health issues and we appreciate that division. He extended accolades to each division of the Health Department for doing a phenomenal job every day; environmental health, the nursing division, billing division and laboratory.

Nursing Division Report: Mrs. Williams reported that the Certified Home Health Agency census is at 352 patients. There were two post exposure rabies treatments this month. One person awoke to find a bat in his bedroom, it was captured and then put into the sewer system so it was not available for testing. The other individual had contact with a bat with his bare hands while doing siding work.

For immunizations, the 2013-2014 work plan for the immunization grant was completed and submitted to the State by the deadline of June 30, 2013. There are a number of goals and outcomes expected by the State that we will achieve for this grant period. The immunization rate is increasing

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in Cattaraugus County which is tied to the Centers for Disease Control outcomes.

There has been some increase in Legionella which is a waterborne bacterial disease. In New York State there have been 69 cases year to date. Of these 69 cases, 52 have been in Erie and Niagara counties combined and so far we have seen 2 cases in Cattaraugus County and there is currently an individual from Ellicottvile in Buffalo General Hospital. The State is investigating why there has been an increase in Legionella cases. In Cattaraugus County, of the two cases in June, one was an 84 year old male from Killbuck and the other was a 63 year old female from Machias. They were first hospitalized with community acquired pneumonia and then when diagnostic testing was done, they found them to have Legionella. They are both doing well at this time and have been treated with antibiotics. We will see what develops with this, but the State is keeping a close eye on it. They have been sporadic cases with no outbreaks.

Environmental Health Division: Mr. Wohlers reported that in June, July and August Environmental Health staff is busy with seasonal programs and neighbor complaints, anything from garbage to cockroaches. Also, a lot of staff time is spent on children's camps with pre-season inspections, water sampling and any additional inspections; any reported injury or incident has to be investigated. Each children's camp has safety plans and medical plans that have to be submitted for review, directors and staff of the camps have to go through a State clearance, a big work load this time of year for our staff. Also, every weekend there are festivals, carnivals, or other events that have temporary food stands that need to be inspected to be sure that no one is going to get sick eating at these events.

Mr. Wohlers added that all of the public bathing facilities need to be inspected and every time it rains special sampling trips are made to the beaches at camps and parks to determine whether bacteria counts are acceptable or facilities have to be temporarily closed.

It is also peak season for septic system work and contractors are doing a lot of new construction, so workload in that program tends to double in the summer time as well.

Mr. Wohlers mentioned at a previous meeting that there had been some neurologic illness among horses in the Amish communities. He stated that he was in contact with the State Department of Agriculture & Markets veterinarian who has been collecting specimens for submission to the State Lab for testing. All of the specimens that have been submitted to Cornell and the State Health Department Lab have all come back negative, so the cause of the illness remains a mystery and they are really disappointed that they are not able to determine what has caused these mysterious deaths. The good thing is that there have been no reports of any new illnesses. They are continuing to monitor it to try to figure out what was causing the problems, but there is nothing new to report.

There was discussion about aerial spraying for mosquitoes. Mr. Wohlers stated that on Monday one of the Sanitarians went out with the State technician and they found breeding pools that contained mosquito larvae in Limestone, Carrollton and Salamanca areas. As Dr. Watkins said, we are waiting for additional surveillance information that we hope will get today or tomorrow, but the problem is the contractor indicated to us this morning that the product is not available. The demand is so high and the distributors are low on product, but if he can find product he would have it shipped directly here so he doesn't have to transport it.

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Mr. Porter reported the following enforcement case for Board action:

DOCKET 13-016

TAPATHA HOLLAMBY, 1722 & 1726 Butler Avenue, Olean

Violations: CCSC, Article I, Part 11.7 Respondent failed to fully comply with all conditions of a stipulation offer signed in settlement of a Notice of Violation (Docket #13-008) on February 19, 2013. Notice of Hearing with no stipulation offered was mailed 5/30/13.

Administrative Hearing:

<u>Sr. Public Health Sanitarian</u>: Raymond Jordan appeared for CCHD and was sworn. Respondent:

Enf. 1 was read and affirmed to be correct by Mr. Jordan and identified as People's Exhibit #1. Mr. Jordan gave the following testimony:

Peo. Ex. #2 – original stipulation for docket 13-008 requiring compliance no later than 4/30/13.

Peo. Ex. #3 – letter to respondent dated 4/9/13 reminding the respondent of the agreed upon date of compliance.

Peo. Ex. #4 & #5 – Respondent applied for and was given two permits on 4/24/13 to connect both residences owned by the Respondent to the city's public sanitary sewer.

Peo. Ex. #6 – A copy of the ENF 1 on docket 13-008 dated 3/12/13 providing background of ownership.

As of 6/18/13 neither residence owned by the Respondent has been connected to the public sewer. Permits have been requested and paid for but the connections have not been made.

Hearing Officer finding: Respondent is in violation of CCSC, Article I, Part 11.7 – The

Respondent is in violation of the CCHD Sanitary Code Part 11.7 –

Failure to comply with all the conditions of a stipulation offer.

Recommendation: That the Respondent meets all the conditions of a stipulation offer

signed in settlement of a Notice of Violation (docket 13-008) on 2/19/13 on or before 7/31/13. Non-compliance will result in the placarding of both residences (1722 & 1726 Butler Avenue, Olean, NY 14760) requesting the owner and tenant to vacate the premises.

Mr. Haberer made a motion to accept the Hearing Officer's recommendation; it was seconded by Mr. Eade and unanimously approved.

Board Ordered: That the Respondent meets all the conditions of a stipulation offer

signed in settlement of a Notice of Violation (docket 13-008) on 2/19/13 on or before 7/31/13. Non-compliance will result in the placarding of both residences (1722 & 1726 Butler Avenue, Olean, NY 14760) requesting the owner and tenant to vacate the premises.

Ms. Vickman asked what the status was of the Lime Lake sewer district project because financing was approved and there now seems to be a delay. Mr. Wohlers stated that he will be meeting with DEC officials, Environmental facilities corporation officials and town officials on Wednesday, July 17, 2013 to try to identify alternatives to pumping the water to Franklinville because in order to provide enough water for sewage at Lime Lake to reach the treatment plant in Franklinville, as was the original plan, too much water could potentially be taken from the Great Lakes. This would violate a legal document called the Great Lakes Compact that was signed by 8 or 10 different states in addition to Ontario, Canada agreeing that no water within the Great Lakes watershed will be diverted out of the watershed. Lime Lake is fed by two springs; one flows north into the Great Lakes watershed and one flows south into the Gulf of Mexico. When everything was submitted for final approval, someone in Albany said that this water could not be diverted from the Great Lakes watershed into Ischua Creek. The district was legally created and the design is finished for building the collection system, what they don't have is a place now to treat it, so the project will have to be modified and the first meeting to resolve this issue will be held on the 17th.

Mrs. Stockman inquired as to whether the Health Department would get involved in a case where a resident in Versailles has connected to a public water supply system and then disconnected. Mr. Wohlers stated that he has provided copies of official state policies to the county attorney and he is advising the Town Board. There is a town law in affect that addresses this issue that the woman needs to comply with and it is in the hands of the attorneys.

There being no further business to discuss, Mr. Eade made a motion to adjourn. It was seconded by Mr. Lapey and carried to adjourn.

Respectfully submitted,

Kevin D. Watkins, M.D., M.P.H.

Secretary

KDW/km