



Public Health
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CATTARAUGUS COUNTY BOARD OF HEALTH

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MINUTES

June 6, 2012

The 806th meeting of the Cattaraugus County Board of Health was held at St. Bonaventure Clubhouse Restaurant, Route 417, Allegany, New York on June 6, 2012.

The following members were present:

Joseph Bohan, MD

Giles Hamlin, MD

Joseph Eade

Sondra Fox

Richard Haberer

James Lapey

James Snyder

Also present were:

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

Thomas Brady, County Attorney

Paula Stockman, County Legislator

Donna Vickman, County Legislator

Linda Edstrom, County Legislator

Richard Lamberson, County Legislator

Howard VanRensselaer, County Legislator

Gilbert Witte, MD, Medical Director

Karen Manners, Secretary to Public Health Director

Eric Wohlers, Environmental Health Director

Raymond Jordan, Sr. Sanitarian

Susan Andrews, Director of Patient Services

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 May 2, 2012 Board of Health meeting. It was seconded by Mr. Lapey and unanimously approved. Mr. Eade made a motion to approve the minutes of the March 7, 2012 Professional Advisory meeting. It was seconded by Mrs. Fox and unanimously approved.

Director's Report: Dr. Watkins reported that there have been a total of five applications from home health agencies submitted to the State to become certified agencies or to expand their services into our area. This month we will request permission from the Vacancy Committee to hire two personal

care aides to begin strengthening our agency against any potential setbacks from additional certified home care agencies operating in Cattaraugus County.

Dr. Watkins also reported that as of 3/31/12, there have been approximately 497 probable and confirmed cases of Pertussis (Whooping Cough) in New York State. There were 931 cases for the entire year in 2011. Cattaraugus County has not had any confirmed cases; however, we have had probable or suspected cases in the Amish community and Dr. Mast has treated them. Many of the cases seen in New York State are among adults.

Dr. Watkins went on to say that Pertussis is a mucous exudate that forms in the respiratory tract that compromises small airways, especially in young infants and they predispose these individuals to adverse affects, such as severe coughing, cyanosis, pneumonia and atelectasis, the collapse or closure of alveoli, or a complete or partial collapsing of the lung. Pertussis in adults is known to be significantly under diagnosed. Parents are often the primary source of Pertussis among infants less than 12 months of age so it is extremely important to identify Pertussis in parents in order to prevent transmission to vulnerable infants. Tdap, which is a vaccine for Tetanus, Diphtheria and acellular Pertussis should be administered to all unvaccinated pregnant women, preferably after 20 weeks of gestation to help protect their newborns. Nationwide, 63% of the infants less than 12 months of age with Pertussis are hospitalized and last year a child died in Cattaraugus County due to complications from this bacterium.

Family members exposed to Pertussis are treated with anti-biotics. Children should be vaccinated at 2, 4 and 6 months of age and then again at 16 months and 5 years of age. Because of the recent rise in the number of cases, the Advisory Committee on Immunization Practices (ACIP) is now recommending that a Tdap booster be administered to all adolescents and adults if they have not been vaccinated this year. An advisory has been sent to all local providers. Pertussis remains the most commonly reported vaccine preventable disease in the United States in children younger than 5 years of age. The Health Department will be working with Olean General Hospital to be sure that they are recommending vaccinations to women having babies.

Dr. Watkins stated that there has been a public health campaign to reduce childhood obesity. Obesity among children and adolescents has tripled over the past three decades. Currently a third of New York children are obese or overweight. The causes for obesity include genetics, biological, behavior, and cultural factors. Obesity occurs when the person eats more calories that the body burns. If one parent is obese, there is a 50% chance that the child will be obese and if both parents are obese, then there is an 80% chance that the child will be obese.

There are certain medical disorders that cause obesity but less than 1% of all obesity is caused by a medical or physical problem. We know that it is caused from poor eating habits, overeating and lack of exercise. There is also an increased diagnosis of psychiatric disorders in children, like bipolar, schizophrenia or autism and drugs used to treat these illnesses also can cause obesity in children. Stressful life changes such as divorces, moving from one area to another or a death in the family can result in childhood obesity. Nonetheless, we are seeing that the Body Mass Index (BMI) in children between the ages of 2 and 19 has significantly increased so this is being monitored in the schools. The schools in Cattaraugus County where the rates of obesity are most concerning are Allegany-Limestone at 21.3%, Ellicottville at 20.3%, Gowanda at 21.9%, Randolph at 21.2%, Salamanca at

20.7% and the Yorkshire-Pioneer Central School District at 19.2%.

Childhood obesity can have harmful affects to the body in a variety of ways causing high blood pressure and high cholesterol which are risk factors for cardio-vascular disease. There is also an increase in the impaired glucose tolerance or diabetes mellitus. Some of them are insulin resistant and some have developed Type II Diabetes. Childhood obesity also causes breathing problems such as sleep apnea, asthma, joint problems, musculo-skeletal discomfort, gastric reflux and fatty liver disease like gall stones.

In conclusion, Dr. Watkins stated that public health officials are looking for ways to reduce this health crisis that we are seeing amongst our children. Soda has already been removed from school vending machines, but now there is a campaign to remove fruit drinks with high fructose content which can be a contributor to obesity. Schools need to provide children more access to drinking water throughout the day and increase availability of healthier foods. Parents should limit screen time for their children because they are less active than if they were outside. Unhealthy ads that are on TV should also be regulated. The earlier we can begin to work on this public health crisis for obese children, the better the outlook will be on preventing future premature deaths in our society.

There was discussion regarding the NYS Department of Health and the State Education Department working together to promote physical fitness programs in schools. Unfortunately, these programs are usually the first to be cut when there is an economic downfall which then contributes to children not getting enough exercise.

Dr. Watkins informed the Board that applications will be sent to the four establishments that have Clean Indoor Air Act waivers for renewal at the end of this year. Health Department staff will visit these establishments to be sure that they still have proper ventilation systems. The establishments include the Ischua Valley Fire Department, Olean Off Track Betting, Rough Kutts in South Dayton and the Little Valley VFW. Dr. Bohan stated that it might be time to deny the waivers based on the fact that these establishments have had ample time to recoup any monies spent on renovations for the smoking rooms. Mrs. Fox agreed. Dr. Bohan suggested that information be brought to the Board at the next meeting as to how many years these establishments have had Clean Indoor Air Act waivers. Dr. Watkins agreed to get that information.

Nursing Division Report: There have been 3 cases of meningococcal meningitis in New York State and two of the individuals died; one was a 2 year old in Livingston County and the other a 19 year old in the eastern part of the State. We do have a vaccine for meningococcal meningitis that covers certain serogroups of the virus (i.e. Groups A, C, Y and W-135), however, one serogroup that is most common in the United States, Neisseria meningitidis serogroup B, is not covered by the vaccine. Note: Most cases of meningococcal disease are caused by serogroups B, C, and Y. Mrs. Andrews stated that it was recently announced that Norvartis is developing a vaccine that should be released soon and is supposed to be 90% effective against the sero (B) group. The Health Department offers the Menactra vaccine and it is available to all children who are uninsured or underinsured for free. If they are going to college and have insurance that will not completely cover it, we can provide it for \$113.00.

An individual has accepted the Nurse Practitioner position but cannot begin until the end of August.

There were 4 post-exposure rabies treatments given in May because of exposures to 3 bats and a cat. Mrs. Andrews reiterated that if people would just capture the bats so that they can be sent in for testing there would be no need for post-exposure treatments unless the bat was positive for rabies. It is very expensive and insurance companies do not cover the entire cost of the vaccine and if the individual does not have insurance, then the Health Department pays for the treatments.

There were no new lead cases in May and we are continuing to do follow up on seven cases.

The Home Care numbers have increased and we started a transition program with Olean General Hospital (OGH) to get better information, but there was a delay in starting this program because OGH was having computer issues.

Dr. Bohan commented that the Health Department should publish an article in the newspaper about what to do if someone finds a bat in their house or a raccoon on their porch. It might save on the number of post-exposure treatments if people knew what they should do. People probably do not know that they should capture the bat; they just want to kill it and get rid of it. Mr. Wohlers stated that the Health Department has done public service announcements in the past and there is information on our web site, but we need a new campaign to get information to the public.

Environmental Health Division: Mr. Wohlers reported that NeighborWorks Home Resources has been processing applications for the Community Development Block Grant that we received for another two-year period. One of the nine projects has been completed and the other 8 are going out to bid. We anticipate that we are going to have over half of the estimated 35-40 projects completed in 2012 and will easily be able to complete the other half in 2013 at the end of the grant period.

Mr. Wohlers said that Mr. Jordan is doing a lot of follow up with children's camp operators to be sure that they have everything in order to obtain a permit to operate. All of their directors have to be cleared through the State and their safety and medical plans have to be updated. Also, if they have bathing activities they have to have certified lifeguards on staff.

As is typical for this time of year, there have been a lot of bat specimens submitted to the State Lab for rabies testing and follow up conducted on a lot of animal bite reports. There have been a number of fairs, festivals and carnivals in communities where inspections were necessary for temporary food stands to operate.

Mr. Wohlers mentioned that although we do not have the staff to conduct mosquito surveillance this year, contracts are in place with DEC to do a larvicide mosquito spraying if necessary. We had a mild winter and breeding pools are relatively dry right now, but there are some isolated areas where we have received complaints about adult mosquito population.

The State Codes Division has scheduled training for code enforcement officials for June 15, 2012 in Ellicottville. The State Health Department and our office will be participating and providing training on private well and septic systems.

Dr. Bohan asked what conditions would trigger a larvicide mosquito spraying if there is no specimen collection or surveillance being conducted. Mr. Wohlers said that we would probably have to get a lot of precipitation, right now it has been unseasonably cool; there has to be a lot of standing water and a rise in water temperature before we would expect to see any larvae. We would do a few spot checks and if we see that there's a lot of influx of larvae all of the sudden, we do have the contracts and the public notifications in place to spray the breeding pools. Mr. Wohlers informed the Board that the Towns of Hinsdale and Randolph have opted out of the mosquito program this year.

Dr. Watkins reported the following enforcement case for Board action:

DOCKET 12-007

BUTTERNUT DG, LLC, DOLLAR GENERAL #6383, 5785 Route 219, Great Valley

Violations: 10NYCRR, Part 5, Section 5-1.72(c)(1) Respondent failed to submit complete daily records for the operation of the non-community water supply for the month of February 2012 to CCHD by the 10th day of the following month. Previous violations, Docket #'s 11-002, 11-009, 11-016. Notice of Hearing with no stipulation offered was mailed 3/22/12. It was received and signed for by Terri Phelan on 3/26/12.

Administrative Hearing:

Sr. Public Health Sanitarian: Raymond Jordan appeared for CCHD and was sworn.

Respondent: Phone hearing was held with Terri Phelan representing Respondent.

Enf. 1 was read and affirmed to be correct by Mr. Jordan and identified as People's Exhibit #1. Peo. Ex. #2 is a timeline prepared by Ms. Chris Covert from 3/17/09-5/7/12. The timeline addresses letters, emails and notices for Butternut DG, LLC to be in compliance.

As of the hearing held on 5/8/12 with Terri Phelan of Butternut DG, LLC, there has been no agreement reached on "Supplier of Water Designation" (identified as Peo. Ex. #3).

Ms. Phelan was informed that the February 2012 report had not been received nor had the March and April reports. Ms. Phelan committed on the phone conference call that the document identified as Peo. Ex. #3 would be signed and faxed to CCHD along with the April 2012 daily record before 5/10/12. As of 5/21/12, CCHD has not received the documents.

Hearing Officer Finding: The Respondent is in violation of 10NYCRR, Part 5, Section 5-1.72(c)(1) – failure to submit daily records for the operation of the non-community water supply and the "Supplier of Water Designation."

Recommendation: \$100 fine to be received by CCHD on or before 6/30/12 with a \$10 per diem fine if fine is not received by that date.

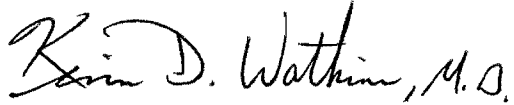
Mr. Eade made a motion to accept the Hearing Officer's recommendation; it was seconded by Mr. Haberer and unanimously approved.

Board Ordered: \$100 fine to be received by CCHD on or before 6/30/12 with a \$10 per diem fine if fine is not received by that date.

Dr. Watkins stated that since the first Wednesday of the month in July is July 4, 2012 and it is a holiday, if there are no objections, the next meeting will be held on August 1, 2012. Everyone agreed.

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

Respectfully submitted,

A handwritten signature in black ink that reads "Kevin D. Watkins, M.D.". The signature is written in a cursive, flowing style.

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

KDW/km