



CATTARAUGUS COUNTY BOARD OF HEALTH



Public Health
Prevent. Promote. Protect.
Cattaraugus County
Health Department
Established 1923

1 Leo Moss Drive, Olean, NY 14760, Tel. (716)373-8050, Fax (716) 701-3737

Joseph Bohan, MD, President

*Giles Hamlin, MD
Zahid Chohan, MD
Sondra Fox, RN
Richard Haberer
Theresa Raftis
David L Smith
James Snyder*

MINUTES

September 2, 2015

The 839th meeting of the Cattaraugus County Board of Health was held at The Point Restaurant, 800 East State Street, Olean, New York on September 2, 2015.

The following members were present:

Dr. Joseph Bohan
Dr. Zahid Chohan
Sondra Fox, RN

Richard Haberer
Theresa Raftis
James Snyder

Also present were:

Kevin D. Watkins, MD, MPH, Public Health Director
Mark Howden, County Attorney
Linda Edstrom, County Legislator
Carl Edwards, County Legislator
Paula Stockman, County Legislator
Donna Vickman, County Legislator
Gilbert Witte, MD, Medical Director
Dave Porter, Hearing Officer
Susan Andrews, Director of Patient Services
Kathy Ellis, Administrative Officer
Raymond Jordan, Sr. Public Health Sanitarian
Debra Lacher, Secretary to Public Health Director
Eric Wohlers, Director of Environmental Health
Rick Miller, Olean Times Herald

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

Mr. Snyder made a motion to approve the minutes of the Board of Health (BOH) meeting held on August 5, 2015, it was seconded by Ms. Raftis, and unanimously approved.

Dr. Bohan made a tribute to Mr. James Lapey, fellow board member who passed away on August 21, 2015. He stated that Mr. Lapey was a dedicated, hard working member of the board for more than ten years, and during his last year, he served as the Vice President of the organization. Whenever there was a committee formed that needed participants from the board he would always be the first to volunteer and was very generous with his time. Dr. Bohan asked for a motion to dedicate this meeting in Mr. Lapey's memory. Mrs. Fox made a motion to dedicate today's meeting in honor of Jim Lapey, seconded by Dr. Chohan, and the motion was unanimously approved.

DIRECTORS REPORT: Dr. Watkins reported that at the last meeting a question had arisen about what agency was responsible for inspecting nail salons. He was able to confirm that the New York State Department of State regulates the cosmetology industry. He added that in a report published in 2014 there were only (32) inspectors who are given the task to oversee the 5,000 salons in New York State, 2,000 of which are in New York City. Recently, in May 2015, Governor Cuomo ordered a multi agency enforcement task force to inspect nail salons across the state and implement new rules and guidelines to protect manicurists from potentially dangerous chemicals that are found in the nail products. This included beginning a six language education campaign in order to inform manicurists of their rights. Under the new rules manicurists must wear gloves in order to reduce the risk of contracting skin conditions such as fungal infections, warts and developing burns from handling these chemicals. Dr. Watkins added that the plan also requires a mask to be worn, but dust masks do nothing to prevent exposure to chemicals that are used with nail products. These chemicals have been linked to leukemia, and fetal defects, to address this, the law will require proper ventilation in order to reduce the chemical fumes. Dr. Watkins went on to say that the regulations addresses the wide spread exploitation of manicurists, and that salons will now be required to publicly display signs that inform workers of their rights including that it is illegal to work without wages, or to pay money for a job. A nail salon which doesn't comply will be responsible for back wages, and will be subject to their license being revoked and shut down.

Dr. Watkins informed the board that due to a recent outbreak of Legionnaire's disease, in the South Bronx, where (120) people were sickened and (12) individuals died, new state regulations were issued that mandates any owner of buildings in New York State with an existing cooling tower to register their cooling tower with the State Department of Health within the next thirty days. The effective date for having these cooling towers registered is September 17, 2015. A cooling tower is defined as a tower with an evaporative condenser, or a fluid cooler that is part of a re-circulated water system that's incorporated with the buildings cooling, refrigeration, or energy production system. This will also apply to all hospitals and residential health care facilities that are defined under Article 28. Owners of these facilities must collect samples and obtain culture testing by September 17th. Thereafter the testing will have to be performed every ninety days or in accordance with a maintenance program that the owner will have to put together. An immediate disinfection is required if the culture sample demonstrates a need. A maintenance plan must be in affect by March 12, 2016 this plan must include a schedule or routine sampling as well as procedures for emergency testing and disinfections to destroy the Legionella bacteria. All general hospitals and residential health facilities shall adopt a Legionella sampling plan for its facilities potable water distribution, report the results, and take the necessary responsive action.

Dr. Watkins went on to say that under the new orders, state and local health departments may enter on to any property in order to inspect the cooling tower for compliance with these requirements. If an owner does not properly register, certify, inspect, clean, or disinfect their cooling tower, state or local health departments may conclude that this constitutes a nuisance and may take such action as authorized by law. A violation of the regulation is subject to a civil and criminal penalty, and each day that an owner remains in violation of any provision, will constitute a separate and distinct violation.

Dr. Watkins explained that Legionnaire's disease is spread by water tainted with Legionella bacteria that is actually inhaled into the lungs which causes the Legionella pneumonia. Symptoms appear typically 2-10 days after exposure to the bacteria. Patients may develop pneumonia, and experience symptoms such as headache, fatigue, loss of appetite, diarrhea, and confusion. He stated that Legionnaire's disease requires treatment with antibiotics, and in most cases can be treated successfully. Each year there are 8,000-18,000 people that are hospitalized with Legionnaires disease in the U.S. In New York State, including New York City there has been 200-800 cases diagnosed every year. However many cases are not diagnosed or reported so the numbers could be much higher. He added that in Cattaraugus County we had (2) confirmed cases of Legionnaire's disease this year, neither had any travel history to New York City, and they have both recovered. In 2014 there were (2) confirmed cases, in both 2013 and 2012 there were (5) confirmed cases of Legionnaire's disease in Cattaraugus County. Dr. Watkins went on to say that several laboratory tests can be used in order to detect Legionella bacteria in the body; the most common is a urine test. The key to preventing Legionella disease is maintenance of the water system in which Legionella grows. This includes hot tubs, cooling towers, hot water tanks, large building distribution systems, and decorative fountains.

Dr. Watkins stated that an emergency declaration by New York State Department of Health, and an inter-municipal agreement with adjacent counties was enacted in order to respond to this recent outbreak in NYC. He stated that after reviewing the department's inter-municipal agreement that we have with our adjoining counties, we realized that our agreement needed to be updated, and approved by the Board of Health and county legislature. The agreement basically states that Public Health Law §347 authorizes an inter-municipal contract for responses to public health emergencies. If any event occurs and a particular health department cannot provide all the public health services that are needed within their county, this agreement allows them to call upon another county to provide the services that are required. He stated that the department's inter-municipal agreement is with seven other counties which include Allegany, Chautauqua, Erie, Genesee, Niagara, Orleans, and Wyoming. We have received the approval by the county legislators but the contract also requires approval by the Board of Health. Everyone in attendance at today's meeting was provided a copy of this agreement. Dr. Watkins asked the chair if he would entertain a motion to allow the Health Department to enter into an inter-municipal agreement with the seven other Western New York Health Departments. Dr. Bohan called for a motion, a motion was made by Mr. Haberer to allow the Health Department to enter into an inter-municipal agreement with the seven other Western New York Health Departments; the motion was seconded by Ms. Raftis, and unanimously approved.

Dr. Watkins reported that he received a report from Dr. Gall, entomologist at New York State Department of Health, which provided updated information on Lyme disease within Cattaraugus County. The report revealed precise locations and particular times of tick collection within Cattaraugus County. Dr. Watkins stated that the collection method called dragging occurred in Allegany State Park and Gargoyl Park. He explained that on June 11, 2014 from a location in Allegany State Park (Town of Red House), (3) nymph deer ticks were collected and zero were positive for the presence of *Borrelia burgdorferi* (the bacteria that causes Lyme disease). At the same location on October 14, 2014, (57) adult deer ticks were collected, of which (15) were positive for the presence of *Borrelia burgdorferi*, an infection rate of 26.3 %. Looking back at a report in 2013, NYSDOH collected (50) adult deer ticks at the same location, (20) of those were positive for the presence of *Borrelia burgdorferi*, which is a 40% infection rate. Comparing 2013 and 2014 infection rates of adult deer ticks in Allegany State Park, there was a 35% decrease in 2014. The report also included results from Gargoyl Park (City of Olean/Town of Allegany); on June 10, 2014 there were (53) nymphs deer ticks collected (8) were positive for the presence of *Borrelia burgdorferi*, an infection rate of 15%. A report in 2013 showed that there were (58) nymph ticks collected and (8) were positive for the presence of *Borrelia burgdorferi*, which is a 13.8% infection rate. Comparing the two infection rates it looks like the infection rate for nymph ticks in Gargoyl Park increased to 9.4% in 2014. NYSDOH returned to Gargoyl park on October 14, 2014 and they collected (50) adult deer ticks and (14) were positive for the presence of *Borrelia burgdorferi* which reflects a 28% infection rate. Looking back at a 2013 report, about the same time, NYSDOH collected (50) adult deer ticks and (18) were positive for the presence of *Borrelia burgdorferi* which is a 36% infection rate. Comparing the two infection rates it looks like the infection rate for adult deer ticks in Gargoyl Park decreased by 27.7% in 2014.

Dr. Watkins went on to explain that Lyme disease is caused by the bacteria, *Borrelia burgdorferi* and is transmitted to humans through the bite of an infected black legged tick or a deer tick. The natural bacterium that causes Lyme disease circulates between small animals that the tick feeds on and then the tick spreads the disease to humans.

He stated that the possibility of being bitten by a deer tick, is greater during mid-May to mid-August, when ticks are in the nymph stage and are about the size of a poppy seed. Adult ticks are approximately the size of a sesame seed, they are more active from March to mid-May, and from mid-August to November. Both nymph and adults can transmit Lyme disease. Typical symptoms include fever, headache, fatigue, and a characteristic erythema skin rash. If left untreated the infection can spread to joints, the heart, and the nervous system.

The duration of the time that is required for a deer tick to feed and transmit pathogens is anywhere between 36-48 hours. Lab tests are usually able to confirm Lyme disease, but occasionally the Enzyme-Linked Immunosorbent Assay (ELISA) test will have false positive results. Positive results can be confirmed by following up with a Western Blot test. Patients are easily treated with an antibiotic and can be cured of Lyme disease.

Dr. Watkins informed the board that Pennsylvania has led the nation in confirmed cases of Lyme disease for the last three years. In 2014 they reported over 7,400 cases. In New York State there were 2,887 cases of Lyme disease confirmed in 2014. Cattaraugus County has had (3) human cases of Lyme disease in 2012, (4) cases in 2013, (5) cases in 2014, and (15) cases in 2015.

He added that NYSDOH has seen a rise in the number of Lyme disease cases throughout the state this year. Locally we are seeing a mixed picture, the number of ticks collected with *Borrelia burgdorferi* (the bacteria that causes Lyme disease) in 2014 was down compared to 2013, but the number cases of patients with confirmed Lyme disease in 2015 has increased significantly over the last three years.

Dr. Watkins reported that we are gearing up for the influenza season. The composition for the 2015-2016 Influenza vaccine was selected by the Food & Drug Administration (FDA) on March 4, 2015. The composition will continue to be two influenza A's, and two influenza B's. The A/California, which is the H1N1 component that occurred in 2009, a new influenza A, the A/Switzerland which is the H3N2 component of the vaccine, B/Phuket is a new B strain added to the vaccine this year and B/Brisbane all make up the quadravalent components of this year's vaccine. A copy of the schedule where the Health Department will conduct influenza vaccine clinics throughout the county was passed out to everyone in attendance.

Dr. Watkins announced that Cattaraugus County was included in a \$50,000.00 grant that was secured by Senator Young that will assist the Cancer Treatment Prevention Program. Senator Young plans to present a check to Allegany and Cattaraugus Counties at a press conference on September 3, 2015 and Dr. Watkins will attend the press conference and share a few comments.

NURSING DIVISION REPORT: Mrs. Andrews commented that in 1998 there was a vaccine for Lyme disease, but it was withdrawn from the market in 2001. The drug was rolled out and received negative press coverage because of safety concerns. Right now there is only a Lyme disease vaccine for canines.

Mrs. Andrews reported that due to the fact there are ticks in this area physicians may prescribe a single dose of Doxycycline in cases where they feel a patient may have been exposed to the bacteria that causes Lyme disease.

Lead education has been taking place at a number of summer food events in areas like Randolph, Little Valley, Salamanca, and Olean. Our staff has presented fifty educational programs for that population. Our lead nurse also sent a letter to the common council members in Olean, informing them of a practice that occurred in Geneva, New York where the city worked with Social Services to require all properties that rented to residents who qualified for rent assistance to have their home inspected for lead before the residents are allowed to rent the home. This information was shared with the common council board in hopes that this practice could be utilized in Olean as well.

Homecare has started a work force strategy training with Millennium Collaborative Care Corporation a performing provider system, recognized by New York State Department of Health (NYSDOH) Delivery System Reform Incentive Payment (DSRIP) program. This strategy training will allow adoption of standard ways of practice that will involve increasing patient engagement, improving advance care planning, and other measures to help prevent hospitalization. The homecare census is (352) and an additional (32) patients are currently in our preventative health programs.

Mrs. Andrews reported there have been several cases of viral meningitis, but as far as she knows everyone has recovered except one patient who was transferred to Buffalo.

ENVIRONMENTAL DIVISION REPORT: Mr. Wohlers reported he has been doing some outreach to local facilities concerning the new regulations on cooling towers.

Mr. Wohlers reported that ground has been broken on Buffalo Street, where the new Olean Gateway project is going up and this development is moving forward.

Within the last few weeks the department has issued completed work approvals for a number of water projects. These included rebuilding the Randolph water tank, draining and cleaning of the Village of Ellicottville reservoir, transmission main replacement south of Arcade into the Town of Freedom, and currently waterline work on Depot Street in West Valley.

The fall rabies clinics are underway, the first one was held in Markhams yesterday, there will be one in Franklinville tomorrow, and the largest one will be held in Allegany next Wednesday.

Hearing Officer, David Porter reported on the following enforcement cases from a hearing held on August 18, 2015.

DOCKET 15-005

Adam Hayes, P.O. Box 149, Killbuck, NY 14748

Violations: Sanitary Code of the Cattaraugus County Health District, Article II, Sec. 25.2.8 Respondent failed to provide proof of current vaccination for rabies following a human biting incident.

Administrative Hearing: 8-18-2015

Hearing Officer Findings: The respondent is in violation of Sanitary Code, Article II, Section 25.2.8 failure to provide proof of current vaccination.

Recommendation:

1. That the respondent pay \$150.00 fine by September 30, 2015.
2. The respondent provide proof of vaccination of his dog by September 30, 2015.
3. Failure to pay and provide proof of vaccination for his dog will result in a \$10.00 per day per diem after September 30, 2015.

A motion was made by Ms. Raftis regarding docket 15-005 to accept Mr. Porter's recommendation, seconded by Mr. Haberer, and unanimously approved.

DOCKET 15-014

David Miller, 5 MKIN, LLC, 8765 Stahley Rd., East Amherst, NY 14051

Violation: Location 5651 Humphrey Rd., Great Valley, N.Y.

Previous Docket dated 12-3-14

Violations (2)

-Sanitary code of CCHD Part 11.7 respondent failed to comply with the stipulation agreement signed by the respondent on 12-3-14

-Sanitary code of CCHD Article 11 Section 16.6.1 discharge of inadequately treated sewage found on the ground during an inspection on 4-5-2015.

Administrative Hearing: 8-18-2015

Hearing Officer Findings: The Respondent was in violation of the two violations stated.

Recommendations: That the CCHD consider docket 15-014 closed as respondent complied.

A motion was made by Mr. Haberer in regards to docket 15-014 to consider the docket closed, seconded by Mrs. Fox, and unanimously approved.

DOCKET 15-018

Respondent: Roseanne Hopkins, 115 S. 12th Street, Olean, N.Y. 14760

Violation: Sanitary code of CCHD Article 11 Part 25.2.8 Respondent failed to submit required rabies vaccination after a human biting incident.

Administrative Hearing: 8-18-2015

Hearing Officer Findings: The respondent is in violation of CCSC Section 25.2.8. Respondent did not submit evidence of rabies vaccination after a biting incident. CCHD personnel visited the respondent, checked on the well being of the person bitten (respondent), checked on the well being of the dog and explained the seriousness of compliance for animal vaccination.

Recommendations:

1. That the respondent pay a \$150.00 fine by September 30, 2015.
2. The respondent provides proof of vaccination of her dog, Dempsey, Bassett by September 30, 2015.
3. Failure to pay and provide proof of vaccination for her dog will result in a \$10.00 per day per diem after September 30, 2015.

A motion was made by Dr. Chohan regarding docket 15-018 to accept the recommendation of Mr. Porter, seconded by Ms. Raftis, and unanimously approved.

DOCKET 15-020

Randy G. Korkowicz, 44 East Main Street, Allegany, NY 14706, Randy's Up-The-River, 3767 S. Nine Mile Rd., Allegany, N.Y. 14706

Violations (3)

- a.) 10NYCRR Part 14-1.10 (b) (2) at the time of inspection the potentially hazardous products in the sliding glass door cooler were found to be between 50 degrees- 51 degrees Fahrenheit.
- b.) 10NYCRR Part 14-1.44 the sliding glass door cooler was not maintaining adequate refrigeration temperature at time of inspection. Reason-walk in cooler was found to be filled beyond capacity.
- c.) 10NYCRR Part 14-1.83 at time of inspection a potentially hazardous product was being reheated by a method not capable of heating from refrigerated temperature to 165 degrees Fahrenheit within two hours.

Administrative Hearing: 8-18-2015

Re-inspection on 8-20-15 showed the repaired 2 door glass sliding cooler to be holding correct temperature.

Hearing Officer Findings: The respondent is in violation of the findings (3) found at the time of the food service establishment inspection dated 7-21-15.

- 1.) Sliding glass door cooler had products at 50-51 degrees F.
- 2.) Sliding glass door cooler is being used past capacity.
- 3.) Reheat method not meeting state sanitary code effective 1-8-97

Recommendations: 1.) Respondent expands cooling/ cold storage facilities to meet the state sanitary code date 1-8-97 by moving the draft beer kegs from the present cooling system to a new cooling system. Identify, obtain and implement by 11- 3-15, a new draft beer cooling system.

2.) The respondent be fined for (3) violations, all category two, and 1st offenses. (3) Violations x \$50.00 per violation = \$150.00. The fine should be paid by 9-30-15. A \$10.00 per day per diem will be levied for every day after 9-30-15 that the fine is not paid.

A motion was made by Mrs. Fox to accept the recommendation of Mr. Porter for docket 15-020, seconded by Ms. Raftis, and unanimously approved.

DOCKET 15-021

Randy G. Korkowicz, 44 East Main St., Allegany, NY 14206, Randy's Up-The River Catering.

Violations (2)

- a.) 10NYCRR Part 14-1.40 (a) during routine inspection at the respondents catering operation, potentially hazardous food was found stored in hot holding units between 45-140 degrees F.
- b.) 10NYCRR Part 14-1.143 (a) respondent failed to provide adequate hand washing facilities for his employees during an off-site catering operation.

DOCKET 15-021 (continued):

Administrative Hearing: 8-18-2015

Hearing Officer Findings: The respondent is in violation of
1.) Potentially hazardous food found stored in hot holding units between 45-140 degrees F.
2.) Absence of adequate hand washing facilities for employees during off-site catering operations.

Recommendations: Fine (2) categories (2) violations, each violation is \$50.00 for 1st offense.

Two violations x \$50.00/violation=\$100.00 to be paid on or before 9-30-15. A \$10.00 per day per diem will be levied for every day not paid after 9-30-15.

Fix catering vehicles to provide hot/old adequate hand washing facilities for employees during off-site catering. Complete prior to next catering job per Randy Korkowicz.

A motion was made by Dr. Chohan to accept Mr. Porter's recommendation for docket 15-021, seconded by Mr. Haberer, and unanimously approved.

DOCKET 15-022

Darel Tingue, Corner Sports Bar & Grill Inc., 8383 Kingsbury Hill Rd., Franklinville, NY 14737. Violations (4)

- 1.) 10NYCRR Part 14-1.120 during routine water monitoring on 11-18-14 it was found that the permanent disinfection equipment was not operational. A boil water notice was instituted and still in effect.
- 2.) 10NYCRR Part 14-1.195 respondent has not granted access to a Health Department Representative since 5/16/15. To date the respondent has not allowed routine inspection and collection of the required re-check bacteriological water samples.
- 3.) 10NYCRR Part 5-1.71 (b) respondent has failed to exercise care and due diligence in the operation and maintenance of the public water supply system by failing to repair the equipment and make necessary steps to ensure an adequate and safe supply.
- 4.) 10NYCRR Part 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 June 2015 to the office by the 10th day of the following month.

Administrative Hearing: 8-18-2015

DOCKET 15-022 (continued):

Hearing Officer Findings: The respondent under Docket 15-022 is in violation of (4) serious charges.

- 1.) Permanent disinfection equipment not operational creating an on-going boil water notice.
- 2.) Not granted access to the Health Department Representative to conduct a routine inspection and collect samples.
- 3.) Respondent has failed to exercise care and due diligence to keep public water supply system in repair and take necessary steps to ensure an adequate and safe supply.
- 4.) Fail to submit complete daily records for the operation of the non-community water system for the month of June 2015.

Recommendations:**Fines recommended:**

- | | |
|-----------------------------|---|
| a.) Violation #1 Category 2 | \$100.00 |
| b.) Violation #2 | \$ 0.00 |
| c.) Violation #3 Category 2 | \$100.00 |
| d.) Violation #4 Category 2 | <u>\$100.00</u> |
| Total | \$300.00 Must be pd. on or before 9-30-15 |

- 1.) Equipment- Have permanent disinfection equipment operational by 9-28-15.
- 2.) Testing- Two consecutive water samples must be taken 24 hours apart before noon 9-30-15.
- 3.) With the respondent complying with all the recommendations prior to 9-30-15 then The Sports Bar and Grill permit to operate will be considered with an application permit.
- 4.) A \$10.00 per day per diem will be levied for every day after 9-30-15, that the fine, equipment and testing are not complete.
- 5.) Failure to comply with ordered terms will result in closure and placard of the Corner Sports Bar & Grill, Inc. on October 1, 2015.

A motion was made by Mrs. Fox to accept Mr. Porter's recommendation on docket 15-022, seconded by Ms. Raftis, and unanimously approved.

DOCKET 15-023

Timothy Farina, 10110 Rt. 242, Little Valley, NY 14755

Violations: CCSC Sec. 25.2.8 respondent's dog was involved in a human biting incident. Respondent did not submit evidence of a rabies vaccination certificate by the prescribed deadline.

Administrative Hearing: 8-18-2015

DOCKET 15-023 (continued):

Hearing Officer Findings: The respondent is in violation of CCSC Sec. 25.2.8 respondent did not submit evidence of rabies vaccination after a biting incident. CCHD personnel visited the respondent, check on the well being of person bitten, check on the well being of the dog and explained the seriousness of compliance for animal vaccination

Recommendations:

1. That the respondent pay a \$150.00 fine by 9-30-15.
2. The respondent provide proof of vaccination of his dog Eli, Pit-bull, by 9-30-15.
3. Failure to pay and provide proof of vaccination for his dog will result in a \$10.00 per day, per diem after 9-30-15.

A motion was made by Ms. Raftis to accept the recommendation made by Mr. Porter for docket 15-023, seconded by Mrs. Fox, and unanimously approved.

DOCKET 15-024

Nicole Ellis, 5437 Kyler Hill Rd., Little Valley, NY 14755

Violation: CCSC Sec. 25.2.8 respondent did not submit evidence of rabies vaccination by a prescribed deadline, after a human biting incident.

Administrative Hearing: 8-18-2015

Hearing Officer Findings: The respondent is in violation of CCSC 25.2.8 respondent did not submit evidence of rabies vaccination after a human biting incident. CCHD personnel visited the respondent, checking on the well being of the person bitten, checking on the well being of the dog and explained the seriousness of compliance for animal vaccination.

Recommendation:

1. That the respondent pay a \$150.00 fine by 9-30-15.
2. The respondent provides proof of vaccination of her dog, Si, Pit-bull, by 9-30-15.
3. Failure to pay and provide proof of vaccination for her dog will result in a \$10.00 per day per diem after 9-30-15.

A motion was made by Dr. Chohan to accept the recommendation of Mr. Porter, seconded by Ms. Raftis, and unanimously approved.

DOCKET 15-015

George and Elizabeth May, 5447 Ashford Hollow Road, West Valley, NY 14171

Violations: Sanitary Code of the Cattaraugus County Health District, Article II, Sec. 16.6.1. After investigating a complaint, inadequately treated sewage was found to be discharging onto the surface of the ground in the respondent's front yard. Property was to be vacated by 6-5-2015.

Dr. Watkins reminded the board that last month the BOH decided to adjourn docket-15-015 for one month to allow the respondents attorney and the health department to work out a proper notification to the lending institution about the possibility of placarding the residence and to pull the civil compromise. The family has now moved out of the residence, and the property has been vacated since July 13, 2015. Dr. Watkins asked the chair to entertain a motion to placard the residence, until a new sewage system has been installed.

Mr. Haberer made a motion to accept the recommendation to placard the residence, the motion was seconded by Mr. Snyder, and the motion was unanimously approved.

Mrs. Fox reported that there will be a number of trainings for anyone in the community that has an interest in the Suicide Prevention Coalition; there is one at the library tomorrow but that one is completely full. There will be additional trainings available and the contact person is Meghan Monahan who is at the counseling center, her contact number is 716-701-3315. Mrs. Fox also shared that there will be an Out of Darkness Walk, held at Good Times on September 12 at 3:00 pm. This is a fundraiser for Suicide awareness. In addition Mrs. Fox stated that she hoped in the near future, to be able to offer a short fifteen minute training in Suicide Prevention after a BOH meeting for those that would be available to attend.

Dr. Bohan reported that the nominating committee comprised of Mrs. Fox and Ms. Raftis would be meeting in order to bring the board a name of a new nominee to replace the vacant Vice President seat on the board.

Dr. Watkins also reported that the vacant position that was held by Mr. Jim Lapey was an appointed position for the City of Salamanca and he will reach out to the Mayor of Salamanca, Ron Ball, for three nominees.

There being no further business to discuss, a motion to adjourn was made by Dr. Chohan, and seconded by Mr. Haberer and unanimously approved.

Respectfully submitted,



Kevin D. Watkins, M.D., M.P.H.
Secretary to the Board of Health
KDW/dl



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Cattaraugus County Health Department Certified Home Health Agency

Professional Advisory

July 15, 2015

Present:

Dr. Kevin Watkins, P.H.DIR., BOH
Dr. Gilbert Witte, Medical Director, BOH
Sandra Fox, RN
Susan Andrews, DPS
Elizabeth Bless, MSW

Deborah Pettinato, MRT
Barb Parish, RN
Carrie Ruffner, PT
Moira Kettry, Case Manager

Absent: Dr. Giles Hamlin, Carly Woodhead, SLP, Mary Faye, NUT, Tim Mager, OT

I. The Professional Advisory meeting was held in the Cattaraugus County 2nd floor conference room on Wednesday July 15, at 12:30PM. Attendance was taken as recorded above.

II. Review Tier 1 Potentially Avoidable Events

a. Emergent care for Injury Caused by Fall

(1) 75-year old female referred from hospital status post dehydration and diarrhea. Patient lives with son. The fall risk assessment was positive. Skilled Nursing (SN) and Physical Therapy (PT) were started timely and policies and procedures were followed. Patient progressed from her walker with one assist to being able to ambulate 200 feet without her walker. On 3/26 patient had a fall. There were no documented details of her fall. Patient was evaluated at the Emergency Department and then transferred to Nursing Home. We resumed services on 4/11, and discharged her on 4/22 with goals met. This was not identified as a potentially avoidable event, as appropriate interventions had been implemented but lack of fall details hindered review.

(2) 90-year old female with aortic stenosis who lives in an adult home. Patient was identified as a fall risk and SN and PT were started. Fall Risk Policies and Procedures were followed. It was reported that she became dizzy and fell. Adult Home Staff was nearby. Her fall resulted in a head laceration. We did not identify this as a potentially avoidable event, but felt the patient possibly needed a higher level of care. Patient went to the emergency room after her fall and was admitted to a higher level of care.

(3) 78-year old female who was referred from hospital with cellulitis and urinary tract infection. Patient was identified as a fall risk. Fall Risk policies and procedures were implemented. SN and Home Health Aide (HHA) were started. Patient declined PT and Occupational Therapy (OT). Patient fell at home on 2/27 prior to first home care visit on 2/28. Patient had notified MD of fall. On 2/28, SN observed patient ambulating. Patient was then admitted to hospital on 3/2 due to a fall and pulmonary embolism. We resumed patient's services on 3/23 with SN, PT and OT. Quality concerns include manner in which therapy services were presented, ways to encourage acceptance of therapy at start of care and continued lack of details surrounding falls.

(4) 54-year old male with diabetes and history (Hx) of seizures, who lives alone was admitted for wound care. Patients Fall Risk Assessment was negative, no functional concerns were noted and patient was not homebound. Patient's only service was SN. Patient became dizzy and fell to floor. He went to Emergency Room and was admitted for observation, no injury was noted. He returned home with our services and PT was started. He was independent with straight cane when discharged. We did not identify this, as a potentially avoidable event, as there were no indicators of risk or instability.

b. Emergent Care for Wound:

(1) Patient with diabetes and wound infection on admission. SN was providing wound care daily in home and patient was seen by wound clinic weekly. Patient did not follow recommendations for blood sugar control, or keeping legs elevated. We did not identify this as a potentially avoidable event due to patient's lack of compliance with plan of care.

(2) Patient referral from MD office. SN notified MD of wound infection on first visit. MD ordered warm compress and topical antibiotic. Quality concerns; identified that wife was doing wound care, but there was no documentation that she had been taught and observed, and concerned that MD had not appreciated the true status of the wound – perhaps nurse could have requested alternate treatment.

III. Review Active/Closed Record: The results of the Pain Audit's were reviewed. Susan noted that we improved in some areas and worsened in others. The interventions that we started since our survey have not been consistent and have not shown improvement. Barb is having a meeting today with the nurses and this is one of the issues that are going to be addressed.

IV. Patient Satisfaction

a. Home Health Consumer Assessment Health Provider Systems Comparison Charts for first quarter 2015 and second quarter 2015 were reviewed. Susan noted that we went down a little from 1st to 2nd quarter with "discuss all meds" but went up with "see all meds". Calling the office for help/advice was at 100%. Respectful Care was rated at 95%. Also 86% of patients surveyed would give us a rating of 9 or 10 on a scale of 10 and 88% would definitely recommend us.

b. Patient Complaints – We had one patient complaint for first quarter 2015 and 0 for second quarter 2015.

V. Agency Occurrences 2nd Quarter 2015:

a. Patient Harm/ Injury – (Other than Potentially Avoidable Events) we had no actual injuries but two potential injuries.

(1) Contracted LPN (Licensed Practical Nurse) did not monitor temperature daily on a wound care patient.

(2) Wound vac ordered by MD to be discontinued on 5/23 but SN misunderstood the MD's orders and did not discontinue wound vac until 5/25.

b. Medication Errors: We had 0 medication errors reported for this quarter.

c. Missed Visits: Missed visits were largely related to HHA's from contracted Licensed Home Care Agency this quarter.

d. Staff Injury – (1)

(1) Dog bite – SN - no serious injury

VI. New/Revised Policies

We received our new INR (International Normalized Ratio) monitoring instruments. Staff training competencies is occurring now and a new Policy and Procedure is under development.

VII. Other Business

a. Centers for Medicare and Medicaid Services (CMS) is using a star rating to rate Home Health Care Agencies. Currently our rating is 3.5 stars out of 5. This rating is based on OASIS data that we submit to CMS. As of today this rating has not been released to the general public. Also CMS has a Quality Assessments Only (QAO) report score for home health agencies. Each agency's score must meet or exceed the standard score of 70. Our score is 87.3. This is also based on the data we submit to CMS.

b. Advertising/outreach – Samples provided of pens ordered to promote Cattaraugus County Health Department Home Care Agency.

IX. Adjournment

Next meeting will be October 21, 2015



CATTARAUGUS COUNTY BOARD OF HEALTH



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COUNTY OF CATTARAUGUS STATE OF NEW YORK ENFORCEMENT LIST

Hearing Officer: David Porter
September 8, 2015

DOCKET 15-025

Reid Stores, Inc., P.O. Box 987, Lockport, NY 14095, Store location 3511 Rt. 16, Hinsdale, NY
Violation: New York State Public Health Law Section 1399-cc. Tobacco product sold to a person under the age of 18.

Note Previous Docket 14-034

Administrative Hearing: 9-8-2015

Public Health Sanitarian: Chris Covert appeared for CCHD and was sworn in.
Respondent: Was properly served but did not appear.

Testimony of Ms. Covert:

- a.) Enf.-1 was read and affirmed to be true and correct by Ms. Covert identified as Peoples Exhibit #1. Respondents were offered a civil compromise.
- b.) Cigarettes purchases identified as P.E. #2.
- c.) Possession form (minor) identified as P.E. #3.
- d.) Drivers license (minor) identified as P.E. #4.
- e.) Training supplied to minor identified as P.E. #5.
- f.) Birth certificate of minor identified as P.E. #6.
- g.) Student permission form identified as P.E. #7.

The staff selling the product had been through a department certified training course. Sales clerk asked for identification, reviewed, handed it back to the minor and made the sale.

Hearing Officer Findings: The respondent was in violation of New York State Public Health Law Section 1399-cc. Selling tobacco products to a person under the age of 18.

Recommendation: That the respondent pay a \$1200.00 fine plus a \$50.00 surcharge by 9-30-15 with a \$10.00 per day per diem if not paid by that date. One (1) point will be assigned to the store that sold the product to the minor.