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AGENDA / MINUTES

Committee/Project/Meeting:	Genesee-Orleans Board of Health		
Date:	December 5, 2023	Recorder:	Samantha Weber
Time:	4:00 p.m.		
Location:	Genesee County Health Department/Zoom		

Attendance: Paul Grout, Kelly Nichols DO, Deanna Page, Gregg Torrey, Mary Obear DR., Fred Miller, Paul Pettit, Brendan Bedard, Kimberly Castricone, Scott Senf, Darren Brodie, David Bell, Kaitlin Pettine, Debra Krenzer-Lewter, & Kristine Voos.

<u>AGENDA / TOPICS</u>	<u>DISCUSSION (CONCISE SUMMARY)</u>	<u>ACTION / NEXT STEPS</u>
Minutes from October 3, 2023		M: Kelly Nichols, DO S: Deanna Page
Public Concerns/Discussions/ Presentations	<p>Paul Grout: Public concerns. Paul Pettit: Water issues in Bethany.</p> <p>Darren: we got a call from the supervisor of the town of Bethany. That he has been receiving complaints for a number of months and then it ramped up to the point when we had spoken to him. When we initially spoke with him had had 52 homes without water in the town of Bethany. Private wells. A few days later it was up over 100. Not currently sure what the number is now. It escalated quickly. There isn't much on the Health Department side of things we can do for that – it is public water. The best thing moving forward is to point them toward Emergency Management. They ended up getting State Stock pile portable water tanker; that they parked at the town hall; with the corporation of Genesee County to haul it back and forth from the Batavia City water facility to fill as needed.</p>	

After I had talk to them; which was at the very end of last week they had gone through the initial, I think it was what 6,000 gallons?

Paul Pettit: "Ya - ya"

Dr. Nichols: "that is crazy that like"

Darren: "well I don't, it's a very narrow window of being able to get water."

Dr. Nichols: "Oh"

Darren: "So, ya so as far as getting all of that; ya there was arguable a better method but they have water..."

Fred: "ya that they could get their hands on."

Darren: "ya and I am sure they appreciate that. But um"

Dr. Nichols: "so people would come with their personal containers?"

Darren: "ya, so it's like a big semi tanker – big one steal - full of portable water and they have hook ups for people to full jugs or whatever else. Of course we told them the second its leave the tank it's not portable water!

Paul Pettit: "We done know what you are filling it up with."

Dr. Nichols: "right"

Darren: "but it was there for that purpose, I think a lot of people were against our advice when you fill up to take it back and fill up your well – which is not going to do anything but you know – when people are desperate, they do desperate

things so. This was literally the day before Thanksgiving so I am sure their plans were already cancelled and they were going to be doing something else. I have not heard anything since. Other than me reaching out to a supervisor, and he gave me an update that they were having another open event for people to come get water, but it's not just a free for all, which I kind of can't be, because you don't want people messing with it!"

Dr. Nichols: "right"

Darren: you don't want someone just leaving it on - just running it out into the parking lot all night but...

Dr. Nichols: well that would just go back into the water table.

Darren: that's true; eventually... So ya, it's kind of..."

Dr. Nichols: it looked like someone had donated bottle water.

Darren: could be, ya. He had been contacting media outlets.

Dr. Nichols: Because that's the big thing, you don't need them putting it into something sketchy. Because that could be causing an even bigger problem.

Darren: Right – like a barrel that's been in the garage... That hasn't been touched for years, there is no way to know what could have been in that. We tried to have him "tell your residents – that it's probably not drinkable... its drinkable right here (at the tanker site) But we cannot guarantee it with

anything. As far as Pembroke goes I know there was an issue back – one of your people here they had their well run dry. But not anything to the level that of Bethany. Nothing occurred about it at lease. Again it's all antidotal. Till me get a call from somebody.

Deanne: so you didn't get a call from Roanoke?

Darren: I may have gotten back there actually, ya.

Deanne: I would imagine they are looking for a whole lot of help. They are hauling 60,000 gallons in a date...

Darren: Wait that is in Bethany.

Deanne: They are on the corner of 20 and East road.

Darren: "right"

Deanne: they are right there.

Darren: I did talk with them. That is one of the people I did speak with.

Deanne: Marks has them off on a different side road but.

Darren: Ok.

Deanne: 60,000 gallons of water a day is a lot of water.

Darren: it's a lot of water.

Dr. Nichols: that is crazy for this time of year.

Deanne: ya

Darren: yes, I mean at the very least I think it underscores our need for public water throughout the county.

Paul Grout: Who? I know it would be the county; but as far as setting them up to be a water district and being able to patch into one of the main lines;

Gregg: So they have...

Paul Grout: are they that far away that it would be a...

Gregg: Bethany is all set they just have a plumbing gap they have to fill and get approval.

Darren: Ya.

Paul Grout: and Bethany is the biggest problem correct?

Darren: Ya, I spoke with one or two from East Bethany and they didn't have an issue yet so it seems to be really concentrated out over on that side of town. It's a matter of, it's not really, we would always support a water district, but they have to do the leg work. Ask us for – it's just not how the process works.

Paul Grout: and they probably have to pay for it too.

Darren: right – sure. They have to agree to it. I know it generally starts with a canvassing of residents – you have one resident that picks up the slack and goes door to door and getting people to sign and that is just kind of how the process gets started. So all of that has happened – it's all approved but we have not received anything yet. So we would give them a letter of support which we would. On their end they need to get the funding and all of that lined up.

They want to do some sampling... It's kind of...

Paul Pettit: The hardest part... They let us know when they are going for the funding to ask for us to sign off; but there is a need right now!

Gregg: I think they are ready for that...

Paul Pettit: ya! Unfortunately it will probably them a year of two.

Paul Grout: ya, once they start that process.

Paul Pettit, So they are going to be without water for a while.

Darren: So that tanker of water lasted them for 30 days. I mean it might be sitting there for a month, I don't know if that is just always 30 days...?

Gregg: Ya – its 30 day renewals.

Darren: ya – so I mean I know it only goes so far.

Paul Grout: I would assume there is water right up 63 (route) isn't there? So it's just matter of...

Paul Pettit: we have a map of what you mean.

Darren: ya there is a big black hole of no water out there – its grid 20 and there is no water.

Dr. Nichols: Some of us live in the black hole. The water comes close to town, but we have spectrum. So we can't complain.

Paul Pettit: No water but we have cable!

Dr. Obear I'm on Lover Lane in Pembroke, there is no water on the road, there is water on Rt. 5, Rt. 77, Cohocton rd. and Lake rd.

Paul Pettit: All around you.
Do., Nichols: But it's usually the people that live on that road that have to be willing to pay extra.

Dr. Obear, unless they is something to qualify
Paul Grout: Low income bracket.

Dr. Obear. Right.

Darren: ya depending on what the graphic – it's based on need which sometimes requires taking of a water sample. We have had some consulting firms get creative and ask us for historical data, and based on that... which we have provided them as well. As in Historically we have this. Which can be a bit loosely goosey at that point... we don't have actually numbers. We are basing it on things that happened years ago.

Dr. Obear: Well I figure it's coming soon. Because I just started digging a new well...

Dr. Nichols: That's it you did it! That was the voodoo doll to get water.

Darren: The rest of your future district thanks you.
Laughter

Dr. Obear: I don't think so... And lot of people don't want to pay for it. Now they have a whole in the ground and water coming out.

	<p>Darren: Ya but some of them don't have water.</p> <p>Dr. Nichols: ya</p> <p>Deanne: ya, until you lose it.</p> <p>Dr. Nichols: it's all fun and games till your shower water trickles.</p> <p>Darren: Right!</p> <p>Deanne: or the water is so frick'n hard eats everything out.</p> <p>Dr. Nichols or all of your appliances break every three years.</p> <p>Deanne: ya everything, you got to replace everything in about three years but it's; you know.</p> <p>Dr. Obear: Well when mine went dry I couldn't find anyone who wanted to dig a new well.</p> <p>Dr. Nichols: wow</p> <p>Dr. Obear until we called and said to a certain party its Dr. Obear and I think it will be two or three weeks. He said I will be there in ten minutes.</p> <p>*Laughter*</p> <p>Dr. Nichols: there you go.</p> <p>Paul Grout: Any other Public Concerns?</p> <p>Deanne: that one is big enough!</p> <p>Paul Grout: that is a big one Yes.</p>	
<p>Division Reports</p> <ul style="list-style-type: none"> Community Health Report 	<p>Paul Grout: Ok Brendan.</p> <p>Brendan: Alright</p> <p>Communicable Disease:</p>	

We are seeing a little bit of increase in some blood borne pathogens.

A few weeks ago we put out an advisory on the increase of RSV. There have been increase in cases and evidence in our wastewater. Updates on our website and more information on that.

Another advisory we put out as well regarding increase in syphilis in both counties. Accentually one of the concerning things on that was it was more so in the MSM population but is now more so in the heterosexual population. So now both Males and Females.

Dr. Nichols: is it resistant?

Brendan: No. But the problem is we have now seen congenital syphilis in both counties. We had one case last year and one case this year in Genesee county. That was kind of a reason behind getting that information out to get the awareness out there. Anyone one that knows someone that is pregnant to have them get tested.

Migrant outreach we just finished that up in Orleans county in mid-November. We gave approximately 670 vaccines this season to migrant workers. We only had one nurse going out so that was a lot of work for one person.

Our Immunization clinics are fairly slow. But we did see a little bit of an increase in the last few weeks in regard to the kids getting letters that they will be kicked out of school unless

they get certain vaccinations. So we have been scheduling appointments for that.

Dr. Nichols: Because the nurses used that parent teacher conference date to clean out their records! It happens every year at Thanksgiving.

Brenden: It's not really our problem that you need it immediately. You have to make an appointment. "You had months to do that"...

Paul Pettit: Months.

Brendan: Maternal Child Health referrals are still slow, we only get about 2-3 a month. We are trying to collaborate with Wyoming County on a Healthy Families partnership. To discuss ways to increase our referrals.

Lead cases:
Since the last BOH in Genesee County we have had 6 new lead cases.
Orleans County had 2 new lead elevations.

We did tick surveillance this year for the first time in both counties we ended that in late November. We plan on continuing that next year. We have been working with the State Health Department on improving surveillance of both counties. They did one site in each county so are trying to get some additional places to do the tick surveillance.

Dr. Nichols: do you just count how many? Or do you guys just run and see how many have Lyme?

Brenden: “ya, so basically the ticks that we collect; it’s kind of a method process; and we send it to the State laboratory in Albany; and it’s basically they will identify the ticks and also test them for various different pathogens. So then we get a percentage of how many ticks with in that area had say for example last year one site had *~I don’t know~* below 30% positivity rate for Lyme disease.”

Dr. Nichols: “Do we know or how we fall in compared to other places in the state?”

Brendan: “Ya so the State puts out information on that. I don’t know if they do it by like; quote site or not but we do get an annual report so we can see how it can kind of help formulate our focus and various time of year we go out.”

Tuberculosis: basically we have been working with the retention facility on an active case over there. In Orleans County we have been working with two individuals with latten TB and monitoring their treatment.

Also one highlighted things that Genesee county has been doing for the last few years is the Healing Communities Study. Which is wrapping up now at the end of this month. Now we are able to focus more on sustainability. A lot of that will focus on Narcan distribution and medication disposal as well as more communication to the public about overdose risk and stigma. Also our work group – basically we are going to be reabsorbed back into the GOW Opioid task force.

We also have – up and running- that was purchased through the Healing Communities study. It's called a MutiStat instrument – it's a laboratory piece of equipment-. So we have actually been running samples – blood samples - on individuals from both counties that have gone to the ME's office (medical examiner's office) from Rochester and have kind of analyzing that in house. We have identified at least one potentially fatal overdose based on our analysis.

Dr. Nichols: you get it back way faster that way than from the ME? Instead of 6 months.

Brendan: ya it's like 20 minutes. Instead of like 6 mo. Part of the grand scheme... It's not something we would give to the family members because it's not "official" – Right it's not official ME result.

Dr. Nichols: But it allows you to know if there is a trend and something to look for later on...

Brendan: "Right" that's why we got it. So now we can actually push out – like Narcan in an area or something if we start seeing true data based on different test we do. It also helps out with things like, if for example if we getting motor vehicle accidents; we have had some of those that we were able to run specimens on and it's something we are probable going to try and be working closely with on our Fatality Review Board (FRB) with some of these new data points. That we might be able to put some towards prevention and or application awareness on

	<p>certain substances and other areas besides fentanyl. So we run that in our lab now. That's all I currently have for now.</p> <p>Dr. Nichols: I know our water tracks for things like RSV, can it track for new micro-plasma?</p> <p>Brendan: No.</p> <p>Dr. Nichols: I was hoping</p> <p>Brendan: I know,</p> <p>Dr. Nichols: It's a typical... so I couldn't tell...</p> <p>Brendan: I reached out to our vendor that does the acid kits for that and suggested that they may want to develop that... So the acid kit we do is 3 bars some are 4 bars. So the Micro-plasma is ammonia not bars</p> <p>Dr. Nichols: Right.</p> <p>Brendan: So it's a completely different acid Right, so nothing has been developed yet for that but it is something that I actually did suggest. But they haven't gotten back to me yet.</p> <p>Dr. Nichols: thanks for asking. I'd like for you to tell me so I don't think I'm paranoid. ~Now I think that is what everyone has... During our time off we made some new versions of everything. Everything came back and doesn't play by the rules. The radiologists are like ok, it looks like micro plasma...Thanks.</p> <p>Paul Grout: Thank you Brendan</p>	
<ul style="list-style-type: none"> Environmental Report 	<p>Paul Grout: Darren is there anything else you would like to add to your water report?</p>	

Darren: Sure I will be brief. Basically the same thing goes, some of ours overlap. We have some new cases of Lead Poisoning. Currently we have 36 open in Genesee and 25 open in Orleans. It should be mentioned that some of those that are open are years long... They are open till they are 18; we never get any coordination or cooperation from parents; but the lead level never goes/ or to continue to rise to the point where we would require any thing additional. As I give the numbers of 36 & 25 keep in mind – 3 & 2 are the new ones; or 6 & 2.

Dr. Nichols: and some of them; it's the same family that has 5 kids. They just test all 5 at a time.

Brenden: One family has twins
Dr. Nichols: I know. Because that's Kids 3 & 4 for them; and they all 5 of them have high lead.

Dr. Obear: and it's not the Apple sauce?

Dr. Nichols: No, it's the dirty window sills.

Darren: We had lead levels in some of our reports when we take dust wipes in to the lab; reach into tens of thousands – Huge – and passing is 40. Actually that is the threshold... where it is not passing, Below 40 is passing.

Dr. Nichols: It's a small town, I know... its window sills.

Darren: We did submit on November 6th, another application to HUD. It's similar to our Lead Poison prevention

Healthy Homes grant, this is just "A Healthy Homes grant". So this is meant for us to get in and help out low income families that have other stuff going on... beyond just Lead. Things like mold

Dr. Nichols: like Mold

Darren: yes exactly like mold, radon is another big one. We have actually addressed some of this, we have other radon grants but it doesn't do anything for actually fix anything.

Dr. Obear: what about asbestoses?

Darren: Asbestos, I actually think asbestos as well may be... I didn't help apply for this one, I did the others, so I am not as intimately knowledgeable about it...but I think asbestos may be a part of that. It's a great opportunity to the community! Prior to this all of our lead grants which Orleans County never had. We were only able to do a small amount of Healthy homes work so things other than..., would have go over there, you would have to have lead to get us through the door. There were all of these bearers for us to move and get some real improvements. So this kind of gets rid of that; so we will see... I just heard word from Gabe – our Lead program coordinator who applied for this, that we are not going hear back from this till after December 31st. So sometime, hopefully early in the year. That would be great. It's for the whole GLOW region as well, so not just us, to help everyone!

Rabies: Since or last BOH meeting 10/3/2023 we have treated 3 individuals in OC and 1 in GC for post exposure.

Clinics: As they usually are we had about the same numbers. We had 180 dogs, 102 Cats, in Orleans.

Dr. Nichols: And?

Darren: what's that...?

Dr. Nichols: And a pet ferret.

Darren: 0 ferrets in fact.

Dr. Nichols: maybe he died...

Laughter

Dr. Nichols: that why I was like and one ferret...

Darren: 144 dogs & 64 cats in Genesee. So it was a little bit slower. The 2024 dates will be coming soon.

A program we don't have to touch on to often: "temporary Residence: Hotels/ motels/ cabin colonies... have you ever heard of that...? Well we have a new one and if you saw the report; as I quote... it's not really new "we added a new Temporary Residence facility in Orleans County – a cabin colony (of 6 buildings) near the Marina in the town of Carlton, with capacity for up to 52 occupants. That's really catered to families and friends; fisherman mostly. That thing has been in operation for a long time -- under the radar... They reached out to us wanting to expand their services to potentially house some DSS individuals. Which then just opened their box to us...

Paul Pettit: the person who reached out has been fired..
Laughter

Darren: they actually did not put up one barrier at all they did whatever we asked.

Paul Pettit: count yourself lucky you got away with it for the last 30 years.
Laughter

Darren: So that is pretty cool, again it doesn't sound like much but there aren't that many new temporary residences faculties that pop up in Orleans County so worth mentioning.

We have a current opening for an Environmental Health Specialist position – I did make an offer to a candidate earlier today; I gave him till Friday to answer. So hopefully we will be back to fully staffed in Environmental again.

There are not too many Enforcements/ Notice of Violations to mention. We did have that one landlord we have mentioned from time to time – has some lead issues with his properties... We did issue a NOV and STIP for him reoccupying a property before having the proper mitigation completed and having us clear it.

Dr. Nichols: I don't think he's going to bother mitigating it...

Darren: I was trying to look into that, to see – did we get that back... I don't think he signed it so it's going to be reviewed... so... he got out of the last

	<p>ones... so ... But otherwise that is it for me.</p> <p>Paul Grout: Are there no legal repercussions; that he keeps violating...</p> <p>Darren: Well I think it would be more so for the family... that he reoccupied the unit with, because they have some elevated blood levels...</p> <p>Paul Grout: so they could bring suit.</p> <p>Paul Pettit: we have monetary fines in there too.</p> <p>Darren: other Counties have – in place, I remember seeing in Erie county some landlords going to jail... but I don't know. There is probably a much higher blood lead level in those reoccupied situations; but I am not sure. But ya I mean, it the same hearing officer probably that we will have again so... things might escalate for him if he keeps it up... We are trying to be as fair and you know proper about the procedure as possible.</p> <p>Paul Grout: Ok thank you.</p>	
<ul style="list-style-type: none">• Financial Report	<p>Paul Grout: Financial Scot and Kim you're up.</p> <p>Scott Senf: Just finished up the 2023 year here. So I didn't provide a 3rd quarter break down so at the next meeting I will provide the year end break down. Our 2024 county budget was approved for the Health Department. We just got our 2024 State aid applications today and that will be due at the end of February so we will start working on that.</p>	

	<p>Paul Grout: Looking at the budgets did you just take like a percentage increase? Because reading line items it's just a small increase from 2023? I was just looking at the 2023 and then the 2024, I didn't calculate it... like 1%, 1.5%</p> <p>Kim Castricone: Those are mine, ya I mean those are just based on the real numbers. I didn't use any percent's on them. We had some grants that are new and some stuff that went away so they kind of probably washed each other out. But ya</p> <p>Paul Grout: Okay.</p> <p>Kim Castricone: But this is ours Orleans County and this is what approved last week – no – yes was last week at the Legislative meeting. Then I submitted the 3rd quarter report. Are there any questions?</p> <p>Paul Grout: Looks good.</p>	
<ul style="list-style-type: none">• Corporate Compliance Report	<p>Paul Grout: Corporate Compliance.</p> <p>Kim Castricone: In Orleans County we did have a compliance meeting. Danielle is working on some changes. Changing up somethings so the training this year could potentially be a little different. We did add an attestation which I know was sent out to some of you; that Genesee County requires so we are going to adopt that, we do have it in Orleans County but typically our training – I usually have a sign in... so we will just add the attestations now instead since we are now doing them virtual.</p> <p>There hasn't been any hotline calls, complaints, or any issues.</p>	

Paul Pettit: they were meeting in Genesee yesterday and nothing new to report out of that.

Scott Senf: No, that's true.

Paul Pettit: Nothing remarkable; no complaints on our end; no complaints or hotline calls or anything. We do have a couple of Board members 1 or 2 that still need to complete corporate compliance.

Samantha Weber: yes we have a couple that are still outstanding.

Paul Pettit: We are getting there we have three weeks. We can get it done.

Deanna Page: if she waits long enough will it count for next year too? * laughter*

Paul Pettit: I don't know how that would work but...

Dr. Nichols: so basically I wait till I get and the next email I get it says it time to do this again, and I'm like I just did it!

Paul Pettit: Well we start in like June. So that we give you plenty of time. It's just one of those things we have to do sitting on the board.

Deanna Page: ya but you have to pass your test.

Samantha Weber: It just be something we add to the end of a meeting and just be done...

Paul Pettit: Well that is how we use to do it...

	<p>Dr. Nichols: that's almost worse.</p> <p>Paul Pettit: The problem is you have to get it to those that are not at the meeting and you still have to keep following up... it is what it is.</p> <p>Dr. Obear: well you threaten them.</p> <p>Paul Pettit: Threaten them?</p> <p>Dr. Obear ya– either be at the meeting and do it or you are going to have to do it on your own.</p> <p>Dr. Nichols: I was thinking or you can't be on the board anymore...?</p> <p>Paul Pettit: I was going to say I won't have any board members.</p> <p>Deanna Page: if that is how we get off than I was going to say none of us are going to...</p> <p>Dr. Nichols: if that is the case, I wasn't going to do it anyway...</p> <p>*Laughter*</p>	
<ul style="list-style-type: none"> Public Health Emergency Preparedness 	<p>Paul Grout: Ok, Dr. Bell. You are up for Public Health Emergency Preparedness.</p> <p>Dr. Bell: Alright so preparing the theme is probably the flexible in terms of what we cover and who we have to cover it with. So unsurprisingly we benefit more than any other division from the NYS Public Health Fellows program – It was 1st designed to help Emergency Preparedness to respond to Covid. We started off with Covid specialist and others roles that became available. Up until recently we</p>	

have had multiple Fellows dedicated to preparedness and activities. In good news they are renewing the program for another 2 years and starts at the end of this coming summer when the whole program gets a refresh. That's exciting for us because that allows us to get where we need to be in terms of engaging the community; more than just writing plans, being able to respond to them and be proactive. We do have an intern joining us the end of January. We are excited for this because usually the interns are coming to us especially after covid with the field of Epidemiology and lots of other stuff, it's uncommon for them to want to preparedness from what we have seen but we are very excited to see that.

I know the last time I gave a quick update was in the summer...so for in this one quick section Emergency response I'd like to go back In the beginning of the year were we started was with a hot wash of the after-effects of the big blizzard – Blizzard Elliot (2022); which was a mess in both counties. Kind of the perfect storm, for having folks stranded or if they were out of county and could see, it was kind of hard trying to get everyone in and staff. So our efforts right now are for getting ready for the erratic storms we may see this winter.

We have revamped our primary trailer in Genesee. To have shelter supplies by working with Emergency management and fire halls. Trying to be proactive. We learned a lot from this last one and are trying to adapt from it.

Fast forward a little bit all sprint we were doing what we called a Covid wind down give away-- distributing hand sanitizer, masks, & test kits. We put that all away in May for one week, then there was smoke from the Canadian wildfires and we ended up putting the table back out. So now we are just going to be keep the table right there.

Paul Pettit: It went from I don't want to see a mask ever again to: Do you have masks?

Dr. Bell: ya so... Especially for those on respirators. We are keeping it stocked consistently.

During the summer we are given more attention to cooling centers throughout both counties. It was well received at both county fairs. They weren't whole cooling centers but what it was. We set up some shade and had cool water. We also had our new vehicles on site that have full AC and everything else. What we have done in the past is - encourage promotion at the fairs among other different outreaches like naloxone, we show what should go in a to-go kit and first aid. Things changed a little bit with Genesee in the past year with a gap in coverage we aided in helping with a first aid station with our nurses who were available during those hours... We were positioned right on the corner so if there was a need to call an ambulance for transport there was easy access to them. Then general feedback we got from EMS was it was really appreciated. There were a number of kids overheating, some dehydration; things like

that. They didn't really to be transported but some were questionable. There is interest to expand into next year. There is ongoing conversation trying to start early in the spring.

Our big focus right now is for this week is MRC (Medical Reserve Corp) Active shoot drill. This is something that the Genesee county Emergency management has been trying to coordinate for a while. It's obviously very sensitive for a whole lot of different reasons. In May there is a second part that is looking at more layers. But the first part is happening this week, including law enforcement and the Medical reserve board and we will involve Genesee County in terms of "playing the victim" - There is dress up and show wound simulation... it's a little bit interesting... not for everyone; initially they were trying to pull in GCC students but with final exams weekend, that ended quickly.

Medical reserve Corp. this is the time of year when we can kind of plan ahead for next year. So we took a lot of feedback from what was designed and carried out over the past year. So we are trying to normalize this and get more of a routine for our daily curriculum. So what we do is every quarter I have and orientation/ refresher session. We ask every volunteer to attend one of those at least every few years so that they are up on the policies an issues. To make it more attractive we try to combine different preparedness trainings. Some of them have been; You are the help, stop

the bleed, & fire safety. So we are trying to expand that and give it some more variation. One comment we have received a lot of was, we thought we were being very accommodating by offering these in the evenings, but I think that ended up being more of a barrier. Especially since we do encourage a lot of county employees to participate. So we are having more sessions at the end of the day/ afternoon opposed to in the evenings for our orientation sessions. We are keeping our guest speaker events as an evening event with food. With greater attention to a specific theme per county. This past year it was focused on the Eclipse planning and preparedness. There were really talks at the Planetarium that the folks from Rochester and Buffalo do; on all of the eclipse considerations. The biggest being the traffic - exodus after the totality. That's lead to participation from both counties our planning committees and general information from the tourism folks, we want people to come to the counties; have a good experience, but we also need emergency management to help with partnering because we want it happening safely. Helping with Balancing and promotion with a safe experience for handling those crowds and general crowd management.

To wrap up we are currently engaged with some grants; specifically for the MRC, two of them. One the State has already received. – That will allow us to participate, so if complete whatever deliverable they set we are already a part

	<p>of that. So that one has since been approved. We are also seeking to receive the Operational readiness award. This is one of the awards that they usually offer ever year to keep equipment, supplies and essential items set.</p> <p>There is one final ask, if you have not done so yet, if you could please look at and download our apps. “Ready Genesee” and “Orleans aware”, they have a long history in both counties as preparedness apps. We have been working to refresh them again. We evaluated them other the summer, if you wouldn’t mind taking a look over them and providing feedback – we are hoping once we get approval in both counties to give more of a hard launch at the beginning of 2024. They are already available on the app stores. But we have not actually reloaded them till we revamp the content. We are trying to piggy back with Emergency management in each county; because Emergency management draws a little more interest we think with the road closures, first responder radio scanning as well as training and community event calendars. It’s a little more information heavy but speaks to public health awareness.</p> <p>So thank you everyone and thank you for your time!</p> <p>Paul Grout: Thank you Dave.</p>	
<ul style="list-style-type: none"> • Director's Report 	<p>Paul Pettit: Alright, so a few additional things...</p> <p>The staff have covered a lot of them.</p>	

The staffing side, we are still running with a couple of vacancies. In particular with the Nursing up in Orleans County; with Mary Ellen's retirement. So we are seeking nurses up there.

Dr. Obear: How old is she?

Paul Pettit: I don't know and I actually did not approve it – but I don't have a say in it.

laughter

Paul Pettit: You can't stop them I guess. So she is officially retired now and we are running with those vacancies. So we are trying to fill them. Darren touched on the one vacancy and we still have the one support staff in Genesee we are trying fill at the moment.

This coming spring we have 2.5 interns that will be joining us. 2-full time Brockport interns. David mentioned one on the preparedness side and one that will be working Kaitlyn in education and then a part time epi focused one that will be working with Kristine. So we will have additional capacity in the spring which will be helpful. It's been mentioned that the budgets have been approved. Thank you to our Legislatures for getting those passed so we operational resources for the up and coming year; so that starts 2024.

3-5 just a quick update on that, Debbie is back, she has been out for a little bit with some medical stuff. But in the program particularly – so you guys are aware costs are up particularly in Genesee county; bussing and students. It's just

referrals have been up and unfortunately the cost is going up with it from our side, but it is what it is... The kids need the services and we don't control that side it, we just the paperwork so. So we will be monitoring that a bit more and see how that is trending. But it is up compared to what it was last spring.

On the State side:

The executive budge will be coming out shortly and the State of the State was announcing January 9th or something like that. My understanding is about a 4.5 million dollar defecate at the moment. It was 9 but it got cut in half miraculously...

Dr. Obear: Wow!

laughter

Paul Pettit: Ya, can't you do that with your own budget? Just add what is, I don't know so anyways, we will see how that plays out for us...

A couple of focus areas on our end.

One is the Early intervention provider rate increase, there has not been one in decades probably. And as you guys know we have a very large waiting list and need our providers so we do not want to partake in paying for the 11 % rate increase at the county level but the State does love to sharing things so I am sure we will have some stake in that if it does get passed. But it is a need that we definitely have on the local level.

From an advocates perspective from NYSACCHO our focus areas – there really are two

things we are looking at is the Board of health make up. So I think I mentioned this previously... But there is a bill out there to change a little bit of the makeup of the board to allow for mid-levels in addition to Doctors so MP's and PA's; that could also serve – historically we have had trouble finding Doctors.

Dr. Obear: they are not called that any more.

Paul Pettit: I know they are not called that any more what is the new term?

Dr. Nichols: Advanced Practice Providers

Paul Pettit: APC's or APP's for the record. So it will broaden it a little bit which would allow for them to service but right now by Law it has to be MD's and or DO's. So it will provide some flexibility.

Paul Grout: There is also flexibility for providers who live out of the County but practice in the county.

Paul Pettit: Correct, so that's another area where we had providers that where like "Oh I would be happy to serve" ; like Dr. Ciavarri for example... who worked for Oak Orchard for many years but lived in Monroe County. But per the law she did not qualify because she did not live in Orleans or Genesee. So that change would allow for continuous people... not just Dr.'s but any practitioner. We are hoping that goes through. There is support on assembly and in the governor's office; they have all agreed that those changes make sense. I mean

the law was passed back in the early 70's and hasn't changed since then. But obviously the way things are...

Paul Grout: Nothing else has changed in 50+ years...

Paul Pettit: Right, the other area is Article 28 and 36. So this is our Article 28 Clinic and 36 AlizaMS license. We have been asking for years – saying that public health does not fit the “true” Home care regulatory oversight needs and or the article 28 clinics. We do very limited immunizations and as we are very limited in scope. We are not like a full practice doing all kinds of things. That obviously needs some...

Dr. Nichols: it's a real pain in the butt.

Paul Pettit: Yea, and on the Aliza side we are not a home care facility. We do lead visit and we do very few maternal child help visits. So we are trying to get some regulatory relief in that area, which again there is general agreement by all parties, it's just getting them to all sign off on it. Which would be very helpful to us moving forward.

Ronnie from Weights & Measures – received a supine yesterday so I asked him what that was about!? So interesting enough it has to do with Dollar General. So I had him give me something to share with you guys. There have actually been lawsuits brought across from several different States to Dollar General for price inaccuracy. So I asked – are you seeing that in our stores? He said ya. So he does

inspections every year. So in Orleans County over last year he did 5 stores; he checked 500 different products for pricing inaccuracy and found 49 were over charging. So what they were listed for and then when you go to scan it's a different price. Then in Genesee county in 4 stores he scanned 400 items and found 29 were over charging and 11 under charging so someone is bring suit against Dollar general so I guess he is going to have to provide some sort of statement about this. I thought that was kind of interesting.

A little bit on grants. We talked about the HUD grant that we are applying for; Healing Communities is wrapping up and the Covid funding grant was extended through I think the end of June. So they gave us another 6 months on that; so we have been purchasing some more masks and PPE. Some of the schools have requested it. They are getting supplies right from the State also. We have been putting the out in various places and they go pretty fast. Especially since they have switched over to the private pay side. There isn't quite the same access; especially on the test kits so people aren't testing... which is driving some of our numbers – they are just going about their thing... and not staying home anyways. So the behavior has definitely relapsed a bit with staying home when sick etc...

Also the other grant is the Fellows that David mentioned. That program is being continued; it was supposed to be ending this summer but they are planning on continuing for

another two years. So that will allow us to some additional capacity to help us out. So that is a good thing. We thought that was going to be done but it will linger for another couple of years.

The other thing I just wanted to share is on the PHAB side; so accreditation – obviously you know we had our site visit and we did not receive our full accreditation as we had hoped. We have to do a little more work. So Kristine; I thought I'd ask her if she could to share a few to a couple of points on that... and our new process on that to achieve accreditation. It was a big letdown for staff – they worked hard. The site visit was actually very good – we got a lot of feedback on that it's was just a little bit more we have to do so we will get there.

Kristine: So this step in the process – Which the organization still considers us still in process. Moving forward towards accreditation. Is an A-CAR, so Their Accreditation - Committee - Action - Requirement. Before we received ACAR we received a site visit report based on our virtual and in person site visit. That gives us a score... there are 332 measures that we have to be held to a standard of. So the goal is to either reach fully or largely demonstrated. So we did that for 92% of the measures. So that was like boy, we got that before receiving the committees decision we were still optimistic. Eight of the Measures were scored slightly demonstrated and all of those are on our ACAR report. That is out of 332 examples – that is

20 examples that we have to do more work on. 3 of them are kind of make it, or break it. But because of this process they want us to do the rest of them but the 3 that we have to reach the fully or largely demonstrated – they scrutinized our Strategic plan; they want see more – various levels of staff around the planning table, the planning committee. We are already slated to re-look and re-vamp our Strategic plan this coming year for 2024 to have it ready for 2025. So we have started the wheels in that process – we are going to have a survey that is going out to all staff to get their input, but we have already sent out an email to all staff asking for volunteers to join the planning committee. They also wanted to see stakeholder input so on top of this staff survey we are going to have a survey for stakeholders and community members as well as our BOH members and our County administration. So Paul's hope is that we will be completed with making that update to our Strategic plan process come June – well actually earlier than that so we can bring it to BOH in June to be approved. They also scrutinized our Quality improvement projects. Which we will have to elevate that score so our plan – Our Quality Improvement plan got approved but they want us to really work that process. There is a lot of nit picky details – steps which Quality Improvement committee has already met twice so far... we have two meetings happening this month to kind of get and identify projects that we have to put through this process. We

have one year for the ACAR process. So by next November we will have to submit by then. We are hoping to submit earlier. But a lot of the energy right now is making sure that we are getting all of our ducks in a row when it comes to those three foundational examples. We have ideas for all of the other examples; I think there are 7 out of the 20 we are still I think we are still in fact finding mode for. So definitely a letdown; when we talked to PHAB they a side 47% of Health Departments go through this process and most of them do become accredited in the long run and that when it comes to reaccreditation those that have gone through this painful step actually do better. So I was like Oh I understand that because I will never forget this – it doesn't feel better. I felt maybe 1% better when they said that they have multiple Health Departments representatives on their committee who have gone through the ACAR process – who are voting on other Health Departments. Just to put into perspective how many Health Departments in NYS are accredited right now is only 17. So you know – that's that..

Paul Pettit: We will get there; just a little bit more.

Kristine: Thank you Paul G. and Deanne and Fred for coming to the in person site visit and showing support.

Paul Grout: What I took away from that – the two gentleman that were their said – We have no input – we don't vote so we can't tell ya.

Paul Pettit: I don't know if that is true... they write the report that they make the decision on... So it could go one way or another depending on what they wrote...

Paul Grout: So I thought that was kind of ok, so it keeps it really objective but it's nice to have.

Paul Pettit: it was fine, I think they were very good with the site visit and appropriate. I think everything was shared – they were very impressed overall and thought things were on the right track; it's just a couple of items.

Paul Grout: Now have you had any contact with, now you said there are 17 – could you reach out to any of them to see if there was help.

Paul Pettit: So NYSACCHO our state association does have a committee work group of counties that are accredited and or in the process they meet regularly and Kristine is apart of that now too. Frankly we try to beg borrow and steal other things from the accredited ones while we are going through this process. So yes we are very well turned in – we are close.

I think that is all on my list.

Just want to formally thank my leadership team who is all here. Thank you for coming to the last meeting and for good food and to get the chance to talk to them throughout year at different times; some of them every meeting. We have great staff here and the staff that work for them I appreciate all of their efforts throughout the

	<p>year. And thank you guys for volunteering and serving on the board. We appreciate your guidance and oversight. Thank you for the time you give us.</p> <p>Dr. David Bell: it's kind of nice in person too. I appreciate it.</p> <p>Paul Pettit: that is all I got.</p>	
<p>Old Business</p> <ul style="list-style-type: none"> • 		
<p>New Business</p> <ul style="list-style-type: none"> • Health workers retention payments policy & procedure 	<p>Paul Grout: Ok New business.</p> <p>Paul Pettit: we do have a policy.</p> <p>Paul Grout: yes the Policy is that the Health worker retention payments policy and procedure.</p> <p>Paul Pettit: it is. So if you guys know with the CDC infrastructure funds that we received a 5 year grant. We were able to do incentive payments for our staff. Kind of like retention payments; with that the grant it's self wants a policy in how that's done.</p> <p>Paul Grout: got it.</p> <p>Dr. Nichols: you already did this!?</p> <p>Paul Pettit: that's correct.</p> <p>Dr. Nichols: Great!</p> <p>Paul Pettit: And plan to over the next four years assuming everything stays intact. But we have to have a policy so the grant will basically say Yes you are doing it in a fair and balanced way. We have checked with counties and neither county has a policy on this because it's not usually something that government does. Frankly so we are</p>	<p>M:Kelly Nichols, DO S:Mary Obear, DR.</p>

moving it through our oversight board – you guys to adopt this policy. With the idea that they will accept that – we have been told. It has all of these pieces in there and it should be good. We have sent it to our HR and they do not have any problems with it.

Dr. Nichols: it's pretty common sense.

Paul Pettit: it is.

Dr. Nichols: I was like wow you guys are late to the party; we have already given out the money... so ya that makes more sense.

Paul Pettit: So that is the one policy

Paul Grout: okay.
I will entertain a motion to approve that policy

Dr. Nichols: I will make a motion.

Paul Grout: thank you Kelly

Dr. Obear: I will 2nd.

Paul Grout: Mary 2nds. Any discussion? All those in favor!

BOH: "I"

Paul Grout: all those Apposed.
-No response-
Carried. Now the next meeting is scheduled for February 6th.

Paul Pettit: sounds like a snowy day to me

Paul Grout: so being proactive, I am wondering we got the board here now... the last several meeting that have been scheduled for Orleans we have

not been able to get a quorum and this being in the middle of winter. I wonder if we would just be smart to plan, it says here in Orleans but to meet here (Genesee) for the February meeting?

Paul Pettit: So I will put this out there for part of the discussion. So you guys – the meeting of the year is the organizational meeting. So in our bylaws you can set the day and time. So that is something that we can look at too. If this day and time isn't the best for everybody we can move it to a different time on a different day, more in the morning. We have morning meetings sometimes we have evening meetings.

Dr. Obear: you are thinking about tomorrow...

Paul Pettit: I am at 7:30. It's up to your discretion, it's up to you guys. We will make that work on our end. I mean if this time is and day is still generally good. I mean unfortunately we got pinched with the open meeting law... Which basically says we can't meet via zoom. Which would have been perfect. Because frankly we were moving very well with that.. As of now we cannot do that. So it's really just one of those things. I don't expect to have everyone at every meeting. But we do need our quorum. Especially when we only meet every other month.

Paul Grout: I'm just wondering if for the February meeting if that would be wise to meet here (Genesee).

Dr. Nichols: Genesee is definitely easier for me.

Paul Grout: Genesee - Where there is Kelly and Mary, Now the Legislature; you guys don't know if you are going to be on the board or not... When do you get your reassignments?

Fred: I think our organizational meeting is the 4th of January.

Paul Grout: so we may have a new board member or we may not...

Gregg: Most likely I will be on.

Paul Grout: so it will be easier for you to be here (Gregg)?!
Fred how about you?

Fred: I don't know if I will be on...

Paul Grout: well all of the rest of us make it we will have a quorum.

Gregg: do you have a Human service chair in Orleans?

Paul Pettit: That would be Don Allport. But I think he has designated it to you (Fred) because he couldn't come to the meetings.

We are open to whatever works obviously.

Paul Grout: that's why if we set it now then we don't have to move this last second.

Dr. Obear: I think that is fine.

Paul Grout: then we will discuss moving forward.

Deanna Page: We just need to put all of the winter meeting here (Genesee) and the

	<p>summer meetings there (Orleans).</p> <p>Paul Grout: because the next meeting will be in April</p> <p>Paul Pettit: and the weather should be better. Yup.</p> <p>Dr. Nichols: this one we are going to plan ahead and then there is going to be some epic blizzard.</p> <p>Paul Pettit: that's why we have David he is planning for it.</p> <p>*laughter*</p> <p>Paul Pettit: bring the RV around and pick everyone up.</p> <p>Paul Grout: Alright so, entertain a motion to adjourn?</p> <p>Deanne Page: so moved Dr. Obear: Second.</p> <p>Paul Grout: all in favor?</p> <p>BOH "I"</p> <p>Paul Grout: Ok I'd like to thank everyone for their service and I hope you all have a very Merry Christmas and Happy Holidays.</p> <p>Paul Pettit: Be sure to grab a piece of pie for the road.</p>	
Other		
Adjournment		M:Deanne Page S:Dr. Mary Obear.
Next meeting: Genesee County/Zoom February 6, 2024 at 4:00 p.m.		