





MINUTES

Committee/Project/Meeting:		Genesee-Orleans Board of Health (BOH)	
Date:	December 3, 2024	Recorder:	Samantha Weber, Senior Account Clerk
Time:	4:30 p.m.		
Location:	Genesee County Health Department/Zoom		

Attendance:

Paul Pettit, Public Health Director

Brenden Bedard, Director of Community Health Services - Deputy Public Health Director

Darren Brodie, Environmental Health Director

Kimberly Castricone, Administrative Officer

Scott Senf, Administrative/Budget Officer

David E. Bell, PhD MPH, Emergency Preparedness Coordinator

Kaitlin Pettine, MPH, MCHES, Public Health Promotions

Kristine Voos, CHES, Epidemiology / Accreditation Coordinator, Public Information Officer

Paul Grout, BOH President

Deanna Page, BOH Vice President

Mary O'Bear, MD, BOH Member

Kelly Rose Nichols, DO, BOH Member

Fred Miller, BOH Member/Orleans County Legislator

Gregg Torrey, BOH Member/Genesee County Legislator

ZOOM:

AGENDA/TOPIC ACTION/NEXT STEP

BOH Minutes October 1, 2024.

Motion: Deanna

Second: Kelly

Approved: 12/3/2024

DISCUSSION:

PUBLIC CONCERNS/DISCUSSIONS/PRESENTATIONS:

Paul Pettit – Public Health Director (GO Health)

DISCUSSION (CONCISE SUMMARY):

I have nothing to discuss tonight but we will cover some items through the reports.

DIVISIONAL REPORTS

COMMUNITY HEALTH REPORT:

Brenden Bedard – Director of Community Health Services/Deputy Public Health Director **DISCUSSION (CONCISE SUMMARY):**

Respiratory season: has started. We are seeing the increases especially with Orleans County with the Flu and RSV picking up the past two weeks. We also had a pertussis (whooping cough) case in Genesee County.

<u>Tick Collection</u>: We are done collecting ticks for the 2024 season, we will start back up in May of 2025.

<u>Outreach initiative</u>: ended in November. Our part time nurse (who headed up the program for many years) Doris Delano has retired. We will start looking at outreach again at the end of April to the first part of May 2025 and we will work closely with Oak Orchard on that.

<u>Immunization:</u> Clinics have been busy with students – needing to meet their schools' requirements for attendance. We have had a lot of students from other counties because their county is unable to provide services. It is evident that NYS has been cracking down on the schools and their requirements for attendance.

<u>Dairy Farms:</u> New York State has set forth an initiative for the top ten counties that have dairy farms and Genesee County is one of them. They have provided vaccine for dairy farm workers and their families. We sent out the initiative to the farms and have been given permission by four farms participate and others sent their workers to us for vaccination.

Deanna: I have a question; once the vaccine is done is there a reporting that it was given?

Kelly: it would need to be loaded into NYSIIS.

Brendan: We can look into that, and we could add that in for him.

TB: We are following four latten cases in Orleans County and currently do not have any in Genesee County.

<u>Maternal child Health:</u> Has been slow, we have had some visits since the last time we met. One of our nurses recently got her certification as a lactation consultant. There is potential for her to help at the baby café through UMMC; which will be a big help for the community.

<u>Fatality review board:</u> We have not gotten any done in Orleans County as of yet... Something to note; Orleans County has seen a high number of suicides in 2024. So far there have been seven reported to the ME's office; this is up from three years ago; it is anticipated that this number will increase once we get the final reports for 2024. This is something we might what to consider for the next of kin interviews in Orleans County.

Rabies: We had an interesting rabies case, but I will let Darren talk to you about that.

<u>Hiring:</u> We did hire a supervising Nurse in Orleans County Jennifer Ratigan. She has started and is doing well in the role.

ENVRIONMENTAL REPORT:

Darren Brodie – Environmental Health Director

DISCUSSION (CONCISE SUMMARY):

New Environmental Fee Schedule

Motion: Kelly

Second: Mary

Approved: 12/3/2024

Staffing: we are losing a couple of people. Nancy Kelly-Schicker has been with for about twenty years. She is retiring at the end of 2024. We have also currently lost our Lab coordinator Caroline Berkemeyer who has taken another position with the county as the Recycling Administrator for Genesee, Livingston & Wyoming county. So, she is just down the hall; should we need to ask any questions; she was also do most of the core environmental function of the water program. We wish them both the best!

ATUPA: We had two new sales of cigarettes to underage buyers in Genesee County. One at the Dollar General in Oak Field and the other at the Pembroke Travel Plaza on October 30th. Previously there were two in Orleans County at two new "mom and pop" shops – not a corporate business... They sold flavored vapes to underage buyer – which is illegal to everyone in NYS not just underage buyers. We are trying to determine if they have gotten rid of the products... because they tend to get hidden in the back of the store. We sent our people in; we never see the products again – "they are gone" ... but are they? We sent two of our full-time staff in, they ask for flavored vapes, and they were sold flavor vapes... They had to pick which ones they wanted from an I-pad; and they were sold flavored vapes from the back of the store. We are trying figure out how to handle this because this is something that is not covered under ATUPA. They were not adolescents they were adults (our full-time staff). So, we are working with the sheriff's office and looking into how other counties in the State are looking at it. It's a big issue. We know it's there; this is the first time we let it play out in front of us.

Paul Pettit: One of the challenges is getting in the back of the store. We currently don't have the ability to get back there. So, the strategy with including law enforcement is if there is a reasonable sale; they can go to a judge and get a warrant that will grant them access to the back of the store, seize the product and access the fine, so that there is some type of injury... The police then dispose of the products.

Kelly Rose Nichols, DO: But when it's a minor there is a set penalty schedule. But with flavored vapes that plays more into Tobacco/ firearms (ATF)...?

Paul Pettit: It could be both.

Darren Brodie: So, the last time they sold was to a minor, it just happened to also be a flavored vape. Which the State wants us to ask for because they know they are being sold but also hidden or behind the counter... So, they advise that if the minor is comfortable asking to have them ask. So, we do that, but sometimes they don't always ask... sometimes they just ask for what's out in front of them. We know that this has been a problem throughout... even in Genesee County. We just have not implemented it yet. We will most likely do something similar in Genesee County too. We also discovered that for one of the previous sales in Genesee County from September, that one of the locations acquired enough points to lose their certification; to which we found out they didn't actually have a certification in place. This exposes another loophole in the system. The ones that had acquired enough point to lose a certification don't actually lose anything since they never had one to begin with... So not that is out of our hands and being handles by DTF (Department of Taxation and Finance). They will reach out to the location and handle it. We will follow up with Public Health Law, we will go back, it is just our fines, they will not lose their lotto or their certificate; they still have lotto, but they do not have a certificate, but they are still selling tobacco... So that is ongoing, and I will provide updates.

<u>Rabies:</u> We had a positive rabies specimen in the town of Alabama. The people called in with a concern. They have miniature horse that was acting strangely. It was rubbing its nose raw on the fence post and chewing on its own leg to the point where it was down to the muscle tissue. A few nights later it passed away. The vet when out and removed the brain, brain stem and had it test, it came back positive for rabies. This miniature

horse shared an enclosure with two sheep. The State vets was not concerned, stating that livestock don't pass it to one another. They were not worried about it, but they certainly are under a six-month quarantine right now because none of the animals were vaccinated.

Mary Obear, MD: do they typically vaccinate sheep?

Darren: They do!

Deanna: They would have to be vaccinated if they took them to a fair or show.

Darren: So typically, in this type of scenario that is why they would have two sheep verses a flock of like two hundred. So, this is why they are under a six-month confinement right now. We have been out there, there is a sign hanging up, that no one can touch them. The two people that live there are being treated because we could not rule out if they had been exposed. There were other animals on the property including five unvaccinated indoor cats and sixteen unvaccinated feral cats. We did find out that the horse was infected with the raccoon variant, but we could not rule out that it could have possibly come from one of the feral cats since there is not cat variant. So, they were forced to get all of their animals either vaccinated of they would be fined or give them up to an animal shelter which is what they did for the sixteen feral cats.

<u>Grants:</u> We are applying for another NEHA FDA Retail Grant; this will help us get some equipment and help with training funds.

<u>Enforcements:</u> The Best Western Pool – that one comes up a lot. We are trying to get them to the point of reopen but nothing has happened; they aren't getting there... so we will not reopen them. Should they get another violation we will have to go to a hearing and the BOH would have to decide on pulling the permit and being done. If that happens, we will be done and will not have to report it here any further. But we are currently waiting for them to contact us back, - it is closed (we went to check), there is no padlock on it from us; but it is locked... We are trying to get them certified...

<u>Fee Schedule:</u> Last year we updated the engineering fees, especially in Orleans County. However, the rest of the fees, which are for services like perc tests, septic inspections, and all of our permits for facilities, such as restaurants, swimming pools, tanning salons etc. have not had any increases since 2016. Our cost for staffing has gone up by 20% in just two years. To help offset this cost most of the fees have been adjusted about 20% - this ended up being about \$25 which actually is nowhere near what our cost have been, but it is getting a little bit closer. I would like to get this on a schedule where we review this each year or two until we get where we need to be without making huge leaps for those that use our services. Comparatively we are currently on the low end of cost to other counties across the state. Once these adjustments are made, we will be more in the middle to low end; still leaving us behind the majority.

Paul Pettit: So essentially, we are looking to close the gap. There are administrative costs, and ultimately these are our fees for service. Ultimately, we are looking to eliminate taxpayer cost for these services.

Darren Brodie: We did also remove a couple of things – for transparence. We use to have an expediting fee where people could pay an extra one hundred dollars, and they could have their permit by say... Saturday... that really wasn't feasible for us, depending on if we can do it... but to have that fee on there with the stipulation of a time frame, just cornered us into having to essentially drop everything to meet that standard. Often time we can give people what they need without charging them the extra fee... but I do not want to corner ourselves to have to drop other tasks for this 'extra' fee. We are given a certain amount of time to

complete the task; it's written in the code that way and with this fee assessment we kind of lost sight of that. You all saw the notice of violations that were sent out. We have also replaced the late fee with Notice of violation. Because if its late it means they are operating without a permit... which is a violation, allowing us to follow up with more efficiently to get them back on track.

Paul Grout: So, you need us to vote on those changes?

Darren Broadie: yes.

Paul Pettit: it can be done now or with the new business items.

Paul Grout: Let's take care of it now. (See Environmental Report header)

FINANCIAL REPORT:

Kimberly Castricone – Administrative Officer, Orleans County **Scott Senf** – Administrative/Budget Officer, Genesee County

DISCUSSION (CONCISE SUMMARY):

<u>Scott Sent:</u> I submitted the third quart summary for 2024 and working on the funding for 2025 and getting that ready to go. The next thing on the agenda is the state aid application for 2025.

Paul Grout: is Genesee County experiencing the same rate increases like Orleans County is in the County budget?

Scott Sent: Do you mean the overall county? No. Well, they are both under the ten-year cap of 2%.

Paul Grout: there is an article in the HUB, that our CEO (Orleans County) is expecting a huge shortage, stating they are really going to have to boost county taxes.

Gregg Torrey: The Levey went up, but the Levey is capped.

<u>Kim Castricone</u>: Our budget is being voted on right now; we will see what happens today. We have completed our second year of the infrastructure grant and are heading into year three of that. Then next thing we work on is state aid as Scott previously mentioned.

CORPORATE COMPLIANCE REPORT:

Kimberly Castricone – Administrative Officer, Orleans County

DISCUSSION (CONCISE SUMMARY):

<u>Kim Castricone</u>: I was able to go to the last meeting. Paul were you able to go?

Paul Pettit: I did, they have currently updated the plan.

Kim Castricone: There were some changes to the website so that things will be more visible.

Paul Pettit: there were no internal reports.

Public Health Emergency Preparedness:

David E. Bell, PhD MPH, Emergency Preparedness Coordinator

DISCUSSION (CONCISE SUMMARY):

<u>Program details:</u> I have prepared a structured idea of what my program entails and focuses on. I have created Core Responsibility areas. There are eight different areas that we are always focusing on, and they are

overlapping. I would like to run through a few of them and highlight those areas, especially the past six months with what we have been up to.

Our first one is the CDC deliverables preparedness grant that goes through the State. Forming the backbone of the program with guidance for what we should be doing and at what capacity. It breaks down the training and exercises we need. For example, to meet the deliverable requirements we must have at least one person from each county in attendance for the various sessions. The most recent exercise was an integrated preparedness plan which they have not required for us to build (but we are currently working on). What's interesting is that even if we do not create the plan, the State will generally require those later so it's helpful to be proactive with these measures as the State and the CDC develop things; it puts us ahead of the game. The documents and plans that were required are two of our annex plans. The annex plans are hazard or function specific. The two that were emphasized this year were the medical countermeasures. These include all the vaccines along with the PODS (points of distribution), strategic national stockpile and Chempax to name a few. They go hand in hand; it was only a few years ago that they branched out into separate areas as COVID was slowing down. It was smart to have us focus on these plans because they had unfolded differently than they had envisioned. Usually, requirements and updating plans are not something they do so closely together but in this scenario the updating is proving beneficial now that things have settled down and lessons have been learned. Other directions we are focusing greater attention on are extreme weather variations. We are building and planning related to that; for example, we used COVID funding to get more Harris Emergency radios and developing plans and procedures related to those. They are some of the plans and documents we are working on outside of the deliverable requirements.

Partnership building: We have had some big success in a few different areas. We had a great partnership with the Red Cross this year. They have shared details of sustainability with only being able to support on shelter per county now that COVID has slowed down and that is only if it's a single incident; nothing to widespread... and even then, that is usually after 72 hrs. So, we have been developing our plans with that in mind and ramping up our efforts, equipment and training related to that. The other big success we had related to that was the disintegration of the CO-AD system (Community Organization Active in Disaster), not just here but across the state and other areas. Unless there is a committed focus, those groups tend to lose steam, it can be hard to keep them going... what we have seen is when the interdenominational interfaith groups come together with a different issue to address and have a reason outside of emergency preparedness to stay involved then we can add to that. That is something that has worked organically in Orleans County. We have talked about developing a warming center through Grace church in Albion. Basically, they will assist during times of code blue – where the temperatures or wind chill reach levels below 32 degrees, having a place. We were able to work with Oak Orchard to get this established. It gave this group, that is now Orleans Hub, a focus to keep going, looking at issues like housing and such. This has since gained another label "COAD" (Community Organization, Active Disaster) something the State recognizes and allows the network a point of contact for when we want to spread information quickly and efficiently and to draw off that. This worked very well, for example, during the eclipse this past spring where the warming center was set up... we figured if there were people that wound up stranded, there was a place for them to go. We have since brough this approach to Genesee County and think it is working well. Just two weeks ago there was a meeting downtown, looking at the possibility of starting a warming center like that in Albion, Oak orchard will assist here as well.

With this touching on a few areas, it is advantageous for us because of the population that may need that. It's great for our messaging, and opportunities to expand for shelter needs and a few other things.

Staff Training, Drills & Exercises: We are constantly working to keep our staff up to date with these whether they are new or seasoned staff members and keep that in mind with our capacity and deliverables. We are also working to update our information and surveillance as part of the first step of our emergency response; so only if something arises to a certain level do we get more involved in terms of developing operations or tactics to respond. At the information surveillance level, we are working intently with several health services on things like H5N1 among other things. One thing that has helped share information quickly is our Preparedness apps. We have gotten to a point where extreme weather can be quickly and effectively communicated on the apps and has been set up to communicate information about other things as well. For instance, in November there was a statewide burn ban that we were able to push out. This also allows for the push out of training opportunities and community safety in a timely fashion. Having these as a tool has proved helpful and is new for this year.

Medical Reserve Corp: The biggest thing I would like to highlight is the success of our Medical Reserve Corp, our volunteer group coordinated through the Health Department. We have received multiple awards, some to help equip our local unit and others channeled through the State. Earlier this year New York State received a multi-million-dollar grant to in part help renovate the statewide system that we use for personnel management and record keeping to invigorate and assist local units. We have been developing programming to make our unit a bit stronger in many ways. I feel our units have become exemplary in terms of what we try to achieve with the different requirements and models held at the State and Federal levels. The Medical Reserve Corp is a Federal program with Federal expectations which has enabled us to receive these grants.

Annual Advisory Board/Strategic plan: One thing we have been remised in is setting up in the past has been an Annual Advisory Board meeting and a strategic plan for the upcoming year. I am happy to announce that we a meeting set up for this Thursday (12/5/2024) from 11:00 to 12:00pm. This is my big plug that we are hoping that someone from this group (BOH) would be willing to serve as a representative... I am looking at you Paul... (Paul Grout) that would be willing to go over the full documents of the annual reports for the Medical Reserve Corp which breaks down the different activities and hours. As well as the Strategic plan for the upcoming year. It's not exclusive, we are asking for representatives from Mental Health, Social Services, Office for the Aging and obviously Emergency management.

Emergency Preparedness App: I would like to highlight the apps one more time, Ready Genesee and Orleans Aware. I think they are relatively a big success, barring any feedback. I am happy for any feedback. We are at a point where we can adjust things well. There are some limitations in terms of the platforms they provide but given the limitations on the software we have learned to adjust our goals along with making them engaging and informative enough and useful in a steady state so that people refer to them for opportunities or happenings in the community or general information about our department. Even getting alerts about the bad weather and when it's coming. But the real asset is when we need to push information, we can do it through the apps. We have gotten to the point where it's well developed and being used for our standard outreach materials, pamphlets, for general Emergency Preparedness as well as Medical Reserve Corp. We have used

some of our grant funding to develop programing along with safety kits. So, for fairs and outreach programs we will promote summer safety kits, whether it's reflective lights, insect repellent, and messages to go with those. Hydration and cooling for when it's hot and mental health resiliency and self-care are other aspects that we have been emphasizing.

COVID Grant: At the end of this summer Scott, Kim and I celebrated the ending of the COVID grant. Fall started our transition out of COVID response to dealing with and putting it all away which but a lot of emphasis on inventory management. At the same time, getting all of this inventory was fantastic, being able to refresh a lot of old materials, like PPE and new equipment including the radios, a new trailer which we added new flooring to along with whatever was needed for that and reorganizing a lot which proved to be a big challenge and how to keep accurate inventory without it becoming too taxing or expensive for the department. With that we're able to keep a minimal level of our inventory management system. A small business platform called "Sortly" that is working well.

DIRECTORS REPORT:

Paul Pettit – Public Health Director (GO Health)

<u>Budget:</u> We have a few things to run through as mentioned previously. County budgets are in and done. So, we are off and running for 2025. The next big thing will be the State budgets which can be a crazy season. After the first of the year Albany will be rolling out the executive budget. Then we will see them working on the Assembly and Senate with them working on their bills. So, in February (the next time we meet) we should have a good idea of what the budget is going to look like or at least the proposed budget and see where we land around April 1st. We will keep you informed.

<u>Fellows:</u> We are fully staffed with our four fellows throughout each county. We have had some conversations with the State regarding tweaks to the program and how they have it set up from 1.0 to now with 2.0 it's a little more restrictive in what we can do. We have been talking about trying to have the option to replace fellows, even just for a year... They want to restrict that. So, if the fellow needed to leave, or took another job, whatever the case may be, we would have an opportunity to back fill. It was also realized that in general there are a lot of administrative costs with no reimbursement, the counties cover that, so they are looking for some administrative support to supplement this. We should have more on this by the next meeting.

State Changes: The State changes have allowed us to no longer have to hold our LHCSA license in Public Health. This has currently gone through on the Orleans County side, and we were just waiting for Genesee Counties which we just received last week. So, we no longer have the LHCSA license in either County which basically means we no longer have to do certain administrative tasks per the regulation and policy procedures and get to keep doing what we have been doing. This is a win for us, and we are pleased with this outcome. We have also been talking about the board of health bill, that was finally signed by the Governor last week. That will give us more flexibility with the makeup of the Board. We have been advocating for this for about two years. It will allow for advanced practice practitioners to serve in a couple of the roles versus requiring physicians and DO's. This will help in rural counties that may have challenges finding doctors to sit on the board, as long as the majority of their work is done within the county that they would be representing.

<u>3-5 Preschool:</u> We are continuing to work on center-based services by looking for ways to increase access, particularly in Orleans County. There will be a presentation next week around this topic and I will be sharing a data model that we have been working on around this issue. We will also touch on the work we have been

doing with Niagara County and trying to get a center-based program opened in Roy-hart (Royalton-Hartland) potentially. There will be more to come on that.

<u>Community Health Assessment:</u> We are going to meet with our community partners across the three counties (Genesee, Orleans & Wyoming). This is a GOW effort, so we put out a common survey and developed an assessment across the three-county region. Kaitlin and her committee have been meeting for several months now and will be getting those questions finalized and out in a survey early in the new year as we go through the community assessment process in 2025.

<u>PHAB:</u> We submitted our ACAR back in October. Basically, it is out of our hands at this point. We were hoping to get some type of notification or findings after there meeting that was held in November but there wasn't enough time for them to review the documentation, so we got moved to their meeting in January for review. We are confident that the materials we put in are going to meet their criteria. Hopefully in February we will be able to come to you with news.

Paul Grout: Do they meet every two months?

Paul Pettit: They actually meet quarterly so I think it would go through the committee and then the recommendation goes to the board. I don't think the Board actually looks at anything, they just move on to the recommendation by the committee. Kristine, would you like to share a bit on our storyboard... Kristine: As part of our ACAR three of the nineteen examples had to be fixed were foundational. We had to make improvements on them, two were related to our quality improvement process and implementing a QI project in the manner that they want us to. So, part of that is when we have completed a project, they want us to share it with all of you here at the board. For those that were at the last meeting Darren presented the Rabies project storyboard. Kristine (shared her computer screen on the office screen) "Here is a visual of the 'GO Health Shared Drive Quality Improvement Project Storyboard.' This storyboard shows the same PLAN -DO-STUDY-ACT model that the Rabies Referral Reduction QI Project did as this is the model formally included in the departmental QI Plan. The storyboard highlights the details completed for each step of this model including the Problem Statement, AIM Statement, Improvement Process & Theory, Test the Theory, Results, Theory Improvements, and Implementation. QI tools were required to be used at each step. The AIM Statement is "By September 3, 2024, the common folders in the respective shared drives will be aligned using SharePoint, resulting in a 25% increase in staff satisfaction related to its ease of use." This AIM Statement was updated several times, most notably to account for the pivot in utilizing Microsoft SharePoint instead of each counties respective drive to organize common administrative documents which is more efficient. This project was chosen based on anecdotal feedback from staff and staff responses included in a 2025-2027 strategic planning process. In addition, pre and post surveys were used to assess staff satisfaction which showed a 67% increase after adopting a Microsoft SharePoint to house common administration documents. The QI Project team (Kristine Voos, Carie Doty, Kaitlin Pettine, Kimberly Castricone, and Sherri Bensley) will be meeting quarterly to conduct further monitoring on this platforms use, as well as explore other ways it can be utilized by staff. "

<u>Performance Incentive Program:</u> Year thirteen performance incentive program just started again. So, the Public Health budgets for incentivized work in a different focus area each year; this coming year we will be focusing on weather events and planning for them. David articulated on some of that, the work with that will go from January through July. If we do all of the work and complete it, we should stand to receive \$13,000 to \$15,000 each calendar year in discretionary spending that is State aid eligible.

<u>Village water Supply:</u> We received notification from The New York State Department that Albion is planning to cease their addition of fluoride to the public water supply. There is a process that they will have to go through, they can't just stop. Part of it involves public publication and a comment period for like 90 days or such. It would also involve any town that purchases water. Once you start doing it (fluoride), there is also a process for

stopping it. There seems to be a movement around the state with municipalities with plans moving in that direction. There are a lot of studies on both sides of the fence highlighting the good and bad effects of fluoride in the water. I am not sure which way this is going to go, especially if they get a good notice and public comments.

Gregg Torrey: It's expensive, isn't it?

Paul Pettit: There is definitely a cost to it...

Kelly Rose Nichols, DO: That is the philosophical question. Is there a benefit to fluoride, but is water the safest most efficient way to get that need met? There are a lot of new initiatives at the primary care level to put the fluoride on the teeth. Get them to the dentist –in a more targeted way.

Paul Pettit: And those are the points I think we will see coming up.

Kelly Rose Nichols, DO: So, in theory, if you have access to dental care, dental insurance and an adult who will take you to the dentist you would meet all the goals. So, in theory, a safer, better way but it relies on the health system to work and people to do what they are supposed to for the client.

Darren Brodie: Part of the requirement is they have to have an alternative method for getting fluoride. In a perfect world it should be plainly laid out for anyone to achieve their fluoride goals...

Paul Pettit: So more to come on that... maybe by our next meeting...

That is all I have for this year. As I say, every year it's nice to have the full leadership team here. I appreciate all the work they and their staff do throughout the year for our departments and for the residents of our two counties. You are served well by them all. I would also like to thank you all for servicing on the Board, it is appreciated.

OLD BUSINESS:	Motion:	
	Second:	
	Approved:	
NEW BUSINESS:		
Performance Management Plan	Motion: Deanna	
Quality Improvement Plan	Second: Kelly	
	Approved: 12/3/2024	
OTHER: Received resignation from Dr. Madejski for the E	Board of Health (12/12/2024)	
ADJOURNMENT:	Motion: Deanna	
	Second: Kelly	
	Approved: 12/3/2024	
NEXT MEETING:		
Genesee County/ZOOM		
February 4, 2025 @ 4:30PM		