ST. LAWRENCE COUNTY BOARD OF HEALTH MEETING November 16, 2021

The St. Lawrence County Board of Health (hereafter known as SLCBOH) met on Tuesday, November 16, 2021, in the Large Conference Room, Human Services Center (via teleconference), Canton, New York 13617.

MEMBERS PRESENT: Kevin Acres, Mark Deavers, Dr. Gregory Healey, Nancy Potter, Jessica Rafter, Dr. Kathleen Terrence, Dr. Andrew Williams, (via teleconference)

MEMBERS ABSENT: Dr. Jessica Scillieri Smith

OTHERS PRESENT: Jolene Munger, Interim Director; Shannon Beldock, Administrative Assistant; Alivia Sheffield, PH Sanitarian; Jenesse Watson, Emergency Preparedness Coordinator; Renae Johnson, SCHN; Kindra Cousineau, PHN; Adria Pennington-Lee, Brigette Conklin, Samantha Bice, Chelsea Bice, Amy Simmons, Amber Sheppard, Joe Lightfoot; Tracy Chase; Alex Horner; Patti Hogle; Pattie Olson; Emilee Carpenter, 3rd year Med Student from SUNY Upstate who works with Dr. Terrence

CALL TO ORDER

Dr. Andrew Williams, President, called the meeting to order at 6:03 pm.

APPROVAL OF MINUTES

Upon motion by K Acres, and seconded by K Terrence, the minutes from the October 19, 2021 meeting were approved.

Upon motion by K Terrence, and seconded by N Potter, the minutes from the October 29, 2021 Special meeting were approved.

Dr. Williams introduced new member, Mark Deavers. Noted he will be an excellent addition to the Board of Health and give an important perspective, as emergency transport and services is critical to the health and safety of our community. We are very happy to have Mark joining us.

PUBLIC COMMENT

No Public Comment.

Renae noted there were several Public Health staff members in attendance tonight and asked to address the Board to share some perspective about our Interim Director, Jolene Munger.

She noted Jolene has shown tremendous growth in her role from Deputy Director to our Interim Director, taking on leadership, while she continues to show all staff support in their roles and programs. She has continued partnerships with colleges, hospitals, schools, superintendents, and other community partnerships, such as the community call with the towns.

Jolene has gained the respect and credibility amongst her staff, peers and NYSDOH. She continues to seek additional assistance with the heavy COVID-19 workload through temporary staff in the department and through the state. She is willing to jump in and assist with whatever tasks that need to be completed.

Jolene worked with staff, other Public Health departments in the state, NYSDOH, as well as community partners to develop and implement a COVID-19 testing plan for all schools in St. Lawrence County. She has been cognoscente of the cost and time frame for testing and has searched the best options for all parties.

Jolene is forward thinking. For example, she had staff prepared for the recent authorization of the 5-11 years COVID-19 vaccine, by holding a Saturday clinic and a clinic at each public elementary school. She also worked with the assistance of Dr. Terrence and Anne Petroccine, as well as department staff to host a small kick off clinic here at our Pubic Health office.

Kindra also addressed the Board with the following comments.

Jolene continues to carve out time to meet with program staff to make sure we are completing required activities and reports within the designated timeframes. She has worked with fiscal staff and program staff to develop and appropriate budgets for our department, as well as the new COVID-19 grants. Which is a rigorous process for someone who has not done it before.

While we are sure we don't know all the work she does, we wanted to share what we do see. She makes herself available to staff for questions. If she doesn't have a clear answer, she will utilize her resources and get a correct answer. She has done this since taking on the role of Interim Director.

While Jolene has the support of the department staff during her time as Interim Director, she has not had a Deputy Director to assist her. She continues to thrive during this unprecedented time. During the past year, our department was asked to resume responsibility for all of our full time program work requirements, as well as the addition of the required COVID-19 response work that is ever changing.

Other staff members were asked if they wanted to share also, but some individuals didn't feel comfortable speaking, but still wanted to be present to show support for Jolene.

Renae concluded by saying we feel that Jolene has done an impressive job leading our department. Thanked the Board members for this time to share.

Sanitarian Update: Alivia Sheffield

Alivia shared she will be resigning from her position as Sanitarian – her last day will be December 1, 2021. She has accepted a position with St. Lawrence University as the Assistant Director of Student Activities and Leadership Program – this will be a very different career change. She has been with the Public Health Department since March, 2020 and this is a bitter sweet time for her. She has learned a lot and is very appreciative the Board of Health for being there to assist with issues and concerns that have come up with sanitarian and lead over the past 1½ years. Jolene knows even though I'm leaving I am available to answer questions and help out.

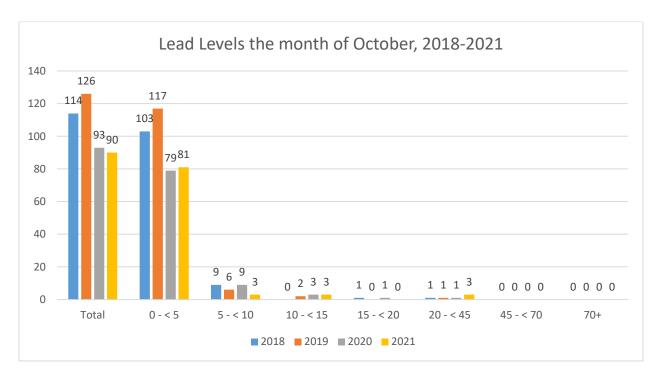
1. Stockholm issue of discharging of grey waters. She has conducted dye testing on 3 of the 4 houses being testing, one house did have a positive green dye show up in their grey water. The other house has been vacant for two years and has no running water. We would have to pump water down the pipes in order to conduct the dye test – we will not be conducting a test on this house. One of the houses is owned by an elderly woman who has lived there for quite some time. After hearing about the issues a few months ago, she believed she may have been hooked up to this pipe so she had a company come and fix it. This company has contacted her and code enforcement and at this time code enforcement

doesn't believe a dye test is required. Jolene performed a dye test today, in her absence and will do the last one on Thursday. I believe this fits really well with what Renae and Kindra shared about Jolene, she is definitely willing to literally put on her Muk boots and go stand in potentially raw sewage when it is required of her. I think that speaks volumes of her leadership. As a reminder, this issue is a code case and is followed up by code, it is their jurisdiction. We are just providing the technical assistance in making make sure they know that is coming from and are able to follow up enforcement wise on their end.

Lead Update: Alivia Sheffield

Lead level comparisons for October, 2021.

- October 2021 there were (90) lead tests performed
- Of the (90) there were (9) elevated, which is 10% elevated
- 5 ug/dL and 10 ug/dL (2 repeat, 1 new)
- 10 ug/dL and 15 ug/dL (2 repeat, 1 new)
- 15 ug/dL and 20 ug/dL (0)
- 20 ug/dL and 45 ug/dL (3 repeat)
- (2) cases discharged
- (78) on caseload as of end of October



Percent elevated				
	2018	2019	2020	2021
Post-2019, ≥ 5 μg/dL	10%	7%	15%	10%
Pre-2019, ≥ 10 μg/dL	2%	2%	5%	7%

The CDC has announced a new recommendation for Lead reference value, stating that 3.5 ug/dL should be considered as elevated. This has not been adopted by NYS yet, but we wanted to look

at it to see how that would have changed our numbers. Using that level, we would have had an additional (3) in August, (6) in September, and (2) in October – these by themselves don't seem like too many, but an additional (11) in three months is a lot.

Kevin thanked Alivia for the work she has done during her time here at Public Health and wished her the best! She noted it has been a positive experience and is grateful for the experience to learn the things she has here. Dr. Williams noted we have appreciated her hard work and maybe we will see her in the future!

COVID-19: Jolene Munger – slide presentation

Case Update: As of November 16, 2021

- 13,678 cases to day (as of noon)
- 20 current hospitalizations (averaging ~20 per day)
- 538 active cases; 12,999 completed isolation
- 144 cumulative deaths

Weekly Cases:

- 479 cases this week
- 68 cases per day average. Still pretty busy, the state VCC helps with 45-50 case investigations per day and the rest are taken care of by the public health staff.

Weekly school cases: November numbers are higher than September and October.

- K12 there have been 254 cases so far this month
- 118 cases per week average. (Up from September 107 and October 95).

Weekly college cases:

• Small spike this week – up to 35 cases this week, compared to 15 last week. Cases are centered around one college and due to the hockey and basketball teams.

Isolation and Quarantine:

- 1,113 active quarantine
- 538 active isolation
- 56,832 cases have been closed

Monthly Cases by Age Group:

- October 1979
- November to day 1068
- 25-30% of cases in 0-19 age range
- 30+% of cases in 20-44 age range (lowest vaccinated age group)

Hospitalizations by Age Group:

- October total of 98
- November so far total of 38
- There have been a few kids under age 19
- More in mid-range of 55-64 and 65-74 now

COVID-19 Screening Testing for P-12 Schools

Jolene noted the school testing program is going very well. There has been a lot of positive feedback from school superintendents and school nurses.

- 6664 tests performed (faculty/staff, etc.) there have been 39 positives.
- Binax Cards came in this week, not the full order we requested in September for October, but we did get half of the shipment these expire in January 2022. We did get these out to the schools.

St. Lawrence County Statistics:

- High Transmission
- Positivity rate 6.6% (down from last month 6-8%)
- Total Population Fully Vaccinated 55.6%
- Total Population at Least 1 Dose 59.1% (now includes 5-11 year olds)
- 12+ Fully Vaccinated 63.8% (67.2% = 1 dose)
- 18+ Fully Vaccinated 64.8% (68.1% = 1 dose)
- 65+ Fully Vaccinated 83.7% (87.7% = 1 dose)

We tend to increase about .2-.3% weekly, but from last Monday, December 8 to Monday, December 15, this increased .6%, which is the largest increase we have had in a while for the total population, due in part to the 5-11 year olds.

COVID-19 Vaccine Distribution:

- 1st Doses Administered Overall 6,946 (534 5-11 year olds)
- 2nd Doses Administered Overall 5,696
- Booster Doses Administered Overall 450

During November, every Monday from 8:30 am to 2:30 pm, we have Pfizer vaccine clinics available at the Public Health Department for ages 12+. These clinics are for 1st, 2nd and booster doses. Starting yesterday, November 15 we are providing vaccination clinics for 20 schools in 9 days – this is every public elementary school.

- November 15 Parishville and Brasher
- November 16 Lisbon and Heuvelton
- November 17 Madrid Waddington and Norwood

We are scheduling 2-3 schools every day to be able to finish their 2nd doses prior to winter break. Provided a location breakdown of where Pfizer has been provided to 5-11 year olds (SLH, PCP, Pharmacies, WalMart, NYC (1), Crossgates (1)). Community Health Center will be starting to provide vaccination on Friday, December 19.

Pfizer vaccine by age for 5-11 years old: Total of 717

- Age 5 years − 87
- Age 6 years 102
- Age 7 years 84
- Age 8 years 101
- Age 9 years 113
- Age 10 years 112
- Age 11 years 118

Thanked everyone for their support of the clinic held on Saturday, December 13 at SLU. Dr. Healey helped with vaccinations. It was a great event, the mascots were a big hit. We will ask the colleges if they will participate again and try to get Maxcy Bear next time.

Presentation by Dr. Williams:

Slideshow presentation on the COVID-19 National Update, NY State Update and the SLC Update. SLC Vaccinators/Weekly Vaccination - Medical Practices, Local Health Department, Health Center, Pharmacies. COVID-19 Vaccination Rate. Understanding Vaccine Hesitancy. A lengthy discussion followed.

OTHER ITEMS AND QUESTIONS

Preschool Transportation Issue: Jolene Munger

We will be bringing to the Legislators the need to put out an RFP (Request for Proposal) for preschool transportation earlier than usual. First Student has notified us that they will not be putting in a bid again and they are currently the only provider. Renae has done a fantastic job of getting some of the school on board to provide transportation. We are currently working with (2) schools to get contracts in place to bus students in their school district and paying the state rates. We are going to be meeting soon with the superintendents to see what they can do to take on a few more of the students. We met with First Student and they don't want to leave us in a predicament, noted they may submit a bid but only on half of the bus runs. We are going to be actively working with the schools to try and provide this – we currently have 154 students utilizing preschool transportation, over the summer it was 208 students. These number fluctuate based on the program and students aging out of the program, services available, etc. This is a service we are required to provide.

Sanitarian Position: Jolene Munger

Jolene shared with members SLCPH is the only partial service county in the state with a sanitarian. This creates challenges because we are unable to go to other counties for advice because they do not deal with the issues we do. It also creates issues where nobody knows what to do, is it the Health Department, Code Enforcement, NYSDOH, or DEC responsibility? It adds an element that puts us in a difficult spot. When Dana was here we had discussed our options if the sanitarian position became vacant again. When vacant, the responsibility falls on the Director to take over the duties. She wanted to discuss how the Board felt about potentially asking the state to take on this role and make SLC a true full service department. In order for this to happen, the Board of Health, Board of Legislators and NYSDOH would have to agree and this could take some time. Alivia thought as this was her last meeting she could answer any questions, specifically about the challenges of being the only county in the state set up the way we are. Kevin asked what the drawback is and is there a negative to having the NYSDOH take over. Jolene noted it is part of our Article 6, the County pays for most of it, (first \$500,000 = 54%) and then after that we are reimbursed 36% from state – there is no actual funding and is not a grant based program. This position would then transition to more lead based. As Alivia showed, with the passing of the new lead level guidelines, this will increase our caseload. We currently have multiple staff working on this program because we don't have one dedicated person to cover it at this time. We are anticipating more work on the department with cannabis next year as well. If the change took place, the service would not leave the county, just shift to the NYSDOH district office in Canton, specifically for SLC.

Dr. Williams said this is a topic of discussion for after the meeting as well. Noted the question would be, if there is no logical reason to have a sanitarian, why do we have one? Alivia and Jolene had gone through documents and couldn't find any information. Alivia has met with the district office to get the history of the sanitarian position. It was in the 1930's when the counties decided whether or not the local health department would take on the environmental health role, or if they opted not to, that's when the state would take it on – 21 counties decided they didn't want the role and it went to the state. In the 1980's, there was a lot going on with water and septic issues in SLC. The position was created during a time when there was so much environmental change going on in the county that the state didn't feel they could fully cover the whole county. She doesn't think this is the case anymore. It was done by the state from the 1930's to the 1980's, when they asked counties to make the decision on whether or not they wanted to environmental piece – that's when it came from the district office back to the local health department. Dr. Williams noted a decision will not be made quickly – there are some things that need to be explored.

Nancy noted Alivia and Jolene have done research on the sanitarian position and asked if Alivia could provide a written report on the pros and cons of having the sanitarian position or moving the role back to the NYSDOH. Alivia noted she and Jolene have spoken about this and she has written down the information she has found. She doesn't have a problem writing something up for the Board members, and offered to attend a meeting if she was needed in the future.

Kevin shared he is the Chairman of the committee to explore how we expend the American Rescue Funds, which is almost \$20 million – we have already received \$10.5 million. A survey was posted on the Intranet for county employees. Noted a large portion of the monies needs to be spent on COVID related items. If the public health department can show deficits or needs, funds can be provided. Committee members include: Jim Reagen, Tony Arquiett, Dan Fay and himself. Jolene sent an email to all staff to look at the survey, as some do not use the Intranet. Dr. Williams noted in looking at the healthcare infrastructure the whole pre-hospital care (EMS) has a lot of challenges and is a real concern.

Mark noted he is the Chair of the EMS Advisory Board and shared this is a rural emergency medical service, not just SLC. The biggest problem is man power shortage. Noted attendance at EMS classes has dropped dramatically and the immediate need is towards education and qualified individuals before any other option is looked at. Funding is a big issue – the entire system is underfunded. Discussion of Mark providing a presentation on EMS.

OLD BUSINESS

EXECUTIVE SESSION

Was to take place, but some members logged off early – will be rescheduled.

OTHER BUSINESS

ADJOURNMENT/NEXT MEETING

Meeting adjourned at 8:15 pm. Next meeting is scheduled for December 21, 2021 at 6:00 pm.

ACTIONS ITEMS FOR FOLLOW UP

N/A