ST. LAWRENCE COUNTY BOARD OF HEALTH MEETING June 21, 2022

The St. Lawrence County Board of Health (hereafter known as SLCBOH) met on Tuesday, June 21, 2022, in the Large Conference Room, Human Services Center, (via teleconference) Canton, New York 13617.

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

MEMBERS ABSENT: Kevin Acres

OTHERS PRESENT: Jolene Munger, Director; Carly Zimmermann, Deputy Director; Shannon Beldock, Administrative Assistant; Pam Charleston, Principal Fiscal Officer; Miranda Corbine, PHS; Angela Firicano, PHS; Anne Marie Snell, Health Initiative

CALL TO ORDER

Dr. Andrew Williams, President, called the meeting to order at 6:05 pm.

APPROVAL OF MINUTES

Upon motion by N. Potter, and seconded by K. Terrence, the minutes from the May 17, 2022 meeting were approved.

PUBLIC COMMENT

No Public Comment.

Anne Marie Snell thanked the department for support with our agency and some Public Health Fellows.

COVID-19: Jolene Munger – slide presentation

Jolene noted Ruth asked for information to present to Legislators last night, then changed her mind, so she just has a few slides.

Case Update: As of June 20, 2022

- 32,973 cases to date
- Current hospitalizations: 7
- 81 active cases and 32,694 have completed isolation
- 198 cumulative deaths

With the active cases we are currently utilizing State staff for COVID-19 data. When we lose them on June 30, 2022, one of the things we might not have the staff to continue tracking is active cases – this may come off our monthly report. This is still being looked at.

Average New Daily Cases per Week:

- This week was 18 cases per day (does not include today)
- Last week was 23 cases per day.
- Week prior was 27 cases per day.
- Numbers have been steadily dropping throughout the month of June.

COVID-19 Weekly Average Deaths:

- 0 this week
- 2 last week
- 1 the prior week
- Every other week it goes from 1 to 2 that we are averaging in our county.

This information has not been reported before, but due to the severity of the disease, Jolene thought this might be of interest to members.

Vaccine Discussion: Pediatric COVID-19 Vaccines

Pediatric COVID-19 Vaccines

Pfizer-BioNTech	Pfizer-BioNTech	Moderna	Moderna
Ages 6 months to 4 years	Ages 5 to 11 years	Ages 6 months to 5 years	Ages 6 to 17 years
3 dose primary series	2 dose primary series	2 dose primary series	2 dose primary series
Two doses spaced 3 weeks apart and followed by a third at least 2 months later.	Two doses spaced 3 weeks apart. Should receive booster at least 5 months after 2nd shot.	Two doses spaced 4 weeks apart.	Two doses spaced 4 weeks apart.
Dosage is one tenth the adult dosage.	Dosage is one third the adult dosage.	Dosage is half the adult dose.	The dosage is the same dosage for adults.



No information has been received regarding approved by the State as of yet and we have not received new standing orders from the State. Phone calls have been coming in from different providers and community members looking to vaccinate their children and we are advising them to check back and we will be advertising our clinics for the age groups once we receive approval.

Jolene wanted to discuss which vaccine, as a Board, they feel would be most effective and what providers would choose. Public Health still wants to serve as the distribution hub for our providers as we have all along. Noted the department would probably not carry both vaccines in the clinic unless it is the recommendation of the Board to have both in-house.

Novavax has been approved, but per the State this will not be widely available until the fall.

State vs. County Data

- □ New York State Statewide COVID-19 Testing data ONLY includes the number of tests performed in a laboratory setting.
- ☐ Beginning in October 2021, Public Health began to accept positive home tests.
- □ Positive home tests are ONLY reported to Public Health. They are NOT reported to the New York State Department of Health.

CDC's COVID-19 Community Level (Low|Medium|High)

☐ Levels are determined by looking at hospital beds being used, hospital admissions, and the total number of new COVID-19 cases in an area.

- □ New COVID-19 admissions and the percent of staffed inpatient beds occupied represent the current potential for strain on the health system.
- ☐ Data on new cases acts as an early warning indicator of potential increases in health system strain in the event of a COVID-19 surge.

COVID-19 Case Investigations

Effective June 30, 2022

- St. Lawrence County Public Health will be ending COVID-19 case investigations and will no longer be calling County residents who test positive.
- □ Residents who test positive with a lab-confirmed test will still be notified of their result by the place where they were tested.
- Anyone testing positive using a home test will continue to report the result using Public Health's website or by calling the Department.
- Individuals who are experiencing symptoms are encouraged to call their provider.

Jolene noted we are currently reporting on Mondays and Thursdays. In discussions with County Administration, we are looking to potentially stop reporting 2x weekly at the end of June (get through the school year). County Administration is looking to change to monthly reporting – 1st week of following month would report for the prior month (Ex. 1st week of August/report month of July). Waiting on additional direction from County Administrator.

Noted something that causes confusion with community members is that Pubic Health's data includes home tests, where the State and CDC only include lab-based tests. We receive phone calls/emails questioning the differences.

Questions regarding presentation or choice of vaccine:

- Dr. Healey would be in favor of Moderna if choosing one. First (2) shots can be provided and the (3rd) will be due a few months later.
- Dr. Terrence is torn, agrees (3) shots is harder than (2), but feels the efficacy so far looks like it is higher in Pfizer (currently reported numbers).
- Dr. Williams hasn't looked at recent data. Asked if there were any restrictions on availability or predictions on what would be more or less likely to be available consistently.
 - Jolene has not heard of any restrictions. Public Health currently does not have Moderna in-house as there hasn't been an uptick in our regular Moderna vaccines. We do have some J&J left and we have Pfizer.

Jolene asked if the Board wants to order both vaccines – unsure of what the demand will be. If both are ordered, they could be split between providers (Dr. Healey, SLH, CHC, CHMC, maybe CF, Dr. Gupta) to help use the supply prior to expiration so as not to waste it. Public Health would act as the hub for distribution.

- Dr. Terrence asked about the under age 5 vaccine coming in single dose vials vs. multi dose vials
 which would be much more helpful. Asked if the plan is to have these vaccines given in PCP
 offices and not Public Health.
 - Jolene noted Public Health will still provide vaccinations, but will strongly recommend the younger children (6 months to 3 years) see their pediatricians to help with comfort level.
- Dr. Williams asked for clarification on both vaccines availability as single doses. Based on this
 information, a final decision will be made on choice of vaccine to order. Dr. Terrence noted a
 choice of vaccines would be better.

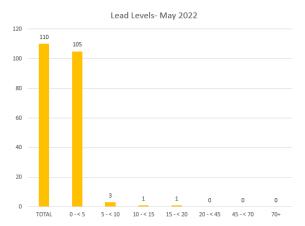
Jolene shared Pfizer is (10) doses per vial and Moderna is multiple doses as well. They may eventually come in single dose vials or smaller dose vials at some point.

Lead Update: Jolene Munger/Miranda Corbine

Data updated to current and future for when NYS changes to align with the CDC for lead level of 3.5 ug/dL to show where our caseload would be for the month.

- May, 2022 there were (110) lead tests performed
- Of the (110) there were (5) elevated, which is 4.5% elevated
- (2) discharges (2) new cases
- (82) on caseload as of June 6, 2022.
- 20 ug/dL and 45 ug/dL (2 total)
 - o 7 year old on caseload since 2018 (original BLL 68). Declining. Last test March, 2022.
 - o 8.5 year old. NYSDOH working to abate lead hazards in home. Last test April, 2022.
 - o Last month 3rd child above 20 ug/dL, recent test May, 2022 dropped to 16.

Lead Update May 2022



110 lead tests were conducted during the month of May – of those 5 were considered elevated (4.5%)

2 Discharges

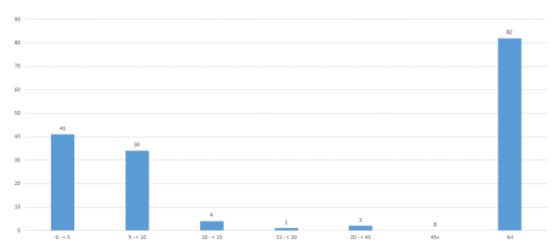
2 New cases

82 Active cases as of 6/6/22

Percent Elevated					
2022					
Current	≥ 5 µg/dL	5	4.5%		
Future	≥ 3.5 µg/dL	9	8.2%		

^{*}The above graph represents children tested for the month of May – it is only a snapshot of children in the LPPP who were re-tested or tested for the first time during May.

Current Active Cases



^{*}The graph below shows the active caseload of children enrolled in the LPPP – not all children in the program are tested monthly.

<u>Fiscal Update</u>: Jolene Munger/Pam Charleston PowerPoint Presentation - Fiscal Responsibilities

Questions:

• Nancy was surprised contractual is so high. Understands it is what someone assigns the category, but transportation, copiers, phones, etc. are not proportioned to employee salaries/benefits. Presumes this comes from Ruth or the Legislators. Thanked Pam for informative information.

Pam noted the biggest expense is the preschool program transportation. Prior to COVID-19 the cost was around \$1.2 to \$1.3 million for First Student transportation (included in contractual). Jolene shared legislators passed a resolution that NYSAT put together attempting to put the fiscal responsibility back to the state. Not every county has this program housed in the Public Health Department. Health departments are pushing the state to move it back to the State Education Department, as it is a school program – schools run the program, hire the teachers, do all the instruction. Public Health is responsible for the transportation to get the students to the school. Public Health would advocate for this to go back to the State Education Department as well. Finding transportation services is an issue – some schools have contracted to provide transportation for their district students, but are also experiencing driver shortages. We continue to monitor what is happening at the State level.

Sanitarian Update: Jolene Munger/Miranda Corbine

Calls for May: (9) total calls

DEC: 3 referrals

Local Clerk's Office: 1 referral Code Enforcement: 2 referrals Property Management: 1 referral

Legal Counsel: 1 referral

Licensed Professional: 1 referral

Water testing calls (4): requesting information on where to get testing done

OTHER ITEMS AND QUESTIONS

Town Rabies Clinics have been going well. Waiting to hear from Lisbon on a date for theirs and Ogdensburg is still declining to host one there. Other than these two, we have had pretty good success. Unfortunately our last two clinics we did not have a great turnout as they were held on a Thursday evenings and with the storm individuals didn't make it out for rabies vaccinations. We will be hosting more in our clinic here in the fall for those who were not able to attend other scheduled clinics.

Dr. Healey asked why this meeting was held via Zoom. Jolene noted the determination for this meeting format was made by Dr. Williams, as the Zoom option was available through the Executive Order. Dr. Scillieri Smith noted she had made the decision for the meeting format to be via Zoom for the May meeting. She is hoping to go back to in-person meetings in September if possible.

Dr. Healey noted he is in favor of reconsidering a time change for these meetings. In his experience, an advantage of morning meetings is everyone was alert and ready to go – meetings seemed to be efficient as well. As a board member, doesn't feel this board is doing very much. Discussions are centered on COVID-19, but others things are happening as well.

Dr. Scillieri Smith suggested using some time at the September meeting to review some priorities that were set pre-COVID (opioid programming/child obesity/Walk with a Doc) and revisit previous established goals. Decide if they are goals the board still wants to focus on and how the board wants to be move forward. Asked if having this as an agenda item for the September meeting sounded good. Dr. Healey noted the mention of a strategic planning retreat or doing more like that. He realizes COVID-19 is not behind us yet, but we can't stop doing other things (tick borne diseases, etc.). Dr. Scillieri Smith hopes in September members will come back refreshed and able to refocused and figure out a plan moving forward. Feels strategic planning can be motivating and productive and help focus on a clearer vision and path going forward. This will be discussed with Dr. Williams.

OLD BUSINESS

Public Health Annual Trainings:

Jolene reminded members the annual trainings are required by compliance. We need them completed and returned to be in compliance with the County. Jolene will update TB training to be sent out in a Google platform.

EXECUTIVE SESSION

No Executive Session.

OTHER BUSINESS

For the September meeting Carly will be providing a presentation on the NYS Public Health Corps Fellowship Program (NYSPHC) that Anne Marie mentioned. We are in the process of setting this up — not a lot of details yet. We will be getting Fellows to work on our Community Health Assessment (CHA) and maybe some of the COVID-19 grants. We will also be working with the Health Initiative to try to get them some assistance as well. Carly will go over what the program is and what the Fellows have been doing — hopefully we will have some Fellows hired (12 month positions).

ADJOURNMENT/NEXT MEETING

Meeting adjourned at 6:50 pm. Next meeting is scheduled for September 20, 2022 at 6:00 pm.

ACTIONS ITEMS FOR FOLLOW UP

N/A