Chautauqua County Board of Health MINUTES

Meeting Date/Time:Thursday, May 21, 2020 @ 6:00 p.m.Location:Virtual Meeting via ZoomScribe:Sherri Rater

ATTENDENCE:

BOH Members	P/A	BOH Members	P/A	Others Present	Title
Dr. Erlandson	Р	Elisabeth Rankin	Р	Christine Schuyler	Secretary, Public Health Director, HHS
Dr. Khan	Р	Natasha Souter	Р	Mark Stow	Director of Environmental Health, HHS
Dr. Kidder	Р	Dr. Tallett	Р	Sherri Rater	Scribe
Dr. Ney	Р	Mark Tarbrake	Р	Lynn Schaffer	First Assistant Social Services Attorney
Andrew O'Brien	Р			Dr. Berke	County Physician

Call to order	The meeting was called to order by President Tom Erlandson at 6:04 p.m.
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Floor	
Approval of January 16, 2020 Minutes	Ney made a motion to approve the January 16, 2020 meeting minutes, 2 nd by Tallett. All in favor; motion carried.
Old Business: Tobacco Policy Update	 Schuyler: The state did take some action to try to decrease our smoking rates and keep our kids from beginning to smoke. The following new legislations have been passed regarding tobacco and vape products: Restricts the use of discounts that reduce the price consumers pay for tobacco products - Public Health Law § 1399-bb was amended, effective July 1, 2020 there will be no discount on tobacco or vaping products. By prohibiting retailers from accepting or honoring discounts for tobacco products or vapor products, this provision combats a common tactic used by tobacco companies to attract new users and maintain their existing customer base. The anti-discounting policy will help narrow disparities in tobacco use in New York State: Groups that use tobacco at disproportionately high rates are typically those most likely to reduce their tobacco use or quit as a result of higher prices. Ends the sale of tobacco & vape products that lack an FDA marketing order – Effective May 18, 2020 (<i>Creates Public Health Law § 1399-mm(1)</i>). Increases oversight of vapor products throughout the distribution chain(<i>Creates Public Health Law § 1399-mm(3)</i>) Stops home delivery of vapor products effective July 1(<i>Amends Public Health Law § 1399-II</i>) Prohibits the exterior display of tobacco products and tobacco product advertising near schools in exterior windows or storefronts within 1500 feet of a school. (<i>Creates Public Health Law § 1399-dd(1) and amends General Business Law § 396-aaa</i>) effective July 1, 2020.

	 increases to \$1,500 for the first violation and subsequent penalties will be \$1,000-\$2,500. If retailer accumulates three points they will have a one-year registration suspension. Surcharges available to local enforcement agencies will increase from \$50 to \$250 (Amends Public Health Law §§ 1399-ee) effective July 1, 2020. Stow: We will be enforcing these new laws. Schuyler: We still have the option to do more with tobacco and vaping restrictions at the local level. I do hope that the Board will consider some licensing requirement for tobacco retailers so that we can have a little more control over the number of retailers in the County.
	After much discussion it was decided that Erlandson will talk with Ken Dahlgren of the Tobacco Policy Council to discuss options at the local level and bring it back to the group for the next meeting.
New Business: COVID-19	Schuyler: We are in the middle of a pandemic and our core public health responsibility. I am very proud of our staff and appreciative of all of the work they are putting in. This is a seven day a week operation and we have been very busy. We have seen cases from all ages and walks of life. Fortunately most people have not been seriously ill with this. We have had four deaths. As with the state and the nation, those with underlying health conditions tend to be where the more severe cases are and that is what we have seen in our County as well. Testing has been slow to get ramped up as with everywhere else. Testing supplies are currently not overly abundant, but are now more readily available. As a health department we have done some drive-thru clinics targeting our essential workers.
	There has been a little confusion with nursing home and adult care facility testing. Three weeks ago the Governor asked local health departments to assist in testing nursing home residents and staff. As we developed plans to initiate this effort, the Governor ordered that nursing home and adult care facilities must have their staff tested twice weekly. The guidelines for the testing would not allow for us as a local health department to conduct the staff testing and that local health departments now are to only test residents in these facilities. Unfortunately we have not gotten any buy in from the nursing homes and adult care facilities to test their residents. We have been told that they are confident their medical staff are checking for symptoms and testing those who need to be tested but do not want to put their residents through the nasopharyngeal swab test because it can be traumatic. Fortunately, we have not had any nursing home or long term care residents test positive for COVID-19. We tentatively plan to test residents at two facilities next week. We were able to test staff in one nursing home prior to the Governor's change and are happy to report that all staff tested negative for COVID-19. Nursing homes in our area have done a great job with infection control and protecting the residents and staff at their facilities.
	 Schuyler states there are several concerns regarding staff testing at these facilities which include: Lack of testing supplies with nearly 2,500 nursing home and adult care facility employees in the county. Preferred method is nasopharyngeal swab which is invasive and can't help but think that it could cause some long term damage with twice weekly testing. Billing issues – currently facility has to pay and then somehow bill each staff member's insurance afterward.
COVID-19 cont'd	 Long term care facilities do not have medical staff to order the tests. We already have staff that are quitting because of this. The executive order expires on June 9th, so at that time the Governor may issue another executive order which will, hopefully, be more feasible. If this continues the Governor is on track to collapse the long term care system in NYS so I am very hopeful that he is consulting with health care professionals to come up with a better plan to ensure our nursing home residents are safe and healthy. Ney: Are we, as a Board, able to give input?

	Schuyler: Suggests that if the Board would like to support another recommendation, they should write a letter and
	send it to the Governor's Office. After much discussion it was decided that Schuyler will draft a letter to Governor Cuomo's Office pointing out the
	CDC guidelines, the fiscal and financial impact to the nursing home and adult care facilities, and the low
	prevalence of the virus in these Chautauqua County facilities. The draft letter will be sent to the Board for review
	before mailing to the Governor's Office.
	O'Brien: Concerned that facility residents only option for testing is determined by the facility medical staff's
	discretion. Schuyler: I haven't received any complaints from family members of residents.
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	WellNow Urgent Care facilities in Chautauqua County have been doing a tremendous amount of both infection and
	antibody testing. They are not providing our office or their patients with the results in a timely manner. It is taking
	7-12 days to get a result back. Today we got a positive result back that was collected on May 3 rd . The state law is that they need to notify immediately when they have a positive of any communicable disease that is reportable.
	WellNow is using a lab out of Boston and it is taking way too long. WellNow is instructing patients to go onto the
	patient portal to receive their results and they are not following up with patients who do test positive. That means
	there is no primary care physician notification or anything else coming from that provider which is a liability issue
	for that organization. There are 29 WellNow centers throughout the state. This is not an isolated issue within our
	County, it is a statewide issue. We have given WellNow some paperwork to give their patients who are being tested for COVID-19 asking them to call us so that we can give them the instructions on how to isolate.
	Kidder: Dealing with the ramifications of the testing coming out of WellNow has been difficult from the primary care
	standpoint. Patients who are getting an antibody test which frankly doesn't make any sense to have given the
	amount of prevalence that we have with this virus in our County. It is a complex discussion to have with patients to
	make them understand that there is a 50% chance of that positive being a false positive and it really doesn't give
	us any helpful information. It is a 15 minute conversation based on a test that shouldn't have been ordered. So the kind of misinformation that is out there is causing a challenge for us as well.
	Khan: Pharmacists being allowed to order and conduct testing is going to be another challenge.
	Souter: There are a lot of people saying that they were sick a few months ago and think that they had COVID-19.
	How do we educate the public that the antibody test is not the answer? Kidder: We get a lot of these same questions. One thing that we are doing is the medical leadership group that
	meets is working to put out a public statement trying to describe each of the tests available in lay terms and which
	ones make sense and which do not for the situation at hand to hopefully provide some education to the general
	public so they will know which test to ask for, given their history.
COVID-19 cont'd	Schuyler: Testing has been one major road block in this pandemic. The state did send us some testing kits
	recently and we plan to utilize them next week for a community clinic in the Clymer and Sherman area and we may
	be in the nursing home testing next week as well.
	There has been a lot of questions from the public like why are we not giving out the zip code of the positive cases
	and other possible identifying information. I think the board can appreciate that we cannot do that. We cannot
	give out any information that in any way would be identifiable. We cannot discriminate by other things like race
	and religious preference. I can say that we do have some community spread going on.
	Contact tracing is a core public health function that we have been doing for decades. There is a state training that
	is required for anyone who is going to be a contact tracer and does not already do that as part of their job. We

	have 80 people in county government and 120 people in the Jamestown city government took the online contact tracing training. We are fortunate that we are Health and Human Services and have called on other divisions to assist. The State rolled out a new electronic system for communicable disease investigation of COVID-19 called CommCare. No other communicable diseases will be in this system. While the system seems to have potential, it is next to impossible to adopt a totally new system in the middle of a pandemic. Other counties who are testing it out are experiencing significant issues and glitches in the system and some are refusing to use it. We are going to continue our current process while starting to learn the new system. I will not overburden the staff with duplicate documentation and the added stress of implementing a new system at this time. Contact tracers must take the online training and then be oriented to our system so the process isn't as simple as some make it seem. NYSDOH has told us that several communicable disease investigative process. We are doing things well, we know what we are doing and we will continue to do it. If we receive a surge in cases and contacts beyond our capabilities, then we can get assistance from the state. Kidder: How are we training staff in other divisions? Schuyler: We are training between 3-6 staff a week and have started with our Fraud Unit and Child Support Unit as they are already investigators. This has been going very well. We also have case managers and caseworkers
	who will fill in the community care specialist role. Public Health nurses are training the additional staff. We don't want to get so many people trained that we are not using them so they don't forget what they have to do. Ney: If someone doesn't have a PCP, CCHN has a process in place to connect them with a physician during this time. Schuyler: We utilize that and the Chautauqua Center to link people up with a provider.
	O'Brien: North county positive numbers are high. Why does Jamestown area have less than what you would expect? Schuyler: North county is high and we feel this is due to the close tie to Erie County NY as people are coming and going between those areas. We need to accept that our numbers are going to go up some as we reopen. Experts say we could have a year or two before this is really manageable. The more we can keep our distance, cover our faces and wash our hands, be smart and use common sense, the better we will be.
COVID-19 cont'd	Kidder: As things reopen who has the jurisdiction to enforce restrictions? Schuyler: This subject is talked about daily at our COVID-19 daily team meeting with myself, the County Executive, Sheriff, and County Physicians. The state has not made it clear who is supposed to enforce but it seems to rest with law enforcement and code enforcement. Per Governor Cuomo, religious gatherings and Memorial Day celebrations can happen with10 or less people and social distancing measures. Campgrounds are open; no congregate areas are open (playgrounds, concession stands), signage is in place and additional precautions for restrooms and shower facilities.
	 Stow: Golf courses are open for single use golf carts, social distancing, minimize contact. Marinas are able to open as well. We have had some issues and people are pushing the envelope with some restaurants and public areas where people are not social distancing. Schuyler: Schools have been calling about graduations, we are getting new questions every day and have really been trying to answer them all the best we can. We try to react quickly when a new executive order is issued; however, it is difficult to do so because the state overseeing agency, such as Department of Health, has not developed guidance before the order is issued. Things are changing very quickly. We work hard to assist health
	care facilities, schools, and businesses only to have things change once again. It is very frustrating. It is important to abide by community mitigation restrictions as a phased reopening occurs. If Western New York does not meet the state's metrics, the Governor will put more restrictions back in place.

	Schuyler: The public health crisis of substance misuse and resulting overdoses continues. Isolation is a relapse
	trigger for those who are in recovery for both mental health and substance abuse and so we are seeing that
	reflected in our data. Last year, there were 234 suspected overdoses reported in the County. So far this year,
	there have been 126 with 8 of those fatal. In March 2020, 46 suspected overdoses with 2 fatal; April saw 19 with
	4 fatal; and from May1- present, 11 nonfatal overdoses. These are overdoses reported by first responders through
	the ODMAP system. We know that there are other overdoses in the community that are not reported. Per local
	law enforcement, street drugs are being laced with fentanyl. The rapid response system in place here works with
	the ODMAP system to connect a peer from the Mental Health Association with every single one of the overdose
	cases, trying to get them engaged or reengaged in programs.
	O'Brien: Are there any problems accessing methadone with the lock down and people needing to travel to Buffalo
	or Erie to receive methadone?
	Schuyler: Some of the residents in the county have been able to get the longer supply of medication so they don't
	have to go out every day to get their medication.
	Berke: We are transporting people all the way to Buffalo to get treatment when there have been applications to
	open clinics in Jamestown and Dunkirk meanwhile we are paying to send people to Buffalo everyday which takes
	all day, no way for someone to work. It is costing \$400 a day, per person for transportation to Buffalo which could
	be \$70 if they were transported locally. We have about 80 people in the county who are going to Buffalo.
	Kidder: Some of my patients have noted that they are going 3 times a week to Buffalo now instead of everyday. If
	they can't get the medical transport, they are having a family member, sometimes elderly, take them. There is no
	social distancing practice going on at the methadone clinic. So not only is the patient being exposed, possibly
	another family member is too. O'Brian: The general energtion of a methodone clinic is the direct enposite of accial distancing. Deficite prefer to
	O'Brien: The general operation of a methadone clinic is the direct opposite of social distancing. Patients prefer to
	arrive at the same time because they are trying to get to work or somewhere else, it is harder to spread them out. We did discuss the local methadone clinics at a previous meeting and really haven't made any progress.
	Schuyler: Is the Board interested in reaching out to the County Mental Health Director, Pat Brinkman, to see if the
	County LGU has been advocating for a clinic here? The State approved applications for two clinics in the County;
	Hispanic United/Acacia in Dunkirk and UPMC Chautauqua in Jamestown. With applications in and the State
	saying that these services are needed, I do not know why we have not received word of any further progress.
	Schuyler/Ney: This pandemic is resetting our world and if there was ever a time to look at the way that methadone
	patients are treated and the rules and regulations to how they are treated, now is the time.
	After much discussion it was decided that Schuyler will contact Pat Brinkman and then if needed, will draft a letter
	for the Board's approval advocating the support of two methadone clinics in Chautauqua County. Upon approval,
	the letter will be sent to the County Mental Health Director, the NYS Office of Mental Health and Substance Abuse,
	OASAS and NYSDOH, with copies to Borrello and Goodell.
	Schuyler: Environmental Health water lab is fully operating for public water supply sampling and testing. All other
	public health programs are continuing but have been downsized or are being done remotely. Community health
	staff is all hands on deck for COVID-19 response efforts. Some Social Services program requirements have
	changed and been temporarily waived.
	Discussion was had as to mosting more frequently during the pendersia. Kidder mode a motion to establish
	Discussion was had as to meeting more frequently during the pandemic. Kidder made a motion to schedule a meeting June 18, 2020 at 6:00pm, 2 nd by Ney. All in favor; motion carried.
	Motion to adjourn by Dr. Tallett. Meeting adjourned at 7:50pm.
Adjournment Future Meeting	June 18, 2020; July 16, 2020; September 17, 2020; November 19, 2020.
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