

Chautauqua County Board of Health
MINUTES

Meeting Date/Time: Thursday, June 18, 2020 @ 6:00 p.m.

Location: Virtual Meeting via Zoom

Scribe: Sherri Rater

ATTENDANCE:

BOH Members	P/A	BOH Members	P/A	Others Present	Title
Dr. Erlandson	P	Elisabeth Rankin	P	Christine Schuyler	Secretary, Public Health Director, HHS
Dr. Khan	P	Natasha Souter	P	Mark Stow	Director of Environmental Health, HHS
Dr. Kidder	P	Dr. Tallett	P	Dr. Berke	County Physician
Dr. Ney	P	Mark Tarbrake	P	Sherri Rater	Scribe
Andrew O'Brien	P			Ken Dahlgren	Tobacco-Free Chautauqua, Cattaraugus, Allegany

Call to order	The meeting was called to order by President Tom Erlandson at 6:08 p.m.
Privilege of the Floor	<p>1. Submitted by Lynn Bedford, Arkwright resident: Dear Chautauqua Co. Board of Health - I hope you all have pulled through the past months of Covid. It gave everyone a taste, of what it is like to live with Wind Turbines. The Infrasound, like a virus, you cannot see, but can and does get us very very sick. I have had the best three days this week with the Turbines off. My heart is beating perfectly, no anxiety or dizziness. I don't feel sick to my stomach and I can hear the birds sing. Such beautiful peace that will surely end as soon as they are turn back on. I dread another summer. Please don't forget about us. Thank you</p> <p>2. Submitted by Evan Davis who lives on the Bartlett Hill Road: Dear members of the board, I would first like to thank you for helping our community through these difficult times. Though there are currently more pressing issues facing our public's health, the impending construction of industrial wind turbines still remains a valid concern. If we have learned nothing else from this pandemic, it is that when it comes to health and safety, it is far more important to be proactive rather than reactive. These structures have been globally proven to be detrimental to the health and well being of those living in close proximity to them. Despite the Chautauqua county planning boards repeated denial of the Ball Hill Wind project, the Villenova town board, consisting of a "supermajority" of 4 members, has successfully been able to overturn this decision and push forward their proposed 600 foot high turbines, 150 feet taller than those in Arkwright. These structures will impact over 1000 residents in the township of Villenova and Hanover alone, with a sound overlay map projecting an influence of many times that number.</p> <p>Privilege of the Floor (con'td) And while they do not have the tangible mortality of the covid virus, this plague of industrial turbines must be stopped if we are to preserve the health, happiness and well being of our communities. A 2006 version of New</p>

	<p>York’s public safety code 10-108 prohibits the use of any sound device “that is detrimental to the health, welfare and safety of the inhabitants....or disturbs the public peace and comfort and the peaceful enjoyment of their rights,” and yet these turbines are being allowed to pollute our neighborhoods, 24 hours a day, 7 days a week, 365 days a year.</p> <p>3. Submitted by Mark Twichell, resident of Fredonia: Dear Members of the Chautauqua County Board of Health, As appointed wind turbine noise monitor by the Town of Arkwright I appreciate this opportunity to offer a statement in support of citizens who have reported their adverse health effects to your board. In response to complaints over the previous two months I have measured turbine noise using an approved decibel meter at four homes and one seasonal residence. On each visit the meter has measured and recorded turbine noise in excess of that referenced in the town law. The only path for mitigation of the noise is to have the turbines ruled non-compliant, a finding that is nearly impossible under the terms written by the wind company and adopted by the town. My responsibilities are in conjunction with an engineering firm hired by the town and approved by the wind company for the purpose of noise monitoring. At a meeting with a representative of the firm, GHD, I received instruction on monitoring protocol and use of the decibel meter/recorder. I was advised at this meeting to choose a setting on the meter that would minimize the measurement of noise above the allowance. I also learned there that several complaints had previously been investigated at times removed from the actual complaint, at which point the turbines were not as loud but nonetheless were ruled compliant and could not be reassessed for three years. The complaint resolution process at the town level is designed to provide no help to residents in reducing turbine noise. This fact in addition to the arrival of COVID-19 has potentially reduced the number of complaints I have been called to document. My experience in this capacity points to the fact that the impact of wind turbine noise as defined by wind companies and sympathetic local regulators may have little relation to the reduction of harm allegedly provided by allowable noise metrics. Chautauqua County citizens should take little comfort in the knowledge that GHD is the company employed by the towns hosting the pending Cassadaga Wind Project.</p>
<p>Approval of May 21, 2020 Minutes</p>	<p>Ney made a motion to approve the May 21, 2020 meeting minutes, 2nd by Tarbrake. All in favor; motion carried.</p>
<p>Old Business: Tobacco Policy Update</p> <p>Tobacco Policy Update (cont’d)</p>	<p><u>Erlandson</u> – I have been in communication with Ken Dahlgren of Tobacco-Free Chautauqua, Cattaraugus, Allegany.</p> <p><u>Dahlgren</u> - Recapped the new NYS tobacco policies implemented in May and those to be implemented in July. Implemented on May 18, 2020</p> <ul style="list-style-type: none"> • Ending sale of tobacco and vape products in pharmacies • Ending the sale of flavored vape products <ul style="list-style-type: none"> ○ There could come a point down the road where some flavored vape products may be able to be sold but definitely not the vast array that we have had. • NYS now has the authority to regulate carrier oils which is what supposedly lead to the EVALI crisis. <p>To be implemented July 1, 2020:</p> <ul style="list-style-type: none"> • Restricts use of discounts on tobacco products • Increases oversight of vapor products through the distribution chain – Product manufacturers must disclose product ingredients.

	<ul style="list-style-type: none"> • Stops delivery of e-cigarettes and vapor products to private residences – thus ending online sales which will decrease the amount of products in minor’s hands. • Prohibits exterior display of tobacco products and tobacco advertising near schools • Increased retailer penalties for tobacco control violations – local surcharges will increase from \$50 - \$250 as well as increased penalties for first, second and subsequent penalties. <p>Local level options were discusses: Would it make sense to pass a local licensing law that doesn’t add any additional regulations? It could be an amendment to the sanitary code. With a local licensing law you could fund a more rigorous local compliance. The laws are that you can’t make money on the licensing program, but you can use the money collected to pay for ATUPA enforcement.</p> <p>Later, a cap could be put on the number of licenses in the County. That would require a law to be passed through the legislature.</p> <p>80% of people start on menthol flavors. Almost everyone that starts smoking does so by the time they are 18 years of age.</p> <p>There are a lot of options for the Board of Health.</p> <p>After much discussion it was decided that Tom Erlandson will work with Ken Dahlgren and Lynn Schaffer on some proposed local level changes and bring them to next month’s meeting. They will also work together to develop a press release.</p>
<p>Old Business: COVID-19</p> <p>COVID-19 cont’d</p>	<p><u>Schuyler:</u> Daily COVID-19 leadership team meetings have gone down to three days a week now which is a good sign for where we are going trend wise with this disease.</p> <p>Schuyler reported the following Chautauqua County COVID-19 statistical information for March 23, 2020 – June 17, 2020</p> <p>112 positive cases, 11,292 negative cases</p> <p>Of the 112 positive cases:</p> <ul style="list-style-type: none"> • 62% Female, 38% Male • Number of positives by age: 10 in their 80’s, 12 in their 70’s, 16 in their 60’s, 17 in their 50’s, 9 in their 40’s, 17 in their 30’s, 19 in their 20’s and 12 under 20 years of age. • 88% have recovered, 6% active and 6% deceased. • 47% reside in Battalion 1, 18% in Battalion 2, 28% in Battalion 3 and 7% in Battalion 4. <p>Staff has done an excellent job on disease investigation and contact tracing. We are at a little bit of a lull and are able to catch a breather. As you all know we just don’t know what we will see as we go into the fall.</p> <p><u>Tarbrake</u> – How many have we had hospitalized at this time?</p>

COVID-19 cont'd

Schuyler - I do not know off the top of my head, but will check into that.

Schuyler – NYS CommCare software system as well as NYS contact tracers who the State has brought on board to assist the local health departments. The software has been hard to embrace because there have been a lot of glitches. The State is working out the glitches, but until the software is more streamline we will continue to do duplicate work by using the software and keeping a paper file. The nurses feel the software has potential but it needs to have more of the bugs worked out.

Tarbrake – Do you think there will be a vaccine developed? There have been many diseases that they have tried to develop vaccines for in the past and have been unsuccessful.

Schuyler – Eventually, but probably not by fall. There are some stage three clinical trials happening right now.

Berke – You can develop a vaccine but it may not work. Usually it is years before you get something that is effective. Obviously a lot of money has been put into this because of the world wide spread. A vaccine was developed for Swine Flu and it was useless. There is still no vaccine for HIV. This is tough work.

Tallett - It also depends on if the body can develop antibodies to the virus, where HIV the body has not be able to develop antibodies, but with Coronavirus the body has so there is a chance that we will have a vaccine.

Khan – There will be several vaccines because many companies are working on it. Europe is ahead of the game and so look to see something from them first.

O'Brien – Do we have a published R-naught number for WNY or Chautauqua County?

Schuyler – not that I am aware of.

O'Brien –I am surprised that that number is not mentioned as it is in a lot of other areas.

Schuyler – have to look into that.

Khan – I am working with the NYS task force for reopening schools. There is a lot of anxiety at the school level from the superintendents, parents, teachers. Supposedly the guidelines are going to come out in mid-July. Schools are getting inundated with questions. Some of them have come up with some plan of action based on CDC guidelines but they know that they will have to conform to the NYS guidelines when they are released. It is a challenge for all involved.

Berke – One problem is that there is a new regulation or change in guidelines every 36-48 hours and so it is very difficult to plan with all of the changes. People are having a hard time staying on track. State Ed is going to come out with something hopefully that will be in line with NYSDOH and the Governor's Office.

Schuyler - The guidance has been very confusing and takes a long time to come out after something is announced at a press conference and so it continues to be very challenging. A lot has changed since our last Board of Healthy meeting. We are now into phase 3 and so the community is starting to reopen. So far we have not seen an increase in disease yet but that doesn't mean that we won't. I am wondering what is going to happen with people who are just a little bit sick and whether or not they will have a desire to be tested. Everyone fully knows now that if they test positive they are going to have to quarantine and with it being summertime and things opening back up a lot of people are not going to want to do that.

I did not write a letter to NYS regarding nursing home staff testing, as mentioned in last month's meeting, because the Governor changed the guidelines for testing of nursing home and adult care facility staff to once a week instead of twice weekly. That is in line with the CDC guidance. I don't know if that will change as we open up. There is still an issue, especially with Adult Care Facilities, with trying to get supplies, the cost of supplies and cost of testing. The NYSDOH did test all nursing home residents in the County and that turned out to be a really good initiative. The infection control policies within our nursing homes are commended with the low incident of

<p>COVID-19 cont'd</p>	<p>disease. A lot of that is a direct result of the preventative measure that nursing homes have taken for their residents.</p> <p>Hospital visitation guidance was just released earlier this week. NYSDOH has told us that long term care visitation guidance will be coming soon. I think the Governor's office is getting a message that we are doing more harm than good for the residents of these long term care facilities that have been shut off from their family for so long now.</p> <p>There is a bill before state senate that would make it so that Pharmacists will be able to administer the COVID-19 vaccine once one becomes available.</p> <p>One thing that the Board of Health should keep top of mind is that the local health departments (LHD) have been seen as invisible, not just with COVID-19 but in general to the work we do in the health care system. As you know, public health has been chronically underfunded. As we move forward to a very challenging budget year at both the state and local level, it is going to be very important to continue to argue the importance of our public health work. I hope that, if nothing else, we have proven ourselves in showing that this pandemic really is going to be critically important to make sure that LHD's do not get pushed back into invisibility but continue to receive the ongoing support that is necessary to maintain what really is a cornerstone, critical role in protecting and promoting our community.</p> <p><u>Rankin</u> – Who is going to enforce COVID-19 restrictions? We have also heard back from people going back to work who are afraid of getting sick. There is a lot of anxiety about all of this. What are we doing as a LHD regarding enforcement?</p> <p><u>Schuyler</u> - There has been no directive to LHD to enforce NY on PAUSE or reopening guidelines. We have taken a proactive role with the establishments that we permit (restaurants, tattoo shops, tanning facilities, pools). In general when we talk about things like crowd control and face mask enforcement, those things are referred to NY on PAUSE enforcement to be filtered through and then forwarded to our local law enforcement.</p> <p><u>Berke</u> – In conversation with local law enforcement, they do not have the capacity to deal with this either. You are dealing with multiple businesses that are opening. There has been talk about bringing it down to the local code enforcement. There is really no way to enforce. We have been really fortunate in this county that the residents, except for a few, have been law-abiding citizens and I think that is why we have a prevalence of less than 1%. I'm sure you've all had experiences that you've walked in somewhere and someone is not wearing a mask, but for the most part businesses and people are following the guidelines.</p> <p><u>Schuyler</u> – This is hard to foster collaboration and partnership when this pandemic has been addressed the way it has at the state level. Our job as a public health department, in addition to disease investigation and contact tracing, is really providing health education and getting the word out about education and not so much as coming down with the hammer.</p> <p>Mask wearing – we don't want people to get complacent. We plan to get the word out again about face masks. Remind people that COVID-19 is a respiratory borne illness and the air that you share with someone else is really very important.</p> <p><u>Berke</u> – We are using 200 year old technology which is masks and social distancing which is very effective if used properly.</p> <p><u>Ney</u> – I'd like to congratulate LHD they are doing a great job. It is incredibly regretful that health departments have been given a tough time in areas where the economy is fighting against public health measures. Some Directors of LHDs have stepped down, some have received threats – it is sad – people are trying to do good and getting</p>
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<p>COVID-19 cont'd</p>	<p>resistance right and left. Anything we can do to try to tell everyone to hang in there for another 6-9 months is what we need to do.</p> <p><u>Berke</u> – We have dropped the ball on this as a nation and it is really disappointing. The bad communication we are getting from all levels is ridiculous. We sat for months without the appropriate testing – we still can't get adequate gowns – we can put a man on the moon but we can't do this. We have almost 120,000 people who are dead now and didn't have to die. There are other models who have done this in a way that have limited the mortality. We are not done by a long shot we are in this and we are going to take casualties.</p> <p><u>Schuyler</u> – The former director of the nation's strategic national stockpile who just retired in January stated if he would have known this was coming he never would have retired as this is pretty much what he worked his career for. He did reveal that after H1N1 pandemic the stock of PPE, equipment and medications directly related to a respiratory disease were not refunded and restocked appropriately.</p> <p><u>Souter</u> – Has Urgent Care gotten better with their reporting?</p> <p><u>Schuyler</u> – They have gotten better; labs have gotten better as well.</p> <p><u>Berke</u> – The issue with Urgent Care now is they are doing antibody testing and it's useless. People are spending their money to get this test and the results are meaningless. Additionally, with such a low COVID19 prevalence, you are going to get as many positives as you do false positives.</p> <p><u>Schuyler</u> – The sensitivity of the antibody testing is not quite there yet. The testing at Wadsworth is much better, but the ones that are used at some of these referenced labs are not up to par. I would not waste my money to get an antibody test right now I would wait until we have additional FDA approved testing mechanisms.</p> <p><u>Kidder</u> – Suggests that we try to get the word out about some of these things via social media. We have seen things in the paper (about the accuracy of antibody testing) but that is not always the media that people are looking at so social media would be a great audience. As industries open up we are trying to be helpful as a medical community to give advice on testing, what makes sense, what doesn't. We anticipate that infections may pop up as businesses reopen. And so we are working it from the medical side from that perspective, but perhaps the LHD can have this testing clarified again in whatever creative ways we can come up with.</p> <p><u>Schuyler</u> – That is a great idea. We will work on that.</p> <p><u>Erlandson</u> – How do you see the future? What changes to do you foresee between now and our meeting next month? Much of what we have seen with low incidents is really the result of people doing what they have been urged to do.</p> <p><u>Schuyler</u> – I honestly think we will see increased infection as people are out and about more and traveling for vacations and family get-togethers. This is something to be expected. I am hoping that we will see people continue to wear their masks. I think we need to focus on what is our most important point to disseminate to the public, rather than a laundry list of things. It is important for people to know that the virus is here and it is mainly spread by droplets. So pay attention to who you are sharing your air with within six feet of you and if you cannot maintain six feet you really need to put your mask on. We don't want people to get complacent.</p> <p><u>Erlandson</u> - Between now and next month we need to get the message out about testing and ask are you ready.</p> <p><u>Schuyler</u> - Shelly Wells is doing an excellent job for us getting messages out to the public.</p>
<p>Old Business Availability of Substance Abuse Services</p>	<p><u>Erlandson</u> - Last month we talked about the lack of methadone clinics in the county. I received a letter dated June 12, 2020 from Pat Brinkman, Director of the Chautauqua County Department of Mental Hygiene (CCMH) who noted that we only focused on one thing at the last meeting but the fact is there are many available substance abuse services in the county.</p>

<p>Availability of Substance Abuse Services (cont'd)</p>	<p><u>Schuyler</u> – The letter Dr. Erlandson is referring to was emailed to the Board prior to this meeting. I think that Pat Brinkman really wanted us to be aware of the vast amount of services that are available to those in need of substance abuse services in the county and those were outlined in the letter. The letter also indicated that they have been working hard to get a methadone clinic in the county and that ACACIA out of NYC has been approved and plans to open a methadone clinic in Dunkirk. The same day a letter was received from ACACIA, reiterating their plans to open a methadone clinic in Dunkirk and outlined the services that they will be providing. This letter was also forwarded to the Board to review before tonight’s meeting. It looks like that is moving forward and hopefully in the not too distance future we will be able to have a methadone clinic in Chautauqua County.</p> <p><u>Berke</u> – UPMC was saying that there is no money being offered up by the state to help with all of the requirements and so this is why things are not moving forward right now for a methadone clinic in Jamestown. Asks Mr. O’Brien to respond as he played a critical role in this project.</p> <p><u>O’Brien</u> – Let me just speak in general about what has been said so far about this topic. I think that Ms. Brinkman’s comment about the vast array of services in the county is taking the focus off of the real issue. We know that there are many good quality services in Chautauqua County that provide substance abuse services. However the lack of availability of a methadone clinic is an embarrassment, in my opinion, to this county because it is universally recognized as the gold standard in dealing with opioid intervention. So the fact that our residents don’t have the gold standard means to me that we don’t have a vast array, we have a good array, but we don’t have the one that has been recognized to have the best outcome. I’m happy to hear the news of ACACIA progressing. The Office of Alcohol and Substance Abuse Services have a pretty good formula for providing services and funding these services including opioid services. Hospitals in general, not to specifically address UPMC, can be a little too expensive in terms of how they allocate costs, however you can’t develop a clinic services. I developed a clinic services that OASAS was willing to fund, however for various reasons UPMC submitted a budget for a different physical space because I think they believed that physical space was in keeping with the regulations, however, what other places have done such as BestSelf, they have a clinic in Hamburg that was able to reduce expenses by getting a waiver to share space. My view is that the South County providers could get adequate funding from OASAS if they were innovative and worked with the Legislature and OASAS on sharing space in a safe way rather than dedicating a totally separate place with a totally separate entrance. That is what was done in Hamburg and other places and I think it could be done in Jamestown.</p> <p><u>Berke</u> – We have had more overdose deaths in the last three months than COVID deaths and so I am not sure if the quality or availability of substance abuse services is addressing the issue sufficiently. The number of calls for EMS to go and give Narcan is on a daily bases and so there is some mismatch between services and those who are thought to be the recipient of those services.</p> <p><u>O’Brien</u> – My view is I would look for more leadership from Mental Hygiene on getting methadone services. I think it has been inadequate.</p> <p><u>Berke</u> – It has been at least three years that the two applications have been sitting there and it’s just a question of the support or lack of support and getting the political representatives involved to do what they can do at their end to get this done. I had a frank conversation recently with both George Borrello and Andy Goodell about this about how we are sending 80 people to Buffalo every day for methadone treatment, about \$8M a year in transportation costs and for what? So they could blow a half of a day of travel and not be able to work, riding with four or five other people in a car during a COVID-19 pandemic. It’s just crazy.</p> <p><u>Erlandson</u> – Are there action for the Board of Health in this regard?</p>
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	<p><u>Ney</u> - when is ACACIA planning to open the Dunkirk clinic</p> <p><u>O'Brien</u> – It is a lengthy process to get all of the approvals to open a methadone clinic. Among others, the DEA and FDA must approve and they kind of move at their own pace.</p> <p>What Dr. Berke said is exactly correct. If we got the right people in the room and they were willing, I don't think that OASAS is the culprit here in regard to the Jamestown clinic. They are the ones that have been advocating for these services in every county.</p> <p><u>Schuyler</u> - It is unknown at this time when ACACIA will open the Dunkirk clinic. Pat Brinkman is out of the office this week and so I have contact information for ACACIA and plan to reach out to them directly to get an idea of their timeline.</p>
<p>New Business Agreements to Settle</p>	<p>Agreements to settle were reviewed</p> <p><u>Stow</u> – We have some left over violations from the first quarter. We haven't had any hearings since March. Of the violations we have had tobacco violations, water supply violations and restaurant violations.</p> <p><u>Erlandson</u> – There are 23 property transfer violations? How does that happen? Is it because there isn't a realtor involved?</p> <p><u>Stow</u> - Realtors know the rules for one reason or another fail to give their clients the appropriate information. Actually this is a shorter list than usual so we are making progress on this.</p>
<p>Director's Report</p>	<p>None</p>
<p>Other Business Harmful Algae Blooms Harmful Algae Blooms cont'd</p>	<p><u>Erlandson</u> – Harmful Algae Blooms (HABs) There have been three phosphorus sensors deployed in Lakewood, Stowe, Bemus Point. Within the next week or two there will be a fourth sensor deployed in the Dewittville area. Data are being obtained but cannot be processed yet (because of COVID). Once those data are available we will correlate the data from the lake phosphorus with the data collected from 16 streams. There are some preliminary data from last summer that shown that the preponderance of phosphorus that feed HABs in the lake is not from the streams. It comes from phosphorus sequestered in the sediments of the lake which is a whole other issue as you know we have lots of sediment in Chautauqua Lake. This effort is proceeding and we will give another report next month.</p> <p><u>Tarbrake</u> – How do you view the health/progress of the lake so far this summer?</p> <p><u>Erlandson</u> – Herbicide treatment this year is not going to be focused on the earlier of the two invasive weeds. That being curly leaf pond weed which typically dies back at the end of June. It may be a little later this year because of the cold spring. Herbicide treatment will be focused on the second invasive weed, milfoil. That treatment will take place on June 24th using a new herbicide. There are no drinking water restriction or swimming restrictions with this herbicide. It has been approved by NYS and used in other lakes. Permits have been issued. There are around 79 acres in Busti/Lakewood area, and a significantly smaller area in the Bemus Bay. There will be no application north of Long Point and so we will see what happens.</p>
<p>Adjournment</p>	<p>Motion to adjourn by Tarbrake. Meeting adjourned at 7:47pm.</p>
<p>Future Meeting Dates</p>	<p>July 16, 2020; September 17, 2020; November 19, 2020.</p>