

Chautauqua County Board of Health  
MINUTES

**Meeting Date/Time:** Thursday, January 21, 2021 @ 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	A	Bill Boria	Environmental Health Director, HHS
Dr. Kidder	P	Dr. Tallett	P	Dr. Berke	County Physician
Dr. Ney	P	Mark Tarbrake	P	Bree Agett	Epidemiology Manager, HHS
Andrew O'Brien	P				

<b>Call to order</b>	The meeting was called to order at 6:02 p.m. by President Tom Erlandson.
<b>Roll Call</b>	Roll call was done. Those present and absent are noted above
<b>Privilege of the Floor</b>	<p><u>Jim Wehrfritz of Bemis Point submitted comments:</u> When did Chautauqua County submit the vaccination implementation plan required by NYS to the state, was there a response from NYS and was it approved and when? How can I get a copy?</p> <p><u>Schuyler:</u> We continue to keep updating the vaccination plan and working as we go. It is in draft format and it is not in county policy to release documents that are in draft format. The plan itself has turned out to be somewhat irrelevant for us since the State has really taken over the implementation of the vaccine distribution plan and so our plan is not being implemented to the point that we would like it to be.</p>
<b>Approval of December 17, 2020 Minutes</b>	Tarbrake made a motion to approve the 12/17/20 meeting minutes, 2 <sup>nd</sup> by Ney, all in favor, motion carried.
<b>Old Business: COVID-19</b>	<u>Schuyler:</u> NYS is now in phase 1A and 1B of eligibility for the COVID-19 vaccine. That means there are about 7 million people across the state who are now eligible to receive vaccine and only a few hundred thousand doses of vaccine that are coming to us. I believe NYS receives just about 300,000 doses per week from the Federal Government. NYS then distributes that to all of the vaccine providers across the state. As of Monday we began week six in the States vaccination campaign. The County Health Department (LHD) didn't receive any vaccine until week three and at that point we received 200 doses which were redistributed to us from UPMC Chautauqua.

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The following week we received 450 doses that were redistributed from Brooks Hospital. The following week we received 100 doses directly from the State, 300 doses the next week. Week five we received 600 doses from the state and week six we received a total of 1,000 doses from the State which had to be distributed specifically 300 doses to essential workers in 1B and 700 to those 65+. Last Friday the State updated their guidance stating what provider could vaccinate what population. The LHD can only vaccinate essential workers in Phase 1B. The other vaccine providers currently include hospitals, urgent care center, federally qualified health centers, and pharmacies. Hospitals and federally qualified health centers are to focus on populations in Phase 1A which are the healthcare workers. They do have flexibility to vaccinate other people who are eligible. Pharmacies are only permitted to vaccinate those 65 and older. As the LHD we really feel we should be given the ability to vaccinate anyone who is eligible not solely having to focus on the essential worker 1B population. Having said that we really don't have enough vaccine to vaccinate a large portion of any of these populations. So we are doing the best that we can. Tomorrow we will have a large point of dispensing operation at Jamestown Community College (JCC). That clinic is full. All of our vaccination clinics are by appointment only. Walk-ins are not accepted. Today we vaccinated about 300 people in Dunkirk and tomorrow we will have about 700 people to vaccinate. So by the end of the day tomorrow we will be completely out of vaccine again. The requirements on the vaccine is that once a vial is open, it can only be open for six hours, so if you have an open vial, it is critically important that you have people on a standby list who are able to get to your clinic right away at the end of the day to receive that dose. We do have standby lists in place. We are making sure early in the day that people truly are on standby so we are not scrambling trying to find people at the end of the day. I did just mention that we are only able to vaccinate people in Phase 1B but 700 doses that received from the State this week was a one time special allocation to certain counties and I think there was about 12 counties across the state that received a special allocation for the 65+ group. This is because those counties do not have enough pharmacies in their County in their network yet to vaccinate the 65+ population. I don't know if the State will give us any additional vaccine for that population moving forward. We are legally required to vaccinate those who the State tells us as a priority population. If we vaccinate outside of that priority population we could be subject to fines and removed from the vaccine provider network. So vaccine providers in NYS are being very cautious to ensure people receiving the vaccine are in the eligible population. The State's scheduling system that we use does not have a filter or any way to screen people for their eligibility, so even though we put very clearly on our website and on the link to schedule that you must be for example, 65 or older or you will be turned away and only register if you are in this group, we had 10 people registered in Dunkirk today who were not eligible. We have a really great staff who went through and caught them and cancelled their appointment and let them know why. Those slots quickly filled up.

O'Brien: that was not my experience with the State's system. It figured out my age when I entered my date of birth and stated you appear to be not eligible.

Schuyler: That is the 'Am I Eligible' app. Initially every provider was pushing for everyone to get registered through this app. Once you go through that eligibility it brings up a list of providers within a certain mile radius. Abruptly at the end of last week, the State changed that system without telling anyone. If you go through the Am I Eligible app now and the app determines you are eligible, you will only see a list of state run clinics. There are not any state run clinics in Chautauqua County. So for people to sign up in our County, as soon as we get vaccine we put a link to our locally run clinic on our website which takes you to the State's scheduling system where you can see our locally run clinic with all the information and appointment times, if there are any available. Our website ([www.chqgov.com](http://www.chqgov.com)) will show clinics that our Department is running. We have asked other providers to give us

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their links, such as the pharmacies, and we will put them up there. At this time we don't know when the Pharmacies or any other provider are having vaccine clinics. It's not been made clear how Rite Aid, Tops or Wegmans is scheduling their appointments. I requested that our regional vaccination hub take the lead and establish a regional scheduling tool and call it Am I Eligible WNY that would have all of the clinic options in the WNY area. They are working on that. I am hopeful that we will soon have a regional website through the WNY vaccination hub. I know it is very confusing and frustrating. We are getting thousands of phone calls and emails and unfortunately there is just not enough vaccine to go around. We cannot and will not schedule clinics when we don't have vaccine. If you saw in the news this week, Erie County Health Department had to cancel clinics where they had to call 3,000 people to cancel their appointments. Cattaraugus County also had to call about 400 people for vaccine appointments because they had scheduled out ahead of time, and then didn't receive the vaccine from the State. As a team we decided we are not going to do that and now the State is saying not to do that. There is no way to schedule people out in advance when you don't know if you are going to get the vaccine.

Tallett: Is there any guarantee that those who are waiting to get their second dose, will be able to get it within the appropriate timeframe?

Schuyler: The second dose vaccine is a separate allocation and an automatic shipment. Vaccine providers who provided the first dose will automatically receive the shipment of the second dose in time. Everyone who received their first dose, will have to go back to the same location to receive the second dose. For example, UPMC Chautauqua redistributed 200 doses of Moderna vaccine to us when we first started. So UPMC Chautauqua received the second dose for that vaccine and then had to go through the redistribution process again to give us those 200 second doses. That is how the system will continue to work for now.

Kidder: The clinics this week where you are vaccinating 65+, will the County be allowed to do the 2<sup>nd</sup> dose for them as well?

Schuyler: Yes, we were told that as long as we are providing the first dose we will receive that second dose allocation for that priority group.

Ney: For a little break since this is a pretty complex matter, I wanted to thank you and the department and the administration for partnering with the college (JCC). I think it's really great for the college to be a community partner and our board was really thrilled with that connection.

Schuyler: JCC has always been a really great partner. That is where we have done the majority of our drills for medication and vaccine administration so we are well versed in the layout of how things work there with traffic flow and such. We did get the facility use agreement authorized with the college so we were able to use their facility. I think that if we are going to have clinics on a larger scale, JCC is a great place for us to hold them.

Rankin: We've had so many people calling. One of the things that we are telling people is that the County has had a great plan that they have been practicing for years. I know a lot of what is happening has to do with how the State is rolling things out and the availability of vaccine. What I'm wondering is when people are asking, what advice should we give them? We've been telling them to just wait and be patient. For example my sister-in-law recently became eligible and I said to her she must be excited and she said yes, but I was told it will be a four month wait. So we are wondering what to tell these people.

Schuyler: Thank you. It is so frustrating. It really is just to continue to watch our website frequently. I'm hoping that the Rite Aids and Tops will communicate to us how folks can get their vaccine. I don't know what their plan is. As the LHD we have traditionally been relied upon to know the information and be able to answer all of these questions. We really don't know all of the answers. We are not involved with how much vaccine pharmacies or

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hospitals get, when their clinics are, or how they are vaccinating. The only thing that we know for certain is what we do. This is the State's plan.

Berke: What you have outlined for everyone is that we have an absolute mess. We don't know who's getting vaccine or how and the agency that has the best resources possible that can do the vaccine clinics at say at JCC and SUNY Fredonia. We have the plan and the ability and we have been left out of it and this makes no sense. It's absolute craziness. I have no idea why the LHD, the agency that knows how to do this, has a plan, but instead we have this mess. It's really tragic.

Ney: Tops Markets does have a link and I have figured out how to do it, but their clinic is always full. Office of the Aging have assisted some folks.

Berke: But why complicate what could be a simple process. Our agency has the ability to handle this so why do we have all of these options of different providers, etc. that seem to just add to the confusion.

Schuyler: West Virginia already has 90% of their population vaccinated. They eliminated much of the bureaucracy that we are stuck with here in NYS and they just got shots in arms and I really applaud them as a state for doing this. The process of administering immunizations is not rocket science. It's a somewhat simple procedure that can be done very quickly when you know what you are doing. Now we are even being limited with who we can vaccinate when we are really the only ones that have the ability to do large scale point of dispensing clinics. Now the state is staying that they are expanding their state run clinics. Right now the closest one is at University of Buffalo South Campus but we don't know whether or not one will come to Chautauqua County.

Berke: The City of NY vaccinated 6M people back in 1947 in one week. Just get the people in line and do it.

Ney: There are more nurses in the County who want to help

Tallett: We need the product

Schuyler: We are working on the process to get volunteers on board. Volunteers have to have an active license and if they don't that is something that can be obtained quickly through the State. They also have to have a current CPR certification. It doesn't seem that the Pharmacies are under the same guidelines that we have to follow even though we have EMTs and paramedics on standby. We could be here through the night talking about the barriers that are being put in front of us, but unfortunately it is not going to do us any good. I'm very proud of my team for coming up with solutions and doing the best that we can, trying to be as prepared as we can because if the vaccine does become more widely available we need to be ready. We did reach the OPWDD group homes which is a population that we knew would not be able to come to a vaccination clinic and so we were able to partner with The Resource Center to get that population vaccinated. This was something unique to our county. There are a lot of Counties were that population still has not been vaccinated because no one is willing to go out into the community and do that. I'm really proud of my staff for that.

O'Brien: I received four written comments from friends and colleagues that work for school systems and they were able to get vaccinated through the LDH over the weekend and were astounded at how smooth and efficient the operation was run and by the professionalism of the staff. Those were essentially unsolicited comments that were sent to me.

Kidder: As the vaccine continues to trickle out and having a large population in our County without the ability to easily access the website to get signed up, is there any talk of it getting into the PCP offices?

Schuyler: As of yesterday, we were told that the State is not adding any new vaccine providers at this time. So I really don't know when doctors' offices will be added as providers of vaccine.

Khan: A lot of pediatric practices across the state have signed up and signed MOUs including our practice. I was

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at a meeting with WNY pediatric alliance and there is a lot of hesitation and even if the state decides to give us vaccine, a lot of people are already thinking about not going that route if it functions under the current MOUs because if you open the vial we don't have a way to go door to door to administer the unused vaccine. Our hope is that with the new administration coming in in DC that something has got to change otherwise we will not be able to mass vaccinate people across the state or the county.

Erlandson: So our advice to people who want to get vaccinated is to continue to check the county website ([www.chggov.com](http://www.chggov.com)) continue to check Rite Aid, Tops

Schuyler: Sadly Dr. Erlandson, that is just it to keep trying by checking our website and if you are elderly and have family, friends or a neighbor who can help you. I can tell you that clinics are filling up within minutes of us posting the link on our website. And so people are watching our website regularly. I wish there was a better system and more vaccine, but right now those wishes are not getting me very far.

Ney: The CPR requirement, is that basic life?

Schuyler: Yes.

Schuyler: I will touch on our COVID-19 numbers. We have continued to put out numbers daily and I'm not sure how much longer we will be able to do that. We are looking at doing something similar to Erie County, who is putting their numbers out weekly. People don't realize how labor intensive it is to sort through all of this data, get rid of duplicates and transfers on a daily basis on top of everything else that we do. It is a lot of work. Today we are reporting out for yesterday. We reported 64 new cases and one death. I was excited to see only 64 new cases. As you know since the holiday season, the number of cases has jumped so high, which is exactly what we were afraid would happen. That does seem to be tapering off and so I am hopeful. I am hopeful, given how well the Bills are doing this year, that people will decide to watch football at home with close family and not have large gatherings. We are reporting a total of 52 deaths and we do break that down by age. One thing that has been brought to our attention is that the reported deaths is not an accurate number. We are not always notified of a death. We know if someone is within that isolation period or if someone is in a hospital we usually can find out or see it a few days later on a state report. We are not notified of people that die within nursing homes. The State Health Department are the ones that follow cases within our skilled nursing home facilities. It's not that we are hiding the information, it's that we are not notified. We only know what we know. There is no requirement or law to notify the LDH of a nursing home death. The State HD must be made aware. So I don't think we always capture everything as much as I wish we could. There are also circumstances where residents die out of state and we don't have knowledge of that either. Additionally, when we say people are recovered it doesn't necessarily mean that they are fully recovered and back to normal. The definition of recovered when it comes to communicable disease is that they are past the infectious period and they are considered recovered from us having to isolate them any further. So just because someone is labeled as recovered doesn't mean that they are not still struggling with complications of the disease. I am going to try to put something together for a press release tomorrow so that people can understand those numbers a little better. Staff has really done a great job with getting information out there.

<p><b>Old Business</b> Tobacco Policies</p>	<p><u>Erlandson</u>: We have been working with Ken Dahlgren and more recently Mark Tarbrake has volunteered to work with me on the committee. Last month Elisabeth Rankin volunteered to be our liaison within the County Legislature. Whatever we decide, we must go through the County Legislature.</p> <p><u>Rankin</u>: What we agreed to do is get some input from Ken and then Mark and I can work out the details. We are hoping that we can put together some guidelines; we would like to have some proposals to run by the Human Services Committee next month and then bring something before the Legislature the following month.</p> <p><u>Tarbrake</u>: I think that is a good plan. I did give the Legislature Chairman Peirre Chagnon a heads up about it. Tobacco 21 was somewhat controversial and we did push to get that through. It was a bit of a battle but I am glad that that was a victory for the county. I am glad we are on the right path and I can get together with Elizabeth and Dr. Erlandson and talk and get some guidelines put together.</p> <p><u>Erlandson</u>: Lynn Schaffer, our law department liaison, has been working on this too, but I do not have an update at this time.</p>
<p><b>Old Business:</b> Mayville Water</p>	<p><u>Boria</u>: On December 10<sup>th</sup> the State issued a do not drink order because we found per- and polyfluoroalkyl substances (PFASs) in the drinking water. We specifically found perfluorononanoic acid (PFNA). The Village of Mayville quickly brought a well online that they planned to bring on later this year and turned off the three contaminated wells. Since then the do not drink order was lifted on December 24<sup>th</sup>. It took a while to lift that do not drink order because they had to flush out their 600,000 gallon storage tank and all of the distribution piping. That process took well over a week. In order to get the PFNA levels down to a reasonable level. Since then we have been testing weekly. The original samples were 180 parts per trillion and the sample we took a week ago Monday was down to 2.6 parts per trillion. We anticipate the next sample reading will be zero. The water is safe to drink at this point. On December 19<sup>th</sup> we sampled 25 private wells within a one-mile radius of the contaminated village's wells. The results showed that none of those exceeded the labs detection limit, which is quite low (below 1 part per trillion). We are confident and relieved that no private wells have been impacted. NYSDEC is taking the lead on identifying the source of the contamination in the wells. They have drilled six monitoring wells at key locations and just sampled those wells about a week ago. They have also been sampling the creek that flows near the wells, some soils and some surface water drains. We are awaiting results of those samples. The village is operating on one well only. They are used to operating on three. They have brought in an engineering firm that is doing a pilot testing program to install treatment on one or more of their contaminated wells. This is ongoing. The intermediate resolution for this is to get some sort of treatment installed on at least one well so that the village will have more than just one well to utilize. As summer approaches their water demand is going to go up as the seasonal residents come back. The best long-term solution is for them to locate another well in a different aquifer similar to the new well. The reason being is because treatment is very costly in terms of operation and maintenance. So this treatment could be a temporary solution but ultimately the best is to drill one or more additional wells. There was a village board meeting last Tuesday night were I attended as well as the village's engineer. Representatives from the State HD zoomed in as did County Executive Wendel and answered questions and such. The village is doing a great job handling this crisis and it has been a remarkably coordinated response by the LHD, NYSHD, NYSDEC, Village of Mayville, local EMS and others and so we are very fortunate that this has worked out well as far as network and cooperation.</p> <p><u>Tallett</u>: Do we have any idea where the contaminates are coming from?</p> <p><u>Boria</u>: Not yet, but they are working aggressively to determine that.</p>

Mayville Water cont'd	<p><u>Erlandson</u>: What is the treatment, activated carbon?</p> <p><u>Boria</u>: The four treatment types they are looking at are activated carbon, reverse osmosis, ion exchange which is similar to a water softener, and I'm not sure what the fourth one is, possibly ozone. The most logical is activated carbon but we will see what the pilot testing tells us.</p>
<p><b>New Business:</b> Dr. Berke Medical Credentialling</p>	<p>Dr. Tallett made a motion to re-credential Dr. Berke so that he can continue to be part of our medical staff. Second by Dr. Khan, all in favor; opposed, motion carried.</p>
<p><b>New Business:</b> Agreements to Settle</p>	<p>Agreements to settle were reviewed.</p> <p><u>Ney</u>: It boggles my mind that people are promoting a non-essential gathering of greater than 50 and here we are in a pandemic.</p> <p><u>Boria</u>: Actually there have been quite a few of these types of gatherings that we have been involved with as far as weddings and more recently Christmas parties. We are working closely with the Sheriff's department on those and trying to get to them before they happen. Unfortunately we did not find out about the one that is on the list until after it occurred.</p> <p><u>Schuyler</u>: I will say that the vast majority of people have heeded the precautions and that there is always going to be some out there where we need to take further action on.</p>
<p><b>New Business:</b> Election of Officers</p>	<p><u>Erlandson</u>: Bylaws stipulate there is a president and a vice president and they also require a maximum of three one year terms for the president. I have been privileged to be your president for the last three years and I cannot replace myself so we need nominations for a president and a vice president.</p> <p>Dr. Tallett made a motion to nominate Dr. Ney as president, and Dr. Kidder as vice president. A vote was taken and all were in favor.</p> <p><u>Erlandson</u>: Our officers have been chosen. Thank you very much. It has been an honor to serve in this capacity in the last three years.</p> <p><u>Ney</u>: Thank you Dr. Erlandson for your service. I am hoping that you will be willing to continue as a member of the tobacco law subcommittee.</p> <p><u>Erlandson</u>: Yes, I will.</p>

<p><b>Other:</b> State budget/ Local methadone clinic</p>	<p><u>Schuyler:</u> At Tuesday's state budget presentation it did indicate a proposed 5% across the board cut in funding on the public health side, but the actual line appropriations were more like a scattershot reduction anywhere from 1% to 100% depending on the line. One thing that really caught the attention of the NYS Association of County Health Officials (NYSACHO) was the absence of a line item for rabies reimbursement. If no funding is allocated by the State for rabies that would be a total cost shift from the state to local government for the very expensive cost for rabies post exposure prophylaxis and also any rabies vaccination clinics that we now receive vaccine from the State. Its sounds like we would still be mandated to do those things but it would become a total local cost. That is something that NYSACHO is watching closely. These are very expensive treatments. The mandate on the County is that if someone doesn't have insurance that will cover the treatment, then the County is required to cover it so there is no cost to the person.</p> <p>The other thing is one you may have saw on the news recently. In public health we call it a key negative revenue proposal and that is the legalization of adult use recreational cannabis which has been proposed by the Governor and the projected revenue to go along with it. One thing that we have always said is what is never there are the projected costs that are going to come of that meaning for those of us in public health and law enforcement and other sectors, not to mention the health impacts that are still being studies. Health positive change in the proposed revenue bill is a technical change that would prohibit the retail dealer with a revoked or suspended cigarette license from possessing any taxed cigarettes and tobacco products during the period of revocation or suspension. The bill would also prohibit a retail dealer who failed to obtain a cigarette license from possessing any taxed cigarettes or tobacco products. So that sounds like there has been this loophole where you have lost your license but you're able to keep your stock that you have and still sell that while you just can't order any more. So it sounds like that loophole would be a good thing to have changed. Those of us in public health have advocated for increasing taxes on sugar sweetened beverages for instance when we are looking at an obesity epidemic such as we are in our state and in our nation verses legalizing another substance when we are fighting substance abuse and record high overdoses. I did notice in the spreadsheet that I received on the budget proposal that there is also over \$1M cut to obesity and diabetes programs. Another \$6.6M cut to tobacco use prevention control programs. I found it very ironic when we are in the midst of a pandemic where we have seen such disparities that we are cutting programs to prevent the very chronic diseases that have caused a lot of the disparities for the severity of illness for those that have had COVID-19. We know very well that people with underlying health issues, such as chronic lung disease and we know the number one cause is smoking, diabetes, obesity all put people at much higher risk of complications from COVID-19 and I was very hopeful that we were at a tipping point in our society where we would start looking at prevention when we see the terribly high costs of not doing prevention and continuing to be a reactive society when it comes to our healthcare. But I don't see that reflected in the State's budget and I just wanted to make the board aware of that.</p> <p><u>O'Brien:</u> I would like to make a suggestion for the March meeting. If the protocol exists for us to invite either the County Executive or the Director of Community Services for the County to update us on the methadone plans for Chautauqua County.</p> <p><u>Schuyler:</u> We could do that. I would invite Pat Brinkman, the Director of Mental Hygiene, to see if she can join our meeting and put that on the agenda under new business. I did also notice that in the State budget proposal there is a proposal to put the Office of Mental Hygiene and the Office of Substance Abuse at the State level under the same umbrella.</p> <p><u>O'Brien:</u> That has been proposed numerous times over the last 20 years. I won't speak publicly for all of the</p>
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	<p>entities that I am associated with but I do know that there would be considerable support among providers; in particularly hospital systems have felt that licensed clinics would be better served by having a merged state entity.</p> <p><u>Schuyler</u>: It seems to make sense, but we will see if it will survive the entire budget process.</p> <p><u>O'Brien</u>: I suspect it won't happen as quickly as people think.</p> <p><u>Schuyler</u>: It is unfortunate especially with what we are seeing and the fallout that we know is going to happen after this pandemic.</p> <p><u>Rankin</u>: With the potential legalization of marijuana there has been discussion over the last few years about the opportunity for counties to opt out. Has that discussion happened within Chautauqua County?</p> <p><u>Schuyler</u>: I don't know of conversations since County Executive Wendel took office. I know there have been conversations in the past on that and think it is something that will need to be revisited. For most counties I believe it would be difficult financially to opt out of that, but I do think it is worth a discussion. I will suggest that to County Executive Wendel and also Ms. Rankin, you could have that discussion with the County Legislature.</p> <p><u>Rankin</u>: Yes, I plan to.</p>
<b>Adjournment</b>	Meeting adjourned at 7:10pm
<b>Future Meeting Dates</b>	March 18, 2021; May 20, 2021; July 15, 2021; September 16, 2021; November 18, 2021