

AGENDA
GEAUGA PUBLIC HEALTH
August 23, 2023

1.0 Call to Order

2.0 Opening of Meeting

2.01 Pledge of Allegiance

2.02 Declaration of Quorum

2.03 Certification of Delivery of Official Notices of Meeting

3.0 Board of Health

3.01 Minutes, Regular Meeting July 26, 2023

4.0 Health District Staff Reports

4.01 Population Health Report

4.02 Environmental Health Report

4.03 Administrator's Report

4.04 Health Commissioner's Report

5.0 Committee Meetings

No Reports

6.0 Old Business

6.01 House Bill 110 Review

6.02 Geauga Public Health Levy Review

7.0 New Business

7.01 Resolutions

7.01.01 Financial Reports, Resolution 23-08-07-01-01

7.01.02 Permission to Approve Appropriations for Increase/Decrease

8.0 Citizens' Remarks

- Session to last 20 minutes unless Board moves to extend.
- 2 minutes per speaker to make comments and ask questions.
- The Board will answer questions after having an opportunity to investigate responses following the meeting. This is not a press conference where answers should be expected on the spot.
- Board responses will be recorded and publicly filed with meeting minutes.

9.0 Executive Session

10.0 Adjournment

1.0 Call to Order

The regular meeting of the Geauga County Board of Health was called to order at 5:00 p.m. on Wednesday, August 23, 2023, by President Carolyn Brakey. The meeting was held at the Geauga County Office Building located at 12611 Ravenwood Drive, Chardon, Ohio.

2.0 Opening of Meeting

2.01 Declaration of Quorum

The following members were present constituting a quorum:

Carolyn Brakey, Esq.	Ashley Jones, Pharm D	Dr. Mark Rood
Dr. Mark Hendrickson	Lynn Roman	

Minutes were recorded by Gina Parker.

Also present from the Health District staff:

Adam Litke	Dan Lark
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Others Present: Several members of the public were in attendance.

2.03 Certification of Delivery of Official Notices

Certification of delivery of the official notices of the regular meeting of the Board of Health was made by Adam Litke, Administrator.

3.0 Board of Health

3.01 Approval of Minutes

Lynn Roman moved and Dr. Mark Rood seconded a motion to approve the minutes of the July 26, 2023, Board of Health regular meeting; motion carried.

4.0 Health District Staff Reports

4.01 Population Health

4.01.01 Safe Communities

A coalition meeting was held on July 6th with representatives from AAA, Geauga County Sheriff's Office, Geauga County Engineer's Office, ODOT District 12, Ohio State Highway Patrol (OSHP), and Ohio Traffic Safety Office in attendance. A previously reviewed crash occurring on May 25th was ruled a natural death and discussed among the coalition. Planning for upcoming events continues.

The Coalition Coordinator assisted with the first Carteens program in Geauga County. This program, organized by the Ohio State Highway Patrol and the OSU Extension Office, is a program for teen traffic offenders. Parents and teenagers first attended an informational presentation and discussion from OSHP. The second half of the evening, the coalition coordinator, in collaboration with the OSU Extension Educator and SADD, conducted educational activities with the students including an activity with the fatal vision goggles, trivia, and a discussion.

The Coalition Coordinator attended Amish Safety Day in Middlefield. The coordinator interacted with the Amish community through an interactive display using traffic materials, fact sheets, and fatal vision goggles and a game. Giveaway prizes and a game were also included for children.

4.01.02 Buckles Buckeyes Program (Car Seat Program)

The Health Educator attended a Certified Passenger Safety Training in August to become a nationally certified Child Passenger Safety Technician. Once the Health Educator is trained by staff at Rainbow Babies & Children's Hospital on program administration, and Geauga Public Health receive its allotment of seats, distribution can begin again in Geauga County.

4.01.03 Other Population Health Activities

The Health Educator distributed one Project DAWN Naloxone kit to the community in July.

4.01.04

Get Vaccinated Ohio-Public Health Initiative (GVO)

On July 18, 2023, and July 25, 2023, the nurse at Geauga attended two trainings one for Maximizing Office Based Immunization (MOBI) / Teen Immunization Education Sessions (TIES) and one for Immunization Quality Improvement for Providers (IQIP). Both programs are billable to the GVO grant.

4.01.05

Vaccines for Children

During the month of July, Melissa Kimbrough, Registered Nurse at Geauga Public Health (GPH), did clinics at the health department and on the vaccine bus. GPH vaccinated a total of 37 children. Vaccines included Dtap, Pentacel (combo vaccine of Dtap, Hib, Polio), Kinrix (Dtap, Polio), Vaxelis (Dtap, polio, Hib, Hep B), MMRV, MenACYW, PCV-13, Tdap, Varicella, Pediarix (Dtap, polio, Hep B), Hep B, Polio, Hib. Vaccines for children according to the CDC is a federally funded program that provides vaccines at no cost to children who may not otherwise be vaccinated due to inability to pay. Ms. Kimbrough also provides these vaccines at the DDC in Geauga, but this information is tallied through the DDC not GPH.

4.01.06

Public Health Emergency Preparedness (PHEP)

During July, Ms. Lydia Castner has been working closely with Lake County PHEP staff to familiarize herself with FY24 grant year deliverables released the second week of July. Ms. Castner has been working with partners to make updates to Geauga Public Health's Continuity of Operations Plan (COOP), Medical Countermeasures (MCM) Plan and components, has updated GPH's Quarterly MCM Action Plan, and has been working to make updates to the Ohio Point of Dispensing (OPOD) system documentation for the Cities Readiness Initiative (CRI) grant.

Preparedness and Epidemiology staff submitted the following grant deliverables during the month of July:

- PHEP Core Deliverable 15.1 – Volunteer Management Trainings

Meetings/Events Attended:

- Biweekly meetings with Lake, Geauga, Ashtabula, and Trumbull counties and ODH regarding Pertussis Outbreak response
- July 17: Budget Period 5 ODH Full Scale Anthrax Exercise webinar
- July 18: Budget Period 5 Public Health Emergency Preparedness (PHEP) Grant Kickoff Call
- July 18: Geauga County Local Emergency Planning Committee Meeting
- July 20: Northeast Ohio Healthcare Coalition Brown Bag Lunch at Northwest Ambulance District

- July 20: Quarterly ODH Cities Readiness Initiative Technical Assistance Call
- July 21: Northeast Ohio Regional Public Health and Epidemiology Meetings
- July 26: Northeast Ohio Public Health Partnership Learning Session with Cleveland Hearing and Speech to discuss emergency communication and messaging for residents who are deaf or hard of hearing (to fulfill regional COVID-19 After Action Corrective Action)
- July 28: Attended and distributed preparedness materials at Amish Safety Day
- July 31: Co-facilitated a Continuity of Operations discussion with Lake and Geauga health department leadership

Epidemiology

The Pertussis outbreak which began in April continued in July with 14 additional cases reported. Of these, seven had received some vaccination for pertussis. No cases were hospitalized.

Ms. Priyanka Parikh noted an increase in both Lake and Geauga counties of foodborne illnesses including Giardiasis, Campylobacteriosis, and Salmonellosis and reported the trend to the Environmental Health group for follow-up.

One case of Legionellosis was reported associated with a long term care facility. Ms. Parikh held a meeting with the facility to identify any possible risk factors, investigate the water system, and implement needed measures.

Candida Auris fact sheets were distributed to additional long term care facilities in July.

During July, there was one confirmed resident case of COVID-19 at a long-term care facility in Chardon, and resources and educational materials were offered.

4.01.07**Communicable Diseases Reported by Month:** Ohio Disease Reporting System (ODRS)

Communicable Disease	Jan	Feb	Mar	Apr	May	Jun	Jul
Campylobacteriosis	2	1	1	0	1	1	3
Chlamydia infection	5	12	9	6	10	4	8
COVID-19	286	227	204	105	87	41	38
CP-CRE	0	0	2	0	0	0	0
Giardiasis	0	0	1	0	0	0	0
Gonococcal infection	1	1	1	1	3	3	3
Haemophilus influenzae (invasive disease)	0	0	1	1	0	0	0
Hepatitis B (including delta) - chronic	1	0	2	1	0	0	1
Hepatitis C - chronic	1	1	0	4	3	0	3
Influenza-associated hospitalization	7	5	0	0	0	0	0
Legionellosis	1	0	0	0	0	0	1
Lyme	1	0	0	1	1	5	8
Pertussis	4	4	13	15	23	22	10
Salmonellosis	1	1	1	0	1	0	3
Shigellosis	0	1	0	0	0	0	0
Streptococcal - Group A -invasive	3	1	4	1	3	1	1
Streptococcal - Group B - in newborn	0	1	0	0	0	0	0
Streptococcus pneumoniae - invasive antibiotic resistance unknown or non-resistant	1	1	0	0	1	0	0
Syphilis - early	0	0	1	0	0	0	0
Syphilis - primary	0	1	0	0	0	0	0
Syphilis - secondary	0	0	1	0	0	0	0
Syphilis - congenital	0	0	0	0	1	0	0
Varicella	1	0	1	1	1	0	0

Adam Litke provided the following highlights for Interim Director Sarah Van Vechten:

- *We are still monitoring the pertussis outbreak. We still have the vaccine. There has been an increase in vaccines given by Geauga Public Health (GPH) due to a change in clinic locations.*
- *GPH will have a presence at the Great Geauga County Fair. Items such as frisbees and tick kits will be available to pass out.*

Discussion:

Dr. Mark Rood asked if the Lyme disease cases were indigenous to Geauga County or if the patients acquired Lyme disease outside the county. He said that, historically, Lyme in Geauga County has been low. Adam Litke stated that GPH does not have access to that information normally, but could look into it. Dan Lark said that due to the changing weather, the ticks that carry Lyme disease are moving north and we will probably see an increase in cases in the coming years. We will continue to monitor the situation.

4.02 **Environmental Health**

4.02.01 **Director's Report**

Meetings were held with Township Trustees from Chester and Chardon to review the upcoming implementation of the National Pollutant Discharge Elimination System (NPDES) portion of the Operation and Maintenance program. The program was reviewed and any questions were answered.

A meeting with the Lake Geauga Area Association of Realtors was held to review the NPDES sampling program and timeframe.

Public meetings are scheduled in Chester and Chardon townships to educate the residents about the upcoming sampling.

4.02.02 **Food Safety**

Staff took part in a school inspection in-service training, along with LCGHD staff, at Kenston High School. A. O'Brien assisted with a ServSafe food education course that was taught in Geauga County on July 20th and 27th.

4.02.03

Program Inspections

Environmental Health staff conducted the following program inspections during July:

Program	Inspections
Private Water Systems (wells)	20
Camps	0
Swimming Pools/Spas	20
*Food	87
Sewage Systems	21
For Sale of Property	5
HB 110 (Semi-Public) Systems	71
Plumbing	56
Schools	5

*Includes routine inspections, reinspections, mobiles, temporaries, plan reviews, pre-licensing inspections, and consultations.

Dan Lark provided the following highlights:

- We began holding meetings with the public and realtors regarding the Operation and Maintenance (O&M) program. We have also attended trustee meetings to share the information.*
- A variance was issued for a home with an addition. A 5-foot radius from the home was approved, instead of the 10-foot. There is a condition that fencing be put up around the well to protect it during construction.*
- In the coming months, we would like to start the process of changing variance fees. The current fees are \$300 for a water variance and \$350 for sewage, but these can most likely decrease.*

Discussion:

Lynn Roman asked how receptive the public was to the O&M program. Dan Lark said there have been a few questions, but well-received overall.

Lynn Roman asked how many NPDES systems are expected to be inspected in the first phase of the O&M program. Dan Lark said there are about 1800 NPDES systems. Adam Litke said there are 40,000 other septic systems that will also need to be added to the program in the next couple of years. However, those are not systems that will be inspected by GPH.

Lynn Roman asked about the septic systems in which we have no records. Dan Lark said there will need to be future discussions about how to handle those systems. The goal is always to repair systems, if able, as opposed to replace them.

Adam Litke said that the fees for items such as variances should cover costs, not generate excessive revenue.

Ashley Jones stated that we are providing a service and our fees should be in line with other counties, not create excessive revenue.

4.03

Administrator's Report

4.03.01

Administrator

1. Parkman Wells – Phase II of the Parkman Wells replacement has started. Additional wells have also been identified and will be addressed through the Phase 2 contract after discussion with Ohio Environmental Protection Agency.
2. Levy approved by Board of County Commissioners to be placed on the upcoming ballot.
3. Working with Mr. Kostura on the House Bill 110 repayment to the public. Updates will be provided throughout the process.
4. Operation & Maintenance program public meetings have started. Our team has met with two townships in Geauga County as well as the Realtors Association.
5. Continue to work with Ohio Department of Health to monitor the Pertussis issue in the surrounding Counties.

4.03.02

Notes to Financial Statements

Accounts Payable by G/L Distribution Report. This is the day-to-day or current expenses report.

Notes on Chart 1

As of July 31, 2023, 58.25% of the year is complete. This percentage is a point of reference for what percentage of revenue and expense you might expect to see received/expensed at this point in the year.

The following are explanations for revenues and/or expenses that are significantly over budget or under budget from that reference point.

REVENUE:

1. License is showing over budget as the Food Licenses are being issued.
2. Other Revenue is showing over budget. The EPA wired a payment for the Parkman wells in the amount of \$150,330.00.

EXPENSES:

This being only the sixth month of the year there are no expenses that are significantly over or under budget.

Notes on Chart 2

Chart 2 is a comparison of the beginning cash balance of each fund to the current cash balance of each fund.

1. Food Service (6005) is showing an increase in cash balance. We are starting to process the 2023 Food Service Licenses. This is typical of previous years and Health Districts in general.
2. Immunization Action Plan (6025) is showing an increase in expenses. We have not received the offset revenue.

Notes on Chart 3

The bar graph compares the revenue and expenses by each month for all funds combined. In July paid past due legal bills which impacted expenses significantly.

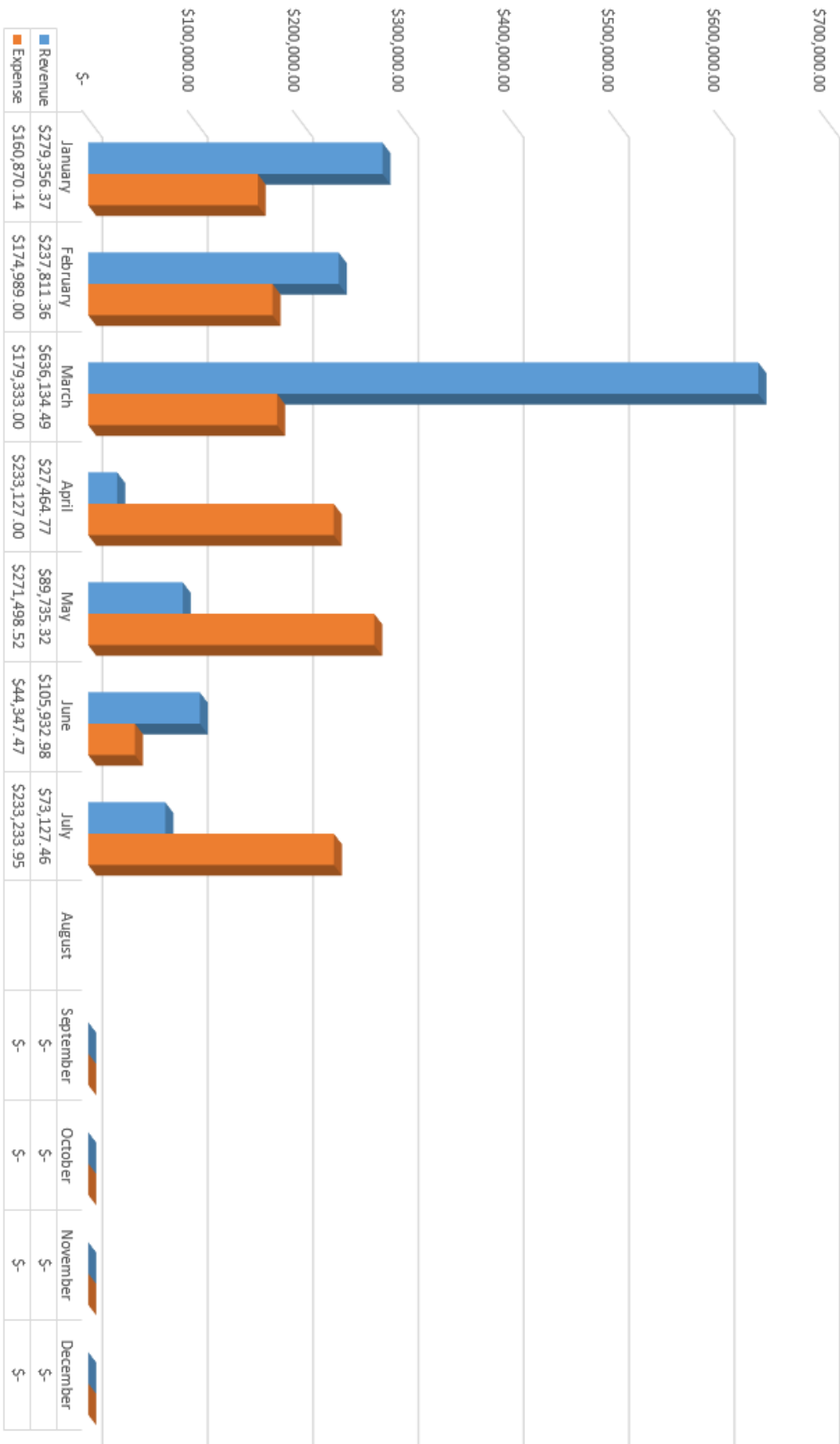
CHART 1			
MONTH OF : JULY			
	Revised	YTD	% of Budget
Revenue Type	Budget	Revenue	Received
Property and Other Taxes	\$ 564,222.00	\$ 296,244.92	52.51%
State Reimbursement-Real Estate	\$ 75,486.00	\$ 37,139.42	49.20%
State Revenues	\$ 711,064.00	\$ 133,150.04	18.73%
Local Government Tax	\$ -	\$ -	
Permits	\$ 725,000.00	\$ 177,679.10	24.51%
Inspection Fees	\$ 507,000.00	\$ 57,203.00	11.28%
Fees	\$ 236,500.00	\$ 171,168.92	72.38%
Licenses	\$ 200,000.00	\$ 176,005.37	88.00%
Fines	\$ 1,000.00	\$ 3,502.00	350.20%
Fees Infectious Waste Fees	\$ 750.00	\$ -	0.00%
Fees Solid Waste Fees	\$ 15,000.00	\$ 4,400.00	29.33%
Foundation Revenue	\$ -	\$ -	
Water Testing Fee	\$ 13,000.00	\$ 6,590.00	50.69%
Federal Grants	\$ 147,000.00	\$ 31,923.48	21.72%
Local Match	\$ -	\$ -	
Reimbursements	\$ -	\$ -	
Other Revenue	\$ 760,670.00	\$ 282,935.57	37.20%
Other Revenue Other Receipts	\$ -	\$ 7,370.00	0.00%
Other Revenue Other Revenue	\$ 14,500.00	\$ 64,155.93	442.45%
Other Revenue Real Estate Fee Refund	\$ -	\$ 95.00	
Transfers In	\$ 329,500.00	\$ -	0.00%
Total Revenue	\$ 4,300,692.00	\$ 1,449,562.75	33.71%
	Percentage of year Completed		58.33%
	Revised	YTD	% of Budget
Expense Type	Budget	Expense	Used
Salaries	\$ 666,494.00	\$ 440,205.43	66.05%
OPERS	\$ 103,761.00	\$ 59,094.47	56.95%
Medicare	\$ 21,615.00	\$ 6,305.80	29.17%
Workers Compensation	\$ 37,273.00	\$ -	0.00%
Hospitalization	\$ 162,566.00	\$ 81,859.44	50.35%
Unemployment	\$ 25,000.00	\$ 22,792.48	91.17%
Contract Services	\$ 3,672,539.17	\$ 422,881.43	11.51%
Travel	\$ 46,644.60	\$ 9,766.18	20.94%
Vehicle Expense	\$ -	\$ -	
Legal Fees	\$ 12,770.55	\$ 588.66	4.61%
Advertising	\$ 4,571.00	\$ 1,015.34	22.21%
State Remittance	\$ 65,473.00	\$ 33,764.00	51.57%
State Remittance Ohio Permit Fee	\$ 19,830.00	\$ 8,004.00	40.36%
State Remittance Ohio Water Test Fee	\$ -	\$ -	0.00%
Materials and Supplies	\$ 30,656.98	\$ 5,324.49	17.37%
Materials and Supplies Supplies	\$ 21,069.78	\$ 9,093.10	43.16%
Materials and Supplies Vaccine Supply	\$ 18,047.03	\$ 1,864.83	10.33%
Equipment	\$ 42,898.43	\$ 10,801.76	25.18%
Equipment Equipment	\$ 11,303.00	\$ -	0.00%
Equipment Equipment Maintenance	\$ 3,100.00	\$ 52.62	1.70%
Other	\$ 327,293.02	\$ 84,336.99	25.77%
Other County RE Tax Expenses	\$ 11,000.00	\$ 4,943.19	44.94%
Other Health Emergency	\$ -	\$ -	0.00%
Other Other Expenses	\$ 111,751.52	\$ 20,410.87	18.26%
Other State RE Tax Expenses	\$ 1,000.00	\$ -	0.00%
Other VS Remit to State	\$ 164,396.86	\$ 73,814.00	44.90%
Refunds	\$ 16,600.00	\$ 480.00	2.89%
Repair Services	\$ -	\$ -	0.00%
Transfers Out	\$ 204,500.00	\$ -	0.00%
Total Expense	\$ 5,802,153.94	\$ 1,297,399.08	22.36%
	Percentage of year Completed		58.33%
Revenue Less Expense	\$ (1,501,461.94)	\$ 152,163.67	
Beginning Cash Balance		\$ 4,250,354.64	
Total Cash on Hand		\$ 4,402,518.31	
Cash on Hand Per Cash Position Report		\$ 4,402,518.31	

MONTH OF : JULY

CHART 2

Fund Number	Fund name	Beginning Cash Balance	YTD Revenue Per Budget Performance	YTD Expense Per Budget Performance	Ending Cash Balance	YTD Cash Per Cash Position Report	Difference	Percentage Increase/Decrease
6002	Board of Health	\$ 1,613,468.68	\$ 655,265.13	\$ 523,877.58	\$ 1,744,856.23	\$ 1,744,856.23	\$ -	8.14%
6004	Trailer Park	\$ 11,394.69	\$ 4,427.00	\$ 230.44	\$ 15,591.25	\$ 15,591.25	\$ -	36.83%
6005	Food Service	\$ 168,560.28	\$ 181,907.37	\$ 54,876.03	\$ 295,591.62	\$ 295,591.62	\$ -	75.36%
6008	Infectious Waste/Solid Waste	\$ 109,690.56	\$ 4,400.00	\$ 8,646.63	\$ 105,443.93	\$ 105,443.93	\$ -	-3.87%
6011	Private Water Systems	\$ 194,176.35	\$ 195,300.00	\$ 195,951.39	\$ 193,524.96	\$ 193,524.96	\$ -	-0.34%
6018	Swimming Pools	\$ 26,209.09	\$ 11,723.75	\$ 3,800.44	\$ 34,132.40	\$ 34,132.40	\$ -	30.23%
6019	Not Used	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6021	Public Health Infrastructure	\$ 429,621.78	\$ 25,179.00	\$ 42,715.62	\$ 412,085.16	\$ 412,085.16	\$ -	-4.08%
6023	Sewage Treatment Systems	\$ 912,166.28	\$ 243,895.75	\$ 202,485.54	\$ 953,576.49	\$ 953,576.49	\$ -	4.54%
6024	Not Used	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6025	Immunization Action Plan	\$ 36,092.56	\$ 5,657.00	\$ 36,848.20	\$ 4,901.36	\$ 4,901.36	\$ -	-86.42%
6026	Women, Infants, and Children	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6027	Child & Family Health Services	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6030	Emergency Response Fund	\$ 25,000.00	\$ -	\$ -	\$ 25,000.00	\$ 25,000.00	\$ -	-
6036	Environmental Health Assistance	\$ 71,131.37	\$ 58,314.70	\$ 52,550.00	\$ 76,896.07	\$ 76,896.07	\$ -	8.10%
6037	For Sale of Property	\$ 292,189.74	\$ 16,875.00	\$ 84,475.31	\$ 224,589.43	\$ 224,589.43	\$ -	-23.14%
6038	Not Used	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6039	Alcohol, Tobacco & Other Drugs	\$ 52,017.32	\$ 17,250.00	\$ 16,387.66	\$ 52,879.66	\$ 52,879.66	\$ -	1.66%
6040	Injury Prevention	\$ 54,388.25	\$ 6,744.48	\$ 18,997.82	\$ 42,134.91	\$ 42,134.91	\$ -	-22.53%
6041	Workforce Development	\$ 44,230.50	\$ 20,896.65	\$ 21,513.73	\$ 43,613.42	\$ 43,613.42	\$ -	-1.40%
6042	Population Health Fund	\$ 210,017.19	\$ 1,726.92	\$ 34,042.69	\$ 177,701.42	\$ 177,701.42	\$ -	-15.39%
Total		\$ 4,250,354.64	\$ 1,449,562.75	\$ 1,297,399.08	\$ 4,402,518.31	\$ 4,402,518.31	\$ -	-
			\$ 1,449,562.75	\$ 1,297,399.08	Check Figure	\$ 152,163.67		

CHART 3



Adam Litke provided the following highlights:

- *The Board discussed a draft document regarding schools and COVID-19 to be shared on the website and Facebook page. The situation will continue to be monitored.*
- *The Board discussed the history of the health department location and rent increase at the Administration building. A special meeting was suggested to discuss this matter further with information from the Administrator, such as a timeline, break down costs, etc. Adam will set up a meeting with the County Administrator, Lynn Roman, and Dr. Mark Hendrickson.*
- *The Water Pollution Control Loan Fund (WPCLF) is quickly being spent to pay the contractors. WPCLF is the grant that helps offset septic system repairs and replacements based on the homeowner's income.*
- *We will stop the current software we were using and begin using the free State software. We also volunteered to be a beta tester for the State software.*

Discussion:

Lynn Roman asked for an update on the Parkman wells. Dan Lark said they are in the process of creating a map of the area. It will be more informative than previous versions. There are a few more houses.

Dr. Mark Rood asked if any more of the homeowners in close proximity have been notified about the wells. Dan Lark said that staff have been to every house; some homeowners have not responded.

Carolyn Brakey asked when the well project needs to be finished. Adam Litke said the deadline is August 31, 2023.

Lynn Roman suggested a newspaper article to highlight the wells. Adam Litke said it has already been in the paper and on news channels.

Dan Lark said the state software system is expected to go live throughout the state in May 2024.

4.04

Health Commissioner's Report

4.04.01

Understanding Air Quality - From the Public Health Communication Collaborative (PHCC)

The ongoing wildfires in Canada (including [a blaze that crossed the U.S.-Canada border](#) recently) and an intense nationwide heat wave are having harmful effects on air quality—putting public health at risk. Although a decrease in air quality affects everyone, certain communities and individuals are more vulnerable to its harmful effects.

PHCC's newest resource, [Protect Your Health: Understanding Air Quality](#), will help you communicate about air quality and protective measures people can take to stay safe. This resource is available in English and Spanish and includes:

- The fundamentals of understanding air quality and the Air Quality Index (AQI)
- A visual guide to the major sources of air pollution
- Recommendations for protecting your health routinely and during air-quality alert days

4.04.02

New Graduate Certificates Available from Kent State This Fall

The College of Public Health will launch three new graduate certificates, the LGBTQ+ Public Health, Healthcare Compliance and Clinical Research certificates, beginning in the fall of 2023. Certificates can be completed 100 percent online and are between 12 to 15 credit hours. They can be taken as stand-alone programs or combined with other graduate programs including a Master of Public Health (MPH) degree.

LGBTQ+ Public Health Certificate – this 13-credit certificate addresses foundational topics and complex issues that contribute to public health and individual health inequities affecting sexual and gender minorities through community and systems-level strategies that promote health and healthy behaviors.

Healthcare Compliance Certificate – this 15-credit hour certificate prepares students to navigate complex laws and regulations, identify potential risk areas, develop policies, train staff, evaluate program effectiveness and conduct investigations.

Clinical Research Certificate – this 12-credit hour certificate addresses industry best practices, clinical epidemiology study designs, good clinical practices, regulatory affairs that guide clinical research, research ethics and HIPAA.

4.04.03

Kent State University Food Protection CE Course

The 2022 Food and Drug Administration (FDA) Food Code and The Food Safety Modernization Act is now available free and on-demand at <https://www.kent.edu/publichealth/continuing-education>. The course has received approval for 2.5 hours of continuing education credit for Registered Environmental Health Specialists.

4.04.04

Association of Ohio Health Commissioners (AOHC) Educational Offerings

2023 AOHC Fall Conference, Embassy Suites Dublin, September 13-15, 2023 - Registration Open!

[Leadership Essentials for Health District Success - October 2023 \(In-person\):](#)

October 18 (8:00AM) - 19 (5:00PM), 2023, Union County Health Department

[Finance for Health Departments - October 2023 \(In-person\):](#)

October 18 (9:00AM) - 19 (4:00PM), 2023, Union County Health Department

[New Employee Training - November 2023:](#)

November 1, 2023, 9:00AM - 4:00PM, Union County Health Department, Marysville Ohio

4.04.05

New State Budget Includes Funding for Affordable Housing

Ohio's latest biennial budget, which was signed into law in July by Gov. Mike DeWine, includes new affordable housing initiatives, including \$100 million for a state tax credit program to help finance 4,000 rental units and tax credits for single-family housing.

State legislators also decided to save the Ohio Housing Finance Agency, which determines what developers receive federal low-income housing tax credits and now will make decisions on the state credits.

Health Policy Institute of Ohio (HPIO) recently released an [action guide](#) that highlights policy options for improving housing, one of the social drivers of infant mortality in Ohio. The action guide is based on recommendations from HPIO's report [Social Drivers of Infant Mortality: Recommendations for Action and Accountability in Ohio](#)

4.04.06

FDA Approves Second Over-the-Counter Opioid Overdose Reversal Drug

In July the Food and Drug Administration (FDA) [approved](#) the second nonprescription opioid overdose nasal spray, RiVive, made by Harm Reduction Therapeutics. It is a nasal spray containing 3 milligrams of naloxone, a drug that reverses opioid overdoses. It is administered like an over-the-counter (OTC) allergy medication as an inhaled spray. The approval of RiVive nasal spray for nonprescription use was supported by data from a study submitted by the manufacturer that showed similar levels of RiVive reach the bloodstream as an approved prescription naloxone product. In March, FDA approved the first OTC version of naloxone, called Narcan, which is also a nasal spray and is made by Emergent BioSolutions. FDA also approved Opvee earlier this year, which is a nasal spray version of the overdose reversal drug nalmafene.

4.04.07

How Valuable is PHAB Accreditation?

[The Value and Impact of Public Health Department Accreditation](#) report presents a summary of Public Health Accreditation Board (PHAB) data gathered to date, along with contextual information to highlight why these findings matter to health departments and the communities they serve.

NORC, one of PHAB's external evaluators for the past 10 years, just completed their final report outlining their longitudinal study of health departments as they reached milestones in the accreditation process. The surveys have provided a wealth of data on health departments' perceptions of accreditation, including aspects of the accreditation process; benefits of the accreditation process at different points in time; and benefits associated with reaccreditation.

[Read the full program report](#)

EXECUTIVE SUMMARY

The national public health department accreditation program, administered by the Public Health Accreditation Board (PHAB), is designed to advance the quality and performance of the governmental public health system, and to support health departments' delivery of programs and services. Health departments may seek initial accreditation, which lasts for five years; then, they may seek to undergo reaccreditation to maintain their status as an accredited health department. The accreditation process involves health departments being assessed against the PHAB Standards and Measures, which serve as the written guidelines and requirements for accreditation and align with the 10 Essential Public Health Services and Foundational Capabilities of the Foundational Public Health Services. Initial accreditation is designed to assess current capacity and demonstrate accountability of health departments. Reaccreditation emphasizes community engagement, health equity, quality improvement (QI), and communication, among other topics, and is designed to demonstrate a health department's ongoing accountability and credibility. In August 2022, PHAB launched the Pathways Recognition program, which is designed for health departments not yet ready to apply for initial accreditation, to help them make progress towards quality and performance improvement.

Between April 2013 and June 2023, NORC at the University of Chicago (NORC) conducted several independent evaluations to assess the effects of the national public health department accreditation program, including initial accreditation and reaccreditation. The evaluations included five surveys of applicant and accredited health departments as they reached certain milestones in the accreditation process. These five surveys were most recently supported by PHAB, through funding from the Centers for Disease Control and Prevention (CDC). The surveys have provided a wealth of data on health departments' perceptions of accreditation, including aspects of the accreditation process; benefits of the accreditation process at different points in time; and benefits associated with reaccreditation.

This report presents final evaluation findings from data gathered through these five health departments surveys between October 2013 and December 2022. Key findings focus on perceptions and benefits of initial accreditation and reaccreditation.

Key Findings on Perceptions and Benefits of Initial Accreditation

Evaluation findings have demonstrated that initial accreditation yields many benefits, including enhanced QI, increased accountability and transparency, strengthened relationships with stakeholders, and increased ability to identify strengths and weaknesses. Key findings regarding initial accreditation include:

- As a result of accreditation, health departments have experienced short-term benefits related to increased accountability and transparency, as well as improved capacity to provide high-quality programs and services.
- Accreditation has supported workforce development and training and employee pride and engagement.
- Accreditation has had a notable impact on QI activities within health departments, and a key outcome of accreditation is strengthened QI culture.
- Accredited health departments reported higher levels of QI and performance management (PM) training and practice among staff compared to applicant health departments.
- Accreditation has resulted in improved relationships between health departments and their partners.
- Accredited health departments experienced improved utilization of resources and competitiveness for funding opportunities.
- Accreditation helped health departments apply health equity principles and, ultimately, positively influence health outcomes.
- Health departments provided information on how aspects of accreditation supported their response to the COVID-19 pandemic, as well as resulting challenges that affected accreditation efforts.

Key Findings on Perceptions and Benefits of Reaccreditation

Reaccreditation is designed to assess health departments' improvement and advancement of capabilities, performance, and continuous Quality Improvement (QI). Key findings regarding reaccreditation include:

- Most health departments accredited for four years intended to apply for reaccreditation.
- The Reaccreditation Standards and Measures provided an accurate assessment of health department performance.
- Elements of the reaccreditation process helped health departments with performance improvement and strategic changes.
- Health departments reported that staffing and schedule limitations were major challenges to undergoing reaccreditation.
- As a result of reaccreditation, health departments have experienced benefits including a strengthened culture of QI, greater collaboration, and benchmarking against other similar health departments.
- The reaccreditation process has helped health departments implement practices that advance health equity.

Evaluation data gathered over nine years, between October 2013 and December 2022, demonstrate the tangible benefits experienced by health departments who have achieved initial accreditation and reaccreditation. Continued data collection will provide additional evidence on the long-term benefits of accreditation and reaccreditation for partners and collaborators in the field of public health.

4.04.08

Ohio's Terry Allan Appointed to the PHAB Board

PHAB recently added five new Board members who have extensive public health experience and leadership skills.

- **Terry Allan, MPH** | Former Health Commissioner, Cuyahoga County Health Department
- **Lisa Pivec** | Executive Director of Public Health for Cherokee Nation
- **David Souleles, MPH** | Administrative Director for Occupational Health, University of California, Irvine
- **Stephen Williams, MEd, MPA** | Director, Houston Health Department. Houston, TX
- **Matt Willis, MD, MPH** | Public Health Officer for Marin County, California

Adam Litke provided the following highlights for Ron H. Graham:

- *There is a potential meeting in Washington, D.C., that we may go to if it's beneficial to the health department. They would be discussing public health issues and state-level funding.*

Discussion:

Lynn Roman asked for clarity regarding the Kent State University graduate certificates. Adam Litke said they are optional education opportunities geared toward current and future public health employees.

Lynn Roman asked when the Public Health Accreditation Board (PHAB) accreditation is up. Adam Litke is not sure, but he did participate in a meeting with PHAB representatives recently. He said that Ron Graham will provide an update next month.

5.0

Committee Reports

No Committee reports.

6.0

Old Business

6.01

House Bill 110 Review

The process to refund the House Bill 110 payments has started.

6.02

Geauga Public Health Levy Review

Adam Litke met with Rich Piraino to understand the process of the levy renewal.

7.01

7.01.01

Financial Reports, Resolution 23-08-07-01-01

Ashley Jones moved and Dr. Mark Rood seconded a motion to approve the Financial Reports for payment of bills, as listed in the recapitulation sheets attached to these minutes; motion carried.

Discussion:

Carolyn Brakey asked for clarification on the legal expenses. Adam Litke said they were from the Then and Nows that were approved at the July 26, 2023, Board meeting. They cover multiple months and include all of the time spent reviewing the House Bill 110 (HB110) files, compiling the reports, and setting up the claims administrator.

Carolyn Brakey asked how the legal fees have drawn down the budget. Adam Litke said that cash on hand is depleting quickly due to things such as the HB110 repayment and work surrounding it, like the audit of HB110.

7.01.02

Permission to Approve Appropriations for Increase/Decrease

Dr. Mark Rood moved and Dr. Mark Hendrickson seconded a motion to approve supplemental Appropriations for Increase/Decrease as presented, totaling \$1.148 million; motion carried. Ashley Jones abstained.

Discussion:

Adam Litke said the appropriations are for equipment needed for the O&M laboratory.

8.0

Citizens' Remarks

Adam Litke outlined the process and policies for providing public comment. Those who would like to comment but not attend the meeting are invited to email info@geaugacountyhealth.org and their comments will be forwarded to the Board.

There were no citizens' remarks.

9.0

Executive Session

Dr. Mark Hendrickson moved and Lynn Roman seconded a motion to enter into Executive Session to discuss matters of pending litigation in accordance with Section 121.22 of the Ohio Revised Code.

A roll call vote was taken and all members voted in favor of entering into Executive Session. The Executive Session convened at 5:55 p.m. Ashley Jones moved and Dr. Mark Hendrickson seconded the motion to reconvene the meeting at 6:26 p.m. Motion carried with a roll call vote. Ms. Brakey, yes; Ms. Jones, yes; Dr. Rood, yes; Ms. Roman, yes; and Dr. Hendrickson, yes.

10.0

Adjournment

With no further business, the meeting was adjourned at 6:27 p.m.

Secretary

President