

AGENDA
GEAUGA PUBLIC HEALTH
July 26, 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 June 28, 2023

3.02 Minutes, Special Meeting July 12, 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 23-07-07-01-01
- 7.01.02 Permission to Pay McDonald Hopkins Settlement Agreement
- 7.01.03 Rescind Portion of Appropriations Approved June 28, 2023
- 7.01.04 Resolution 2023-12: Then and Now Purchase Order to Conduent, Not to Exceed \$12,500.00
- 7.01.05 Resolution 2023-13: Then and Now Purchase Order to Flannery Georgalis, Not to Exceed \$153.25
- 7.01.06 Resolution 2023-14: Then and Now Purchase Order to Flannery Georgalis, Not to Exceed \$750.00
- 7.01.07 Resolution 2023-15: Then and Now Purchase Order to Flannery Georgalis, Not to Exceed \$43,898.90
- 7.01.08 Resolution 2023-16: Then and Now Purchase Order to Flannery Georgalis, Not to Exceed \$5,145.00
- 7.01.09 Resolution 2023-17: Then and Now Purchase Order to DEX, Not to Exceed \$7,926.00

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, July 26, 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 Mariann Rusnak.

Also present from the Health District staff:

Ron H. Graham	Adam Litke	Dan Lark
---------------	------------	----------

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

Dr. Mark Rood moved and Ashley Jones seconded a motion to approve the minutes of the June 28, 2023, Board of Health regular meeting; motion carried.

Dr. Mark Rood moved and Lynn Roman seconded a motion to approve the minutes of the July 12, 2023, Board of Health special meeting; motion carried. Ashley Jones abstained.

4.0 Health District Staff Reports

4.01 Population Health

4.01.01 Safe Communities

A coalition meeting was held on June 6th with representatives from the Geauga County Sheriff's Office, Geauga County Engineer's Office, and ODOT District 12 in attendance. The coalition reviewed the details of a fatal crash in Geauga County that occurred on May 25th, 2023. Planning for upcoming events continues.

The Coalition Coordinator attended the Chardon Family Market on June 17th in Chardon Square. A vendor table was displayed at the market, and community members participated in traffic safety trivia, used fatal vision goggles, and received traffic safety materials and information.

The Coalition Coordinator attended a concert on June 17th organized by the Geauga Park District as part of their Parks Night Out Concert series. The coordinator set up an interactive display at the event and members of the community participated in traffic safety trivia, used the fatal vision goggles, and received traffic safety materials.

The Coalition Coordinator attended UH Health Day at the UH Geauga campus. The coordinator interacted with the community through an interactive display using traffic safety trivia, fatal vision goggles, and traffic safety materials.

4.01.02 Buckles Buckeyes Program (Car Seat Program)

Health Educator Emily Landis is scheduled to attend training to become a Certified Passenger Safety Technician (CPST) on August 2, 3, 8 and 9 in Ashland County. The program's regional coordinator, University Hospitals' Rainbow Injury Prevention Center, is offering a stipend for the class fee (\$160), as well as a travel reimbursement for up to \$250. Once Emily is certified, Geauga Public Health can begin receiving child safety seats to distribute to income-eligible residents.

4.01.03 Other Population Health Activities

The Health Educator distributed 8 Project DAWN Naloxone kits to the community.

4.01.04

Get Vaccinated Ohio-Public Health Initiative (GVO)

This grant's reports are submitted and tracked through the Ohio Department of Health (ODH) Grant Management Information System (GMIS). Reports are submitted on a monthly basis, regarding expense reports, grant deliverable tracking, and program reports.

Grant Period: 7/1/2022-6/30/2023

- D1- Immunization Reminder and Recall System: Completed and submitted for grant year.
- D2- Immunization Coverage Disparities: D2A report submitted on 1/6/2023.
- D3- Immunization Provider Identification: Completed on 9/9/2022. Submitted 3/20/2023.
- D4- Immunization Quality Improvement for Providers: Staff education completed on 7/28/2022. Submitted 8/9/2022.
- D5- Provider Education-MOBI and TIES: Staff education completed on 11/28/2022. Submitted 4/6/2023.
- D6- Perinatal Case Identification and Follow-up: Completed and submitted for grant year.
- D7- School Immunization Assurance: Completed and submitted for grant year.

The state has expressed their gratitude at this grant being caught up prior to the grant cycle ending, allowing for GPH to collect the most grant money possible. As of this writing, ODH has paid \$30,796.00 to GPH for grant deliverables. Less than \$100 is anticipated to be received in the final payment.

The Get Vaccinated Ohio Grant for 7/1/2023-6/30/2024 has been approved with Lake County General Health District. Staff will be attending two in person trainings in Columbus required for grant deliverables.

4.01.05

Vaccines for Children (VFC)

Staff has started assisting the DDC with their childhood immunization clinics every other week.

ODH completed their site inspection of the Health Department on 6/8/2023. No compliance issues were identified during the inspection. Per ODH, GPH provided 1,120 doses of VFC vaccine in calendar year 2022. The cost of doses distributed to the state in 2022 was \$82,221.81. Our next site inspection is anticipated to be in March 2025.

4.01.06

Public Health Emergency Preparedness (PHEP)

In June, Preparedness Specialist Lydia Castner assisted with flyer distribution for upcoming vaccination clinics to businesses in Middlefield on June 9th and 28th, and Disease Investigator Tania Nanavati distributed flyers on June 9th and 17th.

Ms. Castner contacted entities on GPH's media contacts list to update points of contact and contact information. Ms. Castner also reviewed and began updating the Responder Safety and Health, Continuity of Operations, and Risk Communications plans and participated in several exercise planning discussions for an upcoming anthrax full scale exercise to be conducted by the Ohio Department of Health in October.

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

- CRI Deliverable 3.4 – Q4 Medical Countermeasures Action Plan
- CRI Deliverable 5.1 – Responder Safety and Health Worksheet
- PHEP Deliverable 6.4 – Q4 Epidemiology Meeting

The Ohio Department of Health approved the following grant deliverables in June:

- CRI Deliverable 3.4 – Q4 Medical Countermeasures Action Plan
- CRI Deliverable 5.1 – Responder Safety and Health Worksheet
- PHEP Deliverable 6.4 – Q4 Epidemiology Meeting

All deliverables have been successfully completed and approved for the FY23 grant year, which ended on June 30.

Meetings Attended:

- June 2: Northeast Ohio Healthcare Coalition Annual Conference at Lakeland Community College
- June 8: Ohio Department of Health Grant Consultant onboarding call
- June 21: Geauga Department of Emergency Services to review grant deliverable needs and collaborations
- Weekly Pertussis Outbreak Information Sharing calls with Geauga, Ashtabula, and Trumbull counties and Ohio Department of Health

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

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

Adam Litke provided the following highlights for Dyan Denmeade:

- *Dyan Denmeade has submitted her resignation. Sarah Van Vechten will be the interim Nursing Director for Lake and Geauga.*

Discussion:

Lynn Roman asked the location of the fatal accident noted in the Safe Communities report.

Adam was not sure on the exact location of that accident.

Lynn Roman asked about the Get Vaccinated notation from the State on gratitude. Adam stated that the deliverables and billing was submitted which we were behind. Adam explained that the grants are deliverable based which means you complete your objectives and submit for payment.

4.02

Environmental Health

4.02.01

Director's Report

A complaint of an illegal campground on Madison Rd. was investigated with Thompson Zoning, Fire and Police. It appears to be operating with the number of campsites that would require the property to be licensed. The Ohio Department of Health is responsible for plan review before GPH would be able to issue a license. GPH has offered assistance to the property owner to comply with any requirements. The biggest hurdle will be zoning of the property.

Data cleanup has continued for the expected start of operation and maintenance.

4.02.02

Food Safety

Staff assisted with the preparation for the Ohio Department of Agriculture survey of the Food establishment program that was conducted on June 26 and 27. A. O'Brien assisted with a ServSafe food education course that was taught in Lake County on June 5th.

4.02.03

Program Inspections

From 6/15/23 through 7/12/23, the Environmental Health staff conducted the following program inspections:

Program	Inspections
Private Water Systems (wells)	17
Camps	0
Swimming Pools/Spas	3
*Food	90
Sewage Systems	53
For Sale of Property	4
HB 110 (Semi-Public) Systems	105
Plumbing	57
Schools	3

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

Dan Lark provided the following highlights:

- *A map was shown with the areas that have been sampled for the well water contamination in Parkman Township.*

Discussion:

The board had several concerns and comments regarding the contamination area: unsampled homes, residents' health, potential contamination at the nearby lake, GPH responsibility, location of salt domes, etc. Dan stated that the map was just created, and he did not have time to thoroughly review the accuracy. Additional coding will be placed on the map once reviewed (homes sampled, not sampled, high vs low results). Several attempts have been made to homeowners in the high-risk area regarding the contamination and sampling - via letters and personal visits. High chloride counts have been found in some wells; however, it is also a secondary water standard. Most of the wells are shallow in this area. New wells being drilled are drilled deeper into the aquifer. GPH will meet with EPA regarding additional sampling and additional concerns. Adam stated that GPH has met with Parkman Trustees and attended meetings.

Lynn Roman inquired about the illegal campgrounds and enforcement. Dan stated that we have no ability to fine, we can only educate. Townships zoning has stricter rules.

Dr. Mark Rood inquired about the FSOP inspections. Dan stated these are requests made by lending agencies or potential buyers and we do these as a service and are not required.

4.03

Administrator's Report

4.03.01

Administrator

1. Parkman Wells – Phase II of the Parkman Wells replacement has started. Winning bidder was notified and work should start soon. The properties listed with the Phase II bid must be completed by August 31, 2023.
2. Submitted Geauga Public Health renewal levy paperwork to Geauga County Commissioners office on July 13, 2023. It will go before the Commissioners on July 18th as the next step in the process. It will then be certified by the Auditor and go back to the Commissioners on July 25th and if approved will be sent over to the Board of Elections and be put before the voters of Geauga County for their consideration.
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, NPDES systems only, is starting to be rolled out and our first training for the public is August 2nd.
5. Continue to work with Ohio Department of Health to monitor the Pertussis issue in the surrounding Counties.

04.03.02

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 June 30, 2023, 50.00% 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 : JUNE			
	Revised	YTD	% of Budget
Revenue Type	Budget	Revenue	Received
Property and Other Taxes	\$ 638,099.00	\$ 296,244.92	46.43%
State Reimbursement-Real Estate	\$ 75,392.00	\$ 37,139.42	49.26%
State Revenues	\$ 711,064.00	\$ 133,150.04	18.73%
Local Government Tax	\$ -	\$ -	
Permits	\$ 725,000.00	\$ 141,185.10	19.47%
Inspection Fees	\$ 507,000.00	\$ 50,935.00	10.05%
Fees	\$ 236,500.00	\$ 152,473.92	64.47%
Licenses	\$ 200,000.00	\$ 175,205.37	87.60%
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	\$ 5,540.00	42.62%
Federal Grants	\$ 147,000.00	\$ 31,923.48	21.72%
Local Match	\$ -	\$ -	
Reimbursements	\$ -	\$ -	
Other Revenue	\$ 160,670.00	\$ 281,975.11	175.50%
Other Revenue Other Receipts	\$ -	\$ 6,905.00	0.00%
Other Revenue Other Revenue	\$ 14,500.00	\$ 55,760.93	384.56%
Other Revenue Real Estate Fee Refund	\$ -	\$ 95.00	
Transfers In	\$ 129,500.00	\$ -	0.00%
Total Revenue	\$ 3,574,475.00	\$ 1,376,435.29	38.51%
	Percentage of year Completed		50.00%
	Revised	YTD	% of Budget
Expense Type	Budget	Expense	Used
Salaries	\$ 666,494.00	\$ 433,245.43	65.00%
OPERS	\$ 103,761.00	\$ 58,422.47	56.30%
Medicare	\$ 21,615.00	\$ 6,207.18	28.72%
Workers Compensation	\$ 37,273.00	\$ -	0.00%
Hospitalization	\$ 162,566.00	\$ 80,269.94	49.38%
Unemployment	\$ 5,000.00	\$ -	0.00%
Contract Services	\$ 1,992,539.17	\$ 267,119.47	13.41%
Travel	\$ 46,644.60	\$ 9,017.26	19.33%
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	\$ 26,897.00	41.08%
State Remittance Ohio Permit Fee	\$ 19,830.00	\$ 3,312.00	16.70%
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	\$ 8,375.21	39.75%
Materials and Supplies Vaccine Supply	\$ 18,047.03	\$ 350.41	1.94%
Equipment	\$ 42,898.43	\$ 10,638.79	24.80%
Equipment Equipment	\$ 11,303.00	\$ -	0.00%
Equipment Equipment Maintenance	\$ 3,100.00	\$ 52.62	1.70%
Other	\$ 327,293.02	\$ 81,919.67	25.03%
Other County RE Tax Expenses	\$ 11,000.00	\$ 4,943.19	44.94%
Other Health Emergency	\$ -	\$ -	0.00%
Other Other Expenses	\$ 111,751.52	\$ 18,892.00	16.91%
Other State RE Tax Expenses	\$ 1,000.00	\$ -	0.00%
Other VS Remit to State	\$ 164,396.86	\$ 47,094.00	28.65%
Refunds	\$ 16,600.00	\$ 480.00	2.89%
Repair Services	\$ -	\$ -	0.00%
Transfers Out	\$ 129,500.00	\$ -	0.00%
Total Expense	\$ 4,027,153.94	\$ 1,064,165.13	26.42%
	Percentage of year Completed		50.00%
Revenue Less Expense	\$ (452,678.94)	\$ 312,270.16	
Beginning Cash Balance		\$ 4,250,354.64	
Total Cash on Hand		\$ 4,562,624.80	
Cash on Hand Per Cash Position Report		\$ 4,562,624.80	

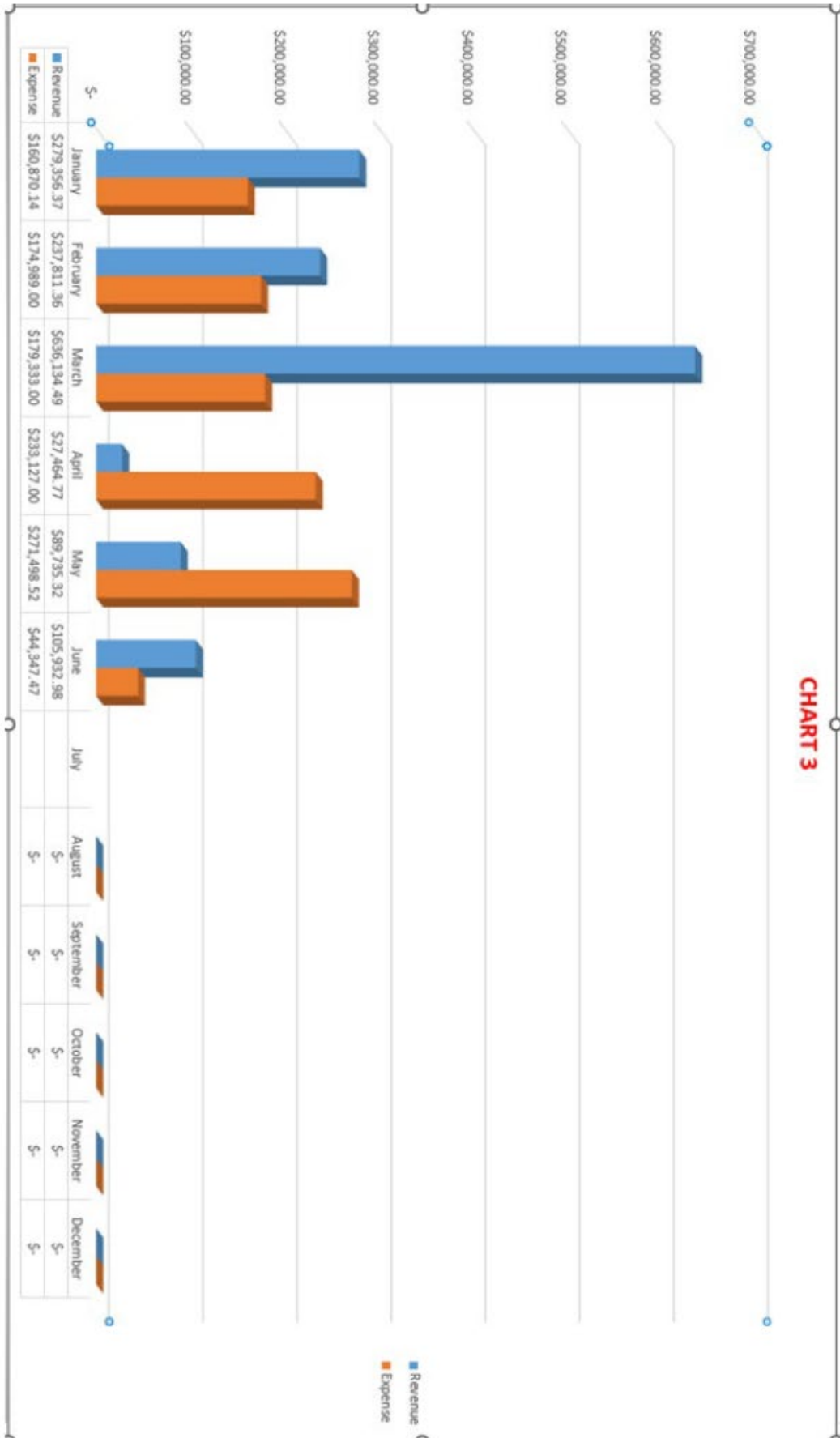
MONTH OF :

CHART 2

JUNE

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	\$ 615,129.13	\$ 306,743.83	\$ 1,921,853.98	\$ 1,921,853.98	\$ -	19.11%
6004	Trailer Park	\$ 11,394.69	\$ 4,427.00	\$ 120.44	\$ 15,701.25	\$ 15,701.25	\$ -	37.79%
6005	Food Service	\$ 168,560.28	\$ 180,957.37	\$ 53,439.39	\$ 296,078.26	\$ 296,078.26	\$ -	75.65%
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	\$ 189,992.00	\$ 189,809.39	\$ 194,358.96	\$ 194,358.96	\$ -	0.09%
6018	Swimming Pools	\$ 26,209.09	\$ 11,723.75	\$ 3,800.44	\$ 94,132.40	\$ 94,132.40	\$ -	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	\$ 218,672.75	\$ 196,218.91	\$ 934,620.12	\$ 934,620.12	\$ -	2.46%
6024	Not Used	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6025	Immunization Action Plan	\$ 36,092.56	\$ 5,657.00	\$ 35,333.78	\$ 6,415.78	\$ 6,415.78	\$ -	-82.22%
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	\$ 16,175.00	\$ 84,049.80	\$ 224,314.94	\$ 224,314.94	\$ -	-23.23%
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	\$ 18,792.82	\$ 42,339.91	\$ 42,339.91	\$ -	-22.15%
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	\$ 916.46	\$ 34,042.69	\$ 176,890.96	\$ 176,890.96	\$ -	-15.77%
Total		\$ 4,250,354.64	\$ 1,376,435.29	\$ 1,064,165.13	\$ 4,562,624.80	\$ 4,562,624.80	\$ -	-
		\$ -	\$ 1,376,435.29	\$ 1,064,165.13				
			\$ -	\$ -	Check Figure	\$ 312,270.16		

CHART 3



Adam Litke provided the following highlights:

- *Participated in a regional tabletop discussion at Summit County regarding local health departments input on COVID 19.*

Discussion:

Lynn Roman asked about the O & M roll out on August 2nd. Adam stated that the Lake & Geauga Area Association of Realtors (LGAAR) asked about a presentation/training on the operation and maintenance (O & M) program. This is only for the NPDES systems. Public meetings will be held at a later date prior to the roll out of the O & M program.

Ashley Jones asked if the training could be recorded and placed on the website. Adam was not sure and would need to work out the logistics of the recording.

Carolyn Brakey asked about the \$4,000 on envelopes. Adam stated that we were very low on envelopes and go through them quickly in Environmental Health.

Lynn Roman inquired about the \$5,000 for Accreditation. Adam stated that is the annual fee.

Lynn Roman asked about the McDonald Hopkins payment. Adam stated the invoice is from January-June and we are caught up. Carolyn Brakey asked about the \$500 retainer. Adam stated that is about 2-3 hours a month.

4.04

Health Commissioner's Report

4.04.01

The State of Public Health Funding

On June 20, National Association of County and City Health Officials (NACCHO) Board member Krista Wasowski, served as a featured panelist for a Congressional virtual [briefing](#), entitled, “Shortchanged: The Impact of Chronic Underinvestment in Public Health.” The event, organized by the Trust for America’s Health (TFAH) and the Coalition for Health Funding (of which NACCHO is a member) highlighted the longstanding gaps in public health capacity resulting from chronic underfunding. Ms. Wasowski was joined by Tekisha Dwan Everette, Executive Vice President of TFAH, and Brian Castrucci, President and CEO of de Beaumont Foundation, on the panel.

The briefing highlighted findings from TFAH’s new [report](#), “The Impact of Chronic Underfunding on America’s Public Health System: Trends, Risks, and Recommendations, 2023.” The report notes that as public health threats have risen, funding has continued to remain stagnant, making it difficult for local and state health departments to effectively and efficiently be able to address all the health issues their communities’ encounter. Inadequate public health funding prevents numerous evidence-based public health programs that exist from being funded in all 50 states, limiting the ability to address some of the leading health crises among their residents. Chronic underfunding is harming the public health workforce and making leaders rely on outdated data and lab systems to accomplish their mission on top of dealing with limited

resources. All panelists emphasized the need for consistent funding for prevention efforts to ensure public health preparedness at all times, not just during public health emergencies. Read NACCHO's full blog post covering the webinar [here](#).

4.04.02

CDC Recommends RSV Vaccine

The Centers for Disease Control and Prevention (CDC) has [recommended](#) that adults aged 60 and older receive a single dose of a respiratory syncytial virus (RSV) vaccine, following a conversation with their doctor. This recommendation comes after the Food and Drug Administration (FDA) approved RSV vaccines from GlaxoSmithKline and Pfizer in May. The endorsement aims to protect older adults from severe RSV illness, which tends to spike in the fall and can lead to thousands of deaths and hospitalizations among this age group. CDC's recommendation also means that most insurers, including Medicare, will cover the cost of the vaccines. The new vaccines are expected to be available this fall. Older adults, including those with underlying medical conditions such as diabetes and chronic heart and lung disease, are at increased risk of severe RSV illness and drive the majority of RSV hospitalizations. FDA is expected to soon decide on options to protect infants from RSV, including through a maternal vaccine.

4.04.03

Educational Opportunities

[Trends in Vaccination Law and Judicial Challenges](#) Wednesday, July 26, 1:00-2:30 ET

Attend this webinar to learn about recent legislative and judicial trends related to vaccine law and policy, including the expansion of non-medical exemptions and shifts in the authority to impose vaccination requirements, especially for school attendance. Speakers will also discuss vaccination measures that have been enacted to slow the transmission of COVID-19.

[2023 Public Health Law Conference: People. Policy. Progress.](#)

The 2023 Public Health Law Conference offers 40 concurrent sessions in five tracks that address core issues related to structural inequities and health equity, access to reproductive health care, the use of public health data to improve community health, the role of law in facilitating system change, and emerging issues. [View session descriptions and register.](#)

4.04.04

Laws and Policies for a Post-Pandemic Public Health System

The backlash in response to public health measures taken during the pandemic has resulted in many states passing laws restricting the ability of public health to take action to protect the health of their communities. However, there are many states that have taken innovative actions that

strengthen public health authority and provide mechanisms that support a strong public health infrastructure.

This new report from the Network for Public Health Law, produced as part of [Act for Public Health](#), examines laws and policies being enacted across the U.S. in several key areas that serve as a model for best practices moving forward, including:

- Governance
- Funding
- Health equity
- Infrastructure
- Workforce
- Public health interventions

The breadth and diversity of examples discussed in this report provide ample reason to hope that public health can emerge from the COVID-19 pandemic better prepared and equipped to fulfill its mission to protect and improve the health of the population as a whole in the years to come. [Download the report.](#)

4.04.05

Morbidity and Mortality Weekly Report (MMWR) 6/30/2023 Synopsis

- Per surveillance data from the FoodNet network, in 2022, incidences of foodborne illness caused by the pathogens *Campylobacter*, *Salmonella*, *Shigella*, and *Listeria* were similar to average annual incidences during 2016–2018; however, incidences of Shiga toxin-producing *Escherichia coli* (STEC), *Yersinia*, *Vibrio*, and *Cyclospora* illnesses were higher. Post-pandemic, there appears to be no progress toward Healthy People 2030 (HP2030) objectives to reduce foodborne illness. Increased efforts, targeting specifically poultry processing and leafy green contamination, are needed.
- Using 2011-2020 Behavioral Risk Factor Surveillance System (BRFSS) data, CDC estimates indicate 63.9% of U.S. adults had at least one adverse childhood experience (ACE), and 17.3% had 4 or more. Multiple ACEs were most common among females, adults aged 25-34 years, American Indian or Alaskan Natives, multiracial adults, those with less than a high school education, and those unemployed or unable to work. Prevalence of 4 or more ACEs range geographically from 11.9% in New Jersey to 22.7% in Oregon. ACEs are common, but not equally distributed, highlighting the importance of collecting ACE data locally to guide prevention and mitigation efforts.
- According to commercial lab data, during January 1, 2013–December 31, 2022, 88% of those ever infected with Hepatitis C (1.7 million people) had received viral testing. Among those who received viral testing, 69% were classified as having initial infection; among these 1 million people, only 34% were classified as cured or cleared (treatment-induced or spontaneous); and among those people 7% had evidence of subsequent persistent infection or reinfection. Viral clearance was even lower among people aged 20-39 years (16%), and those

with self-pay insurance. These highlighted gaps in curing illustrate that increased access to diagnosis, treatment, and prevention services for people with Hepatitis C must be prioritized.

- Xylazine, a non-opioid sedative not approved for human use and with no known antidote, has been increasingly detected in illicitly manufactured fentanyl products and overdose deaths. Data from the CDC's State Unintentional Drug Overdose Reporting System (SUDORS) revealed that the monthly percentage of fentanyl deaths with xylazine detected increased 276% from 2.9% in January 2019 to 10.9% in June 2022. Prevalence was highest in the Northeast. Listing xyazline as the cause of death varied across jurisdictions. Prevention and response efforts need to emphasize seeking treatment beyond naloxone distribution.
- Disparities in Covid-19 incidence and vaccination impact by community income were assessed among 81 communities in Los Angeles, California, and it was found that the largest effect of vaccination on disease incidence occurred in the lowest-income communities. Despite their lower vaccination coverages, a 20% increase in community vaccination was estimated to have resulted in an additional 8.1% reduction in Covid-19 incidence in the lowest-income communities compared with that in the highest-income communities. This impact may be due to higher exposure risk related to higher population density, higher use of public transportation, and less opportunity for remote work in those lower-income communities.
- In late 2022, following a fivefold increase in E. coli infections in Michigan, CDC helped detect 109 cases from 6 states (including 24 from Ohio). 83% of patients interviewed reported eating at the same fast food chain, yet epidemiology and testing could not confirm the contaminated ingredient. Suspected romaine lettuce was removed from the restaurants, and no further illnesses were reported thereafter.
- In early 2023, after 19 of 50 swim team members at a Massachusetts college reported experiencing diarrhea following a trip to Puerto Rico, 13 tested positive for Cryptosporidium. There was concern for secondary transmission to competing swimmers at New York and Rhode Island colleges at meets in between the return from Puerto Rico and the onset of illness, but no potential cases were reported by New York. Rhode Island had 2 swimmers get sick afterwards and test positive for same subtype Cryptosporidium, suggesting secondary transmission had occurred.
- *The report included a notice that a reanalysis is being conducted with corrected surveillance data after a reported data processing error and overestimation of the proportion of children aged 1–5 years who were introduced prior to the age of 4 months to complementary foods. A corrected report will be published in the coming weeks.
- Per National Center for Health Statistics, National Vital Statistics System, Mortality Data, in 2021 among males, Blacks had the highest rate of firearm-related homicide deaths (52.9 deaths per 100,000 population), and Asians had the lowest (1.5). Among females, Blacks also had the highest rate (7.5), and Asians the lowest (0.5).

- *This report was accompanied by a Surveillance Summary of 2012-2021 data from the GeoSentinel Network regarding travel-related diagnoses.
 - Approximately 200,000 patients had approximately 244,000 travel-related diagnoses
 - 43.3% were recent migrants to the U.S. and 88.8% of them did not receive pre-travel health information.
 - § Most frequent diagnoses were vitamin D deficiency (20.2%), blastocystis (10.9%), and latent tuberculosis (10.3%), implying malnutrition and/or inadequate sanitation and hygiene.
 - 56.7% were non-migrant travelers returning to the U.S. and 65.5% of them did not receive pre-travel health information.
 - § Most frequent diagnoses were gastrointestinal illnesses (43.2%), implying exposure to contaminated food and water.
 - Malaria was diagnosed in 54 (<1%) migrant travelers, and 421 (3.5%) non-migrant travelers.
 - The complete report can be found on the CDC website at:
https://www.cdc.gov/mmwr/volumes/72/ss/ss7207a1.htm?s_cid=ss7207a1_w

4.04.06

MMWR 6/9/2023 Synopsis

- In 2022, 26 of 34 (76.5) of priority countries met the two key acute flaccid paralysis indicators for poliomyelitis surveillance performance, compared with 24 (70.6%) in 2021. Environmental surveillance expanded to 725 sites in priority countries, increased 31.1% from the 553 sites in 2021. These improvements follow surveillance gaps caused by the Covid-19 pandemic, but many gaps persist and surveillance efforts must be strengthened to help achieve the goal of global polio eradication.
- CDC reviewed v-safe and VAERS data to assess safety of mRNA Covid-19 vaccine third doses among children aged 6 months to 5 years, from June 17, 2022, to May 7, 2023. Of the more than 559,000 children in this age groups that received a third dose during this period, less than 3000 were recorded in v-safe; with 37.7% reporting no reactions, and those with reactions being mostly mild or transient. VAERS received just 53 reports, with 98.5% being non-serious and 78.4% classified as a vaccination error. Findings were similar to those following 1 or 2 doses, and no new safety concerns were identified.
- The mpox vaccination shortfall (percentage of vaccine-eligible population that did not receive the vaccine) decreased among all racial and ethnic groups between May 2022 and April 2023, however 66% of vaccine-eligible people remain unvaccinated. Shortfalls are

largest among Blacks (77.9%) and American Indian or Alaskan Natives (74.5%), followed by Whites (66.6%) and Hispanics (63.0%), and lowest among Asians (38.5%). Shortfall reductions were smallest among Blacks especially, highlighting the need to increase vaccination coverage efforts targeting vaccine-eligible minority groups to reduce further disparities.

- Per data collected during September 25-December 31, 2022, of 17 children aged 12 or under with probable or confirmed mpox, 3 were a week or less old, 10 were aged 0-4 years, and 4 were aged 5-12 years. Of the older 14 kids, 9 were boys and 5 were girls; 9 were Black, 2 were Hispanic, and 3 were White. In 5 cases, the exposure source was unknown, while the other 9 had known exposure to a person with mpox, almost always a caregiver or household member. 5 of the 9 reported close physical contact, with 4 noting skin-to-skin. Though 4 people reported isolating, 3 did not begin until after being diagnosed (while evidence suggests transmissibility up to 4 days prior to symptom onset.)
- During October 1, 2022 – March 11, 2023, 81,037 chikungunya cases (transmitted by Aedes mosquitoes) were recorded in Paraguay, with 94% occurring in 2023. 58% were in females, and the median age was 36. 10% were hospitalized and there were 52 deaths. The highest case fatality rate (3.8%) was seen in infants less than a month old (140 hospitalizations and 8 deaths among 208 cases.) 72% of adults decedents has cardiovascular diseases and 41% had diabetes.
- In early 2023 in Western Uganda, following a postmortem blood sample positive for rift valley fever virus (which infects humans through contact with infected animals or bites from infected mosquitoes), identified 103 suspected or probable cases of rift valley fever, with 24 subsequently laboratory confirmed. 17 patients sought care and 8 were hospitalized. Median patient age was 36 years, and 4 patients died. All patients reported contact with cattle that had died suddenly or had recently aborted.
- *The report included a note of correction to confidence interval error bars from a previous report on Percentage of Adults Who Were in Families Having Problems Paying Medical Bills During the Previous 12 Months, by Race and Selected Hispanic Origin Subgroups.
- Per National Center for Health Statistics, National Health Interview Survey, 2021 data, 11.9% of adults received care at home from a friend or family member during the past 12 months. The percentage increased with age: 9.8% aged 18-44, 10.5% aged 45-64, 13.8% aged 65-74, 19.4% aged 75-84, and 39.8% aged 85 or older.

4.04.07

MMWR 6/2/2023 Synopsis

- Data from CDC's Water Fluoride Reporting System (WFRS) from 2016-2021 showed only 0.01% of community water system fluoride measurements above the 2.0 mg/L safety standard set to prevent harmful tooth enamel changes. 16.3% were less than the target maintenance level of 0.6 mg/L, while more than 80% were above.

- The Cherokee Nation Health Services analysis of data from 2015 to 2020 to assess their Hepatitis C virus elimination program found that among 1,423 infected people, 86.2% were linked to care, 61.2% initiated treatment, 49.3% returned for their 12-week post treatment completion visit and 99.4% of them were confirmed cured. Though treatment was very effective, initiation was lower than expected with the primary barriers appearing to be access to antivirals due to Medicaid coverage limitations, preauthorization requirements, or insurance specialist evaluation requirements.
- An analysis of nationwide blood donor data revealed that from April to June, 2021, 68.4% of people age 16 or older had Covid-19 antibodies, including 47.5% from vaccination alone, 12.0% from infection alone, and 8.9% from both. By July to September, 2022, 96.4% had Covid-19 antibodies, including 26.1% from vaccination alone, 22.6% from infection alone, and 47.7% from both. Hybrid immunity was lowest among people aged 65 or older, and highest among those aged 16-29 years. Older adults who are at increased risk, especially, should stay up to date with recommended Covid-19 vaccination, including at least 1 bivalent dose.
- In 2022 Clark County, Nevada, saw a high number (18) of pediatric patients hospitalized with intracranial abscesses (when a typically-expected annual range would be 2 to 6). Causes were not identified, but the increase coinciding with the lifting of the (Covid-19) mask mandate in Nevada is thought to be potentially partially related due to associated changes in respiratory pathogen transmission.
- CDC evaluation of extended hospitalization data through March 2023 from 37 hospitals in 19 states and the District of Columbia showed a higher-than-expected number of pediatric intracranial infections beginning in August 2021, with a large peak during winter 2022–2023 coinciding with spikes in respiratory virus circulation. Such infections still remain rare, but all children should remain up to date with recommended vaccinations, including flu and Covid-19.
- Per National Center for Health Statistics, National Health Interview Survey, 2021 data, 4.3% of adults reported being bothered a lot by a headache or migraine in the past 3 months. Percentages were higher among women than men in all age groups: 6.2% of women and 2.2% of men overall, 7.4% vs. 2.5% in those aged 18-44, 6.7% vs. 2.4% in those aged 45-64, and 3.1% vs. 1.5% in those aged 65 or older.
- *This report was accompanied by a Surveillance Summary of foodborne illness outbreaks at retail food establishments from 2017 to 2019, from the National Environmental Assessment Reporting System.
 - 800 foodborne illness outbreaks associated with 875 retail food establishments were reported.
 - Norovirus accounted for 47% of outbreaks, and Salmonella for 18.6%.

- 40% were associated with food contamination by an ill or infectious food worker, though 91.7% of interviewed managers indicated a policy requiring workers to notify their manager when ill, with 66% saying such policies are in writing. 85.5% said the policy restricts or excludes ill workers from working. The majority of policies did not list/account for all five illness symptoms (vomiting, diarrhea, jaundice, sore throat with fever, and lesion with pus.)
 - The full report can be found on the CDC website at:
https://www.cdc.gov/mmwr/volumes/72/ss/ss7206a1.htm?s_cid=ss7206a1_w
-

Ron H. Graham provided the following highlights:

- *Funding for public health is very minimal. Working to create an infrastructure to pull in more tax dollars.*

5.0

Committee Reports

No Committee reports.

6.0

Old Business

6.01

House Bill 110 Review

The company will begin to process refund payments in August. This will significantly reduce the sewage fund.

6.02

Geauga Public Health Levy Review

The County Commissioners will place the levy on their agenda Tuesday, August 1st. This must be sent to the Board of Elections by August 8th. We will keep the Board informed.

7.01

7.01.01

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

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

7.01.02

Permission to Pay McDonald Hopkins Settlement Agreement

Dr. Mark Rood moved and Dr. Mark Hendrickson seconded a motion to pay McDonald Hopkins settlement agreement. Appropriations were not in place at time of invoice was initially issued because of an oversight. Money was thereafter appropriated, and invoices issued again, motion carried.

7.01.03

Rescind Portion of Appropriations Approved June 28, 2023

Ashley Jones moved and Dr. Mark Hendrickson seconded a motion to rescind a portion of the appropriations approved at the June 28, 2023, regular meeting, motion carried.

7.01.04

Resolution 2023-12: Then and Now Purchase Order to Conduent, Not to Exceed \$12,500.00

Dr. Mark Rood moved and Ashley Jones seconded a motion to adopt Resolution 2023-12 to authorize the payment of a Then & Now Purchase Order to Conduent, total not to exceed \$12,500.00, motion carried.

7.01.05

Resolution 2023-13: Then and Now Purchase Order to Flannery Georgalis, Not to Exceed \$153.25

Dr. Mark Rood moved and Dr. Mark Hendrickson seconded a motion to adopt Resolution 2023-13 to authorize the payment of a Then & Now Purchase Order to Flannery Georgalis, total not to exceed \$153.25, motion carried.

7.01.06

Resolution 2023-14: Then and Now Purchase Order to Flannery Georgalis, Not to Exceed \$750.00

Lynn Roman moved and Dr. Mark Hendrickson seconded a motion to adopt Resolution 2023-14 to authorize the payment of a Then & Now Purchase Order to Flannery Georgalis, total not to exceed \$750.00, motion carried.

7.01.07

Resolution 2023-15: Then and Now Purchase Order to Flannery Georgalis, Not to Exceed \$43,898.90

Dr. Mark Rood moved and Lynn Roman seconded a motion to adopt Resolution 2023-15 to authorize the payment of a Then & Now Purchase Order to Flannery Georgalis, total not to exceed \$43,898.90, motion carried.

7.01.08

Resolution 2023-16: Then and Now Purchase Order to Flannery Georgalis, Not to Exceed \$5,145.00

Dr. Mark Rood moved and Ashley Jones seconded a motion to adopt Resolution 2023-16 to authorize the payment of a Then & Now Purchase Order to Flannery Georgalis, total not to exceed \$5,145.00, motion carried.

7.01.09

Resolution 2023-17: Then and Now Purchase Order to DEX, Not to Exceed \$7,926.00

Dr. Mark Rood moved and Dr. Mark Hendrickson seconded a motion to adopt Resolution 2023-17 to authorize the payment of a Then & Now Purchase Order to DEX, total not to exceed \$7,926.00, motion carried.

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.

A citizen asked if the water issue will resolve itself. Dan stated that ground water flows will disperse and lessen overtime. The movement of ground water is extremely slow, about 1-2 feet a year.

A citizen commended Ron on the participation in the Bio-Watch drill and obtaining the contract with Energy Harbor.

Alex Emerson, from Geauga Times Courier, introduced himself.

9.0

Executive Session

No executive session was held.

10.0

Adjournment

With no further business, the meeting was adjourned at 5:52 p.m.

Secretary

President