

AGENDA
GEAUGA PUBLIC HEALTH
March 20, 2024

- 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 February 28, 2024
- 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 Old Business
 - 5.01 Resolution to Create Certain Fees, Operation & Maintenance Program, Second Reading
 - 5.02 Hellegers Discussion Update

6.0 New Business

6.01 Election of Board of Health President and President Pro Tempore

6.02 Resolutions

6.02.01 Financial Reports, Resolution 24-03-06-01-01

6.02.02 Permission to Approve Appropriations for Increase/Decrease

6.02.03 Permission to Rescind November 2023 Appropriations for Increase/Decrease

6.03 Permission to Approve the Amended 2025 Geauga Public Health Budget

6.04 Sybr-Aer Review

7.0 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.

8.0 Executive Session

9.0 Adjournment

4.01

Population Health Report

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4.01.01

Safe Communities

A coalition meeting was held on February 1st with representatives from the Engineer's Office, ODOT District 12, and the Ohio State Highway Patrol present. Planning for upcoming events continues.

4.01.02

Buckles Buckeyes Program (Car Seat Program)

The Health Educator distributed a convertible car seat to an eligible family in Geauga County. The Health Educator conducted an educational session with the legal guardian on child passenger safety best practices, Ohio's child passenger safety law, the proper way to install a car seat, and the correct way to harness the child in the car seat. The Health Educator then assisted the guardian with installing the car seat properly into their vehicle.

The Health Educator assisted a caregiver for a car seat check. The Health Educator explained and demonstrated how to properly install two car seats into their personal vehicle. The certified technician checked that the seat was properly installed, was correct for the child's height and weight, was in the proper direction, and was not recalled or expired.

4.01.03

Other Population Health Activities

The Health Educator distributed 80 Project DAWN Naloxone kits to the Geauga County Emergency Management Agency to distribute to partners in preparation for the total solar eclipse on April 8, 2024. The Health Educator also presented a naloxone training to a Nar-Anon Family Group meeting in Chardon. Nar-Anon is a support group for families and friends of addicts. The Health Educator provided naloxone training to the group, demonstrating how naloxone is used in an emergency. The Health Educator provided local treatment information to individuals and distributed 24 naloxone kits at the meeting. A total of 112 naloxone kits were distributed to the community in February.

The Health Educator organized, planned, and facilitated the Community Health Improvement Plan (CHIP) Healthcare Access and Quality workgroup meeting. The following organizations were represented: Geauga Public Health, Lake-Geauga WIC, Lifeline, Lake County General Health District, Help Me Grow, Geauga Transit, Ravenwood Health, NOACA, and UH Geauga. The Healthcare Access and Quality workplan was discussed and future plans were established.

The Health Educator organized, planned, and facilitated the Community Health Improvement Plan (CHIP) Chronic Conditions workgroup follow-up meeting. Geauga Public Health, UH Geauga, and Lake Geauga Recovery Centers were represented at the meeting. The Chronic Conditions workplan was discussed and future plans were established.

4.01.04

Get Vaccinated Ohio-Public Health Initiative (GVO)

Grant period: 7/1/2023-6/30/2024

The following deliverables have been completed and/or are in progress:

D1- Immunization Reminder and Recall System:44 Recalls & 0 Reminders sent out.

D2- Immunization Coverage Disparities: Due April 2024

D4- Immunization Quality Improvement for Providers: One IQIP completed at GPH on 1/26/2024.

D5- Provider Education-MOBI and TIES: Awaiting ODH training.

D7- School Immunization Assurance: In progress as follows:

D7a- School Immunization Assurance:

- o Melissa Kimbrough, RN completed the ODH Webinar Training completed.

D7b- GV funded counties will perform school immunization education sessions using an ODH-prescribed PowerPoint presentation between January 1, 2024, and June 30, 2024:

- o Melissa Kimbrough, RN emailed the PowerPoint and the education validation form to all Lake County schools clinic personnel. Currently collecting all signed education validation forms to be submitted for payment.

D7c Each funded GV subawardee will perform a total of six ODH-assigned school validation assessments in each GV funded-county between Jan. 1, 2024, and April 12, 2024:

- Melissa Kimbrough RN has scheduled all required school assessments.

Kindergarten

1. Notre Dame Elementary March 26, 2024 @ 3:00p.
2. Timmons Elementary April 5, 2024 @ 9:00a

7th Grade

1. Cardinal Middle School March 21, 2024 @ 9:00a
2. St. Mary's, March 14, 2024 @ 1:00p.

12th Grade

1. Chardon High School, March 14, 2024 @ 9:00a.
2. West Geauga High School March 15, 2024 @ 9:00a.

4.01.05

Vaccines for Children

Clinics

Mobile Clinics 2/12/2 and 2/26/24

1. Busters Barn - There was a total of 37 individuals seen at the mobile clinics:
 - DTap-3
 - Pentacel-4
 - Pediarix-1
 - Kinrix-14
 - Vaxelis-5
 - ProQuad-3

Pollio-2
MMR-6
MenACWY-4
PCV15-18
Rotovirus-1
Tdap-4
Varicella-2

2. DDC Clinic Center for Special Needs Children (2/14/24 and 2/28/24)

Clinics

GPH Adult Clinic – There were a total of two (2) individuals immunized.

Hepp B-1

COVID-1

Home Visit(s)—No home visits performed.

TB Clinic—No TB tests performed.

Continuing Education / Training

1. Melissa Kimbrough, RN did Epi Center Training
2. Melissa Kimbrough, RN did a shadow at Lorain Public Health to learn the CMH program.

4.01.06

Public Health Emergency Preparedness (PHEP)

During February, Ms. Lydia Castner has continued working closely with Lake County Preparedness staff to complete Public Health Emergency Preparedness (PHEP) and Cities Readiness Initiative (CRI) Grant deliverables for the FY24 grant year. Ms. Castner has been working on updating agreements and site security surveys with Geauga County's designated points of dispensing (PODs).

Ms. Castner has continued working with local partners regarding planning for the April 8 Total Solar Eclipse, for which GPH will need to prepare to inspect any temporary food service operations at the many events scheduled in the area for the day. Ms. Castner attended meetings with the Department of Emergency Services and other partners on February 7th and 20th and has been working with Health Educator Emily Landis to assist with providing additional naloxone kits for distribution to partners hosting events.

During the month of February, the following grant deliverables were submitted to ODH:

- CRI 7.1: Medical Countermeasures Recovery & Resilience Assessment

During the month of February, the following grant deliverables were approved for reimbursement by ODH:

- PHEP Core 1.2: Pandemic Influenza Response Annex
- PHEP Core 13.2: Quarterly Communications Worksheet
- CRI 7.1: Medical Countermeasures Recovery & Resilience Assessment

During February, Ms. Castner attended the following meetings:

- Weekly PHEP Team Meetings
- Medical Countermeasures Community Portfolio (MCCP) Workbook Meeting with the Region (February 1, 13)
- NEO Healthcare Coalition Chemical Surge Tabletop Exercise (February 2)
- NEO Healthcare Coalition Public Health Workgroup Meeting (February 5)
- Solar Eclipse Meetings with the EMA and partners (February 7, 20)
- Statewide Anthrax Full Scale Exercise After-Action Meeting (February 15)
- Kent State University-Geauga Site Survey (February 16)
- Cleveland BioWatch Advisory Council Meeting (February 20)
- Regional Point of Dispensing Sign Language Video Project Meeting (February 28)

4.01.07

Epidemiology

To date for the current flu season, a total of 66 Geauga County residents have been hospitalized for influenza.

During the month of February, Ms. Priyanka Parikh continued to receive and field various requests for information from school staff and residents about COVID-19, including current guidelines, isolation and preventive measures as well as the new booster vaccines. Updated COVID-19 information was provided for long term care facilities.

Three long term care facilities in Geauga County reported cases of COVID-19, including a total of 6 staff and no residents during the month of February. All long-term care facilities were provided with the most recent COVID-19 resources from the CDC and ODH. In addition, there was also a suspected norovirus outbreak at a nursing home in Chardon where 15 residents and 3 staff members were ill.

During the month of February there was one EpiCenter anomaly in Geauga County regarding a Class A reportable disease. Upon investigation the disease was reclassified as a Class B reportable disease pending confirmatory testing by the Ohio Department of Health.

Ms. Priyanka Parikh worked on a data project with the environmental health division to look at septic system failure rates in Geauga County and submitted her initial report and findings in February.

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

Reportable Condition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total 2024	Total 2023
Anaplasmosis- Anaplasma phagocytophilum	0	0											0	1
Campylobacteriosis	1	0											1	21
Chlamydia infection	11	11											22	83
COVID-19	260	135											395	2068
CPO	0	0											0	3
Cryptosporidiosis	0	0											0	1
Giardiasis	0	0											0	3
Gonococcal infection	4	1											5	19
Haemophilus influenzae (invasive disease)	0	0											0	2
Hepatitis B (including delta) - chronic	0	1											1	5
Hepatitis C - acute	0	0											0	1
Hepatitis C - chronic	2	0											2	18
Influenza-associated hospitalization	22	21											43	27
Legionellosis	0	0											0	4
Lyme Disease	0	0											0	9
Meningitis - aseptic/viral	0	0											0	2
Mpox	0	1											1	0
Mumps	0	0											0	1
Pertussis	1	0											1	83
Salmonellosis	1	0											1	10
Shigellosis	0	0											0	2
Streptococcal - Group A -invasive	1	1											2	16
Streptococcal - Group B - in newborn	0	0											0	1
Streptococcus pneumoniae - invasive antibiotic resistance unknown or non- resistant	1	3											4	2
Streptococcus pneumoniae - invasive antibiotic resistant/ intermediate	1	0											1	1
Syphilis - early	0	0											0	2
Syphilis - primary	0	0											0	1
Syphilis - secondary	0	0											0	1
Varicella	0	0											0	1
Vibriosis (not cholera)	0	1											1	0
Yersiniosis	0	0											0	1
Total	305	175											480	2389

4.02

Environmental Health Report

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4.02.01

Director’s Report

A public meeting was held on March 7th for residents of Russel, Munson and Newbury to discuss the upcoming sampling at their home of National Pollutant Discharge Elimination System registered systems or spray systems. Thirty residents attended. The most common comments were about why are they first group, how are other systems going to be addressed and overall cost of operating the system. The cost of operating the system includes sampling, service contract and electricity.

A public hearing was held for March 12th at 6pm in the 3rd floor conference room. The purpose of the hearing is to hear public comment related to the new \$30 fee for a one- year operational permit. Comments will be recorded and passed out at the meeting.

Staff is scheduled to attend Troy Township Trustee meeting on Tuesday March 19 to discuss the upcoming Operation and Maintenance program.

4.02.02

Food Safety

M. Kruggel completed the Kent State University Foodborne Illness Online Course. All staff attended the Feb. 27th ODH Uniform Food Code Update Conference call. M. Kruggel and P. Stromp assisted ODH by delivering educational information regarding backyard poultry and salmonella to local retail locations that sell chicks and other live poultry.

4.02.03

Program Inspections

Environmental Health staff conducted the following program inspections in February:

Program	Inspections
Private Water Systems (wells)	1
Camps	0
Swimming Pools/Spas	2
*Food	71
Sewage Systems	88
For Sale of Property	0
HB 110 (Semi-Public) Systems	2
Plumbing	50
Schools	0
Nuisance Complaints	0

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

4.03

Administrator Report

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4.03.01

Administrator

1. Annual Report – Annual report was presented at the Health District Advisory Council (HDAC). This was also put on the Geauga Public Health (GPH) Facebook page and website for the public to view.
2. 2023 Financial Statements – The 2023 Financial Statements have been completed and uploaded to the Auditor of State. GPH has a two-year audit cycle so we will be audited for calendar year 2023 and 2024 in calendar year 2025.
3. Health District Advisory Council (HDAC) – Meeting occurred on March 13, 2024. A new Board of Health member Melissa Bowdren was appointed to the Board for Health for a 5-year term. Melissa Bowdren will take the place of Lynn Roman who served a 5-year term.
4. First Floor Meeting Room – The plan is to have future Board of Health meetings in the first-floor conference room. This is to avoid the issue of having to have a staff member present to watch the door and director people as well as to ensure the building is properly secured when the meeting is over.
5. Updating the GPH website and Facebook calendars to include the meetings that GPH is leading but might occur at other township, village, or city hall locations. This will hopefully help members of the public be more aware of GPH meetings in their area.

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 February 29, 2024 16.67% 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:

This is the second month of the year and the food service revenue is ahead of budget this is normal as food service licenses renew every March. Solid waste fees are in at 100% but that is revenue earned last year that was received this year.

EXPENSES:

This is the second month of the year and expenses are under budget in part due to timing of invoice payments.

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.

Notes on Chart 3

The bar graph compares the revenue and expenses by each month for all funds combined.

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CHART 1

MONTH OF : FEBRUARY

	Revised	YTD	% of Budget
Revenue Type	Budget	Revenue	Received
Property and Other Taxes	\$ 570,680.00	\$ -	0.00%
State Reimbursement-Real Estate	\$ 76,350.00	\$ -	0.00%
State Revenues	\$ 401,000.00	\$ 80,810.76	20.15%
Local Government Tax	\$ -	\$ -	
Permits	\$ 586,000.00	\$ 71,295.75	12.17%
Inspection Fees	\$ 527,000.00	\$ 7,780.00	1.48%
Fees	\$ 236,650.00	\$ 40,238.00	17.00%
Licenses	\$ 164,000.00	\$ 78,529.00	47.88%
Fines	\$ 4,900.00	\$ -	0.00%
Fees Infectious Waste Fees	\$ -	\$ -	#DIV/0!
Fees Solid Waste Fees	\$ 15,750.00	\$ 15,750.00	100.00%
Foundation Revenue	\$ -	\$ -	
Water Testing Fee	\$ 12,000.00	\$ 1,565.00	13.04%
Federal Grants	\$ 169,000.00	\$ 12,626.32	7.47%
Local Match	\$ -	\$ -	
Reimbursements	\$ 1,146,286.62	\$ -	
Other Revenue	\$ 2,500.00	\$ 446.00	17.84%
Other Revenue Other Receipts	\$ 27,000.00	\$ 13,721.25	0.00%
Other Revenue Other Revenue	\$ 60,700.00	\$ 36,885.10	60.77%
Other Revenue Real Estate Fee Refund	\$ -	\$ -	
Transfers In	\$ 160,000.00	\$ -	0.00%
Total Revenue	\$ 4,159,816.62	\$ 359,647.18	8.65%
	Percentage of year Completed		16.67%
Expense Type	Revised	YTD	% of Budget
	Budget	Expense	Used
Salaries	\$ 1,144,600.16	\$ 12,875.96	1.12%
OPERS	\$ 163,925.57	\$ 1,744.20	1.06%
Medicare	\$ 16,592.50	\$ 179.80	1.08%
Workers Compensation	\$ 28,609.58	\$ -	0.00%
Hospitalization	\$ 317,647.63	\$ 4,757.96	1.50%
Unemployment	\$ 5,000.00	\$ -	0.00%
Contract Services	\$ 2,167,159.71	\$ 273,609.34	12.63%
Travel	\$ 47,070.09	\$ 2,444.79	5.19%
Vehicle Expense	\$ -	\$ -	
Legal Fees	\$ 14,421.52	\$ 340.63	2.36%
Advertising	\$ 5,485.50	\$ -	0.00%
State Remittance	\$ 65,512.00	\$ 210.00	0.32%
State Remittance Ohio Permit Fee	\$ 21,208.00	\$ 3,680.00	17.35%
State Remittance Ohio Water Test Fee	\$ -	\$ -	0.00%
Materials and Supplies	\$ 21,989.53	\$ -	0.00%
Materials and Supplies Supplies	\$ 23,391.44	\$ 575.27	2.46%
Materials and Supplies Vaccine Supply	\$ 13,062.54	\$ -	0.00%
Equipment	\$ 23,060.24	\$ 359.50	1.56%
Equipment Equipment	\$ 3,490.28	\$ -	0.00%
Equipment Equipment Maintenance	\$ 4,399.41	\$ -	0.00%
Other	\$ 389,884.71	\$ 18,465.24	4.74%
Other County RE Tax Expenses	\$ 11,000.00	\$ -	0.00%
Other Health Emergency	\$ -	\$ -	0.00%
Other Other Expenses	\$ 110,689.25	\$ 2,992.38	2.70%
Other State RE Tax Expenses	\$ 1,000.00	\$ -	0.00%
Other VS Remit to State	\$ 172,200.58	\$ 21,269.12	12.35%
Refunds	\$ 15,020.00	\$ -	0.00%
Repair Services	\$ -	\$ -	0.00%
Transfers Out	\$ 170,789.30	\$ -	0.00%
Total Expense	\$ 4,957,209.54	\$ 343,504.19	6.93%
	Percentage of year Completed		16.67%
Revenue Less Expense	\$ (797,392.92)	\$ 16,142.99	
Beginning Cash Balance		\$ 4,300,063.66	
Total Cash on Hand		\$ 4,316,206.65	
Cash on Hand Per Cash Position Report		\$ 4,316,206.65	

MONTH OF :

FEBRUARY

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	\$ 1,320,485.79	\$ 98,661.85	\$ 319,215.64	\$ 1,099,932.00	\$ 1,099,932.00	\$ -	-16.70%
6004	Trailer Park	\$ 15,776.25	\$ 185.00	\$ -	\$ 15,961.25	\$ 15,961.25	\$ -	1.17%
6005	Food Service	\$ 297,963.06	\$ 78,929.00	\$ 781.35	\$ 376,110.71	\$ 376,110.71	\$ -	26.23%
6008	Infectious Waste/ Solid Waste	\$ 105,443.93	\$ 15,750.00	\$ -	\$ 121,193.93	\$ 121,193.93	\$ -	14.94%
6011	Private Water Systems	\$ 77,461.13	\$ 9,169.00	\$ 3,769.84	\$ 82,860.29	\$ 82,860.29	\$ -	6.97%
6018	Swimming Pools	\$ 34,132.40	\$ -	\$ -	\$ 34,132.40	\$ 34,132.40	\$ -	0.00%
6019	Not Used	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6021	Public Health Infrastructure	\$ 541,376.44	\$ 11,065.00	\$ 1,069.00	\$ 551,372.44	\$ 551,372.44	\$ -	1.85%
6023	Sewage Treatment Systems	\$ 1,209,695.49	\$ 60,319.25	\$ 1,243.05	\$ 1,268,771.69	\$ 1,268,771.69	\$ -	4.88%
6024	Not Used	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6025	Immunization Action Plan	\$ 28,520.03	\$ -	\$ -	\$ 28,520.03	\$ 28,520.03	\$ -	0.00%
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	\$ 51,276.89	\$ 33,752.07	\$ 14,500.00	\$ 70,528.96	\$ 70,528.96	\$ -	37.55%
6037	For Sale of Property	\$ 218,533.08	\$ 3,525.00	\$ 2,400.31	\$ 219,657.77	\$ 219,657.77	\$ -	0.51%
6038	Not Used	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	-
6039	Alcohol, Tobacco & Other Drugs	\$ 52,879.66	\$ -	\$ -	\$ 52,879.66	\$ 52,879.66	\$ -	0.00%
6040	Injury Prevention	\$ 81,737.58	\$ 3,608.71	\$ -	\$ 85,346.29	\$ 85,346.29	\$ -	4.41%
6041	Workforce Development	\$ 65,156.08	\$ 44,636.30	\$ -	\$ 109,792.38	\$ 109,792.38	\$ -	68.51%
6042	Population Health Fund	\$ 174,625.85	\$ 46.00	\$ 525.00	\$ 174,146.85	\$ 174,146.85	\$ -	-0.27%
Total		\$ 4,300,063.66	\$ 359,647.18	\$ 343,504.19	\$ 4,316,206.65	\$ 4,316,206.65	\$ -	-
			\$ 359,647.18	\$ 343,504.19	Check Figure	\$ 16,142.99		

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CHART 3





Accounts Payable Invoice Report

Invoice Date Range 02/01/24 - 02/29/24

Report By Vendor - Invoice

Summary Listing

Invoice Number	Invoice Description	Status	Held Reason	Invoice Date	Due Date	G/L Date	Received Date	Payment Date	Invoice Net Amount
Vendor 8314 - CENTERRA CO-OP									
01312024	Food Service travel Centerra	Paid by Check #1154171		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	31.77
01312024a	sewage travel centerra	Paid by Check #1154172		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	121.26
Vendor 8314 - CENTERRA CO-OP Totals							Invoices	2	\$153.03
Vendor 724 - CHARDON OIL CO INC									
8227091	BOH - TRAVEL CHARDON OIL	Paid by Check #1154164		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	123.23
8227091a	Food Service - travel - gasoline	Paid by Check #1154165		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	112.78
8227091b	Sewage - Travel - gasoline	Paid by Check #1154166		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	205.58
Vendor 724 - CHARDON OIL CO INC Totals							Invoices	3	\$441.59
Vendor 14430 - DEX IMAGING LLC									
AR10780316	BOH materials & supplies	Paid by Check #1154182		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	178.77
Vendor 14430 - DEX IMAGING LLC Totals							Invoices	1	\$178.77
Vendor 16857 - GEAUGA COUNTY CLERK OF COURTS									
22g000012	FSOP Legal Fees GC Clerk of Courts	Paid by Check #1154187		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	247.53
Vendor 16857 - GEAUGA COUNTY CLERK OF COURTS Totals							Invoices	1	\$247.53
Vendor 16987 - GEAUGA COUNTY SHERIFF									
24-104a	BOH travel blanket	Paid by Check #1153335		02/07/2024	02/07/2024	02/14/2024		02/14/2024	12.59
24-105	BOH travel blanket	Paid by Check #1153334		02/07/2024	02/07/2024	02/14/2024		02/14/2024	84.95
Vendor 16987 - GEAUGA COUNTY SHERIFF Totals							Invoices	2	\$97.54
Vendor 1809 - GILLMORE SECURITY SYSTEMS INC									
623213	Pubic Health Infrastructure - Security	Paid by Check #1153323		02/07/2024	02/07/2024	02/14/2024		02/14/2024	249.00
Vendor 1809 - GILLMORE SECURITY SYSTEMS INC Totals							Invoices	1	\$249.00
Vendor 6246 - KARLOVEC MEDIA GROUP									
inv00030203	BOH Advertising - blanket	Paid by Check #1154168		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	294.00
ml26785	BOH Advertising - blanket	Paid by Check #1154169		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	47.25
Vendor 6246 - KARLOVEC MEDIA GROUP Totals							Invoices	2	\$341.25
Vendor 52399 - LAKE COUNTY HEALTH DISTRICT									
gphcontract-11	BOH contract services - Lake County	Paid by Check #1154202		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	6,100.00
Vendor 52399 - LAKE COUNTY HEALTH DISTRICT Totals							Invoices	1	\$6,100.00
Vendor 17180 - OHIO DIVISION OF REAL ESTATE									
01312024	BOH - other - Ohio Div. of Real	Paid by Check #1153336		02/07/2024	02/07/2024	02/14/2024		02/14/2024	105.00
Vendor 17180 - OHIO DIVISION OF REAL ESTATE Totals							Invoices	1	\$105.00
Vendor 46842 - SANOFI PASTEUR INC									
922174515	IAP/GVO materials & supplies Sanofi	Paid by Check #1154200		02/21/2024	02/21/2024	03/01/2024	02/28/2024	03/01/2024	93.34
Vendor 46842 - SANOFI PASTEUR INC Totals							Invoices	1	\$93.34
Vendor 27248 - STAPLES INC DBA QUILL LLC									



Accounts Payable Invoice Report

Invoice Date Range 02/01/24 - 02/29/24

Report By Vendor - Invoice

Summary Listing

36812046	BOH materials & supplies	Paid by Check #1153342	02/07/2024	02/07/2024	02/14/2024	02/14/2024	101.38
36860075	BOH materials & supplies	Paid by Check #1153341	02/07/2024	02/07/2024	02/14/2024	02/14/2024	15.83
		Vendor 27248 - STAPLES INC DBA QUILL LLC Totals			Invoices	2	\$117.21
Vendor 26236 - STERICYCLE							
8006064183	Public Health Infrastructure - waste	Paid by Check #1154189	02/21/2024	02/21/2024	03/01/2024	02/28/2024	525.00
		Vendor 26236 - STERICYCLE Totals			Invoices	1	\$525.00
Vendor 31282 - SUNRISE SPRINGS WATER CO							
278313	BOH materials & supplies Sunrise	Paid by Check #1154191	02/21/2024	02/21/2024	03/01/2024	02/28/2024	45.00
		Vendor 31282 - SUNRISE SPRINGS WATER CO Totals			Invoices	1	\$45.00
Vendor 34331 - VERIZON WIRELESS							
9954990408	BOH other - Verizon	Paid by Check #1153346	02/07/2024	02/07/2024	02/14/2024	02/14/2024	328.87
9954990408a	Food Service - other verizon	Paid by Check #1153347	02/07/2024	02/07/2024	02/14/2024	02/14/2024	99.46
9954990408b	sewage other verizon	Paid by Check #1153348	02/07/2024	02/07/2024	02/14/2024	02/14/2024	189.30
9954990408c	Private Water other verizon	Paid by Check #1153349	02/07/2024	02/07/2024	02/14/2024	02/14/2024	89.84
		Vendor 34331 - VERIZON WIRELESS Totals			Invoices	4	\$707.47
		Grand Totals			Invoices	23	\$9,401.73

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4.04

Health Commissioner's Report

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4.04.01

Measles Outbreaks

The most recent 2024 data from the Centers for Disease Control and Prevention (CDC) show the United States has reported a total of 35 measles cases across 15 states: Arizona, California, Florida, Georgia, Indiana, Louisiana, Maryland, Minnesota, Missouri, New Jersey, New York City, Ohio, Pennsylvania, Virginia, and Washington.

- Measles is a highly contagious disease with serious possible complications including hospitalization, long-term illness, and death. Someone who is infected can spread the disease to other people before noticing any symptoms, especially in the four days before and after the rash develops.
- CDC data show that unvaccinated people have a very high likelihood, about 90% risk, that they will contract measles if exposed. Unvaccinated children who have not previously been infected are more likely to get infected and should avoid exposure.
 - One in five children who contract measles will be hospitalized.
 - One in 20 children who contract measles will develop pneumonia.
 - One to three children who contract measles in 1,000 will die.
- CDC data show the measles-mumps-rubella (MMR) vaccine is highly effective. Individuals with a history of prior infection or vaccination who have received the full series of MMR vaccines are 97% protected and are unlikely to contract measles.
- It only takes a few days for antibodies to develop in response to the MMR vaccine. Within two to three weeks, the immune system is fully primed after vaccination.
- Measles infection can cause “immune amnesia” or immune suppression, effectively erasing the immune system’s memory and protection from other diseases. This immune weakening can last anywhere from weeks to years. This increases the risk of infection due to secondary bacterial and other infections, even if you have built immunity from a previous infection.

4.04.02

Morbidity and Mortality Weekly Review Synopsis

- Per CDC’s evaluation of the “Alcohol-Related Disease Impact” application data, the average annual number of deaths from excessive alcohol use increased 29.3%, from 137,927 during 2016–2017 to 178,307 during 2020–2021, while death rates increased from 38.1 to 47.6 per 100,000 population. For males, deaths increased 26.8% and for females, deaths increased 34.7%.
- From 2012 to 2022, the number of World Health Organization (WHO) countries that included rubella-containing vaccine (RCV) in their immunization schedules increased from 132 (68%) to 175 (90%). The percentage of the world’s infants vaccinated against

rubella increased from 40% to 68%, and rubella cases declined 81%. 98 countries (51%) have verified rubella elimination. 25 million infants annually (in 19 countries) still do not have access to RCV.

- Per data from 4 vaccine effectiveness (VE) networks during the 2023-24 influenza season, influenza VE against flu-associated outpatient visits among kids 6 months to 17 years ranged from 59% to 67%, and against hospitalization ranged from 52% to 61%. For adults, VE against outpatient visits ranged from 33% to 49%, and against hospitalization ranged from 41% to 44%. VE against Influenza A was 46-59% for kids and 27-46% for adults. VE against Influenza B was 64-89% for kids and 60-78% for adults.
- Data from October 1, 2023, to January 31, 2024, from California's immunization information registry indicated that influenza VE (against a lab-confirmed positive influenza test result) was 45% overall; 56% among kids 6 months to 17 years, 48% among adults aged 18 to 49, 36% among those aged 50 to 64, and 30% for those 65 and older.
- Data from 2 CDC vaccine effectiveness (VE) networks from September 2023 to January 2024 was used to determine the VE of an updated monovalent (XBB.1.5) Covid-19 vaccine dose against ED or urgent care encounters as 51% during the first 7-59 days after an updated dose and 39% during the 60-119 days after. VE against hospitalization was estimated at 52% at a median of 42 days after dose and 43% at 47 days after.
- Per National Health Interview Survey data, the percentage of kids aged 5 to 17 who had chronic school absenteeism (15 or more days missed in the past year) due to illness, injury, or disability was higher in 2022 (5.8%) than in 2019 (3.3%), increasing for each age group.
- Despite WHO goals to eliminate measles in the 22 Eastern Mediterranean Region countries by 2020, most have not, with ongoing efforts somewhat hampered by the impacts of the Covid-19 pandemic. From 2019 to 2022, regional coverage with the first dose of measles vaccine was 82% and with the second dose was 77%, with 160 million children vaccinated. Measles incidence decreased from 29.8 cases per 1 million population in 2019 to 7.4 in 2020, before increasing to 50 in 2022. Surveillance indicators deteriorated in half of the countries. Only 4 of the countries reported measles elimination. Vaccination and surveillance efforts must be increased to achieve the goal of eliminating measles in the area.
- In February 2023, 26 macaques (monkeys) among a group of 540 imported into the U.S. from Southeast Asia for research tested positive for tuberculosis caused by Mycobacteria infection, first detected during CDC-mandated quarantine. Rigorous occupational safety protocols (including disinfection, personal protective equipment, and filtration/air systems) implemented during transport and at the quarantine facility prevented any human tuberculosis cases among caretakers in the U.S.

- Data from the National Syndromic Surveillance Program and the New Vaccine Surveillance Network showed an increase in *Mycoplasma pneumoniae* (common cause of typically mild respiratory illness) in the U.S. beginning in fall 2023. The percentage of related diagnoses among pneumonia ED visits went from 1.15% pre-pandemic, to 0.35% during the pandemic, increasing to 0.89% in September to December 2023. The percentage of *M. pneumoniae* positive test results went from 1.2% pre-pandemic, to 0.04% during the pandemic, increasing to 0.53% in September to December 2023.
- Per National Center for Health Statistics, National Health Interview Survey data, in 2022, 5.7% of adults lacked reliable transportation for daily living in the past year. 14.4% for those with disability and 4.9% for those without. Percentages decreased with age: 24% with disability and 5.7% without in ages 18 to 44, 15.9% with disability and 4.4% without in ages 45 to 64, and 8.1% with disability and 3.6% without in those aged 65 or older.
- A cross-sectional study was conducted among 15,963 teens aged 13 to 18 being assessed for substance use disorder treatment in the United States through the National Addictions Vigilance Intervention and Prevention Program’s Comprehensive Health Assessment for Teens (CHAT) during 2014–2022, to examine self-reported motivations for using substances and the persons with whom substances were used. The most commonly reported motivation for substance use was “to feel mellow, calm, or relaxed” (73%), with other stress-related motivations among the top reasons, including “to stop worrying about a problem or to forget bad memories” (44%) and “to help with depression or anxiety” (40%); one half (50%) reported using substances “to have fun or experiment.” The majority of adolescents reported using substances with friends (81%) or using alone (50%).
- Since 2019, there has been an increase in meningococcal disease cases caused by ciprofloxacin-resistant strains. As a result, and to avoid prophylaxis failure, CDC has issued guidance for health departments for the preferential use of other recommended prophylaxis options (i.e., rifampin, ceftriaxone, or azithromycin) in place of ciprofloxacin when two or more ciprofloxacin-resistant meningococcal disease cases that account for $\geq 20\%$ of all cases are reported in a local catchment area during a 12-month period.
- A review of data from 2,101 severe work-related injuries in the oil and gas extraction industry across 32 Occupational Safety and Health Administration (OSHA) jurisdictions from January 2015 to July 2022 found that 70.1% occurred among well-servicing support personnel and 23.4% occurred among oil and gas well drillers. 42.6% of all reports involved the upper extremities, and only 1% involved an eye injury.
- A review of data reports from New York State Police administration of 8-milligram intranasal naloxone in response to suspected opioid overdose from March 2022 to August 2023 found no significant differences in survival, mean number of naloxone doses administered, prevalence of most post-naloxone signs and symptoms, post-naloxone anger or combativeness, or hospital transport refusal between these 8-mg intranasal naloxone recipients and recipients of the typical 4-mg dose. However, 8-mg

recipients had 2.51 times the risk for opioid withdrawal signs and symptoms including vomiting. This study suggests no benefit for law enforcement's administration of higher-dose naloxone.

- Following a 2020 Salmonella outbreak found to be associated with melons only after the melons were no longer on the market, CDC collaborated with Food and Drug Administration (FDA) and state and local health and agricultural agencies in 2022 to identify all cases of Salmonella infection genetically related to the 2020 environmental strain (through whole genome sequencing) for immediate patient follow-up. 87 outbreak cases from 11 states were identified, and the source was traced to cantaloupes grown in the Midwest. In 2022, the time from outbreak detection to determining melons were the likely source was 14 days shorter compared to the 2020 outbreak investigation.
- Per National Center for Health Statistics, National Health Interview Survey data from 2020 to 2022, 11.3% of kids aged 5 to 17 had ever received a diagnosis of Attention Deficit Hyperactivity Disorder (ADHD). Percentages increased with decreasing levels of urbanization, and among kids aged 12 to 17 compared to those aged 5 to 11.

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5.0 Old Business

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5.01

Resolution to Create Certain Fees, Operation & Maintenance Program, Second Reading

Resolution to create certain fees, Operation and Maintenance Program, when adopted, the fee changes will become effective May 6, 2024. The proposed changes are included in the fee rules following the resolution below:

**RESOLUTION
OF THE
GEAUGA PUBLIC HEALTH BOARD OF HEALTH
CREATING CERTAIN FEES**

WHEREAS, the Ohio Revised Code, Section 3709.09, permits the Board of Health to establish by Rule, a uniform system of fees to pay the cost of any service provided by the Board of Health for which no fee is prescribed by law; and

WHEREAS, it has been determined by the Board of Health through a program cost analysis that the fees for certain services are needed to pay the cost of providing those services and;

WHEREAS, the Board of Geauga Public Health is determined to provide quality Public Health services to Geauga County residents in a cost effective manner.

NOW THEREFORE BE IT RESOLVED That, for the purpose of preserving and promoting the Public Health and Welfare, the foregoing fees are hereby enacted as follows:

1. One-year operational permit \$30.00

A one-year operational permit will apply to NPDES systems, drip distribution systems and pretreatment systems.

5.02

Hellegers Discussion Update

Further updates and discussion regarding the Hellegers discussion.

6.0 New Business

DRAFT

6.01

Election of Board of Health President and President Pro Tempore

Elections will be held for the Board of Health President and President Pro Tempore will be held.

6.02.01

Financial Reports, Resolution 24-03-06-01-01

It is recommended that the Financial Reports to approve payment of bills, as listed in the recapitulation sheets attached to these minutes, be adopted.

6.02.02

Permission to Approve Appropriations for Increase/Decrease

Permission is hereby requested from the Board of Health to approve Appropriations for Increase/Decrease.

6.02.03

Permission to Rescind November 2023 Appropriations for Increase/Decrease

Permission is hereby requested from the Board of Health to rescind the November 2023 Appropriations for Increase/Decrease.

6.03

Permission to Approve the Amended 2025 Geauga Public Health Budget

Permission is hereby requested from the Board of Health to approve the amended 2025 Geauga Public Health Budget.

6.04

Sybr-Aer Review

Summary for 8145 Chagrin Road in Bainbridge:

January 1, 1990 – Barbara Nailler is listed on Auditor site as owner of 8145 Chagrin Rd.

August 2, 2018 – Replacement permit issued to Klarich Farms, LLC to install a Spray system for Barbara Nailler. Approved in August of 2018. Sybr-Aer system used for pretreatment. No information as to reason the system was replaced.

August 17, 2018 – Christopher and Deborah Frato are listed as owners of 8145 Chagrin Rd.

July 15, 2021 – Alteration permit was issued to Klarich Farms for a tank replacement. Existing Syber-Aer replaced with an Aquasafe AS500L. No documentation of reason system was changed.

July 30, 2021 – Property sold to Brian Luria, Trustee.

8.0

Executive Session

Permission is hereby requested from the Board of Health to enter into Executive Session to discuss matters of pending litigation and personnel and compensation of public employees.