

AGENDA
GEAUGA PUBLIC HEALTH
May 28, 2025

- 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 April 16, 2025

- 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 Establish Certain Fees, Operation & Maintenance Program, Third and Final Reading

- 6.0 New Business
 - 6.01 Resolutions
 - 6.01.01 Financial Reports, Resolution 25-05-06-01-01
 - 6.01.02 Establish a New Fund for Operation and Maintenance Fund, Resolution 25-05-06-01-02
 - 6.01.03 Permission to Approve Appropriations for Increase/Decrease
 - 6.01.04 Resolution 2025-20: Then and Now Purchase Order to Lake County General Health District, Not to Exceed \$324,236.71
 - 6.01.05 Resolution 2025-21: Then and Now Purchase Order to Geauga County Water Resources, Not to Exceed \$1,930.00

- 6.01.06 Resolution 2025-22: Then and Now Purchase Order to Lake County General Health District, Not to Exceed \$25,050.00
- 6.01.07 Resolution 2025-23: Resolution Authorizing Payment for 2023 Septic Treatment System Permit Fees, \$4,249.00
- 6.01.08 Resolution 2025-24: Resolution Authorizing Payment for 2023 Pool Licensing Fees, \$2,680.00
- 6.01.09 Resolution 2025-25: Resolution Authorizing Payment for 2024 Cross Jurisdictional Agreement Costs, \$298,546.77

6.02 Permission to Change the Dates of the June 2025 - October 2025 Board of Health Meetings

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 Adjournment

4.0 Health District Staff Reports

4.01 Population Health

4.01.01 Safe Communities

During the month of April, the Health Educator held the coalition meeting on Thursday, April 10th at 1:00pm at the Geauga Public Health office. The representatives in attendance were from the following agencies, Geauga County Sheriff's Office, Ohio Highway Patrol, Ohio Traffic Safety Office, and Geauga Public Health.

During this coalition meeting we discussed the fatal accident that occurred on March 22nd involving a pickup truck and four teenagers. The one fatality that occurred was a 15 year-old male from Lake County. The crash occurred on Burton Heights Boulevard in Newbury Township shortly before 1:00am. Speed, along with none of the four people in the vehicle wearing seatbelts are both contributing factors to the injuries and one death that occurred.

The coalition then discussed the upcoming events, the Maple Festival and our Prom Blitz at Berkshire High School and the plan for both of those events. The Maple Festival took place April 24-27th with the Health Educator and GPH nurse working at the information table answering questions and handing out items such as magnets, information flyers, stickers, etc. Overall, there was great engagement at the table every day of the Maple Festival and it was a productive event. The following Tuesday, April 29th, we held our Prom Blitz at Berkshire High School's cafeteria during their lunch period. For this event we had magnets, stickers, information sheets, and the wheel to help engage the students. Many students came up to the table and engaged with the information provided as well as asking us questions.

4.01.02 Other Population Health Activities

April is Distracted Driving Month so throughout the month there were social media posts regarding tips for safe driving as well as the topic of no texting and driving. The second week of April was also World Health week where everyday for that week there was a highlighted health topic such as emergency preparedness, healthy eating, daily exercise, and resources that GPH offers.

During April we distributed 26 Project Dawn kits to law enforcement.

4.01.03 Grants

No grants at this time.

4.01.04

Programs

1. **Vaccines for Children Clinics**
Mobile Clinics - 4/7/25, 4/9/25,4/23/25 and 4/28/25
137 vaccines administered.
2. **GPH Adult Clinic**
8 vaccines administered
3. **TB Testing = 0**

Children with Medical Handicaps (CMH)

- No new information.

Community Events

- Melissa Kimbrough RN set up and helped run the Safe Communities booth 4/27/25 at the Maple Festival in Chardon.
- Melissa Kimbrough RN attended Berkshire High School and helped with the Prom Blitz Table to support safe driving with teenagers in the community.

Trainings and Meetings

- Melissa Kimbrough RN completed American Red Cross CPR/First Aid/AED Instructor training and will be able to teach classes.
- Melissa Kimbrough RN attended University Hospital's school nurses' meeting to discuss vaccination rates in Geauga County schools.

4.01.05

Public Health Emergency Preparedness (PHEP)

During April, Ms. Castner continued to work on remaining FY25 Public Health Emergency Preparedness Grant deliverables, including completion of an After-Action Report and Improvement Plan for the CHEMPACK Tabletop Exercise held in January, an analysis of access and functional needs in Geauga County and subsequent POD planning and lessons learned facilitated discussion with partners including the Metzenbaum Center, Department of Aging, University Hospitals, and Jennings at Notre Dame on April 21 and a POD Concept of Operations Plan addressing an access and functional need in Geauga County (communication, transportation, and technology challenges with Geauga County's Amish population).

Additionally, Ms. Castner attended a regional Medical Reserve Corps Summit hosted by the Cuyahoga County Board of Health, the recipient of Northeast Ohio's Regional MRC Coordination Grant on April 24th. The daylong event was held in Independence during National Volunteer Week and included presentations for MRC members and unit leaders.

Ms. Castner also attended the National Association of City and County Health Officials (NACCHO) Public Health Preparedness Summit in San Antonio, Texas, which provided an opportunity to network with colleagues from across the nation and share best practices for public health preparedness. Ms. Castner attended sessions discussing promising practices for emergency communications, points of dispensing, reaching populations with access and functional needs, public health roles in severe weather response, and many others. The Preparedness Team will discuss some of these ideas during the coming months to inform preparedness projects and processes moving forward. Ms. Castner is pictured below with partners from Lake and Lorain counties at the Summit.

Finally, the Preparedness Team has completed most remaining deliverables for the year, and has discussed a number of non-deliverable projects to tackle prior to the start of the new grant year in July. These include plan updates and enhancements as well as reviewing and addressing corrective actions identified in recent after action reports.



The following deliverables were submitted to the Ohio Department of Health (ODH) for review during April:

- PHEP CORE 7.2 - Tactical Communications Worksheet
- CRI 4.1 - CHEMPACK Tabletop Exercise (TTX) After Action Report/ Improvement Plan (AAR/IP)
- CRI 6.1 - Equitable Distribution of Medical Countermeasures (MCM) Workbook and Concept of Operations (CONOPS) Plan

The following deliverables were approved by the Ohio Department of Health (ODH) during April:

- PHEP CORE 1.2 - Volunteer Deployment/ Information Sharing Performance Measures.
- PHEP CORE 7.2 Tactical Communications Worksheet
- PHEP CORE 10.1 - Administrative Preparedness Plan
- CRI 3.1 - Annual MCM Dispensing Drills
- CRI 4.1 - CHEMPACK TTX AAR/IP
- CRI 6.1 - Equitable Distribution of MCM/ CONOPS Plan

Ms. Castner attended the following meetings and trainings during the month of April:

- Geauga County Hazard Mitigation Plan Update Meeting #3 (April 2)
- Northeast Ohio (NEO) Healthcare Coalition (HCC) General Meeting (April 4)
- After-Action Meeting for CHEMPACK TTX (April 7)
- Regional Measles Discussion (April 8)
- CONOPS Meeting (April 8)
- NEO Regional Deliverable Workgroup (April 14)
- Geauga Points of Dispensing Partner Discussion (April 22)
- NEO Regional Medical Reserve Corps (MRC) Summit (April 24)
- Public Health Preparedness Summit, San Antonio, Texas (April 28-May 2)

4.01.06

Epidemiology

In April, one long-term care facility reported an outbreak of COVID-19. The outbreak involved a total of 18 cases, 12 residents and 6 staff members. In addition, we saw an increase in fifth disease cases. Fifth disease is not a reportable condition; however, outbreaks are reportable, and 1 daycare reported an outbreak.

Current influenza activity is minimal and during this influenza season which started on 9/29/2024 there have been a total of 139 influenza associated hospitalizations. There were 3 Epicenter anomalies in April which did not require further follow up.

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

Communicable Disease Report	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	Year to Date (1/1/25 to current)	2024 Year End Totals	2023 Year End Totals
Anaplasmosis	0	0	0	0									0	0	1
Babesiosis	0	0	0	0									0	0	0
Campylobacter	0	1	1	2									4	25	21
C. auris	0	0	0	0									0	2	0
CPO	0	0	1	1									2	8	3
CPO - Colonization Screening	0	0	0	0									0	1	0
Chikungunya	0	0	0	0									0	0	0
Chlamydia	5	8	5	3									21	91	83
COVID-19	138	89	56	55									338	1,445	2,068
Coccidioidomycosis	0	0	0	0									0	0	0
Creutzfeldt-Jakob Disease	0	0	0	0									0	0	0
Cryptosporidiosis	1	0	0	0									1	9	1
Cyclosporiasis	0	0	0	0									0	0	0
Dengue	0	0	0	0									0	1	0
E. Coli 0157H7	0	0	0	1									1	7	0
Giardia	1	0	0	0									1	5	3
Gonorrhea	1	1	1	0									3	26	19
Haemophilus Influenza	0	0	0	1									1	2	2
Hepatitis A	0	0	0	0									0	1	0
Hepatitis B (acute)	0	0	0	0									0	0	0
Hepatitis B (chronic)	0	1	1	1									3	5	5
Hepatitis B (perinatal)	0	0	0	0									0	0	0
Hepatitis C (acute)	0	0	0	0									0	0	1
Hepatitis C (chronic)	0	1	2	0									3	13	18
Hepatitis C (perinatal)	0	0	0	0									0	0	0
Hepatitis E	0	0	0	0									0	0	0
Influenza -Hospitalized	37	70	21	2									130	62	27
La Crosse Virus Disease	0	0	0	0									0	0	0
Legionnaires Disease	1	0	0	1									2	6	4
Leptospirosis	0	0	0	0									0	0	0
Listeriosis	0	0	1	0									1	2	0
Lyme Disease	0	0	0	0									0	12	9
Malaria	0	0	0	0									0	0	0
Meningitis-aseptic/viral	0	0	0	0									0	1	2
Meningitis, Bacterial not Neisseria	0	0	0	0									0	0	0
MIS-C associated with COVID-19	0	0	0	0									0	0	0
Mpox	0	0	0	0									0	1	0
Mumps	0	1	0	0									1	0	1
Mycobacterium Tuberculosis	0	0	0	0									0	0	0
Pertussis	0	1	0	0									1	4	83
Rocky Mountain spotted fever	0	0	0	0									0	0	0
Salmonellosis	0	0	1	2									3	20	10
Shigellosis	0	0	0	0									0	2	2
Staph Aureus VRSA	0	0	0	0									0	0	0
Streptococcal Group A (GAS)	0	2	0	0									2	12	16
Streptococcal Group B Newborn	0	0	0	0									0	0	0
Streptococcus Pneumoniae(ISP)	0	0	0	0									0	8	3
Syphilis	0	0	0	0									0	3	5
Tuberculosis	0	0	0	0									0	1	0
Varicella	0	0	0	0									0	1	1
Vibriosis	0	0	0	0									0	1	0
West Nile Virus	0	0	0	0									0	0	0
Yersiniosis	0	0	0	0									0	1	1
Totals	184	175	90	69	0	0	0	0	0	0	0	0	518	1,778	2,389

Adam Litke provided the following highlights:

- *Looking to add additional clinics based on the needs of the county.*

Discussion:

Lynn Roman asked about the epicenters in the epidemiology report. Ron Graham said they are locations of disease prevalence in the community.

4.02

Environmental Health

4.02.01

Director's Report

Public Meetings

Public Meetings were held to review the Operation and Maintenance program. Meetings for Munson Township homeowners were held on May 5th and 6th. Between the two meetings, three homeowners attended. Evening meetings are scheduled to give time for the public to have questions about the Operation and Maintenance program. We will continue to evaluate methods of communication with the residents affected by Health District Programs.

Mosquito Control Grant

GPH was not picked as a recipient of Mosquito Control Grant from Ohio Environmental Protection Agency for 2025. It was explained that the Mosquito Control Grant funding was reduced greatly. The number of grant recipients was reduced by over ½ throughout the State.

4.02.02

Food Safety

A late food hearing was held on 4/4 for the food locations that had not paid their food licenses by the March 1 deadline. M. Kruggel and A. O'Brien attended the ServSafe course that was instructed by P. Stomp on 4/14 and 4/21. The food staff completed inspections for the Maplefest on 4/24 and 4/25. The event had a total of 48 mobiles and 3 temporary food locations inspected.

4.02.03

Program Inspections

Environmental Health staff conducted the following program inspections in April:

Program	Inspections
Private Water Systems (wells)	19
Camps	0
Swimming Pools/Spas	4
*Food	147
Sewage Systems	65
For Sale of Property	0
HB 110 (Semi-Public) Systems	4
Operation and Maintenance Samples	117
Plumbing	62
Schools	6
Tattoo & Body Piercing	5
Nuisance Complaints	0
Solid Waste	0

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

Dan Lark provided the following highlights:

- In reviewing statistics with the Operation and Maintenance (O&M) program, 83% of the first round of 5-year O&M permits turned in paperwork.*

Discussion:

Lynn Roman asked for an update on the Geauga Resident Assistance for Maintenance and Service Program. Dan Lark said the Prosecutor's Office is still reviewing the information. This would be in addition to the grant money received from the Water Pollution Control Loan Fund.

4.03

Administrator's Report

4.03.01

Administrator

1. Working with the Prosecutor's Office to continue roll out of the Operation & Maintenance program.
2. Fees are continuously being reviewed for reasonableness. Fee adjustments are based on actual and expected costs to operate programs. Fees are meant to pay for the expense related to services provided and not generate additional "extra" revenue.
3. Working with the Geauga County Auditor's Office pertaining to acquiring 5 vehicles since January.

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 April 30, 2025, the year 33.0 % 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:

With April being the fourth month, revenues are underestimated budget. The first half settlement occurred in April.

EXPENSES:

This is the fourth month of the year and expenses are under budget in part due to timing of invoice payments. We continue to work with the Geauga County Auditor's Office to reimburse Lake County for the worked performed.

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.

CHART 1

MONTH OF : APRIL

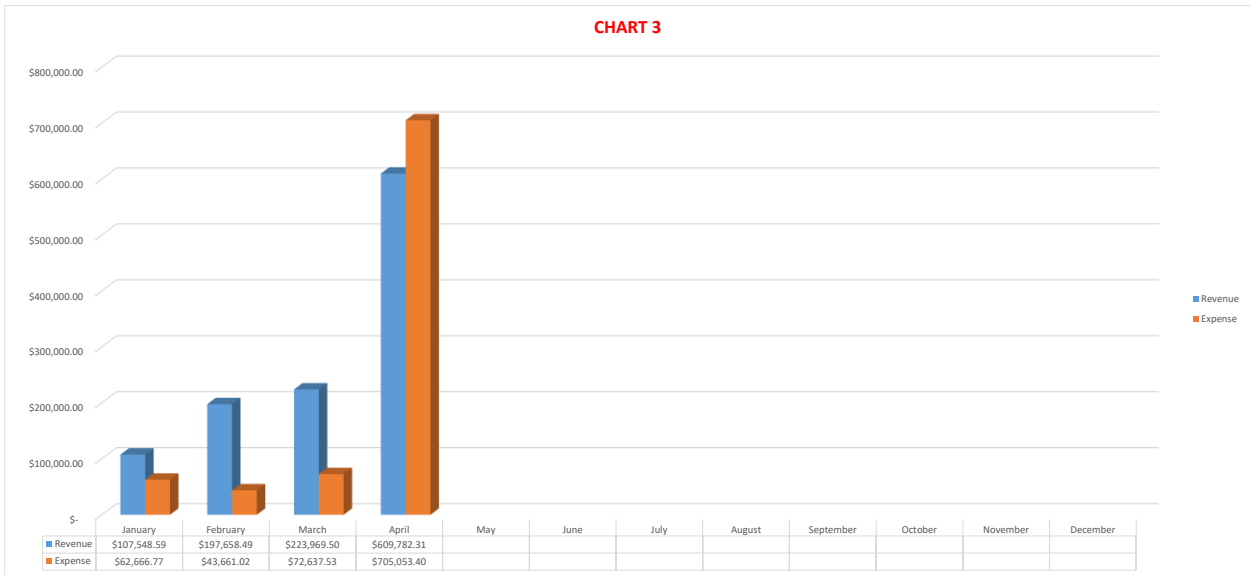
	Revised	YTD	% of Budget
Revenue Type	Budget	Revenue	Received
Property and Other Taxes	\$ 575,748.00	\$ 325,581.01	56.55%
Donations	\$ 5,000.00	\$ -	0.00%
State Reimbursement-Real Estate	\$ 77,028.00	\$ 36,755.16	47.72%
State Revenues	\$ 461,063.00	\$ -	0.00%
Local Government Tax	\$ -	\$ -	
Permits	\$ 343,000.00	\$ 125,252.00	36.52%
Inspection Fees	\$ 787,000.00	\$ 80,278.75	10.20%
Fees	\$ 223,250.00	\$ 40,184.50	18.00%
Licenses	\$ 225,000.00	\$ 213,706.31	94.98%
Fines	\$ 3,500.00	\$ 5,742.50	164.07%
Fees Infectious Waste Fees	\$ -	\$ -	#DIV/0!
Fees Solid Waste Fees	\$ 4,000.00	\$ 11,900.00	297.50%
Foundation Revenue	\$ -	\$ -	
Water Testing Fee	\$ 5,000.00	\$ 2,890.00	57.80%
Federal Grants	\$ 172,000.00	\$ -	0.00%
Local Match	\$ -	\$ -	
Reimbursements	\$ -	\$ 12,218.00	
Other Revenue	\$ 3,900.00	\$ 4,591.60	117.73%
Other Revenue Other Receipts	\$ 104,000.00	\$ 83,860.87	0.00%
Other Revenue Other Revenue	\$ 67,500.00	\$ 195,998.19	290.37%
Other Revenue Real Estate Fee Refund	\$ -	\$ -	
Transfers In	\$ 1,269,450.00	\$ -	0.00%
Total Revenue	\$ 4,326,439.00	\$ 1,138,958.89	26.33%
		Percentage of year Completed	33.33%
Expense Type	Revised	YTD	% of Budget
	Budget	Expense	Used
Salaries	\$ 95,929.00	\$ 26,473.95	27.60%
OPERS	\$ 17,267.00	\$ 4,081.16	23.64%
Medicare	\$ 1,390.00	\$ 368.89	26.54%
Workers Compensation	\$ 2,398.00	\$ -	0.00%
Hospitalization	\$ 45,137.00	\$ 10,292.72	22.80%
Unemployment	\$ 5,000.00	\$ 194.88	3.90%
Contract Services	\$ 2,775,305.27	\$ 628,626.93	22.65%
Travel	\$ 35,903.20	\$ 5,104.70	14.22%
Vehicle Expense	\$ -	\$ -	-
Legal Fees	\$ 18,674.81	\$ -	0.00%
Advertising	\$ 2,000.00	\$ 441.00	22.05%
State Remittance	\$ 89,694.00	\$ 5,554.00	6.19%
State Remittance Ohio Permit Fee	\$ 20,382.00	\$ 3,496.00	17.15%
State Remittance Ohio Water Test Fee	\$ -	\$ -	0.00%
Materials and Supplies	\$ 73,239.91	\$ -	0.00%
Materials and Supplies Supplies	\$ 20,000.00	\$ 14,480.07	72.40%
Materials and Supplies Vaccine Supply	\$ 11,222.75	\$ -	0.00%
Equipment	\$ 58,000.00	\$ 6,564.45	11.32%
Equipment Equipment	\$ 7,490.28	\$ -	0.00%
Equipment Equipment Maintenance	\$ 5,899.41	\$ -	0.00%
Other	\$ 582,468.33	\$ 88,677.19	15.22%
Other County RE Tax Expenses	\$ 11,000.00	\$ 6,174.36	56.13%
Other Health Emergency	\$ -	\$ -	0.00%
Other Other Expenses	\$ 79,750.00	\$ 31,458.67	39.45%
Other State RE Tax Expenses	\$ 250.00	\$ 52.46	20.98%
Other VS Remit to State	\$ 105,000.00	\$ 50,287.04	47.89%
Refunds	\$ 9,974.00	\$ 1,690.25	16.95%
Repair Services	\$ -	\$ -	0.00%
Transfers Out	\$ 1,259,450.00	\$ -	0.00%
Total Expense	\$ 5,332,824.96	\$ 884,018.72	16.58%
		Percentage of year Completed	33.33%
Revenue Less Expense	\$ (1,006,385.96)	\$ 254,940.17	
Beginning Cash Balance		\$ 4,312,913.46	
Total Cash on Hand		\$ 4,567,853.63	

CHART 2

MONTH OF : APRIL

Fund Number	Fund name	Beginning Cash Balance	YTD Revenue Per Budget Performance	YTD Expense Per Budget Performance	Ending Cash Balance
6002	Board of Health	\$ 878,286.92	\$ 579,304.83	\$ 766,077.49	\$ 691,514.26
6004	Trailer Park	\$ 18,013.75	\$ 2,773.00	\$ -	\$ 20,786.75
6005	Food Service	\$ 544,969.96	\$ 220,398.81	\$ 1,083.62	\$ 764,285.15
6008	Infectious Waste/ Solid Waste	\$ 124,907.06	\$ 11,900.00	\$ -	\$ 136,807.06
6011	Private Water Systems	\$ 300,917.14	\$ 19,207.50	\$ 5,435.54	\$ 314,689.10
6018	Swimming Pools	\$ 45,798.21	\$ 10,210.00	\$ -	\$ 56,008.21
6021	Public Health Infrastructure	\$ 619,676.45	\$ -	\$ 2,178.92	\$ 617,497.53
6023	Sewage Treatment Systems	\$ 580,892.99	\$ 81,192.00	\$ 24,273.80	\$ 637,811.19
6025	Immunization Action Plan	\$ 27,587.13	\$ -	\$ -	\$ 27,587.13
6030	Emergency Response Fund	\$ 26,140.00	\$ -	\$ -	\$ 26,140.00
6036	Environmental Health Assistance	\$ 64,369.16	\$ -	\$ 5,309.10	\$ 59,060.06
6037	For Sale of Property	\$ 449,465.34	\$ 198,838.15	\$ 78,850.25	\$ 569,453.24
6039	Alcohol, Tobacco & Other Drugs	\$ 52,879.66	\$ -	\$ -	\$ 52,879.66
6040	Injury Prevention	\$ 84,188.45	\$ 2,624.60	\$ 810.00	\$ 86,003.05
6041	Workforce Development	\$ 319,629.34	\$ 12,218.00	\$ -	\$ 331,847.34
6042	Population Health Fund	\$ 175,191.90	\$ 292.00	\$ -	\$ 175,483.90
Total		\$ 4,312,913.46	\$ 1,138,958.89	\$ 884,018.72	\$ 4,567,853.63

CHART 3



Adam Litke provided the following highlights:

- Provided an update on the Geauga County Budget Commission Hearings.
- Discussed Public Health Accreditation Board (PHAB) accreditation and its benefits.
- Discussed health department funding and spending costs.

Discussion:

Lynn Roman asked what is being discussed with the Prosecutor's Office. Dan Lark said we are currently discussing the O&M non-compliance process.

Lynn Roman asked what was included in Contract Services on Chart 1. Adam Litke said it includes the contract with Lake County General Health District and legal expenses.

Lynn Roman asked what the Board of Health fund was on Chart 2. Adam Litke said that is the general fund.

4.04

Health Commissioner's Report

4.04.01

AOHC Action as of May 5th, 2025

The Association of Ohio Health Commissioners (AOHC), which represents Ohio's 111 health districts, promotes strong local public health leadership and advocates for an effective and efficient local public health system.

The public health benefits of key proposals included in House Bill 96, as passed by the House of Representatives, including improving access to vision and dental care for children, providing diabetes education in schools, and expanding school-based health centers are summarized below:

PUBLIC HEALTH LAB

The Ohio Department of Health's (ODH's) Public Health Laboratory ("Lab") is the backbone for disease detection, monitoring, and response in the state. The Lab and its dedicated staff have a proven track record of identifying, preventing, and mitigating infectious diseases, foodborne illnesses, and environmental health threats.

The Lab works closely with hospitals, law enforcement agencies, and local health departments across the state as a critical partner in disease detection - a process that starts at the local level but affects the entire state in preventing the spread of communicable disease, limiting the impact of bioterrorism, and detecting genetic conditions that jeopardize the lives of newborns if not quickly diagnosed and treated. This in-state capacity ensures the fastest possible response to new illnesses, supporting the care of individuals and protections for the general public.

Maintaining this capability is the cornerstone of informed, evidence-based response to the health needs of our residents. The lab is supported by two General Revenue Fund (GRF) line items (ALI 440451 \$3.9 million in each fiscal year and ALI 440472 which includes \$1.3 million in each fiscal year). ***The Public Health Lab has not seen a substantial increase in state GRF investment since 2013.*** Level funding strains the Lab's ability to conduct equipment maintenance, improve technology and expertise to keep pace with new and emerging infections, and continue to provide the high level of service that keeps our communities safer and healthier. Federal grant resources that helped to sustain the lab's work are expiring.

The Administration's budget proposal used proceeds from an increased marijuana tax to invest in the Public Health Lab. With the removal of the tax provision, the increased investment was removed. Governor DeWine requested investment in the Public Health Lab by adding \$9.9 million in FY 2026 and \$14.8 million in FY 2027.

HELP ME GROW and the FAMILY CONNECTS PROGRAM

While there has been a recent movement in the right direction, Ohio's infant and maternal mortality rates are still unacceptably high. Most of these deaths are preventable. Evidence-based interventions and strategies, including home visiting, will work to reduce these rates.

- Leading causes of infant death in Ohio like prematurity and obstetric conditions can be mitigated through appropriate interventions that home visiting nurses can provide their clients.
- Families enrolled in evidence-based home visiting programs during pregnancy are less likely to have a premature baby.
- Home visiting programs have also been shown to produce healthcare cost savings, acting as a key point of prevention.

For more than 100 years, local public health departments have been providing nurse home visiting services. Today, Ohio's public health nurses utilize their expertise in home visiting and case management through various state and local programs, including Help Me Grow, Early Intervention, the state program for children needing complex medical help (CMH), and county-created newborn home visiting programs. Unfortunately, due to limited funding, these programs are not consistently available across all communities, and the need far outpaces the current capacity.

Governor DeWine's budget proposal included an investment to grow home visiting access to 25,000 additional children and make the evidenced-based Family Connects Ohio program available in all 88 counties—ensuring that all new parents in Ohio are offered free home visits from a registered nurse.

The House removed increased funding for home visiting services in FY27 which would extend Family Connects to all counties.

COUNTY BUDGET COMMISSION MEMBERSHIP (LOCCD19)

The House added a provision that removes the county prosecutor from the three-member county budget commission and makes the president of the board of county commissioners a member instead. The commission currently comprises the county auditor, the county treasurer, and the county prosecutor.

The prosecutor offers a more objective review of budget requests and serves an important role by bringing legal expertise in reviewing and approving tax budgets, ensuring they comply with all relevant laws and regulations.

AOHC seeks to maintain the current makeup of the county budget commission.

SOIL EVALUATORS (DOHCD36 R.C. 3718.02)

The House added a provision that prohibits the ODH Director from adopting rules requiring a soil evaluator or soil scientist to evaluate the soil type and slope with respect to a household sewage treatment system or a proposed household sewage treatment system.

It is important to have a soil evaluation before installing a home septic system in Ohio because the soil type and conditions directly affect how well the system will function. This review is more important in some Ohio geographies than others. A soil review protects a homeowner that installs a costly septic system from future repairs, expands the lifetime of a system, and protects the community from potential soil and water contamination. While removing the requirement of a soil evaluation may save money in the short term, it could mean costly repairs and premature system replacement in the long term.

Local health departments already have the ability to waive the evaluation in situations where enough data on soil condition is available. AOHC seeks to remove this provision to maintain the current protections accomplished through soil evaluation.

LEAD ABATEMENT (DOHCD12)

Thousands of Ohio children under the age of six have been poisoned by lead, and many more continue to be exposed to lead hazards. There is no safe level of lead in the blood and no interventions that can reverse the damage to a child's development and learning abilities. The House eliminated the \$1 million appropriation for the Lead-Safe Home Fund and reduced funding for the Lead Abatement program from \$7 million to just \$250,000 in each fiscal year. This funding allowed the Ohio Department of Health to work collaboratively with local health departments to do lead testing and offer follow-up care to affected families. The Lead-Safe Home Fund assisted with the costly process to remove lead hazards in homes where young children reside.

4.04.02

Bloomberg: 22.5% of Patients on Opioids Like OxyContin Develop Addiction: FDA Study

More than one in five people prescribed extended-release painkillers, such as OxyContin, developed an addiction within a year, according to a newly released study mandated by the US Food and Drug Administration (FDA). The study, repeatedly delayed by more than a decade and released Monday, revealed a far higher percentage of pain patients addicted to opioids than drugmakers' sales reps claimed in their marketing materials and representations to physicians. (Hornblower, 5/5)

4.04.03

CBS News: Shingles Vaccine Lowers Risk of Heart Disease for 8 Years, Study Finds

Getting a shingles vaccine may help with more than the viral infection that causes painful rashes — new research shows it can also lower the risk of heart disease. In the study published in the European Heart Journal, researchers found people given the shot had a 23% lower risk of

cardiovascular events, including stroke, heart failure and coronary heart disease, for up to 8 years. The protective effect was particularly prominent in men, people under 60 and those who smoke, drink or aren't active, the study found. (Moniuszko, 5/5)

4.04.04

Morbidity and Mortality Weekly Report (MMWR) 4/17/2025 Synopsis

- As of April 17th, 800 measles cases have been reported in the U.S. in 2025, marking a 180% increase over all of 2024, and the second highest annual case count in 25 years. 82% have been in New Mexico, Oklahoma, and Texas. 96% of patients have been unvaccinated or had unknown vaccinations status. 11% have been hospitalized, and 3 have died. National risk remains low due to high population-level immunity, but outbreaks can still occur, particularly when infectious travelers return to the U.S., among close-knit communities with low measles vaccination coverage.
- In October 2023, routine pediatric blood level testing and follow-up investigations conducted by the North Carolina Department of Health and Human Services identified 4 asymptomatic cases of lead poisoning associated with consumption of cinnamon-containing applesauce packaged in pouches. The FDA identified lead and later chromium in the cinnamon as the source of the contamination, and the applesauce pouch products were recalled. In response to a Centers for Disease Control and Prevention (CDC) national call for reporting cases, between November 22, 2023, and April 12, 2024, 566 cases were reported. 55% were in kids under the age of 2, with 20% showing symptoms. The medium maximum blood level reported was 7.2 µg/dL (ranging from 3.5 to 39.3), where anything 3.5 µg/dL or above was defined as a lead poisoning case.
- According to an analysis of data from the 2023 National Substance Use and Mental Health Services Survey (N-SUMHSS), tobacco cessation counseling was offered by 53.1% of facilities treating mental health conditions and 69.9% of facilities treating substance use disorders. Nicotine replacement therapy was offered by 35% of mental health and 40.2% of substance use facilities. Non-nicotine cessation medication was offered by 33.6% of mental health and 35.3% of substance use facilities. Policies prohibiting both smoking and vaping were reported by 53.9% of mental health and 33.9% of substance use facilities. Among facilities with a tobacco-free policy, 64.4% of mental health and 81.8% of substance use facilities offered at least one cessation service.
- Between August 1 and September 15, 2023, according to a survey of 944 cooling center visitors and 1,260 members of the public conducted by the Maricopa County Department of Health in Arizona, 68% of visitors and 61% of the public were aware of cooling centers before the survey; with 47% of visitors and 13% of the public hearing about them through word of mouth, and 36% of the public and 4% of visitors hearing about them from tv or radio. 65% of visitors and 12% of the public were homeless, 18% of visitors and 11% of the public had a disability, and 21% of visitors and 4% of the public were drug users. Respondents indicated street signs as the best form of advertisement for cooling centers, and

most recommended they stay open until 7:00pm. Transportation issues were the largest barrier to use, reported by 31% of visitors.

- In mid-2023, Alabama experienced an outbreak of 47 cases of cyclosporiasis, determined to be caused by eating cilantro served at a common Mexican restaurant. The cilantro was traced back to a Texas company with no food license who sourced it from Mexico. The parasite that causes the disease is resistant to sanitation, and inspection of the restaurant found no substantial violations, leading to the assumption that the cilantro was contaminated prior to arrival at the restaurant. The restaurant was advised to change suppliers for fresh produce.
- In January 2023, public health agencies identified two concurrent norovirus outbreaks (involving 400 sick people) across 8 Southern California jurisdictions. Investigations concluded the 2 outbreaks were unrelated, yet both discovered the source to be consumption of raw oysters, traced back to 2 separate non-overlapping harvest regions in Mexico. Wet storage of oysters was thought to perhaps be related to contamination in the second outbreak. There were ultimately 179 determined outbreak cases, with 21 seeking medical care, 2 hospitalized, and no deaths. Oysters should be cooked to 145°F before consumption.
- In 2024, 5 human cases and 27 animal cases of tularemia (a bacterial disease commonly transmitted by ticks and deer flies) were reported in Minnesota. This is up from the 20 animal cases and zero human cases in 2023, and the median 1 human and 2 animal cases seen annually from 2000 to 2023. Investigations failed to identify any definitive source(s).
- A May 11-17, 2024, investigation by the CDC and Chicago Department of Health identified 12 confirmed, 26 probable, and 140 suspected overdoses involving medetomidine (a non-opioid sedative not approved for use in humans) mixed with opioids on Chicago's West Side. Medetomidine had not been previously identified in Chicago's illegal drug supply, and fentanyl was found in all samples containing it. Most cases were male (84%), Black (87%), and aged 45-64 (63%). 16 were admitted to the hospital, 9 to ICU, 16 received respiratory support, and 5 required intubation. Medetomidine effects cannot be reversed with naloxone, and its antidote is not approved for use in humans; but since it is so often mixed with opioids whose effects are reversible with naloxone, administering naloxone for overdoses remains important.
- Medetomidine was detected in 72% of illegal opioid samples tested in Philadelphia, PA, in the last 4 months of 2024. During that period, xylazine (the previous most common adulterant) decreased from 98% to 31% of samples. Doctors noticed an increase in hospitalized patients with severe withdrawal symptoms including very high blood pressure and heart rates, distinct from symptoms of withdrawal from fentanyl and xylazine. Patients did not respond to medications previously effective for fentanyl and xylazine withdrawal, but did respond to dexmedetomidine (a non-opioid sedative often used in ICUs and operating rooms.)
- Of 23 patients at 2 Pittsburgh, PA, hospitals experiencing severe high blood pressure and heart rate following cessation of opioid use from October 2024 to March 2025, 10 patients (all who were screened) had detectable medetomidine metabolites, with 2 of them having

detectable medetomidine parent compound. 90% required ICU admission, and most patients required dexmedetomidine due to minimal response to other typical medication.

- Per data from 22 states and 2 territories using the newly revised optional marijuana module of the Behavioral Risk Factor Surveillance System in 2022, 15.3% of adult respondents reported current marijuana use, with 79.4% of them smoking, 41.6% eating, 30.3% vaping, and 14.6% dabbing (inhaling heated concentrated cannabis.) Vaping and dabbing were most common among those aged 18 to 24.
- Data on deaths during 2017–2022 from CDC’s State Unintentional Drug Overdose Reporting System were linked to 2014–2022 Pennsylvania Prescription Drug Monitoring Program data, and the analysis found that deaths involving opioids without stimulants decreased from 2,974 in 2017 to 1,995 in 2022, while deaths involving stimulants without opioids increased from 300 to 549, and deaths involving both opioids and stimulants increased from 1,703 to 2,246. Regardless of contributions to death, decedents filled about 5 or 6 times as many opioid prescriptions than stimulant prescriptions prior to death. The data suggests that receiving a stimulant prescription may not be predictive for subsequent stimulant-involved overdose, while opioid prescribing may be a risk factor.
- A surveillance research study in Michigan found that from 2019 to 2023: 144 poison center cases, 132 Emergency Department (ED) visits, and 192 EMS responses involving nitrous oxide were identified. From 2019 to 2023, poison center calls increased from 10 to 48, ED visits increased from 7 to 60, and EMS responses increased from 15 to 78. Nitrous oxide events occurred most frequently among people aged 20 to 39 years and in metropolitan areas. Among the 192 EMS responses, 14 (7.3%) involved fatalities, including 3 suspected suicides. Widespread availability, ease of access, and minimal legislative restrictions on nitrous oxide are potential factors contributing to the observed increases.
- An analysis of data from 7,046 adult respondents to the National Center for Health Statistics Rapid Surveys System (RSS) online survey in 2023 provided estimates that 5.3% had suicidal thoughts in the past year (highest among younger adults, those with lower income, and bisexuals), and that 42.4% personally knew someone who died by suicide (highest among older adults, Whites, veterans, higher educated, and nonmetropolitan residents.)

4.04.05

The Washington Post: Internal Budget Document Reveals Extent of Trump Health Program Cuts

The Trump administration is seeking to deeply slash budgets for federal health programs, a roughly one-third cut in discretionary spending by the Department of Health and Human Services (HHS), according to a preliminary budget document obtained by The Washington Post. The HHS budget draft, known as a “passback,” offers the first full look at the health and social service priorities of President Donald Trump’s Office of Management and Budget as it prepares to send his 2026 fiscal year budget request to Congress. (Sun, Johnson, Rouben, Achenbach and Weber, 4/16)

4.04.06

Modern Healthcare: FEMA Cuts Leave Hospital Disaster Preparedness Funding in Limbo

The federal government's cuts to disaster preparedness grant funding will cost providers millions of dollars and potentially jeopardize patient care. President Donald Trump's administration last month eliminated roughly \$3.3 billion in annual federal grants when the Federal Emergency Management Agency (FEMA) ended the 2025 Building Resilient Infrastructure and Communities and Flood Mitigation Assistance programs. (Kacik, 5/5)

Ron H. Graham provided the following highlights:

- *Keeping up-to-date on the federal cuts and their impacts on the health department.*
- *Continue to work with Four Springs on the Community Health Assessment.*
- *Reviewing possible grants as they become available.*
- *Discussed PHAB accreditation, federal funding, and the community outcomes.*

Discussion:

Lynn Roman asked for an update on the Help Me Grow program. Ron Graham said he will look into it.

5.0

Old Business

5.01

Resolution to Establish Certain Fees, Operation & Maintenance Program, Third and Final Reading

Melissa DeBoth moved and Lynn Roman seconded a motion to hear the third and final reading of the following resolution to establish certain fees, Operation & Maintenance Program. Motion carried with a roll call vote. Ms. Roman, yes; Ms. DeBoth, yes; Ms. Jones, abstain.

As part of the Operation and Maintenance program, the Health District is obligated to perform compliance inspections if a homeowner does not perform the required maintenance for the system at the house during the permit term. State law allows the Health District to recoup the cost of the compliance inspection. The purpose of this inspection is to confirm that a public health nuisance does not exist at the property.

RESOLUTION OF THE

**GEAUGA PUBLIC HEALTH BOARD OF HEALTH
ESTABLISHING CERTAIN FEES**

WHEREAS, the Ohio Revised Code, Section 3709.09, permits the Board of Health to establish by a 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 Ohio Administrative Code 3701-29-05 allows a fee for registration; and

WHEREAS, it has been determined by the Board of Health through a program cost analysis that the fees for certain services are generating sufficient revenues 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 regulations are hereby amended/enacted as follows:

1. Proposed Operation and Maintenance Compliance Inspection Fee: \$300.00

Adopted by the Board of Geauga Public Health on May 28, 2025, to become effective June 9, 2025.

Published: May 29, 2025
June 5, 2025

Dan Lark stated that no one attended the public hearing held on Tuesday, April 29, 2025.

Discussion:

Lynn Roman verified that the \$300 inspection fee covers the cost associated with the inspection.

6.0
New Business

6.01

6.01.01
Financial Reports, Resolution 25-05-06-01-01

Melissa DeBoth moved and Lynn Roman 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:

Lynn Roman asked for clarification on the item for Expert IT LLC. Adam Litke said it was for Microsoft licenses.

6.01.02

**Establish a New Fund for Operation and Maintenance Fund,
Resolution 25-05-06-01-02**

Lynn Roman moved and Melissa DeBoth seconded a motion to approve Resolution 25-05-06-01-02 to establish a new financial fund for the Operation and Maintenance proceeds. This new fund will be utilized to track all Operation and Maintenance items, be adopted; motion carried.

6.01.03

Permission to Approve Appropriations for Increase/Decrease

Lynn Roman moved and Melissa DeBoth seconded a motion to approve Appropriations for Increase/Decrease; motion carried.

6.01.04

Resolution 2025-20: Then and Now Purchase Order to Lake County General Health District, Not to Exceed \$324,236.71

Melissa DeBoth moved and Lynn Roman seconded a motion to adopt Resolution 2025-20 to authorize the payment of a Then & Now Purchase Order to Lake County General Health District, total not to exceed \$324,236.71; motion carried.

6.01.05

Resolution 2025-21: Then and Now Purchase Order to Geauga County Water Resources, Not to Exceed \$1,930.00

Melissa DeBoth moved and Lynn Roman seconded a motion to adopt Resolution 2025-21 to authorize the payment of a Then & Now Purchase Order to Geauga County Water Resources, total not to exceed \$1,930.00; motion carried.

6.01.06

Resolution 2025-22: Then and Now Purchase Order to Lake County General Health District, Not to Exceed \$25,050.00

Melissa DeBoth moved and Lynn Roman seconded a motion to adopt Resolution 2025-22 to authorize the payment of a Then & Now Purchase Order to Lake County General Health District, total not to exceed \$25,050.00; motion carried.

6.01.07

Resolution 2025-23: Resolution Authorizing Payment for 2023 Septic Treatment System Permit Fees, \$4,249.00

Lynn Roman moved and Melissa DeBoth seconded a motion to adopt Resolution 2025-23 to authorize the payment for 2023 Septic Treatment System Permit Fees to Ohio Department of Health in the amount of \$4,249.00; motion carried. Ashley Jones abstained.

6.01.08

Resolution 2025-24: Resolution Authorizing Payment for 2023 Pool Licensing Fees, \$2,680.00

Ashley Jones moved and Lynn Roman seconded a motion to adopt Resolution 2025-24 to authorize the payment for 2023 Pool Licensing Fees to Ohio Department of Health in the amount of \$2,680.00; motion carried.

Dan Lark said the state was only reviewing these every three years and it was just recently noticed.

6.01.09

Resolution 2025-25: Resolution Authorizing Payment for 2024 Cross Jurisdictional Agreement Costs, \$298,546.77

Melissa DeBoth moved and Ashley Jones seconded a motion to adopt Resolution 2025-25 to authorize the payment for 2024 Cross Jurisdictional Agreement costs to Lake County General Health District in the amount of \$298,546.77; motion carried.

6.02

Permission to Change the Dates of the June 2025 - October 2025 Board of Health Meetings

Lynn Roman moved and Melissa DeBoth seconded a motion to change the date of the 2025 Board of Health meetings for June – October from the fourth Wednesday of the month to the third Wednesday due to scheduling conflicts. The meeting dates will be June 18, 2025; July 16, 2025; August 20, 2025; September 17, 2025; October 15, 2025. The time of the meetings will remain at 5:00 p.m.; motion carried.

7.0

Citizens' Remarks

Ashley Jones 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 member of the public asked for clarification on some of the New Business items. Adam Litke said a new fund was created for the O&M program and the For Sale of Property fund will still be used for FSP payments, the \$25,050.00 to Lake County was for lab fees, the contract items with Lake County are those required to legally be paid.

A member of the public asked what is required to avoid the O&M non-compliance fee. Dan Lark said the service requirements are system-based, however the service providers and septage haulers are required to send their service/pumping reports to the health department. She also suggested reaching out to state representatives regarding PHAB and other legislative issues.

A member of the public asked if it is anticipated to provide vaccinations for women and children. Adam Litke said the health department only vaccinates uninsured.

8.0

Adjournment

With no further business, the meeting was adjourned at 7:33 p.m.

Secretary

President