

## **HEALTH SERVICES ADVISORY BOARD MEETING**

### **September 11, 2007**

**Those attending:** Dr. Florence Bero, Clive Chambers, Tedra Cobb, Richard Edwards, Ruth Fishbeck, Dr. Edward Goldstein, Patricia Ward, Linda LePage Dr. J. Patrick Turbett and Myrna Barney.

**Excused Members:** Brian Gardam, Bruce Stone and Benjamin Gruda

**Minutes of Previous Meeting (6/12/07):** Ruth Fishbeck moved that the minutes be accepted as written. Tedra Cobb seconded the motion. The motion carried.

UPDATES:

1. **Jail Nursing Situation and Peoples Forum regarding this Problem:**

Mr. Serafin reported that solutions are being explored to deal with the nursing crisis at the County Jail. He explained that Public Health has one CHN (Community Health Nurse) position that we can assign to the jail. We are now looking at a 12 hour day with 4 hours on call after the 12 hour shift. We felt this might be more attractive than a 16 hour shift. There are three medication calls a day and this would allow medications to be dispensed during the 12 hour shift. Randy Bouchard, Jail Administrator is waiting approval from the Commission of Correction on this proposed schedule. We have not had anyone in house respond to the posting so we will be able to advertise for the position. We have one person from outside of the agency who has expressed an interest in the position. Mr. Serafin stated paying overtime combined with holiday pay was a costly expense to Public Health's budget this summer. Dr. Goldstein feels having a supervising nurse will be beneficial to the existing situation. There was a discussion on money being moved from the jail budget to Public Health budget to cover the cost of part-time nurses. Dr. Turbett felt this can be resolved.

Mr. Serafin pointed out that the county jails are no longer just correctional facilities due to a confluence of State and Federal policies and that the jail population is increasingly over represented by the mentally ill and that county jails also must purchase several thousand dollars per year of medications that they are not fairly reimbursed for. Mrs. Cobb reported that the Board of Legislators passed a Resolution (# 251-2007) at their 9/10/07 meeting authorizing the chair to send letters on behalf of the Board to State and Federal elected officials and Dennis Whalen, Governor Spitzer's Secretary of Health and Human Services to make them aware of the care needs of those in the St. Lawrence County Jail. In addition the resolution requests fair reimbursement for the additional costs that running an asylum assumes to include a sufficient level of reimbursement to cover specialized staff and the medical expenses of inmates

2. **State Panel regarding Universal Health Care:**

Information was distributed containing a press release announcing, at the direction of Governor Spitzer, the NYS Department of Health and Insurance will conduct a series of public hearings to solicit input on the development of proposals for achieving health system reform, increasing access to health insurance coverage and moving toward universal healthcare coverage in NY. Hearing schedules and requirements for Public Hearing

participation was also included. There was a discussion on Health Insurance Costs. Stats show seven figure salaries going to administrators of Health Insurance Companies. The cost of health insurance is a runaway train and needs more regulation.

### **3. Shingles Vaccine:**

An informational sheet was distributed explaining Zostavax, a vaccine for shingles. This same information will be given to the Board of Legislators to follow up last month's request to purchase more vaccine. It has been very popular. Due to the expense of the vaccine the BOL requested Mr. Serafin look into a sliding fee scale for this vaccine. Mr. Serafin reported that once they attempted to project costs they found it would be impossible as too many variables are involved, such as who would avail themselves of it or were they might fall on the fee scale.

### **4. County Clerk's Meeting:**

Mr. Serafin provided some background information stating that under Public Health Law 356 the County is currently set up having the Board of Legislators also acting as the Board of Health. Each town and village in the county hires their own Health Officer. Mr. Serafin is the Health Officer for the following communities: Town Gouverneur, Village of Gouverneur, Village of Richville, Town of DeKalb, and Town of Piercefield, as they lost their health officers and Mr. Serafin's predecessor agreed to take on the responsibility.

In June when Ron Heerkens from the Regional Health Office reviewed County and Town responsibilities with the BOL, Mr. Serafin was requested to begin communications with communities on the best way to organize for a crisis. Diane LaRock, BT Coordinator approached the Town Clerk's regarding this issue and was invited to one of their quarterly meetings. Mr. Serafin and Laurie Maki, Public Health Educator, attended a County Clerk's meeting on 9/6/07 where Town Supervisors and Health Officers were invited to attend. Two Supervisors and no health officers attended this meeting. The purpose of the presentation was to begin talks on the importance of being prepared for a health emergency within the county. A scenario of pandemic flu was presented to the group bringing to their attention that should a pandemic flu occur, there could be as many as 11,000 deaths. If this were to happen and nothing were in place, how would the county, towns and villages deal with such a crisis. Issues like where would a temporary morgue be set up, and how would burial of this magnitude be handled need to be thought out before a crisis. The Town Clerk's had some suggestions. Since the meeting Mr. Serafin believes that keeping it simple is the way to go. Keeping it simple would be organizing the county into a health district with a seven member board under Section 340 of the Public Health Law.

Mr. Serafin explained that under the current system there are 32 Health Officers within the county. He further explained that BOL could apply to the NYS Department of Health to become a full county Health District minus the City of Ogdensburg. The City of Ogdensburg could be invited to participate. There was a discussion on the pros and cons of requesting a change in the current operational system. Mr. Serafin stated he could see no drawbacks. Linda LePage stated that back in the 1980's when Public Health wanted to take over the role of vital statistic registrars for the county, towns fought against it because they would lose revenue. The group agreed "simple is better", it would seem 7 members would be more efficient than 33 Boards of Health. There was discussion on how it would save on

community's budgets not having to pay for individual health officers. The flip side would be if the Health Officers took exception to losing the annual stipend they receive from towns/villages. Mr. Edwards stated as a Health Officer it becomes discouraging when recommendations to community boards are dismissed or not acted upon. Mr. Serafin said he relates to that statement as he is unable as Health Officer to enforce open burning, whereby if the county was under the Health District option it would have more weight in establishing local laws relating to health issues. Myrna Barney stated that as Sanitarian she finds a fairly high turnover rate for both code officers and health officers. Many health officers take positions without being made aware of their responsibilities. This lack of knowledge and the high turnover rate could truly hamper response efforts in the event of a countywide emergency.

Dr. Turbett suggested bringing this suggestion forth at the October Service Committee. It was suggested it may be more conducive to bring forth a fact sheet on the pros and cons of the existing system vs. a full county health district. It was suggested that towns be notified that this is a recommendation for October. Perhaps even information on why physicians would want to continue to be health officers could be provided.

#### **5. DENTAL SEALANT PROGRAM:**

Mr. Serafin explained that Public Health has two teams of Dental Sealant staff. These teams follow the school year and work 10 months and then are laid off during the summer. And then collect unemployment. He has been meeting with some of the dental staff and exploring contracting with them for a ten month/eleven month contract. This would be a much better organized approach and would take into consideration taking care of paperwork, etc. at the end of the school year. Currently the 4 staff utilize what accrued time they have on the books and then go off payroll until they return in September.

Linda explained that approximately 6 years ago the program picked up the remaining 5 schools districts that were not included in the original grant proposal. However, the program was only able to provide services to the 2<sup>nd</sup> and 3<sup>rd</sup> grade students in the new districts. Currently 2, 3 6, and 7<sup>th</sup> graders are served in the other districts. Team one currently works 5 days a week and if we could contract with both teams, then Team 2 could also work 5 days a week enabling the program to serve the 6<sup>th</sup> and 7<sup>th</sup> grades in those 5 districts. Mrs. Cobb asks who establishes the start and end dates now for employment. She feels this could be discussed at a labor-management meeting. There was a discussion on if the teams become 12 month employees, how they might be of service to the community. Could they be of value to the CP Clinic? Could they do education programs to day care programs, etc? During the discussion the question was raised on what unemployment cost the county is paying versus salary of keeping staff employed longer. Linda pointed out that this is a \$50,000 grant that provides dental sealant to children with no dental insurance, no Medicaid. It provides these children with dental care they would not receive otherwise. Linda explained we are test billing for Medicaid currently attempting to get a system in place for some of the service provided. A few dentists in this county accept MA but only for established patients, and do not accept any new Medicaid clients. This program is important to children that would not be able to receive care otherwise.

## **6. COUNTY PUBLIC HEALTH SANITARIAN: Myrna Barney**

Myrna distributed her card and stated that her office is housed at the NYS Department of Health on Gouverneur Street in Canton. She then summarized her duties/responsibilities as follows:

### **Water Quality**

- Provide technical assistance to private individuals
- Offer sampling of private water supplies for property transfers (this is a fee service)
- Assist with community surveys, in conjunction with State Department of Health. This often leads to the formation or extension of municipal water districts.
- Review of private water supplies serving Family Daycare facilities.
- Currently working with the Town of Potsdam and the New York State Department of Health to perform water sampling of residential supplies near an area of concern where thousands of railroad ties were discarded.

### **Lead Hazard Awareness**

- Outreach and education with regards to home remodeling and renovating.
- Target audience is code enforcement officials, contractors and agencies that offer housing rehabilitation programs.

### **Onsite Wastewater Treatment Systems**

- Provide technical assistance to homeowners on new installations and on replacement systems.
- Perform dye test evaluations of septic systems for property transfers (this is a fee service)

### **Indoor Air Quality**

- Provide information to residents regarding general indoor air quality. Most commonly address concerns of mold prevention and removal.
- Assist residents with air quality concerns following fuel oil spills at their homes.

Myrna noted that there is no agency that tests for mold. She works with local code enforcement officers when complaints are received.

## **Outdoor Air Quality**

- Most complaints refer to burn barrels.
- There is no consistent way to handle the complaints as local laws governing open burning vary from one municipality to the next.

Myrna stated that proposed laws from DEC are working their way through the system and will provide some assistance to this issue.

## **Public Health Nuisances**

- Work with local code enforcement officials and local health officers to investigate public health nuisance complaints.
- Have generated a brief breakdown of the 2006 nuisance complaints. Illustrates the diversity of this program area.
- See a real need for a consolidated board of health. Fairly high turnover rate for both code officers and health officers. Many health officers take positions without being made aware of their responsibilities. This lack of knowledge and the high turnover rate could truly hamper response effort in the event of a countywide emergency.

## **West Nile Virus Surveillance**

- Receive and compile reports of dead birds throughout the county.
- Submit suitable specimens for West Nile Virus testing.
- Offer West Nile Virus educational materials to all callers reporting dead birds.
- As of this week, three birds have been submitted for testing. All three were reported on the HIN as being negative for West Nile Virus.

## **Whey Spreading**

- Partner with Dawn Howard of the St. Lawrence County Soil and Water Conservation District to perform reviews of permit applications to land spread whey, a byproduct of cheese production.
- Currently only have one facility under permit – Losurdo Foods Inc.
- Last year the review of Losurdo's permit renewal application resulted in the removal of two fields from use due to an over application of chloride. Chloride is part of the chemical make-up of whey. These fields will be re-evaluated when soil sampling indicates that these fields have recovered.
- Local Law 4 of 1993, which governs whey-spreading needs to be revised. While the efforts were well beyond anything in place by DEC, there are gaps that need to be addressed. DEC has since changed many of its regulations regarding nutrient management. Also, the law allows for whey to be placed into manure pits without having a permit issued to the generator. This does not allow for any real oversight of how the whey is disposed or where it is

being applied. Fear that failure to address these needs may become a liability for the county.

Myrna stated that she and Dawn feel the local law regarding whey-spreading needs to be revised and would like a committee to review with them. Mrs. Cobb asks why this hasn't been brought up before. Myrna responded that she had brought it up to previous administration and was told to wait. There was a discussion on possible committee to review this law, it was determined that the County Attorney should be part of this process.

Myrna was asked if she does radon testing and she replied she refers inquires to the NYS Department of Health for a kit.

## **7. CORONERS:**

Mr. Serafin reported that 22 years ago he approached the county about a medical examiner system for the county and it was not accepted. He is still chipping away at it. He explained that the current county system has 4 elected coroners on call 24 x 7 for responding to unattended deaths. Public Health supplies each with a beeper and cell phone. The county dispatcher is responsible for dispatching corners as needed. Mrs. Cobb asks if these coroners receive an orientation. There is no formal orientation, the County pays for 2 annual conferences a year. There was a discussion on some issues that arise; i.e. coroners missed calls, reporting system. Mrs. Cobb stated an orientation would be beneficial to review items such as data documentation, releasing records, and the importance of not keeping families waiting. In short, how best to serve the county well in this role could be addressed. Questions like who is their supervisor, what property belongs to the coroners and what property belongs to the county should be addressed. Mr. Serafin believes if the county had a medical examiner system many of these issues could be resolved and the county would be better served. Mr. Chambers suggested putting together information for the BOL showing why a medical examiner system would be better than a coroner system.

The next meeting of the Health Services Advisory Board will be December 11, 2007. The meeting will be held in the 2<sup>nd</sup> floor conference room of the Human Services Center in Canton at 3 pm.

Respectfully Submitted,  
Sherry Cryderman  
Recording Secretary