

CATTARAUGUS COUNTY BOARD OF HEALTH



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MINUTES August 5, 2020

The 887th meeting of the Cattaraugus County Board of Health (BOH) was held virtually on August 5, 2020.

The following members were present:

Joseph Bohan, MD

Richard Haberer

Giles Hamlin, MD

Theresa Raftis

Legislator Kelly Andreano

Mayor David L. Smith

Sondra Fox, RN, MSN, C.S.

Also present were:

Kevin D. Watkins, MD, MPH, Public Health Director

Richard Helmich, Legislator

Phillip S. Yates, Public

Tang You Wen, Public

Raymond Jordan, Sr. Public Health Sanitarian

Debra Lacher, Secretary to the Public Health Director

Colette Lulay-Pound, Administrative Officer

Rick Miller, Olean Times Herald Reporter

Lynne Moore, Director of Patients Services

Dave Porter, Hearing Officer

Paul Schwach, MD, Clinical Director

Shomita Steiner Ph.D., Public Health Emergency Preparedness Director

Gilbert Witte, MD, Medical Director

Eric Wohlers, Environmental Health Director

The meeting was called to order by Dr. Joseph Bohan. The roll was called and a quorum was present.

Dr Bohan asked the Board for a motion to accept the July minutes that were distributed by email. Mr. Haberer made a motion to approve the minutes of the BOH meeting held August 4, 2020, the motion was seconded by Mayor Smith and unanimously approved.

Dr. Bohan welcomed Philip S. Yates and Tang You Wen to the board of health meeting. Mr. Tang You Wen filed an appeal to docket #20-001, a BOH order to suspend the operating permit of the New Lakeview Chinese Restaurant.



Mr. Yates representing Mr. Wen during the appeal stated Mr. Wen has made significant progress which indicates a willingness to work with the BOH to insure food safety at the restaurant. He added that there remains some areas of concern which has led the owner to examine ways to address the issues identified in the order. He and his client have consulted with John Haley, a servsafe food inspector, regarding practical guidance. The changes required for the kitchen although crucial to food safety involve relatively minor changes in practice. The proposal presented in the appeal asked for the Board's forbearance while the restaurant puts into practice a supervision that will allow the New Lakeview to safely provide excellent Chinese food.

Dr. Bohan thanked Mr. Yates for his presentation, and stated that the owner does not need the Board's permission to bring in supervision to improve its kitchen facility or teach its staff. The Board has been trying to encourage the restaurant to get things right. Dr. Bohan asked who would be providing the supervision and when would the person start. Mr. Yates replied although they have had discussions they are not ready to identify the individual at this time. Dr. Bohan stated to Mr. Wen, "I am sure that you are a good cook but this is not a kitchen in your home, this is a commercial kitchen where the public is at some risk whenever they eat in your restaurant, which we take very seriously. The Board will discuss the appeal and provide a written response in a matter of days."

A motion was made by Mr. Haberer to move into an executive session for legal advice, the motion was seconded by Mayor Smith and unanimously approved. After a private discussion, a motion was made by Mr. Haberer to leave the executive session, seconded by Mayor Smith and unanimously approved. The executive session was not held due to audio technical issues.

A motion was made by Mr. Haberer to approve the minutes from the last BOH meeting held July 1, 2020, seconded by Kelly Andreano, and unanimously approved.

DIRECTORS REPORT: Dr. Watkins welcomed and thanked everyone for joining the fourth teleconference meeting to be held during the pandemic.

He stated that COVID-19 related responses continues to be a large part of the daily workload for the department. Fielding COVID related calls, mostly from residents who are either looking for test results, or from residents returning from States where there is a high level of community transmission of COVID-19.

Dr. Watkins reported that as of Monday, August 3, 2020, NYS has reported a total of (417,589) confirmed cases of COVID-19 and (25,175) deaths. The number of newly confirmed cases in NYS increased, on Monday, August 3, 2020, there were (746) new cases versus (545) the day prior.

The number of hospitalized COVID-19 patients continues to remain flat, on Monday, August 3rd, there were (568) patients in the hospital versus (536) the day prior. Of the (568) COVID-19 patients in the hospital. (139) were in the intensive care units, which makes (24%) of all hospitalized COVID-19 patients in NYS, admitted in intensive care units.

On the mortality side, the number of deaths being reported for COVID-19 remained flat, on Monday, August 3rd, there were (3) deaths reported versus (2) the day prior.

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In Cattaraugus County, as of date, there are a grand total of (262) residents who are currently under quarantine. There are (141) residents under precautionary quarantine, and (121) residents under mandatory quarantine. A total of (20,864) COVID 19 diagnostic tests have been administered in Cattaraugus County, of which, (99%) were negative, and (0.64%) were positive.

As of date, there have been (131) residents that have tested positive for COVID-19, of which, (116) have recovered, which is a (89%) recovery rate. A breakdown of the (131) positive cases shows that there were (34) residents that were healthcare workers; (34) residents that were contacts of a positive COVID-19 person, and (57) residents that were asymptomatic.

In Cattaraugus County the range of positive cases extends from age 4 (youngest) to age 91 (the oldest). Most positives are between the ages of 50-69, were there are (52) cases, followed by those between the ages of 20-39, were there are (39) cases.

A recent July 3rd edition of the Morbidity and Mortality Weekly report, which was shared by Dr. Watkins with those in attendance, discusses the characteristics of adults with COVID-19. A multistate telephone survey of (350) adult inpatients and outpatients who tested positive for COVID-19 showed that the three most prevalent symptoms exhibited of those surveyed were fatigue, headache and cough. Fatigue appeared in (69%) of the cases that were studied.

Dr. Watkins presented a local case report of a resident who contracted COVID-19 describing his fatigue experience. Dr. Witte stated that the case report was actually of him and the fatigue that he experience is something that he had never experienced before. He stated that he wanted to sleep the entire day, and not able to do much more. He also added that several weeks after his recovery he had a COVID antibody test conducted and his antibody levels were very high.

Legislator Andreano asked for clarification regarding the antibody levels; stating that there are some people who are testing .01 but it is being reported that a person must have a certain level to achieve antibody status.

Dr Witte replied there is no difference between a reading of .01 or .02 they are all negative, if you register above a 1.4 then you are considered to have antibodies. The unknown factor is how antibodies correlate with the immunity production of B cells but also the activation of T cells which is cellular immunity. T cells cannot be measured by an antibody test, so therefore it is unclear. It's nice to see the antibody numbers, but it is not clear how much protection that conveys or how long the protection would last.

Dr. Watkins added that in severe and critical cases of COVID-19, the immune system can become overzealous throughout body, including the lungs, heart, and brain. There are three drugs being used to fight against COVID-19 during the severe and critical stages of the disease process in the ICU: 1.) Dexamethasone is currently the drug of choice to treat inflammation and has been shown to reduce the mortality rate by one third, and for patients requiring only oxygen, mortality was cut by one fifth. 2.) Remdesivir, which is actually an antiviral drug that is used for Ebola, if administered early on, may shorten the duration of days spent in the ICU.3.) Anticoagulants, since COVID-19 seems to have a really high propensity to lead to clots either in deep veins or in the brain or in the lungs. Dr. Witte added that these treatments are only given to those who are severely ill and in the ICU, there is no antiviral medication and no vaccine for this infection at this time.

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Dr. Watkins went on to say that there has been a lot of dialogue on vaccines and who should be first in line to receive the COVID-19 vaccine once it has been approved by the FDA. Traditionally healthcare workers and the people most vulnerable to the targeted infection are usually the first in line to receive the vaccine, but consideration is being given to providing the vaccine first to states being hit the hardest with COVID-19 transmission.

Finally, recent reports have indicated that scientists have created a monoclonal antibody that can defeat the novel coronavirus in the lab. The experimental antibody has shown to neutralize the virus in cell culture. The antibody known as 47D11 targets the spike protein on the novel coronavirus. The monoclonal antibodies are lab-created proteins that resemble naturally occurring proteins the body raises to fight off bacteria and viruses. Highly potent, they target exactly one site on a virus, and have shown to be very promising in the laboratory.

Recent barriers of getting COVID-19 diagnostic tests have been placed on the department.

Wadsworth laboratory, the State Laboratory, will only accept 75-100 specimens per week. The department can continue to provide diagnostic tests to residents but their health insurance will have to be charged a fee of \$75.00 to \$100.00 for every test. Other commercial labs like Bio-reference, Boston Diagnostic, and Quest are available, but the number of days to receive a result for the diagnostic test has increased, test results are being returned 5-7days after receipt. When test results are returned after 5 days, it definitely hampers the ability to conduct effective contact tracing.

In Australia (where they are in the middle of their influenza season) they are seeing a low rate of influenza infection in 2020. This is probably due to the measures that are being taken to slow the spread of COVID-19, which includes wearing masks, social distancing, and practicing hand hygiene. In 2019, Australia had more than (132,000) people that were diagnosed with influenza, in 2020, only (21,000) have been diagnosed during the same period. The number of influenza deaths recorded this year in Australia have been only (36), compared to last year when they had (430) deaths secondary to influenza. Vaccination rates have also jumped to 8.8 million doses of influenza, versus 2 million doses administered last year. Hopefully, the same patterns will be seen in the United States.

Dr. Witte shared that he lives close to the Bartlett Country Club where over the weekend they were having large parties both Friday and Saturday evening with easily (100) people in attendance, no masks, and no social distancing being practiced. Dr. Watkins stated although Cattaraugus County has had a low prevalence of COVID-19 in the county thus far, we must continue safe practices.

NURSING DIVISION REPORT: Lynne Moore, Director of Nursing reported that the census for homecare is currently (262). There have been no recent positive COVID-19 patients admitted to homecare or any positive staff. Next month, the department will start routine COVID-19 diagnostic testing of all homecare staff twice a month. Three new RN's have been hired. Three of the homecare nurses have been assigned to the COVID response team.

There were (6) newly confirmed children with elevated blood lead levels in July: (5) of them had blood lead levels between 5-10ug/dl and (1) had levels between 10-15ug/dl (normal is <5ug/dl). There are a total of (120) elevated blood lead level cases with (70) actively being followed. The majority of the cases are 5ug/dl or below and (1) case that is at 22 ug/dl. The regulation for discharge is unchanged. The child must have two blood lead level tests below 5ug/dl to be discharged from the program.

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Testing within the clinic for HIV included (7) in Olean, (6) in Machias, and (4) in Salamanca, all of which were negative. Hepatitis C testing included (1) in Olean, (1) in Machias, and (1) in Salamanca and all were negative.

County testing for communicable disease included (1) campyobacteriosis but there was no followup with the patient as they did not answer their phone; in addition a questionnaire was mailed out and was never returned.

Communicable disease report: There were (11) cases of chlamydia, (3) cases of gonorrhea, (5) cases of chronic Hepatitis C, (2) suspected cases of Hepatitis A, (1) chronic case of Hepatitis B, there were (24) suspected cases of Lyme disease none have been confirmed, (2) cases of salmonellosis. There was (1) case of strep group B, (1) case of strep pneumoniae still awaiting investigation as it occurred at the end of July, and (2) positive cases of syphilis.

In the month of July there were (8) rabies post-exposure prophylaxis series given due to (3) bat exposures, (1) cat bite, (1) dog bite, (1) raccoon bite, (1) skunk bite, and (1) woodchuck bite.

ENVIRONMENTAL HEALTH REPORT: Eric Wohlers, Environmental Health Director reported that a rabies clinic was held on July 11th. Due to COVID-19 a new procedure was implemented which consisted of a drive thru rabies clinic, and it was held at the County fairgrounds. The clinic was scheduled for 9:00 AM to Noon but a severe thunderstorm resulted in the loss of power, and computers went down. The Veterinarian and staff ended up staying until 5:00 PM that evening to complete the vaccination of (609) animals (446) dogs, and (159) cats, and (4) ferrets. The next clinic is set up for September 19th. In the month of June there were (11) animal bites, (16) animal bites in July, and (21) animal specimens were submitted to the State lab for rabies testing in June, and (12) in the month of July.

There were (30) permits issued for septic systems in June, and (29) permits in July. There were (55) real property transfers investigations in June, and (81) real property transfers for the month of July.

Due to COVID-19, there was a five or six month period where the courts were closed, and there were no enforcement hearings conducted. A policy has been put in place for conducting administrative hearings and the department will be holding its first hearing on August 12th, with (8) cases to be reviewed.

In the year of 2019 there were (28) lead cases to investigate and then in October regulations changed. Due to COVID-19, many provider's offices were closed, and children were not getting screened for lead, hence there were no referrals for several months. There are (31) new lead cases this year; (6) came in June, (8) in July. Currently there are (49) open investigations of houses that have lead paint in them. Five of these investigations are dormant, (39) are ongoing, and (5) are new referrals received on Monday. Two of the current cases are going to enforcement.

The septic system replacement program, is a grant program that the New York State Department of Environmental Conservation (DEC) and the State Environmental Facilities Corporation awarded the department to replace septic systems in close proximity to priority waterbodies (Allegany River/Reservoir). This is the third year of a five year contract. Three projects were completed last year, and (5) new projects qualify for the program this year. In June, (1) project was completed; since July 21st, (3) more projects were completed, and (2) are pending.

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There was \$75,000.00 to spend over the span of five years, and the department is making great progress this summer.

All the Board members received handouts regarding aerial wildlife rabies vaccine baits that would be deployed in Cattaraugus County. Basically this is a collaboration between the federal government (USDA), the State Health Department, and Cornell University.

Their goal is to eradicate rabies in raccoons along the Eastern seaboard within 25-30 years. Within the next 5 years they hope to have rabies in raccoons pushed out of the New England States, and maybe even New York; 11-15 years they hope to have it pushed out of Pennsylvania, Virginia, and the Carolinas; in 20 years, pushed out of Georgia, and Florida, with total eradication within 25-30 years. They have asked the health departments to help with local advertising, so the residents are aware of the bait drop. Once baits are dropped, most are eaten by wildlife within the first four days, and nearly all within a week. If residents find a bait drop laying around they are encouraged to simply put on a pair of gloves and throw it into the woods or field next to their yard. Keep pets away from the bait drops although it would not harm them. The State has sent out letters to medical offices, and veterinarians alerting them of the bait drop in case they receive a call from someone being exposed to one of the baits. There is a number manned by the State that can be called with questions regarding the bait drop. Currently the department is preparing a press release to inform residents about this program. Legislator Helmich asked when the program would start locally. Mr. Wohlers replied that the program was starting in the New England States and targeting our local area between August 10th and August 30th.

ENFORCEMENT LIST: Mr. Porter reported there were no new enforcements this month.

Old Business: Dr. Watkins stated that the Board of Health meetings for the rest of the year would all be held on the 1st Wednesday of every month.

Dr. Bohan stated that since there is no further old business to discuss, he needed a motion to go into executive session. Rick Miller asked what the purpose of the executive session would be. Dr. Bohan replied that the executive session is to discuss the New Lakeview Chinese Restaurant. Dr. Watkins replied that the executive session is also for consultation with the County Attorney about the restaurant. Mr. Miller asked if he could find out the results later, and Dr. Watkins stated absolutely.

A motion was made by Mrs. Andreano to move into an executive session for legal advice, the motion was seconded by Mayor Smith and unanimously approved. After a private discussion, a motion was made by Mrs. Andreano to leave the executive session, seconded by Mayor Smith and unanimously approved. There was no actions taken during the executive session.

A motion was made by Dr. Hamlin to accept the appeal provided by Mr. Wen, owner of the New Lakeview Restaurant, the motion was seconded by Dr. Bohan, and unanimously approved with 6 ayes, and 0 nays. Mr. Haberer was not present for the vote.

A motion was made by Mayor Smith to continue with a monthly inspections, the Board will review each monthly report, and then after three months of inspections; review the need of whether the monthly review would need to continue. The motion was second by Ms. Raftis, and unanimously approved with 6 ayes, and 0 nay. Mr. Haberer was not present for the vote

There being no further business to discuss, a motion to adjourn was made by Dr. Hamlin, seconded by Mayor Smith and unanimously approved.

Respectfully submitted,

Kevin D. Watkins, M.D., M.P.H. Secretary to the Board of Health