

CATTARAUGUS COUNTY BOARD OF HEALTH



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Joseph Bohan, MD, President

Giles Hamlin, MD, Vice-President

Zahid Chohan, MD Kelly J. Andreano, Legislator Sondra Fox, RN, MSN, C.S. Theresa Raftis David L. Smith, Mayor Kathryn Cooney Thrush, NP, MSN Donna Vickman, LPN

MINUTES
June 1, 2022

The 905th meeting of the Cattaraugus County Board of Health (BOH) was held at the Old Library Restaurant on June 1, 2022.

The following members were present:

Joseph Bohan, MD

Kathryn Cooney-Thrush, NP, MSN

Zahid Chohan, MD Giles Hamlin, MD

Theresa Raftis (virtual) Mayor David Smith

Legislator Kelly Andreano

Donna Vickman, LPN

Also present were:

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

Ashley Milliman, County Attorney (virtual)

Julie Hall, Public Health Fellow

Brenda Hanson, Resident (virtual)

Ray Jordan, Senior Public Health Sanitarian (virtual)

Collette Lulay-Pound, Administrative Officer

Rick Miller, Olean Times Herald Reporter (virtual)

Lynne Moore, Director of Nursing

Legislator Kip Morrow

Barb Parish, Supervising Community Health Nurse

Joseph Pillitere, Guest CHBWV

Dave Porter, Hearing Officer

John Rendall, CHBWV Guest Speaker

Bob Ring, Environmental Health Director

Matt Tyssee, Health Educator

Legislator Chairman, Howard VanRensselaer

Kelly Wooley, Guest CHBWV

The meeting was called to order by Dr. Bohan. The roll was called and a quorum was present. Dr. Bohan asked for a motion to approve the meeting minutes from May 4, 2022. A motion to approve the Board of Health (BOH) meeting minutes from May 4, 2022 was made by Dr. Chohan, seconded by Dr. Hamlin, and unanimously approved.

Dr. Bohan spoke regarding former Legislator and Board member James Snyder who passed away on May 11, 2022. Mr. Snyder was a former Cattaraugus County Legislator, who served (13) years as its chairman, and served for numerous years as a Board of Health Member, including President of the Board for (6) years.

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A motion was made by Dr. Bohan to dedicate the June Meeting to former Legislator James Snyder, seconded by Dr. Chohan, and unanimously approved.

DIRECTORS REPORT: Dr. Watkins shared information on the Monkeypox virus, he stated that cases are now rising in non-endemic areas like Europe, North America, and Australia. Most but not all cases are among men who identify as: gay, bisexual, or men who have sex with men. Monkeypox cases have been detected in (23) non-endemic countries, with (257) laboratory confirmed cases and over (120) suspected cases. There are two different types of strands. The latest strand seems similar to the 2018 outbreak but scientists are trying to determine why it is spreading so successfully now, unlike it did in 2018.

Monkeypox is a viral zoonosis which means it will spread from animals to humans. Symptoms are similar to smallpox but clinically less severe. Animals will pass the disease to humans either through a scratch, bite, or by humans preparing and eating infected bush meat. There is also human-to-human transmission which can occur through hugging, touching, or sharing of towels, bedding, clothing, etc., with someone that has Monkeypox. Transmission can also occur via exposure to respiratory secretions within 6 feet of patient, which is a concern.

Originally there were no deaths with the milder strain but now that has changed and we are beginning to see deaths. Nigeria has reported its first death this year, and Congo has confirmed (9) deaths.

Monkeypox can be diagnosed by swabbing the lesion and performing an orthopox test. If there is confirmation, a sample is then sent to the Centers of Disease Control and Prevention (CDC) to perform a real time polymerase chain reaction (PCR) test. Historically, Monkeypox looks like smallpox. Usually, an individual will first develop flu-like symptoms, fever, and lymphadenopathy, followed by a characteristic rash. The rash usually occurs from the head on out to the shoulders, arms, and down to the legs. Current cases have atypical features, including a rash starting in genital and perianal areas as opposed to starting on the head or torso. The lesions mimic chicken pox and syphilis, and can be very painful.

Patient's lesions then turn to scabs which eventually falls off. Monkeypox is usually a self-limited disease, that last (2-4) weeks, and at this point the person could then be released from isolation, which can last on an average of (21) days.

As of date, the U.S. has (18) confirmed cases including (4) in New York City. Persons who received a smallpox vaccination before 1980 could possibly be protected against Monkeypox.

There are two vaccines available for Monkeypox treatment. Unfortunately the demand exceeds the supply. CDC has started to ramp up on the vaccine distribution and has requested an increase in the manufacture's production. An anti-viral treatment for orothopox is available but it is used in rare cases and it's in short supply at this time as well, finally, there is an intravenous vaccine immune globulin that can also be used for treatment.

COVID-19 update – Dr. Watkins informed the Board that this is our fifth COVID-19 surge, he stated that the omicron variant continues to mutate into a number of sub-variants. As of date the department had recorded (20,297) positive cases, of which (19,819) have recovered. Currently there are (259) cases under isolation, and (250) deaths reported due to COVID-19 complications.

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The age group of (19) and under continues to be the age group with the most positive number of cases within Cattaraugus County. As of date (57%) of Cattaraugus County residents have had at least one dose of COVID-19 vaccine, and (53%) have completed their COVID-19 vaccine series.

The surge capacity, which is based on the community and local hospital's ability to handle an influx of patients (in this case, due to COVID-19), shows that there are (13) COVID positive patients admitted at Olean General Hospital, none are in the ICU or intubated at this time. Unfortunately, the hospital is nearly at 95% occupancy. In the community, waste water surveillance shows an increasing trend of COVID-19 in the waste water that is served by the City of Olean. The May 18th waste water surveillance sample revealed a quantifiable detection of COVID-19, suggesting daily case incidences of greater than 50 cases per 100,000.

Several reports from providers describes incidences of COVID-19 rebound occurring in patients after taking the anti-viral therapeutic Paxlovid, Reports indicates that after taking a five day course of Paxlovid, a person who may have felt better and tested negative starts to experience recurrent illness (2-8) days later and some reports indicate the patient test positive again for COVID-19. Dr. Bohan asked why there are more cases occurring in the vaccinated than the unvaccinated at this time. Dr. Watkins responded that most of the unvaccinated have already had COVID and so they have a natural immunity, and rates for reinfections are low. Those who were vaccinated may have never contracted COVID-19 and this new omicron variant (BA.5) has the ability to evade the immunity that was developed in a person who acquired immunity via a COVID-19 vaccine which is leading to the high number of breakthrough cases. In addition, the vaccine boosters have a short life-span, approximately 4-6 months.

CHBWV Update- Dr. Bohan shared that more than half a century ago from (1966-1972) national fuel services reprocessed spent nuclear fuel and nuclear waste at the West Valley site. Unfortunately they still accepted nuclear waste storage until (1975) when leakage was discovered. In (1980) the West Valley Demonstration Project (WVDP) act was passed by Congress to solidify and remove the nuclear waste and decommission the facility and surrounding properties. Since taking control of this site in 2011 WVDP teams have been performing the waste cleanup and facility demolition. The Cattaraugus County Health Department has been regularly briefed regarding their progress. John Rendall, The President and General Manager of CHBWV and the Kelly Wooley, Deputy Manager are here to provide an update. These gentlemen have extensive expertise in radiological demolition, decommissioning, and remediation.

President Rendall shared that CHBWV has had (118) staff positive for COVID-19 over the length of the pandemic, about (44%) have been vaccinated and (64%) are unvaccinated. Currently, the company is in a medium state of COVID-19 controls, which requires weekly testing for unvaccinated employees. Recently, the company was in a high level transmission controls which required everyone to wear masks onsite. CHBWV continues to monitor regional COVID-19 statistics and its personnel in accordance with CDC guidance.

The main plant deactivation has one significant structure left which is the main plant processing building. Staff goes in the building in bubble suits and they remove the contamination as much as practical, and then quality models are run for both the workers and the public's health to determine that low levels have been reached. Once the decontamination has been removed from the building, the building is deconstructed, taking it down block by block. These materials are then shipped off by rail as low level radioactive waste to Utah.

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He added that the total recordable case rate of safety is (0.32), the mid averages for the industry are (2-3) which is much higher. Most injuries are white space injuries not associated with doing the demolition work but more likely from walking from point A to point B.

Ten-twelve years ago a subsurface barrier was installed, constructed with zeolite that acts as a high exchange system, creating a permeable treatment wall. Those soils have now been excavated and sent off. Completion of the demolition of the diesel tank, and the removal of asbestos-containing material from that area has also been completed.

The new work scope includes the construction of a new guard house. There is additional phases to the work, the highest level of nuclear waste is in dry storage and there isn't a federal repository for that at this time. There are two phases left for the site remediation, excavation of the subservice soil, and subservice structure, following that a decision will need to be made on two onsite disposal areas.

The WVDP project continues to give back and support the local community. This past year the company provided (\$80,000.00) to the West Valley Fire District, (\$5,000.00) to Bertrand Chaffee Hospital, (\$5,000.00) to Mercy Flight, (\$12,000.00) to annual community donations, (\$15,945.00) to United Way Campaign, and our annual food drive that provided (119,464) pounds of food delivered to nine local food pantries.

Dr. Bohan asked once the demolition is completed what is envisioned for this acreage. Mr. Rendell replied that it is close to (150) acres, and (1,000) acres of backlands. The backlands will probably be released, the immediate footprint of the disposal areas have not yet been decided. Dr. Chohan asked how West Valley compares to Three Mile Accident, or Chernobyl. Mr. Rendall replied that the threat posed by those examples were much more of an acute threat than posed by the West Valley site. Dr. Watkins asked how much longer funding will be allocated for this project. Mr. Rendell replied that funding will continue at least for the next few years. Mayor Smith asked if the main footprint of the property will be listed by the EPA as a superfund site. Mr. Rendall stated that there would be no guarantee.

ENFORCEMENT LIST: Mr. Porter, Hearing Administrator Officer reported on the administrative hearing held May 10th and 11th, 2022. **DOCKET #22-011:**

Respondent: Ryanne Roulo, 708 Washington Street, Olean, NY, 14760.

Violations: 10NYCRR 67.2.6(b) Ms. Roulo was issued a notice and demand dated 10/1/20 which required the discontinuance of conditions conducive to lead poisoning at 708 Washington Street, Olean, NY by 12/15/20. Original deadline 12/15/20, an extension was granted on the exterior of the property to 7/3/21. Ms. Roulo has not submitted a plan and not made contact with the Health Department.

Recommendation: If the respondent meets the dates above (dates supplied by

respondent) by 6/30/22, rescinded fine of \$100.00. Failure of non-compliance on 6/30/22 will result in a \$600.00 fine replacing the \$100.00 fine and a \$10.00 per day per diem until in compliance.

A motion was made by Dr. Chohan to accept Mr. Porter's recommendation, seconded by Dr. Hamlin, and unanimously approved.

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DOCKET #22-010:

Respondent: Joseph Feutcher, 110 N. 10th Street, Olean, NY 14760.

Violations:10NYCRR Sec. 67-2.6(b) respondent was issued a notice and demand dated 11/23/20 which required the discontinuance of conditions conducive to lead poisoning at 110 ½ N. 10th street located in the city of Olean. Interior deadline was 2/15/21. Exterior deadline was 6/30/21.

Recommendation: The respondent be fined \$150.00 providing the residence at 110 ½ N. 10th Street, Olean is cleared to the satisfaction of the CCHD by 6/30/22. Failure of not meeting the 6/30/22 clearance date will result in a \$600.00 fine replacing the \$150.00 fine and a \$10.00 per day per diem until the fine is paid and the residence at 110 ½ N. 10th St., Olean is cleared to CCHD specifications.

A motion was made by Dr. Chohan to accept Mr. Porter's recommendation, seconded by Dr. Hamlin, and unanimously approved.

NURSING DIVISION REPORT: Mrs. Moore, shared that the current homecare census is (273), for the month of May, there were (111) admissions and (89) discharges. She reported that there were two homecare office staff retiring, but the department has hired two nurses.

In the lead program there were (65) children tested in May and (5) had Elevated Blood Lead Levels (EBLL), [normal <5ug/dl]. The highest blood lead level was (8.4ug/dl). The department is currently following a total caseload of (109) children with EBLL's.

In the clinic, HIV testing for the month of May there were (9) tests performed in Olean, (3) in Salamanca, and (1) in Machias with no positives. The majority of these tests were conducted on females between the ages of 20-39.

Communicable diseases for last month, included (1) case of campylobacteriosis, (14) cases of chlamydia; (3) cases of gonorrhea; (6) cases of chronic Hepatitis C; There were (13) cases of influenza A, no influenza B; (10) probable Lyme's; (3) confirmed cases of syphilis.

There was (2) pre-exposure rabies vaccination series given, (1) post exposure rabies prophylaxis administered, for treatment of a cat bite, and (1) dog bite incident that declined vaccination.

Mayor Smith asked when the County was planning on spraying for mosquitos. Dr. Watkins replied that the department is still doing surveillance at this time, and there has been very low numbers of mosquitos collected at this juncture. The department will be vigilant in their monitoring and will spray as soon as it is necessary.

Ms. Vickman asked what should be done for a tick bite. Dr. Watkins replied that there is a process for removing the tick. Using tweezers, not the fingers, one should grab the tick closest to the person's skin as possible. Gently pull the tick in a steady, upward motion and try not to squeeze the body of the tick. If the tick has not been engorged or on a person for several days, then the likelihood of it passing on borrelia burgdorferi (bacteria that causes Lyme disease) is very low, therefore the risk of Lyme disease is very low.

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If the tick has been engorged or on a person for several days then that person may want to contact their medical provider for a course of antibiotics. Ms. Vickman asked if you could tell by looking at the tick. Dr. Watkins replied that the department no longer analyzes ticks to determine the type of tick or if it carries the bacteria that causes Lyme disease, it's cheaper to err on the side of caution and simply treat the patient based on the history and physical. Legislator Morrow asked if advertisement could be utilized to help the public be proactive in the fight against mosquitos, such as emptying containers of standing water on their property. Dr. Watkins stated yes, great idea, advertisement will be done on social media, radio, and newspaper.

ENVIRONMENTAL HEALTH REPORT: Mr. Ring shared that rabies vaccination clinic held on May 2nd was very successful with a total number of (296) animals that included (74) cats, (220) dogs, and (2) ferrets. There will be two more clinics held later in the year.

The environmental health division will be participating in some public outreach at the Strolean event on June 3rd in downtown Olean. Mainly information on lead, and arbovirus will be offered.

The department's (2) program aides who are conducting mosquito surveillance have begun trapping and dipping for mosquitos and mosquito larvae. The population is currently low based on our records but the next time the Board meets a more statistical data of where the numbers are will be provided. The department has been informed that any materials for mosquito spraying for adulticide or larvacide will be delayed by (6-10) weeks from date of order which is a significant delay. Another effort that the department is undertaking is sending educational letters to individuals that have large collections of tires on their properties, which can harbor high volumes of mosquito larvae, to remove or cover up those tires. If the educational efforts are not responded to, then enforcement efforts will begin.

Outreach has begun to municipalities regarding the bipartisan infrastructure law, as there will be funding available over the next five years. The Bipartisan Infrastructure Law delivers more than \$50 billion to EPA to improve the nation's drinking water, wastewater, and storm water infrastructure. There was a recent webinar available to municipalities through their water and sewer operators, and town supervisors. There is a deadline in July to submit their grant applications for the first year of the bipartisan infrastructure law.

Old/New Business: Dr. Watkins shared that there was one action item for the Board. The department would like to add a new vaccine to department's vaccine schedule. The vaccine is Prevnar 20 pneumococcal vaccine, which is used to immunize or prevent pneumonia and the invasive disease that it causes. There are (20) stereotypes of pneumonia that the vaccine protects against. A motion to approve this additional vaccine to the current schedule was made by Mayor Smith, seconded by Ms. Vickman, and unanimously approved.

There will be no Board meeting in the month of July. A motion to adjourn was made Legislator Andreano, seconded by Dr. Chohan and unanimously approved.

Respectfully submitted,

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