

AGENDA
BOARD OF HEALTH
LAKE COUNTY GENERAL HEALTH DISTRICT
October 17, 2022

- 1.0 Call Meeting to Order, President Randy Owoc
- 2.0 Opening of Meeting
 - 2.01 Declaration of Quorum
 - 2.02 Citizen's Remarks
 - 2.03 Certification of Delivery of Official Notices of Meeting
- 3.0 Board of Health
 - 3.01 Minutes, Regular Meeting September 19, 2022
- 4.0 Health District Staff Reports
 - 4.01 Clinical and Community Health Services Report
 - 4.02 Environmental Health Report
 - 4.03 Finance and HR Director
 - 4.04 Health Education and Outreach Report
 - 4.05 Population Health & Emergency Planning
 - 4.06 Health Commissioner's Report
- 5.0 Committee Meetings
 - 5.01 Negotiating Committee, Meeting Held October 17, 2022
 - 5.02 EH Advisory Committee, Meeting Held October 17, 2022
- 6.0 Old Business
 - 6.01 Board of Health Tracking

7.0 New Business

7.01 Resolutions

7.01.01 Certification of Monies, Resolution 22-10-07-01-01-100

7.01.02 Increase/Decrease Appropriations, Resolution 22-10-07-01-02-100

7.02 Permission to Submit NEHA-FDA Retail Flexible Funding Model Grant, \$5,000

7.03 Permission to Purchase Vehicles for the Health Department, Not to Exceed \$200,000.00

7.04 Permission to Accept the FFY 2023 Lake County Safe Communities Coalition Grant, \$38,500.00

7.05 Permission to Enter into a Contract with Wickliffe City School District Board of Education for Nursing Services during the 2022-2023 School Year at a Rate of \$50.00 per Hour

7.06 Recommendations from the Environmental Health Advisory Committee, Meeting Held Prior to the Board Meeting

7.07 Resolution to Increase Certain Fees, Food Service Program, First Reading

7.08 Recommendations from the Negotiating Committee, Meeting Held Prior to the Board Meeting

7.09 Executive Session

7.10 Permission to Pay Cemex an Additional Amount to Replace Damaged Concrete in the Health District's Heisley Road Parking Lot, Not to Exceed \$2,000.00

8.0 Adjournment

1.0 Call to Order

The regular meeting of the Board of Health of the Lake County General Health District was called to order at 3:00 p.m. on Monday, October 17, 2022, by President Randy Owoc. The meeting was held at the Lake County Health District office located at 5966 Heisley Road, Mentor, Ohio.

2.0 Opening of Meeting

2.01 Declaration of Quorum

The following members were present constituting a quorum:

Roger Anderson	Steve Karns	Ana Padilla
Dr. Alvin Brown	Brian Katz	Dr. Lynn Smith
Dr. Irene Druzina	Patricia Murphy	David Valentine
Rich Harvey	Randy Owoc	Lindsey Virgilio
Nicole Jelovic		

Minutes were recorded by Gina Parker, Deputy Registrar.

Also present from the Health District staff:

Dyan Denmeade	Adam Litke	Dawn Pierce
Kristen Fink	Chris Loxterman	Kristi Pinkley
Ron Graham	Bert Mechenbier	Tim Snell
Muhammad Jafar	Kathy Milo	Paul Stromp
Dan Lark	Gina Parker	Jessica Wakelee

Also in attendance: Richard Piraino, Geauga Public Health Board of Health President.

2.02 Citizens' Remarks

There were no Citizens' Remarks.

2.03 Certification of Delivery of Official Notices

Certification of delivery of the official notices of the regular meeting of the Board of Health on October 12, 2022, was made by Health Commissioner Ron H. Graham.

3.0 Board of Health

3.01 Approval of Minutes

Brian Katz moved and Dr. Alvin Brown seconded a motion that the minutes of the September 19, 2022, Board of Health meeting be approved as written; motion carried.

4.0 Health District Staff Reports

4.01 Community Health Services

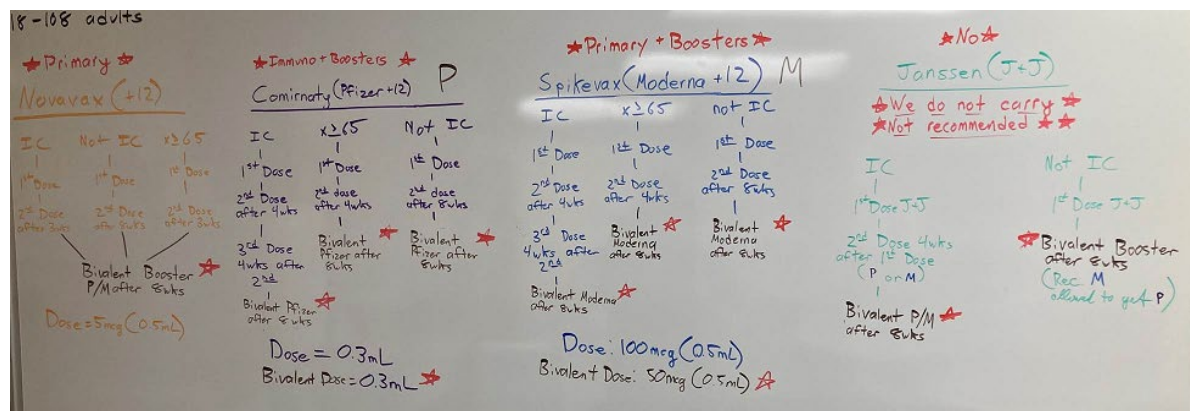
4.01.01 Division Director's Report

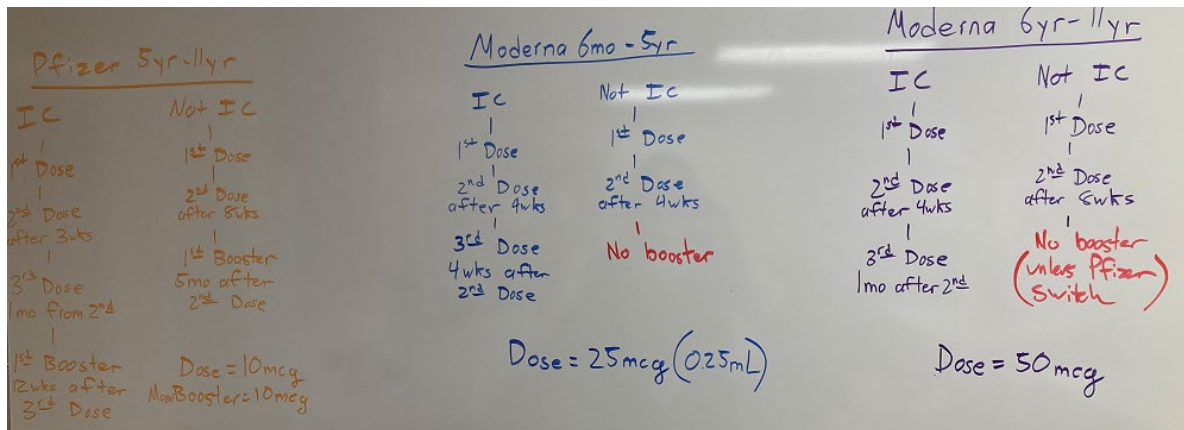
4.01.01.01 Updates and Special Topics

September has been an extremely busy month with vaccinations on all front, routine children, routine adult, and COVID-19. We have also been busy planning our 2022-2023 flu season clinics. The school year is well underway for all our school districts, as we assist with regular start of the year nursing tasks, such as hearing screenings, vision screenings, start of year paperwork, and immunization verification. We have been working closely with the state to ensure we are able to receive enough vaccines for the Vaccines for Children program as our numbers have increased in the last calendar year. Due to the pandemic, our VFC numbers were based on 2018-2019 data.

COVID-19 Updates

The most current COVID-19 Vaccine Flow Charts are below. The CDC and ODH are moving towards being very specific when referring to COVID-19 vaccines as monovalent or bivalent to decrease the risk of miscommunications and medication errors. This change has been reflected in our own COVID-19 administration policies.





Divisional Quality Improvement Activities

We continue to work on improving the process of creating electronic patient charts.

Grants

Get Vaccinated Ohio (GVO)- \$47,999.00

Grant period: 7/1/2022-6/30/2023

- D1- Immunization Reminder and Recall System: On track, Quarter One report submitted
- D2- Immunization Coverage Disparities: Waiting on ODH training
- D3- Immunization Provider Identification: Completed, submitted
- D4- Immunization Quality Improvement for Providers: Training completed, on track
- D5- Provider Education-MOBI and TIES: Initial training completed, on track
- D6- Perinatal Case Identification and Follow-up: on track
- D7- School Immunization Assurance: List completed and submitted, waiting on ODH training

COVID-19 Vaccinations (CN22)-\$381,235.00

Grant period: 1/1/2022-6/30/2023

- A1- Staffing and Personnel Activity: No changes, Quarter Three report submitted
- A2- Using Vaccine Equity Data for Prioritization: on track, Quarter Three report submitted
- A3- Promotion Efforts for Vaccine Awareness: on track, Quarter Three report submitted
- A4- Mobile and Off-Site Vaccine Efforts: on track, Quarter Three report submitted
- A5- Vaccine Efforts through Community Based Organizations: on track, Quarter Three report submitted
- A6- Vaccine Efforts through grass-roots organizations: on track, Quarter Three report submitted
- A7- Vaccine Efforts in high-SVI defined areas: on track, Quarter Three report submitted
- A8- Vaccine Registration Process- on track, Quarter Three report submitted
- A9- Distribution of Vaccine Incentive Cards: N/A, Quarter Three report submitted

The Quarter Three Expense Report has been submitted.

4.01.02 School Health Services Program

4.01.02.01 **School Health Services Manager's Report**

We are currently serving 12 different schools in 5 public school districts and 2 private school districts. These include Perry Local School District, Mentor Exempted Village, Madison Local School District, Fairport Harbor Exempted Village, Our Shepherd Lutheran School, Wickliffe City Schools, and Mater Dei Academy. 8 out of 11 school clinic nurses are completing competency training, which is self-paced, including 39 school trainings (3 are yearly through ODH) and 12 CHS trainings. The self-paced courses taken by the staff throughout the month of August include: Fema-IS: 100.C, Fema-IS: 200.C, Fema-IS: 700.B, Fema-IS: 800.D, Trans 101, Seizures for school personnel, Public health 101, Childhood vision screenings, Enduring course Day 1-Day2-Day3, HIPAA/FERPA, School aged screenings, YCTS Modules 7, 4, 5, 3, 11, 14, 9, 13, 16, 12, 15, 6, 2, 1, 18, 10.

We have a new staff member on board, Sarah Van Vechten. She was hired as a PHN II and will be a sub nurse for schools, working on CMH, and assisting with childhood immunization clinics. LaVona Ball has decided to put in her resignation and retire from her career. Her role was to sub at schools, assist with COVID-19 12188 hotline, and E-clinical entry. She was a valued employee here at the LCGHD and we will miss her, but we wish her well in retirement life. We are serving Wickliffe City Schools for the duration of October. Wickliffe reached out and stated they needed coverage for their nurse at the elementary school. We decided to offer as needed nursing services to them. We will have Sarah, our new PHN II, fill in at Wickliffe elementary school while their nurse is out. We will remain contracted as needed for the year even after their nurse returns to the elementary school.

Brittany Rowan, Kristina Breakall and Lexi Parsons completed a first aid/CPR/AED instructor course from American Red Cross. We plan to start training and certifying school teachers, community members, and LCGHD staff in First aid/CPR/AED. This will begin in late October with planning still in process.

4.01.03 Clinical Services Programs

4.01.03.01

Immunization Clinics

Childhood/Adult

Routine childhood immunizations have been steady with most kids needing 7th and 12th grade vaccines. We administered a total 91 vaccines for the month of September with clinics being held on 9/14/22 at the health department in Mentor, 9/24/22 on the mobile bus at Fairport Harbor fire station, 9/26/2022 at the health department in Mentor, and 9/29/22 at the health department in Mentor. A total of 36 children were seen in the month of September, with 11 being private pay

and the remaining 25 qualifying Vaccine for Children (VFC). VFC vaccines are provided to participating Health Departments are no charge, and are provided to qualifying children for no/reduced cost. VFC and private immunization doses that were administered include; DTaP, Pediarix, Kinrix, Pentacel, Tdap, Hep A, Hep B, Hib, Gardasil, Meningitis, Rotavirus, Pneumococcal, MMR, Polio, and Varicella. Primary and follow up appointments are currently scheduling into December. We have opened at least 2 routine childhood immunization clinic dates each month to accommodate for the increase of calls and recalls we are seeing. We have opened 2 additional days in November to administer flu vaccines to children. We have resubmitted our yearly VFC numbers to ODH for an increase in our vaccine allocation due to increased demand for VFC vaccines.

Influenza

Influenza clinics have been scheduled at 7/9 senior centers in the county, with Fairport Public Library stepping up to be a site for their area. Business clinics have also been scheduled at our same locations from last year. Public flu clinics are being planned for November, dates are not confirmed as of this writing.

COVID-19

Immunization Count per IMPACTSIIS

January	1537	July	341
February	337	August	245
March	391	September	381
April	649	October	143*
May	288	November	
June	263	December	

*Data collection in progress

Children with Medical Handicaps (CMH)

An update for this section will be available in the next report. For now, any questions or needs that arise from this program are being handled on a case-by-case basis by Dyan Denmeade.

Communicable Disease

We have a new patient with a case of Latent Tuberculosis who is receiving Direct Observation Therapy (DOT) from us. Their expected length of treatment is four months. We have been working closely with the county to ensure the County Tuberculosis Fund has the appropriate funding and payments made from it.

With Kristina Breakall’s resignation, this job will be reposted to hire. Dyan Denmeade will be covering this position until it is filled with assistance from Epidemiology.

Child Passenger Safety and Infant Safe Sleep

	Jan	Feb	March	April	May	June	July	August	Sept	Total
Car seats	2	15	7	5	7	6	12	12	4	70
Boosters	0	1	1	0	3	0	1	0	0	6
High Back Boosters	n/a	2	0	0	0	4	8	3	6	23
Cribs	n/a	1	0	4	4	5	3	1	0	18

Lead

August 2022

Total Children 0-6y Tested in Lake County			Elevated Level 5-9 ug/dL	Elevated Level 10-44 ug/dL	Elevated Level 45+
High Risk Zip-code	718		5		
Not High Risk Zip-code	435		2		
Total	1153		7		
Total Tested By Sex					
Female	550		3		
Male	602		4		
Unknown	1				
Total	1153		7		
Total Tested By Age					
Less than 1y	66		6		
1 Year	622				
2 Year	294				
3 Year	78		1		
4 Year	60				
5 Year	33				
6 Year	0				
Total	1153		7		

September 2022

Total Children 0-6y Tested in Lake County			Elevated Level 5-9 ug/dL	Elevated Level 10-44 ug/dL	Elevated Level 45+
High Risk Zip-code	809		6		
Not High Risk Zip-code	490		4		
Total		1299	10		
Total Tested By Sex					
Female	617		5		
Male	681		5		
Unknown	1		0		
Total		1299	10		
Total Tested By Age					
Less than 1y	71		0		
1 Year	706		7		
2 Year	323		1		
3 Year	90		2		
4 Year	72		0		
5 Year	37		0		
6 Year	0		0		
Total		1299	10		

Dyan Denmeade provided the following highlights:

- *Setting up for the digital data loggers for vaccines in the freezer. They should be shipped out this week for recalibration and back by November 8, 2022.*
- *Pfizer and Moderna bivalent boosters will be available soon for children 5 years and older. Appointments are already being scheduled for the end of October, beginning of November.*
- *We have had a large increase of children eligible for the Vaccines for Children program. This includes any child without insurance or who are underinsured, is enrolled in Medicaid, or is an American Indian/Alaskan Native. During 2018-2019, there were 126. Currently this year, we have had 226. The uninsured group had the largest increase from 70 to 132, respectively.*

Discussion:

Brian Katz asked if the flu vaccine is available. Dyan Denmeade said we have some supply. Board members can receive them on the day of the November meeting.

Dr. Irene Druzina said homebound patients appreciate that the health department was making house calls. Dyan Denmeade said house calls are made for flu and COVID vaccines once a week, twice a week if needed. Ron Graham said we are trying to keep it a priority even with the staff turnover.

Dr. Alvin Brown said he received a COVID vaccine at the Salvation Army clinic and the nurses did a great job.

Patricia Murphy asked who can take advantage of the CPR trainings. Dyan Denmeade said that the plan is to train the public, such as through senior centers, schools, and libraries.

Patricia Murphy asked why the tuberculosis (TB) patient is receiving direct observation therapy. Dyan Denmeade said that the Ohio Department of Health recommends observation if the patient is taking TB medications.

Dr. Irene Druzina said that the trainings she participated in for high school students for the American Heart Association included NARCAN and drug overdose information. Dyan Denmeade said the certification they received is through the American Red Cross and she is not aware of that being a component.

4.02

Environmental Health

4.02.01 Division Director's Report

4.02.01.01

Updates and Special Topics

Federal Emergency Management Agency (FEMA) Graded Exercise at the Perry Nuclear Power Plant (PNPP)

The Lake County General Health District Field Monitoring Team (FMT) participated in the FEMA PNPP graded exercise held on September 27. Our FMT has a total of 10 members on the team; eight of which were present for the drill. Two teams consisting of two members were evaluated in the FMT vans, 2 team members were evaluated at the EOC for their coordination roles, and the remaining 2 team members that were present acted as controllers and relayed information to the FMT vans.





LCGHD is unique as we are one of the only local field monitoring teams in the country. The majority of all other counties with nuclear power plants rely on state teams. The advantage of having a local team is the speed with which we can respond to a potential release at the power plant. During work hours we could have teams monitoring for a radioactive plume within 90 minutes of notification. Our best guess for the state teams to arrive in the area is a minimum of 5 hours. This is important, as the data we collect is a way to verify the PNPP onsite monitoring equipment and computer models are accurate. The data we collect is used by the

County Commissioners and the Ohio Department of Health to make public safety decisions such as to shelter in place or the evacuation of an area.

The evaluators for the September drill commented about how well our team is trained. We take this very seriously and have a training plan in place. Potential team members start with a basic radiation course which explains what radiation is and how it can affect humans. Once this class is completed and the candidate has a knowledge of radiation they can then become part of the monitoring team. Training continues with both radiation theory exercises, As Low As Reasonably Achievable (ALARA) principals, and hands on with our specific equipment. The entire team trains six times a year in non-drill years and the members chosen to participate in the graded exercise will train more in preparation for the drill. Because of the extensive training, both theory and hands on, our team is able to complete its duty of collecting data in a timely and safe way.



The Environmental Health leadership participated in the usual monthly meetings, Leadership Work Group, Workforce Development, and Continuous Quality Improvement.

4.02.02 Air Pollution Control Programs

4.02.02.01 Unit Supervisor's Report

Air Pollution Control

The staff participated in a UEEPA Technical Services Audit conference call held on September 26. This all-inclusive audit will take two weeks and will include: defending data points, interviews about our processes, and a site visit. A report will be generated within 45 days of the audit's end.

Air Pollution staff participated in the Federal Emergency Management Agency PNPP graded exercise held on September 27. The evaluators made favorable comments about our vans and the knowledge of the team members. A comment was also made about how we can get our samples and analyze them while adhering to "As Low As Reasonably Achievable" ALARA, principals to reduce radiation exposure to our team.

4.02.03 General Environmental Health Programs

4.02.03.01 Unit Supervisor's Report

Food Safety

The staff were able to complete 217 standard food inspections, 42 reinspections, 6 pre-licensing inspections, 7 temporary inspections, 23 complaints, 9 consultations, and 8 plan reviews.

In addition, they completed 3 outdoor pool inspections, 3 indoor pool inspections, 2 pool equipment inventory inspections, and 1 school inspection.

An office hearing occurred for the Willoughby Waffle House. The focus was for equipment not operating properly.

Housing

Lake County Elder Interdisciplinary Team

C. Loxterman attended the monthly meeting.

4.02.04 Vector-borne Disease Program

4.02.04.01 Unit Supervisor's Report

Mosquito Control

With the arrival of the cooler evening temperatures, we have stopped our adulticiding spraying as of September 22. We were able to spray all of our routes three times and some problem areas a fourth time. Our next goal will be to get the trucks, sprayers, and surveillance equipment ready for storage.

4.02.05 Water and Waste Programs

4.02.05.01 Unit Supervisor's Report

Continuous Quality Improvement (CQI)

The Pool Disinfection Violation QI project is still in the data collection phase and will be analyzed at the scheduled October meeting.

A QI training on process evaluation and mapping is scheduled to go out to the staff early November.

Storm Water



Stream water sampling with chemical testing and macroinvertebrate collections were conducted in the Chagrin River at Buttermilk Creek (Old River Farm) with the 7th grade class from Willoughby-Eastlake School of Innovation. This was a group educational effort from LCGHD, Chagrin River Watershed Partners, Lake County Soil & Water Dept., and the Lake County Stormwater Dept. to bring water quality education to 7th grade science classes.



Good housekeeping (MCM6) inspections were conducted in Mentor on the Lake, Kirtland, Willoughby, and Fairport. SWPPP's (Stormwater Plans) have been updated for each location inspected.

Yearly Good Housekeeping presentation/training will be conducted Oct 20th for all member communities needing training. Topics include illicit discharges in the community and new Ohio EPA rules and regulations that affect their facilities.

Winter stormwater article submitted to Mentor Winter Newsletter: "Don't Litter This Winter" talks on common pollutants cigarette butts, plastics and the 3 R's (Reduce, Reuse, Recycle).

Sewage Treatment

Operation and Maintenance Program:

On October 25th the Liquid Waste division will be hosting a continuing educational training for our registered septic installers and service providers for household sewage treatment systems. The training will be at the Richard Martin Learning Center located at the Lake County Solid Waste Facility. 50-60 of our registered contractors will be attending to obtain their required continuing education hours. This year we will have Dr. Sara Heger as our guest speaker. She is a researcher and instructor at the University of Minnesota in the Onsite Sewage Treatment Program in the Water Resources Center and is an Adjunct Assistant Professor in the Bioproducts and Biosystems Engineering Department.

Solid Waste

Staff have been conducting inspections at the licensed compost site throughout the county.

Staff conducted the monthly municipal waste landfill inspection at the Lake County Solid Waste Facility.

The Lake County Solid Waste Facility license application process has been completed on the Ohio EPA e-business website for license year 2023.

Water Quality

No report at this time.

Bathing Beach

The bathing beach monitoring program came to a close on September 6th and the final report was submitted with the final invoice on September 26th.

4.02.06 **Board Action Status**

Note: New entries are bold faced

Program	Name	Pol. Sub.	BOH Ref. Date	Status

Dan Lark provided the following highlights:

- *Bert Mechenbier said the Perry Nuclear Power Plant drill held on September 27, 2022, was hostile action based. He said a lot of time went in to planning the training and the teams did very well. There were no findings from the Federal Emergency Management Agency (FEMA).*

Discussion:

Dr. Brown asked what would be the difference in time for the state to arrive for an incident compared to the county. Bert Mechenbier said it would probably take about five hours for the team to be assembled. Also the state has set areas they can work on. The county has the relationships of working together all the time. There are not many counties in which the health departments are involved in the HAZMAT teams.

4.03
Finance and HR Director’s Report

4.03.01 **Miscellaneous**

1. Elevator update has been completed.
2. Carpeting replaced with laminate flooring in Vital Stats.
3. Working on finalizing new lease agreement with Elara Caring.
4. Additional building updates that are being worked on:
 - a. Automatic opening doors
 - b. Carpeting in numerous area of building
 - c. Windows throughout building
 - d. Concreate repairs in parking lot

4.03.02 **Divisional Quality Improvement Activities**

1. Working on revamping the process for staff and management reviews.
2. Talk with staff daily regarding status of finances, grants, etc.

4.03.03

Employment

1. Open Positions
 - a. Public Health Nurse II
 - b. Breastfeeding Peer Helper
 - c. Registered Dietician
 - d. Licensed Practical Nurse
2. New Hires
 - a. None
3. Promotions
 - a. None
4. Lay-Offs / Terminations
 - a. None
5. Retirements
 - a. None
6. Resignations
 - a. LaVona Ball – Certified LPN – September 20, 2022
 - b. Kristina Breakall – Public Health Nurse II – October 14, 2022
7. Job Abolishment
 - a. None
8. Cancelled Positions
 - a. None

Lake County General Health District				
MONTHLY FINANCIAL REPORT		Sep-22		
RECEIPTS	YTD	BUDGET	% RECD	YTD LESS BUDGET
Environmental Health Receipts	\$ 1,442,577	\$ 1,418,500	102%	\$ 24,077
Public Health Nursing	\$ 9,021	\$ 41,000	22%	\$ (31,979)
Federal Grants	\$ 1,332,142	\$ 2,442,045	55%	\$ (1,109,903)
State Grants	\$ 773,016	\$ 950,000	81%	\$ (176,984)
Local Contracts	\$ 768,998	\$ 679,000	113%	\$ 89,998
Vital Statistics	\$ 308,390	\$ 382,100	81%	\$ (73,710)
Miscellaneous	\$ 403,194	\$ 96,000	420%	\$ 307,194
Tax Dollars	\$ 2,840,240	\$ 2,840,241	100%	\$ (1)
Rental Income	\$ 68,635	\$ 86,136	80%	\$ (17,501)
Capital Improvement	\$ 27,850	\$ -	#DIV/0!	\$ 27,850
TOTAL RECEIPTS	\$ 7,974,062	\$ 8,935,022	89%	\$ (960,960)
Beginning Cash Balance	\$ 7,482,407	\$ 6,206,680	121%	\$ -
TOTAL - ALL FUNDS	\$ 15,456,470	\$ 15,141,702	102%	\$ (960,960)
DISBURSEMENTS				
Salaries	\$ 3,212,268	\$ 4,126,050	78%	\$ (913,782)
Fringe Benefits	\$ 1,167,617	\$ 1,586,550	74%	\$ (418,933)
Contract Services	\$ 681,979	\$ 727,950	94%	\$ (45,971)
Program Supplies, Marketing, Health Ed.	\$ 356,981	\$ 657,950	54%	\$ (300,969)
Office Supplies and Postage	\$ 26,625	\$ 95,100	28%	\$ (68,475)
Transportation and Travel	\$ 55,444	\$ 77,650	71%	\$ (22,206)
Building Expense	\$ 255,254	\$ 158,525	161%	\$ 96,729
Equipment	\$ 139,952	\$ 309,000	45%	\$ (169,048)
Returns	\$ 3,463	\$ 6,900	0%	\$ (3,437)
Operating Expenses	\$ 347,006	\$ 558,750	62%	\$ (211,744)
Contingency	\$ -	\$ 250,000	0%	\$ (250,000)
Capital Improvement	\$ -	\$ 400,000	0%	\$ (400,000)
SUB TOTAL	\$ 6,246,592	\$ 8,954,425	70%	\$ (2,707,833)
Obligations from previous year	\$ 398,830	\$ 398,830	100%	\$ -
TOTAL DISBURSEMENTS	\$ 6,645,421	\$ 9,353,255	71%	\$ (2,707,833)
CARRYOVER	\$ 8,811,048	\$ 5,788,447	66%	\$ 3,022,601
# MONTHS & % OF YEAR	9	12	75.00%	

		September	
Fund #	Fund Name	2022	2021
001	Health Payroll Reserve Fund	\$ 500,168.00	\$ 250,168.00
002	Immunization Action Plan	\$ 46,080.93	\$ 47,952.23
003	Manufactrd Homes, Parks, Camps	\$ 18,850.00	\$ 14,570.00
004	Water Systems	\$ 60,143.50	\$ 42,985.50
005	WIC	\$ 144,030.43	\$ 66,581.38
006	Swimming Pool	\$ 71,855.22	\$ 57,161.47
007	Board of Health	\$ 3,639,625.88	\$ 3,571,725.51
008	Vital Statistics	\$ 264,146.75	\$ 197,716.92
009	Tuberculosis Record Program	\$ -	\$ -
010	Food Service	\$ 543,124.46	\$ 607,319.64
011	Health Promotion and Planning	\$ 154,481.03	\$ 154,481.03
012	Health Budget Stabilization Fund	\$ 500,000.00	\$ 250,000.00
013	Public Health Nursing	\$ 210,688.88	\$ 646,446.62
014	Air Pollution Control	\$ 28,120.90	\$ 139,397.02
015	Solid Waste Site	\$ 258,465.65	\$ 196,487.02
016	Help Me Grow	\$ -	\$ -
017	Public Health Infrastructure	\$ 280,467.65	\$ 250,632.28
018	Safe Community Program	\$ 66,317.87	\$ 51,894.20
019	Ryan White Title I	\$ -	\$ -
020	HIV Prevention Grant	\$ 18,655.45	\$ 18,655.45
021	Child and Family Health Services	\$ 1,218.86	\$ 1,218.86
022	Family Children First Council	\$ -	\$ -
023	Sewage Treatment Systems	\$ 625,474.67	\$ 528,338.67
024	Dental Sealant	\$ -	\$ -
025	Carol White Grant	\$ 3,794.84	\$ 3,794.84
026	Permanent Improvement	\$ 701,165.23	\$ 339,719.19
027	FDA Food Service	\$ 93,610.54	\$ 77,431.69
028	Tobacco Use Prevent & Cessation	\$ 222,022.16	\$ 168,527.80
029	Office of Health Policy & Performance	\$ 356,804.90	\$ 450,787.30
997	AFLAX/Voya	\$ 1,734.55	\$ 1,734.55
Total Cash		\$ 8,811,048.35	\$ 8,135,727.17

Adam Litke provided the following highlights:

- *State Medical Director for the Ohio Department of Public Safety, Division of EMS Dr. Carol Cunningham received her COVID booster at LCGHD. Pictures were also taken for the state's use.*
- *There were two resignations in Community Health Services, which was noted in the report.*

4.04

Health Education and Outreach

4.04.01.01

Division Director's Report

State WIC received correspondence from USDA that they have extended the allowance of the provision of non-contract brand formulas through October 31, 2022. Additionally, other waivers and flexibilities related to the provision of additional contract brand sizes and foreign formulas will also now be available through December 31, 2022, ensuring WIC families have continued access to the formula they need.

WIC received a small grant called "Put a Lid On It!" The grant was through the Ohio Chapter, American Academy of Pediatrics to distribute bike helmets with education. Thirty-six bike helmets were distributed through the WIC clinics in Lake County.

The Huntsburg clinic moved to Chardon on September 15. The first clinic was held on September 21. Everything is going well and the participants are excited we are in Chardon.

The Management Evaluation took place on September 28 and 29 virtually.

STATE WIC called and asked if Lake-Geauga Registered Dietitians would be able to assist the Ashtabula WIC clinics throughout the month of September. Ilana Litwak was scheduled for 5 times to go to Ashtabula and help them out. At this time, they only had one Registered Dietitian on staff. The Director of Ashtabula WIC was very grateful that we were able to assist them in their time of need.

For the month of September and part of October, Lake-Geauga WIC will have an Intern. Aly Wend from Kent State University will be rotating through all of the clinics and will be able to have a firsthand experience of being a Dietitian in WIC.

The WIC Director met with Nora Spade from Crossroads Health on September 2 to discuss on how to collaborate within the Wickliffe Family Resource Center.

Meetings and trainings attended:

September 12 – Health Services Meeting – Lake
September 12 – STATE WIC Formula Meeting
September 19 – Board of Health meeting
September 19 – WIC staff meeting
September 20 – Lake County Economic Forum
September 20 – CLAS Committee
September 28 and 29 – Management Evaluation

Divisional Quality Improvement Activities:

The Continuous Quality Improvement (CQI) Project for Women, Infants, and Children (WIC) is to increase the caseload in Wickliffe WIC. The Committee continues to act on projects to increase caseload such as participating in health fairs and partner with other agencies within and outside of the Wickliffe Family Resource Center.

4.04.02 Women, Infants and Children (WIC) Unit Report

Nutrition Education

Starting this month, two of our WIC Registered Dietitians, Michelle Yako and Marley Siegel, are teaming up with Lake County Youth Leadership Program Director, Gina Fletcher, to teach a group of nearly 40 students about the importance of adequate nutrition and maintaining a healthy diet. This program is called the “Healthy Snack Initiative” and will help to teach Lake County students about various nutrition topics, along with learning more about the prevalence of food insecurity within Lake County. For the month of September, Marley and Michelle discussed the importance of snacking and provided tips, tricks, and recipes for students to implement into their daily routines. They also provided the students with insight on how to become a dietitian, what it means to work as community dietitians, and who the WIC program serves. Marley and Michelle provided “sandwich kabobs” as a snack and taught the students how to make them at home!



Breastfeeding Update

	Breastfeeding Initiation Rates	Breastfeeding Rates
October 2021	52%	28%
November 2021	51%	28%
December 2021	55%	27%
January 2022	41%	23%
February 2022	42%	22%
March 2022	47%	23%
April 2022	51%	27%
May 2022	49%	26%
June 2022	53%	26%
July 2022	66%	34%
August 2022	69%	36%
September 2022	72%	37%

State WIC Updates

Clinic Caseload: September 2022

CLINIC	FY22 Assigned Caseload	September Caseload	% Caseload
Painesville	1,255	1,292	102%
Wickliffe	828	828	100%
Madison	315	315	100%
Chardon	234	234	100%
Middlefield	117	117	100%
Caseload	2,749	2,786	+37

Clinic Show Rate: September 2022

CLINIC	January Show Rate	February Show Rate	March Show Rate	April Show Rate	May Show Rate
Painesville	93%	86%	95%	90%	86%
Wickliffe	85%	82%	82%	78%	81%
Madison	78%	89%	92%	95%	82%
Huntsburg (G)	83%	88%	78%	92%	80%
Middlefield (G)	70%	76%	100%	81%	82%

CLINIC	June Show Rate	July Show Rate	August Show Rate	September Show Rate	October Show Rate
Painesville	95%	86%	96%	91%	
Wickliffe	87%	82%	83%	86%	
Madison	83%	89%	100%	90%	
Chardon (G)	88%	91%	92%	75%	
Middlefield (G)	75%	75%	73%	67%	

Clinic Activity in: September 2022

Activity	Scheduled	Attended	Show Rate %
Re-certifications	135	112	83%
Certifications	207	187	90%
Individual Educations	653	571	87%
High Risk Clients	100	87	87%

Kathy Milo provided the following highlights:

- *The Management Evaluation exit interview occurred on October 11. Ron Graham, Ilana Litwak, and Kathy Milo were part of the interview. Overall the Lake-Geauga WIC program is doing great. There were two findings: Nutrition goals need to be more specific and the Breastfeeding Peer Help was never a WIC participant or eligible for WIC, which is in state policy. However, there are no repercussions for the findings. The Breastfeeding Peer Helper is doing a fantastic job! The State is aware that this is happening around the state and they are discussion how this can be changed.*

4.05

Population Health and Emergency Planning

4.05.01

Population Health Coordinator

Progress towards assembling LCGHD's required documentation for reaccreditation continues. Christine Margalis continues to review and revise narratives and examples submitted by staff members for LCGHD's reaccreditation submission. As of this writing, 42 of 90 required examples have been finalized for submission. Christine submitted LCGHD's reaccreditation application on September 26, and is waiting to be invoiced for the annual fee and the document submission portal to become available. Target date for document submission is still the end of 2022.

University Hospitals approved the 2022 Lake County Community Health Needs Assessment at its meeting on September 21, therefore the document has been released. A press release was issued on October 6, and the document is currently being shared with community organizations and partners LCGHD's epidemiology team is preparing a high-level voiceover slide show to highlight the CHNA's contents, and will soon be available to host the presentation with community organizations.

Meetings with community partners to construct the 2023-2025 Lake County Community Health Improvement Plan (CHIP) have begun. At the first meeting on September 28, 13 individuals representing 11 organizations reviewed health assessment data, participated in a visioning activity, and were introduced to the framework for strategy selection. Next meetings will be on October 12 and October 26 at the United Way of Lake County.

4.05.02

Health Education

Tobacco Use Prevention and Cessation Program

Christine Schriefer and with the assistance of Emily Kolacz continued to work on the Tobacco Use Prevention and Cessation Program (TUPCP) Grant deliverables for this new grant year TU23. The main sections of the strategic plan, created by the Lake County Health Equity Tobacco Workgroup, have been approved by the Ohio Department of Health. Christine and Emily continue to work with the Tobacco Cessation Workgroup on implementing the strategic plan with the community and other agencies/organizations. Christine and Emily continue work on implementing a Tobacco Retail License policy in the city of Mentor. Christine and Emily are working with American Heart Association and Tobacco21 to work on implementing a TRL in the city of mentor. Christine has attended the following webinars and meetings regarding gaining knowledge on the Tobacco Retail License policy and tobacco cessation/prevention in the community.

The following TUPC grant deliverables were submitted to ODH:

- Deliverable Objective IB1-Activity 1 Community Survey
- Deliverable Objective IB1- Activity 2 Report on Survey Results
- Deliverable Objective IB1- Activity 3 Review Survey Data
- Deliverable Objective P3A- Activity 2 Identify Key Partners
- Deliverable Objective Y5C-Activity 1 Select youth project and partner
- Deliverable Objective Y5C-Activity 2 Identify and recruit youth
- Deliverable Objective H6B- Activity 2 Support and assistance for promotional plan
- Deliverable Objective H6B- Activity 3 Identify partners for initial implementation for promotional plan
- Deliverable Objective H6B- Activity 4 Strategic Plan timeline for promotional plan

Meetings/Trainings/Presentations Attended by Christine Schriefer:

- TU23 (community engagement and support) webinar -9/01
- American Heart Association meeting-9/2

- S.A.D.D meeting-9/6
- Smoking and people with mental illness webinar-9/8
- Hometown Hero event-9/10
- Vaping Webinar-9/13
- Adaptation to Stress webinar-9/13
- TU23 lake county call-9/14
- Meeting with UH/Lake-9/14
- ETU Quarterly Webinar-9/15
- American Heart Association meeting-9/16
- Meeting with Mentor High school principal-9/16
- Meeting with Perry Middle school counselor-9/19
- Meeting with Perry High school environmental teacher-9/19
- Tobacco Budget meeting-9/20
- Healthy Days webinar-9/20
- TU23 all hands call-9/20
- Mental health webinar-9/21
- TU23 ODH (Tobacco Retail Licensing)-9/22
- Tobacco Cessation workgroup-9/22
- Examination of tobacco user health webinar-9/27

Capacity Building for Healthy Eating and Active Living (HEAL)

Emily Kolacz continued to work on the Tobacco Use Prevention and Cessation Program (TUPCP) Grant deliverables. The 2022 Lake County Survey on Tobacco has been completed; 606 individuals took the survey. Social media posts continued to run on LCGHD's Facebook and Twitter page, with the posts reaching 4,207 people on Facebook, 377 people on Twitter, and 22 people on Instagram in the month of September.

Emily continued to work on the Capacity Building for Healthy Eating and Active Living (HEAL) Grant deliverables. She plans to work with the St. Gabriel Food Pantry, to find ways in which to encourage the food pantry guests to be healthier; she is currently waiting for them to look over and sign the Memorandum of Understanding. She is continuing to work with the City of Painesville to complete the Policy, Systems, and Environmental Change Assessment and Planning Tool.

Meetings/Trainings/Presentations/Events Attended by Emily Kolacz

- Coffee Contacts- 9/1
- Mentor/American Heart Association TRL Meeting- 9/2, 9/16
- Students Against Destructive Decisions Meeting- 9/6
- ODH Weekly Call- 9/7, 9/21
- MRC Well Check Webinar- 9/13
- TU23 One-on-One Monthly Call- 9/14
- CHC All Project Monthly Call- 9/15
- TU23 Monthly All Hands Call- 9/20

- Lake Catholic Homecoming Blitz- 9/22
- Tobacco Workgroup Monthly Meeting- 9/22
- HEAL Friday Huddles- 9/23, 9/30
- ThinkFast Interactive at Harvey High School- 9/26
- Lake County Community Health Improvement Planning Meeting- 9/28
- Employee Wellness Fair at West Medical Center- 9/29

Safe Communities

- The FY2022 Safe Communities grant ended September 30.
- September car crash fatalities – 0 (Data Source: SAU Fatal Crash Database)
- Public Information & Education – Total people reached: 142,285
 - Social Media – 141,700 (Mentor Police Department – 14,1700)
 - Event Contacts – 585
- Meetings/Trainings/Events attended:
 - Hometown Heroes Event – September 10
 - Think Fast Interactive – Harvey High School – September 26
 - Lake Health/University Hospitals Employee Health Fair – September 29
 - Mentor High School Homecoming Blitz – September 30

Project DAWN/Integrated Naloxone (IN23)

- All deliverables are on schedule.
- # of Naloxone kits distributed: 37 kits distributed
- # of people trained: 16
- # of reversals: 0 known
- Added **Life Spring Ministry** as a Community Access distribution location
 - Agency completed documentation to train and distribute naloxone
 - Received 25 kits
- Meetings/Presentations/Webinars Attended:
 - OPN Data Subcommittee meeting – September 6
 - Ohio Overdose Prevention Network, Overdose Fatality Review Workgroup – September 13
 - ODH Project DAWN Quarterly Call – September 14
 - Suicide Prevention Coalition meeting – September 16
 - Syringe Service Program Workgroup meeting – September 22
 - Harm Reduction Expansion meeting – September 27
 - The Lake County Opioid Alliance meeting – September 28
 - Life Spring Ministry service entity training – September 30

Ohio Department of Mental Health & Addiction Services Allocation

Project DAWN, funded by the Ohio Department of Health, is now the current facilitator of naloxone distribution for first responders.

- # of kits provided to LE agencies: 0
- # of law enforcement naloxone administration reported: 1
- # of doses needed: Person two – 2 doses
- # of ER transports reported: 1 unknown
- # of lives saved: 1

Meetings/Trainings/Presentations Attended by Nikesha Yarbrough:

- Coffee Contacts meeting – September 1
- Worksite Wellness for Small Business meeting – September 1
- School District Superintendent meeting – September 8
- Lake County Economic Forum – September 20
- Culturally and Linguistically Appropriate Services (CLAS) meeting – September 20
- Lake County Discussion with the Cleveland Clinic – September 23

Marketing & Communications

Anna Wilson attended committee meetings throughout the month: Marketing Committee and Cultural and Linguistic Appropriate Services (CLAS) Committee, as well as meetings regarding media. She coordinated ad placements (one being for September), ad design, and editorial with a print magazine. She continued to create and manage social media content daily and oversaw social media engagement using Hootsuite and Meta Suite. She also completed her HIPAA training and registered for the PIO Basics training coming up in October in Cuyahoga Heights.

She completed social media calendars for Tobacco Cessation, Naloxone, Safe Communities/Traffic, and Food Safety for October through the end of 2022. Each calendar was sent to division and/or program leaders to review for accuracy before scheduling. Anna also began and nearly completed a content calendar of awareness days, weeks, and months through year end. Toward the end of September, Anna began social media content planning and identified growth and engagement goals for Jan 2023 – June 2023 for each platform LCGHD has a presence. She began research in the following areas that are of particular interest and have some opportunity for increased engagement, diversified content, and growth: awareness days, messaging surrounding the holidays, special and original campaigns, short-form videos, series, and collaborations.

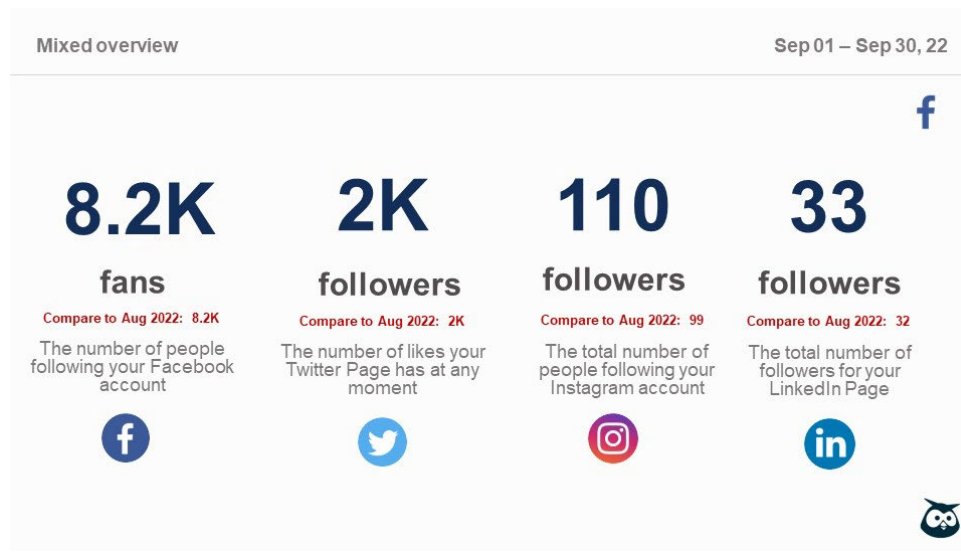
With the help of coworkers, she finalized the branding survey questions and administered the survey in mid-September which gauged staff's preferences regarding LCGHD branding, template designs, and usability. Once the survey closes, she will provide a summary of the results and themes to the Marketing and Website committees in October. These results will inform updates to the website and Marketing guidelines.

Meetings/Trainings Attended by Anna Wilson:

- Media/Marketing Meeting – 9/6, 9/20
- MPX Messaging/Touch base meeting – 9/7
- ODH Press Conference – 9/8
- Survey Meetings – 9/12, 9/15

- Newsletter Meeting – 9/12, 9/13, 9/26
- Marketing Committee Meeting – 9/14
- HIPAA Training – 9/19
- CLAS Committee Meeting – 9/20
- ODH Call – 9/7, 9/21, 9/28

September Social Media Statistics



Page engagement (all)

431

Compare to Aug 2022: 1.2K

The total number of interactions (reactions, comments, and shares) received by your Pages' posts as well as by other posts on Facebook that mention your Pages (that is, reactions to user check-ins, event responses, mentions, likes of your Pages, and more)



50

Compare to Aug 2022: 58

The total number of interactions (retweets, replies, quotes, and likes) received for the tweets published in the selected time frame



16

Compare to Aug 2022: 7

The total number of likes, comments, and saves received by the photo, video, and carousel posts published in the selected time frame



6

Compare to Aug 2022: 2

The total number of likes, comments, and shares received on content associated with your Pages



Page engagement (all) > Type



Reactions
258, Compare to August: 619
engagements

Shares
96, Compare to August: 248
engagements

Comments
77, Compare to August: 310
engagements

Post Clicks
1.1K
Compare to Aug 2022: 3.7K

Content Clicks
3.3K
Compare to Aug 2022: 13K

The total number of interactions (reactions, comments, and shares and clicks) received by your Pages' posts as well as by other posts on Facebook that mention your Pages (that is, reactions to user check-ins, event responses, mentions, likes of your Pages, and more)



Post key interactions > Type



Retweets
21, Compare to Aug: 27
engagements

Likes
28, Compare to Aug: 29
engagements

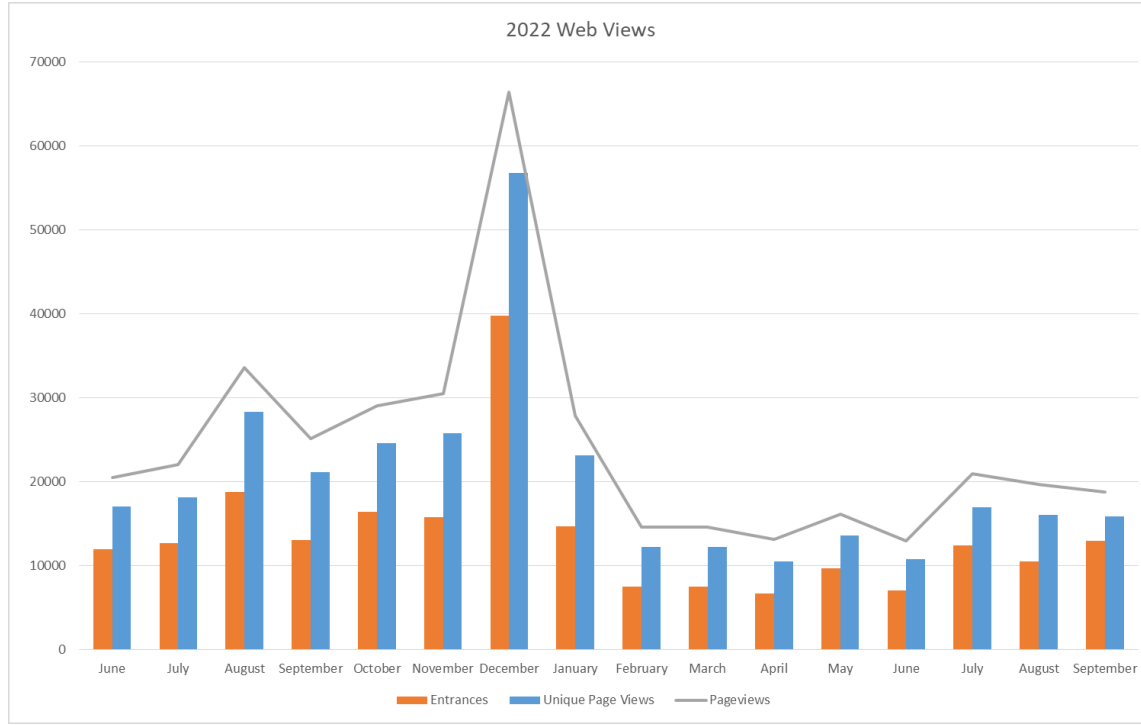
Replies
0, Compare to Aug: 1
engagement

Quote tweets
1, Compare to Aug: 1
engagements

The total number of interactions (retweets, replies, quotes, and likes) received for the tweets published in the selected time frame



Website Analytics



4.05.03

Emergency Preparedness and Epidemiology Manager

In late September, LCGHD received approval to reallocate up to 25% of its new COVID-19 Enhanced Operations (EO22) subgrant for response to monkeypox (MPX). Allowable activities for MPX are similar to those for COVID-19 under this grant: testing, case investigation, contact tracing, infection prevention/control, and health communication. Shortly after receiving this approval, the Ohio Department of Health (ODH) notified local health departments that they could apply for supplemental funds for the express purpose of transitioning epidemiologists who have been provided to work with their departments from an ODH-sponsored contract since January to being directly hired by the department as Ohio's contract with CDC Foundation expires on October 15th. LCGHD has elected to take this option to continue our relationship with our CDC Foundation epidemiologist, Yusra Fawad, who works remotely from Indiana. Yusra has been instrumental in assisting with case investigations, producing the monthly COVID-19 reports in 2022, starting a seasonal flu surveillance report as well as spearheading a number of other data projects as the epi group has been working to expand over the past year. Yusra will join the epi team as a full-time temporary LCGHD employee on October 17 through the end of the EO22 grant July 31, 2023. Due to this development, LCGHD is awaiting a formal reallocation for an additional \$45,000 to be processed by ODH before re-submitting the EO22 budget. Yusra will assist with COVID-19 case investigation and COVID data reporting as her primary roles, and will be allocated up to one day a week to assist with Monkeypox, and will be added for coverage one day per week to the Workforce Development grant to allow her to assist with other data-related activities and projects.

Planning for LCGHD's foodborne outbreak full scale exercise, "No Such Thing as a Free Lunch" has continued throughout the month of September, and Jessica Wakelee and Public Health Associates Sarah Tomkins and Amani Alam have continued to meet with Environmental Health Supervisor for the Food Program, Cady Stromp, and Director of Nursing for Elara Caring, Kathy Acosta to make plans for the exercise, which will occur over 1.5 days on November 10th and 11th. The Midterm Planning Meeting was held on September 8th, and also attended by Christopher Zukoski from the Ohio Department of Health, who will be coordinating assistance from ODH for simulation during the exercise. Three meetings were held to plan the Master Scenario Events List (MSEL), which is the script of scenario injects that trigger actions to be taken during the exercise on September 14, 20, and 26th.

Jessica Wakelee has also continued to work closely with Christine Margalis and the team from University Hospitals and Conduent to finalize the Community Health Needs Assessment, and the epidemiology team will be assisting with summarizing data and determining appropriate indicators to track as the process of developing the Community Health Improvement Plan proceeds.

4.05.04

Emergency Preparedness

Preparedness Specialist Dawn Cole issued three internal situation reports in September.

Dawn Cole participated in the Perry Nuclear Power Plant graded exercise on September 27, 2022. Her role was to report to the Joint Information Center (JIC) at Auburn Career Center as LCGHD's Public Information Officer (PIO) and serve as a subject matter expert for potassium iodide. Ms. Cole received special mention for coordinating and communicating well with county PIOs and the PIO from the Ohio Department of Health (ODH).

Dawn Cole coordinated the creation of the monkeypox guidance documents for physicians and clinicians with the Epidemiology and Nursing teams.

The following Public Health Emergency Preparedness (PHEP) and Cities Readiness Initiative (CRI) grant deliverables were submitted to ODH:

- PHEP Deliverable-Objective 3.1 – Whole Community Communications Planning Workbook
- PHEP Deliverable-Objective 4.1 – Emergency Response Planning Workbook
- PHEP Deliverable-Objective 6.1 – Epi Meeting Attendance
- PHEP Deliverable-Objective 9.1 – Regional Integrated Preparedness Plan Workshop (IPPW)

The following PHEP and/or CRI grant deliverables were approved by ODH:

- PHEP Deliverable-Objective 3.1 – Whole Community Communications Planning Workbook
- PHEP Deliverable-Objective 4.1 – Emergency Response Planning Workbook
- PHEP Deliverable-Objective 6.1 – Epi Meeting Attendance
- PHEP Deliverable-Objective 9.1 – Regional Integrated Preparedness Plan Workshop (IPPW)

Meetings/Trainings Attended:

- ODH/Local Health Department Wednesday Call with Local Partners every Wednesday in September.
- Monkeypox State, Tribal, Local, and Territorial Calls with the Centers for Disease Control and Prevention every Thursday in September.
- Northeast Regional Epidemiology and Public Health Planning meetings on September 9, 2022.
- Regional IPPW on September 12, 2022
- Subrecipient Point of Dispensing and Community Drop Site/Local Drop Site Demobilization Plan Deliverable Webinar sponsored by ODH on September 12, 2022.
- Northeast Ohio Health Care Coalition Public Information Officer Workgroup meeting on September 29, 2022, of which PHEP is the chair.

Marketing Committee

The Marketing Committee met to discuss website updates being implemented by the Website Committee and to finalize the templates survey that will be administered to LCGHD staff to inform changes to the marketing templates. The survey was released to staff on September 16, 2022 with a deadline of September 23, 2022.

Quality Improvement Updates

No new updates at this time.

4.05.05

Epidemiology

Epidemiologist Joseph Rombough started with LCGHD on September 12th. During the second half of September, Joseph has been completing onboarding training, gaining access to data systems, and becoming acquainted with LCGHD's data projects and sources, as well as training with Muhammad Jafar and Tania Nanavati to conduct communicable disease investigations.

To date, Lake County has had nine confirmed cases of Monkeypox, four of which were reported and investigated in September. No close contacts have been identified for cases confirmed in September. A total of 80 Lake County residents have been vaccinated for Monkeypox as of the end of September.

During the month of September, Lake County had a total of 1,778 COVID-19 cases reported, down approximately 27% from August's caseload. For the month of September, weekly case counts declined throughout the month. LCGHD epidemiology staff investigated 183 COVID-19 cases in the 0-18 age group, and 58 in the 65+ age group during the month of September.

Table 1: COVID-19 cases during the month of September 2022

Dates	Cases
8/31 – 9/3	146
9/4 – 9/10	384
9/11 – 9/17	318
9/18 – 9/24	245
9/25 – 9/30	207
Total	1,300

The Epidemiology Team investigated six EpiCenter anomalies during the month of September. None of these required further follow-up.

LCGHD investigated eight COVID-19 outbreaks during the month of September, seven of which were in long term care facilities. This included 51 staff and 58 residents to date, with some reporting ongoing. No hospitalizations or deaths have occurred from these outbreaks to date. All seven facilities were offered infection control strategies, and were sent the latest recommendations and guidelines. Outbreak Investigator Tania Nanavati had individual discussions with each facility on how best to decrease transmission within their facilities. None of the facilities scheduled official ICARs. Additionally, LCGHD investigated one outbreak associated with a wedding party, which included 3 confirmed and six additional suspected cases that were not able to be reached to complete case interviews. LCGHD also investigated an outbreak of RSV at a daycare center resulting in 19 illnesses among children, three of whom were hospitalized. Finally, LCGHD investigated one foodborne outbreak associated with a restaurant in Mentor which resulted in two reported illnesses, but no specific etiology was able to be identified.

Led by Tania Nanavati, a team from LCGHD including Communicable Disease Nurse Kristina Breakall and Paul Stromp conducted a site visit at Project Hope to help provide guidance on reducing COVID-19 transmission and provide protection for their guests. The visit included a review of the ICAR Assessment tool, walk-through of the building, discussion of strategies for distancing, better infection control practices the team made recommendations on spaces that could be designated for isolation and quarantine should there be positive cases in the facility. Recommendations were also made for staff safety. Project Hope will likely need access to rapid tests and staff were provided contact information to request as needed.

Communicable Diseases reported among Lake County residents through September 2022 are provided below.

Communicable Disease Report	2022 Year												2021 Year End Totals	2020 Year End Totals	
	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC			(1/1/22 to current date)
Babesiosis	0	0	0	0	0	0	0	0	0				0	0	0
Campylobacter	1	2	1	3	2	5	4	3	3				24	31	22
CP-CRE	2	1	4	1	0	1	3	3	4				19	25	35
Chikungunya	0	0	0	0	0	0	0	0	0				0	0	0
Chlamydia	40	40	38	41	39	72	30	36	24				360	591	647
COVID-19	6552	476	278	702	1458	1070	1749	1778	1300				15363	28435	13100
Coccidioidomycosis	0	0	0	0	2	0	0	1	0				3	2	2
Cryptosporidiosis	0	0	0	0	0	0	2	0	0				2	5	0
Cyclosporiasis	0	0	0	0	0	0	0	0	0				0	2	2
E. Coli 0157:H7	0	0	0	0	2	0	2	0	0				4	7	4
Ehrlichiosis/anaplasmosis	0	0	0	0	0	0	0	1	0				1	1	0
Giardia	1	0	0	0	2	1	0	1	0				5	6	11
Gonorrhea	9	2	11	3	5	19	13	13	8				83	237	246
Haemophilus Influenza	0	0	0	0	1	2	0	0	0				3	0	0
Hepatitis A	1	0	0	0	0	3	0	0	0				4	8	11
Hepatitis B (perinatal)	0	0	0	0	0	1	0	0	0				1	3	3
Hepatitis B acute	0	0	0	0	0	0	0	0	0				0	1	0
Hepatitis B (chronic)	7	9	2	2	1	1	1	6	1				30	41	12
Hepatitis C (acute)	0	0	0	0	0	0	0	0	0				0	0	0
Hepatitis C (chronic)	14	15	12	11	14	15	12	16	16				125	177	169
Hepatitis C (peri-natal)	0	0	1	0	0	1	0	0	0				2	1	1
Hepatitis E	0	0	0	0	0	0	0	0	0				0	2	0
Influenza-Hospitalized	1	3	3	14	11	2	0	0	0				34	2	200
La Crosse Virus Disease	0	0	0	0	0	0	0	0	0				0	0	0
Legionnaires Disease	0	1	0	0	1	1	1	3	4				11	20	11
Listeriosis	0	0	0	0	2	0	0	0	0				2	1	0
Lyme Disease	1	0	0	1	1	3	6	3	4				19	43	15
Monkeypox	0	0	0	0	0	0	2	3	4				9	0	0
Malaria	0	0	0	0	0	0	0	0	0				0	0	1
Meningitis-aseptic/viral	0	0	0	0	0	0	0	0	0				0	0	4
Meningitis, Bacterial not Neisseria	2	0	0	0	0	0	0	0	1				3	12	1
MIS-C associated with COVID-19	0	0	0	0	0	0	0	0	0				0	1	1
Mumps	1	0	0	0	0	0	0	0	0				1	0	0
Mycobacterium Tuberculosis	1	1	0	0	0	0	0	1	0				3	3	0
Pertussis	2	0	1	0	3	1	1	0	0				8	4	18
Rocky Mountain spotted fever	0	0	0	0	0	0	0	0	0				0	0	0
Salmonella	0	1	1	2	1	2	0	5	3				15	32	19
Shigellosis	0	0	1	1	0	3	0	1	1				7	3	2
Staph Aureus VRSA	0	0	0	0	0	0	0	0	0				0	0	0
Streptococcal Group A (GAS)	2	1	3	2	0	0	1	0	0				9	13	6
Streptococcal Group B Newborn	0	0	0	0	0	0	0	0	0				0	0	0
Streptococcus Pneumonai(ISP)	2	0	1	3	3	1	0	0	0				10	18	9
Syphilis	1	0	1	2	1	1	1	0	0				7	25	38
Tetanus	0	0	0	0	0	0	0	0	0				0	0	0
Varicella	4	2	1	0	0	0	2	3	1				13	17	10
Vibriosis	0	0	0	0	0	0	0	0	0				0	0	0
West Nile Virus	0	0	0	0	0	0	0	0	0				0	1	2
Creutzfeldt-Jakob Disease	0	1	0	0	0	0	0	0	0				1	1	0
Yersinia	0	0	0	1	0	0	0	1	0				2	1	0
Totals	6644	555	359	789	1549	1205	1830	1878	1374				16183	29772	14602

Jessica Wakelee provided the following highlights:

- *The Public Health Accreditation Board (PHAB) accreditation application has been submitted. There is currently a delay in the PHAB portal being open for uploading the documents. The issue is being worked out by PHAB.*
- *The first two meetings have been held for the Community Health Improvement Plan (CHIP). Mission statements have been drafted and partners are outlining their strategies.*
- *Yusra Fawad has been our CDC Foundation appointed epidemiologist. Ohio's contract with the CDC Foundation for epidemiologist support has ended, but she will continue to provide temporary support through July to help with the COVID and monkeypox data. Funds were acquired by LCGHD to employ her through the remainder of the Enhanced Operations grant period.*
- *ODH began monitoring for ebola. We will be informed of any Lake County travelers coming in to the United States from Uganda by way of the following airports: New York City, Newark, Washington, DC, Atlanta, and Chicago.*

Discussion:

Patricia Murphy asked for a BOH presentation regarding CHIP once completed.

Dr. Irene Druzina asked if all Lake County monkeypox cases were connected. Muhammad Jafar said there were no common links of those interviewed. There are no positive cases for anyone under 18 years of age in Lake County.

4.05.06

Board of Health Education: Operation and Maintenance Program Update

Liquid and Solid Waste Sanitarian Kristi Pinkley began her presentation at approximately 3:25 p.m. She provided a progress update of the Operation and Maintenance program and lessons learned along the way.

Operation & Maintenance of Home Sewage Treatment Systems

Progress Update and Lessons Learned

Kristi Pinkley, REHS



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What is the O&M Program?

- Tracking through ongoing permits that all HSTs are being maintained to a minimum standard based on their system design to:
 - Preserve our waterways
 - Mitigate sewage nuisances
 - Elongate system lifetimes
 - Prevent disease transmission
 - Safeguard property values
- Mandated by ODH in 2015 rule update
- Will affect **ALL** HSTs



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Why were O&M rules passed?

- “Approximately 31% of all household sewage treatment systems throughout the state of Ohio are experiencing some degree of failure.” – ODH 2012 Clean Watersheds Needs Survey Report
- Northeast Ohio: ~38%
- Although several factors affect system performance, ongoing maintenance is a significant factor we *can* control



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LCGHD Program Set Up

- Systems monitored for compliance through submission of service/pump reports
- Permits designate the type and frequency of required maintenance, per their design
- There are 3 permit categories to encompass the needs of the various system types



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Permit Costs & Conditions

System Type	Permit Term	Permit Cost Per Term	Permit Conditions, i.e. Service Requirements Per Term
<ul style="list-style-type: none"> ➤ NPDES Discharging ➤ Spray Irrigation 	1 Year	\$160*	Current Service Contract for 2 Service Reports
<ul style="list-style-type: none"> ➤ Pretreatment to Soil Absorption ➤ Drip Distribution ➤ Non-NPDES Discharging 	1 Year	\$40	1 Service Report
<ul style="list-style-type: none"> ➤ Septic Tank to Soil Absorption 	5 Years	\$100	1 Pump Report (or Service Report)

*Includes Annual LCGHD Sample Cost



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Basic Overview



- ~13-15,000 HSTs in Lake County
- **ALL** are scheduled for enrollment by the end of 2024
- So far: ~9400 entered
 - 1 Year Permits: 3100 (20-25% of Lake Co)
 - 5 Year Permits: 6300
 - All remaining *should* be 5-year permit types



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Phased Approach



- Highest risk systems entered first
- Consistent workload throughout the year
 - ~450 letters sent/month



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Phased Approach



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 - ~450 letters sent/month



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Phase 5 – Lessons Learned

- All remaining systems are similar in design
- Order of enrollment is determined for logistical benefit
 - One area of the county at a time
 - Consistency & communication among neighbors
 - Efficiency of travel for service & enforcement
 - Easier to track enrollment progress
 - Ease of targeted communication or events



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Phase 5 – Lessons Learned

- Alternate between East & West side of Lake County
 - Distribute workload among inspectors
 - Less “targeted against” one area
- Entry into the program is **NOT** based on receipt of pumping or service records (except if missed during previous phase)
 - Don’t want to punish good-faith efforts



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New & Improved Permit Letter!

- Limitations of our software previously constrained our ability to format the letter with charts, images, dates, bolding, etc.
- Just purchased upgrade to software that gives nearly complete flexibility
- Letter has been shortened to one page front & back
- Looks like an actual bill



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Features of the New Letter

- Shows a specific fee due date
- Shows a specific due date for service/pumping
- Has an official-looking permit
- Includes a link to our website for more info
 - Can pay by check, cash, or *online through our homeowner web portal*
 - Educational materials



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Non-Compliance Enforcement

- Will not start until all known systems are enrolled into the program (by 2025)
- Working with legal to determine best and fairest procedure – Stay tuned*
- Want to put the costs of non-compliance on the non-compliant homeowners, not everyone
- Ultimately care about **compliance**



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Non-Compliance *Plans*

- Hope to increase permit fee based on non-compliance within last permit term
- Higher fee in effect until system is either:
 - a. Serviced/pumped as required by their permit

OR

 - b. Homeowner agrees to allow LCGHD to evaluate system for a nuisance condition at their cost



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Non-Compliance Inspections

- Basic visual inspection onsite
- No service performed – liability concerns
- Evaluating only for presence of a nuisance
- Fee is a deterrent
 - No desire to compete with our registered contractors
 - We can't fix the system, only, at best diagnose
 - Goal: **Compliance**



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Questions?



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The presentation ended at approximately 3:49 p.m.

Discussion:

Brian Katz asked if there was a fine for non-compliance. Kristi Pinkley said that is being discussed with the Prosecutor's office. They recommend waiting until all systems are phased in to the program.

Dr. Lynn Smith asked if Ashtabula and Geauga counties also have O/M processes in place. Adam Litke said that Ashtabula does not yet. Kristi Pinkley said Geauga is in the process of rolling out a similar format to ours.

Dr. Irene Druzina asked if anything is waived for homeowners that complete the certification course. Kristi Pinkley said the permit fee cannot be waived, but if trained, homeowners can service their own tanks. Dan Lark said the courses will start again. Homeowners haven't always followed through with report submissions, though.

Steve Karns asked what percent of systems are not compliant. Kristi Pinkley said 70% are in compliance, 30% are not. She hopes that the new letter and enforcement will help. If needed, the higher fees with the permit cost itself can be assessed on taxes for non-compliance.

Compliance is the goal.

Rich Harvey asked if the estimated number of systems (13,000-15,000) is correct. Kristi Pinkley believes it is accurate. They are currently running reports against the auditor's listing and the sewer listing. Dan Lark said that Kristi is well-known throughout the state for her work on this program. She is a great resource to other counties.

Nicole Jelovic asked what the percent of compliance is at currently. Kristi Pinkley said about 80% of homeowners pay on time, about 70% are getting the services they need.

Ron Graham said a custom build of the computer software used was created for the O/M program. Dan Lark said we are trying to make it easier for homeowners to be compliant.

Steve Karns suggested an update be provided to the Board of Health regarding the program in six months.

Randy Owoc asked what the average size of a system is. Kristi Pinkley said that a two-thousand gallon tank is the largest. The average cost for pumping a tank is \$250-\$300.

Rich Harvey asked if there are more problems in areas with city water than those with well water. Kristi Pinkley said they have not looked in to that yet.

4.06

Health Commissioner's Report

4.06.01

New Boards of Health Continuing Education Modules Available

Kent State College of Public Health has created additional learning modules to assist local boards of health meet their two-hour annual continuing education requirements. Access all of the learning modules here: <https://www.kent.edu/publichealth/local-boards-health-continuing-education-lectures>

4.06.02

Answering Questions on the State of the Pandemic

Many people are asking when the pandemic will end or if the pandemic is over. Although vaccination has come a long way in combating COVID-19 and boosters remain on the right track, **COVID-19 continues to be a serious threat in some communities—and especially for people who are at highest risk of severe disease.**

Updated messaging guidance helps to answer questions about the state of COVID-19, following President Biden's recent statement on *60 Minutes* regarding the end of the pandemic. Here are topline tips and considerations to help communicate about the state of the pandemic and the continuing need for precautions:

- Emphasize the progress we've made
- Explain that the threat remains
- Emphasize public health recommendations
- Recognize uncertainty
- Underscore the role of public health

4.06.03

House Bill 463/Senate Bill 324 – Considerations

It is critically important that lawmakers who are discussing legislation that would have far reaching impacts on local public health have a full understanding of the current laws that govern that system in Ohio. Since local health districts are funded from and derive their authorities from a variety of sources, including local and state and federal, a local health district does not fit well with either the local government paradigm or the state government paradigm. Even seemingly innocuous changes must explore a variety of potential consequences.

Appointments to Local Boards of Health (BOH) – Role of the District Advisory Council (DAC)

The Ohio Revised Code section 3709.03 sets forth three ways by which Board of Health Members can be appointed:

1. The DAC appoints the BOH member at its regular meeting.
2. If there is no quorum at the regular DAC meeting, the members present appoint an executive committee charged with making BOH appointments within 30 days.
3. If the executive committee fails to appoint within 30 days, the director of health shall appoint the BOH member.

The health commissioner may be requested by the DAC to seek willing volunteers to serve on the Board of Health, but the health commissioner is not a voting member of the DAC and has no independent authority to appoint a member to the board of health.

Association of Ohio Health Commissioners (AOHC) recommends the following to assure inclusivity and transparency of BOH appointments:

- Allow township fiscal officers to serve on the District Advisory Council (DAC) as the townships' representatives.
- Require the Health Commissioner to serve as the nonvoting secretary for the DAC to assure the appointment process, as outlined in statute, is consistently executed.
- In instances when a physician who lives or works within, or serves residents from the jurisdiction, is unable or unwilling to serve on the board of health, expand health professionals permitted to serve on the board of health to include APRNs, veterinarians, or pharmacists who work within or serve residents from the jurisdiction.
- Prohibit former employees of a board of health from serving on the board, using language similar to local Alcohol, Drug Addiction, and Mental Health (ADAMH) boards: <https://codes.ohio.gov/ohio-revised-code/section-340.02> (G)
- Require boards of health to speak to term limits in their bylaws.
- Require all counties, townships, villages and cities represented on the DAC to announce any board of health vacancies to their citizens.
- Require all counties, townships, villages and cities represented on the DAC to announce the date and time of the DAC meetings to their citizens.

Local Health District Budget Approval/Financial Checks and Balances

The Ohio Revised Code Section 3709.28 sets forth the process by which a general health district budget is reviewed by the county budget commission.

1. This process is invoked in the event a general health district requests to receive any part of its revenue for a fiscal year from an appropriation apportioned among the townships and municipal corporations composing the district. Based on annual financial data submitted by all LHDs to the state health department every year, approximately one third of all LHDs receive inside millage in this fashion. *This process is consistent with the requirement for the budgets of all political subdivisions in the county, including the county itself, to be reviewed by the county budget commission.*
2. The county budget commission has the authority to reduce the appropriation to be apportioned among the townships and municipal corporations composing the district. This process is invoked in the event a general health district requests to receive any part of its revenue for a fiscal year from an appropriation apportioned among the townships and municipal corporations composing the district. Based on annual financial data submitted by all LHDs to the state health department every year, approximately one third of all LHDs receive inside millage in this fashion.
3. The county budget commission has the authority to reduce the appropriation to be apportioned among the townships and municipal corporations composing the district.

4. Currently, the financial monitoring and oversight of local health districts is substantial. All local health districts must:
- Complete the Annual Financial Report, as required by the Ohio Department of Health, every year. This report includes detailed reporting of all revenue by source and expenses by programmatic area. This report is due on April 1 of each year for the previous fiscal year.
 - Undergo audits on a regular basis in accordance with the requirements with the Auditor of State. These audits are conducted at the health districts' expense.
 - Publish an annual report that includes financials to their community and submit that report to the Ohio Department of Health.
 - Complete cost methodologies for all state mandated environmental health programs to assure that fees cover only the costs of those programs. Any proposed changes to those fees must receive three public readings in accordance with state statute prior to adoption.
 - For all fee-based programs, undergo surveys conducted the applicable state agency according to the state agency schedule. If the local health department receives an unsatisfactory score in this survey process, the state agency can withdraw authority for the LHD to conduct the program.
 - For all grant funded programs, undergo desk audits by the state or federal agency that granted the funds. These audits are typically conducted during the grant period so that any discrepancies can be identified and corrected before the grant period is complete.

AOHC recommends the following additional measures to assure accountability and transparency in the local health district budgeting process.

- If requesting inside millage for the upcoming fiscal year, present to the DAC the estimated anticipated request for the following fiscal year that will go to the Budget Commission.
- Fiscal training – set forth a requirement for new fiscal officers, unless the individual holds a training certification in Finance Governmental Management or a CPA, to complete within their first year of employment – including key aspects of governmental public health financial management, statutory and compliance requirements, and principles of planning, levies, and cost methodology.
- Require the Boards of Health to post annual reports, including revenue and expenses and other financial information, on their website.
- Require all audits of boards of health to be published on their websites.

Local Health District Financial and Levy Recommendations

In the course of discussions about HB 463, funding of local health districts has been identified as a key concern. Health district funding is inherently complicated as a variety of sources are combined to fund programs and operations. Health districts *may* receive:

1. Federal funds, primarily in the form of grants either directly from the federal government or passed through the Ohio Department of Health.
2. A small state subsidy (state GRF) of **17 cents per capita for non-accredited LHDs and 34 cents for accredited LHDs**, as compared to:
 - a. IN - \$4.26 per capita
 - b. KY - \$3.93 per capita in fiscal year 2022-2023 and \$4.23 in fiscal year 2023-2024.
 - c. MI - \$5.16 per capita
 - d. PA - \$4.30 per capita
3. Inside millage from cities, villages and townships served by the health district and approved by the Budget Commission.
4. Local levy dollars.
5. Fees from programs such as food service inspections, pool inspections, home septic system inspections that are determined by a “cost methodology” that ensures that boards can, at best, break even on inspections.
6. Vital statistics records.

For over a decade, Ohio local health districts have engaged in national studies to fully understand what constitutes “foundational public health services” and how to appropriately fund those services. Not surprisingly, the data that compares Ohio to other states shows a woeful lack of funding, with a disproportionate load falling to local governments and local citizens. The data also shows wide disparities in both funding and public health programming in Ohio communities. In fact, a study by the Health Policy Institute of Ohio (HPIO) shows that Ohio ranks 47th in health value as compared to the other 49 states and the District of Columbia.

AOHC recommends that the following provisions be included in HB 463, in an effort to begin to address the funding challenges faced by local health districts:

- Require the state to directly fund state mandated programs such as accreditation and environmental health. Despite being the only state in the country to mandate accreditation, the state provides no ongoing revenue to support those efforts and defray the expenses associated with the mandate. Rather, those state-required costs fall squarely on local governments and levy supported dollars. Several public health programs required by the state such as communicable disease investigation, nuisance abatement, vital statistics and safe water assurance likewise receive no state funding support.
- Allow local levies to be used to support both programs and operations of health districts. Currently, only programs may be supported by levy dollars. Adding flexibility will allow for more efficient uses of these dollars.
- Add authority for local boards of health to recruit and promote local financial support for public health programs and operations from private and public sources. Similar authority currently exists for ADAMH boards.
- Allow for health districts to place levies on the ballot in districts spanning beyond the

boundary of one county, similar to other multi-county agencies. Current law allows county health districts to join together to seek efficiencies and cost savings. However, Ohio law allows no mechanism to fund these joint districts. Not surprisingly, there are currently no multi-county health districts because of this discrepancy.

- In instances where health districts derive inside millage from their cities, villages and townships (as of 2021, 47 county health districts), require the board of health to present its budget to the district advisory council.

From research conducted using the Annual Financial Report (AFR), at the current level of spending, Ohio LHDs reported average attainment gaps ranging from 15 percent (Emergency Preparedness) to 33 percent (Policy Development); an estimated annual investment of \$10.35 per capita is needed to close existing funding gaps and fully implement the Framework for Public Health Services in Ohio.

Key priorities are enumerated in the eponymously labeled section; the other areas of interest are grouped by topic area, not by priority.

Key Priorities in the 2024-2025 Biennial Budget

- **A. Training Data Users.**
- **C. Epidemiological Capacity.**
- **H. Streamlining Data Collection.**
- **I. ODH as the leader in data and surveillance.**
- **N. Explore Regional Hub Model.**

Strengthening the Public Health Workforce

- A. **Training Data Users.** Within ODH, develop a training course for users of the Ohio Data Portal for the access, use and management of aggregated public health data for use in surveillance, community health assessment (CHA) / State Health Assessment (SHA), etc. As a component of the process, ODH would develop a helpdesk environment around the portal and similar data systems within ODH.
- B. **Epidemiological Capacity.** Strengthen local epidemiology workforce through the provision of dedicated funding to maintain adequate data workforce capacity, defined as at least one full-time equivalent (FTE) epidemiologist per 100,000 population, in addition to the Public Health Emergency Preparedness (PHEP) epidemiologist (but no less than 1 FTE per county in counties with population under 100,000). The state's capacity should also be expanded for both epidemiological surveillance and expertise (additional specialties) of the ODH state-level epidemiology and data management workforce (adequate FTEs) that are available for consultation to local partners.

- C. **Communicable Disease Nurses.** Strengthen the local communicable disease nurse workforce through the provision of dedicated funding to maintain adequate workforce capacity, defined as at least one FTE communicable disease nurse per 100,000 population (but no less than 1 FTE per county in counties with population under 100,000).
- D. **Public Information.** Strengthen the local public information workforce through the provision of dedicated funding to maintain adequate workforce capacity, defined as at least one FTE public information officer (PIO) per 100,000 population (but no less than 1 FTE per county in counties with population under 100,000); ODH to provide training and technical assistance to LHDs on communications.
- E. **Emergency Response.** ODH should maintain a team of experts (minimum of 3 FTEs) to provide guidance to local health districts on interpreting best practices (i.e., personal protective equipment, cleaning, environmental risk mitigation, etc.) and legal analysis (i.e., director's orders, quarantine, and enforcement, etc.). Emergency Preparedness and Response, and interpretation of best practices during a communicable disease outbreak or an emergency response, are two Foundational Public Health Services critical to effective pandemic response.
- F. **Developing a Data Advisory Board.** Development of an advisory board to comment on and provide recommendations to improve: efficiency of data collection and bi-directional data sharing; timeliness of data reporting; quality and accuracy of data reporting; accessibility of data reporting; availability of disaggregated data. The Board would be comprised of consumers and providers of ODH data: 3 representatives from local health departments (AOHC), 3 representatives from academic health programs (School of Public Health), 3 representatives from policy or advocacy groups engaged in public health; 3 representatives from partnering state agencies, and 1 representative from a multicounty health systems or appointed by the Ohio Hospital Association (OHA); a final seat to added at the discretion of the director explicitly for the inclusion of a public health association representative.

- G. Streamlining Data Collection.** Develop a strategic framework for the improvement of Ohio's systems for the collection of public health data with a focus on the use of health information exchanges (HIE) and the use of single point of access for health related dashboards. The work should examine ways to automate data collection for: communicable disease reporting from multiple sources including direct electronic reporting from labs (as was began during the pandemic response); collection of aggregate community data from HIE for use in SHA/CHA reporting; collection of real-time data from ER and EMS to supplement key surveillance activities (suicide, overdose, injury, etc.); leverage post-pandemic capability to require the integration of all sources of immunizations, i.e. pharmacies, primary care, etc., into immunization registries; and the creation of single person records within the state systems.
- a. Continue to modernize and improve existing data systems including but not limited to:
 - i. Ohio Disease Reporting System (ODRS) enhancement or transition to another, more robust, system improvements
 - ii. Public Health Data Warehouse improvements or other data access improvements
 - iii. Environmental Health (EH) Data System improvements and expansion into other EH programs
 - iv. Streamline LHD access to ODH data
 - v. Improve Women, Infants & Children (WIC) data systems (improve stability and usability)
- H. ODH as the leader in data and surveillance.** Expand the role of the state health department as it pertains to data collection and surveillance, including but not limited to:
- a. Maintain current capacity and expand public health laboratory capacity improvements;
 - b. Online State Health Assessment updates;
 - c. CHA template with pre-filled data for use by local public health in furtherance of connecting SHA/CHA;
 - d. Behavioral Risk Factor Surveillance System (BRFSS) oversampling for county or regional data to meet minimum necessary sampling for at least a county level and 95% confidence interval;
 - e. Better coordination of school-based surveys and potential Youth Risk Behavior Surveillance (YRBS) oversample for local data;
 - f. ODH training to LHDs on epidemiology, data management, data analysis, CHAs, data systems, etc.
 - g. Establishment of a state clearing house for health care data including Medicaid;
 - h. Data collection efforts should continue to work to identify the most granular level of data necessary to evaluate public health issues within a community or jurisdiction.
- I. Data Equity.** Convene stakeholder meetings to insure RWJ data equity recommendations are considered in the implementation of data transformation efforts; provide training and technical assistance related to COVID-19 Minority Health Strikeforce Blueprint data recommendations.

- J. **Planning.** Evaluate and plan as appropriately, to expand and improve the use of the Ohio's Profile Performance Database (OPPD) as a tool for the housing of key local health department information as well as key Ohio Department of Health Information so that efforts are streamlined and housed in a single location. As a component, evaluate ways to expand and improve upon the use of the AFR data by linking it to other key measures within the state or locally. Use the OPPD as single record that may be pulled into other ODH systems when necessary, e.g., Grants Management Information System (GMIS) or Ohio Public Health Communication System (OPHCS). And finally, use the OPPD as a tool to evaluate the current health and stability of local health departments including their ability to achieve and maintain accreditation standards.
- K. **ODH Technical Support.** ODH would continue to develop and provide standardized guidance on system level approaches to key elements of accreditation practice. For instance, providing standardized, Public Health Accreditation Board (PHAB) approved, formats for key documents such as quality improvement (QI) plans or workforce development; linking Community Health Improvement Plan (CHIP) and State Health Improvement Plan (SHIP) goals/objectives; providing community level data and when local data is collected, ODH would provide standardize data definitions and/or sample questions for survey so that the data may flow upwards; providing a unifying performance management system; directly or indirectly providing support for (re)accreditation learning communities; and lastly, providing experience and trained staff who can assist LHDs on any of the aforementioned issues.
- a. Streamline agreements with universities to support LHD response efforts during emergencies.
- L. **Grant Management.** Streamline grant management through improvements to the state's grant management system and the formation of a local/state taskforce to explore the implementation of a single contract with local health districts (for grant management) as in other states.
- M. **Explore Regional Hub Model.** Establish a joint ODH/AOHC Regional Hub Task Force to examine a) the best model to provide support to local health districts (including training, technical assistance, and data system infrastructure/IT) and facilitate shared services among LHDs in a regional way; b) the feasibility of a voluntary hub model for LHDs similar to ESCs or Council of Governments; and c) Develop a strategic plan around the results of the study.

- N. **Local Liaisons.** Maintain the current local liaisons (ODH local liaison team) and provide them with training so that they may support accreditation and workforce training at the local level; Clear Impact evaluation, training and technical assistance in connecting SHIP/CHIP; development of ODH guidance team to work with LHDs to assist with planning interventions or select the evidence-based programs best suited for health challenges, e.g. cancer investigation.
- O. **Federal and state funding.** Strengthen ODH capacity to prepare successful federal grant proposals; eliminate the specialized food cost methodology in favor of the standardized EH cost methodology already in statute; increase the reimbursement of Medicaid Services to local health departments; increase the Children with Medical Handicaps Program (CMH) reimbursement payments.
- a. As part of the legislative rule reduction review, evaluate all currently unfunded mandates for local health departments to determine where programs could be prioritized and then funded, streamlined, or eliminated.

4.06.04

Vital Statistics Sales and Services Rendered

	September	YTD	Same Period 2021
Birth Certificates Issued	514	5182	5749
Death Certificates Issued	867	7847	8338
Fetal Death Certificates Issued	0	1	0
Burial Permits Issued	78	647	574
Birth Certificates Filed	91	1048	1145
Death Certificates Filed	180	1711	1759
Fetal Death Certificates Filed	2	14	5

Ron Graham provided the following highlights:

- Board of Health members are invited to talk to employees about their programs or go out in the field with them. If interested, let Ron know as he would be happy to set it up.
- We have a heavy focus on the accreditation application.
- Will provide an update to the Strategic Plan, performance measures, and successes. Will probably have a committee meeting soon to discuss revisions to the plan.
- We have not received any follow-up from Joel Lucia regarding the Prescription Assistance Program. However, the program did receive donations from a couple local churches.
- We are looking to bring back the Speakers Bureau.
- Classes and trainings for Board of Health members are located in the Health Commissioner's report.
- We are looking to become more of an academic health department.

Discussion:

Patricia Murphy asked for information regarding House Bill 463. Ron Graham said that commissioners across the state are not in favor of it.

Nicole Jelovic was disappointed to see the low number of followers to LCGHD's LinkedIn page especially with the valuable information that's posted. She asked if an effort can be made to invite local businesses to follow it.

5.0

Committee Reports

5.01

Negotiating Committee, Meeting Held October 17, 2022

Negotiation Committee Meeting Minutes October 17, 2022

A meeting of the Health District's Negotiation Committee was held on October 17, 2022, at the offices of the Lake County General Health District. The meeting was called to order at 2:00 p.m. In attendance were:

Board of Health Members

Brian Katz

Randy Owoc

Dr. Lynn Smith

Dr. Alvin Brown

Others

Adam Litke, Finance and Human Resources Director

Gina Parker, Deputy Registrar

The meeting was called to order by Chairman, Randy Owoc.

Brian Katz moved and Dr. Lynn Smith seconded a motion to enter into Executive Session to discuss matters of personnel and compensation in accordance with Section 121.22 of the Ohio Revised Code; motion carried.

A roll call vote was taken and all members voted in favor of entering into Executive Session. The Executive Session convened at 2:01 p.m. The regular portion of the meeting reconvened at approximately 2:29 p.m.

Brian Katz moved and Randy Owoc seconded to adjourn the meeting at 2:30 p.m.; motion carried.

5.02

EH Advisory Committee, Meeting Held October 17, 2022

MINUTES
LAKE COUNTY GENERAL HEALTH DISTRICT
BOARD OF HEALTH
ENVIRONMENTAL HEALTH ADVISORY COMMITTEE

OCTOBER 17, 2022

A meeting of the Environmental Health Advisory Committee was held on October 17, 2022, in the Incident Command Board Room of the Lake County General Health District offices at 5966 Heisley Road, Mentor. Those present at the meeting were:

Committee Members

Roger Anderson (Chair)
Alvin Brown, VMD
Lynn Smith, MD
Dave Valentine
Randy Owoc

Staff

Dan Lark, Director of Environmental Health
Bert Mechenbier, Environmental Health Supervisor
Gina Parker, Deputy Registrar
Julie Caine, Office Manager, Environmental Health

Public

No members of the public present.

The meeting was called to order at 2:33 PM. The purpose of the meeting was to hear comments from regulated industry/individuals concerning the new fees for:

LICENSE CATEGORY	Current Local Fee (\$)	Proposed Local Fee (\$)	Last Year Fee Changed
Commercial Risk Category 1, <25,000ft ²	180.00	192.00	2021
Commercial Risk Category 2, <25,000ft ²	197.00	210.00	2021
Commercial Risk Category 3, <25,000ft ²	333.00	358.00	2021
Commercial Risk Category 4, <25,000ft ²	410.00	441.00	2021
Commercial Risk Category 1, >25,000ft ²	239.00	256.00	2021
Commercial Risk Category 2, >25,000ft ²	249.00	267.00	2021
Commercial Risk Category 3, >25,000ft ²	763.00	823.00	2021
Commercial Risk Category 4, >25,000ft ²	806.00	868.00	2021

Non-Commercial Risk Category 1, <25,000ft ²	90.00	96.00	2021
Non-Commercial Risk Category 2, <25,000ft ²	98.50	105.00	2021
Non-Commercial Risk Category 3, <25,000ft ²	166.50	179.00	2021
Non-Commercial Risk Category 4, <25,000ft ²	205.00	220.50	2021
Non-Commercial Risk Category 1, >25,000ft ²	119.50	128.00	2021
Non-Commercial Risk Category 2, >25,000ft ²	124.50	133.50	2021
Non-Commercial Risk Category 3, >25,000ft ²	381.50	411.50	2021
Non-Commercial Risk Category 4, >25,000ft ²	403.00	434.00	2021
Vending	17.86	18.31	2021

Dan Lark explained that all affected industry personnel were notified of the fee changes. LCGHD has received no comments pertaining to the food fee changes.

Lynn Smith, MD motioned and Alvin Brown, VMD seconded the motion to recommend that the Board of Health proceed with the first reading of the new food fees.

The meeting was adjourned at 2:50 p.m.

6.0

Old Business

6.01

Board of Health Tracking

Date of BOH Meeting	Department	New Business Item Number	Department Recommendations	Board Action (Approved/Disapproved/Tabled)	Further Action Needed From BOH	Date BOH Informed of Outcome	Informed of Outcome & Method	Date Closed
05/17/21	EH	7.11	Permission to Purchase Two Trucks for the Environmental Health Programs, Not to Exceed \$35,000.00 Each	APPROVED	N	1/24/2022	On hold. No trucks available.	
03/21/22	PH&EP	7.05	Permission to Submit COVID-19 Enhanced Operations (EO22) Grant, \$490,000.00	APPROVED	N	10/17/2022	Approved	10/17/2022
04/18/22	HEO	7.05	Permission to Submit Lake and Geauga Women, Infants and Children (WIC) Grant, \$826,609	APPROVED	N			
05/16/22	PH&EP	7.06	Permission to Submit FFY 2023 Lake County Safe Communities Grant, \$38,500	APPROVED	N	9/19/2022	Awarded (Post-Submittal in Oct's New Business)	
7/18/2022	CHS	7.05	Permission to Submit COVID-19 Detection & Mitigation in Confinement Facilities (CF23) Grant, Amount Pending	APPROVED	N			
08/15/22	EH	7.04	Permission to Apply for Water Pollution Control Loan Fund (WPCLF) Funds for 2023 for the Repair or Replacement of Home Septic Systems	APPROVED	N			
08/15/22	CHS	7.07	Permission to Purchase 2022-2023 Season Influenza Vaccines from Sanofi Pasteur, Not to Exceed \$46,000.00	APPROVED	N			
09/19/22	PH&EP	7.02	Permission to Accept COVID-19 Enhanced Operations (EO22) Grant, \$490,000.00	APPROVED	N	10/17/2022	Approved	10/17/2022

7.01

7.01.01

Certification of Monies, Resolution 22-10-07-01-01-100

Dr. Lynn Smith moved and Dr. Alvin Brown seconded a motion to adopt Resolution 22-10-07-01-01-100 to approve payment of bills, as listed in the recapitulation sheets attached to these minutes, be adopted; motion carried.

7.01.02

Increase/Decrease Appropriations, Resolution 22-10-07-01-02-100

Nicole Jelovic moved and Patricia Murphy seconded a motion to adopt Resolution 22-10-07-01-02-100 to Increase/Decrease Appropriations, as listed in the recapitulation sheets attached to these minutes, be adopted; motion carried.

Discussion:

Steve Karns asked what offsets the expenses. Adam Litke said it is usually based on additional increases to the staffing budget. Steve Karns asked for the sources to be included.

7.02

Permission to Submit NEHA-FDA Retail Flexible Funding Model Grant, \$5,000

Nicole Jelovic moved and Roger Anderson seconded a motion to submit to the National Environmental Health Association (NEHA) and U.S. Food and Drug Administration (FDA) for the NEHA-FDA Retail Flexible Funding Model grant in the amount of \$5,000. The grant period is from January 1, 2023 – December 31, 2023; motion carried.

This grant is to continue efforts with the FDA Voluntary National Retail Food Regulatory Program Standards, allowing LCGHD to meet Standards 1 and 5 and also complete a Self-Assessment of all nine Standards.

7.03

Permission to Purchase Vehicles for the Health Department, Not to Exceed \$200,000.00

Brian Katz moved and Patricia Murphy seconded a motion to purchase vehicles, not to exceed \$200,000.00. These will replace older vehicles that have high mileage and are starting to have escalated repair costs. This permission has an expiration of February 28, 2023; motion carried.

Per Board of Health By-Laws, D) Competitive bidding is not required if any of the following conditions are met: 9) Items (including vehicles) purchased at prices from the most recent Ohio bidding list of approved state bid items as maintained by the Ohio Department of Administrative Services Procurement web site.

7.04

Permission to Accept the FFY 2023 Lake County Safe Communities Coalition Grant, \$38,500.00

Dr. Alvin Brown moved and Roger Anderson seconded a motion to accept from the Ohio Traffic Safety Office for the FFY 2023 Lake County Safe Communities Coalition grant in the amount of \$38,500.00. The grant period is October 1, 2022- September 30, 2023; motion carried.

This grant funds traffic safety education and awareness activities for residents of Lake County. Educational focus areas derive from car crash report data recorded by the Ohio State Highway Patrol (OSHP) and National Highway Traffic Safety Administration (NHTSA). Specific programming include, but are not limited to seat belt, impaired driving, distracted driving, and motorcycle safety. Through implementation of such programming, the goal is to reduce the number of car crash injuries and fatalities.

7.05

Permission to Enter into a Contract with Wickliffe City School District Board of Education for Nursing Services during the 2022-2023 School Year at a Rate of \$50.00 per Hour

Dr. Lynn Smith moved and Brian Katz seconded a motion to enter into a contract with Wickliffe City School District Board of Education to provide as-needed nursing services at a rate of \$50.00 per hour during the 2022-2023 School Year. This will allow LCGHD to provide as-needed nursing services to the schools with ample notification and staffing availability. LCGHD nursing staff will currently be at the school from October 3, 2022 through October 21, 2022, and will return as requested; motion carried.

Discussion:

Nicole Jelovic asked if there was any margin. Adam Litke said there is not a lot, but enough for a supervisor and extra staff.

7.06

Recommendations from the Environmental Health Advisory Committee, Meeting Held Prior to the Board Meeting

Roger Anderson said the Environmental Health Advisory reviewed the fees charged to food service vendors. Staff reviewed the fees using methodology provided by the State of Ohio. As a result, all fees will increase. The Environmental Health Advisory recommends approval of the proposed fees.

7.07

Resolution to Increase Certain Fees, Food Service Program, First Reading

Dr. Alvin Brown moved and Roger Anderson a motion to hear the first reading of the following resolution concerning the increase of certain food service and food establishment fees; motion carried.

Based upon the recommendations of the Licensing Council that met on September 15, 2022, it is recommended that the Board of Health hear the first reading of the following resolution concerning certain Food Service and Food Establishment program fees. When adopted, the fee changes will become effective approximately January 1, 2023. The proposed changes are included in the fee rules following the resolution below:

**RESOLUTION
OF THE
LAKE COUNTY GENERAL HEALTH DISTRICT
BOARD OF HEALTH INCREASING CERTAIN FEES**

WHEREAS, the Ohio Revised Code, Section 3717.07, permits the Board of Health to establish by Rule a uniform system of fees to pay the cost of any service provided by the Board of Health for which no fee is prescribed by law; and

WHEREAS, it is deemed necessary to amend Chapter 220 of the Regulations of the Board of Health of the Lake County General Health District; and

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

WHEREAS, it is deemed necessary to amend Chapter 29 of the Regulations of the Board of Health of the Lake County General Health District in accordance with the advice of the Lake County Prosecutor's office; and

WHEREAS, the Board of the Lake County General Health District is determined to provide quality Public Health services to Lake 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:

LICENSE CATEGORY	Current Local Fee (\$)	Proposed Local Fee (\$)	Last Year Fee Changed
Commercial Risk Category 1, <25,000ft ²	180.00	192.00	2021
Commercial Risk Category 2, <25,000ft ²	197.00	210.00	2021
Commercial Risk Category 3, <25,000ft ²	333.00	358.00	2021
Commercial Risk Category 4, <25,000ft ²	410.00	441.00	2021
Commercial Risk Category 1, >25,000ft ²	239.00	256.00	2021
Commercial Risk Category 2, >25,000ft ²	249.00	267.00	2021
Commercial Risk Category 3, >25,000ft ²	763.00	823.00	2021
Commercial Risk Category 4, >25,000ft ²	806.00	868.00	2021
Non-Commercial Risk Category 1, <25,000ft ²	90.00	96.00	2021
Non-Commercial Risk Category 2, <25,000ft ²	98.50	105.00	2021
Non-Commercial Risk Category 3, <25,000ft ²	166.50	179.00	2021
Non-Commercial Risk Category 4, <25,000ft ²	205.00	220.50	2021
Non-Commercial Risk Category 1, >25,000ft ²	119.50	128.00	2021
Non-Commercial Risk Category 2, >25,000ft ²	124.50	133.50	2021
Non-Commercial Risk Category 3, >25,000ft ²	381.50	411.50	2021
Non-Commercial Risk Category 4, >25,000ft ²	403.00	434.00	2021
Vending	17.86	18.31	2021

Adopted by the Board of Health of the Lake County General Health District on December 19, 2022 to become effective January 1, 2023.

Published _____, 2022
_____, 2022

Discussion:

Patricia Murphy asked what the risk categories are. Randy Owoc said the risk categories vary based on capacity, seating, volume, how food is handled, etc.

Nicole Jelovic asked if the numbers were based on last year. Dan Lark said there is a formula used to figure out the numbers based on the previous year. The fees were lower last year due to COVID.

7.08

Recommendations from the Negotiating Committee, Meeting Held Prior to the Board Meeting

Brian Katz moved and Dr. Lynn Smith seconded a motion to accept the recommendations from the Negotiation Committee to enter into a new 5-year contract with Mr. Ron Graham to remain in his role as Health Commissioner. 3% will be added to the previous wage and an additional \$1,400 added to the previous stipend amount; motion carried.

7.09

Executive Session

Roger Anderson moved and Dr. Lynn Smith seconded a motion to enter into Executive Session to discuss matters of personnel and compensation in accordance with Section 121.22 of the Ohio Revised Code; motion carried.

A roll call vote was taken and all members voted in favor of entering into Executive Session. The Executive Session convened at 4:11 p.m. The regular portion of the meeting reconvened at approximately 4:34 p.m.

7.10

Permission to Pay Cemex an Additional Amount to Replace Damaged Concrete in the Health District's Heisley Road Parking Lot, Not to Exceed \$2,000.00


Dr. Lynn Smith moved and Brian Katz seconded a motion to pay Cemex an additional amount not to exceed \$2,000, to replace damaged concrete in the Health District's parking lot. The additional funds will cover the unexpected increase in supply costs. The Board of Health approved the contract with Cemex at the August 15, 2022, board meeting, for \$45,000; motion carried.

8.0

Adjournment

Roger Anderson moved and Patricia Murphy seconded a motion to adjourn the meeting at approximately 4:35 p.m.; motion carried.


Secretary


President

BOARD OF HEALTH
LAKE COUNTY GENERAL HEALTH DISTRICT
Date October 17, 2022

The Board of the Lake County General Health District met this day, October 17, 2022, in a regularly scheduled meeting with the following members present:

	
<u>Alvin Brown</u>	<u>Patricia Murphy</u>
	
<u>Virginia W.</u>	<u>Virginia</u>
	
<u>Richard L. Hawley</u>	<u>Chuck</u>
	
<u>Lynn Smith</u>	<u>Lynn</u>

Dr. Lynn Smith presented the following resolution and named its adoption.

RESOLUTION TO: APPROVE CURRENT BILLS FOR PAYMENT

WHEREAS, the Board of the Lake County General Health District hereby finds and determines that all formal actions relative to the adoption of this resolution were taken in an open meeting of this Board of Health, and that all the deliberations of this Board of Health and of its committees, if any, which resulted in formal actions, were taken in meetings open to the public, in full compliance with applicable legal requirements, including Section 121.22 of the Revised Code, and

WHEREAS, the Board of Health, by this resolution, approves the payment of current bills as indicated on the attached recapitulation sheets.

BE IT RESOLVED by the Board of Health in and for the Lake County General Health District, that as evidenced by the Certification of Funds signed by the Lake County Auditor, the Health Commissioner is hereby authorized to forward a certified copy of this resolution and attached recapitulation sheets to the Lake County Auditor for payment of current bills during the fiscal year ending December 31, 2022.

Dr. Alvin Brown seconded the resolution and the vote being called upon its adoption, the vote resulted as follows:

"AYES" 13 "NAYS" 0

CLERK'S CERTIFICATION

I, Ron Graham, Health Commissioner of the Board of Health do hereby certify that this is a true and accurate copy of a resolution adopted by the said Board on October 17, 2022.

Witness my hand this 17th day of October 2022.

Secretary, Board of Health



Board Report - 10/01/2022 - 10/17/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: DECEMBER 17, 2022

I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW *John Galloway* *John P. Galloway*

CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR

LAKE COUNTY AUDITOR

Issued / Vendor	Description	PO #	Fund #	Amount
BOARD OF HEALTH	TO 02E SAL/FRINGE 9/22 ADMIN	0	00200761-755	801.64
BOARD OF HEALTH	COPIES 9/22	0	00200761-755	24.40
Total #				826.04
BOARD OF HEALTH	TO 07E SAL/FRINGE 9/22 ADMIN	0	00500761-755	10254.67
BOARD OF HEALTH	COPIES 9/22	0	00500761-755	1.60
BOARD OF HEALTH	POSTAGE 9/22	0	00500761-755	440.00
ECO CLEANING OHIO LLC	CLEANING - PAINESVILLE WIC	22008394	00500761-755	60.00
EUCLID GLASS & DOOR	PLEXIGLASS FOR WIC #63744 10/4	22001612	00500761-755	665.00
PARK CENTRE LLC	DEC RENT/UTILITIES	22007897	00500761-755	2100.00
SPECTRUM	PHONES - CHARD - NEW SET-UP	22008021	00500761-755	365.36
TIME WARNER CABLE-NORTHEAST	PH/INT WIC WICKLIFFE - 10/22	22000991	00500761-755	129.96
WINDSTREAM	HUNTSBURG -WIC SEPT/OCT	22001615	00500761-755	213.79
Total #				14230.38
AMERICAN SOLUTIONS FOR BUSINESS DBA AMER	BUSINES CARDS @6	22008700	00700761-755	294.00
AMERICAN SOLUTIONS FOR BUSINESS DBA AMER	INV 06263911 10/5	22004759	00700761-755	1046.00
BOARD OF HEALTH	TO 29E SALARY/FRINGE 9/22 WAKL	0	00700761-755	433.84
BOARD OF HEALTH	TO 17E SALARY/FRINGE 9/22 ROMB	0	00700761-755	2536.92
BOARD OF HEALTH	TO 29E SALARY/FRINGE 9/22	0	00700761-755	5982.71

Board Report - 10/01/2022 - 10/17/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: OCTOBER 17, 2022

I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW. *Chris Galloway 10/17/22*

CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR.

LAKE COUNTY AUDITOR

Issued / Vendor	Description	PO #	Fund #	Amount
CONRAD'S TIRE SERVICE	FLEET MAINT #M105159 10/7/22	22009092	00700761-755	70.20
FIRE PROTECTION SOLUTIONS LLC	INV4125 10/4/22	0	00700761-755	260.00
GRAHAM, RON	MONTHLY TRAVEL REIMB 10/22	22000923	00700761-755	625.00
JOHNSON CONTROLS FIRE PROTECTION	#41583808 9/22/22	22007426	00700761-755	12401.53
JOUGHIN & CO. HARDWARE	INV A824787-A826630 10/22	22007720	00700761-755	89.00
LAKE COUNTY TELECOMMUNICATIONS	AT & T PAETEC LONG DIST 9/22	0	00700761-755	2834.48
LANGUAGE LINE LLC	INTERPRETER PH #1652845 9/30/2	22001618	00700761-755	3.00
LAYTON PHYSICAL THERAPY	REFUND #68444 7/15/22 SEWERS	0	00700761-755	45.00
NFP CORPORATE SERVICE	MONTHLY BENEFITS INV 7585 10/6	22004025	00700761-755	825.00
OHIO ENVIRONMENTAL HEALTH ASSOCIATION	OEHA CONF FEES - DAN LARK	22009303	00700761-755	1050.00
OPEN ON LINE	BACKGROUND CHKS #559923 9/30/2	22000925	00700761-755	67.16
OPEN ON LINE	BACKGROUND CHKS #559923 9/30/2	22008205	00700761-755	78.83
PRO PAC INC	MRC FLAGKITS, SHELTERS, VESTS	22008207	00700761-755	5084.16
TRANE CLEVELAND	MAINT FOR HVAC #313022101 10/	22004766	00700761-755	324.00
			Total #	34050.83
BOARD OF HEALTH	GOPIES 9/22	0	00800761-755	115.10
BOARD OF HEALTH	POSTAGE 9/22	0	00800761-755	26.97

Board Report - 10/01/2022 - 10/17/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: OCTOBER 17, 2022

I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW. *Christopher A. Galloway*
 CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR: *10/14/22*

LAKE COUNTY AUDITOR

Issued / Vendor	Description	PO #	Fund #	Amount
			Total #	142.07

TREASURER STATE OF OHIO-ODH	VITAL STATS TECH FEES# 2320062	0	00800761-756	57274.32
			Total #	57274.32

BOARD OF HEALTH	COPIES 9/22	0	01000761-755	3.80
BOARD OF HEALTH	POSTAGE 9/22	0	01000761-755	741.00
FAIRPORT CIVICS CLUB	REFUND #58563 9/15/22 FOOD LIC	0	01000761-755	50.00
			Total #	794.80

BOARD OF HEALTH	TO 07E SAL/FRINGE 9/22 ADMIN	0	01300761-755	16060.73
BOARD OF HEALTH	TO 08E SALARY/FRINGE 9/22 OHLR	0	01300761-755	854.64
BOARD OF HEALTH	TO 29E SALARY/FRINGE 9/22 WAKL	0	01300761-755	2993.07
BOARD OF HEALTH	COPIES 9/22	0	01300761-755	311.65
BOARD OF HEALTH	POSTAGE 9/22	0	01300761-755	17.63
ROWAN, BRITTANY	REIMB MILEAGE 9/19-9/21/22	0	01300761-755	142.50
SANOPI PASTEUR INC	VARIVAX #919446256 9/29/22	22008894	01300761-755	3875.93
STERICYCLE	SHARPES PICK-UP 10/6/22	22002236	01300761-755	375.20
			Total #	24631.35

AIRGAS	MONTHLY TANK #9991546016 9/30	22001638	01400761-755	94.77
BOARD OF HEALTH	TO 07E AUTO MAINT 9/22 MARN	0	01400761-755	19.71

Board Report - 10/01/2022 - 10/17/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: DECEMBER 17, 2022

I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW *Chris Galloway*

CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR *Chris Galloway*

LAKE COUNTY AUDITOR *Chris Galloway*

Issued / Vendor	Description	PO #	Fund #	Amount
BOARD OF HEALTH	C/B AUTO MAINT 9/22 MEHLS, MARN	0	01400761-755	195.62
BOARD OF HEALTH	TO 07E SAL/FRINGE 9/2 ADMIN	0	01400761-755	5087.40
TISCH ENVIRONMENTAL INC	PM-10 CAL. KIT CERT #64907.10/1	22008890	01400761-755	260.80
			Total #	5658.30

BOARD OF HEALTH	COPIES 9/22	0	01500761-755	12.80
			Total #	12.80

BOARD OF HEALTH	TO 07E SALARY/FRINGE 07E ADMIN	0	01700761-755	1028.20
BOARD OF HEALTH	TO 29E SALARY/FRINGE 9/22 WAKL	0	01700761-755	4457.04
BOARD OF HEALTH	TO 13E SALARY/FRINGE 9/22 DENM	0	01700761-755	904.76
BOARD OF HEALTH	COPIES 9/22	0	01700761-755	6.40
			Total #	6396.40

BOARD OF HEALTH	TO 29E SALARY/FRINGE 9/22 YARB	0	01800761-755	3810.52
			Total #	3810.52

BOARD OF HEALTH	COPIES 9/22	0	02300761-755	11.55
BOARD OF HEALTH	POSTAGE 9/22	0	02300761-755	1109.75
			Total #	1121.30

BOARD OF HEALTH	TO 07E SALARY/FRINGE 9/22 ADMIN	0	02800761-755	698.90
BOARD OF HEALTH	TO 29E SALARY/FRINGE 9/22 KOLA	0	02800761-755	4274.39

Board Report - 10/01/2022 - 10/17/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: OCTOBER 17, 2022

I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW:

Christopher A. Galloway
10/10/22

CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR.

Issued / Vendor	Description	PO #	Fund #	Amount
			Total #	4973.29
BOARD OF HEALTH	TO 07E SALARY/FRINGE 9/22 ADMIN	0	02900761-755	324.84
BOARD OF HEALTH	COPIES 9/22	0	02900761-755	7.45
BOARD OF HEALTH	POSTAGE 9/22	0	02900761-755	63.56
			Total #	395.85

Grand Total # 154318.25

OFF-CYCLE EXPENDITURES - OCTOBER 2022

PO #	DATE	VENDOR #	VENDOR NAME	DESCRIPTION	AMOUNT	FUND	ACCOUNT	SUB	DIV	PROG	SUB PROGR
22008891	10/24/2022	2072	4IMPRINT	TOBAC BRANDED EDUCATION MATERI	4,767.56	02800761-755	E	05	798	798	798A
22008019	10/24/2022	902049	AMERICAN SOLUTIONS FOR BUSINESS DBA AMER	PRINTING FOR WIC #0621029 9/28	808.00	00500761-755	F	02	700	730	730
22008019	10/24/2022	902049	AMERICAN SOLUTIONS FOR BUSINESS DBA AMER	PRINTING FOR WIC#06267195 9/26	3,279.00	00500761-755	F	02	700	730	730
22003203	10/24/2022	902049	AMERICAN SOLUTIONS FOR BUSINESS DBA AMER	FLYERS & ED MATERIALS#06263909	49.00	00700761-755	E	01	999	999	999
22000904	10/24/2022	655	AQUA OHIO	HYDRANT HEISLEY RD SEPT	52.38	00700761-755	I	13	999	999	998.1
22000904	10/24/2022	655	AQUA OHIO	WATER HEISLEY RD SEPT	3.12	00700761-755	I	13	999	999	998.1
22006813	10/24/2022	57	BLUE TECHNOLOGIES	B403590 - SEPT	7.89	00700761-755	E	01	999	999	999
22006813	10/24/2022	57	BLUE TECHNOLOGIES	B403592 - SEPT	118.04	00700761-755	E	01	999	999	999
22006813	10/24/2022	57	BLUE TECHNOLOGIES	B403593 - SEPT	110.29	00700761-755	E	01	999	999	999
22006813	10/24/2022	57	BLUE TECHNOLOGIES	B403594 - SEPT	117.96	00700761-755	E	01	999	999	999
22006813	10/24/2022	57	BLUE TECHNOLOGIES	B406316 - SEPT	16.30	00700761-755	E	01	999	999	999
22006813	10/24/2022	57	BLUE TECHNOLOGIES	B406788 - SEPT	4.08	00700761-755	E	01	999	999	999
22008895	10/24/2022	5214	BRIMAR INDUSTRIES LLC	NO SMOKING OR VAPING SIGNS	376.55	02800761-755	E	05	798	798	798A
22003209	10/24/2022	605727	BUJE-YARBROUGH, NIKESHA	REIMB MILEAGE 9/26/22-9/30/22	26.63	01800761-755	H	04	780	780	785
22003209	10/24/2022	904931	CELCO PARTNERSHIP (VERIZON)	CELL PHONES 9/22 - APC	176.70	01400761-755	I	03	500	570	570
22003209	10/24/2022	904931	CELCO PARTNERSHIP (VERIZON)	CELL SERVICE 9/22 BF	239.38	00500761-755	I	03	700	730	730
22004336	10/24/2022	904931	CELCO PARTNERSHIP (VERIZON)	CELL PH - PHEP 9/22	48.87	00500761-755	I	03	700	730	732
22006307	10/24/2022	904931	CELCO PARTNERSHIP (VERIZON)	CELL PH 9/22 - P STROMP MRC	179.20	01700761-755	I	03	780	750	750A
22007724	10/24/2022	904931	CELCO PARTNERSHIP (VERIZON)	CELL PH/HOTS SPOTS-NURSING 9/2	71.43	00700761-755	I	03	100	100	100
22005407	10/24/2022	904931	CELCO PARTNERSHIP (VERIZON)	ADMIN CELL CHARGES 9/22	419.36	01300761-755	I	03	700	799	799
22000917	10/24/2022	243	CINTAS CORP #259	INV 4133262565 10/4/22	1,353.51	00700761-755	I	03	999	999	999
0	10/24/2022	603595	COLE, DAWN	REIMB MILEAGE 9/27/22	46.60	00700761-755	E	03	999	999	999
0	10/24/2022	603595	COLE, DAWN	REIMB MILEAGE 9/27/22	8.70	01700761-755	H	04	780	750	750
22001616	10/24/2022	900802	CONRAD'S TIRE SERVICE	REIMB MILEAGE 9/27/22	0.68	01700761-755	H	04	999	999	999
22006856	10/24/2022	9122	GEAUGA COUNTY WATER RESOURCES LAB	INV M104891 9/26/22	61.25	00700761-755	H	01	999	999	999
0	10/24/2022	604288	GRAHAM, RON	ACCT # 98000265-001 10/21/22	240.00	00400761-755	E	04	500	515	515
22007738	10/24/2022	5077	GUARDIAN ALARM CO	REIMB MEETING EXP 9/14/22	96.74	00700761-755	H	03	999	999	999
22007738	10/24/2022	5077	GUARDIAN ALARM CO	SECURITY SERV- MOSQUITO SEPT	19.17	00700761-755	E	03	999	999	999
22008702	10/24/2022	6585	IDEXX DISTRIBUTION CORP.	SECURITY SERV- HEISLEY RD SEPT	27.75	00700761-755	E	03	999	999	999
0	10/24/2022	605847	KOLACZ, EMILY	INV 3114521931 9/19/22	205.97	00700761-755	E	01	500	580	580
0	10/24/2022	602757	LARK, DAN	REIMB SUPPLIES 9/7/22	13.93	02900761-755	E	01	200	200	1500
0	10/24/2022	602757	LARK, DAN	REIMB PARKING 9/13/22	202.50	00700761-755	H	04	500	599	599
22004582	10/24/2022	2932	LASSITER & SON LLC	LANDSCAPING INV 11010 PMT #7	1,017.00	00700761-755	I	13	999	999	998
0	10/24/2022	605453	LITWAK, ILANA	REIMB MILEAGE 9/16/22-9/30/22	289.42	00500761-755	H	04	700	730	730
0	10/24/2022	605453	LITWAK, ILANA	REIMB MILEAGE 9/16/22-9/30/22	22.46	00700761-755	H	04	999	999	999
0	10/24/2022	604965	LUNTER, JOHN	REIMB MILEAGE 9/16/22-9/30/22	257.50	01000761-755	H	04	500	540	540
0	10/24/2022	604965	LUNTER, JOHN	REIMB MILEAGE 9/16/22-9/30/22	55.63	01000761-755	H	04	500	540	540
0	10/24/2022	604830	MARGALIS, CHRISTINE	REIMB MILEAGE 9/17/22-9/28/22	35.98	00700761-755	E	01	999	999	999
0	10/24/2022	602042	MILLO, KATHY	REIMB MILEAGE 9/15-9/22/22	63.80	00500761-755	H	04	700	730	730
0	10/24/2022	602042	MILLO, KATHY	REIMB MILEAGE 9/22-9/30/22	73.70	00500761-755	H	04	700	730	730
0	10/24/2022	602042	MILLO, KATHY	REIMB MILEAGE 9/15-9/22/22	8.70	00700761-755	H	04	999	999	999
0	10/24/2022	602042	MILLO, KATHY	REIMB MILEAGE 9/22-9/30/22	10.05	00700761-755	H	04	999	999	999
22008703	10/24/2022	5158	OHIO DIVISION OF REAL ESTATE	BURIAL PERMITS - SEPT 2022	195.00	00800761-756	I	05	900	900	900
22008897	10/24/2022	669	POSITIVE PROMOTIONS	ANTI-SMOKING STICKERS	46.85	00800761-755	E	05	798	798	798A
0	10/24/2022	903935	RB SIGMA LLC	INV 124141 9/30/22	68.20	01300761-755	E	01	700	799	799
22008894	10/24/2022	1859	SANOPI PASTEUR INC	ADACEL 9/27/22 #919403618	4,368.22	01300761-755	E	01	700	799	799
22008208	10/24/2022	1859	SANOPI PASTEUR INC	FLU VACCINES 9191385270 9/26/2	28,614.70	01300761-755	E	01	700	799	799
22002236	10/24/2022	94	STERICYCLE	SHARPS PICK-UP 9/15/22	*268.00	01300761-755	E	03	700	715	715.8
669988	10/24/2022	3341	TRAME CLEVELAND	AC FOR MOSQ-INV 313008655 9/29	12,850.10	02600761-755	I	13	999	999	999.3
22006303	10/24/2022	901425	UNITED PARCEL SERVICE	DELIVERY SERVICE - MOSQ 9/22	51.83	00700761-755	F	03	500	510	510
22008886	10/24/2022	901425	UNITED PARCEL SERVICE	DELIVERY SERVICE - EH 9/22	136.32	00700761-755	F	03	500	565	565
0	10/24/2022	901425	UNITED PARCEL SERVICE	DELIVERY SERVICE-APC 9/22	83.25	01400761-755	F	03	500	570	570
22005406	10/24/2022	901425	UNITED PARCEL SERVICE	DELIVERY CHARGES-ADMIN 9/22	132.97	00700761-755	F	03	999	999	999
0	10/24/2022	605861	WILSON, CHRIS	REIMB MILEAGE 9/15/22-9/20/22	57.31	00700761-755	H	04	999	999	999







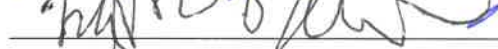
\$ 61,865.53




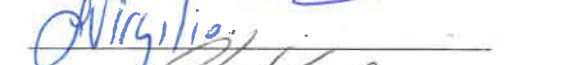



SA [Signature]
 EXPEND, U.O. MEM 2LK
 10/11/22

BOARD OF HEALTH
LAKE COUNTY GENERAL HEALTH DISTRICT

Date: October 17, 2022

The Board of the Lake County General Health District met this day, October 17, 2022, in a regularly scheduled meeting with the following members present:


Alan J. Brown








Patricia Murphy

Virginia






Nicole Delovic presented the following resolution and named its adoption.

RESOLUTION TO: INCREASE/DECREASE appropriations in Health District Funds

WHEREAS, the Board of the Lake County General Health District hereby finds and determines that all formal actions relative to the adoption of this resolution were taken in an open meeting of this Board of Health, and that all the deliberations of this Board of Health and of its committees, if any, which resulted in formal actions, were taken in meetings open to the public, in full compliance with applicable legal requirements, including Section 121.22 of the Revised Code, and were taken in an open meeting of this Board of Health and,

WHEREAS, the Board of Health, by resolution, may transfer funds from one item in the appropriation to another item, reduce or increase any item, create new items, make additional appropriations or reduce the total appropriations, and transfer revenue in support of Health District controlled funds in accordance with Section 3709.28 of the Revised Code.

BE IT RESOLVED by the Board of Health in and for the Lake County General Health District, that adjustments in appropriations for various Health District fund line items be made as indicated on the attached schedule. The Health Commissioner is hereby authorized to forward a certified copy of this resolution to the Lake County Auditor.

Patricia Murphy seconded the resolution and the vote being called upon its adoption, the vote resulted as follows:

"AYES" 13 "NAYS" 0

CLERK'S CERTIFICATION

I, Ron Graham, Health Commissioner of the Board of Health do hereby certify that this is a true and accurate copy of a resolution adopted by the said Board on October 17, 2022.

Witness my hand this 17th day of October 2022.


Secretary, Board of Health

Increase/Decrease in Revenues

Fund	Fund Number	Fund Description	Account	Amount
018	01800035 351	Safe Communities Program	Federal Grants	\$ 10,000.00

Net Change in Estimated Resources	\$ 10,000.00
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Increase/Decrease in Appropriations

Fund	Fund Number	Fund Description	Account	Amount
028	02800761 755	Tobacco Prevention & Cessation	Other Expense	\$ 20,000.00
013	01301511 512	Public Health Nursing	Salaries - Employees	\$ 15,000.00
013	01301511 551	Public Health Nursing	PERS - Regular	\$ 4,500.00
013	01301511 554	Public Health Nursing	Medicare - Employer	\$ 150.00
018	01301511 554	Safe Communities Program	Other Expense	\$ 8,000.00

Net Change in Appropriations	\$ 47,650.00
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Lake County General Health District

5966 Heisley Road
Mentor, Ohio 44060



Painesville: (440) 350-2543
Cleveland: (440) 918-2543
Madison: (440) 428-4348 x12543
Fax: (440) 350-2548

Ron H. Graham, MPH, Health Commissioner
www.lcghd.org

October 17, 2022

Communicable Disease Update

COVID-19 Vaccinations

COVID-19 vaccinations started for state of Ohio, 64.06%

Counties with highest percentages of COVID-19 vaccinations started:

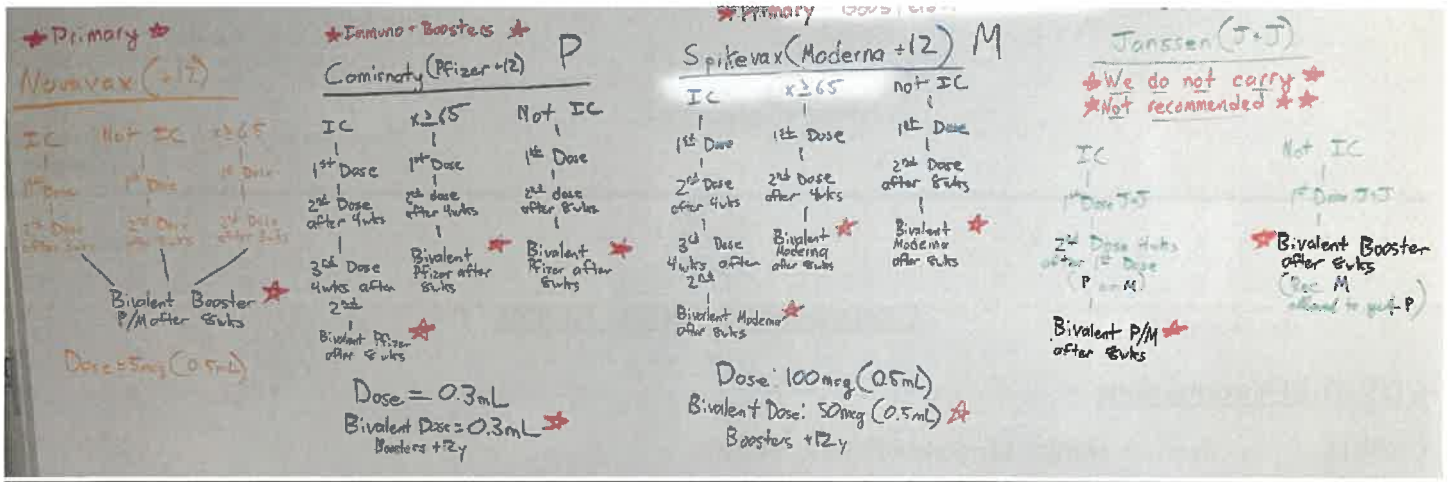
1. Delaware, 80.70%
2. Cuyahoga, 70.00%
3. Warren, 69.81%
4. Franklin, 69.29%
5. Lake, 69.18%

LCGHD COVID-19 Vaccination Update

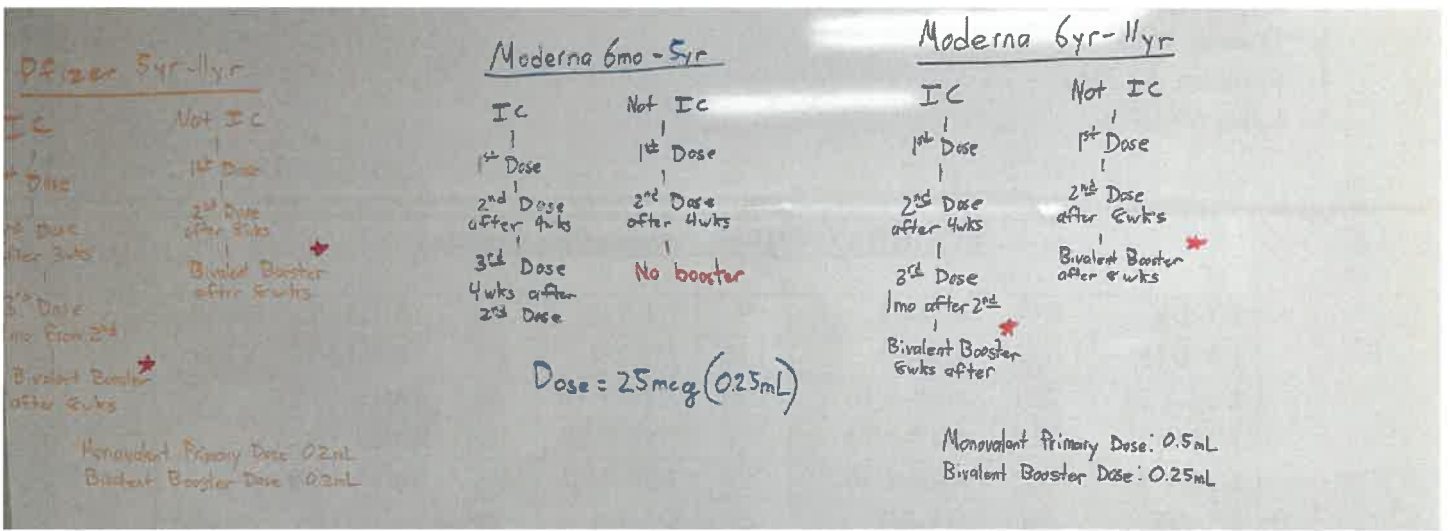
1/1-1/8	437	4/1-4/2	8	7/1-7/2	56	10/1-10/8	158
1/9-1/15	621	4/3-4/9	170	7/3-7/9	50	10/9-10/15	104
1/16-1/22	220	4/10-4/16	140	7/10-7/16	30	10/16-10/22	
1/23-1/29	228	4/17-4/23	103	7/17-7/23	105	10/23-10/29	
1/30-1/31	31	4/24-4/30	228	7/24-7/31	100	10/30-10/31	
2/1-2/5	96	5/1-5/7	21	8/1-8/6	79	11/1-11/5	
2/6-2/12	73	5/8-5/14	114	8/7-8/13	54	11/6-11/12	
2/13-2/19	97	5/15-5/21	69	8/14-8/20	35	11/13-11/19	
2/20-2/26	64	5/22-5/28	84	8/21-8/27	37	11/20-11/26	
2/27-2/28	7	5/29-5/31	0	8/28-8/31	40	11/27-11/30	
3/1-3/5	57	6/1-6/4	30	9/1-9/3	0	12/1-12/3	
3/6-3/12	63	6/5-6/11	99	9/4-9/10	88	12/4-12/10	
3/13-3/19	148	6/12-6/18	72	9/11-9/17	90	12/11-12/17	
3/20-3/26	47	6/19-6/25	59	9/18-9/24	157	12/18-12/24	
3/27-3/30	76	6/26-6/30	3	9/24-9/30	46	12/25-12/31	
Total	2,265	Total	1,200	Total	967	Total	262

COVID-19 Vaccination Updates

Adults:



Pediatric:

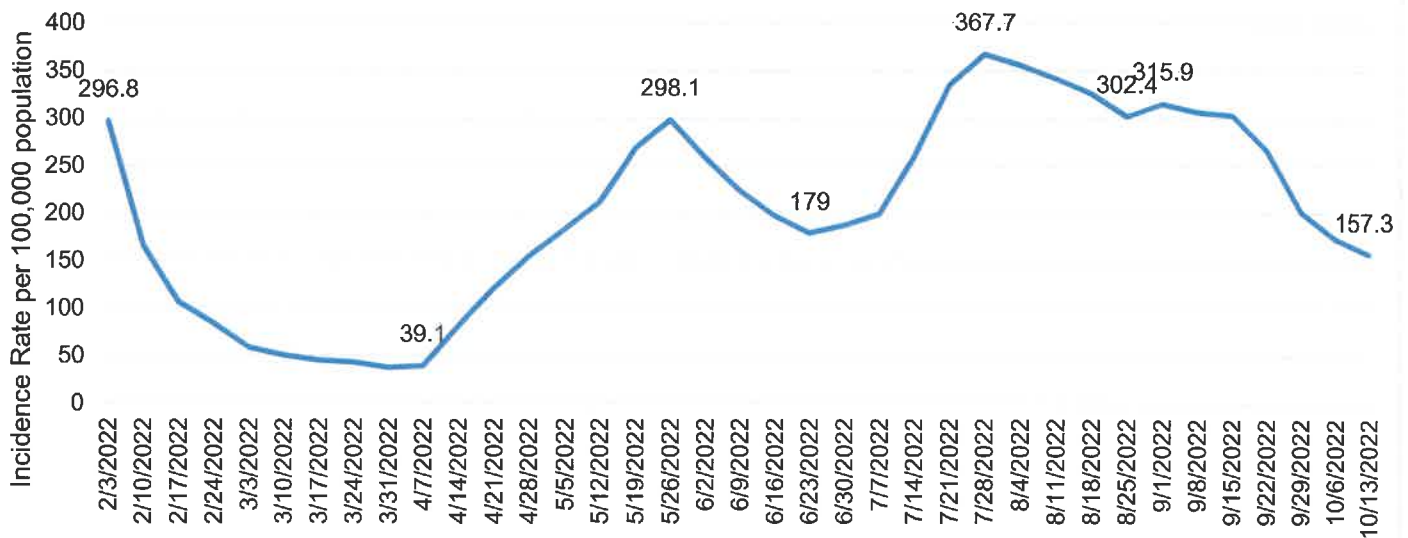


COVID-19 Cases and Incidence

COVID-19 Case Numbers	
10/1	24
10/2-10/8	190
10/9-10/15	183
October (to date)	397

As of Thursday...	Includes incident cases between (based on event date)	Number of new cases (rate)	Rank Among Ohio Counties
8/4/22	7/21-8/3	820 (356.3)	72
8/11/22	7/28-8/10	787 (342.0)	73
8/18/22	8/4-8/17	751 (326.3)	72
8/25/22	8/11-8/24	696 (302.4)	75
9/1/22	8/18-8/31	727 (315.9)	73
9/8/22	8/25-9/7	707 (307.2)	67
9/15/22	9/1-9/14	699 (303.7)	57
9/22/22	9/8-9/21	615 (267.2)	46
9/29/22	9/15-9/28	465 (202.0)	41
10/6/22	9/22-10/5	399 (173.4)	32
10/13/22	9/29-10/12	362 (157.3)	26

Lake County COVID-19 Two-Week Incidence Rates



*Preliminary and subject to change as more cases are investigated.

Event date = earliest known date associated with a case. When the case is initially reported, this is by default the date of test specimen collection. Once the case is determined positive and reported to the local health department, PCG makes up to 3 attempts to contact the case for interview (this procedure may be amended during surge). If the case (or case’s point of contact) completes the interview, Event Date is then backfilled with the self-reported date of symptom onset. Because of time it takes for case to have symptoms, get tested, get results, results to be reported into the system, and then contacted for interview, this number lags and backfills. This is why last 2-3 weeks are considered preliminary.

COVID-19 Cases investigated by LCGHD

Due to the potential for outbreaks, LCGHD has elected to focus case investigation on all cases ages 18 and under and all ages 65+ that are associated with a long-term care facility. Since the beginning of October LCGHD has investigated a total of 33 cases among those 18 and younger. (Total for similar timeframe in September was 151).

COVID-19 Outbreaks

LCGHD has also been investigating 4 currently active outbreaks in long term care facilities during October, including two in Mentor, one in Willoughby, and one in Madison. Numbers are pending, but currently there are 26 cases associated with these outbreaks, including 19 residents and 7 staff.

Infection Prevention & Control

No ICARs have been held to date for October, however, Tania Nanavati attended a staff meeting at Project Hope on October 11th and presented on Monkeypox and precautions for congregate settings.

Monkeypox

To date, Lake County has 9 confirmed cases of monkeypox as part of the current outbreak. Three contacts have been monitored (to date) and have completed quarantine. A total of 84 Lake County residents have been vaccinated for monkeypox as of 10/17/22.

LCGHD has created a Monkeypox page on the website with basic information about the disease, symptoms, prevention, and vaccine/treatment information. Given the small number of cases, no numbers are being reported through the website at this time, but LCGHD has linked ODH's monkeypox dashboard page, which includes data on cases and vaccinations for monkeypox.