

AGENDA
BOARD OF HEALTH
LAKE COUNTY GENERAL HEALTH DISTRICT
November 21, 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 October 17, 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 Finance Committee, Meeting Held November 21, 2022
- 6.0 Old Business
 - 6.01 Board of Health Tracking
 - 6.02 Resolution to Increase Certain Fees, Food Service Program, Second Reading

7.0 New Business

7.01 Resolutions

7.01.01 Certification of Monies, Resolution 22-11-07-01-01-100

7.01.02 Increase/Decrease Appropriations, Resolution 22-11-07-01-02-100

7.02 Permission to Accept COVID-19 Enhanced Operations (EO22) Grant, \$45,000

7.03 Recommendations from the Finance Committee, Meeting Held Prior to the Board Meeting

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, November 21, 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	Christine Margalis	Mariann Rusnak
Ron Graham	Kathy Milo	Tim Snell
Muhammad Jafar	Gina Parker	Paul Stromp
Dan Lark	Dawn Pierce	Jessica Wakelee
Adam Litke	Joe Rombough	

Also in attendance: WIC intern Jennie Demerski and John Marra.

2.02 Citizens' Remarks

John Marra stated the website discusses mask use, but believes this needs to be revisited. It also shows that children 6 months and older should get vaccinated, but there is no data to back it up. We shouldn't make recommendations without the science behind them. He said the Board of Health needs to do more research before recommendations. Safety should be looked at first.

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 November 16, 2022, was made by Health Commissioner Ron H. Graham.

3.0 Board of Health

3.01 Approval of Minutes

Dr. Lynn Smith moved and Patricia Murphy seconded a motion that the minutes of the October 17, 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

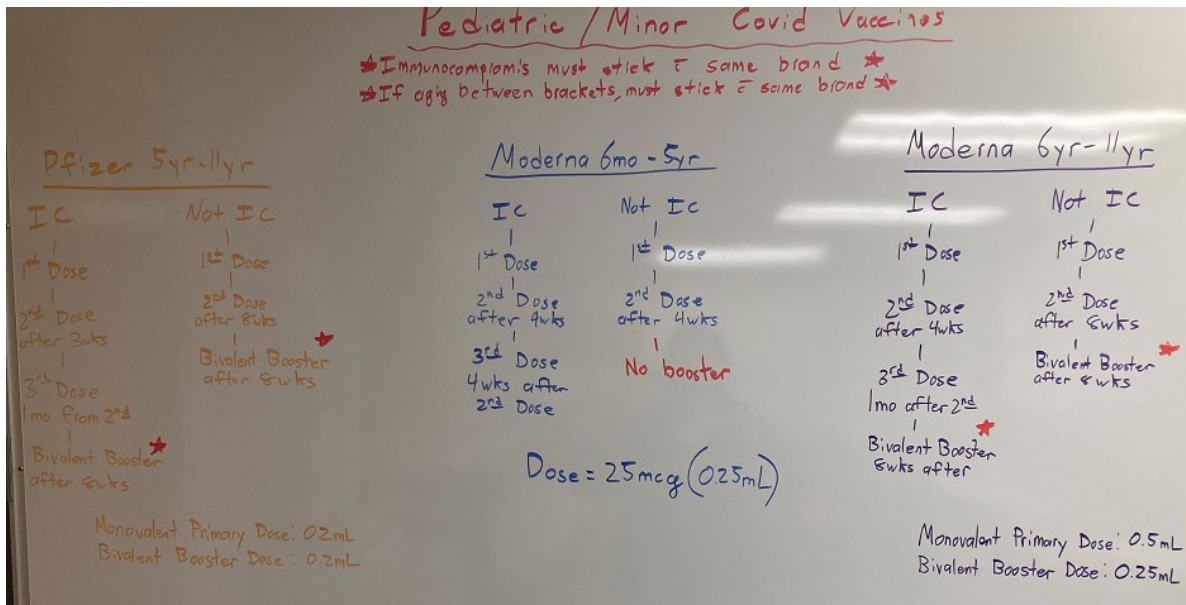
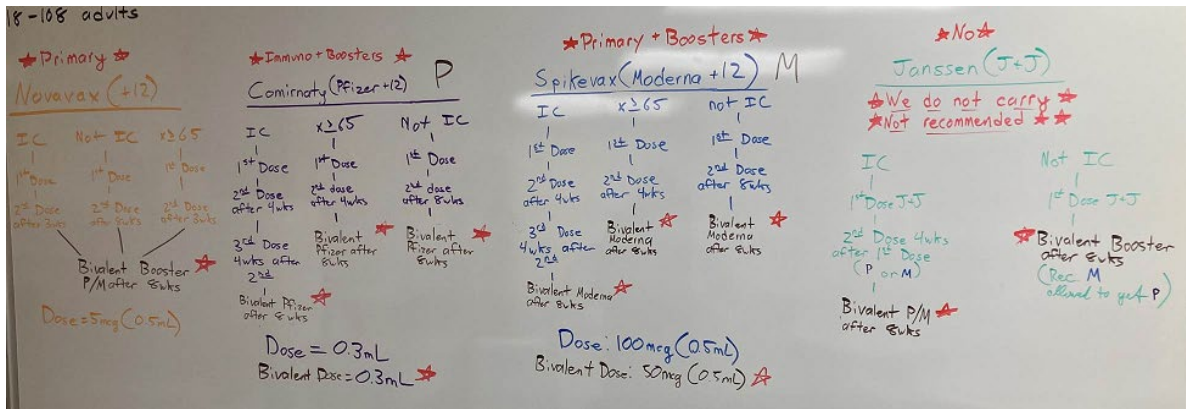
4.01.01.01 Updates and Special Topics

October was a busy month filled with routine childrens, routine adult, COVID, and flu vaccines. The preliminary vaccine recommendations have come out for children and adult for 2023, so nursing is working to determine how the changes affect our programs. Advisory Committee on Immunization Practices (ACIP) does not meet until February to officially amend their vaccine recommendations. We assisted our school staff in completing their hearing, vision, and immunization verifications. We have received our increase in Vaccines For Children (VFC) provided vaccines, and are working on a feasibility study regarding our private vaccine, given the significant increase in vaccine costs.

We are working to schedule and provide influenza immunization clinics as our vaccine supply allows, and have prioritized our seniors aged 65 years and older, and those children on VFC. When scheduling adults who are requesting both their Bivalent COVID Booster and influenza, roughly 2/3 people are electing to receive their influenza first, and come back in two weeks for their COVID vaccine. We have not yet encountered this with our homebounds. As of this writing, the Centers for Disease Control and Prevention (CDC) is reporting that influenza vaccine uptake is 15% behind the 2021 season.

COVID-19 Updates

The most current COVID-19 Vaccine Flow Charts are below. The CDC and the Ohio Department of Health (ODH) are moving towards being very specific when referring to COVID-19 vaccines are 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 are reviewing our Performance Measures for Quarters 1-3 and where we are at in Quarter 4 to determine goals for next year.

Grants

Get Vaccinated Ohio (GVO)

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

- D1- Immunization Reminder and Recall System: On track
- D2- Immunization Coverage Disparities: On track, D2A training done with ODH
- D3- Immunization Provider Identification: Completed, submitted
- D4- Immunization Quality Improvement for Providers: On track
- D5- Provider Education-MOBI and TIES: 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)

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

A1- Staffing and Personnel Activity: No changes

A2- Using Vaccine Equity Data for Prioritization: on track

A3- Promotion Efforts for Vaccine Awareness: on track

A4- Mobile and Off-Site Vaccine Efforts: on track

A5- Vaccine Efforts through Community Based Organizations: on track

A6- Vaccine Efforts through grass-roots organizations: on track

A7- Vaccine Efforts in high- Social Vulnerability Index (SVI) defined areas: on track

A8- Vaccine Registration Process- on track

A9- Distribution of Vaccine Incentive Cards: N/A

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 district. These include Perry local school district, Mentor Exempted village, Madison Local school district, Fairport Harbor Exempted village, Our Shepherd Lutheran School, Wickliffe City Schools (as needed), 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 Community Health Services (CHS) trainings. The self-paced courses taken by the staff throughout the month of October includes: Sped, School aged screenings- Vision, Mandated school screenings, and Blood Borne Pathogens.

Wickliffe City Schools has asked us to come back for another week in the month of November to fill in for their elementary school nurse. They were very pleased with the service that was provided during the month of October and had high praises for Sarah, the nurse that filled in.

The RN sub/ Children with Medical Handicaps (CMH) nurses, Sarah and Mary, have started their CMH training and will continue their training into the month of November. The field case manager nurse from the state will be visiting on site to help provide better training to the staff. They also have multiple dates set up via zoom to go over training and materials.

We plan to start training and certifying school teachers, community members, and LCGHD staff in First Aid/CPR/AED through the American Red Cross.

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 55 vaccines for the month of October with clinics being held on 10/3/22 and on 10/24/22 at the health department in Mentor. A total of 20 children were seen in the month of October, with 6 being private pay and the remaining 14 children qualified for the Vaccine for Children (VFC) program. 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; Kinrix, Tdap, Hep A, Hep B, Hib, Gardasil, Meningitis, 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.

Influenza

138 influenza vaccines were given in October.

159 influenza vaccines have been given so far in November.

COVID-19

Immunization Count per IMPACTSIIS

January	1537	July	341
February	337	August	245
March	391	September	381
April	649	October	487
May	288	November	
June	263	December	

Children with Medical Handicaps (CMH)

Dyan is continuing to cover this position while additional RN's are trained.

Communicable Disease

Dyan is continuing to cover this position until an RN is hired. The county has been working with us to increase the Tuberculosis appropriations and ensuring the program has sufficient funding with the rising costs of labs and medications.

Car Seat Program (OBB) and Cribs for Kids

	Jan	Feb	March	April	May	June	July	August	Sept	October	Total
Car seats	2	15	7	5	7	6	12	12	4	14	84
Boosters	0	1	1	0	3	0	1	0	0	0	6
High Back Boosters	n/a	2	0	0	0	4	8	3	6	1	24
Cribs	n/a	1	0	4	4	5	3	1	0	0	18

Lead

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	882	5	1	
Not High Risk Zip-code	535	5	1	
Total	1417	10	2	
Total Tested By Sex				
Female	749	5	0	
Male	667	5	2	
Unknown	1	0	0	
Total	1417	10	2	
Total Tested By Age				
Less than 1y	72	0	0	
1 Year	770	8	0	
2 Year	355	1	1	
3 Year	95	1	1	
4 Year	81	0	0	
5 Year	44	0	0	
6 Year	0	0	0	
Total	1417	10	2	

The CDC changed the level at which a lead test is considered elevated from 5mcg/dL to 2.5 mcg/dL. “This level is based on the on the 97.5th percentile of the blood lead values among U.S. of children ages 1-5 years from the 2015-2016 and 2017-2018 National Health and Nutrition Examination Survey (NHANES) cycles. Children with blood lead levels at or above the BLRV are among the top 2.5% of U.S. children with the highest blood lead levels.”

<https://www.cdc.gov/nceh/lead/prevention/blood-lead-levels.htm>

There is no safe blood lead level. “Even small amounts of lead can cause learning and behavior problems in children. Lead replaces iron and calcium and affects many parts of the body, especially the nervous system. Lead is most harmful to children under the age of six, because a child's growing body takes up lead easily.” There are specific medical management requirements that are based on the Lead level, please see the attached form.

[https://odh.ohio.gov/wps/wcm/connect/gov/718d4ebf-c78a-4f64-b250-cd7190c3bfbe/Medical-Management-](https://odh.ohio.gov/wps/wcm/connect/gov/718d4ebf-c78a-4f64-b250-cd7190c3bfbe/Medical-Management-Guidelines.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_K9I401S01H7F40QBNJU3SO1F56-718d4ebf-c78a-4f64-b250-cd7190c3bfbe-nEIZbPT)

[Guidelines.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_K9I401S01H7F40QBNJU3SO1F56-718d4ebf-c78a-4f64-b250-cd7190c3bfbe-nEIZbPT.](https://odh.ohio.gov/wps/wcm/connect/gov/718d4ebf-c78a-4f64-b250-cd7190c3bfbe-nEIZbPT)

We are currently a Case manager for all cases greater than 10mcg/dL. But receive notification for all Lead Values that are considered elevated.

<https://odh.ohio.gov/know-our-programs/childhood-lead-poisoning/about-lead>

Ohio law requires all providers to administer lead test to children ages 1-2 and up to 6 if they have not previously been tested, based on certain criteria, out line on the following form

[https://odh.ohio.gov/wps/wcm/connect/gov/6ba9ce85-93a8-4fb9-aa8f-05cc8cd1ba53/Lead-Testing-Requirements-and-Zip-](https://odh.ohio.gov/wps/wcm/connect/gov/6ba9ce85-93a8-4fb9-aa8f-05cc8cd1ba53/Lead-Testing-Requirements-and-Zip-Codes.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_K9I401S01H7F40QBNJU3SO1F56-6ba9ce85-93a8-4fb9-aa8f-05cc8cd1ba53-nEIZ6MX)

[Codes.pdf?MOD=AJPERES&CONVERT_TO=url&CACHEID=ROOTWORKSPACE.Z18_K9I401S01H7F40QBNJU3SO1F56-6ba9ce85-93a8-4fb9-aa8f-05cc8cd1ba53-nEIZ6MX.](https://odh.ohio.gov/wps/wcm/connect/gov/6ba9ce85-93a8-4fb9-aa8f-05cc8cd1ba53-nEIZ6MX)

We currently perform Capillary Lead Testing to our local head start programs. And are contracted with The National Children’s Laboratory; they provided us with our test kits, run our test and provide us and ODH with the results.

** Lead Testing data is tentative and always subject to change. Due to the way the Ohio Public Health Information Warehouse is designed, data cannot be broken out by months or quarters and is submitted as a total yearly accumulative data set that is updated daily. **

The following information is listed when first accessing the Ohio Public Health Information Warehouse:

“The purpose of this Data Warehouse module is to make childhood blood lead level data reported to the Ohio Department of Health more accessible to public health professionals and the general public. When viewing and interpreting the customizable graphs and tables, users should note the following:

1. Children tested more than once in a calendar year are shown only once in these data. Unless otherwise noted, blood lead levels reflect the highest confirmed test during the year if confirmed test exists for a child, or the highest test for the year, otherwise (this is referred to in the data as “Best Test For Calendar Year”).
2. Only a venous blood draw may be classified as a confirmed test. Point-of-care devices can never confirm a child’s lead level, regardless of whether the sample is venous or capillary.

3. Units are µg/dL, or micrograms of lead per deciliter of blood.
4. Data for a year are finalized by July 1 of the calendar year that follows. Before this date, any reported data may be added to and updated as laboratory test data are shared with the Ohio Healthy Homes and Lead Poisoning Prevention Program (e.g. 2017 data may change until July 1, 2018). “

(<https://publicapps.odh.ohio.gov/EDW/DataBrowser/Browse/LeadData>)

Dyan Denmeade provided the following highlights:

- *The first half of data loggers are back following recalibration. The others will be sent out next week and should be back by Christmas.*
- *There were no COVID vaccinations the first week of November. There were only flu clinics that week.*
- *In the Ohio Impact Statewide Immunization Information System (ImpactSIIS), some vaccinations cannot be separated between adult and children for reporting purposes.*
- *The state nurses' time will currently end in January.*
- *Sarah Van Vechten has been fully-trained in the Children with Medical Handicaps (CMH) program.*
- *The tuberculosis patient is still on Direct Observation Therapy (DOT).*
- *A school nurse will be going back to Wickliffe Schools. They have been very happy with Sarah and requested her again.*

Discussion:

Patricia Murphy requested a presentation regarding the CMH program next year.

Lindsey Virgilio asked if school nurses have the option of staying at schools that contract with LCGHD. Ron Graham said we try to keep the nurses any time we can.

Patricia Murphy suggested Dyan Denmeade give a short presentation on the school nursing program at one of the Lake/Geauga Catholic Church meetings.

David Valentine asked if there is any tracking of RSV. Muhammad Jafar said it is not reportable, but some hospitals do report it. RSV in Lake County is higher this year than in the past two years.

4.02

Environmental Health

4.02.01 **Division Director's Report**

4.02.01.01

Updates and Special Topics

Mosquitos and Disease Data Recap

This was a rare year for Lake County. Lake County residents did not have any human cases of West Nile virus, while the state had 7 human cases. Of the over 2,000 mosquitos LCGHD sent for West Nile virus testing, less than 100 mosquitos ended up testing positive for the virus. The low mosquito infection rate in Lake County was consistent with findings across the State of Ohio. Culex mosquitos are the main vector for West Nile Virus and over 400,000 Culex mosquitos from 51 counties were tested by the Ohio Department of Health this season.

While the main focus for mosquito disease prevention is on West Nile Virus and the risk to our residents was present, fortunately Lake County did not (as of this writing), have any human cases of West Nile Virus. Out of the mosquitos caught in our traps, 22 mosquitos were identified as Aedes Triseriatus which can spread La Crosse Encephalitis. Luckily this disease was not identified in Lake County this year.

Lake County has the right species of mosquitos that can spread serious diseases. Effective mosquito control and education does a lot to protect Lake County from potentially devastating diseases. LCGHD had two teams working on larval control that treated confirmed mosquito breeding areas. We also had one staff member assigned to surveillance during the season; this job is responsible for setting and collecting the traps, counting the mosquitos, and preparing the samples for shipping to the ODH lab. We also utilized these daytime staff members to educate marina managers and owners of the Tip it Tuesday program as a way to decrease the mosquito population at their facilities. Our night crew of 6 drivers, were able to spray all 26 routes in the county 3 times and began a 4th round before the cooler nights limited our ability to spray. Just under 300 gallons of Merus 3.0 were used to spray 1,500 miles and 56,134 acres of Lake County.

4.02.02 **Air Pollution Control Programs**

4.02.02.01

Unit Supervisor's Report

Air Pollution Control

B. Mechenbier participated in the monthly Ohio Local Air Pollution Control Officers Association (OLAPCOA) conference call on October 3. Ohio EPA updated the group on the new contracts and the federal American Rescue Plan money that is available. We are looking into using some of this money for a new PM2.5 monitor (\$26,000.00), data logger (\$9,000.00) and a

new shelter for our Eastlake site (\$40,000.00). The State is working on updated payment schedules for the local air agencies.

Northeast Ohio is scheduled to be bumped into Moderate Non-Attainment for Ozone. This designation may require new sources of Nitrogen Oxides and Volatile Organic Compound (VOC), the chemicals needed to form low level ozone, to utilize additional control measures to limit the emissions.

B. Mechenbier participated in the USEPA Technical Services Audit close out call on October 12. We are awaiting the official results from the USEPA.

B. Mechenbier participated in the monthly Local Emergency Planning Committee meeting on October 13.

B. Mechenbier participated in a Point of Dispersion notification drill on October 27. For drill purposes the entire EH staff were notified of the drill in 20 minutes.

Staff participated in a Technical Services Organization meeting on October 20. The new monitors and ARP equipment were discussed.

Ohio EPA conducted audits of the Geauga County Ozone monitor on October 20th and Fairport Harbor and Painesville particulate monitors, on October 21st. The monitors were within limits.

4.02.03 **General Environmental Health Programs**

4.02.03.01 **Unit Supervisor's Report**

Food Safety

For October, the food staff were able to complete 187 standard food inspections, 19 reinspections, 13 pre-licensing inspections, 2 mobile inspections, 19 complaints, 4 consultations, 6 vending inspections, and 3 plan reviews. In addition, they completed 1 indoor pool inspection, 4 pool reinspections, and 27 school inspections.

Staff participated in the annual Food Safety Task Force on October 24th. This year focused on hand washing, cleanliness, and active managerial control for food operations. Additionally, staff completed the annual LCGHD Blood Borne Pathogen Training and a Food Borne Exercise Training meeting in preparation of the November drill.

Housing

Lake County Elder Interdisciplinary Team

C. Loxterman attended the monthly Interdisciplinary meeting.

Continuous Quality Improvement (CQI)

Pool Disinfection Violation Quality Improvement

A project meeting was held in October to discuss the data results that did not meet expectations of the Aim Statement of the plan. Another meeting is to be scheduled to discuss further possible solutions or changes to be made to the plan.

A quality improvement training for all staff went out November 1st. The training covered process evaluation and mapping. This training was part of the Workforce Development Plan trainings.

4.02.04 Vector-borne Disease Program

4.02.04.01

Unit Supervisor's Report

Mosquito Control

C. Armstrong is continuing to winterize the trucks and sprayers.

C. Armstrong attended the Ohio Mosquito and Vector Control Association meeting in Columbus on October 24. Interesting topics included the upcoming Ohio EPA Mosquito Control Grant and data logging apps from Frontier.

4.02.05 Water and Waste Programs

4.02.05.01

Unit Supervisor's Report

Storm Water

Staff conducted screening in Concord, Painesville, Kirtland, and Mentor between rain events. Five samples were collected at suspicious outfalls; one location was confirmed twice as having high levels of E.coli.

Staff received and investigated 3 illicit discharge complaints in October in Mentor, Mentor on the Lake, and Concord. None of which were detected as an illicit discharge. Staff will continue to investigate and track possible illicit discharges and ongoing illicit discharges.

Staff attended the following Ohio EPA online trainings: The Do's and Don'ts of Universal Waste Management, Stormwater Permitting Requirements for Industrial Activity Under 2022 General Permit, What to Expect During a Hazardous Waste Inspection, Prepare for Success: What to Expect During an Ohio EPA Surface Water Inspection, Two Type of Facilities - Those Who Had a Spill and Those Who Will, and GIS for Environmental Regulations.

Good Housekeeping

Annual Good Housekeeping presentation/training was conducted on Oct 20th for all member communities needing training. Topics include illicit discharges in the community, Best Management Practices and OEPA updates for their facilities.

Good Housekeeping (MCM6) inspection was completed in Willoughby Hills.

Sewage Treatment

The Wastewater Division hosted a training October 25th for our Lake County registered sewage contractors to obtain all six of their annually-required continuing education credits. Dr. Sara Heger, PhD, a nationally renowned researcher in the wastewater field, gave several interesting presentations as our keynote speaker, with other locally-relevant talks given by all of our wastewater staff members. The training was attended by 44 sewage contractors, 2 staff from Lake County Solid Waste Facility, and 8 Registered Environmental Health Specialists from Geauga Public Health. The class was very well received.

Water Pollution Control Loan Fund (WPCLF):

The chart for WPCLF Funds below shows completed and remaining jobs that should be completed this year. Completion of these jobs will close out funding monies from WPCLF 2021. These funds will need to be used up by December 2022. The 2022 WPCLF funds will be available for use once all 2021 monies have been exhausted. We will again have \$150,000 from 2022 funding and the same amount for 2023 to help replace failing septic systems for qualifying homeowners.

2021 WPCLF FUNDS									
ADDRESS	Total Bid	EPA BID COST	HOMEOWNER COST	%	HSTS	Sewer	Completion Date	Contractor	Paid Date- PO
12460 Carter Rd. - Barnes (2020 Carryover)	\$1,553.43	\$1,553.43	\$0.00	100	Yes		12/10/2020	Bruening	12/10/2020
10171 Hobart - Liddy- plumbing	\$2,450.00	\$2,082.50	\$367.50	100	Yes		3/8/2022	Nicholson	3/11/2022
11069 Worrell Rd. - Vovk CANCELLED PAID DeGeen for NOI permit \$200	\$200.00	\$200.00	\$0.00	100	Yes		6/30/2022	DeGreen Const.	7/1/2022
5646 Shandle- Sikorski	\$10,428.00	\$8,863.80	\$1,564.20	85	Yes		3/29/2022	JC Hauling	3/23/2022
13500 Girdled Rd.- Alexander	\$14,400.00	\$14,400.00	\$0.00	100	Yes		3/30/2022	RL Collins	3/3/2022
13500 Girdled Rd.- Alexander (change order)	\$1,184.31	\$1,184.31	\$0.00	100	Yes		3/30/2022	RL Collins	4/12/2022
7203 Euclid Chardon - Forsythe **repair**	\$7,680.00	\$7,680.00	\$0.00	100	yes		6/23/2022	Marut & Sons	7/1/2022
7864 South Ridge Rd. - Kelly	\$16,400.00	\$13,940.00	\$2,460.00	85	Yes		6/24/2022	DeGreen Const.	7/1/2022
3016 Oakview Rd.- Fiorello	\$16,895.10	\$16,895.10	\$0.00	100	Yes		6/23/2022	JC Hauling	7/1/2022
2975 Perry Park Rd. - Lett	\$17,250.00	\$17,250.00	\$0.00	100	Yes		6/24/2022	Marut & Sons	7/1/2022
2516 Kennelly- Gubanc	\$7,178.00	\$6,101.30	\$1,076.70	100	Yes		6/23/2022	JC Hauling	7/1/2022
2920 Hemlock Dr.- Pusi	\$46,554.25	\$46,554.25	\$0.00	100	Yes			Marut & Sons	
7136 Pinhill Rd. - Gartner	\$16,200.00	\$16,200.00	\$0.00	100	Yes			DeGreen Const.	
770 Newell St- Moore	\$17,000.00	\$14,450.00	\$2,550.00	85	Yes			DeGreen Const.	
6790 Morley Rd - Little	\$20,214.25	\$10,107.13	\$10,107.12	50	Yes			Marut & Sons	
3380 Narrows Rd - Squire	\$25,794.25	\$12,897.13	\$12,897.12	50	Yes			Marut & Sons	
2920 Hemlock -Pusi **Polaris Eng**	\$3,250.00	\$3,250.00	\$0.00	100	Yes			Polaris	
	\$0.00	\$0.00	\$0.00						

Solid Waste

Staff conducted landfill inspections at the Lake County Solid Waste Facility.

Staff conducted closed landfill inspections at Lake County RDF in Kirtland, Willoughby Pelton Rd. Landfill, Perry Twp. Landfill, and Bates Rd. Landfill in Madison.

Staff conducted compost site inspections at Perry Twp., McAllister’s Landscape, D.W. Bentley, and Blue Spruce in October.

Water Quality

No report at this time.

Bathing Beach

No Report at this time; the beach season is over.

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:

- *No report*

Discussion:

Patricia Murphy congratulated the staff on the mosquito control. Dan Lark said that there were no human cases of West Nile Virus in Lake County, but some mosquito pools did test positive for it.

Brian Katz asked for an update on the swimming pool at Milestone Athletic Club in Willoughby Hills. Dan Lark said he is not aware of any current issues, but will check.

4.03

Finance and HR Director's Report

4.03

Director's Updates and Highlights

4.03.01

Miscellaneous

1. Finalizing renewal of Elara Caring Lease.
2. Planning to make significant improvements throughout the building in the coming months.
3. Temporary Budget for 2023 has been completed and will be presented at the meeting.

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. 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. Naomi Cicon – Clinical Specialist – November 11, 2022
7. Job Abolishment
 - a. None
8. Cancelled Positions
 - a. None

Lake County General Health District				
MONTHLY FINANCIAL REPORT		Oct-22		
RECEIPTS	YTD	BUDGET	% RECD	YTD LESS BUDGET
Environmental Health Receipts	\$ 1,507,919	\$ 1,418,500	106%	\$ 89,419
Public Health Nursing	\$ 11,380	\$ 41,000	28%	\$ (29,620)
Federal Grants	\$ 1,594,920	\$ 2,442,045	65%	\$ (847,125)
State Grants	\$ 868,073	\$ 950,000	91%	\$ (81,927)
Local Contracts	\$ 774,031	\$ 679,000	114%	\$ 95,031
Vital Statistics	\$ 337,164	\$ 382,100	88%	\$ (44,936)
Miscellaneous	\$ 412,744	\$ 96,000	430%	\$ 316,744
Tax Dollars	\$ 2,840,240	\$ 2,840,241	100%	\$ (1)
Rental Income	\$ 74,614	\$ 86,136	87%	\$ (11,522)
Capital Improvement	\$ 27,850	\$ -	#DIV/0!	\$ 27,850
TOTAL RECEIPTS	\$ 8,448,935	\$ 8,935,022	95%	\$ (486,087)
Beginning Cash Balance	\$ 7,482,407	\$ 6,206,680	121%	\$ -
TOTAL - ALL FUNDS	\$ 15,931,342	\$ 15,141,702	105%	\$ (486,087)
DISBURSEMENTS				
Salaries	\$ 3,550,792	\$ 4,126,050	86%	\$ (575,258)
Fringe Benefits	\$ 1,289,498	\$ 1,588,050	81%	\$ (298,552)
Contract Services	\$ 701,249	\$ 727,950	96%	\$ (26,701)
Program Supplies, Marketing, Health Ed.	\$ 416,463	\$ 657,950	63%	\$ (241,487)
Office Supplies and Postage	\$ 35,088	\$ 95,100	37%	\$ (60,012)
Transportation and Travel	\$ 63,729	\$ 77,650	82%	\$ (13,921)
Building Expense	\$ 278,176	\$ 158,525	175%	\$ 119,651
Equipment	\$ 139,952	\$ 309,000	45%	\$ (169,048)
Returns	\$ 3,558	\$ 6,900	0%	\$ (3,342)
Operating Expenses	\$ 418,373	\$ 558,750	75%	\$ (140,377)
Contingency	\$ -	\$ 250,000	0%	\$ (250,000)
Capital Improvement	\$ 58,579	\$ 400,000	15%	\$ (341,421)
SUB TOTAL	\$ 6,955,457	\$ 8,955,925	78%	\$ (2,000,468)
Obligations from previous year	\$ 398,440	\$ 398,440	100%	\$ -
TOTAL DISBURSEMENTS	\$ 7,353,897	\$ 9,354,365	79%	\$ (2,000,468)
CARRYOVER	\$ 8,577,445	\$ 5,787,338	67%	\$ 2,790,107
# MONTHS & % OF YEAR	10	12	83.33%	

		October	
Fund #	Fund Name	2022	2021
001	Health Payroll Reserve Fund	\$ 500,168.00	\$ 250,168.00
002	Immunization Action Plan	\$ 45,254.89	\$ 47,576.96
003	Manufactrd Homes, Parks, Camps	\$ 18,850.00	\$ 14,570.00
004	Water Systems	\$ 59,679.50	\$ 44,162.50
005	WIC	\$ 221,417.42	\$ 47,148.24
006	Swimming Pool	\$ 69,920.22	\$ 57,161.47
007	Board of Health	\$ 3,426,814.90	\$ 3,383,766.17
008	Vital Statistics	\$ 228,447.64	\$ 158,745.94
009	Tuberculosis Record Program	\$ -	\$ -
010	Food Service	\$ 547,806.53	\$ 613,867.79
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	\$ 148,284.98	\$ 422,311.42
014	Air Pollution Control	\$ 28,445.41	\$ 99,684.96
015	Solid Waste Site	\$ 275,804.36	\$ 196,474.37
016	Help Me Grow	\$ -	\$ -
017	Public Health Infrastructure	\$ 288,501.55	\$ 298,178.77
018	Safe Community Program	\$ 62,480.72	\$ 51,762.30
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	\$ 660,883.87	\$ 561,357.74
024	Dental Sealant	\$ -	\$ -
025	Carol White Grant	\$ 3,794.84	\$ 3,794.84
026	Permanent Improvement	\$ 642,586.62	\$ 244,219.19
027	FDA Food Service	\$ 93,610.54	\$ 77,431.69
028	Tobacco Use Prevent & Cessation	\$ 214,219.91	\$ 169,603.89
029	Office of Health Policy & Performance	\$ 364,383.11	\$ 450,314.49
997	AFLAX/Voya	\$ 1,734.55	\$ 1,734.55
Total Cash		\$ 8,577,444.90	\$ 7,618,390.62

Notes to above chart:

General Fund

There was an increase in the General Fund (Fund 007 – Board of Health) of 1.27% from October 2021 to October 2022.

Reserve Funds

The two reserve funds (Fund 001 – Health Payroll Reserve Fund and Fund 012 – Health Budget Stabilization) have been increase from approximately \$250,000 each to \$500,000 each from October 2021 to October 2022. These two funds are used to plan for unexpected expenditures in the future. An example of this would be the 27th pay that occurs approximately every 11 years.

Permanent Improvement Fund

The fund used for building upgrades (Fund 026 – Permanent Improvement) has increased from \$244,219 to \$642,587. This is the fund the fund currently used to pay for updates like the parking lot repairs, elevator upgrade, new carpeting, etc. The upcoming building upgrades that are planned will primarily come from this fund.

Adam Litke provided the following highlights:

- *Reviewed the temporary 2023 budget. The final temporary budget must be done by April. The largest resources are from tax dollars. We do not want it to be above 25%, but it is currently at 31%. There will be no COVID dollars in 2023. The last large grant that was not COVID-related was the Carol White grant in 2014. Costs for items, such as salaries, health insurance, retirement, and replacement vehicles are increasing. We need to explore new areas for growth as grants are staying stagnant. We would like to avoid anything higher than a 3% increase on the tax assessment when approaching the Health District Advisory Council in March.*
- *We are still not on the county's new accounting software. The state is now requiring new line items for each grant. We will need to look into software if the county cannot accommodate us as Excel is reaching its limit of usefulness.*
- *Item #14 (Air Pollution Control) on the temporary 2023 budget is currently in the red, but the increase/decrease resolution today will remedy that until the funds are received.*

Discussion:

Steve Karns asked why there is \$700,000 more dollars in revenue than past years. Adam Litke said they are mostly due to school nursing contracts and the Geauga Public Health contract. He will add dollar amount comparisons next year.

Rich Harvey asked what the issue was with getting on the county's accounting software. Adam Litke said it still needs to be tweaked to suit our needs.

Steve Karns asked how the state audits the records. Adam Litke said the state is aware there are two books, ours and the county's. The county's books are audited and balanced against ours, even though it isn't ideal. The county's system is accrual-based, while ours is cash-based. Our funds are held by the county treasurer. Ron Graham will talk to Jason Boyd at the Commissioners' office for the timeline on the software.

4.04

Health Education and Outreach

4.04

Division of Health Education and Outreach Report

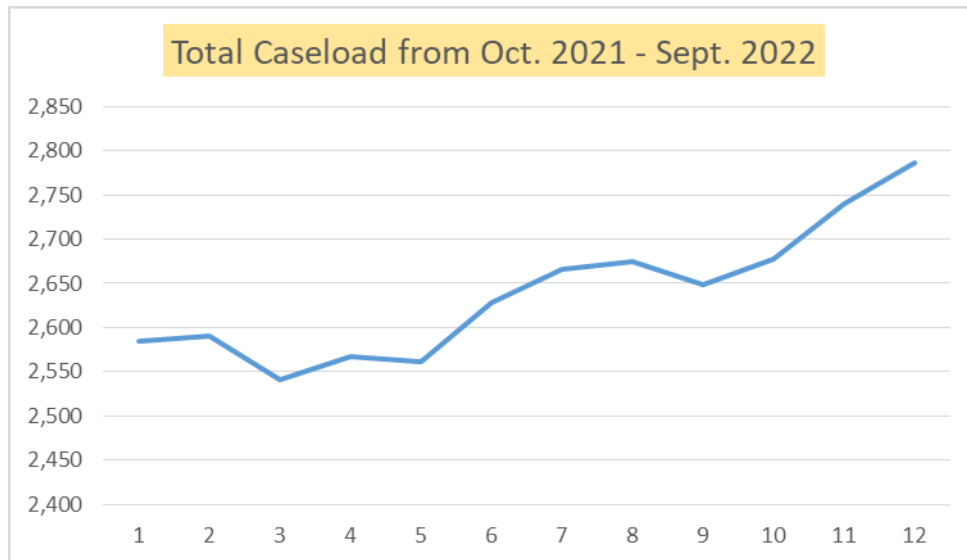
4.04.01.01

Division Director's Report

The increased fruit and vegetable cash value benefits (CVB) have been extended through Federal Fiscal Year 2023 (FFY23) ending **September 30, 2023**. Children will receive \$25, pregnant, post-partum and minimally breastfeeding participants will receive \$44, exclusively breastfeeding participants will receive \$49 and exclusively breastfeeding multiples participants will receive \$73.50.

Since the public health response, the USDA has extended the WIC waivers through **mid-April, 2023**. They have also extended the allowance of the provision of non-contract brand primary formulas through **December 31, 2022**.

FY23 started on October 1, 2022. Below is a graph that illustrates the caseload for all clinics in Lake-Geauga County. The staff have really seen an increase in caseload and have risen to the challenge of retaining our families and providing them the best service! Way to Go! Moving forward for FY23, this graph will be included every month.

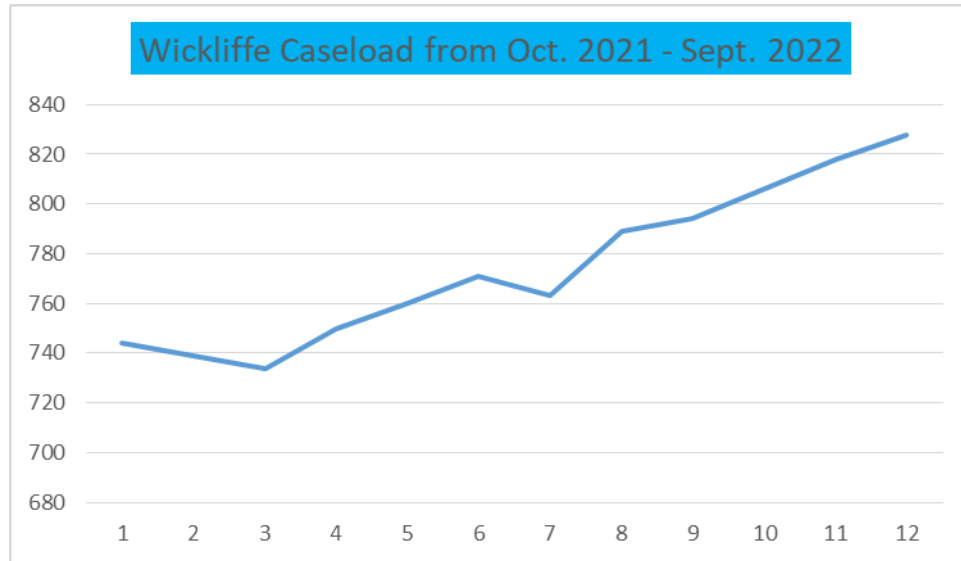


Meetings and trainings attended:

- October 11 – Management Evaluation Exit Interview
- October 12 – LC Caregiver Forum – WIC brochures available
- October 17 – Formula Shortage Conference call
- October 17 – BOH meeting
- October 18 – CLAS Committee
- October 24 – WIC staff meeting
- October 25 – LC Family First Council
- October 27 – Breastfeeding Conference state call
- October 27 – Geauga County CHIP meeting
- October 27 – Lake County Birthright Board meeting

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/Other Updates

The FY23 SMART Objective is for every WIC program to provide education on the urgent maternal warning signs to all women at least once during pregnancy and once during the postpartum certification appointment with the goal to increase knowledge and improve health outcomes among women at risk for an adverse event in the perinatal period. Projects must track the number of active women participants and document the number of women provided with the education, by race and ethnicity.

Breastfeeding Update

The Breastfeeding Coordinator and the WIC Director participated in the state wide Breastfeeding Conference call on October 27, 2022. This provides local WIC programs to network with other breastfeeding staff and continue to stay up to date with the latest information from the State WIC office.

Health District Updates

WIC (Women, Infants, and Children)

Women, Infants and Children, also known as WIC, is now back to offering in-person infant feeding and caregiver support groups through their Breastfeeding Café program! This program is open to all caretakers and all WIC and non-WIC members.

The Breastfeeding Café focuses on how to breast/chest feed, and is a safe space for questions about breast/chest and formula feeding.

What to Expect:

- A new breast/chest feeding topic covered each session
- Pre- and post-feeding weigh-in for baby as an addition to regular pediatric visits
- Registered dietitians available to talk about healthy eating for the whole family
- An overview of the WIC program
- Caregiver-to-caregiver support: Connect with others who have young babies
- An interpreter is available on certain days to offer bilingual services (Contact WIC for more details)
- An open space for any questions!



Breastfeeding Café Dates and Times:

Lake County:

- Last Tuesday of each month
- 1pm – 2:30pm
- Painesville WIC & Wickliffe WIC (alternating monthly)
- *Painesville:* 1 Victoria Square, Painesville OH
- *Wickliffe:* 2255 Rockefeller Road, Wickliffe OH

Geauga County:

- Last Wednesday of each month
- 10am – 11:30am
- Chardon Library: 110 E Park St, Chardon, RM #3, 10-11:30 AM

More information on WIC programs, services, and more can be found at www.lcghd.org/wic



If interested or for questions about the Breastfeeding Café, please contact:
Breastfeeding Café Coordinator Liz Homans - lhomans@lcghd.org, (216)-403-1320 [call or text]
Or Breastfeeding Coordinator Ilana Litwak - ilitwak@lcghd.org, (440)-350-2604

	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%
October 2022	71%	71% (subject to change)

State WIC Updates

Clinic Caseload: October 2022

CLINIC	FY22 Assigned Caseload	October Caseload	% Caseload
Painesville	1,255	1309	104%
Wickliffe	828	848	102%
Madison	315	314	99%
Chardon	234	242	103%
Middlefield	117	113	97%
Caseload	2,749	2,826	+77

Clinic Show Rate: October 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%
Chardon (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%	91%
Wickliffe	87%	82%	83%	86%	82%
Madison	83%	89%	100%	90%	91%
Chardon (G)	88%	91%	92%	75%	90%
Middlefield (G)	75%	75%	73%	67%	72%

Clinic Activity in: October 2022

Activity	Scheduled	Attended	Show Rate %
Re-certifications	145	120	83%
Certifications	207	177	86%
Individual Educations	703	629	89%
High Risk Clients	117	95	81%

Kathy Milo provided the following highlights:

- *Introduced Jennie Demerski, a WIC intern from Kent State University.*
- *An update to the breastfeeding rates listed in the report: The breastfeeding rate for October is 36%. The breastfeeding initiation rate remains at 71%.*

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. This also includes individual meeting with staff member to review and finalize documentation. As of this writing, 51 of 90 required examples have been finalized for submission. As noted in October's Board of Health report, LCGHD's initial reaccreditation application was submitted on September 26 and has yet to be reviewed. As of November 7, access to the E-PHAB online portal has been suspended, as PHAB migrates to a new document submission platform. LCGHD will be in the second wave for migration, however it is expected that all health departments will have access to the new platform by early December. Due to this delay, it is likely that LCGHD's timeline for document submission will push into 2023.

LCGHD continued to convene community organizations to participate in construction of the 2023-2025 Community Health Improvement Plan (CHIP). Second and third meetings were held October 12 and October 26 at the United Way of Lake County, and the group determined a fourth meeting was not necessary. Partners present participated in a visioning and values exercise, brainstormed and then prioritized strategies for inclusion, and provided feedback on future data projects. LCGHD staff is currently in the process of finalizing work plans with strategy leads and constructing the final plan. Similar to the Community Health Needs Assessment (CHNA), the CHIP will be approved by LCGHD's Board of Health and University Hospitals' Board of Trustees before publication. Christine provided an update on Lake County's CHNA/CHIP progress at Healthy Northeast Ohio's Regional Convening on October 18.

4.05.02

Health Education

Tobacco Use Prevention and Cessation Program

Christine Schriefer, with the assistance of Emily Kolacz continued to work on the Tobacco Use Prevention and Cessation Program (TUPC) Grant deliverables for this new grant year TU23. 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, and have engaged the American Heart Association and Tobacco21 to assist in those efforts.

The following TUPC grant deliverables were submitted to ODH:

- Deliverable Objective I1A-Activity 2 Continue partnership
- Deliverable Objective I1B- Activity 4 Use data from survey to increase community support
- Deliverable Objective C2C- Activity 1 Community Cessation Services scan
- Deliverable Objective C2C- Activity 2 ODH plan for promoting quit services
- Deliverable Objective P3B-Activity 1 Implementation plan for policy
- Deliverable Objective A4A-Activity 3 Recruit additional partners after SWOT

Meetings/Trainings/Presentations Attended by Christine Schriefer:

- TU23 Earned Media Webinar-10/4
- UH/Lake Health Wellness Fair-10/6
- TU23 Questions webinar-10/7
- NAMI Walk-10/8
- TFOA meeting-10/11
- LGBTQI+ and Tobacco Webinar-10/11
- TU23 One-on-One Call-10/12
- Lake-Geauga TUPC Grant Meeting-10/13
- American Heart Association and Tobacco21 meeting-10/14
- Racial Equity through Action and Learning Webinar-10/14
- E-cigarettes and Tobacco products webinar-10/18

- TU23 All-hands Call-10/18
- Tobacco Control prevention in LGBTQ+ community webinar-10/19
- HEI Conference-10/19-10/21
- TU23 Quarterly Training-10/27

Capacity Building for Healthy Eating and Active Living (HEAL)

Emily Kolacz continues 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; a Memorandum of Understanding has been signed. The City of Painesville has completed the Policy, Systems, and Environmental Change Assessment and Planning Tool and an invoice has been sent to Ohio Department of Health for both deliverables.

Emily Kolacz continues to work with Christine Schriefer on the Tobacco Use Prevention and Cessation Program (TUPCP) Grant deliverables. Social media posts continued to run on LCGHD's Facebook, Twitter, and Instagram pages, with the posts reaching 1,426 people on Facebook, 598 people on Twitter, and 37 people on Instagram in the month of October.

Meetings/Trainings/Presentations/Events Attended by Emily Kolacz:

- MRC Well Check Webinar- 10/4
- Mentor/American Heart Association TRL Meeting- 10/14, 10/28
- ODH Weekly Call- 10/5, 10/19
- TU23 One-on-One Monthly Call- 10/12
- TU23 Monthly All Hands Call- 10/18
- CHC All Project Call- 10/13
- Health Educator's Institute- 10/19-10/21
- Willoughby-Eastlake Safe Spaces Task Force- 10/25
- Safe Communities Meeting- 10/26
- TU23 Quarterly Training- 10/27
- Tobacco Workgroup Monthly Meeting- 10/27
- HEAL Friday Huddles- 10/7, 10/14, 10/28
- Lake County Community Health Improvement Planning Meeting- 10/12, 10/26

Safe Communities

The new Safe Communities grant year began on October 1.

- All deliverables are on schedule
- October car crash fatalities – 2 (Data Source: SAU Fatal Crash Database)
- Public Information & Education – Total people reached: 162154
 - Social Media – 159246 (Mentor Police Department – 157101; LCGHD - 2145)
 - Event Contacts – 5053
- Meetings/Trainings/Events attended:
 - Lake County Safe Communities Meeting –10/26

Project DAWN/Integrated Naloxone (IN23)

- All deliverables are on schedule
- Social Media Outreach – 412 people reached
- # of Naloxone kits distributed: 21 kits distributed
- # of people trained: 21
- # of reversals: 5 known
- # of people requesting medicated assistance treatment (MAT) resources: 10
- # of people requesting peer support services: 7
- # of people requesting harm reduction services (fentanyl test strips): 9
- Meetings/Presentations/Webinars Attended:
 - Harm Reduction Expansion meeting – 10/25

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 law enforcement agencies: 62
- # of law enforcement naloxone administration(s) reported: 4
- # of doses needed: Person 1-2 doses, Person 2-3 doses, Person 3-2 doses, Person 4-2 doses
- # of ER transports reported: 3 transported; 1 unknown
- # of lives saved: 3; 1 fatality

Additional Meetings/Trainings Attended by Nikesha Yarbrough

- Racial Equity through Action and Learning (REAL): Walking the Walk Webinar – 10/14
- Culturally and Linguistically Appropriate Services (CLAS) meeting – 10/18
 - Created PowerPoint of CLAS initiatives for committee to review
 - Created checklist of CLAS activities for department leads to review with staff and implement
- Health Educators Conference – 10/19-10/21

Marketing & Communications

Anna Wilson attended committee meetings throughout the month: Marketing Committee and Cultural and Linguistic Appropriate Services (CLAS) Committee, as well as Marketing subcommittee meetings, and meetings regarding media opportunities. She coordinated paid media placements, ad designs, and editorial with a print magazine as well. She continued to create and manage social media content daily and oversaw social media engagement using Hootsuite and Meta Suite. She also completed her Blood Borne Pathogen (BBP) training and completed the PIO Basics training in Cuyahoga Heights over the course of three days.

She began working on social media calendars for Tobacco Cessation, Naloxone, Safe Communities/Traffic, and Food Safety for January 2023 through the end June of 2023. Upon

completion, each calendar will be sent to division and/or program leaders to review for accuracy before scheduling. Anna continued social media content planning and identified growth and engagement goals for Jan 2023-June 2023 for each platform where LCGHD has a presence. To help future the CLAS committee’s goal of implementing the use of plain language across the Health District, she also drafted a plain language procedure draft that she will finalize and present to the committee at the next meeting. She also began a thorough review of the Lake County Connections (LCC) website and social media to provide support and suggestions as needed; she plans to finish the review and share it with the LCC team mid-November.

Anna provided a summary of the survey results and themes to the Marketing and Website committees in October. With the feedback from the branding survey that she and others in Emergency Population administered, she and the Branding subcommittee began discussing and workshopping changes to everyday branded items (including PowerPoint templates, colors, fonts, and assisted with updating the email signature) that they can implement before year-end. These survey results will inform updates to the website aesthetic and the Marketing guidelines.

Meetings/Trainings Attended by Anna Wilson:

- Marketing Meeting – 10/4
- Marketing Committee & Marketing Subgroup Meetings – 10/5, 10/11, 10/18
- ODH Call – 10/5, 10/12, 10/19
- CLAS Committee Meeting – 10/18
- PIO training – 10/24, 10/25, 10/26
- BBP Training – 10/27

Outreach Events

- Coffee Contacts – 10/6
- Lake Health Employee Health Fair – 10/6
- United Way of Lake County – 10/20

October Social Media Statistics



Posts & Tweets

53
posts

Compare to Sep 2022: 77
The total number of posts that have been published on your page



48
tweets

Compare to Sep 2022: 66
The number of tweets published from your Twitter accounts, including replies



39
posts

Compare to Sep 2022: 31
The total number of posts published to your Instagram account



34
posts

Compare to Sep 2022: 14
The total number of posts published to your page



Page engagement (all)

199

Compare to Sep 2022: 431
The total number of interactions (reactions, comments, and shares) received by your Page's posts as well as by other posts in Facebook that mention your Pages (that is, reactions to user check-ins, event responses, mentions, likes of your Pages, and more)



56

Compare to Sep 2022: 50
The total number of interactions (retweets, replies, quotes, and likes) received for the tweets published in the selected time frame



48

Compare to Sep 2022: 17
The total number of likes, comments, and saves received by the profile, video, and carousel posts published in the selected time frame



7

Compare to Sep 2022: 6
The total number of likes, comments, and shares received (in contact) associated with your Pages



Page engagement (all) > Type



Reactions
128, Compare to September: 258
engagements

Shares
55, Compare to September: 96
engagements

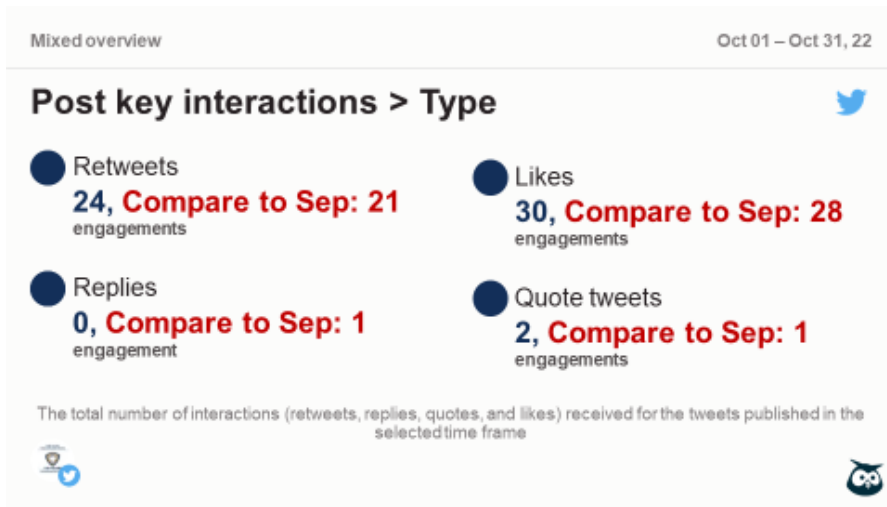
Comments
10, Compare to September: 77
engagements

Post Clicks
353
Compare to Sep 2022: 1.1K
The number of clicks inside your posts (like links, photo views, video plays, and more) that did not generate a story

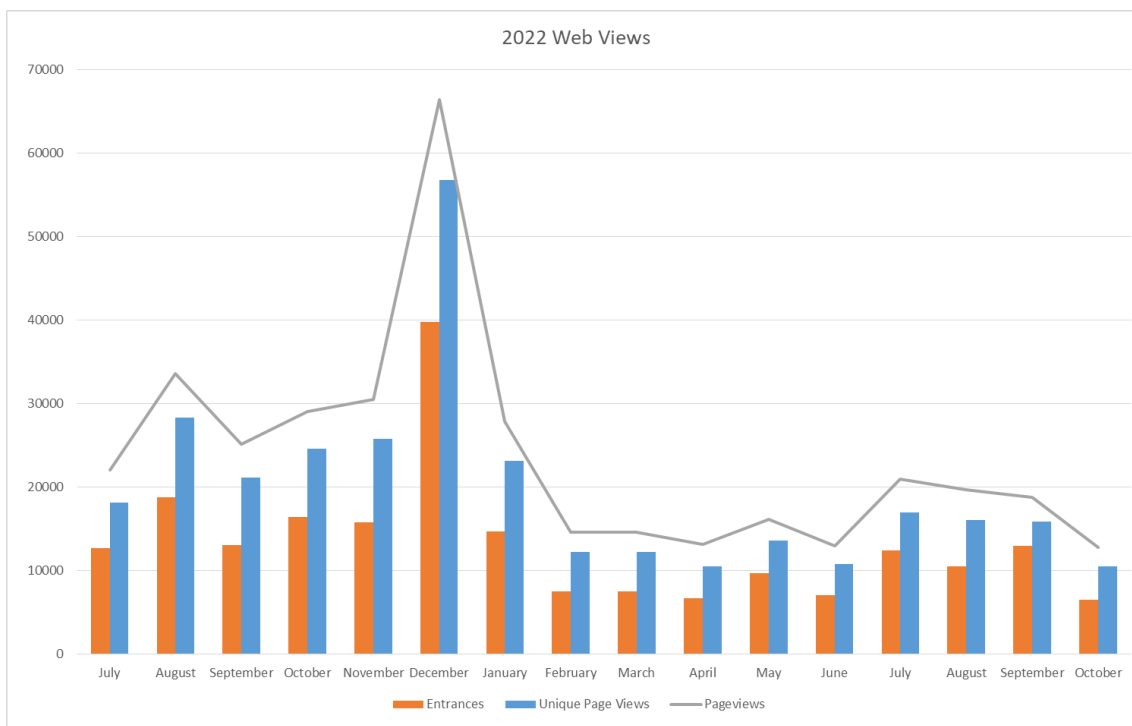
Content Clicks
622
Compare to Sep 2022: 3.3K
The number of clicks on any of your Page's posts (the clicks, photo views, video plays, clicks that generated stories)

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)





Website Analytics



4.05.03

Emergency Preparedness and Epidemiology Manager

During October, planning for the foodborne outbreak “No Such Thing as a Free Lunch” full scale exercise continued. An official Final Planning Meeting was held on October 18, 2022 with the LCGHD design team (Jessica Wakelee, Cady Stromp, Sarah Tomkins) and two staff from Elara Caring. Final logistics were discussed and final adjustments were made to the exercise

documentation, which was sent to the Ohio Department of Health on October 30th. Additionally, a player briefing was held for the Environmental Health food staff who will be playing in the exercise (Christy Armstrong, Arielle Hilliard, Elizabeth Rinnder, Anne Lustig) and observing (Jon Durda and Phil Kaderle), Epidemiology staff (Muhammad Jafar and Joe Rombough), and Public Information Officer Dawn Cole. Due to the departure of Communicable Disease Nurse Kristina Breakall and conflict with re-scheduled ICS training for Nursing supervisors, the decision was made to dismiss Nursing from exercise play due to uncertainty about availability. A final run through of the exercise was conducted on October 26 with Jessica Wakelee, Sarah Tomkins, and Cady Stomp to determine any final details, adjustments, or props that would be needed to enhance exercise play. The exercise is scheduled for 1.5 days November 10-11, and will serve to meet exercise requirements for Elara Caring, LCGHD's Public Health Emergency Preparedness grant, the Food Program's Voluntary Retail Standards, and for capstone requirements for Jessica Wakelee's pursuit of a FEMA Master Exercise Practitioner Certification.

On October 27th, LCGHD held its annual medical countermeasures notification, site activation, and site assembly drills in cooperation with the Wickliffe Fire Department. LCGHD performed a staff call down drill to notify staff of the need to open a point of dispensing for pandemic influenza vaccine, notified appropriate staff and Wickliffe Fire to activate the point of dispensing (POD) at the Wickliffe Senior Center, and Wickliffe Fire conducted a POD set up. All drill objectives were met, with only one minor notification issue as a finding for a corrective action.

Jessica Wakelee has continued to work closely with Christine Margalis in working through findings of the Community Health Needs Assessment and Community Health Improvement Plan. Data was reviewed with partners in the October 12th meeting and input was sought on potential indicators to include for the CHIP in addition to those that would be appropriate once strategies were determined. Muhammad Jafar and Joe Rombough also attended the discussion to meet partners and help gather input. A discussion about desired data updates to the CHIP was held during the October 26th meeting, and partners were agreeable to performing some deeper analysis on demographics to determine any disparities that may exist to inform an upcoming CHNA update. Partners also agreed that once the topic was determined, they may have some additional data to contribute from what they collect in their own agencies.

4.05.04

Emergency Preparedness

Preparedness Specialist Dawn Cole coordinated the issue of two internal situation reports in October.

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

- PHEP Deliverable-Objective 5.1 – Ohio Disease Reporting Outbreak Report
- CRI Deliverable-Objective 4.1 – Point of Dispensing (POD) Community Drop Site (CDS)/Local Drop Site (LDS) Demobilization Plan

The Lake County portion of the PHEP Regional Deliverable-Objective 10.1 – Regional Whole Community Planning Needs Assessment Workbook was also completed.

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

- PHEP Deliverable-Objective 5.1 – Ohio Disease Reporting Outbreak Report

Meetings/Trainings Attended:

- ODH/Local Health Department Wednesday Calls with Local Partners every Wednesday in October.
- Subrecipient Inventory Management Workbook (Core 16.1) Deliverable Webinar sponsored by ODH on October 4.
- Northeast Ohio Health Care Coalition (NEOHCC) meeting and reported out on the Public Information Officer Workgroup on October 7, 2022.
- 2022-2023 Second Quarter CRI Technical Assistance Call as required by the PHEP grant on October 12, 2022.
- Foodborne Exercise Training at LCGHD on October 18, 2022.
- NEO HCC Public Information Officer Workgroup meeting on October 24, 2022.
- Technical Assistance Call regarding CRI Deliverable-Objective 4.1 – POD CDS/LDS Demobilization Plan on October 26, 2022.
- In conjunction with the Wickliffe Fire Department coordinated drills for staff call-down and the set-up of the Wickliffe Community/Senior Center on October 27, 2022.

Marketing Committee

The Marketing Committee met to discuss the results of the templates survey that was administered to LCGHD staff. The results will inform changes to marketing templates and the *LCGHD Branding Strategy*.

The Marketing Committee’s Branding Strategy Subcommittee met to create a revise the LCGHD PowerPoint template and primary/secondary color palettes per the survey.

News Releases 2022	Date Released
LCGHD Releases the 2022 Community Health Needs Assessment	October 6, 2022
Protect Yourself from Carbon Monoxide Poisoning	October 19, 2022
Lake County General Health District Receives \$38,500 Traffic Safety Grant	October 25, 2022

Quality Improvement Updates

As a result of the drill on October 27th, Dawn Cole and Jessica Wakelee have been discussing a potential new CQI project with Lexi Parsons from the Nursing Division regarding improved notification and communication protocols for exercises. This project is in the early conceptual phase at the time of this report.

4.05.05

Epidemiology

Yusra Fawad started with LCGHD as a full time temporary Epidemiologist on October 17th. Yusra has been assisting Tania Nanavati with COVID-19 case investigations (total of 83 pediatric cases), has continued leading the preparation of the COVID-19 data report, assists as needed with monkeypox investigation, and has 8 hours weekly designated to other projects. She has been working on completing an Access to Care report, and is preparing this year's flu surveillance report. Due to small numbers of flu hospitalizations in October (total of 10) LCGHD has not initiated release of a weekly flu report during October, but will release an October report, and begin a more frequent report once numbers allow for release of more detailed trend information. Hospital emergency rooms saw a total of 191 cases of influenza-like illness among Lake County residents during the month of October.

To date, LCGHD has a total of 11 cases of monkeypox, two of which were investigated in October. One of the two cases had several family members who were close contacts, one of which was a minor who developed symptoms, but tested negative for monkeypox. Tania Nanavati, Jessica Wakelee, Joe Rombough, and Sarah Tomkins met virtually with the Ohio Department of Health, the treating physician from University Hospitals, and the Centers for Disease Control and Prevention to discuss current data and considerations on treatment of minors with TPOXX, but the result was negative, so this was not necessary. A total of 105 Lake County residents have started vaccination for monkeypox to date.

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

Dates	Cases
10/1	24
10/2-10/8	192
10/9-10/15	201
10/16-10/22	210
10/23-10/29	219
10/30-10/31	52

Total 898

During the month of October, the epidemiology team investigated 8 EpiCenter anomalies. One of the 8 required additional follow up with the hospital infection preventionist.

LCGHD investigated seven COVID-19 outbreaks during the month of October, including 6 long term care facilities, totaling 57 cases (37 residents and 20 staff), and one outbreak at a school including four students. Not all outbreaks have been closed, so additional cases may be associated with these outbreaks. Three of the facilities were approached to conduct ICAR assessments, and two were sent pre-assessment information. One is considering an ICAR.

Additionally, a preschool had an outbreak of respiratory viral infections. Many of the students out sick were not tested. Tania Nanavati conducted a phone consult with the director and

provided infection control and prevention information, resources, and strategies as well as information on flu vaccination clinics.

Tania Nanavati is developing a document to serve as an infection prevention and control assessment for daycare facilities, which fall outside of the ICAR process. Five facilities have been selected to participate in piloting the questionnaire which will eventually be sent to all daycare facilities in Lake County. The goal of this effort is to expand LCGHD's Infection Prevention and Control activities and provide resources for daycare facilities to prevent infections in their facilities. These resources are currently under development. Yusra Fawad and Joe Rombough are assisting Tania with developing and reviewing the questionnaire and resources.

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

Communicable Disease Report	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEPT	OCT	NOV	DEC	Year to	2021	2020
													Date	Year	Year
													to	End	End
													current	Totals	Totals
Babesiosis	0	0	0	0	0	0	0	0	0	0			0	0	0
Campylobacter	1	2	1	3	2	5	4	3	3	3			27	31	22
CP-CRE	2	1	4	1	0	1	3	3	4	6			25	25	35
Chikungunya	0	0	0	0	0	0	0	0	0	0			0	0	0
Chlamydia	40	40	38	41	39	72	30	36	24	71			431	591	647
COVID-19	6552	476	278	702	1458	1070	1749	1778	1300	898			16261	28435	13100
Coccidioidomycosis	0	0	0	0	2	0	0	1	0	0			3	2	2
Cryptosporidiosis	0	0	0	0	0	0	2	0	0	0			2	5	0
Cyclosporiasis	0	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	1			5	7	4
Ehrlichiosis/anaplasmosis	0	0	0	0	0	0	0	1	0	0			1	1	0
Giardia	1	0	0	0	2	1	0	1	0	1			6	6	11
Gonorrhea	9	2	11	3	5	19	13	13	8	17			100	237	246
Haemophilus Influenza	0	0	0	0	1	2	0	0	0	0			3	0	0
Hepatitis A	1	0	0	0	0	3	0	0	0	0			4	8	11
Hepatitis B (perinatal)	0	0	0	0	0	1	0	0	0	0			1	3	3
Hepatitis B acute	0	0	0	0	0	0	0	0	0	0			0	1	0
Hepatitis B (chronic)	7	9	2	2	1	1	1	6	1	3			33	41	12
Hepatitis C (acute)	0	0	0	0	0	0	0	0	0	0			0	0	0
Hepatitis C (chronic)	14	15	12	11	14	15	12	16	16	16			141	177	169
Hepatitis C (peri-natal)	0	0	1	0	0	1	0	0	0	0			2	1	1
Hepatitis E	0	0	0	0	0	0	0	0	0	0			0	2	0
Influenza-Hospitalized	1	3	3	14	11	2	0	0	0	4			38	2	200
La Crosse Virus Disease	0	0	0	0	0	0	0	0	0	0			0	0	0
Legionnaires Disease	0	1	0	0	1	1	1	3	4	2			13	20	11
Listeriosis	0	0	0	0	2	0	0	0	0	0			2	1	0
Lyme Disease	1	0	0	1	1	3	6	3	4	5			24	43	15
Monkeypox	0	0	0	0	0	0	2	3	4	2			11	0	0
Malaria	0	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	0	4
Meningitis, Bacterial not Neisseria	2	0	0	0	0	0	0	0	1	0			3	12	1
MIS-C associated with COVID-19	0	0	0	0	0	0	0	0	0	0			0	1	1
Mumps	1	0	0	0	0	0	0	0	0	0			1	0	0
Mycobacterium Tuberculosis	1	1	0	0	0	0	0	1	0	1			4	3	0
Pertussis	2	0	1	0	3	1	1	0	0	1			9	4	18
Rocky Mountain spotted fever	0	0	0	0	0	0	0	0	0	0			0	0	0
Salmonella	0	1	1	2	1	2	0	5	3	2			17	32	19
Shigellosis	0	0	1	1	0	3	0	1	1	0			7	3	2
Staph Aureus VRSA	0	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	0			9	13	6
Streptococcal Group B Newborn	0	0	0	0	0	0	0	0	0	0			0	0	0
Streptococcus Pneumoniae(ISP)	2	0	1	3	3	1	0	0	0	2			12	18	9
Syphilis	1	0	1	2	1	1	1	0	0	0			7	25	38
Tetanus	0	0	0	0	0	0	0	0	0	0			0	0	0
Varicella	4	2	1	0	0	0	2	3	1	2			15	17	10
Vibriosis	0	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			0	1	2
Creutzfeldt-Jakob Disease	0	1	0	0	0	0	0	0	0	0			1	1	0
Yersinia	0	0	0	1	0	0	0	1	0	0			2	1	0
Totals	6644	555	359	789	1549	1205	1830	1878	1374	1037			17220	29772	14602

Christine Margalis provided the following highlights:

- *The current Naloxone grant will end on December 31, 2022. It has not been reissued to date. The state is expanding Project DAWN, but we are unsure of access to kits at this time. There will be other harm reduction grants issued by ODH, and LCGHD will apply if eligible.*
- *Working with Lakeland Community College nursing program for Project DAWN training with their clinical staff and a possible expansion of training at Project Hope.*
- *Emily Kolacz is conducting a food pantry assessment at St. Gabe's. She will work with them to provide ways of identifying healthy foods.*
- *Protect and Serve Tavern will take place at the Great Lakes Mall on Saturday, December 10, 2022, from noon – 4:00 p.m. Law enforcement and Safe Communities members will be serving non-alcoholic drinks.*
- *Public Health Accreditation Board (PHAB) accreditation document submissions are still on hold. Hopefully we can start mid-December. We have six months to submit all documents once our portal is open.*
- *We have received our first invoice for PHAB. Instead of paying a large amount at the beginning, we will pay smaller amounts over the 5 years.*
- *The Community Health Improvement Plan will be completed soon. Meetings have been held and we have been putting things in place.*

Discussion:

Patricia Murphy asked if the Naloxboxes were funded by the Ohio Department of Health (ODH). Christine Margalis was unsure if the boxes themselves come from grant funding.

Dr. Alvin Brown said that in the past, volunteers have accompanied clients at the food pantry to find healthy foods. He also asked if the grant is limited to just St. Gabe's. Christine Margalis said the grant is from ODH. They had selected St. Gabe's because it's a larger pantry and in the 44077 zip code. These services can still be offered even if the grant is no longer available.

Dr. Irene Druzina suggested adding information, such as "Eat this, not that" to the website to educate those at the food pantry. Christine Margalis said it is something they can look in to.

Nicole Jelovic asked if they are worried about the PHAB submission time frame that was originally set. Christine Margalis said she is not worried as the time frame has been extended another year.

Jessica Wakelee provided the following highlights:

- *The COVID grant budget revision to include monkeypox and epidemiology services has been approved for the Enhanced Operations (EO21) grant.*
- *A full-scale foodborne outbreak exercise was completed on November 10 and 11, 2022. This involved local partners, including Elara Caring, which is required to participate in a drill. We will use the information gathered to update our plan and provide additional staff training.*

Discussion:

Lindsey Virgilio asked if a full-scale exercise is required. Jessica Wakelee said the requirements vary each year. Options include functional exercises, full-scale exercises, and table top exercises for the purpose of the Public Health Emergency Preparedness (PHEP) grant, but program requirements vary.

4.05.06

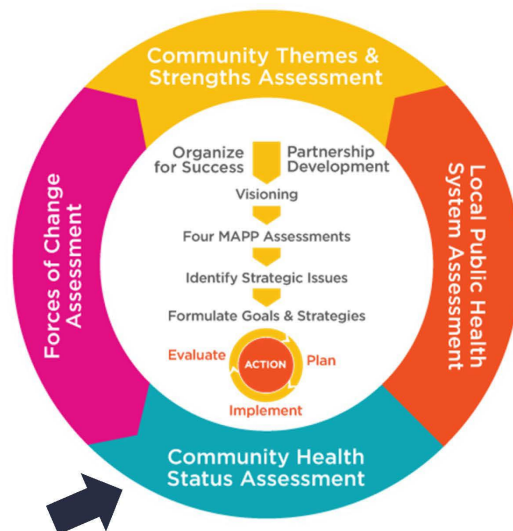
Board of Health Education: Community Health Needs Assessment

Epidemiologist Joseph Rombough began his presentation at approximately 4:05 p.m. His focus was on results of the 2022 Community Health Needs Assessment conducted by LCGHD in collaboration with University Hospitals. The analysis and report was developed by Conduent, Inc.



Background & Purpose

Mobilizing for Action through Partnerships and Planning



Background

- Health departments & non-profit hospitals are required to assess the health of the community and identify strategies for health improvement every three years.
- Previous Community Health Needs Assessments (CHNA) & Community Health Improvement Plans (CHIP) were completed in late 2019 in collaboration with Lake Health.
 - CHNA Steering Committee guided the CHNA process; CHIP Workgroup created and reported on CHIP progress.
- In early 2022, University Hospitals (UH) and Lake County General Health District (LCGHD), with support of CHNA Steering Committee, guided the 2022 CHNA process.



Purpose

- Identify and prioritize significant health needs of the community in Lake County, Ohio.
- The priorities that were identified in the CHNA help to guide community health improvement programs and community benefit activities.
- Through this criteria, nine needs emerged as significant.



CHNA Process

- The Lake County CHNA was performed by the LCGHD and UH Lake Health Medical Centers.
- Data collection activities included:
 - Collection of 171 secondary data measures from nationally recognized and publicly available data sources.
 - Distribution of a survey to current Lake County residents in both English and Spanish languages.
 - Distribution of a survey to Lake County mayors and city managers.
 - Five community focus groups with Lake County residents.



Data Collection Methods

Secondary Data Collection

- For the 2022 secondary data analysis for Lake County, demographic, socioeconomic, morbidity, and mortality data were obtained from 21 publicly available sources.
- In conjunction with Lake County values, two demographically similar counties, Licking County and Clermont County were included for benchmarking purposes.
- Based upon the quality, age, availability, and/or redundancy of the measures, 171 of the initially compiled 338 (94%) measures were included for analysis.

Data Collection Methods

Primary Data Collection

- Input was collected from residents in Lake County. Primary data used in this assessment consisted of focus group discussions, an online community survey, as well as an additional survey with mayors and city managers.
- One method of community input was through an online survey. A total of 1,846 responses were collected.
- Five key focus group discussions were conducted to gain deeper understanding of health issues. Key community groups who participated in these focus groups included representatives from: 1) Black Lives Matter; 2) LGBTQ+ Community; 3) NAACP; 4) Painesville Elm Street Elementary; and 5) Seniors.

CHNA Results

Lake County Significant Health Needs



Non-Prioritized Health Needs

- The following significant health needs emerged from a review of the primary and secondary data.
- Even though these needs will not be directly focused on in the Community Health Improvement Plan, they provide additional opportunities to grow and expand existing work as well as implementing additional programming in new areas as they arise.



Non-Prioritized Health Topic #1: Economic Concerns

Economic Concerns



Key Themes from Community Input



- Identified as a top health need from qualitative community feedback
- 5.1% of families in Lake County live below the poverty level; this is lower than the Ohio value of 9.6%
- 4.2% of the population 16+ in Lake County are unemployed; this is lower than the Ohio value of 4.7%
- 2.0% of survey respondents reported having received benefits from the Women, Infants, and Children (WIC) program in the last year

Non-Prioritized Health Topic #2: Cancer

Cancer



- Identified as a significant health need through **secondary data analysis** and **community survey**
- Breast Cancer Rates and Colorectal Cancer Death Rates were identified as areas of concern from secondary data analysis

Key Themes from Community Input



- Identified as a top health need from community health survey respondents
- 15% of survey respondents reported receiving a Cancer diagnosis from their clinical provider
- The most common Cancer diagnosis reported by survey respondents were Breast (29%), Skin (24%), Prostate (11%), Colon (7%), Melanoma (6%), and Lung (6%)

Non-Prioritized Health Topic #3: Infectious Disease

Infectious Disease



- Identified as a significant health need through **secondary data analysis** and **qualitative data**
- Rate of West Nile Virus was identified as an indicator of concern from secondary data analysis

Key Themes from Community Input



- 56% of survey respondents reported having received either a flu shot or a flu vaccine that was sprayed in their nose in the last year
- 58% of survey respondents reported having some type of Tetanus Shot in the last 10 years
- 28% of survey respondents reported having received a Pertussis vaccine in the past 10 years

The West Nile Virus concern was researched further since cases have been low.

Non-Prioritized Health Topic #4: Built Environment

Built Environment



- Identified as a significant health need through **secondary data analysis** and **community survey**
- Concentration of Fast Food Facilities in Lake County was identified as an indicator of concern from secondary data analysis

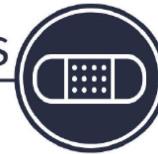
Key Themes from Community Input



- 4.9% of survey respondents reporting needing assistance with home repairs in the last year but didn't receive it
- An additional 5.9% of respondents needed assistance with home repairs in the last year but didn't know where to receive assistance

Non-Prioritized Health Topic #5: Unintentional Injury and Accidents

Unintentional Injury & Accidents



- Identified as a significant health need through **secondary data analysis**
- Unintentional Injury Death Rate was identified as an indicator of concern from secondary data analysis
- Fall Death Rate was also identified as an indicator of concern from secondary data analysis

Prioritized Health Needs

- To better target activities to address the most pressing health needs in the community, LCGHD and UH Lake Health Medical Centers convened a group of community members and leaders to participate in a presentation of data on significant health needs.
- Participants were given access to an online link to complete a scoring exercise to assign a score to each significant health need based on a set of criteria.

Prioritized Health Needs

Lake County Prioritized Health Needs



Access to
Healthcare



Behavioral
Health
(Mental
Health &
Substance Use
and Misuse)



Chronic
Disease

Prioritized Health Topic #1: Behavioral Health (Mental Health & Substance Use and Misuse)

Substance Use & Misuse



- Identified as a significant health need through **secondary data analysis**, from **community survey** respondents, and **focus group** participants

Key Themes from Community Input

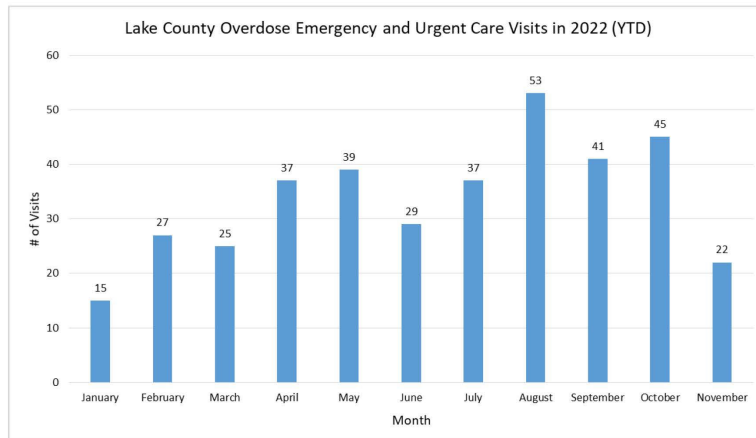
- 6% of survey respondents reported having used marijuana or cannabis; Most users reported using marijuana recreationally or medically (non-prescribed) 12% of survey respondents reported having used an e-cigarette or other electronic vaping product
- 41% of survey respondents reported having smoked at least 100 cigarettes in their lives; 16% reported that they currently smoke cigarettes every day

Prioritized Health Topic #1: Behavioral Health (Mental Health & Substance Use and Misuse)

- Based on the secondary data scoring results, Substance Use and Misuse was identified to be a top health need in Lake County.

Indicator	HP2030 Target	United States Value	Ohio Value	Lake County	Clermont	Licking	Benchmark Score
Alcohol-related Death Rate (per 100,000), (2016-2019)	10.9	7	7	11.5	7	7.7	5
Percentage of Persons Killed in Crashes involving Alcohol-impaired Driving, (2019)	-	28.0%	30.0%	46.0%	19.0%	26.0%	4
Percentage of Persons Killed in Crashes involving BAC=.01+, (2019)	-	33.0%	36.0%	73.0%	24.0%	35.0%	4
Percentage of Adults Excessively Using Alcohol, (2018)	25.4	19.2%	18.5%	20.8%	19.1%	18.9%	4
Medicare Beneficiaries with Alcohol Abuse, (2018)	-	2.1%	2.0%	2.4%	2.0%	2.0%	4

Prioritized Health Topic #1: Behavioral Health (Mental Health & Substance Use and Misuse)



November's data is through November 15, 2022. This chart does not include suicide, psychiatric evaluations, and detoxifications.

Prioritized Health Topic #2: Access to Healthcare

Access to Healthcare



- Identified as a significant health need through **community survey** and **qualitative data**
- Community identified the need for health care providers who look like and have similar experiences to the patients they care for

Key Themes from Community Input

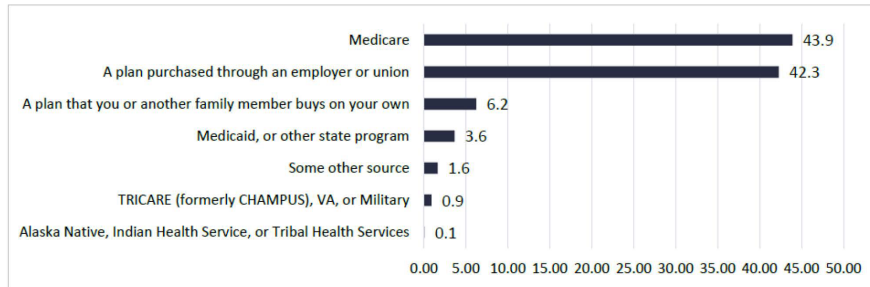


- 15% of respondents had not seen a doctor in the last 12 months for a routine checkup
- 7% of respondents do not have a person they think of as their personal doctor or health care provider
- 13% of respondents received routine or preventative care outside of Lake County; the majority of whom sought specialty care

Prioritized Health Topic #2: Access to Healthcare

- The community health survey asked respondents to provide insight into their own healthcare, including barriers to access.

LAKE COUNTY RESPONDENTS WHO REPORTED HAVING INSURANCE COVERAGE BY INSURANCE TYPE



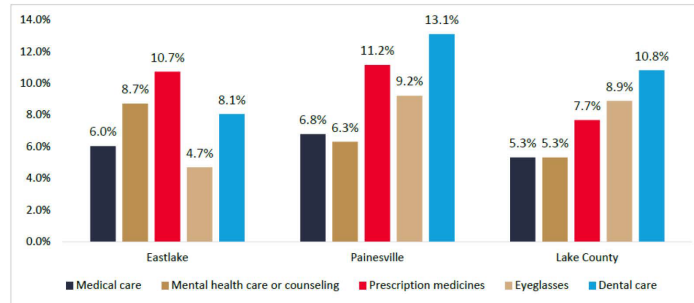
Addressing Health Needs: Geographic Focus

Lake County Community	Census Tract	Health Equity Index Score
Painesville	39085204500	86.6
	39085204200	86.4
	39085204400	74.9
	39085204302	49.7
Eastlake	39085202100	66.5
	39085206600	57.9
	39085202000	50.7

Prioritized Health Topic #2: Access to Healthcare

- The following figure shows the percentage of survey respondents by geography who reported needing specific services in the last year but who were unable to access them due to cost.
- Dental Care is the most common service that respondents were unable to access, followed by getting their prescription medications.

PERCENTAGE OF RESPONDENTS BY GEOGRAPHY REPORTING THE NEED FOR SERVICES IN THE PAST YEAR BUT NOT ACCESSING THEM DUE TO COST



Prioritized Health Topic #3: Chronic Disease

Chronic Disease



- Identified as a significant health need through **secondary data analysis** and **community survey**

Key Themes from Community Input

- The most common chronic disease diagnosis reported by survey respondents were: High Blood Pressure (44%); Arthritis (44%); High Cholesterol (38%); Diabetes (15%); Asthma (14%); and Chronic Pain (13%)
- 52% of survey respondents reported having eaten fruits or vegetables each day for the last 7 days
- 32% of respondents with diabetes reported doing regular physical activity to achieve optimal blood sugar levels
- 44% of respondents with diabetes reported occasionally eating lots of sweets or other foods rich in carbohydrates

Prioritized Health Topic #3: Chronic Disease

- Based on the secondary data scoring results, Chronic Disease was identified to be a top health need in Lake County.

CHRONIC DISEASE SECONDARY DATA INDICATORS

Indicator	HP2030 Target	United States Value	Ohio Value	Lake County	Clermont	Licking	Benchmark Score
Percentage of Medicare Population With Osteoporosis	5.5	6.57%	6.22%	8.18%	5.87%	6.08%	5
Percentage of Medicare Population with Heart Disease	-	26.80%	27.50%	28.50%	26.20%	25.30%	4
Heart Disease Death Rate	-	92.60	103.20	112.90	87.00	86.30	4
Percentage of Medicare Population With Stroke	-	3.77%	3.81%	4.00%	3.53%	3.42%	4
Percentage of Medicare Population With Hyperlipidemia	-	47.66%	49.42%	52.36%	49.39%	47.04%	4
Percentage of Medicare Population With Ischemic Heart Disease	-	26.81%	27.50%	28.49%	26.24%	25.28%	4
Percentage of Medicare Population with Arthritis	38.7	33.47%	36.06%	37.37%	32.84%	32.32%	4

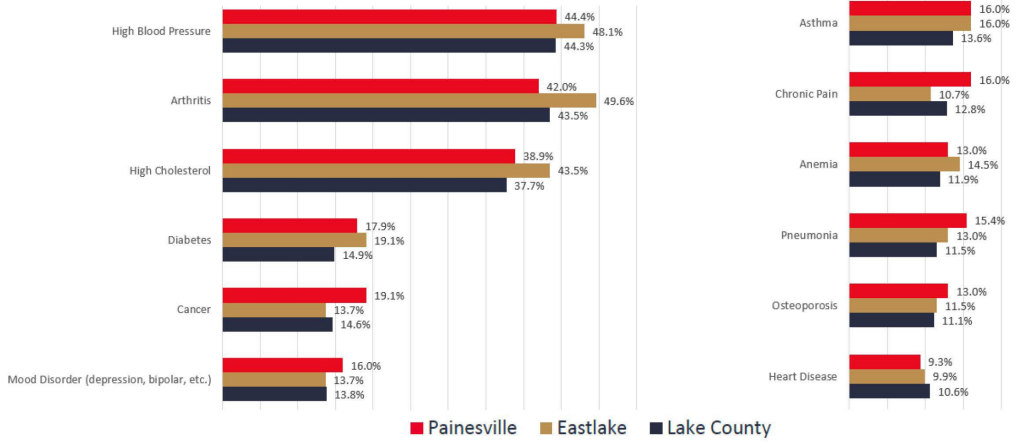
Prioritized Health Topic #3: Chronic Disease

- The community health survey asked respondents to provide insight into specific illness diagnosis and care related to chronic disease.
- The following figure shows the percentage of community survey respondents in Lake County, Eastlake, and Painesville reporting an illness diagnosis by a doctor, nurse, or other health professional.



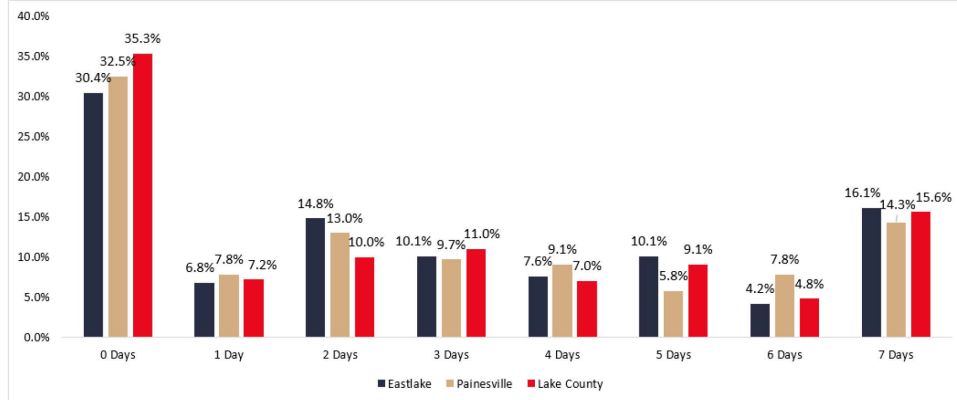
Prioritized Health Topic #3: Chronic Disease

TOP ILLNESS DIAGNOSIS BY HEALTHCARE PROVIDER



Prioritized Health Topic #3: Chronic Disease

PERCENTAGE OF RESPONDENTS REPORTING NUMBER OF DAYS THEY WERE PHYSICALLY ACTIVE FOR AT LEAST 60 MINUTES IN THE LAST WEEK



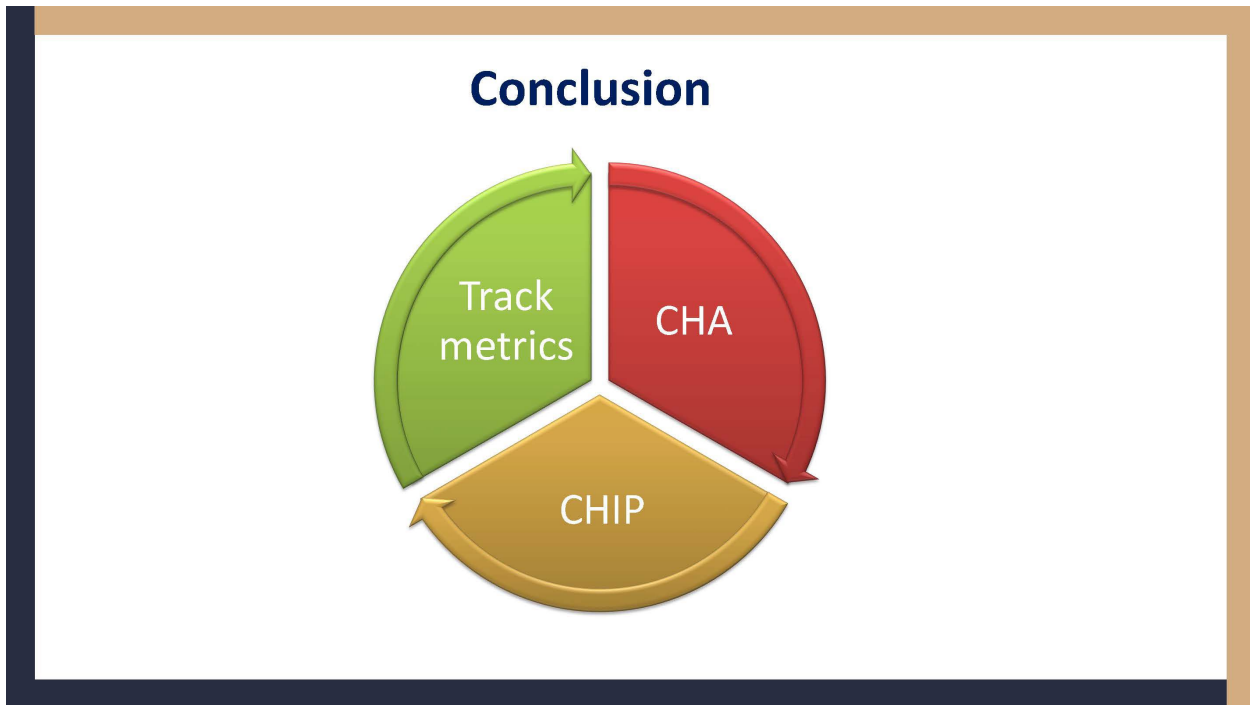
Alignment

- The final prioritized health needs from this 2022 Lake County CHNA are in alignment with some of the top priorities and factors influencing health outcomes from the 2020 -2022 Ohio State Health Improvement Plan.
- They are also in alignment with a subset of 2019 Lake County CHNA priority areas.
- This icon indicates areas of alignment.

2020-2022 Lake County CHIP	2020-2022 Ohio SHIP	2022 Lake County CHNA
Priority Health Areas: <input checked="" type="checkbox"/> • Access to Care <input checked="" type="checkbox"/> • Mental Health/Substance Abuse <input checked="" type="checkbox"/> • Chronic Disease	Top Health Priorities: <input checked="" type="checkbox"/> • Mental Health & Addiction <input checked="" type="checkbox"/> • Chronic Disease <input type="checkbox"/> • Maternal and Infant Health Top Priority Factors Influencing Health Outcomes: <input type="checkbox"/> • Community Conditions <input checked="" type="checkbox"/> • Health Behaviors <input checked="" type="checkbox"/> • Access to Care	Prioritized Health Needs: <input checked="" type="checkbox"/> • Access to Healthcare <input checked="" type="checkbox"/> • Behavioral Health (Mental Health & Substance Use and Misuse) <input checked="" type="checkbox"/> • Chronic Disease (Health Behaviors and Community Conditions that impact the above prioritized health needs will be incorporated into the 2023-2025 Lake County CHIP/IS)

Conclusion

- This collaborative Community Health Needs Assessment leveraged data to provide a comprehensive picture of health in Lake County, Ohio.
- The CHNA will be used to inform the Community Health Improvement Plan and used to select strategies based on the CHNA priorities.
- The strategies will allow a work plan to be created and to set targets and work goals.
- There will be annual data tracking to assess the progress of the CHIP.
- The community health needs will be re-assessed in three years.



The presentation ended at approximately 4:30 p.m.

Discussion:

Steve Karns asked if obesity was evaluated as well. Jessica Wakelee said obesity is not classified as a chronic disease itself, but a contributor to chronic disease. Ron Graham said the CHIP will inadvertently address obesity when addressing chronic conditions. Conduent uses specific methodology when analyzing the data.

Ana Padilla asked how the data was collected. Joseph Rombough said it was collected from surveys, focus groups, and data warehouses.

Dr. Irene Druzina asked if an update could be presented in six months or a year. Jessica Wakelee said an update is planned for annually.

Patricia Murphy asked if the results will be shared with the Alcohol, Drug & Mental Health Services (ADAMHS) Board. Jessica Wakelee said that it would be shared with community partners.

4.06

Health Commissioner's Report

4.06.01

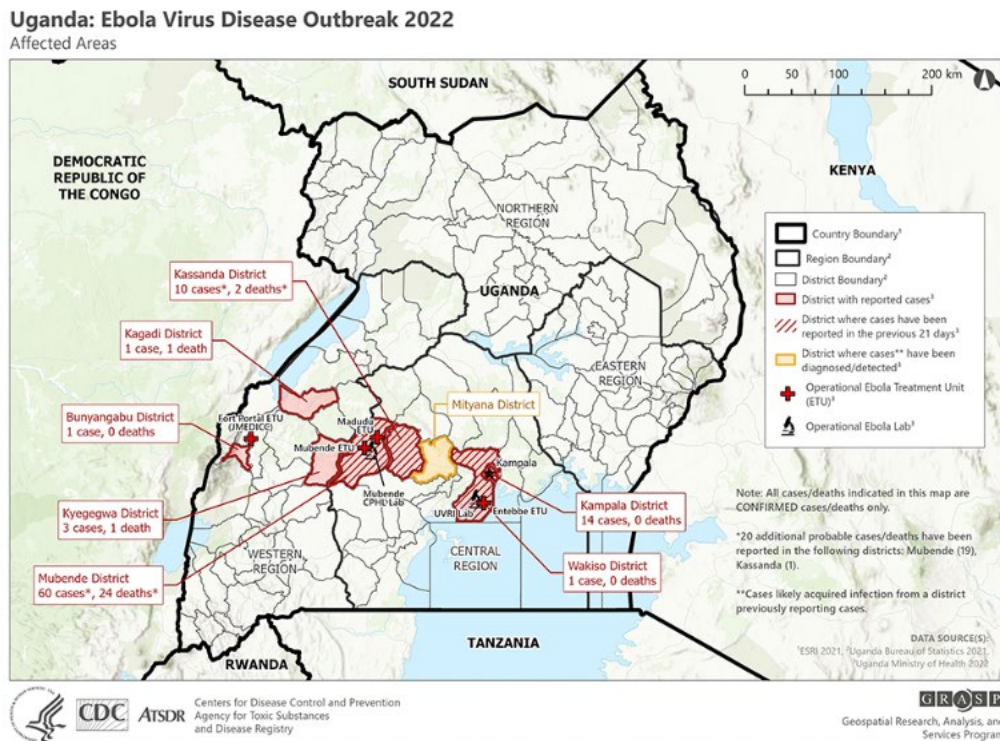
Ebola Virus Update

Centers for Disease Control and Prevention (CDC) has updated the list of districts in Uganda that are impacted by the ongoing Ebola virus outbreak. As of October 24, 2022, [CDC is reporting](#) 90 confirmed and 20 probable cases in Uganda and 28 confirmed deaths associated with the outbreak. Kampala, Wakiso, and Mityana Districts have all reported and or diagnosed/detected Ebola virus cases.

The inclusion of Kampala District is particularly notable due to it being home of Uganda's capital and largest city. This information has also been updated in Ohio Department of Health's REDCap Monitoring Project. These districts are newly impacted, and this does not change the recommendations for individuals who have previously returned to the United States and are already undergoing monitoring.

Uganda Ebola Virus Disease Outbreak 2022

Affected Areas (Data as of October 24, 2022)



4.06.02

Local Monkeypox Update

During the current global outbreak of monkeypox, the Ohio Department of Health (ODH) has worked closely with federal and local public health partners to distribute courses of TPOXX to targeted locations within Ohio to facilitate availability and access.

4.06.03

MMWR Updates

MMWR 9/9/2022 Synopsis

- Analysis of data from 1,969 people diagnosed with monkeypox during May 17– July 22, 2022 revealed that 38% were infected with HIV and 41% had been diagnosed with some other sexually-transmitted disease in the past year. Hospitalization was required in a higher proportion of those with HIV (8%) compared with those without HIV (3%). People with HIV (and other sexually transmitted infections [STIs]) should be prioritized for the monkeypox vaccination, and monkeypox patients should be screened for HIV and other STIs.
- In March 2022, oral polio vaccine-derived poliovirus was detected in the stool sample of an immunodeficient infant in China. This detection was a result of a pilot program by the Chinese government to increase such surveillance in an effort to contain and eradicate the threat of polio transmission from these types of secretions.
- An ongoing longitudinal cohort study of Covid-19 patients in San Francisco, CA, found from July 2021 to March 2022 that despite significantly higher cycle threshold (Ct) values during infection with the Omicron variant (BA.1) as compared to pre-Omicron strains, culturable virus was still detected in similar percentages and for similar durations among both groups. As a result, this study concluded that, in alignment with CDC guidance, Ct values do not provide a reliable or consistent proxy for infectiousness across Covid-19 variants.
- The report describes three patients who had atypical rashes yet no epidemiologic link to a monkeypox case and no known risk factors, who were initially diagnosed with monkeypox based on initial positive PCR test results with high cycle threshold (Ct) values (≥ 34). They were administered antiviral treatment and their close contacts were given JYNNEOS vaccine. Subsequent testing revealed that these initial results were false positives and none of the three were confirmed to have monkeypox.
 - As a result, CDC updated guidance to indicate that when testing specimens from patients without an epidemiologic link or risk factors or who do not meet clinical criteria (or where these are unknown), laboratories should reextract and retest specimens with real-time PCR Ct values that are high (≥ 34) to avoid unnecessary medical treatment and expenditure of public health resources.

- Per the National Vital Statistics System, Mortality Data, 2020, female suicide rates increased as level of urbanization declined, from 4.6 per 100,000 population in large central metropolitan areas to 7.1 in small metropolitan areas. Male suicide rates also increased as level of urbanization declined, from 16.9 in large central areas to 33.7 in noncore areas. Males had significantly higher rates (3.6 to 4.8 times) than females across all urbanization levels.

MMWR 9/16/2022 Synopsis

- National Violent Death Reporting System (NVDRS) data from 49 states, Puerto Rico, and the District of Columbia, 2015-2020, revealed that American Indian and Alaskan Native people have a disproportionately higher rate of suicide deaths, characterized by higher odds of relationship and substance use problems and lower odds of physical, job, and financial problems or known mental health conditions and treatment compared to other people. Culturally-sensitive targeted public health suicide prevention measures for this community are needed.
- CDC analyzed national pediatric hospitalization data from January 2016 to August 2022, in part as a result of concern of possible recent increases in pediatric intracranial infections caused by Streptococcus bacteria and the possible contributing role of Covid-19. The results showed an initial decline at the beginning of the pandemic, a peak in March 2022, and then a decline to baseline levels. This is consistent with historical seasonal fluctuations, with thus no evidence of increased case severity or link to Covid-19. Epidemiologic monitoring is continuing.
- On June 22, 2022, CDC's Advisory Committee on Immunization Practices (ACIP) recommended use of 15-valent pneumococcal conjugate vaccine (PCV15) as an option for children age 6 weeks to 17 years, expanded from the 2021 license for use in adults. Multiple sources of evidence were reviewed, with the decision influenced by PCV15's inducing immunity against two additional serotypes, effectiveness and safety comparable to the PCV13 vaccine, and cost-saving aspects expected to reduce pneumococcal disease incidence in children.
- CDC assessed mortality risk for hospitalized Covid-19 patients during the Delta (July-October 2021), early Omicron (January-March 2022), and later Omicron (April-June 2022) variant periods. Mortality decreased from 15.1% during the Delta period to 4.9% during the later Omicron period for all patient groups. During the Omicron period, a larger proportion of hospitalizations and deaths occurred in high-risk patients (65 years or older [81.9%], with a disability, or with three or more underlying conditions [73.4%].) Therefore, the Omicron period saw less hospitalization of lower risk people, and less severe disease and death in higher risk patients. Contributing factors likely include higher levels of vaccine- and infection-induced immunity, advances in early treatment for patients at risk for severe disease, and the lower pathogenicity of the Omicron subvariants.

- CDC assessed 549 intake forms and 369 outcome forms for patients who'd been given the antiviral drug Tecovirimat (FDA-approved for treating smallpox) as a treatment for monkeypox under an investigational new drug protocol from May – August 2022. 97.7% were men, with a median age of 36.5 years. 38.8% were white, and 93.1% were not hospitalized. 46.3% were living with an HIV infection. Few adverse events were reported. Most were not serious, and it is unknown if they were caused by the Tecovirimat. There are currently no studies to demonstrate the efficacy of the drug in monkeypox patients, and safety monitoring is continuing under the investigational protocol.
- During 2019-2021, the Tennessee Department of Health saw 52 fatal drug overdoses involving Nitazenes, opioids created as pain relievers 60 years ago but never approved for use in the U.S. No cases in 2019 were followed by 10 in 2020 and 42 in 2021. All involved multiple substances. Only 23% had Naloxone administered. Increased testing and surveillance is needed for this emerging drug.
- Per National Vital Statistics System, Underlying Cause of Death by Single-Race Categories, 2020 data, people under age 65 accounted for 26% of all U.S. deaths, but for 50% of American Indian/Alaskan Native deaths, 40% of black and Hispanic deaths, and 20% of Asian and white deaths. Deaths among people age 85 or older ranged from 11% for American Indian/Alaskan Natives to 33% for Asian and white people.

MMWR 10/21/2022 Synopsis

- Pakistan is the only country other than Afghanistan where endemic polio transmission has never been interrupted. WHO estimated Pakistan's 2021 polio vaccination coverage at 83%. Cases decreased from 147 in 2019 to 84 in 2020 to just 1 in 2021, but increased to 14 in 2022 as of July 31. All 14 of these cases were clustered among children in a southern province, many of whom never received the vaccine.
- CDC conducted a survey of 3,618 U.S. healthcare personnel to estimate influenza vaccination coverage during the 2021–22 influenza season, as well as receipt of the primary Covid-19 vaccination series and a booster dose. Flu vaccine coverage was 79.9%, Primary Covid-19 series vaccine coverage was 87.3%, and 67.1% of those received a booster. Overall vaccination rates were lowest among assistants and aides, those working in long-term care or home healthcare settings, and those whose employer didn't require or recommend them. There is a need to increase efforts to improve healthcare provider vaccinations (annual flu shots and Covid-19 booster doses) to protect them and their patients.
- The IVY Network of hospitals assessed effectiveness of 2, 3, and 4 doses of monovalent mRNA vaccines compared with no vaccination against Covid-19-associated hospitalization among 4,730 immunocompetent adults during December 26, 2021 - August 31, 2022. Waning protection was found over time for 2 or 3 doses. Vaccine effectiveness against hospitalization of 3 doses was 69% during the BA.1/BA.2 Omicron

variant period, and 31% during the BA.4/BA.5 period. Effectiveness of 2 or 4 doses was similar, dropping from around 60% to around 40%.

- During the BA.1/BA.2 period, effectiveness of 2 doses waned from 63% at 14-150 days to 34% at greater than 150 days. 3 doses waned from 79% at 7-120 days to 41% later. Vaccine effectiveness of 4 doses was 61% 7-120 days after vaccination.
 - During the BA.4/BA.5 period, vaccine effectiveness of 2 doses waned from 83% at 14-150 days to 37% later. 3 doses waned from 60% at 7-120 days to 29% later. Vaccine effectiveness of 4 doses was 61% 7-120 days after vaccination.
 - Adults must stay up to date on bivalent Covid-19 mRNA vaccines, to maximize protection giving waning immunity over time and developing variants.
- The multistate VISION Network estimated effectiveness of 2, 3, and 4 doses of monovalent mRNA vaccines against Covid-19-related hospitalization among 34,220 adults with immunocompromising conditions hospitalized for Covid-19-like illness during December 16, 2021 - August 20, 2022. Overall, vaccine effectiveness during Omicron predominance was 36% 14 or more days after dose 2, 69% 7-89 days after dose 3, and 44% 90 or more days after dose 3. During later Omicron BA.2/BA.2.12.1 and BA.4/BA.5 sublineage periods when a 4th dose was available, effectiveness was 32% 90 or more days after dose 3, and 43% 7 or more days after dose 4. Due to waning protection, people with immunocompromising conditions are recommended for other protective measures such as preexposure prophylactic antibody treatments, antivirals, and masks, as well as updated bivalent boosters.
 - Five patients were diagnosed with ocular monkeypox during July – September 2022. All 5 received tecovirimat treatment, and 4 also received topical trifluridine. 2 were HIV-positive, and 4 were hospitalized, with one experiencing marked vision impairment. People with monkeypox should be advised to practice good hand hygiene and avoid touching their eyes. Urgent referral for ophthalmologic evaluation and prompt antiviral therapy should be considered for patients with monkeypox and ocular signs or symptoms or lesions near the eye.
 - In August 2022, the Florida Department of Health notified CDC of an ER nurse who acquired monkeypox via exposure through a needlestick while providing care to a monkeypox patient, marking the first reported case of occupationally acquired monkeypox infection of healthcare personnel in the U.S. The nurse received JYNNEOS vaccine immediately and continued to work while asymptomatic. 10 days after exposure, a single lesion formed at the site of the needlestick, and then the nurse isolated at home until the lesion crusted over and the scab fell off, about 19 days later. Of 326 healthcare workers in Florida exposed to monkeypox patients, this is the only one reported to develop infection. Strong adherence to infection prevention and control precautions are critical in preventing further incidence among healthcare workers.
 - Per National Center for Health Statistics, National Hospital Ambulatory Medical Care Survey, 2019–2020 data, the emergency department visit rate for infants under 1 year old declined from 123 visits per 100 infants in 2019 to 68 in 2020. The ED visit rate for kids

age 1 to 17 decreased from 43 to 29. Adult visit rate decreases were not statistically significant. Rates were highest for infants under 1 year old, followed by adults over 75 years old.

MMWR 10/28/2022 Synopsis

- Assessment of influenza activity in Chile in 2022 found that incidence and hospitalizations were higher than 2020-21, but 4 to 6 times lower than during 2017-19, indicating that flu activity continues to be disrupted since the emergence of Covid-19. The flu epidemic in Chile in 2022 began months earlier than typical. Flu vaccine effectiveness against hospitalization was 49%. The report advised that Northern Hemisphere countries should prepare for an atypical 2022-23 flu season, which could begin early and involve severe disease in the absence of prevention measures.
- Using EHR data from 692,570 Covid-19 patients who sought medical care during January-July 2022, Paxlovid oral antiviral treatment was assessed by race and ethnicity. Treatment was 35.8% lower for blacks than whites, and 29.9% lower for Hispanics than non-Hispanics. These disparities existed among all age groups as well as immunocompromised patients. (Racial and ethnic disparities in treatment with other medications were also assessed and found, but absolute differences were small given their low treatment percentages.) Reasons for these disparities could include limited access to (timely) treatment for certain groups, previous negative experiences influencing patient decisions, racism/bias among providers, limited knowledge of options, or language barriers.
- Influenza hospitalization data from the Influenza-Associated Hospitalization Surveillance Network (FluSurv-NET), and flu vaccination coverage data from the Behavioral Risk Factor Surveillance System (BRFSS) were assessed by race and ethnicity from the 2009-10 through the 2021-22 influenza seasons. Hospitalization rates were higher among blacks (78.2 per 100,000), American Indian/Alaskan Natives (54.6), and Hispanics (50.3) compared to whites (43.0) and Asians or Pacific Islanders (34.5). Vaccination coverage was lower among Hispanics (37.9%), American Indian/Alaskan Natives (40.9%), and blacks (42.0%), compared to whites (53.9%) and Asians (54.2%).
- During May 22 – October 10, 2022, 931,155 doses of JYNNEOS vaccine were administered to people exposed or at risk for monkeypox. 51.4% of them were white, 22.5% were Hispanic, and 12.6% were black. The percentage of black and Hispanic recipients did increase over this time as efforts to address disparities were initiated. 57.6% of people eligible for a second dose received it. Targeted efforts to continue to increase complete vaccination of eligible patients, (particularly blacks and Hispanics who are disproportionately affected by the monkeypox outbreak) are needed.
- The Louisiana Department of Health worked with the CDC to secure 6000 additional doses of JYNNEOS vaccine in preparation for the September 1-5, 2022, Southern Decadence LGBTQIA+ festival. They also increased outreach and education efforts, and held multiple community free vaccination events (at gay-owned or gay-frequented

venues) before and during the festival. During August 9 – September 5, 2022, 6854 doses were administered, with 12.2% of them given at the Health Hub at the festival, and the rest at community clinics and vaccination events. Of those given at the festival Health Hub, 52.3% were white, 13.9% were black, and 10.3% were Hispanic. Of those given outside the festival Health Hub, 54% were white, 24% were black, and 6.7% were Hispanic.

4.06.04

Community Health Equity Learning & Practice Collaborative (C-HELP)

C-HELP will support local health departments to achieve health equity through great discussion and presentations, overview of tools and resources, collaborative learning opportunities and Public Health Accreditation Board (PHAB). Local public health staff from all disciplines attend, including health commissioners, epidemiologists, community health workers, and health equity staff.

The purpose of C-HELP is:

- To build a community of innovative and effective professionals dedicated to improving the health of all Ohioans.
- To support local health department efforts to achieve health equity in their communities through removing barriers to quality healthcare access, increasing healthy behaviors, and addressing the social determinants of health.
- Meet emerging needs of local health department health equity staff.
- Support the Community Wellbeing: Social Determinants of Health Dashboard. This dashboard uses publicly available data to establish 5 Domains and over 100 Metrics. Domains include:
 - Economic Vitality, Neighborhood and Physical Environment, Healthcare Access and Quality, Education Access and Quality, and Social and Community Environment.

4.06.05

Vital Statistics Sales and Services Rendered

	October	YTD	Same Period 2021
Birth Certificates Issued	466	5648	6265
Death Certificates Issued	858	8705	9156
Fetal Death Certificates Issued	0	1	0
Burial Permits Issued	99	746	655
Birth Certificates Filed	99	1147	1276
Death Certificates Filed	186	1897	1953
Fetal Death Certificates Filed	0	14	5

Ron Graham provided the following highlights:

- *The December 19, 2022, Board Meeting will be held at 2:00 p.m., followed by the staff appreciation luncheon at 3:00 p.m.*
- *Getting closer to closing on the property near the freeway. The cost will be \$12,500 for the one acre. Trees will be removed for safety.*
- *We have had a decrease in grants. There are opportunities for contracts, such as the school nurse contracts.*
- *We have held contracts with Geauga Public Health (GPH) for about 8 years for various services, such as accreditation and finance. In the past six months, Dan Lark and Mariann Rusnak have been tasked to help stabilize the department. Ron's recommendation is to give them a 60-day notification to leave. They will have the option of discussing a new contract. The combination of services will help alleviate some redundancies. We are not looking to take over the agency, but to stabilize and improve it. This will allow long-term sustainability for both agencies. We have spoken to ODH and legal.*

Discussion:

Patricia Murphy asked for clarification that it was not a partnership, but contract services with GPH. Ron stated that was correct.

Brian Katz asked if GPH was accredited. Ron said it was.

Steve Karns asked if there was a strategy in mind for the grants. Ron Graham said we currently share some grants and we can also share grant resources.

Steve Karns said it sounds like this will be another reason to need the county's financial software program. Ron agreed that it will make the need greater.

Patricia Murphy asked if we would leave GPH if they do not approve a contract. Ron Graham said that is correct, they will have 60 days.

5.0
Committee Reports

5.01
Finance Committee, Meeting Held November 21, 2022

**Lake County General Health District
Finance Committee Meeting
Minutes
November 21, 2022**

The meeting of the Board of the Lake County General Health District's Finance Committee was held on November 21, 2022. The meeting was held at the Lake County Health District office located at 5966 Heisley Road, Mentor, Ohio.

In attendance at the meeting were Board of Health members:

Roger Anderson
Dr. Alvin Brown
Brian Katz
Randy Owoc
Dr. Lynn Smith

Also in attendance were: Ron H. Graham, Health Commissioner; Adam Litke, Finance and Human Resources Director; Mariann Rusnak, Director of Administration/Registrar; and Gina Parker, Deputy Registrar.

The meeting was called to order at 2:32 p.m. by Chairman Dr. Lynn Smith.

Adam Litke explained the purpose of the meeting was to provide the Finance Committee an update with the revised 2023 budget. Adam provided a brief overview.

The primary changes are:

- 67% of expenditures are expected to salary and fringe benefits.
- The tax assessment percentage of the budget is increasing due to fewer grant dollars.
- There is expected to be an increase in local contract revenue.
- There will be a 10% increase in the cost of health insurance and a 3% increase in wages in 2023.

The plan for next year:

- Staff retention
- Increasing costs of health insurance
- Decreasing retirement benefits for public employees
- Stagnation of grants – need to find new ways to get funding

- Lack of large new grants – need new large dollar grants
- Potential economic issues
- Increasing operating costs – has been significant since COVID

The plan for the next 2-5 years:

- Retention of contracts, like the school nursing contracts
- Expansion of grants
- Replacement of windows at the 5966 Heisley building
- Begin fleet replacement
- Previous other items

The plan for 5+ years:

- Management employees and field staff nearing retirement
- Reduce reliance on tax assessment – would like to be at 25% or less
- Maximize grant revenue
- Explore new areas for growth
- Replace fleet
- Retain tenants at 5966 Heisley building
- Previous other items

Adam Litke said the budgets are okay at this time. However, by 2024, we may need to make some changes.

Ron Graham discussed the contract with Geauga Public Health. Adam Litke, Dan Lark, and Mariann Rusnak have spent much time reviewing their programs to help them get back on track. There were deficits in many of them. LCGHD will pull the contract, but they will have 60 days' notice and can discuss subcontracting through LCGHD. Adam Litke said there should be communication with both counties' Commissioners and Treasurers. It will be a cost savings for both agencies, promote government accountability, and efficient use of tax payer money.

Discussion:

Dr. Alvin Brown asked what the ratio is for health insurance for employees. Adam Litke said it is 85/15. This was a somewhat recent change to be more in line with how the county operates.

Dr. Alvin Brown asked who writes the grants. Ron Graham said that Jessica Wakelee writes most of them. However, there are not a lot of state grants available.

Dr. Alvin Brown asked if there was a plan when looking ahead to 2024. Adam Litke said there will be a review of grants and contracts. Ron Graham said there may be a reallocation of staff.

The meeting was adjourned at approximately 2:59 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	10/17/2022	Closed. New business for vehicles submitted in October 2022.	11/21/2022
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	10/17/2022	Approved	11/21/2022
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			
10/17/22	EH	7.02	Permission to Submit NEHA-FDA Retail Flexible Funding Model Grant, \$5,000	APPROVED	N			
10/17/22	EH	7.03	Permission to Purchase Vehicles for the Health Department, Not to Exceed \$200,000.00	APPROVED	N			
10/17/22	PH&EP	7.04	Permission to Accept the FFY 2023 Lake County Safe Communities Coalition Grant, \$38,500.00	APPROVED	N	10/17/2022	Approved	11/21/2022

6.02

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

Brian Katz moved and Dr. Alvin Brown seconded a motion to hear the second 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 second 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

7.01

7.01.01

Certification of Monies, Resolution 22-11-07-01-01-100

Dr. Alvin Brown moved and Roger Anderson seconded a motion to adopt Resolution 22-11-07-01-01-100 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 22-11-07-01-02-100

Brian Katz moved and Dr. Lynn Smith seconded a motion to adopt Resolution 22-11-07-01-02-100 to Increase/Decrease Appropriations, as listed in the recapitulation sheets attached to these minutes, be adopted; motion carried.

7.02

Permission to Accept COVID-19 Enhanced Operations (EO22) Grant, \$45,000

Dr. Alvin Brown moved and Nicole Jelovic seconded a motion to accept from Ohio Department of Health for the COVID-19 Enhanced Operations (EO22) grant an additional allocation in the amount of \$45,000. The grant period is from August 1, 2022 – June 30, 2023; motion carried.

This is an additional amount awarded for the COVID-19 Enhanced Operations grant for the purpose of hiring Yusra Fawad, our previous CDC Foundation Epidemiologist on a temporary basis for the remainder of the grant period. This additional award brings the total amount received to be \$535,000.00.

7.03

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

Brian Katz moved and Dr. Alvin Brown seconded a motion to accept and submit the temporary 2023 appropriations to Lake County; motion carried.

The Finance Committee reviewed the temporary 2023 appropriations.

The primary changes are:

- 67% of expenditures are related to salary and fringe benefits.
- The tax assessment is increasing due to fewer grant dollars.
- There is an increase in local contract revenue.
- There will be a 10% increase in the cost of health insurance and a 3% increase in wages in 2023.

8.0

Adjournment

Patricia Murphy moved and Dr. Alvin Brown seconded a motion to adjourn the meeting at approximately 4:48 p.m.; motion carried.


Secretary


President

BOARD OF HEALTH
LAKE COUNTY GENERAL HEALTH DISTRICT
Date November 21, 2022

The Board of the Lake County General Health District met this day, November 21, 2022, in a regularly scheduled meeting with the following members present:

Dr. Alvin Brunner 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.

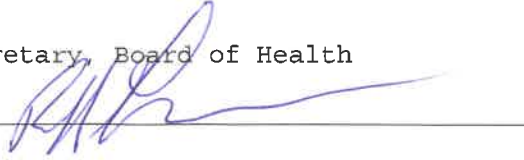
Roger Anderson seconded the resolution and the vote being called upon its adoption, the vote resulted as follows:

"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 November 21, 2022.

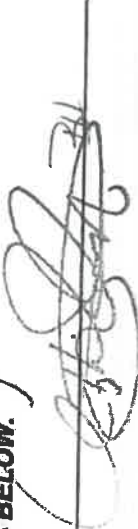
Witness my hand this 21st day of November 2022.

Secretary, Board of Health


Board Report - 11/01/2022 - 11/21/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON NOVEMBER 21, 2022
 I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW.

CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR:



Issued / Vendor	Description	PO #	Fund #	Amount
BOARD OF HEALTH	TO 07E SALFRINGE ADMIN 10/22	0	00200761-755	1075.76
BOARD OF HEALTH	TO 07E SALFRINGE ADMIN 10/22	0	00200761-755	482.59
BOARD OF HEALTH	COPIES 10/22	0	00200761-755	1.20
			Total #	1559.55
GEAUGA COUNTY WATER RESOURCES LAB	ACCT # 98000265-001 11/21/22	22006856	00400761-755	425.00
			Total #	425.00
BOARD OF HEALTH	TO 07E SALFRINGE ADMIN 10/22	0	00500761-755	5627.93
BOARD OF HEALTH	COPIES 10/22	0	00500761-755	19.25
LAKE COUNTY TELECOMMUNICATIONS	VOCIE MAIL 9/30	0	00500761-755	60.00
LAKE COUNTY TELECOMMUNICATIONS	VOICE MAIL 10/22	0	00500761-755	60.00
MILO, KATHY	REIMB MILEAGE 10/31/22-11/9/22	0	00500761-755	79.20
PARK UNITED METHODIST CHURCH	RENT MADISON WIC- OCT-DEC 22	22000997	00500761-755	1725.00
SUNRISE SPRINGS WATER CO INC	WATER FOR WIC #952310 11/8/22	22000989	00500761-755	22.80
TIME WARNER CABLE-NORTHEAST	PH/INT WIC WICKLIFFE - 11/22	22000891	00500761-755	129.96
VIC PLACE LLC	ELECTRIC - OCT 2022	22002226	00500761-755	381.86
VIC PLACE LLC	WIC RENT - NDEC 2022	22007718	00500761-755	1283.33
WINDSTREAM	HUNTSBURG -WIC NOV 2022	22001615	00500761-755	213.04

Board Report - 11/01/2022 - 11/21/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: *November 21, 2022*
 I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW.

CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR:

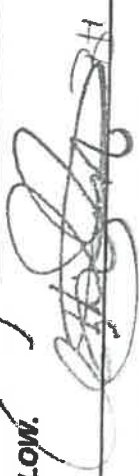


Issued / Vendor	Description	PO #	Fund #	Amount
			Total #	9602.37
BOARD OF HEALTH	TO 29E SALFRINGE WAKELEE, KOLA	0	00700761-755	1065.29
BOARD OF HEALTH	TO 29E SALFRINGE A WILSON OCT	0	00700761-755	5982.71
BOARD OF HEALTH	POSTAGE 10/22	0	00700761-755	1218.03
C D W GOVERNMENT INC	DZ06393 11/8/22	22009649	00700761-755	368.03
DIRECT MARKETING PUBLISHING LLC	INV 10818 11/1/22	22007428	00700761-755	560.00
FLEIG, JOHN	REIMB HD SUPPLIES 10/17-11/2/2	0	00700761-755	36.82
GRAHAM, RON	REIMB MEETING EXP 10/5-10/27/2	0	00700761-755	84.31
GRAHAM, RON	MONTHLY TRAVEL REIMB 11/22	22000923	00700761-755	625.00
LAKE COUNTY DEPT OF UTILITIES	SEWER 7/7/22-10/5/22	0	00700761-755	162.54
LAKE COUNTY TELECOMMUNICATIONS	AT & T/PAETEC LONG DIST 10/22	0	00700761-755	510.17
LAKE COUNTY TELECOMMUNICATIONS	VOCIE MAIL 9/30	0	00700761-755	277.50
LAKE COUNTY TELECOMMUNICATIONS	VOICE MAIL 10/22	0	00700761-755	277.50
LANGUAGE LINE LLC	INTERPRETER PH #10677348 10/31	22001618	00700761-755	3.00
MILO, KATHY	REIMB MILEAGE 10/31/22-11/9/22	0	00700761-755	10.80
NFP CORPORATE SERVICE	NOV BENEFITS INV7645 11/14/22	22004025	00700761-755	855.00
OPEN ON LINE	BACKGROUND CHKS #561542 10/31	22000925	00700761-755	128.60
OTIS ELEVATOR CO	MAINT SERVICE-#F10000042274	22001220	00700761-755	125.00

Board Report - 11/01/2022 - 11/21/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: NOVEMBER 21, 2022
 I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW.

CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR:



Issued / Vendor	Description	PO #	Fund #	Amount
THE ILLUMINATING COMPANY	HEISLEY RD ELECTRIC-OCT/NOV	22008018	00700761-755	2485.74
TONY SCHEIBER'S HAULING	GARBAGE PICKUP INV 22088 11/17	22004026	00700761-755	30.00
UNIVERSITY HOSPITALS OCCUPATIONAL HEALT	NEW HIRES/DRUG SCREEN #44155	22003441	00700761-755	150.00
UNIVERSITY HOSPITALS OCCUPATIONAL HEALT	INVOICE 48838 10/4/22	0	00700761-755	216.00
VIC PLACE LLC	RENT - EXTRA STORAGE - DEC 2	0	00700761-755	517.50
WORLD MICROGRAPHICS INC	SCANPRO 2500/SHIP, 5 YR MEMBER	22009654	00700761-755	6531.00
Total #				22220.54

BOARD OF HEALTH	POSTAGE 10/22	0	00800761-755	52.02
BOARD OF HEALTH	COPIES 10/22	0	00800761-755	91.15
HARRISON, DEBORAH	REFUND #214037 10/25/22 DC	0	00800761-755	15.90
LAKE COUNTY TELECOMMUNICATIONS	VOCIE MAIL 9/30	0	00800761-755	30.00
LAKE COUNTY TELECOMMUNICATIONS	VOICE MAIL 10/22	0	00800761-755	30.00
SUNSET FUNERAL SERVICES	REFUND # 213907 10/19/22	0	00800761-755	14.00
Total #				233.07

BOARD OF HEALTH	TO 08E SAL/FRINGE CARTE, OHLER	0	01300761-755	671.62
BOARD OF HEALTH	TO 07E SAL/FRINGE ADMIN 10/22	0	01300761-755	10706.38
BOARD OF HEALTH	POSTAGE 10/22	0	01300761-755	1.68
BOARD OF HEALTH	COPIES 10/22	0	01300761-755	255.55

DUARU REPORT - 11/01/2022 - 11/21/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: NOVEMBER 21, 2022
I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW.


CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR:

Issued / Vendor	Description	PO #	Fund #	Amount
DENMEADE, DYAN	REIMB MILEAGE 10/18/22-11/8/22	0	01300761-755	356.77
LAKE COUNTY TELECOMMUNICATIONS	VOCIE MAIL 9/30	0	01300761-755	112.50
LAKE COUNTY TELECOMMUNICATIONS	VOICE MAIL 10/22	0	01300761-755	112.50
SANOFI PASTEUR INC	FLU VACCINES 919740862 11/30	22008208	01300761-755	1846.23
Total #				14063.23
AIRGAS	MONTHLY TANK #9992299418 11/30	22001638	01400761-755	97.16
LAKE COUNTY TELECOMMUNICATIONS	VOCIE MAIL 9/30	0	01400761-755	22.50
LAKE COUNTY TELECOMMUNICATIONS	VOICE MAIL 10/22	0	01400761-755	22.50
Total #				142.16
BOARD OF HEALTH	COPIES 10/22	0	01500761-755	4.70
Total #				4.70
BOARD OF HEALTH	TO 29E SAL/FRINGE WAKELEE	0	01700761-755	3418.26
BOARD OF HEALTH	TO 07E SALARY/FRINGE ADMIN 10	0	01700761-755	677.03
BOARD OF HEALTH	COPIES 10/22	0	01700761-755	43.35
Total #				4138.64
BOARD OF HEALTH	TO 29E SAL/FRINGE YARBROUGH	0	01800761-755	877.31

DUPLICATE REPORT - 11/16/2022 - 11/21/2022

BILLS PRESENTED TO BOARD OF HEALTH FOR CERTIFICATION OF PAYMENT ON: NOVEMBER 21, 2022
 I CERTIFY THERE ARE FUNDS TO MEET THE ENCUMBRANCES BELOW.

CHRISTOPHER A. GALLOWAY, LAKE COUNTY AUDITOR:



Issued / Vendor	Description	PO #	Fund #	Amount
			Total #	877.31
BOARD OF HEALTH	COPIES 10/22	0	02300761-755	12.80
MARSHALL, TREVOR	REFUND #58796 7/28/22 OM PERMIT	0	02300761-755	80.00
MARUT, NICHOLAS & DANIELLE	REFUND #53650 9/1/22 OM PERMIT	0	02300761-755	80.00
			Total #	172.80
BOARD OF HEALTH	TO 29E SAL/FRINGE KOLACZ/MARGA	0	02800761-755	3716.71
BOARD OF HEALTH	TO 07E SAL/FRINGE ADMIN 10/22	0	02800761-755	650.95
BOARD OF HEALTH	POSTAGE 10/22	0	02800761-755	8.27
LAKE GEAUGA RECOVERY CENTERS INC	2022-2023 TOBACC DELIVER-NOV	22009655	02800761-755	13275.00
			Total #	17650.93
BOARD OF HEALTH	TO 07E SAL/FRINGE ADMIN 10/22	0	02900761-755	226.46
BOARD OF HEALTH	POSTAGE 10/22	0	02900761-755	59.59
BOARD OF HEALTH	COPIES 10/22	0	02900761-755	30.55
LAKE COUNTY TELECOMMUNICATIONS	VOCIE MAIL 9/30	0	02900761-755	52.50
LAKE COUNTY TELECOMMUNICATIONS	VOICE MAIL 10/22	0	02900761-755	52.50
			Total #	421.60

Grand Total # 71511.90

11-18-22

A handwritten signature in black ink, appearing to be 'C. H. ...', written over a large, faint circular stamp or watermark.

RE

Account	Date	Description	Amount	Code	Account	Code	Account	Code	Account
0	11/22/2022	TREASURER OF HAMILTON CO.	1,242.00	E	01400761-755	01	500	570	551107
22006303	11/22/2022	UNITED PARCEL SERVICE	14.40	F	00700761-755	03	500	510	551108
22008886	11/22/2022	UNITED PARCEL SERVICE	176.94	F	00700761-755	03	500	565	551108
0	11/22/2022	UNITED PARCEL SERVICE	92.36	E	01400761-755	01	500	570	551108
22005406	11/22/2022	UNITED PARCEL SERVICE	144.55	F	00700761-755	03	999	999	551108
22009833	11/22/2022	UNITED WAY OF LAKE COUNTY	750.00	E	00700761-755	05	999	999	551109
22006296	11/24/2022	WICKLIFFE CITY SCHOOL DISTRICT	833.33	I	00500761-755	10	700	730	551081
0	11/22/2022	WILSON, ANNA	150.25	H	02900761-755	04	200	200	551110
22009497	11/25/2022	WRIGHT EXPRESS FINANCIAL SERVICES	1,772.81	H	00700761-755	01	999	999	551830
0	11/22/2022	YAKO, MICHELLE	7.54	H	00500761-755	04	700	730	551111
0	11/22/2022	YAKO, MICHELLE	0.59	H	00700761-755	04	999	999	551111
			38,592.50						

RA [Signature]
 DORRAN, C.D., MSH
 11/16/22

BOARD OF HEALTH
LAKE COUNTY GENERAL HEALTH DISTRICT

Date: November 21, 2022

The Board of the Lake County General Health District met this day, November 21, 2022, in a regularly scheduled meeting with the following members present:

Brian Katz 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.

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

"AYES" 13 "NAYS" 0

CLERK'S CERTIFICATION

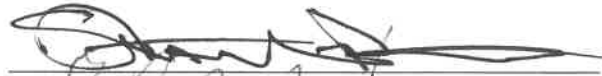
I, Ron Graham, Health Commissioner of the Board of Health do hereby certify that this is a true and accurate copy of a resolution adopted by the said Board on November 21, 2022.


Witness my hand this 21st day of November 2022.



Secretary, Board of Health


BOARD OF HEALTH
LAKE COUNTY GENERAL HEALTH DISTRICT
Date November 21, 2022


The Board of the Lake County General Health District met this day, November 21, 2022, in a regularly scheduled meeting with the following members present:












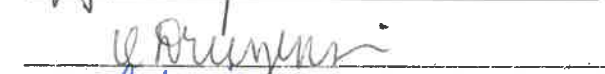


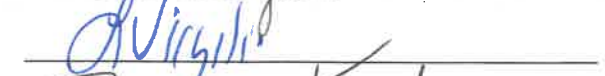






Richard Hawley

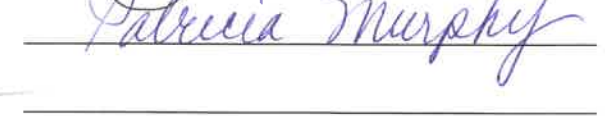












Patricia Murphy

Brian Katz presented the following resolution and named its adoption.

RESOLUTION TO: Transfer OF FUNDS AS FOLLOWS:

From:		
Fund 00700911	911 Board of Health	\$ 175,000.00
To:		
Fund 01400045	451 Air Pollution Control	\$ 175,000.00

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 128.22 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 there 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 as indicated below the following transfer of

revenue be done and that the Health Commissioner is hereby authorized to forward a certified copy of this resolution to the Lake County Auditor.

Transfer OF FUNDS AS FOLLOWS:

From:
Fund 00700911 911 Board of Health \$ 175,000.00

To:
Fund 01400045 451 Air Pollution Control \$ 175,000.00

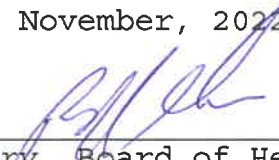
Dr. Lynn Smith seconded the resolution and the vote being called upon its adoption, the vote resulted as follows:

"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 November 21, 2022.

Witness my hand this 21st day of November, 2022.



Secretary, Board of Health

Resolution No. 22-11-07-01-02-100

Increase/Decrease in Revenues

Fund	Fund Number	Fund Description	Account	Amount
014	01400045 451	Air Pollution Control	Transfer In	\$ 175,000.00

Net Change in Estimated Resources	\$ 175,000.00
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Increase/Decrease in Appropriations

Fund	Fund Number	Fund Description	Account	Amount
007	00700911 911	Board of Health	Transfer Out	\$ 175,000.00

Net Change in Appropriations	\$ 175,000.00
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BOARD OF HEALTH
LAKE COUNTY GENERAL HEALTH DISTRICT
Date November 21, 2022

The Board of the Lake County General Health District met this day, November 21, 2022, in a regularly scheduled meeting with the following members present:

Patricia Murphy
Brian Katz
Timothy
Richard Haver
[Signature]
[Signature]
Virgilio

[Signature]
[Signature]
[Signature]
[Signature]
[Signature]
[Signature]

Brian Katz Presented the following resolution and named its adoption.

RESOLUTION TO: SET 2023 APPROPRIATIONS

WHEREAS, the Board of the Lake County General Health District 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, may set appropriations, transfer funds from one item in their appropriation to another item, reduce or increase any item, create new items, make additional appropriations or reduce the total appropriations, and transfer revenue 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 to provide for the current expenses and other expenditures of said Health District, during the year ending December 31, 2023, set appropriations as delineated on the attached listing.

BE IT FURTHER RESOLVED that the Health Commissioner of the Board is hereby directed to forward certified copies of this resolution to the Lake County Auditor.

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

"AYES" 11

"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 November 21, 2022.

Witness my hand this 21st day of November, 2022.



Secretary, Board of Health

Estimated Resources for Calendar Year 2023

Fund/Account	2022 Estimated Revenue	Description
Row Labels	Sum of Current Budget	
002	\$ 25,000.00	
00200035 351	\$ 25,000.00	Federal Grants
003	\$ 4,800.00	
00300020 208	\$ 800.00	Manufactured Homes Licenses
00300020 224	\$ 4,000.00	Permits
00300042 424	0	Other Revenue
004	\$ 16,000.00	
00400020 224	\$ 16,000.00	Permits
005	\$ 830,136.00	
00500035 351	\$ 830,136.00	Federal Grants
00500042 424	\$ -	Other Revenue
006	\$ 30,000.00	
00600020 209	\$ 30,000.00	Swimming Pool License
007	\$ 3,750,864.00	
00700020 222	\$ 113,500.00	Board of Health Permits
00700035 351	\$ -	Federal Grants
00700035 371	\$ 489,000.00	State Grants
00700035 393	\$ 2,925,448.00	Tax Assessment
00700042 424	\$ 30,100.00	Other Revenue
00700042 430	\$ 96,816.00	Office Rentals
00700042 431	\$ 3,000.00	Refunds & Reimbursements
00700042 437	\$ 90,000.00	Employee Hospitalization
00700042 438	\$ 3,000.00	Life Insurance
008	\$ 382,100.00	
00800025 284	\$ 360,000.00	Vital Statistics
00800042 424	\$ 20,000.00	Other Revenue
00800042 431	\$ 2,100.00	Refunds & Reimbursements
009	\$ 3,000.00	
00900042 424	\$ 3,000.00	Other Revenue
010	\$ 452,300.00	
01000020 210	\$ 438,400.00	Food Service Permits/Licenses
01000042 424	\$ 13,900.00	Other Revenue
011	\$ -	
01100035 371	\$ -	State Grants
01100042 424	\$ -	Other Revenue
013	\$ 1,365,000.00	
01300035 351	\$ 685,000.00	Federal Grants
01300035 371	\$ 1,000.00	State Grants
01300042 424	\$ 153,000.00	Other Revenue
01300142 424	\$ 526,000.00	Other Revenue
014	\$ 249,200.00	
01400035 351	\$ 141,000.00	Federal Grants

01400035 371	\$	95,700.00	State Grants
01400042 424	\$	12,500.00	Other Revenue
015	\$	130,000.00	
01500020 211	\$	130,000.00	Solid Waste License
01500042 424	\$	-	Other Revenue
017	\$	336,000.00	
01700035 351	\$	336,000.00	Federal Grants
018	\$	40,000.00	
01800035 351	\$	40,000.00	Federal Grants
023	\$	682,500.00	
02300015 151	\$	50,000.00	Special Assessment
02300020 222	\$	480,000.00	Board of Health Permits
02300035 371	\$	150,000.00	State Grants
02300042 424	\$	2,500.00	Other Revenue
026	\$	-	
02600042 426	\$	-	Insurance Claims
027	\$	-	
02700035 351	\$	-	Federal Grants
028	\$	353,000.00	
02800035 371	\$	353,000.00	State Grants
029	\$	295,800.00	
02900042 424	\$	280,000.00	Other Revenue
02900035 371	\$	5,000.00	State Grants
02900035 351		10800	Federal Grants
(blank)		23911652	
Total Est. Revenue	\$	8,945,700.00	

Appropriations for Calendar Year 2022

Fund/Account	2022 Appropriations	Description
002	20500	
00200761 755	20500	Other Expense
003	500	
00300761 756	500	State Remittances
004	4600	
00400761 755	2100	Other Expense
00400761 756	2500	State Remittances
005	839180	
00500511 512	433980	Salaries - Employees
00500511 551	62000	PERS - Regular
00500511 553	12000	Workers' Compensation
00500511 554	7000	Medicare - Employer
00500511 556	1000	Unemployment Compensation
00500511 557	88000	Hospitalization Insurance
00500511 561	2000	Life Insurance
00500511 562	4000	Dental Insurance
00500761 755	228200	Other Expense
00500811 812	1000	Equipment
006	21750	
00600761 755	4750	Other Expense
00600761 756	17000	State Remittances
00600811 812	0	Equipment
007	4245945.43	
00700511 512	2286470.43	Salaries - Employees
00700511 551	358151	PERS - Regular
00700511 552	1000	FICA
00700511 553	41205	Workers' Compensation
00700511 554	38124	Medicare - Employer
00700511 556	6000	Unemployment Compensation
00700511 557	429200	Hospitalization Insurance
00700511 561	11100	Life Insurance
00700511 562	20000	Dental Insurance
00700761 755	944695	Other Expense
00700811 812	110000	Equipment
00700761 756	0	State Remittances
008	316500	
00800511 512	87550	Salaries - Employees
00800511 551	12000	PERS - Regular
00800511 553	2500	Workers' Compensation
00800511 554	1500	Medicare - Employer
00800511 557	8800	Hospitalization Insurance
00800511 561	200	Life Insurance
00800511 562	1000	Dental Insurance
00800761 755	1950	Other Expense

00800761 756	200000 State Remittances
00800811 812	1000 Equipment
00800511 556	0 Unemployment Compensation
010	83650
01000761 755	38150 Other Expense
01000761 756	45500 State Remittances
01000811 812	0 Equipment
011	0
01100511 512	0 Salaries - Employees
01100511 551	0 PERS - Regular
01100511 553	0 Workers' Compensation
01100511 554	0 Medicare - Employer
01100511 556	0 Unemployment Compensation
01100511 557	0 Hospitalization Insurance
01100511 562	0 Dental Insurance
01100761 755	0 Other Expense
013	1647060
01300511 512	536610 Salaries - Employees
01300511 551	45000 PERS - Regular
01300511 553	6500 Workers' Compensation
01300511 554	8500 Medicare - Employer
01300511 556	3000 Unemployment Compensation
01300511 557	44000 Hospitalization Insurance
01300511 561	400 Life Insurance
01300511 562	2000 Dental Insurance
01300761 755	239050 Other Expense
01300811 812	11000 Equipment
01301511 512	500000 Salaries - Employees
01301511 551	55000 PERS - Regular
01301511 553	10000 Workers' Compensation
01301511 557	165000 Hospitalization Insurance
01301511 561	3000 Life Insurance
01301511 562	7000 Dental Insurance
01301511 556	5000 Unemployment Compensation
01301511 554	6000 Medicare - Employer
014	388350
01400511 512	215650 Salaries - Employees
01400511 551	30000 PERS - Regular
01400511 553	4000 Workers' Compensation
01400511 554	3400 Medicare - Employer
01400511 557	66000 Hospitalization Insurance
01400511 561	500 Life Insurance
01400511 562	2400 Dental Insurance
01400761 755	66400 Other Expense
01400811 812	0 Equipment
015	61450
01500761 755	3700 Other Expense

01500761 756	57750 State Remittances
017	444800
01700511 512	125000 Salaries - Employees
01700511 551	16000 PERS - Regular
01700511 553	1500 Workers' Compensation
01700511 554	2000 Medicare - Employer
01700511 557	18000 Hospitalization Insurance
01700511 561	200 Life Insurance
01700511 562	2000 Dental Insurance
01700761 755	280100 Other Expense
01700511 556	0 Unemployment Compensation
018	35200
01800761 755	35200 Other Expense
019	0
01900761 755	0 Other Expense
020	0
02000761 755	0 Other Expense
023	234500
02300511 553	0 Workers' Compensation
02300511 557	0 Hospitalization Insurance
02300511 561	0 Life Insurance
02300511 562	0 De
02300761 755	226500 Other Expense
02300761 756	8000 State Remittances
026	450000
02600761 755	400000 Other Expense
02600811 812	50000 Equipment
027	0
02700761 755	0 Other Expense
02700761 756	0 State Remittances
02700811 812	0 Equipment
028	380700
02800511 512	100000 Salaries - Employees
02800511 551	16000 PERS - Regular
02800511 553	2000 Workers' Compensation
02800511 554	1400 Medicare - Employer
02800511 557	8000 Hospitalization Insurance
02800511 561	200 Life Insurance
02800761 755	252100 Other Expense
02800511 562	1000 Dental Insurance
02800511 556	0 Unemployment Compensation
029	364030
02900511 512	244930 Salaries - Employees
02900511 551	47000 PERS - Regular
02900511 553	7000 Workers' Compensation
02900511 554	6000 Medicare - Employer
02900511 557	44000 Hospitalization Insurance

02900511 561		500 Life Insurance
02900511 562		2000 Dental Insurance
02900761 755		12600 Other Expense
997		0
<hr/>		
99700761 755		0
(blank)		29903997.66
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(blank)		29903997.66
County Fund		
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County Fund Number		
TOTAL OBLIGATIONS		0
<hr/>		
(blank)		0
Grand Total		39442713.09
<hr/>		
Total	\$	9,538,715.43



November 21, 2022

Communicable Disease Update

COVID-19 Vaccinations

COVID-19 vaccinations started for state of Ohio, 64.37%

Counties with highest percentages of COVID-19 vaccinations started:

1. Delaware, 81.25%
2. Cuyahoga, 70.32%
3. Warren, 70.14%
4. Union, 70.01%
5. Franklin, 69.60%
6. Lake, 69.37%

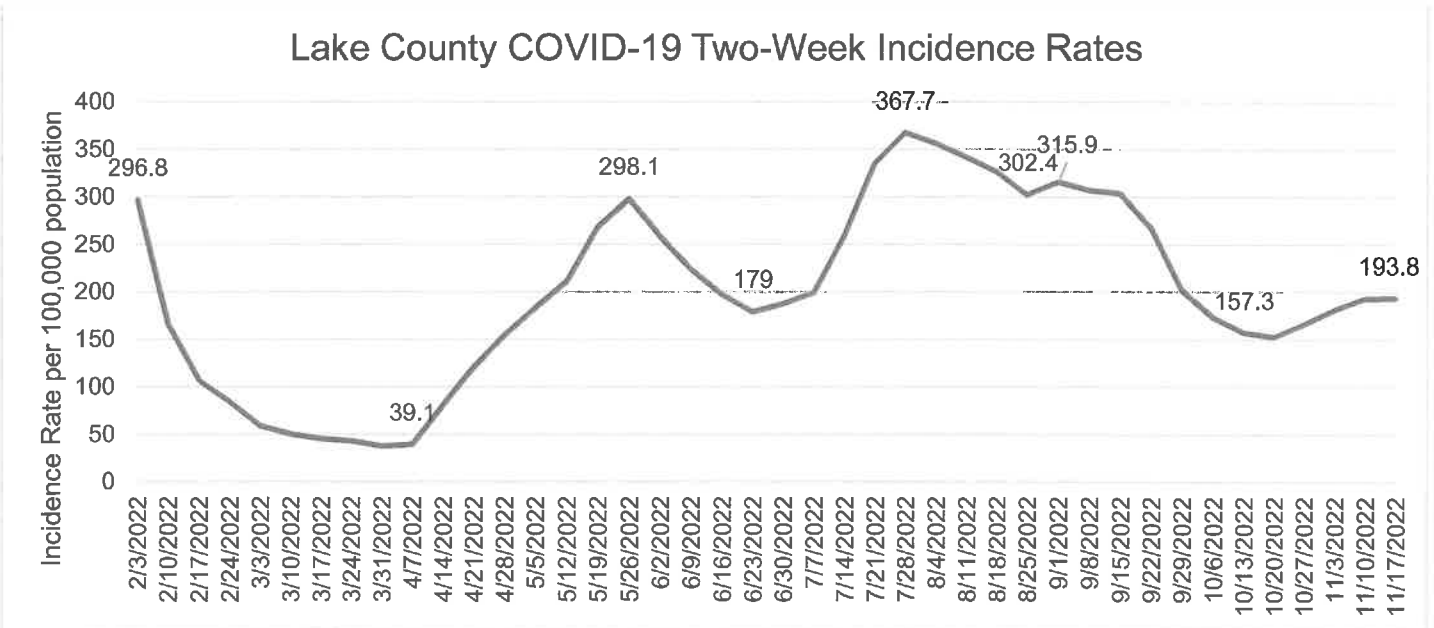
LCGHD COVID-19 Vaccination Update

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	105
1/16-1/22	220	4/10-4/16	140	7/10-7/16	30	10/16-10/22	154
1/23-1/29	228	4/17-4/23	103	7/17-7/23	105	10/23-10/29	67
1/30-1/31	31	4/24-4/30	228	7/24-7/31	100	10/30-10/31	2
2/1-2/5	96	5/1-5/7	21	8/1-8/6	79	11/1-11/5	8
2/6-2/12	73	5/8-5/14	114	8/7-8/13	54	11/6-11/12	138
2/13-2/19	97	5/15-5/21	69	8/14-8/20	35	11/13-11/19	121
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	753

COVID-19 Cases and Incidence

COVID-19 Case Numbers	
11/1-11/5	212
11/6-11/12	211
11/13-11/19	183
November (to date)	631

As of Thursday...	Includes incident cases between (based on event date)	Number of new cases (rate)	Rank Among Ohio Counties
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
10/20/22	10/6-10/19	351 (152.5)	42
10/27/22	10/13-10/26	382 (166.0)	40
11/3/22	10/20-11/02	418 (181.6)	43
11/10/22	10/27-11/9	445 (193.4)	24
11/17/22	11/3-11/16	446 (193.8)	15



*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 November LCGHD has investigated a total of 38 cases among those 18 and younger. (Total for similar timeframe in October was 33).

COVID-19 Outbreaks

LCGHD has also been investigating 6 currently active outbreaks in long term care facilities during November, including two in Willoughby, one in Mentor, one in Kirtland, one in Painesville, and one in Madison. Numbers are pending, but currently there are 162 cases associated with these outbreaks, including 107 residents and 55 staff. In addition, LCGHD investigated an outbreak at a hair salon involving 2 staff. More than 60 clients were estimated to be exposed as a result.

Infection Prevention & Control

LCGHD completed a consultation call with the Ohio Department of Health and a local long term care facility experiencing a COVID-19 outbreak. As a result, LCGHD will assist with the following: the Nursing Division has planned a bivalent COVID-19 booster clinic with the facility on December 1. During the clinic, epidemiology staff will conduct a handwashing audit at the facility, provide education on safe visitation practices, and provide resource information for fit testing for staff.

LCGHD has reached out to two additional long term care facilities to provide in depth consultations to help with managing their current outbreaks. Guidelines and resources are sent to all facilities as updates are made or as requested by the facility.

Monkeypox

To date, Lake County has 11 confirmed cases of monkeypox as part of the current outbreak. Three contacts have been monitored (to date) and have completed quarantine. A total of 111 Lake County residents have been vaccinated for monkeypox as of 11/17/22.

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.

Influenza

Reportable metrics for seasonal influenza include influenza-associated hospitalizations and pediatric flu deaths. Individual cases of influenza are only reported if a novel strain is detected. As of November 19th, for the current flu season, Lake County has 13 hospitalizations for seasonal influenza.