

**CHEMUNG COUNTY BOARD OF HEALTH
MINUTES
December 6, 2011**

PRESENT: Richard Madl* Thomas Curran, DDS
Paul Shore, DDS William Roe, PE
William G. Howard, MD* Mary Ann Baker, RN*
Robert Lambert, MD Ken Sobel, MD

*late arrivals

ABSENT: None

OTHERS PRESENT: Robert Page Thomas Kump, PE
Harry Shepard Melissa Traub
Terence Lenhardt, MD

Prior to the meeting the CCBH received the following:

1. Agenda for December 6, 2011 CCBH Meeting
2. CCBH Minutes from September 27, 2011
3. Budget Status Report through October 31, 2011
4. Environmental Health Services Reports for September & October 2011
5. Dental Clinic Statistical Reports for September & October 2011
6. Draft of Proposed Changes to CCBH By-Laws
7. Draft of Proposed Medical/Dental Staff By-Laws
8. CHHA Plan of Correction

The following items were distributed at the meeting:

9. CHHA/LTHHCP/PEIP Report through October 2011
10. Environmental Health Services Report for November 2011

CALL TO ORDER

Dr. Sobel called the meeting to order at approximately 7:30 PM.

1. APPROVAL OF MINUTES FOR SEPTEMBER 27, 2011 MEETING

RESOLUTION: A motion was made by Mr. Roe and seconded by Dr. Shore that the minutes of the September 27, 2011 Board of Health meeting be approved and accepted as presented. **Motion approved.**

AYES: Ken Sobel, MD Thomas Curran, DDS
Paul Shore, DDS William Roe, PE
Robert Lambert, MD

NAYS: None

ABSENT: Richard Madl William G. Howard, MD
Mary Ann Baker, RN

2. FINANCIAL REPORT

Harry Shepard mentioned that the Budget Status Report through October 31, 2011 was distributed to the CCBH in the mailing prior to the meeting. Mr. Shepard commented that there is nothing outstanding to report. There were no further questions for Mr. Shepard.

3. SERVICES REPORTS

A. ENVIRONMENTAL HEALTH SERVICES – Thomas Kump mentioned that reports for September and October 2011 were included in the mailing to BOH members in advance of the meeting and a report for November 2011 was distributed just prior to this meeting. He had nothing further to add to what was presented in the written report. Dr. Curran questioned the budget data reported on monthly report. Mr. Kump explained that the “actual revenue” column was the true year-to-date revenue collected. The “projected revenue” column is simply the total amount collected in the prior year divided by 12 months and multiplied by the number of months that are being reported in the “actual” column. There were no questions for Mr. Kump.

* Ms. Baker, Dr. Howard, and Mr. Madl arrived at the meeting.

B. CHHA UPDATE & CLINIC ACTIVITIES –Melissa Traub was introduced to the CCBH. Mr. Page referred to a new report covering the period through October 2011 that was distributed just prior to the meeting. It illustrates the number of visits, the total amount billed as well as the average census. It was felt that this would be a better way of tracking the performance of the CHHA. It was noted that the statistics for 2011 were lower for the PEIP program. Mr. Page commented that this was most likely due to start-up problems with electronic reporting more than any other cause. Ms. Traub provided a brief overview of her past experiences and what she hopes to bring to the Department. Ms. Traub had nothing further to add and there were no further questions for her. The CCBH welcomed her to the CCHD.

C. DENTAL SERVICES REPORT – Mr. Page commented that there were reports for the last two months provided to the CCBH in advance of the meeting. He reported that they just received acknowledgement that the Dental Sealant Program was approved for another 5 years. Dr. Curran suggested that with the large number of “no shows” in the dental clinic, consideration should be given to providing more time and services to those patients who do show. Mr. Shepard was not sure that that was not already being done. Dr. Curran requested that this be looked into and also to see if there was a method to track whether this is occurring. Mr. Page also noted that starting in April 2012 there will be 2 new Medicaid managed care programs.

OLD BUSINESS

1. ELECTION OF BOARD OFFICERS – The election of CCBH officers is required to occur at the December meeting. The current Vice President William Roe is nominated for the office of President for the 2012-13 time period. The Nominating Committee nominated Dr. Lambert for the position of Vice President. Mr. Kump was again nominated to be the appointed Secretary to the CCBH.

RESOLUTION: A motion was made by Dr. Curran and seconded by Dr. Howard that Mr. William Roe be nominated as the next CCBH President, that Dr. Lambert be nominated as the next Vice President, and that Mr. Kump be appointed the Secretary to the CCBH for the next 2-year term commencing January 1, 2012 and continuing through December 31, 2013. **Motion approved.**

AYES:	Richard Madl Paul Shore, DDS William G. Howard, MD Robert Lambert, MD	Thomas Curran, DDS William Roe, PE Mary Ann Baker, RN Ken Sobel, MD
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NAYS: None

ABSENT: None

2. BOH BY-LAWS REVIEW/APPROVAL – A draft of the proposed changes to the BOH By-Laws was distributed to CCBH members at least 2 weeks prior to this meeting as required in the By-Laws. Mr. Page stated that the changes involved a change in one of the Ex Officio members, an addition regarding credentialing of medical/dental staff, and an addition regarding Quality Assurance Oversight for the medical/dental staff of the CCHD. Dr. Sobel suggested that the Medical/Dental Staff By-Laws that is on the agenda for discussion later in the meeting really needs to be referenced in the proposed additions to the CCBH By-Laws. This led to much discussion about the wording of the Medical/Dental Staff By-Laws. Additions will need to be made to include a review of the National Practitioner Database, a medical clearance exam, and language that the staff have to accept Medicaid. Mr. Page will collaborate with members of the CCBH that are medical professionals to make sure that the wording of both the CCBH By-Laws and the Medical/Dental Staff By-Laws is satisfactory to all parties. Action on these two items will be taken at the next regular meeting of the CCBH in January 2012.

3. TICK IDENTIFICATION SERVICES – Dr. Lenhardt updated the CCBH on the progress he was making with regard to Arnot Health providing services in tick identification. He first contacted the NYS Wadsworth Laboratory and received very little assistance or cooperation. He then contacted SUNY Upstate Medical Center and received a wealth of information and assistance. He said that they could receive training in a half-day session from SUNY and that would be sufficient. Before he proceeded any further with this, Dr. Lenhardt wanted to again make sure that local practitioners would benefit from this service if provided. All clinicians present at the meeting agreed that this is something that would be of benefit to them at their practices.

NEW BUSINESS

1. **MEDICAL/DENTAL STAFF BY-LAWS** – This topic was already covered earlier.
2. **CHHA REORGANIZATION** – Mr. Page began by reporting that the contract with Arnot Health was terminated around the end of September 2011. Program management issues began to surface mid-summer that ended up being insurmountable. Since then one of the current supervisors had been acting as the Director of Patient Services. In November 2011 Ms. Traub was hired as the Director of Patient Services. She has 10 years of experience in homecare and is an RN with a Masters Degree. Ms. Traub has been busy working on clinical issues as well as making home visits with staff. Much time has also been spent on corrections to deficiencies noted on a recent State survey. She has already seen improvement. The main goal right now is to stabilize the management of the program. Eventually efforts will be made to seek approval to advance the growth of the CHHA to meet the needs of the community. We are one of only a few counties in NYS that has changed direction with regard to homecare. One nurse that was already employed in the CHHA has been promoted to a supervisory position.
3. **QUALITY ASSURANCE PROCEDURES FOR MEDICAL CONSULTANT** – Mr. Page reported that there is a need to develop a procedure in order to follow the Quality Assurance requirements to satisfy a deficiency noted on a recent NYSDOH survey that complements the new duties as spelled out in the proposed draft of the CCBH By-Laws. It would involve the medical professionals on the CCBH taking turns to conduct a chart/peer review twice per year at the CCHD. It could either be done prior to one of the regular CCBH meetings or scheduled at another time that would be convenient for those involved. It is desired that the first such review occur in January 2012 prior to the next CCBH meeting and it should not take much more than a half hour or so. Dr. Lambert agreed to get with Dr. Lenhardt to make arrangements for this first review.
4. **SEPTIC SYSTEM FEE SCHEDULE REVISION** – Mr. Kump informed the CCBH that the NYS budget that took effect April 1, 2011 included provisions that essentially eliminated NYSDOH aid for certain Environmental Health activities. Any activity beyond providing technical assistance for the individual water and sewage programs would not be aided as of July 1, 2011. Mr. Kump conducted an evaluation of the program to determine the financial impact these cuts would have in Chemung County and is proposing an increase in some of the fees related to the sewage system permitting program. He provided a hand-out outlining the proposal. The fee for a new or replacement permit would increase from \$155 to \$200, the fee for a septic tank only would increase from \$78 to \$100, the permit renewal fee would increase from \$18 to \$20, and the fee for a site evaluation would increase from \$105 to \$125. These fees would be scheduled to take effect January 1, 2012.

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RESOLUTION: A motion was made by Dr. Lambert and seconded by Dr. Curran that the proposed changes to the EHS Fee Schedule for septic system services be adopted as presented. **Motion approved.**

AYES: Richard Madl
Paul Shore, DDS
William G. Howard, MD
Robert Lambert, MD
Thomas Curran, DDS
William Roe, PE
Mary Ann Baker, RN
Ken Sobel, MD

NAYS: None

ABSENT: None

- 5. PROPOSED RESOLUTION ON STATE AID TO COVER MARCELLUS SHALE GAS COSTS FOR LOCAL HEALTH DEPARTMENTS** – Mr. Kump explained that the latest draft of the Supplemental Generic Environmental Impact Statement (dSGEIS) for the high volume hydraulic fracturing process used in horizontal drilling into low permeability formations such as the Marcellus and Utica Shales has been released. One specific aspect of that document affects local health departments by requiring them to be the lead investigation agency with respect to complaints of water well impacts associated with nearby drilling activities. This requirement is considered an unfunded mandate. As such, Mr. Kump is requesting the CCBH to consider a resolution requesting Governor Cuomo and Commissioner Martens to provide funding to local health departments to hire the necessary staff and to cover the cost of needed water sampling to be able to respond to complaints.

RESOLUTION: A motion was made by Dr. Howard and seconded by Mr. Roe WHEREAS, there is intense interest in the reserves of natural gas in New York State due to improved technology and demand, and WHEREAS, tapping these reserves will involve drilling, production, waste handling, infrastructure development, and the investigation and remediation of gas well related impacts, particularly with respect to the use of horizontal drilling into low permeability formations such as the Marcellus and Utica Shales and the high volume hydraulic fracturing (HVHF) process, and WHEREAS, there is significant public concern about potential environmental, socioeconomic, and human health impacts associated with increased gas drilling, as has been documented in other states, and WHEREAS, the New York State Department of Environmental Conservation has released a revised draft Supplemental Generic Environmental Impact Statement (dSGEIS) to determine the methods, controls, resources and authority necessary for the protection of public and environmental health, and WHEREAS, Section 7.1 of the dSGEIS identifies a myriad of potential impacts, testing, and mitigation measures necessary to monitor and protect water resources, including private and public water supplies, and Section 7.1.4.1 proposes a protocol whereby county health departments will receive such testing data and have primary responsibility for interpreting results, investigating all complaints, and educating the public concerning health effects and treatment options, and WHEREAS, the Environmental Health and Public Health professionals in New York State's county health departments (CHDs) have responsibility at a local level for ensuring the safety of drinking water supplies and responding to a broad range of public health impacts, emergencies,

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and nuisance complaints, including air and water contamination, chemical spills, and radiation hazards, and WHEREAS, local CHDs are the primary point of contact for members of the public that are concerned that they may have health-related impacts or are affected by nuisance conditions caused by gas drilling activities, and WHEREAS, local CHDs are dependent on state aid and state grants to supplement local assistance particularly when new mandates or guidelines increase program responsibilities, and WHEREAS, local CHDs will experience a substantial increase in workload if proposals in the dSGEIS are adopted, thereby requiring the addition of an estimated 1 to 2 full-time qualified staff in each affected county, and WHEREAS, without full funding, this significant workload represents a new unfunded mandate from the State in fiscally difficult times, and WHEREAS, funding needed to support appropriate multiple-agency oversight can and should be derived from the gas well permit fees and not be a burden borne by county and state taxpayers, and WHEREAS, NYSDEC Commissioner Martens established a HVHF Advisory Panel to consider these issues and this panel does not have representatives from CHDs, and WHEREAS, the New York State Department of Health presented resource needs to the Advisory Panel which did not include the needs of CHDs, and WHEREAS, Section 7.1.4.1 of the dSGEIS also references an informal, obsolete, and inadequately detailed memorandum of understanding (MOU) from 1985 between DEC and three western New York CHDs related to procedures for investigating well and gas drilling complaints, and WHEREAS, a new, formal, and sufficiently detailed MOU needs to be negotiated with all CHDs statewide which will be impacted by expanded gas well drilling and HVHF in New York State, and WHEREAS, the Chemung County Board of Health has met, considered and by unanimous vote, approved this resolution, now, therefore, be it RESOLVED, that the Chemung County Board of Health hereby requests that Governor Cuomo and the New York State Legislature establish full funding (100%) for necessary professional staff and resources in CHDs impacted by expanded gas well development in New York State, such funding to be derived from permit fees paid by those companies who will profit significantly from gas production, and that such burden not be adopted as an unfunded State mandate to counties and their taxpayers, and be it further RESOLVED, that NYSDEC Commissioner Martens require the HVHF Advisory Panel to obtain input directly from CHDs concerning potential impacts and resource needs for gas drilling oversight in the impacted counties, and be it further RESOLVED, that the Governor direct NYSDEC Commissioner Martens to negotiate a formal MOU with CHDs which adequately outlines the procedures, roles, and responsibilities of both DEC and CHD staff in the investigation and resolution of complaints related to gas well drilling and HVHF impacts to ground water resources and public and private drinking water supplies, and be it further RESOLVED, that the Chemung County Board of Health further requests that the aforementioned funding and agreements be put into place prior to permitting of new gas wells in the Marcellus Shale or other low permeability formations anywhere in the state, and be it further RESOLVED, that the Chemung County Board of health recommends that the Chemung County Legislature adopts a comparable resolution of support for 100% state aid to local CHD's to cover the local share costs for public health activities related to expanded gas well development and forwards a certified copy of its resolution to Governor Cuomo, Senate Majority Leader Skelos, Assembly Speaker Silver, Senator O'Mara, Assembly Member Friend, the NYS Association of County Health Officials (NYSACHO), the NYS Conference of Environmental Health Directors (CEHD), the NYS Association of Counties (NYSAC), NYSDOH Commissioner Shah, NYSDEC Commissioner Martens, Chair of Senate-Environmental Conservation Committee Grisanti, Chair of Assembly Environmental Conservation

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Committee Sweeney, Chair of Senate Health Committee Hannon, Chair of Assembly Health Committee Gottfried, NYS Attorney General Schneiderman, United States Senators Schumer and Gillibrand, Chemung County Board of Health, and the NYS High Volume Hydraulic Fracturing Advisory Panel. **Motion approved.**

AYES: Richard Madl Thomas Curran, DDS
Paul Shore, DDS William Roe, PE
William G. Howard, MD Mary Ann Baker, RN
Robert Lambert, MD Ken Sobel, MD

NAYS: None

ABSENT: None

ADJOURNMENT

RESOLUTION: With no further business to conduct, a motion was made by Dr. Curran and seconded by Mr. Roe that the CCBH be adjourned until the next regular meeting of January 24, 2012. **Motion approved.**

AYES: Richard Madl Thomas Curran, DDS
Paul Shore, DDS William Roe, PE
Ken Sobel, MD Robert Lambert, MD
William G. Howard, MD Mary Ann Baker, RN

NAYS: None

ABSENT: None

The meeting was adjourned at about 8:40 PM.

Next meeting: Board of Health Meeting
January 24, 2012 @ 7:30 PM
Health Department Conference Room