### Highland County Board of Health

### Tuesday October 15, 2019

#### Agenda

- 1. Public Hearing: Div. 2020 Fees
- 2. Call to Order
- 3. Roll Call
- 4. Private Water Nuisance Complaint: Glassburn /Trustee, 4671 Washburn Rd.
- 2<sup>nd</sup> reading of EH Division 2020 Fees Resolutions: 20-1 (Food Program);
   20-2 (Swimming Pools/Spas/Special Use Program); 20-3 (Park/Camp Program);
   20-4 (Body Art Program); 20-5 (Private Water Program); 20-6 (Sewage Program)
- 6. PHAB update
  - a. Documentation Submitted!
  - b. CHA 2019 Update and Next Steps
  - c. Completed QI projects MARCS and Internal Emergency Training
  - d. Admin Policy Review Schedule and Major Events Calendar
- 7. Review Act on minutes for the month of September, 2019
- 8. Review Act on bills September 17, 2019 to October 15, 2019
- 9. Legislation Review
  - a. Opiate Settlement Funding Discussion
  - b. 2019 AOHC Salary Survey
- 10. Quality Improvement
  - a. Customer Service Survey Themes
  - b. Website Review and Updating
  - c. Single Entry Way
- 11. Continuing Education Accreditation Domain Review
- 12. Open Discussion
  - a. Levy March 2019
  - b. RCORP Grant Work Begins
  - c. SIT Position Update
  - d. Sewage Survey 9/25/2019
  - e. Solid Waste Program Survey Late Oct
- 13. Adjourn



## Highland County General Health District

1487 North High St. Suite 400, Hillsboro, OH 45133
Telephone: (937) 393-1941 • Fax: (937) 393-4694 • Email: highcohd@odh.ohio.gov

#### Notice of Violation

9/17/2019

Genevieve Glassburn/Trustee PO Box 511 Hillsboro Ohio 45133

Dear property owners,

On June 6, 2019, I made a visit to your property on 4671 Washburn road, after received a complaint regarding people pulling creek water inside their home for drinking water. After driving up the driveway and seeing a well casing by the creek with a white bucket sitting on top of the casing an inspection was done. The Highland County Health Department has no record of a private water system on the property and county water is not located on the property at this time. This situation, of a well within 25 ft of a creek and no well cap seen during inspection is considered a public health nuisance by the Highland County Health Department and is in violation of Ohio Revised Code and Ohio Administrative Code.

OAC 3701-28-08 (A) "If the department or board of health determines that any private water system, any part thereof, or any appurtenance thereto, is being maintained in such a fashion, has deteriorated to such an extent, has been abandoned, that a safety hazard exists or contaminants might enter ground water or the potable water supply so as to constitute a public health hazard, the department or board of health shall order such work to be performed on the private water system as is deemed necessary to prevent contamination of the ground water or the supply to protect public health or safety."

OAC 3701-28-07 (J) "A water source shall be located according to the following minimum isolation distance requirements: (13) Permanent bodies of water such as streams, lakes, ponds \_\_\_\_\_\_twenty-five feet"

You are required to abate this nuisance by having the unapproved well by the creek sealed and a new private water system installed with a permit. All work done on a private water system must be done by an approved private water system contractor.

I will return to the property on October 15, 2019 to verify your compliance. Failure to comply will result in your case being submitted to the Highland County Board of Health for action at the Health Department at 4:30 pm October 15, 2019. Please contact our office with any questions regarding this matter. Thank you for your anticipated cooperation.

Sincerely,

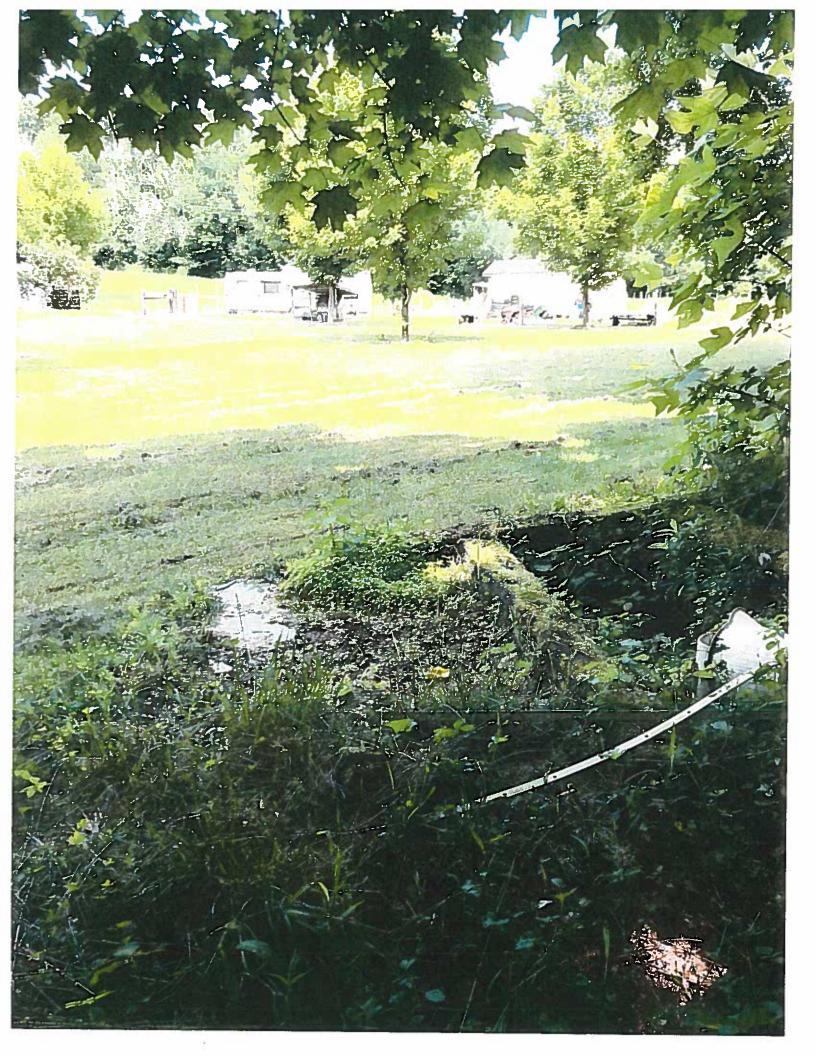
Philip Webb

**Environmental Health Division** 

CC: Lavern Weaver; Dinah and Little Lee Tackett









## Highland County GIS



Notes

| Program   | 2020 Health District Fee | State Fee | Total Fee |
|---|--------------------------|-----------|-----------|
| Food Service Operations or Retail Food Establishments (Resolution 20-1)                       |                          |           |           |
| Micro-Market  | \$132.00                 | \$28 OO   | \$160.00  |
| Commercial Risk Level 1 less than 25, 000 sq. ft.   | \$132.00                 | \$28.00   | \$160.00  |
| Commercial Risk Level 2 less than 25, 000 sq. ft.   | \$152.00                 | \$28.00   | \$180.00  |
| Commercial Risk Level 3 less than 25, 000 sq. ft.   | \$272.00                 | \$28.00   | \$300.00  |
| Commercial Risk Level 4 less than 25, 000 sq. ft.   | \$372.00                 | \$28.00   | \$400.00  |
| Commercial Risk Level 1 greater than 25, 000 sq. ft.  | \$172.00                 | \$28.00   | \$200.00  |
| Commercial Risk Level 2 greater than 25, 000 sq. ft.  | \$197.00                 | \$28.00   | \$225.00  |
| Commercial Risk Level 3 greater than 25, 000 sq. ft.  | \$672.00                 | \$28.00   | \$700.00  |
| Commercial Risk Level 4 greater than 25, 000 sq. ft.  | \$322.00                 | \$28.00   | \$350.00  |
| Non-Commercial Risk Level 1 less than 25, 000 sq. ft.   | \$66.00                  | \$14.00   | \$80.00   |
| Non-Commercial Risk Level 2 less than 25, 000 sq. ft.   | \$76.00                  | \$14.00   | \$90.00   |
| Non-Commercial Risk Level 3 less than 25, 000 sq. ft.   | \$136.00                 | \$14.00   | \$150.00  |
| Non Commercial Risk Level 4 less than 25, 000 sq. ft.   | \$186.00                 | \$14.00   | \$200.00  |
| Non-Commercial Risk Level 1 greater than 25, 000 sq. ft.                                      | \$86.00                  | \$14.00   | \$100.00  |
| Non-Commercial Risk Level 2 greater than 25, 000 sq. ft.                                      | \$98.50                  | \$14.00   | \$112.50  |
| Non-Commercial Risk Level 3 greater than 25, 000 sq. ft.                                      | \$736.00                 | \$14.00   | \$750.00  |
| Non Commercial Risk Level 4 greater than 25, 000 sq. ft.                                      | \$361.00                 | \$14.00   | \$375.00  |
| Mobile Units  |                          |           |           |
| Retail Food Establishment & Food Service Operation Mobiles                                    | \$92.00                  | \$28.00   | \$120.00  |
| Vending Food Service  |                          |           |           |
| Each Operation  | \$10,19                  | \$6.00    | \$16.19   |
| Temporary Food Service Operations or Retail Food Establishments                               |                          |           |           |
| Temporary Commercial FSOs and RFEs (per event)  | \$70.00                  |           | \$70.00   |
| Temporary Non Commercial FSOs and RFEs (per event)  | \$35.00                  |           | \$35.00   |
| Food Service Operation And Retail Food Establishment Plan Reviews                             |                          |           |           |
| R1, R2, R3 & R4 < 2500 sq. ft.  |                          |           | \$125.00  |
| R1, R2, R3, R4 >=2500 sq. ft.   |                          |           | \$250.00  |
| Swimming Pools, Spas, or Special Use Pools (Resolution 20-2)                                  |                          |           |           |
| Individual public swimming pool, spa, or special use pool                                     | \$378.00                 | \$80.00   | \$458.00  |
| Individual public swimming pool, spa, or special use pool (additional at same address)        | \$202.50                 | \$55.00   | \$257.50  |
| Park/Camp (Resolution 20-3)   |                          |           |           |
| Recreational vehicle parks, recreation camps, or combined park- camps with 50 sites or less   | \$245,00                 | \$110.00  | \$355.00  |
| Recreational vehicle parks, recreation camps, or combined parks-camps with more than 50 sites | \$245.00                 | \$110.00  | \$355.00  |
|   |                          |           |           |

| More than 50 sites, per site charge   |  | \$2.50  |                 |
|---|--|---|-----------------|
| Temporary Recreational vehicle parks recreation camps or                                |  | 00.29   |                 |
| combined park-camps with 50 sites or less   |  |   | \$75.00         |
| Temporary Recreational vehicle parks, recreation cames, or                              |  |   |                 |
| combined parks comer with more than 50 city.  |  |   | \$75.00         |
| Compared parts can be written of sines  |  |   |                 |
| l emporary more than 50 sites, per site charge  |  | \$0.50  |                 |
| Resident Camps  |  |   |                 |
| Resident, Day and Primitive Camp  |  |   | \$160.00        |
| Tattooing, Body Piercing, or Combined Body Art Service Establishments (Resolution 20-4) | THE REAL PROPERTY AND ADDRESS OF THE PARTY AND |   |                 |
| Tattooing, body piercing, or combined body art service establishments                   |  |   | \$110.00        |
| Time-limited, tattooing, body piercing, or combined body art service establishments     |  |   | \$110.00        |
| Private Water (Resolution 20-5)   |  |   | 00.0110         |
| Single New Private Water System Permit (up to 3 water samples)                          | \$240.00 + cost of 1 sample  | \$74 00 \$18 00 \$2 00                        | ¢350 00         |
| 2nd PWS at same address (up to 3 water samples)   |  | 574.00.518.00.52.00                           | \$94.00         |
| Single PWS Alteration (up to 3 water samples)   | \$51.00  | \$74.00,\$18.00,\$2.00                        | \$145.00        |
| Non Single New PWS (up to 2 water samples)  | \$240.00 + cost of 1 sample  | \$74.00.\$18.00.\$2.00                        | \$359.00        |
| Non Single 2nd well at same address (up to 3 water samples)                             |  | \$74.00,\$18.00,\$2.00                        | \$94.00         |
| Non Single Alteration PWS (up to 3 water samples)                                       | \$51.00  | \$74.00,\$18.00.\$2.00                        | \$145.00        |
| Sealing Permit  | \$75.00  |   | \$75.00         |
| Test Well   | \$220.00   | \$74.00.\$18.00.\$2.00                        | \$314.00        |
| Pond-Single Family  | \$220.00   | \$74.00,\$18.00,\$2.00                        | \$314.00        |
| Single Conversion PWS   | \$220.00   | \$74.00,\$18.00,\$2.00                        | \$314.00        |
| Non Single Conversion PWS   | \$220.00   | \$74.00.\$18.00.\$2.00                        | \$314.00        |
| Potable Water Hauler Registration   | \$50.00  | \$0.00  | \$50.00         |
| Potable Water Hauler Registration additional truck, same owner)                         | \$50.00  | \$0.00  | \$50.00         |
| Water Hauler Vehicle Inspection   | \$0.00   | \$0.00  | \$0.00          |
| Inspection of PWS (No Sample)   | \$41.00  | \$0.00  | \$41.00         |
| Issuance of Variance  | \$0.00   | \$0.00  | \$0.00          |
| Filing & processing water sample results  | \$0.00   | \$0.00  | \$0.00          |
| Water Sample analysis for all programs  | \$30.00+Lab Fee+Pickup Fee   |   |                 |
| Bacterial water sample analysis with regular inspection (QT)                            | \$30.00+Lab Fee+Pickup Fee   |   | \$63.75         |
| Bacterial water sample analysis drop off at office (QT)                                 | Lab Fee+Pickup Fee   |   | \$33.75         |
| Sewage (Resolution 20-6)  |  |   |                 |
| Application for Site Review (HSTS, SFOSTS, & GWRS) per lot                              | \$200.00   | \$0.00  | \$200.00        |
| Application for Soil Evaluation   | Health Dep   | Health Department does not offer this service | his service     |
| Application for Variance  | \$0.00   | \$0.00  | \$0.00          |
| Application for Design of HSTS, SFOSTS, &GWRS   | \$0.00   | \$0.00  | \$0.00          |
| Review of Subdivision or lots   | \$0.00   | \$0.00  | \$0.00          |
| Sewage Permit HSTS, SFOSTS, & GWRS (includes initial O&M Permits                        | \$376.00   | \$74.00                                       | \$450.00        |
|   |  |   | A 1 - 2 A 1 - A |

| Sewage Alteration Permit HSTS, SFOSTS & GWRS (includes initial O&M Permit)       | \$188.00     | ¢35,00   | 4222 00       |
|--|--------------|--|---------------|
| Operation & Maintenance Beamit with install                                      |              | on:cot   | 00.6226       |
| operation & Maintenance Fernal With Inspection                                   | \$50.00      | \$0.00   | \$50.00       |
| Operation & Maintenance Reinspection   | 00.00        | 00.00  | 20.000        |
| O TOTAL  |              | 00.0¢  | 20.00         |
| Operation & Waintenance Permit (Inspection done by outside service provider)     | \$0.00       | \$0.00   | \$0.00        |
| Abandonment of HSTS, SFOSTS, GWRS  | 00 00        | 2000   | 00.00         |
|  | 00:00        | 00.05  | \$0.00<br>\$  |
| collection and examination of effulent samples                                   | \$30.00 + 60 | \$30.00 + current lab nicking fee + cost of sample | oct of cample |
| Installor Desistration   |              | To a soliday and and a solid                       | or or sample  |
| maraner neglatiation   | \$23.00      | \$0.00   | ¢23.00        |
| Sentage Hailer   |              | 00000  | 723.00        |
|  | 523.00       | \$0.00   | \$23.00       |
| Vehicle Permit for Septage Hauler  | 0000         | 0000   | 00.030        |
|  | 00.0¢        | \$0.00   | \$0.00        |
| Service Provider   | \$23.00      | \$0.00   | \$23.00       |
| Site review, evaluation, and approval/disapproval of land application of septage | 00.05        | 00 03  | 20.525        |
|  | 20.00        | 20.00  | 20.00         |

### HCHD ENVIRONMENTAL HEALTH DIVISION ACTIVITY REPORT

Name: COMBINED MONTHLY STATS

Month: SEPTEMBER Year: 2019

|             |                                   |                     | SE                            | WAGE P              | ROGRAM    |                        |  |                               |  |  |  |
|-------------|-----------------------------------|---------------------|-------------------------------|---------------------|-----------|------------------------|--|-------------------------------|--|--|--|
| 199         | Sewage Consi                      |                     |                               |                     | 23 YTD    | 0                      | Installer Reg                                    | zistration                    |  |  |  |
| 1           |                                   |                     | NPCLF Grants Closed 12 YTE    |                     | 12 YTD    | 0                      |  |                               |  |  |  |
| 1           | Lot Splits/Mir                    | or Sub: Appr        | roved                         |                     | 8 YTD     |                        | Service Prov                                     |                               |  |  |  |
|             | Lot Splits/Minor Sub: Disapproved |                     |                               |                     |           |                        |  | service (Tovice) Registration |  |  |  |
| TOWNSHIP    | STSOM                             | Site Eval.<br>Insp. | Final and<br>12 Month<br>Insp | Completed<br>Finals | Site Eval | Installation<br>Permit | Replacemen<br>t Permit                           | Alteration<br>Permit          | STS<br>Per<br>Issi                               |  |  |
|             | OM                                | P. val.             | and<br>onth                   | leted<br>als        | Eval      | lation                 | cemer  | ation                         | STSOM<br>Permits<br>Issued                       |  |  |
| Brush Creek |                                   |                     | 2                             |                     |           |                        |  |                               |  |  |  |
| Clay        | 1                                 |                     | 6                             | 2                   |           |                        | 1  |                               | 3  |  |  |
| Concord     | 1                                 | 1                   |                               |                     |           | · .                    |  |                               | 1  |  |  |
| Dodson      |                                   |                     | 1                             |                     |           |                        | 1  |                               |  |  |  |
| Fairfield   | 1                                 | 2                   | 1                             | 2                   | 1         |                        |  |                               | 3  |  |  |
| Hamer       |                                   | 1                   |                               |                     | 1         |                        |  |                               | 1  |  |  |
| Liberty     | 2                                 |                     | 2                             | 2                   |           | 3                      | <del>                                     </del> |                               | 6  |  |  |
| Jackson     |                                   | 1                   |                               | 1                   | 1         |                        |  |                               | 1  |  |  |
| Madison     |                                   |                     | 3                             | 1                   |           |                        |  |                               | 1  |  |  |
| . Marshall  |                                   |                     | 3                             | 2 .                 |           |                        |  |                               | 2  |  |  |
| New Market  | 1                                 |                     |                               |                     |           |                        |  |                               | <del>                                     </del> |  |  |
| Paint       |                                   | 1                   | 2                             | 2                   |           |                        | 1  |                               | . 2  |  |  |
| Penn        |                                   |                     | 2                             |                     |           |                        |  |                               | -  |  |  |
| Salem       |                                   |                     | 1                             | 1                   |           |                        |  |                               | 1  |  |  |
| Union       |                                   |                     |                               |                     |           |                        | 1  |                               | 1  |  |  |
| Washington  |                                   |                     | 3                             | 1                   |           | 1                      |  |                               | 1  |  |  |
| White Oak   |                                   |                     | 1                             | 1                   |           | 1                      |  |                               | 2  |  |  |
| TOTALS      | 6                                 | 6                   | 27                            | 15                  | 3         | 5                      | 4  | 0                             | 25   |  |  |

| <u> </u>       |              | PRIV           | ATE WAT                     | ER SYST | 'EM (PWS)               | PROGI | RAM          |         |                  |
|----------------|--------------|----------------|-----------------------------|---------|-------------------------|-------|--------------|---------|------------------|
|                | PWS<br>(new) | PWS<br>(Other) | Public<br>Water<br>Supplies | Totals  | <u>Water</u><br>Samples | MMO-  | QT:          | OTHER:  | Total<br>Samples |
| Inspections    |              | 1              |                             | 1       | # Taken                 | 7     | 10           | 2       | 19               |
| Consultations  | 19           | 20             | 2                           | 41      | # Safe                  | 2     | 5            | n/a     | n/a              |
| Approved       |              | n/a            | n/a                         |         | # Unsafe                | 5     | 5            | n/a     | n/a              |
| Disapproved    | 1            | n/a            | n/a                         | 1       |                         |       | Water        | Haulers |                  |
| New Permits    | 9            |                | n/a                         | 9       | 1 [                     | 0     | Registration | s       | 3 YTD            |
| Alt. Permits   | 1            |                | n/a                         | 1       | 1 [                     | 0     | Truck Inspec | tions   |                  |
| ealing Permits | 1            |                | n/a                         | 1       |                         | 0     | Consultation | ns      |                  |

|                         |             | F           | FOOD PRO          | OGRAM                 | ·                | -                  |                | ·     |
|-------------------------|-------------|-------------|-------------------|-----------------------|------------------|--------------------|----------------|-------|
| Licenses                | FSO Risk I- | RFE Risk I- | Vending           | Temporary<br>FSO      | Temporary<br>RFE | Mobile FSO         | Mobile RFE     |       |
|                         | 1           |             |                   | 2                     |                  | 1                  |                |       |
| Non-Commercial          |             |             |                   | n/a                   | 5                |                    | n/a            | n/a   |
|                         | Risk        | Vending     | Micro-<br>Markets | Temporary<br>FSO/RFEs | Mobiles          | NonHC -<br>Mobiles | Summer<br>Feed | Total |
| Plan Review Received    | 2           | 1           | 4                 |                       | 1                | n/a                | n/a            | 8     |
| Inspections (All types) | 5           |             |                   | 17                    | 11               | 24                 |                | 68    |
| Consultations           | 203         | 14          | 8                 | 13                    | 43               | 7                  |                | 288   |
| oodborne Outbreaks      |             |             |                   |                       |                  | -                  |                |       |
| Reported                |             |             |                   |                       |                  |                    |                |       |
| Consultations           |             | <u> </u>    |                   |                       |                  |                    |                |       |

|       |  | Body Art | Campgrounds       | Jails  | Resident<br>Camps | School<br>Program | Solid Waste<br>Program | Swimming<br>Pools | Requested |
|-------|--|----------|-------------------|--|-------------------|-------------------|------------------------|-------------------|-----------|
|       | icenses/Approvals  | 1        |                   | n/a  |                   | n/a               |                        |                   | n/a       |
| Tempo | rary/Time-Limited  |          | 2                 | n/a  | n/a               | n/a               | n/a                    | n/a               | n/a       |
|       | Inspections  | 1 -      | 3                 |  | n/a               |                   | 9                      |                   |           |
|       | Consultations  | 11       | 19                | 2  | 7                 |                   |                        | 10                |           |
|       | Plan Review  | 1        | 1                 | n/a  | ,                 | n/a               | n/a                    | n/a               | n/a       |
| Spec  | ialty Consultat  | ions     |                   | Animal Bit   |                   |                   | Nuisance.              | 5                 | ]         |
|       |  |          | 7                 | #r Reported  | - Dogs            | 5                 | Reported               |                   | 1         |
| 2     | Bed Bugs   |          |                   |  | 0-                |                   |                        |                   |           |
| 2     | Carbon Monoxi  | de       | 1                 | # Reported   |                   | 2                 | Abated                 |                   | 1         |
| 2     | Carbon Monoxi<br>Formaldehy                                | de       | 1 4               | # Reported<br>Investigation                        | Others<br>ns      | 2<br>27           | Abated<br>Consultaitor | ns                |           |
| 2     | Carbon Monoxi<br>Formaldehy<br>Lead in Water               | de       | 1                 | # Reported   | Others<br>ns      |                   |                        | ns                |           |
| 1     | Carbon Monoxi<br>Formaldehy                                | de       | 1 4               | # Reported<br>Investigation<br>Consultation        | Others<br>ns      | 27                | Consultaito            | ns                |           |
|       | Carbon Monoxi<br>Formaldehy<br>Lead in Water               | de       | 1<br>4<br>20      | # Reported<br>Investigation<br>Consultation        | Others<br>ns      | 27                | Consultaito            | ns                |           |
|       | Carbon Monoxi<br>Formaldehy<br>Lead in Water<br>Lead Paint | de       | 1<br>4<br>20<br>2 | # Reported Investigation Consultation Heads to Lab | Others<br>ns      | 27                | Consultaito            | ns                |           |
| 1     | Carbon Monoxi Formaldehy Lead in Water Lead Paint MHP      | de       | 1<br>4<br>20<br>2 | # Reported Investigation Consultation Heads to Lab | Others<br>ns      | 27                | Consultaito            | ns                |           |

| DATE                  | ENVIRONMENTAL STAFF MEETINGS AND TRAININGS     |
|-----------------------|--|
| 8/30; 9/1,2,3,4,5,6,8 | EH Staffed Fair Booth                          |
| 8/31; 9/1,3,4,5,6,    | Anna & Phil Fair Inspections - ~30 Food Booths |
| 9/10,17               | Sewage Committee                               |
| 9/17/2019             | BOH meeting                                    |
| 9/19/2019             | ODA/ODH Conf. Call                             |
| 9/24/25,2019          | Sewage Program Survey                          |
| 9/26/2019             | EH Staff Meeting                               |

# **Highland County General Health District**

## **Public Health Nursing Report** September 2019

| Δ. | OFFICE                  |     |
|----|-------------------------|-----|
| м. |                         |     |
|    | Office Visitis          | 203 |
|    | Phone Calls             | 176 |
|    | Pregnancy Tests         | 0   |
|    | Lead Tests              | 0   |
|    | Children Services Exams | 2   |
|    | Newborn Screenings      | 0   |
|    | Lice Checks             | 7   |
|    | PPD Skin Tests          | 14  |
|    | PHN Visits              | 0   |
|    | Tick Collections        | 0   |
| В. | CARE-A-VAN (CAV)        |     |
|    | CAV Visits              | 27  |
|    | Blood Glucoses          | 0   |
|    | Blood Pressures         | 0   |
|    | Lab Draws               | 1   |
|    | Child Immunizations     | 7   |
|    | Adult Immunizations     | 4   |
| C. | IMMUNIZATIONS           |     |
|    | Child Immunizations     | 194 |
|    | Adult Immunizations     | 85  |
|    | Adult Influenza         | 28  |
|    | Adult Pneumonia         | 4   |
|    |                         |     |

#### D. **SPECIALITY CLINICS**

Senior Citizens BP

#### Walk-In Clinics

| Fair week, no clinic |
|----------------------|
|                      |
| 16                   |
| 30                   |
|                      |
| 11                   |
| 20                   |
|                      |
| 24                   |
| 49                   |
|                      |
| no 5th Wednesday     |
|                      |

Total Imm.

Eye Clinic

Total Seen

No Eye Clinic

New

Recheck

### E. LABORATORY SERVICES

| Test            | Number of Tests | HDH I  | Lab  | Tot | al HDH | H Patient |        | HD | Receive | Notes |
|-----------------|-----------------|--------|------|-----|--------|-----------|--------|----|---------|-------|
|                 |                 | Charge |      | Lab |        | Fee       |        |    |         |       |
|                 |                 | per T  | est  | C   | harge  |           |        |    |         |       |
| Comprehensive   | 1               | \$ 10  | ).79 | \$  | 10.79  | \$        | 35.00  | \$ | 35.00   |       |
| Metabloic Panel |                 |        |      |     |        |           |        |    |         |       |
| Hemoglobin A1C  | 1               | \$ 10  | ).79 | \$  | 10.79  | \$        | 25.00  | \$ | 25.00   |       |
| Lipid           | 3               | \$ 14  | 08.  | \$  | 44.40  | \$        | 30.00  | \$ | 90.00   |       |
| Varicella Titer | 1               | \$ 14  | .31  | \$  | 14.31  | \$        | 90.00  | \$ | 90.00   |       |
| Totals          | 6               | \$ 50  | .69  | \$  | 80.29  | \$        | 180.00 | \$ | 240.00  |       |

### F. COMMUNICABLE DISEASE

| Disease               | Total Cases |
|-----------------------|-------------|
| Campylobacteriosis    | 1           |
| Chlamydia             | 4           |
| Cryptospoidiosis      | 1           |
| Gonococcal            | 0           |
| Hepatitis A           | 2           |
| Hepatitis B-new       | 2           |
| Hepatitis B-Recheck   | 2           |
| Hepatitis C-NEW       | 3           |
| Hepatitis C-RECHECK   | 26          |
| Legionellosis         | 0           |
| Pneumonia             | U           |
| Lyme Disease          | 1           |
| Pertussis             | 0           |
| RMSF                  | 0           |
| Streptococcal Group A | 0           |
| Streptococcal Group B | 0           |
| Tuberculosis          | 0           |
| Varicella             | 0           |
| Shigatoxin            | 0           |
| Strep Pneumonia       | 0           |
| CP CRE                | 1           |

#### G. BCMH

| Home Visits            | 1 |
|------------------------|---|
| Community Based Visits | 0 |
| Office Visits          | 1 |

PHN Referrals 0
Active Cases 128
Billed to Date \$ 4,970.00

F. SUMMARY

#### **MINUTES**

# BOARD OF HEALTH MEETING HIGHLAND COUNTY, OHIO

Tuesday, September 17, 2019

The Highland County General Health District Board of Health held its September, 2019 meeting on September 17, with the following members present:

Mr. John Holt Mr. Rob McCray Mr. Craig Edgington Absent: John Griffith Dr. Julie Karnes

#### 1. Call to Order

The meeting was called to order by Mr. Holt at 4:45PM.

#### 2. Roll Call

The following individuals were present at the meeting:

Mr. John Holt
Mr. Rob McCray
Mr. Craig Edgington
Anna McCoppin, Director of Environmental Health
Bonnie Rusch, Director of Nursing
Connie Page, Fiscal Officer

#### 3. Rumbaugh Variance-

Ms. McCoppin described the dimensions of the 4<sup>th</sup> bedroom of the Rumbaugh house as a 5'x7' room. Dropping to a 3 bedroom house would decrease the overall size of the septic system and would allow the entire septic system in the yard, instead of going into the agricultural field, with some other provisions. Variance was granted with a motion from Mr. Holt, seconded by Mr. Edgington, and passed unanimously.

- 4. EH 2020 Fee Schedule-EH fee schedule passed with the goal of no profit or loss from services. Motion moved to adopt fee schedule by Mr. Edgington, second by Mr. McCray, and passed unanimously.
- 5. Nursing Fee Schedule-Lab fee changes were presented by Rusch and reviewed and approved by the board.
- 6. PHAB updates
  - Ms. Rusch updated the Board of progress on accreditation. Documentation has been uploaded as of 9/6/19. Completeness review, document review, and site visit are next steps.

- Ms. Rusch updated the board that our goal of almost 600 surveys have been completed. Next steps are to conduct planning meetings with community partners to discus and refine survey results and then develop a full 2019 CHA report for the county. After the completion of the CHA report, a CHIP will begin.
- Ms. Page updated the board of QI projects- MARCS and internal Emergency training completed during staff in-service on 8/15/2019. Trainings included stob the bleed, active shooter, fire extinguisher, emergency preparedness, MARCs radios, and other topics. Next QI projects planned are single entrance doorway and website review and updating.
- Ms. Page updated the board of admin policy review schedule and major events calendar. A calendar will be placed in the fiscal officer's office to help avoid missing deadlines for various projects.
- 7. Review of Minutes for August 2019. Mr. McCray moved the motion to approve minutes, seconded by Mr. Edgington, passed unanimously.
- 8. Bills from August 2019 presented by Ms. Page. Mr. McCray moved to approve bills, seconded by Mr. Edgington, passed unanimously.
- 9. Ms. McCoppin reviewed the following legislation with the BOH.
  - SIT/RS Rule Review
    - Additional science categories should be added to the approved list in order to increase the number of eligible applicants available for SIT/RS status.
    - ii. Tobacco 21 Enforcement-currently in effect in the state, the state is working on additional rules for enforcement which is unclear at this time.
    - iii. 2019 AOHS salary survey-Mr. Warner is working with a subcommittee of AOHC to complete a 2019 salary survey of local health departments across the state. Survey results will be used to compare Highland pay rates with other agencies of our size in the state. This is an important part of staff retention efforts.
- 10. Ms. Page reviewed the record retention policy. Current chart in policy describes retention policy of different retention times for all types of records. Board approved
- 11. Open Discussion
  - Ms. Page presented that the levy will be on the ballet in March 2020.
  - Ms. McCoppin updated the board on the SIT postion.
  - Ms. McCoppin updated the board that a sewer survey will take place soon.

12. Adjourn

Dr. McCray made a motion to adjourn the meeting. Mr. Edgington seconded the motion. Motion carried unanimously. Meeting was adjourned at 7:30 PM.

John Holt

President, Board of Health

Jareg/Warner, MEM, RS

Health Commissioner

Secretary, Board of Health

#### Prepared by: Connie Page

| Estimated Health Salary Cos  | ts for October | Actual Health Salary Costs for September |             |  |
|------------------------------|----------------|--|-------------|--|
| Item                         | Cost           | Cost Item                                |             |  |
| Salaries                     | \$39,843.14    | Salaries                                 | \$39,843.14 |  |
| PERS - Employer Pickup       | \$707.72       | PERS - Employer Pickup                   | \$707.72    |  |
| PERS - Monthly Contributions | \$5,578.04     | PERS - Monthly Contributions             | \$5,578.04  |  |
| Medicare                     | \$535.61       | Medicare                                 | \$535.61    |  |
| Medical Mutual               | \$11,090.40    | Medical Mutual                           | \$11,090.40 |  |
| Total Estimated              | \$57,754.91    | Total                                    | \$57,754.91 |  |

| Health Expenses to be Paid         |               |   |     |           |  |
|------------------------------------|---------------|---|-----|-----------|--|
| Payee                              | Cat. Number   | Item                                    | Cos | t         |  |
| SOS                                | E2            | Office Supplies                         | \$  | 212.53    |  |
| GSK                                | E2            | Vaccine                                 | \$  | 7,952.76  |  |
| Sanofi Pasteur Inc                 | E2            | Vaccines                                | \$  | 2,026.21  |  |
| McKesson                           | E2            | Nursing Supplies                        | \$  | 444.28    |  |
| Vericor                            | E3            | Coolers for Nursing (grant money)       | \$  | 2,994.33  |  |
| Time Warner Cable/Spectrum         | E5            | Internet                                | \$  | 109.99    |  |
| ComDoc                             | E5            | Maintence & Usage fees                  | \$  | 294.16    |  |
| Keith Faber, Auditor of State      | E5            | IPA Quality Review                      | \$  | 143.50    |  |
| Xerox                              | E5            | Lease payment                           | \$  | 214.29    |  |
| AT&T                               | E5            | Caravan Hot Spot                        | \$  | 57.23     |  |
| Environmental Control              | E5            | October cleaning services               | \$  | 225.00    |  |
| HCFR Inspections, LLC              | E5            | Plumbing Permit Remits                  | \$  | 900.00    |  |
| Highland District Hospital         | E5            | Lab Testing                             | \$  | 81.24     |  |
| Charter Communications/Spectrum    | E5            | Phone Service                           | \$  | 357.68    |  |
| Thomas Ritter, OD, Inc             | E5            | Vision Clinic                           | \$  | 500.00    |  |
| North High Business Center         | E5            | 3rd and 4th quarter condo fees          | \$  | 18,179.00 |  |
| Masi Environmental                 | E5            | Water sampling                          | \$  | 274.87    |  |
| Philip Webb                        | E7            | September Mileage                       | \$  | 223.08    |  |
| Chris Shope                        | E7            | September Mileage                       | \$  | 297.44    |  |
| Brittane Dance                     | E7            | September Mileage                       | \$  | 301.60    |  |
| Anna McCoppin                      | E7            | September Mileage                       | \$  | 97.76     |  |
| Jared Warner                       | E7            | July - Sept Mileage                     | \$  | 349.44    |  |
| Jared Warner                       | E7            | Reimbursement for Lodging               | \$  | 495.14    |  |
| Cameco Communication               | E9            | Env. Fee Public Notice                  | \$  | 47.50     |  |
| Treasurer, State of Ohio           | E17           | Sewage Remits                           | \$  | 666.00    |  |
| Ohio Treasurer of State            | E17           | Annual Driving Record Check             | \$  | 55.00     |  |
| Ohio Division of Real Estate & PL  | E17           | Burial Permits                          | \$  | 12.50     |  |
| Treasurer, State of Ohio           | E17           | Vital Stats Quarterly Fee (873 BC & DC) | \$  | 11,663.28 |  |
| Total General Health Expenses from | 09/18/19-10/1 | 5/19                                    | \$  | 49,175.81 |  |

| Category                      | Cat. Number         | penses to be Paid  Item | Cost     |        |
|-------------------------------|---------------------|-------------------------|----------|--------|
| Salaries                      | G1                  | Employee Salaries       |          |        |
| PERS                          | G1                  | Monthly Contributions   |          |        |
| Medicare                      | G1                  | Employer Medicare       |          |        |
| Workers Comp                  | G11                 | Workers Comp            | <u> </u> |        |
| Treasurer, State of Ohio      | G2                  | FSO Remits              | \$       | 56.00  |
| Treasurer, State of Ohio      | G2                  | RFE Remits              |          |        |
| Chris Shope                   | G3                  | September Mileage       | \$       | 7.80   |
| Philip Webb                   | G3                  | September Mileage       | \$       | 36.40  |
| Anna McCoppin                 | G3                  | September Mileage       | \$       | 48.88  |
| Total Restaurant Expenses fro | m 09/18/19- 10/15/1 | 9                       | \$       | 149.08 |

| Full amount | Discount   |                 |
|-------------|------------|-----------------|
| \$8,107.97  | -\$<br>-\$ | 155.21<br>20.27 |

Private Water Expenses to be Paid

| Category                       | Filvate water E     | xpenses to be Paid                   |      |        |
|--------------------------------|---------------------|--------------------------------------|------|--------|
| Salaries                       | Cat. Number         | Item                                 | C4   |        |
|                                | S78                 | Employee Salaries                    | Cost |        |
| Treasurer, State of Ohio       | 581                 | Private Weep D                       | \$   |        |
| Treasurer, State of Ohio       |                     | Private Water Permit Remit Fees(ODH) | \$   | 666.00 |
| Masi Labs                      | S83                 | Private Water Permit Remit Fee(ODNR  | \$   | 171.00 |
| Workers Comp                   | 363                 | Water Sample Testing                 | Ś    | 102.67 |
| Philip Webb                    | <u>\$86</u>         | Workers Comp                         |      | 101.07 |
| Karl Devin                     | \$87                | September Mileage                    |      |        |
|                                | ICR7                | D : 1                                | _    |        |
| Total Private Water Expenses f | rom 09/18/19- 10/15 | /10                                  | \$   | 53.02  |
|                                |                     | <u> </u>                             | \$   | 992.69 |

| Cabaaaaa  | Swimming Poo  | Expenses to be Paid   |         |       |
|---|---|---|---------|-------|
| Category  | Cat. Number   | Item  | 10      |       |
| Salaries  | E01   | Employee Salaries   | Cost    |       |
| PERS  | £10   | Monthly Contributions   |         |       |
| Medicare  | E08   | Employer Medicare   |         |       |
| Workers Comp  | E11   | Workers Comp  |         |       |
| Anna McCoppin   | E07   |   |         |       |
| Philip Webb   | E07   | September Mileage   | \$      | :     |
| reasurer, State of Ohio   |   | September Mileage   |         |       |
| otal Swimming Pool Expense  | ptal Swimming Pool Expenses from 09/18/19- 10/15/19 |   | \$      | -     |
|   |   |   |         |       |
|   | s from 09/18/19- 10/:                               | 15/19   | \$      |       |
|   |   |   |         |       |
| ategory   |   | enses to be Paid  | \$      |       |
| ategory   | RV Park Exp   | enses to be Paid<br>Item  |         |       |
| ategory<br>alaries<br>ERS   | RV Park Exp   | enses to be Paid<br>Item<br>Employee Salaries   | \$      |       |
| ategory<br>alaries<br>ERS<br>Medicare   | RV Park Exp   | enses to be Paid<br>Item<br>Employee Salaries<br>Monthly Contributions  | \$      |       |
| Category  alaries  ERS  Medicare  reasurer, State of Ohio   | RV Park Expo  | enses to be Paid Item Employee Salaries Monthly Contributions Employer Medicare   | \$      |       |
| Category  alaries  ERS  Medicare  reasurer, State of Ohio   | RV Park Expo<br>Cat. Number                         | enses to be Paid Item Employee Salaries Monthly Contributions Employer Medicare Campground remits                                       | \$      | 3*2   |
| lategory alaries ERS ledicare reasurer, State of Ohio /orkers Comp  | RV Park Exp<br>Cat. Number                          | enses to be Paid Item Employee Salaries Monthly Contributions Employer Medicare Campground remits Workers Comp                          | \$ Cost | 140   |
| lategory alaries ERS Medicare reasurer, State of Ohio Vorkers Comp millip Webb  | RV Park Expr<br>Cat. Number<br>E2<br>E1<br>E03      | enses to be Paid  Item  Employee Salaries  Monthly Contributions  Employer Medicare  Campground remits  Workers Comp  September Mileage | \$ Cost | 100   |
| Category alaries ERS Medicare reasurer, State of Ohio Vorkers Comp hillip Webb nna McCoppin otal RV Park Expenses from 09 | RV Park Expo<br>Cat. Number<br>E2<br>E1<br>E03      | enses to be Paid Item Employee Salaries Monthly Contributions Employer Medicare Campground remits Workers Comp                          | \$ Cost | 15.60 |

| Fund                   | 9/1/2019     | Sont Basines   |                |              |
|------------------------|--------------|----------------|----------------|--------------|
| General Health Fund    |              | Sept. Reciepts | Sept. Expenses | 9/30/2019    |
| R/V Trailer Parks Fund | \$284,951.84 | \$278,880.23   | \$109,995.52   | \$453,836.55 |
|                        | \$11,095.24  |                | \$213.31       |              |
| Swimming Pool Fund     | \$4,723.09   |                | \$213.31       | \$10,881.93  |
| Restaurant Fund        | \$41,011.38  | A              |                | \$4,723.09   |
| Private Water Funds    |              | \$1,648.00     | \$1,762.42     | \$40,896.96  |
|                        | \$10,235.46  | \$1,101.88     | \$622.70       |              |
| Capital Improvements   | \$61,619.86  |                | 7022.70        | \$10,714.64  |
| Totals                 | \$413,636.87 | C204 C00 +++   |                | \$61,619.86  |
|                        | 7413,038.87  | \$281,630.11   | \$112,593.95   | \$582,673.03 |
|                        |              |                |                |              |