

MINUTES

Board of Health Meeting

March 23, 2009

Present: Dr. Robert Ailleo; Dr. Marilyn Ross Cahn; Dr. Michael Franco;
Dr. Naomi Tamerin; Caroline C. Baisley, Director

Absent: Dr. Peter Arturi; Robert Carangelo, Esq.; Dorian Fabio

Guests: Gerald Isaacson, Chair, RTM Health and Human Services Committee, Daniel Warzoha,
Emergency Management Director

Staff: Ann Augustine; Doug Serafin

Dr. Ailleo, Acting Chairman, called the meeting to order at 6:35 PM and thanked Dr. Ross Cahn for representing the Board in support of the Public Health Emergency Preparedness Coordinator position at the BET Public Hearing on the 2009-2010 Budget.

MINUTES

The minutes of the February 24, 2009 meeting were approved unanimously.
(Motion: Franco / Second: Tamerin /Vote: Unanimous – 4 in favor - 0 opposed

LOCAL EMERGENCY MANAGEMENT PLANNING

Dan Warzoha, Emergency Management Director for the Town, reported that he is currently working on three major initiatives and reminded the Board that he does not report to the Board of Health. His presence quarterly is for information only.

- 1. Universal Sheltering:** The American Red Cross is the major agency to manage shelters. There is a plan to address animal shelters in the State through a regional effort. It is anticipated that the animal shelter will be located next to the human shelter. The livestock issue during an emergency is challenging since there are approximately 350 horses in Greenwich. Mr. Warzoha pointed out that since Eastern Middle School, which has been designated as the Town's human shelter, is under construction Western Greenwich Civic Center has been temporarily earmarked as a shelter. An animal shelter will be placed outside in the blacktop area.
- 2. Access to a Single Shelter:** The State of Connecticut dictates that disabled residents cannot be segregated from the general population in shelters. Shelters must have universal access to every resident.
- 3. Debris Management:** Debris management is a big problem, especially when there is extensive wind damage and trees must be cleared and removed from roads and town properties.
Mr. Warzoha stated that the 2005 Emergency Operations Plan contains annual updates and

will be completely revamped by August 2009 using an all hazards approach to deal with possible emergencies/disasters. A communication plan includes 700 MHz radios to provide each agency with a link to communicate with each other during an emergency. Discussion ensued about who would be in charge during an emergency, level of training and available funding for emergency planning. Dr. Ailleo thanked Mr. Warzoha for his report.

TICK TESTING PROGRAM RESULTS

Mr. Serafin reported on the tick testing project, which was conducted in 2008 and noted that the goal of the project was to describe the relative risk of acquiring any potential infection from a tick bite in Greenwich. Greenwich residents providing ticks had a choice, either to send specimens to Medical Diagnostic Laboratories (MDL) in New Jersey, for which they would have to wait several weeks for results, or to have their ticks tested in house only for the *borrelia* organism. MDL had previously performed tick studies and wanted to pursue the potential for infection from tick bites in Greenwich so they were very agreeable to the study. The testing was grant-funded and free to Greenwich residents if they chose to participate. Ticks sent to MDL were tested for the following pathogens:

- * *Borrelia burgdorferi*
- * *Babesia microti*
- * *Anaplasma phagocytophilum*
- * *Ehrlichia cahffeninsis*
- * *Bartonella henslae*

Several published studies on the prevalence of tick-borne diseases were reviewed for comparison once results were tabulated. Unfortunately, the studies were difficult to compare because there is no standardized way of doing the tests due to differences in:

- * Tick collection method
- * Sample size
- * Specimen preparation
- * DNA extraction
- * Selection of primers

Of the 115 Greenwich ticks tested by MDL, 30% tested positive for *borrelia* infection (Lyme disease) as compared to 557 ticks tested in the Laboratory, which resulted in 21% positive for *borrelia*. The study revealed that Lyme disease infection is most prevalent, followed by *Babesia* and there is a significant chance of co-infection. In the end, the study provided another tool for clinicians to use when trying to diagnose a tick-borne disease. Brief discussion ensued and Dr. Ailleo thanked Mr. Serafin for an interesting report.

DAYCARE ORDINANCE

Ms. Baisley reported that as of October 1, 2008, legislation changed the term of child daycare license renewal from two to four years. Local health departments are encouraged, but not required to conduct inspections every two years. Extending this commitment to a four-year period without periodic on-site inspections could lead to unmonitored health and safety violations and unsafe

practices. Child care programs should be inspected a minimum of every two years to ensure health and safety standards. The Department recommends that the Board of Health enact a local ordinance to ensure that child day care programs are licensed according to local requirements and the Greenwich Public Health Code. Brief discussion ensued and Dr. Ailleo moved to request the Department to draft a Child Daycare ordinance for review by the Law Department and state regulations.

(Motion: Ailleo/ Second: Ross Cahn / Vote: Unanimous - 4 in favor - 0 opposed)

SECTION 4-60 INSPECTION FEES OF THE GREENWICH MUNICIPAL CODE

Ms. Baisley reported that over the last several years the Town of Greenwich Law Department has been working to update the Greenwich Municipal Code. During this process, all code sections under the Department's jurisdiction have been reviewed and recommendations for change where needed have been made. Although many of the changes were grammatical in nature, the existing Section 4-60 entitled **Inspection Fees**, requires a complete change. In order to allow necessary flexibility, Ms. Baisley requested Board approval to delete the existing language of Section 4-60 and replace it with substitute language as recommended by the Town Law Department: "Inspection fees will be determined each year by the Board of Health or as found necessary. These fees will be available in the Department of Health." Brief discussion ensued and Dr. Ailleo moved to delete the existing language and replace with the recommended language as discussed.

(Motion: Ailleo / Second: Franco / Vote: Unanimous - 4 in favor - 0 opposed)

OTHER BUSINESS

2009-2010 Department of Health Budget: Ms. Baisley reported that the Department's budget reflects a 9% decrease in funding and a decrease in 3.5 staff. Because of the shortfall in staff, only mandated activities will be performed. The Office of Environmental Services will close during the lunch hour in an effort to maximize staff time in the field. Discussion ensued about the lack of health education services now that the Office of Community Health Planning is gone and the Public Health Emergency Preparedness Coordinator's duties that would be discontinued. Board members expressed extreme concern that these activities will not be continued and agreed to discuss the matter further in upcoming meetings.

There being no further regular business, Dr. Ross Cahn moved to adjourn the meeting at 7:55 PM.
(Motion: Ross Cahn / Second: Tamerin / Vote: Unanimous - 3 in favor - 0 opposed
[Dr. Franco left meeting at 7:45 PM])

Respectfully yours,



Marilyn Ross Cahn, MD
Secretary