



# Kanawha-Charleston Board of Health

## Meeting Minutes

September 29, 2011

### **Board Members – Present**

Ms. Brenda Isaac  
Ms. Shannon Snodgrass  
Mr. James Strawn  
Mr. Stephen Weber (via conference call)

### **Board Members - Excused**

Mr. Robert Reishman  
Dr. Arthur Rubin

### **Presenting Guests**

Dr. Rahul Gupta  
Ms. Lolita Kirk  
Ms. Janet Briscoe  
Ms. Krista Farley  
Ms. Susan Jordan  
Ms. Anita Ray

#### **1. Call to Order – President**

Ms. Isaac called the meeting to order at 4:30 p.m.

#### **2. Report of the President – Ms. Isaac**

##### **a. Approval of the minutes from the August 11, 2011 Board of Health Meeting.**

On a motion made by Mr. Strawn and seconded by Mr. Weber, the Board voted unanimously to approve the minutes of the August 11, 2011 Board of Health Meeting.

#### **3. Report of the Health Officer – Dr. Gupta**

##### **a. Introduction of new employees**

Dr. Gupta introduced Ms. Susan Jordan, RN, as the new Clinic Nurse Supervisor. He noted that Ms. Jordan had returned to West Virginia from Pennsylvania and that Ms. Jordan has a long history of public health service both at the state and local level. Ms. Jordan has worked as a sanitarian, nurse and epidemiologist. He added that some of the Board members may remember her from when she was employed at KCHD from 2004 – 2006.

Dr. Gupta also introduced our newest sanitarian, Mr. Jeffrey Rockwell. Dr. Gupta informed the Board that Mr. Rockwell has a background in service industries, including 6 years as a sous chef in Los Angeles. Mr. Rockwell is new to the public health system and is currently enrolled in the sanitarian training class.

##### **b. Update on the Community Transformation Grant**

Dr. Gupta brought the Board up to date regarding the Community Transformation Grant. He went on to say that WVDHHR had applied for 7 million dollars; however the Centers for Disease Control awarded only \$1.8 million. The State is currently in

the planning stages as to what projects from the original application will be undertaken with the funding.

**4. Report of the Administrative Services Director – Ms. Lolita Kirk**

Ms. Kirk informed the Board that since the first quarter of the fiscal year has not closed, there wasn't a financial report in their packets. She added that the financial report will be e-mailed to Board members mid-October.

**a. Discussion of the reduction of funding for the 2011-2012 Public Health Emergency Preparedness Grant**

Ms. Kirk stated that the Board would find, in their packets, information regarding the Health Department's Emergency Preparedness Grant funding. She noted that the grant funding for emergency preparedness ranges in the state's eight regions went from \$2.24 per capita to \$1.06 per capita for Kanawha. Ms. Kirk added, this year the Department's base grant funding has been reduced by 12% and the City Readiness Initiative portion of the grant was reduced by over 15%. Ms. Kirk added that as a result of the over \$44,000 reduction in funding, activities associated with this grant will be reduced accordingly.

**5. Report of the Clinic Nurse Supervisor – Ms. Susan Jordan**

Ms. Jordan stated that she was very glad to be back at Kanawha-Charleston Health Department. She shared that she worked at Kanawha-Charleston Health Department from 2004 – 2006 as an epidemiologist and in threat preparedness. Ms. Jordan informed the Board that she is looking forward to expanding and improving the services provided in the clinic as well as within the community.

Ms. Jordan added that during this time of year, the flu shots are a major activity in the clinic and to date we have held 70 clinics and provided 4,134 flu shots.

Ms. Isaac stated that she appreciated the evening clinics held for school staff to complete their series of Hepatitis shots. Ms. Isaac added that she would like for KCHD to work on a publication to get the word out that for the school year 2012-2013, students in the 7<sup>th</sup> grade and 12<sup>th</sup> grade would be required to get the meningococcal vaccine. She added that most providers are not aware of this change and that hopefully we can better inform providers and the public.

**6. Report of the Director of Environmental Health – Anita Ray**

**a. Discussion of recent events involving the inspection of food service establishments**

Ms. Ray started with the topic of the media attention that their division had been receiving, especially one sanitarian. She went on to say that a number of restaurant owners/managers were unhappy with the way the inspections had been performed and some had contacted the Mayor Jones' office. Ms. Ray pointed out that nothing had changed in the way the sanitarians follow the food code. She informed the Board that she and the sanitarian supervisor (Ms. Gail Sowards) had accompanied the new sanitarian and they found the same violations that had been reported. They agreed with this Sanitarian's findings.

Ms. Ray stated that KCHD sanitarians always want to uphold the code and protect the public. She added that we do not want food borne illnesses. She stated that

the employees of the Environmental Division work very hard with owners and managers to try to correct problems to avoid shutting them down, often they allow these violations to be corrected before they leave the establishment. She stated they have returned as many as three times in the same day to help correct problems, but occasionally, that doesn't change the outcome if the establishment does not correct or cannot correct. . If an establishment has three uncorrected critical violations, they have to be closed. . Ms. Ray noted that when the Capitol Cafeteria was inspected, it had 12 critical violations, however our staff worked with them to get the violations corrected and they were able to remain open.

Ms. Snodgrass stated that she was glad the Health Department followed the code and that she knows the sanitarians have a thankless job. She stated that she thinks it is a combination of two different issues; new sanitarians and the new rotation. Ms. Snodgrass went on to say that this makes it look like the sanitarians before weren't doing their job. She said she gives an A+ for the planned workshop and that the rotation is probably a good thing. She is glad that KCHD is willing to re-educate business owners and managers.

Also, Ms. Snodgrass stated that one of the issues might be the attitude of this particular Sanitarian with the job. The attitude of the sanitarians and how they handle the situations with the restaurant owners might make a difference.

Dr. Gupta further clarified the issues. He stated that one issue clearly seems to be that some of the specific restaurants are just dirty since not one owner or manager has called to disagree with the reported violations. Rather than correcting the violations, some of the owners/managers would want to shoot the messenger and that would not be allowed.

Dr. Gupta added that before now, the Sanitarians had the same territory for decades, often for the duration of their professional careers. Therefore, one of the problems was that the sanitarians never rotated, thus making them very predictable. He stated that the Sanitarians aren't there (at restaurants) to be their buddies or predictable but that they are there to do a job. He stated plans to rotate the Sanitarian areas at least every two years. He stated that right now there are going through growing pains and that the businesses don't like change, but we are changing and it is what it is.

Dr. Gupta further went on to say that if there is an issue of attitude with this Sanitarian or any other particular employee of the health department, he needs to be made aware. His office or the environmental division had received no personnel complaints. He state that agencies such as the City and County commonly deal with personnel issues as an internal issue. Similarly, there are processes available to address personnel issues at KCHD since we follow the same rules that thousands of State personnel must go through in cases of investigating a personnel complaint. However, he stated that we cannot investigate or take action on only conjecture when a complaint that does not exist. He went on to say that if there is such an issue, it will be given the appropriate attention, however, personnel problems should be allowed to be handled as personnel problems.

Ms. Ray stated that she feels it is important to note that none of the establishments were instantly closed. Some were visited as many as three times before they were

shut down. Again, she wanted to reiterate that her sanitarians make every effort, even returning in an hour to try to help the owners.

Ms. Isaac stated that it bothers her because KCHD has never been known for retaliation and if there is an issue, the owners need to contact the Director of Environmental. They should file their anonymous complaint; the director should call the sanitarian in to discuss the issue. Ms. Isaac stated she has always received copies of letters in the past if there was an issue with a sanitarian.

Dr. Gupta stated that the attentions should be to food safety and that the county and city are partnering with KCHD to set up training.

Ms. Ray stated that there is a scheduled training on October 17<sup>th</sup> at the Charleston Civic Center. The training is for owners and managers and will last for four hours. The training will target food safety and the code. She went on to say there will be a question and answer period before the training ends. Additionally, sanitarians will be available.

Dr. Gupta states it is important for the owners and managers to come and address their issues at this training.

Ms. Snodgrass asked if the training would include reviewing the issues on closing an establishment.

Ms. Ray stated they would be going over what a critical violation is and what causes a critical. She said they would cover the most common issues. Again she stated they would gladly answer any questions that the owners/managers might have. She said she does feel that some positive efforts have come out of all the media attention and that she hopes to plan more training in the future. She informed the Board that cards would be going out to all the establishments in the County regarding the training.

Ms. Ray also stated that the new inspector has had letters submitted and phone calls, in support of her efforts.

Mr. Weber felt the inspector should not be criticized. He also stated that he hopes the Mayor will take a stand against those establishments that have complained to him but do not attend the training and have their issues addressed directly.

Mr. Strawn thanked the city and county for their contribution for the training.

Ms. Isaac asked that the Board receive an update on how the training went. She also directed Anita Ray to develop an annual training proposal similar to the one planned for Oct 17<sup>th</sup>.

Dr. Gupta stated that there had been 16 deaths to date from the contaminated cantaloupe; 1 in West Virginia.

## **7. Report of the Director of Epidemiology & Threat Preparedness – Janet Briscoe**

Ms. Briscoe informed the Board that the bi-monthly Epi Report on outbreaks and communicable disease investigations was in their packets.

**a. Discussion of the Health Department's processes to investigate food borne illnesses.**

Ms. Briscoe stated that restaurant inspections are important factors in the process of preventing foodborne illnesses. The Centers for Disease Control (CDC) has recently released a report which estimates that each year 1 in 6 Americans (48 million) become ill from foodborne illnesses (FBI); translated this means over 32,000 residents in Kanawha County had a foodborne illness during the last year; with the highest number of cases reported occur in children under the age of 5. She also stated that approximately 3,000 die from FBI every year.

The majority of lab confirmed cases that are investigated appear to be isolated and are not generally epi-linked to an outbreak or other known cases. KCHD thoroughly investigates all foodborne illnesses reported to the health department, the most common of which is salmonella.

KCHD investigates foodborne illness complaints on a regular basis. Restaurant complaints are reported to the Environmental department and the establishment is checked immediately. It is difficult to connect illness to specific restaurants because of various reasons; such as food illness may not occur for days or weeks after consuming food, food may not be available for testing, etc.

Ms. Briscoe continued that KCHD has made a number of steps lately to improve its ability to identify and respond to food-borne illnesses (FBI). This past May, members of the Epi and Environmental divisions attended a day long workshop sponsored by the Council to Improve Foodborne Outbreak Response (CIFOR). The Epi and Environmental Divisions have developed a Foodborne Outbreak Response Team to work together to evaluate and revise our methods for handling food illness and restaurant complaints. This team has met several times to review methods for public food complaints and create a new food illness complaint form which will make it easier to recognize a foodborne outbreak. Finally, Ms. Briscoe highlighted the importance of prevention in reducing foodborne illness. These measures include good hand hygiene and proper handling, storage and cooking of food, all of which is why KCHD's health inspections in area restaurants are a vital part of reducing the likelihood of foodborne illnesses and outbreaks in our community. Poor kitchen practices, incorrect food temperatures, and cross contamination are the most common causes of foodborne illness and these areas are monitored by KCHD sanitarians during food establishment inspections.

Ms. Isaac asked about the process when a FBI is reported. Ms. Briscoe stated that when a case of FBI is reported from a lab or provider; they call the individual, and among the information they get is a food history, whether other household members are ill, occupation, restaurant history and activities attended where food was served..

**8. Report of the Director of Health Promotions – Ms. Krista Farley**

Ms. Farley informed the Board that she will be presenting at the Southern Obesity Summit on Monday, October 3rd in New Orleans, LA to highlight the mapping and assessment of physical activity opportunities.

Ms. Farley also noted that the Board was invited to the Kanawha Coalition for Community Health Improvement will hold a Community Health Forum on Tuesday, October 14th at 5:30 p.m. in the University of Charleston Ballroom, this event will conclude the triennial needs assessment process. The top three health concerns voted on during the event will be the focus of the Coalition's work for the next three years.

Ms. Farley stated that KCHD has been selected for a National Library of Medicine Disaster Management Research Center for a Disaster Health Information and Collaboration Project to develop an emergency preparedness portal and smart phone application in partnership with the West Virginia School of Osteopathic Medicine and Concord University.

## **9. Old Business**

### **a. Follow-up discussion and update of the U.S. Chemical Safety Board (CSB) recommendations**

Dr. Gupta updated the Board on what has been happening with the CSB recommendations. He informed the Board that he had received a letter dated September 22, from the Chairman of the CSB. He went on to say that on September 7, the CSB voted to designate the recommendation with status of "open-Acceptable Response"

Ms. Snodgrass shared her concerns regarding the issue with the Board. Ms. Snodgrass stated that she has a problem with us (the Board) following a recommendation just because it was issued by the CSB. She stated that as far as she knows, there has only been one state that followed these recommendations. . Dr. Gupta reminded Ms. Snodgrass that she had seconded the motion made by the Board to pursue the recommendations from the CSB (see Meeting Minutes from the March 17, 2011 Board of Health meeting). Ms. Snodgrass added that she feels we are looking into something that isn't our business and isn't sure she will back it.

Dr. Gupta stated that the Health Department isn't in the business of taking sides. The Department's main mission is to protect the public's health and our responsibility is to review the pros and cons and to explore all the possibilities. He stated that he has been consistent in indicating that in order for this program to be established and successful, there must be an equal collaboration, commitment and partnership between the public, KCHD and the industry. Program cannot be established if anyone partner decides not to be involved or back out.

Mr. Strawn asked about the next step for KCHD.

Dr. Gupta stated that we are waiting to hear back from Secretary Lewis' office. Dr. Gupta added that as he understands it, the matter is being taken before the Legislature to fund a study, and he feels that we need to keep an open mind.

Dr. Gupta went on to say that there are many questions still unanswered. Do we have the expertise in this area? Would this be acceptable to the industry? He reiterated that this would have to be a partnership. If the time comes, and the

businesses don't want this, then he suggest we let the businesses back out. As of right now, we have done what we were asked to do. All we can do now is wait on Secretary Lewis' office. Ms. Isaac stated that if the Board would need to, they could call for a special meeting to address any response from Secretary Lewis' office.

**b. Follow-up discussion of "designer" drug issue**

Dr. Gupta stated that DEA has recently issued guidance on the matter, dated September 7<sup>th</sup>, in each member's packet and therefore the question of having a local ordinance is a moot issue.

**10. New Business**

**a. Reports from the Board sub-committees**

- Finance Sub-Committee

Ms. Kirk stated that the sub-committee did not meet. She added that sub-committee reports will be added to the Board's agendas in the future.

**b. Public comment period**

Ms. Ray, Environmental Director, wanted to recognize the inspector that had been making the media, Alicia Page, who received an award from the State for having the highest academic average in her sanitarian training class. The Board extended their congratulations to Ms. Page.

**11. Adjournment – 5:40 pm**

A motion was made by Mr. Weber to adjourn and seconded by Mr. Strawn. The Board voted and the motion passed unanimously.

Respectfully submitted,



Rahul Gupta, MD, MPH, FACP  
Health Officer/Executive Director