

The Fayette County Board of Health met on Tuesday, October 9, 2001 at 7:35 a.m. in the public meeting room in the Fayette County Administrative Complex, 140 Stonewall Avenue, Fayetteville, Georgia.

**Board of Health Members Present:**

Thomas Bowman  
Dr. John DeCotis  
Carol Fritz  
Lynette Peterson  
Lyn Redwood  
Dr. Michael Strain, Chairman  
A. G. VanLandingham

**Staff Members Present:**

Susan Ayers  
Laurie Cook  
Merle Crowe  
Rick Fehr  
Dennis Davenport, Attorney

**Guests:**

Rep. Kathy Cox  
Dr. Childs (Ernest)  
Deborah, Asst to Dr. Childs  
Greg Dunn, County Commissioner  
Pam Young

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Dr. Strain called the meeting to order at 7:35 a.m.

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**APPROVAL OF MINUTES:**

Approval of the Minutes of the September 11, 2001 Board of Health Meeting was tabled until November meeting.

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**LAKE EDITH UPDATE**

CAROL FRITZ: Mr. Summerville of the EPD is not here as he was supposed to be.

**EMERGENCY PLANNING**

CHAIRMAN STRAIN: That being the case let's go on and discuss bio-terrorism, and we will come back to that if that's okay with everybody. Would someone give us an update?

LAURIE COOK: Dr. Bracket was unable to be here today, he is at a meeting on bio-terrorism. At this point the role of public health is secondary to EMS, fire and police; the nurses would operate to provide first aid and staff shelters. Environmental Health is charged with shelter sanitation, food handling, water, and sewage. Public health has plans in place for responding to natural disasters; we have prepared for and actually had tabletop drills. However, bio-terrorism is new and something for which none of us were prepared. We are rapidly getting ready and Dr.

Brackett has been attending courses on bio-terrorism for about a year now. As you can see from the flyer that I handed out, this is the first course that Public Health has offered statewide. The roll of the Board of Health is really to simply to assist public evacuations; you would not really be expected to be part of any incident as it occurs unless you want to be. This is a new topic to public health.

CAROL FRITZ: One of my questions was what kind of relationship or communication does the Board of Health have with the hospital or with EMS? How are we set up to work with them?

LAURIE COOK: Very good question. We are networking in our counties now, and Dr. Brackett has been working on that. Next week, many district staff members are going to a meeting with EMS to network and discuss that exact topic. This issue is in the developmental stage and we are working on it.

DR DECOTIS: What is our role with county emergency services? For example, I know that Jack Krakeel and Pete Nelms (County Emergency Services Director / Captain) came and spoke with school personnel about schools being used as shelters. Is there any relationship the Health Board has with county services when something like this occurs?

MS COOK: We have been working on building county rapport and being recognized as a vital resource by local county emergency personnel for the last two or three years. Exercise drills have been held in local county areas and phone calls never came to Public Health: yet they know we are there and waiting. On occasion we have been briefed that there is going to be an exercise, and yet that phone call never comes. So it's been somewhat frustrating for us, so we have to make an extra effort to be recognized. A good example of that was a hurricane evacuation from south Georgia, which impacted some shelters in our district. Red Cross never made that call to us so we are in the process of trying again to remind people that we are available and vital a resource. That is much more critical now.

CAROL FRITZ: Just got sidelined and had a brief conversation with Tom, who was actually at "ground zero" and just recently returned, and is pretty brushed up on protocol.

TOM BOWMAN: One of the things I do on a daily basis is work on chemical and bio-terrorism plans. Several weeks ago, it was hard to get an audience to talk about bio-terrorism and now it's on the news multiple times a day. I understand what you are saying about Public Health's role, the transition from fire and EMS, especially during a bio-event. In the event of a bioterroristic attack, the Public Health piece is going to be mainly driven through the public health department, which will require a change in mindset and attention. We can man shelters and bring in pharmaceuticals, but the key is cooperation and surveillance within the community. I know the State has been working on setting up a surveillance system but it is not ready. Maybe we need look to the district and others, such as Columbus. They are checking on surveillance on a local basis, which doesn't take a lot of computer programs. The Fire and EMS department in Peachtree City tells us they are getting ready to start tracking the city's medical costs. I suggest taking medical information then breaking down surveillance on a daily basis; looking at things like GI nero-flu like symptoms and establishing some baseline spikes and trends. It would be good to have the schools looking at absenteeism, looking for a spike in flu-like symptoms, which will show the majority of bio-events. I think we need to go back and establish informal contacts with the major clinics and hospitals and start gathering information.

LAURIE COOK: I think you are absolutely correct, that the call will first come informally. A week and a half ago I spoke with Dr. Toomey, director of Public Health, and she said now she is being

invited to sit down at the table with the directors of GEMA, FEMA and the governor. Public Health was never invited to that table before, so we may be that first contact when people recognize a bioevent. I notice that Susan Ayers, Director of the Nursing Program, has walked in. Susan, do you have any additional comments on surveillance?

SUSAN AYERS: I can share some of the plans we have in place in district. We have not had a tabletop drill in the last couple of years, but we have recently held several meetings to update our contact list for every county. For example, I am first on call for the department of nursing. Right now we feel like our role is going to be coordinating, or whatever the job entails. We are not first responders in the nursing section, but we know that in past natural disasters we have been called. District sent nurses to help staff shelters, and environmental staff to evaluate shelters. So we are looking at what we will be doing in a biological event. I would welcome any opportunity to meet with interested parties in your county. I was glad to hear that Cynthia has been very active, and we remain on high alert since September 11<sup>th</sup>.

LYN REDWOOD: I have a question regarding some of Tom's concerns about surveillance within the county. Is there a coordinating or unified mechanism in the county right now between Public Health Department, EMS and some of the larger clinics in the area that take a look specifically at these surveillance issues?

SUSAN AYERS: Yes, every hospital has a list of all reportable diseases, not the flu; (although actually they did report the flu) which goes straight to the state. We have surveillance in place for flu, pneumonia, and all infectious diseases. When I get back to the office I expect to have e-mails from Dr. Toomey or the CDC for nursing divisions, showing that they are stepping up efforts in those areas. What we do is to contact local hospitals and health departments, and immediately start entering all that information into a database.

LYN REDWOOD: So that's already happening here in Fayette County?

MR. BOWMAN I spoke to the infectious disease people at the State who say that it is in place, but the problem is lag time of infectious disease reporting.

SUSAN AYERS: The lag time is from private providers remembering to report.

MR. BOWMAN Have we gained some on that? In light of recent events and new awareness that we are going to need as close as we can get to *real time* reporting.

SUSAN AYERS: That I can't answer, but I will have that by the end of the day. I feel confident that yes they are stepping up here. I will make sure I e-mail Cynthia, or any one else that would like for me to. I will find out about the lag time.

CAROL FRITZ: Like you say, we would like to have staff keep us informed of what is going on because I sometimes feel like we are out of the loop, and you say we are not sure what our role is yet. We need to understand what is going on to be ready.

LYNETTE PETERSON: Laurie, if you will let me know what your concern with the Red Cross is, I will bring that before the advisory committee. They are meeting on Tuesday, and we'll try to take any steps we can to coordinate the disaster response team with whatever that criticism was. Let me know.

**LAKE EDITH**

DR STRAIN: The purpose of this meeting was to see how the state and ecology of Lake Edith is, and factors that impact these concerns, since this has been brought to us by several members of the public. Lyn, would you share your information about your trip to Atlanta?

LYN REDWOOD: Carol and I went to the EPD about two weeks ago. We met with Jim Summerville and went through the files, and picked up quite a few documents. Carol, Dennis Chase and I are still reviewing the documents. We found that there were consent orders previously against the facility. We were not able to access the present file that has the current months of monitoring reports. I am not certain that they have come back into compliance. Possibly Mr. Summerville could help answer some of these questions. Carol, do you have anything else to add?

CAROL FRITZ: I think we need to discuss the lake assessment to determine our direction. I don't know if Dr. Childs had gotten additional testing done.

DR STRAIN : Let's discuss the lake assessment, did everybody get that last week? Would you come forward, Dr. Childs, and review your assessment?

DR. ERNEST CHILDS: Would you like me to answer your questions or basically tell you what we found?

CHAIRMAN STRAIN: Please state your name, where you are from.

DR. CHILDS: My name is Ernest Childs, I live in Peachtree City.

DR. STRAIN: Will you summarize your report, Doctor?

DR. CHILDS: Our company, ARCA Solutions, normally is in the business of testing and evaluating situations. We normally are called in when things don't pass and there's no apparent way to cure the situation. Last week I was in an area where landfills were a problem and we were able to clean the area up, as we were with a tannery. We agreed to look at Lake Edith to see if we could evaluate it to correct any existing problem. We took a series of samples; I believe you have the results in front of you. There had been discussion as to whether high fecal counts come from Marnelle, or whether it came from cattle, birds, etc. near the stream that goes into the lake. So we did pesticide and herbicide analysis. Typically, if you have agriculture run-off, herbicides and pesticides will show up. We also did an analysis of elements that would be commonly found, and nothing shows that there was a problem with either birds, or cattle, or extraneous contaminates. We did our microbial work based on recreational waters standards; the EPA designates chloroforms and toxicide as the organisms to be checked, which correlate the best with possibility of disease. When we went to take those samples, there was a distinct sewage odor, there was foaming, it had all the look of a situation where there is fishy soup, and chlorine is used to treat it. When we got the tests back they showed there are cocci in the stream leading from the mobile home park to the lake: well over 2,000 cocci per hundred mls, where a typical standard is 33. This is a huge multiple of the typical standard spherical cocci or equal strep. Those are dangerous organisms as we all know. Coliforms also were high in the entry stream and they dropped off when we got into the lake. When we got that information, we sat down with the YMCA board and with the folks from Marnelle. Our organisms typically consume cocci and the materials pathogens need to multiply. We have a lot of case studies in experimental work which shows that when we put in RK things clean up. RK is the

last link in the food chain, and when there is not enough of them you get odors. The YMCA asked us to do whatever it took to fix the lake, and so we're prepared to go forward. At Marnelle there are two situations: not enough chlorination to make certain there are no live organisms coming out in the end of the water way, and too much chlorination. Heavy chlorination isn't always the answer. We are seeing most places starting to monitor free chlorine or strain chlorination from the chlorination plant. Its hard to catch mistakes in chlorination when you are inspecting the unit because by the time you get to an area to look at the lagoon, chlorine can be put in so that the tests look okay. We suggest that our products be put in all Marnelle lagoons. Then get rid of the pathogens and treat the lake. About a week ago we looked at the stream, and there was not a sewage odor this time, there was actually a faint chlorine odor. When we took our samples, the intercoccol count was less than 20, so it was well within standards. The coliform count was less than five so the big thing we found was that when you have sewage odor you've got high counts, and when you've got chlorine odor you've got low counts. This shouldn't surprise anyone. Conversely, as to the lake itself, you've got a biofilm which is likely is made up of a variety organisms which need to be cleaned. You need to watch chlorine and I and will be happy to answer any questions. You've got a solvable problem.

MS FRITZ: I think one of the issues we are battling with is the question of contamination coming from humans or turkey, deer, ducks, and geese that visit us. We feel we are clearly dealing with human waste here, not ducks and geese.

DR. CHILDS: That argument can go on forever. I think the most telling thing is the odor; you can literally smell sewage, you can see all the foam that comes from detergent. I think that doing the treatment will get rid of most of it. We actually didn't test for deer herds, and I haven't heard of any marauding deer herds in the area lately.

MS REDWOOD: What you have described is somewhat of a familiar pattern that we have seen before: there's obvious contamination on site but when EPD goes out, the facility is in perfect compliance and fecal coliform counts are zero. It seems as though there's intermittent treatment of sewage.

DR. CHILDS: I think if there is a means for chlorine monitoring, most states monitor residual chlorine. There are twenty-four/seven setup monitoring systems. Talk can go on forever and there are all sides to this argument; but if there are means to monitor residual chlorine, and you have the capability and the right to do it, you should.

MS REDWOOD: Maybe Mr. Summerfield could answer that question. Jim, would you like to come forward? What about residual chlorine and the patterns that we've seen with this particular facility's inconsistency?

MR SUMMERVILLE: Well, you're not going to do it with a fecal coliform test, which is what they are affirming as an indicating organism. You're not going to find consistent results even within a matter of minutes because it is a grab sample: a snapshot in time. This means that it could change because just one particle extra could add several fecal coliform counts. The state water standard is a one-time sample; during certain times of the year you can have up to a thousand to one hundred milliliters over a thirty-day period, taking four samples of geometric means. The samples in this test are not geometric, so you can't correlate those to the EPA standard because it's a geometric standard.

MS FRITZ: Well Dr. Childs indicated that it is. So it is geometric?

MR SUMMERVILLE: No, it couldn't be geometric.

MS FRITZ; Okay, Dr. Childs is nodding his head yes, so...

DR CHILDS: No, I was agreeing.

MS FRITZ: Oh, okay.

Dr. CHILDS: The only thing I would disagree with is we didn't do fecal coliform, we did total coliform. But if we work with the YMCA on Lake Edith and we do not have 24/7 monitoring of chlorine, we would be happy to contribute materials where we're measuring once or twice a day. You might want to talk about it to the ten-state coalition that's moving towards actual residual chlorine measurement standard rather than micro-counts.

MR SUMMERVILLE: Taking geometric means over a thirty day period means to take more samples and take the square root of some of the numbers of these samples. So we use the geometric mean because it doesn't depend upon one sample, it uses the mean of several samples which might be high or low. It is not exact like the BOD (Biological Oxygen Demand) test. We use chemical action as a standard indication of pollution. There is an indicated organism, that's why it's a geometric mean; because one sample isn't precise. Now the system they use at the park is a tube system, in which chlorine pellets or tubes are put in and which comes in contact with the water. The level of the water in it will contact, along with how far down the tube is in the water, would be an important factor in whether this chlorine is being adequately dispersed in the water for proper disinfection. The other thing that's important with the disinfection system is the retention pond that allows for time for the chlorine to act. That's why we require a sample reactor at the end of the pipe going to the stream, to get retention time. The result of samples we collected indicated that they were within their limit. The geometric mean was taken over a thirty-day period. As far as the 24/7 chlorine sampling or monitoring the system, we don't require that except in the larger facilities and we have to have a reason for it. The other thing is that when we have a water supply downstream, we require a fifty per one hundred milliliter limit, versus a 200 per 100 milliliter that is now required of Marnelle. Test results show that they can meet that.

When we inspected in response to these concerns, we found that samples were being taken right after the chlorine interacted with the water, which gives a very high fecal count, since the chlorine hasn't had time to work. I suggested that they move the sampling point. We went down last week and did an unannounced inspection. One of the problems we found was that the chlorine was in a brick contact tank which is open to the air, so it can get debris in it and needs to be cleaned out on a frequent basis. When the chlorine comes in and there's accumulated sludge or grass, it could increase your fecal count; so maybe that's the problem. The only thing we found to date is that they need to maintain that area a little better. Are there chlorine systems they could buy that would be better than the one they have? Certainly, the sky is the limit, but is there justification for it? We don't have a permit violation problem any more. We do have a pH problem and that's due to algae that they need to deal with but that won't bother people. Right now we are continuing to require samples more frequently than their permit requires. The three important ones are BODs, total suspended solids, and fecal coliforms and they've been in compliance with those since January.

DR STRAIN: What percentage of visits are announced versus unannounced? There's been some questions in terms of sampling, collection of samples.

MR SUMMERVILLE: All our inspections are announced. It doesn't take very long for us to get to the gate to enter the treatment plant. They don't have time to clean.

DR STRAIN: Okay.

MR SUMMERVILLE: We have been in business a long time and they couldn't do anything we wouldn't know about.

DR STRAIN: Do you have any explanation for the pictures and the smell?

MR SUMMERVILLE: I don't, and when Lyn and Carol came to see me it did concern me that there were pictures of foaming that I had not seen before. The samples didn't have any phosphates which would typically be found if there is a detergent situation, if there was a sewer break, or somebody was emptying a clothes washer line into the stream. We didn't sample for that and although I have no doubt it was part of the problem, I don't know what would cause the foaming; I understand it was white foam.

LYN REDWOOD: It was white but then it has green on top of it. I have the pictures.

MR SUMMERVILLE: In response to that we went back down there unannounced to see, since none of this happened during our inspections. When we find white foam in active sludge plants like the one Fayetteville has, it is due to young sludge but this is normally not found in ponds. The only way would be that somebody dumped something in there to cause the foam problem. We have not seen that, and I don't have an answer for it. I am interested to know what it was, and if it ever happens again I would like to know about it so we could get somebody down to sample it.

MR. VANLANDINGHAM: I don't want to take issue with either one of you gentleman but the issue is if it smells like sewage, it most likely is, and the odor is definitely there. If it has foam on it, which is the indication of reaction in untreated sewage, it most likely is maltreated sewage. We have had this problem for years and in no case was it proven that they are in violation. The poor deer, birds, and the beaver are always blamed for this. Last week I talked to some people in other counties that have the same problem, and the deer get blamed for it *every time*. We need to understand that we are using their habitat to dispose of our waste, and if it is causing elevated levels, then we are at fault, not the deer. When we have this situation existing in our county and we can't seem to get resolution, there is something wrong with our system. The first statement that you made indicates to me that our procedure needs to be changed--where a permit could be issued or maintained on one sample. The citizens who live in Marnelle talk about the way their sewage is dumped on the ground. It leads me to believe that Marnelle is irresponsible in operating their plant. I know your position is not the same as ours, but I am trying to find some way that we can come together and bring this system up to date where it will function in a satisfactory condition and not destroy the environment, which is exactly what's happened. To blame it on the animals is entirely ludicrous. It is their habitat we are using, and if it is elevated, we are at fault.

MR.SUMMERVILLE: One of the problems is that we have given the CDC a lot of money to come up with an alternative organism more indicative and more accurate and not such a variable task. They were not able to come up with anything. We have gone to free sporing on our permits. We don't normally do that on private institutional development such as this mobile home park. Municipal plants have chlorate TRC (total residual chlorine limit), and I can look at that. That would

not necessarily solve what you are trying to solve. You are trying to prevent any fecals from that waste water pond getting into the stream, that's not going to happen. You can't do that, it is not possible. Our regulations recommend that nobody swim in any uncontrolled body of water in the State of Georgia, because it is not a good health risk. There are other sources of contamination that can get into to uncontrolled water. I'm concerned about hearing that there's some indication of sewage smell in the way the mobile home park operates their internal sewer system. I checked our tracking system and we have never received a complaint about any sewage spills inside that mobile home park. I don't know if the Health Department has ----

LYN REDWOOD: We have.

MR VANLANDINGHAM: We have. Seven at one time.

MR. SUMMERVILLE: -- and if it doesn't reach the waters of the State then it isn't a violation of our Quality Control Act. If it does the Health Department can take care of it because it is underground sewage. We can go after them for not operating their sewer system under their permit if we know about it, but no one has ever called us about a sewer problem inside the mobile home park. If they do get reports of that , we need to know and we will send somebody out to look at it. The permit they have, the NPDES (National Pollutant Discharge Elimination System) covers that sewer collection system. They have to maintain it. We have never received any complaints about this. We would like to get them if there are.

CAROL FRITZ: I just don't feel like we are getting any closer to resolution here but the fact is that this is a problem. It is causing a problem for the YMCA, it needs to be addressed and we need to find the means to do that. Whether it be requiring them to upgrade their system and bring them more into today's standards since it is such an old system, but the way it is happening is wrong and needs to be addressed.

MR. SUMMERVILLE: What do you mean by today's standards?

CAROL FRITZ: When their permit was issued, many, many years ago---Lyn, you want to help me with this because you are more familiar with it?

LYN REDWOOD: The comment you made a few minutes ago, Jim, is that the water intake downstream require fecal coliform counts to be 50 instead of 200-400. I think that standards might be a bit stronger for a facility that is in the middle of a very growing community that has a lot of public access- especially with the YMCA camp being right there. I think it would be beneficial to decrease the standard to 50, increase the requirements of the permit to a measured total residual chlorine, and anything else that we can do to help improve the quality of the effluent that comes out of that facility. I would also like you to go back and research the initial design of that facility to see if it was designed to meet the flow it carries today.

MR. SUMMERVILLE: I did go back and look. This facility was built prior to 1974 which is when the State of Georgia was delegated the authority to enforce the Clean Water Act from EPA. It also predates even the Clean Water Act and in those days, the Georgia Water Quality Control Board did do some permitting. I mentioned to you that we call them the pink files. These are the files from way back, and I went back and looked to see if we had any files on this facility and we don't. So I don't know what it was designed to handle, but they are under their flow limit. I don't know what the basis is for their initial permit application; it was probably based on their engineer.



LYN REDWOOD: Is their weir fixed? Because I was under the impression that there had been some problems with actually accurately measuring flow in that facility.

MR.SUMMERVILLE: To my knowledge, it's been fixed. When we were down there this past week that was not brought to my attention. I did not personally go down there, one of my folks did, and so as far as I know it has been.

LYN REDWOOD: Correct me if I am not understanding you right but this facility was built back in the 1970s prior to the Clean Water Act, and in terms of its design the EPD is not even aware of what that facility was designed for or capable to handle?

MR. SUMMERVILLE : The permit application initially filled out by their engineer based it on loading, the number of acres, the depth of the pond, how many mobile home park pads with a certain amount of flow per pad.

LYN REDWOOD: I think over the years there's been an increase in the number of mobile homes since this facility was first built. Just an eyeball count is well over 200. I would like for EPD to investigate that as well, and bring this permit up to higher standards--not the same standards that were in place in the 1960's.

MR SUMMERVILLE: The fecal coliform standards are the same standards as the Fayetteville treatment plant has, 200 per 100 milliliter. What I am trying to figure out is what you want. Other than having this plant eliminated to use public sewer, I am a little confused at what you want me to do.

LYN REDWOOD: When I look at permits issued over the last few years, the standards for the effluent are much higher than this particular facility's. The Board of Education's permit has to meet higher standards than this facility. It is only an application system, where effluent percolates through the soil before it enters into the water. This is discharging directly into a stream.

MR SUMMERVILLE: Land application system has a lower standard than the pre-treatment system, which has a 50/50 before it's sprayed out onto the grass.

LYN REDWOOD: Doesn't that depend as well on if it's reuse or nonreuse system? I'd like to see it meet the standards of -----

MR SUMMERVILLE: For a reuse system?

LYN REDWOOD: There's a limited reuse, there's three different levels full reuse, and there's a limited reuse, then there's-----

MR. SUMMERVILLE: But this water is not to be reused, so that----

LYN REDWOOD: It's being used.

CAROL FRITZ: It's not being reused for drinking at this facility. The YMCA facility can't do summer camp programs there because the lake is contaminated, polluted whatever you want to call it. Marnelle is in effect polluting two surrounding properties. I thought that was against the law.

If it isn't it should be, and we have got to find a way to stop that from happening.

MR. SUMMERVILLE: It's against the law if they violate their permit. If there's a demonstrated reason, and if you want to request that they have a 50 per 100 milliliter equal limit based on the fact that the YMCA wants to use that lake, let me know. We'll take it under consideration.

DR. DECOTIS: Let me add this also. I am glad you saw a picture of the foam because it's been there for years. Let me ask Mr. Davenport this question: legally can we enlist Dr. Childs or anybody else to treat that lake in the interim until we know what else can be done? Does anybody have the authority to authorize that?

MR. DAVENPORT: First thing you would have to know is who owns the lake. There's an ownership interest on the part the YMCA, and there could be ownership interest on other private property owners also. If you want to take some active measure to impact that lake, you'd need to know who those owners were and let them know ahead of time. If I could add too, I'm hearing the standards of numbers being thrown back and forth. I believe Mr. Summerfield said that the standard would meet the 50 standard. Is that not correct?

MR. SUMMERFIELD: They have the ability to meet that and I think your sample showed that too.

DR. STRAIN: Then the question is the ability to do it and doing it 24/7 is really where we are, and you can sample 10 times a month, but if you are not sampling at the right time and you give those organisms a foothold, they are going to multiply.

MR. SUMMERVILLE: You can't do it 24/7 on fecal ---

DR STRAIN: If there is a correlation, and I believe there should be between free chlorine and the objective of decreased coliforms, then why not go to chlorine monitoring and be done with it. Then the Board of Health issues are done. You have a consistent monitored situation where it can be monitored. You'd have to look at the cost of it continually versus twice a day, so that you don't have to worry about the state inspecting, and it's continually transmitted by computer to bring the thing up to where the objective is met: which is good water coming into the YMCA.

MR. SUMMERVILLE : One of the problems with that is that you have to find out where that level of free chlorine is in relation to the fecal coliform count.

DR. STRAIN. : We have good engineers, lets let them do it.

MR. SUMMERVILLE: You have to do it over long-term sampling, figure out what treatment plant operators have to do, because if you get too much chlorine then you are going start talking about its impact on the lake and the aquatic environment. So you don't want them to super-chlorinate this.

DR. STRAIN: Right, but you have to start chlorinating at some time.

MR. SUMMERVILLE: When the operator does get the chlorine limit, he keeps a free chlorine total residual count of 25. Maybe he needs to have it a little bit higher, but you don't want them to

super-chlorinate it in order to make sure they are always careful of the chlorine limit. It is going to have an impact on the stream. We don't like to see chlorine residual levels above .5 and some of them are even less than that.

DR. STRAIN: You're saying that's not a do-able thing?

MR. SUMMERVILLE: Well, we don't want to lose the fecal standards; if we had a total residual chlorine of .75 and they maintained that at all times, you would say the fecal limit is under whatever limit you want, but we have not established what that chlorine residual level needs to be to insure they are under that limit. That's something they need to do by sampling; you just don't do it by sitting down and calculating.

DR. STRAIN : How long does that take?

MR. SUMMERVILLE: You could do it every day and figure it out. It wouldn't take that long. if we gave them a fecal coliform limit and total residual limit then, they could sample fecals every day and adjust their chlorine limits until they get one where they could both meet the fecal limit and stay under their chlorine limit.

DR. STRAIN : If you owned or were responsible for the lake, if you're the manager of the lake, and your brother was running the treatment plant, what would you two do to come together and fix this? or is it broken?

MR. SUMMERVILLE: I'd ask if he'd go get an application for public sewer. That's the alternate. I think one of your goals is to get rid of the peaks. If one day they sample at 2000, and the next day it's 50, then you don't want that 2000 but would rather have the 50 peak be uniform, so I would suggest to the park that they look at their chlorine system. They could put in one that is a little easier to control.

MS KATHY COX: Good morning, I'm Representative Cox. I have been listening this morning, and I was at the meeting you had a couple months ago. My question to you, Mr. Summerfield, is that you said that you don't normally require chlorine monitoring except in larger facilities, but is there anything in this case that legally prevents you from doing that?

MR. SUMMERFIELD: I don't know, I'd have look at that and give it to my permitting section. What I was really hoping to get today was for the Board of Health to tell me what they'd like to have done to Marnelle's permit. What will resolve this to everybody's satisfaction?

MS. KATHY COX: In listening to all this, it seems to me what's going to resolve this issue is more consistency in Marnelle's effluent. I have heard four different observers talk about going outside the Marnelle facility; four different people who have been there four different times in the last year and a half and all four talk about the odor and the foam and how awful it is. Now I'm sitting here as an observer thinking that these four people are not making this up. When they described what they had seen and what they smelled, it sounded pretty horrific. I have also heard people talk about getting complaints from residents where there has been raw sewage dumped on the ground on three different occasions. I don't know why EPD hasn't been called because, Mr. Summerville, you sat in on the July meeting when this was discussed. So it seems to me that we've got a problem. Now we have brought in another person to analyze the lake, and they've come up with the same results that everybody's been talking about all along. It sounds to me like what we need is a

permit that is going to lower their amounts to the 50 standard rather than the 200 standard, so that we can feel safe where the lake is concerned, especially campers and people canoeing. What we need to do is monitor the chlorine because they've got peaks and they've got valleys, and they've got times of the day when they're probably using the system more, like when all the kids are home from school, and people aren't at work. So let's monitor the chlorine to see that we are not getting the highs and lows. And if there is nothing legally stopping the EPD from monitoring the chlorine, like they might not normally do it for a facility like this, let's do it. And if you can't do it, I'll put a piece of legislation so we can, because it seems to me that this is very obvious now. I think everybody in this room feels that we've analyzed, we've looked, and now we want something done; and if you don't have the power to do it, we need to find a way to give you that power.

MR. SUMMERFIELD: I'll look into that Representative Cox. Is that going to satisfy the YMCA? I have to caution you that I'll see if we have some basis because if we reissue the permit, Marnelle has the opportunity to appeal it. If we put in something and we don't have a legal basis to do it, they can get it overturned on appeal. When I say I have the authority to do this it has to have some legal basis, some rationale that will withstand an appeal.

LYN REDWOOD: Mr. Summerfield, can we help you in that area? If the Board sends letters in of complaint and support requesting better standards?

MR SUMMERFIELD: I would like to know what resolution would make everybody happy, and then I will see whether the people that own Marnelle would go along with it so that they wouldn't appeal the permit later. If this is a do-able thing, and we do it and they appeal it and are successful in overturning it, then we've lost the permit. We don't like to lose permit appeals, so I'd like to get a sense from the Board and from the YMCA as to what your recommendations would be then see if there is something we can do.

MR.VANLANDINGHAM: Mr. Summerfield, I don't want you to think I am picking on you because you are here. I have a stream on my property. If I dig on my property, I have got to make sure that sediment does not run into that stream. If they have a sewage plant, they can get a permit to dump sewage in that lake, which prohibits other people using it. There's something wrong.

MR. SUMMERFIELD: Well, the standards are set to protect the use of the stream, so if state waters are classified as recreational, for example, then there are certain standards that stream has to meet. The limits are set to insure those standards are not violated. So it isn't that waste water treatment plants are never going to discharge something that isn't 100% pure water: it might be 99.49%.

MR. VANLANDINGHAM: We are not close to that.

MR. SUMMERFIELD: No. You are within the standard of secondary treatment, and BOD is not the area of concern. We talked about fecal, so the issue would be the TRC and fecal and that's all of your concerns.

LYN REDWOOD: I think BOD total suspended solids and all the permit requirements need to be lowered. Mr. Summerfield, just this picture here is a clear violation of the Clean Water Act.

DR. STRAIN: Do we need a motion?

CAROL FRITZ: I'd like to hear if Dennis has a comment, and I'd like to hear from Pam too as to where and how she feels about all this.

MR. SUMMERVILLE: What I would like to see is just what the Board and the YMCA would like and what would obtain their comfort level. What would be the solution you'd like to see? Then I'd have something I can munch on and get a response back to the Board to see whether it's something that can be done. It's really hard for me to do something when we've got them under an order, they've done what the order says and they have returned to compliance. If it means getting the permit limits changed, and that's what you are looking for, then we can look at it and see if we've got a basis to do that; if there is some rationale. Then we will get back to you as to why we can't, why we won't, or what we can do for you.

MR. VANLANDINGHAM: Do I understand they just received a permit that came out from under the order received permit?

MR. SUMMERVILLE: They are not out from under the order. I don't think it was reissued, well it was reissued per se in...

MS. VOICES: 1999

MR. SUMMERVILLE : We went from an individual permit in these little mobile home parks to a general permit. I think that a general permit was reissued to them so we can go back and reissue an individual permit if there are spaces for it.

MS. PETERSON: Their permit expires December 5, 2004.

DR. DECOTIS: If there are not grounds to change the permit once it's all looked into, something still must be done: so I would like the Board pursue getting treatment whether or not the permit is changed. We need to get Dr. Childs to do some kind of treatment if we can't do anything else, because otherwise the lake is unacceptable and it continues to sit there unacceptable.

MR. SUMMERVILLE : We need to come to some resolution that all parties can agree to, because if we can't do anything legally then it is going have to be with Marnelle's cooperation. If that doesn't go then we will need a meeting of the minds to figure out how we get this thing solved once and for all. We want the YMCA to be able to use their lake, at the same time we have to have some basis on which to delve into the situation.

MR. VANLANDINGHAM: Does Marnelle own any of this Lake?

MS. PETERSON: No.

MR. VANLANDINGHAM: If they drained that lake, what would Marnelle do with their sewage?

MR. SUMMERVILLE : Well, they discharge it into the stream that enters the lake, so they will still be able to do that.

MR. VANLANDINGHAM: But it would be a lot easier to detect anything if there was a smaller body of water, would it not?

MR. SUMMERVILLE : I think some of these effluent samples were taken in the stream, so is your question would they lose their permit if you drained the lake--no, because they discharge into the stream. You'd need to sample right from the effluent pipe of their treatment plant; so if you want to know exactly what they are discharging into it just take a sample from their pipe.

CAROL FRITZ: We are running out of time here and I'd really like to get comments from Pam, Dennis and who ever else wants to make comments.

DR. STRAIN: Thanks, appreciate your coming.

MR. SUMMERVILLE: I'll be here if you have any questions.

PAM YOUNG, YMCA: Regarding comments about the YMCA, I agree with Kathy. My suggestion is to pursue changing the permit limit. Looking at the short term, I feel that Dr. Childs has presented a possible solution because the other things could take forever. We definitely need to look at Dr. Childs' options and attack it from that point, and still pursue the long term basis. We recognize that we do not swim in the Lake but use it for canoeing. We haven't even allowed the children to go to lakeside for hiking or anything because the water could present problems in the event of an accident. So that whole area has been off limits to any of our programming; just to get that programming back and having Mr. Fehr assure us that the lake is safe enough to use would be a tremendous benefit for the YMCA, our children and our community. That is what we are looking for as an outcome--to be able to use it and have a comfort level. Any questions?

DR. STRAIN: Thank you.

DENNIS CHASE: As a resident of Fayette County, I am solely disappointed that Mr. Summerfield's comments this morning points to the continuing problem we have had in dealing with environmental issues in the State of Georgia. The whole system he described to you is set up to make it almost impossible for us to change anything, because if you only accept the geometric mean and there is no way you can go out and take (and pay for) those samples on your own, but they are saying there is nothing to worry about. EPA has put out a document that indicates that the states that are doing this are wrong. The state is saying that the geometric mean is the only thing to pay attention to. When you have information that has been produced a number of times indicating that there are organisms in the stream that are well beyond acceptable limits, and they are the dangerous kind like Ecoli, then there is every reason for the state to take action, even if it is one sample beyond the mean like this case. There is no way to operate if you are forced to, in every one of these cases, to go out there for a 30 day period and pay for the samples yourself. Basically you've got two options here to treat the high levels of Ecoli: one I am not familiar with that Dr. Childs described before. I am hoping it will have an opportunity to work. The other would be to ask the state to hold up the permits again, which they can do. On page 12 of every one of these permits, there is an option for them to re-open a permit if there is a deration or something considered dangerous. In this case, you might want to ask them to require a chlorination and dechlorination process at Marnelle, that in fact will take a much higher level of chlorination to kill off everything and then dechlorinate so the water exiting the system is safe enough to use. I find it almost unbelievable that a state agency would come in front of you and say "we've never seen anything," when virtually everyone else that has ever walked on this piece of property has smelled it. Since I am a biologist, I hate even to put my sampling equipment in this stream because it is so bad. And for a State man to stand up here and say, well we must have 4 samples in a 30 day period otherwise it's never going to happen, I think

that is absolutely ludicrous and it is one of the reasons why this state has been sued under the Clean Water Act so many times. It is getting to a point where that is going to be the only option open to the citizens of this county. If your hands are tied then the option under the Clean Water Act may be the only avenue left open to the environmental community. I think there needs to be some strong discussion with Marnelle, and also Dr. Childs' process should be used. If that solves it, great. Then we can go out and look into some of the other deficiencies. I think it is dreadfully wrong for a State man to tell you something is out of their hands when in fact it is very much in their hands, and is very much their responsibility.

DR STRAIN: Any other comments? Any action the Board wants to take?

MR. VANLANDINGHAM: I want to say that I find it hard to believe that we can allow a plant like this to continue operating with a permit. I think it is the City of Atlanta that has been doing this for a number of months--paying a big fine and continuing to operate. And we are doing the same thing here, except no fines. If it is within the standards, and we have pollution then it is a very simple thing--our standards need to be changed. If it is a thing of no manpower or no equipment, then it needs to be available. The thing about the state having control of this is that we have gone to I don't know how much expense and trouble at the county level trying to resolve this thing and then the state says there's nothing wrong. Well, again if it smells like sewage, it's got to be sewage, and for someone to say there's nothing wrong, there's something wrong with the process. We need to change it, if Mr. Chase says there's a way to reopen this permit to set a new standard, then that's what I want to see done. It is wrong for someone to deprive other people the use of their property through their negligence, and it is nothing but negligence, because Marnelle has been told this time and time again. We're not out there sampling this water just because we like to smell sewage, we are out there trying to correct the problem. The state has got to know that there is a problem and for them to say that we can't do anything about it, we've got a greater problem than polluted water. Our process is polluted and we need to do something about it. I make a motion that we have Ms. Cox pursue changes in the standards, that we ask Marnelle to chlorinate and dechlorinate their effluent before releasing so it's usable when it goes into that lake.

DR STRAIN: We have a motion. Do we have a second?

MS. FRITZ: I'll second it.

DR STRAIN: : Motion second, discussion on motion?

MS. REDWOOD: I would like to add to that I would like to see the permit completely reopened by EPD. I think we need to petition the EPD to reopen the permit for public comment and seek public comment from members of the community, Line Creek Association, and the YMCA, along with the Board of Health, as to what type of damages we would like to see imposed on this facility. I am not certain about the treatment that has been proposed but I think that needs to be looked into aggressively as well. I don't know who will bear the financial burden for receiving that type of treatment. I would like to amend your motion to ask the permit be reopened by the state.

DR. DECOTIS: I agree, I think we can concur with that and I agree with looking into whether we legally can do the treatment or not. The YMCA board talked about how we could handle treatment. We have to pursue whether we can legally do that or not. As a health board member I support the fact that we need to do that also.

DR STRAIN: Dennis, you had raised your hand.

MR. DAVENPORT: There is an issue which is very germane to your motion and second. I was listening to the information coming to the board and there seems to be a question whether there were other discharge points other than this discharge pipe coming into the stream, because Mr. Childs had said when he tested the effluent pipe which he found was available for the first time last week, his test was an okay reading. The other sampling taken from the streams other than at the effluent pipe have not tested well. Maybe there's an issue of discharge in the stream other than from the effluent pipe and are we really satisfied that these standards are not workable standards? I bring it up to let you know that we are focusing on the standards being bad, but I don't think we know enough about these standards to tell if we are meeting those standards. There are quite a few questions in my mind in that area.

DR. CHILDS: There is food for thought in what you are saying, the distance from the pipe is arbitrarily sampled.....

MS. FRITZ: We can't hear you.

DR. CHILDS : I'm not used to these sorts of meetings, please forgive me. The difference we saw was the presence reaction to a sewerage or chlorine odor. Where we found the chlorine odor we get a very low count. Ms. Young and EPD probably knows the actual foot distance from the pipe. The sampling of the stream is what reaches the lake.

MS. FRITZ: 50 yards or so, would you say?

DR. CHILDS: Yes, a couple of hundred feet, I would say 150 feet and when we took our initial sample, we took it up the stream and I would say it was no more 70 feet down so if there was any contamination source it would have to be within that 70 feet; we observed no contamination source. The difficulty is that it's the twenty-four/seven; when you go take a sample you really need that twenty-four/seven. Are there any other questions?

MS. REDWOOD: We have had high ratings before from the actual discharge pipe in previous testing, haven't we?

DR. STRAIN: Jim, what you're wanting from the board is direction, re-evaluation of the permit with input from Representative Cox, is that satisfactory and sufficient direction?

MR. SUMMERVILLE: Yes. There are some things you'd like to see done and I'd like to have it in writing so we can act on it.

DR. STRAIN: Okay.

MR. SUMMERVILLE: And we can reopen the permit with the information brought to our attention. That would substantially change the basis of when we issue the permit.

LYN REDWOOD: Mr. Summerfield, when the permit is reopened is that for a 30-day period? How long is the comment period and when would we need to be notified to be able to give that information to you in a timely fashion?



MR. SUMMERVILLE: I don't know exactly when it would be reopened after we get your request, but if we go out public notice, it is a draft, and we can make sure you got a copy of it. There would be a thirty day public comment period if we reopen the permit.

LYN REDWOOD: Can our direction to you today be to ask that the permit be reopened, and do you need that in writing as well?

MR. SUMMERFIELD: I'm am going to find out. I am going to act on this when I get back to my office but I'd like it in writing, but I'm not going to wait until I get it in writing, no.

CHAIRMAN : You can get a copy of today's minutes.

CAROL FRITZ: Can we also send a cover letter with it saying that we would like to reopen the permit?

DR. STRAIN: We have a motion and second, we probably need restatement of the motion for clarity for the recording. Please restate the motion.

MR. VAN LANDINGHAM: The motion was that we ask our Representative to reevaluate the standards on discharge waste, that we ask Marnelle to chlorinate and dechlorinate their sewage before releasing it into the stream and that we reopen the permit for Marnelle Trailer Park. Does that cover it?

DR. STRAIN: That's a start.

CHAIRMAN: Any further discussion?

LYN REDWOOD: Is there an amendment that we include ARCA too?

CAROL FRITZ: So we request that Marnelle use the company ARCA in the meantime until we can get this straightened out.

DR. DECOTIS: We can pursue looking into that, I don't think we can require Marnelle to do use ARCA.

CAROL FRITZ: No, we cannot require them, it's a request.

MS. PETERSON: That wasn't in the original motion.

DR. STRAIN: Let's take care of this one. Alright, all in favor of the motion?

ALL: Aye.

DR. STRAIN: Any opposed? (none) The motion carries.

DR. DECOTIS: I want to make a motion that we pursue using Dr. Child's group to treat the lake in the meantime and that we look at the legalities of that and how we can go about doing that in conjunction with the YMCA.

MS FRITZ:                               Seconded

DR. STRAIN:                            Any discussion?

DR. STRAIN:                            I have a question about budget and finance, I think we have to tie up those ends in terms of the Board of Health and where we're going. Dennis will have to help legally. How do you do that?

DR. DECOTIS:                          Right, I think the Y is going to pursue that part of it, the financial part of it. Where we would need to be involved is to find out the legality of how we go about doing that. For example, contacting homeowners and what process you use to do that.

MR. DAVENPORT:                      Just in a nutshell, the process is one whereby you determine from deed records who the property owners are, and you send letters out to the property owners. That process, depending on what the baseline information is, can be rather short or it can be long depending on the starting point.

DR. STRAIN :                          Any further discussion? All in favor?

ALL:                                     Aye.

DR. STRAIN:                          Any opposed? (none) Okay. We are going to dismiss staff reports until the regular scheduled meeting. Any further business related to these items? Any other motions?

MS. PETERSON :                      We didn't address the minute transcription update; we need to bring that up.

**TRANSCRIPTION OF MINUTES:**

MERLE CROWE:                      Good morning. In the interest of the time I will make this very brief. You have received a couple of memos from me about your decision this past meeting regarding transcribing the minutes, which is why you didn't receive the minutes yet. As requested I have received three bids. It is very difficult to get people to do transcription of the minutes; they all want to do medical minutes, where there is one person speaking into the microphone. The three bids were 11 cents a line, 16 cents a line, or \$25/hour. I sent it out to the person who bid 11 cents a line; she made an attempt; she passed it off to someone else, who called me and said they simply could not do it. So the last option was to get in touch with a lady named Vivian Conduff who transcribes for \$25/hour. I took it to her last week, she assured me that she can do this for us, and that she can type quickly like Karen did. So now they are with her and I am going to see what she does. That is where we are at this moment in time. Hopefully, she will be able to handle it. I will take her today's tape and see how she does on that as well.

DR. STRAIN:                          Okay, thank you.

CAROL FRITZ:                         I have a question and I don't know who can answer this but Lyn and I were talking about it. But I'm still not clear why this whole issue of why it is all of a sudden considered overtime for Karen to do this.

DENNIS DAVENPORT:                 The biggest reason is that Karen used to be a part time employee, but as of last October she's now full time employee. An audit of the employee's finance records of the county produced the item that Karen was receiving a check as an employee and as a contractor.

Research done in that area lead me to conclude that the Fair Labor Standards Act would treat the Board of Health and the county as the same employer for Fair Labor Standard Act purposes, which would trigger an obligation on the part of the Board of Health to pay her overtime wages and other commensurate benefits. This would obviously increase the pay substantially; about 50-60% more than what you are currently paying her, in addition to the time she was spending to do the work. That's how the issue was revealed to me and that's the research I did to bring the information back to you.

CAROL FRITZ: Just out of curiosity I don't think we have ever known what do we pay her or what have we been paying her. How much?

MERLE CROWE: We paid her \$20/hr. and this lady charges \$25/hr. so as a contract employee that's as close as we can get to Karen's charge. She tells me she can do it much quicker so we'll see.

LYNN REDWOOD: Motion to adjourn.

CAROL FRITZ: Second.

**ADJOURNMENT:**

There being no further business to come before the Board, Chairman Strain adjourned the meeting at 915 a.m.

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Merle Crowe, Administrative Operations Coordinator II

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Dr. Michael Strain, Chairman