

The Fayette County Board of Health met on Tuesday, January 8, 2002, in the Public Meeting Room in the Fayette County Administrative Complex, 140 Stonewall Avenue, Fayetteville, Georgia.

Board of Health Members Present:

Dr. John DeCotis
Lynette Peterson
Lyn Redwood
Dr. Michael Strain, Chairman
A. G. VanLandingham

Staff Members Present:

Laurie Cook
Merle Crowe
Cynthia Grant
Rick Fehr
Robert Morgan
Dennis Davenport, Attorney

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

APPROVAL OF MINUTES: Dr. DeCotis made a motion for the October 9, 2001 meeting to be approved. Mr. VanLandingham seconded the motion. The motion carried unanimously.

Approval of November minutes tabled until the March meeting.

OLD BUSINESS:

Allen McCullough introduced himself as Deputy Chief of Fayette County Fire and Emergency Services, saying he served primarily as Chief of Administrative Services, specifically as Program Manager of Emergency Medical Services. He gave a bioterrorism handout to the board. He said they are responsible for coordinating all the emergency agencies and functions, as well as EMS calls which comprise about 80% of their activities.

Mr. McCullough said he had two things to review with the board: a document which outlines where the county was in preparedness for disaster, and the County's Bioterrorism Response Plan, put together with much help from the Health Department.

He said that prior to September 11th the county had a Comprehensive Response Plan in effect, but the World Trade Center attack caused this plan to be revisited. He said EMS lives by 4 words: preparation, response, mitigation, and recovery. He said local emergency management is directly responsible to GEMA (Georgia Emergency Management Agency), and

then to the Federal Emergency Management Agency (FEMA). He said this means EMS has statutory authority for coordinating local disaster response. He said state and national agencies had always been a major component of Fayette County's emergency response plan. He said since September 11th Emergency Management, Public Safety, and Public Health had been redefining their roles, factoring in Homeland Security in a way not previously considered. Mr. McCullough apologized for missing the last meeting, due to a conflict in scheduling, and stated that he understood that the board had questions about its role in the event of bioterroristic attack. He said he wanted to answer those questions and any others the board might have. He said he first wanted to address the question regarding communications between the hospital, EMS, and Public Health. He felt that those dialogues were opened prior to September 11, and ongoing meetings with all partners had been held since then. He said the hospital had opened its facilities for meetings, which were held there on a regular basis. He said there had been enormous resources given from the Region 4 EMS office, and from District 4 Health Services. He said Dr. Brackett had made numerous trips to Fayette County for meetings of all sizes. He said this had been of great value to the county, especially in the area of education. He said most communication among providers had been by email, since the flow of information from the Department of Human Resources, the state, and the federal government had been overwhelming. He said DHR protocol information on chain of custody, possible anthrax and other evidence sometimes changed three times a day. He said every player was now on rapid-fire email, rather than faxes, so that any official information is immediately communicated.

He said there had been another question regarding the role of Public Health in the event of a biochemical attack. He said that detection, identification, evaluation, eradication and recovery would be components involving Public Health and that certainly Public Health played a huge role. He commented that the system was tried on Thanksgiving Day, when a postal worker from Atlanta presented to the emergency room with flu-like symptoms. The ER physician was concerned and followed protocol: EMS was notified; Public Health was notified; samples were taken, and everyone agreed that the system worked. He said if the system worked on a holiday then it was felt that it would work well at any time. He said the patient did not have anthrax, but this provided a good test for the system.

He said that Public Health also has a vital role in shelters. He said that over 30 shelters in Fayette County had been identified; typically they were schools and churches, which is where inspection by Environmental Health becomes involved. He said there are ongoing programs to train shelter managers. He commended New Hope Baptist Church's South Campus for developing their own disaster plan which is as detailed as Fayette County's. He said they had become the model for shelters.

Mr. McCullough said he was appointed Chair of the Task Force, whose task was to put together the Bioterrorism Response Plan. He said this plan is an annex to the existing Emergency Response Plan and addresses any bioterroristic threat or event, not just anthrax. He said information that had been received enumerates many types of possible bio-attacks. He commended all Health Department Directors for regular attendance at Task Force meetings. He stated that it was felt that physician education was key to identifying bioterroristic attacks, and he discussed the Public Health Forum put on in December. He said

that about 40 physicians, nurses and various health personnel were in attendance. He commented that Dr. Brackett and Billy Watson from District 4 Health Services gave part of the program, along with EMS of Fayette; he said the initial plan was for a 1 hour in-service but it developed into about 3 hours. He said he was glad that no physicians left the forum and that they all seemed interested. He informed the board that EMS also had a PowerPoint presentation available for any board member to view as needed. He stated that another county-wide Forum would be put on in the Spring, in hopes of getting more attendees from the 127 or so physicians practicing in Fayette County. He said that physicians need to know how to recognize the difference between a rash and smallpox. He said the program seeks to educate the physician on proper protocol: not rushing the patient to the emergency room, which would cause immediate quarantine of the hospital. He said these are worst-case scenarios, and that Dr. Brackett's presentation was excellent. He said that there was a tabletop exercise planned for the spring, involving Public Health, which will test the system with worst-case scenarios. He said the forum was enlightening to all who attended.

He addressed the question of surveillance, saying that after the department had done a risk analysis it was determined that Fayette County has the normal risk profile of a community attached to a major city such as Atlanta. He said one major concern is Fayette's transient population; people who daily travel outside of the community to work. He mentioned types of jobs that cause concern: airline employees and the military. He said such transient jobs mean that the risk of bringing problems into the community is extremely high. He said that any biological event would probably show up earliest in the school system reflected by absenteeism; he said when they met with the school board EMS found that there was an excellent system already in place to determine daily numbers of students absent. He said these numbers can be compared with benchmark norms, and as soon as any peak occurs EMS would be notified and then Public Health. He said they wanted to get businesses involved as well, because spikes in absenteeism there could also trigger the system. He said that EMS had learned from Dr. Brackett that early detection is absolutely critical: if a problem can be detected, isolated, quarantined, and therapy begun, then the impact to the community can be minimized. He said EMS constantly monitors the types of calls received every day, and that they electronically survey patient records. He said they look specifically for respiratory, gastrointestinal and skin related problems because these seem to be the systems that are impaired in a biological or chemical event. He said trends would thus be noted very early. He mentioned that the hospital and local physicians were aware that certain trends needed to be reported as well.

He said future plans would be centered on training activities and getting the Bioterroristic Plan out and known. He said the plan was a work in progress, and that it was not perfect but did represent a consensus plan. He said he would be glad to answer any further questions the board might have.

Dr. DeCotis commented that Board of Education staff had been very impressed with the leadership shown by EMS, and appreciated their work in coordinating efforts in the community to combat bioterrorism.

Mr. VanLandingham commented he had called Captain Nelms about the Board of Health's concerns regarding bioterrorism after the November meeting. He said that he discovered that even then they were a step ahead, with plans in place to have Mr. McCullough speak to the board at the next meeting. He commended EMS, the school system, the health department and the entire network for developing such a comprehensive plan from the morass of available information. He also thanked Dr. Brackett for his tireless efforts and said that he appreciated all the hard work.

Mr. McCullough thanked him, and added that another goal was to educate the public as well as physicians, since rampant panic had been amply demonstrated since September 11th. He said panicky phone calls were received here and in every community, and he felt that education of the public would help to mitigate such panic.

Mr. VanLandingham commented that it was once again proven that if elected officials were left out of the proceedings, something could be accomplished.

Ms. Peterson mentioned that the Red Cross also works with Captain Nelms and George Knight in shelter management. She said they have done so in other disasters and are ready to do so again at need. She commended Mr. Knight for his extraordinary efforts.

Mr. McCullough commented that it was unfortunate that the need for such shelters had occurred but that the system was in place and worked well.

Dr. Strain mentioned that continuing the forum on an ongoing basis would be a good idea, due to inevitable future problems; West Nile Virus in the Spring, for example. He said a series of forums could cover problems not generally seen in local physician's practices.

Mr. McCullough said that they normally did meet with physicians and hospitals on an annual basis, to review their Emergency Plans and be sure everything was in place. He said that recent events had taught them that more frequent meetings would be advisable.

Dr. Strain commented that meeting more often would allow for lead-time on problems, rather than meeting on an emergency basis. He felt that semi-annual conferences would be well received by practicing physicians, who want to keep up. He said that West Nile Virus would be back, although it was not now foremost in the limelight.

PUBLIC HEALTH FORUM UPDATE:

Ms. Grant said that Mr. McCullough had done a good job covering the forum, and she gave the board the packet of information which attendees received. She said that over 127 invitations had gone out to physician's offices and to the hospital. She said a better response had been hoped for; that there were approximately 40 attendees: nurses, physicians, and some personnel from Fire Departments and EMS. She said there was a wide variety of people attending, which was a good thing. She said Public Health and the Task Force would be involved with setting up the next forum.

She mentioned that one of the conclusions reached by the Task Force was that the health department website would be a good place to put bioterrorism information. She said that Merle

had developed a link on the website where good solid information can be found. She asked if there were any questions about the forum. There were none.

FLU SHOT UPDATE:

Ms. Grant stated that a recent CDC update said that there had not been a lot of flu this year in Georgia. She said that 4,500 doses of flu vaccine had been given to date. She said that by the time the Director of Health and Human Services announced that all health departments had flu vaccine, Fayette County Health Department was out.

She said another issue that arose during Task Force meetings was public concern with flu symptoms; since most biological agents that might be used have initial symptoms much like flu symptoms it was felt that most people would be more aware of the need to get a flu shot. She said that indeed, that had proven to be the case. She mentioned that requests for flu shot clinics had been received from post offices in both Peachtree City and Fayetteville, which were given. She said another result of Task Force meetings was that an administrator in the hospital recognized that Public Health would be "under the gun" and need help due to new or increased expectations and responsibilities. She said nurses from the hospital were a big help with flu clinics. She said she received assistance with a clinic for Peachtree City employees, which included Law Enforcement, Fire personnel, and that over 100 shots were given. She said they helped with an industry flu clinic as well. She commended the hospital staff for all their help and cooperation.

Ms. Grant commented that the number of flu shots given contributed to revenues for the year being ahead of the same period last year. She mentioned that revenue from flu shots amounted to some \$32,000.

Ms. Peterson asked the cost of a dose of flu vaccine.

Ms. Grant replied it was \$14.00.

NEW BUSINESS / PUBLIC COMMENT: There was no new business or public comment.

ELECTION OF OFFICERS:

Mr. VanLandingham nominated Dr. Strain for Chair, seconded by Lyn Redwood. Mr. VanLandingham nominated Lyn Redwood for Vice Chair, seconded by Lynette Peterson. The motion carried unanimously.

STAFF REPORTS:

Ms. Grant reported the retirement of Harriett Hazelton on December 31, after 22 years of service. She mentioned that Ms. Hazelton was the Nursing Supervisor, and that Margaret Berry has been promoted to fill that position. She said that Ms. Berry came on board from Clayton County, with 12 plus years of public health experience. She said Ms. Berry's designation in Clayton County was Women's Health Specialist, so she was well qualified for the position.

She said that interviews would be held today to fill the open nursing position, and hoped that it would be filled by the end of the week.

She mentioned that secretary Geraldine Reese had tenured her resignation after 5 years of service, effective January 31st. She said an experienced public health secretary had already been hired to take her place.

Mr. VanLandingham asked if the December Activity Report was correct in listing 14 failing septic systems in Fayette County.

Mr. Fehr replied that was correct.

Dr. DeCotis commented that he felt the new activity report was great and that he appreciated receiving the information. He wanted to know if the open positions were the reason that this year's revenue was greater than last year's at the same time.

Ms. Crowe and Ms. Grant replied partly; that it was due to flu shot revenue as well.

Dr. DeCotis thanked them.

Ms. Redwood commented that a number of small fee increases approved last year also contributed.

Dr. Strain asked for any reports from the state.

Mr. Morgan replied that there were none.

ADJOURNMENT:

Motion to adjourn by Lynette Peterson, seconded by Dr. DeCotis. The meeting was adjourned at 8:20 am.

Michael Strain, MD

Merle Crowe, Admin. Ops. Coord. II

Prepared by Merle Crowe