



Westport Weston
Health District

REGULAR MEETING MINUTES

WWHD BOARD OF DIRECTORS

June 22, 2020

Subject to change until approved by the Board of Directors

The Regular Meeting was called to order by Chairman Otis Crawford at 7:03 pm. He noted that with the Governor's office reopening Connecticut, the meeting can be held in compliance with the State's directives of social distancing and no more than 25 people in a grouping. All present were wearing face coverings and chairs were spaced six feet apart. **The following voting Board Members were present:** Chairman Otis Crawford, Director Ilisa Nussbaum, Director Paul Shaum, and Director Linda Lewis Bruce.

Also present were: Mark A.R. Cooper, Director of Health, Louis D'Onofrio, Director of Clinical Care for the Health District.

Approval of Minutes

Chairman Crawford asked if there were any questions or comments on the May 11, 2020, Regular Meeting Minutes.

Director Bruce commented that under the Director of Health report where there was budget discussions on how the WWHD was doing regarding the Community Health Clinic opportunities expected after the clinic was set up with certain tests and equipment expenditures, because of COVID19 the new services utilization can't be evaluated, it should be noted that this will need to be done. Director Bruce also commented that in the last paragraph in the discussion about what role the school psychologist might have in the COVID19 response, the discussion was more about the importance of a mental health component and suggested adding "particularly regarding mental health issues" after school psychologist.

Chairman Crawford asked if there were any other questions or comments about the minutes.

There were no questions or comments. On a motion made by Director Shaum, and seconded by Director Nussbaum, the Board voted to approve the May 11, 2020, Regular Meeting Minutes as amended. Chairman Crawford voted yes; Director Bruce voted yes, Director Nussbaum voted yes, and Director Shaum voted yes.

Motion was approved 4 to 0.

Communications

Mr. Cooper noted that there has not been a lot of written communication to the office. The letter dated May 9th regarding gas leaf blowers was received the day before the May meeting and could not be added to the agenda which had already been sent out. He commented that this is a

complex issue, gas powered leaf blowers do produce fumes and noise but that there is no evidence from the CDC or State Health that they contribute to the spread of COVID19. There was general discussion on the use of gas-powered leaf blowers, lawn mowers, and other 2 cycle equipment, as well as, that there are lithium battery powered alternatives that might work well for homeowners.

Mr. Cooper noted that he was glad to share the positive letter dated the May 10th letter from Ms. Steiner, complimenting the work of WWHD staff member Ms. Menta.

Mr. Cooper thought it important that the Board members have a better understanding about the lack of leadership at the State Department of Public Health and felt the May 17th Hartford Courant article provided a thorough report. There was general discussion on the Governor's panel of experts and Boston consulting group providing COVID19 response guidance. Director Shaum asked if the State Department of Health is rudderless? Mr. Cooper agreed, commenting that he and other Directors of Health have been receiving incorrect and/or little guidance on the State's COVID19 response efforts. He added that it is his understanding there has been no public health voice at the Governor's table.

There was general discussion on the Re-open Connecticut Directives coming out of Hartford and the three levels of enforcement involving police, a municipal designee, and public health. The state has sent out fairly explicit guidelines on the roles of each entity. The WWHD is working to coordinate the local enforcement efforts, while at the same time be consistent with the public health enforcement efforts of local Directors of Health from across the state.

Chairman Crawford asked about the cost of getting tested for COVID19 at the site at St. Vincent's at 47 Long Lots Road. Mr. Cooper indicated he was not sure, but understands some people are questioning what their insurance has been charged. He believes it varies on the services provided and how often someone utilizes a testers tele-med and consultation services. Mr. Cooper acknowledged that his office has received a few complaints about the St. Vincent site, the Murphy Medical operation when it was at the Bedford Middle School, as well as complaints from people who were tested in Darien and New Canaan. He explained that the WWHD did not have any part in the testing at St. Vincent's or Bedford Middle School, other than helping get the site at Bedford set up so that there was a local testing option. The WWHD did not collect samples, conduct the testing or provide any consultations. Mr. Crawford said he thought the federal government was saying the test is free. Mr. Cooper responded free, so long as one has insurance, like when the big box pharmacy puts out the sign that says free flu shots here today with the fine print at the bottom that says, paid for by most insurance carriers. Louis D'Onofrio added that the state has issued a policy through the Department of Social Services that if someone does not have insurance and/or are underinsured, they can apply for temporary COVID19 insurance to only cover the testing. There can be charges for the visit and any consultations.

Chairman Crawford asked if the best way for someone to find out how much testing will cost would be to call St. Vincent's test center. Mr. Cooper responded by saying when such calls come into the office WWHD staff references a list of state approved testing sites in Connecticut that is available on the WWHD webpage at www.WWHD.org and suggest they call one or more of the testing sites to check price and for any testing protocols.

There was general discussion on Connecticut's testing program and how the strategy of testing is changing to focus on those areas of the state with the highest incidence of transmission.

Community Health Request

Louis D'Onofrio was present to explain the request. He is looking for Board approval to allow the WWHD to perform a statistical analysis on the COVID19 data that has been collected on Westport and Weston's COVID19 cases. Westport and Weston are among the first towns in Connecticut to have COVID-19 cases which places the WWHD in an exclusive situation to review the collected data to be better prepared for any potential second wave of COVID-19 or future pandemics. The research findings would be published.

A preliminary interval review of the data suggests that approximately 25% of the local positive COVID19 cases were potentially infected by another household member. The purpose of the proposed research would be to more comprehensively evaluate the data to better understand the dynamics of COVID19 transmission and improve COVID-19 prevention strategies. This information would be useful to the WWHD, other local health departments, and perhaps even state decision makers.

The study would be done with the help of Yale University PhD researcher/statistician consultant Dr. Frank Buono. He has offered the WWHD a discount in his normal hourly fees because of his strong belief in our research topic and WWHD's mission. Dr Buono would be able to review the data to find potential causes to why and how cohabitation infections occurred, as well as help identify potential relationships between age, race, or other demographics. Dr. Buono thinks the research would not only be published but may open the door to allow the WWHD to work with Yale University and the Connecticut Department of Public Health (DPH) on state-wide research on our topics. At a minimum, the goal would be to better understand rates of transmission from cohabitation and be better able to educate citizens on how to reduce future cohabitation infections.

Dr. Buono has indicated that he would conduct the statistical analysis at a discounted rate of \$100/hr and that he could commit about 5-10 hours to the project. There would be an additional cost for an IRB of \$ 1449 for an initial review (this has been waived until sept 15 for covid-19 articles), with a quote for the total IRB process of between \$1087 - \$1189 total.

Chairman Crawford asked what the number of participants in the study. Mr. D'Onofrio explained that when he initially pulled the data, from January to May 20th, there was about 279 cases between Westport and Weston, now there are 304 cases. This would be a retrospective study with no surveys, no identifiers, the IRB is required to verify everything went through the proper channels and so that a journal can publish the results.

Chairman Crawford asked how the data was collected. Mr. D'Onofrio indicated that the data comes from the State of Connecticut's electronic disease surveillance system, all lab results are submitted to the state by the labs doing the testing and are available to each town's health department.

Director Nussbaum asked about the study design, whether it was a questionnaire, interview... . Mr. D'Onofrio responded that it is a retroactive analysis of data, no surveys or interviews, Dr. Bono as a statistician will process the data in great detail pulling every suggestion out of it.

Chairman Crawford asked about the cost and whether the WWHD has the funds. Mr. D'Onofrio stated that Dr. Bono's services would not exceed one thousand dollars and the IRB should not be more than eleven hundred dollars, for total not to exceed twenty-one hundred dollars. Dr. Bono's services may also qualify for reimbursement through a COVID19 grant. Mr. Cooper added that the WWHD can find the funding within the existing budget.

Director Bruce asked how it would be determined what people did or how COVID19 was transmitted in the household if there is no questionnaire of survey? Mr. D'Onofrio explained that a retrospective study is fairly common and agreed there is a limitation to knowing the details on a case by case basis but that transmission inferences can be pulled from the data based on ages, gender, approximate time of infection in a household, etc.

There was general discussion on the study limitations and the sort of information that could be pulled from the data. There was consensus that it is an interesting starting point to understanding transmission in Westport and Weston.

Chairman Crawford asked if there were any other questions or comments about the minutes.

There were no questions or comments. On a motion made by Director Nussbaum, and seconded by Director Shaum, the Board voted to approve funding for the retrospective COVID19 Co-habitation transmission study up to an amount not to exceed twenty-one hundred dollars, with efforts to recoup as much of this funding possible through grants. Chairman Crawford voted yes; Director Bruce voted yes, Director Nussbaum voted yes, and Director Shaum voted yes.

Motion was approved 4 to 0.

Director of Health Report

Consolidated Income Statement and Operational & Permit Activity Reports

Mr. Cooper stated that the Board package contains Consolidated Income Statements and Operational and Permit Activity Reports for May.

Chairman Crawford commented that it appears the WWHD will end the fiscal year under budget. Mr. Cooper agreed indicating the final numbers are not in yet, but he does agree.

Mr. Cooper provided a summary of COVID19 on WWHD's operations, indicating it has essentially become the daily focus. Initially staff was dealing with positive residents, contact

tracing and lots of questions, it has now become more about reopening businesses, with lots of different questions and dealing with complaints. Permit activity levels dropped to historic low levels in March but have since recovered to record highs with over 100 plan submittals, reviews and associated work per month. Community Health staff is working daily on COVID19 cases, Environmental staff is working on the plans being submitted in addition to reopening inspections and complaint follow-up, and administrative staff is busy with numerous questions and concerns from businesses, residents, other officials, as well as state COVID19 reimbursement grant paperwork.

Mr. Cooper explained that COVID19 prevented Easton from holding a town vote on the question of joining. The vote is required by Statute for a town to join. Easton's current Director of Health and sanitarian were looking to retire June 30th. Since a vote has not been possible, as an interim measure, Easton and the WWHD Board are being asked to consider providing public health services on a contractual basis. Although the contract would be for a one-year period, either party can terminate with a 30-day notice. Easton is hopeful a vote to join can take place by November of this year, with the thought of becoming part of the District on January 1, 2021. Unfortunately, the extra state per capita funding, about ninety-seven thousand dollars, will not be realized because Easton is not joining before the end of the current fiscal year, but Mr. Cooper stated the budget can still work with some revisions.

Mr. Cooper stated that he had a legal review of the proposed contract for services which he sent out to each Director prior to the meeting. There was general discussion on the contract provisions. Director Bruce questioned if section 5 is too restrictive and whether the WWHD would be better to have it talk about time in monthly units rather than weekly. Mr. Cooper responded that these are minimum time commitments, there will be more time dedicated to field work and that these are the office hours that Easton wanted a satellite office staffed.

Chairman Crawford asked who would be staffing Easton's office. Mr. Cooper stated that initially he was going to keep the part time sanitarian Easton currently uses, increasing the hours to 20 hours per week. Unfortunately, he was just informed last week that sanitarian has left and has taken a full-time position elsewhere. Because of this development, the WWHD is not ready to take on Easton and is now suggesting the contract become effective July 15th.

Having to re-evaluate who would be covering Easton, Mr. Cooper stated that he realizes with COVID19 taking 99% of his time and with environmental staff working flat out with historic high plan review loads on top of the work they are doing to re-open and keep open businesses, someone has to be found. To this end the word was put out through the Director of Health "grape vine" that the WWHD was looking for a good part time sanitarian who could hit the ground running. The first resume was so impressive that an interview was quickly arranged which went very well and exceeded expectations. The candidate has all the educational and experience qualifications needed, as well as, being a very positive forward thinker. He also holds a master's degree in Public Health. The candidate, Mr. Cooper suggested, that might serve the WWHD's immediate, both in terms of Easton staffing and WWHD's current COVID19 response needs, as well as, planning for the continuation of WWHD operations after his (Mr. Cooper's) retirement

within 5 years. If there is a resurgence of COVID19 this fall, additional help will be needed, and this candidate has all the skill sets that are needed. Mr. Cooper stated he is considering urging the Board to consider hiring the candidate on a full-time basis but will take another look at the WWHD's fiscal condition at the end of this fiscal year and budget moving forward.

The was general discussion on the WWHD's existing and future staffing needs and impacts on the budget should someone be hired on a full-time basis versus part time. There were questions about whether the candidate would accept a part time position based on the schedule of work needed in Easton, the first interview was informal and more exploratory in nature for both candidate and the WWHD. There was discussion on the WWHD's current need for a health educator for COVID19 purposes, and for which a temporary per diem communications coordinator has been engaged during the pandemic. This candidate has a health educator background and could do communications coordination. Additionally, as the WWHD might look to expand in the future, having a staff person of this caliber would be very helpful.

Chairman Crawford asked if the candidate would take a position part time. Mr. Cooper responded that he was unsure, the first interview was very informal to determine if the candidate was interested in working for the WWHD and whether he would be someone the WWHD was interested in. No offers were made. There was agreement that another interview should be scheduled to determine whether the candidate would consider a part time 20 hours per week position.

Director Bruce asked where the position would fit into the WWHD's organizational chart. Mr. Cooper explained he has not developed the job description or exactly where this position would fit in. Initially, the intent of the position is to fill the office and field work needs of Easton, 20 hours per week. At this level the position would be at the same level as the sanitarians. Thinking a bit broader, the position could also fill the current need of a health educator/communications coordinator which the WWHD is filling with a per diem part timer, averaging about 20 hours per week. Over time, added administrative responsibility could be added. Looking at the credentials of this candidate, longer term, he might be a good candidate for Director of Health.

Director Nussbaum indicated that she thought the concept is heading in the right direction but was more comfortable starting with a part time position, not quite sure if full time is needed right away, depending on how the Easton situation unfolds.

There was general discussion on how the first informal interview went. Mr. Cooper stated that he must reconcile the need to have someone staff Easton 2 mornings per week with finding someone who can do that, plus field work, on a part time basis. Mr. Cooper emphasized that if COVID19 does not go away soon, or if there is a resurgence, the WWHD will be understaffed to adequately deal with it. There may be a need for more aggressive contact tracing, compliant follow-up and potentially vaccinations should a COVID19 vaccine be developed. The reopening effort has been very labor intensive with all staff dedicating most of the day to COVID19 related activities, in addition to trying to review all the development plans being submitted.

There was consensus that the WWHD needs to hire someone at a minimum of part time and another interview will be scheduled to determine whether the candidate can work part time with the hours needed. The Board can schedule a special meeting if needed to move forward.

There was discussion on the proposed Easton contract for services. Mr. Cooper has met several times with Easton officials, and he believes the proposed contract language satisfies what Easton is looking for. It is a one-year contract, that can be ended by either party, giving Easton enough time to schedule a public vote to join the WWHD. Director Shaum asked if the WWHD is responsible for Easton's insurance. Mr. Cooper explained that the WWHD has insurance through CIRMA for all staff activities, employees will be covered under the WWHD's existing policies.

Chairman Crawford asked if there were any other questions or comments about the proposed service contract with Easton.

There were no questions or comments. On a motion made by Director Bruce, and seconded by Director Nussbaum, the Board voted to approve entering into a contractual relationship with Easton to provide public health services on a temporary basis. Chairman Crawford voted yes; Director Bruce voted yes, Director Nussbaum voted yes, and Director Shaum voted yes.

Motion was approved 4 to 0.


Adjournment

Chairman Crawford again asked the Board and the public if there was any other business to come before the Board.

On a motion made by Director Bruce and seconded by Director Shaum, the meeting was adjourned at 8:34pm. Chairman Crawford voted yes, Director Bruce voted yes, Director Nussbaum voted yes, and Director Shaum voted yes.

Motion was approved 4 to 0.

Respectfully submitted



Mark A.R. Cooper Director of Health
Westport Weston Health District