

**Board of Health Meeting Minutes  
March 16, 2010**

**Board Members & Liaisons Present:**

Constance Young, EdD, RN, Chairperson  
Ernest Judson, Vice Chairperson  
Howard Fink, MD, Secretary  
William F. Lynch, MD  
Joan M. Costello, BSN, RN  
Mitchell Quintner, DMD  
Deborah Woods  
Ray Vitali, Board of Alderman Liaison

*Board Members & Liaisons not present:*

Diane Kruger-Carroll, Board of Education Liaison  
James Patterson, Board of Alderman Liaison

*Others Present: None*

**Health Department Staff Present**

A. Dennis McBride, MD, MPH, Health Director  
Deepa Joseph, MPH, Community Health Coordinator  
Joan Cagginello, Nurse Administrator  
Laura Miller, Environmental Chief  
Amy Shields, CRI Coordinator  
Tara Mustakos, Emergency Preparedness Coordinator

C. Young called the meeting to order at 6:40 p.m.

**Approval of Minutes – February 23, 2010**

The minutes of the meetings held on February 23, 2010 were approved unanimously on a motion by E. Judson and seconded by J. Costello.

**Environmental Health Report – Laura Miller**

**Food Protection Program**

**Food Service Establishment license renewal**

In December of 2009 and January of 2010, Food Service Establishment license renewal letters were sent out to 377 food service establishments for the 2010 licensing year. Currently, 343 establishments have renewed. There are 34 outstanding, 6 of which are itinerant vendors. Final notices have been sent out certified. In addition, renewal letters to the 11 concession stands are due to go out so that they will be licensed for the 2010 sports season.

#### Power outage – Old Gate Lane

On February 24, 2010 a truck struck a utility pole while exiting the interstate and caused a power outage on Old Gate Lane. Typically, a power outage of two hours or less is not considered hazardous to food that is held under proper temperatures when the outage begins. Refrigerated foods should be safe as long as the power was out for no more than 4 hours. However, food service establishments were without power for approximately 11 hours. Therefore it was necessary for Environmental Health Sanitarians to conduct site visits at all establishments without power in order to provide information regarding protection of perishable foods, advice on sorting and disposal of food and to monitor food and cooler temperatures and make recommendations to establishment owners and managers. Several establishments contracted with refrigerated trucks and moved perishable food items to the truck, some transported foods to other establishments they own while some could not establish that the foods inside the walk-in coolers remained under 45 degrees and had to discard the contents of the coolers. All freezers within each of the establishments were able to keep frozen foods frozen.

#### Recalls

##### Basic Food Flavors Inc.

On March 10, 2010, the CT Department of Public Health, Food Protection Program reported that Basic Food Flavors Inc. of Las Vegas initiated a recall of the hydrolyzed vegetable protein due to Salmonella contamination. Hydrolyzed vegetable protein (HVP) is a flavor enhancer used in processed foods. HVP is used in a wide variety of food products. Only products made with HVP manufactured by Basic Food Flavors are being recalled. To date, no complaints or illnesses have been reported associated with the products listed on the FDA website. Consumers who recently have purchased any of the items are being told that they should not consume any of the products and should return them to the store of purchase for a full refund or replacement. The Environmental Health Division continues to post recall notices on our website, issue health alerts, via fax and or email, to all applicable establishments i.e. Long Term Care Facilities, Health Care/Hospitals, Schools, Daycare Centers and Food Service Establishments, etc., in addition to following up with inspections. To date we have no reports of illness linked to this product recall nor have we found any product on retail shelves.

The Milford Health Department has reported that the recall is ongoing and the product list is expanding significantly, the best way to obtain an accurate list of all recalled products is to check the FDA web site on a regular basis. The FDA News Update section should also be checked for any recent additions to the recalled product list.

<http://www.fda.gov/Safety/Recalls/default.htm>

##### Anti-blight activities – Week Ending March 12, 2010

As of the week ending 3/12/2010, the Health Department has received 97 complaints of blight, 22 of which are repeat complaints. Each complaint is in various stages of the process – some properties do not meet the criteria set up in the ordinance and are being investigated under the Housing or General Public Health codes. Others are in compliance and show no cause for enforcement action, while others are still in progress or under investigation. After several inspections, reviews, and discussions with owners, thus far, 10 properties have been issued a notice of violation under the blight ordinance.

Eight properties, 71 Timber Trail, 36 Regent Terrace, 9, 11, 18, 20, 22 and 24 Shweky Beach Way have failed to comply with the orders defined in the Notice of Violation and have been referred to

the City Attorney's office for enforcement action, and the owners of these properties will be fined \$100 for each day the violation(s) continue to exist.

Total # of blight complaints	Submitted by anti-blight complaint form	Submitted by other	Repeat complaints	Notice of Violation issued	Under Investigation	Abated/remedied/closed	No cause for enforcement action	Referred to City Attorney
97	58	39	22	10	8	39	16	8

#### Housing Code Board of Appeals

On March 9, 2010 Dr. McBride, Laura Miller and Paul Scholz attended an appeal hearing before the Housing Code Board of Appeals with regards to property located at 60 Knobb Hill Rd. The Health Department received complaints about 60 Knobb Hill Rd. and after conducting several site visits, a Notice of Violation (NOV) was issued on January 6, 2010 citing violations of the Milford Housing Code and the CT Public Health Code. On January 19, 2010, acting as executor of the property, Mr. Steven Rogers appealed the NOV and requested a hearing in front of the Housing Code Board of Appeals. After hearing testimony from the appellant and the health Department, the Housing Code Board of Appeals voted to uphold the order of the Director of Health. Minutes from the meeting held on March 9, 2010 can be viewed on the City Website.

*Comments:* None

#### **Nursing Division Report – Joan Cagginello**

##### H1N1 Influenza and H1N1 Influenza Vaccination Influenza Like Illness Surveillance

The school nurses continue to collect Influenza Like Illness (ILI) in the public and parochial schools. We continue to monitor the surveillance information for patterns or trends and happily, student attendance is good with little to no evidence of ILI contributing to absenteeism.

##### H1N1 Vaccination Clinics

The Milford Health Department continues to hold weekly H1N1 influenza vaccination clinics at the Health Department throughout the month of March. Weekly clinics, held on Tuesday evenings at the Health Department, will continue through March. All people, age 6 months and older are eligible to attend the clinic to receive their vaccination. Marketing efforts to inform the public of the clinics has taken place via placement of signs in the community, informational faxes to providers and a plan to distribute H1N1 influenza vaccine clinic information at the St. Patrick's Day parade, rescheduled for March 21<sup>st</sup>. The Health Department will conclude scheduled H1N1 vaccination clinics at the end of March, however the vaccine will be available at the monthly immunization clinics.

### School Health Services

#### Professional Development Day

The school nurses will have a professional development day on March 29<sup>th</sup>. Amy Hanoian-Fontana, Community Education Specialist from the UCONN Health Center will present a four-hour program on Poisons & Poison Prevention. Following the program, the nurses will be able to present Poison Prevention programs in their schools for their students and families. Lesson plans and reproducible materials are included in the materials from the course.

The remainder of the professional development day will focus on developing the individualized health care plan and the nurse's role and contribution to the PPT/IEP process.

*Comments:* None

### **Community Health Division Report - Deepa Joseph**

#### Disease Surveillance

There were 8 cases of disease reported for the month of February. Since August 30, 2009, there have been 41 laboratory confirmed cases of 2009 H1N1 influenza in Milford with two of those cases being reported this month. The Community Health Coordinator continues to be involved in H1N1 surveillance activities, including Influenza-Like Illness surveillance in the community.

#### Putting on AIRS Asthma Program

The program received a total of 9 referrals for the month of February, for a total of 63 referrals received this contract year. The Milford Family Resource Center is in the process of developing a 4-part television series for Milford Government Access Television. The first part will focus on "Coping with Asthma in Young Children." Specifically, the 30-minute segment will feature the Putting on AIRS program. Program staff will discuss environmental triggers of asthma and go through an actual home visit during the program. The Milford Family Resource Center hopes to air the asthma episode on CPTV in April 2010.

#### Physical Activity Grant

The Milford Health Department has been working with the Boys & Girls Club of Milford on implementing physical activity programs during the Club's after-school program. The program entitled, "Backyard Games" began on March 8<sup>th</sup> and is being offered to all youth from elementary, middle, and high schools in Milford who attend the Boys & Girls Club in Milford. The long-term goal is to establish various physical activity programs that youth see as a positive, healthy, fun habit that any child can participate in. Activities that will be promoted include walking, running, and backyard games that promote increased physical activity levels per the Centers for Disease Control and Prevention guidelines.

*Comments:* None.

### **Emergency Preparedness Report – Amy Shields & Tara Mustakos**

#### **Regional/CRI Emergency Preparedness Report - Amy Shields**

A Regional Incident Management Team (IMT) is in development for Region 2. This team will include representatives from all emergency support functions. A few of these functions include fire and police, public works, and public health. Regional Emergency Planning Team (REPT) funds will be utilized for the

coordination, management, and training of this team. The IMT will bring together resources, expertise, and best practices in efforts to enhance regional emergency planning and response.

New Haven Emergency Management Directors (EMDs) hosted a workshop on shelter operations. The workshop was coordinated in preparation for the tabletop exercise scheduled for April, and provided EMDs with information to update their shelter operations plans. The tabletop exercise will present scenarios in which the shelter plans can be applied. The final step is a full-scale exercise in which Career High School in New Haven will stand as a regional shelter, and shelter operations will be tested.

The State Department of Public Health hosted an H1N1 After Action Meeting to review the operations of the state during the H1N1 pandemic. The half-day meeting was discussion based, and reviewed challenges, achievements, and lessons learned during the H1N1 pandemic. Some of the challenges included limited resources, employee burnout, and H1N1 vaccine allocation.

Milford Hospital is hosting a tabletop exercise on Mass Fatality Management. Hospital and Public Health representatives from Region 2 will attend the exercise to review fatality management and hospital evacuation plans. The exercise will present issues that may impact community health and need community participation to develop and implement mitigation strategies. The exercise is scheduled for May 5<sup>th</sup>, 2010.

### **Local Emergency Preparedness/Volunteer Activity Report - Tara Mustakos**

The Milford Health Department will continue to host H1N1 flu vaccination clinics through the end of March at the Health Department. The demand for H1N1 flu vaccine has diminished as well as the number of patients coming to the clinics. The health department does have vaccine available and will continue to offer H1N1 vaccine at the regular scheduled health department clinics.

The Milford Health Department MRC/CERT volunteers will be meeting in April for the quarterly update. Bruce Varga, our volunteer coordinator, is organizing the agenda to include Rick George, our lead Animal Control Officer with the City of Milford. Rick will speak to the volunteers about animal rescue training, animal shelter management and the two Regional trailers housed in Milford fully equipped with animal rescue/shelter materials.

MRC leaders in Region 2 have begun to meet on a regular basis. The Connecticut Department of Public Health (DPH) is reaching towards regionalization of the MRC groups by DEMHS region. MRC/CERT members will receive training through a regional effort. The purpose of this is to ensure consistency and offer additional volunteer opportunities. The DPH is working to develop region based websites for volunteer management and integration of all Public Health volunteers into the ESAR-VHP, the Emergency System for Advance Registration of Volunteer Health Professionals. More information, legal issues and memorandums of agreement between towns must be established for further development of this system and is being addressed at the state level.

*Comments:* None.

### **New Business:**

C. Young introduced Beth Boyd, the Immunization Coordinator. B. Boyd explained she is working in a grant funded position on the H1N1 Immunization clinics thru June of this year.

### **Director's Report:**

D. McBride explained that he would like the staff to give a brief overview of the H1N1 wrap-up report drafted by the core staff members. When the full report on the H1N1 wrap-up report for the Health Department is available, the report will be given at the board meeting.

#### H1N1 Wrap Up Report

D. Joseph explained that the report is broken into three parts: Pre-Event Planning, Event Onset 2009 H1N1 Influenza Pandemic and Lessons Learned: Successes, Challenges and Future Planning. She continued with a general overview of the data collected and analysis of the Milford Health Department activities conducted which revealed several successes and challenges highlighted in the report.

Dr. McBride added that the Health Department began vaccination with low amounts of vaccine, and followed the CDC guidelines for priority groups and had to turn away those outside of the priority groups early on in the pandemic. E. Judson inquired as to who else was providing vaccine. D. Joseph responded that 2 Pediatric offices, 1 Ob/Gyn practice and some Internal Medicine practices signed up to be providers with the CT Department of Public Health, however no data is available from them, as they report to the State Department of Public Health. Dr. McBride responded the Health Department had no control over other providers who were receiving and providing vaccine and have no access to their data, only the state has it.

J. Cagginello stated that a very important aspect of operations was the reliance on key players and key partners. Key players such as the Public Health/School Nurses who administered the vaccine & the Visiting Nurses Association who assisted with vaccine administration. Other partners include Milford Hospital who stored our vaccine overflow, and Milford Public Schools who have consistently been a cooperative partner in all health efforts in the schools. D. McBride added that the Milford Public Schools worked with us on communication, education about H1N1, allowing us to get word out through their Connect Ed system along with joint letters being sent out to parents and posted on their district and school websites. J. Cagginello continued that the Recreation Dept was another key working with the Health Department at Camp Happiness, to monitor the children attending camp. Since there are many medically fragile children attending camp, school nurses monitored the temperature of all children entering camp on the first day. This ensured a baseline of all children entering camp to be fever free. Children or staff developing fever thereafter were dismissed and instructed to remain home for seven days, according to the CDC advisory. Another key focus area for nursing dealt with non-pharmaceutical mitigation strategies, such as daily monitoring and reporting of Influenza Like Illness (ILI) by the school nurses and the use of partial school closure to curb the pandemic. She added that a great success was that the Health Department demonstrated the ability to set up a clinic in a variety of venues for different population groups. One of the biggest challenges of the pandemic was that there was no precedent, it was “novel” and therefore everything was new. Additionally, sustainability of the clinics and staffing must be a consideration in future planning efforts. She added that H1N1 influenza vaccination clinics will continue through the end of March; after March, H1N1 vaccine will be offered at the monthly immunization clinics.

L. Miller stated that the Environmental Staff worked on logistics. Paul Scholz, a Sanitarian, served

as Logistics Chief and put together maps, flow charts and worked with Phil Maloney, Security Coordinator, to ensure efficient patient flow during clinics. Because the clinics were at various locations, Environmental Health staff made signage, participated in transporting supplies, setting up and breaking down clinics. L. Miller added that she worked with Linda Gallick, Community Health Nurse, to educate all daycare centers on hand washing, proper sanitizing of areas and ILI surveillance. At the clinics, the staff assisted with form checking as the form was quite detailed. They also conducted education regarding hand washing techniques and sanitizing throughout public gathering places like gyms, children's play areas at the local businesses, etc.

T. Mustakos explained that planning for pandemic influenza began in 2005 when the original plan was developed. However, the CT Department of Public Health requested that plans be tailored specifically to H1N1. As this virus was a "novel" virus and there were many unknowns throughout the process, staff had to think outside of the box. The volunteers, including Milford Community Emergency Response Team (CERT) members and Medical Reserve Corps (MRC) volunteers, were a huge asset, helping with phone appointments, answering phones, assisting at the clinics with registration, form checking and with traffic. Bruce Varga, Milford Coalition Coordinator, worked to keep the team of volunteers certified with training and continued planning & meeting with volunteers. Dr. McBride added that the volunteers are a great asset to Milford and Milford should be proud.

A. Shields explained that she worked on Regional Planning for H1N1 with various groups through the Regional Pandemic Influenza Coordinating Committee, which was set up and convened by the Milford Health Department. This committee was comprised of three taskforces—Antiviral & Vaccine Administration, Mitigation, and Risk Communication. A. Shields and regional partners worked with faith based organizations on H1N1 education and getting the word out to its members. Regional staff also worked with other health departments in the region to ensure consistent communication; however the operations were at the local level. Future planning considerations specific to sustainability may focus on greater regional participation at the operations level. Dr. McBride added that regional clinics are the future for success in another pandemic.

The report identified a number of issues critical for planning and subsequent successful implementation of mass immunization.

1. Private practitioners cannot easily handle the number of people required for mass immunization.
2. Coordination of the vaccine supply is best done through the health department rather than multiple local practitioners.
3. Storage of vaccine was a problem due to inadequate space in the health department. Access to facilities at Milford Hospital eased the problem but required frequent trips to gather the necessary stock for clinics.
4. Protection of workers became evident due to the number and frequency of required clinics. Consideration is needed for the exhaustion that ensued from the workload of planning, setting up and delivering immunizations to the public by employees and volunteers.

5. Establishing regional clinics, not done during the H1N1 immunizations, would be an important method or format to sustain the requirements needed to implement an extensive immunization program.

**Adjournment:**

E. Judson motioned to adjourn the meeting, seconded by J. Costello and approved unanimously.

The meeting adjourned at 7:30 pm.

Respectfully submitted,

Beverly Hayes, BS  
Recorder