

HUMAN SERVICES COMMITTEE
Monday, January 11, 2021 - 9:30 AM

Clerk's note – This meeting was held virtually.

Joseph Giordano, Chairperson
Charles Harrington, Vice-Chairperson

Chairman Giordano called this Human Services Meeting to order at 9:30 am with the following Supervisors virtually in attendance: Clayton Barber, Robin DeLoria, Archie Depo, Stephanie DeZalia, Shaun Gilliland (in person), Joseph Giordano, Charlie Harrington, Roy Holzer, Kenneth Hughes, Steve McNally, Jim Monty, Noel Merrihew, Jay Rand, Tom Scozzafava, Jeffrey Subra, Ike Tyler, Joe Pete Wilson and Davina Winemiller.

Department Heads present: Dan Palmer (in person) Linda Beers, James Dougan, Judy Garrison, Krissy Leerkes, Michael Mascarenas and Terri Morse.

Also virtually present: Sun News, Tim Rowland, Win Belanger and Max Thwaites.

GIORDANO: We'll call the Human Services committee to order and we'll start with the pledge of allegiance. Okay, before we begin, I just want to share a brief reflection on the events of last week as it pertains to human services. So I would just like to read a little, few things here.

In light of the reverberations from the events of last week, I would like to offer a simple reflection as it relates to this committee on human services ... or rather on the importance to serve our fellow humans.

Like many of you, I watched the unthinkable acts of domestic terror unfold at the US Capitol on January 6th. And then I watched until the wee hours of January 7th as Congress completed its objective in certifying the election. As I listened to the various speeches given by Senators and Representatives alike, I was encouraged by the unity in their personal statements – upholding the tenets of our democracy.

Debates are waged everyday on every human level as to the direction we as a people desire to go. It is necessary. And while we hope the outcomes will be based on the truth, the facts, and moral principles, we also hope that those final decisions will be accepted respectfully and peacefully and carried out without malice or the intent to retaliate.

Yet, sometimes doing the will of the people can be challenged by the will of the misguided and ill-intentioned few. Yet, this is the nature of our system. It strives to be fair but it is not perfect.

So, in this moment of shock, in a year filled with much chaos and uncertainty I have been asking myself, what are we called to do?

I say, let our call be to lead by the Golden Rule. To sow seeds of respect and compassion. To truly listen to our friend, our neighbor and our adversary, so to begin to learn how to understand each other and how to better respond in constructive dialogue in lifting up those in our communities. May we remind ourselves that what we share in common far outweighs that to which we disagree.

With that I would just like to express my gratitude and appreciation for the patience, respect, and goodwill that our county family demonstrates in service to the residents in Essex County, especially over the course of the past year. Without the continued efforts of their service across all departments, life as we knew it would certainly have been much more difficult to navigate. It is my hope and prayer that we don't lose sight of this.

And with that I will turn it over to Mike Mascarenas with the Department of Social Services.

MASCARENAS: Thank you everybody. Good morning. I do have a resolution this morning. It is a resolution of appreciation to Cheri Reynolds for her over 30 years of administering the DSS Christmas program. For those of you who wander the halls, or have wondered the halls in the past, there's not a lot of that going on these days you've seen those Christmas trees that have the little decorations on them with the kids ages and sizes and what they'd like for Christmas and she puts a great deal of work into that and administering that and I just want to let her know that we do appreciate her effort and it doesn't go unnoticed.

RESOLUTION OF APPRECIATION TO CHERI REYNOLDS FOR ADMINISTERING THE DEPARTMENT OF SOCIAL SERVICES CHRISTMAS PROGRAM FOR OVER THIRTY (30) YEARS. Hughes, unanimous

MASCARENAS: I would also like to thank Jackie Thomas, Renee Baer, Susan Hathaway, Vanessa Cross, Christine Palmer, and the Sheriff's Department for all the hard work and assistance in the Toys for Tots Program. This year we did it differently as you are all aware. I want to thank the Towns too for their participation. There was over 2000 toys received in Essex County and the towns operated as a conduit to get those out to the people that needed it the most. I heard nothing but good things from the majority of you, or those that operated those for you so we seem to be successful, we deeply appreciate your involvement in that process and thank you so much.

MONTY: I'll move it Joe if he's looking for a resolution of appreciate.

RESOLUTION OF APPRECIATION TO JACKIE THOMAS, RENEE BAER, SUSAN HATHAWAY, VANESSA CROSS, CHRISTINE PALMER AND THE SHERIFF'S DEPARTMENT FOR ALL THEIR HARD WORK AND ASSISTANCE IN THE TOYS FOR TOTS PROGRAM 2020. Monty, unanimous

GIORDANO: Thank you.

MASCARENAS: One other thing in the report. The report does include the Victims Impact Panel information. We have been running that all through 2020. The information is sent to your town Justices. We are doing that in a way that's not gathering individuals, it's an offline format for those people who need that service. In some ways it's a little better, we are able to do it more frequently but it is what it is and we still are doing that so if you need that information, it's in the report.

GIORDANO: Thank you Mike. Any questions for Mike? With that, we'll move onto Mental Health with Terri Morse. Good morning Terri.

MORSE: Good morning everyone, how are you? I have a few updates that have transpired over the last week or since the first of January. I wanted to update you on the housing project that I spoke about last month. We should have received notification that the ESHY grant was awarded or was not awarded to those of you who submitted applications on December 8th and we still do not know the outcome of that so that's still pending.

I also wanted to let you know that we are temporarily suspending our in community mental health services at schools and at Ticonderoga Hospital until the rates of Covid come down somewhat. There's lots of disruption that happens when schools either suspend their own services because

of higher rates and positive cases and so we're just taking the position that we're not going to provide in person services until the rates come down. That doesn't mean that services they won't be provided to schools they'll continue to be provided to schools but just not in person. So this is an effort to protect our staff, because the services provided in close quarters at the schools and there was lots of interaction with students and educators. Every two weeks we'll look at this and as soon as we feel that it's safe to do so we'll be going into the communities.

I wanted to also let you know that in case you were not aware, Dr. Savel in our community has ceased providing care to the community in Elizabethtown. There are a fair amount of individuals that Dr. Savel provides treatment to for psychiatric medications. It is concerning for the mental health community because sometimes his prescribing standards do not match what we would feel is a safe level of prescribing for individuals of benzodiazepines and other controlled substances like Adderall, stimulants and even opioids and medication assisted treatment. In coordination with St. Joes', Conifer Park and also the Elizabethtown Hospital specifically Dr. Clauss, the ER Director we have created a plan that we hope will help those who may have been prescribed doses that are not considered medically warranted and there will be an effective plan utilizing the Crown Point Health Center as the point organization to help those individuals address their prescribing standards that are concerning. Trying to be very diplomatic on how I delivered that message.

SCOZZAFAVA: You did well.

MORSE: Thank you. That is my report today.

HOLZER: Terri, how many clients that we are talking about that have been on these medications throughout your program and two, how are you going to wean these people off?

MORSE: So benzodiazepines in particular are very, very dangerous medications to cut somebody off of just cold turkey they can put somebody at a life-threatening risk so any titration plans have to be done using medical care and so if the prescribing is above what our agency has as a threshold we will be referring them to the Crown Point Health Center because the Crown Point Health Center is going to be working with those individuals. So let's say somebody was prescribed eight milligrams of Xanax, our threshold is we will not prescribe any more than two milligrams per day, daily dose. So you could not take somebody from eight milligrams down to two milligrams and have that to be a safe plan that is why the Crown Point Health Center is looking at every individual individually. So, to answer your question I do not know the number of individuals that are prescribed by Savel's office.

HOLZER: I would like to know how many people we are actually talking about because this could be a real big issue.

MORSE: I can do my best to get that information but I don't know how I would get that information. Linda, do you have any ideas about how we can find out how many people are prescribed? I'm just thinking it's a HIPPA issue.

BEERS: Yes, we might get numbers off I-Stock, all controlled substances are regulated and I believe a provider ID is on them. I'm not sure how to access it but I believe there is a way given what we're talking about in that I Stock program that clearly was looking at high end prescribers so I'm willing to help. I'll see what I can. I'll send out some emails today to some folks that are really high up on this kind of hacking in. There are actually people we met through the Essex County Heroin Opioid Coalition a few years back and they came here from Vermont, and they

were able to tease out specific providers and this isn't a state program it's Federal so whatever they did I think we should be able to access. So, it's a great question. I appreciate that question and I will work with Terri to see if we can get that number.

HOLZER: Okay.

SCOZZAFAVA: I have a question. So, I would assume that the practice that is closing has turned over the patient's records to Crown Point or wherever they are going? I remember when the Mineville Health Center closed, it was quite a process to go through to have those patient's records transferred over to Hudson Headwaters. I mean, this wasn't something that happened overnight, it was a process.

GILLILLAND: Joe, can I interrupt real quick? I'm concerned and Dan is as well, we may be entering some HIPPA issues right now and we probably should, if we're going to discuss this issue should go into executive session.

SCOZZAFAVA: If I could just continue for one, and I won't get into any HIPPA issues but I really don't see how this board plays a role in any of this other than mental health. I mean, I don't see how we get involved in the transfer of patient's records or any of that because there's absolute guidelines that they have, Dr. Savel has to follow through the Department of Health. You don't just hang a shingle on your door and say I'm closed. It's not that simple and I know from personal experience because I've been through it.

BEERS: I will say, this wasn't a scheduled thing, this is an unforsaken event just so you know. Like you said, this could happen to any provider, anywhere you know, whatever, somebody gets in a car accident there's multiple reasons a provider would stop abruptly from being a provider that didn't potentially make a plan for a closure so I think that's what we're talking about here and I think Terri has done an amazing job of collaborating, getting partners together to support this group.

SCOZZAFAVA: Great.

GIORDANO: Great. Thank you Linda and thank you Terri.

MORSE: Sure.

GIORDANO: Do you have anything else?

MORSE: I do not. Thank you.

GIORDANO: Does anyone else have any other questions for Terri? Okay, if not, we'll move onto Linda, Public Health. Good morning Linda.

BEERS: It's going to be really silly, but I don't know honestly, if I have any resolutions on the table? Do I? My staff put them in sometimes and they usually are fiscal. Do I have anything Judy?

GARRISON: No, I haven't received anything Linda.

BEERS: Fantastic. I didn't think so but sometimes they sneak one by me. So I will give you a

quick Covid update, lots of things to discuss. I did do a quick power point, not sure if there's time for it? You let me know and I can send it to you anyway. The power point is really the things you can get off New York State's website I kind of just consolidated for you. It doesn't have to be reviewed here but we can talk about things in generalities.

So, let me just give you an update. Where do we stand now? Today there's 140 cases that means positive, Covid people in Essex County. We have over 500 people in quarantine. We have seen our rates go down fabulously. We went from 30 a day last week to about I think we had about 10 a day over the weekend so that's considerable, right, room to breathe. Good job Essex County. Keep it up. We have to stop the gatherings. Last week I had the opportunity to be on a meeting type of thing that Elizabethtown Community Hospital set up and that was all that was reiterated right, stay fast, reduce your sizes, get to small groups again, we're all indoors. That's really what's happening and we know for a fact because we've interviewed every one of these people. It's always gathering. It wasn't some random act, it wasn't going per say, it's gathering in small groups that people say so really that's our big word today. You know, reduce that, stay masked, wash your hands, stay true to that the vaccine is here and it's coming. We'll talk about that.

So one of the things that we did and I think I've expressed to you repeatedly in the past was we were really working the people in isolation and sending all of our close contacts those are the people in quarantine, to what we call the BCC, the State System. The State System has been bogged down. They were taking two and three days if not more, to get back to our people. Also the last time we met, I asked and Shaun and many of my fellow Department heads, I cannot thank them enough answered. Dan Palmer sent out an email and I have nine additional staff. It's not nine FTE's, some are here one day, some are here two days but between them we have nine staff that were given to the Health Department at various times. Dave Reynolds group, Joe Provoncha gave us a woman, she's here full-time Monday through Friday. I cannot tell you what that means to us, having somebody, an extra person to answer the phones, do those things. Terri Morse gave us back Stefanie Miller who was already trained. She walked right back in the door, I can't tell you what a relief it was so through collaborations through county departments, we are nine stronger in bodies. I think we'll make up about four FTE's out of that group, maybe five. They are all right now training on the John Hopkins training and we expect to get them all up and running. What does that mean? We are going to start working on taking back some of our own contact tracing. We are working on getting a hotline so when we call our contacts, these are people in quarantine we're going to give them a number, they are going to be able to call that number during business hours. There's always an on call person and get somebody specifically to talk about quarantine questions. We've heard from people that it didn't move as smoothly. We've streamlined our processes here unbelievable. Jessica Darney Buehler, I can only say her name 100 times. Andrea Whitmarsh and all the staff here have done just an amazing job but Jessica's leadership through this streamlined this process I think probably better well, great job and other counties are still struggling. We've really, I think come to the other side of it this weekend through some really, really great planning.

So, what's happening with other things? So what can I tell you about besides those numbers? I can tell you we've had experiences with schools. I can tell you that Essex County has grit. Other school districts have really wanted to close repeatedly. I meet with every Superintendent of every school, every Tuesday. They are never not been on the call, and if they are not there, which has not happened once they have somebody else scheduled every Tuesday we go over the same thing. Where do you stand? What's your comfort level? So just to give you an idea Lake Placid has a group in quarantine, Moriah has a group in quarantine, CV Tech has a group in quarantine, Lakeside School has a group in quarantine and Willsboro has a group in quarantine. None of those schools are staying closed. Downstate, I talked to my friend Dr. Eisenstein, Nassau County gets 1500 people a day positive they have a 90% rate of keeping schools open amongst that

because the data still shows keeping kids in school is safer than them being outside. The connection is that all these people that came to the school came from the outside with the virus, they did not get it in the school. It hasn't spread in school. So we know people are washing their hands, socially distancing, wearing masks doing all that right stuff so I said I would support the schools in our community as long as they felt it was safe to stay open and we're still staying open amongst all of this so I think it's important and I think it's a testament to our schools. We're also prepared to do yellow zoning which is when schools get to a rate that's too high. We have not hit that yellow zone but I want you to know that I have what's called LSL license, I have a blanket standing order from Dr. Celotti to use with those schools and I will do that and we have the ability here at our department to provide testing for 20% of every student, every student right now in Essex County. So those are important measures and that's why the schools felt comfortable in keeping open.

So, that's kind of where we stand on overarching. I will say we've had some concerns, things that are bringing concerns up numbers Montcalm Manor had some positives they are wrapping it right back in, working closely with the State. Champlain Valley which is an assisted living, has had positives. Walmart in Ticonderoga has seen an increase in employees that are specific to there that are positive. Mountain Lake Services, they have done an unbelievable job in keeping it from one house to the next but it still spread. They have had multiple, multiple quarantines and as essential workers they had to call their employees back and have been extremely creative in keeping their people and their staff healthy and moving forward. And then as you know, I think we reported I think Thursday FCI, Ray Brook with a huge amount of inmates there that were positive and we are working really closely with them. I facilitated a call on Friday with AMC, our department and Ray Brook to understand what we could do to support them if they had it locked down. Warden Lovit if anybody remembers a long time ago, was on the call and he assured everybody that he's got it under control but we schedule calls every Tuesday myself, AMC, we will be on a call with FCI Ray Brook to understand if their cases are going up down and whether they need support and if there is going into community spread which would be of course Correction Officers and all the Civilians that work there. I think that covers isolation, quarantine and that. Are there any questions on that?

SCOZZAFAVA: I have a couple questions. Two questions, the number one question that I seem to get daily, continuously from my senior citizens in fact some have called, some have even stopped down here, some are Veterans as to when are they going to be vaccinated?

BEERS: So, Tom I'm going to talk about that.

SCOZZAFAVA: Yes, good I hope you do because that is one of the biggest concerns I have.

BEERS: I just wanted to know if there are any questions on what I just talked about?

WINEMILLER: I have a question.

BEERS: Quarantine, numbers, amount of people we're all good with that?

GIORDANO: I'm sorry, Davina has a question.

WINEMILLER: Thanks Linda. I was just wondering if you knew anything about Coakley's in Saranac Lake if they had some type of an outbreak there? I know two people that worked there are sick and being tested. Do you have anything on that?

BEERS: We can talk about that after. I wouldn't bring it up here anyway to be fair. That's a very specific question and there's only probably like five people that work there so I would be very cautious about saying anything about that and we can talk about it. Let's have a conversation after this call. Just to be clear, there's lots of small organizations that have positive people. This is not uncommon in anyone of your towns that people's isolation order is 10 days and the quarantine order is 10 days right? So we're getting through them and people have done remarkable so that's good news. Davina, does that work?

WINEMILLER: Sure. Actually I do want to ask a question. I know in the past, when something has come up at a store for example, Hannaford's in Lake Placid you know, it was announced, if you were there from this time to that time, I haven't seen anything like that for this particular store.

BEERS: We are not doing that anymore. That's called proximate contact and it warranted no further positives. So, given the amount of spread and given what we tell everybody every single time, whenever you leave your home you have to assume and assess some risk. There are people in every store. I didn't issue anything for Walmart because I have no idea who's been around what. We work with the cases the people that are positive and say, have you been within six feet for more than 10 minutes? If they identify customers, we do that. If we think that there's a threat because they, people were really front facing and there wasn't distance and there was an issue where people who were really close to one another, say, like Terri Morse had a positive we still wouldn't issue a blanket statement because Terri could identify everybody that she was with but if it was a group of people we were not aware of and nobody kept track, we would do that but across the state, we stopped doing that. So we have no intention to issue blanket announcements unless we believe or assess there to be a risk to do that. So, at this time I don't know specifically again, what you're talking about. We do occasionally do that and it's because the people that were involved are extremely front facing and they've disclosed that they can't identify who they were with six feet, ten minutes and they identified there's been multiple people and they don't know who they are. That's when we do that.

WINEMILLER: Thank you.

BEERS: Your welcome.

RAND: Linda, do you still want us to recruit people for tracing or are you good on that?

BEERS: You have been the King. I cannot tell you and how wonderful it was, that when I asked you, you all answered so I am going to tell you we are going to post a job. I have the emails of everybody that applied. I am going to send them the link to the job. We have a full-time contact tracer position. I changed all the people out from volunteers to who wanted to be paid. Every volunteer has been called and nine volunteers sit here now and another group behind it but we can't train more than that at a time and still do our job. The majority and a lot of people wanted some type of payment and I wasn't set up really to provide that type. We do have a full-time job and I don't know if I told you about the school specialist that I had resigned, so that job is back out on the docket. So, those jobs though just so we understand that they're full-time and there's one of them that is through another organization particularly the school specialist and both jobs require a four-year degree. So I know we had raring commitments to that and continue and proceed in this vein, and these nine people I have in the next group of volunteers aren't behind it but after in consultation with Shaun and Dan Palmer I think we decided we would use this county group of employees that were offered and at the time, I asked I didn't know we're going to get such a great response. So, I am grateful for that group and again, I'm going to send them links

these are folks that identified that they wanted to be paid. I'm going to send them links to these two new positions we have. If anything opens up in the future, I have talked to Shaun and Jennifer Mascarenas about a contracted position which might be easier lift for us because it would get out of all the other, physicals and the month that it takes but I'll let you know as we move forward.

RAND: Great. Thanks.

MONTY: Linda, as of today, Phase 1B is supposed to be rolled out from the Governor. Are we prepared for that at all or have we made any preparations?

BEERS: That's where I'm headed right now, I just wanted to get rid of all those things so let's talk about vaccinations. We did a Power point but I'm going to leave it down there. So obviously, we prior to this, the Essex County Health Department's plan was written and submitted, viewed and agreed to by the State. We were going to start vaccination at the Essex County Health Department in February, that wasn't by accident. That's when the plan that was originally written, identify the priority groups that hospitals, FQHC's and at the time potentially pharmacies were going to do. We rolled out our plan February 1st because that's when we thought the bigger groups would come on and mass vaccination. To our surprise and as you know, these things have changed and they're all moved up. So last week we ordered 100 doses of the vaccine and we just got confirmed today. So by the end of the week Essex County Health Department will be doing vaccination after this week and we wanted to do a small amount to make sure we have all the kinks out we will be ordering more vaccine and doing priority groups. So yeah, we have a plan. We've had a plan. We have it. I can't even tell you. We're up. We're ready. We're organized and we're ready to go. The concerns I have and I think everybody or if you've been following this is we would like to do what we plan to do was a pod meaning people would drive to us that were in any one of these groups. It makes sense to us now and just so you know, over the weekend and I've been working with many folks on this call Krissy Leerkes, Terri Morse they are working on identifying these groups. I know Krissy will tell me by the end of the day, where those 75 and older are, Terri Morse will tell me now who not. We still want to work on 1A's. Many of the people in the 1A group didn't get it. Terri sent out emails to her people this morning saying, who was not vaccinated in the 1A group? We're going to prioritize those groups. So what I'm pledging to do is identify a group, know the numbers that are there, not the number staffed because we find some groups are at 50% vaccination rate, some are at 80. My department 58 people, two people no one had surgery and one just isn't sure. That's a pretty high rate right? We're hoping for 100 but I don't want to plan you tell me we have 400 employees and I get there and only 150 people want it so we will use what's called CDMS, we will identify groups, we'll send out links to that group working with the supervisor of that group and they will tell us how many people and we will register those people. We will go there knowing planned and how many vaccines we're going to distribute and we will continue to move around this county. We will be mobile. We are not going to ask people to drive 100 miles or 50 miles and we will continue to do that so at this point it makes more sense for us given these priority groups to identify them, identify the number. So if Dave Reynolds says, I have 52 people and I have 100 doses I know I could do a pod with him on Wednesday, close pod, do 52 people and then find another group to get rid of the other 40 and understand that in a very controlled way, have 100 doses done. If it's a group like we are working with our assisted living, remember it's only 75 and older not everybody that lives there is so I can only vaccinate that group. So I can't go to a lot of groups that I can only do 10 vaccines for so we're really going to try and get it out to the biggest bang for the biggest buck that's our plan.

SCOZZAFAVA: Can I ask a question, while we are on the 75 and older group and I don't disagree,

with but most people dying between 50 and death but anyway, I know you know make those rules so what about the people that aren't in an assisted living, they aren't in a nursing home, they live alone how are we going to get these people vaccinated?

BEERS: So we have several plans, several plans working with Krissy like last week and the weeks before one of the things that is a barrier to care we believed and we came up with a meeting with us CDMS is a requirement to the covid vaccine and that requires an email and I'll let Krissy talk about how she conquered that concern and how she's going to support Essex County Seniors and moving forward with any of that was pretty creative and I think has a fantastic plan and again, booster population. So do you want to talk about that quick?

LEERKES: Yeah, so working with Linda and her team we've created a generic aging at Essexcountyny.gov email. As Linda mentioned you have to have an email address to register. So any older adult that does not have support from friends, family members' other supports that they would be able to access an email they can all into us and our staff will be trained to be able to help them register at the most appropriate location that best meets their needs and ensure that they can get vaccinated.

SCOZZAFAVA: Is that going on right now because I have people that don't have email, if I have them call your office? I mean are we starting that process now or is this something that the plan is for down the road?

BEERS: So, I just want to be very cautious this group has fourteen weeks to rule out I think you're missing. I mean, that's the Governor's word. We don't expect at all to do this group until April from now until April vaccine will roll in and this group be equally so I'm not the only one obviously with vaccine. So Shaun and I are both on a call every Tuesday and Thursday at 7:30 a.m. and that is what's called the Hub so in Essex County, CVPH has been giving vaccine, Hudson Headwaters has been giving links to vaccine, and Elizabethtown Community Hospital has been giving links to vaccine. I wrote emails all weekend long to all those groups saying let's coordinate this. If I say, I'll take teachers I can go to those groups with our van, with our NRC, with our nurses and in one day do all of Moriah staff right? I mean, I have the right amount of vaccine, the right amount of staff, I know how to do this.

SCOZZAFAVA: I understand and I get all that. Krissy, let me get back to you a second so my question is, if I have a constituent who is elderly, calls my office, they don't have email and they don't have access to email and they are asking me about the vaccine who do I refer them to? Do I send them to your office to get more information? I mean, where do I send them?

GILLILLAND: Tom, this is Shaun. Let me just say, the Governor announced the end of last week that because they screwed up 1A so bad he's opening it up to 1B and but, we don't have vaccine and they haven't even, the State is supposedly going to put out a system that you can sign up online, they don't have that yet, we don't have that yet. I would say, give the team until the end of the week at least here to get this organized before we send out 7,000 different strategies.

SCOZZAFAVA: I understand that. Krissy mentioned a program, my question is, maybe I'm the one complicating this. Is this program online now? Do seniors register on this right now?

LEERKES: No.

SCOZZAFAVA: Okay, thank you. That was my question.

GILLILLAND: Alright just bear in mind that if you have 20 million people in the State of New York and they can only give us 300,000 doses, it's going to take us 66 weeks to get vaccinated.

BEERS: So I have some numbers just to date in Essex County 1,058 people have been vaccinated. That's what my system shows me which is called the NICEST system so 37,000 plus people, 1,058 of us have been vaccinated. Just so that gives you a hand at where we're at with what is happened with 1A. So, what I would say Tom is the FQHC's, Federally Qualified Health Centers are all also in a very good position to have seniors go to their doctors and get them especially if your seniors were Hudson Headwater people that's their provider and they have vaccine and potentially people that have the ability to move and are ambulatory should go to their primary care doctor, this group there are adverse reactions to this group and I have concerns that people over 75 should be in an environment where they can be watched, sitting in a chair for a time afterwards and have the expert level eyes on them and perhaps that's it. I would suggest that again, I'm hoping tomorrow, Tuesday at 7:30 in the morning when we attend this meeting when Hudson Headwaters is on the call and Elizabethtown Community Hospital they say what their plan is because it's really hard for us to formulate a plan when they are doing opposite things. I'm just going to be, I work with schools, my phone blew up all weekend long and then I understand that Hudson Headwaters opened up links both on Saturday and Sunday and teachers signed up. So now, why would I go to a school when half the teachers already signed up differently right? So it's really convoluted and I'm hoping it gets better but I'm really hoping that seniors are addressed through that and I will tell you, I will work with Krissy to meet all of their needs. We are not prioritizing them. My concern is, I don't want to overpromise, under deliver. I cannot say we have vaccine. I have 100 doses, that is going to go so quick and I can't say, oh, I'm going to pick you and not you, it's very challenging. The Governor and I looked really carefully to see these pages says, repeatedly in this 1A and 1B there is no prioritization of one group of the other so people can yell it, the police can I am, teachers can say I am but in the Governor's regulation they are all equal. So we will do our best to cover as many groups equally and equitably as we can and find despaired populations honestly that's where we're going to really put our bang for the buck. If you can drive and get there, you should do it. If we can help people and go to groups that are struggling for mobility and whatnot, we'll hit them. We also have mobility clinics set up. Don Jaquish's group worked with us. We have drive-thru clinics all set up at several locations where the person doesn't even get out of the car. So we're ready for this, again, is there going to be vaccine? Who else is doing it? I don't want to duplicate services. So I'm hoping that tomorrow we have more information and I'll do my best with Shaun to communicate that to all of you and let you know that there's a different plan and this is how we're going to roll it out. I also was told there's a webinar this morning or today by the Governor to local health departments telling us what we're going to do. So, stay tuned.

GIORDANO: Thank you Linda.

DEZALIA: Linda, so you say you have possibly 100 doses coming in this week and you disperse those 100 doses are you immediately making the appointment with those 100 people for their second does? And you are assured that you'll have that 100 to give to them in 20 some days? Is that how this is working?

BEERS: Yes, absolutely. The day you get your first dose you will get an appointment for your second does and we will do whatever, however you got the first dose going around. We have a calendar, it's very detailed with pods where we'll circulate back in 28 days. We are only giving Moderna, we're not giving Pfizer and we know exactly when it is and there is some leeway it's not

exactly 28 days. I mean, you want to shoot for that but there's leeway and so wherever we are we will circle back to that 28 days later absolutely great question.

DEZALIA: And they have their appointment right then, already for that following one? Okay. Thank you.

BEERS: Your welcome.

GIORDANO: Great, thanks Linda. Anyone else have a question on this otherwise we can hope to maybe have a report next week at one of the committee meetings after you and Shaun and the rest of the team kind of lay out more of a plan. No other questions for Linda we'll jump to Office for the Aging, Krissy Leerkes.

LEERKES: Good morning everybody. Judy had e-mailed out a brief report that I had sent to her. I just want to call your attention that the emergency component of the Home Energy Assistance Program opened up on January 4. So those individuals that are now an emergency manner with their fuel delivery, or propane or electric can now, you know potentially if they meet the eligibility criteria be eligible for emergency heat.

We're working with Cornell Co-operative Extension, their master gardeners as well as a pilot project through New York Office for the Aging to do some virtual online programming just to decrease social isolation so stay tuned for more information on that.

We did receive another shipment of our companion pets. So those are the little cats and dogs that we've been giving out to isolated homebound individuals again, just to try and decrease social isolation.

Right now, we talked about open enrollment for Medicare from October 15 to December 8 now is a second round of open enrollment for those individuals that have a Medicare Advantage plan so we're back in the thick of that and again, we're just working really closely with Linda and her team just in Covid response in general as a whole but obviously now as the vaccine becomes available potentially so as always just give us a call if anybody has any questions and if anybody has any questions now I can take those.

GIORDANO: Any questions for Krissy? Any other items to be brought before this committee?

PALMER: Joe, if I could? I just want to revisit the Dr. Savel thing. You know, I don't want the misperception out there that we somehow are saying that Dr. Savel has done something wrong or incorrect. That's not the case. Every physician determines their own standards and how they deliver their medical to their patients. All we're saying is that some of those patients are no longer under Dr. Savel's prescribing plans and they are falling back to us and we just have a different standard for that which we're going to have to address with those patients. I just want to be really clear, that we're not saying that Dr. Savel has done anything wrong or incorrect here. Thank you.

SCOZZAFAVA: If anything Mr. Chairman I think this body should do a resolution of appreciation for Dr. Savel and all of his years of service to the people of Essex County and the Town of Elizabethtown.

GIORDANO: Would you like to move that Tom?

SCOZZAFAVA: I would so move.

GIORDANO: Anybody like to second it?

BEERS: Can I just say I'm not sure that Dr. Savel won't come back just so we're really clear. I don't mean that you wouldn't do this but I'm just saying, you know he's taking a Hyannis.

SCOZZAFAVA: Well, if he comes back we'll just rescind it.

PALMER: I honestly think we may have a resolution on the books for Dr. Savel who was our physician for the nursing home. I think at the time we got done there we may have done something.

SCOZZAFAVA: Yes. You're correct, I believe we did.

BEERS: Can I just, I just got an email from somebody they were enroute to CVPH to get a vaccine they were signed up for and they were enroute and they were just told their shipment didn't come in so this is the kind of thing, right. So they have registered people to vaccinate today that filled out the forms and their shipment did not come in. They don't have any. That's why I really, I don't want to give people any kind of false hope. Let's make sure I have vaccine and move forward every time. I have a confirmation today saying that I am getting what I said I was ordered when I pre-ordered. I pre-order every Tuesday and we can talk about that group and talk about things then. But honestly, there's many, many groups and I'm going to work with Shaun to prioritize them and work with our Covid other people that are moving out vaccine. I just wanted you to know that's the kind of thing that's happening across the state. This is extremely challenging. Sorry to interrupt.

GIORDANO: No, I think we got that Linda. The logistics aspect of it, certainly not only that trying to coordinate with groups, but also the individuals and then those who take the initiative on their own not waiting for one of the three qualified health services to coordinate with them. So, we'll just look forward to you and Shaun getting back to the board I guess with the information that you have once it's solidified. I think that would be the most prudent. Tom, did you still want to move that resolution?

SCOZZAFAVA: We can hold off until Dan checks and we know exactly what his plans are.

GIORDANO: Okay, that sounds like a good idea.
Anything else to come before Human Services? If not, we will adjourn. Thank you.

As there was no further discussion to come before this Human Services Committee it was adjourned at 10:21 a.m.

Respectfully submitted,

Judith Garrison, Clerk
Board of Supervisors