ALLEGHENY COUNTY BOARD OF HEALTH

MINUTES

January 6, 2020

Present: Lee Harrison, MD, Chair

William Youngblood, Vice Chair Debra Bogen, MD, Secretary

Anthony Ferraro
Ellen Stewart, MD
Edith Shapira, MD
Donald Burke, MD
Joylette Portlock, PhD
Caroline Mitchell

Absent: Kotayya Kondaveeti, MD

1. Call to Order

Due to the emergency order issued by Governor Wolf in relation to COVID-19, the meeting was held virtually. The meeting was livestreamed online, in order to enable the public to observe the meeting. Public comments were submitted in writing in advance and were read during the meeting by Todd Bogdanovich.

Dr. Harrison called the meeting to order. He announced that an executive session was held to discuss litigation.

2. Approval of Minutes from November 4, 2020

Dr. Harrison asked if there were any comments or questions about the minutes. There were none.

Action: Dr. Shapira moved to approve the minutes, Dr. Stewart seconded the motion. **Motion passed unanimously.**

3. **Election of Officers for 2021**

Action: Dr. Shapira moved to nominate Dr. Harrison as the Chairman, Mr. Ferraro seconded the motion.

Motion passed unanimously. Dr. Harrison abstained from voting on the motion.

Action: Dr. Stewart moved to nominate Mr. Youngblood as the Vice-Chairman, Dr. Shapira seconded the motion.

Motion passed unanimously. Mr. Youngblood abstained from voting on the motion.

4. Public Comments on Agenda Items

A. Pat Dodson, re: COVID-19 Update

Ms. Dodson wrote to ask the Board to inform the public when the COVID vaccine will be available for seniors and how they can receive it.

5. Old Business

A. COVID-19 Update

Dr. Bogen shared metrics regarding the weekly trends of cases, positive test results, deaths, and hospitalizations with the Board. All these metrics began to decline after the middle of December. She informed the Board that yesterday Allegheny County experienced its one thousandth death from COVID. Sixty-four percent of deaths are associated with long-term care facilities. This percentage shows the need to speedily vaccinate the long-term care facilities. However, Allegheny County has also seen the deaths of relatively young people. Sixteen deaths occurred among County residents below age 50.

Dr. Bogen provided data to compare Allegheny County to the rest of Pennsylvania. The incidence rate in the most recent 7 days per 100,000 residents was 231.9 in Allegheny County and 315.5 in Pennsylvania. The positivity rate of PCR tests in the most recent 7 days was 11.2% in Allegheny County and 15% in Pennsylvania. The percentage of hospital emergency department visits due to COVID-like-illness in the most recent 7 days was 0.8% in Allegheny County and 1.2% in Pennsylvania. Over the most recent 7 day period all of the following key indicators were trending downward in Allegheny County: newly reported confirmed cases, the incidence rate per 100,000 residents, the PCR testing positivity rate, the number of average daily COVID-19 specific hospitalizations, the number of average daily COVID-19 patients on ventilators, and the percent of hospital emergency department visits due to COVID-like-illness. Racial disparities regarding COVID within Allegheny County still exist, but the disparity for the percentage of cases is decreasing.

Regarding COVID-19's impacts on students and educators, Allegheny County had 242 cases among K-12 students in November, and 159 cases among K-12 staff. In December, there were 1118 cases among K-12 students, and 115 among staff. Most of these cases occurred with high school students and staff. Attending school is a low-risk behavior. Cases among K-12 students and staff have never exceeded 10% of the total number of cases within the County.

PCR Curative testing continues to be conducted at the McKeesport testing site; and, at ACHD's community partners such as faith-based testing sites, FQHCs, and mobile testing clinics staffed by the Squirrel Hill Health Center. ACHD and its partners have conducted 40,214 PCR Curative tests within the past 60 days. The positivity rate from these tests peaked in early

December. Dr. Harrison asked what the turn-around time is for test results. Dr. Bogen stated that they're generally very good with results available within 48 hours.

Dr. Bogen next informed the Board about Abbott BinaxNow Rapid Antigen Tests. These tests have been purchased by the Federal government and distributed to the states. The states then send these tests to their counties. The Abbott BinaxNow Rapid Antigen Tests produce both false positive and false negatives. They are best for use with symptomatic or repeat screenings in congregate settings. Allegheny County's initial supply was received in early December and more arrived this week. The tests have been distributed to priority groups established by the state. Such groups include Pittsburgh Mercy to conduct screenings in homeless shelters, FQHCs, long-term care facilities, and drug-and-alcohol rehab programs. ACHD continues to reach out to eligible organizations.

ACHD distributed 1,851 influenza vaccine through the Immunization Clinic, PODs, and events for County employees and community members. Flu cases are very low to date, with only 44 confirmed cases. This contrasts against last year, when there were more than 4,000 cases by this time. Dr. Bogen stated that the very low number of influenza cases demonstrates the benefits of masking.

Dr. Bogen stated that it is very exciting that a vaccine for COVID has arrived. Vaccination guidelines for prioritization of vaccination have been established by ACIP. There are four prioritization phases. Phase 1A encompasses priority populations of healthcare workers and residents and staff of long-term care facilities as well as skilled nursing and assisted living facilities. Phase 1B encompasses frontline essential workers other than healthcare workers and people aged 75 and older. Phase 1C encompasses all those who are aged between 65 and 74, people aged between 16 and 64 who have health conditions that increase their risk for severe COVID-19 and essential workers who were not previously included in Phase 1A or 1B. Phase 2 encompasses all other persons aged 16 and above who were not included in Phases 1A, 1B, or 1C. Dr. Bogen stated that ACHD is following state and ACIP guidance for vaccination.

There are approximately one million adults in Allegheny County, of whom approximately 8.3% (83,000) are eligible to be included in Phase 1A. If 80% of those accept the vaccine when offered to them, this would be approximately 66,400 people. The current rate at the end of December is that approximately 2,000 doses per day are being administered. This rate will rapidly increase. Hospital systems are vaccinating their staff and are starting to vaccinate others. ACHD received its first shipment of vaccines on December 23rd, and as of January 5th has administered approximately 700 doses. ACHD today opened a vaccination site located at the Monroeville Doubletree Hotel staffed by County employees and volunteers from the Medical Reserve Corps.

Dr. Portlock expressed concern about the potential for racial disparities regarding vaccination. She asked if data were available regarding the ratios of the racial backgrounds of

those in Phase 1A. Dr. Bogen stated that she doesn't have that data. Dr. Harrison stated that Congress has approved a lot of funding and asked how useful that will be locally. Dr. Bogen stated that she does not yet know how much Allegheny County will receive and that she did not want to count her chickens before the eggs hatch. Dr. Harrison stated that vaccination is an enormously important effort. Only 1.5% have been already vaccinated, but 70-80% will need vaccinated to begin putting an end to the pandemic. Dr. Bogen expressed confidence that the rate of vaccination will get faster and faster over the coming weeks. Mr. Youngblood asked if those under age 55 will only need one dose of the Moderna vaccine, instead of two doses. Dr. Harrison stated that the FDA is discussing this possibility but has not yet issued guidance. Dr. Bogen stated that ACHD will follow CDC and PaDOH guidance. She noted that the vaccine is just rolling out and asked everyone to please continue following mitigation guidance. Dr. Harrison reiterated Dr. Bogen's plea and noted that it would be a shame to get COVID now, as the end is near. Dr. Burke asked about variants of concern and if they are here. Dr. Bogen stated that is an important question and that the state lab does send samples to the CDC. Dr. Harrison also answered Dr. Burke by stating that variants have not been detected here but the sample size is very small. A variant is likely here. He stated that sequencing capacity is being increased. He stated that the variants don't change much, as the same public health measures should continue to be followed. Dr. Burke stated that if cases increase like in the United Kingdom, we will need to vaccinate faster or utilize other strategies to stretch doses. Dr. Bogen reminded everyone that parties continue to be dangerous to attend as 40% of COVID cases are asymptomatic.

Dr. Harrison thanked Dr. Bogen for her presentation.

6. **New Business**

A. Extension of Food Safety Advisory Committee Members

Dr. Otis Pitts, ACHD Deputy Director for Public Policy & Community Relations, requested that the Board vote to approve the extension of seven members of this Advisory Committee for an additional two years. The members are Stephen Musciano, Dawn Plummer, Ernie Ricci, John Rizzo, Tim Tobitsch, Tom Williams, and Tricia Wood. Donna Scharding, ACHD Food Safety Program Manager, stated that the Advisory Committee has been instrumental in providing guidance and with communicating with the food industry during the pandemic. Mr. Ferraro stated that Ms. Scharding has done a great job with the Advisory Committee.

Action: Mr. Ferraro moved to approve the extension of the terms for the members of the Food Safety Advisory Committee. Mr. Youngblood seconded the motion. **Motion passed unanimously.**

B. Environmental Health Fund Request: Mosquito Larvicide for Vector Control Program

Leah Lamonte, ACHD Vector Control Program Coordinator, requested \$16,500 from the Environmental Health Fund for mosquito larvicide. Major control efforts using larvicide target *Aedes* mosquitos, which are spring floodwater mosquito species that are a nuisance, and the *Culex* mosquito, which is a vector for the West Nile virus. *Aedes* mosquitos are targeted in

residential areas, and *Culex* mosquitos are targeted in catch basins in the City of Pittsburgh. Both efforts are a cost effective, direct service to County residents aimed at reducing disease spread and mosquito nuisance. Ms. Lamonte offered to provide the Board with a presentation summarizing the Vector Control Program at its meeting in March.

Dr. Harrison asked Ms. Lamonte if she has a sense for what species we're seeing in Allegheny County. She answered that Asian tiger mosquitos have been a concern here since 2010 and are a spreading problem along with *Culex* mosquitos. Dr. Portlock thanked Ms. Lamonte for her presentation.

Action: Mr. Ferraro moved to approve the expenditure of \$16,500 from the Environmental Health Fund for mosquito larvicide. Dr. Portlock seconded the motion. **Motion passed unanimously.**

At this time, Mr. Ferraro informed the Board that he had heard from Dr. Kondaveeti. Dr. Kondaveeti was currently under care for COVID, which explained his absence from the meeting. Dr. Harrison stated that the Board wishes Dr. Kondaveeti the best.

C. Risk Management Plan Regulation Modification – Request for Public Comment Period

Jim Kelly, ACHD Deputy Director for Environmental Health, stated that risk management plans were federally required from sources that use extremely hazardous substances. The plans would evaluate the possible impact of a fire or explosion and would be provided to the EPA and the local emergency planning committee. ACHD had been enforcing the RMP for 20 years, but the EPA requested that ACHD relinquish authority to assure consistent enforcement across the states. On March 5, 2019 the EPA approved ACHD's request to withdraw from its delegated authority over the RMP. Mr. Kelly requested a public comment period for these minor changes to Article XXI that would retain the source's requirement to retain all other permitting rules for sources containing hazardous materials but remove the RMP requirements.

Dr. Harrison asked if the Board will see comments submitted during the public comment period. Mr. Kelly stated that ACHD will share a comment response document with the Board.

Action: Mr. Youngblood moved to approve a public comment period for the Risk Management Plan Regulation modification, Dr. Shapira seconded the motion. **The motion passed unanimously.**

D. PM10 Maintenance Plan – Request for Public Comment Period

Mr. Kelly stated that this plan is in regards to the PM10 SIP for the Liberty/Clairton areas that was submitted in 1993. The re-designation request and initial maintenance plan for this SIP was approved in 2003. This plan will address continued maintenance through 2023. It is a limited maintenance plan because the monitor design values are below a specified threshold and little growth is expected for motor vehicle emissions. This plan applies only to 24-hour NAAQS.

Elements of the maintenance plan include an attainment inventory, maintenance demonstration, monitoring network verification of continued attainment, a contingency plan, and the approved SIP. Mr. Kelly requested that the Board authorize a public comment period for the plan.

Action: Dr. Stewart moved to approve a public comment period for the PM10 Maintenance Plan, Dr. Shapira seconded the motion.

The motion passed unanimously.

E. Reach Flu Supplement Presentation

Hannah Hardy, ACHD Program Manager for Chronic Disease and Injury Prevention, began the presentation with a description of the project. The goal was to promote flu vaccinations in Racial and Ethnic Approaches to Community Health communities, especially in Black communities by facilitating discussion at the community level to address barriers and concerns about flu vaccinations, increasing connections and communication between the community and health care practices, and mobilizing communities to implement public health programs to reduce health disparities. The communities covered by the REACH grant are the North Side, the Hill District, Garfield, Larimer/Homewood/East Hills, Wilkinsburg, and the Mon Valley.

Dr. Evangel Sarwar, ACHD Influenza Coordinator, spoke to the Board about the challenges and positives outcomes of the REACH Flu Supplement efforts. Challenges included a lack of trust in the healthcare system due to historical wrongs such as the Tuskegee Study, lack of access to safe and reliable transportation to reach the vaccination site, fear of the vaccine and skepticism about the life-saving abilities of the flu vaccine, fear of the COVID-19 pandemic, and a lack of Black nurses to administer the vaccinations. Positive outcomes included sharing information with the communities from trusted sources such as the Gateway Medical Society, increased numbers of free flu vaccination clinics, increased partnerships, and a positive shift among community members who were previously skeptical regarding flu vaccination.

Dr. Harrison thanked Ms. Hardy and Dr. Sarwar for their presentation and stated that these efforts will be applicable for the COVID vaccine as well. Dr. Portlock agreed. Dr. Bogen stated that ACHD will learn from this experience and apply the lessons to COVID.

7. Public Comments on Non-Agenda Items

A. Gabrielle Monroe, re: Law Enforcement Assisted Diversion Program Funding & Abuse

Ms. Monroe wrote that she is a childhood sex trafficking survivor, an adult sex trafficking survivor and a full-service sex worker. She is a co-founder of Survivor Siblings, a member of the Decrim PA Coalition and a founding member of Pittsburgh Mutual Aid. She wrote that a community of full-service sex workers in Allegheny County requests that ACHD remove sex workers from the Law Enforcement Diversion Program. She wrote that LEAD in Pittsburgh was created with rapists and sex traffickers. She requested that the Board remove sex workers from

the LEAD program immediately, investigate the creation of LEAD with sex worker rapists and sex traffickers, and work with and pay current full-service sex workers to develop safe spaces for sex workers to access resources.

B. Howard Rieger, re: Air Pollution

Mr. Rieger wrote that he is a resident of Squirrel Hill and a volunteer convener of East End Neighbors, which is a group concerned about air pollution. He wrote that the Board is proposing updates to coke oven gas emissions at US Steel's Clairton Coke Works. Years ago, US Steel committed to upgrading those ovens but never completed the job. Last year, US Steel committed to invest \$1.2 billion in its Mon Valley Works, bur rather than following through on that promise to our region, it has invested almost \$2 billion in advanced technology mini-mills, a non-union one in Arkansas and one in Alabama. Mr. Rieger wrote that he is counting on the County's elected and appointed officials to stand up for the region. New regulations for coke oven gas emissions need to take into account previously unfulfilled promises from US Steel.

C. Jon Olszewski, US Steel, re: Edgar Thomson Plant

Mr. Olszewski wrote that he is the Plant Manager of the US Steel Mon Valley Works Edgar Thomson Plant. He wrote that he grew up in Penn Township, attended the University of Pittsburgh, and began his US Steel career in 1990. He has been the Plant Manager since 2020. He wrote that data from local air quality monitors show that Edgar Thomson's commitment to the environment is paying off. The North Braddock ambient air monitor continues to meet SO2 attainment, with a preliminary 2018-2020 design value of 64 ppb, compared to the EPA standard of 75 ppb. The Liberty monitor demonstrated attainment with the PM2.5 and SO2 national ambient air quality standards in the year 2020. The Liberty monitor is on track to reach attainment in 2021 based on the SO2 SIP and implementation of SO2 controls. He wrote that he is also pleased to report Edgar Thomson's commitment to the community through substantial donations to the Braddock Carnegie Library, the North Braddock and East Pittsburgh playgrounds, participation in the Braddock Free Store renovation, the Braddock Christmas Tree donation, and the Woodland Hills School District laptop donation program.

D. David Meckle, re: Glassport Air Pollution

Mr. Meckle wrote that he is a resident of Glassport and lives one mile away from the Clairton Coke Works. He wrote that when the weather is bad, you can drive to the top of Dravosburg Hill overlooking the valley and you can see the dirty air trying to push up through the clouds but instead settling back down in the low laying areas. He doesn't understand why US Steel chooses to pollute when the weather is bad. He also wrote that he doesn't understand why ACHD's fines against US Steel are so miniscule. He requested that the Board toughen up with US Steel and play hardball. He wrote that its cheaper for US Steel to pay ACHD's fines than it is for US Steel to fix the equipment.

E. Karen Grzywinski, ACCAN, re: Air Monitoring around Neville Island

Ms. Grzywinski wrote that she is the Board President of Allegheny County Clean Air Now. She wrote that she has lived in Ben Avon and Ohio Township for more than 34 years and that most of ACCAN's members live in the North Boroughs and surrounding communities. ACCAN has identified 27 sources of pollution within its airshed, from Woods Run to Coraopolis. She commended ACHD for undertaking the Mon Valley Air Toxics and Odors Study and requested that the same study be conducted in the ACCAN airshed. With the number and range of industries in that area, residents deserve to know what air toxics are leaving the property of each facility and how their health may be adversely affected.

F. Angelo Taranto, ACCAN, re: Air Monitoring around Neville Island

Mr. Taranto wrote that he is an ACCAN Board member and is following up on Ms. Grzywinski's comments. He wrote that ACCAN's specific requests include that ACHD commit to additional air monitoring in the Neville Island area in 2022 after the completion of the enhanced monitoring project in the Mon Valley. ACCAN is requesting the same type of monitoring that ACHD is doing there. He requested that ACHD begin planning for this monitoring in 2021 and that ACCAN be included in the planning. And he requested that ACHD deploy some monitors at spot location in 2021 based on data from ACCAN's monitoring network.

G. Chin, re: Clairton Air Pollution

Chin wrote that they are known by Chin and live in Clairton. They wrote that the Clairton mill needs to get better and that ACHD should make the mill do what its supposed to do and to stop allowing them to get away with stuff.

H. Odessa Ellis, re: Clairton Air Pollution

Ms. Ellis wrote that she is 68 years old and has lived in Clairton for most of her life. The air quality in Clairton has always been an issue. She knows that the mill is needed for livelihoods, but it needs to be constantly regulated by somebody other than the people in the mill. She wrote that ACHD needs to constantly regulate the mill so that it doesn't get relaxed. The mill should be checked on not just during the day but in the evening as well.

I. Miriam Maletta, re: Clairton Air Quality

Ms. Maletta wrote that she and her family are life-long residents of Clairton. She wrote that she's lived next to the mill and dealt with the horrible smell for all her life. She wrote that she's experienced many problems with her sinuses, headaches, and was diagnosed with stage 4 lymphoma in 2016. She wrote that her father retired from US Steel and that he died of cancer even though he never smoked. She believes that her father's cancer was tied to working at US Steel. She stated that the agencies that govern the mill need to do more to ensure the safety and health of residents.

J. Jay Walker, Clean Air Council, re: Clean Air

Mr. Walker wrote that he is a community organizer for Clean Air Council. He wrote that the Council is concerned by the frequency of bad air days and the poor notice in advance of them. ACHD has the capability to predict air inversions and should provide more effective and timely communications to residents so that they can adjust their habits to better protect themselves. However, it is not appropriate for ACHD to rely on individual residents to alter their behavior instead of requiring major polluters to alter their behavior. The Council would also like to see improvements in the ability of residents without computers to submit testimony at meetings of the Board of Health.

8. **Adjournment**

Dr. Shapira moved to adjourn the meeting, Mr. Youngblood seconded the adjournment.