Ohio Journal of

Environmental Health

1st & 2nd Quarter 2020





The object and purpose of the Association shall be the betterment of the health and welfare of mankind through the improvement of the environment. This shall be done by sponsoring state and regional meetings and publications, by developing methods of measuring and evaluating achievements in environmental health, the establishment of a central point of reference and education material for the membership, the procurement of cooperation with other agencies and organizations, and such other activities as will lead to the greater efficiency and professional growth of the membership.

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Editor's Note:

The COVID-19 pandemic delayed the 1st quarter issue of the Ohio Journal of Environmental Health. Some articles contained in this edition were submitted prior to the pandemic; therefore, some items (e.g. conference references) may no longer be relevant. For conference updates see page 10.

Advertisements

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Past President's Message

Carrie Yeager, R.S. Butler County Health Department

It's hard to believe that my year as OEHA President is almost over. It has been a whirlwind year especially considering that I also started a new position as an EH Director right after the AEC. It has been a pleasure to meet the membership this year and



to do my best to represent you the best way that I know how. I knew some of the issues that I would be fighting for from the first day of my term such as continuing the fight to fix the food survey issue with the State Agencies, but there have also been surprises along the way that required quick action by the Board of Directors.

OEHA continues to attempt to work

with both the Ohio Department of Agriculture and the Ohio Department of Health to come to a compromise that works for local health departments with the ongoing issues with the food survey process. In October I made a public information request to receive the scores of all Sanitarians and Sanitarians-In-Training who have been surveyed from October 1, 2018 to October 1, 2019. That request was mostly fulfilled by the Ohio Department of Health with the exception of one Health District that was surveyed in August of 2019. The Ohio Department of Agriculture informed me that they did not keep track of Sanitarian scores from October 2018 to March of 2019, and therefore could not fulfill my request. The comparison of the scores between the two State Agencies shows that there is still a difference



in how the Sanitarian Evaluations are conducted. I will continue to work on this issue through the rest of my term and keep the membership informed of any new developments.

I provided opponent testimony on behalf of OEHA on the Senate Bill for the Small Winery Exemption. Even though we were not successful in stopping this bill, we did successfully get the bill changed to state that all foods must be prepackaged and served in unopened packages to obtain the exemptions.

In late November it was brought to the Board of Directors attention that the legislature would be reviewing all credentials that fall under the Ohio Department of Health. Late on a Tuesday afternoon we were provided with what was going to be proposed the next day for the drastic change in the RS/SIT credential. I spoke with the Representative that was going to introduce the changes, and then worked with the Past-President and President-Elect to come up with talking points that resulted in the Representative holding off on introducing the

changes for a week and agreeing to a conference call. During that conference call we were able to explain to the Representative our position to keep our credential strong and maintain the current educational requirements and to become and SIT and advance to an RS. The one item that we did ask for was for the Legislature to consider changing the name of RS to REHS. Before we asked for this consideration, we contacted NEHA to ensure that Ohio could use the name REHS without having to obtain the NEHA credential. NEHA informed us that yes, we may use the name REHS, and not have the national credential. As of Mid-February, the Legislature has not moved forward with introducing any legislation on the RS credential, and only have a placeholder bill. If you have any questions about this issue please reach out to me at yeagerc@butlercountyohio.org and I would be happy to discuss this issue with you.

I look forward to seeing everyone at the AEC and want to thank everyone for all of your support in this past year.

The New Standard in Surface Sanitizers.





Formulated for food-contact surfaces with no rinse required. No precautionary statements or handwashing required.



GOJO.com/Foodservice

Featured District Director's Message: Mark H. Adams, R.S., MPH Northwest

Henry County Health Department

So when I got the email that asked me to introduce myself, immediately two things came to mind.

First the story on how I volunteered to be the district director and second, some words said to me at the AEC



by a long-time friend. This of course isn't my first go-around as district director (20 years between stints), and I hope it isn't my last.

How did I get elected? It simply started with a wrong phone number but the right person. I had a little mix up in my contacts and I figured when asked via text to be the "director -elect", I would have plenty of time to acclimate to my new position since the person contacting me wasn't even in the "directorelect" position yet. I was wrong, they were the current director-elect...but this was after I found out about the contact mix-up. HAHA.

Second, it was what was said to me when I started as the health commissioner in Henry County two years ago...the words were, "don't let them change you".

Both stories reminded me of who I am. I have worked with hundreds of students through mentoring and teaching at various

universities. I've had the privilege of having some of the best teammates a person could work alongside in the military and in public health; men and women I can call family. I've



seen things that I cherish at times and block out during other moments.

So as I reflect on who am I? I'm nobody really. Registered Sanitarian number 2692 as it says on my license.

As for the NW District... come and join us at Kalahari this year for our conference. Bring your family or friends so they can enjoy the park through most of the day after the conference for no extra cost.

If you have access to students, bring one! Let them see what public health looks like. Not just the class time but the comradery, fellowship, and fun.

We have great planning crew here in the NW. I'm proud to be the director again. I'm proud of OEHA and proud of what we can accomplish together in public health.



FDA Food Code Section 4.703.11 (B)

"achieving a UTENSIL surface temperature of 71°C (160°F) as measured by an irreversible registering temperature indicator"

The FDA Requires a Dish Temperature of 71°C/160°F



President's Message

Stephan Ruckman, RS MPH
Ohio Environmental Health Association
President 2020-2021

As I begin my term as President of the Ohio Environmental Health Association I am humbled to share the table with so many caring, brilliant, and dedicated environmental health professionals



throughout Ohio. Frankly, in twenty-five plus years of working in this profession I have never been more proud to call all of you peers, colleagues, and friends. None of us could have predicted this would be the year that the next pandemic would hit the world, but the one thing I could have predicted was the way our members responded. We did not shy away from the responsibility of fighting against our new enemy rather we took it head on. Most of us have not filled our typical job duties for much of this year as nothing seems to be typical at the moment. All of the drills, tabletop exercises, and scenarios we planned for helped us all to be ready as we entered into the incident command structure. It is at this time of continued COVID-19 response that the skills you all have well beyond environmental public health are being demonstrated. For that, I say keep up the great work! There are and may continue to be times that you will be weary, but know that this Association and its Board of Directors is grateful for you!

I enter into my Presidency in somewhat atypical fashion. In late March, the Board of directors had to make the difficult decision to postpone the Annual Educational Conference indefinitely due to Governor Dewine's order and in the interest of keeping everyone healthy and safe. This move affected many things in the Association. One of these was the

transition of our Board of Directors. In order to provide for transition of leadership the decision was made to handle the transition in a manner consistent with the OEHA Bylaws while still providing the opportunity to hold an election at the Annual meeting which we are still hoping to have later this year. At the June 12th Board of Directors meeting the following actions were made to facilitate transition in the meantime:

- Carrie Yeager stepped down as acting
 President. The Board of Directors
 Appointed Steve Ruckman, President Elect,
 to the President's role for a term ending at
 the 2021 Annual Meeting. The President
 Elect Position will remain vacant until an
 election is held at this year's annual
 meeting.
- Garrett Guillozett stepped down as Past
 President. The Board of Directors
 Appointed Carrie Yeager to the role of Past
 President for a term ending at the 2021
 Annual Meeting.
- Joe Harrod stepped down as Secretary. The Board of Directors Appointed Jeff Gibbs to serve as Secretary until this year's annual meeting when the Secretary position will be filled during the election.
- Sarah Jensen stepped down as Vice
 President. The Board of Directors
 Appointed Matt Tyler, Vice President Elect
 to the Vice President's role for a term
 ending at the 2021 Annual Meeting. The
 Vice President Elect Position will remain
 vacant until an election is held at this year's
 annual meeting.

As noted above, the Board of Directors has not yet established a date for the formal

annual meeting that will replace the typical annual business meeting that historically has occurred at the AEC. With the recent surge in cases of COVID-19 we have delayed scheduling that meeting indefinitely. All members will be notified a minimum of 45 days in advance of this meeting of the date and location if it can be completed in a manner that does not jeopardize the safety and health of our members. Changes to the OEHA Bylaws will also be voted on at the annual meeting should it occur. These changes will relate to the ability for the Board of Directors to meet and vote via teleconference or video conference during emergencies.

It should also be noted that the Board of Directors made the decision to cancel all District Conferences. The Board is exploring options to provide membership continuing education credits in lieu of attendance at these conferences. More information on this will be provided as soon as it becomes available.

During the course of this pandemic and the various public health orders, our State Leaders have highlighted just how important all of us in the public health system are to the citizens of Ohio. All of you, while not mentioned by name, are included in the praises given to the local health department response. On behalf of your Board of Directors I would also like to thank you! I want to thank you for all that you do not only during trying times like these, but also every day to keep Ohioans safe and healthy! Your jobs are not easy, they are never done, and many times you are not seen through the lens of the dedicated and amazing professionals you are! It is my hope that when we emerge from the other side of this pandemic that positive recognition will come and the relationships you've established in your community will last a lifetime!

Until then stay strong, be healthy, and support those around you!

2020 District Conferences Cancelled; AEC Delayed

After much discussion, your board of Directors has made the decision to cancel all District Conferences for the 2020 year. The Board continues to work through how AEC may be held. Your association will continue to work to create development and training

opportunities for all members. If you have any questions or ideas to promote and improve environmental public health throughout Ohio, please contact your District Director or other Board member.



Featured District Director's Message: Courtney Myers, MPH, RS Northeast

Stark County Health Department

What a year to work in public health, am I right? Thank goodness we all have a connection to OEHA to help us navigate the COVID-19 response. The professional relationships I have made through OEHA assisted me many times



while deciphering the ever-changing state orders and guidance documents. It is great to lean on our colleagues in OEHA! I should introduce myself; I am Courtney Myers, the Northeast District Director. Professionally, I work as the District Programs Coordinator for the Stark County Health Department. My first day on the job was May 3, 2007; the day Smoke-Free Ohio began enforcement. I was new to public health. Previously I was the Director of an environmental education program. Switching my career to the world of public health was eye -opening. My tasks back then were to enforce Smoke-Free Ohio and create environmental health programs for the community. To the public, I was a friendly educator by day and mean "smoking police" by night. Since then, I have worked in many of the environmental health programs in various capacities and was a member of our accreditation team. I presently coordinate the Sewage O&M, Smoke-Free Ohio, Public Swimming Pools, and Bathing Beach programs.

Personally, I live in the rolling hills of Carroll County on a little 5-acre hobby farm along with my husband Matt, daughter Adelynn (10), and son Andersen (8). I love the outdoors. My free time is spent hiking, birding, and gardening. I obtained my undergrad degree from the University



of Rhode Island in Wildlife Biology. Last year, I completed my Master of Public Health degree from Kent State University.

As I am sure you are aware, OEHA has decided to suspend the Fall Conferences this year due to COVID-19. This decision was not made lightly. This organization is fully committed to its members. I can assure you the board is still working diligently behind the scenes to support you. In particular, our work on the legislative side with our lobbyists from Hicks Partners is very much continuing. With the hits against the legal power of public health coming in daily, it is reassuring to know that OEHA, along with Hicks Partners, is working to protect our authority in public health! We all knew a pandemic was a statistical possibility during our careers. But let's be honest, we probably all secretly hoped it wasn't on our watch! I can say with all sincerity that I am so proud to be a part of public health in Ohio. Our tireless work has, indeed, saved countless lives. As a profession, we rarely received the kudos we deserve. So I wanted to take this opportunity to thank all of you for what you do for your communities. Your impact has been seen and felt across Ohio!

The Clark County Hoarding Task Force: Using Innovative Actions to Reduce the Health and Safety Threats Posed by Hoarding-Type Situations

Anne Kaup-Fett, RS, MS Clark County Combined Health District

Abstract

Hoarding is a mental illness characterized by the pathological collection of items, difficulty discarding them, squalid living conditions, and psychological distress. Hoarding-type situations are caused by genuine hoarders and other persons whose environments resemble hoarding. In 2005, the Clark County Hoarding Task Force was formed to address the health and safety threats associated with hoarding-type situations. To date, Clark County Combined Health District records indicate that the task force has investigated about 182 reports: 53% primarily concerned animals, 22% primarily concerned belongings, and 25% primarily concerned unsafe and unsanitary conditions. About 80 situations required the task force to execute search warrants, request a Board of Health or Court Order, enforce cleanups, or remove animals. About 20 individuals were regarded as genuine hoarders and were the focus of 2-4 separate investigations each. The task force received 430 voluntarilyreleased animals, confiscated 494 animals, and required rabies vaccinations in 82 situations. The task force's approaches to these situations were enabled by several innovative actions: 1) Board of Health approval of partial funding of animal control agencies, 2) no-cost voluntary release of animals, 3) Board of Health resolution requiring dog and cat rabies vaccinations, 4) city ordinance prohibiting mass feeding, 5) Board of Health approval of county sanitary regulations, and 6) consideration of unsanitary conditions and fire risks in homes as public health and safety nuisances.

What is a hoarding-like situation and why deal with it?

Hoarding is a mental illness characterized by the pathological collection of items, difficulty discarding them, squalid living conditions with safety and fire hazards, and psychological distress (1). It is the term used by the public to report collections of rubbish, crowded houses, or too many

pets (2). Also, many nuisances resemble hoarding. So, for the purposes of this paper, all of these situations will be called hoarding-type situations. It

Health District
Clark County SPCA
Animal Cruelty Officers
Dog Warden
Sheriff's Office Nuisance Officers
Code Enforcement
Prosecutor's Office
Fire and Rescue
Adult Protective Services

Figure 1. Task Force Partners

Child Protective Services United Senior Services Mental Health Services Township Trustees

is estimated that 2%-5% of the U.S. population engages in some sort of hoarding behavior (3), especially older persons (4) living alone (5). The public health implications of this become apparent when one considers that there may be 2.4 million Ohioans 65 or older by 2035 (6).

How did Clark County choose to work with these situations?

In 2005, in response to increasing numbers of nuisance complaints associated with hoarding-type situations, the Clark County Combined Health District (Health District) coordinated the first meeting of the Clark County Hoarding Task Force (CCHTF). The CCHTF is composed of numerous community agencies and groups, including the Health District, local animal cruelty and rescue resources, Code Enforcement, Sheriff's Office nuisance officers, Adult Protective Services, United Senior Services, the prosecutor's office, and Mental Health Services, all willing to work together and split the work by jurisdiction (Fig. 1).

In the last decade, a growing body of research has shown that, not only is a hoarding task force an evidence-based method to abate hoarding-type situations (7), but almost 50% of interventions attempted without task force involvement had no improvement and 15% actually got worse (8). This is important! It is difficult to improve any problem

with insufficient knowledge and resources. The CCHTF's collaborative nature helps members *learn more* about a situation and provides *more resources* to effect change.

What are examples of Hoarding-Type Situations?

Many nuisance complaints can look like, and are reported as, "hoarding". These can be loosely divided into the overpopulated Good Samaritan, the overwhelmed disabled or elderly person, the nuisance-causing neglectful person, the cruel person, and the genuine hoarder (9). Which kind of situation is actually present at a nuisance address is a conclusion to be drawn by the investigators and depends on the people themselves and their circumstances.

A genuine hoarder has a mental illness. This person may acknowledge problems and be willing to try to abate them, but have great difficulty discarding the objects or making the repairs that are the focus of the investigation (Fig. 2). The investigation usually requires extra effort and an extended amount of time (10).

An overpopulated Good Samaritan has taken on a burden, such as rescuing animals or feeding stray cats, in order to do good and has become overwhelmed (11) (Fig. 3). This often happens because the person can't afford the neutering needed to avoid unplanned puppies and kittens (Fig. 4). These people can be very confident in their ability to cope and may feel threatened by, or even contemptuous of, a local agency's lack of understanding of a higher purpose. But, they can be persuaded to accept help if they feel respected and are given options, such as no-cost release of pets for adoption.

An overwhelmed disabled or elderly person has gradually become (through illness, age, or isolation) an unintended blight to the neighborhood (Fig. 5). These people may feel threatened by government intervention and may actually be frightened. They are generally eager to accept help if they can be allowed to save face and after they are reassured that the intent is not to try to force them out of their homes or to just euthanize their pets.

A nuisance-causing neglectful person has allowed the home environment to become unacceptable. This person may acknowledge the problem, but resist correcting it until forced because of indifference to nuisance warnings, preoccupation with family problems, feuds with neighbors, or other life circumstances, such as drug abuse (Fig. 6)



A cruel person has allowed the environment to become unacceptable. This person may admit the problem, but resist correcting it until forced because of benefits received from the situation, such as money from the sale of purebred animals at puppy mills, money from donations at fraudulent animal "rescue" operations (12), or a selfish or indifferent temperament (13) (Fig. 7).

What are the public health implications of hoarding-type situations?

HEALTH and SAFETY NUISANCES for the neighbors include inadequate housekeeping outside; odors from feces, urine, or garbage; flies, cockroaches, or rodents outside the house; fire hazards or structural problems that could cause damage to neighboring properties (Fig. 8 and Fig. 9).

IMMINENT HEALTH THREATS to occupants (human or animal), include squalid conditions (associated with garbage, spoiled food, pests, animal or human urine/feces, non-functioning toilets or plumbing, no hot running water); excessive dust; high ammonia levels; risk of infections from pathogens; and sick animals (Fig. 10).

IMMINENT SAFETY THREATS to occupants, neighbors, or emergency response personnel include trip and fall hazards; serious structural damage; fire risks from wiring or open flames; accumulations of combustible items; animals in cages; and blocked pathways, stairways, doors, and exits that impede movement through a house in the event of a fire (Fig. 11 and Fig. 12).

Okay. So how do legal interventions move forward?

No city or county agency has sole jurisdiction over all of the problems associated with hoarding-type situations. And, when agencies don't work together, they may inadvertently be working in conflict. Hoarding task forces help communities learn which agencies, providers, and resources are available now to respond to hoarding-type situations (14) and develop effective interventions:

• Is there a property maintenance code in the county?

- Is there a dog warden or animal cruelty officer?
- Is there a county nuisance officer under ORC 3767?
- Are there resources to collect and manage confiscated animals?
- How do adult protection and child protection services work?
- Are there local companies that haul away rubbish or provide deep cleaning of houses?
- Is there a local mental health service and does it have the staff and programs to help hoarders in the community?

Hoarding task forces also provide a gapanalysis of community agencies and providers to learn which resources are needed to respond to hoarding-type situations effectively:

- Would it be wise to strengthen local animal resources?
- Would it be wise to consult with the prosecutor about hoarding?
- Would it be wise to consider passing a mass feeding ordinance?
- Would it be wise to consider approval of local Board of Health (BOH) resolutions for rabies vaccination or nuisance issues?
- Would it be wise to consult with local fire and emergency medical responders about the health, safety, and fire threats they encounter in dilapidated and crowded houses?

Why involve the prosecutor?

The involvement of the prosecutor's office helped the CCHTF plan for enforcement; choose code violations; respect due process; collect admissible evidence; and gain faster access to search warrants. A local prosecutor can confirm that reasonable accommodations were offered to disabled persons who struggled to comply with deadlines (15).

Why involve mental health services?

Hoarding is a situation that is fundamentally different from other nuisances, because it involves persons who have a mental illness. This requires inspectors to protect privacy in public records and during abatement actions. The investigation of hoarding-type situations is stressful

Figure 2. Hoarder's Kitchen



Figure 5. Elder's Neglected House



Figure 8. Odor/Flies from Manure



Figure 11. Safety Threat for Emergency Response Personnel



Figure 14. Traumatized Dog at an Animal Rescue



Figure 3. Mass Feeding of Cats



Figure 6. Tenant's Front Porch



Figure 9. Rat at "Rescue" Facility



Figure 12. No Egress at Back Door



Figure 4. Unplanned Puppies



Figure 7. Dead Dog at Fraudulent Animal Rescue Facility



Figure 10. Non-Functioning Toilet



Figure 13. Assessing a Dog at a Large-Scale Animal Rescue



and mental health professionals help task force members to learn about effective interviewing techniques (16), to properly address suicide threats (17), and to manage their own trauma (18).

Why involve animal cruelty officers, local dog pounds, and legitimate animal rescue groups and charities?

It is not possible to effectively deal with animal hoarders without planning to potentially manage their animals (Fig. 13 and Fig. 14). Local animal agencies do the lion's share of work to collect, transport, and assess animals; provide medical services, vaccinations, neutering, food, and housing until they can be adopted; and - at great mental cost to themselves - provide euthanasia when animals are not adoptable due to illness, injury, or acquired antisocial behavior (19).

Why involve fire chiefs and EMS?

A lesser-known aspect of hoarding-type situations is the significant and life-threatening danger that crowded houses pose to emergency response personnel, especially fire fighters (20). The involvement of fire departments helped the CCHTF to understand fire and safety risks, create a better pamphlet for the public, and target substandard houses for improvement.

What abatement approaches work?

As with nuisance complaints, responses to hoarding-type situations involve several possible options (Fig. 15). Three approaches work well for hoarding-type situations: *The Typical Approach*, *The Rapid Approach*, and *The Persuasive Approach*.

The <u>Typical Approach</u>, not surprisingly, is very similar to a typical nuisance inspection and abatement:

- 1. gain entry to the property
- 2. assess the situation and take photographs as evidence
- 3. speak to the person if possible
- 4. use persuasion and warnings as needed
- 5. convince the person to abate the nuisance
- 6. set due dates to avoid escalated enforcement
- 7. pursue escalated enforcement only if necessary

The Typical Approach is the best method for cooperative persons and resistant persons with no imminent health or safety threats

(overwhelmed Good Samaritans, disabled persons or elders, and nuisance-causing neglectful people). Typical nuisance inspection timeframes and procedures allow the person to take ownership of the problem and fix it.

But cases involving cruel persons and hoarders involve situations that can be so extreme, pose such imminent health and safety threats, and involve persons who are so resistant to assessment and abatement (21), that typical actions may not work well. There are two options at this point: The Rapid Approach and the Persuasive Approach.

The <u>Rapid Approach</u> involves emergency action within a short time frame (maybe even a day). It involves many task force members on-site to converse with the person, explain the problems, and offer certain conditions today to avoid enforcement of violations of law today (for

Figure 16. Initial Visit



Figure 17. Follow-Up Visit



Figure 18. Neglected Cat



Figure 15. Abatement Options

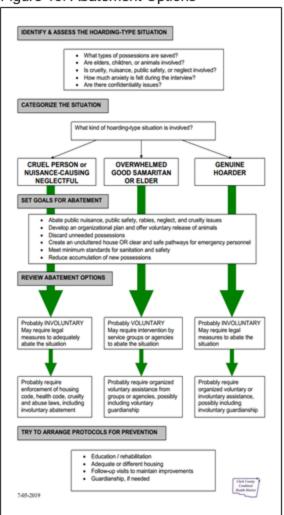
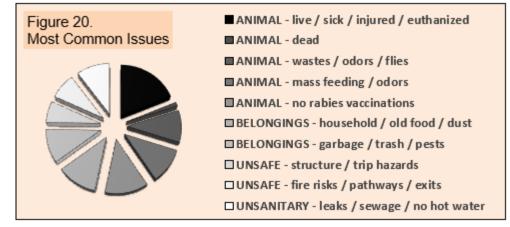


Figure 19. Bathroom Meeting Minimum Standards



Figure 20. Combustible Items on Gas Range





example, voluntary release of neglected animals to avoid animal cruelty charges). This can work, but often requires a search warrant. Importantly, it does not allow time for a person to take ownership of the problem and avoid strong emotions.

The Rapid Approach can be the method of choice for a cruel person, but it should rarely be the method of choice for a hoarder. The desire to abate a nuisance can make forced cleanups seem justified, even if they are stressful. But, research clearly shows that rapid cleanups or removals of animals rarely work for hoarders (22). Remember the 50% of interventions that didn't work and the 15% that got worse? Forced cleanouts can be the impetus for suicide (23). And, hoarders return to previous states in nearly 100% of cases (24). So, cleanouts can be expensive, time-consuming, and, ultimately, wasted efforts. Even worse, the loss of trust caused by rapid cleanouts means that future attempts to reach out to the person can be rebuffed (25).

Research has identified three factors that make interventions more successful: accountability, personalization of care, and confidence in treatment (26). The <u>Persuasive Approach</u> uses all three and is the best approach for hoarders. First, the person is held accountable - the approach emphasizes the legal requirements to reduce unsanitary conditions and safety risks. Second, the approach is personalized - home visits and conversation help the person plan gradual changes. And, third, photography and conversation are used to help the person recognize the problems that exist and appreciate gradual improvements as they are being made (Fig. 16 and Fig 17).

And, since total animal removal or total cleanup is not usually realistic or financially feasible for these situations, the Persuasive Approach provides different, but still sufficient, abatement options:

- 1. Animals must receive *minimum standards of* care, including rabies vaccinations (Fig. 18).
- 2. *Sufficient cleaning* must occur to remove urine, manure, and garbage; lower ammonia levels; and abate off-site odor nuisances.
- 3. Steps must be taken to satisfy *minimum sanitary standards*, including provision of at

- least one working toilet, hot running water at one sink, and a working water heater and furnace (Fig. 19).
- 4. Steps must be taken to satisfy *minimum safety standards*, including reduction in combustible materials, especially on or around appliances (Fig. 20); provision of proper electrical wiring and smoke detectors; and provision of unblocked exits and adequately wide pathways through the house and on stairways to allow safe ingress and egress by fire and emergency response personnel (27).

Several innovative actions have enabled the *Persuasive Approach* in Clark County:

- Financial assistance to local animal resources.
 The Health District BOH approved financial support for animal resources to help pay the costs associated with animal confiscation.
 Initially, the Health District paid an annual amount to the Humane Society for costs associated with hoarding responses. When local animal resources improved, the annual amount changed to a fee per cat to the Clark County SPCA.
- No-cost voluntary release of unwanted animals.
 The financial assistance provided to animal resources allowed the CCHTF to offer no-cost voluntary release of animals to persons exhibiting hoarding-type behavior and financially unable to pay the costs normally associated with releasing animals for adoption.
- Requirement for cat and dog rabies
 vaccinations. A Health District BOH resolution
 requiring cats and dogs to have up-to-date
 rabies vaccinations drove improved care of
 animals, discouraged mass feeding of stray cats
 (since the person took on the responsibility of
 providing rabies vaccinations), and encouraged
 voluntary reductions in numbers of animals.
- Ordinance prohibiting mass feeding of animals.
 A City of Springfield ordinance prohibiting mass feeding (placement of containers of food in outside locations) of stray cats and other animals encouraged better care of animals and helped efforts to reduce stray cat populations, rodents, flies, and nuisance odors.

- Adoption of county sanitary regulations.
 Sanitary regulations adopted by the Health
 District BOH (in areas of the county not covered by municipal ordinances and property maintenance code) defined a nuisance as any property where accumulations of materials caused danger to the health of the community by creating a fire hazard, making a house unsafe for occupancy, or causing foul smells or rat harborage.
- Inclusion of *safety of emergency response* personnel in consideration of public nuisance. The Health District consideration of the risk of harm to fire and emergency medical responders within the definition of a public nuisance provided jurisdiction over accumulations of combustible materials, blocked exits, narrow pathways through rooms, no smoke alarm, and crowded stairways inside a house.

Results - has it worked?

Yes! Even though there is no data set for the CCHTF (because the members cannot enter case information into a common data base), the Health District was actively involved with many CCHTF responses and its records can provide a good estimate of CCHTF activities. The CCHTF has responded to about 182 reports since 2005, all of which were resolved. About 20 people were thought to be genuine hoarders and were the focus of 2-4 separate investigations each. Figure 20 shows the most common issues identified during those responses, divided into four major categories: animal issues, belongings issues, unsafe condition issues, and unsanitary condition issues: 53% primarily concerned animal issues (live, sick, injured, and dead animals; elevated ammonia levels and odors; mass feeding of stray cats; urine and manure accumulations; and lack of rabies vaccinations). The task force received 430 voluntarily-released animals, required rabies vaccinations in 82 situations, and confiscated 494 animals, including 407 from one animal rescue (28). 22% primarily concerned accumulated belongings (crowded conditions; piles of clothing, papers, and other household items; dust, cobwebs, and dirt; old food; dirty dishes; rodents; flies; and cockroaches). 15% primarily concerned unsafe conditions (damaged floors and sagging stairways; loose handrails; trip hazards; unsafe wiring; blocked exits; crowded pathways through the house; accumulations of combustible materials; nonworking furnaces; and storage of combustible materials on and around fuel-burning appliances).



10% primarily concerned sanitation issues (accumulations of garbage; spoiled food; non-working toilets; no hot and cold running water; plumbing leaks; and presence of human manure and urine).

Approximately 80 situations required the task force to execute search warrants, request a BOH or Court Order, enforce cleanups, or arrange the removal of animals.

Conclusion

Effective interventions are needed to abate the dangerous and unhealthy conditions present at hoarding-type-situations. Hoarding task forces are a proven way to provide those interventions. Ohio health departments have mission statements to protect and improve the health of their communities, are uniquely empowered by Ohio Revised Code to define and manage nuisances, and have the local contacts needed to coordinate a hoarding task force. If your community already has a task force, join it! If it doesn't, NOW is the time to step up.

Okay – you've convinced me! Are materials available to help start a community hoarding task force?

Yes! Customizable copies of meeting agendas, PowerPoint presentations, guidance documents, telephone flowchart, the voluntary release form, and pamphlets are available, as are copies of sanitary regulations, the mass feeding ordinance, the resolution for rabies vaccination, and the contract for financial assistance to animal rescue. For more information, contact Anne Kaup-Fett at akaup-fett@ccchd.com.



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Recognizing Ohio's Newest Registered Sanitarians

In this section we recognize those individuals who successfully met the standards to earn the title Registered Sanitarian in the State of Ohio. This year we congratulate the following who achieved the status of Registered Sanitarian from January 1, 2019—December 31, 2019.

- Danell Rose Bennett
- Katelyn Clare Caniford
- James O. Smiraldo
- Jeffrey S. Boamah
- Nichele Elizabeth Johnson
- Kevin Edward Smith
- Michelle Ann Starkey
- Maria Soledad Arcibar
- Timothy Patrick Grady
- Barbara J. Jordan
- Daniel Jacob Thompson
- Kenyatta Rosina Bosley
- Mackenzi Lynn DiPerna
- Bryan Matthew Lemons
- Emily Elaine Speck
- Ryan M. Allarding
- Karin Code Elliott Bull
- Benjamin Michael Davis
- Erin E. Neylon
- Audrey Ann Blakeman
- Carol Cowan
- Nathan Alan Creech
- Michael Patrick Cruze
- Kailea Jean Holbrook
- Tina Nicole Marini
- Jermane David Vail
- Kayla T. Hartley
- Genevieve Bufano
- Madison Shuret

- Dominic J. Simone
- Lindsey Rae Smith
- Paul Mervin Thomas
- Sandra Jean Wiesen
- Justin T. Bucher
- Sara R. Cochrane
- Michael Kopko
- Tatiana M. Minor
- Kyle A. Gabrick
- Claudia Catherine Meister

Mackinzie Dickman

- Erica A. Rausch
- Brittany Anne Zoecklein
- Hannah R. Stump
- Madison R. Aldrich
- Nichele Elizabeth Blood
- Hannah R. Montgomery
- Ahmed Alobidi
- Eric William Bartl
- Wendy Marie Dage
- Ashley Nicole Franks
- Matthew Lee Merritt
- Marisa Helen Walterbusch
- Kelly Jo Freewalt
- Garet Lee Bennett
- Ashley Renee Karns
- Brittany Danielle Weitzel
- Ashely Lynn Winters
- Sarah Alexis Zaborniak
- Kyle Dean Shackle
- Dylan Patrick Kager
- Jason Bryant Murvine
- Stephen M. Neuhart
- Frank Joseph Klinger
- Wyatt J. Marshall
- Liranda Dawn McCain

OEHA Offers Restart Guidance

The Ohio Environmental Health Association continues to offer guidance to members working with the community to safely and responsible reopen the different sectors throughout Ohio. Updates can be found on http://www.ohioeha.org/aws/OEHA/pt/sp/news. Please reach out to the Association's technical committees if you need assistance.



News, Information, and Education

Educational Opportunities

Due to the COVID-19 pandemic, this section has intentionally been left blank. Educational opportunities are constantly changing. Please visit ohioeha.org for any available opportunities.





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Announcements

Have a grant, educational opportunity, move, promotion, or other announcement you would like to share? Please email a member of the publications committee.

Open Positions (With an opening of 8/15/20)

- Food Safety & School Health SIT/RS I/II Franklin County Public Health
- Community Health Worker—Contact Tracer Ross County Health District
- Sanitarian/SIT
 Hamilton County Public Health
- Registered Sanitarian/SIT
 Holmes County General Health District
- Epidemiologist
 Wood County Health Department
- Registered Sanitarian/SIT Allen County Public Health
- Assistant Health Commissioner—

Environmental Health Services Hamilton County Public Health

Public Health Sanitarian
 Ottawa County Health Department

Congratulations

• Chad Brown

Congratulations to Chad who was recently promoted to Health Commissioner of Licking County Health Department.

• Greg Kesterman

Congratulations to Greg who was recently promoted to Health Commissioner of Hamilton

County Public Health.



OEHA Committees & Chairs

Body Art

Sarah Badenhop, R.S. - Columbus Public Health

Campground

Mark Janowich, R.S. - Erie County Health Department

Food

Christina Ritchey Wilson, JD, R.S. - Columbus Public Health

Greg Chumney, MPH, RS - Licking County Health Department

Lead

Greg Putka, R.S. - Lorain County Public Health

Private Water Systems

Randy Ruszkowski, R.S. - Stark County Health Department

Sewage

Laura Kramer Kuns, R.S., REHS - Kramer Kuns Consulting, LLC

Eric Cherry, R.S.—Huron County Public Health

Solid Waste

Chuck De Jonckheere, R.S. - Hamilton County Public Health

Swimming Pool, Spa, and Special Use Pool

Barry Grisez, R.S. - Cuyahoga County Board of Health

Vector Control

Scott Pozna, R.S. - Lorain County Health Department

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Constitution & By-laws

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Exhibits

Shannon Self, R.S. - Delaware General Health District

Professional Development

Steve Ruckman, MPH, R.S. - Worthington Schools

Resolutions

Jennifer Wentzel, MPH, R.S. - Public Health - Dayton & Montgomery County

Website

Garrett Guillozet, MPA, R.S., REHS, AEMT - Franklin County Public Health

Auditing

Jennifer Wentzel, MPH, R.S. - Public Health - Dayton & Montgomery County

Awards & Recognition

Gus Dria, R.S., REHS - Canton City Health Department

George Eagle Scholarship

Jacqueline A. Gruza, BS, RS, REHS - Greene County Public Health

Membership

Adam R. Howard, MPH, R.S., REHS - Delaware General Health District

Nominations & Elections

Open

Public Affairs

Stephan Ruckman, MPH, R.S. - Worthington Schools

Publications

Adam R. Howard, MPH, R.S., REHS - Delaware General Health District

Concentrated Animal Feed Facility

Jason Menchhofer, R.S. - Mercer County - Celina City Health Department

Ohio Public Health Advisory Board

Garrett Guillozet, MPA, R.S., REHS, AEMT - Franklin County Public Health

Ohio Public Health Partnership

Chad Brown, R.S., REHS, MPH - Licking County Health Department

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