

Minutes  
February 12, 2019

Commissioners Present: Timothy Bechtol, Mark Gazarek and Brian Robertson

Also Present: Lucinda Land, Maryann LaRoche, and Jim Maurer.

Commissioner Bechtol opened the meeting at 9:30 a.m. in the Commissioners' 1<sup>st</sup> floor conference room. The Pledge of Allegiance was recited. Minutes from the January 31, 2019 meeting were read with Mark Gazarek making the motion to approve, Timothy Bechtol seconded. Motion passed 2-0, Brian Robertson abstained. Minutes from the February 7, 2019 meeting were read with Brian Robertson making the motion to approve, Timothy Bechtol seconded. Motion passed 2-0, Mark Gazarek abstained.

The Clerk presented the following resolutions for consideration:

Resolution #78-19 – Authorizing payment of the listed and/or attached purchase orders. Mark Gazarek made the motion to approve, Brian Robertson seconded. Motion passed 3-0.

Resolution #79-19 – Transfer of funds within the appropriation-Common Pleas Court-Adult Probation. Mark Gazarek made the motion to approve, Brian Robertson seconded. Motion passed 3-0.

The Commissioners approved travel requests from the Auditor's office. They also signed payroll for their staff. The Clerk requested executive session to discuss personnel in regards to discipline.

Lucinda Land presented the following resolution for consideration:

Resolution #80-19 – Lease of building to the Hancock County Job & Family Services. The total amount due is \$61,139.90 or \$2.77/sq. ft. The total is based on \$28,175.92 expensed for maintenance of the building in 2018 and the depreciation of the building at \$32,963.99. Mark Gazarek made the motion to approve, Timothy Bechtol seconded. Motion passed 3-0. Mark thanked Lucinda and Sarah for their efforts in putting the lease together.

### **Meetings/Reports**

Brian Robertson met with Jim Maurer for the Progress Edition. He visited a local company with leadership changes. The Strategic Planning is out to the Elected Officials.

Mark Gazarek had nothing to report.

Timothy Bechtol attended the Habitat for Humanity's grand opening. He also attended the Opiate Taskforce. He received copies of the updated recovery resources guide. He attended the chili cook-off for cancer patient services. Timothy stated he is in the process of finalizing bid documents for security doors at the Justice Center. He is hoping to have that project out to bid before the end of February.

At 9:43 a.m. Timothy Bechtol made the motion to enter into executive session to discuss personnel regarding discipline, Mark Gazarek seconded. A roll call vote resulted as follows:



Timothy Bechtol, yes; Mark Gazarek, yes; Brian Robertson, yes. At 10:25 a.m. Timothy Bechtol made the motion to come out of executive session with no action taken, Mark Gazarek seconded. Motion passed 3-0.

At 10:30 a.m. the Commissioners met with James Sammet, Maintenance Supervisor, to discuss maintenance projects for the County. James made suggestions for necessary projects at each of the county buildings including furnace/air conditioning unit replacement at several buildings, paving/sealing/stripping for several County parking lots, and roof repairs. The Commissioners suggested getting quotes and they will consider the projects as they come in to see how they fit in the budget.

At 11:15 a.m. the Commissioners met with Precia Stuby, Rosalie King, and Mark Rimelspach from the ADAMHS Board. Jim Maurer and Alex Parker were also present.

Precia stated they received a letter from the Commissioners regarding their excessive then & now requests above \$10,000. She explained that all of the requests were contract payments. They have reviewed their system, but do not have a solution yet. She also informed the Commissioners they will have 1 appointment to make to the ADAMHS Board in 2019. She will generate a list of potential candidates and get that to the Commissioners office by May. Precia went over the System of Care Grant and the progress that has been made. She also stated they have begun Universal Screening at the Justice Center as part of the Stepping Up Initiative. The ADAMHS Board is finalizing the bid packet for building a home for pregnant women on Crystal Avenue. They are hoping to go out for bid in the next couple months. Also, she presented the Commissioners an Attorney General's opinion regarding Indirect Costs.

At 2:15 p.m. the Commissioners met with Dr. Karim Baroudi from Hancock Public Health. Treasurer J. Steve Welton and Alex Parker were also present.

Dr. Baroudi invited the Commissioners to the DAC Board meeting to be held on March 4. Timothy Bechtol will be in attendance. He also stated the site visit for Hancock Public Health's accreditation will be June 18-19. He presented the Commissioners with a list of repairs that will need to be addressed before the site visit. Dr. Baroudi stated Hancock Public Health ended the year in the black and have been fiscally responsible.

At 2:22 p.m. Timothy Bechtol made the motion to enter into executive session to discuss potential real estate acquisition, Brian Robertson seconded. A roll call vote resulted as follows: Timothy Bechtol, yes; Brian Robertson, yes. At 3:33 p.m. Timothy Bechtol made the motion to come out of executive session with no action taken, Brian Robertson seconded. Motion passed 2-0.

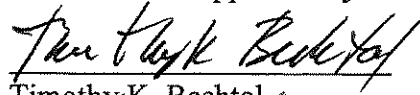
Respectfully submitted,

A handwritten signature in black ink, appearing to read "Sarah Mutchler", with a long horizontal flourish extending to the right.

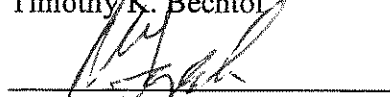
Sarah Mutchler, Clerk



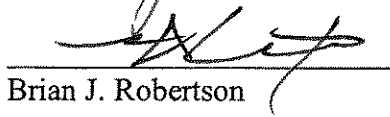
Reviewed and approved by:



Timothy K. Bechtol



Mark D. Gazarek



Brian J. Robertson





# Hancock Public Health

Your Recognized Leader in Population Health

*Karim Baroudi, MPH, Health Commissioner*

## Board of Health

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William Alge, ESQ

Karen Sue Jones, RN, MSN

Michael A. Lindamood, MD, MPH

Larry J. Lovell

Barbara J. Pasztor, RN

Robin Spoons

Nathaniel Ratnasamy, MD – Medical Director

May 4, 2018

\*Hancock Public Health completed a site accessibility evaluation using the ADA Checklist for Existing Facilities on April 27, 2018 to determine areas that needed to be in compliance with ADA. This was also completed as part of HPH's accreditation process. Hancock Public Health is in its current location temporarily following the combination between the Findlay City and Hancock County Health Departments in 2016. The following information reflects the issues that were discovered and the proposed measures to mitigate them:

### **Priority 1.5 – Van accessibility**

**Observation** – Accessible space #3 has a width of 9'1" and a shared access aisle of 5' with #2 space. Accessible space must be 11' wide and access aisle must be 5'.

**Corrective Action** – If HPH was to stay at this current location, accessible parking space and accessible aisle would need to be re-configured to meet the requirements.

### **Priority 1.13 – Exterior accessible route**

**Observation** – Walkway to enter Environmental Health / Plumbing Division is in need of repair; concrete is damaged.

**Corrective Action** – Repair of the damaged walkway will occur during the summer of 2018.

### **Priority 1.40 – International Symbol of Accessibility at entrances**

**Observation** – Accessible entrance of Vital Statistics and Clinic has an International Symbol of Accessibility, but it is obscured by other HPH signage. There is no International Symbol of Accessibility at the Environmental Health / Plumbing entrance.

**Corrective Action** – Move signage on the Vital Statistics door to a different area to allow the International Symbol of Accessibility to be viewed. If HPH was to stay at this current location, it would install an International Symbol of Accessibility at the Environmental Health / Plumbing entrance.

### **Priority 1.43 – Threshold height no more than ¾ inch high with top ½ inch beveled no steeper than 1:2**

**Observation** – Threshold height for Environmental Health / Plumbing entrance measures 2" and the height for the Vital Statistics / Clinic entrance is 1 5/8".

**Corrective Action** – If HPH was to stay at this current location, the thresholds would need to be adjusted to meet the height requirements.

### **Priority 1.46 – Door closure of 5 seconds from an open position of 90° to a position of 12° from the latch**

**Observation** – Environmental Health / Plumbing entrance door has a closure that allows door to close in less than 5 seconds.

**Corrective Action** – If HPH was to stay at this current location, the closure would need to be adjusted to meet the requirements.



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### **Priority 2.31 – Tactile star present on both jambs of the main entry level elevator**

*Observation* – Only one (1) tactile star present on main entry level at elevator.

*Corrective Action* – If HPH was to stay at this current location, a tactile star sign would be installed on the elevator jamb.

### **Priority 2.38 – Signage**

*Observation* – All components of this priority do not exist in the agency.

*Corrective Action* – If HPH was to stay at this current location, it would purchase signage that contained raised characters, Braille, and mounted at the appropriate height to meet the requirement.

### **Priority 2.43 – Hardware operable with one (1) hand and does not require tight grasping, pinching, or twisting of the wrist**

*Observation* – Both the Clinic Intake and Clinic doors have door knobs. Lock observed on Clinic Intake door only.

*Corrective Action* – If HPH was to stay at this current location, it would replace the existing door knobs with door handles to increase ease of entry into these rooms.

### **Priority 2.50 – Controls (light switches, security and intercom systems, emergency/alarm boxes) have a clear floor space to approach and operable parts are ≤ 48” above the floor.**

*Observation* – Clear floor space of 30” x 48” not observed in public areas for approach to controls. Also, light switch heights were excessive: North Exit of Clinic (49”); North RR Clinic (56”); E-W RR of Clinic (56 ½”)

*Corrective Action* – If HPH was to stay at this current location, the light switches would need to be lowered to meet the requirement.

### **Priority 2.51 – Light Switch Functionality**

*Observation* – Standard up & down wall switch present throughout agency. Some offices are equipped with a motion sensor to turn on light when entered.

*Corrective Action* – If HPH was to stay at this current location, it would have to install new switches meeting the requirement of the ADA.

### **Priority 2.68 – Seating: General – reception areas, waiting rooms, etc.**

*Observation* – There are no designated spaces in either the main waiting or clinic waiting areas that meet the 36” W x 48” L ADA requirement.

*Corrective Action* – If HPH was to stay at this current location, it would need to designate a minimum of one (1) space in each waiting area to accommodate a wheelchair.

### **Priority 3.1 – Toilet Room Accessibility**

*Observation* – Neither of the public restrooms in the Clinic area are accessible; as the door width for both doors is 29”.

*Corrective Action* – If HPH was to stay at this current location, the door openings would need to be widened to allow for accessibility.





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### **Priority 3.2 – Signs Directing People to Accessible Toilet Rooms**

**Observation** – There are no signs present at the inaccessible toilet rooms directing the public to accessible toilet rooms.

**Corrective Action** – If HPH was to stay at this current location, it would need to install signage directing the public to accessible toilet rooms.

### **Priority 3.3 – Accessible toilet room with International Symbol of Accessibility**

**Observation** – No signs are present at the accessible toilet rooms.

**Corrective Action** – If HPH was to stay at this current location, it would need to install signage that included the International Symbol of Accessibility at the accessible toilet rooms.

### **Priority 3.4 – Accessible route to an accessible public toilet room**

**Observation** – There is currently no accessible route to an accessible public toilet room.

**Corrective Action** – If HPH was to stay at this current location, it would need to make changes to at least one (1) of the existing public toilet rooms to allow for accessibility; as there is no other route to another public toilet room.

### **Priority 3.5 – Signs at toilet rooms**

**Observation** – The existing signs do not contain raised text characters, Braille, or mounted on the wall on the latch side of the door.

**Corrective Action** – If HPH was to stay at this current location, it would need to install signage that included each of the above-stated items at the accessible toilet rooms.

### **Priority 3.6 – Toilet room entrance at least 32” when opened at 90°**

**Observation** – Both public restroom doors measure 29”.

**Corrective Action** – If HPH was to stay at this current location, the door openings would need to be widened to allow for accessibility.

### **Priority 3.7 – Toilet room has at least 18” of maneuvering clearance beyond the latch side plus 60” clear depth**

**Observation** – The north toilet room of the Clinic is 3 ½” W of maneuvering clearance beyond latch side, but has > than 60” of clear depth. The E-W Hall toilet room of the Clinic is 15” W of maneuvering clearance beyond latch side, but has > than 60” of clear depth.

**Corrective Action** – If HPH was to stay at this current location, the door openings would need to be widened to allow for accessibility.

### **Priority 3.9 – Toilet room door equipped with hardware that is operable with one (1) hand and does not require tight grasping, pinching, or twisting of the wrist**

**Observation** – Door knobs are on both public toilet rooms in the Clinic. North toilet room has a "slide bar" lock on the inside and E-W Hall toilet room has a standard door knob lock.

**Corrective Action** – If HPH was to stay at this current location, the door hardware would need to be changed to accommodate the accessibility requirement.



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**Priority 3.17 – Clear floor space for a person in a wheelchair to turn in a 60” circle or T-shape space within a 60” square**

*Observation* – The north toilet room of the Clinic has < 60” for a person in a wheelchair to turn around.

*Corrective Action* – If HPH was to stay at this current location, the toilet room would have to be made to accommodate this requirement.

**Priority 3.18 – Single-user toilet room where door swings in and over a clear floor space at an accessible fixture, a clear floor space must be 30” x 48” beyond the swing of the door.**

*Observation* – The E-W Hall Clinic toilet room has a clear floor space of 19” D x 24” W

*Corrective Action* – If HPH was to stay at this current location, it would need to ensure that a clear floor space can be maintained.

**Priority 3.19 – The mirror over the lavatory must have a bottom edge that measures 40 inches**

*Observation* – North toilet room mirror measured 49 ¼” and the E-W Hall toilet room mirror measured 46”.

*Corrective Action* – If HPH was to stay at this current location, it would need to make arrangements to have it moved to meet the requirements.

**Priority 3.21 – Toilet room has at least one (1) lavatory with a clear floor space for a forward approach at least 30” W x 48” L**

*Observation* – The lavatory in the E-W Hall toilet room’s forward approach measured 26” x 48”.

*Corrective Action* – If HPH was to stay at this current location, modifications to the existing E-W Hall toilet room to meet this requirement.

**Priority 3.24 – There needs to be minimum of 27” clearance room from the floor to the bottom of the lavatory that extends minimum of 8” under the lavatory for knee clearance**

*Observation* – Both public toilet rooms have a height measurement of 24” for its lavatory and a depth of 9”.

*Corrective Action* – If HPH was to stay at this current location, the lavatories would need to be modified to achieve the required minimum clearance.

**Priority 3.26 – Pipes below the lavatory need to be insulated or configured to prevent contact**

*Observation* – No protective shielding or barrier observed on either lavatory of both public toilet rooms.

*Corrective Action* – If HPH was to stay at this current location, a protective barrier would be installed.

**Priority 3.28 – Soap dispensers installed no higher than 48” from the floor**

*Observation* – The north toilet room in the Clinic had its soap dispenser measure at 50”.

*Corrective Action* – If HPH was to stay at this current location, the dispenser would need to be moved to meet the accessibility requirement.



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### **Priority 3.29 – Paper towel dispenser operable parts within 48” from the floor**

*Observation* – The paper towel dispensers in both public restrooms are installed with the dispensing opening measuring at 52”.

*Corrective Action* – If HPH was to stay at this current location, the paper towel dispenser would have to be moved to meet the accessibility requirement.

### **Priority 3.33 – Grab bar of a minimum 42” long installed on the side wall; extend 54” from rear wall**

*Observation* – The grab bars installed in both public toilet rooms are 36” long. The north toilet room only has an extension from the rear wall of 45”.

*Corrective Action* – If HPH was to stay at this current location, the grab bar would need to be changed to meet the accessibility requirement.

### **Priority 3.37 – Flush control to be located on the open side of water closet**

*Observation* – The flush control in the north toilet room of the Clinic is located on the closed side.

*Corrective Action* – If HPH was to stay at this current location, the hardware/fixture would need to be changed to meet the accessibility requirement.

### **Priority 3.38 – Toilet paper dispenser located no less than 7” and no greater than 9” from the front of the water closet to the centerline of the dispenser**

*Observation* – The toilet paper dispenser in the E-W Hall toilet room of the Clinic is installed 10” from the front of the water closet.

*Corrective Action* – If HPH was to stay at this current location, the toilet paper dispenser would need to be changed to meet the accessibility requirement.

### **Priorities 4.1-4.9 – Drinking fountains**

*Observation* – The current drinking fountain does not allow a person in a wheelchair to have easy access, since it does not have the proper height requirements.

*Corrective Action* – If HPH was to stay at this current location, the drinking fountain would need to be replaced with one that would accommodate someone in a wheelchair.

Chad Masters, MPH  
Person Completing the Assessment

5/4/2018  
Date

  
Health Commissioner

5/8/2018  
Date

