

Lincoln County
City-County Board of Health Agenda
Lincoln County Courthouse, Libby
6:00 PM, May 13, 2025

- **Call to Order**
 - Pledge of Allegiance
 - Roll Call
- **Administrative Items**
- **Public Comment on Items Not on Agenda**
- **Public Comment on Non-Action Agenda Items**
- **Approval of Minutes**
 - *Action Item:* Approval of 1/14/25 minutes
- **Unfinished Business**
- **New Business**
- **Program Reports:**
 - **Zero to Five**
 - Staffing Update
 - General Program Update
 - **Public Health**
 - *Action Item:* Consider Approval of Foodborne Illness Response Plan
 - *Action Item:* Consider Approval of Truck Wreck Protocol
 - **Environmental Health**
 - Staffing Update
 - Lincoln County Animal Shelter
 - Air Quality Update
 - **Solid Waste and Recycling**
 - Expansion Update
- **General Comments from Board Members**
- **Adjourn**

ZOOM Login – Meeting ID: **5451478326** / Password: **59923**

MISSION STATEMENT

The City-County Board of Health for Lincoln County works to prevent disease and illness, ensures a healthy environment and promotes healthy choices by setting county-wide policies to protect the health of Lincoln County residents.

PUBLIC COMMENT

The Board encourages public comment and time is designated for public comment on every agenda. Public comment on non-action agenda items and non-agenda items is welcomed during the general public comment period. Action items will include public comment as follows:

- Presentation of the action item
- Board motion and second
- Board discussion
- **Public comment**
- Additional Board discussion
- Board vote

GROUND RULES

1. Plan comments to be concise, relevant, and meaningful.
2. Keep questions and comments respectful in content and tone.
3. Submit lengthy, detailed comments or supporting documentation in writing
4. Address the problem not the person.
5. Be prepared by reviewing the agenda and pertinent information.
6. Listen with an open mind.
7. Focus on the mission statement.
8. Encourage participation of all board members and attendees.
9. Public participation according to Operating Procedure #2:
 - Participants will address the Board at the time designated in the agenda or as directed by the Board, by presenting before the Board and stating their name audibly.
 - Persons wishing to speak, including Board members, shall first be recognized by the Chair. One speaker shall be given the floor at a time and may not re-enter the discussion without being given recognition by the Chair.
 - Verbal comments will be limited to 3 minutes per individual or as time permits.
10. Participants ask the chair for permission to speak. Participants are to give their full name and topic.
11. Questions or remarks shall be addressed to the board as a body and not to any member of the board or staff without permission from the chair.
12. If a remark has been made, the attendee can agree with what was previously stated. Repetition is unnecessary.

Everyone is responsible for enforcing ground rules.

Lincoln County
City-County Board of Health Minutes
Lincoln County Courthouse, Libby
6:00 PM, January 14th, 2024

- **Call to Order**
 - **Pledge of Allegiance**
 - **Roll Call**
 - Kristin Smith, Amy Fantozzi, Jim Hammons, Jim Seifert, Jan Ivers (zoom), Patty Kincheloe (zoom), Lannie Fehlberg (zoom). Quorum present.
 - **Zoom Attendance**
 - Molly Wendland, Robin Blumberg, Scott Schindledecker, Ray Stout, Danielle Faris
 - **In Person Attendance**
 - Zach Sherbo, Dustin Webb, Kathi Hooper
- **Administrative Items**
 - *Action Items:* Election of Officers
 - Jim nominated Amy for chair. All in favor. Amy resides as chair. Jim Seifert nominated Jan as vice chair. Amy nominated Kristin as vice chair. Jim Seifert withdrew his nomination since Jan said Kristin would do a great job. All in favor for Kristin. Kristin is now vice chair. Jim Hammons nominated Jim Seifert for secretary. All in favor. Motion passes for Jim Seifert to be the new secretary on the board.
- **Public Comment on Items Not on Agenda**
 - Jim Seifert would like the board to do a walkthrough of the animal shelter to find any inadequacies that there may be a need for. The board decided that it is a good idea and will schedule a date to tour the shelter.
- **Public Comment on Non-Action Agenda Items**
 - None at this time.
- **Approval of Minutes**
 - *Action Item:* Approval of 11/12/2024 Minutes
 - Jan motions to approve. Kristin seconds. All in favor. Motion passes.
- **Unfinished Business**
 - None at this time.

- **New Business**

- **Crisis Response Team**

- The board discussed the Crisis Response Team. Jim Hammons said CPMC will be taking over the program and will be working with Lincoln County. CPMC will be creating an MOU agreement to keep this program going and available for those that need it. Molly Wendland from Montana Public Health Institute presented information on the crisis diversion grant. Board members discussed some concerns that they would like to see resolved within the Crisis Response Team.

- **Program Reports:**

- **Zero to Five**

- Transitioning to a New Local Collaboration Coordinator
 - Kathi shared that Dorey Rowland will be retiring in May instead of February. During these months Dorey will be working on securing grants to fund Zero to Five to make the new hire's position more sustainable.
 - Strategic Reflection Session
 - Dorey had a Strategic Reflection Session to determine the scope of work for 2025 including developing a sustainability plan. Trego Learn and Play celebrated their 100th play group and have served 128 unique children and 98 caregivers. So far, Zero to Five has distributed 300 STEAM Kits in 2024 as part of a grant.

- **Public Health**

- Credible Mind
 - Zach Sherbo gave an update and quarterly report on Credible Mind.
 - Opioid-MOAT Region 5 and County Abatement Funds
 - Zach said there are opioid abatement funds coming into Lincoln County. Lincoln County is one region of three that makes up the Region 5 MOAT, Sanders County and Mineral County included.
 - *Action Item:* Approval of Communicable Disease Response Plan
 - Kristin motions to approve the Communicable Disease Response Plan. Jim Seifert seconds. All in favor. Motion passes.

- **Environmental Health**
 - Food Safety: FightBAC Campaign
 - Dustin introduced the FightBAC Campaign that is being incorporated to the Food Safety Program in partnership with Zero to Five. This program will aim to educate children about food safety.
 - Air Quality: Wildfire Smoke Preparedness- Clean Air Center Program
 - Dustin said that DPPHS approached the department in August of 2024 with an idea to establish clean air shelters during wildfire season in various counties. DPPHS provided a draft task order at the end of last year for the shelter events that will start in 2026.
 - FDA Retail Program Standards
 - Dustin said that LCHD has been a part of the FDA Retail Program Standards since 2008. It requires attention every year updating self-assessments every five years. This is the third year the department has filed for FDA grants to support the program. He said that LCHD has filled the obligations to all of the grants so far and has also met three out of nine measures which is the most that has been met since enrolling in 2008.
- **Solid Waste and Recycling**
 - Expansion Update
 - Kathi said that the expansion license was received from the state. Advertising for bids for the construction will start next week. The bid will be rewarded in February and construction will begin in March and the project will wrap up in October. The project construction costs are around 5.3 million including about 700k in construction oversight.
- **General Comments from Board Members**
 - Jim Seifert asked Jim Hammons what the most frequent complaints are about the green boxes since the recent closures. Jim Hammons said that the days and the hours are the most brought up topic.
- **Adjourn**
 - Meeting adjourned at 7:21 pm. Next meeting will be April 8th in Libby.

Lincoln County
Procedure for Investigating Foodborne Illness & Food-Related
Injury

May 2025

APPROVAL AND IMPLEMENTATION
LCHD Foodborne Illness & Food-Related Injury

This document is hereby approved for implementation and supersedes all previous editions.

Signature
Dr. Brad Black, MD
Health Officer

Date

Signature
Amy Fantozzi, Chair
Board of Health

Date

Signature
Kathi Hooper, Director
Health Department

Date

Record of Changes

Date	Revisions Made	Approved by:	Distribution Date
06/2018	Development		
03/2019	Revised typos		
5/2025	Updated contacts		

Introduction

A foodborne outbreak is the occurrence of two or more cases of a similar illness resulting from the ingestion of a common food. An outbreak may also result from ingestion of foods from a common source, such as a restaurant, where multiple foods were contaminated by an ill food worker or a contaminated surface, or when an establishment receives food that was previously contaminated somewhere along the farm-to-fork chain.

Purpose

1. Identify the cause of the outbreak to prevent additional cases of illness.
2. Develop interventions to prevent similar outbreaks from occurring in the future.
3. Improve our understanding of foodborne diseases by identifying the contributing factors and antecedents that cause individual outbreaks.

Notification

Detection and subsequent notification of outbreaks can occur in a variety of ways including:

1. **Notification by the Public (by Ill Patrons)**
 - a. Single complaints of suspected foodborne illness are monitored to look for common factors such as food establishment, onset, food product, or demographics that may be indicative of an outbreak. For example, in one day 15 alerts may be received that all mention dining at Restaurant X or consumption of refried beans, or were from unrelated individuals who all resided in the same town.
 - b. **Multiple Illnesses** - Notification of an outbreak may be received from attendees of a party, special event, or other large gathering who become ill and report the occurrence to the local or state health department.
2. **Routine Surveillance** The state or local health department (LHD) receives confirmed laboratory results for a reportable foodborne disease. These results include notification of local or multi-state outbreaks based on common Pulsed Field Gel Electrophoresis (PFGE) results or other factors.
3. **Notification by a Health Care Worker** A physician, nurse, facility director or other health care practitioner reports a suspected outbreak by phone to the state/local health department, based on the number of patients reporting who have similar symptoms, exposure, etc.

The foodborne outreach investigation team consists of:

- Health Officer
- Health Department Director
- Sanitarian
- Communicable Disease Coordinator

Roles and Responsibilities

- The **Health Officer** will stay abreast of the investigation and ensure that resources are available for the prompt and effective conduct of the investigation and communication of

the results. The Health Officer will assist in communications within and outside of the department, as necessary.

- The **Health Department Director** will guide and assist department employees in the conduct of their duties, and collaborate with team members for the coordinated conduct of the investigation, obtaining background medical information relevant to the investigation, obtaining clinical specimens, evaluating the cause of the outbreak, and assisting with hypothesis generation and the subsequent hypothesis evaluation.
- The **Communicable Disease Coordinator** will collaborate with team members for the coordinated conduct of the investigation, evaluate the cause of the outbreak, investigate the disease cases and assist with hypothesis generation and the subsequent hypothesis evaluation. The communicable disease coordinator will conduct foodborne disease surveillance; characterize the outbreak; develop hypothesis; conduct special studies and analyses that identify risk factors such as implicated food items; and interview cases.
- The **Sanitarian** will assist with the inspection of food service facilities and process and evaluate possible causes of the foodborne illness outbreak, obtain relevant specimens for testing, determine appropriate interventions, monitor results of those interventions, and compile epidemiological information on the outbreak. The sanitarian also conducts environmental investigation that may include interviewing food workers; referring food worker for collection of stool specimens; collecting food and environmental samples for laboratory analysis; conducting food preparation reviews (food flows); identifying contributing factors (contamination, proliferation, and survival) and antecedents; implementing and monitoring long and short-term controls

Communication

During a foodborne illness outbreak investigation, the investigation team will meet frequently, either formally or informally, to keep collectively updated on the progress of the investigation. The team will designate one of its own members to update other employees of the Health Department, the Board of Health and the Commissioners about the investigation's progress.

If the investigation indicates foodborne illness or poisoning developed from a food establishment (not licensed as a retail food establishment), the state or federal agency governing the establishment will be notified by the health officer.

The health officer, or designee, will contact appropriate representatives from DPHHS regarding the progress of the investigation. Other team members will assist with this communication, as needed.

The health officer, or designee, will communicate with the general public and the media regarding the progress of the investigation. Other team members will assist with this communication, as needed.

Procedure

1. After the notification is made to the Health Department the person receiving the complaint (whether sanitarian or communicable disease coordinator) will follow-up and share with the appropriate team members.
2. The sanitarian and/or the communicable disease coordinator will determine whether to trigger a foodborne illness outbreak investigation if two or more people who have ingested a common food and have similar disease, similar symptoms or excrete the same pathogens.
3. If an outbreak does not appear to have manifested, based upon the investigation and information provided, the complaint will be considered isolated and closed. However, a case history will be completed in the event the information becomes relevant in the future.
4. When the decision is made to trigger a foodborne illness outbreak investigation, the initiating team member will determine when formal and informal meetings of the investigation team are necessary.
5. The Communicable Disease Coordinator and the sanitarian will:
 - a. Obtain an itemized list of people and phone numbers exposed to the suspect meal, ill and well contacts alike. This may include an attendance list, credit card receipts, or roster of clientele. These individuals, also, will be contacted and interviewed in order to complete case histories.
 - b. Obtain a complete menu, including side dishes, desserts and beverages of the suspect meal to assist in more accurate interviewing of people exposed.
 - c. Findings as the investigation progresses will be reported to team.
 - d. All food from the suspect meal(s) will be entered into the Food Attack rate table and data will be compiled for each food regarding the number of ill and well people who ate the food, as well as the numbers of ill and well people who did not eat the food. Using these tables, calculations will be made to indicate the specific attack rates and exposures.
 - e. The hypotheses for a possible pathogen and the implicated food will be formed.
6. The Sanitarian will conduct a thorough inspection of the establishment and interview all food service personnel regarding food sources, food preparation techniques, storage and display, and transportation procedures used at the time of the suspect meal.
7. The team will decide which collected food samples will be forwarded to the Montana Public Health Laboratory for testing (All samples must be submitted to the Montana Public Health Laboratory. The laboratory will then determine if other laboratory support is required).
 - a. Use the correct kit for specimen collection and delivery.
 - b. Follow procedures for food collection and handling, and human sample collection handling. The procedures are in the foodborne illness outbreak kit.
 - c. Contact the Montana Public Health Laboratory (DPHHS) for proper procedures regarding transportation of specimens to the lab (phone number 406-444-3444).
8. The Communicable Disease Coordinator is responsible for creating a final report of the foodborne illness outbreak investigation for submission to DPHHS. The team will complete

CDC Form 52.13 to summarize the foodborne illness outbreak investigation results. Team members will compile a cover letter describing any components of the investigation that were not adequately summarized in CDC Form 52.12. This cover letter, along with CDC Form 52.13, will be submitted to DPHHS as a final report of the investigation.

9. The Communicable Disease Coordinator will contact hospitals, clinics, local physicians, etc., to notify the medical community of a possible foodborne illness outbreak and to request assistance in obtaining fecal, vomitus, blood, and other related samples prior to administration of antibiotics.
10. Control measures will be implemented. The Department will need to educate all clients about the disease process, emphasizing hygiene, particularly proper hand-washing techniques.

LINCOLN COUNTY HEALTH DEPARTMENT
TRUCK WRECK PROTOCOL
INVOLVING
FOOD AND CONSUMER PRODUCTS
MAY 2025

Distressed Foods & Other Consumer Products
Resulting from a
Transportation Accident or Other Emergency

Based on the Montana Department of Public Health & Human Services Food & Consumer Safety Section, "Guidelines for Handling Distressed Food, Drugs, and Cosmetics in Truck and Train Wrecks Emergency Response Procedures." September 5, 2008

This guidance is applicable in any transportation accident involving food, drugs, cosmetics, or other consumer products. The purpose of this guidance is to protect public health and safety by preventing consumers from receiving contaminated food, drugs, cosmetics, and other consumer products.

APPROVAL AND IMPLEMENTATION

LCHD Truck Wreck Protocol

This document is hereby approved for implementation and supersedes all previous editions.

Signature

Dr. Brad Black, MD
Health Officer

Date

Signature

Amy Fantozzi, Chair
Board of Health

Date

Signature

Kathi Hooper, Director
Health Department

Date

Contact information

Lincoln County Health Department 24/7

Lincoln County Sheriff's Office Dispatch: 406-293-4112 / Ext: 0

Lincoln County Emergency Management: 406-334-7194

Sanitarian(s) On Call

Kathi Hooper (24/7) 406-291-1168

Robin Blumberg (24/7) 406-579-2194

State of Montana

Food & Consumer Safety (FCS) during work hours: 406-444-5306 or 2408

FCS Fax Number: 406-444-5055

Communicable Disease Control & Prevention Bureau 24/7: 406-444-0273

MT DES: 406-324-4777 or 4773

Truck Wreck Response

1. **Communication.** Law Enforcement (MHP or local officer) responds to the scene. Law Enforcement notifies MHP dispatch if needed. Lincoln County Sheriff's Office Dispatch will contact local Emergency Management Agency and the county sanitarian. Local DES calls the state DES. State DES calls the DPHHS duty officer, who calls the FCS. FCS will verify that a county sanitarian has been notified. The County Sanitarian is encouraged to call FCS directly, to save time. If after hours, the health officer can call the 24/7 DPHHS duty officer. FCS also contacts other agencies.
2. **Authority and Responsibility.** Almost always, the food products, drugs or cosmetics will be transported across county lines to interstate, making the state responsible for product control. The local health jurisdiction acts as the states authorized agent,

If the products are meat or poultry, then FCS will contact USDA and/or MDOL. As directed by USDA, products will be moved to the nearest inspected facility.

The responsible person/entity is obligated to control their products. Shipping contacts will contain this information (examples are shipping companies, receivers, haulers ort drivers). The wrecker service usually takes over traffic control responsibility when law enforcement leaves the scene.

The sanitarian should take steps to track the products and prevent pilferage. Official seals can be attached to containers if measures are needed to stop illegal salvaging or the load required an inspection upon destination arrival (Note: seals are available from FCS or law enforcement). This allows DPHHS to follow-up with the disposition of the sealed load in the receiving jurisdiction.

3. **Documentation.** Collect information as indicated on the "Truck Wreck Report" form (attached). This is easiest to obtain from the responding law enforcement within the hour of the wreck. The wrecker service and responsible person usually make storage arrangements. A "Voluntary

Disposal Agreement” or a “Voluntary Holding Agreement” form is completed by the sanitarian and the responsible person after an assessment of the products are made.

4. **Damage Assessment.** If damage is minimal, meaning the vehicle is not broken open, there is no obvious contamination, and there is no known benefit for a site visit, then products can be moved into a central location for observation and inspection. Pictures are very helpful in determining the extent of potential damage.
5. **Salvageability.** Salvaging requires licensing as of 2004. Currently only one (1) business is licensed; Montana Foodbank Network based in Missoula.

The products are salvageable, if **ALL** of the following are true:

- a. The load did not contain chemicals that could cause contamination;
- b. No products were exposed to dust, dirt, flies, fuels, oils, refrigerants, or other hazardous materials;
- c. Potentially hazardous foods were not above 45° for more than 2 hours;
- d. Fresh products were not wilted or frozen;
- e. Containers are not damaged;
- f. Soft plastic containers were not exposed to chemicals, fumes, or moisture;
- g. Cans are not dented along any seam or significantly dented elsewhere.

Damaged food may be suitable for animal feed, if approval is given by MT Department of Agriculture.

Disposal is necessary if the products are not salvageable or not suitable for animal feed. Often the responsibly person chooses to dispose of the products on their own accord.

6. **Completion.** Fax completed wreck report and signed voluntary disposal or holding forms to FCS at 406-444-5055