

LUCAS COUNTY REGIONAL HEALTH DISTRICT
Board of Health Meeting
Department of Operations Center (DOC) #254
March 22, 2018– 8:30 A.M.

I. Call to Order and Roll Call

Dr. Donna Woodson, President, called the meeting to order at 8:35 AM.

A roll call was taken of Board Members for attendance.

Present: Barbara Conover, Richard Fernandez, DPT, Matthew Heyrman, Ted Kaczorowski, Susan Postal, Barbara Sarantou, Donna Woodson, MD.

Absent: Fritz Byers, Reynald Debroas, Perlean Griffin, Donald Murray and Johnathon Ross, MD,

II. Introduction of Guests

Eric Zgodzinski introduced guests: There were several MPH students in attendance today. AFSCME and ONA representatives: Terri Dalton and Cindy McLeod. Sammy Droubi and Peter Nguyen who are UTMC Population and Public Health Elective, 4th year Medical Students.

Staff & Others: Tina Stokes, David Welch, Shannon Lands, Kelly Burkholder-Allen, Barry Gordon, David Grossman, MD, Alice Dargartz, Legal Council: Kevin Pituch, Lauren Lindstrom-Toledo Blade

III. Additions/Deletions to Agenda

No changes in the agenda

IV. Approval of the February 22, 2018 Board Minutes

(Resolution 2018.03.036) A motion by Richard Fernandez, DPT, and seconded by Ted Kaczorowski to approve the minutes of the February 22, 2018 Board of Health meeting Motion carried. 7 yeas, 0 nays.

V. Approval of Payment for February 2018 Vouchers

Ted Kaczorowski presented the February vouchers which were reviewed at the Monday, March 19, 2018 meeting of the Audit/Finance Committee Meeting.

(Resolution 2018.03.037) A motion was made by Barbara Conover and seconded by Barbara Sarantou to approve the February 2018 vouchers. Motion carried. 7 yeas, 0 nays.

VI. Legal Update

Legal Counsel, Kevin Pituch, reported that the law suit filed against the Board of Health and the City of Toledo regarding the enforcement of the Lead Ordinance continues. The group ABLE asked to join us in court to make arguments in favor of the Lead Ordinance. The court turned them down, stating that the Board and the City of Toledo can make all of the arguments necessary, which we have. It is anticipated that, by this time next month, we will have a decision.

VII. Executive Session

There was no Executive Session required.

VIII. Prior Business

A. ODH/Lead Safe Program

- a. Gloria Smith presented information outlining lead case management. Ms. Smith gave an overview of requirements for the Childhood Lead Prevention Program: "The Lead Safe Ordinance deals with the issue of lead prior to the level at which a child is considered "poisoned". In Lucas County there are approximately 3400 children who are considered to be lead poisoned at any given time. There are 17 zip codes in the county that are high risk zip codes. Those children with lead levels of 5 ug/dL or above are concentrated in five of the zip codes in Lucas County. Referrals are sent to TLCHD by the State of Ohio when a child has tested high with lead. Additional referrals are received from providers, schools and family members. Many families are very mobile, with frequently changing addresses which makes it a challenge to locate families. After locating the family we establish contact and begin the investigation. We look at where the child currently lives and any past residences. A parent/guardian's occupation is taken into consideration if they are working in a high lead area where they might bring lead dust back into the home. We assess if a child is out of their home more than 6 hours a week and may be picking up the lead dust elsewhere. We also check to see if the child is given any herbal remedies or vitamins packaged outside the country. Imported foods are a concern if it comes from a country that has not outlawed the use of lead in packaging. Toys and children's products that have been made with lead are also a concern. We have cleaning kits with proper supplies we can provide to families and special sweepers that filter the lead dust particles that can be loaned to the families. ODH investigation guidelines include children with 5 ug/dL blood lead levels and the case stays open until that child's lead level drops below 5 for two consecutive blood tests. A medical and development screening is also done on the child. Nutrition is discussed so the family knows which foods can help lower the lead levels. Referrals are done regarding housing, furniture and any environmental issues that may lead to a cause for the lead level to be elevated." Gloria provided several handouts concerning lead.
- b. Vaughn Jackson provided an overview of the process of conducting a lead assessment. The importance of the use of dust wipes was discussed. Vaughn demonstrated the use of the XRF meter which is used on all of the painted and horizontal surfaces of the home. This will give an instant reading of any lead presence in the paint. Window sills and other area that are accessible are checked for cracking and dust.

Dr. Woodson asked about the accuracy of the meter compared to the dust wipes. Vaughn stated that the dust wipes and the meter are both very accurate. The meter gives an instant reading, whereas, the dust wipes are sent in for testing. When this was discussed at prior board meetings the discussion concerned staying on the side of science and using a more precise reading, that is the dust wipes, versus just observation..

Vaughn stated that if any type of work was done on the exterior of a house such as scraping or power washing can be a source of exposure for children. Often times the area is not cleaned up well and there are paint chips left around the property.

We provide clean up kits to families. This kit includes a mop, bucket, gloves, cloth wipe, Lysol wipes and all-purpose spray (which is recommended for lead clean up), sponge, Tri-sodium phosphate (TSP). The funds to purchase these items comes from the proceeds of

our Annual Golf Outing. (The Golf Outing is held the second Saturday of September which will be the 8th this year.

Dr. Woodson stated that we are very fortunate to have Vaughn and Gloria working in this program. It would be helpful for other political entities to learn about this process. They met the Mayor of Toledo last week about lead, along with the Health Commissioner and some Board of Health members.

We pay \$4-\$5 per wipe which includes the wipes, tubes and analysis. Some companies are charging up to \$25 per wipe which is a concern to the property owners. There are other companies who have their prices down to a reasonable amount so we suggest that they call around to find the best price.

Gloria stated that it is important to know that our Health Department is always addressing the lead issue with our children. Vaughn introduced our other lead program staff members; LaTasha McDonald, Risk Assessor and Diana Heitmeier, Risk Assessor.

Dave Welch stated that the ODH Lead Program is a reactionary program that gets the child's lead testing sent to us. The Lead Safe Program is a preventative program that gets the homes safe.

B. Public Health Accreditation Board (PHAB)

- a. Brandon Palinski reported that we had our Mock Site Visit last Wednesday. There were two individuals who came to assist in the Mock Visit. Chad Brown from Licking County Health Department and Laurie Dietsch from Columbus Public Health. We chose to approach them for their involvement in accreditation statewide. They both come from accredited health departments and are both PHAB site visitors- meaning they have been trained to perform site visits by PHAB. We are unable to have them as our actual site visitors because no one from Ohio can be a site visitor for any other Ohio department to avoid bias and conflicts of interest. We arranged the Mock Site Visit around what we might expect during our actual site visit. Staff were interviewed in a similar manner to what they can expect during our PHAB Site Visit which helped put everyone at ease and convey expectations. All of the documentation that had been submitted to PHAB was reviewed by Chad and Laurie and each of the twelve domain leaders and teams were interviewed. Laurie and Chad provided the worst case scenario of what we might expect at our site visit. We provided them with questions received from our actual site visitors regarding our documentation. Laurie and Chad compared it with their notes during each interview which gave us a good sense of what to expect. We followed advice that was given by Chad and Lori to improve on what we had to submit back to our actual site visitors. Submitting additional documentation as part of the pre-site visit requests by our site visit team was the last proactive obligation on our part before the site visit on April 19 & 20. The PHAB Site Visit will include a Community Partner interview and a Board Member interview in addition to interviews over each of PHAB's domains. Information packets have been given to those Board Members being interviewed. The site visit's purpose is to verify that we are doing what we indicated were our practices.

Eric stated that the site visitors will be interested in how the staff interacts with the board, how the board makes policy, and how the board follows up on items. In the future, we will be developing a plan on how to come back to the board on more trending analysis.

Brandon stated that the entire basis for Public Health Accreditation is continuous improvement. There is always room for improvement. The accreditation process is still very new. In addition to how the Board interacts and communicates with the department, they want to know that you know where the board's authority comes from, which is the Ohio Revised Code (ORC) and the Ohio Administrative Code (OAC). They may ask what the Board's role is in the Strategic Plan, and how the board works with our community partners. They will be verifying that what we have told them is accurate and it is how we do business. This is to give them the feel that the Board is actually connected and involved in what is going on.

Eric stated that the site visitors are from different states and do not know what goes on in Ohio. They don't know our process so it will be our task to explain it to them. They will be discussing the measures and if we meet them. If we don't meet enough of the criteria, they could put us on an action plan. Chad did not think that we would be put on an action plan after the mock site review. Every measure is reviewed and items that we have submitted are graded on a "not demonstrated" to "fully demonstrated" scale. During the interview, good explanations can change what they have initially scored a measure. It comes down to how well we explain ourselves.

Eric stated that we have to be accredited by 2020. Many departments in the state thought they might get a waiver or get out of doing this, but it will not be the case. In a discussion two weeks ago it was reaffirmed that no department will be able to get out of becoming accredited. Ohio is still the only state that has mandated accreditation. Many states are waiting to see what happens in Ohio before they decide to make it a mandate.

Dr. Woodson stated that it has been known for a while all boards of health in the state of Ohio have to be accredited by 2020. For the newer board members, however, it should be known that this health department started the process well before it was made a requirement. We thought it was important for us to proceed with the accreditation process. Brandon has really involved the staff in the process, it is driven by staff comments and assessed by the Board. The Board President and another Board of Health member attended the meetings.

IX. New Business/Points for Consideration

A. Eric reported that the District Advisory Council (DAC) met on Wednesday, March 14, 2018. The meeting went well. The changes with the FQHC were discussed. The budget for 2019 did not increase for the DAC. Human Resources and Cultural changes at the department were also discussed. In general, Andy Glenn, chairman, was happy with what was presented from our department. Board members in attendance were Matt Heyrman, Sue Postal, Richard Fernandez, DPT, Barb Sarantou and Dr. Woodson.

X. Committee Reports

A. Audit/Finance Committee Report

Ted Kaczorowski stated that the Audit/Finance Committee met on Tuesday, March 20, 2018. The Audit/Finance Committee has reviewed the bill schedule.

Revenues:

General Revenue Fund:

- 2018 Collected 36% \$1,825,227.51; represents \$162,103.96 revenue collected from all General Fund programs and first half subdivision taxes of \$1,663,123.55.
- Projected General Fund revenue for 2018 is \$5,014,990.00. This represents expected income from all GF programs and \$3,229,366.00 as annual distribution from political subdivisions.

Special Revenue Fund-Fees:

- 2018 Collected 15%; \$651,447.16 of revenue.
- Projected revenue in 2018 is \$4,292,950.00.

Special Revenue Fund-Grants:

- 2018 Collected 3%; \$504,477.83 of revenue.
- Projected revenue for 2017/2018/2019 is \$17,929,332.48 based on grant awards and contracts.

Special Revenue Fund-FQHC:

- 2018 Collected 12%; \$527,997.44.
- Projected revenue in 2018 is \$4,511,019.00, based on FQHC grant awards.

Expenditures

General Revenue Fund:

- 2018 Expended 1%; \$14,890.82 cash expenditures and \$47,894.24 as encumbrances.
- Annual appropriation for 2018 is \$5,014,990.00.

Special Revenue Fund-Fees:

- 2018 Expended 13%; \$355,444.33 cash expenditures and \$1,359.42 as encumbrances.
- Annual appropriation for 2018 is \$2,674,806.00.

Special Revenue Fund-Grants:

- 2018 Expended 15%; \$1,001,355.19 cash expenditures and \$1,411,922.04 as encumbrances.
- Annual appropriation for 2018 is \$16,618,587.09.

Revenue Fund-FQHC:

- 2018 Expended 18%; \$655,559.75 cash expenditures and \$164,022.15 as encumbrances.
- Annual appropriation in 2018 is \$4,511,019.00.

Updated Grant Funded Programs

- Total applications in the amount of \$7,374,314 for 2018 fiscal year and for the same time period we have been awarded \$7,194,529 in funding.
- Total applications in the amount of \$5,938,799 for 2019 fiscal year and for the same time period we have been awarded \$1,447,809 in funding.

There were four (4) Notices of Award:

- Healthy Homes Awareness Month 2018, \$10,000.
- Healthy Start Initiative Round 2 (Level 1), \$242,509.
- Toledo Lucas County Getting to 1 (NW Ohio), \$243,250.
- State Funding to Target Disparity in African American Infant Mortality Rate, \$1,005,300.

Pending Grant Applications

There are 14 pending grant applications.

Review of Contracts

There are 17 Contracts for review in the month of March, 2018.

Other Items – Transfers of Appropriations

A transfer reallocates funds from one cost object to another. Board of Health Resolution is required to approve Transfers of Appropriations performed in the month of February 2018 in the ordinary course of business. Total transfer is \$36,532.50 consisting of changes in various expense categories.

(Resolution 2018.03.038) Motion Barb Sarantou and seconded by Richard Fernandez, DPT, to approve the Transfers of Appropriations for the month of February 2018 in the amount of \$36,532.50. Motion carried. 7 yeas, 0 nays.

A Board of Health Resolution is required to approve changes in Revenue Estimates and Expense Appropriations for the month of February 2018 in the amount of \$40,832. This represents new revenue estimate and appropriation for Safety Net 2018 and DEEP Classes 2018.

(Resolution 2018.03.039) Motion made by Matthew Heyrman and seconded by Susan Postal to approve the changes in Revenue Estimates and Expense Appropriations for the month of February 2018 in the amount of \$40,832. Motion carried. 7 yeas, 0 nays.

Community Cessation Initiative for Tobacco Grant - Authorizing Resolution: Authorizing the Health Commissioner to approve all contracts and provider agreement expenditures for the 2017-2018 Community Cessation Initiative (CCI) Tobacco Grant.

This would include:

1. To enter into contract through a MOU with referring entities.
2. To enter into a contractual agreement with providers.
3. To approve all invoices and expenditures regarding the 2017 and 2018 CCI Grant

(Resolution 2018.03.040) A motion was made by Matthew Heyrman and seconded by Barbara Sarantou to approve the Authorizing Resolution for the Community Cessation Initiative (CCI) for the Health Commissioner to approve all contracts and provider agreement expenditures for the 2017 – 2018 CCI grant. Motion carried. 7 yeas, 0 nays

(Resolution 2018.03.041) A motion was made by Matt Heyrman and seconded by Richard Fernandez, DPT, to approve the entire Audit/Finance Committee report. Motion Carried. 7 yeas, 0 nays.

B. Personnel Committee – Susan Postal

The Personnel Committee meeting was held on Monday, March 19, 2018.

A Board of Health Resolution is required to appoint the local registrar of vital statistics. Per the Ohio Revised Code Section 3705.05 “The board of health of the health district, on the recommendation of the health commissioner, shall appoint the local registrar of vital statistics.” The local registrar for the Toledo-Lucas County Health Department, Kelsey Coats, resigned effective March 16, 2018. Tina Stokes will be appointed as the local registrar until other positions are filled in Vital Statistics.

(Resolution 2018.03.042) A motion was made by Ted Kaczorowski and seconded by Barbara Conover to appoint Tina Stokes as the local registrar. Motion carried. 7 years, 0 nays.

There are two job descriptions that are being updated. The first is the Clerk I position. The typing requirement of words per minute (wpm) is being changed to 35 from 45 wpm and a valid driver's license must be obtained within the first six (6) months of employment.

Barry Gordon stated that numerous job descriptions are being reviewed. In the past there have been several job descriptions for the same classification. Job descriptions for the same position (e.g. Clerk I) were being writing for specific departments. Since the jobs are for entry level positions, it was determined the department should eliminate the additional versions and genericize them so we could take a candidate and put them into a position and utilize them if needed in another department. We would not be bound by the language of a position-specific job description. In regards to the Clerk I position WPM change, these positions are largely data entry. With the requirement of the driver's license, it has been found that a number of younger people don't drive, so candidates would have the opportunity to get that taken care of within the probation period. If they don't make the minimum requirement within the six months then they will no longer be employed.

Matt Heyrman asked if this is a situation where we need to have conversation with AFSCME. Barry stated that in communication with Union leaders, the topic of the numerous job descriptions has come up. They are very receptive with our approach. We are working very well with both unions in getting some these issues resolved and creating a more streamlined process

We have a very good accredited program at Lucas County that we have access to use for testing. This is the preliminary of getting people in here that we feel are the best candidates.

Dave Welch stated that we went through 20+ applicants in order to get one that could type the required 45wpm when what we needed was someone who could do the data entry. It took months to get to the point of being able to hire someone. There are three different tests that are given for the clerical positions: typing, proofreading, and data entry.

The Lead Sanitarian position was also discussed. With the current number of Lead Safe Program registrations, we have received to-date approximately \$8,000. We cannot currently afford to keep the Lead Sanitarian in that position. There is currently an open position in the food program where we can temporarily place the Lead Sanitarian. When the deadline for the registrations comes closer, we can move her back into the Lead Program. We have worked with the union on this issue. There are 12,000 registrations due by July 1, 2018 in Phase I with another 10,000 due in Phase II.

There is a Vital Statistics Clerk II position which will be posted internally.

Cultural Competency: Perlean Griffin has been working on this issue. A quote has been received which needs to be reviewed. Barry Gordon looked at the quote and proposal and believes there are some of the items that can be handled elsewhere to bring in training for cultural competency. Will revisit this in future meetings.

FQHC – We have been talking with the unions in regards to the FQHC. Through a combined effort we will be getting a letter out to the affected staff. An email was sent to all employees with the

positions being affected, but no staff names were included. The staff now understands these are the projected positions. Nothing officially can be done in regards to layoffs until everything is in order and information is brought to the board.

Hired/Seperated Employees: list is provided in packet

There will be exit interviews when possible with any employee who resigns or retires. Susan Postal stated that, as a newer member, she plans to support Perlean in the exit interviews. The exit interviews can bring a lot of knowledge and insight from the person working in the program.

Dr. Woodson stated, with all the changes going on with the FQHC, it will be good for us to hear from those employees concerning their employment at TLCHD.

(Resolution 2018.03.043) A motion was made by Matthew Heyrman and seconded by Ted Kaczorowski to approve the Personnel Committee report. Motion carried. 7 yeas, 0 nays.

C. **Environmental Health Committee Report**

Richard Fernandez, DPT, reported that the Environmental Health Committee met on March 15, 2018.

- 1) Two forms were revised/updated: *The Property Improvement Application/New Construction Application and the Request for Mortgage Inspection Form*. There was the need to amend the wording of the application to state that “Clearly marked, known locations of underground utilities on property grounds, (ie: gas, electric line, etc.) specifically within the potable well, sewage treatment system, and proposed construction site locations, the Toledo-Lucas County Health Department is not responsible for damages to the property that may result from inspection activities.” There are certain distances utility lines must be from the septic and well systems. Occasionally, we have found that some utility lines were installed and the information was not given to this department. This clause protects the department in the event any damage is done to a utility line while the inspection is being done.
- 2) At the District Advisory Council (DAC) meeting it was brought to our attention that there is a Toledo Metropolitan Area Council of Governments (TMACOG) draft agenda for the Lake Erie policy making recommendations as to what the city, county and the BOH can do for Lake Erie. The part of the policy that we are considering, as the health department, pertains to on-site sewer systems. The recommendations our staff made refers to parts of the policy where it is worded to “strongly suggest” that property owners tie their system into a sanitary sewer if one becomes available in their area. However, it is part of the law that this be done, and if a sewer system comes into an area, the property owner is required to tie into the line. We clarified this in our recommendation that TMACOG should refer to what is law instead of using the words “strongly suggest”. The recommendation is that we get an Operation & Maintenance (O&M) Program. Again, it is law that we have an O&M program and should not read “strongly recommend” that the health department have one. The third point is to “require real estate transfer inspections”. We do not want them to be required. This is an unfunded mandate to us. We recommend that the wording be changed to “strongly encourage when there is a real estate transfer to get the septic system inspected”.

We are in the process of getting our O & M Program up and running and will be meeting with representatives in the county next week including Andy Glenn who is the DAC President. These recommendations will also be discussed at the meeting.

- 3) Lead Program Update – Dave Welch presented the Lead Safe budget. It is based on 5,000 registrations, \$225,000. This includes salaries of the sanitarian, lead inspector, part-time supervisor, clerk and a couple incidental staff in the program. This is funded by the registration fees. The ODH Lead Program is about \$208,000. We receive approximately \$22,000 in Medicaid reimbursement which leaves about \$180,000 to come from our general fund to support the lead program. In that program we have the public health nurse, lead inspector, clerk and part-time supervisor.

(Resolution 2018.03.044) A motion was made by Barbara Conover and seconded by Barbara Sarantou to approve the Environmental Health Committee report. Motion carried. 6 yeas, 1 abstain pending further comments on the TMACOG issue later in this meeting.

D. Facilities Report – Barbara Conover

- a. There was no meeting this month.

E. Legislative Committee:

- a. Eric reported that there was a combined meeting between the Legislative and Environmental Health Committees to discuss the Lead Ordinance and bring everyone up to speed with what is happening at this point in time. The meeting went well. There are multiple House and Senate bills just introduced that will be forwarded to the Legislative committee.

XI. Pending Business

A. FQHC Report

- a. Kelly Burkholder-Allen stated that the FQHC board will be voting on accepting a candidate and making an office for CEO/CFO. There have been several resignations within the clinical staff. We are compacting and scaling down some of the operations as needed. Staff has been very cooperative and team oriented. There has been a lot of cross training.

B. Division Reports

- a. Health Promotion and Policy Integration – Shannon Lands
 - i. The Tobacco Prevention program had a site visit earlier this month with ODH. It went extremely well. The staff put together a PowerPoint presentation and the site visitors were taken on a tour of Scott High School where we have one of our campaigns going to prevent high school students from smoking. The staff goes out to the high school every day to switch messages that are located in their main hallway and cafeteria. There was a pre-test and a post-test to see what impact the messages had on the students. There were over 900 results to be tabulated and a report will be given at a later date. During the site visit the ODH visitors were very proud of us to have gotten Toledo Public Schools to go 100% tobacco free which goes into effect in August. ODH will be using us as a model around the state. The staff needs to be commended for all the hard work in this program.
 - ii. The Tobacco Cessation staff members have now all been through the certification training, which is covered by the grant. They are all now certified and eager to get going with the services they provide.

Susan Postal asked if there is a benchmark with the TPS decision to go smoke-free and if we will have an idea of how many that will effect with staff, students and

visitors. Shannon will work on getting that information once we have more data. It would be great to know the success of this effort.

This same group met with the City of Toledo a few weeks ago with the head of Parks and Recreation. The City of Toledo is looking to make all of the parks 100% smoke-free. That includes 125 different Locations.

iii. Included in the packets is the department's Annual Report which includes letters from Eric and Dr. Woodson along with the breakdown of all the programs. What is nice about the report this year is that the photos are not stock photos; they are all from our staff and patients.

b. Health Services – Kelly Burkholder-Allen

- i. Stamaril/Yellow Fever Vaccine Update – In the past we have provided about 11 Yellow Fever vaccines per month. Currently we are referring clients to another site that provides the vaccine. The closest one to us is in Ann Arbor.
- ii. Creating Health Community Programs funded by the CDC. Tony Maziarz and Amy Abodeely are staff members working in this program. We are one of 23 counties in Ohio funded for this program. We are in year 4 of 5 of the grant. Staff is working on increasing access to affordable and nutritious food, increasing access to physical activity opportunities (bike rodeos, helmet fitting, bike safety), and decreasing tobacco use through smoke-free policies.
- iii. Supportive Pregnancy Program funded by the March of Dimes. This program is an evidence based program that involves putting women of various trimesters into similar cohorts and having monthly meetings which includes a nurse mid-wife and Sherrie Haar, our OB nurse. This provides opportunities for these women to bond and have discussions about what is normal or abnormal in a pregnancy. Infant mortality is a very significant problem in our county. There is a room set up in the basement with a nice environment for the moms to meet.
- iv. Year to date there have 430 Naloxone kits distributed to the community via our programs. All TARTA bus drivers have been trained on the use of the drug.
- v. Community Health Improvement Plan (CHIIP) is underway. Several of our departments have been contributing. This data has been given to the Hospital Council for further development.
- vi. Northwest Ohio Syringe Exchange Program has been in existence since the beginning of August, 2017. In February, 2018 we added 15 clients. This brings the total to 124 who come on a weekly or bi-weekly basis for services. We exchange 1200 – 1400 clean needles on a monthly basis. In a meeting with the coroner, looking at fatality reviews related to overdoses, they are finding fewer decedents who have died of opioid related death who have a history of opioid abuse, especially with IV injection. There are fewer problems with track marks and wound related issues. We will never be able to stop everyone from abusing opioids and using drugs but as a mitigation strategy, having the clean needles and syringes, we believe we are making an impact on the community by minimizing disease transmission. These are one-use needles which causes less damage to be done. Last month there were six people who entered into recovery programs. There were nine the month before. There was a drug bust locally of “enough Fentanyl to knock out everyone in the Toledo area twice.” We work closely with the Department of Justice (DOJ) and the Custom and Enforcement division.

