



PRINCETON BOARD OF HEALTH

Monthly Meeting Minutes

February 8, 2022

Zoom Meeting * Princeton, NJ 08540

Board Members – Present

George DiFerdinando, Jr. MD, MPH

Meredith Hodach–Avalos, MD

JoAnn Hill, RN

Kathleen Stillo, MBA, (Alt. 1)

Katherine Taylor, JD, PhD (Alt. 2)

Leticia Fraga, Council Liaison

Linda Schwimmer, JD

Mona Shah, PhD

Rick Strauss, MD

Rick Weiss, MS

Staff

Jeffrey Grosser, MHS, HO, REHS

Guest Speaker

Mark Freda, Mayor of Princeton

Chair, Dr. George DiFerdinando, called the Regular meeting to order at 7:31 p.m. He recited the announcement in compliance with the Open Public Meetings Act: *“This is to affirm that the regularly scheduled meeting of the Princeton Board of Health has been duly advertised and is being conducted in compliance with all provision of the New Jersey Open Public Meetings Act.”*

Roll Call was completed.

Public Comment/Guest Speaker:

No comments were initially made. Public comments were postponed until the legalization of recreational cannabis and coronavirus topics were addressed.

Minutes:

Dr. George DiFerdinando addressed the two sets of minutes from the January 11, 2022 BOH Reorganization and Regular Meeting. After review, no proposed changes were made to either set of minutes. Mr. Rick Strauss motioned to approve these minutes, seconded by Ms. JoAnn Hill. Chair DiFerdinando approved the minutes without any changes to either set of minutes.

Monthly Report:

Mr. Jeffrey Grosser gave a report on the current status of COVID-19 in Princeton. He stated that during the month of January, the health department had been working through mitigating the increase in COVID-19 cases stemming from the Omicron surge in mid/late December and continuing through mid-January. With this, a drastic increase in the demand for testing was observed. To assist with the surge, the health department partnered with Ridgewood Diagnostics to set up a pop-up testing site at the old Princeton First Aid Squad Building on Harrison Street. The site, which is open Monday-Saturday, has conducted over 500 tests in its first three weeks.

In the first two weeks of January, Princeton experienced as many cases of COVID-19 as the first 9 months of the pandemic (at 424 cases). The health department had been working closely with local organizations including school systems to mitigate this rapid increase in cases. Over the course of the past three weeks, cases have begun decreasing at a nearly equal pace to the increases being seen at the end of 2021.

In regard to the latest news around the state, Mr. Grosser mentioned how yesterday Governor Phil Murphy announced that masks and facial coverings will no longer be mandated for students, staff, or visitors in schools and childcare centers effective March 7th. Governor Murphy said, “Given the continued drop in new cases and hospitalizations, projections indicating a continued decline over the coming weeks, and the continued growth of vaccinations for our school-aged population, we believe that we can responsibly



end the universal mask mandate." Governor Murphy went on to mention that school districts and childcare facilities can continue to implement universal masking policies after the mandate is lifted in March. Further, the NJ Department of Health is going to be releasing updated guidance to help districts update their policies to align with the risks and unique needs in setting up safe learning environments for students.

The health department is participating in a health and safety task force meeting tomorrow with the Princeton Public School District. Based upon the news from the governor, and after reviewing the current community transmission, Mr. Grosser is going to provide the district (and the private schools and charter school in Princeton of the following good/bad news from his perspective). He stated the good news is that our vaccination rate in Princeton is one of the highest in Mercer County, it is also higher than the state average across most demographics, and this includes Princeton's 5-11 and 12-17 year old population which is at 84% and 99% respectively, as receiving at least one dose. More good news is that the availability of vaccines continues with local vaccine clinics being held at least weekly by the health department and on site at the Princeton Public School district administration building for staff, students and district families.

He further added that the challenge is our regional and local case rates are still considered high when looking at the New Jersey COVID Activity Level Index (CALI). We should expect the rates to go down, however, his opinion as health officer is they have not gone down far enough, at least for him to be comfortable to recommend masks as optional in school. He added that the CALI index, updated weekly by the New Jersey Department of Health, is a great metric if we view it from a community transmission perspective. More conversation can be had on how it will be interpreted but he believes that until our region, known as Central-West is considered to be either moderate or low CALI score, proper masking in schools should continue. He further added that the schools have done a tremendous job of limiting in school transmission, both by physical distancing and masking. Removing one of these community health preventative measures could quickly change Princeton from being in a better situation, into a worse one.

In regard to Mr. Grosser's comment on what he would recommend to the school district, Councilwoman Leticia Fraga asked him if the same applied to the municipality or buildings, as far as masking goes. Masking indoors is currently still required, but public masking is still strongly recommended. He spoke about the difference between masking in public versus in a school setting. Chair DiFerdinando commended the good advice from Health Officer Grosser and furthered the conversation about 5-11 year olds receiving booster shots.

Community member Dylan Robbins asked whether 12 year-old and up aged children are eligible for the COVID-19 booster dose to be considered fully vaccinated, and whether the local school contact tracing guidelines will be updated in regard to quarantining and what is considered fully vaccinated. Mr. Grosser explained that the State of New Jersey is going to release updated guidelines, most likely in the next week, which will include updated information on contact tracing and booster guidance and quarantining.

Community member Wilma Solomon spoke about a lobbying effort at the federal level to support budgeting to address vaccine distribution and other support globally. She then provided her email and a link in the chat for anyone who was interested in contacting her about this. "Contact for advocacy around Covid global funding wsolomon84@gmail.com."



Mr. Grosser continued his report by adding that the health department is creating COVID-19 care packages for individuals, specifically vulnerable populations impacted by COVID-19. These packages will include personal protective equipment and other household essentials. Funding for these PPE kits will be provided through the recently awarded Community Development Block Grant specifically for the COVID-19 response. Mr. Grosser continued that the 2021 board of health planning subcommittee may remember the funding it was working on through the American Rescue Act, the board submitted applications for both funding sources. We are happy to announce we did receive funding for these public health related activities through the Community Development Block Grant. The CDBG funding source was applied for in conjunction with the Princeton Affordable Housing and Princeton Human Services Department. \$229,000 was received in total and will cover the PPE costs he mentioned earlier, there are also additional projects we are utilizing for the funding, including increased accessibility and capacity for daycare or after school services serving low/moderate areas, provision of increased health services in town including vision and dental coverage and lastly, assistance in the gathering of data and developing COVID-19 related revitalization plans that cover both Health and Human Services. He added that there is more to come on this funding and project updates, in particular we will be discussing the revitalization plan with the planning subcommittee.

One of other key departmental goals for the beginning of 2022 includes the Revision of the Board of Health Ordinances, which is currently underway. Major revisions to the nuisance section are forthcoming. All sections are being examined however, to assure the ordinance is complete, achieving the intended outcomes, and by doing so in the most efficient way possible. A synopsis of the suggested changes will be provided to the Board of Health for review and consideration. Ordinance approval will require a first reading and second reading by the Board of Health and we expect to have a draft for input, with the first reading proposed for the April meeting.

Also part of the board of health ordinances include smoking, including vaping and tobacco. Mr. Grosser expects to have additional information that will likely include cannabis associated smoke and how that enforcement will be considered.

Lastly, he concluded his January report with a shout out to the health department staff. They ran several COVID-19 vaccine clinics during the month, including the COVID-19 vaccine clinic at La Mexicana bodega on Witherspoon St. where 125 doses were administered and included many 1st doses. Strong partnerships with local businesses have been essential in providing accessible vaccines to residents with transportation/language barriers and he thanked the staff for utilizing so much of what we learned throughout the pandemic, throughout our quality improvement trainings and our community collaborations to make events like this happen.

Linda Schwimmer thanked Mr. Grosser for his detailed report and recommended that others take the time to read it as well.

Old Business:

Chair DiFerdinando addressed resumption of BOH meetings every month and other public meetings in person. He asked what other board members think about offering something up to the municipality about how best to do public meetings and restarting them in person. Mr. Rick Strauss expressed that he thinks it is time to now start developing the policies on this. Councilwoman Fraga stated that the council still has mixed feelings about in-person meeting, but that they are still waiting to hear from the Board of Health regarding the safety of in-person meetings. This is a topic that the other Boards, Commissions



and Committees (BCC's) are also interested in receiving the BOH's feedback, particularly due to their smaller and confined meeting spaces. She also spoke about the benefits of meeting in person. Mayor Mark Freda agreed with her, and added that moving forward, a larger meeting place should be selected in order to meet and still maintain distancing from each other. He added that members of the public constantly ask him about meeting in person again, and also said the sooner guidance can be provided on resuming in-person meetings again, is encouraged. Mr. Robbins added that other than for reasons relating to the pandemic, virtual meetings are easier for people with children to attend.

Chair DiFerdinando offered to draft something on this topic. JoAnn Hill, Vice-chair Meredith Hoch-Avalos and Linda Schwimmer volunteered to read the draft, which hopefully may be available before the end of March.

New Business

Chair DiFerdinando began the discussion, entitled under Health Impacts of Recreational Cannabis Legalization (RML). Kathleen Stillo stepped down from the Cannabis Taskforce at the end of 2021, and Chair DiFerdinando attended his first Cannabis Taskforce meeting. He overlooked the data in greater detail, and prepared a document for the BOH to look at and discuss. He then shared the screen and started his presentation. He began with basic information regarding the percentage of Americans who use cannabis and the associated disorders and side effects from use of this drug, along with how it affects the human body, as per the Centers for Disease Control. Use of cannabis during pregnancy and the health risk it presents was also raised in this presentation, though his referenced report did not mention it, as social, racial and restorative justice were the primary focus points of the report. He mentioned that pregnant mothers are another important population to target with education on cannabis usage and risks while pregnant. Regarding areas of entrance, he mentioned cannabis operations in town, education on cannabis use, equity and enforcement of the law, and in the future, equity on cannabis industry.

The Cannabis Task Force (CTF) report recommendations are that Princeton should initially allow medical and adult use retail operations. Princeton should not allow on-premises consumption of cannabis at retail locations. Princeton should allow no more than three medical and retail adult-use dispensaries, with a strong preference for at least one micro-license that has social equity priority. Five commercial areas of Princeton should be zoned for cannabis retail. Access to cannabis retail by public transit or by foot or bike is considered very important in order to make cannabis accessible to those who do not own or have access to a motor vehicle. Further, cannabis retailers should be subject to zoning restrictions that mirror those of alcohol, including a requirement that a retailer be located not closer than 200 feet from schools. Dispensaries in Princeton should be limited to one per commercial area. Additional operational requirements should not be imposed beyond those specified by the New Jersey Cannabis Regulatory Commission regulations. Retail signage should follow all state and existing local guidelines.

Other considerations to the CTF report include research completed with municipalities similar to Princeton, underage cannabis use, accidental ingestion, fair access to cannabis and the impact of legal cannabis on crime rates.

Chair DiFerdinando elaborated in his presentation that underage cannabis usage is increasing up until 2021. There is preliminary data that there was a marked (self-reported) decrease in cannabis use among high school age youth in 2021. Due to the ongoing COVID-19 pandemic which had its major impact in



the United States in 2021, and the fact that most people were home during this time, this was discussed as a reason for this drop in underage cannabis usage, since parents were home more as well as the underage users. Though the CTF report does state that they believe cannabis legalization decreases high school usage, Chair DiFerdinando stated he personally strongly disagrees that their cited data proves that. He noted that the authors had pre-legalization and post-legalization data from only seven states, and pre-recreational and post-recreational sales data from only three states, which called into question the generalizability of their results. Further, their data does not show a decrease or increase to underage cannabis usage after cannabis legalization.

Populations at risk and/or risky behaviors include youth use: increasing prior to the pandemic but decreasing now; increasing senior use; increasing pregnancy use; well documented impairment of drivers; toddler and youth access to edibles increases after legalization.

Regarding issues to discuss, Chair DiFerdinando continued that the data on proximity is really weak. He struggled to find data on dispensaries and underage cannabis use, but could not find any data to prove or disprove any number. However, there is some data from California that looks at use during pregnancy and those at and below the age of legal sale based on whether they are more or less than fifteen miles from a dispensary. It appears to show that if you are within fifteen miles of a dispensary, there is a greater likelihood that upon screening, cannabis will be found in your system. He added that from a scientific stand point, this data is not particularly convincing on proximity either way, and is very difficult to document any impact of proximity. This issue does not appear to have been raised in the CTF report.

The National Institute on Drug Abuse showed there is a significant increase of marijuana use among 8th and 10th graders since 2018, and the in the past year the gap use along with 12th graders is closing. Nevertheless, while 30.5% of high school seniors used cannabis in the past year, last year the 12 month prevalence of cannabis use dropped in 8th, 10th and 12th graders. And the percentage of adolescents reporting any substance use decreased significantly in 2021 among 8th, 10th and 12th graders in the United States. These findings represent the largest one-year decrease in overall illicit drug use reported since the survey began in 1975. Again, the reason for this decrease was discussed with the pandemic in mind.

Lastly, issues to discuss included usage validity, proximity data validity, expected health impacts of increased adult use, equity of availability -especially related to medical marijuana legalization, and underage impacts and protections (normalization, tobacco control lessons, and health impacts of current underage usage). Chair DiFerdinando highlighted that it is important to realize that the way medical marijuana has been implemented in New Jersey, people with little money essentially do not have access to it.

Mr. Strauss commented that legalization of cannabis may certainly present risks to children and adolescents. He elaborated on this topic and emphasized that the study Chair DiFerdinando referenced which stated that there is no increased risk or use with cannabis legislation is still preliminary. He further added that normalization of marijuana use or acceptance increases marijuana use in this age group. He advocated waiting to see what happens in New Jersey and other communities, before legalizing it in Princeton.



Vice-chair Meredith Hoch-Avalos thanked Chair DiFerdinando for his detailed presentation which helped guide the discussion on the legalization of recreational cannabis. Chair DiFerdinando recommended to counsel to have the education and planning done at least the same time as making recommendation for the opening of dispensaries. Councilwoman Leticia Fraga clarified that the education and planning was on hold only until after the recommendations were made in order to start working on the educational portion of it. Ms. Linda Schwimmer added that there are a lot of medication interactions, which is relevant for so many older adults. People are on a lot of different medications, including statins, and there are a lot of different drug interactions that the BOH needs to make sure they are providing public health information about this, because cannabis use can have an impact on people's current medication use.

Public Comments/Guest Speaker:

[Health Impacts of Recreational Cannabis Legalization (RML)]

Community member Minzhi Liu applauded Chair DiFerdinando for his thorough research and work. She then raised two points. The first was regarding underage use of cannabis near recreational cannabis dispensaries. She added that legalization of cannabis would increase adult usage, and youth would thereby be accepting of it and desensitized. Her second viewpoint was as a statistician, she commented on the paper the referenced by Chair DiFerdinando.

Community member Sheila Geoghegan spoke regarding data on proximity increasing usage of cannabis in the underage community. She asked to send Chair DiFerdinando data to review on this, which he said he would look at. She then asked that former BOH Grace Sinden's letter be read.

Ms. Sinden stated that as a long term former Board of Health member and long-time resident of Princeton, I have the following comments to the Princeton Board of Health (BoH) for its February 8, 2022 meeting on the agenda item: Health Impacts of Recreational Cannabis Legalization

- 1) For a variety of public health and related reasons we need retail cannabis outlets in Princeton like we need the proverbial "hole in the head". Kidding aside, the numerous compelling resident letters to Town Topics and otherwise expressed have given very strong reasons why we should NOT move forward with retail cannabis. The Princeton Board of Health (and Health Officer's) responsibility and input are critical in this matter.
- 2) While medical cannabis is necessary for some, recreational use is not. Promotion of such use via retail stores can be expected to create additional health problems. These include increased smoking, motor vehicle accidents and related impairment incidents, aside from the message it sends to our youth. This is especially true with cannabis products, the dose of which cannot always be verified.
- 3) A large number of New Jersey municipalities statewide, including close ones in central NJ, have rejected retail cannabis. Princeton should do likewise. It should not become a regional supplier of retail cannabis. This would worsen already serious traffic (including air quality) and parking problems, more so with expected increased population density in Princeton.
- 4) Increased DWI incidents and more reliance on law enforcement are likely with retail cannabis. Aside from such health and social costs, there are resulting municipal financial costs which will negate or reduce retail cannabis income, a primary reason for considering such facilities.



5) We should legally consider a municipal referendum on election day this November regarding whether or not to have retail cannabis in Princeton.

I would appreciate having my comments here entered in the official Board of Health records (with copies sent to BoH members prior to the meeting) as there is a good chance I will not be available to attend the virtual meeting on February 8. If it is necessary for these comments to be read into the record virtually, I hope that can be done by one of the recipients of this email or another designee.

Thank you and much appreciation for the critical work of the Princeton Board of Health and Princeton Health Department more so in our current pandemic.

Community member Venkat Y. commented about his concern for high school children to be in downtown Princeton with their friends and have a cannabis store in proximity to their school. He expressed his frustration and then asked what the next steps are on whether the BOH is going to allow these dispensaries in Princeton. Chair DiFerdinando commented that the BOH is specifically asked to comment on the health impacts of various issues and to advise both the community as well as the counsel on those health impacts. Mr. Strauss added that the BOH can give a recommendation to counsel that there is potential risk, especially to children and adolescents, and given uncertainty in data showing that there is no risk, we can identify that there are potential risks with having local dispensaries, including potentially increased use of cannabis among adolescents.

Community member Matthew Bellace expressed concern about the smell of marijuana in Princeton and people walking around smoking it. Chair DiFerdinando talked about addressing this issue in the ordinance. Mr. Grosser elaborated on this use, and explained that odor enforcement licensure is through the state and no on-site usage is expected to be allowed. Other BOH members further commented and concurred. Mr. Bellace also expounded on the issue of cannabis advertising.

Community member David Jenkins thanked the BOH for their efforts on understanding and addressing this topic of RML. He then asked if the BOH was used more often in New Jersey for input on legalization of recreational cannabis versus doing a survey of the town/communities seeing if the community members want it legalized, then if the BOH looked at the issue of safety and traffic issues as a result of the legalization, then the town deciding whether it would be legalized after these three steps were taken. Chair DiFerdinando expounded on this topic and whether the BOH is involved at all in some municipalities or is the leading the issue.

Corner House Student Board Member Julia Oscar commented on proximity and effect of underage use, and noted that Princeton high school students already have access to cannabis. The biggest impact on underage use from having cannabis dispensaries, in her opinion, is that youth would have access to cleaner cannabis instead of harmful or pesticide tainted marijuana.

Community member Sheila Geoghegan spoke about convenience stores in Princeton selling vaping products to children under legal age. She expressed frustration with this ongoing issue and asked how the CTF thinks cannabis dispensaries will be any better governed or supervised to prevent selling to those who are underage. Chair DiFerdinando explained that underage children will not be allowed into dispensaries and elaborated on this topic, including the importance of signage and enforcement of not allowing underage children into the dispensaries. Mr. Grosser also explained the investigation and



process in Princeton of enforcement of preventing the sale of vaping and tobacco products to underage children.

Councilwoman Leticia Fraga commended the Health Department for being responsive to complaints from parents that illegal sales of tobacco/vaping products have taken place.

Community member Lisa Jacknow thanked the BOH and encouraged them to make a recommendation to counsel on this topic. She also expressed confusion about the reasoning behind preventing underage access to RML and also the reasoning that they have access anyway with it not legalized. She showed further concern for the normalization of cannabis use to minors, senior use, and lack of regulation on safe amounts of cannabis to use.

Community member Brent Jacknow thanked the BOH for its time and efforts and commended Mr. Strauss. He then explained that he hopes the BOH will take a position against RML or having cannabis dispensaries in town.

Community member Shenwei Zhao thanked the BOH for holding this meeting and addressing this topic. He commented on the CTF report and questioned whether the BOH has discussed RML with the Princeton University Health Department. He also asked about whether the cost of education and enforcement of this legalization was considered, and whether the BOH will issue a public statement of its stance on RML.

Community member Jian Chen thanked the BOH for hosting this meeting and commented that some BOH member are fairly new to the topic of RML, he then asked about the BOH's involvement with the CTF report. He spoke about the need for transparency throughout the process of the CTF and RML.

Community member Dylon Robbins expressed appreciation for Chair DiFerdinando's report which he stated answered some of the questions he had from the CTF report. He further commented on the CTF report and RML.

Community member Sigrid Adriaenssens asked about whether the impact on the mental health well-being of families and communities who will be affected by youth use of RML is being considered by the BOH.

Community member Gabriel Saltarelli noted the importance for the BOH of taking into consideration that accidental deaths are the leading cause of death for young people in New Jersey. He then asked whether the BOH has considered the likely increase or risk of car accidental death and driver impairment killings of people and police on the road in our town due to RML, as well as the causing of more accidents and death on the road. He expressed concern for increased risk with no benefit of adding dispensaries in town.

Chair DiFerdinando made an informal proposal, unless there was any objection from the rest of the board, to share both his PowerPoint presentation and the background material that he created with the BOH, and it can be considered what the board wants to say. He elaborated on the BOH weighing in on this issue formally. Mona Shah asked about any timeline issues. Princeton Mayor Freda recommended a statement being made or something put together in preparation for the next meeting. Other board members also commented on how this process can be done.



Reports from Committees

Ms. Schwimmer spoke about resuming committee appointments and the actual content of the committees and liaison assignments. She mentioned the memo she put together with her recommendations. She asked if anyone had thoughts or modifications to those proposed committees, and asked board members to take a look at what other entities or other BCCs are relevant to our public health work.

Reports from other Boards/Commissions/Task Forces

No discussion was held.

Adjournment

The motion to adjourn at 9:50 p.m. was moved by Ms. Linda Schwimmer, seconded by Ms. JoAnn Hill, and affirmatively carried by all those present.

Respectfully submitted by:

Paula Alexeev
Recording Secretary
Princeton Board of Health