

MINUTES

DAVIDSON COUNTY BOARD OF HEALTH

November 02, 2010
12:30 p.m.

BOARD MEMBERS PRESENT

Mr. Keith Raulston
Rev. Lamar Moore
Commissioner Don Truell
Ms. Alice Gray
Dr. Peter Rogaski
Dr. Mark Hamrick
Dr. Mark Davis
Mr. Corey Buggs
Dr. Cathy Riggan
Mr. Rod Kcuik

STAFF PRESENT

Kim Frank
Jackie Frank
Janie Ange
Jen Hames
Joseline Hernandez
Barbara Jones
Glenyce Fulton

VISITORS PRESENT

Ashley McKeever

WELCOME

Dr. Davis called the meeting to order, established a quorum, and welcomed everyone.

Jen Hames introduced Ashley McKeever an Appalachian University student who is finishing her health promotion degree and is interning with Jen this fall for exposure to Public Health.

AGENDA

Dr. Davis asked if there were any additions or deletions to the agenda. Dr. Davis stated under the new business there will be an added item (e.) Community Action Plan presented by Jen Hames.

SPECIAL RECOGNITION- Dr. Davis

Kim Frank received the Margaret B. Dolan Award for outstanding professional leadership and commitment to quality nursing care and excellence in Public Health Nursing Service at the NCPHA held in Wilmington last week.

Mr. Long received the 2010 annual Citation of Merit Award presented annually to recognize outstanding accomplishments to an individual member of the NC Public Health Association held in Wilmington last week.

Dr. Davis announced that Jackie was retiring at the end of the year. A clock was presented with her years of service engraved on it from the Board and a retirement cake that was shared by the Board of Health and staff attending the meeting.

MOTION

Commissioner Don Truell made the motion to approve the consent items and agenda as amended. Dr. Mark Hamrick seconded and the motion was approved.

HEALTH DIRECTOR'S REPORT

- **Childhood Immunization**-Have had no significant spikes with regard to the Board's decision on charging fees for immunizations; will probably see changes next fall

- **Federally Qualified Health Center**-The FQHC project we have been working on has been endorsed by the Commissioners in that they supported the Board's action on continuation of the funding from the home health proceeds. Both hospitals have publically announced their support and the FQHC application is being written as we speak
- **NCHANES**- The community health assessment project with the CDC located at the Davidson County Community College is finishing up
- **East Carolina University Dental Project**- Received an email from the ECU consultant, Robert Powell that the stumbling block with DOT is being worked out. The other issue of sewer extension is being worked on.
- **Flu Shots**- 400 County employees have taken the flu shots which is an amazing ratio of 850 employees. A total of more than 1000 shots have been given by the department this year. We will be cancelling some of the vaccine ordered because of the demand not being as high due to a high supply of vaccine in the community
- **Quality Improvement Project**- We will be working with the Quality Improvement team from the Division of Public Health on a project we want to focus and work on starting in December. We will identify a project and pick a team to implement this as part of our continuous quality improvement efforts
- **FQHC Letter**- Dr. Davis has a letter to sign regarding Board's actions to support the Federally Qualified Health Center application. It is going to be very critical that the health department stay very closely linked to whatever the FQHC does in the future. I suggested to Sandi Motley that a Board of Health member be appointed to the FQHC Board when it gets established. Ms. Motley wanted me to express her sincere appreciation for the Board's support on the application
- **Remodeling Old WIC Area**- Will meet with Rick Prevette, Public Works Construction Supervisor at 2:00 Wednesday to schedule the remodeling of the clinic area. A new larger 17'x 31' Board room will also be added in that area. The X-Ray machine will be sent to surplus and the lead lined walls will be removed.
- **Calendar 2011**- Schedule handed out to the Board of Health for meetings in 2011. If anyone has any problem with the dates please let us know
- **Teen Pregnancy Rates**-Went down significantly this year but from year to year they can fluctuate. We like to think it is because of the work we do but we do not have a clear answer for the decline but it was a pleasant surprise

Commissioner Truell asked the question of what is the ratio of places that applied to be a FQHC that weren't funded the first time of applying. *Mr. Long said this is the first funding cycle in quite a while. The ratio is basically 1200 applications for 350 slots. Initially, they thought the funding would be awarded in January but because of the number of applications, it could be as late as August of next year.* Commissioner Truell wanted to know the chances of getting funded on the first time? *Mr. Long responded one in three chances he guessed but we do have a good advantage by going with Gaston, the ECU dental school, and with both hospital's support.*

OLD BUSINESS

HIS

Mr. Long stated that HIS is still a problem for the department. There was a three hour presentation at the Public Health conference on HIS with State staff which was not a pleasant meeting. There is a host of issues and a lot of counties that are looking at proprietary options as a way of getting around HIS. At the Board's direction I did talk

to the one vendor that seems to have a foothold in the State; NetSmart. Mr. Long said he was just in a bit of a quandary though of how to proceed. The State software contract is with the vendor Hewett Packard (HP) and NetSmart is the sub vendor. HP got the contract and then sub-contracted with NetSmart which places HP between the State and the actual software developer and this contract doesn't expire until May. The State keeps saying that once HP is out of the way then NetSmart can negotiate straight with them to begin making changes quickly and rapidly. May is a long time from now in really starting to see significant improvements. The quandary is do we move forward to purchase the software modules we would like to have at \$223,000.00 with an annual maintenance cost of \$24,000.00 (meaningful use compliance for electronic medical records would add another \$67,000.00) and go through the agony of another software implementation or do we wait? Knowing what I know now, I wished three years ago we had moved forward with NetSmart when we first addressed a software system for the department. As it stands now, we run the risk of spending \$300,000 only to see 6 months later HIS catching up to where we need it to be. Additionally, if we go to the proprietary system the State will charge us \$25,000.00 for an interface with HIS. Mr. Long stated it has gotten so bad for some of the "batch" counties in billing clients and producing reports they will be trying to get legislation passed so they don't even have to deal with the system anymore. Mr. Long said he thought we should go full force into buying a proprietary product at this point because we don't know when the problems are going to stop and he would continue to pursue for the best price to get away from this system. *Commissioner Truell wanted to know why NetSmart didn't buy the HP contract out before May.* Mr. Long stated that by the time it went through all the legal issues and processes to do that it would be May anyway. *Ms. Frank said it was not as bad as it had been with getting encounter recording done but we are still behind but are doing fairly well with getting paid compared to other counties she has heard from.* Mr. Long stated the problem is staff time and customer service issues with getting people registered and processed.

Bad Debt Write Off

Mr. Long said there was an error in the write off handout because he had rounded the sum up and forgot to take off a couple of numbers and that it should be \$16,549.00. The write off is for administrative purposes basically to tell staff to stop actively trying to recover the debt and that if the client comes back in, it will reactivate the debt. Mr. Long stated that there is about a two thirds collection rate on some of the programs even with a very comprehensive billing policy and staff who are aggressive about collecting it plus the health department does billing letters, payment plans and anything feasible and legal to collect.

MOTION

Dr. Kathy Riggan made the motion to accept the Bad Debt Write Off totals as presented. Dr. Peter Rogaski seconded and the motion was approved

NEW BUSINESS

FY 2009 End of Year Budget Report -Janie Ange & Joseline Hernandez

Ms. Janie Ange gave a PowerPoint presentation of the FY2009 budget year ended. *Mr. Long stated the environmental health revenues are less than a half of what they were two years ago and 2½ positions have been cut from that area. Mr. Long said he expects changes in March on Medicaid re-imbursements for MCC/CSC and does not know what that will mean financially.* Ms. Ange stated that we received a little more revenue last year than we anticipated which was good a good thing. *Mr. Long said in a nut shell we came in under budget for the County and had more revenues than anticipated in some programs which were used to offset county dollars wherever possible.*

Customer Service Report-Barbara Jones

Barbara Jones stated that 90% of the customer service responses for the period 7/1/2009 through 6/20/10 reflected positive responses regarding customer service provided by staff – attesting to the outstanding customer service provided by staff. Concern on wait times were noted in 9% of the responses. At the "Employee Appreciation" Luncheon held on April 30, thirty nine staff members were recognized as having been individually identified as providing outstanding customer service from May 2009 through April, 2010 and were presented "Caught in the Act" certificates. Ms. Jones' report included a summary of the response data for the time period, as well as Quality

Improvement activities implemented, recommendations from the Customer Service Committee, and future considerations to enhance the customer service program. Ms. Jones read a poem that was mailed by a customer following our flu clinics in appreciation of the Davidson County Health Department nurses. She noted that while the poem addresses our nurses with whom clients primarily interact during our flu clinics, this accolade carries over to our entire staff as they are responsible for the success of these clinics. *Mr. Long added that Robert Hyatt, the County Manager had remarked that " you were in and out, everybody is so friendly" and he complemented the staff on having everything worked out so well. Mr. Long stated that flu shots tend to be our public relations campaign for each year.*

Strategic Plan Progress Report 7/1/2009 – 6/30/2010 – Barbara Jones

This year completed the 4th year under our initial strategic plan developed in 2007. We met 74% of our objectives and partially met another 5% in this year's updated plan. Our expectation of this initial plan has allowed us to develop smarter goals and objectives in future plans.

Strategic Plan 7/1/2010 – 6/30/2011 – Barbara Jones

The draft plan for this year was developed during 2 planning sessions by the Expanded Management Team. The draft plan has been presented to staff and the Davidson Health Alliance (the Healthy Carolinians coalition) for feedback. Data from our 2009 Community Health Assessment was considered in the development of the plan. Most of the objectives are short term due to the many unknowns facing the department. The plan is reviewed by the Expanded Management Team quarterly and updated annually. Further development of the plan will occur as more information concerning issues impacting the department becomes available. A major focus under this plan will be the recruitment, retention and development of staff. This is needed due to the number of staff with significant years of service who are or will be considering retirement in the near future as well as the impending impact of health care reform and electronic medical records. Other areas of focus will be increasing our capacity for information technology, completion of quality improvement projects, addressing childhood obesity and developing collaborations and partnerships within our minority communities. (The list of community partners identified in the plan to collaborate with the department in meeting the public health needs of the community, advancing/promoting public health practice and meeting the workforce development needs of staff was discussed.) Prominent partnership building efforts include those with Davidson Medical Ministries with the anticipated transition to a FQHC, WFUBMC through its medical students' teen pregnancy project, academic institutions and programs through participation in research projects, and partnering activities which will occur with the obesity grant.

MOTION

Reverend Moore made the motion to accept the Strategic action plan for 6/30/11. Commissioner Truell seconded and the motion was approved.

Cap-C Program – Glenyce Fulton

Mr. Long informed the Board that more changes were coming to Community Alternative's Program for Children (CAP-C) which is the program that serves children with major disabilities. He explained that if not for CAP-C many of these children would probably be institutionalized. Mr. Long explained that the earned Medicaid revenues from the program are not quite paying for one FTE and that the Medicaid rates have gone down little. He explained that another issue is the change being made to the waiver that could create the need for an additional half of an FTE worth of time to implement. Mr. Long stated that he was bringing this to the Board's attention for information due to the issues occurring and, while not suggesting it at this time, let them know that most health departments have gotten out of this program. He stated that some Departments of Social Services have the program and that there are some private agencies that do it as well. Mr. Long stated that his concern going into the next fiscal year is that the department will need to look closely at everything we do as we go into the budget cycle starting in January. Mrs. Fulton is here to explain more in detail.

Ms. Fulton stated we entered on October 1st into a new waiver cycle and that the rate decrease occurred last October when we were cut from \$15.25 cents per unit (15 minutes/unit) to \$14.43 cents. She stated that now the State is limiting the number of units to 12 per month/client regardless of having to get everything done that the child needs. *Commissioner Truell wanted to know how many units the case manager used when it was unlimited.* Mrs. Fulton said she would estimate they used anywhere from 1 to 47+ units per client per month. She stated that now with the children requiring 47 plus units we are only getting paid for 12 units. *Dr. Rogaski wanted to know the percentage of cases that are above the 12 units.* Ms. Fulton stated that without actually calculating it she would estimate at least 1/3 of the clients. Mrs. Fulton stated that in the billing period between July-September we were over the maximum we could bill for by 76 units which was a loss of revenue of \$1,096.00. Mrs. Fulton stated that in addition to what the case managers are currently doing, the new waiver provides for vehicle modifications, home modifications, and two other new programs. Ms. Fulton said the issue with new items is that the case manager is now responsible for getting the order, contacting contractors who can do modifications, getting estimates and sending all that into Raleigh for approval. (Mrs. Fulton explained the budgeted amounts and time periods of the new waiver to the Board). Mrs. Fulton further stated that under the new waiver either the county has to pay the contractor for the work and then get reimbursed by Medicaid or the company doing the work must wait to receive the payment from Medicaid. Ms. Fulton stated this will put a burden on us with all the expectations from parents along with potential budget cuts. *Mr. Long stated that the program saves Medicaid money because the children don't get institutionalized but they simply don't pay providers enough to provide the program.* Ms. Fulton said local resources are being used to provide a much needed service for these children and up until the past couple of months there had not been a waiting list.

Community Health Assessment Action Plan & Progress Report – Jen Hames

Ms. Hames stated a community stake holders meeting was held to assist with prioritizing health issues for the community; the information included in the Board packet reflected the outcome of the stakeholder meeting. Ms. Hames said the stake holder's focus was working on health issues and behaviors where an impact looked feasible. She stated that the document includes four major areas (Access to Care, Asthma Plan, Obesity and Mental Health) to direct our focus and work. Ms. Hames stated that the four action plans as provided needed Board approval and feedback. Ms. Hames said the action plan was put on our website for the community to have the opportunity to give feedback and that the information was sent to the Health Alliance partnerships for feedback as well.

MOTION

Dr. Riggan made the motion to endorse the four areas (Access to Care, Asthma Plan, Obesity and Mental Health) of the Community Assessment Action Plan. Ms. Alice Gray seconded and the motion was approved.

Commissioner Truell said he would like to know if we still got any complaints about smoking. *Jen replied that we did have one in October but that the complaints have dropped down from what they were to begin with.* Mr. Long stated we have not issued a fine yet, but there was one place we thought we were going to have to fine as they had received several letters. He stated that we haven't had any more complaints about the business to date.

Closed Session – Personnel

Dr. Davis announced that the Board needed to go into closed session according to North Carolina General Statute 143-318, 11(a) (1)-(9) regarding Mr. Long's annual evaluation stated that the Board of Health was going into closed session to review Mr. Long's evaluation.

Return to Open Session

The chairman announced the Board to be back in open session. The Board chair stated that they were pleased with Mr. Long's evaluation.

PUBLIC COMMENT

None

FUTURE BOARD MEETING DATES

Next Board of Health will meet Tuesday, January 4th, 2011 at 12:30

MEETING ADJOURNED

Respectfully submitted,

**L. Layton Long, REHS, MSA
Secretary to the Board**

This is a true and accurate copy of the November 2nd, Board of Health Minutes.

Dr. Mark Davis, Chair