

# MINUTES

## DAVIDSON COUNTY BOARD OF HEALTH

September 9, 2014

12:30 p.m.

### BOARD MEMBERS PRESENT

Ms. Jana Andrews  
Ms. Becky Daley  
Dr. Rick Gilliam  
Ms. Alice Gray, Vice-Chair  
Dr. Mark Hamrick, Chair  
Dr. Michael Lanning  
Rev. Lamar Moore  
Mr. Keith Raulston  
Dr. Cathy Riggan  
Mr. Tobin Shepherd  
Commissioner Don Truell

### STAFF PRESENT

Janie Ange  
Darren Cecil  
Mary Lou Collett  
Jen Hames  
Barbara Hedrick  
Nancy Rosier  
Nancy Stout  
Monecia Thomas

### VISITORS PRESENT

Mike Newby, Asst. County Attorney  
Wil Petty, Reporter, The Dispatch

Revised based on 11 04 14 Board  
of Health Meeting.

Leadership Development Recognition: Randy Swicegood

QI Improvement Team Members: Julie Bowers, Debra DeLapp, Josh Jordan, Jenny Loflin, Chery Lomax

DCSPAN Coordinator: Karen Villines

### WELCOME

Dr. Mark Hamrick called the meeting to order, established a quorum, and welcomed everyone to the September Board of Health meeting. Dr. Hamrick specifically welcomed the additional Health Department Staff that normally are not in attendance at the Board of Health Meetings and also a representative from The Dispatch.

### MEETING AGENDA and CONSENT AGENDA

Dr. Hamrick asked for approval of the agenda and the consent agenda, including the July 2014 minutes and the financial reports.

### MOTION

Dr. Cathy Riggan made a motion to approve the items on the meeting agenda, the consent agenda, the July 2014 Board of Health minutes and the financial reports as presented. Dr. Michael Lanning seconded and the motion was approved without dissent.

### PUBLIC COMMENT

None

### PROGRAM UPDATES

- **Environmental Health Director Darren Cecil** highlighted and clarified a few items.
  - Centralized Permitting -Most applications are from general contractors with new construction
  - Items to Note – States Budget cut Aid to County Environmental Health Dollars by \$4,000 – Environmental Health will have to make it up some other way.
  - Relevant Data - Graph shows an upward trend in fee collection from last year
  - Challenges – Methamphetamine Lab: Not completed means the homeowner has not contacted Mr. Cecil or they have not finished clean up.

- **Director of Nursing Mary Lou Collett** mentioned she may have to call upon the Board of Health General Services Committee to revisit the children in the clinic policy. Currently, there are concerns about children in the lobby unattended.
  - Relevant Data – Effective July 1, 2015 Immunization Guidelines changes  
The most notable changes are:
    - Tdap – needed for the 7<sup>th</sup> grade
    - Varicella – 2<sup>nd</sup> dose in Kindergarten
    - Meningococcal– needed for the 7<sup>th</sup> grade

Dr. Hamrick clarified the Board of Health General Services Committee:

- Ms. Becky Daley
  - Ms. Alice Gray
  - Rev. Lamar Moore
  - Dr. Cathy Riggan
- **Health Education Supervisor Jen Hames** provided updates:
    - **Professional Meeting – Attended State Asthma Alliance** quarterly meeting and volunteered to serve on the Planning Committee for the 2015 Asthma Summit. The Asthma grant from the State that DCHD receives every year was not funded by the CDC so funding will end August 31st of 2014.
    - **Affordable Care Act Outreach Training** - Medical Ministries hired a new Navigator and DCHD will partner with that person for Affordable Care Act community outreaches.
    - **Current Projects** - The Children at Play initiative in Thomasville is planning another “Party in the Park” October 2<sup>nd</sup> at Doak Park.
    - School Health Collaborative at Thomasville City Schools offered the position to Alison Shoaf and she will be in place by October 1<sup>st</sup>.
    - **Successes and Challenges** – Community Transformation Grant funded has ended; it was meant to be a 5-year project, but ended after 3 years. CDC has offered funding through grant applications and the Northwest Regional Partnership for Public Health has applied. Two new Corner Stores have been added to the initiative: Kelly’s Mart and High Rock Grocery, bringing the total to seven in County. At the last CTG meeting the staff gave every county an award focusing on what the county had the most success in and DCHD received the “Corner Store Connoisseurs” award.
  - **WIC Director Barbara Hedrick** explained that the WIC program successfully rolled out the Crossroads computer electronic records system on July 28. WIC has been in a learning curve that caused a backlog of appointments, so some WIC staff came in at 7:00 a.m. each day the week before Labor Day to start appointments. They have also omitted staff meetings to reserve time for appointments. The Nutrition Services Branch has advised WIC that for the months of July, August and September, accurate participation reports will not be available due to the Crossroads rollout.

### **Leadership Development**

Dr. Hamrick stated that before we move on to the Health Director’s Report, he would like to recognize one of the Health Department Staff Members. At the last Board of Health meeting, the Leadership Development initiative for County staff was noted. We recognized 3 of the 4 participants, so we would now like to recognize the fourth participant - Environmental Health Supervisor, Randy Swicegood.

Dr. Hamrick thanked Mr. Swicegood for his participation in the program.

Mr. Swicegood stated that he was very appreciative to everyone for the opportunity to participate in the program. He felt that the Personality Profile Analysis really highlighted strengths and weaknesses and gave him the opportunity for personal development to better supervise and work with others. Also Mr. Swicegood felt it was a very good learning experience working and meeting with the other department supervisors and department heads. Select department heads were given the opportunity to speak to the group to share the role of their department.

- **Health Director Monecia Thomas** mentioned she had five items to bring to the Board's attention.
  - **Professional Meetings/Trainings Attended:** School Health Advisory Council (SHAC) was marked out on the Program update because the meetings are not held in the summer. Ms. Thomas wanted to specifically mention the first meeting of the school year will be held in late September. Action Plans to revitalize the SHAC have been developed. The School Health Advisory Council should be coordinated by the schools with the health department as a supporting partner. The new SHAC Chair is representing Thomasville City Schools, the Vice Chair and the Secretary are representing the other two school systems. The Action Plans will provide more structure for the group.
  - **Current Projects:** The UNC Chapel Hill School of Public Health Projects - Ms. Thomas was approached by one of the professors at the UNC-Chapel Hill School of Public Health looking for an opportunity for her Bachelor's level students to do a project related to public health. Working with Thomasville City Schools, we selected School Based Health Centers and Access to Care for children. The professor also approached the Northwest Regional Partnership for Public Health which includes Davidson County and nine other counties in our region and the projects that were selected were Emergency Room Utilization, Marketing of Public Health, and E-Cigarettes.
  - **Items to Note:** Board of Health Orientation: The newest members, Jana Andrews and Tobin Shepherd, are completing an online orientation for Board of Health members sponsored by the UNC School of Public Health. After they complete the training, we will give them an opportunity to have an Orientation onsite to the Health Department and the Executive Management Team.
  - **Upcoming:** NC Public Health Association Annual Education Conference is coming up next week and we are hoping that Ms. Thomas, Darren Cecil and Mary Lou Collett as members of the Executive Management team will be able to attend. We are hopeful that since we have registered and everything is in place that we will be able to attend without any issues.
  - **Successes and Challenges:** Ms. Thomas was pleased to share that the State has worked with DMA (Division of Medicaid Assistance) and Presumptive Eligibility is back in place and no longer requires Attestation of Citizenship.

### **Old Business**

None

### **New Business**

Dr. Hamrick announced a Presentation by and Recognition of the Davidson County Health Department Center for Public Health Quality – Quality Improvement 101 Team. Recently, the Health Department participated in the Center for Public Health Quality's Quality Improvement 101 course. This was the 3<sup>rd</sup> cohort from the Davidson County staff to participate. The Health Department aims to imbed a culture of continuous quality improvement within the entire organization. The Board of Health packets included a one-page document detailing the Quality Improvement project and a copy of the powerpoint. Dr. Hamrick turned the program over to the QI Team.

#### **QI Improvement Team Members:**

Julie Bowers – Office Support  
 Debra Delapp – Clinic Nurse  
 Josh Jordan – Environmental Health  
 Jenny Loflin – Office Support  
 Cheryl Lomax – Office Support

QI Improvement Team provided a powerpoint with each member presenting highlights of sections of the powerpoint presentation.

Cheryl Lomax thanked the Board of Health Members for allowing the QI Team members to share their project information. Ms. Lomax clarified a few quality improvement definitions so the Board would understand what they would be discussing.

- **Aim Statement** is a written, measurable and time sensitive description of the accomplishments the team expects to make from its improvement efforts. The four questions the aim statement answers are:
  1. What will improve
  2. When will it improve
  3. How much will it improve
  4. For whom will it improve
- PDSA tool - an acronym for Plan–Do–Study–Act: This is a rapid change quality improvement tool done in four stages for improving a process or carrying out change. You plan alternatives to the current problem or process, implement the change, study the effects of the change, and then decide if the change will improve the process or if an alternative change should be tried.
- Kaizen event conducted during the testing phase of the project. Kaizen which means “good change” is a Japanese business philosophy of continuous improvement of working practices and efficiency. This is the ability to speed up the change process and finalize solutions into standardized processes.

### Davidson County Check In Aim Statement

We **Aim** to improve the efficiency and productivity of our check-in processes for all clinics by eliminating duplicate and unnecessary work. This will decrease wait times and improve both client and staff satisfaction. Using the PDSA and other improvement tools learned in the PHQI101 Collaborative, these goals will be accomplished by August 30, 2014.

- Decrease client wait times from check-in to clinic to less than 5 minutes.
- Decrease staff pulling customer charts from 45 to 37 charts.
- Increase staff satisfaction with communication form from 50% to 75%.
- Decrease the number of steps in the process from 22 to less than 10 for the staff.

### Project Measures

- What measurable results have we seen?
  - Improvement of wait times,
  - Reduction of paperwork
  - Reduction of staff steps
  - Client stated “Wow that was fast” - she liked the idea of having one person to interact with from check-in through registration/eligibility (Ms. Lomax commented that this project measure did not function well overall).

Julie Bowers explained the Baseline Data required filling out two Forms per Visit:

- o Communication form includes the patient’s name, date of birth, date, room number, language, appointment/check-in time and the reason for the visit.
- o CPT code sheet that is filled out for the nurses to use includes the patient’s name date of birth, date, reason for visit.
- o After the change, the forms were combined – 1 Form per Visit

Ms. Bowers commented that office staff and the nurses like the new combined form because it has saved time and money with having one sheet to copy.

Ms. Bowers explained that the PDSA Data required filling out an Adult Immunization Form and Pediatric Immunization Form and after the change the forms were combined to create one universal form.

- o Staff Satisfaction before the changes to the Communication form:  
38% very satisfied - 37% were unsatisfied - 13% satisfied – 12% unsatisfied
- o Staff Satisfaction with NOT having to use the communication form:  
86% very satisfied – 14% satisfied
- o Staff Satisfaction with content of the CPT form before the change:  
50% very satisfied – 38% somewhat satisfied- 12% satisfied

- o Staff Satisfaction was 100% very satisfied with the revised CPT form

Josh Jordan commented that he was with Environmental Health and did not work in the clinic or check-in divisions and so he was the “outside eyes” giving feedback about something he did not know anything about, but he felt it was a good opportunity to learn more about the health department, so he was grateful for that.

Mr. Jordan explained the Baseline Data which measures How many physical steps were involved for the staff person to check someone in the office and depending on what window they sit at, it was going to be 20-22 steps for that staff person to complete the task of getting someone check-in at the front window. The first goal was to rearrange the desks at the front windows to be more efficient and to allow staff to do their work at their own desk area. Mr. Jordan explained the PDSA data for the staff steps and layout at the check in windows. The Office Support staff bring their own laptops to the check-in window, so the desktop computers were removed and the copiers and charts were rearranged. The number of steps were decreased to 6-8 steps eliminating wasted time and movement. Also time studies were done on how much clients waited from standing in line at the front window to sitting in the lobby until they were called back to a clinic room (on average = 6.4 minutes). With the Kaizen Event, two people from North Carolina State University assisted in changing the process of reducing client wait time. Different approaches with staff input were tried – 2 employees at check- in window and 2 employees stationed for Registration/Eligibility had the best results. After all of the PDSAs trials, most of the time studies were under 5 minutes as compared to the baseline of 6.4 minutes. The trials showed a decrease of a minute and a half to a minute forty-five seconds for non-value time the client stood in line to the time they sat in the lobby.

Jenny Loflin explained that Office Support and Nursing staff are using a Quality Improvement Board to provide a way to express new ideas and show that their new ideas are being responded to.

The Quality Improvement Board is divided into five sections with Gold Post-Its = Office Support Management Response / Green Post-Its = Nursing Management Response:

1. New Ideas - All ideas are written on Pink Clouds and placed in this section.
2. In Progress - In this section, management places the Pink Clouds that are going to be tried or discussed and either a Gold or Green Post-It is placed with an explanation.
3. Potential - In this section, Management places the Pink Clouds that are constructive, but may not be feasible at this time due to some constraints (i.e. lack of funding, staffing, etc.) along with a Gold or Green Post-It with an explanation.
4. No - In this section, management places the Pink Clouds that cannot be adopted (in some cases without testing) (i.e. non-constructive ideas, ideas outside of the scope of the job) along with a Gold or Green Post-It explaining why.
5. Implemented - In this section, management places the Pink Clouds that have been implemented.

Key Improvements:

- What changes have you made?
  - o Have 2 staff at Check-in and 2 staff doing Registration/Eligibility
  - o Update standards for Check-in, Registration, Eligibility
  - o Created outline for staff to go by for check-in (for lunches, days we are short-staffed)
  - o Revised CPT sheets – Family Planning, STD, Immunizations, Prenatal

Debra DeLapp thanked the Board for the opportunity to attend the Board of Health meeting and shared she has been a clinic nurse with the health department for twenty-six years. Ms. Delapp stated the Kaizen Event has been the most fun week and also the hardest in those twenty-six years, but they learned so much focusing on really quick changes that showed results in:

- o Reducing check-in times
- o Reducing # of steps for staff
- o Reducing paperwork

What did the team accomplish during the Kaizen Event?

- o Redesigned check-in stations

- Tested PDSAs

Ms. Delapp emphasized that communication is the key and they recognized that what everyone said was important and valued and that they are all one team.

A few points:

- Time studies methods need consistency.
- Need support of entire team, including Management.
- Sometimes small changes make a big impact.
- Be positive at all times.
- Lowering the water in the creek makes the rocks more visible. (changing one area shows other areas are affected and need to be looked at as well).

Ms. Delapp explained that the Management Support and the Nursing Staff loved their department 8:00am huddles and it was a great thing that came out of the Kaizen week.

Huddles are:

- Very Brief
- Game plan of the day
- Many focus on Staffing issues, Upcoming events and Celebrations

Ms. Lomax concluded with the QI Improvement Team's Future Plans and how the team plans to spread and sustain QI.

1. Begin using Electronic Medical Records
2. Spread QI thought process to other projects through our QI Council
3. Increase staff participation in QI planning / projects

Dr. Hamrick stated this illustrates that Quality Improvement is best accomplished when driven by front line staff and their improvements have resulted in significant results. Dr. Hamrick thanked the QI Team for participating and for all their hard work on this project.

Mary Lou Collett made positive comments about the quality improvements. Barbara Hedrick started that WIC and other departments were like "Wow, look at what they have done" and there is interest in continuing the process.

Dr. Hamrick stated that next on the agenda is the Davidson County Stop Prescription Abuse Now – DCSPAN- High Point University Media Package. In July, we had presentations from the Project Lazarus Executive Director, Fred Brason, and several members of the Executive Committee for the DCSPAN Initiative. During Mr. Brason's presentation, he emphasized the need for public health involvement to address Prescription Drug Abuse in the County. He was excited that the DCSPAN Coalition was doing such great work and that this Board approved Resolutions in support of their efforts. The Resolutions were later approved by the County Commissioners. This was a good step to further our goals of tackling this issue. Karen Villines, the DCSPAN Coordinator, mentioned at the last meeting that she was working with High Point University to create a campaign and she will now share parts of that campaign with us.

#### **Davidson County Stop Prescription Abuse Now – DCSPAN- High Point University Media Package**

Ms. Villines provided a preview of the brochures, flyers and videos developed by High Point University. She explained that High Point University Graduate Strategic Communications class completed a similar program for Thomasville High School on teen pregnancy and they graciously agreed to produce prescription drug abuse materials for our middle schools in all three school systems, for a total of 9 schools. Each school has an individual campaign tailored with their school logo and colors and they will electronically receive one or two videos, a large mounted poster, a large un-mounted poster, 3 11 x 17 posters and pamphlets for the parents, teachers and the teens. The DCSPAN coalition will also have generic posters and pamphlets. In order for the schools to have this media project given to them for free, they had to agree to High Point University's pre and post-test evaluations so nothing the Board sees or hears can be discussed outside of the Board meeting until after these presentations are done for the schools, which may be in October. The High Point Undergraduate class will do the pre and post-testing, create packets and work with the DCSPAN coalition members for 3 days at the Davidson County Fair. They want to get this information out in the community so they have offered to give the packets with the pamphlets and posters to

area pharmacies. Each school should receive about \$1,000 worth of materials. The information that the High Point University students created would probably cost us around \$25,000 or more, so to get it for free makes us very pleased.

Ms. Thomas commented that the creation of the slogan “Share Thrills not Pills” was tested with focus groups and it can be used over and over again on different pictures. The slogan is very valuable.

### **Communicable Disease Report/Foodborne Illness and CD Control Measures/Enforcement Actions**

Jen Hames stated that every year the EPI team tracks communicable diseases and looks at what has changed from one year to another. Ms. Hames distributed a Communicable Disease Report for 2013 to the Board and did a brief summary of changes comparing 2009 thru 2013 (including atypical incidents, trends, public health enforcement actions and communicable disease control measures). She noted the following trends from 2012 thru 2013:

- Numbers of Syphilis, HIV, AIDS numbers have not been received for 2013
- Chlamydia cases remained about the same which is unusual because they have been increasing over the last couple of years.
- Gonorrhea cases have increased from 2012-2013 which also means the teenager rates have increased
- NGU cases decreased from 2012 to 2013
- Legionella cases slightly increased
- Whooping Cough (Pertussis) increased with 8 cases in 2012 and 39 cases in 2013
- Salmonella cases decreased

#### 2013 Communicable Disease Control Measures

- Tuberculosis – 4 cases
- Hepatitis B – 2 cases

#### 2013 Public Health Enforcement Actions (Most come from Environmental Health)

- Notice of Violations – On-site wastewater – 87
- Letters of intent to take other legal action – Meth labs -2

### **Tobacco Free Policy**

Nancy Stout explained that the Tobacco Free Policy was going to be taken a step further to clarify and include all forms of vapor products. This also means we will be changing the signage outside of the health department to include that electronic cigarettes are not permissible within 25 feet of the building entrances.

Ms. Thomas commented that she had checked with the Tobacco Control Branch and the School of Government and was told that for regulatory purposes a lot of business that have a no tobacco policy also extended it to include e-cigarettes and other vapor products in the definition of tobacco products. Ms. Thomas explained that it had been a recent question here at the health department and we want to make sure we address the issue and notify staff.

### **MOTION**

Rev. Moore made a motion to accept the revised Tobacco Free Policy to include e-cigarettes and other vapor products. Dr. Cathy Riggan seconded and the motion was approved without dissent.

**\*Due to the technical difficulties, the Ledford High School video was viewed at this time.**

### **Public Health Video – from the American Public Health Association**

Ms. Thomas provided a 2 minute video developed by the American Public Health Association and she encouraged the Board of Health to share the link with others to learn more about Public Health. Ms. Hames will be working with other health departments across the State to create a North Carolina centered video.

### **Program Plan Outline**

Dr. Hamrick explained that the Davidson County Program Plan Outline identifies the programs offered by the health department, the legal need for those programs, program goals, eligibility requirements and the services and activities designed to reach the goal. The plan will be provided to other departments interested in what the health department provides, new staff members of the health department and Board of Health members and County Commissioners as a reference. The Program Plan is updated annually and is also available on the DCHD website.

Ms. Hames presented an overview of the updated 2014-15 Program Plan Outline with highlighted changes to the Board of Health members.

### **MOTION**

Dr. Lanning made a motion to accept the changes to the Davidson County 2014-15 Program Plan Outline. Tobin Shepherd seconded and the motion was approved without dissent.

### **Board of Health Operating Procedures / ByLaws**

Dr. Hamrick stated that Mike Newby the Assistant County Attorney will give a brief explanation of General Statute 14-234 and the Davidson County Code of Ethics. These items are in your packet. Mr. Newby has reviewed the Operating Procedures and made a recommended change. The change included adding a phrase to Page 4. See the shaded area at the top of the page. There is also a grammatical correction on Page 3.

Ms. Thomas distributed additional items, which included the full Code of Ethics adopted by the Commissioners and several articles from the School of Government.

Mr. Newby explained that it was a very simple change to include the applicable part of the Code of Ethics adopted by the Davidson County Board of Commissioners which discusses Conflicts of Interest and Section 3 which discusses the need to avoid impropriety in the exercise of the board member's official duties. The Board has a duty to look at the improprieties or the perceived impropriety of the action. In other words, look and determine the possible impact on the community. The School of Government is an excellent resource for anyone in North Carolina Government. The articles that were handed out include a Coates' Canon Blog: Board of Health and Conflicts of Interest by Jill Moore. Mr. Newby shared an example related to Dentistry and Conflicts of Interest.

Mr. Newby mentioned to the Board of Health that they should read General Statute 14-234 and if the Board had any questions or any concerns, to please contact him.

### **MOTION**

Dr. Riggan made a motion to approve the Board of Health Operating Procedures with the purposed changes. Dr. Gilliam seconded and the motion was approved without dissent.

### **Davidson County Board of Health Committees**

Dr. Hamrick stated that according to the Board of Health Bylaws, the Committees are reviewed each January. Now, the Board has 2 new members, so we need to make additional changes. Dr. Hamrick purposed that Jana Andrews serve on the Budget Committee and Tobin Shepherd to serve on the Evaluation Committee. It was suggested that with Mr. Shepherd's expertise, he could also replace Dr. Hamrick on the Environmental Health Committee. Ms. Andrews and Mr. Shepherd accepted the proposed Committee assignments.

### **UNC-CH School of Government Legislative Update**

Ms. Thomas stated that in the interest of time, she could send an email with an overview of the Legislative Update to the Board. She mentioned that one of the changes involved the Environmental Health Subcommittee, so they will be asked to meet soon.

### **Procedure for Health Director's Performance Evaluation and Job Description Review**

Dr. Hamrick stated that there are two Accreditation Activities that focus on the Health Director's Job Description and Performance Review:

**Activity 37.4:** The local board of health shall review and approve the job description of the local health director.

**Activity 37.5:** The local board of health shall conduct an annual performance review of the health director.

The Evaluation Committee of the Board of Health includes:

Dr. Hamrick, Tobin Shepherd, Dr. Gilliam and Commissioner Truell.

The Committee needs to meet to review the Health Director's Job Description and then it will be shared with the entire Board of Health for discussion in November.



**Closed Session**

Dr. Hamrick requested a motion to move into Closed Session to further discuss Personnel Issues in accordance with General Statute 143-318.11(a)(6).

**MOTION**

Tobin Shepherd made a motion to go into Closed Session. Dr. Lanning seconded and the motion was approved without dissent.

**CLOSED SESSION**

Rev. Lamar Moore made a motion to come out of Closed Session. Jana Andrews seconded and the motion was approved without dissent.

**MOTION**

Commissioner Truell made a motion to approve the Closed Session Meeting Minutes. Keith Raulston seconded and the motion was approved without dissent.

**MOTION**

Tobin Shepherd made a motion to Adjourn. Dr. Rick Gilliam seconded and the motion was approved without dissent.

**BOARD MEETING DATES**

The Board of Health will meet Tuesday, November 4, 2014 at 12:30.

**MEETING ADJOURNED**

Respectfully submitted,

\_\_\_\_\_  
Monecia R. Thomas, MHA  
Secretary to the Board

This is a true and accurate copy of the September 9, 2014 Board of Health Minutes.

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Dr. Mark Hamrick, Chair