

MINUTES

DAVIDSON COUNTY BOARD OF HEALTH

September 10, 2013

12:30 p.m.

BOARD MEMBERS PRESENT

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

STAFF PRESENT

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

VISITORS PRESENT

WELCOME

Dr. Mark Hamrick called the meeting to order, established a quorum, and welcomed everyone to the September Board of Health meeting.

MEETING AGENDA and CONSENT AGENDA

Dr. Hamrick requested a motion to approve the items on the meeting agenda, consent agenda, July Board of Health minutes and financial reports.

MOTION

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

PUBLIC COMMENT

None

PROGRAM UPDATES

Patagonia

- Director of Nursing Mary Lou Collett stated that she is attending the clinical session of the Patagonia training with the nurses today.

Integrated Services

Ms. Collett mentioned previously that due to staffing, the DCHD clinic was unable to include integrated services on Fridays, so the clinic was limited as to what services could be provided. A Nurse Practitioner was hired in December which enabled the clinic to add integrated services to Fridays, so now the clinic is providing all services every day.

Pertussis

Ms. Collett explained that Davidson County has the 3rd highest rate of pertussis in the state with 26 confirmed cases and 5 probable cases since January 2013. The DCHD is currently providing Tdap

vaccine at no cost to anyone who has not been vaccinated. A Tdap clinic was held on Thursday, September 5th with 80 vaccinations given and for the September 12th Tdap clinic, appointments are full with approximately 100 vaccinations scheduled. Tdap vaccinations are required for sixth graders, so it was assumed that a lot of sixth graders would come in to the clinic, but that not been the case; it has mostly been the adult community.

Flu Clinics

The flu clinics will be the next clinics scheduled. Dates have not been set. The DCHD has received several requests from businesses to assist with their flu vaccinations.

Ms. Collett contacted other agencies about their flu vaccine rate. The rates ranged from \$25.99 to \$40. Ms. Collett would like to maintain the flu vaccination rate at the same price as last year (\$25.00). This amount will cover the cost of the vaccine plus an administration fee and it would still make the vaccine affordable for people.

Ms. Thomas explained that the Board of Health is responsible for setting the fees for the flu clinics. In 2011, the previous Nursing Director shared vaccine rate fee information and the Board decided that the health department should keep the fees as low as possible, instead of raising them to \$39 or \$40. In 2012, the interim health director reported to the Board that the Health Department was going to maintain the same flu vaccine price, in agreement with the request of the Board in 2011.

- Division of Finance/Human Resources - Janie Ange provided an update about the lack of reimbursement for this fiscal year due to the implementation of the new Medicaid system "NCTRACKS". As of September 5th, \$740.00 was received and the DCHD is expecting \$494.00 this week.

Central Permitting

- Environmental Health Director Darren Cecil explained that approximately 25% of Environmental Health applications are being received in the Central Permitting office. Communication is improving and problems associated with data entry/receiving are decreasing. There is still a big learning curve and it will take time to educate clients of these changes.

Abbotts Creek Watershed Study

Abbotts Creek Watershed Study (also known as Project 319) will end with the current data. The intent of the study was to drill monitoring wells and collect samples to see how the water moved through the ground. In the Spring, Dr. Hoover of NC State University, the leader of the project, became ill and he retired in June. In addition, there were also staff cutbacks at NC State. So, the project will end with the final study of collected field data. The rough estimated numbers indicate that there is a 10% septic tank system failure rate. According to the Environmental Health surveys, the failure rate is about 5%, compared to the State average of 10%.

Food, Lodging and Institutions Fees

When the Legislature approved the State budget, the Food, Lodging & Institutions Fee increased from \$75 to \$120 annually. The State then distributes a portion of the \$120 to the individual counties, so the health department now receives \$70 instead of the previous \$50 (a 29% increase). Also the Legislature changed the Limited Food Service Fees (which includes Concession stands at Football and Basketball games) to \$75 (Effective August 1st) which is now payable directly to the health department instead of the State.

House Bill 74 (HB 74)

House Bill 74 included legislation that placed a limit of 30 days on the local health department to issue a well permit or the well permit would automatically be deemed as issued. The concern related to this new 30 day

policy is that it is not uncommon for an individual to apply for a well permit, then return at a later date and request that the Environmental Health office ‘hold’ the application because the client is not ready.

- WIC Director Barbara Hedrick explained that Farmers’ Market Coupons were distributed to 450 WIC participants. The State was notified that all of the coupons have been issued and that the participants would like more coupons if available. WIC had a 97.6% provisional participation for July 2013. WIC has not implemented the Crossroads program yet and the DCHD is still waiting to hear of the next steps.

Community Transformation Grant/Davidson County Healthy Communities Coalition

- Health Education Supervisor Jen Hames explained that the Community Transformation Grant (CTG) and the Davidson County Healthy Communities Coalition have a lot of overlap between their project topics - Addressing physical activity, nutrition and Tobacco. The DCHD has partnered with Davidson County Schools to establish signage and a policy promoting the availability of Elementary School playgrounds to the public after school hours. Ms. Hames met with the Superintendent and was able to have ten of the eighteen Elementary Schools open for the public to use after hours. The playgrounds that were chosen were in view from the road and provided a safe environment. The playgrounds now have new signage to invite the public to use the facilities after hours as a way to increase physical activity for children in the area.

Access to Care Work Groups

Ms. Hames recognized that having two Access to Care WorkGroups may be a bit confusing. The Healthy Communities Coalition – Access to Care WorkGroup is working to determine barriers to accessing health care in the community. One of the biggest barriers is a lack of transportation. The workgroup developed a survey to be shared for a month with clients at approximately 20 agencies to determine who uses county transportation and why and who does not use county transportation and why not. The other Access to Care workgroup functions as a part of Cardinal Innovations, which has an Advisory Council that meets at the health department every quarter. This Cardinal Innovations workgroup focuses on ways to increase access to mental health services. The Access to Care subcommittee is scheduling Lunch and Learns. A list of mental health resources will also be developed and distributed.

Robert Wood Johnson Foundation – Roadmap to Health

In the Spring, Ms. Hames submitted a grant proposal to the Robert Wood Johnson Foundation (RWJF) for their Roadmaps to Health prize of \$25,000 - Phase I. DCHD was later invited to submit an application for Phase II, which included a four-minute multimedia presentation video of Davidson County. There were 150 applications for Phase I. Robert Wood Johnson invited 54 communities to submit for Phase II and then the Foundation will narrow that number down to 12 sites. Site visits will be made to those 12 sites before the final selection in September.

“Taking Charge”

Ms. Hames will be partnering with Cooperative Extension, the Lexington YMCA and the Thomasville YMCA to offer “Taking Charge”, a 6-week program featuring 30 minutes of education and 30 minutes of walking sessions beginning the week of Sept. 23rd. The activities will be open to the public at no charge.

A Blueprint of the Future for Local Public Health Departments in North Carolina

- Health Director Monecia Thomas explained that the NC Association of Local Health Directors (NCALHD) has helped put together a Blueprint of the Future for Local Public Health Departments in North Carolina. The document recognizes some key strategic changes in public health, funding, access to care issues, and technological concerns. There are currently concerns with NC FAST, NC TRACKS and Crossroads.

School Health Advisory Council (SHAC)

Ms. Thomas explained why she was using the term ‘revitalize’ regarding the SHAC. The committee includes representation from all three school districts and is an excellent group to address school health concerns. But, the group needs to make sure that the right people are at the table to move forward and establish goals. The DCHD would like to see more school representation. The new superintendent from Thomasville City Schools has been very responsive and plans on attending the next meeting.

Child Fatality Prevention Team/Community Child Protection Team (CFPT/CCPT)

Mary Lou Collet is the co-chair for the Child Fatality Prevention Team. Ms. Thomas is also a member of the committee, but was unable to attend due to conflicts with the monthly health directors meetings. Ms. Thomas was very pleased that the CFPT/CCPT committee has changed the meeting date so she can attend.

Davidson County Health Department Website

Ms. Thomas held a Website meeting with Joel Hartley and Tony Lail to hear their thoughts for ‘returning’ to the Davison County website format. The health department website is packed full of good and current information for the public, but the website is not visually appealing. The DCHD is working to figure out if the format should remain the same or pay for a different option or return to the county format and have the county and our IT person be responsible for the website.

Affordable Care Act/ Navigators

Ms. Thomas and Ms. Hames met with the Department of Social Services (DSS), Davidson Medical Ministries, Hospital representatives and Northwest Community Care to discuss the use of Navigators who assist individuals with the Marketplace, beginning October 1st. At this time, both hospitals plan to train several staff to assist with eligibility. Davidson Medical Ministries will have a Patient Navigator. Please note that the term ‘Navigator’ is being used loosely – this may include Navigators, Certified Application Counselors (CACs), Outreach Specialists, etc. - basically anyone who can assist the general public with the Marketplace application. Parrot Insurance has trained ten to twelve members of their staff and they will also have Spanish speaking staff available. They plan to provide assistance in the evenings and on Saturdays. Meetings will be held to determine how the health department can assist. We are considering developing a one-pager that can be distributed to the general public with a list of resources. Ms. Hames mentioned that the group is also considering having community forums about the Affordable Care Act. Ms. Thomas stated that the health department will have one person complete some online training to be able to provide general information to frontline staff.

Strategic Plan

Ms. Thomas would like to change the way the Strategic Plan is currently completed. Normally, the Plan is a one-year plan. Ms. Thomas would like to follow the recommendation from the Local Health Department Accreditation process and develop a two to three-year strategic plan. She would also like to include the Board of Health and Community Stakeholders in facilitated sessions developing the agency’s plan. These changes will help the health department broaden our scope in terms of our strategic plan. Ms. Thomas will seek an experienced Strategic Plan facilitator. Nancy Stout currently does an excellent job of updating the Strategic Plan every quarter to ensure that we are making progress in our strategic areas.

High Point University Video

Recently, a video was completed by High Point University and Thomasville Senior High with the health department as a location for assistance. The video was shared in a draft form with health department staff for their review. The video shared information geared towards teenagers and college students and shows several perspectives of teen parents. The DCHD staff provided feedback related to a scene showing infant formula. The DCHD would like to have a portion removed to indicate more support for breastfeeding. In addition, there were a few other suggestions. When the video is final, it will be used at Thomasville Senior High.

NC Local Health Department Survey

The NC Local Health Department Survey is completed every 2 years by all the health departments in North Carolina; The results will be compiled and shared with all of the agencies.

New Hires: Laura Leonard, Clinic Nurse and Stacey Wilson, Northwest Community Care - Care Manager

Project Lazarus

The Davidson County Project Lazarus Team is now made up of four people and the group is still in need of a coordinator. There is \$20,000 funding from the Northwest Community Care Network. The majority of the funding will be used to market the campaign. The Davidson County Project Lazarus Team includes: Ms. Thomas (Health Department) Kathy Hitchcock (DSS), Lisa Childress (Lexington City Schools), Coordinator TBD, and Chad Stage (Northwest Community Care Chronic Pain Initiative Coordinator). The group will attend the UNC-Chapel Hill's Injury-Free NC Academy.

Patagonia

Ms. Thomas distributed a map of North Carolina counties showing EHR vendors and which counties remain with the current state system, HIS. The summary shows a substantial percentage of the health departments in North Carolina are no longer with HIS and an additional 20% are evaluating other vendors. We have high hopes for Patagonia and its ability to share data. In our ten county region, all of the counties have signed with Patagonia, except for Yakin County, which remains with HIS and Forsyth which went with a different program a few years ago.

Medical Records Scanning

Ms. Thomas explained that the DCHD is still working to figure out the need for the scanning of medical records. There is some funding put aside in this year's budget and we are planning to meet to decide how and if we want to start or if we want to wait and stick with Patagonia and scan the new records on-site as clients come in versus worrying about all of our current paper records.

Dental Hygienist Position

The state Dental Hygienist position has been eliminated. The state Oral Health section had a budget cut of \$850,000, so they lost several positions that were vacant and several positions that were filled. Ms. Thomas did receive an email that mentions how the state is going to try and restructure the Oral Health section. The Oral Health Section has an interim section chief and they plan to redo the State map and hopefully assign the current dental hygienists to different counties, so Davidson County could possibly get a dental hygienist one day a week versus the one we had that was solely Davidson County's five days a week.

Community Transformation Project

Ms. Thomas attended the National Association of Local Boards of Health (NALBOH) conference in Utah in August with funding from the Community Transformation Grant. Ms. Thomas distributed a powerpoint and explained slide 11 - First Steps Toward a Culture of Quality. It was noted that North Carolina has made great strides in the area of Quality Improvement. Nancy Stout leads the DCHD Quality Assurance and Quality Improvement efforts and she has developed a Quality Improvement Council. Ms. Thomas wanted to share this with the Board and mentioned that if anyone would like additional information on the Conference sessions, to please follow up with her. Ms. Thomas stated that she had informed Dr. Hamrick that Davidson County is not currently a member of NALBOH. The fee is \$185.00 annually.

Dr. Hamrick stated that the NALBOH website has a members' only section for information, emails of relevant news and also quarterly news briefs. Dr. Hamrick stated that he felt it was a good idea to join NALBOH.

MOTION

Dr. Gilliam made a motion that the Davidson County Board of Health joins the National Association of Local Boards of Health. Dr. Cathy Riggan seconded and the motion was approved without dissent.

VI. Old Business

Dr. Hamrick reminded the Board that at the July Board of Health meeting, the Tobacco Control and Prevention Branch provided a presentation and the Board agreed at that time not to rush into any decisions. The Board decided that it would be good for Ms. Thomas to speak with other counties that had approved smoke-free rules. In addition, meetings should take place with the local municipalities and the county to gauge their support of various options.

Ms. Hames and Ms. Thomas are completing the meetings together. Meetings with Durham County and Orange County have been completed. Both answered questions regarding their process. Following these conversations, a series of questions were developed to share with the county, cities and towns. Ms. Thomas gave an overview of the conversations with Durham and Orange Counties. Orange County's website has a lot of the information that they gathered from doing the community surveys and the results indicate a lot of support; very few people were in disagreement. It was mentioned that the smoking receptacles should be removed from the no smoking areas. Both Counties took the approach that this initiative is not about fines, it is more about education. It was noted that DCHD does have some funding through the Community Transportation Grant for signage and other needed items. Meetings with the leadership in the County, Cities and Towns are being scheduled.

Ms. Thomas mentioned that at the last Board of Health meeting, Dr. Hamrick had given the Board 'homework' to speak to their staff and colleagues and gather feedback about this initiative.

Discussion

Commissioner Truell commented about the support needed from the County Commissioners for Board of Health action. Recently, there have been additional complaints about smoking at the County Courthouse. Due to these complaints, there may be some support for additional action. Commissioner Truell mentioned the concern about the number of jobs related to tobacco and tobacco farms.

Ms. Thomas mentioned that the speakers from the Tobacco Control and Prevention Branch urged the Board of Health to look into developing a Rule because a Rule will include the entire county. Once the Board of Health passes a Rule, the County Commissioners have to pass an Ordinance to support the Rule and then Cities or Municipalities can not opt out.

Dr. Lanning mentioned the impact that e-cigarettes are having on the verbiage typically used to discuss tobacco and smoking. He asked if e-cigarettes would be included in potential Rules.

Ms. Thomas stated that e-cigarettes have typically not been a part of the conversation. E-cigarettes have not been covered under the No Smoking Rules because they are considered to be vapors – not smoke.

Dr. Lanning asked if e-cigarettes can be sold to children under 18.

Ms. Thomas stated that they should not be, but she thought e-cigarettes could still be purchased online. One of the websites offers flavors, such as bubble gum, banana nut bread, etc.

Dr. Gilliam and Dr. Lanning stated e-cigarettes are becoming more popular with kids.

Ms. Hames stated that there is a 20% increase in e-cigarette sales and the majority of those sales were focused on teenagers.

Dr. Lanning stated that from what he read, he felt that e-cigarettes are being marketed directly toward teenagers and he would support that if the Board passed a no smoking or tobacco rule, it should include e-cigarettes. It would be a lot easier to enforce if one did not have to determine if an item is a real cigarette or an e-cigarette and this could have a positive impact on children.

Ms. Thomas felt that would be good approach to include the topic of e-cigarettes in the list of questions to gather more information.

VII. New Business

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 website.

Ms. Hames distributed the current copies of the updated 2013-14 Program Plan Outline to the Board members. Ms. Hames gave the Board an overview of the changes and brought the Board's attention to page 38 and asked for approval to remove the health department staff's name and replace it with the position title.

MOTION

Dr. Cathy Riggan made a motion to accept the Davidson County 2013-14 Program Plan Outline with the change on page 38 of removing the name and replacing it with the position title. Dr. Gilliam seconded and the motion was approved without dissent.

Communicable Disease Report

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 2012 to the Board and did a brief summary of changes comparing 2009 thru 2012 (including atypical incidents, trends, public health enforcement actions and communicable disease control measures). She noted the following trends from 2011 thru 2012:

- Chlamydia cases remain high and unfortunately are steadily increasing- 2011 reported 487 cases and 2012 reported 524 cases.
- Chlamydia cases in teenagers decreased from 2011
- Teenagers with gonorrhea significantly increased - more than double from 2011 to 2012
- NGU cases on the increase from 2011 to 2012
- Syphilis cases remain about the same
- HIV grand total for 2012 - slight decrease from previous years

Ms. Hames mentioned these are the food borne cases related to not washing hands well.

- Campylobacter is on the increase
- Salmonella cases remain high

Retention and Purging of Health Department Records Policy

Dr. Hamrick stated the Retention and Purging of Health Department Records Policy is a departmental wide policy that focuses on retaining and disposing of records that need to be approved by the Board of Health.

Nancy Stout explained the few minor changes; updated statement regarding the approval of the TB records amendment that was signed at the July Board of Health meeting and the only other change was updating the website with where the records and retentions schedule could be located.

MOTION

Dr. Michael Lanning made a motion to accept the Retention and Purging of Health Department Records Policy. Rev. Lamar Moore seconded and the motion was approved without dissent.

Board of Health Operating Procedures / Bylaws

Dr. Hamrick explained that the Board of Health operates under Bylaws that are reviewed annually. The county attorney has reviewed the Bylaws and has verified that the Board is in compliance with State law.

Ms. Thomas stated that this is the same version that is in the Board of Health Handbook. The date has been changed and the document reviewed by Mike Newby for accreditation purposes to make sure we are not misstating any general statutes.

MOTION

Rev. Moore made a motion to accept the Board of Health Operating Procedures / Bylaws as presented. Ms. Becky Daley seconded and the motion was approved without dissent.

UNC-CH School of Government Legislative Update Webinar

Dr. Hamrick mentioned that the Executive Management Team attended the public health portion of the UNC-CH School of Government Legislative Update Webinar and Ms. Thomas has provided a summary in the Board of Health packets. Dr. Hamrick asked Ms. Thomas if she had any comments to add.

Ms. Thomas commented that Mr. Cecil mentioned HB74 and in the summary there are quite a few references to HB74. Also, e-cigarettes is mentioned. Ms. Thomas wanted the Board to have the summary for informational purposes and to give the Board an opportunity to ask questions of the Executive Team.

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

Dr. Hamrick explained that a part of the Boards accreditation activities is to review and approve the job description of the health director and to also conduct an annual performance review. The Evaluation Subcommittee consists of Dr. Hamrick, Corey Buggs, Dr. Gilliam, and Commissioner Truell. In the past, the subcommittee has used the Checkpoint 360 Performance Tool. This tool is easy to understand and is more effective than other methods. Dr. Hamrick requested that DCHD start the Checkpoint 360 process and he explained that he would call for the subcommittee to meet to discuss the findings and to review the job description. At the November 5th Board of Health meeting, the summation of the performance evaluation and the job description will be brought before the Board to be voted on.

BOARD MEETING DATES

The Board of Health will meet Tuesday November 5, 2013 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 10, 2013, Board of Health Minutes.

Dr. Mark Hamrick, Chair