CUMBERLAND COUNTY BOARD OF HEALTH

February 20, 2018 –6:00 p.m. 1235 RAMSEY STREET, THIRD FLOOR BOARD ROOM

REGULAR MEETING MINUTES

MEMBERS PRESENT:

Dr. William Philbrick, Optometrist, Chair

Dr. Connette McMahon, Vice Chair

Dr. Vikki Andrews, Public Representative (Excused at 6:53pm)

Dr. Heather Burkhardt, Veterinarian

Dr. Oliver Hodge, Dentist (Arrived at 6:14pm)

Ms. Sonja Council, Nurse Commissioner Jeannette Council

MEMBERS ABSENT:

Dr. Sam Fleishman, Physician

STAFF PRESENT:

Duane Holder, Interim Health Director

Candice York, Finance Officer

Daniel Ortiz, Environmental Health Director

Dr. Tran Phu, Medical Director

Ashley Yun, Administrative Assistant to the Health Director

Marlene Whitney, Administrative Assistant to the Director of Nursing

WELCOME, INTRODUCTIONS AND MOMENT OF SILENCE

Dr. Philbrick welcomed all guests and called the meeting to order. Introductions were given. A moment of silence was taken.

Dr. Andrews asked how long the Board of Health training will take. Mr. Holder said approximately 15 minutes.

ACTION ITEMS

A. Approval of Agenda

Move the public comment and BOH training

MOTION:

Dr. Vikki Andrews moved to approve the agenda.

SECOND:

Dr. Connette McMahon

VOTE:

Unanimous (6-0)

B. Approval of January 16 Regular Meeting and February 6 Special Meeting Minutes

Commissioner Council requested to revise her absence to excused on the January 16, 2018 meeting minutes due to conflicts with BOCC meeting. The board agreed and Ms. Yun will revise it.

Dr. Andrews questioned whether the discussion of the flu shot administration fee waiver case-by-case has been captured in the minutes. Mr. Holder clarified the minutes reflected that they do case-by-case, and the minutes are accurate.

MOTION:

Dr. Connette McMahon moved to approve the minutes.

SECOND:

Commissioner Jeanette Council

VOTE:

Unanimous (6-0)

C. Approval of 2018 Board of Health Handbook, Operating Procedures, and 00-01 Compliance with Public Health Laws and Regulations, 00-02 Hearing Appeals to Board of Health, and 00-03 Board of Health Adjudication Policies

The board members received the 2018 BOH Handbook, operation procedures, and policies in the flash drive during the meeting. Absentee members will receive the flash drive in the March meeting. The operation procedures have no update from last year; however, needs approval for accreditation purpose.

MOTION:

Dr. Connette McMahon moved to approve the 2018 Board of Health Handbook,

Operating Procedures, and Policies 00-01, 00-02, and 00-03.

SECOND:

Dr. Heather Burkhardt

VOTE:

Unanimous (6-0)

INFORMATION/DISCUSSION ITEMS

A. Public Comment:

Dr. Philbrick opened the floor for public comments at 6:08 p.m. The session public comment is 10 minutes; however, we usually allow 3 minutes for explain accordingly.

Ms. Ethelyn Holden Baker registered a public comment. She is a resident at 810 Executive Place in Fayetteville. She appreciated the board members for allowing her to come in and speak. Her supporters and she are here this evening to appeal to the governing Board of Health Department to reopen the adult health and dental clinics on a full-time basis.

As concern citizens who believe that all persons are entitled to quality health care, they have contacted various persons via direct person-to-person contact, surveys, both printed and online, and conversations with those who have received and are receiving services at Health Department. Out of approximately 100 surveys they have received, a great percentage responded to reopen the two clinics on a full-time basis. The responses also included concerns, such as acquiring an appointment in a timely manner. For example, she tried making an appointment, anticipating certain date and time. A Health Department staff said she will return the call for the appointment; however, there was no return phone call. Ms. Holden called back a couple of times. It was on-call and rang several times, but no one answered. Also, they were concerned about waiting too long to receive services. The nurses have a negative attitude and are judgmental, according to their responses. The people felt unwanted because of the nurses' attitudes and lack of caring, and the people felt they were rushed. The respondents also felt the staff should be better trained. They also felt there is a need for more people of color on the medical staff.

In addition to the views of the people who have seen the services in the Health Department clinics, there is a Cumberland County Community Health Assessment of 2016 on the county website which has been issued every 3-4 years. According to the last assessment in 2016, Cumberland County discovered obesity, heart disease, cancer, as well the recent opioid crisis, are all very serious. Heart Disease is the number one killer of people in this country; and, according to the Community Health Assessment, the numbers are higher in Cumberland County, as well as counties in Charlotte and Durham, where the populations are greater.

Now we have the opioid addiction. The uninsured and underinsured who suffer from this condition need to have access to the Health Department because if they are employed and have low wages, they cannot receive full health coverage. If he/she is unemployed, they do not have health insurance at all and may/may not have Medicaid coverage, depending on his/her situation; due to the ACA (Affordable Care Action), Medicaid was not expanded to NC. Therefore, many people may not be able to have Medicaid at this time. In order to address their health needs, they go to the emergency room, which the county still has to pay for, which comes out the pocket of those who have insurance. Yet, when they go there, they can be diagnosed as seriously ill, with the disease potentially fatal. Instead, they could have maintained their health, prevented the disease, or had someone keep an eye on their health conditions.

She also stated, as far as the age group, for example the child bearing age group, many adult plans cover for up to 64 years of age. Although we have a maternity clinic in operation, an office prenatal, and delivery services, on the other hand, the people do not have access to appropriate help prior to pregnancy. As we know, health is vital prior to pregnancy, because this will ensure a safe pregnancy and a healthy baby, decreasing the infant mortality and ensuring a life of healthy productivity. She stated she will not discuss the importance of dental care, health care, and medical care.

She ended her comments, appealing to the Board of Health, by quoting the pledge the board members made when they accepted their position as a Board of Health member, pledging to do all in their power to safeguard human and environmental health through prevention, protection, and education efforts. They will accept responsibility to use their talents, training, and professional experience to instill a public trust in all of their public endeavors. It is their responsibility, a personal commitment, to service the community with their integrity and pride.

Dr. Hodge arrived at 6:14pm.

Dr. Philbrick thanked Ms. Baker and her supporters for coming to the meeting. He closed the floor for public comments at 6:16 p.m.

Dr. Philbrick shared an email he had received he assumed was written by the county commissioners. The article questioned the management of the Health Department, mentioning problems with the Jail Health program, the closure of clinics, failure to notify women of test results, and high fees for flu shots. He said the email looked like an official document. He made a comment that, as far as jail health concern, we passed accreditation for a few years and failed only last year for reaccreditation. We needed to budget, and an Electronic Health Record system was requested to commissioners from 2014-2016 and had only 20 percent of budget approval. He thinks the Jail Health problem was created by the County Commissioners. If we didn't get what we needed, we knew we will fail reaccreditation. Since we lost accreditation, it's amazing how the media only focuses on the negative, not the positive, along with the BCCCP issue. Dr. Philbrick defended the board, saying it had been doing good work for years. He said the board has only faced criticism in the past several months. All the Board has been told was that we were being a good board, and, all of a sudden, we're the worst board that ever existed. He wanted to let the citizens, board members, and commissioners aware that the Board of Health did many productive things and that the article is not true. He felt like temporarily resigning with the many negative feedbacks.

Commissioner Council said the document was a Fayetteville Observer editorial. Public Information Office records Board of County Commissioners meetings, and she can show some of the problems the commissioners discussed. As the article said, commissioners refused to acknowledge some of the problems, and nothing is perfect. She said she cannot sit here and be blamed and stated that the article is not from the commissioners meeting. She knows that the board members have a big interest in whatever the commissioners do. If there are negative comments in the community, commissioners receive them all the time. It's not meant to be against anyone. If she has any subject to discuss with the board or has any suggestions, she would meet with the board, not the leadership.

Dr. Philbrick stated that he wanted the board to be strong and do more for the community. He is afraid that the board hasn't been functional at all with so much negativity.

Commissioner Council said it's just starting because we had the same issues with Mental Health. We had Mental Health, Social Services, and Public Health. When the government changed, the elected body changed. This moved to privatization. Mental Health already had been privatized in a group of counties.

The Board of Mental Health was dissolved and was not functional. The Board of Health is next behind the Social Services. She predicts that is going to go to a private company with no citizen input. Does anyone tell you about people who serve on this board and do not have a good heart or do not love the county and its citizens? Again, this article is from Fayetteville Observer and not originated from the Commissioners.

Dr. Andrews clarified if Dr. Philbrick is resigning or temporarily resigning.

Dr. Philbrick said he is not yet resigning. He thought he was the reason the board was thrown in the pot and it would be better if he steps down. He has another year and a half of service to the board. His term as a chair will expire next month and hopes to elect a good chair and a vice chair.

Dr. McMahon said it was the commentary that was upsetting. She wants to let people know we do care about the citizens of this county.

B. Board of Health Training:

Mr. Holder presented the Board of Health training (abbreviated version) at 6:36p.m and concluded at 6:52p.m. The training is required to the board members; when they go on the board, they undergo with initial orientation, and annual training is mandatory as a follow-up orientation for accreditation. The extended version of training is attached in the handbook on the flash drive.

Dr. Andrews was excused at 6:53pm

C. Financial Reports:

Mrs. York presented the following financial reports.

- The accounts receivable by program are broken down by payer source.
- Reviewed aging report by program.
- The statement of Revenue and Expenditures (Profit and Loss) as of January 31, 2018. The excess of revenue over the expenditures is \$114,254.36. The reason she added \$608,739.85 of due from state and school system is because those are reflected in our expenses already and revenue is forthcoming. State requests to draw funds down are submitted after expenses incurred.
- The statement of expenditures by program as of January 31, 2018. We should be at 58% by end of month but currently at 50%.
- Revenue by Source reports by state and federal allocations, grants, Medicaid, fees, fund balance and county funds allocated, and total earned.

Mr. Holder said if you calculate each month for 8.33% of the fiscal year, if we spend right on budget for 7 months, the total earned percentage would be 58.33% through January.

D. FY 2018-19 Budget Planning:

Mr. Holder mentioned that the budget request needs approval in March; however, it would be an opportunity to see what activities we've been doing as far as budget creation up to this point and allow an opportunity for the BOH to engage even earlier in what we need.

The county moved the timeline for how we, as the department, present a request for anything that we need to have done out of the normal operating budget. Mrs. York provided the budget calendar established by the county and presented the FY 2018-19 budget planning. The Senior Leadership Team met to discuss the

budget and notified the Management Team for supervisors' review and requests with any changes from the current budget. This year, we are requesting so far:

- Capital improvement: Install the door frames for, accreditation purposes, in the Child Health
 Clinic to secure patients' privacy. This project has been submitted to the County Engineer and
 estimated \$1,000 per each; still waiting Engineer's feedback.
- Technology requests:
 - ✓ New Electronic Health Record System; no feedback from County
 - ✓ Upgrade Office 365
 - ✓ Upgrade SQL server to the enterprise version
- New positions:
 - ✓ Two LPN positions (Immunization and STD clinics) to decrease waiting time
- FY18 End of Year Projections Quarter 2: reviewed entire current budget and provide projecting on what we are expecting the final budget this year to end with submitted on January 31, 2018.
- Verification of current budgeted positions: verify positions and review salary, longevity, classification etc.
- Fee schedule: Candi is working on fee analysis. It was due on February 1st and she requested the extension.
- Operating budget entry: normal operation and supplemental budgets
- Meetings with Assistant County Mangers if requested
- FY18 end of year projections quarter 3 on April 15: report the fund left over and current spending
- Department Appeals to BOCC if necessary

The next steps:

- Board of Health review and request suggestions for items to be included in the budget request
- Present and request approval of the budget and fee schedule during the March BOH meeting

Dr. Burkhardt is concerned about the School Health nurses budget. Mrs. York answered that we need more School Health nurses every year. At the time, we were in transition of the formal Interim Health Director and made a decision to ask for the LPN, due to knowing the county's financial situation; however, she will make sure to revisit this subject. Mrs. York said that she will have the entire budget compiled to present in the March meeting for approval.

E. Chemours Update:

Mr. Ortiz provided the state map to the board members for reference and gave an update on Gen X. The contamination has expanded out and is still being investigated. When the contamination was elevated, they extended it on the map. He said the department gets calls from residents concerned about the issue. We have teleconferences every Wednesday morning, and many meetings include community meetings. Mr. Ortiz said the county commissioners are right in making running water lines to the area a priority. Commissioners voted Monday to hire a company to do a preliminary engineering report that will estimate the cost of running water lines to the area. Residents with the contaminated wells have to use bottled water to brush their teeth. Residents need public water, even though Chemours is testing filters on four houses in the area; however, it is only a temporary fix. Chemours makes GenX at the plant. The compound is used in nonstick cookware and other products. He feels bad for the residents directly affected. As of now, over 250 residents are affected. No discussion of another community meeting yet, but they will set another meeting soon. No concern about contamination in our county; however, citizens are worried about the drinking water and future public water. For any further questions or concerns, feel free to contact Mr. Ortiz.

Dr. Philbrik asked if PWC tested city water. Mr. Ortiz answered yes, PWC does the water sampling, and Chemours and the state hired a private company for water sampling as well.

F. Community Health Grants:

Mr. Holder presented Community Health grants opportunity from NC Office of Rural Health. We internally discussed about this project and wanted to share with the board members. We can request up to \$150,000 per year for a three-year cycle. We already were awarded these funds last year and to utilize them to reopen the Adult Health Clinic with partnership with Stedman-Wade. The application deadline is March 16, 2018. The project categories are primary care (Health Dept. /Stedman-Wade), dental, maternal health, and school-based health center. Funding options are either to pay per patient per primary care face-to-face encounter (\$100 per visit) or pay on a reimbursement model. We could be reimbursed for eligible expenses (includes payment for clinical staff, supplies, labs, equipment, capital purchase, etc.). The current Community Health grants chart is attached. If the Board of Health is interested in a new initiative, as recap, primary care for years 2 & 3 are renewable through Stedman-Wade, and there is opportunity to request for renewal. Stedman-Wade has applied for an-expansion of FQHC (Federally Qualified Health Center) sites to the Health Dept. We also have been awarded a grant for Maternal Health, and it is not renewable.

Internally, we've discussed on the dental clinic, an additional site for primary care, a different diagnosis and chronic disease in a current primary care arena, etc. Mr. Holder asked the board members what would make sense to apply these grants.

Dr. McMahon asked about a school-based health center. Mr. Holder said we've talked about a mobile clinic one time.

Dr. Tran Phu said the beauty of this grant is focusing on a medically bondable population uninsured under insured. HealthNet sees patients in our agency twice a week. Beginning of March, Stedman-Wade will come in everyday when they hire a provider. With more funding, we can have more human resources.

Mr. Holder said, internally, we emphasize on diabetes. It is highly indicated in our community that we need more education for that population. We are open to any suggestions. As soon as we compile an idea, we will share with the board members.

G. Director's Report:

a. Employee New Hires:

Mr. Holder presented five of the new hires for the month of January.

b. National Conferences – Save the Dates:

Mr. Holder announced that the National Association of County and City Health Officials (NACCHO) Annual conference is scheduled for July 10-12, 2018 at the New Orleans Marriot. Also National Association of Local Boards of Health (NALBOH) Annual Conference is scheduled for August 8-10, 2018 at Marriot Raleigh Crabtree Valley. Both are strongly recommended for the board members to attend.

c. BCCCP Notifications:

It was reported to the Board of Commissioners that of the 159 women not contacted of abnormal screenings, 30 remain outstanding. We continue to work internally to contact these women.

d. Community Forums:

Internally, management discussed on how we provide outreach and discussed about community forums. We do a lot of outreach as the Health Dept. via news releases, events, the fair etc. and need input from citizens. We need more engagement and feedback with public, not just us presenting to the public. We definitely need the Board to participate.

e. Outside Consultant Review:

We have received a request from some Board of Commissioner member that a outside consultant review be done of the Health Department. With motivation, Mr. Holder said we are getting better, and we are cultivating an environment that is welcoming. Organizational culture review and structure can help better inform the way we've been functioning. No decision was made, and board members' ideas are requested.

- f. Reminder: Human Services Consolidation Presentation is scheduled for February 27, 2018 at 11am in the meeting room B at Dept. of Social Service
- H. Membership Roster/Attendance Roster:

Dr. Philbrick reviewed the membership roster and the attendance report for 2018.

ADJOURNMENT

MOTION:

Commissioner Jeanette Council moved to adjourn.

SECOND:

Dr. Connette McMahon

VOTE:

Unanimous (7-0)

The meeting was adjourned at 7:35 p.m.

Duana Haldan Sagratary

mane Holder, Secretary

Dr. William Philbrick, Chair

3-22-18

Date

20 Mar 2018