CUMBERLAND COUNTY BOARD OF HEALTH MAY 15, 2018 – 6:00p.m. 1235 RAMSEY STREET, THIRD FLOOR BOARD ROOM REGULAR MEETING MINUTES

MEMBERS PRESENT:

Dr. Connette McMahon, Chair

Dr. William Philbrick, Optometrist Dr. Heather Burkhardt, Veterinarian

Dr. Oliver Hodge, Dentist (Arrived at 6:18pm)

Ms. Sonja Council, Nurse

MEMBERS ABSENT:

Commissioner Jeannette Council

Dr. Vikki Andrews, Public Representative, Vice Chair

Dr. Sam Fleishman, Physician

STAFF PRESENT:

Duane Holder, Assistant County Manager/Interim Health Director

Rod Jenkins, Deputy Health Director Candice York, Finance Officer Krystle Vinson, Director of Nursing

Marika Hoeckmann, Public Health Administrator

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

INFORMATIONAL/DISCUSSION ITEMS

Due to the lack of quorum at this moment, the meeting started with information/discussion items.

A. Public Comment:

Dr. McMahon opened the floor for public comments at 6:04 p.m. There being no public comments registered, Dr. McMahon closed the floor for public comments at 6:04 p.m.

B. Medicaid Transformation:

Mr. Rod Jenkins presented the Health Department & Medicaid Managed Care in Public Health referred to as Medicaid Transformation.

Per Jim Bruckner, Past President of NC Association of Local Health Directors (NCALHD), the information contained in this presentation is intended to be general in nature and does not represent the perspective of any particular local health department. The Association encourages all public health stakeholders to remain engaged with the Medicaid transformation process and to advocate for a meaningful managed care plan that supports the optimal delivery of essential public health services to meet the needs of every community.

Mr. Jenkins presented the history, statistics, and national significance of Medicaid and Children's Health Insurance Program (CHIP) in the United States and NC. He also presented the comparison of Medicaid Managed Care in the United States and NC, present and future, legislative goals, and why the Medicaid Transformation matters to Public Health, timeline, Public Health's role, challenges, next step forward, and objectives. The power point presentation is provided to the Board of Health.

Dr. Hodge arrived at 6:18pm.

Dr. McMahon asked if the flow care from the hospital to Public Health would be interrupted. Mr. Jenkins answered that the Medicaid transformation would affect everything, not just the Health Department.

Dr. McMahon said it seems effective to the Health Department more because they provide so much more value/services that patients need. Mr. Jenkins said it was the first to introduce to public health by definition. We had to fight and advocate letting the consultants know how important public health is. The large practices and hospitals are concerned about this transformation but not as informed.

ACTION ITEMS

A. Approval of Agendas

MOTION:

Dr. Heather Burkhardt moved to approve adjusted Board of Health regular meeting

agenda

SECOND:

Ms. Sonja Council

VOTE:

Unanimous (5-0)

B. Approval of April 17, 2018 Regular Meeting Minutes

MOTION:

Dr. William Philbrick moved to approve the minutes.

SECOND:

Dr. Heather Burkhardt

VOTE:

Unanimous (5-0)

C. Approval of Bad Debt Write Off

Mrs. Candi York presented the bad debt write-off in the amount of \$16,958.89 for the quarter ending March 31, 2018. This is for accounts 90 days or older with balances of \$50 dollars or higher. It will be submitted to the North Carolina Debt set-off Program, which can attach a debtor's State Income Tax Refund and/or lottery winnings for payment of bad debts.

MOTION:

Dr. William Philbrick moved to approve the bad debt write-off in the amount of

\$16,958.89.

SECOND:

Dr. Heather Burkhardt

VOTE:

Unanimous (5-0)

Informational/Discussion items are continued.

C. 2017 Annual Report:

Mrs Hoeckmann presented the 2017 Annual Report. The hard copy of the report was provided during the meeting, and the electronic copy has been provided to the board members last week along with the draft agenda packet. She highlighted:

- The School Health revenue is included
- 2017 Annual Report is available on the website along with previous Annual Reports
- The report distributed to the Commissioners, County Managements, and Health Department

D. Patient Satisfaction Survey Results:

Mrs. Hoeckmann presented the patient satisfaction survey results.

In addressing Benchmark 30.8 (accreditation standards), patient satisfaction surveys were collected between 2/26/18 through 3/30/18. The survey was voluntary, and 209 individuals completed a survey. The survey was available in English and Spanish. Leadership team discussed the following questions:

1. The Cumberland County Health Department is open daily from 8am-5pm. How do you feel about the hours of operation?

- 87.4% of respondents indicated that the hours of operation are fine.
- 2. Which day(s) of the week would you like to see the Cumberland County Health Department stay open longer?
 - A variety of patients wanted one of the five days to be open longer or offer a ½ day on Saturdays. Consensus to stay open later on Fridays.
- 3. The Cumberland County Health Department is open the 2nd and 4th Tuesdays of the month with extended hours until 7pm for Immunizations, Teen Wellness, Child Health, and Women, Infant and Children (WIC) Nutrition Services. How do you feel about these hours of operation?
 - 88.5% indicated that the specialty clinic hours of operation met their needs.

Dr. McMahon asked if it is the exact statement. Mrs. Hoeckmann said yes. She also made a compliment that 91.3% is very satisfied or above, which is very good.

Dr. Philbrick asked if the survey is ongoing. Mrs. Hoeckmann said typically it is conducted on an annual basis; however, we have discussed giving out the survey more often. Dr. Philbrick said he learned a lot with the survey results and strongly suggested having patients give feedback often.

Environmental Health survey is given out to customers via email so their report is not included in this survey. Ms. Yun will send out an electronic copy to the Board members.

E. Recap of Board Retreat:

The Board of Health had a retreat on April 30, 2018 and came up with three priority goals as below. Board members set those goals to move forward this year and probably looking forward as well.

- A position statement on governance and recruit for a permanent director
- Transparency (Staff to Board of Health and Board of Health to community)
- School health nurses

The other key concerns are listed below.

- Teen pregnancies & STIs
- Opioids
- Integration of community health
- Chronic disease management (Hypertension, Diabetes, Obesity)

Transparency:

Are there particular concerns/issues/reports that you would present to the community? Dr. McMahon said the customer satisfaction survey would be a good example of the transparency.

Dr. Philbrick suggested addressing Stedman-Wade Primary Care Clinic issues by public comments. He also suggested sharing educational information (healthy eating etc.).

Dr. McMahon asked if we have reports of staff satisfaction. Mr. Holder said not yet but will brainstorm the staff survey.

Ms. Council asked if the customer satisfaction survey was taken a while as the patients were waiting to be seen. Mrs. Hoeckmann said the voluntary survey has been taken when they were discharged.

Mr. Holder said, tonight, we will give an update on the monitoring reports. Health Department is under a constant review by the state. We have monitoring of any numbers of entities all throughout the year because of the variety of clinics we serve. After review, we receive reports from entities. Women's Health

and Immunizations monitoring reports are the most current reports that we would discuss with the board members. The result could be positive or negative; however, we would discuss how do we address or move on. The monitoring reports will be attached as an ongoing agenda item for the board members' information/discussion.

Dr. Philbrick asked if we have a system to receive citizens' comments. Mr. Holder said the county installed digital drop box.

Mr. Jenkins suggested a press release of the summary of Board of Health meeting to the community. We will issue a press release of meeting highlights immediately following each meeting and publish the meeting minutes after approval.

Mrs. Hoeckmann will provide the Stedman-Wade Adult Health Grant Progress Report at the next meeting.

School Nurses:

We are requesting a \$480,000 FY 2019 budget proposal with seven extra School Nurses to the Board of County Commissioner (BOCC) with a budget plan in June. The county is 115th out of 115 school systems in the state based on its ratio of one school nurse for about every 2,200 students. If they approve an extra seven School Nurses, we will have 30 School Nurses available. County Manager is presenting the budget to the BOCC Tuesday evening in the courthouse room 118.

Chronic Disease (Diabetes, Obesity, Hypertension):

Diabetes is a priority and needs nice results within a certain time limit.

Dr. Philbrick asked how much Type 1 Diabetes we receive in the pediatric clinic. Dr. Tran Phu answered that it is rare. The obesity is related to the diabetes and depression; it causes children's death at an early age.

Dr. Philbrick also asked about hypertension with children. Dr. Tran Phu answered that the hypertension with children ratio is not too high. Again, the hypertension is caused by obesity. In her opinion, processed food, salt, and sugar are the problems.

Mr. Holder stated that it is important to reach out to community providers as well to make an impact/organize community-wide.

Teen Pregnancies & STIs:

STD rate in Cumberland County is 1185/100,000. We need to move this number with the best practice.

Dr. Philbrick said it is a problem due to geographic reasons with a young population.

Teen pregnancy rate is down 38% from 42%; however, the state rate is 29%. NC SHIFT worked hard to decrease the rate. The fund is available for one more year, and it allows for the hire of two Health Educators to visit the school and communities for sex education. They have a specialty with a focus on Teen Pregnancy and STD as well.

Opioid Crisis:

Mr. Holder said we are looking at the misuse of prescription/non-prescription medicines. We applied for a grant through the UNC School of Government which supports community efforts against the battle of the opioid problem. The part of the application processing is committed to a system-wide effort. It was our department along with the County Government, Cape Fear Valley Hospital, and Law Enforcement. We are waiting for the official notice to add two years of technical assistance and coordinating the effort for our county. We have high indicators as far as emergency department admission and overdose.

Dr. McMahon asked if they premade measurements. Mr. Holder said they go out to the community depending on if we identified where we are needed in Cumberland County. It's not the tailored program, and any entities will assist community partners.

While Mr. Jenkins was attending the Local Emergency Planning Committee meeting, there was a representative from VA locally, and the state informed us about the allocated funds for Opioids treatment for veterans.

Dr. McMahon said even a simple campaign would help the community, even about flushing unused medicine down to the toilet at home.

Mrs. Hoeckmann said the State and Health Educators are creating a Healthier Community event for the next fiscal year with allocated opioid campaign funding.

F. 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 April 30, 2018. The excess of
 revenue over the expenditures is \$452,682.06. It doesn't include the amount of the state fund and
 school system.
- The statement of expenditures by program as of April 30, 2018. We should be at 83.3% by end of month but currently at 69.73%, nearly 2% under our budget.
- Revenue by Source reports by state and federal allocations, grants, Medicaid, fees, fund balance
 and county funds allocated, and total earned. It would be 83% overall if 100% earned but we are at
 69%; state and federal allocations are a month behind.

G. Monitoring Reports:

Mrs. Krystle Vinson presented monitoring reports.

a. Women's Health:

Monitoring period is every three (3) years, and the exit conference with staff was on March 29, 2018. The corrective action plan has been completed as indicated below. She received an email today from the state consultant that she will be sending out an official mail confirming this monitoring report has been closed out.

- Family Planning Chart Audit:
 - All issues were corrected during the exit conference, no corrective action plan needed.
- Family Billing and coding Audit:
 - The Division of Medical Assistance (DMA) was billed incorrectly; however, billing had already been identified as a coding error resulting in overpayment. The agency is waiting on guidance from the state to correct this error.
- Maternal Health Chart Audit:
 - A corrective action plan was accepted during the exit conference with a re-audit planned on June 1, 2018 due to missing an assessment for the seasonal flu and not providing a vitamin prescription. Revisions were made to the electronic health record system for documenting seasonal flu assessments.
- Maternal Health Billing Audit:
 All records were billed appropriately.

Pregnancy Testing and Counseling:

Recommendations were made to streamline the presumptive eligibility processes and combining the nurse clinic schedule for family planning and women's health.

• Home Visit for Postnatal assessment and Follow-up Care:

Chart audit on one record reveals that smoking cessation and risks associated with smoking around the baby was not documented. Another record revealed that a client had positive depression screen. The documentation stated that the client was taking medications, however there was no documentation regarding postpartum follow-up with a provider. Lastly, a record indicated that a client had an elevated blood pressure and was advised to follow-up with a provider; however, it was not clear if the client had proper transportation or if a scheduled appointment with a provider had been made.

A corrective action plan addressing the above three items has been submitted to the state.

- Home Visit for Postnatal assessment and Follow-up Care Billing Audit: Services were billed appropriately.
- Policy review for Family Planning

All policies and procedures are in place.

Signage for accepting client donation was not in place. Signage is now in place and proof has been supplied to the state.

- Policy review for Maternal Health:
 All policies and procedures are in place.
- Family Planning Clinic observation:

The nurse and provider did a great job establishing rapport with the client.

Standing Orders:

Re-vamping of the Anaphylaxis standing order was done per State Consultant recommendations; one for adults and one for children.

b. Immunizations:

Monitoring period is every two (2) years. Two corrections are below.

- We have implemented internal controls and accountability measures for Perinatal Hepatitis B. We have also created a backup and tracking system to ensure we meet reporting deadlines.
- The Hepatitis B Coordinator will continue to collaborate with the Cape Fear Valley
 Hospital's staff to provide education about the importance of giving PEP (HBIG and
 HBVO within 12 hours of birth.

H. Director's Report:

a. Human Service Consolidation Update:

We are expecting the final decision from commissioners on Monday, May 21, 2018 at 6:45pm. The letter issued by Board of Health was referred repeatedly during the BOCC meeting, so it will be considered in the decision making processing.

b. Practice Management:

Mr. Jenkins has shared on Practice Management which is very exciting. Practice Management is a tool that we use to ensure that our agency is "right-sized". Practice Management allows for better alignment of staffing, pro-activity levels, seeing an opportunity where we allocate resources. We already supplied to the consultant our information to input in the system. We have a Practice Management Team that will work in concert with our State Practice Management Consultants over an 18-month time frame. It would an in depth analysis tool.

c. Status of Board Vacancies:

We still have engineer and pharmacy positions available and an unfordable register nurse position. Dr. McMahon discussed creating a letter to the hospital to recruit vacancies. We also will need a Dentist and Veterinarian in December, so we are strongly active to recruit them.

d. Employee New Hires:

Mr. Holder presented one new hire for the month of April. Ms. Elaine Cessna, Assistant Nursing Director, retires by the end of this month. Also, Mr. Daniel Ortiz resigned, and his last date is next Friday. We are excited for his new career and thanked him for near 22 years of service in Cumberland County. He was a trusted voice for the Environmental Health and their issues in our county and throughout the state.

e. National Conferences:

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, the 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 board members to attend.

I. Membership Roster/Attendance Roster:

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

ADJOURNMENT

MOTION:

Dr. William Philbrick moved to adjourn.

SECOND:

Dr. Heather Burkhardt

VOTE:

Unanimous (5-0)

The meeting was adjourned at 7:29 p.m.

Duane Holder, Interim Health Director

Dr. Connette McMahon, Chair