#### CUMBERLAND COUNTY BOARD OF HEALTH

June 19, 2018 – 6:04p.m.

## 1235 RAMSEY STREET, THIRD FLOOR BOARD ROOM

REGULAR MEETING MINUTES

MEMBERS PRESENT:

Dr. Connette McMahon, Chair

Dr. Vikki Andrews, Public Representative, Vice Chair (Departed at 6:42pm)

Dr. William Philbrick, Optometrist Dr. Heather Burkhardt, Veterinarian Dr. Sam Fleishman, Physician

Ms. Sonja Council, Nurse (Arrived at 6:22pm)

MEMBERS ABSENT:

Dr. Oliver Hodge, Dentist

Dr. Jeannette Council, Commissioner

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

Stepheria Nicholson, Public Health Education Supervisor

Torica Fuller, Provider Extender

Monica Short-Owens, Records Manager/HIPAA Compliance Officer

# 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.

## **ACTION ITEMS**

# A. Approval of Agendas

MOTION:

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

SECOND:

Dr. William Philbrick

VOTE:

Unanimous (5-0)

B. Approval of May 15, 2018 Regular Meeting Minutes

MOTION:

Dr. William Philbrick moved to approve the minutes.

SECOND:

Dr. Heather Burkhardt

VOTE:

Unanimous (5-0)

## INFORMATIONAL/DISCUSSION ITEMS

#### A. Public Comment:

Dr. McMahon opened the floor for public comments at 6:06 p.m. There being no public comments registered, Dr. McMahon closed the floor for public comments at 6:06 p.m.

B. Health Director Search Update:

Dr. McMahon gave an update on the status of the Health Director Search. Dr. Council, Dr. Andrews, and Dr. McMahon, County Manager, and Mr. Holder have met to discuss about the Health Director Recruitment processing. During this initial meeting, we created a core committee and decided to have assistance from an executive search firm that has experience in recruiting the Health Director. We will use their assistance to help us create a formal search committee and also create an ideal Health Director on profile.

Mr. Holder said RFP is being issued for executive search firm. We want the recruitment of the Health Director to be a very open and community-oriented process. We are hoping that the search firm has some experience with that and in making recommendations for how to actively engage the public into the process. It will be a community search firm to engage the public with the process. We also envision what is referred to as an assessment center process; and, if anyone has been engaged in such process more than panel interview is inclusive of presentations and role-playing scenarios. We also want to be able to utilize subject matter experts from outside of the health department throughout the community or other counties, even, to help us in the assessment process, role-playing scenarios presentation, written assignments, etc. We are looking at a 6-8 month overall time frame; Six months would be ambitious.

# C. Financial Reports:

Mrs. York presented the following financial reports:

- Reviewed aging report by program.
- The accounts receivable by program are broken down by payer source.
- The statement of Revenue and Expenditures (Profit and Loss) as of May 31, 2018. The excess of revenue over the expenditures is \$1,324,131.87. It does include \$1,261,000 Medicaid cost settlement received this year for 2016.
- The statement of expenditures by program as of May 31, 2018. We should be at 100% by end of month but currently at 78.17%, nearly 22% 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 84.77% overall if 100% earned but we
  are at 80%; state and federal allocations are a month behind.

Dr. Fleishman asked if it's typical to receive Medicaid allowance. Mrs. York answered yes, and we receive it an year behind.

#### D. Administrative Monitoring Reports:

Mrs. York presented the administrative monitoring reports from state.

- Section A: Staff Time Documentation & Expenditure Reporting
   Staff time records for October 2016 were reviewed, and documentation-supported expenses were reported in the Aid to County database. The DHHS Monthly Expenditure Report for November 2017 was reviewed. No recommendations and no funding conditions on this section.
- Section B: Program income
  Reviewed unexpended balances of program revenue are carried forward and available for
  expenditure in the subsequent fiscal year. No recommendation and no funding conditions on this
  section
- Section C: Patient Eligibility/Financial Policies & Procedures
   There were no financial eligibility requirements for patients to be eligible for Family Planning,
   Maternal Health, Child Health, Immunizations, TB, and STD. No recommendations and no funding conditions on this section.
- Section D: Financial Eligibility/Medicaid & Residency

Patients were seen at the Cumberland County Health Department regardless of residency for Family Planning, Immunizations, STD and TB. Residency in Cumberland County is required for Maternal Health and Child Health. No recommendations and no funding conditions on this section.

#### Section E: Patients fee

The patient fee and eligibility policy contained all necessary components meeting state and federal program requirements. To assure 340B compliance, finance officer updates price changes monthly for 340B drugs and charges only acquisition cost for Medicaid. The agency has a policy for setting fees and it is appropriate. No recommendations and no funding conditions on this section.

Section F: Billing/Account receivable
 Insight was utilized for accounts receivable for the fiscal year in review. There is a policy for handling denied claims, Medicaid, and all other claims. There is a bad debt write-off policy and account checklists. No recommendations and no funding conditions on this section.

Dr. Andrews asked if the provided document is actual reports from the State and has a signature on the document. Mrs. York said it is the official report. The State emails the reports to the Health Director with the carbon copy to the Department of Public Health (DPH); it also states monitoring reports as well.

Ms. Sonja Council arrived at 6:22pm.

# E. School Nurse Funding (State):

Mrs. York presented about the School Nurse Funding Initiative (SNFI). The first allocation funded in FY 2005, and, with that funding, we are receiving two positions. The funding continued the set in FY 2008 and increased to provide three (3) positions. In FY 2012, it increased again to provide four (4) positions. At that point, in a comprehended addenda stated in a short-term results that they were hoping to decrease the actual students from one (1) nurse for 2023students to one (1) nurse for 1986 students. The state provides \$50,000 per each position depends on experience with hiring 10% above of the max. The fund from the state is not covering salary increases, so the county has to cover the remaining balance after \$50,000 for the position. It also depends on the position we have. Currently, we have two full-time positions covered in year-round school and two part-time positions (10 months, 35 hours/week). The positions require a Bachelor of Science in Nursing (BSN) and a state certification.

Dr. Fleishman asked for the reason why year-round nurses' salaries are higher compared to traditional school nurses. Mrs. York said that year-round school nurses work 40 hours/week for 12 months and are assigned extra assignments to cover the whole school system to pick up medications, paperwork etc.; traditional school nurses work 35 hours/week for ten months. Currently we have four (4) SNFI positions and will have an additional seven (7) nurses.

Mr. Holder wanted to make sure that the board was fully aware about funding sources that go into school nurses because it's not just the County funds and the School System funds; it is combination of the County, School System, and State. The majority of four (4) SNFI positions are state funded, 11 positions county-funded intended School System funded, and additional seven (7) positions will be fully county-funded.

For the SNIFI position hiring processing, the state receives the application and provides us each month for the four (4) positions as long as the position filled.

## F. Adult Health Clinic Update:

Mrs. Vinson reviewed the three months provided productive reports for Stedman-Wade and HealthNet. The reports are attached below.

HealthNET								
	Scheduled	Walk-In	Cancel	No-Show	Total Seen			
May 2018	142	11	1	36	116			
April 2018	142	6	4	37	107			
March 2018	124	4	35	0	85			

Stedman-Wade								
	Scheduled	Walk-In	Cancel	No-Show	Total Seen			
May 2018	304	61	143	29	191			
April 2018	281	31	129	0	183			
March 2018	223	13	86	15	139			

Ms. Yvonne Anton, new CEO at the Cumberland HealthNet, introduced herself and presented about HealthNet services.

One of her first focuses was the health clinical; although they have diverse funds come from each, the Duke endowment, State, navigator from the legal aid, and the county help them with the clinics. They were scheduling first for only one day then increased to two days. Now the beginning of the year, we increase to three days and ready to come in front of us to ask for four days. Their whole sustainability plan that they have been developing into her hiring has been in addressing the no-shows. They are also working with clients that have situations beyond their control. They are really close to be looking at each client case-bycase and ensuring for any warier spots. They are looking at 1) continuously better communication; 2) transportation issues; 3) education for patients. They have a struggle with staff shortage; however, it has been able to address the issue with county support and will not be effective with services at the Health Department. Cumberland HealthNet Board reviewed that they are ready to compete, are sustainable, and also reviewed technical support from the Duke endowment on how they could sustain themselves, including looking at what the legislation is doing for the Medicaid waiver and the potential expansion in the future. She welcomed to join in a position in their advisory council. Two weeks ago, they signed a memorandum of understanding (MoU) with the Behavioral Health initiative for behavioral services the clients need. With that initiative, caretakers will continue to use communication addressing their needs of transportation, and she believes that no-show rates will decrease. She provided hard copies of brochures.

Dr. Fleishman asked how many providers they have at the clinic at a time. Ms. Anton said they have two doctors and one down now, and she has committed to working all three days at the Health Department. The provided report numbers by Mrs. Vinson are with two providers until June 11, 2018. The MoU is directly being executed with Communicare and has integrated Behavioral Healthcare Services. She met with Alliance Behavioral Healthcare to negotiate services on non-insured patients.

Dr. McMahon asked how many patients each provider can see an hour. Ms. Anton said they scheduled 16 patients, assuming that only 13 patients show up per day. They are planning to schedule brand new cases for 30 minutes and ongoing cases of 15 minutes. They are interested in education and the Electronic Health Record (EHR) and will be improved in the future. The goal is to see 14-16 patients per day when all are fully functional.

Ms. Amy Navejas, Cumberland HealthNet Board member and Executive Director at Better Health, stated that the Cumberland HealthNet Board wanted to develop an active clinical plan.

## Dr. Andrews departed at 6:42pm.

#### G. Adult Health Grant Progress Report:

Mrs. Hoeckmann presented the Adult Health grant progress reports. A Community Health Grant from the NC Office of Rural Health, was awarded in the amount of \$148,000 for FY17-18 to provide Adult Health Primary Care Services. The important dates are:

- July 1, 2017- County-funded Adult Health Clinic closed
- October 3, 2017 Stedman-Wade Health Services provides Adult Health on Tuesdays and Thursdays from 8am-12pm
- February 13, 2018- Site visit with grant monitor from the Office of Rural Health
- March 13, 2018- Stedman-Wade Health Services Meet & Greet; Stedman-Wade Health Services increased their hours to 5 days a week, M-Th: 8am-5 pm, F: 8am-2pm

The measures that are reported quarterly to the Office of Rural Health are provided to the board members.

Dr. Fleishman asked if the matrices changes year to year. Mrs. Hoeckmann said yes; HealthNet also grants this funding.

Mrs. Margaret Covington was invited to the meeting; however, she was not able to attend due to work schedule conflicts.

# H. Community Health Assessment (CHA) Focus Group:

Mrs. Hoeckmann briefly explained about the Community Health Assessment (CHA) Focus group. The CHA survey collection is still going on by the end of this month by collaboration with the Eastern NC Region and the partnership with the Cape Fear Valley Hospital. We collected over 900 surveys, and the Focus Group wants to make sure covering all demographics populations in Cumberland County. The Focus Group's goal is to have between 10-15 citizens in the group for the community input. The Cape Fear Valley Hospital hosted a meeting last week. Future meetings are scheduled in Hope Mills, Eastover, and Spring Lake. The hospitals, recreation centers, public library, churches etc. are in conjunction with this project.

# I. Director's Report:

- a. Practice Management:
  - Practice Management is an initiative that we've engaged in as a health department with a consultant from the state of NC that are in the business of looking at clinical practices of Health departments across the state and are trying to make sure that we are the right size for a population. They look at our productivity rates, how many people we're seeing, penetration rates into the community, right-sizing, providers, and nurses against the population that were serving. We are taking a clinic-by-clinic approach and will start with the STD clinic. We will keep up on the update.
- b. Corrective Action Plan for Community Health Assessment/SOTCH/WIC: We have received Corrective Action Plans from the states, and Mr. Holder briefly reviewed the reports. The reports are available by request to Ms. Yun.
- c. Opioid Crisis Community Team meeting:
  - Blue Cross and Blue Shield of North Carolina (Blue Cross NC) and the UNC School of Government selected ten N.C. local government teams that will work to address the opioid crisis in their communities through an intensive two-year program. The School of Government and Blue Cross NC will provide the following to each participating community: five regional forums at which teams will form goals, set plans for implementation, collaborate across fields and jurisdictions, and learn from experts on opioid-related issues; School of Government support throughout the process; \$10,000 to assist with the costs of hiring a community project manager; and \$10,000 in implementation funding for the project. The initiative community meeting was scheduled for June 12, 2018 at 2pm. Dr. Fleishman, Mr. Holder, and Captain Lars Paul from the Fayetteville Police Department, represent a core team. We have a larger Community team where we have invited key partners from different agencies and organizations across the county. It is a diverse group that is professionally diverse in dripline as well. For the health department, Mrs.

## d. Mobile Home Park Septic Systems:

Mr. Jenkins shared about the Mobile Home Park situation. A lot of the homes in Mobile Home Park is privately owned, and Environmental Health has received many complaints driven to that. The useful life for the septic tanks is about 40 years. The cleaning is conducted every 3-5 years, and inspections are every year as recommend by the National Environmental Health. The Garden Grove Mobile Home Park was established in 1963 from 6 months to 3 months. There are approximate 400 mobile home parks in Cumberland County.

14 spaces on Mobile Home Park indicated no licenses. If they fail the septic tank inspection, they lose the spaces; we also are monitoring two additional mobile home parks very closely. We issued a notice of violation for Garden Grove Mobile Home Park and signed/delivered on June 4, 2018 via certified mail; we also notified the states that the owners have 30 days to respond.

Dr. Philbrick asked who the water provider is to this mobile home park. Mr. Jenkins answered that the majority of mobile homes still have water by PWC; however, some do not.

Dr. McMahon asked if we are fined on this violation; if not, how it can be addressed. Mr. Jenkins said not from Health Department.

Mr. Holder said it will eventually escalate the situation, and the County will take some action against the owners. We are also looking at outstanding taxes situations. The issue was brought to our attention back on May 14, 2018. We mobilized the county internally to see how to assist the residents. We conducted three information sessions for the residents with representatives from the Community Development Department at the Spring Lake Family Resource Center. We specialize in affordable housing represented from the Department Social Services, Alliance Healthcare Services, and Environmental Health. We had three news channel reporters attend the meeting that was called for by members of the community yesterday at the courthouse to bring awareness to the situation, and it turned into the press conference. Mr. Holder, Ms. Sally Shutt, Public Health Information Office, Ms. Misty Taylor, Community Development Director, will be attending a community meeting tomorrow evening at 5pm in Garden Grove Mobile Home Park in Spring Lake to make sure that all residents are aware of what resources are available. The community meeting tomorrow will make sure all residents are aware of what is coming.

Ms. Council stated to make sure to address the issue; nothing has been done at the Mobile Home Park based on recent news.

Mr. Jenkins said that we will do our job correctly with the state-level Environmental Health to solve this situation as soon as possible.

Mr. Holder said some of the mobile homes have been condemned, and the County Code Enforcement Department is going on-site to post notices that they're inspecting vacant structures. Any homes that are deemed and unfit for habitation will be in processing for condemnation of the structures.

## e. Status of Board Vacancies:

We have the drafted letters to be sent out to the community to recruit board membership. Currently, we have vacancies for Professional Engineer, Pharmacy, and Registered Nurse positions. We also are anticipating Dentist and Veterinarian positions by December. Please spread the word to any individuals who might be interested in serving.

#### f. Employee New Hires:

Mr. Holder presented four new hires for the month of May.

#### g. 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.

g. 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.

## J. Membership Roster/Attendance Roster:

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

#### K. Others:

- a. Dr. McMahon shared the thank you card from the School Health Team with appreciation for the board members' support on the additional seven school nurses. The School Health Team also sent the thank you card to the Board of County Commissioner and County Manager as well.
- b. Dr. McMahon discussed to schedule the non-traditional Board of Health meeting since none of board members are attending the NACCHO Annual Conference. The Doodle Poll was distributed to collect the board members' availability either July 10 or July 24, 2018. Due to the lack of response or availability, the Board of Health will meet on August 21, 2018 at 6:00pm.

#### ADJOURNMENT

MOTION:

Dr. William Philbrick moved to adjourn.

SECOND:

Ms. Sonja Council

VOTE:

Unanimous (5-0)

The meeting was adjourned at 1:23 p.m.

Duane Holder, Interim Health Director

Date

Dr. Connette McMahon, Chair

Date