



Macon County
Public Health

**MACON COUNTY BOARD OF HEALTH
MINUTES
9/27/2016**

Members Chris Hanners, Engineer and Chair; Teresa Murray, General Public and Vice-Chair; Emily Porter-Bowers, Nurse; Dr. Carole Peterson, Physician; Melissa Bell, Pharmacist; Dr. Jeff Todd, Veterinarian; Dr. Nathan Brenner, Dentist; Paul Higdon, County Commissioner; Molly Phillips, General Public; and Gena Futral, General Public

Members Absent Paul Higdon, Emily Porter-Bowers, Nathan Brenner

Staff Present Jim Bruckner, Tammy Keezer, Jimmy Villiard, Kyle Jennings, Jennifer Garrett, Kathy McGaha, Dorota Anthony, Diane Keener, Lynn Baker, Rachelle Castle, Courtney Bell, Dr. Donald Dewhurst, Melissa Leatherman, Melissa Spencer, Darice Davis,

Guests Dr. Roy Lenzo, Dr. Kelsey Pieper

Media Mr. Ryan Hanchett; The Franklin Press, Ms. Brittany Raby; Macon County News, Ms. Kristen Karcher; WNCC Radio

Public Comment None

Call to Order Meeting was called to order at 6:13pm by Chris Hanners

Approve Agenda Mr. Bruckner asked to amend the agenda by adding Title X Family Planning Grant Funding to New Business 4E. Melissa Bell made the motion to accept the agenda as amended. Dr. Peterson seconded the motion. The motion passed unanimously.

Welcome/Intro./Departures/Recognition Chris Hanners welcomed Gena Futral the newest member of the Board of Health. Everyone introduced themselves. Chris Hanners presented a plaque to Dr. Roy Lenzo for his participation on the BOH. Lynn Baker recognized the WIC staff. The WIC program was recognized by the state for its 96% Breastfeeding initiation rate; the state average is 78%. Mr. Bruckner introduced Dr. Kelsey Pieper. Dr. Pieper is from Virginia Tech. He described her educational background and explained that she will be presenting on the collaborative research being conducted by Virginia Teac and Macon County Public Health.

Presentations

A. Well Water Testing - Virginia Tech Lead in Drinking Water

Dr. Pieper gave a summary of the research work being conducted here in Macon County pertaining to

private/unregulated drinking water wells. She explained that private drinking wells are not regulated by the EPA and that sixty percent of Macon County Residents are on unregulated wells. She explained that her group has been working in VA for some time now doing similar testing to what they are doing in Macon County and that they have sampled 3,000 wells. Fifty eight percent of the wells sampled in VA exceeded at least one EPA health based standard. One in five homes has lead levels above the recommend limit. One of the reasons for the high lead levels is that lead free plumbing was not really lead free before 2014. Plumbing could contain up to 8% lead. Since 2014 it can only contain up to .25% lead. The casing of the well can have lead levels between .5 and 1.4%.

MCPH approached VA Tech. 18 months ago to ask for assistance after a high percentage of water samples collected in Macon County were testing positive for lead – exceeding the EPA safe drinking water standards for lead. VA Tech. is collaborating with MCPH to find the sources that are releasing lead in the water. The Sussman Foundation sponsored a fellow to work solely in Macon County. She developed a profile of the wells. i.e. what are the sources of lead and locations of wells and what are effective remediation options to reduce lead in water. Dr. Todd asked how many homes are going to be tested. Ms. Pieper said fifteen homes are being tested. Mr. Jennings has contacted the 55 homes in Macon County that originally tested positive for lead and from those homes they were able to get the 15 homes to participate in further testing. Ms. Pieper went on to explain that it takes about an hour plus travel time to test one well location. Mr. Bruckner said MCPH will be working on another pilot grant to figure out how to help fund remediation projects and figure out how to get funding to off-set the cost for individuals who have lead in their homes. Mr. Bruckner explained that the MCPH Environmental Health staff has been putting samples in the data base for several years now and that is why we were able to identify this issue. It was not mandatory that Environmental Health do this, and Mr. Bruckner commended them for taking that extra step, which allowed this issue to be identified. Dr. Peterson asked if there was any instance of lead in homes with children. Mr. Jennings said yes. Ms. Murray asked the cost of testing the wells. Mr. Jennings said VA Tech is paying for this, but if someone comes into the health department the cost is \$70. Ms. Murray also asked if nitrites and nitrates are being tested for. Mr. Jennings said in a new well we have a whole panel that does include nitrates and nitrites. Those usually come from pollution. Lead is component driven and is harmful to small children.

B. Strategic Plan Ms. McGaha gave a presentation on the draft form of the 2016 strategic plan and the process of how it was developed. This process is done to develop priority areas within the health department and develop goals and objectives. She explained that MCPH had surveys that went out earlier in the year. We had a response of 55 staff surveys 11 BOH and 8 Partner surveys returned. A work group of 16 employees met 3 times to review the survey results and build the strategic plan based on the survey results, after which they met and presented the plan to the Expanded Leadership Team. The employees that were involved in the strategic planning meetings represented different programs and number of years of service throughout the health department. In the work sessions they reviewed the agency values, SWOT (strengths, weaknesses opportunities and threats) analysis, surveys, selected priority areas, developed goals and objectives, and discussed, fine-tuned and ranked priorities with expanded leadership. After review it was determined that professionalism and quality were the two main priority values.

1. Delivering Essential Public Health Services to the Community: Rachele Castel explained that our first goal is to increase services provided, improve health outcomes, and maximize proficiency in each of the 10 essential public health services. She explained each of the objectives that are associated with the goal and referred to the hand out that was included with the Board of Health information. Mr. Hanners read the 10 essential services for everyone's clarification. Ms. Phillips asked who is responsible to keep the time line in check to make sure the goals and objectives are met. Ms. McGaha said the leadership team meets annually to re-evaluate the progress, but ultimately it is up to Mr. Bruckner and all of the leadership team.

2. Improve Communications, Community Outreach – Courtney Bell explained that the goal of this priority is to Increase Awareness of MCPH services in the community. She explained each of the objectives that are associated with this goal and referred to the handout that was included in the Board of Health information. Dr.

Peterson asked if they are trying to figure out who is utilizing our services as well. Ms. McGaha said yes, that is also part of the process.

3. Maximize Partnerships: Melissa Leatherman explained that the goal for this priority is to develop, enhance and sustain the strategic partnerships that are value added. She said MCPH will be identifying and developing a process to evaluate the quality and value of existing partnerships. We also want to make sure that our current partnerships are the most valuable partnerships for MCPH. Gena Futral asked if there is a list of current partnerships. Ms. McGaha said we have a couple of lists. We have a list of communities and boards and we are working towards making one complete list. Mr. Bruckner further explained that we have over 200 partnerships and Mr. Villiard said we have a lot of informal partnerships. Ms. McGaha said we are going to be working on determining what a “valuable partnership” is. Mr. Bruckner said we also have partnerships that are appointed by the commissioners. Ms. Phillips asked if partnerships are built to help community outreach. Ms. McGaha said yes that is part of the partnership engagement plan.

4. Improve Communications Multi Directional Internal Communication for Daily Operations: Courtney Bell explained that the goal for this priority is Successful Multi Directional Internal Mechanisms in place for Communication. She reviewed all the objectives associated with this goal that were included with the Board of Health information. Ms. McGaha explained that this priority is focusing on our internal communications. Ms. Phillips asked if there is a communication person in place to manage this goal. Ms. McGaha said that we are still in the early planning stages and will be working on it. Mr. Bruckner said that it will probably be some of the 16 people that were in the planning group.

5. Early Education for Youth and Parents on Heart Disease Prevention: Diane Keener explained that the goal is to inform, educate and empower youth and parents to prevent heart disease. Ms. Keener reviewed all of the objectives associated with this goal and referred to the handout that was included in the Board of Health information. Ms. McGaha added that this priority is directly related to our Community Health Assessment (CHA) as well.

Ms. McGaha said that the strategic planning workgroup reviewed the current vision statement and mission statement and felt that it was still applicable and did not need to be changed. Ms. McGaha explained that this plan is being brought to the Board for their adoption consideration.

Dr. Peterson said she though the plan was good. Several other Board members commented positively as well. Mr. Hanners said he thought the staff had done a wonderful job, but that he would like a copy of the slides that were used in the presentation. Ms. Phillips said she thought that the objectives of the plan need to match what the SWAT analysis was and to address some of the strengths and weaknesses. Ms. McGaha said that she thought the Board would see that there is a connection there between the SWAT analysis presented and the objectives. Mr. Bruckner said he would make sure they received a copy of the presentation. Mr. Hanners asked if the plan could be put on agenda for consideration next month to give Board members time to absorb the information. Ms. Phillips asked if the survey information from Board, community partners and staff could be emailed to Board members, not so much to micromanage, as the staff did a wonderful job, but it would be nice to see what people are saying and what the comments are. Mr. Hanners asked if the slides could also be included in that email. Mr. Hanners commented that if anyone wanted any additional information to get with Mr. Bruckner or Ms. McGaha. Dr. Peterson commented that she thought the plan was a good.

Approve Minutes of Previous Meeting Dr. Peterson made the motion to approve the minutes as presented. Melissa Bell seconded the motion. The motion passed unanimously

Old Business

A. Employee Vaccination Policy Changes Mr. Hanners asked if there were any questions about the MCPH TB policy or Flu policy. He explained that we need to make a change to the MCPH policy due to a reference to the flu mist. Dr. Peterson explained that the CDC has said the flu mist is ineffective this year and is not

being manufactured. Dr. Dewhurst agreed with Dr. Peterson that the CDC has said do not use the flu mist due to ineffectiveness. Mr. Hanners then asked about the 2 step TB test. Mr. Bruckner said that the 2 step TB test method has been around a while but we have not introduced it at MCPH. Dr. Dewhurst and Ms. Garrett met with Mr. Bruckner and asked that MCPH shift to the 2 step testing method. They would like to add it to the policy that all new employees be tested with the 2 step test. Once an employee has a negative 2 step TB test we are better able isolate when/where the TB may have been contracted. Ms. Phillips asked if we are only testing health care employees or all of the health department employees. Mr. Bruckner said the policy applies to all employees. Dr. Dewhurst said that it should include anyone working in the building because we are all at a low risk of TB exposure. If we can identify certain positions during the assessment process that don't have much contact with TB patients we may be able to exclude them later on. He also noted that we are at the lowest risk category and therefore it is not recommended to do annual 2 step TB testing. Dr. Dewhurst referenced an annual assessment from the state that said we have no active or latent TB in the county for 2015. Mr. Bruckner summarized by saying we will do an initial assessment on all employees and then identify who would need additional testing later on. Dr. Peterson made a motion to approve the new policy as written. Dr. Todd seconded the motion. The motion passed unanimously.

- B. Adoption of a Local Health Rule for Rabies Post Exposure Management of Dogs and Cats** Mr. Bruckner read the "Resolution of Macon County Board of Health Adopting a Local Health Rule for Rabies Post Exposure Management of Dogs and Cats" line by line. Mr. Bruckner also read the rule for Rabies Post Exposure Management of Dogs and Cats line by line. He then said we need a motion to approve the resolution. Ms. Phillips asked if this was what had been discussed at the last Board meeting. Mr. Hanners said it was. Dr. Todd made the motion to approve the rule as written. Ms. Bell seconded the motion. The motion passed unanimously. Mr. Villiard asked if this is rule retroactive. Mr. Bruckner said it is effective today and that we can apply it to animals currently in quarantine.

New Business

- A. Adoption/Approval of Strategic Plan** Postponed until next month.
- B. FY16 Budget Close** Dorota Anthony presented a summary of the FY16 yearend budget (Attached). She reviewed the expenditures, revenues and county allocation. Dr. Peterson asked if the health department is able to keep the unspent county allocation. Mr. Bruckner said no, these funds go back to the county. He explained the reasons why we have unspent county funds at the end of the fiscal year. He said we are able to draw down funds from grants received during the year that we don't know we are going to receive at the budget time and that other things e.g. laps salary also can reduce county cost during the year. He also said that county dollars (local tax dollars) are the last dollars spent. Ms. Phillips asked how many years we have given back money to the county. Mr. Bruckner explained that these funds are approved for a specific fiscal year and that if it's not spent, they go back to the county and that we have offset the county costs every year since he arrived. She asked why we couldn't use that as an argument to get pay raises for employees. Mr. Bruckner explained the county pay system that the department must work within. Ms. Phillips asked about how positions under the county were being paid more than those in the health department under the state personnel system. Mr. Bruckner said the state decides how the jobs will be classified and the county decides as part of the county pay plan how health department positions will be paid. Ms. Phillips asked Mr. Bruckner if he had discussed this with the county. He said every year since arriving here he has had discussions regarding health department employee classification and pay with the county manager (Mr. Rolland, Mr. Horton, and Mr. Greenwood). Mr. Bruckner described the state position grading system in detail and how it applies to all health department employees and how the salaries for the county are determined.
- C. Fee Plan – Engineered Permit Option** Mr. Jennings talked about the engineered option permit. It would allow the state to write septic permits like we do here in the county. The involvement that we have is; to ensure the proper people are doing the job, we make one site visit and archive all of the documents. We are authorized to charge a fee for our time. We can charge up to 30% of what we would charge someone if they

had come to MCPH. Ms. Phillips asked some questions about the cost for someone going elsewhere for permitting instead of coming to the health department. Mr. Jennings said it would be more expensive for them to do that, but there are situations that it would make sense. Mr. Jennings said that we would like to add this fee to the fee schedule. Dr. Peterson made a motion to approve the fee schedule as presented. Ms. Phillips seconded the motion. The motion passed unanimously.

D. Review of Health Department Services: Mr. Bruckner provided the Board members with a document that he and the leadership team had put together listing all of the programs and services that the department provides to the community (attached). He provided brief summary of what the document contained and why he and the leadership team had put it together.

E. Title X Family Planning Funding Mr. Bruckner said that local health departments have received federal Title X grant funding through the state for as long as he can remember. But, that the state has implemented a new process where we now have to apply for these grant funds. The application is due in Raleigh by October 13, 2016. The new process was only put out a week and a half ago so we must move quickly or risk losing the funding. He explained that we need letters of support from various other agencies and employees and that we must also have several MOA's in place prior to submitting our application. Mr. Bruckner asked the Board for their support in applying for this funding. Ms. Phillips made the motion to support this funding. Dr. Peterson seconded the motion. The motion passed unanimously.

Board Training and Information

A. **Rabies Vaccination Clinic** There was a handout included with a list of the upcoming rabies clinic.

B. **Budget Update** See New Business B

Announcements Mr. Hanners said he would like to get an update of the DPP program and the Primary Care program that were approved by the Board last year. Dr. Peterson would like to discuss beginning a program to help victims of Human Trafficking. Ms. Baker said this is a very hot topic issue right now. They have had a webinar to gain some knowledge and guidance. There are not a lot of resources in our area currently. Ms. Garrett said part of the Family Planning grant includes human trafficking. Mr. Bruckner said the plan is to have Primary Care and state changes in mold management included on the October Agenda and the DPP Program on the November agenda.

Next Meeting Date 10/25/2016

Adjourn Ms. Phillips made a motion to adjourn the meeting. Ms. Bell seconded the motion. The motion passed unanimously. The meeting adjourned at 8:48 pm.