



Macon County
Public Health

MACON COUNTY BOARD OF HEALTH
MINUTES
October 28, 2014

Members Present: Russell Stevenson – Chair, Frank Killian MD - Vice-Chairman, Teresa Murray, Emily Bowers, Nathan Brenner DDS, Molly Phillips, and Stacy Shannon Pharm. D.

Absent: Dr. Roy Lenzo, DVM & Commissioner Paul Higdon

Staff Present: Jim Bruckner, Tammy Keezer, Becky Barr, Barry Patterson, Jimmy Villiard, Kathy McGaha, & Charlene Bellavance.

Public Comment: There were no members of the public present.

Media: There were no members of the press in attendance.

Call to Order: The meeting was called to order at 5:58 by Chairman Stevenson.

Approve Agenda: Mr. Bruckner indicated that the agenda items were the same but had been put in a different order. Therefore, a copy of the new agenda was handed out and will also be recorded. Results based accountability has been moved from board training up under presentations. A motion was made by Ms. Bowers and seconded by Dr. Killian to approve the agenda as amended. The motion passed unanimously.

Welcome/Intro/Departures/Recognition:

Mr. Bruckner introduced the new physician representative Dr. Carole Peterson.

Presentations: Mr. Bruckner introduced Heather Gates with WNC Health Network and Marian Arledge from Buncombe County Health Department who was participating via conference phone. Ms. Gates discussed Results-Based Accountability (RBA) and using it in connection with our agency monitoring tools such as the CHIP and CHA reports. Mr. Bruckner indicated that we are also hoping to use it to evaluate the new CDC/State DPH 1422 grant as well. A copy of Ms. Gates presentation is attached to these minutes. Ms. Arledge joined the conversation via the conference phone to share her experience in Buncombe County with RBA. She referenced a book titled “*Trying Hard is Not Good Enough*” by Mark Friedman. Ms. Gates noted that they did some research regarding the results scorecard software program that Buncombe County has had success with and good feedback about from their Board of Health. There are links within the presentation that can be used to access the software.

Approve Minutes of Previous Meeting: A motion was made by Dr. Killian and seconded by Emily Bowers to approve the minutes of the September 23, 2014 meeting as presented. The motion passed unanimously.

Old Business: None

New Business: None

Board Training and Information: Mr. Bruckner gave the board members an overview of the topics they would be discussing. Public Health is mandated to provide certain programs to that county's population as stated in NCGS 130A-34. Mr. Bruckner reviewed these mandated programs, the Board of Health policies including the Operating Procedure, and the Board of Health laws and rules. Mr. Stevenson reminded all of the members that this board has the authority to make rules and regulations. Mr. Bruckner continued with review of the powers and duties of the local Board of Health and NCGS130A-40 & 41 regarding powers and duties of the local health director. Mr. Bruckner reviewed the definition and scope of Board Delegation of Authority to the Health Director. A copy of Mr. Bruckner's presentation is attached to these minutes.

BOH Engagement: Mr. Stevenson mentioned that some of the items that they would be reviewing tie back to accreditation. The Board of health has primary responsibility for being the link to the community. The skill set on the board of health in the community allows them to bring information to the health department but also to bring information out into the community. We need to include Board members in discussions to set policy and engage them in the strategic planning and department priority setting process. The most important aspect of being a board member is the availability of the members and attendance of these meetings. Mr. Stevenson would like the members to become more engaged in the topics of conversation. He has also discussed with Mr. Bruckner a balance of the items that need approval, but also wants the agency personnel to bring information to discuss to help the Board in their decision making process.

Mr. Stevenson asked the members now that they have been on the Board for a time, what they felt we need to do as a Board and what we need to do to have more dialogue and not so much monologue. Mr. Stevenson asked each of the board members to think of some ideas or suggestions for the future.

Dr. Killian shared some criticism regarding old business. He stated he would like it to come full circle. Are we getting closure about items we covered in the past? Revisit issues that have been brought up at prior meetings.

Ms. Bowers mentioned the immunizations discussion. She wondered what the status was of that issue. Ms. Bowers said she would like to be a liaison for the Highlands area and the Hospital. The connection should be more seamless. She indicated that it would be nice to have an organizational chart of the agency so that when there is a speaker they know who and what they are responsible for. It was indicated by Ms. Keezer that there is an organizational chart in each of their Board of Health notebooks.

Mr. Stevenson asked about personal feedback when they received the call from Mr. Bruckner to serve on the Board what was their motivation.

Ms. Phillips said the reporting to the Board can sometimes be a difficult relationship. She indicated she felt like this is a Board that receives reports more than giving any advice or input. She indicated when Dawn Wilde asked her to represent the Board at a local event that was the only time she had been asked to do anything for the agency. Ms. Phillips also mentioned that she would like to be a better advocate in the community but she didn't really know what to advocate for.

Mr. Stevenson said that the expectations are changing due to our accreditation requirements and we should be encouraged to make comments and contribute to the conversation.

There were several comments made about the set-up of the room being more conducive to the flow of conversation.

Dr. Brenner noted a concern regarding the county commissioner representative not being at these meetings. If we are to have an open relationship with the commissioners we need to have a representative here. There is a commissioner liaison that is appointed to the Board of Health.

Ms. Shannon also indicated that she felt this was a board that received a lot of information but did not feel like there was much that she could do to help the partnering efforts. She was glad to see Ms. Gates here discussing how to partner with other agencies in the community. She would like to know how she can help to facilitate a partnership of some kind with the hospital.

Ms. Murray indicated she agreed with the comments that both Ms. Phillips and Ms. Shannon shared. She indicated she also liked to be more involved in the conversation and contribute feedback when asked. She also mentioned how much she appreciated the agency personnel and the hard work they do.

Mr. Stevenson asked the Health Department Leadership Team members for their input regarding how we might engage the Board members more. He also asked for feedback about routine meeting requirements.

Mr. Villiard indicated that much of the time the leadership team had to make decisions on the fly. He also feels that direction from the Board on more issues might be good and we would value the input.

Mr. Patterson indicated that we have a lot of experience and knowledge on the Board of Health and we should tap into it more. He said he sometimes has difficulty communicating anything outside the science realm and they also have to make quick decisions. Mr. Patterson noted that we have weekly Leadership meetings and notes are taken and posted for employees to review. These notes can be made available to the Board members if they so desire. Mr. Stevenson said that he didn't think the Board needed to get involved at that level.

Ms. Barr indicated it would be helpful for her if she could get more input from the Board when it comes time to do the Community Health Assessment which determines what the agency priorities are for the next three years. It would be helpful to get some feedback from the Board members.

Ms. McGaha stated that because she is responsible for the tracking of the agency accreditation requirements that she feels she has to push for certain things to be covered by the Board, e.g. Board of Health member's community involvement. Mr. Stevenson asked what was needed from the Board. Ms. McGaha noted that if there were community meetings that they were already attending/participating in that we could use the minutes of those meetings to show that they are engaged in the community.

Ms. Keezer indicated that she feels most of her items are a little dry and boring, e.g. budget, personnel, etc. She noted that the Board members have been good about asking for certain things from her and she wants to know if what she is presenting at the Board meetings is what they want. She asked for feedback as to whether or not they are getting what they want in the finance area or is there other information they would rather see. Mr. Stevenson suggested that this could be a topic of discussion at one of their meetings. He said he would be interested in staff requirements, salary, retirement, etc. Mr. Bruckner indicated that they actually have a 30 plus page budget and that what he presents to the Board based on the Board's request is only a summary report. Mr. Bruckner indicated that if they wanted more information on budget that he would be happy to provide that in his annual budget report.

Mr. Bruckner indicated that there are certain items that we have scheduled throughout the year on the Board's agenda's to meet accreditation requirements. These items need to have Board input and documentation showing they were discussed in order to meet these requirements. Mr. Bruckner also noted that there are items that are discussed and are being worked on that may not necessarily need to come before the full Board. These items are usually discussed with the Board Chair (Mr. Stevenson) to see if they need to come before the full Board. Mr. Stevenson mentioned that there are items that have been around for some time. We may want to look back at some of those. There is a fine line balancing issues that the agency sees. He asked if there were other boards that some of the members have been on before that worked well to share them with this board. Mr. Stevenson asked what we need to do next. Ms. McGaha indicated that we may include areas in the agenda for discussion regarding specific topics. Mr. Stevenson suggested that the Leadership Team look at chronic issues that have not been fully addressed and/or report back on some of the items that we have discussed in the past that remain unresolved.

Mr. Bruckner asked the members if this was the right night to meet or if another time would be better? After a short discussion it was apparent that the current scheduled dates and times of the meeting were ok.

Ms. Barr indicated the importance of Board member participation in development of the CHA/CHIP. She also indicated that the RBA score card software could be used for the SOTCH report. It could also be used by the entire community for collective results of everyone's efforts around the CHA/CHIP. Mr. Bruckner indicated that he is hoping the new CDC/NC DPH 1422 grant could pay for the RBA software licenses for our agency. Ms.

Barr informed the Board that the WNC Health Network has already allocated the funds in their budget to do the next regional community health assessment.

Emerging Public Health Issues: Mr. Bruckner did a power point presentation for the Board on the current Ebola outbreak. He indicated that he had been tracking his time regarding Ebola and he has already put in 27 hours in connection the current outbreak. The biggest concern is rumor control and we are working with CDC, NC DPH, and others to determine how to do this affectively. The topics covered in his presentation were: An overview on Ebola; Current CDC Situational Report (number of cases worldwide and those specific to the US); Status in North Carolina (no active cases; however, there are people who have returned from the affected countries who are being monitored); and Public Health's Role in Education and Prevention – Information Sharing, Partnership, Training for Public Health Staff, Training Healthcare Partners, Isolation and Quarantine, Disease Monitoring, and Disease Management. Dr. Killian asked how available the test is for Ebola. Mr. Bruckner indicated that the state lab is the only place that can do the actual test. There are only three designated companies who are authorized to courier these lab sample to the state lab. A copy of this presentation is attached to these minutes.

Closing/Wrap-up: Mr. Stevenson thanked everyone for their participation in this evening's activity. Mr. Bruckner said that a smaller group from the Board should get together with Leadership Team members to help them process the information gathered at tonight's meeting.

Announcements: Mr. Bruckner indicated that the next meeting of the Board was scheduled for the second week of November due to the holiday next month.

Next Meeting Date: November 18, 2014

Adjourn – A motion to adjourn was made at 7:48 by Ms. Bowers and seconded by Dr. Killian. The motion passed unanimously.

Respectfully submitted,

Charlene Bellavance

Dr. Killian noted that Dr. Brenner's name was spelled incorrectly on the second page. The amended minutes were approved on November 18, 2014 with a motion by Dr. Peterson and seconded by Dr. Killian. The motion passed unanimously.