

April 25, 2018

The Board of Health of the Knox County Health District held its regular meeting, at the Health Department conference room in Mount Vernon. The following were in attendance:

<u>BOARD MEMBERS</u>	<u>STAFF</u>
Ron Moder, President Pro-Tem	Julie Miller, RN, MSN
Laura Haberman, RN	Lane Belangia, CHC CEO
Lee Rhoades	Pam Palm, Planning, Education & Promotion Director
Barry George, MD	Stacey Robinson, Fiscal Supervisor
Amanda Rogers, DVM	Lorraine Bratton, DON, Interim PHO Director
Kelly Bailey, RD	Joyce Frazee, HR Supervisor
Laura Barbuto, RN	Cyndie Miller, RD, WIC Director
	Brandy Moore
<u>ABSENT</u>	Tonja Nutter
Eric Siekkinen, RPh.	Jane Addair
Jeff Harmer	Mike Whitaker
	Carmen Barbuto
<u>GUESTS</u>	
Chuck Martin, Mount Vernon News	
Mike Addair	

1. Convention

1.1. Call to Order

Board President Pro Tem Ron Moder, called the meeting to order at 6:30 p.m.

1.2. Acceptance of Agenda

Laura Haberman made a motion to accept the agenda. Laura Barbuto seconded the motion; in the negative: none. The motion was approved.

1.3. Approval of the minutes for March 28, 2018 Board of Health meeting.

The minutes of the regular meeting held, March 28, 2018 were reviewed and accepted. Lee Rhoades made a motion to approve the minutes. Laura Haberman seconded the motion; in the negative: none. The motion was approved.

1.4. Approval of Bills

Laura Haberman made a motion the accounts payable be approved and payment authorized with the itemized list becoming by reference a part of the minutes. Amanda Rogers seconded the motion; in the negative: none. The motion was approved.

April 2018

801 - General Fund	57,629.73
803 - Home Health Fund	3,230.88
805 - Swimming Pool Fund	35.00
806 - Food Service Fund	3,039.53

807 - Private Water Fund	1,540.21
808 - WIC Grant	281.65
809 - Sewage Program Fund	1,648.98
810 - RV Park/Camp Fund	23.64
811 - Creating Healthy Communities Grant	277.69
812 - Public Hlth Emergency Preparedness Grant	463.72
813 - MCH/CFHS Grant	493.53
814 - Community Health Center Grant	53,689.44
819 - Solid Waste	192.00
830 - Drug Free Communities	1,184.37
Total	\$123,730.37

THEN & NOW

801 - General Fund	17,520.59
803 - Home Health Fund	1,000.00
814 - Community Health Center Grant	22,734.21
830 - Drug Free Communities	128.53
Total	\$41,383.33

1.5. Public Participation

Brandy Moore and Tonja Nutter introduced themselves to the Board. Brandy and Tonja joined our agency as Administrative Assistance in the Administrative & Operations division. Brandy’s role focusing on Admin/HR and Tonja is Admin/VS.

Board President Pro-Tem presented Jane Addair with a certificate of appreciation for her 17 ½ years of service to the agency. Jane retired April 27th. Julie and the Leadership Team all thanked Jane for her service to the community and helping with genealogy research requests from various people.

2. Board Reports

2.1. Board Presidents

- Tour EH and Center – Postponed until May meeting**
- Review 2017 Board Actions**

Julie and the Board discussed highlights from the 2017 board meetings. Several topics were brought to the board for discussion and approval. Among the topics reviewed:

EH Fees, New Mosquito Grant, FQHC Sliding Fee Scale, Resolution 2017-04 -Food Embargo, Temp. Suspension of Food License, Role of BOH with FQHC Board, Review of 2014-17 Agency Strategic Plan, PH Accreditation – Action Plan, New Hires for FQHC, Agency Organizational Chart, Concealed Carry Rules, 2016 Epi Report, Creating Healthy Communities Presentation, 2017 Tax Levy, Kenyon College partnership, Levy on ballot, FQHC Update, STI Increase, Carfentil exposure, and Financial terminology worksheet.
HB 263 – Dogs on dining patios was discussed, 340B Drug Program for FQHC , Feasibility Study for building, TB Exposure Control Plan, QI Project – Office Supplies was presented to Board, Emergency Preparedness Reporting quarterly, Community Health Assessment (CHA), WIC Management Evaluation results Roberts Rules of Order Review during Board training, Digital Sign CHA Update Food Service update Health Insurance Opt-out for employees policy Approved, transition of the Home Health program, and the Workforce Development plan reviewed.

The LT recommended to:

- *Continue quarterly updates to the BOH on Emergency Preparedness activities, Community Health Assessment and Community Health Improvement Plan, Quality Improvement projects and Agency Data and Statistical Reports.*
- *Engage BOH members in discussion on public health topics i.e. Carfentanil exposure of first responders, Ohio legislation that may impact local public health, and agency plan documents.*
- *LT members should come to the Board meetings prepared with all needed details for program or personnel approval requests. Latest numbers, cost, potential cost savings, public health impact, etc.*
- *Send as much information as possible on program and personal approval requests to the Board members at least 7 business days in advance.*
- *Encourage cross participation between BOH and FQHC Co-applicant Board members i.e. attend the other meeting if possible.*

Discussion:

Laura Haberman thanked Julie for sharing the 2017 Board in Review report. She commented it was nice to see what they have accomplished through-out the year.

3. Hearings/Readings/Regulations-None

4. Special Reports

4.1. KCHD Website- Mike Whitaker

Mike reviewed the new Health Department website. He highlighted different tabs, showing the Board what they can expect from the new site.

4.2. KCHD Quarterly Statistics Report and CHA Report – Carmen Barbuto

STATISTICAL REPORT

Wanted to note 1 thing – this report was done on both a Mac and PC, so the formatting of the graphs is a bit off and it should read Jan.- March, not Jan. – April. We decided to give

a quarterly report instead of monthly statistics reports to the board because a quarterly report tells more a story and gives a more accurate picture of what is happening. If you would like the monthly statistics, those are available as well. I'm not going to go over every data point or stat in this report, I just want to highlight a few.

Heart related deaths were the #1 cause of death – which is in line with the information from the new CHA as cardiovascular disease was identified as a priority area.

Influenza hospitalization for Q1 was 29 cases, over halfway to our 2017 yearly total hospitalized influenza cases. However, at this time in 2017, Knox County had seen 35 cases of hospitalized influenza cases with the majority of cases occurring in February. That pattern continued into 2018. STD rates are lower currently than 2017 Q1. By March 2017, Knox County had reported 13 Gonorrhea cases and 46 Chlamydia cases, which are significantly more than reported cases for this quarter. Public Health Outreach nurses interacted with 283 community members via various clinics and outreach visits to area social service agencies, colleges, and churches.

WIC case load for Q1 was 1,020. WIC has seen an increase in caseloads which is opposite of the state trend of a decrease in cases. WIC Nutrition Education programs are something to keep an eye on as Nutrition/Obesity were identified as priority areas for the CHIP.

Benefit Bank most needed services are housing and medical services, speaks to an access to resources and care issue, again, in line with CHA/CHIP.

Health Center has seen 1321 patient in Q1 and 541 YTD new patients. More female patients and a large majority (38%) are kids under 15. What is not surprising is the biggest payer source for patients is Medicaid as the clinic was open to provide care for those with limited access. Dental visit make up 69% of our appointment, not surprising since Knox Co is a “medically underserved” area in dental.

PEP is hard to capture in a graph so I will point out a few statistics I think are important – 81 new cessation clients, 11 school presentations, 73 community presentations, 1200 face to face interactions with community members, if you add that to public health outreach, it becomes 1,584 face to face interactions out in the community.

Discussion:

Julie noted this does not count the center.

BOH questions –

How are you capturing Comm. Disease, specifically flu? CDC, Epi report from Adam.

How do we assess births/death that happen out of county? There is a database, just need to assess how to pull the data.

Can we also include comparative data? Yes, if relevant and needed. I will investigate more and get back with answers.

CHA REPORT

We hit our “power analysis” number which means we collected enough surveys to be generalizable to Knox County and have a 95% confidence rate. The response rate was 38%, which is good for a large scale survey like this. I want to highlight some of the key issues KHPP identified: obesity/overweight 73%, 29% get no physical activity, only 18% have 5 servings of veggies, and mental health.

SDOH – 13% have ACE scores of 4 or higher, among residents that have contemplated suicide, that number jumps to 55%

Preventative medicine

Parenting – only 19% discussed safe sex, STD prevention with their kids.

Kelly aske - does it lose its statistical significance since only including parents makes the response number low – answer was no, it still remains significant and would only be reported to us because it is, talked about how data is analysis via the UT Public Health Department.

Oral Health, Cardiovascular health: 35% high BP, 34% high cholesterol, Women’s Health (paps, mammograms, low rates of prenatal care)

What’s next?

CHIP development process – 4 meetings from last Monday (4/23) till May 24th. 1st meeting went really well – selected our 3 priority areas, 1) chronic disease 2) mental health/addiction 3) access to care

We are required to align with the SHA/SHIP and these 3 broad categories leave room for our strategies to incorporate more but still remain aligned

All the priority areas will incorporate other areas identified as concerning and we are planning to approach them through the SDOH scope and selected SDOH as a cross-checking factor, also aligning us with the state.

Discussion:

*Dr. George asked what tool was used to determine obesity? BMI
Kelly Bailey asked which parents were polled? Parents with teenagers*

4.3. Leadership Team

ENVIRONMENTAL HEALTH

The Ohio Department of Health is looking at revising the recreation programs (pools, campgrounds) survey methodology. Proposed significant changes such as, increasing the passing percentage for local health departments from %70 to %80, along with defining annual inspection frequency to mean 365 days from the last inspection. Once changes to the survey are made, Ohio

Department of Health has stated that regional meetings will be held to train the local health departments on the new program survey process.

Food program sanitarians provided food safety training to Hunan Garden on April 5th, 2018. Continued random follow-up inspections will be provided for the next few months to ensure that critical violations are not present in the facility. If facility remains in compliance, then the inspection frequency will return back to the normal schedule. Failure to remain in compliance will result in the facility being brought in front of the Knox County Board of Health for potential suspension of license.

On April 4th, the environmental health sanitarians completed the Knox County Health Department core competencies assessment. This assessment will be analyzed to see what areas the staff may need more training related to specifically to public health.

PLANNING EDUCATION & PROMOTION

Pam Palm shared – April 28 is drug take back day; Mike has applied for the Tobacco grant through United Way; and a news release regarding black legged deer ticks has been in the newspaper. There is information on the protocol of what to do if you find a tick on yourself or a family member. The signs and symptoms to look for and when to seek medical attention.

Discussion:

Amanda Rogers asked if the ticks were being checked for antibodies. Not in-house but the ticks are sent to ODH.

No written report.

COMMUNITY HEALTH CENTER

Medical and Dental Health Services

Lane Belangia shared – on-site visit went well. One of the out-of-compliance items has been completed. The rest will be completed soon.

Discussion

Ron Moder asked why the Co-Applicant Board had an emergency meeting? To complete out-of-compliance documents and by having the meeting while the site review was on site the items could be approved by the review team.

First off, thank you all for the commitment to this center. Thank you for the extra meetings and special attention to the importance to our on-site visit this past month. The survey went better than we expected and when compared to other centers much better than average for a first visit. To quote the lead surveyor as stated to me “I wish I could take your Co-applicant Board to other centers to show them what a committed and caring board looks like”. Thanks doesn’t say enough!

The survey resulted in non-compliance in four areas. There are 91 measures; once we receive our report I will inform you on how many measures were out of compliance from the 91.

To summarize,

Our contracts and agreements need to be amended to speak to our ability to monitor the performance, data, efficiency, and need of any agreement/contract. I hope to bring this amended contract policy to the board for approval this meeting.

The Sliding Fee Policy noncompliance (this is one of the most non-compliant portions for all centers) has to do with our non-reporting to the board the use of all portions of the slide (100%, 125%, 150%, 175% and 200% and above) are being accessed by all who need this discount. Also, we need to discuss and evaluate the data to ensure our pricing has not presented any “barriers” to care when needing to use the center’s discount.

Granting of privileging for our outstanding staff will be brought to the board this month which will show we are complaint with all privileging of providers.

Finally the QI/QA noncompliance pertained to our meetings both monthly and quarterly not occurring for a long enough period of time as we just started this process in February. Once we can show several months of consistent reporting we will be in compliance with this component. When Dr. Reed presents the quarterly data it is important to ask questions about the center’s performance regarding meeting or exceeding benchmarks for each category reported. The board should question why we are not able to meet quality measures and question why we are able to meet certain measures in order to direct care approaches to meet population. Each time I have discussions about this subject I learn something new, please ask questions, there is probably some else in the room who is wondering the same thing.

I have informed our third party billing company (Group One) that their services will no-longer be required due to ongoing billing issues, the main one being the length of time it has taken to process claims which in turn decreased our monthly revenue.

We have signed an agreement with Centerprise Billing in order to process our Medicaid Wrap-around payments as Group One was not able to do this as anticipated. The Wrap-around payment is the enhanced rate Medicaid will reimburse FQHCs in addition to what we have already been paid through the Medicaid Managed Care Organizations (Caresource, Molina, Buckeye Health, United Health Care Community and Paramount). The analysis of wrap payments due will be completed by this board meeting and I will inform you of the total amount. NOA update, we received another NOA (notice of award) on 4-11-18 giving us additional federal funds. Copies of this will be in your packet and I will review with the group during the meeting.

Revenue for the month of March totaled \$66,430.03 and expenditures totaled \$198,058.01. As we have notified our billing company of our termination of our contract our revenue for the month of March has been reduced to half of what we have been receiving. Other increased contributing expenses to overall increased expenditures were from our increased consultant charges for OSV preparation, dental suite chair and remodeling, expense for vaccines accounted for \$ 34,000 all of which were all above average charges for the month.

Aims Grant funds (Access in mental/behavioral health and Addiction services). The one time funding for this grant totaling approximately \$90,000 has a current balance of 67,266.56 to be spent. We plan to use some of this fund for cyber security enhancement, tablets for patients to access their EMR portal, and other IT enhancements for the staff. The acceptable expenditures for this one time funding are limited; we have until October of this year to spend this portion of the grant.

Stacey and I will be completing this quarters FFR report and also requesting any carry over request of any anticipated grant funding we do not anticipate spending within their grant periods. If we do not request a carry-over we will not be able to spend any money that was left over from a prior grant period.

I am informing the board that William Jackson resigned from this board as of April 19th, 2018. Mr. Jackson has been a wonderful member of this board and great consumer resource. I wish him well. I will have a card to sign at the meeting as well for us to thank him as a board for his contributions to the center.

Melissa Valentine our Mental Health Provider will be forming a mental health advisory council consisting of, community members and administrative staff from the center. The group will meet quarterly to discuss resources, area need, program development possibilities and the center's role in collaborating with community members and groups. Jay Nixon will bring this recommendation to the board for approval.

Our medical treatment room addition and new dental suite will be completed this coming month, our dental chair assistant Anesha Brown is attended trainings that will allow her to perform basic preventative care and sealants of children's teeth which will be done in the new chair room. Our dental hygienist will also be able to utilize this new room to expand her visits each day and finally OSU is visited on 4-16-18 to see when we will be able to house students which will allow Dr. Washington to perform more involved procedures. (All growth related)

Medical numbers/visits continue to grow each month with our mid wife being busy the 4 hours one day a week she is here and our new CNP Jennie McClain already seeing patients at 70% capacity the first two Fridays she has worked.

With our OSV out of the way for at least 18 months my focus is now on growth and promotion, I am looking forward to this change of focus.

Thank you all, again, for the support and commitment to this center.

WIC

Cyndie Miller shared – the WIC baby shower is April 26. CNP Amanda Poorman will speak on post-partum care and Melissa Valentine, LPC will speak on post-partum depression.

Caseload is decreased by 6 participants from February 2018, still a 26 gain over January figures. As noted previously, in celebration of National Nutrition Month, Knox County WIC hosted Mondays in March, nutrition education and food demo, presented by Tanner Cooper-Risser (Snap-Ed Program Assistant with OSU Extension Office); and, Deb Creager attended Storytime at the local library as outreach to our preschool age children. Preparations are being made to plan for the annual WIC Baby Shower on 4/26/2018. Staff from the CHC will be presenting topics of interest to our prenatal participants, along with other community partners.

Beginning in 2018, our stats include the number of prenatal participants that have a nutritional risk code for pregnant at a young age (less than or equal to 17 years of age, March 2018 – 2). Stats also include the number of infants born early (now designated as less than or equal to 37 weeks gestation, February 2018 – **38 or 12.2% of our infants currently on the program**).

PUBLIC HEALTH OUTREACH

Lorraine Bratton shared – There is a press release going out in the Mount Vernon News regarding the Hepatitis A outbreak in the neighboring states. We have been contacted by many of the locals asking about getting the Hep A vaccine.

Bureau of Children with Medical Handicaps program or BCMH: caseload is steady – CMH and BCMH is the same program- they dropped the B due to state restructuring, but you will see in both as the transition is completed. No change in the program otherwise. All states have mandatory children's secondary health insurance and Ohio's the best in the nation. Another fact- in 2018 is the 100th anniversary for this program. It began to help victims of the polio epidemic.

New Born Home visits and the Faces program- 5 New Born home visits were made, 1 visit was to an Amish mother who said: she has a family that will be having a baby soon and will let them know about our program (this is not common and we are looking forward to providing services to this community). 5 Pack and Plays were given to expectant mothers. 2 Faces visits made, 1 self-referred by Mount Vernon Fire Department, and home health involved with the self-referred client/treads for a ramp ordered and installed for the Mount Vernon Fire Department.

Vaccine Coordinator- We will start offering the new Shingle Vaccine called "Shingrix" in April. This vaccine is a 2 dose series with the second dose given 2-6 months after the first dose, for age

50 years and older. This new vaccine has better neuro pain relief and the efficacy is much longer. We will continue to provide the Zoster vaccine.

There is a new Hepatitis B vaccine, called Heplisav-B. It is approved for use in Adults 18 years and older. It is a dose series given one month apart. We are currently providing Energix-B which is a 3 dose series. We will consider this vaccine in the near future.

We are preparing for the back to school vaccines sites for 2 of the schools in the County and will post our Special Shot Clinics for this summer; the fliers will be delivered to all the schools by May so the Parents can plan to come here.

Public Health Outreach continues with our site visits once a month to the City and County for Health visits and to provide information on our Community Center and the local Apostolic Church once a month when the food pantry is opened. We connected with approximately 150 people, they were very interested and still get comments "oh I did not know you had a dentist or a medical clinic".

EMERGENCY PREPAEREDNESS

During the last month, the Public Health Emergency Preparedness (PHEP) grant was approved for over 20k in expenditures for completed grant deliverables. In addition, received function and task capability credit for five PHEP capabilities. Throughout contract hours with the local Emergency Management Agency (EMA) last month the Fairgrounds Emergency Operation Plan (EOP) was revised and sent out to local stakeholders. Furthermore, the EOP Basic plan was revised and reviewed.

The Environmental Health division has received all their new furniture and cabinet/countertops for the Health Center has also been delivered. Over the next month, Human Resources office and Fiscal office will begin preparation for their new office furniture. In addition, the Health Center will have a new medical exam room established. Carpet and tile cleaning is set for April 14th and 15th. The new IT employee started April 9th and is obtaining some field training from InfoLink.

Lastly, the local Healthcare Coalition will be conducting a functional/full scale exercise this summer to comply with the new CMS Emergency Preparedness rule that went in effect last November. Each healthcare facility must conduct an operational community based exercise annually. This will be in partnership of the local EMA

ADMINISTRATIVE SERVICES & OPERATIONS

Fiscal Office

March 2018 Budget Summary

- Revenue: Year-to-date revenue -- \$1,667,037.04-- 30% of estimated revenue collected
- Expenditures: Year to date expenditures -- \$1,239,460.11 -- 21% of appropriations spent

- ❖ January 1, 2018 Cash Balance: \$1,638,027
- ❖ January 1, 2017 Cash Balance: \$1,129,725
- ❖ January 1, 2016 Cash Balance: \$920,529

- March 31, 2018 Cash Balance: \$2,065,604– up \$427,577 since January 1, 2018 (↑21%)
- March 31, 2017 Cash Balance: \$1,615,694
- March 31, 2016 Cash Balance: \$1,414,664

General Fund

- Revenue received year-to-date -- \$682,892 (43% of estimated revenue)
- Expenditures year-to-date -- \$426,902 (24% of estimated expenses)
- January 1, 2018 Cash Balance: \$775,935
- March 31, 2018 Cash Balance: \$1,031,925 – up \$255,990 since January 1, 2018 (↑25%)
- March 31, 2017 Cash Balance: \$832,499
- March 31, 2016 Cash Balance: \$773,646

Environmental Health Restricted Funds

- Revenue received year-to-date -- \$158,887 (50% of estimated revenue)
- Expenditures year-to-date -- \$93,077 (28% of estimated expenses)
- January 1, 2018 Cash Balance: \$65,515
- March 31, 2018 Cash Balance: \$ 131,325 – up \$65,810 since January 1, 2018 (↑50%)
- March 31, 2017 Cash Balance: \$124,193
- March 31, 2016 Cash Balance: \$127,970

Special Revenue Funds

- Revenue received year-to-date -- \$325,996 (29% of estimated revenue)
- Expenditures year-to-date -- \$152,431 (14% of estimated expenses)
- January 1, 2018 Cash Balance: \$564,223
- March 31, 2018 Cash Balance: \$737,788– up \$173,565 since January 1, 2018 (↑24%)
- March 31, 2017 Cash Balance: \$529,494
- March 31, 2016 Cash Balance: \$359,775

Grant Funds

- Revenue received year-to-date -- \$499,262 (20% of estimated revenue)
- Expenditures year-to-date -- \$567,050 (22% of estimated expenses)
- January 1, 2018 Cash Balance: \$232,354
- March 31, 2018 Cash Balance: \$164,566 – down \$67,788 since January 1, 2018 (↓41 %)
- March 31, 2017 Cash Balance: \$129,509
- March 31, 2016 Cash Balance: \$153,273

HUMAN RESOURCES

Joyce Frazee reviewed the Human Resource end of year report with the board.

The Knox County Health Department has been providing opportunities to local students/community members to job shadow health department staff over the last several years. Many colleges/universities require internships as part of the curriculum for students to receive their diploma. The Health Department also seeks to develop relationships and collaborations to promote the development of future public health workers. Employees are contacted on a weekly basis from students looking for an opportunity to fulfill this requirement. To help them achieve their goal and to promote public health as a career choice a protocol was developed which lays out methods for: applying for internships/job shadows and documenting collaboration with local students. All opportunities are for the benefit of student education, and the applicant may or may not receive monetary compensation. The job shadowing/internship protocol also helps with knowing who is in the building and what department they are job shadowing/interning in.

In the Fall of 2017 letters went out to local colleges, universities and high schools in the community informing them of the careers, internships and job shadowing opportunities available in public health to students enrolled in their programs and to inquire if their institution has a career fair or job shadowing/internship program that we could be involved in.

Job shadowing/interning is a perfect way for a student to explore a career in the multifaceted field of public health. Public health works to promote health, prevent disease and injury, and to maintain and improve a healthy environment for the protection of all residents of Knox County. As a result, department professionals perform a wide-array of duties; such as, HIV/AIDS testing and counseling, educational presentations in local schools, performing environmental health inspections, and treating patients in our community health center. Participants will have the opportunity to observe and interact with our professionals, ultimately allowing them to decide if public health is a good fit for their skills and interests.

Job shadowing or internship/mentorship opportunities can be arranged for any of the six Health Department divisions, these include:

- **Administrative Services and Operations** – Includes: The offices of the Health Commissioner, Human Resources, Vital Statistics, billing, accounts payable, purchase request, and budgets, and emergency preparedness.
- **Environmental Health** – Includes: Inspecting and issuing licenses and permits for: sewage systems, water wells, food safety program, campgrounds and RV parks, public swimming pools, and tattoo and body piercing parlors. This division is also responsible for: the solid waste program, vector control, radon testing, rabies control, and dog bite investigations.
- **Planning, Education, and Promotion** – Includes: Managing educational grants, coordinating coalitions and education presentations, assessing community and collecting data, participating at fairs and festivals, and promoting the department's services and programs.

- **Community Health Center** – Includes: The Medical , Dental , and Behavioral Health Services.
- **Public Health Outreach** – Includes: Communicable disease (CDC), BCMH (Children with Mental Handicaps program), Immunizations, and New Born Home Visiting, and Falls Prevention program.
- **WIC** - Women, Infants, and Children Program, provides supplemental foods, healthcare referrals, and nutrition education for low income pregnant women and young mothers.

In 2017 a total of 30 students/community members from various affiliates (Ashland University, Mount Vernon Nazarene University, Kenyon, Miami University, Ohio University, COTC, etc..) spent time in one of the health department divisions learning the public health foundational capabilities. Also, in 2017 the health department was represented by Joyce Frazee, HR Supervisor who conducted mock interviews for the Licensed Practical Nursing and Certified Medical Assistant programs at the Knox County Technical Center Career day and Alayna Anderson, Health Educator and Ashley Phillips, Health Educator shared the road to becoming a Health Educator to Danville Local Schools elementary and high school students.

The Knox County Health Department will continue to promote public health as a career choice and welcome students into our agency.

This month you will be asked to approve the hire of Kenyon College student Kevin Towle, seasonal worker for the agency and a sanitarian for the open position in EH.

Lorraine and I will be beginning the 1st round of interviews for the Public Health Nurse position in the Public Health Outreach division.

The Registered Sanitarians conducted their core competency assessment. It took approximately an hour and forty-five minutes as they discussed a few words / phrases throughout the assessment. It was noted that some employees thought the assessment was a little redundant. Carmen Barbuto has since interpreted the data and I will be meeting with Carmen to identify specific results and training needs. I will also review the assessment and determine which core competencies will be reflected in a sanitarians job description.

4.4. Health Commissioner

HEALTH COMMISSIONER

- ✓ The draft of the Community Health Assessment (CHA) is complete and there is lots of good information in the document. Carmen Barbuto will be attending the Board meeting to review our agency statistics and a summary or highlights of the CHA.
- ✓ We will need to review the actions of the Board of Health in 2017. This is a requirement of accreditation and should give us an opportunity to discuss what we can do better to improve communication, efficiency and effectiveness of Board meetings. As you know

the Leadership Team has been reviewing the Board's actions & several themes have been identified and the team is working on strategies to improve, enhance or add to the Board meetings.

- ✓ The Board of Health manual has been revised and will be brought to you at the meeting. Eric, Joyce, Stacey and I have reviewed and made changes we felt appropriate.
- ✓ Lorraine will be bringing to the Board in April 2018 a proposal to begin a travel vaccine program to the agency.
- ✓ I have taken the opportunity to fill our seasonal worker position for summer 2018 (May-August). Kevin Towle is a junior Political Science/Psychology major @ Kenyon and has a real interest in PH policy. I will have him work with the PEP division, specifically working with Carmen and the rest of the team. Kevin will be paid minimum wage and work 40hrs per week.
- ✓ I will also be asking for approval to lease 2 additional vehicles through Enterprise, the same company with whom we lease our current truck. One vehicle is a Ford Fusion and the other a Ford Escape 4X4. The lease of each is close to \$400 per month which includes maintenance but not tires (this is the same lease agreement as with the truck. The cost of one vehicle will be from public health funds for local travel and travel to Columbus, the cost of the other vehicle come from the Center budget and be used for Center travel needs. When assessing mileage costs it appears that we will have money just based on travel locally and to Columbus. In 2017 minus the home health staff, I had the most mileage in the agency and that was for travel all over Ohio for public health presentations, meetings and training.
- ✓ I have done nothing significant in regards to further facility expansion or major renovation except to obtain contact information for the bond company to discuss what our options are as we get closer to the end of our bond payments, and to look at how other health departments have dealt with new building or facility renovation.
- ✓ Not too much legislatively that is new to us. By the time of the Board meeting it appears that the following bills will pass the senate and be enacted:
 - HB 111 Advanced Practice Nurses – authority to commit to mental health services
 - HB 193 No discrimination against employees who do not receive the flu vaccine
 - HB 263 Dogs on the patio with best practices
 - HB484 Allow health districts to have their own credit cards and authorizes name changes for health districts
- ✓ I continue to look for grants and other sources of revenue for our agency. I have asked that all division directors look at the opportunities as well. We need to use the fee we have for educational programs when we are asked to speak to community groups that with which we do not have a formal agreement.

5. Old Business- None

6. New Business

6.1. Finance

6.1.1. Income and Expense

Lee Rhoades made a motion to approve the income and expense report. Laura Haberman seconded the motion; in the negative: none. The motion was approved.

KNOX COUNTY GENERAL HEALTH DISTRICT RECEIPT & EXPENDITURE SUMMARY REPORT MARCH 31, 2018							
FUND NAME	JAN. 1, 2018 BALANCE	MARCH REVENUE	YEAR-TO-DATE REVENUE	MARCH EXPEND.	YEAR-TO-DATE EXPEND.	MARCH 31, 2018 BALANCE	
District Health Fund							
801 - District Health Fund*	775,934.75	104,200.51	662,891.67	141,129.71	426,901.79	1,031,924.63	
Environmental Health Restricted Funds							
805 - Swimming Pool Fund	6,561.73	0.00	19.55	211.88	1,048.03	5,533.25	
806 - Food Service Fund	9,002.11	52,867.50	126,719.66	23,684.25	48,666.45	87,055.32	
807 - Private Water Fund	10,394.30	4,435.48	10,550.75	7,546.45	19,855.14	1,289.91	
809 - Sewage Program Fund	35,981.20	6,967.00	21,586.40	7,668.91	22,913.83	34,653.77	
810 - RV Park/Camp Fund	3,575.72	0.00	10.82	148.40	793.38	2,793.16	
Subtotal	65,515.06	64,289.99	158,987.18	39,460.89	93,076.83	131,325.41	
Special Revenue Funds							
803 - Home Health Fund	553,213.00	33,870.62	315,381.89	49,364.36	141,166.19	727,248.70	
804 - Medical Clinic Fund	979.62	0.00	0.00	0.00	979.62	0.00	
819 - Solid Waste Fund	10,010.70	0.00	10,614.52	3,989.77	10,085.66	10,539.56	
Subtotal	564,223.32	33,870.62	325,996.41	53,354.06	152,431.47	737,788.26	
Grant Funds							
808 - WIC Grant Fund FY Oct. 1 - Sept. 31	27,440.38	19,978.13	61,109.61	28,752.69	70,759.59	17,790.40	
811 - Creating Healthy Com Grant FY JAN. 1 - DEC. 31	18,562.47	5,653.78	24,530.27	8,347.65	27,654.29	13,458.45	
812 - PHEP Grant Fund FY July 1 - June 30	23,620.99	0.00	22,786.15	9,106.80	19,859.24	26,657.90	
813 - MCH/MQ2 Grant Fund FY Oct. 1 - Sept. 30	17,467.42	3,875.29	14,780.32	5,341.26	8,511.82	23,735.92	
814 - Community Health Center Grant FY April 1 - Mar 31	141,042.53	66,430.03	351,405.67	198,058.01	412,174.78	80,273.42	
830 - Drug Free Communities FY Oct. 1 - Sept. 30	6,000.00	9,830.05	24,639.76	12,623.87	27,990.30	2,649.46	
Subtotal	232,353.79	105,767.28	499,261.79	282,230.28	567,050.02	164,565.55	
TOTAL ALL FUNDS	1,838,026.92	308,109.39	1,667,037.04	496,174.96	1,239,460.11	2,065,603.65	

*Includes Health Levy, Political Subsidies, Vital Statistics, BCMH Safe Communities Grant, Radon Grant, CCI Grant, United Way Grant and Mosquito Control Program.

6.1.2. Transfers/Cash Advances – Resolution #2018-04

Laura Haberman made a motion to approve Resolution #2018-04. Barry George seconded the motion. On roll call the following voted in the affirmative Ron Moder, Laura Haberman, Lee Rhoades, Amanda Rogers; in the negative; none. The motion was approved.

RESOLUTION #2018-04

Drug Free Communities Grant

1. Transfer \$8,000.00 from 830.1510.50302 to 830.1510.50401 (Contract Services to Other Expense)

6.1.3. Approval to increase Health Commissioner Purchase authority from \$8,000.00 to \$10,000.00.

Lee Rhoades made a motion to approve the purchase authority of the Health Commissioner from \$8,000 to \$10,000. Amanda Rogers seconded the motion; in the negative: none. The motion was approved.

6.2. Personnel

6.2.1. Approval to hire Kevin Towle, Seasonal Worker, effective May 21, 2018.

Amanda Rogers made a motion to hire Kevin Towle, Seasonal Worker, effective May 21, 2018. Laura Barbuto seconded the motion; in the negative: none. The motion was approved.

6.2.2. Approval to hire Landon Magers, Sanitarian-In-Training, effective May 7, 2018.

Laura Haberman made a motion to hire Landon Magers, Sanitarian-In-Training, effective May 7, 2018. Amanda Rogers seconded the motion; in the negative: none. The motion was approved.

6.3. Contracts

6.3.1. Approval of program agreement with Youth to Youth to provide Teen Advisory Council (TAC) students with leadership and presentation skills, at a cost of \$2,500.00 plus mileage, (\$1,500 paid with Drug Free Community grant funds and \$1000.00 paid with Push 4 Prevention grant funds).

Laura Haberman made a motion to approve the agreement with Youth to Youth, to provide Teen Advisory Council (TAC) students with leadership and presentation skills, at a cost of \$2,500.00 plus mileage, (\$1,500 paid with Drug Free Community grant funds and \$1000.00 paid with Push 4 Prevention grant funds). Lee Rhoades seconded the motion; in the negative: none. The motion was approved.

6.3.2. Approval of contract with Knox County Head Start for the coordination and planning of the Triple P Implementation Team, Group Teen Triple P program, at a cost of \$4,141.09, paid with the Drug Free Communities (DFC) grant funds, effective April 26, 2018 to September 28, 2018

Laura Barbuto made a motion to approve the contract with Knox County Head Start for the coordination and planning of the Triple P Implementation Team, Group Teen Triple P program, at a cost of \$4,141.09, paid with the Drug Free Communities (DFC) grant funds, effective April 26, 2018 to September 28, 2018. Amanda Rogers seconded the motion; in the negative: none. The motion was approved.

6.3.3. Approval of MOA and personal service contract with Nick Gotschall, LPCC, to provide quality assurance and peer review of patients receiving Mental and Behavioral counseling services at the Health Center, effective June 1, 2018 to May 31, 2019.

Laura Haberman made a motion to approve the MOA and personal service contract with Nick Gotschall, LPCC, to provide quality assurance and peer review of patients receiving Mental and Behavioral counseling services at the Health Center, effective June 1, 2018 to May 31, 2019. Amanda Rogers seconded the motion; in the negative: none. The motion was approved.

6.3.4. Approval of contract agreement with Enterprise Fleet for five (5) year lease of two vehicles; one paid for by Community Health Center grant funds and one paid with general funds.

Amanda Rogers made a motion to approve the contract with Enterprise Fleet for five(5) year lease of two vehicles; one paid for by Community Health Center grant funds and one paid with general funds. Barry George seconded the motion; in the negative: none. The motion was approved.

6.4. Board Approvals

6.4.1. Approval of Board of Health Policy & Procedure manual

Laura Haberman made a motion to approve the Board of Health Policy & Procedure manual. Laura Barbuto seconded the motion; in the negative; none. The motion was approved.

6.4.2. Approval of Travel Vaccine proposal.

Amanda Rogers made a motion to approve the Travel Vaccine proposal. Lee Rhoades seconded the motion; in the negative: none. The motion was approved.

6.4.3. Approval to purchase a .clear digital sensor system from Benco for the Community Health Center dental clinic, at a cost of \$24,084.62, paid with CHC grant funds

Amanda Rogers made a motion to approve the purchase of a clear digital sensor system from Benco for the Community Health Center dental clinic, at a cost of \$24,084.62, paid with CHC grant funds. Laura Haberman seconded the motion; in the negative: none. The motion was approved.

6.4.4. Approval of clinical education agreement with Ohio University, effective May 1, 2018.

Barry George made a motion to approve the clinical education agreement with Ohio University, effective May 21, 2018. Laura Barbuto seconded the motion; in the negative: none. The motion was approved.

6.5. Board Re-Organization

6.5.1. Election of Officers

Laura Haberman made a motion to re-elect Eric Siekkinen as board president FY2018-2019. Amanda Rogers seconded the motion. Lee Rhoades made a motion to close the nominations. Laura Haberman seconded the motion; in the negative: none. The motion was approved.

Lee Rhoades made a motion to elect Ron Moder as Board of Health President Pro-Tem FY2018-2019. Laura Haberman seconded the motion. Laura Haberman made a motion to close the nominations. Lee Rhoades seconded the motion; in the negative: none. The motion was approved.

6.5.2. Approval of Board of Health meeting schedule- Day and Time. (Jan- November & December FY2018)

Laura Haberman made a motion to approve the Board of Health meeting schedule to be held every fourth Wednesday of each month at 6:30 PM. Laura Barbuto seconded the motion; in the negative: none. The motion was approved.

6.5.3. Approval of Board of Health member's compensation per meeting and travel reimbursement.

Laura Haberman made a motion to approve the Board of Health member's compensation per meeting of \$20.00 and no compensation for mileage. Laura Barbuto seconded the motion; in the negative: none. The motion was approved.

6.5.4. Approval of Board Committees, Personnel, Finance, & Environmental Health.

Laura Haberman made a motion to approve the Board Committees, Personnel Finance, and Environmental Health. Amanda Rogers seconded the motion; in the negative: none. The motion was approved.

The committees members are as follows:

Environmental Health Committee

Jeff Harmer, Amanda Rogers, DVM, Kelly Bailey, RD

Finance Committee

Barry George, MD, Laura Haberman, RN, Ron Moder

Personnel Committee

Eric Siekkinen, RPh, Lee Rhoades, Lori Barbuto, RN

6.6. Board Information (Non-action items)

Health Commissioner has signed the following:

6.6.1. Contract with Measurement Resources Company for collaborating with KSAAT to administer and analyze the coalition survey data. Paid with DFC grant funds.

6.6.2. 2018 Manufactured Home Park Inspection Agreement with the Ohio Department of

Commerce, effective April 1, 2018 through December 31, 2018.

6.6.3. Amended contract with the Knox County Commissioners maintenance contract to increase the maximum fee to \$40,000/year.

Board members received the following handouts:

Home Health Statistical Report for March

First quarter health department program statistical report

7. Adjournment

Being no further business, Lee Rhoades made a motion to adjourn the meeting. Barry George seconded the motion; in the negative: none. The motion was approved.

The Board meeting adjourned at 8:20 p.m.



Ron Moder,
Board President Pro-Tem



Julie Miller, RN, MSN
Health Commissioner

