

Columbus County Board of Health

Minutes

☒ Regular Meeting ☐ Special Meeting

July 22, 2015 6:00 P.M.

Columbus County Health Department, 304 Jefferson Street, Whiteville NC

Members Present	Dr. Randy Kirby, Chairman Dr. Christy Perdue Franklin Boone Dr. Darryl Diefes Dr. George Floyd Drew Cox Dr. Nicole Martin Patty Hobbs
Members Absent	Jeremy Hooks, Peggy Blackmon, R.N., Charles McDowell
Staff Members Present	Kimberly L. Smith, Charlene Bush, Kristie Priest, Sarah Gray, Sandra Harrelson, Martha Faulk
Guest Speaker	David Ulrich, Director, The Anchorage Christian Camp

Quorum was present.

I. Call to Order

Dr. Randy Kirby, Chairman called the meeting to order at 6:00 p.m.

II. Invocation

Invocation was given by Drew Cox.

III. Approval of Agenda

Motion to accept the agenda by Dr. Nicole Martin seconded by George Floyd and carried by the board.

IV. Public Comment

There were no comments from the public.

V. Approval of Minutes

April 29, 2015 minutes **were amended to reflect "Fees" on page 907, section "VIII. Environmental Health"**. Motion to accept amended minutes by Dr. Darryl Diefes seconded by Dr. Nicole Martin and carried by the board.

VI. Environmental Health

A. The Anchorage Christian Camp

David Ulrich stated the following:

As a representative of The Anchorage Camp and on behalf of the Ambassador Camp, thank you for the opportunity to address this panel with concerns about the process currently utilized to respond to the rare issues of water quality in regards to fecal coliform bacteria testing at Lake Waccamaw. As summer youth camping organizations, we are dependent upon access to and utilization of the public waters of Lake Waccamaw for the well-being and success of our respective organizations at every level. There is nothing more important to our organizations than to know that the waters of the lake are both safe and a desirable place for families to utilize. It is for this reason that we have, for many years, been happy to provide the Columbus County Health Department access to our respective pier facilities as water quality testing sites for the routine (monthly) testing that has been their mandate for some time now.

A quick review of the water quality samples taken over the years in the collection spots around the lake—the dam, boat launch, public beach by Dale's Seafood, The Anchorage Camp, Ambassador Camp, and the state park—unconditionally affirm that the lake is a safe body of water in reference to the presence of fecal coliform bacteria. Taken individually or collectively the MPN/100ml count is consistently very low even reference to other public bodies of water. Following times of excessive rain and its accompanying run-off, or following the occasional raw sewage spill from the Town of Lake Waccamaw that makes its way to the lake waters, the lake continued to prove its innate ability to accommodate these irregularities without exceeding dangerous levels. In other words Lake Waccamaw is a very clean, safe place to utilize for fishing, swimming and other recreational water endeavors—those very things that make summer camping at places such as The Anchorage and Ambassador Camp desirable.

On rare occasions the routine testing of the lakes waters reveal anomalies in certain areas. The standard that has been determined as the level of concern for natural waters is an MPN/100ml of 63. When this standard is passed at the testing site, the site is publically posted as an area of

special concern for recreational use of the waters until further testing reveals that the site is healthy. I purposefully have used the word "anomaly" when describing these rare occurrences. An anomaly is an aberration to the norm. In this context it reveals that at a very specific place and at a very specific time the norm for the lake is breached, that the MPN for coliform bacteria has exceeded the set limits. There are any number of reasons why such an anomaly can occur, the most probable being the coincidental testing of a "hot spot" that contains wild animal waste which the lake has not had the opportunity to naturally dissipate to acceptable levels.

While these anomalies can occur at any place on the lake at any given time, they have practically no effect on lake usage for the average recreational lake participant. The standard response protocol—publically posting the site as an area of concern with a recommendation on non-use until follow-up testing confirms or negates the findings—has little if any effect on the recreational use of the lake. From the records I have been able to view, the follow-up testing has always confirmed that which we all already know, that the lake is a healthy, safe environment for recreational use.

However, over the past 4 summers these anomalies were twice registered at our site right at the heart of the summer camping season. While the follow-up tests affirmed what we knew from years of testing, that the water was very safe for recreational use, the protocols of posting a public advisory were observed resulting in great hardship for the good operations of our program and for the long-term credibility of our operations. Re-testing was done in a timely manner, but the resulting closure and negative perception to our clientele involved the majority of 2 weeks of summer camping. Our summer camping program involves 10 weeks; the Ambassador Camp only 6 weeks.

The protocols were put into place to protect and inform the public of potential hazards. I appreciate the responsible response to potential health threats. To state that the observed protocols have done little to truthfully inform or protect the public concerning any real health hazard in the waters of Lake Waccamaw but tremendously hindered the good operations of ministries such as ours would be very

accurate.

It is my request that, with neither of us shirking our responsibility to protect the public and communicate accurately the nature of the lake, that the established protocols be reviewed and revised so that they also reflect what has been accurately observed for years—that anomalies to the norm do occur, that these anomalies are part of the normal ebb and flow of natural bodies of water, and that there is little value in raising public alarm over that which does not deserve alarm. In so doing the credibility of the Department of Public Health in protecting and informing the public will be preserved, the good operations of camps such as we are will be less hindered, and the public will remain equally protected. Thank you for your hearing in this matter.

Kristie Priest stated the following:

B. Lake Waccamaw Water Samples

(Benchmark 14, Activity 14.4)

The lake sampling started in 1995 after a group of students from UNCW tested Lake Waccamaw. Once the study was concluded then the Board of Health voted for Environmental Health to continue testing Lake Waccamaw. The policy was to have 6 sample sites (public access areas) of 100ml tested. According to the policy the lake is posted when levels reach 61 colonies per 100ml Enterococci.

Scientifically based sampling should include a sample blank and various samples from each sample site. We are now posting a sign with language that states the advisory effects of waters within 200ft. of this sign. We have been challenged on this sign that if people choose to swim at 200ft. or 250 ft. from the sign, is that safe? Environmental Health has nothing, not a law, rule or statute that supports any of the wordings on this sign.

The lake is tested by DWQ, Riverkeepers Association, and the Columbus County Health Department. We gave \$1500 to the Riverkeepers Association this year to help support their program. So, taxpayers are paying 3 times for the lake to be sampled. Our program costs a minimum of \$690 per season, if every site is retested, that rate goes to \$1380. I am asking that the board evaluate the actual validity of this program and weigh the cost factors and most of all weigh the factors that if Environmental Health was pushed legally to defend the posting of the lake or to defend our knowledge as recreational water specialists, we would not be able to defend these actions as

	<p>none of the staff are authorized as recreational water specialist by the State and there is no State personnel to support us in legal action. A legal action would affect our RS license and would affect the county.</p> <p>After a discussion between Board members, a motion was made to cease monthly testing on Lake Waccamaw and to test only on an as needed basis by Dr. Darryl Diefes seconded by Patty Hobbs and carried by the Board.</p>
VII. Quality Assurance	<p>Martha Faulk gave a brief overview of the following:</p> <p>A. Quarterly Record Audit <i>(Benchmark 27, Activity 27.3, Benchmark 22, Activity 22.3)</i> Chart audits are done on a quarterly basis. A total of 42 client records were selected for review in the month of April. This included 3 Maternal, 3 Family Planning, 6 STD/HIV, 3 Pediatric Well Child, 3 Pediatric Primary Care “sick” visit, 3 BCCCP, 0 Colposcopy, 3 Adult Health, 5 CC4C, 6 OBC Case Manager, 3 IUD Clinic, and 3 Dental records. The next audit is scheduled for July 2015. Most of the charts were compliant. Some of the errors found were in Family Planning and OBCM. Corrective Action Plans were completed on out-of-compliance issues. A motion to accept was made by Patty Hobbs seconded by Dr. Darryl Diefes and carried by the board.</p> <p>B. Patient Satisfaction Survey Results <i>(Benchmark 9, Activity 9.5)</i> January-May 2015: out of 145 surveys, 86% were treated well, 78% were seen within 15-20 minutes, and 80% understood the health care instructions that were given. Overall, the surveys were very good. No major or recurrent issues identified. A motion to accept was made by Dr. Nicole Martin seconded by Dr. Christy Perdue and carried by the board.</p>
VIII. Health Education/ Promotions	<p>Sarah Gray gave a brief overview of the following:</p> <p>A. Community Action Plan <i>(Benchmark 22, Activity 22.1)</i> Some of the new outcomes expected during 2015-2016;</p> <ul style="list-style-type: none"> • Increase the number of organizations that offer Diabetes Prevention Programs • Increase the number of 100% smoke-free or tobacco-free government building/grounds • Develop new partnerships <p>A motion to accept was made by Dr. Darryl Diefes seconded by Patty Hobbs and carried by the board.</p>

	<p>B. Grant Updates—Minority Health; Substance Abuse (NCCI) Yr 2: Project Lazarus (Benchmark 39, Activity 39.2)</p> <ul style="list-style-type: none"> • Minority Health-did not get renewed • Substance Abuse-going into the second year. • Project Lazarus-3 drop boxes that will be placed in Tabor City, Chadbourn and Sheriff's office. They must be placed where law enforcement is located. <p>C. e-cigarettes (Benchmark 38, Activity 38.1) A handout for the proposed ordinance was given to be reviewed by the next board meeting</p>
IX. Financial Update	<p>Charlene Bush, Finance Director reviewed the following:</p> <p>A. Financial Statement (Benchmark 33, Activity 33.6, Benchmark 39, Activity 39.2) The revenue for March was \$486,414.75 with the expenses of \$568,505.66. The revenue for April was \$502,718.70 with expenses of \$521,866.21. A motion to accept was made by Dr. Nicole Martin seconded by Patty Hobbs and carried by the board.</p> <p>B. 2015-2016 Budget Update (Benchmark 33, Activity 33.2, Benchmark 39, Activity 39.2, Benchmark 33, Activity 33.1) The FY 15/16 budget passed—Environmental Health will be getting 2 new vehicles and renovations to the front office restroom to make it handicap accessible. The final figures for FY 13/14 cost report for Home Health show a loss of \$390,043.09.</p> <p>C. 2015-2016 Vaccination Fee Changes (Benchmark 39, Activity 39.3, Benchmark 33, Activity 33.5)</p> <ul style="list-style-type: none"> • Varicella increased from \$117.00 to \$122.00 • MMR increased from \$77.00 to \$80.00 • Zostavax increased from \$195.00 to \$210.00 • Prevnar 13 increased from \$168.00 to \$173.00
X. Chairman's Forum	<p>Dr. Randy Kirby stated he has been approached by a few people in reference to Columbus County being the unhealthiest county in North Carolina.</p>

XI. Director's Forum

Kim Smith, Health Director gave the following updates:

A. WIC New Employee-Julian Williams

(benchmark 37, Activity 37.6)

Julian Williams is our new nutritionist in the WIC Department replacing Chou Vue. Julian is from Columbus County and hopes to become a registered dietician.

B. New/Revised Policies

(benchmark 37, Activity 37.2)

No comments from the board.

C. Policy-Comments at Public Hearing

Kim gave a brief overview of afore mentioned policy.

Motion to accept by George Floyd seconded by Dr. Nicole Martin and carried by the board.

D. Individual Home Burial Rules-Introduction

(Benchmark 34, Activity 34.4, Benchmark 34, Activity 34.5)

Kim reviewed G.S. 130A-39; "Powers and Duties of a local Board of Health", in that the Board of Health has the responsibility to protect and promote the public health. The board shall have the authority to adopt rules necessary for that purpose.

Kim stated at this time we only have a letter from the State of North Carolina, Division of NC Cemetery Commission dated March 5, 2003 that basically states our local health department needs to have regulations regarding being so many feet from a main water source and it is up to the local level to determine whether there are any other health concerns or any zoning restrictions. At the bottom of this letter someone has typed:

Columbus County regulations: 100 feet from private water supply; 300 feet from public water supply. If within a city or town, be sure to check with the town manager. Kim has checked old Board of Health minutes but found nothing about home burial sites. A handout of the proposed rules was given to the board for review and was tabled until the next meeting.

E. Dental Update

(Benchmark 19, activity 19.1)

The dental staff hand delivered flyers to Whiteville City School Administration and the Columbus County School Administration offices in an effort to get more patients. Ethan Simpson, a volunteer, distributed 98 posters advertising our dental clinic, though out the county. Kim Smith went before the school boards asking them to allow

	<p>Columbus County Health Department Toothmobile to go to the schools. The County Schools will allow the Toothmobile to go to the schools in the eastern part of the county for a total of 8 county schools. Whiteville City Schools will allow the Toothmobile to see students at Primary and Edgewood Schools. Friendly Dental out of Huntersville, N.C., will go to the schools not covered by the Health Department.</p> <p>Kim Smith asked the board for permission for the Toothmobile to go into Bladen County. Motion to accept was made by Dr. Darryl Diefes seconded by Patty Hobbs and carried by the board.</p> <p>F. Accreditation Update Kim Smith and Martha Faulk met with the Accreditation Board on May 15, 2015 to accept our plaque. Out of 85 accredited health departments we, along with 3 others, only had 1 infraction. Our next re-accreditation will be due May 15, 2019.</p> <p>G. Announcements</p> <ul style="list-style-type: none"> • Randall Williams is the new State Health Director • Hope Tyson is our new FNP • Home Health has asked for new computers at a cost of approximately \$21,000, which was not included in the 2015/2016 budget.
Comments-Board of Health	Dr. Darryl Diefes stated that the NC Board of Health is coming up with a standardize Health Director Evaluation form.

Next Meeting Date

August 26, 2015 6:00 pm

Adjournment: Dr. Randy Kirby adjourned the meeting.

Respectfully submitted: Kimberly R Smith
Signature

Secretary 08/21/15
Date